IREDELL COUNTY HEALTH DEPARTMENT

Statesville Phone TR 3-7271 Mooresville Phone NO 3-1271

PERMIT TO INSTALL SEPTIC TANK

Permit NO. _____ Permit Date 12-4-57 195__

Owner Brick Ch. Coffey Farm Address Eulfloe

Installed By _____ Address _____

CLYDE HOKE

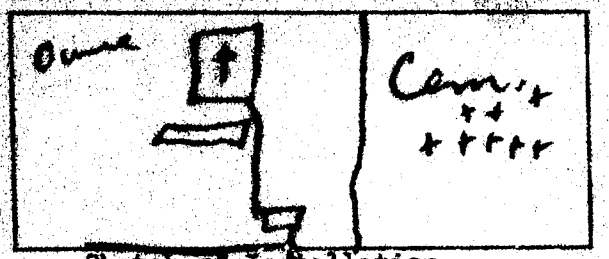
Location of Property left at Hoyle's Rd. Rite on 1st Paved Cross Bridge Brick Ch. on left.

Tank		Capacity		Length of Lines		Fixtures	
Block	( )	800	( )	150'	( )	No. of Baths	( )
Precast	(2)	900	(2)	175'	( )	Dishwasher	( )
		1000	( )	200'	( )	Garbage Grdr.	( )
2 each		1100	( )	225'	( )	Auto-Washer	( )
		1200	( )	250'	( )	Other 2 extra tanks	
		Other _____		Other _____			

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

Final Inspection _____ 195__ Approved ( ) Disapproved ( )

Remarks No washer - 1 garage - well 150' away



Sketch of Installation

R.L.

Sanitarian