IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT TO INSTALL SEPTIC TANK

Permit NO._____ Permit Date 12-23-59 195__

Owner C F Little Address Rec'd

Installed By CLYDE HOKE Address_____

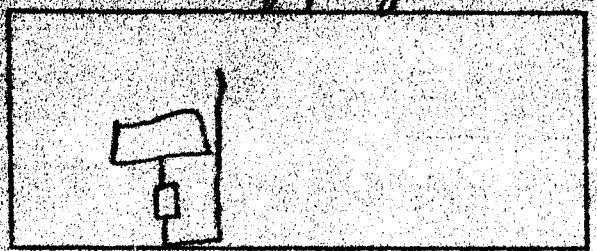
Location of Property Village on Belmont

Tank		Capacity		Length of Lines		Fixtures	
Block	(✓)	800	( )	150'	(✓)	No. of Baths	( )
Precast	( )	900	( )	175'	( )	Dishwasher	( )
Little Elder		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 4" no washer - 1 septic - lines only - Central water supply



Sketch of Installation

Sanitarian