SEE INSTRUCTIONS ON BACK

Date Received 1/16/80

ICAR (S) Application No. 5035

T. C. No. 037-182-02

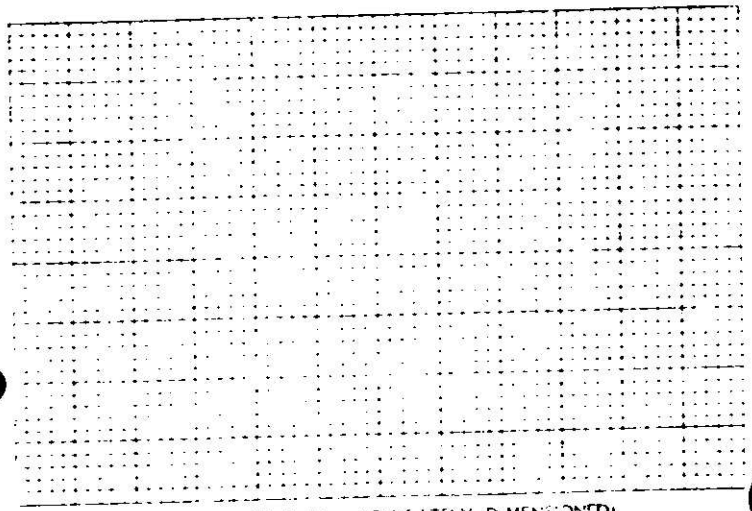
Map Date _____

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)

4) Mobile Home — Yes — No
Residence — Yes — No

4) No. of Bedrooms: _____

5) Business Use — Max. No. Employees: 25

6) Washing Machine — Yes — No

7) Garbage Disposal — Yes — No

8) Dishwasher — Yes — No

9) Water Supply
A) Individual Well: _____
B) Governments 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 interceptor sewer: Yes — No

11) EHA Case No: N/A

12) VA Case No: _____

(GUIGNARD FREIGHT LINES)

13) NAME OF OWNER Christensen (LAST) C. (FIRST) A. (MIDDLE)

14) ADDRESS OF OWNER 8101 Statesville Road 28213

15) PHONE NO. Home _____ Office _____

16) LOCATION OF SYSTEM 8101 Statesville (STREET OR COUNTY ROAD) Road

17) SUBDIVISION _____ Lot No _____ Block No. _____

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.

1/16/80
DATE OF APPLICATION

C. A. Christensen
OWNER

EHD-5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY