B

SEE INSTRUCTIONS ON BACK

Date Received 5-15-73

ICAR(S) Application No 6285

T C No

Map Date

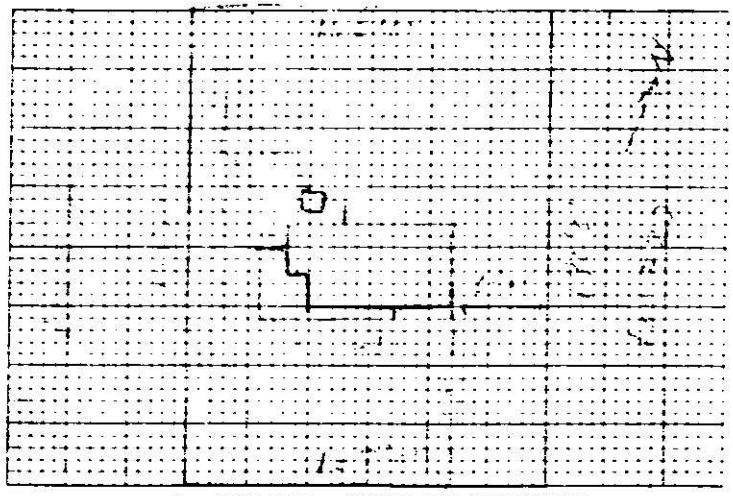
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) X 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

12) VA Case No

13) NAME OF OWNER Cathey (LAST) Harold (FIRST) Alexander (MIDDLE)

14) ADDRESS OF OWNER 150 Mallard Drive

15) PHONE NO. Home 399-2770 Office 525-1511

16) LOCATION OF SYSTEM 150 Mallard Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Idlewood Hills Lot No. 19 Block No H, Sec. 3

Map Book No 7 Page No. 267 & 269

18) DEED REFERENCE — DEED BOOK 1791 AT PAGE 581

19) HAS A PERCOLATION TEST BEEN RUN? ____ YES ✓ NO DATE RUN

20) PTR NUMBER (See Instructions)

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.

5/14/73
DATE OF APPLICATION

Harold A. Cathey
OWNER

FORM NO E-4-9-1-72

HEALTH DEPARTMENT'S COPY