SEE INSTRUCTIONS ON BACK

Date Received JULY 18, 1978 Entered

ICAR(S) Application No. 14346

T. C. No. 205-172-04

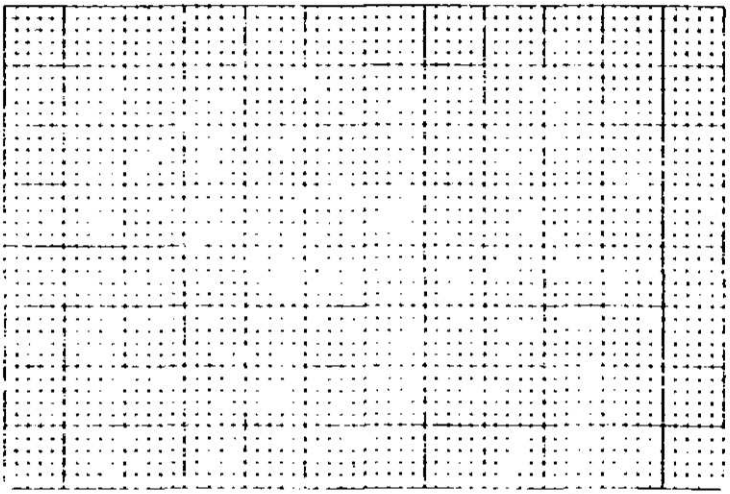
Map Date _____

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

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 Yes___ ___No
4) No. of Bedrooms _____
5) Business Use Max No Employees _____
6 Washing Machine ___Yes ___No
7) Garbage Disposal ___Yes ___No
8) Dishwasher ___Yes ___No
9) Water Supply REPAIR
A Individual Well _____
B Governmental System _____
C Community System
Well source _____
Governmental source _____
10) Sewage System
House located within 200 feet of sewer Yes ___No
Mobile located within 200 feet of sewer ___Yes ___No
11) EHA Case No _____
12) EHA Case No _____

13) NAME OF OWNER ELLIOTT C. M. (TOM) LAST FIRST MIDDLE

14) ADDRESS OF OWNER 4025 TEAKWOOD DR.

15) PHONE NO Home _____ Office _____

16) LOCATION OF SYSTEM 1000 ARROWOOD RD. 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) PTF 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.

JULY 18, 1978
DATE OF APPLICATION

C. M. Elliott
OWNER

EHD-5-76

Department's Copy