SEE INSTRUCTIONS ON BACK

Date Received 2-25-74 ICAR(S) Application No 7513

T C No

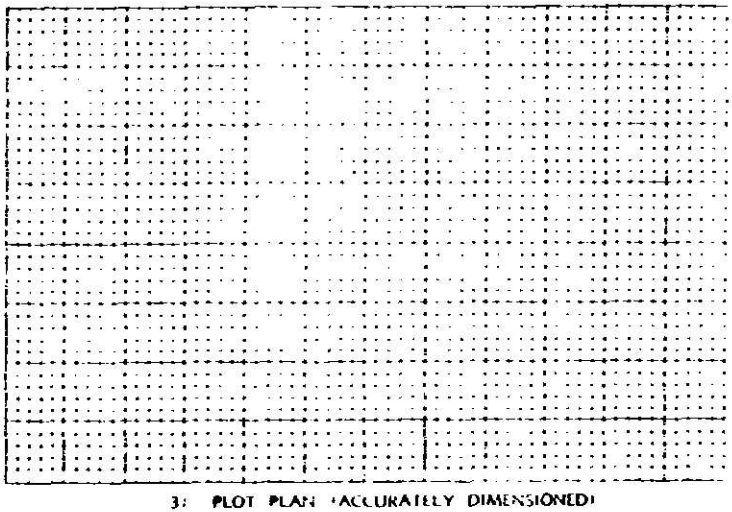
Map Date

# 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 the 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 3

(5) Electric Range Yes ✓ No
Emergency

(6) Washing Machine Yes ✓ No

(7) Garbage Disposal Yes No

(8) Dishwasher Yes ✓ No

(9) Water supply
A. Individual Well
B. Community ✓
C. Other (Specify)
Well
Spring

(10) Type of Home
No. of Baths 1
Community Well Yes No

(11) FHA Case No.

(12) VA Case No.

(13) NAME OF OWNER Faulk (LAST) Harold (FIRST) (MIDDLE)

(14) ADDRESS OF OWNER 7803 Wallace Lane

(15) PHONE NO Home 537-5620 Office

(16) LOCATION OF SYSTEM Same 7803 Wallace Lane (STREET OR COUNTY ROAD)

(17) SUBDIVISION Lot No Block No

Map Book No Page No.

(18) DEED REFERENCE — DEED BOOK AT PAGE

(19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES NO DATE RUN 1969

(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.

2/21/74
DATE OF APPLICATION

Harold Faulk
OWNER

(Form No. E-4-9-1-72)

HEALTH DEPARTMENT'S COPY