

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 ExpansionRepair RelocationRelocation of Repair Area |
|---|
| Owner or Legal Representative Information: Troy Wilkerson Name: D Dubs Real Estate LLC Mailing address: 1774 Benson Raod City: Angier State: NC Zip: 27501 Phone: 910-279-7062 Email: troy.ddubs@gmail.com |
| Authorized Onsite Wastewater Evaluator Information: Name: Alex Adams Certification #: AOWE# 10021E Mailing address: 1676 Mitchell Road City: Angier State: NC Zip: 27501 Phone: 919-414-6761 Email: alexadams@bcsoil.com |
| Site Location Information: Site address: 762 Popes Lake Road - Angier, NC 27501 Tax parcel identification number or subdivision lot, block number of property: PIN# 0692-39-3045 County: Harnett |
| System Information: Wastewater System Type Type III (b) Daily Design Flow: 240 gallons/day Saprolite System:YesX_No Subsurface Operator Required:YesX_No Water Supply Type:X_Private WellPublic Water SupplySpringOther: |
| Facility Type: X_Residential 2 # Bedrooms 4 _ Maximum # of Occupants Business |
| Requird_Attachments:x_Plat_or_Siteplanx_ Evaluation of Soil and Site Features by Licensed Soil Scientist |
| Attest: On this the 11th day of October, 2023 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 1th day of October, 2028. Signature of Authorized Onsite Wastewater Evaluator: |
| 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: |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/7/2023

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.

| th | e terms and conditions of the policy, | certai | n poli | | | | | | | 100 | |
|------|--|--------------------------|---------------|--|-------------------|--------------------|-----------------------------|--|----------------|-----------------|-------------|
| _ | ertificate holder in lieu of such endors | emen | t(s). | | CONTA | T Angela | Sensenig | | | | |
| | e Associates, LLC | | | | NAME: PHONE | (252) | 631-5269 | | FAX | (252) 649 | 2443 |
| | Pollock St. | | | | (A/C, No | SS: asensen: | | | (A/C, No): | (252) 643 | -2443 |
| 250 | POLICE St. | | | | ADDRE | | | | | | |
| N | B NG 20 | - 60 | | | | | | DING COVERAGE | | | NAIC # |
| | | 560 | | | INSURE | RA: Markel | Insurance | Company | | | 38970 |
| INSU | | | | | INSURE | RB: | | | | | |
| | x Adams, DBA: Adams Soil Cor | sult | ing | | INSURE | RC: | | | | | |
| 167 | 6 Mitchell Rd. | | | | INSURE | RD: | | | | | |
| | | | | | INSURE | RE: | 316 311 | | | | |
| _ | | 501 | | | INSURE | RF: | | | | | |
| | | | | NUMBER: 23-24 Mast | | | | REVISION NU | | | |
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| LTR | TYPE OF INSURANCE | INSD | WVD | POLICY NUMBER | | (MM/DD/YYYY) | (MM/DD/YYYY) | | LIMIT | S | |
| | COMMERCIAL GENERAL LIABILITY | | | | | | | EACH OCCURRE | | \$ | |
| | CLAIMS-MADE OCCUR | | | | | | | PREMISES (Ea o | | \$ | |
| | | | | | | | | MED EXP (Any or | ne person) | \$ | |
| | | | | | | | | PERSONAL & AD | V INJURY | \$ | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGRE | GATE | \$ | |
| | POLICY PRO- JECT LOC | | | | | | | PRODUCTS - COM | MP/OP AGG | \$ | |
| | OTHER: | | | | | | | | | \$ | |
| | AUTOMOBILE LIABILITY | | | | | | | (Ea accident) | LE LIMIT | \$ | |
| | ANY AUTO | | | | | | | BODILY INJURY | (Per person) | \$ | |
| | ALL OWNED SCHEDULED AUTOS | | | | | | | BODILY INJURY | (Per accident) | \$ | |
| | HIRED AUTOS NON-OWNED AUTOS | | | | | | | PROPERTY DAM/ (Per accident) | \GE | \$ | |
| | | | | | | | | | | 5 | |
| | UMBRELLA LIAB OCCUR | | | | | | | EACH OCCURRE | NCE | s | |
| | EXCESS LIAB CLAIMS-MADE | | | | | | | AGGREGATE | | s | |
| | DED RETENTION \$ | 1 | | | | | | | | \$ | |
| | WORKERS COMPENSATION | | | | | | | PER STATUTE | OTH- ER | _ | |
| | AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE Y / N | 1 | | | | | | E.L. EACH ACCID | - | s | • |
| | OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | N/A | | | | | | E.L. DISEASE - EA | | \$ | |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - PO | | 5 | |
| A | Errors & Omissions | | | ME011101 | | | | | PERO! EINI! | · · | |
| ^ | ations & Omissions | | | ME011181 | | 1/31/2023 | 1/31/2024 | General Aggregate Each Occurrence | | | \$1,000,000 |
| DESC | RIPTION OF OPERATIONS / LOCATIONS / VEHICLE | S (ACC | ORD 10 | 1, Additional Remarks Schedule, m | ay be atta | iched if more spac | ce is required) | | | | |
| CFF | RTIFICATE HOLDER | | | | CANO | ELLATION | | | | | |
| | *FOR INFORMATIONAL PURP XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | XXXX | XXX | | SHO THE ACC | ULD ANY OF T | TATIVE | SCRIBED POLIC F, NOTICE WILL I Y PROVISIONS. | | | DBEFORE |
| | | | | | N1111 | COCCET MACE | 9 his Ad | | IV feel V | 4 | |

Adams Soil Consulting, PLLC 1676 Mitchell Road Angier, NC 27501 919-414-6761

alexadams@bcsoil.com

October 11, 2023 Project #1782

"This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-336.2

RE: D Dubs Real Estate, LLC – 762 Popes Lake Road – Angier, NC (Harnett County) 240 gallon/day 2-bedroom septic design

To whom it may concern:

Adams Soil Consulting (ASC) conducted a preliminary soil evaluation on the above referenced parcel to determine the areas of soils which are suitable for subsurface wastewater disposal systems (conventional & LPP). The soil/site evaluation was performed using hand auger borings during moist soil conditions based on the criteria found in the State Subsurface Rules, 15ANCAC 18A .1900 "Laws and Rules for Sewage Treatment and Disposal Systems". From this evaluation, ASC is providing the attached septic system for a new septic field to service the existing 2-bedroom structure on the property.

The suitable soils found on the subject property were somewhat consistent in the initial and repair areas. The area designated for the initial/primary septic system (see attached septic plan) was found to contain soils with greater than 36 inches in depth before a restrictive horizon was encountered.

The initial and primary septic fields for the existing home were sized based on a flow rate of 240 gallons/day and utilizing Accepted Status system for the initial and repair system. Any unauthorized site disturbance, filling, soil removal, or layout changes may result in the permit being revoked.

The septic installer contractor shall install the primary system on contour, see attached site plan for the primary system and repair. No underground utilities, water lines, or sprinkler systems shall be placed into the initial or repair septic areas. Installation must meet all state and local county regulations for septic system installation. The trenches must be installed in the same location as the site plan. If flags are missing at the time of installation, they must be remarked by Adams Soil Consulting staff. Contact Alex Adams at 919-414-6761. A preconstruction conference is required with the septic installer prior to construction activities at least 14 days in advance of construction activities.

This report does not guarantee the future function of any waste water disposal system installed.

If you have any questions regarding the findings on the attached site plan or in this report, please feel free to contact me anytime.

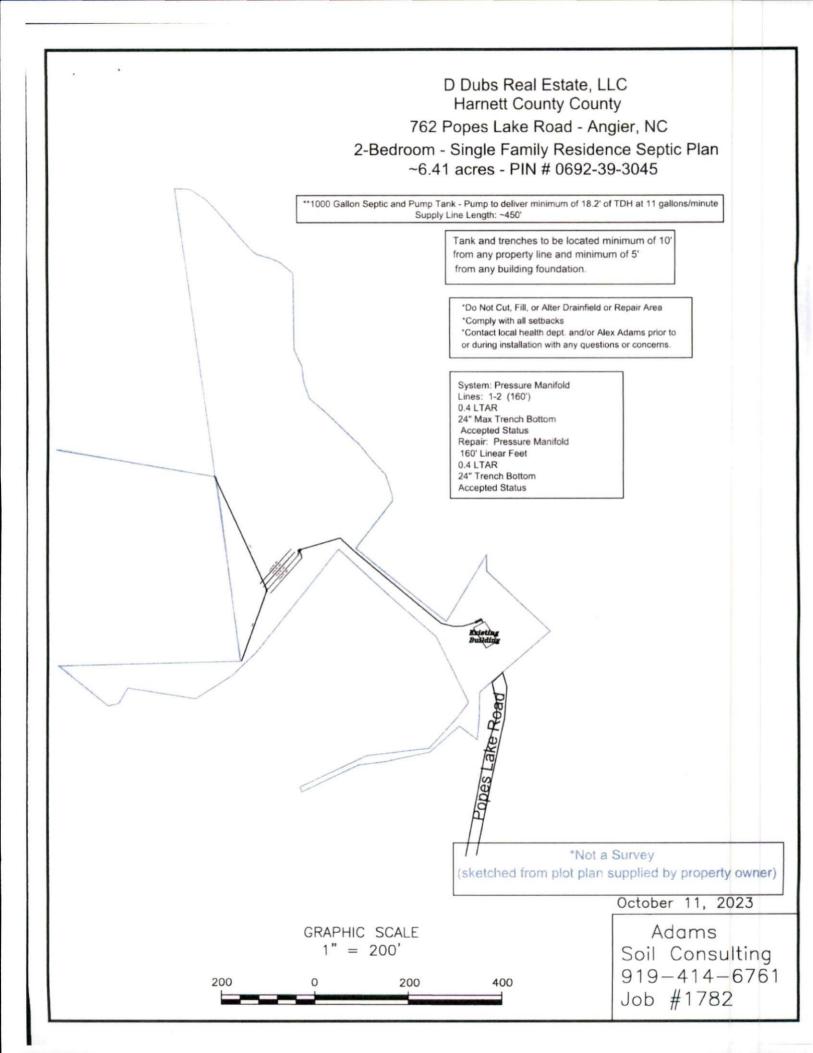
Sincerely,

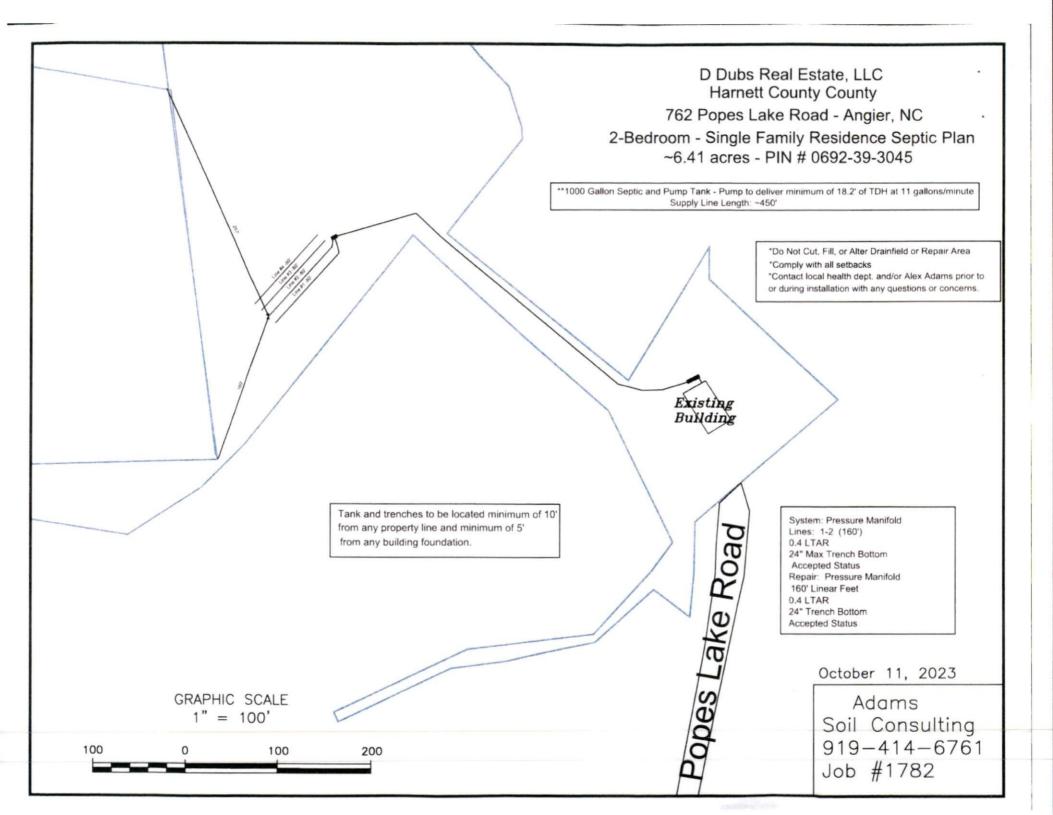
Alex Adams

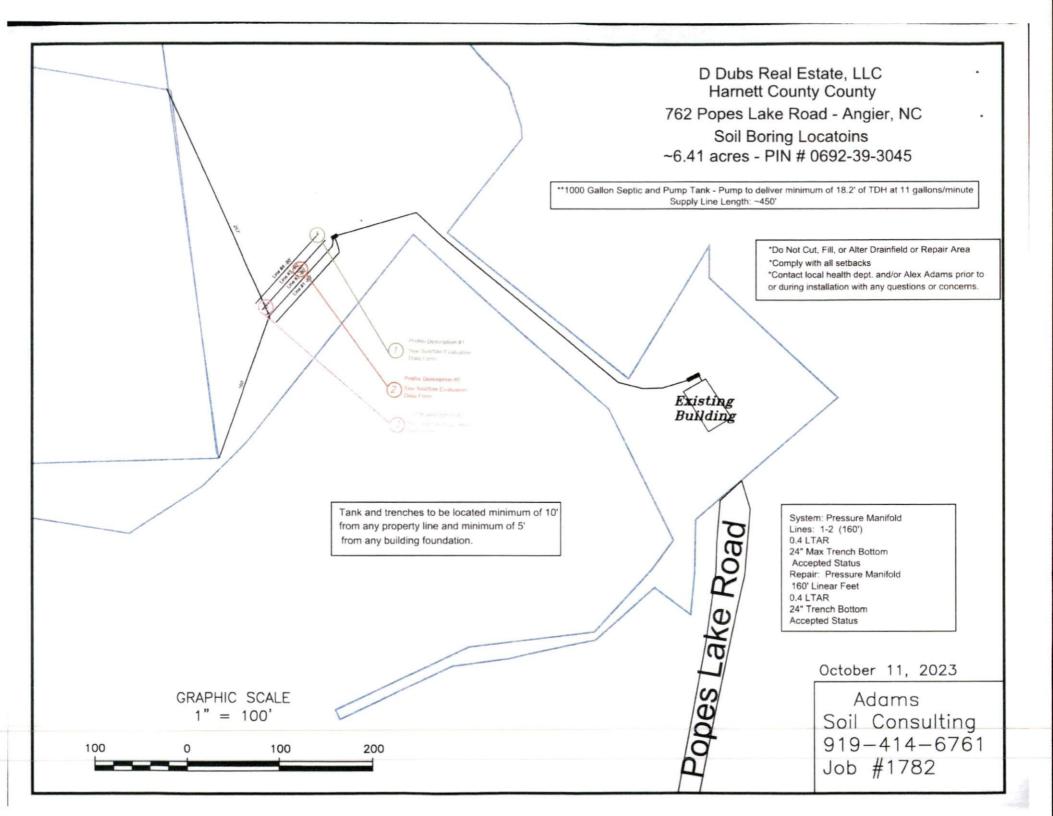
NC Licensed Soil Scientist #1247 AOWE Certification: 10021E











SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

(Complete all fields in full)

OWNER: D Dubs Real Estate, LLC

ADDRESS:

PROPOSED FACILITY: 2-bedroom PROPOSED DESIGN FLOW (.1949): 240gpd

DATE EVALUATED: 10-5-23 PROPERTY SIZE: ~6.6 Acres

APPLICATION DATE:

LOCATION OF SITE: 762 Popes Lake Road, Angier, NC

WATER SUPPLY: Public Supply

EVALUATION METHOD: Auger Boring

TYPE OF WASTEWATER: Sewage

| P R O F I L | .1940 LANDSCAPE POSITION/ SLOPE % | HORIZON DEPTH (IN.) | MORE | SOIL PHOLOGY .1941) | PI | | | | |
|----------------------------|--|---------------------------|--------------------------------|-------------------------------------|------------------------------------|----------------------------|-------------------------|-------------------------|----------------------------|
| E # | | | .1941 STRUCTURE/ TEXTURE | .1941 CONSISTENCE/ MINERALOGY | .1942 SOIL WETNESS/ COLOR | .1943 SOIL DEPT H | .1956 SAPRO CLASS | .1944 RESTR HORIZ | PROFILE CLASS & LTAR |
| | Linear | 0-28 | GR/SL | FR/NS/NP/SEXP | N/A | N/A | N/A | N/A | P.S .6 |
| 1 | Slope/3% | 28-40 | GR/SL | FI/SEXP/S/P | | | | | |
| | Linear Slope/3% | 0-15 15-40 | GR/SL GR/SL | FR/NS/NP/SEXP FR/NS/NP/SEXP | 32" | N/A | N/A | N/A | P.S/.6 |
| | Linear | 0-28 | GR/LS | FR/NS/NP/SEXP | N/A | N/A | N/A | N/A | P.S .6 |
| 3 | Slope/3% | 28-40 | GR/SL | FR/NS/NP/SEXP | | | | | 1.0.0 |
| 4 | | | | | | | | | |

| DESCRIPTION | INITIAL SYSTEM | REPAIR SYSTEM | | | |
|-------------------------|----------------|---------------|--|--|--|
| Available Space (.1945) | S | S | | | |
| System Type(s) | Type III (b) | Type III (b) | | | |
| Site LTAR | 0.6 | 0.6 | | | |

OTHER FACTORS (.1946): SITE CLASSIFICATION (.1948): U/PS

EVALUATED BY: A. Adams OTHER(S) PRESENT: