IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-6[illegible] 1

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PERMIT# 131453 PIN# 4626-07-1828.525 4627-21-7476.525 DATE Oct. 4, 2005

OWNER OR CONTRACTOR The Farms, LLC PHONE: Business 4627.21.2064.525A Home

ADDRESS 2214 Brawley Sch Rd, Mooresville, N.C. 28117

LOCATION Brawley Sch Rd. TR McKendree, TR Lakeview Shores Loop TL ~~Goodluck Way~~ Colvard Farms TR Hammersmith attend on right

SUBDIVISION The FARMS BLOCK / SECTION 4 LOT 525/525A LOT AREA .92Ac+.452A SFE SITE CLASS. PS DESIGN FLOW 480gpd L.T.A.R. .25

Septic Tank: 1000+1500 Gallons; STB 338 Date 8-21-06
Pump Tank: 1000 Gallons; PT 97 Date 9-2-06
Pump Make: Myers Model ME50S-21 Serial No.
Nitrification Field: No Fields 1 Square Feet 640/960 Linear Feet 320
No Lines 5 Trench Width 24"min@6oc Max Trench Bottom Depth 36" Gravel Depth NA

☐ New System ☐ Repair System Type: I, II, III, (IV), V, VI
System Description: LP PPBPS
Repair System Description: LP PPBPS
Maintenance Agreement Required: ☒ Yes ☐ No

☒ House/Mod. Home No. Bedrooms 4
☐ Mobile Home No. Bathrooms
☐ Business No. Employees
☐ Other

☐ Slab ☒ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

Water Supply: ☐ Individual ☒ Public ☒ Community

Comments:/Conditions: ≠36"max@6oc

Initial site evaluation and system design performed by Paul Pennington and Kathleen Haver of S&ME

Comments:/Conditions:

tanks w/ risers

INITIAL SITE SKETCH

off site septic system.
@ 4627.21.2064.525A

SEE Plan from S&ME

AS BUILT SKETCH

System installed as per initial

Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

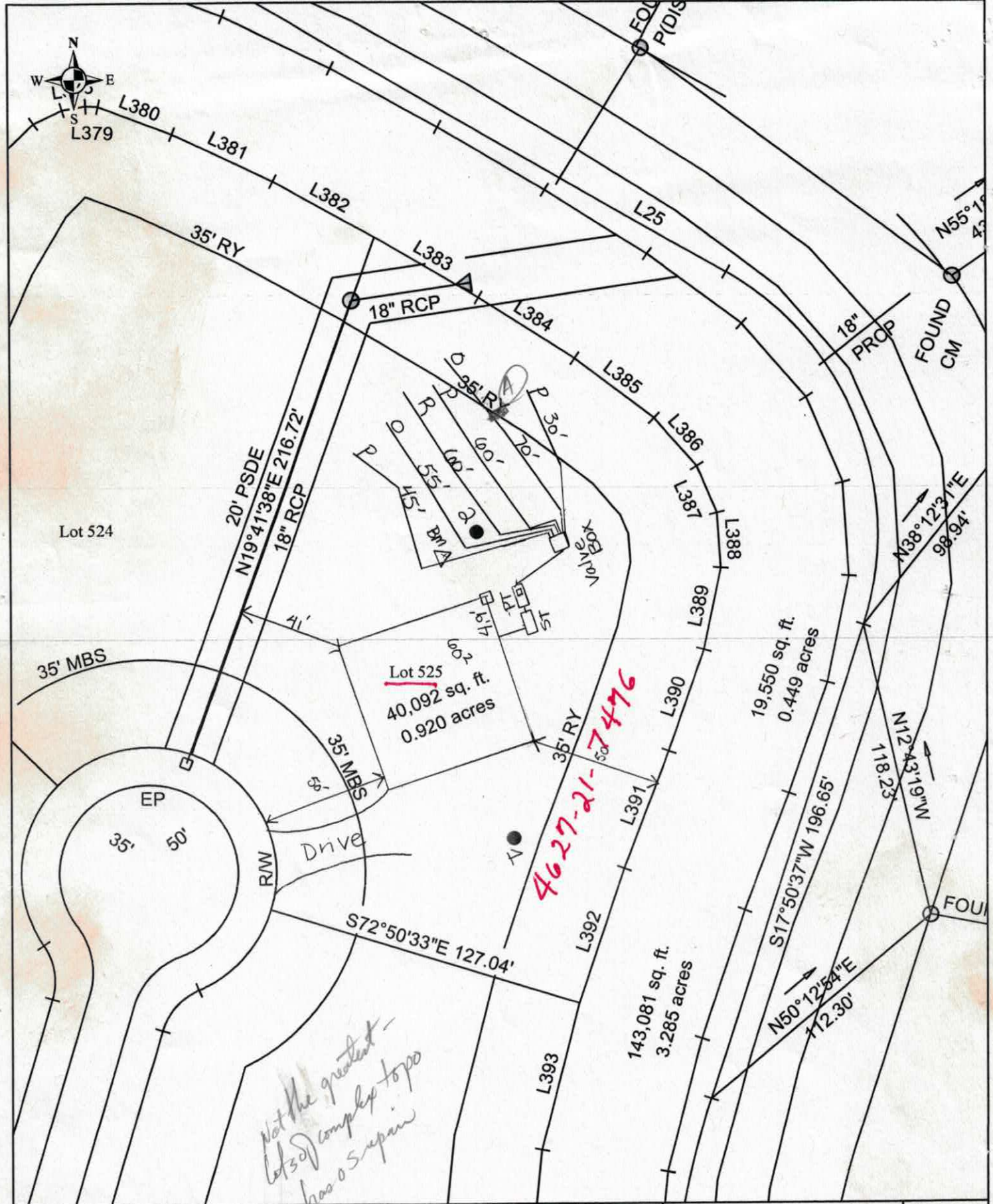
Signed: Kathleen Haver date 10-6-05 Installed by: Stanley Septic

Improvement Permit by: [illegible] date 10-4-05 Operation Permit by: Judy Melville date 10-16-06

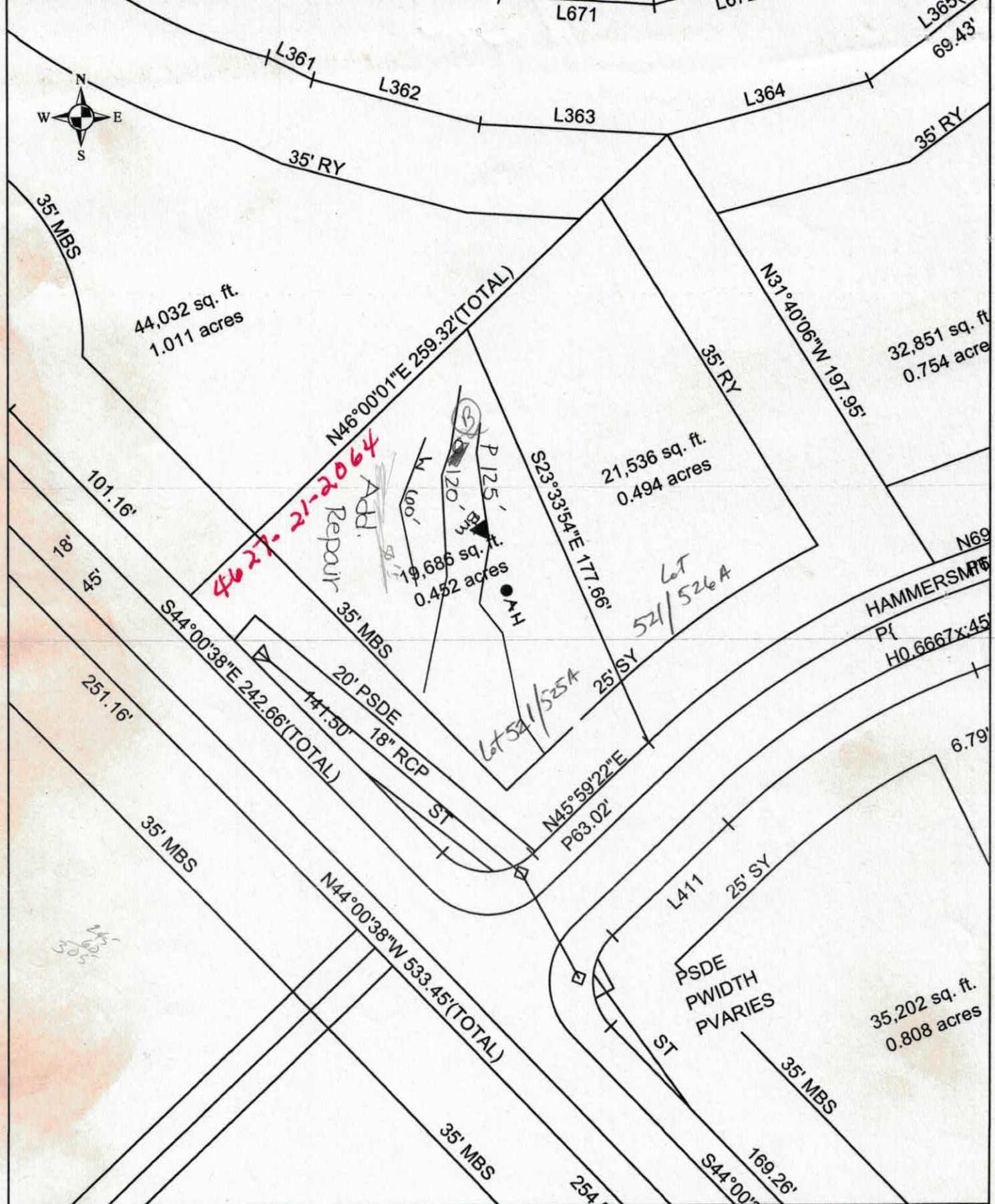
Authorization to Construct by: Judy Melville date 4-7-06 Existing System Inspection by: date

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK

Site address: 132 Hammersmith Farms Ln. - Mooresville



Scale: 1 inch equals 50 feet	S&ME	The Farms Phase 4	FIGURE
Drawn by: JBP	ENVIRONMENTAL SERVICES • ENGINEERING • TESTING	Lot 525	1
Reviewed by: PGP		Iredell County, NC	
Date: September, 2005		S&ME Project #1588-05--070	



Scale: 1 inch equals 50 feet	S&ME	The Farms Phase 4	FIGURE
Drawn by: JBP		Lot	1
Reviewed by: PGP		Iredell County, NC	
Date: September, 2005	ENVIRONMENTAL SERVICES • ENGINEERING • TESTING	S&ME Project #1588-05--070	

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: The Farms Ph 4 APPLICANT:
ADDRESS: APPLICATION DATE: DATE EVALUATED: 6/20
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE:
LOCATION OF SITE: Lot 525 PROPERTY RECORDED:
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL CLASS & LTA
1	Linear 6-8%	0-5	Mo GR SL	SS SP FR	DK Br				US
		5-10	Mo GR SL	SS SP FR	Br				
		10-24	Mo SBK C	SS SP FR	Red				
		24-52	WK SBK CL	SS SP FI	Red; C/M yel Br & pale F/C 10YR 6/2			Br	
2	Linear 4-6%	0-2	Mo GR SL	SS SP FR	BL				.25 - .3
		2-24	Mo SBK/~~ARK~~ C	SS SP FR	Red; F F sap				
		24-52	WK SBK CL	SS SP FR	Red; C sap &		Relic	yel Br	
A B	10-4-05	0-10	wk SBK loam sl	fi (dry) ss sp					.25-.3
		10-32	SBK RC	fi ss sp SEXP					
		32-55	wk SBK R CL t sap	fi ss sp					
			variety soil - pit over a weak old saw		being dug				
B 4	OS Repair 7% L	0-6	wk SBK l sa sl	fr fr ss sp					.25
		6-24	mod SBK dk R C	fr ss sp SEXP	Fairy relic mottles/ pinkyw.				
		24-52	wk SBK gr cl t sap	fr ss sp					
			t pinkyw.						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
m Type(s)		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:

...ENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
...N OF ENVIRONMENTAL HEALTH
...ATE WASTEWATER SECTION

PROPERTY ID #:
COUNTY:

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: The Farms, LLC APPLICANT:
ADDRESS: APPLICATION DATE: DATE EVALUATED: 6/8
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE:
LOCATION OF SITE: Lot 521 PROPERTY RECORDED:
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	Linear	0-12	Mo SBK/WK ABK C	SS SP FR	Red				.3
		12-35	Mo SBK CL	SS SP FR	Red; F Sap				
		35-48	WK SBK CL	SS SP FR	Yel Br; C Sap				
2	~~Linear~~	~~0-6~~	~~Mo GR SL~~	~~SS SP FR~~	~~Lt Br~~				.25
		6-24	Mo SBK C	SS SP FR	Red				
		24-34	WK SBK CL	SS SP FR	Red; F Sap				
		~~34-48~~	~~WK SBK CL~~	~~SS SP FR~~	Red; C Sap; M Weathered Rocks				
3	Hand Auger #1 Linear	A 0-8	wk sbk scl	SS SP Fr	Red Br				.3
		Bc 8-26	mo sbk cl	SS SP Fr	Red C Sap				
		C1 26-36	massive l	SS SP Fr	Red Orange				
		C2 36-46	massive CSL	SS SP Fr	Pink Orange	26"			
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948):
EVALUATED BY:

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

____ **Property Line measurements are clearly identified…**
____ **All proposed structures are indicated…**
SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
____ **Front and side setbacks from property line…**
____ **Preferred driveway location and configuration, preferred well location…**
____ **Area you prefer your septic system to be placed…**
____ **North arrow, or other sufficient indicator of direction…**

Circle N/A on the following if appropriate:

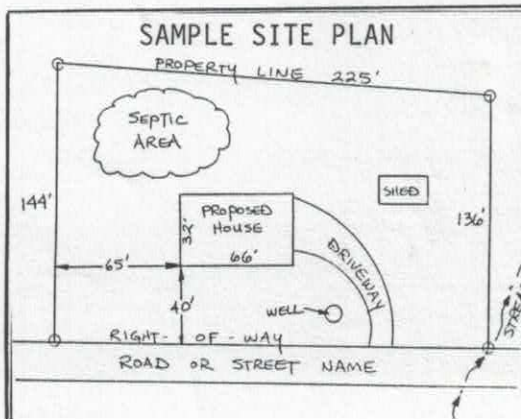
____ **Location of septic systems and wells within 100' of your property…** **N/A**
____ **Location of easements and rights of ways on your property…** **N/A**
____ **Location of any designated wetlands on the property…** **N/A**

Signature: _____ 4-7-06

Property owner or owner's legal representative signature (SIGNATURE REQUIRED) **DATE**

USE THIS SPACE TO DRAW YOUR SITE PLAN

See attached plot plan



IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

- ✓ Property Line measurements are clearly identified…
- ✓ All proposed structures are indicated… *SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site*
- ✓ Front and side setbacks from property line…
- ✓ Preferred driveway location and configuration, preferred well location…
- ✓ Area you prefer your septic system to be placed…
- ✓ North arrow, or other sufficient indicator of direction…

Circle N/A on the following if appropriate:

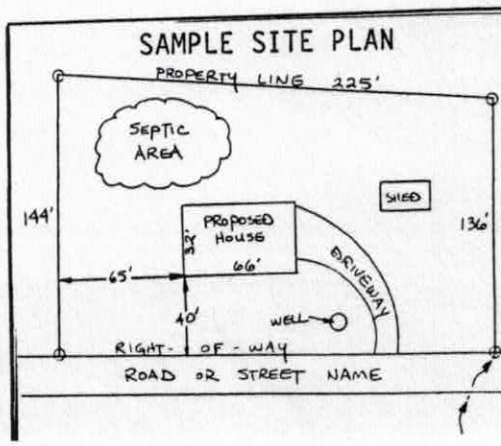
- ___ Location of septic systems and wells within 100' of your property.. (N/A)
- ___ Location of easements and rights of ways on your property… (N/A)
- ___ Location of any designated wetlands on the property… (N/A)

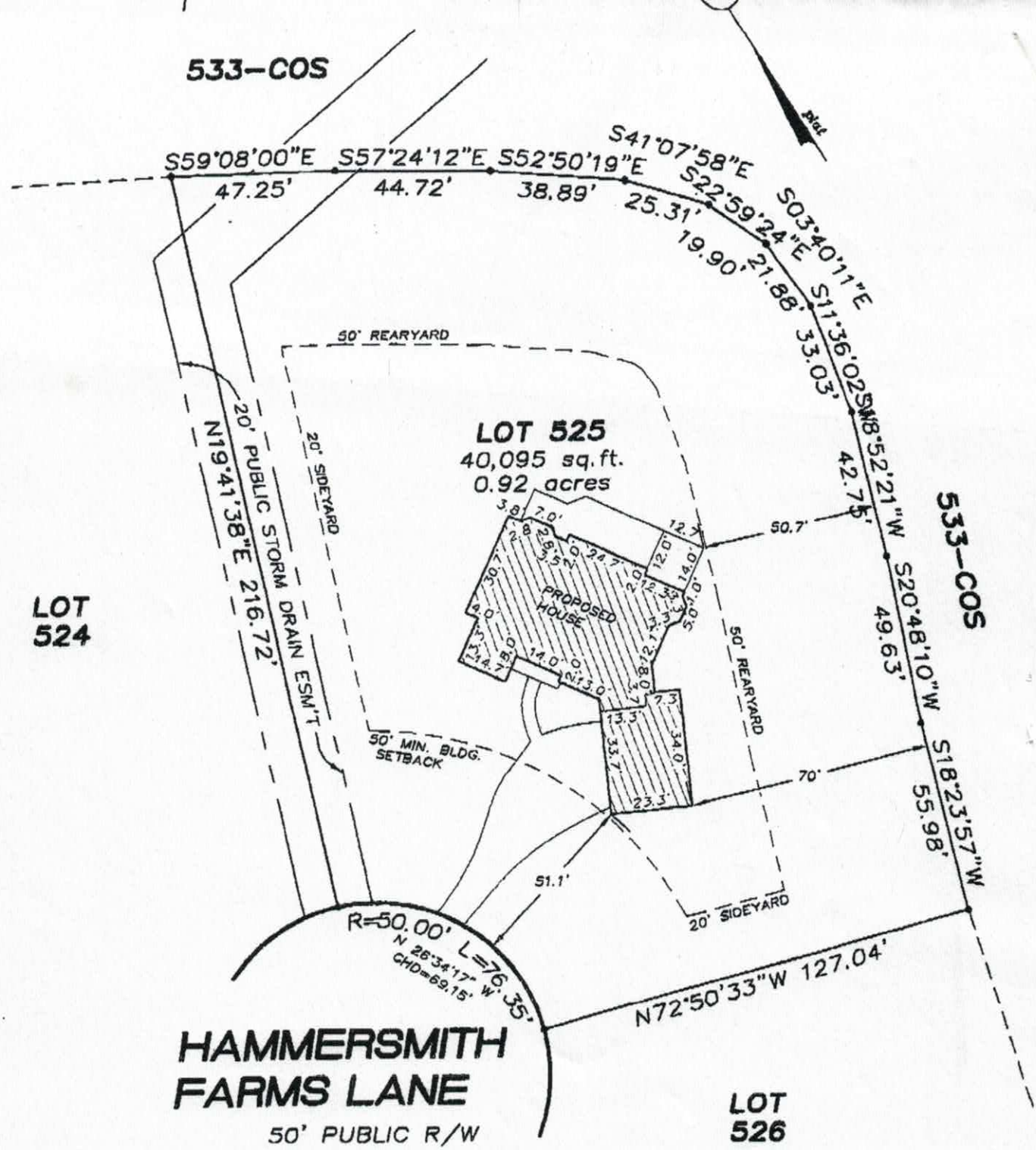
Signature: Kathleen Haven
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6/2/05
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

* Please See Attached





GRAPHIC SCALE

40 0 20 40

PLOT PLAN

OF

LOT 525, THE FARMS PHASE IV

DAVIDSON TOWNSHIP, IREDELL COUNTY, NORTH CAROLINA

SCALE 1"=40'

THE PROPERTY OF: STROM CONSTRUCTION CO.

MAP RECORDED IN BOOK XX AT PAGE XX DEED RECORDED IN BOOK XX PAGE XX

NOTE: OTHER R/W'S OR EASEMENTS MAY EXIST WHICH MAY NOT BE SHOWN.

Lot 525 The Farms at Lake Norman Fast Track Septic System Information

Number of Bedrooms		4
Basement or Crawl		Crawl Space
Design Flow (gpd)		480
LTAR (gpd/ft2)		0.25
Primary System Type		LP PPBPS
No. Lines		1 @ 30' endfed 1 @ 70' endfed 2 @ 60' endfed 1 @ 55' endfed 1 @ 45' endfed
Total Ft. Line		320
Pump Required		Yes
Distribution Device		Gate Valve Box w/ LPP Distribution
Maintenance Agreement Required		Yes
Repair System		LP PPBPS
Total Ft. Line		285
Elevations (Rod Readings)		
Upper Line	System Repair	Pink 4.0' Pink 5.6'
Lower Line	System Repair	Pink 9.4' White 6.06'
Tank		6.9'
House Corner		4.9'
Benchmark	System Repair	2.5' 4.5'

Notes: Benchmark is a cut on a Virginia Pine tree marked with blue flagging
Benchmark for repair is the base of a tree marked with blue flagging

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: ___ Improvement Permit ✓ Authorization To Construct ___ BOTH ___ Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
   The following optional attachments may also be submitted: ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet
   Place check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Strom Construction Inc.	2343 Crofte Dr.	828-478-9460	704-506-4000
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Same as above	Sherrills Ford, NC 28673	same	same

4. **Property Information:**

Street Address	Subdivision Name	Section/Phase and Lot Number
132 Hammersmith Farms Ln.	The Farms	Phase 4 Lot 525

Driving Directions: _____

****

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System

Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non- Residential Site Development:
Type of Business _____
Square Footage of Building _____
Maximum Number of Employees _____
Maximum Number of Seats _____

****

6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well (X) Community Well ( ) City Water ( ) Other Public Water

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) Alternative ( ) Conventional ( ) Innovative (X) Modified Conventional ( ) Other_____ ( ) No Preference

****

8. **Please Answer The Following To The Best of Your Ability:**

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

****

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

9. Signature: _____ 4-7-06
Property owner or owner's legal representative signature (SIGNATURE REQUIRED) DATE

IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: X Improvement Permit ___Authorization To Construct ___BOTH ___Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
   The following optional attachments may also be submitted: ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet
   Place check ( ) beside whichever is submitted if applicable ___ Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

The Farms, LLC (Applicant Name)	2814 Brawley School Rd, Mooresville, NC 28117 (Mailing Address)	(Home Phone)	704-660-1185 (Work Phone)
The Farms, LLC (Owner Name)	same (Mailing Address)	(Home Phone)	same (Work Phone)

4. **Property Information:**

(Street Address) | The Farms (Subdivision Name) | Ph 4 / Lot 525 (Section/Phase and Lot Number)

Driving Directions: Brawley School Rd, R on McKendree, R Lakeview Shore Loop, on Left.

****

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

- X New, Single Family Residence
- ( ) New, Multi-Family Residence
- ( ) Expansion of Existing Septic System
- ( ) Repair To Failing Septic System

Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

- X Crawl Space Foundation?
- ( ) Concrete Slab Foundation?
- ( ) Basement w/Plumbing?
- ( ) Basement w/out Plumbing?

IF Non- Residential Site Development:
Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

****

6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well X Community Well ( ) City Water ( ) Other Public Water

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

(4) Alternative (1) Conventional (2) Innovative (3) Modified Conventional ( ) Other_____ ( ) No Preference

****

8. **Please Answer The Following To The Best of Your Ability:**

( ) Yes X No Does the site contain any jurisdictional wetlands?
( ) Yes X No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes X No Is the site subject to approval by any other public agency?

****

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

9. Signature: Kathleen Haver — 6/2/05
   Property owner or owner's legal representative signature (SIGNATURE REQUIRED) — DATE

Acknowledgement Of
Plans Submittal ONLY!
-Andy Michelli Date 4-8-06
Date
SECOND FLOOR PLAN
Deck Rail
Deck Rail
No Bonus

Check Rev
(9' P.P.)
FIRST FLOOR PLAN
SCALE: 1/4" = 1'-0"
3 CAR GARAGE
4" conc. slab
GREAT ROOM
KITCHEN
NOOK
LAUNDRY
ENTRY
LIVING
Check Rev
Check Rev
Check Rev
46'-0"
44'-0"
30'-8"
16'-7"
14'-1"
13'-4"
50'-0"

Iredell County
ZONING PERMIT

227 South Center St. PO Box 788 Statesville, NC 28687 Phone 704-878-3118

Call Sanitarian between 8 a.m. & 9 a.m. Statesville 704-878-5305 Mooresville 704-664-5281

Permit #:	131459zo	Subdivision:	The Farms Phase 4
Proposed Use:	Single Family	Township:	1700 Davidson
Location of Property:	000 Hammersmith Farms Ln. Mooresville NC 28117		
Parcel #:	4626071828.525	Zoning:	R20
Lot #:	525 Size: .920	Flood Plain:	No Watershed: WSIV-CA
Applicant:	S&ME INC. ENGINEERING (Toney Jacobs)	Owner:	CRESCENT RESOURCES INC
Address:	105D DENVER BUSINESS PARK DR Mooresville NC 28115	Address:	P O BOX 1003 CHARLOTTE, NC 28201
Phone:	704-662-8625	Phone:	
Property Recorded:	Yes Site Plan Reviewed:	Community Water:	No Community Sewer:

If permitted the following minimum requirements must be met, unless Health Department requires more land area, or other qualifications are indicated in the comments.

Min. Lot Area: 30000	Min. Front Yard: 35 ft	Min. Left Side Yard: 15 ft
Min. Lot Width: 100	Min: Rear Yard: 5 ft	Min: Right Side Yard: 15 ft
Min. Number Parking Spaces:		Max. Built Upon Area:

Comments:

Hold Building permit till plat has been recorded.

DEVELOPER PERMIT

Directions:

Brawley School, right Williamson,right Mckendree,right Lake Shores Lp, left Grove Creek Way, right Hammersmith Farms Ln, property at end of cul-de-sac

FEES

Zoning Permit/Inspection Fee	☑	$45.00
Site Plan Review Fee	☐	$0.00
Environmental Health New System	☑	$200.00
Environmental Health Existing System	☐	$0.00
Total Fees:		$245.00

I certify that all statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Health Department and Planning & Enforcement Representatives are granted right of entry to make evaluations or inspections and to release information upon public request.

Applicant:_____ Date: _____

A non-refundable fee of $45.00 is charged on all permit applications.

DEBBIE WILLIAMS Printed: 9/20/2005

ON SITE SEWAGE TREATMENT CONTRACT AND AGREEMENT

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

CONTRACT FOR INSPECTION AND MAINTENANCE GROUND ABSORPTION SEWAGE TREATMENT AND DISPOSAL SYSTEM LOT NUMBER 525, PHASE 4 ("THE LOT") THE FARMS

(I), (WE), as the owners of Lot(s) Number 525, Phase 4 of the subdivision known as The Farms, have certain duties and responsibilities for the maintenance of any ground absorption sewage treatment and disposal system as regulated and set out in N.C.G.S. Article II, Chapter 130A; T15A-C18-S18A.1961 "Maintenance of Sewage Systems"; and under the "Declaration of Covenants, Conditions and Restrictions-The Farms", (the "Declaration") as recorded in the Register of Deeds of Iredell County, North Carolina, in Book 1479, Page 745 et seq., and under the Bylaws of The Farms Owners Association, Inc.

The Farms Owners Association, Inc. ("The Association") in order to provide for uniform inspection, maintenance, and repair and operation of sewage treatment and disposal systems within The Farms, has entered into a Master Agreement dated the 1st day of May, 2007, which Master Contract with Tri-County Wastewater Management, Inc., a memorandum of which is recorded in Deed Book 1864, Page 702-708 in the office of the Register of Deeds for Iredell County, North Carolina and is incorporated fully by this reference thereto.

The undersigned lot(s) owner(s) hereby agrees and contracts with Tri-County Wastewater Management, Inc. and with The Farms Owners Association, Inc. as follows:

1. The Master Contract referred to above is hereby accepted, agreed, and is binding upon the undersigned with Tri-County Wastewater Management, Inc. and it's successors and assigns. The undersigned lot owner(s), their successors, and assigned agree to be bound by this Master Contract and any further or future contracts in substitution thereof.

2. The undersigned lot owner(s) further acknowledge and agree that The Farms Owners Association, Inc. acting by and under it's Declaration of Covenants, Conditions, and Restrictions-The Farms, has recorded in Book 1479 at Page 745 et seq. in the office of the Register of Deeds for Iredell County, North Carolina has and is hereby granted the full power and authority to assess the undersigned for fees, expenses, and costs associated with the inspection, maintenance, and or repair of septic disposal systems on the lot.

This agreement is binding upon the undersigned, their heirs, administrators, personal representatives, successors, and assigns, and the transfer and assignment of the duty and responsibility to contract with a qualified maintenance contractor (operator) is a covenant running with the land ("The Lot"). This agreement will terminate: (1) when The Association is dissolved or liquidated; or (2) when the undersigned has no legal duty to maintain a sewage disposal system on "The Lot".

Witness our hands and legal seals, this 21 day of October, 2008.

Jeff R. Herman (SEAL)
Signature

JEFFREY R. HERMAN
Owners Printed Name

(SEAL)
Signature

Owners Printed Name