Date Received 9/13/79

SEE INSTRUCTIONS ON BACK

MECK. COUNTY DEPT. OF ENV. HEALTH
RECEIVED
SEP 13 1979

ICAR(S) Application No 16170

T. C No 029-143-16

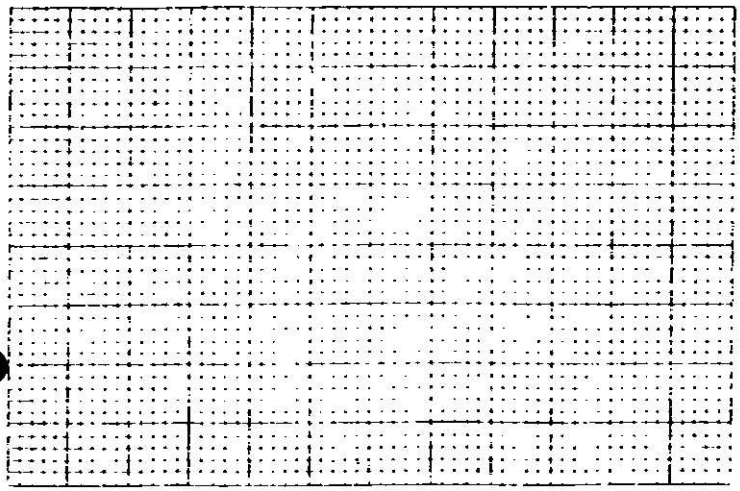
Map Date

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 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 Hoadwin (LAST) Yvonne (FIRST) ___ (MIDDLE)

(14) ADDRESS OF OWNER RT. 7 Box 553

(15) PHONE NO Home 596-5173 Office ___

(16) LOCATION OF SYSTEM Briarwood Drive (STREET OR COUNTY 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.

✓ 9-10-79
DATE OF APPLICATION

✓ Yvonne Hoadwin
OWNER

EHD-5-76

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