SEE INSTRUCTIONS ON BACK

Date Received 6/8/77

ICAR(S) Application No. 12549

T.C. No. 017-031-05

Map Date 9-9-74

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

Mobile Home ✓ Yes ___ No
Repair ✓ Yes ___ No
4 No. of Bedrooms 2
5 Estimated Water Use Per Day 240
6 Abnormal Wastes ___ Yes ✓ No
7 Swimming Pool ___ 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
Property 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. ___

3) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Frances William Rust
LAST FIRST MIDDLE

14) ADDRESS OF OWNER Rt. 1 Box [illegible] Huntersville N.C.

15) PHONE NO Home [illegible] Office ___

16) LOCATION OF SYSTEM County Road [illegible]
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No ___ Block No ___

Map Book No ___ Page No. ___

18) DEED REFERENCE — DEED BOOK 2167 AT PAGE 331

19) HAS A SOIL INVESTIGATION BEEN RUN? ✓ YES NO DATE RUN 1964

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.

DATE OF APPLICATION ___

William F. Thrower
OWNER

EHD-5-76

Environmental Health Department's Copy