Date Received 3-12-84

SEE INSTRUCTIONS ON BACK

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ICAR (S) Application No. 20761

T C No. 113-123-01

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 Replacing burned Mobile Home

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

13) NAME OF OWNER Brunk (LAST) Peggy (FIRST) H. (MIDDLE)

14) ADDRESS OF OWNER 3922 Sharyn Dr.

15) PHONE NO. Home 343-3090 Office ___

16) LOCATION OF SYSTEM 3922 Sharyn Dr. (STREET OR COUNTY ROAD)

17) SUBDIVISION Parkwood Lot No. 15 Block No. E

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) ___

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.

3-12-84
DATE OF APPLICATION

Peggy H. Brunk
OWNER

EHD-5-76

Environmental Health Department's Copy

, 35 - 3-15-84

SIR No. 20761

Serial No. 7299

Date Issued 3-14-84

T. C. No. 113-123-01

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 Brunk, (LAST) Peggy (FIRST) H. (MIDDLE)

ADDRESS OF OWNER 3922 Sharyn Dr., Charlotte, NC ZIP 28214

LOCATION OF LOT 3922 Sharyn Drive (STREET OR COUNTY ROAD)

SUBDIVISION Parkwood LOT NO. 15 BLOCK NO. E

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 20761 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, altered, 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 ***

B. R. Ferguson
Environmentalist

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

EHD-5-76

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