IREDELL COUNTY HEALTH DEPARTMENT

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

PERMIT TO INSTALL SEPTIC TANK

Permit NO._____ Permit Date 6 Jun 19__

Owner [illegible] Address [illegible]

Installed By [illegible] Address [illegible]

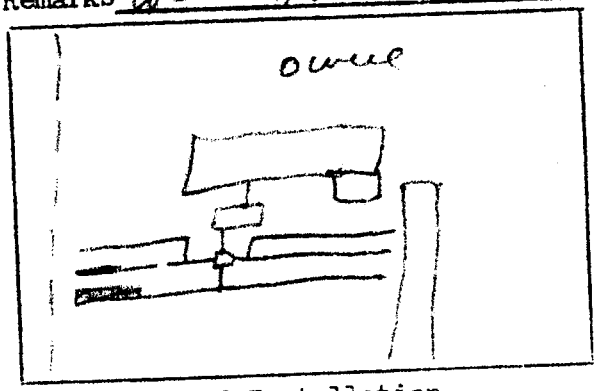
Location of Property [illegible] House #7 FHA # 38-093926 Lots # 428-431

Tank		Capacity		Length of Lines		Fixtures	
Block	( )	800	( )	150'	( )	No. of Baths	( )
Precast	(—)	900	( )	175'	( )	Dishwasher	( )
		1000	( )	200'	( )	Garbage Grdr.	( )
Lot 4		1100	( )	225'	(—)	Auto-Washer	( )
		1200	( )	250'	( )	Other_____	
		Other 125 c		Other_____			

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

Final Inspection 6-6 19[illegible] Approved ( ) Disapproved ( )

Remarks well 100'



Sketch of Installation

Rat.

Sanitarian