

(336)751-8760

pd
6-27-05

DCHD 05/99 (Revised)

DAVIE COUNTY HEALTH DEPARTMENT

Environmental Health Section

P. O. Box 848/210 Hospital Street

Mocksville, NC 27028

(336)751-8760

Account #: 990003499

Billed To: Frank Davidson

Reference Name:

Proposed Facility: Residence

Tax PIN/EH #: 4798-86-6343

Subdivision Info: Oakland Heights Lot # 7 & part of 6

Location/Address: US Highway 64-27028

Property Size: see map

ATC Number: 4000

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

****NOTE**** This Authorization for Wastewater System Construction MUST BE ISSUED by the Davie County Environmental Health Section prior to issuance of any building permit(s). This Form/Authorization Number should be presented to the Davie County Building Inspections Office when applying for building permit(s) (in compliance with Article 11 of G.S. Chapter 130A, Wastewater Systems, Section .1900 Sewage Treatment and Disposal Systems). THIS AUTHORIZATION FOR WASTEWATER CONSTRUCTION IS VALID FOR A PERIOD OF FIVE YEARS.

Environmental Health Specialist's Signature:



Date:

2/24/05

CERTIFICATE OF COMPLETION

****NOTE**** The issuance of this Certificate of Completion shall indicate the system described on Improvement/Operation Permit has been installed in compliance with Article 11 of G.S. Chapter 130A, Section .1900 "Sewage Treatment and Disposal Systems," but shall in NO WAY be taken as a guarantee that the system will function satisfactorily for any given period of time.

Septic System Installed By: _____

Environmental Health Specialist's Signature: _____

Date: _____