SEE INSTRUCTIONS ON BACK

K

Date Received 5 30 73

ICAR S Application No 6390

T C No

Map Date

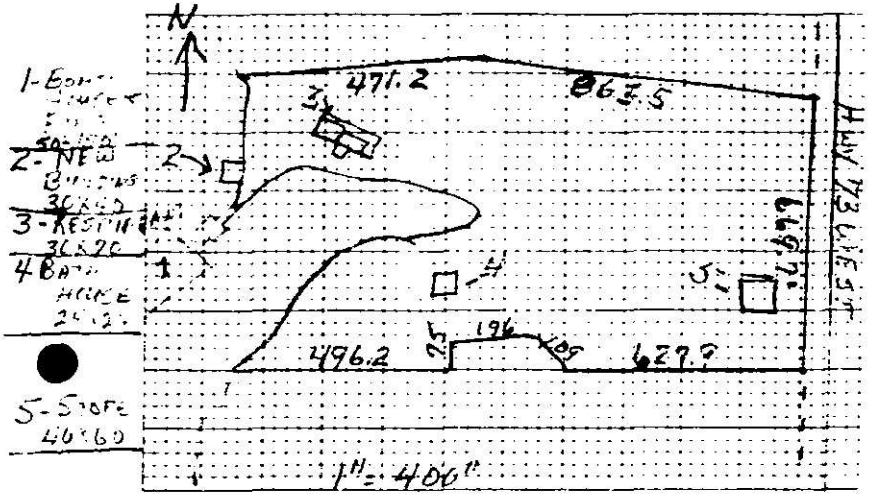
MECKLENBURG COUNTY HEALTH DEPARTMENT

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 ✓ Alter or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge



3) PLOT PLAN (ACCURATELY DIMENSIONED)

ASSESS

4 No of bedrooms —
5 Building Use Water Emp Sewer 12
6 Washing Machine Yes No
7 Garbage Disp Yes No
8 Dishwasher Yes No
9 Water Supply
A Individual Well ✓
B Government
C Community System
Well
Government
Sewage System
Individual Septic Tank
Public Sewer ✓ Yes No
11 FHA Case No
12 VA Case No

13) NAME OF OWNER WHER-REA MARINA INC (LAST, FIRST, MIDDLE)

14) ADDRESS OF OWNER RT 2 BOX 22 HUNTERSVILLE NC

15) PHONE NO Home 542-4282 Office 892-5416

16) LOCATION OF SYSTEM Hwy NC 73 WEST (STREET OR COUNTY ROAD)

17) SUBDIVISION — Lot No — Block No —

Map Book No — Page No. —

18) DEED REFERENCE — DEED BOOK 2574 AT PAGE 555

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ____ NO DATE RUN 1966

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.

May 29, 1973
DATE OF APPLICATION

William A. Irwin Secretary
OWNER

FORM NO. E-4-9-1-72

HEALTH DEPARTMENT'S COPY