IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT TO INSTALL SEPTIC TANK

Permit NO._____ Permit Date 8-22-1958

Owner C. L. Irwin Jr. Address Client Hendle

Installed By Duke Address _____

Location of Property _____

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

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

Final Inspection _____ 195__ Approved ( ) Disapproved ( )

Remarks ltf.

Sketch of Installation

Sanitarian