

# AMP'd Engineering, PLLC

Civil Engineer – Consulting Engineer – Land Development

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PO Box 4580

Emerald Isle, NC 28594

(252) 777-0141 ✦ [athan.parker@ampdengineering.com](mailto:athan.parker@ampdengineering.com)

Firm License Number P-1532

## CERTIFICATION LETTER

March 14, 2024

**To: Mr. Oliver Tolksdorf, REHS  
Environmental Health Supervisor  
Harnett County Health Dept  
307 W Cornelius Harnett Blvd  
Lillington, NC 27546**


**Ref: Haven- Lot 59 EOP  
108 Harmony Trl  
Broadway, Harnett County, NC**

Dear Mr. Tolksdorf,

As a duly licensed registered Professional Engineer in the State of North Carolina, license number 43250, I have inspected the installation of the Engineered Option Permit of the LHD Referenced project SFD-2209-0043 on February 22, 2024. Gene's Backhoe, the on-site wastewater contractor installed 5-50' 25% reduction lines (EZ Flow), Type IIIg, with 12-16" TB. The system was revised to a 3 bedroom (360 GPD) system as shown in as built. The system appeared to be in the location permitted on the site plan by Pittman Soil Consulting. This letter also acts as written request to waive the "post-construction conference" requirement as stated in G.S. 130A-336.1(j).

If you have any questions, please feel free to give me a call (252) 777-0141 or email me ([athan.parker@ampdengineering.com](mailto:athan.parker@ampdengineering.com)).

Sincerely,

 Digitally signed by Athan M. Parker, PE  
DN: cn=Athan M. Parker, PE, c=US,  
o=AMP'D Engineering, PLLC,  
email=athan.parker@ampdengineering.com  
Date: 2024.03.14 13:11:26 -0400

Athan M Parker, PE  
President  
AMP'd Engineering, PLLC  
Firm License No. P-1532  
ALE



Attach: Owner's acceptance of the system, ATO Sheet, Septic Standards, As-Built and On-site Wastewater Contractors statement & Insurance

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## OWNER'S ACCEPTANCE LETTER February 27, 2024

To: **Carroll Construction Homes, Inc (the "Owner")**  
63 Veron Ct.  
Willow Spring, NC 27592

Ref: **Haven- Lot 59 EOP**  
108 Harmony Trl  
Broadway, Harnett County, NC


Dear Carroll Construction Homes, Inc,

Please be aware that this letter **does not** act as a certification letter for the above referenced project, but solely acts as the owner's acceptance of the system. The engineer of record will not be held responsible for any Authorization To Operate (ATO) or Certificate of Occupancy (CO) issued without the engineer's certification.

This letter is to inform you that as a duly licensed registered Professional Engineer in the State of North Carolina, license number 43250, I have inspected the installation of the Engineered Option Permit of the LHD Referenced project SFD-2209-0043 on February 22, 2024. Gene's Backhoe, the on-site wastewater contractor installed 5-50' 25% reduction lines (EZ Flow), Type IIIg, with 12-16" TB. The system was revised to a 3 bedroom (360 GPD) system as shown in as built. The system appeared to be in the location permitted on the site plan by Pittman Soil Consulting. This letter states the Owner's acceptance of the system from the Professional Engineer, Licensed Soil Scientist and the On-Site Wastewater Contractor as permitted with the Harnett County Health Department. This letter also acts as an agreement by the owner to waive the "post-construction conference" requirement as stated in G.S. 130A-336.1(j). Please sign this letter and have notarized on page 2 of 2.

If you have any questions, please feel free to give me a call (252) 777-0141 or email me ([athan.parker@ampdengineering.com](mailto:athan.parker@ampdengineering.com)).

Sincerely,

  
Athan M. Parker, PE  
President  
AMP'd Engineering, PLLC  
Firm License No. P-1532  
ALE

Digitally signed by Athan M. Parker, PE  
DN: cn=Athan M. Parker, PE, c=US,  
o=AMP'd Engineering, PLLC,  
email=athan.parker@ampdengineering.com  
Date: 2024.02.27 16:13:45 -0500



# AMP'd Engineering, PLLC

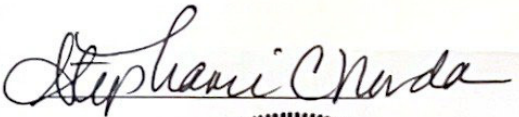
Civil Engineer – Consulting Engineer – Land Development

Owner: Harold G. Carroll, Jr.  3/2/23  
Print Name Sign Name Date

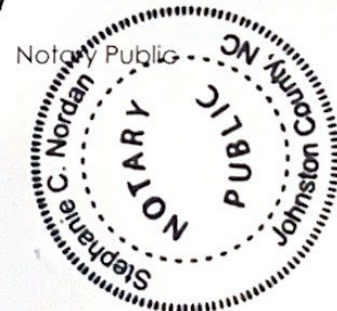
North Carolina

Johnston County

I, Stephanie C Nordan, a Notary Public for said County and State, do hereby  
certify that Harold G. Carroll, Jr. personally appeared before me this day and  
acknowledged the due execution of the page 1 of 2 "Acceptance Letter" from the PE.  
Witness my hand and official seal, this the 2nd day of March, 2024.



My commission expires August 25, 2025

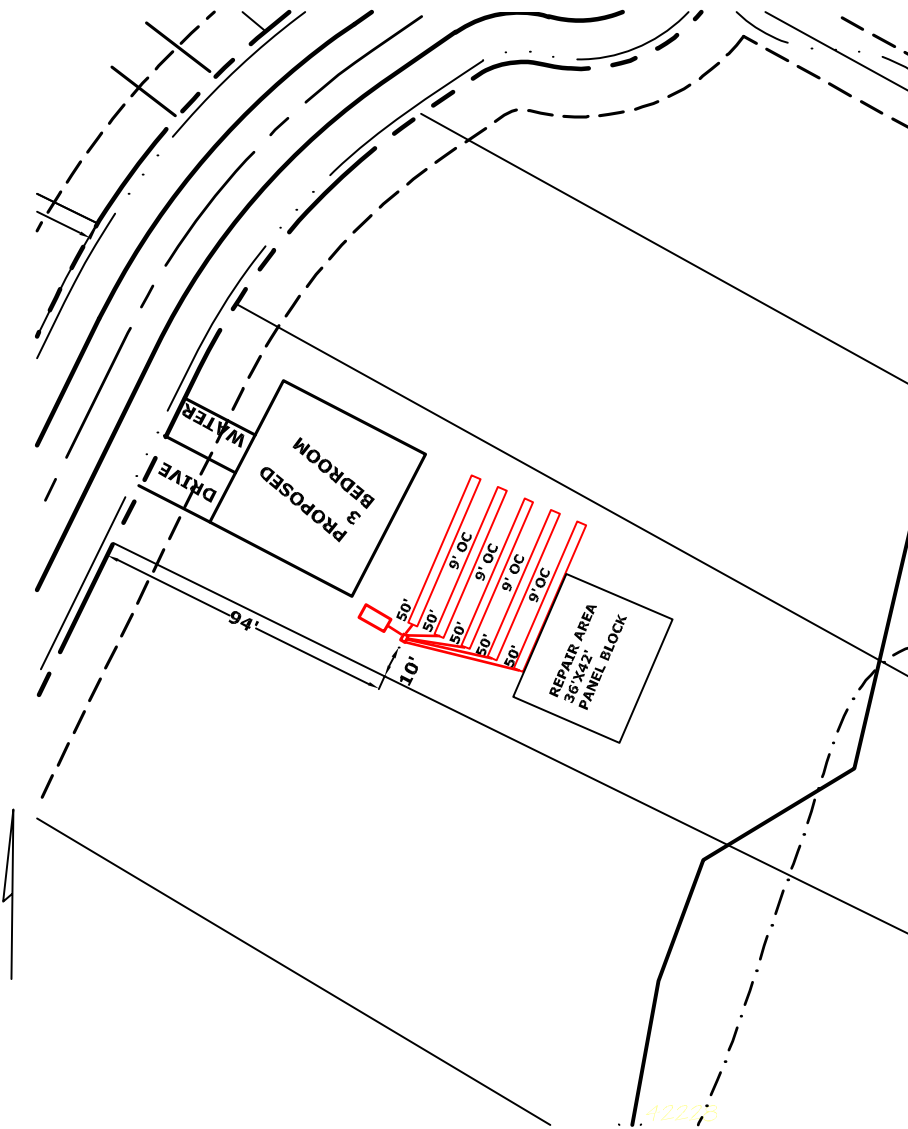




Owner: HAVEN S/D .  
 Address: LOT 59 .  
 Location: PLACID POND DRIVE .

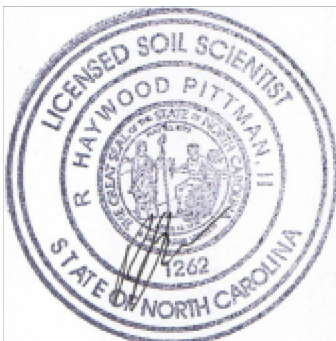
**PITTMAN SOIL CONSULTING**  
**PO BOX 1387**  
**RICHLANDS, NC 28574**  
**910-330-2784**  
**pittmansoil@yahoo.com**

LOT INFORMATION OBTAINED VIA PLAT BY STANCIL AND ASSOCIATES FOR XCESSIVE RISK DEVELOPMENT, DATED APRIL 27, 2019.



**INITIAL**  
 3 BEDROOM  
 LTAR .36 **EZ FLOW**  
 5-50' 25% REDUCTION LINES  
 12-16" TB  
 >6" SOIL COVER REQUIRED OVER SYSTEM AND 5' BEYOND SYSTEM

**REPAIR AREA**  
 3 BEDROOM  
 LTAR .36  
 4-42' PANEL BLOCK LINES  
 14" TB  
 >6" SOIL COVER REQUIRED OVER SYSTEM AND 5' BEYOND SYSTEM



**FOR USE BY  
 AMP'D ENGINEERING, PLLC  
 ONLY**

**SCALE 1"=60'**

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PO Box 4580

Emerald Isle, NC 28594

(252) 777-0141 ✦ athan.parker@ampdengineering.com

Firm License Number P-1532

## Ref: AMP'D Engineering, PLLC Septic Standards

To Whom It May Concern,

Due to unforeseen negligence by previous owners and contractors regarding the Engineered Option Permit ("EOP") process and installation, the following standards have been adopted by AMP'D Engineering, PLLC and are to be strictly followed. If these standards are not followed, AMP'D Engineering, PLLC has the right to void all warranties related to engineering work involved with these EOPs.

- Engineer shall approve septic installer prior to installation.
- Engineer shall be notified at a minimum of 48 hours prior to septic installation.
- No vehicles, equipment, structures, debris, or any other items that may compact the soils or damage the septic lines allowed on the septic location before or after installation. Equipment only allowed over the septic area by a certified septic installer to backfill and grade the septic area after installation.
- All systems are to have a minimum of 6" cover over the system and five feet beyond the system. Only approved soil to be used as cover.
- After installation, the area should be graded to shed water. All drainage should be diverted away from septic area and tanks.
- All drip systems to have a minimum of 6" cover over the system and five feet beyond the system. Only group I soil allowed over system with a cap of topsoil to promote growth of groundcover.
- Groundcover is to be established over every system within 14 days after installation.
- Orange safety fencing with T-Posts to be used to surround the system after installation to prevent any unqualified individuals from entering septic area.
- Refer to online resources for proper management and maintenance of a septic system.

Refer to the websites listed:

- <https://content.ces.ncsu.edu/septic-system-owners-guide>
- <https://content.ces.ncsu.edu/septic-systems-and-their-maintenance>

If you have any questions, please feel free to give me a call (252) 777-0141 or email me (athan.parker@ampdengineering.com).

Sincerely,



Digitally signed by Athan M. Parker, PE  
DN: cn=Athan M. Parker, PE, c=US,  
o=AMP'D Engineering, PLLC,  
email=athan.parker@ampdengineering.com  
Date: 2024.03.14 13:13:14 -0400

Athan M Parker, PE  
President  
AMP'd Engineering, PLLC  
Firm License No. P-1532



**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: _____ by _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>Date</span> <span>Initials</span> </div> Date of Post-construction Conference: _____
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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      | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
|    | b. Drawings, specifications, plans  | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
|    | c. Reports on special inspections and final inspection                    | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
|    | d. Management Program manual  | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
|    | e. On-site Wastewater Contractor’s signed statement                       | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
|    | f. Signed and sealed statement pursuant to 15A NCAC 18A .1938(h)          | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
| 2. | Fee (as applicable)   | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> No |
| 3. | Notarized letter documenting Owner’s acceptance of the system from the PE | <input checked="" type="checkbox"/> | Yes <input type="checkbox"/> 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).


Digitally signed by Athan M. Parker, PE  
DN: cn=Athan M. Parker, PE, c=US,  
o=AMPD Engineering, PLLC,  
email=athan.parker@ampdengineering.com  
Date: 2024.03.14 13:13:28 -0400

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*Signature of Owner or Professional Engineer**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 \_\_\_\_\_ via \_\_\_\_\_  
DateEmail, FAX, USPS, Hand-delivered

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

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 \_\_\_\_\_ via \_\_\_\_\_  
DateEmail, FAX, USPS, Hand-delivered

\_\_\_\_\_  
*Print name of authorized Agent of the LHD**Signature of authorized Agent of the LHD**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.



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
HELEN WOLSTENHOLME • Interim Deputy Secretary for Health
MARK T. BENTON • Assistant Secretary for Public Health
Division of Public Health

COMMON FORM FOR ENGINEERED OPTION PERMIT

See Instructions for Use in Appendix A

Except for "Date received", this Section to be completed by the Professional Engineer licensed in accordance with G.S. 89C

LHD USE ONLY: Initial submittal of this NOI received: \_\_\_\_\_ by \_\_\_\_\_
Date Initials

PART 1: Notice of Intent to Construct (NOI) - Please check all that apply

[X] Single System or [ ] Multiple Systems

AND

[X] New [ ] Expansion [ ] Relocation of all or part of the Existing System [ ] Relocation of Repair Area

[ ] Repair - LHD Permit Number \_\_\_\_\_ [ ] Repair - EOP/LSS COVID 19/AOWE Permit Number \_\_\_\_\_

1. Facility Owner's name: (Owner, Company Name, Utility, Partnership, Individual, etc.): \_\_\_\_\_

CARROLL CONSTRUCTION HOMES, INC
XCESSIVE RISK DEVELOPMENT

Mailing address: 63 VERON COURT WILLOW SPRING 27592
8754 REED DR STE 14 City: EMERALD ISLE State: NC Zip: 28594

Telephone number: 919-410-5704 E-mail Address: CAMERON.ADAMS1087@GMAIL.COM
252-777-0141 ATHAN.PARKER@AMPENGINEERING.COM

2. Professional Engineer (PE) name: ATHAN M PARKER, PE License number: 43250

Mailing address: PO BOX 4580 City: EMERALD ISLE State: NC Zip: 28594

Telephone number: 919-795-9594 E-mail Address: ATHAN.PARKER@AMPENGINEERING.COM

3. Licensed Soil Scientist (LSS) name: HAYWOOD PITTMAN, LSS License number: 1262

Mailing address: 1073-1 GREGORY FORK RD City: RICHLANDS State: NC Zip: 28574

Telephone number: 910-324-2892 E-mail Address: PITTMANSOIL@YAHOO.COM

4. Licensed Geologist (LG) (if applicable) name: \_\_\_\_\_ License number: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

5. On-Site Wastewater Contractor name: HAYWOOD PITTMAN, LSS License number: 3825

1340 TWO CLAUDE RD WILLOW SPRINGS 27592
Mailing address: 1073-1 GREGORY FORK RD City: RICHLANDS State: NC Zip: 28574

Telephone number: 919-625-7051 E-mail Address: TANORDAN@GMAIL.COM
910-324-2892 PITTMANSOIL@YAHOO.COM

6. Proof of Errors and Omissions or other appropriate liability insurance for the following persons is attached that includes the name of the insurer, name of the insured and the effective dates of coverage:

[X] PE [X] LSS [ ] LG [X] On-site Wastewater Contractor

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH

LOCATION: 5605 Six Forks Road, Raleigh, NC 27609
MAILING ADDRESS: 1642 Mail Service Center, Raleigh, NC 27699-1642
www.ncdhhs.gov • TEL: 919-707-5874 • FAX: 919-845-3972

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



6712 NC Hwy 50 N. Benson, NC 27504

Tanordan@gmail.com

**Lot, Subdivision, Address** Lot 59 Haven

**System Type** E-2 FLOW 25% REDUCTION

**Tank Size** 1000 Gallon

**System Info** 5-50' DRAIN LINES

12-16" TRENCH DEPTH

**Installation Date** 2-15-24

**Final Inspection Date** 2-15-24

**Installer Signature and Certification #** 

**Date** 3-5-24



