SEE INSTRUCTIONS ON BACK

Date Received 10/3/79 This lot is OK - mike Johnson

ICAR (S) Application No 16,199

T C No. 215-051-14

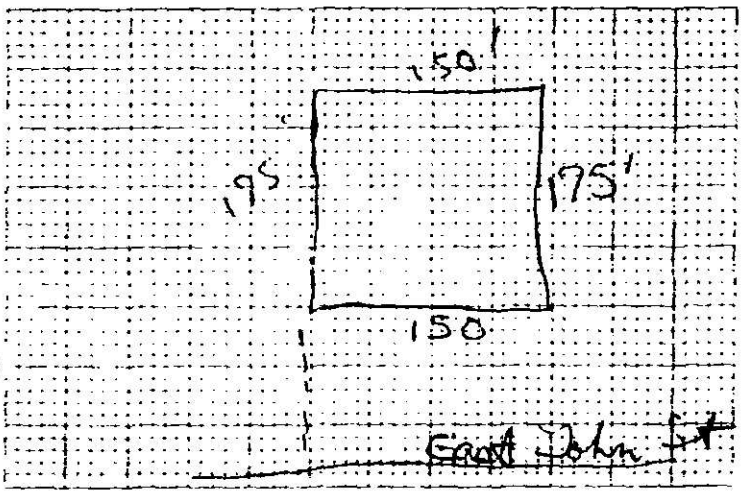
Map Date 9/1978

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

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 Department of Environmental Health for a permit to *USE EXISTING SYSTEM & WASHER LINE*MOVING MOBILE HM. OFF & PUTTING HOUSE ON LOT

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)

Mobile Home ___Yes___No
Residence X Yes ___No
4) No of Bedrooms 2
5) Business Use -- Max No Employees N/A
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 common sewer ___Yes ✓No
11) FHA Case No ___
12) VA Case No ___

13) NAME OF OWNER Sloan, (LAST) Howard (FIRST) (MIDDLE)

14) ADDRESS OF OWNER 2349 East John Street, Matthews, NC 28105

15) PHONE NO Home 847-4392 Office 847-5625

16) LOCATION OF SYSTEM 2349 East John Street, Matthews (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 SOIL INVESTIGATION BEEN RUN? YES NO DATE RUN ___

20) PTR NUMBER (See Instructions) no file - system 30 yr old

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.

10/3/79
DATE OF APPLICATION

Howard C. Sloan
OWNER

EHD-S-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 3580

Date Issued Oct. 4, 1979

LA No. 16199

T C No. 215-051-14

Map Date 9/9/78

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

IMPROVEMENT PERMIT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Sloan, (LAST) Howard (FIRST) _____ (MIDDLE)

ADDRESS OF OWNER 2349 East John Street, Matthews ZIP _____

LOCATION OF LOT 2349 East John St. (STREET OR COUNTY ROAD)

SUBDIVISION Matthews LOT NO _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot, and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number 16199. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run
2. That an "Installation, Construction, Alteration, and/or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot if at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and/or Repair Permit" is not correct or is untrue or that the septic-tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and/or Repair Permit

****MAY USE EXISTING SYSTEM******

Environmentalist

John R Atkinson

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy

APPLICATION FOR AN IMPROVEMENT PERMIT

1200 BLYTHE BOULEVARD
CHARLOTTE, NC 28203
PHONE (704) 376-4603

(OFFICE USE ONLY)

FILE: 16199

TC: 215-057-14 L

JOB LOCATION

① ADDRESS: 2349 (STREET NO) E John (STREET) St. ② FILE: 215-057-14

③ CITY: Matthews ④ TAX PARCEL NO.:

⑤ SUBDIVISION: ⑥ LOT: ⑦ BLOCK:

OWNER

⑧ NAME: Howard (FIRST) Levan (MIDDLE) Sloan (LAST)

⑨ MAILING ADDRESS: [redacted] P.O. Box 22

⑩ CITY: Matthews ⑪ STATE: N.C ⑫ ZIP: 28012

⑬ PHONE: (WORK) 825-2366 ⑭ (HOME) 825-2366

REQUEST

This request is for a(n): Use Existing System.

⑮ ☐ New installation permit

⑯ ☐ Repair or alteration permit

⑰ ☑ Authorization for mobile home exchange

⑱ ☐ Other (specify)

DESIGN CRITERIA

System will serve.

⑲ ☐ Residence ⑳ ☑ Mobile home

㉑ ☐ Business or place of public assembly

㉒ Number of bedrooms? 2

㉕ Type?

㉓ Maximum occupancy? 2

㉖ Maximum number of employees?

㉔ Basement? ☐ yes ☒ no

㉗ Maximum number of seats?

WATER SUPPLY

㉙ Water supply from (present or proposed):

A ☑ Individual well

B ☐ Municipal system

C ☐ Community well

D ☐ Community system

㉚ The undersigned, owner of the property described above as the "JOB LOCATION" has read the foregoing application, acknowledges that the contents of same are true, and authorizes agents of the MECKLENBURG COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH to enter onto the property for the purpose of processing this request.

Signed: Howard L Sloan

Date: 9/3/85

㉘ Accurately dimensioned plot

WHITE - ENVIRONMENTAL HEALTH DEPARTMENT'S COPY ● CANARY - ENVIRONMENTALIST'S COPY ● PINK - OWNER'S COPY

Date Issued 9/11/85

Serial No. 8896

SIR No. 16199

T C. No 215 051 14

Map Date L CRT

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

IMPROVEMENT PERMIT

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER SLoan (LAST) Howard (FIRST) Levan (MIDDLE)

ADDRESS OF OWNER PO Box 22, Matthews, N.C. ZIP 28012

LOCATION OF LOT 2349 ~~E. John St.~~ Old Monroe Rd. (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO._____ BLOCK NO._____

MAP BOOK NO._____ PAGE NO._____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot; and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number_____. This approval is subject to the following terms and conditions:

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"Use Existing System"

B R Ferguson
Environmentalist

Eric D. Hardister Jr
Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy