SEE INSTRUCTIONS ON BACK

Date Received 5/25/77

ICAR(S) Application No. 1257

T. C. No. 023-024-26

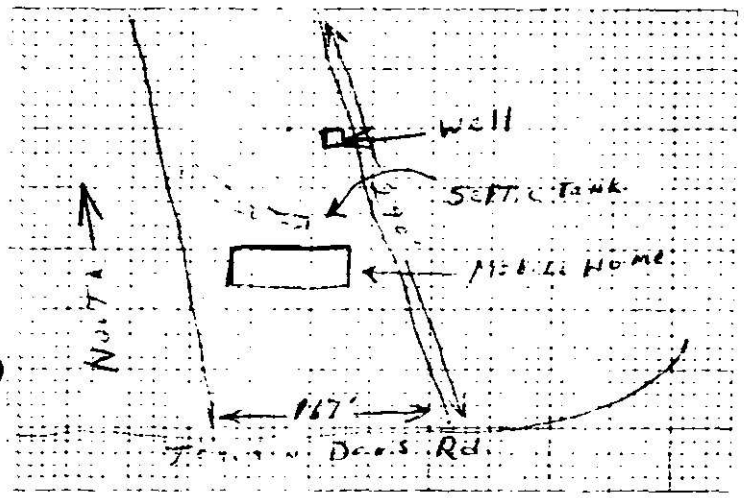
Map Date 3-9-76

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 ☐ Install ☐ Construct a ☑ Alter or Repair an individual septic tank wastewater treatment system with subsurface soil absorption effluent discharge

connect to already existing system



3) PLOT PLAN (ACCURATELY DIMENSIONED)

Mobile Home ☑ Yes ☐ No

4) No. of Bedrooms 3

5) Public Use ☐ Yes ☐ 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

Sewage System
House location within 200 feet of public sewer ☑ Yes ☐ No
House location within 200 feet of community sewer ☐ Yes ☑ No

11) FHA Case No.

12) VA Case No.

13) NAME OF OWNER Steele (LAST) Allen (FIRST) Irvin (MIDDLE)

14) ADDRESS OF OWNER Rt 5 Box 404 Huntersville, N.C.

15) PHONE NO. Home 875 2541 Office 392 3271

16) LOCATION OF SYSTEM Jamestown Dees Rd (#2163)
(STREET OR COUNTY ROAD)

17) SUBDIVISION _____ Lot No. _____ Block No. _____

Map Book No. _____ Page No. _____

I AM buying property from my father H B Steele

18) DEED REFERENCE — DEED BOOK 2665 AT PAGE 541

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.

5-20-77
DATE OF APPLICATION

Allen I. Steele
OWNER

EHD-5-76

Environmental Health Department's Copy

Serial No. 0842

LA No. 12507

T. C. No. 023-024-26

Date Issued May 27, 1977

Map Date 3-9-76

MECKLENBURG COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH

TO THE BUILDING INSPECTION DEPARTMENT

APPROVAL OF LOT FOR INSTALLATION OF AN INDIVIDUAL SEPTIC TANK WITH SUBSURFACE, SOIL ABSORPTION, EFFLUENT DISCHARGE

NAME OF OWNER Steele (LAST) Allen (FIRST) Irenes (MIDDLE)

ADDRESS OF OWNER Rt.3, Box 404, Huntersville, NC ZIP 28078

LOCATION OF LOT Johnson-Davis Road (STREET OR COUNTY ROAD)

SUBDIVISION _____ LOT NO. _____ BLOCK NO. _____

MAP BOOK NO. _____ PAGE NO _____

The above specified lot is approved by the Mecklenburg County Department of Environmental Health for the installation of an individual septic tank system with subsurface, soil absorption, effluent discharge based on the soil investigation, on an on-site inspection of the said lot, and upon the information supplied in the "Application for an Installation, Construction, Alteration, and/or Repair Permit", number _____. This approval is subject to the following terms and conditions:

1. That the nitrification field be installed, constructed, altered and/or repaired in the same area where the soil investigation was run.
2. That an "Installation, Construction, Alteration, and or Repair Permit" be issued and in full force and effect when the system is installed, constructed, altred, and/or repaired and that the system be installed in accordance with same.

This approval may be revoked and the building inspection department requested to revoke any building permit(s) which have been issued to authorize construction on the said lot, at any time it is determined that any information contained in the "Application for an Installation, Construction, Alteration, and or Repair Permit" is not correct or is untrue or that the septic tank system is not being installed, constructed, altered and/or repaired in accordance with a valid Installation, Construction, Alteration, and or Repair Permit.

Environmentalist

Environmental Health Director, or Authorized Section Head

EHD-5-76

Environmental Health Department's Copy