IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT TO INSTALL SEPTIC TANK

Permit NO._____ Permit Date 10-8 1963

Owner SAM GAITHER Address STA.

Installed By SELF Address _____

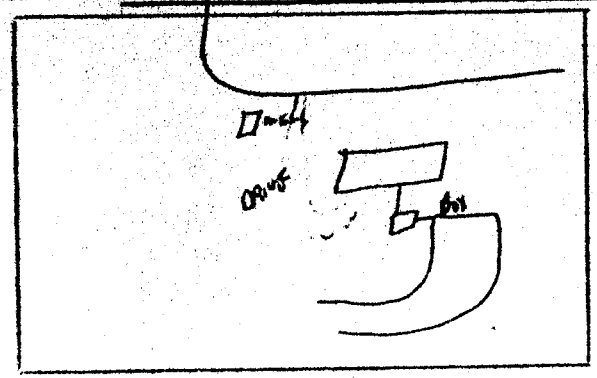
Location of Property ONT RTE 4 & CURVE MORGAN RD. PASS CREEK ROUND BEND 2nd HOUSE LEFT (WHITE NEW)

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

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

Final Inspection 10-8 1963 Approved (X) Disapproved ( )

Remarks DONATE CAR PORT



Sketch of Installation

Rufus G. Thomas, O.D.

Sanitarian