Date Received 20 Mar 72

ICAR(S) Application No. 3102

T. C. No. 001-281-05

Map Date 10-20-71

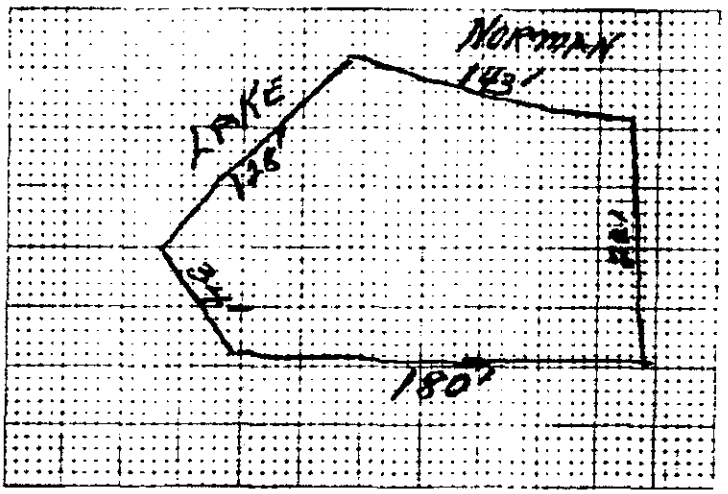
MECKLENBURG COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

Application for an
Installation, Construction, Alteration, and/or Repair Permit
(Individual Septic Tank System with Subsurface, Soil Absorption, Effluent Discharge)

The owner of that property described hereinafter hereby applies to the Mecklenburg County Health Department for a permit to

1) ✓ Install or Construct 2) _____ Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No. of Bedrooms 2

5) Business Use Max. No. Employees

6) Washing Machine ✓ Yes ___ No

7) Garbage Disposal ___ Yes ✓ No

8) Dishwasher ___ Yes ✓ No

9) Water Supply
A) Individual Well ✓
B) Governmental System
C) Community System
1 Well source
2 Governmental source

10) Sewage System
House located within 200 feet of public sewer ___ Yes ✓ No
House located within 200 feet of community sewer ___ Yes ___ No

11) FHA Case No. NA

12) VA Case No. NA

13) NAME OF OWNER LAYTON (LAST) FREEMAN (FIRST) EUGENE (MIDDLE)

14) ADDRESS OF OWNER 1076 Tom Hunter Road - Charlotte, NC 28213

15) PHONE NO Home 596-4211 Office 372-0903

16) LOCATION OF SYSTEM OFF Hwy 72 - Lake Norman (STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. 199 Block No. Section 6

Map Book No. _____ Page No. _____

18) DEED REFERENCE — DEED BOOK _____ AT PAGE _____

19) HAS A PERCOLATION TEST BEEN RUN? YES _____ NO DATE RUN 3-16-72 2:00

20) PTR NUMBER (See Instructions) 312

The undersigned person hereby agrees that he has read the foregoing application and that the contents of same are true. It is understood that any permit applied for herein shall be void and of no effect if any of the above facts are not true.

3-20-72
DATE OF APPLICATION

Freeman Eugene Layton
OWNER

FORM NO. E 4 ...

HEALTH DEPARTMENT'S COPY