Permit No. _____ Permit Date 7 Sept 1965

Owner Mr. Odell Mullis Address Chail, N. C.

Installed By " " Address "

Location of Property Sec. 9 Lot # 47

Tank		Capacity		Length of Lines		Fixtures	
Block	(✓)	1000	(✓)	225'	(✓)	No. of Baths	( )
Precast	( )	1250	( )	250'	( )	Dishwasher	( )
		1500	( )	Other _____		Garbage Grdr.	( )
		Other _____				Other _____	

NOTIFY HEALTH DEPARTMENT AT LEAST EIGHT HOURS BEFORE TANK IS TO BE INSPECTED.

Final Inspection 7 Sept 1965 Approved (✓) Disapproved ( )

Remarks _____

