SEE INSTRUCTIONS ON BACK

Date Received 11-15-82

ICAR(S) Application No. 19056

T. C. No. 231-065-08

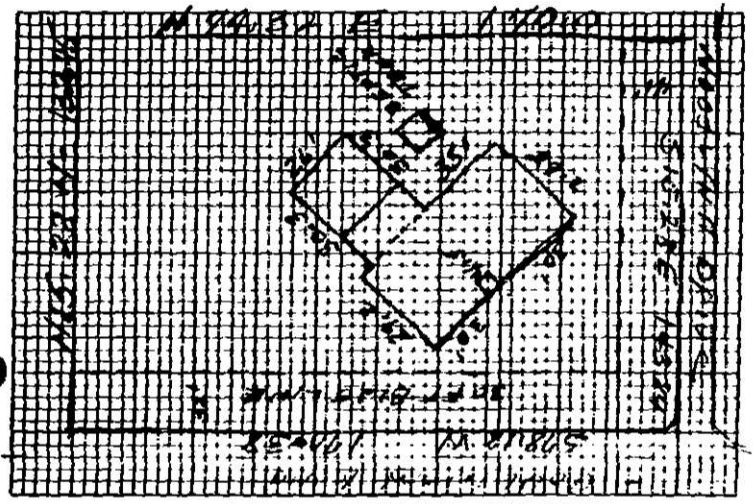
Map Date _____

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 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 X No
   House located within 200 feet of community sewer ___ Yes X No
11) FHA Case No. ___
12) VA Case No. ___

13) NAME OF OWNER Smith (LAST) William M. (FIRST MIDDLE)

14) ADDRESS OF OWNER 107 Williams Dr Charlotte NC 28214

15) PHONE NO. Home Unlisted Office 375-7561

16) LOCATION OF SYSTEM ___ Williams Dr Charlotte NC (STREET OR COUNTY ROAD)

17) SUBDIVISION ___ Lot No. 1 Block No. E

Map Book No. 5 Page No. 349

18) DEED REFERENCE — DEED BOOK 3997 AT PAGE 592

19) HAS A SOIL INVESTIGATION BEEN RUN? ___ YES ___ NO (NOT ON THIS PLACE) DATE RUN ___

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.

11-14-82
DATE OF APPLICATION

William M. Smith
OWNER

EHD-S-76