SEE INSTRUCTIONS ON BACK

Date Received 4-19-73

ICAR'S Application No 6070

T C No 193-068-08

Map Date 9-1-72

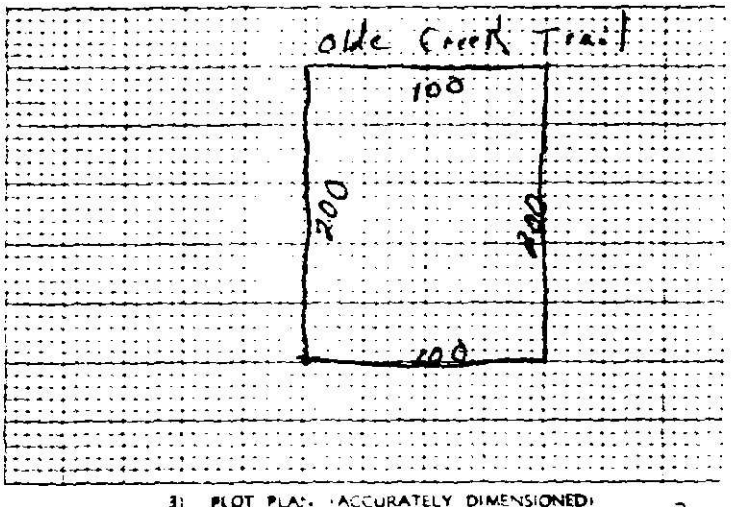
MECKLENBURG COUNTY HEALTH DEPARTMENT

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) X After or Repair an individual septic tank wastewater treatment system with a subsurface soil absorption, effluent discharge



4 No of Bedrooms 4

5 Business Use - Max No Employees ___

6 Washing Machine ✓ Yes ___ No

7 Garbage Disposal ✓ Yes ✓ No

8 Dishwasher ✓ Yes ___ No

9 Water Supply
A ___ Private Individual Well
B Governmental ___
C Community ___
1 Well ✓
2 Governmental ___

Sewage System
Public Sewer Available ___ Yes ✓ No
Private Sewage Treatment Plant ___ Yes ___ No
Commercial Lease ___ Yes ✓ No

11) FHA Case No ___

12) VA Case No ___

13) PLOT PLAN (ACCURATELY DIMENSIONED)

13) NAME OF OWNER Helms Sr. Harold Horace
LAST FIRST MIDDLE

14) ADDRESS OF OWNER 3232 Olde Creek Trail

15) PHONE NO Home 536-6951 Office

16) LOCATION OF SYSTEM 3232 Olde Creek Trail
STREET OR COUNTY ROAD

17) SUBDIVISION Olde Creek Lot No 8 Block No F

Map Book No 14 Page No. 181

18) DEED REFERENCE — DEED BOOK ___ AT PAGE ___

19) HAS A PERCOLATION TEST BEEN RUN? ✓ YES ___ NO DATE RUN 4-17-73

20) PTR NUMBER (See Instructions) 6070

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.

4-19-73
DATE OF APPLICATION

Mrs. W. H. Helms Sr.
OWNER

FORM NO E-4-8-1-72 I Mrs. W. H. Helms Sr. hereby authorize Mr. Wayne Huntley to repair the septic tank system as directed by the

HEALTH DEPARTMENT'S COPY