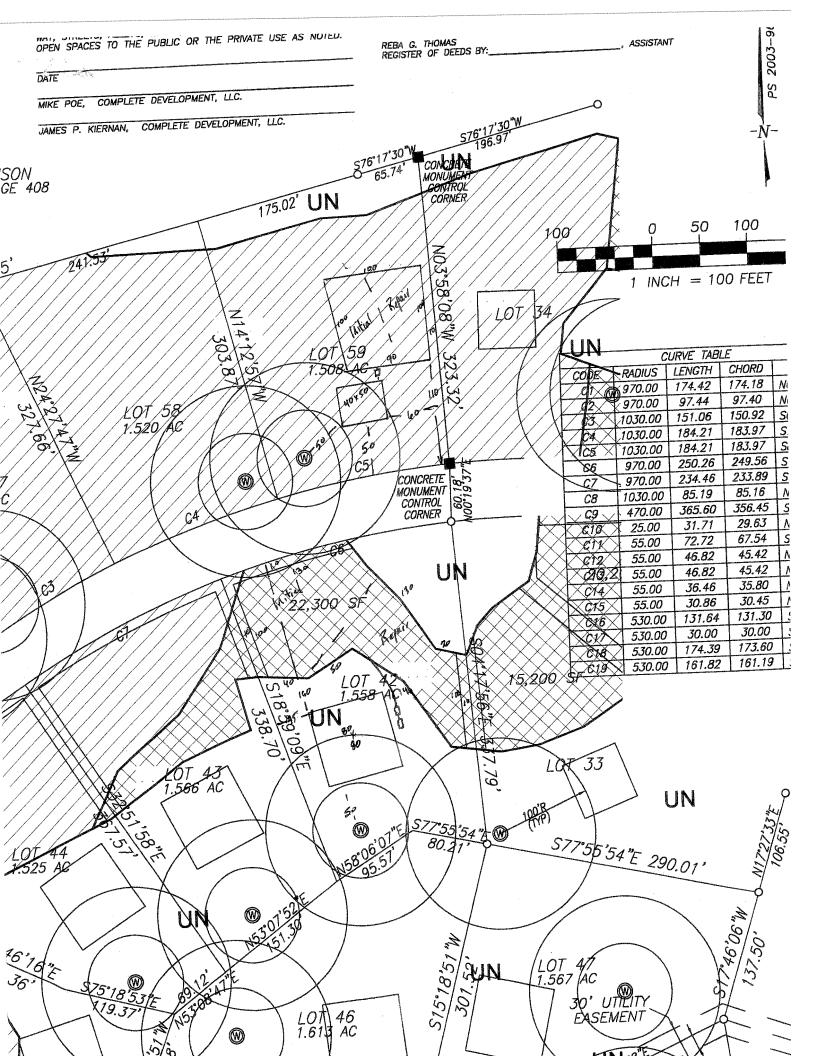
80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208 Fax (919) 542-8288

OFFICE USE ONLY TPN _____ Permit No. System Type _____

Improvement Permit for Wastewater Systems ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

NEW X REPAIR A EXPANSION REVISED
An Improvement Permit is issued to Complete Dev.
1.5+ acre site located Lot 42 Cathail Creek
n Chatham County. It is specifically issued for the following facility:
Facility: Residential (>) Non-Residential ()
No. Bedrooms No. Residents/E mployees
Type Wastewater: Residential () Commercial ()
Initial System Type: I() II() III(y) IV() V() VI()
Description
Type System: Shallow Conventional () LPP ()
Other Pump to Accepted 25% Reduction (at grade)
Design Flow
Size Tank(s) w/Risers and Effluent Filter ST <u>LOOO</u> Gal PT <u>LOOO</u> Gal
Nitrification Line (Length/Width/Max Depth) 360' × 3' × (Z''
6" cover required over system atta
(On contour in approved septic area; sch. 40 PVC required over step-downs)
Repair System Type: I() Ⅱ() Ⅲ(尨) Ⅳ() Ⅴ() Ⅵ()
Description Pump to Acuptul 25% Reduction (at grade)
Special Conditions
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system, existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications; and any other information required by the department must be attached to be valid. Septic tank riser 6" above grade required over outlet access port as a visible marker for the septic tank. Solid PVC with elbows must be used to construct conveyance over dams or stepdowns.
This permit is valid $[\]$ without expiration $[\ \mathcal{V}]$ for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.
Issued by <u>Modus</u> . Bayce 7.5. Environmental Health Specialist
Environmental Health Specialist
N.C. Registration Number 1353
PS 10-00 rev 2-01 9-01 1-02 12-04 11-07 Date 7-1-09

Date



80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208 Fax (919) 542-8288

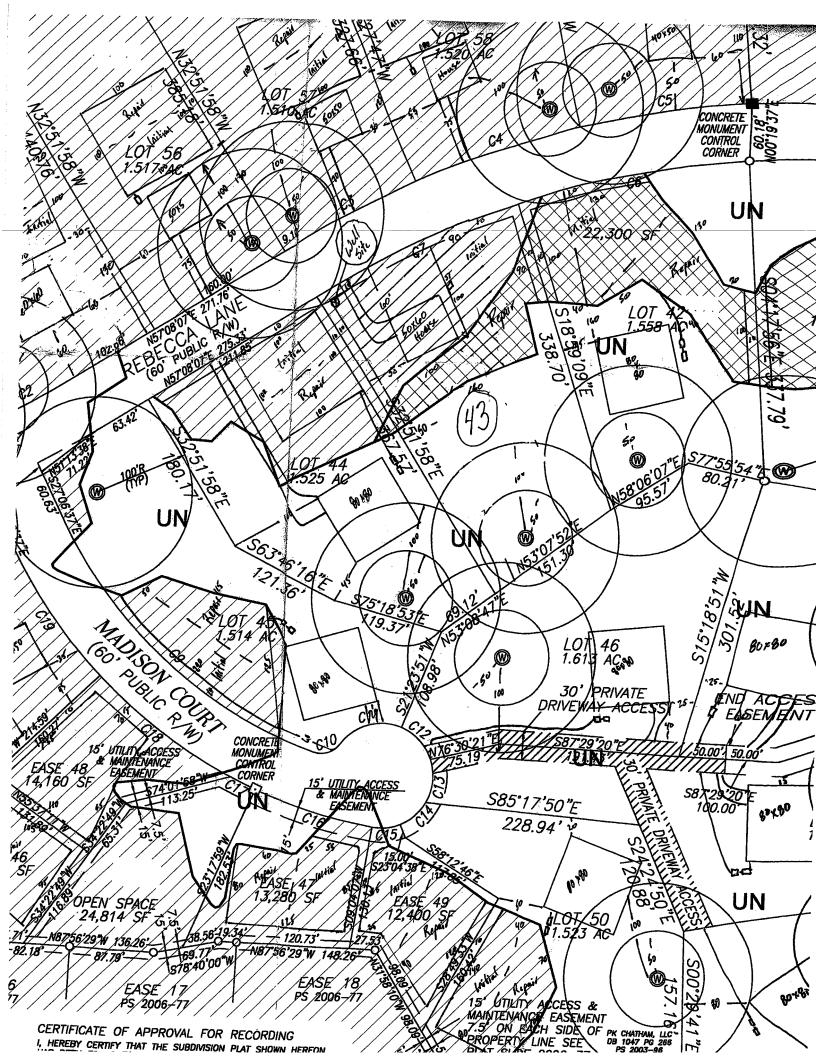
TPN
Permit No
Date
EHS
System Type

Improvement Permit for Wastewater Systems

ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

NEW REPAIR	
An Improvement Permit is	re site located <u>Cartail Creek Lot 43</u>
	specifically issued for the following facility:
Facility:	Residential () Non-Residential ()
<u>-</u>	3 No. Residents/Employees 6 Max
	Residential () Commercial ()
Initial System Type	e: I () II () IV () V () VI ()
Description Type System:	
	Other
_	360 EGPD Application Rate . 275 GPD/ft²
	ers and Effluent Filter ST 1000 Gal PT Gal
Nitrification Line (L	ength/Width/Max Depth) 440'r3'r/8" or 330'r3'r/8" Accepted
Description	De: 1() 11(X) 111() IV() V() VI() At-Grade Accepted
Special Conditions	
existing buildings, propert and any other information Septic tank riser 6" above	ng specific location of the facility, the site for the proposed wastewater system, y lines, water supplies, surface waters, the conditions for any site modifications; required by the department must be attached to be valid. grade required over outlet access port as a visible marker for the septic tank. ust be used to construct conveyance over dams or stepdowns.
altered, soil disturbed, set	rithout expiration [x] for five years but is subject to revocation if the site is backs violated, or the plans of intended use are changed. shall not be affected by change in ownership.
THIS IS NOT AUTHORIZ obtained from this departr	ATION TO INSTALL. An authorization for Wastewater Construction must be nent before installation.
	Issued by <u>Homas</u> . <u>Bonce</u> R.5. Environmental Health Specialist
	N.C. Registration Number
CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07	Date 5-3-07

Date

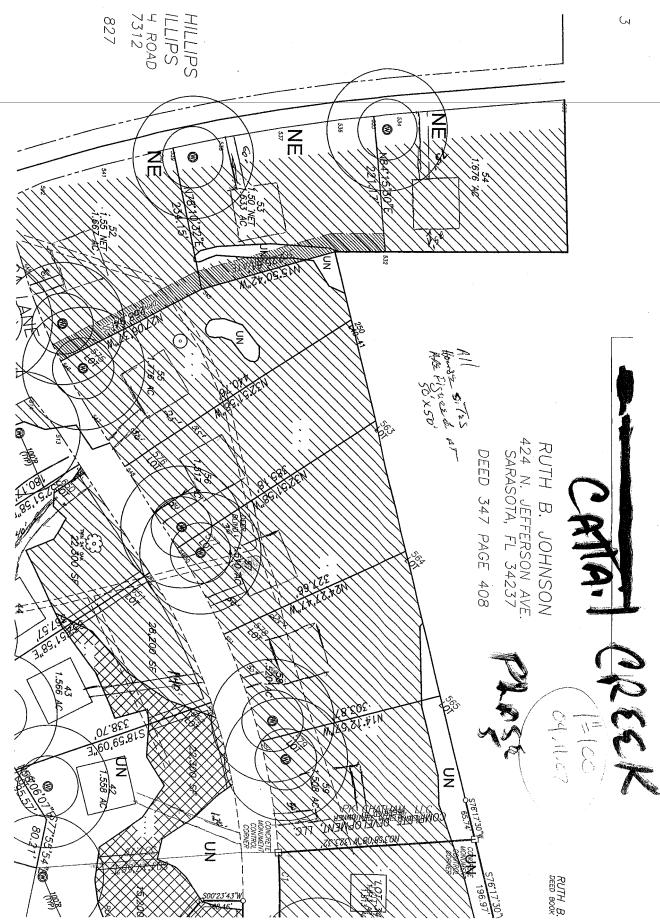


80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Fax (919) 542-8288 Phone (919) 542-8208

Improvement Permit for Wastewater Systems

OFFICE USE ONLY
TPN
Permit No.
Date
EHS
System Type

NEW An Improvement Permit is	issued to Complete Dev	for
	re site located Lot 44 Cattail Creek	٠٠٠.
	specifically issued for the following facility:	
	Residential (x) Non-Residential ()	
	No. Residents/Employees 6 Max	
Type Wastewater:	Residential () Commercial ()	
	e: I() II(x) III() IV() V() VI()	
	Shallow Conventional () LPP () Other Accepted	
Design Flow	3 leo EGPD Application Rate , 2,75 GPD/ft²	
Size Tank(s) w/Ris	ers and Effluent Filter ST <u>/000</u> Gal PTGal	
Nitrification Line (L	ength/Width/Max Depth) 330′ x3′ x/8′′	
`	roved septic area; sch. 40 PVC required over step-downs)	
Repair System Typ Description	De: 1() 11(x) 111() IV() V() VI() Accepted	
Special Conditions		_
opeciai conditions		
existing buildings, property and any other information Septic tank riser 6" above	ng specific location of the facility, the site for the proposed wastewater system, values, water supplies, surface waters, the conditions for any site modifications; required by the department must be attached to be valid. grade required over outlet access port as a visible marker for the septic tank. st be used to construct conveyance over dams or stepdowns.	
altered, soil disturbed, set-	ithout expiration [χ '] for five years but is subject to revocation if the site is backs violated, or the plans of intended use are changed. Shall not be affected by change in ownership.	
THIS IS NOT AUTHORIZA obtained from this department	ATION TO INSTALL. An authorization for Wastewater Construction must be nent before installation.	
•	Issued by Shomus Boyn R.S. Environmental Health Specialist	_
¥	N.C. Registration Number 1353	
CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07	Date 5-3-09	



Caffail Crek Lot 43

CHATHAM COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH DIVISION**

80 East Street P. O. Box 130 Pittsboro, NC 27312-0130

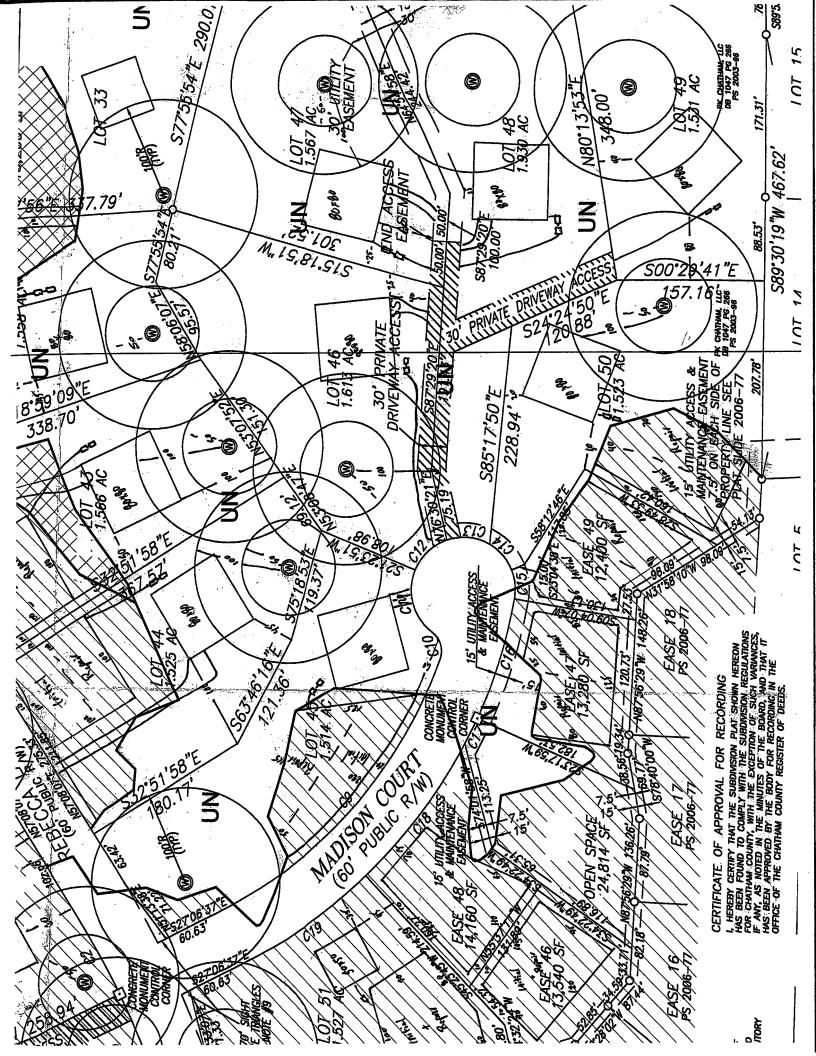
OFFICE USE ONLY

Permit No. _____

System Type _____

Improvement Permit for Wastewater Systems

NEW 🗵 REPAIR 🗆 EXPANSION 🗆 REVISED 🗖
An Improvement Permit is issued to Complete Div.
a 1.514 acre site located Lot 45 Catail Crule
in Chatham County. It is specifically issued for the following facility:
Facility: Residential (*) Non-Residential ()
No. Bedrooms 3 No. Residents/Employees 6 max
Type Wastewater: Residential (k) Commercial ()
Initial System Type: I() Ⅱ(🍎) Ⅲ (乆) Ⅳ() Ⅴ() Ⅵ()
Description
Type System: Shallow Conventional () LPP ()
Other pump to conv.
Design Flow
Size Tank(s) w/Risers and Effluent Filter ST <i>[000</i> GalPT <i>[000</i> Gal_
Nitrification Line (Length/Width/Max Depth) 440' x 3' x/8"
(On contour in approved septic area; sch. 40 PVC required over step-downs)
Repair System Type: I() II() III(IV() V() VI()
Description pump to Accepted
Special Conditions
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system, existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications; and any other information required by the department must be attached to be valid. Septic tank riser 6" above grade required over outlet access port as a visible marker for the septic tank. Solid PVC with elbows must be used to construct conveyance over dams or stepdowns.
This permit is valid [] without expiration [) for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.
Issued by homas . Dogu K.S. Environmental Health Specialist
N.C. Registration Number
N.C. Registration Number



911 Address

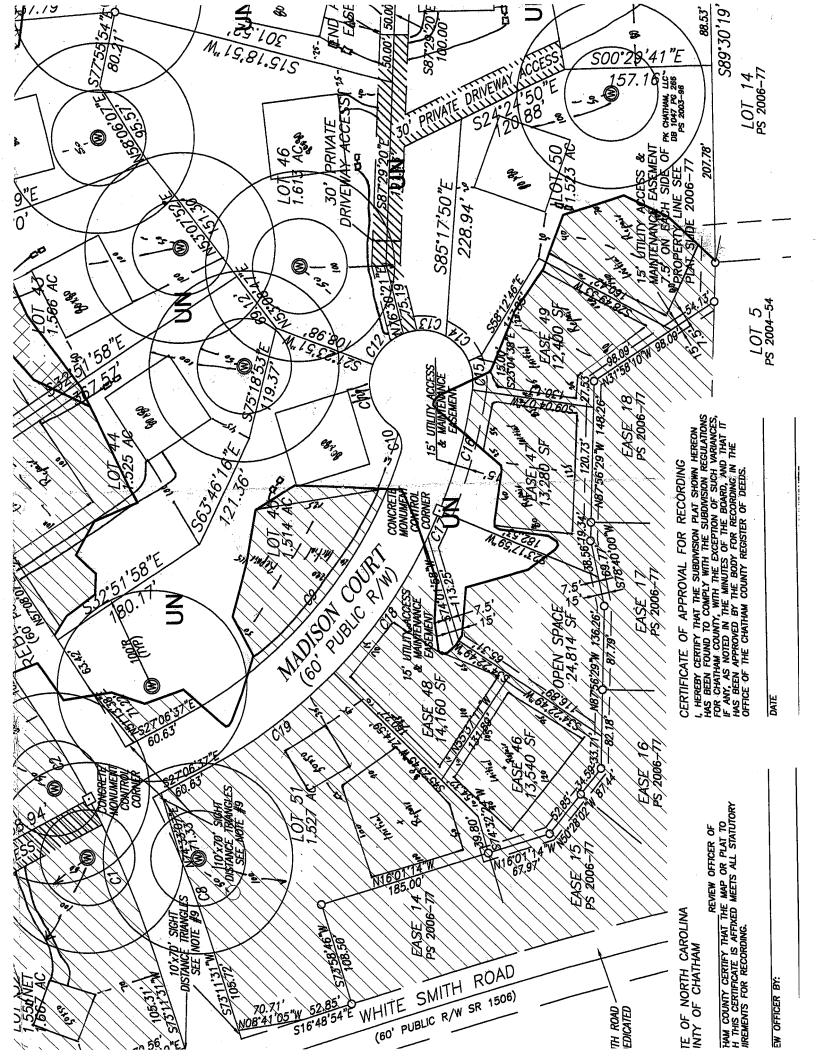
Catter! Cut lot 46

CHATHAM COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

80 East Street P. O. Box 130 Pittsboro, NC 27312-0130
Phone (919) 542-8208 Fax (919) 542-8288

TPN
Permit No.
Date
EHS
System Type

NEW 💯	REPAIR \square	EXPANSION REVISE	D 🗖
An Impro	vement Permit is issued	Complete Dev.	
		ated 10+ 46 Cattail Creek	
n Chatha	am County. It is specifica	y issued for the following facility:	
Fa	acility: Resi	ential (🖍) Non-Residential ()
No	o. Bedrooms3_	No. Residents/Employees 4 me	<u>v</u>
Ту	ype Wastewater: Resi	ential (人) Commercial ()	
Ini	itial System Type: Description	() () (x) ()	V () VI ()
Ту	ype System: Sha	ow Conventional () LPP ()	
	Othe	Pump to Accepted	_
De	esign Flow <i>360</i>	EGPD Application Rate	275 GPD/ft ²
. Si	ize Tank(s) w/Risers and	ffluent Filter ST <u>/000</u> Gal PT	Gal
		ith/Max Depth) 330' x 3' x 18"	
Re	epair System Type: Description	Pump to Accepted	V () VI ()
Sp	pecial Conditions		
existing b and any o Septic tar	ouildings, property lines, v other information required ook riser 6" above grade re	c location of the facility, the site for the properties supplies, surface waters, the conditions by the department must be attached to be vuired over outlet access port as a visible med to construct conveyance over dams or stee	s for any site modifications; valid. arker for the septic tank.
altered, so	oil disturbed, set-backs v	piration [∕] for five years but is subject lated, or the plans of intended use are char e affected by change in ownership.	ect to revocation if the site is nged.
	NOT AUTHORIZATION T from this department befo) 7
		Issued by <u>Jh Man V.</u> Environmenta	al Health Specialist
		N.C. Registration Number	1353
'S 10-00 rev 2-01 9	9-01 1-02 12-04 11-07	Date	6-3-09



911 Addres

Cathil Coule Lot 47

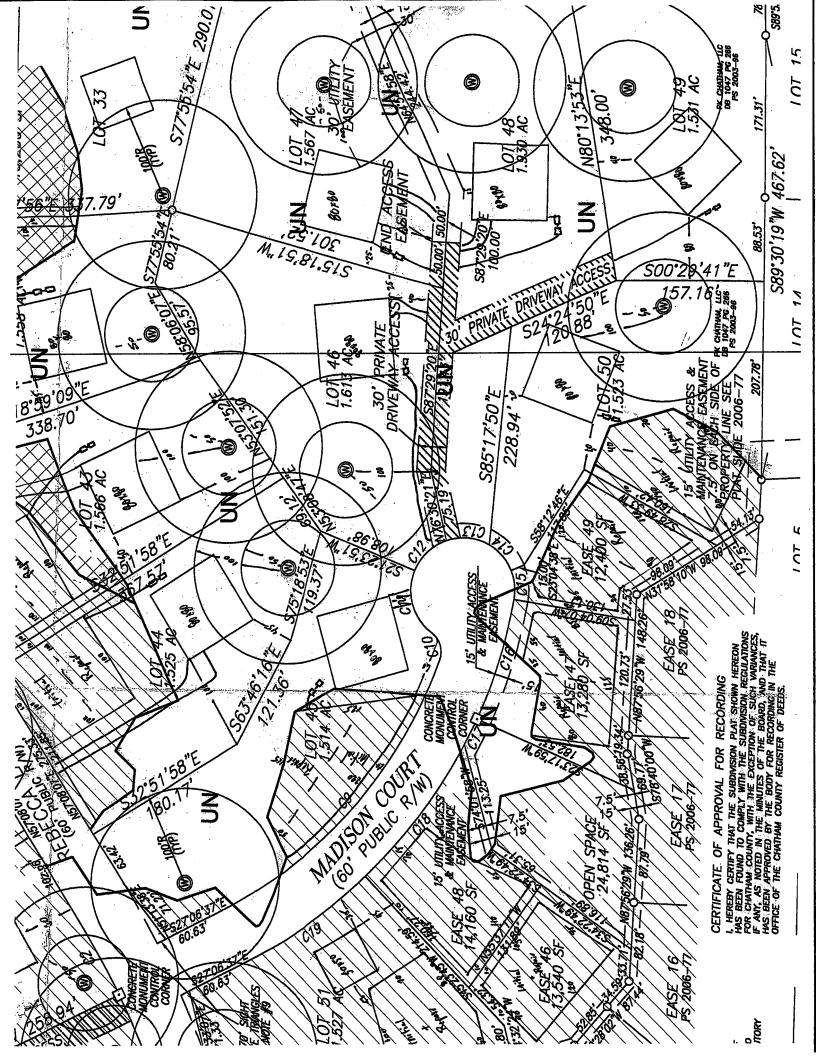
CHATHAM COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

80 East Street P. O. Box 130 Pittsboro, NC 27312-0130
Phone (919) 542-8208 Fax (919) 542-8288

Improvement Permit for Wastewater Systems

OFFICE USE ONLY					
TPN					
Permit No.					
Date					
EHS					
System Type					

NEW 🗵	REPAIR C]	EXPANSION		REVISE	o 🗖		
An Improveme	ent Permit is is:	sued to	Comple	6 Dex				for
	7 acres			1111	reck			
in Chatham Co		_	•	owing facility	y:			
Facility		Residential	(X)	Non-Re	esidential (•		
	drooms							
• • • • • • • • • • • • • • • • • • • •	Vastewater:		• •	Comm	• •			
	System Type: scription	1 () ()	III (x)	IV (V ()	VI ()	
Type S	System:		nventional(<i>Pump to</i>)			
Design	Flow				on Rate .	- <i>225</i> GI	PD/ft²	
_	ank(s) w/Risers					1000	Gal	
	ation Line (Len							
	•		. /					
(On co	ntour in approv	ved septic are	ea; sch. 40 P\	/C required	over step-do	owns)		
Repair	System Type:	1 () ()	III (<i>A</i> ')	IV ()	V ()	VI ()	
Des	cription	Dur	no to	Accord				
	l Conditions	/	/					
'								
A plat with site existing buildin and any other Septic tank rissolid PVC with	ngs, property lii information red er 6" above gra	nes, water su quired by the ade required	ipplies, surfac department r over outlet ac	ce waters, the must be atta ccess port a	ne conditions iched to be v s a visible m	for any site alid. arker for the	modifications	
altered, soil dis	valid [] with sturbed, set-ba lent Permit sha	icks violated,	or the plans	of intended	use are char		ation if the site	is
	AUTHORIZAT this departmer		allation					
•			Issued by_	Show	nvironment	yu 7.5. al Health Sp	ecialist	
*					umber/	_		· · · · · ·
CPS 10-00 rev 2-01 9-01 1-02	12-04 11-07				Data 4	-3-19		



CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07

* 80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208

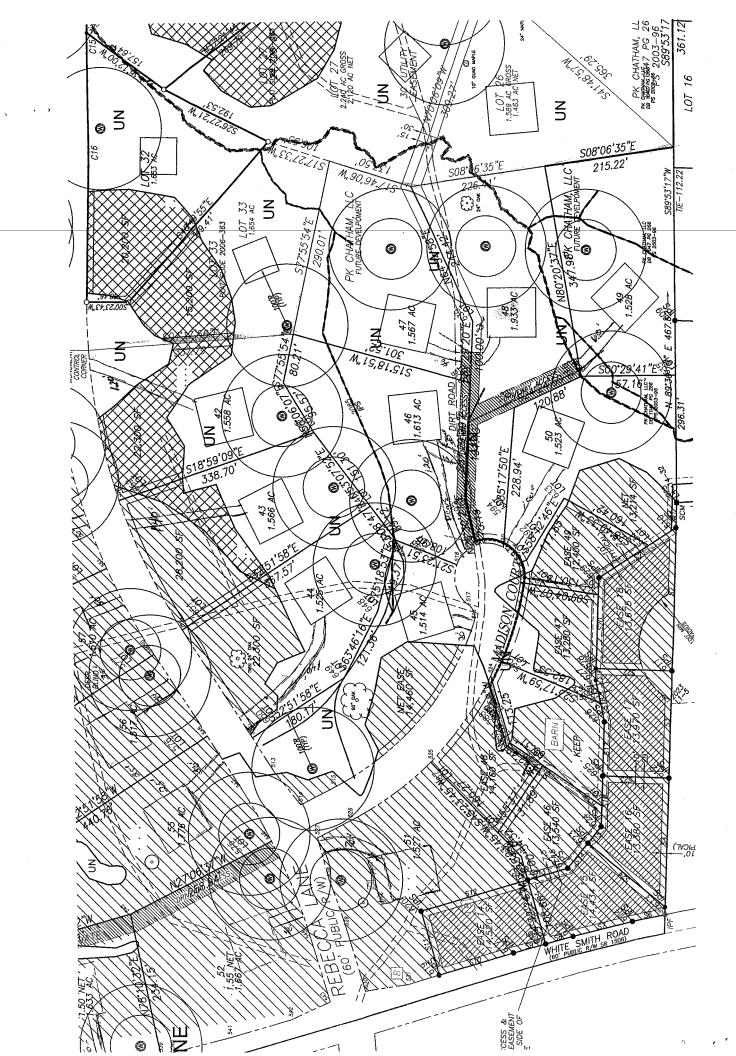
Fax (919) 542-8288

Improvement Permit for Wastewater Systems ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

TPN
Permit No
Date
EHS
System Type

OFFICE USE ONLY

NEW REPAIR EXPANSION REVISED	
An Improvement Permit is issued to Complete Devi	foi
a 1.930 acre site located Lot 48 Catail Cruk	
in Chatham County. It is specifically issued for the following facility:	
Facility: Residential (¢) Non-Residential ()	
No. Bedrooms 3 No. Residents/Employees Le May	
Type Wastewater: Residential () Commercial ()	
Initial System Type: I() II() III(火) IV() V() VI() Description	
Type System: Shallow Conventional () LPP () Other Funt to Accepted	
Design FlowBGPD Application Rate, 275GPD/ft²	
Size Tank(s) w/Risers and Effluent Filter ST <i>[000</i> Gal PT <i>[000</i> Gal	
Nitrification Line (Length/Width/Max Depth) 330'x 3'x/g"	
(On contour in approved septic area; sch. 40 PVC required over step-downs)	
Repair System Type: I () II () III (») IV () VI () Description Funt to Accepte	
Special Conditions	
epodal conditions	
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications and any other information required by the department must be attached to be valid. Septic tank riser 6" above grade required over outlet access port as a visible marker for the septic tank. Solid PVC with elbows must be used to construct conveyance over dams or stepdowns.	
This permit is valid [] without expiration [] for five years but is subject to revocation if the site altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.	∌ is ⊸
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.	
Issued by <u>Armus</u> J. <u>Boya</u> 7.5. Environmental Health Specialist	
Environmental/Health Specialist	
N.C. Registration Number	



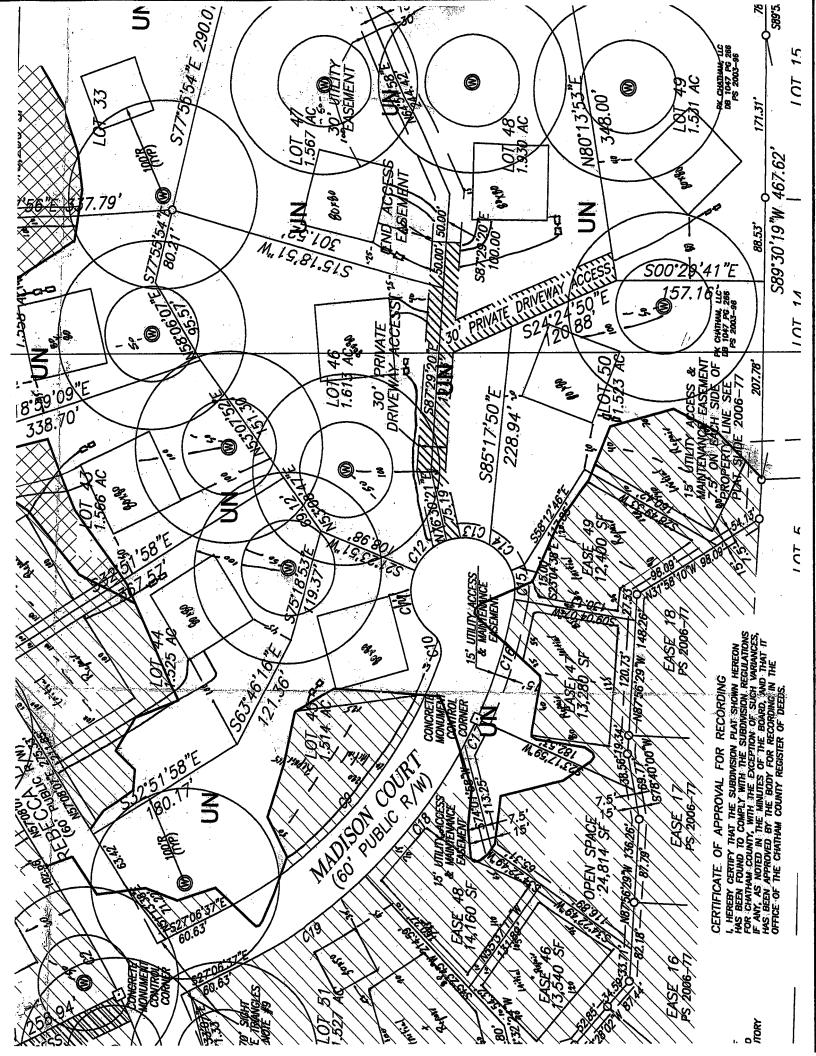
80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208

Fax (919) 542-8288

Improvement Permit for Wastewater Systems

OFFICE USE ONLY
TPN
Permit No.
Date
EHS
System Type

NEW 🔀		KPANSION L		REVISED			
	rement Permit is issued to	7	14.	Col			fo
	acre site located	•	Cattail	(rufe			
	m County. It is specifically issued for cility: Residential (ing racility: Non-Resid	lontial (1		
	cility: Residential (/ b. Bedrooms 3 No	•			,		
	pe Wastewater: Residential (//			_			
•	tial System Type:	•		, ,	V ()	VI ()	
	Description	()	🗴 /	- ()	- ()	()	
Ту	pe System: Shallow Conve	ntional ()	LPP ()				
	Other Tunp	to Acce	otel				
De	sign Flow340	EGPD	Application	Rate <i>2</i> :	7 <u>ブ</u> GP	PD/ft ²	
Siz	ze Tank(s) w/Risers and Effluent Fil	lter ST	1000	Gal PT_	1000	Gal	
Nit	rification Line (Length/Width/Max D)epth)	30' x 3' XI	18"			
(O	n contour in approved septic area;	sch. 40 PVC	required ov	er step-do	wns)		
Re	pair System Type: I()_	, II ()	III (X) I	V ()	V ()	VI ()	
	pair System Type: I() Description	imp to A	ecepted				
Sp	ecial Conditions		-				
·							
existing but and any of Septic tan	a site plan showing specific location uildings, property lines, water supplether information required by the depart of above grade required over with elbows must be used to constitution.	ies, surface op partment mu er outlet acce	waters, the o st be attache ess port as a	conditions ed to be va visible ma	for any site lid. rker for the	modifications	
altered, so	it is valid [] without expiration oil disturbed, set-backs violated, or to overnent Permit shall not be affected	the′plans of i	intended use	e are chan	ct to revocat ged.	tion if the site	is
	OT AUTHORIZATION TO INSTAL rom this department before installa	tion.					
	•	Issued by	_Show	us 4/80	ya 2.5.	ecialist	
¥		N.C. Regist	ration Numb	oer	753		···
4				/	2 . 0		



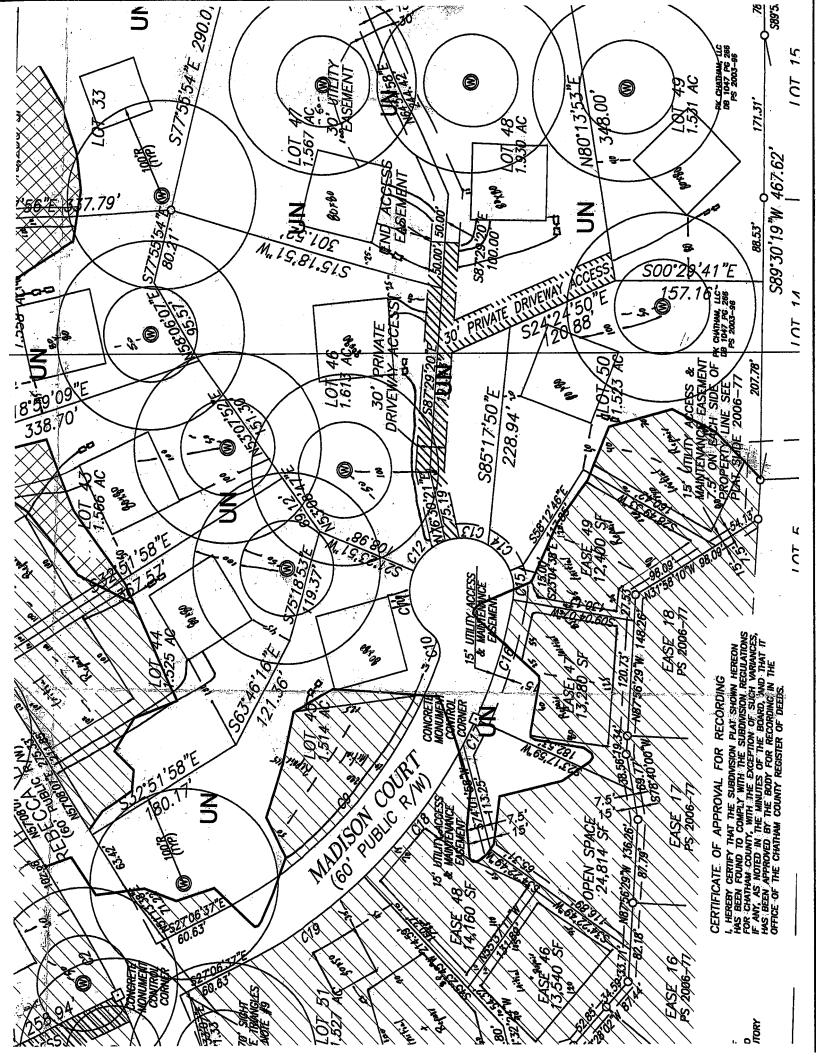
80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Fax (919) 542-8288 Phone (919) 542-8208

Permit No. EHS System Type ___

OFFICE USE ONLY

Improvement Permit for Wastewater Systems

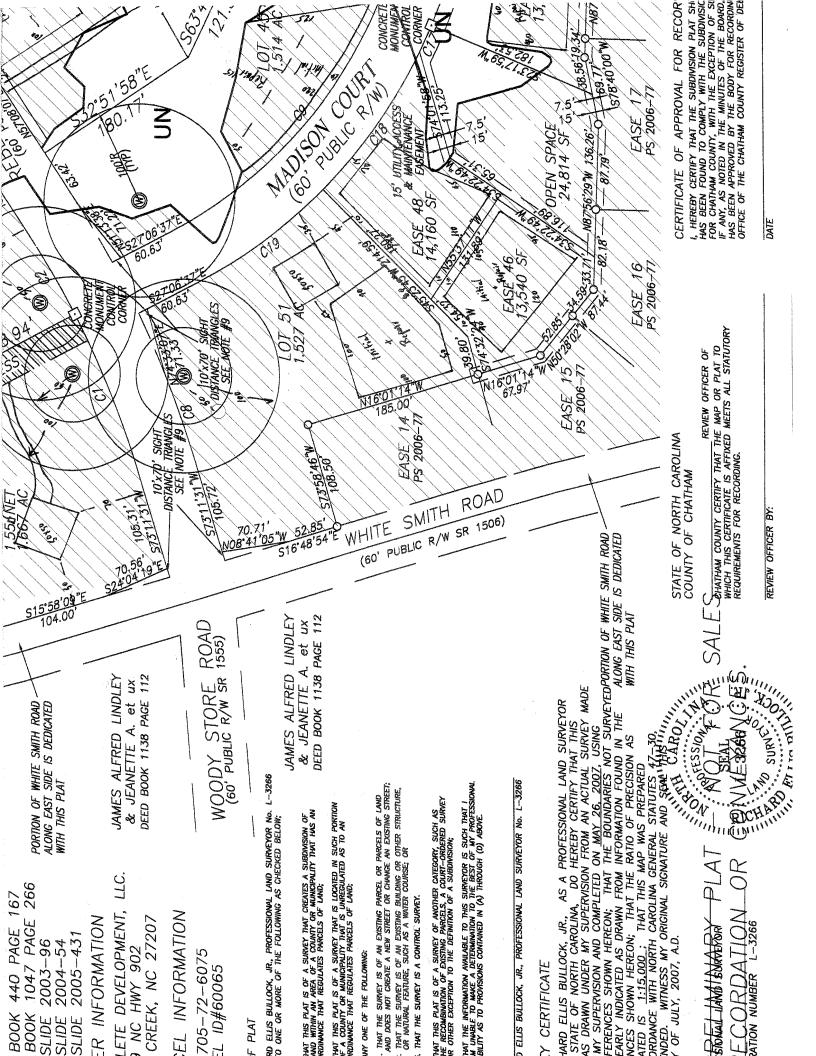
NEW 🞵	REPAIR	EXPANSION \square	REVISED	
An Improvement	ent Permit is issued to acre site located	Complete is	Des. Intail Couk	fo
	ounty. It is specifically iss			
Facility	: Residentia	ار (حر) Non	-Residential ()	
No. Be	drooms3	No. Residents/Emple	oyees Linay	
Type V	/astewater: Residentia	ıl () ∕) Cor	nmercial ()	
) II (·) III (x) IV () V ()	VI ()
	•	onventional () LPF	` '	
	Other	Tump to houghed		
Design	Flow	EGPD Applic	cation Rate , 215 G	SPD/ft ²
			<u>0</u> Gal PT <u>/000</u>	Gal
Nitrifica	ation Line (Length/Width/N	Max Depth) 330 ' x	3' X/8"	
	System Type: I(cription I Conditions) II() III(X Pump to Accept) IV () V ()	VI ()
existing buildir and any other Septic tank ris	igs, property lines, water s information required by th	supplies, surface waters e department must be a d over outlet access po	rt as a visible marker for th	e modifications;
altered, soil dis	valid [] without expira sturbed, set-backs violated ent Permit shall not be af	d, or the ṗlans of intend	ars but is subject to revoce ed use are changed. nership.	ation if the site is
	AUTHORIZATION TO INS this department before ins		on for Wastewater Constru	iction must be
•		Issued by	hommo (pecialist
¥		N.C. Registration	Number	
CPS 10-00 rev 2-01 9-01 1-02	2-04 11-07		Date 5-3-09	



80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208 Fax (919) 542-8288

TPN
Permit No.
Date
EH\$
System Type

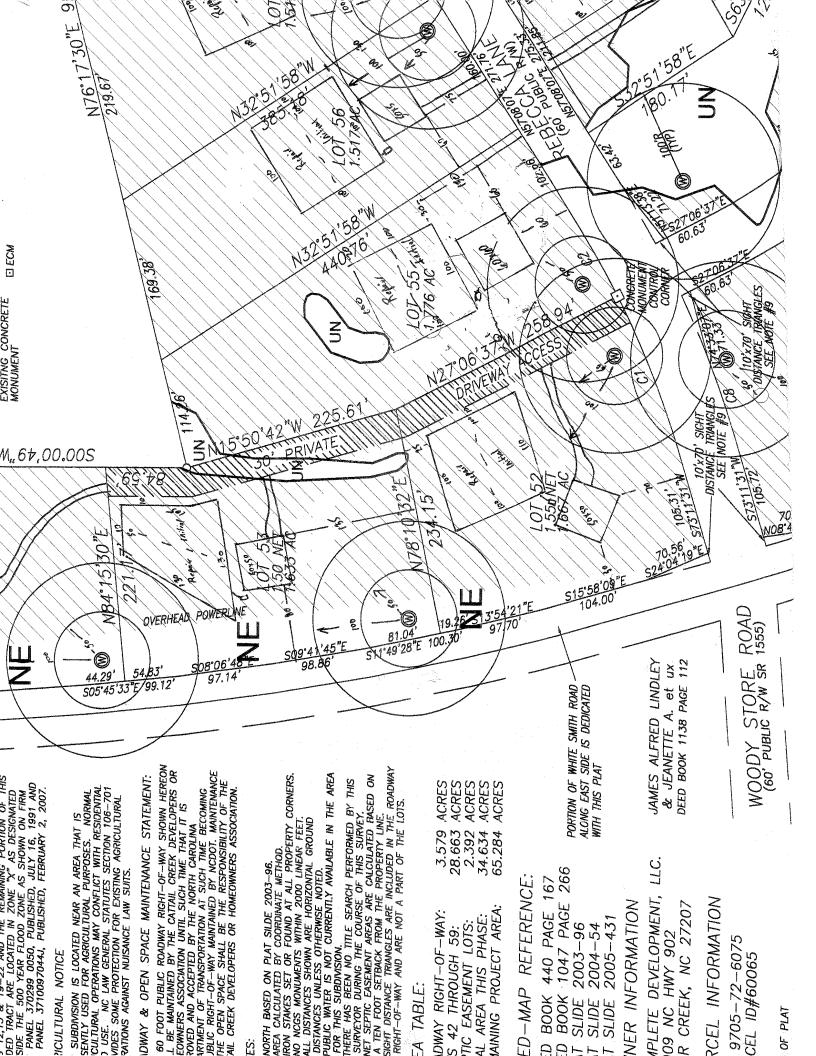
NEW [REPAIR [EXPANSIO	N	REVISED	
An Imp	rovement Permit is is	sued to Complete	Dev.		for
a <i>l</i>	. <u>527</u> acre	site located	Cattail Cues	<u> </u>	
in Chat	ham County. It is sp	ecifically issued for the fo	llowing facility:		
	Facility:	Residential (χ)	Non-Resid	lential ()	
	No. Bedrooms	3 No. Resid	ents/ Employee s_	Le max	
	Type Wastewater:	Residential (🕻)	Commerc	al ()	
	Initial System Type: Description		()	V () V () VI ()	
	Type System:	Shallow Conventional Other	•		
	Design Flow	360 EGPD	Application	Rate <u>. 275</u> GPD/ft²	
		rs and Effluent Filter			
	Nitrification Line (Le	ngth/Width/Max Depth)	440'x3'x18"0	330' x 3' x 18" Accepted 25%	Reduction
	Repair System Type Description		III () I	V () V () VI ()	
existing and an Septic	g buildings, property y other information re tank riser 6" above g	ines, water supplies, sur equired by the departmer	ace waters, the out must be attached access port as a	visible marker for the septic tar	ions;
altered	, soil disturbed, set-b	hout expiration 【刈] facks violated, or the planal not be affected by cha	s of intended use		site is
		ent before installation.		Wastewater Construction must	
		Issued £	Nome Thomas Env	irdnmental Health Specialist	NATE OF THE PROPERTY OF THE PR
				·	
CDC 10 00	2.04.0-01.1-02.12-04.11-07		5	per 1353	



80 East Street P. O. Box 130 Pittsboro, NC 27312-0130
Phone (919) 542-8208 Fax (919) 542-8288

OFFICE USE ONLY
TPN
Permit No.
Date
EHS
System Type

NEW X REPAIR EXPANSION REVISED	notation of the control of the contr
An Improvement Permit is issued to Complete Development	for
a 1.667 acre site located Lot 52 Cattail Crick	
in Chatham County. It is specifically issued for the following facility:	
Facility: Residential (*) Non-Residential ()
No. Bedrooms 34 9 No. Residents/Employees anat	
Type Wastewater: Residential () Commercial ()	
Initial System Type: I () II () IV ()	V () VI ()
DescriptionChalles Constant (1) DR (1)	
Type System: Shallow Conventional () LPP ()	
Design Flow 4360 480 EGPD Application Rate -27	GPD/ft ²
Size Tank(s) w/Risers and Effluent Filter ST GalPT	<u></u> GF <i>D/</i> III
Nitrification Line (Length/Width/Max Depth) 440'x3'x/8" 256735	109 And 200 D / 1.
Triumcaton Eme (Eength Width Max Depth) 170 - 5 x 10 - 44	Gal Gal Accepted 25% Reduction
(On contour in approved septic area; sch. 40 PVC required over step-down	
Repair System Type: I () II () III () IV ()	
Description Accepted 25% Reduction	• • •
Special Conditions	:
A plat with site plan showing specific location of the facility, the site for the propos existing buildings, property lines, water supplies, surface waters, the conditions fo and any other information required by the department must be attached to be valid Septic tank riser 6" above grade required over outlet access port as a visible mark Solid PVC with elbows must be used to construct conveyance over dams or stepo	r any site modifications; d. ker for the septic tank.
This permit is valid [] without expiration [1/2] for five years but is subject altered, soil disturbed, set-backs violated, or the plans of intended use are change. The Improvement Permit shall not be affected by change in ownership.	
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater obtained from this department before installation.	
Issued by Thomas J. Boyer R. Environmental H	S. Health Specialist
N.C. Registration Number/35	_
CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07 Date 7-/	



80 East Street P. O. Box 130 Phone (919) 542-8208

 Pittsboro, NC 27312-0130 Fax (919) 542-8288

Improvement Permit for Wastewater Systems ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

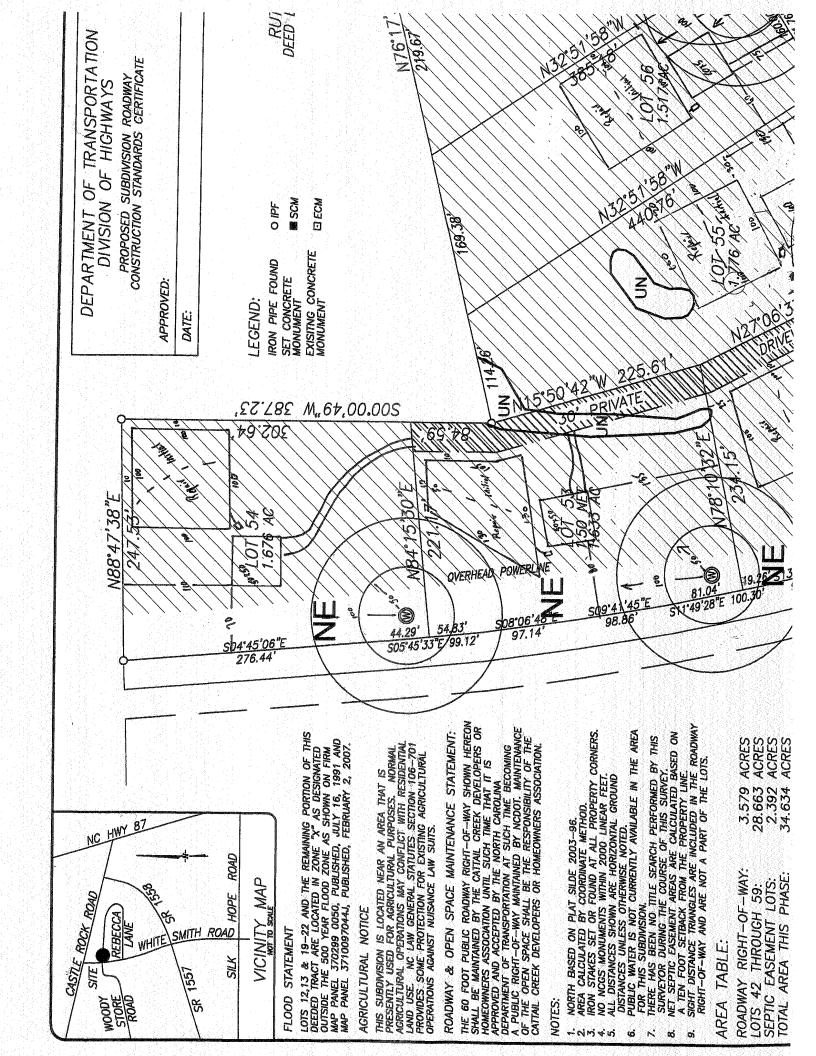
EHS

Permit No. _

TPN

OFFICE USE ONLY

NEW	☑ REPAIR		EXPANSION REVISED
An Im	provement Permit is	issued to	Complete Dev. fo
a	<i>1.633</i> acre	e site located _	Lot 53 Ceffeil Creek
in Cha	atham County. It is s _l	pecifically issu	ed for the following facility:
	Facility:	Residential	그는 그들은 그는 점점 이름을 하고 있는 것을 하는 것이 없다. 그렇게 하고 있는 것이 되었다는 것이 없는 것이 있다. 사람들이 되었다면서 사람들이 되었다면서 되었다면서 없다.
	No. Bedrooms	<u>3</u>	No. Residents/Emptoyees 6 max
	Type Wastewater:	Residential	(×) Commercial ()
	Initial System Type: Description) II() IV() V()
	Type System:		nventional (火) LPP ()
	Design Flow		EGPD Application Rate <i></i> _GPD/ft²
	Size Tank(s) w/Rise	ers and Effluen	nt Filter ST <u>/000</u> Gal PT Gal
	Nitrification Line (Le	ngth/Width/Ma	ex Depth) 440 x3 x18 " or 330 x 3 x 18" Accepted 25% Reduction
	Repair System Type Description Special Conditions) 11(x) 111() IV() V() VI() hd 25% Reduction
existin and ar Septic	g buildings, property ly other information re tank riser 6" above g	lines, water su equired by the rade required	tion of the facility, the site for the proposed wastewater system, upplies, surface waters, the conditions for any site modifications; department must be attached to be valid. over outlet access port as a visible marker for the septic tank. construct conveyance over dams or stepdowns.
anerec	i, soli disturbed, set-b	acks violated,	on [// for five years but is subject to revocation if the site is or the plans of intended use are changed. cted by change in ownership.
THIS I	S NOT AUTHORIZA ed from this departme	TION TO INST ent before insta	그리고 싶으면 그는 이는 이는 마음이 있는 그 마음이 없는 그를 내내내는 사람이 있는 것이 없는 것이 없는 것이 없는 것이 없어서 되었다면 하는데 없어 없다면 없다면 없다면 없다면 없다면 없다.
			Issued by Monay J. Buya 7.5. Environmental Health Specialist
			N.C. Registration Number
CPS 10-00 rev	2-01 9-01 1-02 12-04 11-07		N.C. Registration Number 1753 Date 5-3-89

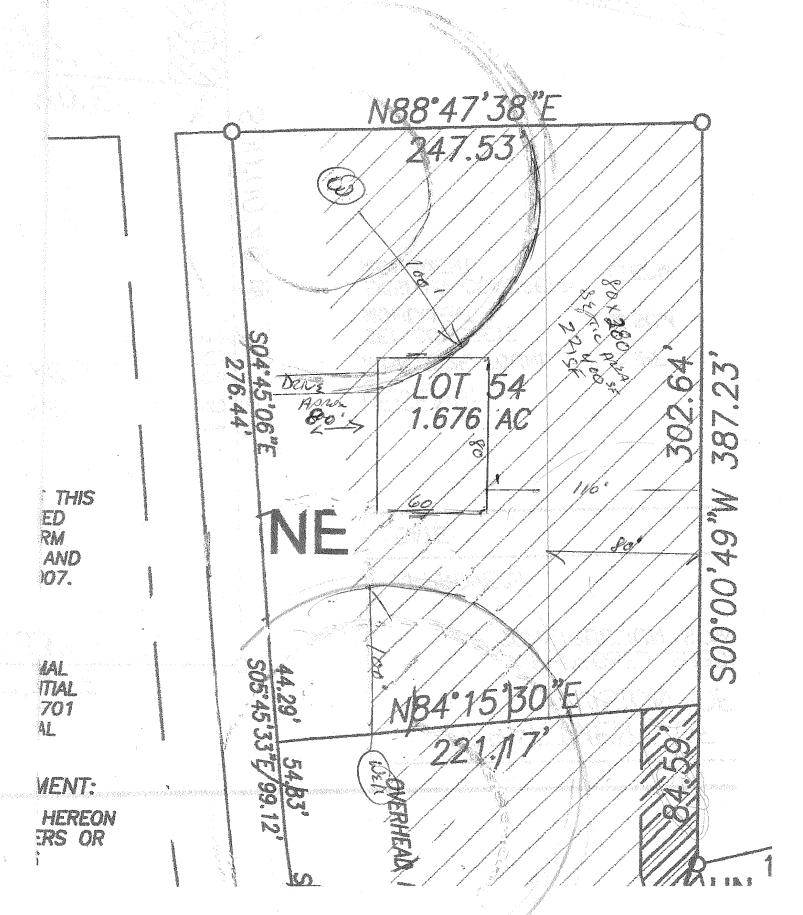


80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208 Fax (919) 542-8288

OFFICE USE ONLY
TPN
Permit No.
Date
EHS
System Type

NEW REPAIR EXPANSION REVISED				
An Improvement Permit is issued to Complete Dev. for				
a 1.676 acre site located 6+54 Cathail Greek				
in Chatham County. It is specifically issued for the following facility:				
Facility: Residential () Non-Residential ()				
No. Bedrooms 3 No. Residents/Employees 6 may				
Type Wastewater: Residential (ʹ≻) Commercial ()				
Initial System Type: I() II(κ) III() IV() V() VI()				
Description				
Type System: Shallow Conventional (ゝ) LPP ()				
Other				
Design Flow 360 EGPD Application Rate . 275 GPD/ft²				
Size Tank(s) w/Risers and Effluent Filter ST 1000 Gal PT Gal				
Nitrification Line (Length/Width/Max Depth) 440 x 3 x 18" or 330 x 3 x 18" Accepted 25% Reduction				
(O				
(On contour in approved septic area; sch. 40 PVC required over step-downs)				
Repair System Type: I () II () IV () V () VI ()				
Description Accepted 25% Reduction				
Special Conditions				
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system, existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications; and any other information required by the department must be attached to be valid. Septic tank riser 6" above grade required over outlet access port as a visible marker for the septic tank. Solid PVC with elbows must be used to construct conveyance over dams or stepdowns.				
This permit is valid [] without expiration [[] for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.				
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.				
Issued by Shoman Q. Baye R.S., Environmental Health Specialist				
N.C. Registration Number				
CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07 Date 5-3-09				

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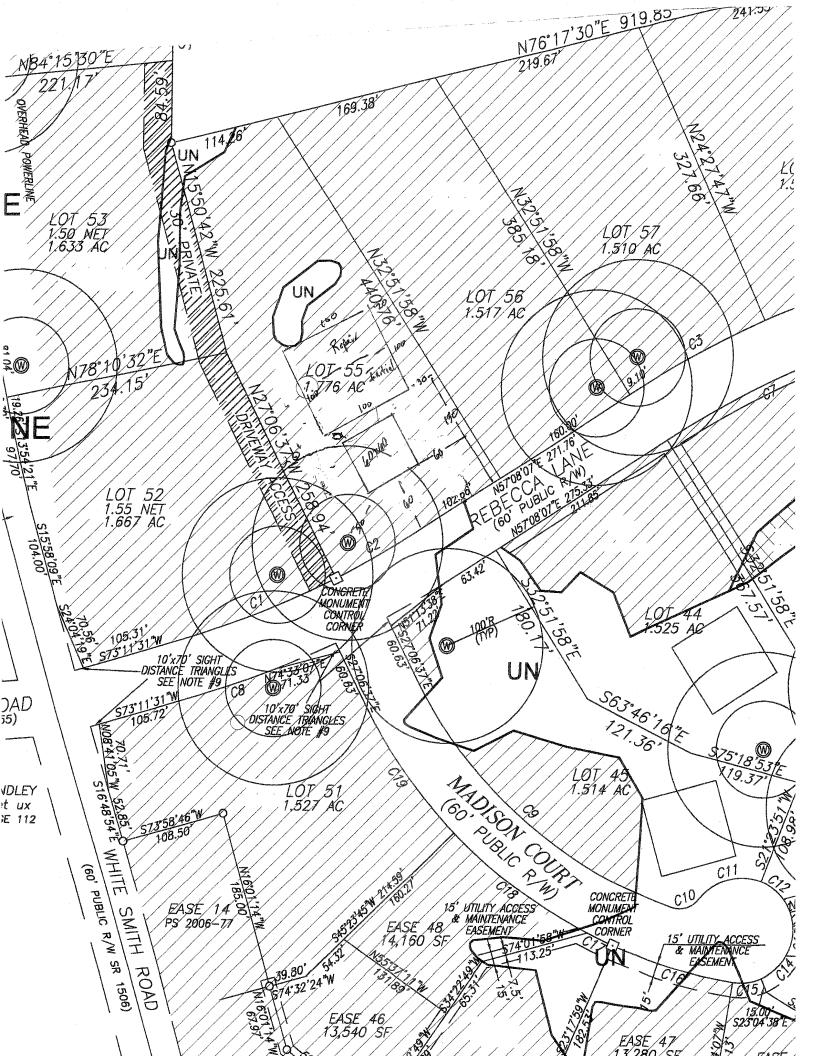
911 Address

CHATHAM COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

80 East Street P. O. Box 130 Pittsboro, NC 27312-0130
Phone (919) 542-8208 Fax (919) 542-8288

OFFICE USE ONLY TPN Permit No. Date EHS System Type

NEW REPAIR	EXPANSION REVISED			
An Improvement Permit is issued to				
al.5+acre site locatedl	1 ot 55 Cuttail Creek			
in Chatham County. It is specifically issued	I for the following facility:			
Facility: Residential ((た) Non-Residential ()			
No. Bedrooms	No. Residents/Employees 6 Map			
Type Wastewater: Residential ((♥) Commercial ()			
Initial System Type: I() Description	(%) (
Type System: Shallow Conv				
	EGPD Application Rate <u>275</u> GPD/ft ²			
Size Tank(s) w/Risers and Effluent f				
Nitrification Line (Length/Width/Max	Depth) 440' x 3' x 18" or 330' x 3' x 18" Accepted			
(On contour in approved septic area	a; sch. 40 PVC required over step-downs)			
Repair System Type: I ()	(
Description Accept	ed At Grade			
Special Conditions				
existing buildings, property lines, water sup and any other information required by the d Septic tank riser 6" above grade required ov	on of the facility, the site for the proposed wastewater system, plies, surface waters, the conditions for any site modifications; epartment must be attached to be valid. Ver outlet access port as a visible marker for the septic tank. Instruct conveyance over dams or stepdowns.			
This permit is valid [] without expiration [[] for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.				
THIS IS NOT AUTHORIZATION TO INSTA obtained from this department before install				
	Issued by Alexan J. Boyn R.S. Environmental Health Specialist			
	N.C. Registration Number 1353			
CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07	N.C. Registration Number 1353 Date 7-1-08			



CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07

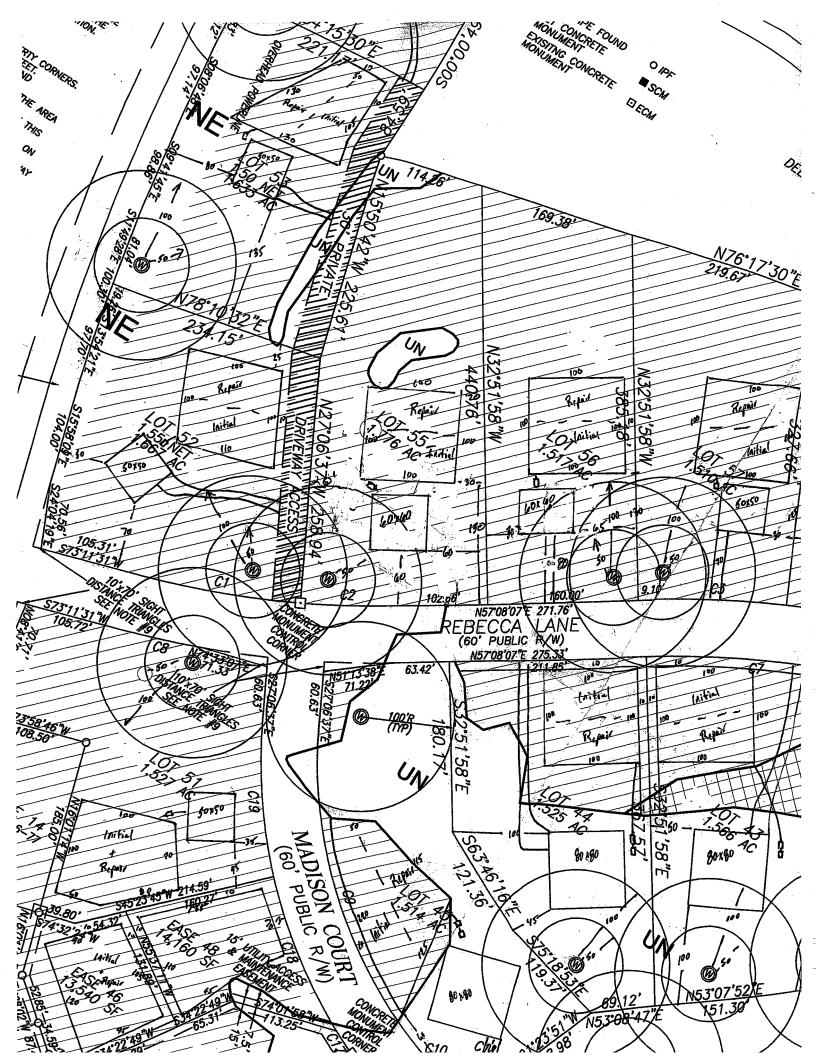
80 East Street P. O. Box 130 Pittsboro, NC 27312-0130
Phone (919) 542-8208 Fax (919) 542-8288

TPN
Permit No.
Date
EHS
System Type

Improvement Permit for Wastewater Systems ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

NEW 🔯	REPAIR	EXPANSION	REVISED C] .
An Improveme	ent Permit is issued to	Complete Dev.		for
	acre site locate			
in Chatham C	ounty. It is specifically is	sued for the following f	acility:	
Facility	r: Resident	ial (🏋) No	on-Residential ()	
No. Be	edrooms3	No. Residents/Emp	oloyees <i>Le Mix</i>	
Type V	Vastewater: Resident	ial (🔭) Co	ommercial ()	
	System Type: I	() II(x) III() IV () V	′() VI()
Type S	System: Shallow Other	Conventional (た) LF		
Desigr	7 Flow			5 GPD/ft²
	ank(s) w/Risers and Efflu			
Nitrific	ation Line (Length/Width	/Max Depth) <u>440′ r 3</u>	'x18" or 330' x 3'	18" Acupted 25% Reduction
Repair Des	ontour in approved septic System Type: Scription Same	() II (x) III () IV () V	() VI ()
existing building and any other Septic tank ris	e plan showing specific longs, property lines, water information required by ser 6" above grade required helbows must be used to	supplies, surface wate the department must be ed over outlet access p	ers, the conditions for e attached to be valid ort as a visible marke	any site modifications; er for the septic tank.
altered, soil di	valid [] without expires sturbed, set-backs violated the permit shall not be a	ed, or the plans of inter	nded use are changed	
	AUTHORIZATION TO IN this department before i	nstallation.	ition for Wastewater (Momas (). E Environmental H	
			Environmental H _g on Number <u>/35</u>	

Date



80 East Street P. O. Box 130 Pittsboro, NC 27312-0130 Phone (919) 542-8208 Fax (919) 542-8288

OFFICE USE ONLY Permit No. Date ____ EHS_ System Type _____

NEW REPAIR EXPANSION REVISED					
An Improvement Permit is issued to					
a 1,510 acre site located Cottail Cruck Lot 57					
in Chatham County. It is specifically issued for the following facility:					
Facility: Residential (/ Non-Residential ()					
No. Bedrooms					
Type Wastewater: Residential () Commercial ()					
Initial System Type: I() II(૪) III() IV() V() VI()					
Description					
Type System: Shallow Conventional (*/*) LPP ()					
Other					
Design FlowEGPD Application Rate275GPD/ft ²					
Size Tank(s) w/Risers and Effluent Filter ST <u>/000</u> Gal PTGal					
Nitrification Line (Length/Width/Max Depth) 440' x3' x18" of 330' x 3' x18" Acceptal					
(On contour in approved septic area; sch. 40 PVC required over step-downs)					
Repair System Type: (()川(メ)川() IV() V() V()					
Description Accepted					
Special Conditions					
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system, existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications; and any other information required by the department must be attached to be valid. Septic tank riser 6" above grade required over outlet access port as a visible marker for the septic tank. Solid PVC with elbows must be used to construct conveyance over dams or stepdowns.					
This permit is valid [] without expiration [] for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.					
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.					
Issued by Mond no Jage 7.5. Environmental Health Specialist					
N.C. Registration Number					

911 Address

CHATHAM COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

80 East Street P. O. Box 130 Pittsboro, NC 27312-0130
Phone (919) 542-8208 Fax (919) 542-8288

Permit No. ______ Date _____ EHS_____ System Type _____

Improvement Permit for Wastewater Systems

ARTICLE II-CHAPTER 130A OF THE NC GENERAL STATUTES

NEW Z REPAIR EXPANSION REVISED	
An Improvement Permit is issued to Complete Development	fo
a 1.520 acre site located Lot 58 Cattail Cruk	_
in Chatham County. It is specifically issued for the following facility:	
Facility: Residential () Non-Residential ()	
No. Bedrooms 3 No. Residents/Employees 6 may	
Type Wastewater: Residential ('k') Commercial ()	
Initial System Type: Ι() ΙΙ(χ) ΙΙΙ() ΙV() V() VI()	
Description	
Type System: Shallow Conventional () LPP ()	
Other	
Design Flow 360 EGPD Application Rate 275 GPD/ft ²	
Size Tank(s) w/Risers and Effluent Filter STGal PTGal	
Nitrification Line (Length/Width/Max Depth) 440' x 3' x 18" OR	
330' x 3' x 18" Accepted 25% Reduction	
(On contour in approved septic area; sch. 40 PVC required over step-downs)	
Repair System Type: I() II($oldsymbol{\ell}$) III() IV() V() VI()	
DescriptionShellow Conventional	
Special Conditions	
A plat with site plan showing specific location of the facility, the site for the proposed wastewater system, existing buildings, property lines, water supplies, surface waters, the conditions for any site modifications; and any other information required by the department must be attached to be valid. Septic tank riser 6" above grade required over outlet access port as a visible marker for the septic tank. Solid PVC with elbows must be used to construct conveyance over dams or stepdowns.	
This permit is valid [] without expiration [½] for five years but is subject to revocation if the site is altered, soil disturbed, set-backs violated, or the plans of intended use are changed. The Improvement Permit shall not be affected by change in ownership.	
THIS IS NOT AUTHORIZATION TO INSTALL. An authorization for Wastewater Construction must be obtained from this department before installation.	
Issued by <u>Thomas</u> Daya R.S. Environmental Health Specialist	
En∛ironn∕ental Health Specialist	
N.C. Registration Number /353	

Date___6_-12-08

Cattail Creek Lot 58 1"=100' Thomas J. Bayer R.S. UN UN

_ 911 Address_

CHATHAM COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH DIVISION

80 East Street • P. O. Box 130 • Pittsboro, NC 27312-0130
Phone (919) 542-8208 • Fax (919) 542-8288

OFFICE USE ONLY				
TPN				
Permit No.				
Date				
EHS				
System Type				

NEW 🗵 F	EPAIR	
An Improvement Po	ermit is issued to Complete Development	for
	acre site located Lot 59 Cathail Creck	
in Chatham County	. It is specifically issued for the following facility:	
Facility:	Residential (🗡) Non-Residential ()	•
No. Bedroo	ns 3 No. Residents/E mployees 6 Max	
Type Waste	water: Residential (k) Commercial ()	
Initial Syste Descripti	m Type: I () II (***) III () IV () V ()	VI ()
Type Syster		
Design Flow	EGPD Application Rate 1275 G	PD/ft ²
Size Tank(s) w/Risers and Effluent Filter ST <u>/000</u> Gal PT	Gal
	ine (Length/Width/Max Depth) <u>N/40' x 3 x /8" ar 330 x 3 x</u> in approved septic area; sch. 40 PVC required over step-downs)	16 Accipat
Repair Syst	em Type: I () II (χ) III () IV () V ()	VI ()
Descripti	onAccepted 25% Reduction	
Special Con	•	
existing buildings, p and any other inform Septic tank riser 6" Solid PVC with elbo This permit is valid altered, soil disturbe	showing specific location of the facility, the site for the proposed waster roperty lines, water supplies, surface waters, the conditions for any site nation required by the department must be attached to be valid. above grade required over outlet access port as a visible marker for the ws must be used to construct conveyance over dams or stepdowns. [] without expiration [] for five years but is subject to revocated, set-backs violated, or the plans of intended use are changed.	e modifications; e septic tank.
•	ermit shall not be affected by change in ownership.	
	epartment before installation. Issued by Invironmental Health Sp.	
CPS 10-00 rev 2-01 9-01 1-02 12-04 11-07	N.C. Registration Number 1353 Date 7-1-08	
	Date	

