SEE INSTRUCTIONS ON BACK

Date Received 12/14/29

ICAR(S) Application No. 281

T C No. 019-182-04

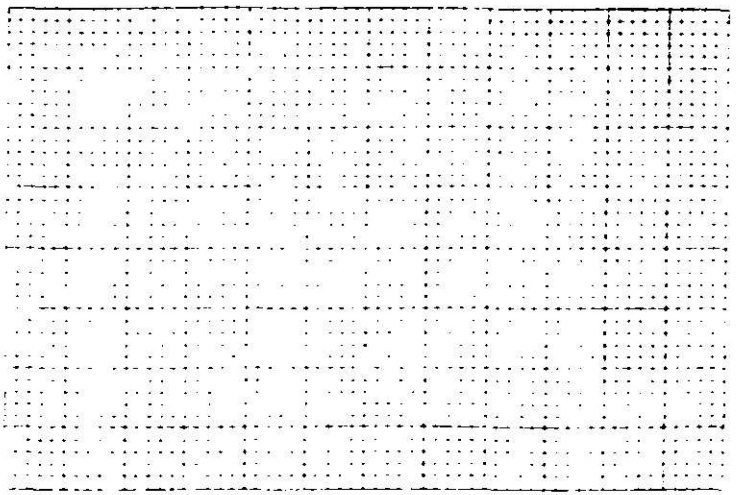
Map Date

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)

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 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 Vinesett, Olin G
LAST FIRST MIDDLE

14) ADDRESS OF OWNER Rt 1, Box 996 710 Huntersville 28078

15) PHONE NO Home 875-1112 Office 821-7655

16) LOCATION OF SYSTEM Asbury Chapel Rd (Box 996)
STREET OR COUNTY ROAD

17) SUBDIVISION ___ Lot No. 16 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.

DATE OF APPLICATION 12/14/ OWNER O G Vinesett

EHD 5-76

ENVIRONMENTAL HEALTH DEPARTMENT'S COPY