DAVIE COUNTY HEALTH DEPARTMENT IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION NOTE: Issued in Compliance with G.S. of North Carolina Chapter 130 Article 13c Permit Number Sewage Treatment and Disposal Rules (10 NCAC 10A .1934-.1968) Νō 5496 Date 1568 Peoples CK Sec, or Block No. Lot No. Subdivision Name Business Speculation . Mobile Home Lot Size No. in Family. No. Bedrooms YES 🗹 NO 🗌 Specifications for System Garbage Disposal YES MO NO Auto Dish Washer Auto Wash Machine Type Water Supply *This permit Void if sewage system described below is not installed within 36 months from date of issue. Improvements permit by *Contact a representative of the Davie County Health Department for final inspection of this system between 8:30-9:30 A.M. or 1:00-1:30 P.M. on day of completion. Telephone Number: 704-634-5985. System Installed by Final Installation Diagram: Kack dine 200 60 Apport Certificate of Completion -*The signing of this certificate shalk indicate that the system described above has been installed in compliance with the standards set forth in the above regulation, but shall in NO way be taken as a guarantee that the system will function satisfactorily for any given period of time.