PART 3: **Authorization to Operate (ATO)**

Except for date received, the Section below is to be completed by the Owner or by the PE designated to act as their legal representative for the EOP.

LHD USE ONLY: Initial submittal of request for ATO received: 5/11/23 (Date) by OT (Initials)

Date of Post-construction Conference: NONE

The following items are included in this submittal for an Authorization to Operate under an EOP:

1. Signed and sealed copy of the Engineer's report that includes:
   a. Signed and sealed evaluation of soil conditions and site features — [X] Yes [ ] No
   b. Drawings, specifications, plans — [X] Yes [ ] No
   c. Reports on special inspections and final inspection — [X] Yes [ ] No
   d. Management Program manual — [X] Yes [ ] No
   e. On-site Wastewater Contractor's signed statement — [X] Yes [ ] No
   f. Signed and sealed statement pursuant to 15A NCAC 18A .1938(h) — [X] Yes [ ] No
2. Fee (as applicable) — [X] Yes [ ] No
3. Notarized letter documenting Owner's acceptance of the system from the PE — [X] Yes [ ] No

Attestation by the Owner or the PE for Authorization to Operate

I, ATHAN M. PARKER, PE hereby attest that all items indicated above have been provided to the

Print name of Owner or Professional Engineer

HARNETT County LHD and the system shall meet applicable federal, State, and local laws, regulations, rules and ordinances in accordance with G.S. 130A-336-.1(e)(6).

Signature of Owner or Professional Engineer DN: cn=ATHAN M. PARKER, PE, c=US, o=AMPD ENGINEERING, PLLC, email=ATHAN.PARKER@AMPDENGINEERING.COM, Date: 2022.05.11 15:34:35 -04'00' *Date*

This section for LHD Use Only.

LHD Review of required information for the ATO

[ ] INCOMPLETE

Based upon review of information submitted by the Owner or PE in the Section above, the following items are missing from the information required for an Authorization to Operate for an EOP: _____.

Copies of this signed form were sent to the design PE and the Owner on _____ (Date) via _____ (Email, FAX, USPS, Hand-delivered).

Print name of authorized Agent of the LHD *Signature of authorized Agent of the LHD* *Date*

[X] COMPLETE

Based upon review of information submitted by the Owner or PE in the Section above, this Authorization to Operate is hereby issued in accordance with G.S. 130A-336.1(m).

A copy of this complete NOI/ATO with tracking information was sent to the State on 5/23 (Date) via EMAIL (Email, FAX, USPS, Hand-delivered).

OLIVER TOLKSDORF *Print name of authorized Agent of the LHD* RGHS *Signature of authorized Agent of the LHD* 5/23/23 *Date*

ISSUANCE OF CERTIFICATE OF OCCUPANCY: Once the LHD determines completeness based upon the PE submission, the owner may apply to the local permitting agency for permanent electrical service to a residence, place of business or place of public assembly pursuant to G.S. 130A-339.