

WASTEWATER TREATMENT SYSTEM PLANS

for **1386 Bullard Road**

PROJECT INFORMATION

Facility Type	Residential	2 # bedrooms
Wastewater Type	Domestic	
Water Supply	Public Water	
Design Wastewater Flow	240	gpd
Soil LTAR	0.4	gpd/ft ²

PROPERTY INFORMATION

County	Harnett
Site Address	1386 Bullard Road
S/D Name and Lot#	
PIN	9576-39-6843.000
Size (Acre)	1.29

APPLICANT INFORMATION

Name	Amy Taylor
Mailing Address	179 Rosser Pittman Road
Telephone Number	910-703-1564
E-mail Address	brandy@craigtaylorconstructionco.com

CONSULTANT INFORMATION

Company Name	Hal Owen & Associates, Inc.
Mailing Address	PO Box 400, Lillington, NC 27546
Telephone Number	910-893-8743 Fax: 910-893-3594
E-mail Address	hal@halowensoil.com
Licensed Soil Scientist	Hal Owen, License #1102
System Designer	Jocelyn Proulx

HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400

Phone (910) 893-8743 / Fax (910) 893-3594

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The LSS evaluation attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2).

The plans or evaluations attached to this application are to be used to issue a Construction Authorization in accordance with G.S. 130A-335(a2), (a5) and (a6).

Larry Craig Taylor President 1-5-23
Authorized Signature Title Date

(Please legibly print name here:)

Larry Craig Taylor

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2 January 2023

Amy Taylor
179 Rosser Pittman Road
Broadway, NC 27505

Reference: A2 Permitting Option
LSS/AOWE Evaluation for (IP) and (CA)
For 1386 Bullard Road, Lillington NC; PIN 9576-39-6843.000

Dear Ms. Taylor,

The subject property owner intends to construct a single-family residence on the property. A site evaluation was conducted on 12 December 2022 for the above referenced property, which is located on the eastern side of Bullard Road (SR 2196) in Harnett County, North Carolina. The purpose of the investigation was to determine the ability of this lot to support a subsurface sewage waste disposal system and 100% repair area for a typical two-bedroom home. Public water supplies will be utilized. At the time of the investigation the site had been cleared, and the lot corners marked.

This LSS Evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2). This evaluation documents soil conditions and site features pursuant to G.S. 130A-335(a1) and provides sufficient information to issue an Improvement Permit (IP). **This AOWE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).** This evaluation provides conditions regarding system type, system layout, location, installation requirements, and any other pertinent information necessary to issue a Construction Authorization (CA). All ratings and determinations were made in accordance with the "Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A .1900" and local septic regulations (if any). This report represents my professional opinion as a Licensed Soil Scientist.

This report was prepared based on information provided by the client; to include the basis for design flow, proposed structure location(s), and property boundaries. Any false, inaccurate, or incomplete information provided by the client may result in denial or revocation of applications, approvals, or permits.

SOIL INVESTIGATION

The soils were evaluated under moist soil conditions through the advancing of auger borings and soil pits. The soils indicated as provisionally suitable will adequately function for subsurface sewage waste disposal systems (Figure 1). The subsoils were observed to be friable sandy loams and firm sandy clay loams which extended to greater than 48 inches below ground surface (see attached soil/site evaluation form). Evidence of a soil wetness condition was observed at 34 inches below surface or deeper. These soils appear adequate to support long-term acceptance rates of 0.4 gal/day/ft² for chamber drainlines.

SEPTIC SYSTEM DESIGN

Adequate amounts of usable soils were observed on this lot to support an initial septic system and 100% repair area. The proposed single-family residence will contain two bedrooms and have a design wastewater flow of 240 gallons per day. The home does not have a basement. A 900 gallon (at minimum) septic tank and an approved septic effluent filter is required. A pump tank and pump will be required to lift effluent to the drainfield. See Figure 2 and the attached *Wastewater Treatment System Plans* for a diagram of the septic system layout and design specifications.

The initial septic system is proposed as a pump driven system to 150 linear feet of Quick4 plus standard chamber drainlines utilizing a 25% reduction in total drainline length (Figure 2). A long-term application rate (LTAR) of 0.4 gal/day/ft² was used to design the drainfield. Effluent will be distributed to two unequal length lines connected by an over-flow pipe. The drainlines should be installed on contour with maximum trench bottom depths at 16 inches below surface. Due to the shallow trench depth, the system will need to be covered by native backfill to provide at least 6 inches of cover.

The repair septic system is proposed as a pump driven system to 152 linear feet of Quick4 plus standard chamber drainlines utilizing a 25% reduction in total drainline length. The long-term application rate (LTAR) used to design the drainfield was 0.4 gal/day/ft². Effluent will be distributed to three unequal length drainlines connected by overflow pipes. The drainlines shall be installed on contour with maximum trench bottom depths at 21 inches below surface.

Conformance to all regulatory setbacks shall be maintained. The minimum horizontal setback from a septic system to a property line is 10 feet, to a building foundation is 5 feet, to an individual well is 50 feet, and to a water line is 10 feet. All drainlines shall be installed on nine-foot centers or greater, as flagged at the site.

Potential septic system drainlines have been demonstrated with various colored pin flags that are located on the lot. **It is important that you do not disturb the septic system area.** It is recommended that a staked line or protective fence be placed around the system prior to construction to eliminate any potential damage to the soil or the layout of the system. The septic system area should not be used for staging construction materials or subjected to vehicular traffic.

CONCLUSION

You will need to file an application with the Local Health Department (LHD). Let them know that you wish to use the LHD/LSS/AOWE combination permit (also known as the A2 Permit Option). You will need to sign the front page of this report, submit it with the application, and pay the LHD fee. The LHD will assign a permit number and perform a completeness review within ten business days. If the application is complete, then they should issue the IP and CA.

When it is time to install the system, the wastewater system contractor should notify the LHD to verify site conditions. They will observe and note current site conditions and verify the locations of the house, driveway, and septic system layout. If any features are found to be out of compliance with the Construction Authorization, then the start of installation may be delayed. Depending on the type of discrepancy (for example, new house location), we may need to revise our report so a new Construction Authorization can be issued. The LHD will be responsible for final inspection of the septic system installation and issuance of the operation permit.

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



Sincerely,

A handwritten signature in black ink that reads "Hal Owen".

Hal Owen
Licensed Soil Scientist



SOIL/SITE EVALUATION
FOR ON-SITE WASTEWATER SYSTEM

APPLICANT: Amy Taylor
 ADDRESS: 179 Rosser Pittman Road, Broadway, NC 27505
 PROPOSED FACILITY: Single Family Residence COUNTY: Harnett
 LOCATION OF SITE: 1386 Bullard Road, Sanford, NC 27332 PROPERTY ID #: 9576-39-6843.000
 PROPOSED DESIGN FLOW (.1941): 240 gal WASTEWATER TYPE: Sewage
 WATER SUPPLY: On-Site Well Community Well Public Other _____
 EVALUATION METHOD: Auger Boring Pit DATE EVALUATED: 12/12/2022
 EVALUATED BY: Hal Owen, LSS 1102; and Britt Wilson

	INITIAL SYSTEM	REPAIR SYSTEM
AVAILABLE SPACE .1945	600 sf trench bottom (conventional) 450 sf trench bottom (25% reduction sys)	600 sf trench bottom (conventional) 452 sf trench bottom (25% reduction sys)
SYSTEM TYPE	Quick4 standard chambers (25% reduction)	Quick4 standard chambers (25% reduction)
SITE LTAR (gpd/ft ²)	0.4	0.4

.1946 OTHER FACTORS:

.1948 SITE CLASSIFICATION: Provisionally Suitable for Modified or Alternative Systems

COMMENTS:

PROFILE 1

HORIZON	DEPTH (IN)	MATRIX	MOTTLES	MOTTLES ABUNDANCE/ SIZE/CONTRAST	(a)(1) TEXTURE	.1941 (a)(2) STRUCTURE	(a)(3) MINEROLOGY	CONSISTENCE MOIST
A	0-7	10YR 4/2			SL	GR	NEXP	VFR
E	7-22	10YR 5/3			LS	GR	NEXP	VFR
Bw	22-37	10YR 5/4	10YR 6/6	f / 1	SL	1 w SBK	NEXP	FR
			10YR 7/3	m / 2				
Bt	37-48+	10YR 6/4	10YR 6/6	m / 2	SCL	2 m SBK	SEXP	FI
			7.5YR 5/8	f / 1				
.1940 LANDSCAPE POS./ SLOPE%		H / 11%		.1956 SAPROLITE CLASS			NA	
.1942 SOIL WETNESS CONDITION		>48"		.1944 RESTRICTIVE HORIZON			NA	
.1943 SOIL DEPTH		48"+		PROFILE CLASSIFICATION & LTAR			PS 0.4 gpd/sf	

PROFILE 2


HORIZON	DEPTH (IN)	MATRIX	MOTTLES	MOTTLES ABUNDANCE/ SIZE/CONTRAST	(a)(1) TEXTURE	.1941 (a)(2) STRUCTURE	(a)(3) MINEROLOGY	CONSISTENCE MOIST
A	0-4	10YR 4/2			SL	GR	NEXP	VFR
Bw	4-24	10YR 6/4			SL	1 w SBK	NEXP	FR
Bt1	24-34	10YR 6/6	10YR 6/8	c / 3	SCL	2 m SBK	SEXP	FI
			7.5YR 6/8	f / 1				
Bt2	34-48+	7.5YR 6/8	10YR 6/2	c / 3	SCL	2 m SBK	SEXP	FI
			10YR 7/1	m / 1				
			2.5YR 6/6	m / 2				
			2.5YR 4/6	m / 1				
.1940 LANDSCAPE POS./ SLOPE%		L / 8%		.1956 SAPROLITE CLASS			NA	
.1942 SOIL WETNESS CONDITION		34"		.1944 RESTRICTIVE HORIZON			NA	
.1943 SOIL DEPTH		48"+		PROFILE CLASSIFICATION & LTAR			PS 0.4 gpd/sf	

LEGEND OF ABBREVIATIONS FOR SITE EVALUATION FORM

<u>LANDSCAPE POSITION</u>	<u>TEXTURE GROUP</u>	<u>TEXTURE CLASS</u>	<u>.1955 LTAR (gal/day/sqft)</u>
CC - Concave Slope	I	S - Sand	1.2-0.8
CV - Convex Slope		LS - Loamy Sand	
DS - Debris Slump	II	SL - Sandy Loam	0.8 – 0.6
D - Depression		L - Loam	
DW - Drainage Way	III	SCL - Sandy Clay Loam	0.6 – 0.3
FP - Flood Plain		CL - Clay Loam	
FS - Foot Slope		SiL - Silt Loam	
H - Head Slope		Si - Silt	
L - Linear Slope		SiCL - Silt Clay Loam	
N - Nose Slope	IV	SC - Sandy Clay	0.4 – 0.1
R - Ridge		C - Clay	
S - Shoulder Slope		SiC - Silty Clay	
T - Terrace		O - Organic	none
<u>MINEROLOGY</u>			
SEXP - Slightly Expansive			
EXP - Expansive			
<u>STRUCTURE</u>		<u>MOIST CONSISTENCE</u>	<u>WET CONSISTENCE</u>
G - Single Grain		VFR - Very Friable	NS - Non Stick
M - Massive		FR - Friable	SS - Slightly Sticky
CR - Crumb		FI - Firm	MS - Moderately Stick
GR - Granular		VFI - Very Firm	VS - Very Sticky
SBK - Subangular Blocky		EFI - Extremely Firm	
ABK - Angular Blocky			NP - Non Plastic
PL - Platy		<u>MINERALOGY</u>	SP - Slightly Plastic
PR - Prismatic		NEXP - Non-Expansive	MP - Moderately Plastic
		SEXP - Slightly Expansive	VP - Very Plastic
		EXP - Expansive	
<u>MOTTLES</u>			
f - few	1 - fine	F - Faint	
c - common	2 - medium	D - Distinct	
m - many	3 - coarse	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 PS – Provisionally Suitable U – Unsuitable

Figure 1. Soil Map showing Septic Suitability

Scale 1 in = 50 ft

Map for reference only.
Distances are paced and
approximate. Not a survey.



Soil Map Legend

-  Provisionally Suitable Soils
-  Unsuitable Soils
-  Soil Auger Borings
-  Soil Pits

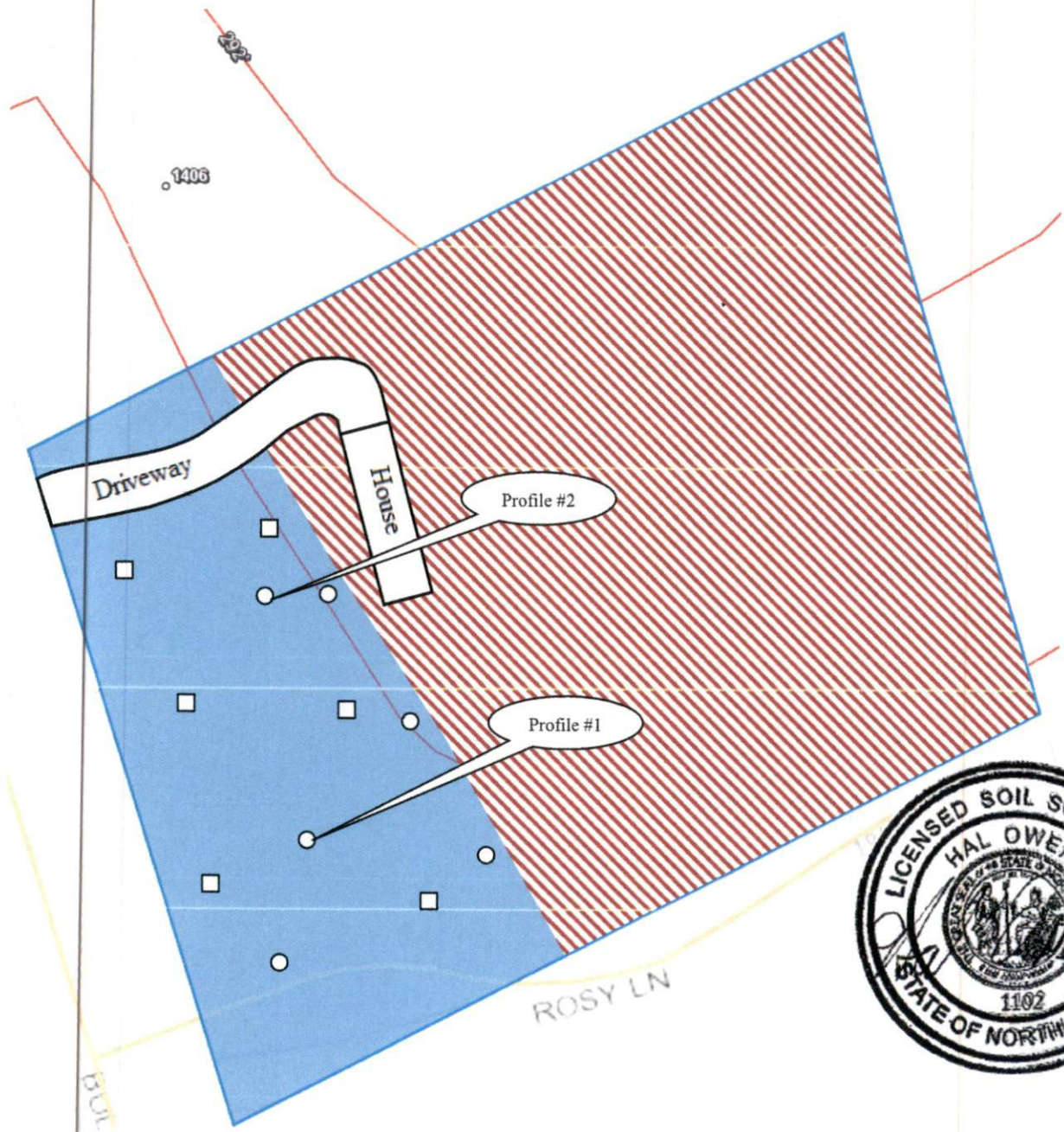

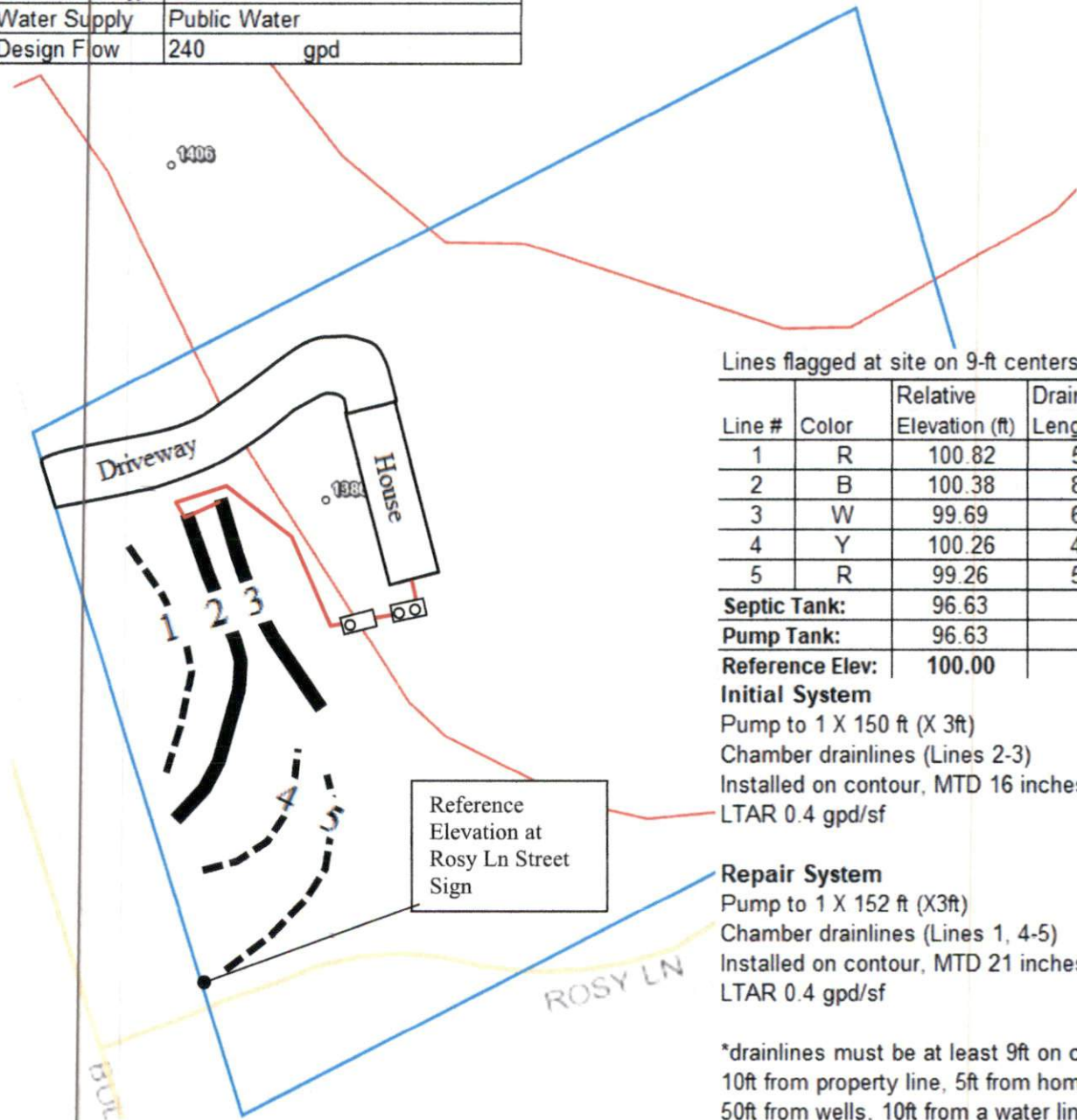


Figure 2. Septic system design and layout

Scale 1 in = 50 ft

 Map for reference only.
 Distances are paced and approximate. Not a survey.



Facility Type	Residential	2 # bedrooms
Wastewater Type	Domestic	
Water Supply	Public Water	
Design Flow	240	gpd



Lines flagged at site on 9-ft centers.

Line #	Color	Relative Elevation (ft)	Drainline Length(ft)
1	R	100.82	56
2	B	100.38	84
3	W	99.69	66
4	Y	100.26	44
5	R	99.26	52
Septic Tank:		96.63	
Pump Tank:		96.63	
Reference Elev:		100.00	

Initial System

Pump to 1 X 150 ft (X 3ft)
 Chamber drainlines (Lines 2-3)
 Installed on contour, MTD 16 inches
 LTAR 0.4 gpd/sf

Repair System

Pump to 1 X 152 ft (X3ft)
 Chamber drainlines (Lines 1, 4-5)
 Installed on contour, MTD 21 inches
 LTAR 0.4 gpd/sf

*drainlines must be at least 9ft on center, 10ft from property line, 5ft from home, 50ft from wells, 10ft from a water line, and 3ft from sidewalks and driveway

Pump System Design Criteria

DESIGN DAILY FLOW 240 gallons **SOIL LTAR:** 0.4 gpd/ft²

TANKS (min) Septic Tank: 1000 gallons Pump Tank: 1000 gallons

SUPPLY LINE Length (ft): 70 Diameter: 2 " sch 40 pvc
Min total flow (gpm) to maintain 2fps scour velocity = 20.9 gpm

TRENCHES Drainline Type: Quick4 standard chamber (25% reduction)
Max trench depth: 16 inches Top Line Elevation: 100.38 feet
Trench width: 3 feet Trench Length Factor: 75 %
Absorption Area: 450 sqft Min Linear Length: 150 feet
Actual Trench Length: 1 X 150 feet = 150 feet

PUMP CALCULATIONS:

Total Flow: 23 gpm
Dose Volume (gal): 73 gallons, with Pipe Volume at 75 % *65.3gal/100ft pipe
Dose Pump Run Time (min): 3.19 Daily Pump Run Time (min): 10.43
Drawdown (in.): 73 gallons + 18 gal/ inch = 4.08 inches
Pump Tank Elevation (ft): 96.63 Pump Elevation (ft): 91.63
Friction Head: 1.52 *Hazen Williams Formula (use supply line length+70' for fittings in pump tank)
Elevation Head: 9.8 Design Head: 2.0 Total Head: 13.27 feet

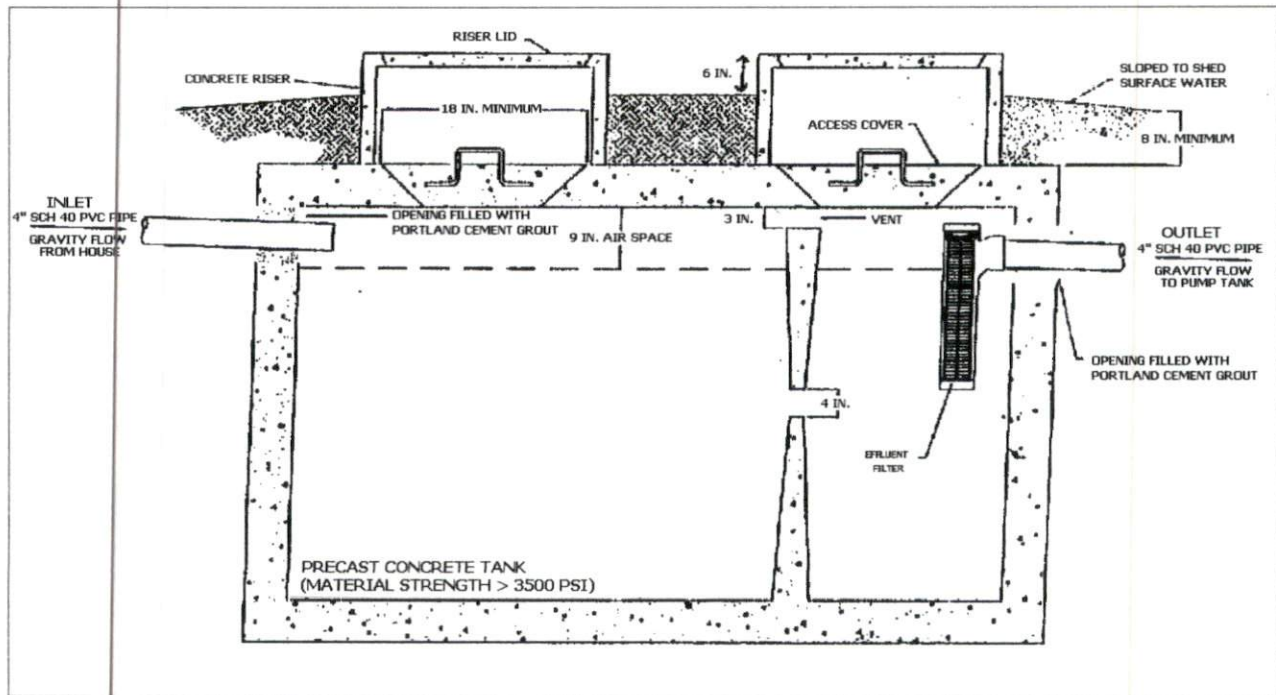
Pump to Deliver: 23.00 gpm @ 13.27 ft head

NEMA 4X Simplex Control Panel with elapsed time meter, cycle counter, audible and visible alarm, hand-off-automatic (HOA) switch, and pump on separate circuits is required. A septic tank filter is required. Floats to be determined by type of pump tank used.

Possible Septic Tank: Garner's 1000 STB-103 Septic Filter: Polylock PL-122
Possible Pump Tank: Garner's 1000 PT-214 Vol(gal): 1028 GPI: 18
Possible Pump: Zoeller 150 series pump height (in) = 12
Possible Control Panel: SJE Rhombus 112 1W114H8AC10E15A17J

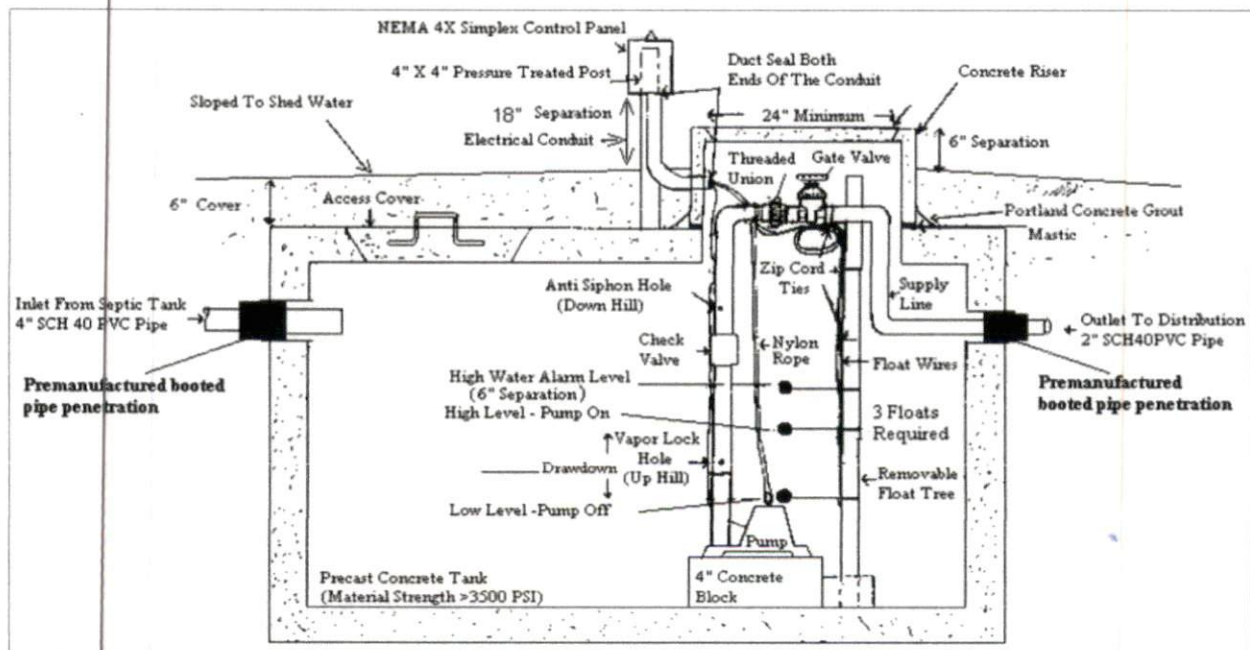
Typical Septic Tank

1000 GALLON SEPTIC TANK, minimum



Typical Pump Tank

1000 GALLON PUMP TANK, minimum



Pump Tank Calculations:

Possible pump tank: Garners 1000 PT-214

Possible Pump: Zoeller 150 series

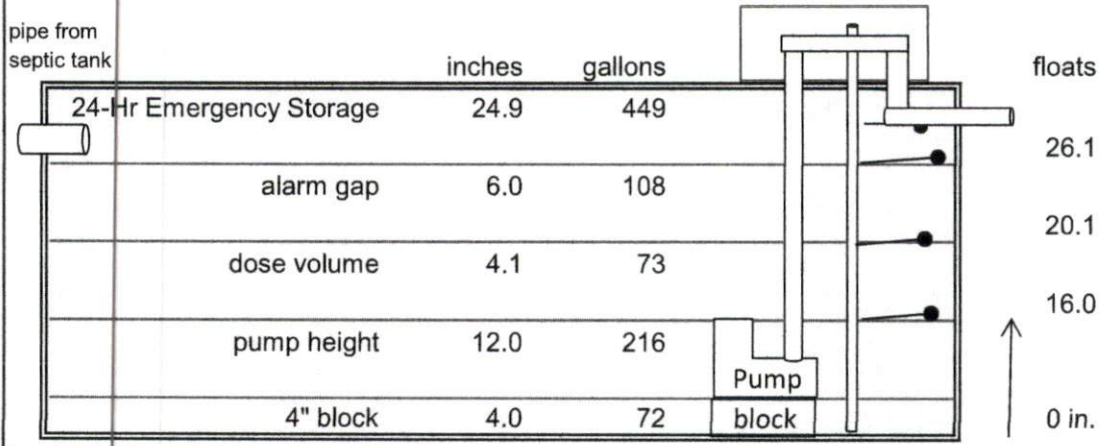
tank GPI (gal/in): 18 calculated

height (in): 12

tank volume (gal): 1028 per manufacturer

tank height (in): 51.0 per manufacturer

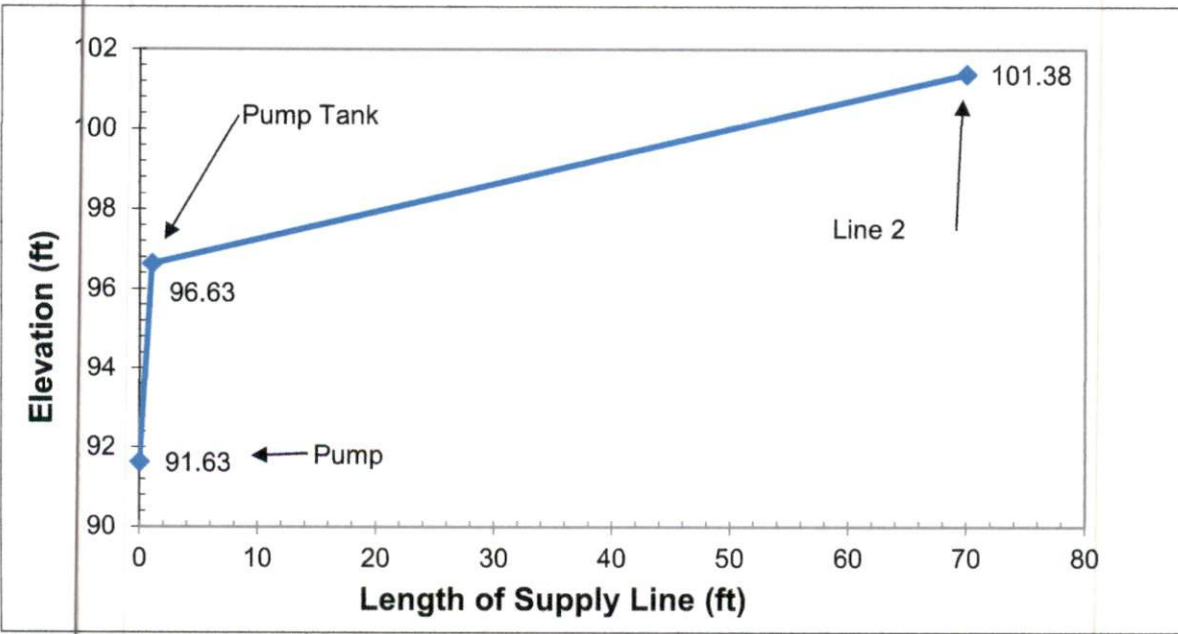
minimum emergency storage: 240



Drawing N.T.S.

Supply Line Profile:

	Distance	Elevation
Pump	0	91.63
pump tank	1	96.63
Line 2	70	101.38
4)		
5)		



IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 9576-39-6843.000

Issued To: Amy Taylor

Property Location: 1386 Bullard Road, Lillington, NC 27546

Subdivision: _____ Lot #: _____ Block: _____ Section: _____

LSS Report Provided: Yes No

If yes, name and license number of LSS: Hal Owen LSS #1102

New Repair Expansion System Relocation

Proposed Structure: Single Family Residence

Proposed Wastewater System Type: lllbg (Initial) lllbg (Repair)

Fill System: Yes No If yes, specify: New Existing (when adding more than 6 inches of fill to system area please provide a fill plan)

Proposed Design Daily Flow: 240 GPD Proposed LTAR (Initial): 0.4 Proposed LTAR (Repair): 0.4

Design Wastewater Strength: domestic high strength industrial process

Number of bedrooms: 2 Number of Occupants: _____ Other: _____

Pump Required: Yes No May be required based upon final location and elevations of facilities

Artificial Drainage Required: Yes No If yes, please specify details: _____

Type of Water Supply: Private well Public well Municipal Supply Spring Other: _____

Drainfield location meets requirements of Rule .1945: Yes No

Drainfield location meets requirements of Rule .1950: Yes No

Permit valid for: Five years [site plan submitted pursuant to GS 130A-334(13a)] No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

Licensed Soil Scientist Print Name: Hal Owen

Licensed Soil Scientist Signature: Hal Owen Digitally signed by Hal Owen Date: 2023.01.02 12:11:54 -05'00' Date: 1/2/23

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

See attached site sketch

This Section for Local Health Department Use Only

Initial submittal received: _____ by _____
Date Initials

Permit Number: _____

G.S. 130A-335(a4) states the following: 'If a local health department fails to act on an application for an improvement permit submitted pursuant to subsection (a3) of the section within 10 business days of receipt of a complete application, the local health department shall issue the improvement permit.'

In accordance with G.S. 130A-335(a3) the improvement permit application is:

Incomplete (If box is checked, information in this section is required.)

The following items are missing:

Copies of this were sent to the LSS and the Owner on _____
Date

State Authorized Agent: _____ Date: _____

Denied (See attached report.)

Copies of this were sent to the LSS and the Owner on _____
Date

State Authorized Agent: _____ Date: _____

Complete

State Authorized Agent: _____ Date of Issuance: _____

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2), (a3), and (a4) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: _____

See attached site sketch

CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: 9576-39-6843.000

Issued To: Amy Taylor

Property Location: 1386 Bullard Road, Lillington, NC 27546

AOWE/PE Plans/Evaluations Provided: Yes No If yes, name and license number of AOWE/PE: Hal Owen #10036E

Facility Type: Single Family Residence

New Expansion Repair System Relocation

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** Illbg (Initial) Illbg (Repair)

Design Daily Flow: 240 GPD Wastewater Strength: domestic high strength industrial process

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? Yes No

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: 150 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 450 Trench/Bed Width: 36 inches LTAR: 0.4 gpd/ft²

Soil Cover: 6 inches Slope Adjusted Maximum Trench/Bed Depth: 16 inches

Aggregate Depth: _____ inches above pipe _____ inches below pipe _____ inches total

Pump Tank Size (if applicable): 1000 gallons Requires more than 1 pump? Yes No

Pump Requirements 13.27 ft. TDH vs. 23 GPM Grease Trap Size (if applicable): _____ gallons

Distribution Method: Serial D-Box or Parallel Pressure Manifold(s) LPP Other: _____

Artificial Drainage Required: Yes No If yes, please specify details: _____

Legal Agreements (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)

Multi-party Agreement Required [.1937(h)]: Yes No

Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: Yes No

Declaration of Restrictive Covenants: Yes No

****If applicable:**
I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Print Name: _____

Owner/Legal Representative Signature: _____ Date: _____

Pre-Construction Conference Required: Yes No

Conditions: _____

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: _____

AOWE/PE Signature: Hal Owen Digitally signed by Hal Owen
Date: 2023.01.02 12:07:33 -05'00' Date: 1/2/23

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

See attached site sketch

County: _____

This Section for Local Health Department Use Only

Initial submittal received: _____ by _____
Date Initials

Permit Number: _____

G.S. 130A-335(a6) states the following: *'If a local health department fails to act on an application for a construction authorization submitted pursuant to subsection (a5) of the section within 10 business days of receipt of a complete application, the local health department shall issue the construction authorization.'*

In accordance with G.S. 130A-335(a5) the construction authorization application is:

Incomplete (If box is checked, information in this section is required.)

The following items are missing: _____

Copies of this were sent to the AOWE/PE and the Owner on _____
Date

State Authorized Agent: _____ Date: _____

Denied (See attached report.)

Copies of this were sent to the AOWE/PE and the Owner on _____
Date

State Authorized Agent: _____ Date: _____

Complete

State Authorized Agent: _____ Date of Issuance: _____

This Construction Authorization is issued pursuant to G.S. 130A-335(a2), (a5), and (a6) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner. Final landscaping shall be constructed to divert water and establish vegetative cover.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: _____

See attached site sketch