SEWAGE DISPOSAL RECORD

Iredell County Health Department

Cloaninger

Name of Occupant Frank Cloaninger W C Location of Building Mocksville Rt 4

Name of Owner ... W C Date of Installation ...

Type of Privy Constructed ... Number ... New or Repaired ...

Septic Tank ... (concrete, metal, etc.) Date Inspected 12-11-51 Permit No. ...

Capacity 500 gal. F.H.A. Case Yes ... No ...

Number of Users 3 Type Secondary Treatment 200' of tile

Source of Water Supply Drilled well - 62'

Contractor or Plumber Clyde Foster Address Rt. 4

Approved by R. A. Langston

Remarks ... (Over) ...

N. C. STATE BOARD OF HEALTH FORM NO. 207