STATE OF NORTH CAROLINA
COUNTY OF Iredell

CONTRACT FOR INSPECTIONS OF ON-SITE WASTEWATER SYSTEMS TYPE II, III, IV and V

This Contract is entered into this 12th day of December, 2006 by and between TCW Wastewater Management, Inc., a North Carolina Corporation of Union County, North Carolina (hereinafter "TCW") and Traditional Southern Home (hereinafter "The Owner").

Preamble

TCW is contracting with The Owner to provide inspection services as described on Attachment A for the fees or charges also shown in Attachment A.

The Owner owns or controls the property upon which a ground absorption sewage treatment system ("System") is installed, such System being designated as a type II, III, IV or V system under the Rules for Sanitary Sewage Collection. Treatment and Disposal found at 15A N.C. Admin. Code 18A. 1900 et seq.; and 15A N.C. Admin. Code 18A.1961 requires that a condition of the Operation Permit for certain systems be that a properly executed inspection contract between the System Owner and a management entity shall be in effect for as long as the System is in use. TCW is a management entity which employees certified operators of a type authorized by 15A N.C. Admin. Code 18a.1961 to manage and inspect type II, III, IV, and V systems.

In consideration of the premises and of the mutual covenants and promises contained in this Agreement, it is hereby agreed by and between the Owner and TCW as stipulated below.

Conditions of the Contract

A. TCW, in consideration of the payment by the Owner as set out in the schedule of services and charges in Attachment A, incorporated herein, agrees:

1) To provide the services set out in Attachment A according to the minimum schedule of inspections/services required by regulations for the lots or parcels set out in Attachment B.

2) To report results of the inspections to the local environmental regulatory agency having jurisdiction as required by applicable laws or regulations.

3) If inspections indicate the need for System repairs:

   a) to notify the local environmental regulatory agency within 48 hours.
   b) to give notice to the "Owner" of needed repairs, and, if the necessary repairs are outside the scope of the routine maintenance described in Attachment A, then The Owner may request TCW to provide an estimate. At the authorization of The Owner TCW will perform the necessary repairs at TCW's then prevailing charges for services and materials.

4) If TCW's services are terminated, TCW will notify the local environmental regulatory agency within 48 hours.

B. The Owner, in consideration of the services performed, agrees:

1) To pay TCW for its services according to the schedule of charges as set out in Attachment A.

2) Within 30 days of receipt of notice of repairs under A (3) above, the Owner(s) must provide proof that repairs have been performed by a licensed or qualified entity and the System is functioning properly or request and authorize TCW to complete the needed repairs.

3) To notify TCW promptly of any emergency or malfunction known to it which may violate environmental, health, or other laws and regulations, and to authorize immediate repair as necessary to restore the System to proper function and operation.

4) To use reasonable efforts to provide and to maintain at all times, such access to the Systems as is reasonably necessary for TCW to comply with its obligations under this Agreement.

C. **Terms of the Agreement**

1) This Agreement shall be effective for one year from the date of this contract, and will be automatically renewed from year-to-year thereafter, unless written notice of termination and non-renewal is given to the other party not less than 60 days prior to the end of the then current annual contract year.

2) The real property to be serviced under this contract is listed on Attachment B.

3) This Agreement automatically terminates if the Operation Permit for the system is revoked and all appeals of the revocation are exhausted or time for making an appeal has passed.

4) The parties may terminate at the end of the then current term by consent of each party or by not less than 60 days written notice to the other party prior to the end of the then current contract year, and not less than 30 days written notice to the local environmental regulatory agency.

5) This Agreement may be terminated for cause for breach which remains unremedied after 15 days written notice to the defaulting party.

D. **Limited Warranty**

TCW'S SOLE DUTIES AND RESPONSIBILITIES UNDER THIS AGREEMENT IS TO PROVIDE INSPECTION AND ROUTINE MAINTENANCE ONLY AS SPECIFIED IN THIS AGREEMENT. INSPECTIONS WILL COMPLY WITH APPLICABLE CODES, LAWS, AND REGULATIONS IN FORCE AT THE TIME OF THE INSPECTION AND REPORT. WORK AND MATERIALS USED IN REPAIRS ARE WARRANTED ONLY TO BE OF GOOD WORKMANSHIP, FREE OF DEFECTS, AND CONFORM TO THE SYSTEMS SPECIFICATIONS AND EQUAL TO THE ORIGINAL PARTS AND EQUIPMENT. THE OWNER'S SOLE REMEDY UNDER THIS EXPRESS WARRANTY IS REPAIR OR REPLACEMENT AND CONSEQUENTIAL DAMAGE OR DAMAGES FOR DELAY ARE LIMITED TO TOTAL SUMS PAID TCW UNDER THIS AGREEMENT FOR THE PARTICULAR LOT OR PARCEL FOR THE THEN CURRENT YEAR. ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING MERCHANTABILITY OR FITNESS FOR PARTICULAR PURPOSE, ARE EXPRESSLY AND SPECIFICALLY EXCLUDED. REPAIRS, REPLACEMENTS, ADDITIONS AND CHANGES BY OTHERS TO THE SYSTEMS COVERED BY THIS AGREEMENT WITHOUT PRIOR NOTICE TO TCW OR ACCEPTANCE OF THE WORK BY TCW DURING THE TERM OF THIS AGREEMENT VOIDS ANY WARRANTY GRANTED HEREIN AS TO TCW.

E. **Miscellaneous**

1) Transfer of rights, responsibilities, and duties under this Agreement by any party shall be valid only on written notice and consent signed by all parties, which consent shall not be unreasonably or arbitrarily withheld.

2) TCW may perform its duties and responsibilities by subcontract but TCW will remain directly liable and responsible to the Owner under the terms of this Agreement.

3) Waiver of default or a breach of the Agreement by any party shall not operate nor be construed as a waiver of further or subsequent defaults or breach of this Agreement. Failure to take action in any default or breach does not bear action on such default at any time subsequent to such breach or default.

4) This Agreement constitutes the entire agreement of the parties, incorporating, and superseding all prior representations and negotiations and may not be changed or amended except in writing signed by the parties. The Agreement shall be interpreted under North Carolina law. Any part of the Agreement declared void, illegal, or unenforceable will not affect other provisions of the Agreement.

5) Disputes arising under this Agreement shall be determined by any method of Alternative Dispute Resolution the parties choose, including but not limited to, mediation or arbitration, under the Uniform Arbitration Act of North Carolina or its equivalent, or such means or methods as the parties agree to in writing.

6) Notices are deemed delivered if delivered in person; by certified or registered mail; by courier; or delivery service, if properly receipted, charges and postage prepaid, as follows:

Owner:
Traditional Southern Home
PO Box 4083
Mooresville NC. 28117

TCW Wastewater Management, Inc.
P. O. Box 1830
Indian Trail, NC 28079

Environmental Regulatory Agency:

Iredell Environmental Health
610 E. Center St.
Mooresville, NC 28115

A party may change its address my giving notice in the manner provided above.

Each party has executed this Agreement with full power, authority, and legal right to enter into; to bind itself to the rights, duties and responsibilities under this Agreement, which is binding on the parties, their successors and assigns, heirs and personal representatives, on the date first above written.

ATTEST:

OWNER:

TCW Wastewater Management, Inc.

ATTEST:

BY:

Title: President

License numbers: SS 12248
SI 23910
2WW 24666

EXHIBIT A
TYPE II, III, IV

MONITORING & INSPECTION PLAN

1. COST: **INITIAL CONTRACT YEAR:** $ 225.00 (2 required inspections)
$ N/A (0 required lab)
$ 225.00 Total Initial Year

RENEWAL YEARS: $ 225.00 (2 required inspections)
$ N/A (0 required lab)
$ 225.00 Total Renewal Years

c. The Owner shall pay to TCW the aforementioned sums for each parcel listed on Attachment B. The initial annual fees are payable upon the execution of the contract. Annual billings will be made thereafter and payable within 30 days of billing. The annual billings will be made on the anniversary dates. The annual renewal fees may increase no more than 5% per year. The Owner shall pay to TCW his normal and customary fees for any authorized work performed on the System as a result of non-scheduled service or maintenance calls. These fees are due and payable within 30 days of billing. Payments due to TCW, and unpaid by the Owner after 30 days, shall be assessed late payment fee of 15% per month, accruing monthly on the unpaid balance.

4. **PERFORMANCE DUTIES:**

- Inspections and services that meet state requirements, i.e., inspections of System using an itemized check list, monitoring "septic tanks" to insure proper operation, and make adjustments of imbalances to systems through the distribution devices.
- Inspection report copies are sent to the environmental regulatory agency (if applicable) and homeowner
- New Homeowner Package (educational material about their septic system) is provided
- Emergency service calls at no additional charge.
- 24-hour availability
- The Owner will be advised of any repairs needed and estimated cost or repairs. Repairs will not be made without Owner authorization.
- The Owner will be advised when pumping is recommended

Bacteria Additive Option – Additional $40 per year:

- The addition of a bacterial product into the individual septic tank as needed to maintain the proper level of bacteria.

EXHIBIT B

1. PHYSICAL ADDRESS OF SYSTEM(S):

a. 118 Lakeview Shores Loop
Mooresville NC 28117

Blackberry Creek #3 II

b. _____

c. _____

d. _____

SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
TCW Wastewater Management, Inc.
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.283.2740
Fx. 704.283.2733

Date of Inspection: 1-19-11
___ Initial ___ 6 month ✓ 12 month
___ Follow-up ___ Service call ___ Other

County	System Type	Drainfield
Fredell	PPBPS	✓ On-site ___ Off-site

Time: 12:15 Initials CL

N.

Phil Jimenez
118 Lakeview Shores Loop
Mooresville, NC 28117

Location of System / Drainfield (off-site)

Lot # 3 Phase II Subdivision Blackberry Creek

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ___ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

Septic Tank: size: ___ gallons 1000 = 53" LL 1500 = 43" LL

- Tank risers are accessible
- No odors present
- There are no Infiltration problems
- Surface water is being diverted away
- Tanks and accesses are structurally sound
- Inlet pipe at proper angle
- Inlet tee is in good condition
- Inlet Tee is cleaned today
- Effluent Filter clogging percentage ___%
- Effluent Filter was cleaned No ___ Yes ___
- Effluent Filter is in good condition
- Effluent Filter Canister is in good condition
- Effluent Filter is snapped in place
- Effluent Pipe at proper angle
- Water level is at proper level

▶ Buried ✓ ___"
▶ Surface ___ Subsurface ___

Filter End of Tank	
Scum Level	Sludge Level
___"	___"

Inlet End of Tank	
Scum Level	Sludge Level
___"	___"

Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

Sample of total water depth
Three distinct zones: good ___ medium ___ murky ___

Bacteria:

	Added at inspection	Left with homeowner
Pulp	___pks	___pks
Regular	___pks	0 pks
Bio-One	___	___

Effluent Dosing Station: size: ___ gallons 1000=50"=20 GPI 1500=52"=28 GPI

- Tank Riser is at proper height ✓
- No odors present ✓
- No infiltration issues: Surface ___ Subsurface ___ ✓
- Required pumps are present & operating properly ✓
- High water alarm is operating properly ✓
- Floats, pipes, valves, disconnects are in good condition ✓
- Pump is installed on block or raised platform (min. 6 inches) X
- Pump float is not resting on top of pump X
- Control panel enclosure/components are in good condition ✓
- TCW sticker is placed on front door of Panel ✓
- Duct Seal is present in all conduit openings ✓
- Effluent appears clear and free of solids ✓
- Telemetry / Dialer is working properly NA
- Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22"

Amp. Draw ___

Scum Level	Sludge Level
0"	3.5"

Tank Needs Pumping: yes ✓ No ___

Filter Cleaned today No ___ Yes ___
Filter is in good condition ___

Elapsed Time Readings:
Pump #1- C ___ - P ___ = Usage ___hrs
Usage ___ / days ___ = Use Per Day ___hrs
Hrs ___ x 60 = ___min.x GPM = ___GPD
Average ___ (<275) **Above average** ___ (>275) **Very high** ___ (>350)
Pump #1- CC ___ - PC ___ = Useage ___

Ground Absorption Fields:

- No odors present ✓
- There is no evidence of effluent surfacing ✓
- Vegetative cover is maintained properly ✓
- Field Protected from traffic/destructive uses ✓
- Surface water is being diverted away ✓
- Lines are not ponding or holding water X
- No low areas or settling occurring ✓
- Line cover (soil) is adequate ✓

Drop boxes used in lieu of Distribution box No ___ Yes ✓
Distribution box(es) in good condition ✓
Distribution box(es) in proper adjustment ✓

If ponding is occuring, how much? ___"

Repair area is properly reserved, maintained ✓

Pressure Manifold System:

- Manifold vault, valves, piping are in good condition ✓
- No evidence of leakage, blockage in discharge lines ✓
- No evidence of effluent backing up into box ✓
- The Pressure head is properly adjusted ✓

Corrected Today ___
Corrected Today ___
Corrected Today ___

Low Pressure Pipe System:

- Turn-ups/cleanouts/valves are intact and accessible ✓
- Laterals are free of excess solids ✓
- Laterals were flushed this inspection No ~~NA~~ Yes ___
- Zone valves are operating properly ✓
- Pressure head is properly adjusted ✓
- Turn-up buckets are dry inside ✓
- Valve box or buckets are dry inside ✓

Corrected Today ___
Jetting necessary ___
Corrected Today ___ Need replacing? yes ___ / ___
Corrected Today ___

SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
TCW Wastewater Management, Inc.
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.283.2740
Fx. 704.283.2733

Date of Inspection: 9-15-11

___ Initial ✓ 6 month ___ 12 month
___ Follow-up ___ Service call ___ Other

County	System Type	Drainfield
Iredell	PCBCS	✓ On-site ___ Off-site

Time: 10:33 Initials CL

N

Phil Jimenez
118 Lakeview Shores Loop
Mooresville, NC 28117

Location of System / Drainfield (off-site)
118 Lakeview Shores Loop

Lot # 3 Phase 4 Subdivision Blackberry Creek

Compliance Status: ___ Compliant ___X___ Non-Compliant ___ Malfunctioning
Copies: ___ Homeowner ___✓___ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

Septic Tank:
size: ___ gallons 1000 = 53" LL 1500 = 43" LL

- Tank risers are accessible
- No odors present
- There are no Infiltration problems
- Surface water is being diverted away
- Tanks and accesses are structurally sound
- Inlet pipe at proper angle
- Inlet tee is in good condition
- Inlet Tee is cleaned today
- Effluent Filter clogging percentage ___ %
- Effluent Filter was cleaned No ___ Yes ___
- Effluent Filter is in good condition
- Effluent Filter Canister is in good condition
- Effluent Filter is snapped in place
- Effluent Pipe at proper angle
- Water level is at proper level

▶ Buried ___ ___"
▶ Surface ___ Subsurface ___

Filter End of Tank
Scum Level ___" Sludge Level ___"

Inlet End of Tank
Scum Level ___" Sludge Level ___"
Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

Sample of total water depth
Three distinct zones: good ___ medium ___ murky ___

Bacteria:

	Added at inspection	Left with homeowner
Pulp	___pks	___pks
Regular	___pks	___pks
Bio-One	___	___

Effluent Dosing Station:
size: 1000 gallons 1000=50"=20 GPI 1500=52"=28 GPI

- Tank Riser is at proper height
- No odors present
- No infiltration issues: Surface ___ Subsurface ___
- Required pumps are present & operating properly — Amp. Draw ___
- High water alarm is operating properly
- Floats, pipes, valves, disconnects are in good condition
- Pump is installed on block or raised platform (min. 6 inches)
- Pump float is not resting on top of pump
- Control panel enclosure/components are in good condition
- TCW sticker is placed on front door of Panel
- Duct Seal is present in all conduit openings
- Effluent appears clear and free of solids
- Telemetry / Dialer is working properly
- Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22" — Na

Scum Level 0 Sludge Level 3.5"
Tank Needs Pumping: yes ___ No ✓

Filter Cleaned today No ___ Yes ___
Filter is in good condition ___

Elapsed Time Readings:
Pump #1- C ___ - P ___ = Usage ___hrs
Usage ___ / days ___ = Use Per Day ___hrs
Hrs ___ x 60 = ___min.x GPM = ___**GPD**
Average ___ **(<275) Above average** ___ **(>275) Very high** ___ **(>350)**
Pump #1- CC ___ - PC ___ = Useage ___

Ground Absorption Fields:

- No odors present
- There is no evidence of effluent surfacing
- Vegetative cover is maintained properly
- Field Protected from traffic/destructive uses
- Surface water is being diverted away
- Lines are not ponding or holding water
- No low areas or settling occurring
- Line cover (soil) is adequate

Drop boxes used in lieu of Distribution box No ___ Yes ✓
Distribution box(es) in good condition
Distribution box(es) in proper adjustment

If ponding is occuring, how much? ___"

Repair area is properly reserved, maintained ✓

Pressure Manifold System:

- Manifold vault, valves, piping are in good condition
- No evidence of leakage, blockage in discharge lines
- No evidence of effluent backing up into box
- The Pressure head is properly adjusted

Corrected Today ___
Corrected Today ___
Corrected Today ___

Low Pressure Pipe System:

- Turn-ups/cleanouts/valves are intact and accessible
- Laterals are free of excess solids
- Laterals were flushed this inspection No ___ Yes ___
- Zone valves are operating properly
- Pressure head is properly adjusted
- Turn-up buckets are dry inside
- Valve box or buckets are dry inside

Corrected Today ___
Jetting necessary ___
Corrected Today ___
Corrected Today ___
Need replacing? yes ___ / ___

SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
TCW Wastewater Management, Inc.
P.O. Box 187, Wingate, NC 28174
Tele. 704.324.4145
Fx. 704.324.4147

Date of Inspection: 9-24-13
___ Initial ___ 6 month ___ 12 month
___ Follow-up ___ Service call ___ Other

County	System Type	Drainfield
Iredell	PPBPS	On-site / ___ Off-site

Time: 12:52 Initials CL

Na
Phil Jimenez
14103 Hillsboro Dr.
Parker, CO 80134

Location of System / Drainfield (off-site)
118 Lakeview Shores Loop
Blackberry Creek 2
Lot # 3 Phase 2 Subdivision ~~Lakeview Shores~~

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ✓ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

Septic Tank: size: _____ gallons 1000 = 53" LL 1500 = 43" LL 2000 = 49" LL
Tank risers are accessible
Riser Type _____ Height _____" Diameter _____"
No odors present
There are no Infiltration problems
Surface water is being diverted away
Tanks and accesses are structurally sound
Inlet pipe at proper angle yes ___ Can't observe ___
Inlet tee is in good condition ___ N/A ___
Inlet Tee is cleaned today ___ N/A ___
Effluent Filter clogging percentage (<10,25,50,75,100) ___% N/A ___ Type: _____
Effluent Filter was cleaned No ___ Yes ___ N/A ___
Effluent Filter is in good condition ___ N/A ___
Effluent Filter Canister is in good condition ___ N/A ___
Effluent Filter is snapped in place ___ N/A ___
Effluent Pipe at proper angle ___
Water level is at proper level No ___ Yes ___ Freeboard ___"

▶ Buried ___ / ___"
▶ Surface ___ Subsurface ___

Filter End of Tank
Scum Level ___" Sludge Level ___"

Inlet End of Tank
Scum Level ✓" Sludge Level ✓"
Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

Sample of total water column
Three distinct zones: good ___ medium ___ murky ___

Bacteria: Added at inspection: Pulp ___pks Regular ___pks; Left with homeowner: Pulp ___pks Regular ___pks

Effluent Dosing Station: size: 1000 gallons 1000=50"=20 GPI 1500=52"=28 GPI 2000=59"=34 GPI
Tank Riser is at proper height
Riser Type ECT Height ___" Diameter 24"
No odors present
No infiltration issues: Surface ___ Subsurface ___
Required pumps are present & operating properly Amp. Draw ___
High water alarm is operating properly Can't Observe ___
Floats, pipes, valves, disconnects are in good condition
Pump is installed on block or raised platform (min. 6 inches) N/A ___
Pump float is not resting on top of pump N/A ___
Control panel enclosure/components are in good condition
TCW sticker is placed on front door of Panel
Duct Seal is present in all conduit openings
Effluent appears clear and free of solids
Telemetry / Dialer is working properly ___ N/A ___
Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22"

Scum Level 0 plus Sludge Level 1"
Total Scum+Sludge ___"
Tank Needs Pumping: yes ___ No ✓ (> 4" yes)

Filter Cleaned today No ___ Yes ___ N/A ✓
Filter is in good condition ___ N/A ___

Elapsed Time Readings:
Pump #1- C _____ - P _____ = Usage _____hrs
Usage _____ / days _____ = Use Per Day _____hrs
Hrs _____ x 60 = _____min.x GPM _____ = _____GPD
Average ___ (<275) Above average ___ (>275) Very high ___ (>350)
Pump #1- CC _____ - PC _____ = Useage _____

Grinder Lift Station: Authorized to Inspect ___ Not Authorized to Inspect ___
Tank Riser is at proper height
No odors present
No infiltration issues:
Required pumps are present & operating properly
High water alarm is operating properly
Floats, pipes, valves, disconnects are in good condition
Pump float is not resting on top of pump
Control panel enclosure/components are in good condition

▶ Buried ___ / ___"
▶ Surface ___ Subsurface ___
✓ Can't Observe ___

Grease Trap Section N/A ✓ size: _____ gallons 1000=52" LL 1500=43" LL
Tank risers are accessible
No odors present
There are no Infiltration problems
Surface water is being diverted away
Tanks and accesses are structurally sound
Inlet pipe at proper angle
Inlet tee is in good condition
Inlet Tee is cleaned today
Effluent Filter clogging percentage ___%
Effluent Filter was cleaned No ___ Yes ___
Effluent Filter is in good condition
Effluent Filter Canister is in good condition
Effluent Filter is snapped in place
Effluent Pipe at proper angle
Water level is at proper level No ___ Yes ___ Freeboard ___"

▶ Buried ___ / ___"
▶ Surface ___ Subsurface ___

Scum Level
Inlet ___" Outlet ___"
Tank Needs Pumping: yes ___ No ___ (> 2" yes)

Sample of total water column
Three distinct zones: good ___ medium ___ murky ___

SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:	Date of Inspection	___ Initial ___ 6 month ✓ 12 month
TCW Wastewater Management, Inc.	3-4-13	___ Follow-up ___ Service call ___ Other
P.O. Box 1830, Indian Trail, NC 28079	**County**	**System Type** / **Drainfield**
Tele. 704.283.2740	Iredell	PPBPS / ✓ On-site ___ Off-site
Fx. 704.283.2733	Time: 10:39	Initials CL

Name

Phil Jimenez
14103 Hillsboro Dr.
Parker, CO 80134

Location of System / Drainfield (off-site)
118 Lakeview Shores Loop

Lot # 3 Phase 2 Subdivision Blackberry Creek

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ___ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

Septic Tank: size: _____ gallons 1000 = 53" LL 1500 = 48" LL

- Tank risers are accessible ✓
- No odors present ✓
- There are no Infiltration problems ✓
- Surface water is being diverted away ✓
- Tanks and accesses are structurally sound ✓
- Inlet pipe at proper angle ✓
- Inlet tee is in good condition ✓
- Inlet Tee is cleaned today ✓
- Effluent Filter clogging percentage ___ %
- Effluent Filter was cleaned No ___ Yes ___
- Effluent Filter is in good condition ✓
- Effluent Filter Canister is in good condition ✓
- Effluent Filter is snapped in place ✓
- Effluent Pipe at proper angle ✓
- Water level is at proper level ✓

▶ Buried ✓ ___"

▶ Surface ___ Subsurface ___

Filter End of Tank: Scum Level ___" Sludge Level ___"

Inlet End of Tank: Scum Level ___" Sludge Level ___"
Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

Sample of total water depth
Three distinct zones: good ___ medium ___ murky ___

Bacteria:

	Added at inspection	Left with homeowner
Pulp	___pks	___pks
Regular	___pks	0 pks
Bio-One	___	___

Effluent Dosing Station: size: 1000 gallons 1000=50"=20 GPI 1500=52"=28 GPI

- Tank Riser is at proper height ✓
- No odors present ✓
- No infiltration issues: Surface ___ Subsurface ___ ✓
- Required pumps are present & operating properly ✓ Amp. Draw ___
- High water alarm is operating properly ✓
- Floats, pipes, valves, disconnects are in good condition ✓
- Pump is installed on block or raised platform (min. 6 inches) ✓
- Pump float is not resting on top of pump ✓
- Control panel enclosure/components are in good condition ✓
- TCW sticker is placed on front door of Panel ✓
- Duct Seal is present in all conduit openings ✓
- Effluent appears clear and free of solids ✓
- Telemetry / Dialer is working properly NA
- Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22"

Scum Level 0 Sludge Level 1"
Tank Needs Pumping: yes ___ No ✓

Filter Cleaned today No ___ Yes ___
Filter is in good condition ___

Elapsed Time Readings:
Pump #1- C ___ - P ___ = Usage ___hrs
Usage ___ / days ___ = Use Per Day ___hrs
Hrs ___ x 60 = ___min.x GPM = ___GPD
Average ___ (<275) **Above average** ___(>275) **Very high** ___(>350)
Pump #1- CC ___ - PC ___ = Useage ___

Ground Absorption Fields:

- No odors present ✓
- There is no evidence of effluent surfacing ✓
- Vegetative cover is maintained properly ✓
- Field Protected from traffic/destructive uses ✓
- Surface water is being diverted away ✓
- Lines are not ponding or holding water ✓
- No low areas or settling occurring ✓
- Line cover (soil) is adequate ✓

Drop boxes used in lieu of Distribution box No ___ Yes ✓
Distribution box(es) in good condition ✓
Distribution box(es) in proper adjustment ✓

If ponding is occuring, how much? ___"

Repair area is properly reserved, maintained ✓

Pressure Manifold System:

- Manifold vault, valves, piping are in good condition ✓
- No evidence of leakage, blockage in discharge lines ✓
- No evidence of effluent backing up into box ✓
- The Pressure head is properly adjusted ✓

Corrected Today ___
Corrected Today ___
Corrected Today ___

Low Pressure Pipe System:

- Turn-ups/cleanouts/valves are intact and accessible ✓
- Laterals are free of excess solids ✓
- Laterals were flushed this inspection No ___ Yes ✓
- Zone valves are operating properly ✓
- Pressure head is properly adjusted ✓
- Turn-up buckets are dry inside ✓
- Valve box or buckets are dry inside ✓

Corrected Today ___
Jetting necessary ___
Corrected Today ___ Need replacing? yes ___ / ___
Corrected Today ___

SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
TCW Wastewater Management, Inc.
P.O. Box 187, Wingate, NC 28174
Tele. 704.324.4145
Fx. 704.324.4147

Date of Inspection: 2-27-14
___ Initial ___ 6 month ✓ 12 month
___ Follow-up ___ Service call ___ Other

County	System Type	Drainfield
Iredell	PPBPS	✓ On-site ___ Off-site

Time: 12:15 Initials CL

Name and Address of Owner:
Phil Jimenez
10884 Valleybrook Cr.
Highlands Ranch CO 80130

Location of System / Drainfield (off-site)
118 Lakeview Shores Loop
Lot # 3 Phase 2 Subdivision Blackberry Creek

Compliance Status: ✓ Compliant ___ Non-Compliant ___ Malfunctioning
Copies: ✓ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

Septic Tank:
size: ___ gallons 1000 = 53" LL 1500 = 43" LL 2000 = 49" LL

Tank risers are accessible ✓ ▶ Buried ___ / ___"
Riser Type ___ Height ___" Diameter ___"
No odors present ___
There are no Infiltration problems ___ ▶ Surface ___ Subsurface ___
Surface water is being diverted away ___
Tanks and accesses are structurally sound ___
Inlet pipe at proper angle yes ___ Can't observe ___
Inlet tee is in good condition ___ N/A ___
Inlet Tee is cleaned today ___ N/A ___
Effluent Filter clogging percentage (<10,25,50,75,100) ___% N/A ___ Type: ___
Effluent Filter was cleaned No ___ Yes ___ N/A ___
Effluent Filter is in good condition ___ N/A ___
Effluent Filter Canister is in good condition ___ N/A ___
Effluent Filter is snapped in place ___ N/A ___
Effluent Pipe at proper angle ___
Water level is at proper level No ___ Yes ___ Freeboard ___"

Inlet End of Tank
Scum Level N" Sludge Level N"
Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

Filter End of Tank
Scum Level ___" Sludge Level ___"

Sample of total water column
Three distinct zones: good ___ medium ___ murky ___

Bacteria: Added at inspection: Pulp ___pks Regular ___pks; Left with homeowner: Pulp ___pks Regular ___pks

Effluent Dosing Station:
size: 1000 gallons 1000=50"=20 GPI 1500=52"=28 GPI 2000=59"=34 GPI

Tank Riser is at proper height ___
Riser Type ___ Height ___" Diameter ___"
No odors present ___
No infiltration issues: Surface ___ Subsurface ___
Required pumps are present & operating properly ___ Amp. Draw ___
High water alarm is operating properly ___ Can't Observe ___
Floats, pipes, valves, disconnects are in good condition ___
Pump is installed on block or raised platform (min. 6 inches) ___ N/A ___
Pump float is not resting on top of pump ___ N/A ___
Control panel enclosure/components are in good condition ___
TCW sticker is placed on front door of Panel ___
Duct Seal is present in all conduit openings ___
Effluent appears clear and free of solids ___
Telemetry / Dialer is working properly ___ N/A ___
Pressure Bell settings: Off 4", On 10"-12", Tele 16", Alarm 22"

Scum Level 0 plus Sludge Level 1"
Total Scum+Sludge 1"
Tank Needs Pumping: yes ___ No ___ (> 4" yes)

Filter Cleaned today No ___ Yes ___ N/A ✓
Filter is in good condition ___ N/A ___

Elapsed Time Readings:
Pump #1- C ___ - P ___ = Usage ___hrs
Usage ___ / days ___ = Use Per Day ___hrs
Hrs ___ x 60 = ___min.x GPM ___ = ___GPD
Average ___ **(<275) Above average** ___ **(>275) Very high** ___ **(>350)**
Pump #1- CC ___ - PC ___ = Useage ___

Grinder Lift Station:
Authorized to Inspect ___ Not Authorized to Inspect ___

Tank Riser is at proper height ___ ▶ Buried ___ / ___"
No odors present ___
No infiltration issues: ___ ▶ Surface ___ Subsurface ___
Required pumps are present & operating properly ___
High water alarm is operating properly ___ Can't Observe ___
Floats, pipes, valves, disconnects are in good condition ___
Pump float is not resting on top of pump ___
Control panel enclosure/components are in good condition ___

N/A

Grease Trap Section N/A ___
size: ___ gallons 1000=52" LL 1500=43" LL

Tank risers are accessible ___ ▶ Buried ___ / ___"
No odors present ___
There are no Infiltration problems ___ ▶ Surface ___ Subsurface ___
Surface water is being diverted away ___
Tanks and accesses are structurally sound ___
Inlet pipe at proper angle ___
Inlet tee is in good condition ___
Inlet Tee is cleaned today ___
Effluent Filter clogging percentage ___%
Effluent Filter was cleaned No ___ Yes ___
Effluent Filter is in good condition ___
Effluent Filter Canister is in good condition ___
Effluent Filter is snapped in place ___
Effluent Pipe at proper angle ___
Water level is at proper level No ___ Yes ___ Freeboard ___"

Scum Level
Inlet ___" Outlet ___"
Tank Needs Pumping: yes ___ No ___ (> 2" yes)

Sample of total water column
Three distinct zones: good ___ medium ___ murky ___

TCW WASTEWATER
704.821.8841
800.941.4956
www.tcwwastewater.com

Blackberry Creek Lot

August 14, 2008

owner contacted 9-5-08

TCW - In process of renewing opm

Mr & Mrs. Phil Himinez
118 Lakeview Shores Loop
Mooreville, NC 28117
(Formerly contracted with Tradtional Southern Home)

NOTICE OF CANCELLATION

Effective immediately your lpp septic system maintenance contracts will cancel without further notice per your request. A copy of this cancellation notice will be sent to the Department of Environmental Health as required by law.

TCW Wastewater values your business and would like to continue to serve you as a customer. The loss of your business will be missed.

Tim Bannister
TCW Wastewater Management, Inc.

Cc: Iredell County DEH

P.O. Box 1830 • Indian Trail, NC 28079 • Fax: 704.821.8892 • Email: info@tcwwastewater.com

TCW WASTEWATER
704.821.8841
800.941.4956
www.tcwwastewater.com

Mr. & Mrs. Phil Himinez
118 Lakeview Shores Loop
Mooresville, NC 28117

August 14, 2008

Dear Mr. & Mrs. Himinez:

This letter is to inform you that your builder contracted with TCW Wastewater Management for one year of state required inspections. Your builder was required by the state to be under a septic maintenance contract in order to obtain the certificate of occupancy. We have now fulfilled our obligation to that contract. Since the property has now changed hands, we do not have a contract between you and our company for TCW to continue as your service provider.

If you desire to maintain our service, we need to have a contract executed between you and TCW Wastewater for our services. NC law requires that you have your type IV septic system under contract with a licensed company for maintenance and inspections. For our basic level of service, which is payable in advance, you receive 2 inspections per year (at the 6th month and 12th month) as well as a detailed written report of our findings (report is also sent to the county). Any routine service calls, emergency calls, alarm calls, consultation visits, or after hours calls will have no additional charges when they occur. If repairs need to be made, you would be responsible for the cost of materials and labor.

Please call our office at 704-283-2740 if you would like to make arrangements for a contract to be sent to you. We will be glad to answer any questions you may have. We look forward to hearing from you and having the opportunity to work with you in maintaining your septic system in good working order. You may also call Iredell County DEH with any questions in regard to state law requirements. State law does require us to notify the county when we no longer have a valid contract on this type septic system, which are doing at this time.

Thank you,

Vicki Davis
Tri-County Wastewater Management

Cc: Iredell County Dept. of Environmental Health

P.O. Box 1830 • Indian Trail, NC 28079 • Fax: 704.821.8892 • Email: info@tcwwastewater.com

SUBSURFACE WASTEWATER INSPECTION FORM

System Manager:
TCW Wastewater Management, Inc.
P.O. Box 1830, Indian Trail, NC 28079
Tele. 704.283.2740
Fx. 704.283.2733

Date of Inspection: 5-8-2008
___ Initial ___ 6 month ✓ 12 month
___ Follow-up ___ Service call ___ Other

County	System Type	Drainfield
IREDELL	PCBPS	✓ On-site ___ Off-site

Time: 10:18 Initials CL

Name and Address of Owner:
Traditional Southern Home
PO Box 4083
Mooresville NC 28117

Location of System / Drainfield (off-site)
118 LAKEVIEW SHORES Loop
Lot # Lot #3 Phase ___ Subdivision Blackberry Creek

Compliance Status: ___ Compliant ___ Non-Compliant
Copies: ___ Homeowner ✓ DEH ___ Builder ___ Owner's Association ___ Developer

√ = Satisfactory M = Marginal X = Unsatisfactory N = Not Evaluated NA = Not Applicable

Septic Tank:
size: ___ gallons

Tank risers are accessible
No odors present
There are no Infiltration problems
Surface water is being diverted away
Tanks and accesses are structurally sound
Sanitary tee is in good condition
Inlet Tee is cleaned today
Effluent Filter was cleaned No ___ Yes ___
Effluent Filter is in good condition
Effluent Filter is snapped in place
Water level is at proper level

Buried ✓ ___"
Surface ___ Subsurface ___

Scum Level	Sludge Level
___"	___"

Scum plus Sludge level ___" (SST)
SST ___"/ liquid Depth ___" x 100 = ___%
Tank Needs Pumping: yes ___ No ___
< 30 % = No > 30 % = Yes

Bacteria:

Added at inspection	Left with homeowner
Pulp ___pks	Pulp ___pks
Regular ___pks	Regular 0 pks
Bio-One ___	Bio-One ___

Effluent Dosing Station:
size: 1000 gallons

Tank Riser is at proper height ✓
No odors present ✓
No infiltration issues: Surface ___ Subsurface ___ ✓
Required pumps are present & operating properly ✓
High water alarm is operating properly ✓
Floats, pipes, valves, disconnects are in good condition ✓
Pump float is not resting on top of pump ✓
Control panel enclosure/components are in good condition ✓
TCW sticker is placed on front door of Panel ✓
Duct Seal is present in all conduit openings ✓
Effluent appears clear and free of solids ✓
Telemetry / Dialer is working properly ✓
Pressure Bell settings: Off 4", On 12"-15", Tele 16", Alarm 22" N/A

Amp. Draw ___

Scum Level	Sludge Level
0"	0"

Tank Needs Pumping: yes ___ No ✓
Filter Cleaned today No N Yes ___
Filter is in good condition ___

Elapsed Time Readings:
Pump #1- C ___ - P ___ = Usage ___hrs
Usage ___ / days ___ = Use Per Day ___hrs
Hrs ___ x 60 = ___min.x GPM = ___GPD
Average___ Above average___ Very high___
Pump #1- CC___ - PC___ = Useage___

Ground Absorption Fields:
No odors present ✓
There is no evidence of effluent surfacing ✓
Vegetative cover is maintained properly ✓
Field Protected from traffic/destructive uses ✓
Surface water is being diverted away ✓
No low areas or settling occurring ✓
Line cover (soil) is adequate ✓
Repair area is properly reserved, maintained ✓

Drop boxes used in lieu of Distribution box No ___ Yes ✓
Distribution box(es) in good condition ✓
Distribution box(es) in proper adjustment ✓

Pressure Manifold System:
Manifold vault, valves, piping are in good condition ✓
No evidence of leakage, blockage in discharge lines ✓
The Pressure head is properly adjusted ✓

Corrected Today ___
Corrected Today ___
Corrected Today ___

ow Pressure Pipe System:
Turn-ups/cleanouts/valves are intact and accessible ✓
Laterals are free of excess solids N
Laterals were flushed this inspection No ✓ Yes ___
Zone valves are operating properly N
Pressure head is properly adjusted N/A
Turn-up buckets are dry inside ✓
Valve box or buckets are dry inside ✓

Corrected Today ___
Jetting necessary ___
Corrected Today ___
Corrected Today ___
Need replacing? yes ___ / ___

revised 6/24/07