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SEE INSTRUCTIONS ON BACK

Date Received 4-20-73

ICAR(S) Application No 6077

T C No

Map Date

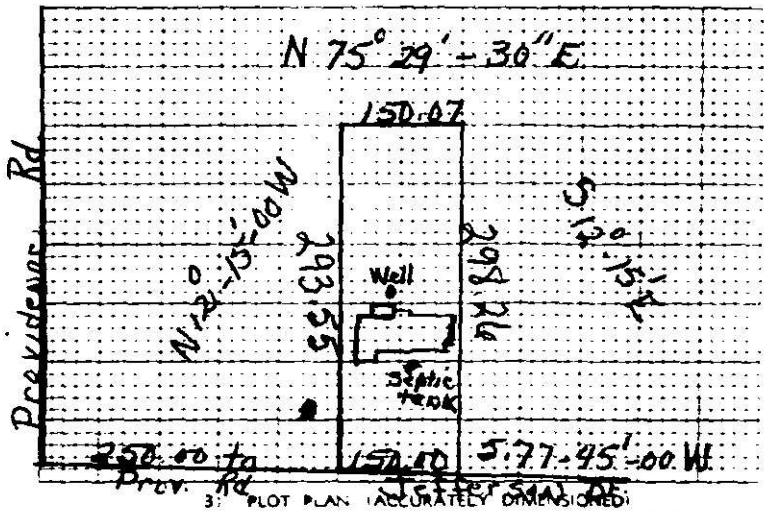
MECKLENBURG COUNTY HEALTH DEPARTMENT

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



3) PLOT PLAN (ACCURATELY DIMENSIONED)

4) No. of Bedrooms 4

5) Business Use Max. No. Employees

5) Washing Machine ✓ Yes No

6) Garbage Disposal ✓ Yes No

6) Dishwasher ✓ Yes No

9) Water Supply
A) Individual Well ✓
B) Governmental System
C) Community System
1) Well source
2) Governmental

Sewage System
How is located at 2) connected to public sewer Yes X No
How is located at 2) connected to community sewer Yes X No

11) FHA Case No.

12) VA Case No.

13) NAME OF OWNER Payne (LAST) Roland (FIRST) Clinton (MIDDLE)

14) ADDRESS OF OWNER 1114 Jefferson Drive

15) PHONE NO Home 364-3243 Office 372-2750

16) LOCATION OF SYSTEM 1114 Jefferson Drive (STREET OR COUNTY ROAD)

17) SUBDIVISION Jefferson Park Lot No. 3 Block No. 1

Map Book No. 1166 Page No. 131

18) DEED REFERENCE — DEED BOOK ~~1968~~ 3484 AT PAGE ~~[illegible]~~ 257

19) HAS A PERCOLATION TEST 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.

4-19-73
DATE OF APPLICATION

Mrs. R.C. Payne
OWNER

FORM NO E-4-8-1-72

HEALTH DEPARTMENT'S COPY