HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400 Phone (910) 893-8743 / Fax (910) 893-3594

www.halowensoil.com

3 January 2025

Clayton Homes 3340 Gillespie St Fayetteville, NC 28306

Reference: Applicant Instructions for Private Septic Permit

Raynor McLamb Rd, Lot 1

Dear Clayton Homes,

A soil and site evaluation has been conducted for the above referenced property for the purpose of permitting a subsurface sewage waste disposal system. The wastewater system may not be installed until an application is filed with the Local Health Department (LHD). You will need to file a septic application with the LHD, pay the filing fee, and provide a signed copy of the AOWE permit package. After filing a complete NOI, you may apply for building permits.

The AOWE permit package includes:

- Notice of Intent (NOI) to Construct Form (owner must sign NOI)
- Certificate of Insurance for Hal Owen & Associates, Inc.
- A plat or site plan
- AOWE Evaluation for the subject property

If you file application using the permit portal, please add Hal Owen & Associates (hal@halowensoil) as a contact to allow us access to the project.

WATER SUPPLY

You will need to file an application with the County for a public water connection.

REGULATORY COMPLIANCE

Before installing a wastewater dispersal system or making any improvements to the property, it is the landowner's responsibility to verify that any proposed improvements comply with all applicable federal, state and local laws, rules, and regulations concerning land use, zoning, subdivision, erosion control, flood damage prevention, wetland regulations and any other land development restrictions.

CLEARING AND SEPTIC AREA PREPARATION

It is important that you do not disturb the septic areas during site construction. A staked line or protective fence should be placed around the system areas prior to construction to eliminate any potential damage to the soil or the layout of the system. Septic areas should not be used for staging construction materials or subjected to vehicular traffic. Do not cut, grade, fill, install utilities, or otherwise alter the designated septic areas.

Care should be taken when clearing vegetation from the septic area. Work should only occur when the soil is at the appropriate moisture content to limit the impact to the soil structure in the soil treatment area. Do not scrape the ground inside the drainfield. Any clearing or preparation of the septic areas shall be done without removal, disturbance, or compaction of the soil.

SEPTIC SYSTEM INSTALLATION

Hal Owen & Associates Inc. is responsible for inspecting and approving the septic system installation; therefore, it is important for you to coordinate with us in choosing an installer to ensure a quality installation and to avoid project delays, cost overrun, or permit revocation. The septic system installer shall hold a current certification from the North Carolina Onsite Wastewater Contractor Inspector Certification Board as a **Level II installer or higher**. The installer shall **provide proof of liability insurance** with effective dates of coverage. The installer shall submit a **signed and dated statement of responsibility** to the owner, prior to commencement of work, that contains acknowledgement of the requirements of the onsite wastewater system specified by the AOWE (a sample form is attached). A courtesy list of installers we often work with is attached.

Hal Owen & Associates Inc should be **contacted at least five days** prior to the anticipated septic installation date in order to schedule a **pre-construction conference and site visit**. We will observe and note current site conditions and verify the locations of the structure, driveway, parking, and septic system layout. If any features are found to be out of compliance with the AOWE Permit, the inspector may delay the start of installation until issues are resolved.

AUTHORIZATION TO OPERATE (ATO)

Hal Owen & Associates Inc. will inspect the septic system prior to the system being covered. A Post-Construction Conference with the installer, owner (or agent), and Hal Owen & Associates staff is required. The conference shall include start-up and any required verification of the system components. Upon determining that the system is properly installed, we will issue an Authorization to Operate (ATO) and include an inspection report, as-built sketch, and system operation and management program. The applicant shall provide a copy of these documents along with the filing fee to the LHD, who will issue the certificate of occupancy for the facility.

Our services associated with the ATO permit will be billed at an hourly rate at the time the system is installed. You should budget \$500-\$1000 for this service.

I appreciate the opportunity to provide this service. If you have any questions or need additional information, please contact me at your convenience.

Sincerely

Hal Owen

Licensed Soil Scientist

Authorized Onsite Wastewater Evaluator

On-Site Wastewater System Contractor Statement of Responsibility

Project Name (site identifiers):	
County: LHD	Reference:
AOWE: Hal Owen, LSS #1102 and AOWE #1003	6E
Wastewater System Owner:	
Name:	
Address:	
I,	, am a certified on-site wastewater
system contractor licensed in the State of North Ca	arolina pursuant to article 5 of Chapter 90A of
the General Statutes. I acknowledge the requirement	ents of the on-site wastewater system specified
by the Authorized On-Site Wastewater Evaluator	(AOWE) and agree to be responsible for all
aspects of the construction and installation of the wa	astewater system and its components, including
adherence to specifications and any special inspecti	ons that are prepared, signed, and sealed by the
AOWE. I have sufficient errors and omissions, lia	bility, or other insurance for the system to be
constructed.	
Signature of Installer	Certification # Date

Local Septic System Installers

Name	Telephone	Level & Cert#	County
Jason Matthews		Level IV	Harnett
Matthews Backhoe Service	(919) 552-2669	#1228	
Fuquay-Varina, NC			
Don Gaddy		Level IV	Moore
Don Gaddy Septic	(910) 245-3066	#2706	
Cameron, NC			
Jay Adcock		Level IV	Wake
Adcock Excavating LLC	(919) 552-6724	#1902	
Fuquay-Varina, NC			
Edward Faison		Level IV	Wake
Quality Septic Services Inc	(919) 365-9823	# 4530	
Wendell, NC			
Shane MacDonald	(910) 580-1500	Level IV	Harnett
Eastern Septic and Inspections		# 5572	
Erwin, NC			
Ted Brown	(919) 499-5985	Level III	Harnett
Cameron, NC		#1041	
Clint Adams		Level IV	Harnett
Clint Adams Hauling and Grading	(919) 868-1674	#1205	
Angier, NC			
Tyler A Nordan		Level IV	Johnston
Gene's Backhoe Services	(919) 868-2754	#3795	
Willow Spring, NC			
John Allen Scott		Level II	Moore
Scott Septic Service	(910) 783-5688	#6891	
Robbins, NC			
Christian Blake Boswell		Level IV	Nash
Boswell And Son Septic Tank	(252) 977-9384	#1254	
Sharpsburg, NC			
Bobby Winn Thomas		Level IV	Johnston
State Mobile Home Movers	(919) 422-8623	#4813	
Benson, NC			
Arturo Cardenas	(919) 291-9555	Level II	Harnett
Cardenas Construction		#2455	
Angier, NC			

For a complete list of certified subsurface operators in NC go to https://ncowcicb.info/

INFORMATION FOR THE INSTALLER

- Read the permit carefully prior to bidding.
- Note whether tanks must be water tested prior to installation and a certification supplied.
- Install system during dry conditions in order to protect the soil structure.
- Call Hal Owen & Associates at least <u>5 days</u> in advance for a pre-construction conference and to schedule the installation date.
- Elevations at pin flag locations should be checked by installer prior to digging trenches. Hal Owen & Associates sets pin flags at the center of the trench.
- Provide proof of liability insurance with effective dates of coverage to

Hal Owen & Associates, Inc.

PO Box 400

Lillington, NC 27546

• Submit a signed and dated statement of responsibility to the owner, prior to commencement of work, that contains acknowledgement of the requirements of the onsite wastewater system specified by the AOWE. Email a copy of the signed statement to hal@halowensoil.com for our records.



OP ID: SGW

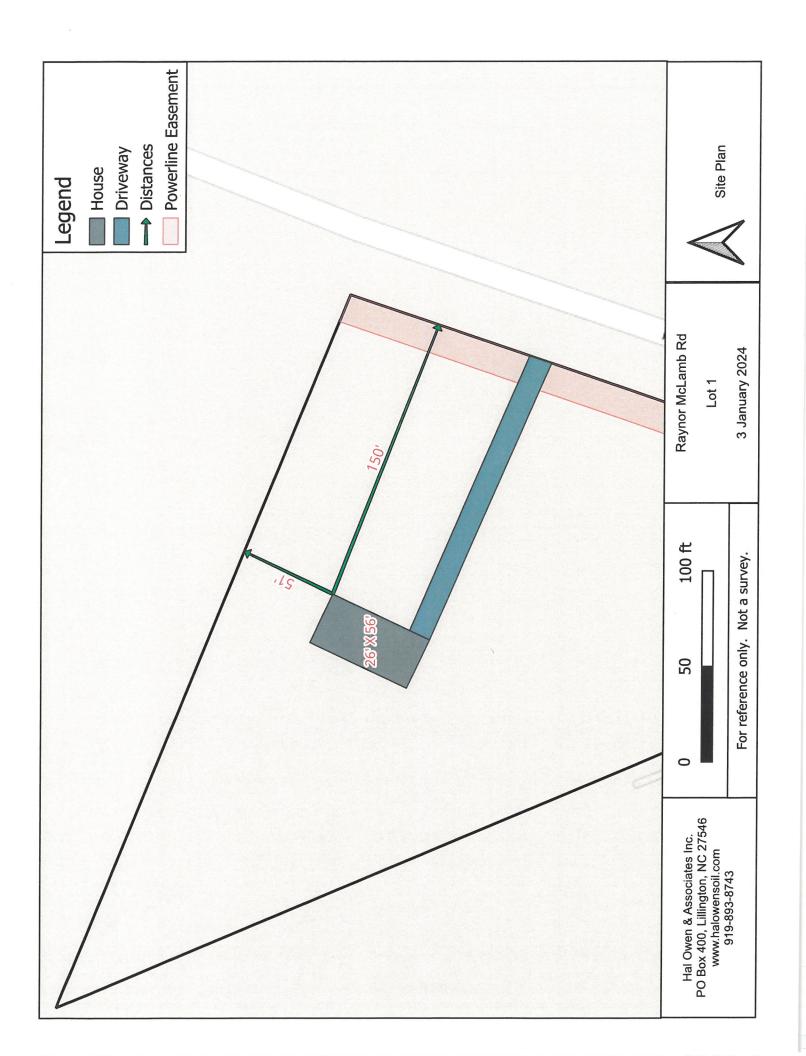
CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/23/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the noticy/les) must have ADDITIONAL INSURED provisions

	his certificate does not confer rights		910-893-5707		CONTA	CT SHARO	N WOODY				
INS	SURANCE SERVICE CTR -LILLING LINGTON BRANCH OFFICE				PHONE	o, Ext): 910-8	93-5707		FAX	910-89	93-2077
IPO	Box 1565				E-MAIL	SWOOD	Y@ISCFAY	Y.COM	(A/C, NO).		
DAI	LINGTON, NC 27546 NIEL L. BABB				AUDIT			RDING COVERAGE			NAIC#
					INSURI	A 2000 March 1990	STONE NAT				
INS	URED LOWEN & ASSOCIATES, INC.				INSURI	RB:					
PO	BOX 400				INSURI	RC:					
LILI	LINGTON, NC 27546				INSUR	RD:					
					INSUR	RE:					
					INSUR	RF:					
			ATE NUMBER					REVISION NUM			
C	HIS IS TO CERTIFY THAT THE POLICIES NDICATED. NOTWITHSTANDING ANY RESERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	EQUIRE PERTAI	MENT, TERM C IN. THE INSURA	OR CONDITION ANCE AFFORD	OF AN	Y CONTRACT	r or other Es describe	DOCUMENT WITH D HEREIN IS SU	H RESPE	CT TO	WHICH THIS
INSR LTR		ADDL SU		LICY NUMBER			POLICY EXP (MM/DD/YYYY)		LIMIT	s	
	COMMERCIAL GENERAL LIABILITY	INGD W				(WINDE/TTTT)	IMIM/DD/TTTT	EACH OCCURRENCE		s	
	CLAIMS-MADE OCCUR							DAMAGE TO RENT PREMISES (Ea occu	ED (mence)	\$	
								MED EXP (Any one		\$	
								PERSONAL & ADV I		\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG	SATE	\$	
	POLICY PRO-							PRODUCTS - COMP	P/OP AGG	\$	
	OTHER:									\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE (Ea accident)	LIMIT	\$	
	ANY AUTO OWNED SCHEDULED							BODILY INJURY (Pe	er person)	\$	
	OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Pe	er accident)	\$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)	,c	\$	
	<u> </u>									\$	
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE							EACH OCCURRENC	CE	\$	
	DED RETENTION\$	+						AGGREGATE		\$	7
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER	\$	
										•	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDEN		\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA E		¢	
Α	PROFESSIONAL LIAB.		42ESP0014	3901		01/27/2024	01/27/2025		ICT LIMIT	Ψ	1,000,000
								AGGREGATE			2,000,000
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (ACC	ORD 101, Additiona	l Remarks Schedu	le, may be	attached if mor	e space is requir	ed)			
CEF	RTIFICATE HOLDER				CANC	ELLATION					
	CLAYTON HOMES 3340 GILLESPIE ST				THE	EXPIRATION	DATE THE	ESCRIBED POLICI REOF, NOTICE Y PROVISIONS.			
	FAYETTEVILLE, NC 2830	6				ZED REPRESE	NTATIVE CLOOO	8			



HOA-AOWE-2412-05

Issue date 1/3/2025

Expiration 1/3/2030

APPLICANT INFORMATION

Name	Clayton Homes			
Mailing Address	3340 Gillespie St, Fayetteville, NC 28306			
E-mail Address	HC196@claytonhomes.com	Telephone Number	910-424-8600	

PROPERTY IDENTIFIERS

County	Harnett	PIN	0545-78-2993.000
Size (Acre)	1.93	County PID	
Site Address	Raynor McLamb Rd, Linden, NC 28356		
S/D Name and Lot#	Lot 1		

PROJECT INFORMATION

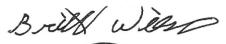
Wastewater System	New		.0403 Eng Low Flow	No
Wastewater Strength	Domestic		Effluent Standard	DSE
Facility Type	Residential		Water Supply	Public Water
Design Wastewater Flow	360	gpd	gal/unit	120
Basis for Flow	3 bedrooms		max occupancy	6
Basement	No		Fixtures in basement?	No
Crawl Space	Yes		Slab Foundation	No

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.







Hal Own

WASTEWATER SYSTEM DESIGN SPECIFICATIONS

Permit # HOA-AOWE-2412-05

Proposed Design Daily Flow	360	_gpd	Drainfield Meeets Requ	irements:
Septic Tank Size (minimum)	1000	gallons	.0508 Available Space	Yes
Pump Tank Size (minimum)	1000	gallons, if required	.0601 Setbacks	Yes

Initial System

System Type	IIb – Accepted	wastewa	ter gravity system			
Pump Required	No			ft TDH at		GPM
Trenches:	Accepted (25%	reductio	n) System			
Design LTAR		0.50	gal/day/ft ²	Sapro	lite System	No
Total Trench/ Be	d Length	180	feet		Fill System	No
Trench Spacing		9	ft on center		_	
Usable soil depth	to LC	48	inches			
Maximum Trench	n Depth	24	inches, measure	d on downhill	side of tren	ch
Minimum Soil Co	ver	6	inches			
Artificial Drainage	Required	No				

Repair System

System Type:	Ilb - Accepted	wastewa	ter gravity system		
Pump Required	No		<u> </u>	Control of the Contro	
Trenches:	Accepted (25%	reductio	n) System		
Design LTAR	,	0.50	gal/day/ft ²	Saprolite System	No
Total Trench/ Be	d Length	180	feet	Fill System	No
Trench Spacing		9	ft on center		
Usable soil depth	n to LC	48	inches		
Maximum Trencl	h Depth of	24	inches, measured	on downhill side of trencl	h
Minimum Soil Co	ver	6	inches		

Potential Drainlines flagged at site on 9-ft centers.

	a. = . a	oo naggod at o		01110101	_
		Relative	Drainline	Field	
Line #	Color	Elevation (ft)	Length(ft)	Length(ft)	
1	Υ	100.93	60	97	<u>ہ</u>
2	R	99.87	60	91	Initial
3	В	98.93	60	85] -
4	W	98.16	60	81	ב. ר
5	Υ	97.07	60	81	Repair
6	R	96.14	60	78	ا ا
Septic T	ank:	103.87			
Referenc	e Elev:	100.00	1	Notes:	

^{*}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-2412-05

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 Specifications. 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 County, well, or riparian ordinances) may require more stringent setbacks than specified in the State 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.

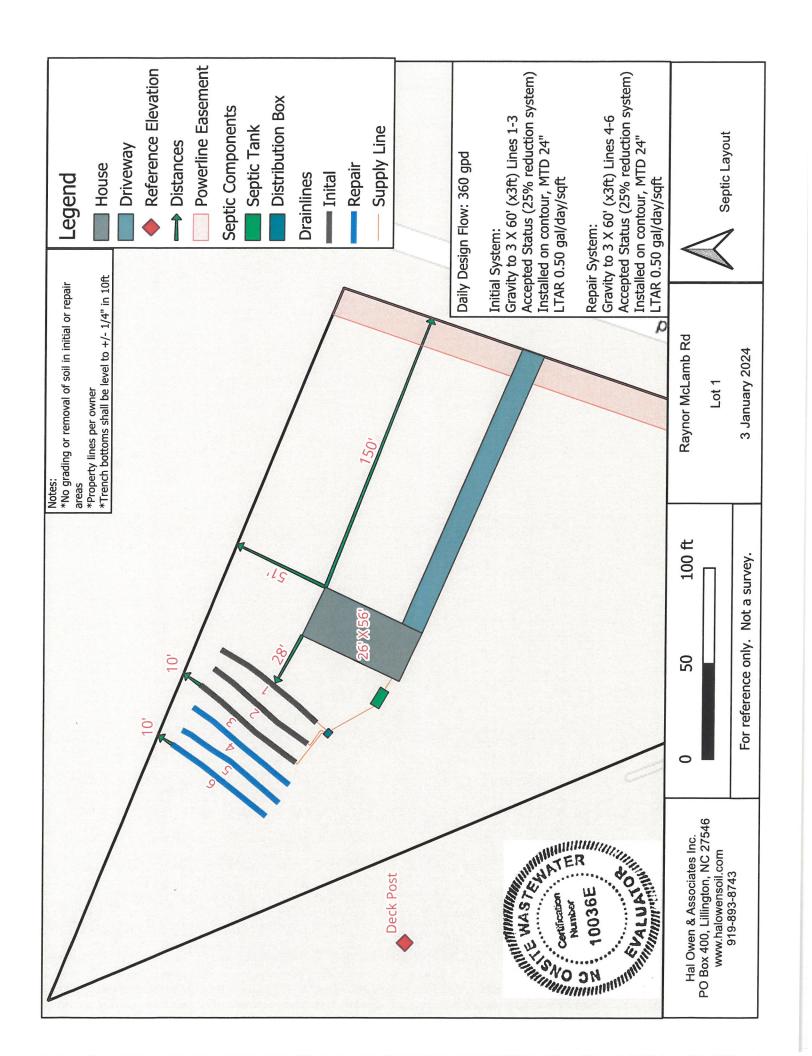
The wastewater system shall not be covered until inspected by Hal Owen & Associates and shall not be placed into use until an Authorization to Operate is issued.

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.



INITIAL WASTEWATER SYSTEM

Permit # HOA-AOWE-2412-05

Gravity System Design Criteria

DESIGN DAILY FLOW

gallons 360

SOIL LTAR: 0.50 gpd/ft²

TANK (minimum) Septic Tank: 1000 gallons

SUPPLY LINE

Length (ft): 25 Diameter: 3 "sch 40 pvc

slope = 9.36% *minimum slope of supply line is 1/8" per foot (%1.04)

TRENCHES

Drainline Type: Accepted (25% reduction) System

Maximum Trench Depth of 24 inches, measured on downhill side

Trench height: 12 inches Trench width:

Trench Length Factor: 75 %

Effective Trench Width: Minimum Linear Length:

ft 180 ft

ft

Absorption Area: 540 Actual Trench Length:

X

60 ft 180

Gravity Distri	bution Schematic			
Septic Tank Ground	Tank Outlet*	D-Box	<i>Trench</i> Ground	
Elev (ft)= 103.87 ft	Depth (in) = 18 Elev (ft)= 102.37	Elev (ft)= 100.03	Elev (ft)= 100.93	_
COMPANIA PRODUCTION OF THE PROPERTY OF THE PRO	ACCESSION OF BUILDING STATE OF		Trench Drainline	Trench Bottom Elev (ft)= 98.93
PRECAST CON-	28 TE TANK SENCRIT > 2500 PS()		drawing N	I.T.S.

^{*}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.

REPAIR AREA

Permit # HOA-AOWE-2412-05

Gravity System Design Criteria

DESIGN DAILY FLOW

360 gallons

SOIL LTAR: 0.50 gpd/ft²

TANK (min)

Septic Tank: 1000 gallons

SUPPLY LINE

Length (ft): 58 Diameter: 3 "sch 40 pvc

slope = 8.81% *minimum slope of supply line is 1/8" per foot (%1.04)

TRENCHES

Drainline Type: Accepted (25% reduction) System

Maximum Trench Depth of ______ inches, measured on downhill side

Trench height: 12 inches Trench width: 3 ft Length Factor: 75 % Effective Trench Width: 4 ft

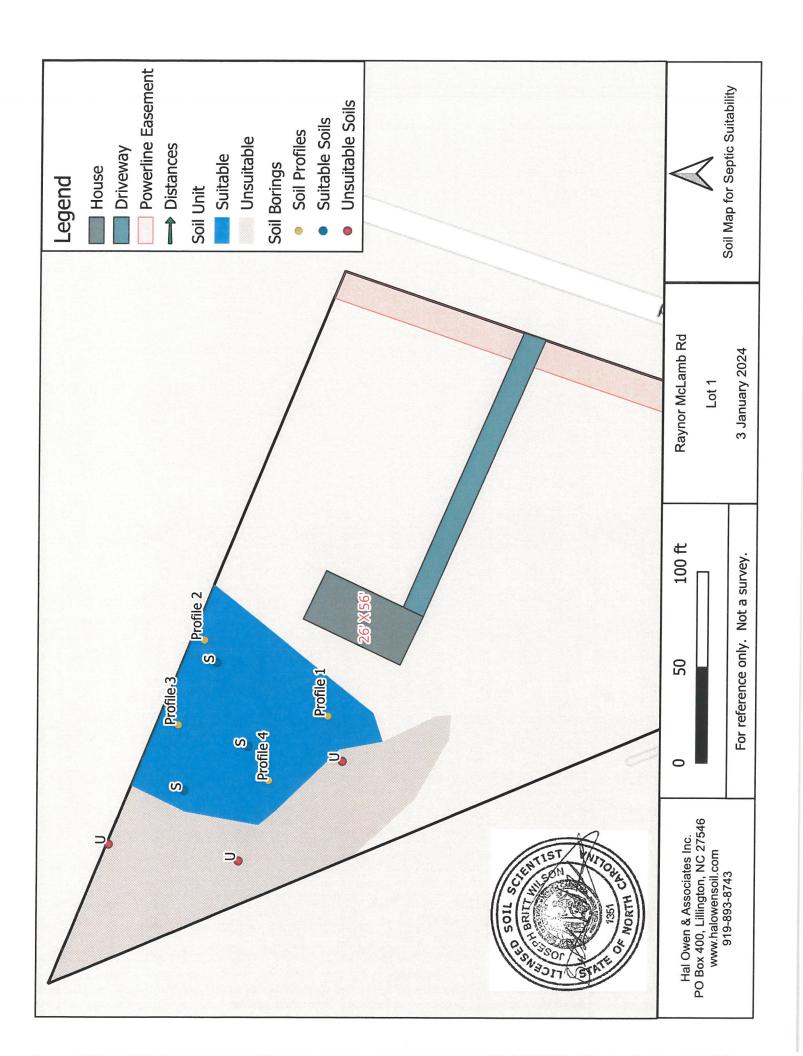
Trench Length Factor: 75 % Effective Trench Width: 4 ft

Absorption Area: 540 ft² Minimum Linear Length: 180 ft

Actual Trench Length: 3 X 60 ft = 180 ft

Gravity Distri	bution Schematic			
Septic Tank	Tank Outlet*	D-Box	Trench	
Ground	Tank Outlet	D-B0x	Ground	
Elev (ft)=	Depth (in) =18	Elev (ft)=	Elev (ft)=	:
103.87 ft	Elev (ft)=102.37	97.26	98.16	_
ONCE MEAN	STEPLE WITH A STATE OF THE STAT	D-box	Trench	Trench Bottom
	Supply 58		Drainline	Elev (ft)= 96.16
PRECAST CINEMA STRE	RETE LANK NACTH IS 2000 PBI)		drawing N	I.T.S.

^{*}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-2412-05	

SOIL/SITE EVALUATION FORM FOR ON-SITE WASTEWATER SYSTEM

OWNER NAME:	Clayton Homes				
PROPOSED FACILITY:	Residential	DESIGN DAILY FLOW:	360	WATER SUPPLY P	ublic Water
LOCATION OF SITE:	Raynor McLamb Rd, Lind	en, NC 28356	PIN:	0545-78-2993.000	
WASTEWATER TYPE:	Domestic		COUNTY:	Harnett	
EVALUATION METHOD	: AUGER BORING	PIT		CUT	
EVALUATED BY:	Britt Wilson, LSS#1351		_ DA	TE EVALUATED: 1	2/19/24
	INITIAL SYST	EM		REPAIR SYSTEM	
AVAILABLE SPACE	540 ft ² trench bott	om	540	ft2 trench bottom	
SYSTEM TYPE	Accepted (25% re	eduction) System	Acce	pted (25% reduction)) System
SITE LTAR	0.50 gpd/ft ²		0.50	gpd/ft ²	
MAX TRENCH DEPTH	24 inches (measu	red on downhill side)	24	inches (measured o	n downhill side)
SITE CLASSIFICATION	Suitable	OTHE	R FACTORS		

COMMENTS:

PROFILE 1

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	CTORS
DEPTH		TENCE			LOGY		
0-3	10YR 4/2	VFR	LS	GR	SEXP	LANDSCAPE POSITION	cv
3-9	2.5Y 6/4	VFR	LS	GR	SEXP	SOIL WETNESS DEPTH	>48"
9-28	2.5Y 6/3	VFR	LS	GR	SEXP	SOIL WETNESS COLOR	
28-32	10YR 6/6	VFR	SL	GR	SEXP	SOIL DEPTH	48"
32-48+	7.5YR 5/8	FR	SCL	SBK	SEXP	SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	12
PROFILE C	LASSIFICAT	ION	Suitable	LTAR gpd/ft ²	0.55	SLOPE CORRECTION (IN)	4.3
COMMENT							

PROFILE 2

	0. 						
HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-3	10YR 4/2	VFR	LS	GR	SEXP	LANDSCAPE POSITION	cv
3-9	2.5Y 6/4	VFR	LS	GR	SEXP	SOIL WETNESS DEPTH	>48"
9-32	2.5Y 6/3	VFR	LS	GR	SEXP	SOIL WETNESS COLOR	
32-48+	10YR 5/6	VFR	SL	GR	SEXP	SOIL DEPTH	48"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	12
PROFILE C	LASSIFICAT	ION	Suitable	LTAR gpd/ft ²	0.7	SLOPE CORRECTION (IN)	4.3
COMMENT							

PROFILE 3

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	CTORS
DEPTH		TENCE			LOGY		
0-3	10YR 4/2	VFR	LS	GR	SEXP	LANDSCAPE POSITION	cv
3-6	2.5Y 6/4	VFR	LS	GR	SEXP	SOIL WETNESS DEPTH	>48"
6-21	2.5Y 6/3	VFR	LS	GR	SEXP	SOIL WETNESS COLOR	
21-39	2.5Y 7/3	VFR	LS	GR	SEXP	SOIL DEPTH	48"
39-48+	10YR 5/6	VFR	LS	GR	SEXP	SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	12
PROFILE C	LASSIFICAT	ION	Suitable	LTAR gpd/ft ²	0.8	SLOPE CORRECTION (IN)	4.3
COMMENT							

PROFILE 4

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	CTORS
DEPTH		TENCE			LOGY		
0-3		VFR	LS	GR	SEXP	LANDSCAPE POSITION	CV
3-6		VFR	LS	GR	SEXP	SOIL WETNESS DEPTH	>48"
6-35		VFR	LS	GR	SEXP	SOIL WETNESS COLOR	
35-43		FR	SCL	SBK	SEXP	SOIL DEPTH	48"
43-48+		FI	SCL	SBK	SEXP	SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	12
PROFILE C	LASSIFICAT	ION	Suitable	LTAR gpd/ft ²	0.5	SLOPE CORRECTION (IN)	4.3
COMMENT							

SOIL/SITE EVALUATION FORM FOR ON-SITE WASTEWATER SYSTEM

LEGEND OF ABBREVIATIONS

LANDSCAPE		TEXTURE		TEXTURE		LTAR
POSITION		GROUP CL		CLASS		(gal/day/sqft)
CC - Concave Slope		I S - Sar		S - Sand		1.2-0.8
CV - Convex Slope				LS - Loamy	Sand	
DS - Debris Slump						
D - Depression		Ш		SL - Sandy	Loam	0.8 - 0.6
DW - Drainage Way				L - Loam		
FP - Flood Plain						
FS - Foot Slope		Ш		SCL - Sand	ly Clay Loam	0.6 - 0.3
H - Head Slope				CL - Clay L	oam	
L - Linear Slope				SiL - Silt Lo	am	
N - Nose Slope				Si - Silt		
R - Ridge				SiCL - Silt C	Clay Loam	
S - Shoulder Slope						
T - Terrace		IV		SC - Sandy Clay		0.4 - 0.1
TS - Toe Slope				C - Clay		
		SiC - Silty C		Clay		
				O - Organic		none
STRUCTURE		MOIST CONSIS	TENCE		WET CONSISTE	NCE
G - Single Grain		VFR - Very Frial			NS - Non Stick	
M - Massive		FR - Friable	oic .		SS - Slightly Sticky	
CR - Crumb		FI - Firm			MS - Moderately Stick	
GR - Granular		VFI - Very Firm			VS - Very Sticky	
SBK - Subangular Block	v	EFI - Extremely	Firm		l voly ollony	
ABK - Angular Blocky	, l				NP - Non Plastic	
PL - Platy		MINERALOGY			SP - Slightly Plastic	
PR - Prismatic		SEXP - Slightly Expansive			MP - Moderately Plastic	
		EXP - Expansive	•		VP - Very Plastic	
MOTTLES	f – few		1 - fine		F - Faint	
	c – commo	on	2 - medium		D - Distinct	
m – many			3 - coarse	77700-7	P - Prominent	

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.

Notice of Intent to Construct – 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.

On-Site Wastewater System Contractor – 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.

Authorization to Operate (ATO) – 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.

Operation and Management – 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.

Revocation – 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.

Repair of Malfunctioning Systems – 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.



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: Clayton Homes
Mailing address: 3340 Gillespie St City: Fayetteveille State: NC Zip: 28306
Phone: 910-424-8600 Email: HC196@claytonhomes.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
Site Location Information: Site address: Raynor McLamb Rd, Lot 1
Tax parcel identification number or subdivision lot, block number of property:
PIN 0545-78-2993.000 County: Harnett
System Information: Wastewater System Type: Illb (Accepted wastewater gravity system) Daily Design Flow: 360 gpd Saprolite System:Yes _XNo
Facility Type: X Residential 3 # Bedrooms 6 Maximum # of Occupants
Business Type of Business and Basis for Flow:
Public Assembly Type of Public Assembly and Basis for Flow:
Required Attachments: V Plat or Site Plan Evaluation of Soil and Site Features by Licensed Soil Scientist
Attest: On this the 3 day of January, 2025 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 3 day of January 2030.
Signature of Authorized Onsite Wastewater Evaluator:
ignature 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 equired (if any) to the local health department. An onsite wastewater system authorized by an authorized onsite wastewater valuator shall be transferable to a new owner with the consent of the authorized onsite wastewater evaluator.
ocal Health Department Receipt Acknowledgement: ignature of Local Health Department Representative: