Date Received 8/1/78

SEE INSTRUCTIONS ON BACK

CAR(S) Application No. 14357

T. C. No. 137-074-02

Map Date

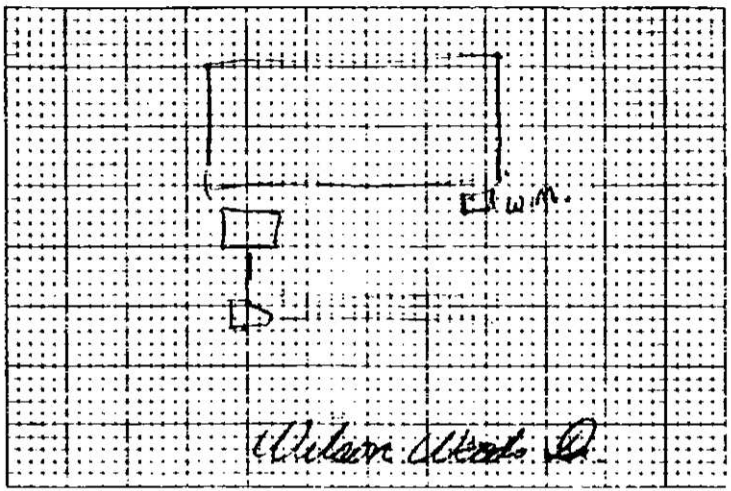
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) ✓ 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) 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 Case (LAST) Alvin C (FIRST) + Marian G (MIDDLE)

14) ADDRESS OF OWNER 8417 Wilson Woods Dr.

15) PHONE NO Home 565-1958 Office ___

16) LOCATION OF SYSTEM 8417 Wilson Woods Dr. (STREET OR COUNTY ROAD)

17) SUBDIVISION Wilson Woods Lot No. 11 Block No. ___

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE 213

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

20) PTR NUMBER See Instructions 1

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.

7/25/78
DATE OF APPLICATION

A C Case
OWNER

FORM NO. [illegible]

HEALTH DEPARTMENT'S COPY

SEE INSTRUCTIONS ON BACK

28203

Date Received 6/6/79

ICAR(S) Application No. 14357

T. C. No. 137-074-02

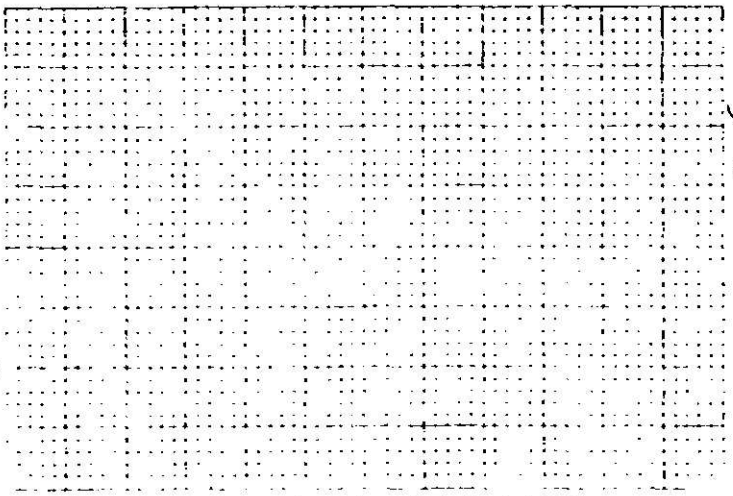
Map Date

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. *USE EXISTING SYSTEM***ADDING ON A BEDROOM***

1) N/A Install or Construct 2) Alter or Repair an individual septic tank wastewater treatment system with a subsurface, soil absorption, effluent discharge.



Mobile Home ___ Yes ✓ No
Residence ✓ Yes ___ No
4) No. of Bedrooms 4
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 ___
Name of Source ___
2. Governmental Source ___
D. Sewage System
1. Is property located within 200 feet of a sewer line? ___ Yes ✓ No
2. Is property located within 2,000 feet of a sewer line? Yes ___ No
11) EHA Case No. ___
12) EA Case No. ___

3) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Maltba, Harry
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 8417 Wilson Woods Drive, Charlotte 28212

15) PHONE NO. Home 545-5191 Office 394-7818

16) LOCATION OF SYSTEM 8417 Wilson Woods Drive
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No. N/A Block No ___

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK ___ AT PAGE N/A

19) HAS A SOIL INVESTIGATION BEEN RUN? YES NO DATE RUN

20) PERMIT NUMBER (See Instructions) 14357

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.

DATE OF APPLICATION ___

OWNER Harry C. Maltba

EHS-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY

Serial No. 3129

LA No. 14357

Date Issued June 6, 1979

T. C. No. 137-074-02

Map Date _____

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

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

NAME OF OWNER _____ Maltba, Harry _____
LAST FIRST MIDDLE

ADDRESS OF OWNER 8417 Wilson Woods Drive, Charlotte 28212

LOCATION OF LOT 8417 Wilson Woods Drive
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 14357. 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

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

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD 5 76

Environmental Health Department's Copy