IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT TO INSTALL SEPTIC TANK

Permit NO._____ Permit Date 12-17-59 195__

Owner C F Little Elder - colored Address Belmont Comm.

Installed By ~~Clyde Hoke~~ _____ Address _____

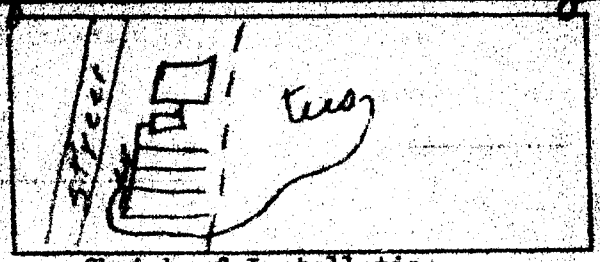
Location of Property Village in Belmont

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

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

Final Inspection _____ 195__ Approved ( ) Disapproved ( )

Remarks H & Central Water Supply - Septage - Not for Water - Lines only -



Sketch of Installation

R.t

Sanitarian