IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

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

PERMIT# 135527 PIN# 4649 95 8417 DATE 5/30/06

OWNER OR APPLICANT CMH HOMES INC. PHONE: Business 865-380-3000 Home

ADDRESS PO BOX 9790 MARYVILLE, TN 37802

LOCATION 112 CROIS CT. 115-21 N TL SAILWINAS TL CRYSTAL BAY TL CROIS CT. ON (R) OFF CULDESAC

SUBDIVISION WINWARD PT. BLOCK / SECTION 3 LOT 170 LOT AREA .52 AC SITE CLASS. PS DESIGN FLOW 360 L.T.A.R. .3

Septic Tank: 1000 Gallons; STB 760 Date 3/9/06
Pump Tank: Gallons; PT Date
Pump Make: Model Serial No.
Nitrification Field: No Fields 1 Square Feet 900 Linear Feet 300
No Lines 3@100' Trench Width 3' Max Trench Bottom Depth 3'

[X] New System [ ] Repair [ ] Expansion System Type: I II III IV V VI
System Description: GRAVITY - 25% REDUCED
Repair System Description: PRES - 16" PPBPS
Maintenance Agreement Required: [ ] Yes [X] No

[X] House/Mod. Home [ ] Mobile Home [ ] Business [ ] Other
No. Bedrooms 3 No. Persons No. Employees

Water Supply: [X] Individual [ ] Public [ ] Community

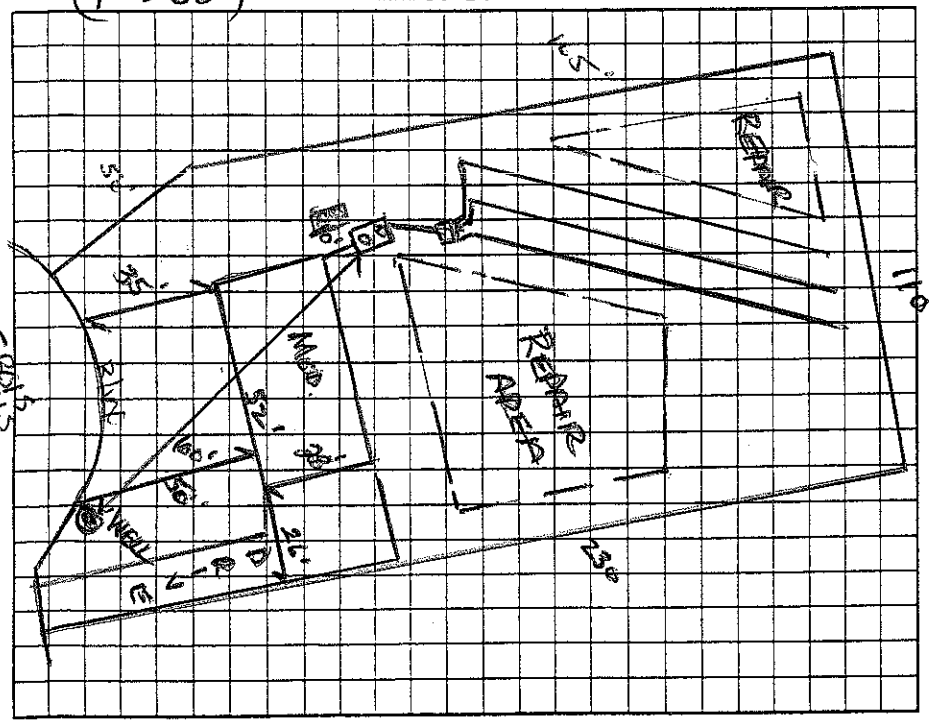
Gravel Depth NA [X] Gravity [ ] Pressure [ ] Slab [X] Crawl Space [ ] Basement w/plumbing [ ] Basement wo/plumbing

Comments:/Conditions:

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(1" = 50')

INITIAL SITE SKETCH



AS BUILT SKETCH

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: X [signature] date 5/31/06

Improvement Permit by: Wesley Sparks RS. date 5/30/06

Authorization to Construct by: Wesley Sparks RS date 5/30/06

Installed by: [signature]

Operation Permit by: Wesley Sparks RS. date 6/2/06

Existing System Inspection by: date

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