

APPENDIX H

AFFIDAVIT OF ON-SITE WASTEWATER EXISTING SYSTEM PUSUANT TO N.C.G.S. §160D-1110(h1)

[This form is only required with a permit application if the permit applicant is applying for exemption as allowed by N.C.G.S. § 160D-1110(h1)]

STATE OF NORTH CAROLINA

COUNTY OF Harnett

Harnett County Inspection Department

Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered:

225 SHERWOOD HILLS CT

CAMERON, NC 28326

I, JOHN M. DORSA JR

(Print Full Name)

owner of the property, do hereby under penalties of perjury affirm that the proposed building construction will meet local and State on-site wastewater system setback requirements pursuant to N.C.G.S. § 130A-335. Additionally, the proposed construction shall not increase the design daily flow or wastewater strength of the existing system and thereby absolves the State, Inspection Department, and Local Health Department of any responsibility or liability regarding the existing wastewater system.

The property owner may, at his or her discretion, consult with an authorized on-site wastewater evaluator certified by the North Carolina On-Site Wastewater Contractors and Inspectors Certification Board or an inspector, as defined in N.C.G.S. § 90A-71(5), to locate the on-site wastewater existing system and verify setbacks requirements prior to executing this affidavit.

John M. Dorsa Jr 11/21/24
(Signature of Affiant) Date

Sworn to (or affirmed) and Subscribed before me this the 7th day of November, 20 24

Michelle Myatt
Signature of Notary Public

Michelle Myatt
Printed Name of Notary Public

MICHELLE MYATT
NOTARY PUBLIC
Lee County, North Carolina
My Commission Expires May 16, 2028

My Commission Expires: May 16th, 2028 (Notary Stamp or Seal)

HTE# _____

Harnett County Department of Public Health

No. 26275

PERMIT # Bras 2007-0002

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 225 Sherwood Hills Ct (Hwy 24-27)

Name: (owner) Cory Dakar

SUBDIVISION Ridge @ Sherwood Forrest LOT # 9

System Installer: Larry Sharpe

Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

Type of Water Supply: Community Public Well Distance from well _____ feet

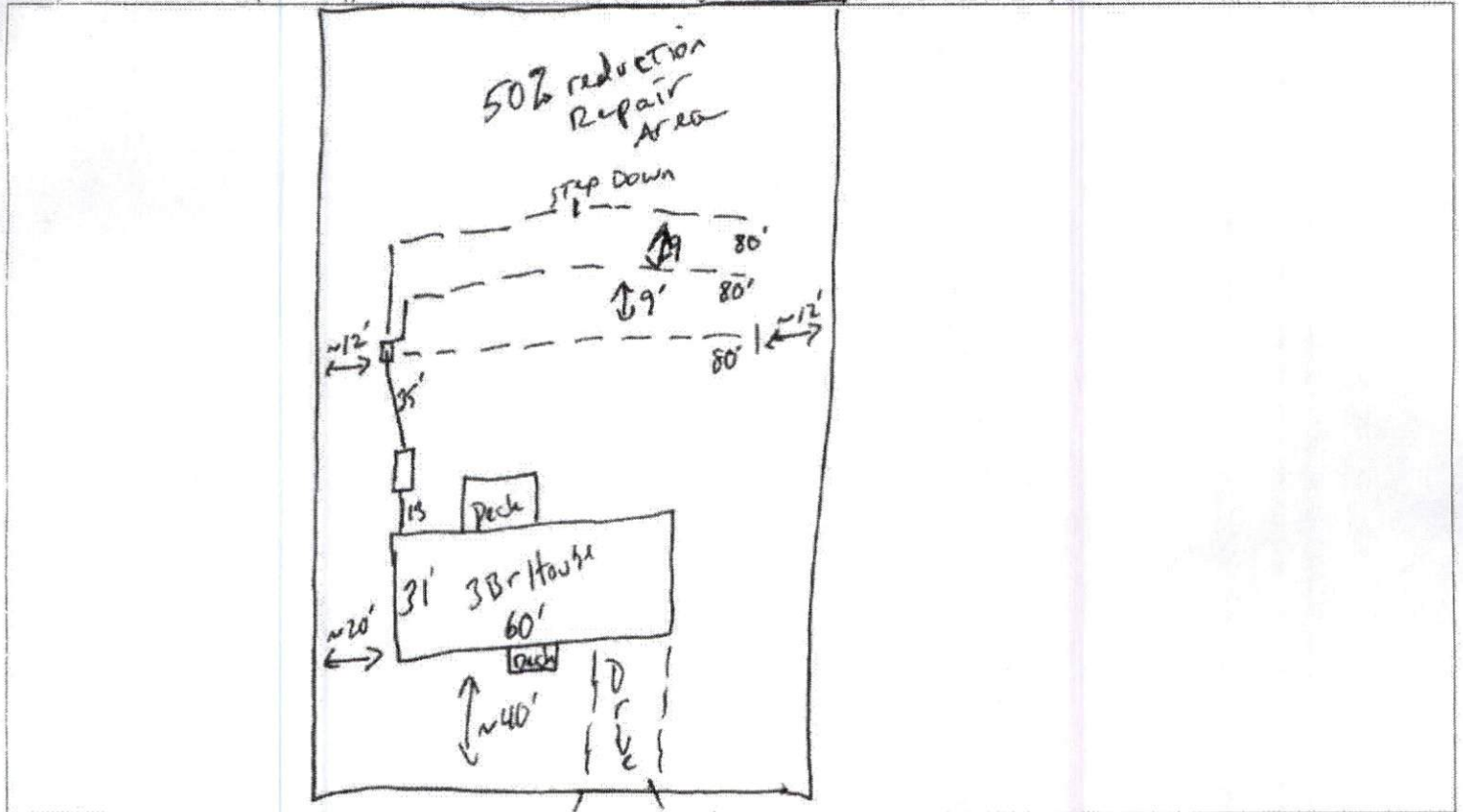
System Type: Type III (E2 Flow)

Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

D-Box Pump Alarm H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other 25% reduction (E2 Flow) Septic Tank: 1000 ^{MCP} gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 3 of each ditch 80 feet ditches 3 feet ditches 24" inches
 French Drain Required: _____ Linear feet

Authorized State Agent Mark [Signature] Date 4-5-21