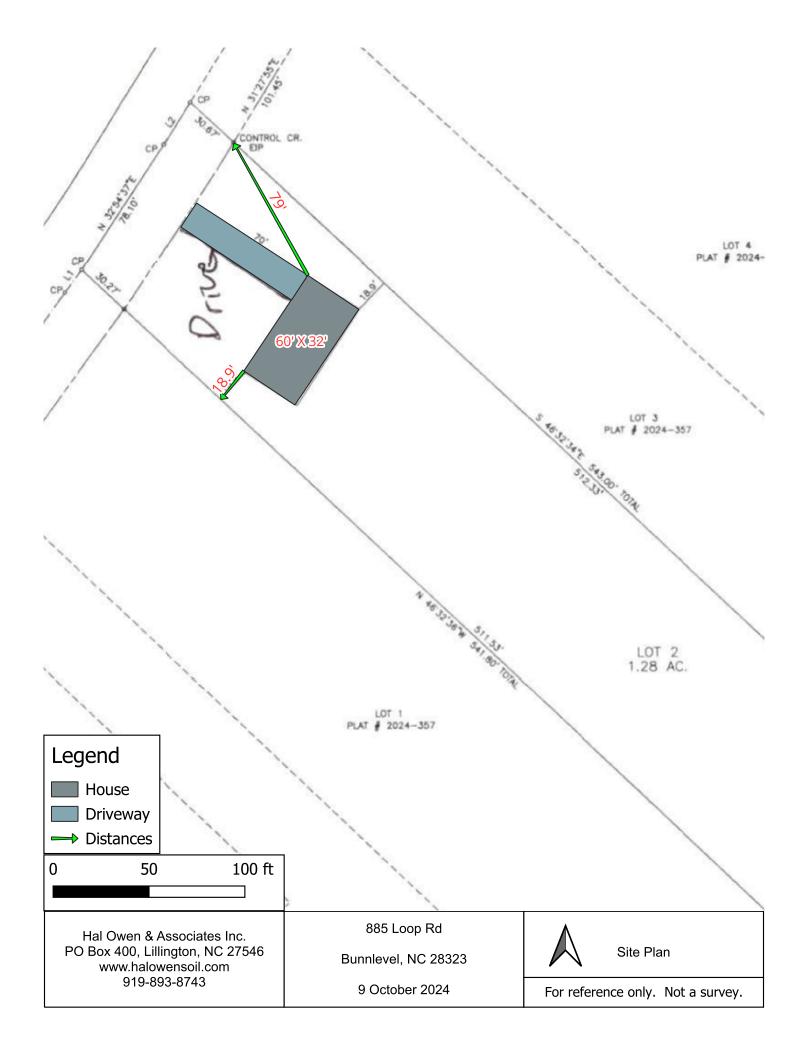


North Carolina Onsite Wastewater Contractor Inspector Certification Board Authorized Onsite Wastewater Evaluator Permit Option for Non-Engineered Systems Notice of Intent (NOI) to Construct

X New Expansion Repair Relocation Relocation of Repair Area
Owner or Legal Representative Information: Name: Paul Lyon
Mailing address: 885 Loop Rd City: Bunnlevel State: NC Zip: 28323 Phone: 910-651-6689 Email: Iyonp70@gmail.com
Authorized Onsite Wastewater Evaluator Information: Name: Hal Owen Certification #: 10036E
Mailing address: PO Box 400 City: Lillington State: NC Zip: 27546 Phone: 910-893-8743 Email: hal@halowensoil.com Email: hal@halowensoil.com
Site Location Information: Site address: <u>885 Loop Rd, Bunnlevel, NC 28323</u> Tax parcel identification number or subdivision lot, block number of property: Lot 2, PIN 0547-19-2812.000County: <u>Harnett</u>
System Information: Wastewater System Type: Ilb (Accepted wastewater gravity system) Daily Design Flow: <u>480 gpd</u> Saprolite System: <u>Yes X</u> No Subsurface Operator Required: <u>Yes X</u> No Water Supply Type: <u>Private Well X</u> Public Water Supply Spring Other:
Facility Type: X Residential 4 # Bedrooms 8 Maximum # of Occupants Business Type of Business and Basis for Flow:
Required Attachments: V Plat or Site Plan V Evaluation of Soil and Site Features by Licensed Soil Scientist
Attest: On this the 9 day of October, 2024 by signature below I hereby attest that the information required to be included with this NOI to Construct is accurate and complete to the best of my knowledge. Furthermore, I hereby attest that I have adhered to the laws and rules governing onsite wastewater systems in the state of North Carolina. This NOI shall expire on 9 day of October, 2029.
Signature of Owner or Legal Representative:
Disclosure: The owner may apply for a building permit for the project upon submitting a complete NOI to Construct and the fee required (if any) to the local health department. An onsite wastewater system authorized by an authorized onsite wastewater evaluator shall be transferable to a new owner with the consent of the authorized onsite wastewater evaluator.
Local Health Department Receipt Acknowledgement: Signature of Local Health Department Representative:Date:

							HA	LOWE1		OP ID: TOW
Ą		EF	RTI	FICATE OF LIA	BIL	ITY INS	SURAN	CE	•	MM/DD/YYYY) /09/2024
C B	HIS CERTIFICATE IS ISSUED AS A ERTIFICATE DOES NOT AFFIRMAT ELOW. THIS CERTIFICATE OF INS EPRESENTATIVE OR PRODUCER, A	IVEL SURA	Y OF	R NEGATIVELY AMEND, DOES NOT CONSTITUT	EXTEN	ID OR ALT	ER THE CO	VERAGE AFFORDED	TE HO	LDER. THIS E POLICIES
lf	MPORTANT: If the certificate holder SUBROGATION IS WAIVED, subject his certificate does not confer rights t	to t	he te	rms and conditions of the	e polic	y, certain p	olicies may			
	DUCER			-893-5707	CONTAC	T SHARO	N WOODY			
LILL PO	URANCE SERVICE CTR -LILLING INGTON BRANCH OFFICE Box 1565 INGTON, NC 27546				PHONE (A/C. No	. Ext): 910-89	93-5707 Y@ISCFAY	FAX (A/C, No	.910-89	93-2077
	NEL L. BABB			-				DING COVERAGE		NAIC #
					INSURE		TONE NAT	ONAL		
IPO I	JRED OWEN & ASSOCIATES, INC. BOX 400			-	INSURE					
	INGTON, NC 27546			_	INSURE	RD:				
				F	INSURE					
			~ ^		INSURE	RF:				
	VERAGES CER HIS IS TO CERTIFY THAT THE POLICIES			ENUMBER: RANCE LISTED BELOW HAW				REVISION NUMBER:		
IN C	IDICATED. NOTWITHSTANDING ANY RI ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT	REME AIN,	NT, TERM OR CONDITION (THE INSURANCE AFFORDE	OF ANY	' CONTRACT	OR OTHER I	DOCUMENT WITH RESP	ст то	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	тѕ	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	
								PREMISES (Ea occurrence) MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG		
	OTHER:								\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
								BODILY INJURY (Per person)	\$	
	OWNED AUTOS ONLY HIRED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY							BODILY INJURY (Per accident PROPERTY DAMAGE (Per accident)) \$ \$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$							PER OTH-	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED?	N / A						E.L. DISEASE - EA EMPLOYE		
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT		
A	PROFESSIONAL LIAB.			42ESP00143901		01/27/2024	01/27/2025	PER OCC. AGGREGATE		1,000,000 2,000,000
L										
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACORE	0 101, Additional Remarks Schedul	e, may b	attached if mo	re space is requir	ed)		
	RTIFICATE HOLDER				CANC	ELLATION				
	PAUL LYON				THE	EXPIRATIO	N DATE THE	ESCRIBED POLICIES BE REOF, NOTICE WILL Y PROVISIONS.		
	885 LOOP RD BUNNLEVEL, NC 28323				AUTHO	RIZED REPRESE Taylog Wal				
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HOA-AOWE-2409-13

Issue date 10/9/2024

Expiration 10/9/2029

APPLICANT INFORMATION

Name	Paul Lyon		
Mailing Address	885 Loop Rd, Bunnlevel, NC 28323		
E-mail Address	Lyonp70@gmail.com	Telephone Number	910-651-6689

PROPERTY IDENTIFIERS

County	Harnett	PIN	0547-19-2812.000
Size (Acre)	1.21	County PID	12054802 0016 70
Site Address	885 Loop Rd, Bunnlevel, NC 28323		
S/D Name and Lot#	Lot 2		

PROJECT INFORMATION

Wastewater System	New		.0403 Eng Low Flow	No
Wastewater Strength	Domestic		Effluent Standard	DSE
Facility Type	Residential		Water Supply	Public Water
Design Wastewater Flow	480	gpd	gal/unit	120
Basis for Flow	4	bedrooms	max occupancy	8
Basement	No		Fixtures in basement?	No
Crawl Space			Slab Foundation	

CONSULTANT INFORMATION

Company Name	Hal Owen & Associates, Inc.		
Mailing Address	PO Box 400, Lillington, NC 27546		
E-mail Address	hal@halowensoil.com	Telephone Number	910-893-8743
Licensed Soil Scientist	Britt Wilson, LSS#1351	AOWE	Hal Owen, #10036E

A soil and site evaluation has been conducted for the referenced property for the purpose of permitting a subsurface wastewater system. This evaluation was prepared based on information provided by the applicant to include the basis for design flow, proposed structure location(s), and property boundaries. Any false, inaccurate, or incomplete information provided by the applicant, owner, or legal representatives may result in denial or revocation of applications, approvals, or permits.

This AOWE Evaluation is being submitted pursuant to and meets the requirements of G.S.130A-336.2. This evaluation includes a soil and site evaluation, specifications, plans, and reports for the site layout and construction of a proposed onsite wastewater system by an Authorized On-Site Wastewater Evaluator (AOWE). The evaluation of soil conditions and site features is provided in accordance with G.S. 130A-335(e), the Rules for "Wastewater Treatment and Dispersal Systems", 15A NCAC 18E, and local septic regulations (if any). This report represents my professional opinion as a Licensed Soil Scientist and Authorized Onsite Wastewater Evaluator.

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HOA-AOWE-2409-13

WASTEWATER SYSTEM DESIGN SPECIFICATIONS

Proposed Design Daily Flow		480	gpd	Drainfield Me	eeets Req	uirements:
Septic Tank Size	Septic Tank Size (minimum)		gallons	.0508 Availab	ole Space	Yes
Pump Tank Size	(minimum)	1000	gallons, if required	d .0601 3	Setbacks	Yes
Initial System System Type Pump Required Trenches: Design LTAR Total Trench/ Be Trench Spacing Usable soil depth Maximum Trench	IIb – Accepted No Accepted (25% d Length n to LC h Depth	wastewat 6 reduction 0.30 400 9 39 24	er gravity system n) System gal/day/ft ² feet ft on center inches inches, measured	ft TDH at Saprolite Fi	e System ill System	GPM No No
Minimum Soil Co Artificial Drainag		6 No	inches			
Repair System System Type:	IIIe – PPBPS g		- tem			
Pump Required	No DDBDS horiza	ntol				
Trenches: Design LTAR Total Trench/ Be Trench Spacing Usable soil depth Maximum Trencl Minimum Soil Co	n to LC h Depth of	0.30 268 9 33 20 6	gal/day/ft ² feet ft on center inches inches, measured inches	Fi	e System ill System	No No

Potential Drainlines flagged at site on 9-ft centers.

	Relative	Drainline	Field	
Color	Elevation (ft)	Length(ft)	Length(ft)	
R	96.05	80	83	רו
W	95.54	80	83	
В	95.10	80	83	- Initial
R	94.71	80	81	2
W	94.32	80	82	
В	93.83	67	83	ے ר
W	93.51	67	67	Repair
R	93.13	67	81	Re
W	92.45	67	82	
Fank:	96.40			-
ank:	96.25	Notes:		
e Elev:	100.00	*No grading or remov		
	R W B R W B W R	Color Elevation (ft) R 96.05 W 95.54 B 95.10 R 94.71 W 94.32 B 93.83 W 93.51 R 93.13 W 92.45 Tank: 96.25	Color Elevation (ft) Length(ft) R 96.05 80 W 95.54 80 B 95.10 80 R 94.71 80 W 94.32 80 B 93.83 67 W 93.51 67 R 93.13 67 W 92.45 67 Fank: 96.40 80	Color Elevation (ft) Length(ft) Length(ft) R 96.05 80 83 W 95.54 80 83 B 95.10 80 83 R 94.71 80 81 W 94.32 80 82 B 93.83 67 83 W 93.51 67 67 R 93.13 67 81 W 92.45 67 82 Fank: 96.40 state

*No grading or removal of soil in initial or repair areas *Property lines per owner

*Trench bottoms shall be level to +/- 1/4" in 10ft

*All parts of septic system must meet minimum setbacks

HOA-AOWE-2409-13

PERMIT CONDITIONS

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met.

System shall be installed in accordance with the attached Wastewater System Design Specificaitons. See attached SYSTEM LAYOUT for wastewater system design and location.

Any changes to the site plan or intended use must be approved by Hal Owen & Associates. Permit modification and resubmittal to the LHD may be necessary to ensure regulatory compliance.

Conformance to all regulatory setbacks shall be maintained. Local regulations (such as well or riparian buffer ordinances) may require more stringent setbacks than specified in the septic regulations.

Minimum soil cover of six inches shall be established over dispersal field. Soil cover above the original grade shall be placed at a uniform depth over the entire dispersal field and shall extend laterally five feet beyond the dispersal trench. Site shall be graded to shed water away from field and a vegetative cover established to prevent erosion.

The dispersal field and repair area shall not be subject to vehicular traffic. Vehicular traffic can damage soils, pipes, and valve boxes. Do not use septic areas for parking.

Do not allow underground utilities, water lines, or sprinkler systems to be installed in the septic areas. Damage to the septic areas could result in the septic permit being revoked.

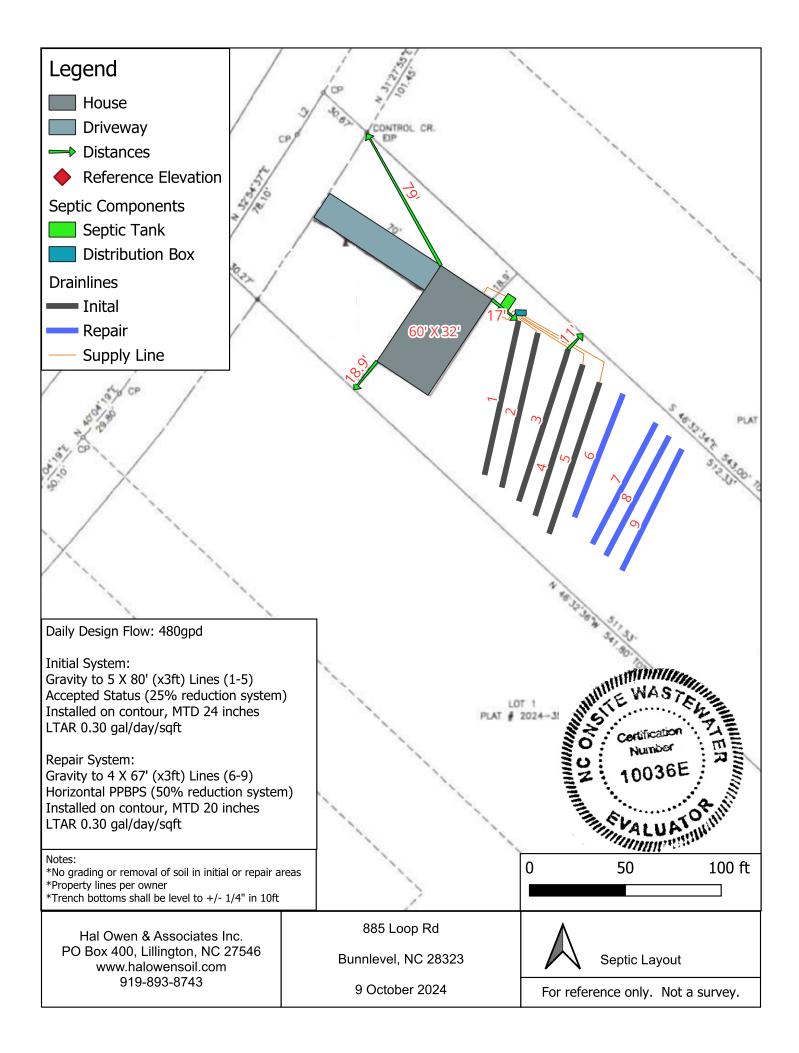
The wastewater system shall not be covered until inspected by Hal Owen & Associates and shall not be placed into use until an Authorization to Operate is issued.

SPECIFIC REQUIREMENTS

A pre-construction conference with the septic contractor is required prior to installation. Call Hal Owen & Associates at least five days in advance to schedule 910-893-8743

The inlet and outlet of all tanks shall be equipped with an approved pipe penetration boot.

A pump tank should be added if gravity distribution cannot be demonstrated.



Permit # HOA-AOWE-2409-13

INITIAL WASTEWATER SYSTEM

Gravity System Design Criteria

DESIGN DAILY FL	.ow _	480	_gallons		SOIL LTAR:	0.30	_gpd/ft ²
TANK (minimum)	Septic Tank:	1000	gallons				
SUPPLY LINE	Length (ft): slope =	10 1.67%	-		_ " sch 40 pvc e is 1/8" per foot (%		
r	Drainline Type: <u>A</u> Maximum Trench Trench height:	Depth of 12	 inches	_inches, m	easured on do French width: _	3	ft
	Length Factor:		-% 42		rench Width:		_ft
	osorption Area: French Length:		-" x	Minimum 80	Linear Length: _ ft =	400 400	_ft ft
Gravity Distrib	ution Schema	atic					
Septic Tank	Tan	k Outlet*		D-Box		Trench	
Ground	Donth (in) -	10		Floy (ft)-		Ground	
Elev (ft)= 96.40 ft	Depth (in) = Elev (ft)=	95.32	-	Elev (ft)= 95.15		Elev (ft)= 96.05	
			Supply Line	D-bo>	Drain	1980,227	Trench Bottom Elev (ft)= 94.05

*Outlet depth of septic tank is dependant upon the depth of the plumbing stub out from the home. A pump tank should be added if gravity distribution cannot be demonstrated.

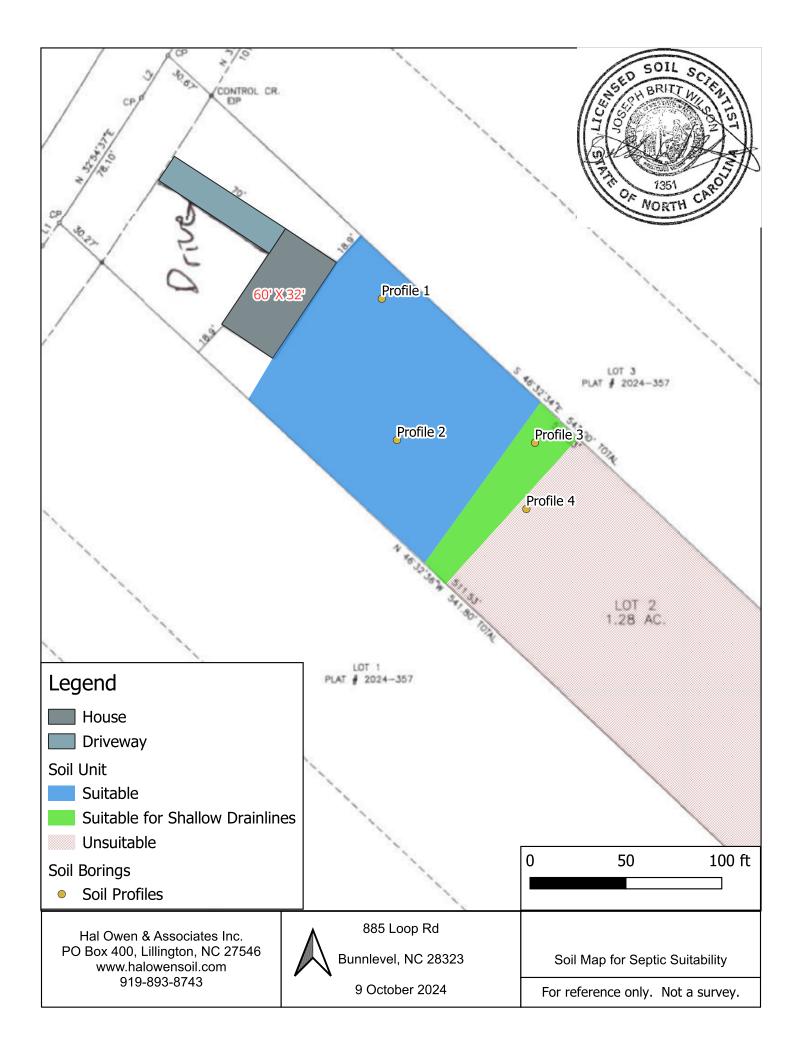
Permit # HOA-AOWE-2409-13

REPAIR AREA

Gravity System Design Criteria

TANK (min) Septic Tank: 1000_gallons SUPPLY LINE Length (ft): 80_slope = Diameter: 3	DESIGN DAILY FLO	₩ 480	gallons	SO	L LTAR:	0.30	_gpd/ft ²
Slope = 2.36% * minimum slope of supply line is 1/8" per foot (%1.04) TRENCHES Drainline Type: PPBPS, horizontal Maximum Trench Depth of 20 inches, measured on downhill side Trench height: 14 inches Trench width: 3 ft Trench Length Factor: 50 % Effective Trench Width: 6 ft Absorption Area: 800 ft ² Minimum Linear Length: 267 ft Actual Trench Length: 4 X 67 ft = 268 ft $Gravity Distribution Schematic$ Septic Tank Tank Outlet* D-Box Trench Ground Ground Elev (ft)= Depth (in) = 13 Elev (ft)= Elev (ft)= 96.40 ft Elev (ft)= 95.32 93.43 93.83 $\int D - box Trench D - box D$	TANK (min)	Septic Tank: <u>1000</u>) gallons				
Maximum Trench Depth of 20 inches, measured on downhill side Trench height: 14 inches Trench width: 3 ft Trench Length Factor: 50 % Effective Trench width: 6 ft Absorption Area: 800 ft ² Minimum Linear Length: 267 ft Actual Trench Length: 4 X 67 ft = 268 ft Gravity Distribution Schematic Ground Elev (ft)= Depth (in) = 13 Elev (ft)= Elev (ft)= 96.40 ft Elev (ft)= 95.32 93.43 93.83 Orbox Trench Bottom Supply Line D-box Trench Bottom Ground Elev (ft)= Depth (in) = 13 Elev (ft)= Elev (ft)= 96.40 ft Elev (ft)= 95.32 93.43 93.83 Orbox Trench Bottom Use (ft)= Supply Line D-box Trench Bottom Elev (ft)= 92.16	SUPPLY LINE				•	.04)	
Trench Length Factor: 50 % Effective Trench Width: 6 ftAbsorption Area:800 ft²Minimum Linear Length: 267 ftActual Trench Length:4X67 ft=268 ftGravity Distribution SchematicSeptic Tank Tank Outlet* D-Box Trench GroundBelev (ft)=Depth (in) = 13Elev (ft)=Elev (ft)=96.40 ftElev (ft)=95.3293.4393.83D-box Trench BottomSupply Line 80D-box Trench BottomElev (ft)=92.16	Ma	ximum Trench Depth	h of20				
Absorption Area: 800 ft^2 Minimum Linear Length: 267 ft Actual Trench Length: 4 X 67 ft = 268 ft Gravity Distribution Schematic Septic Tank Tank Outlet* D-Box Trench Ground Elev (ft)= Depth (in) = 13 Elev (ft)= Elev (ft)= 96.40 ft Elev (ft)= 95.32 93.43 93.83 D -box Trench Trench Bottom Elev (ft)= 92.16							-
Gravity Distribution Schematic Septic Tank Tank Outlet* D-Box Trench Ground Ground Ground Elev (ft)= Depth (in) =13 Elev (ft)= Elev (ft)= 96.40 ft Elev (ft)=95.32 93.43 93.83 O-box Trench Ground D-box Trench Bottom Deter (ft)= 96.40 ft Elev (ft)= 95.32 93.43 93.83 UP-box Trench Trench Bottom Elev (ft)= 92.16 92.16		·					_ _ft
Septic Tank Tank Outlet* D-Box Trench Ground Ground Ground Elev (ft)= Depth (in) =13 Elev (ft)= Elev (ft)= 96.40 ft Elev (ft)=95.3293.4393.83 93.83 Image: Supply Line	Actual Tre	nch Length: 4	X	<u>67</u> ft	=	268	ft
Ground Ground Elev (ft) = Depth (in) = 13 Elev (ft) = Elev (ft) = 95.32 93.43 93.83 0 = 0.40 ft Elev (ft) = 95.32 93.43 93.83 0 = 0.40 ft Elev (ft) = 0.40 ft Elev (ft) = 95.32 93.43 93.83 0 = 0.40 ft Elev (ft) = 0.4	Gravity Distribut	ion Schematic					
$\begin{array}{c c} Elev (ft) = & Depth (in) = \underline{13} & Elev (ft) = & Elev (ft) = \\ \hline 96.40 & ft & Elev (ft) = & 95.32 & 93.43 & 93.83 \\ \hline & & & & & & & & & & & \\ \hline & & & & &$	· ·	Tank Outl	let*	D-Box			
96.40 ft Elev (ft)= 95.32 93.43 93.83 93.83 93.83 93.83 0box Trench Bottom Elev (ft)= 92.16					_		
Net of the second se		· · · ·		. ,		. ,	
drawind N L S			Supply Lii	D-box	Drainl	line	Bottom Elev (ft)= 92.16

*Outlet depth of septic tank is dependant upon the depth of the plumbing stub out from the home. A pump tank should be added if gravity distribution cannot be demonstrated.



Soil/Site Evaluation Form for On-Site Wastewater System

OWNER NAME:	Paul Lyon				
PROPOSED FACILITY:	Residential	DESIGN DAILY FLOW	: 480	WATER SUPPLY P	ublic Water
LOCATION OF SITE:	885 Loop Rd, Bunnlevel,	NC 28323	PIN:	0547-19-2812.000	
WASTEWATER TYPE:	Domestic		COUNTY:	Harnett	
EVALUATION METHOD	AUGER BORING	PIT	-	сит 🗌	
EVALUATED BY:	Britt Wilson, LSS#1351		DA	TE EVALUATED:	
	INITIAL SYST	ΈM		REPAIR SYSTEM	
AVAILABLE SPACE	1200 ft ² trench bott	om	800	ft ² trench bottom	
SYSTEM TYPE	Accepted (25% re	eduction) System		PPBPS, horizonta	I
SITE LTAR	0.30 gpd/ft ²		0.30	gpd/ft ²	
MAX TRENCH DEPTH	24 inches (measu	ured on downhill side)	20	inches (measured o	n downhill side)
SITE CLASSIFICATION	Suitable	OTHE	R FACTORS		

COMMENTS:

PROFILE 1

HORIZON	HORIZON COLOR CONSIS		TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	TORS	
DEPTH		TENCE			LOGY			
0-8	2.5Y 4/2	FR	SL	GR	SEXP	LANDSCAPE POSITION	L	
8-25	10YR 6/6	FR	SCL	SBK	SEXP	SOIL WETNESS DEPTH	41"	
25-41	10YR 6/6	FI	SC	SBK	SEXP	SOIL WETNESS COLOR	10YR 7/1	
41-48+	10YR 6/6	FI	SC	ABK	SEXP	SOIL DEPTH	48"	
						SAPROLITE CLASS	NA	
						RESTRICTIVE HORIZON	NA	
						SLOPE %	5	
PROFILE CLASSIFICATION			Suitable	LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	1.8	
COMMENT								

PROFILE 2

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-9	2.5Y 4/2	FR	SL	GR	SEXP	LANDSCAPE POSITION	L
9-22	10YR 6/6	FR	SCL	SBK	SEXP	SOIL WETNESS DEPTH	39"
22-39	10YR 6/6	FI	SC	SBK	SEXP	SOIL WETNESS COLOR	10YR 7/1
39-48+	10YR 6/6	FI	SC	ABK	SEXP	SOIL DEPTH	48"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	5
PROFILE CLASSIFICATION			Suitable	LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	1.8
COMMENT							

PROFILE 3

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-5	2.5Y 4/2		SL	GR	SEXP	LANDSCAPE POSITION	L
5-12	10YR 6/6		SCL	SBK	SEXP	SOIL WETNESS DEPTH	33"
12-33	10YR 6/6		SC	SBK	SEXP	SOIL WETNESS COLOR	10YR 7/1
33-48+	10YR 6/6	FI	SC	ABK	SEXP	SOIL DEPTH	48"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	5
PROFILE CLASSIFICATION		ION	Suitable	LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	1.8
COMMENT							

PROFILE 4

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-8	2.5Y 4/2		SL	GR	SEXP	LANDSCAPE POSITION	L
8-12	10YR 6/6		SCL	SBK	SEXP	SOIL WETNESS DEPTH	12"
12+	10YR 6/6		SCL	ABK	SEXP	SOIL WETNESS COLOR	10YR 7/1
						SOIL DEPTH	12"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	5
PROFILE CLASSIFICATION		Unsuitable	LTAR gpd/ft ²	-	SLOPE CORRECTION (IN)	1.8	
COMMENT							

Soil/Site Evaluation Form for On-Site Wastewater System

LE	GEND OF ABBRE\	/IATIONS				
TEXTU	RE	TEXTURE		<u>LTAR</u>		
GROU	<u>P</u>	CLASS		(gal/day/sqft)		
1		S - Sand		1.2-0.8		
		LS - Loamy	Sand			
11		SL - Sandy I	Loam	0.8 – 0.6		
		L - Loam				
111		SCL - Sandy	y Clay Loam	0.6 – 0.3		
		CL - Clay Lo	am			
		SiL - Silt Loa	am			
		Si - Silt				
		SiCL - Silt C	lay Loam			
			-			
IV	IV SC - Sandy C		Clay	0.4 - 0.1		
	-					
		SiC - Silty C	lay			
		-				
		O - Organic		none		
MOIST CC	NSISTENCE		WET CONSIST	ENCE		
VFR - Very	/ Friable		NS - Non Stick			
FR - Friabl	e		SS - Slightly Sti	cky		
FI - Firm			MS - Moderatel	y Stick		
VFI - Very	Firm		VS - Very Stick	4		
y EFI - Extre	mely Firm					
			NP - Non Plasti	с		
MINERAL	OGY		SP - Slightly Pla	astic		
SEXP - Sli	SEXP - Slightly Expansive			MP - Moderately Plastic		
f – few	1 - fine		F - Faint			
c – common	2 - medium		D - Distinct			
	ny 3 - coarse					
	TEXTUI GROU I II II II II IV IV VFR - Very FR - Friabl FI - Firm VFR - Very FFI - Extrem VFI - Very EFI - Extrem SEXP - Sli EXP - Expand f - few	TEXTURE GROUP IIIIIIIIIIVIVVMOIST CONSISTENCE VFR - Very Friable FR - Friable FR - Friable FI - Firm VFI - Very Firm EFI - Extremely FirmYMINERALOGY SEXP - Slightly Expansive EXP - Expansive I - fine	GROUP CLASS I S - Sand LS - Loamy II SL - Sandy I L - Loam II SCL - Sandy I L - Loam III SCL - Sandy I L - Loam III SCL - Sandy I CL - Clay Lo SiL - Silt Loa SiL - Silt CO SiL - Silt CO SiC - Silt O SiC - Silt O IV SC - Sandy C - Clay SiC - Silt O IV SC - Sandy C - Clay SiC - Silt O O - Organic O - Organic MOIST CONSISTENCE O - Organic VFR - Very Friable FI - Firable FI - Firable FI - Firable FI - Extremely Firm VFI - Very Firm SEXP - Slightly Expansive EXP - Expansive EXP - Expansive L - fine	TEXTURE TEXTURE GROUP CLASS I S - Sand LS - Loamy Sand LS - Loamy Sand II SL - Sandy Loam L - Loam L - Loam III SCL - Sandy Clay Loam CL - Clay Loam SiL - Silt Loam SiL - Silt Loam Si - Silt SiC - Silty Clay C - Clay IV SC - Sandy Clay Loam IV SC - Sandy Clay C - Clay SiC - Silty Clay O - Organic O - Organic MOIST CONSISTENCE WET CONSIST VFR - Very Friable NS - Non Stick FR - Friable SS - Slightly Sti FI - Firm MS - Moderatelt VFI - Very Firm VS - Very Stick y EFI - Extremely Firm NP - Non Plasti MINERALOGY SP - Slightly Pla SEXP - Slightly Expansive MP - Moderatel VP - Very Plasti VP - Very Plasti		

Give Horizon Depth in inches below natural soil surface and Fill Depth in inches above land surface.

Depth to Soil Wetness: inches below land surface to free water or to soil colors with chroma 2 or less.

Classification: S – Suitable U – Unsuitable

All soil characteristics were described in accordance with the USDA Field Book for Describing and Sampling Soils. The soils were evaluated under moist soil conditions. This evaluation included observations of topography and landscape position, soil morphology (texture, structure, clay mineralogy, organics), soil wetness, soil depth, and restrictive horizons.

TERMS AND CONDITIONS

This AOWE Evaluation is intended to file a Notice of Intent to construct a wastewater system with the Local Health Department and shall expire in five years. This evaluation is not a permit to develop. The owner and subcontractors will need to abide by all state and local rules and regulations pertaining to planning, zoning, and land use development.

<u>Notice of Intent to Construct</u> – Prior to commencing or assisting in the construction, siting, relocation, or repair of a wastewater system, a complete Notice of Intent (NOI) to Construct a wastewater system using an AOWE must be submitted to the Local Health Department (LHD). The owner may apply for a building permit for the project upon submitting a complete NOI and the required fee.

<u>Plan Alterations</u> – If there are any changes in the site plan that can impact the wastewater system, such as moving the house or driveway, site alterations, or if the applicant chooses to change the design daily flow prior to wastewater system construction, a new NOI shall be submitted to the LHD. The applicant shall request in writing that the PE or AOWE invalidate the prior NOI with a signed and sealed letter sent to the applicant and LHD.

<u>Site Alterations</u> – The applicant shall be responsible for preventing modifications or alterations of the site for the wastewater system and the system repair area before, during, and after any construction activities for the facility, unless approved by the AOWE.

<u>On-Site Wastewater System Contractor</u> – The AOWE shall assist the owner in the selection of a certified on-site wastewater system contractor who shall be under contractual obligation to the owner and have sufficient errors and omissions, liability, or other insurance for the system constructed.

<u>Inspections, Construction Observations, and Reports</u> – The AOWE shall make periodic visits to the site to observe the progress and quality of the construction of the wastewater system.

<u>Authorization to Operate (ATO)</u> – Upon determining that the wastewater system has been properly installed and is capable of being operated in accordance with the conditions of the permit, the AOWE shall provide the owner with a report that includes inspection reports, a written operation and management program, any special reports, and an Authorization to Operate. The owner shall sign confirming acceptance and receipt of the report, and then provide a copy to the LHD who will issue the certificate of occupancy for the facility.

<u>Operation and Management</u> – The owner shall be responsible for continued adherence to the operations and management program established by the AOWE. This permit shall in no way be taken as a guarantee or implied warranty that the septic system will function satisfactorily for any given period of time.

<u>Change in System Ownership</u> – An authorized wastewater system shall be transferrable to a new owner with the consent of the AOWE. The new owner and the AOWE shall enter a contract for the wastewater system.

<u>Revocation</u> – The AOWE permit is subject to revocation if the site plan, plat, or the intended use changes. This permit is subject to compliance with the provisions of the laws and Rules for Wastewater Treatment and Dispersal Systems and to the conditions of this permit.

<u>Repair of Malfunctioning Systems</u> – The owner may apply for an Improvement Permit and a Construction Authorization from the LHD or obtain a NOI from an AOWE to repair a malfunctioning wastewater system.