

AMP'd Engineering, PLLC

Civil Engineer – Consulting Engineer – Land Development

PO Box 4580

Emerald Isle, NC 28594

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

Firm License Number P-1532

CERTIFICATION LETTER

January 10, 2025

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

**Ref: Haven- Lot 53 EOP
147 Harmony Trail
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 SFD2209-0052 on October 18, 2024. Gene's Backhoe, the on-site wastewater contractor as permitted installed 5-45' 25% Reduction Lines (EZ Flow), Type IIIg, with 12-24" TB as designed and permitted. The system was revised to a 3-bedroom (360 GPD) system as shown on the 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).

Sincerely,

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



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

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OWNER'S ACCEPTANCE LETTER

October 29, 2024

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

Ref: **Haven- Lot 53 EOP**
147 Harmony Trail
Broadway, Harnett County, NC

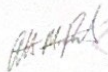
Dear Carroll Construction Homes, Inc,

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 SFD2209-0052 on October 18, 2024. Gene's Backhoe, the on-site wastewater contractor installed 5-45' 25% Reduction Lines (EZ flow), Type IIIg, with 12-24" 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.

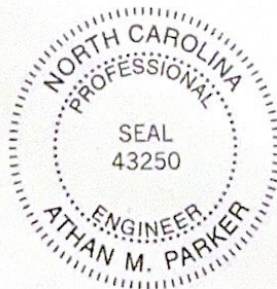
If you have any questions, please feel free to give me a call (252) 777-0141 or email me (athan.parker@ampdengineering.com).

Sincerely,



Digitally signed by 72ab0a09-8ce8-4ba7-bca1-321136826620
DN: cn=72ab0a09-8ce8-4ba7-bca1-321136826620
Date: 2024.10.29 14:05:32 -0400

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



AMP'd Engineering, PLLC
Civil Engineer – Consulting Engineer – Land Development

Owner: Harold G. Carroll, Jr. [Signature] 10/29/24
Print Name Sign Name Date

North Carolina

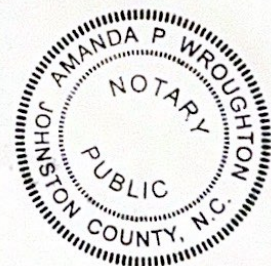
Johnston County

I, Amanda P. Wroughton, 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 29 day of October, 2024.

Amanda P. Wroughton

Notary Public

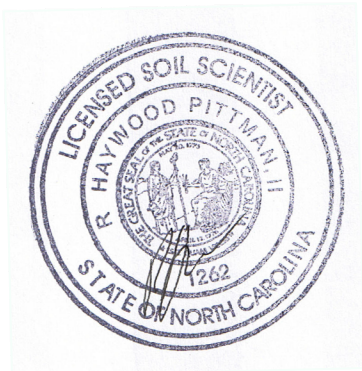
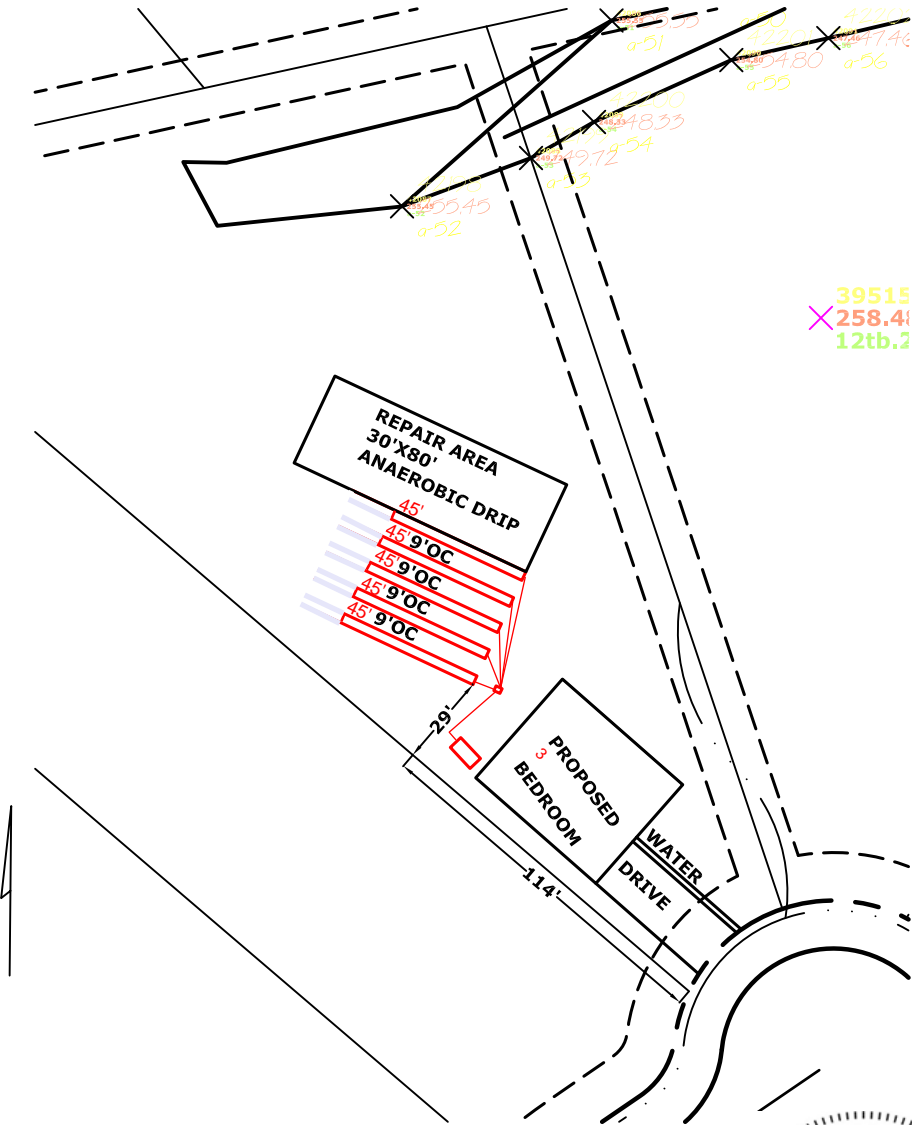
My commission expires October 21, 2029.



Owner: HAVEN S/D
 Address: LOT 53
 Location: 147 HARMONY TRAIL

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 XCESSICE RISK DEVELOPMENT, DATED APRIL 27, 2019.



INITIAL
 3-4 BEDROOM
 LTAR .4
 5-45' 5-60' 25% REDUCTION LINES
 12-24" TB
 >6" SOIL COVER REQUIRED OVER SYSTEM AND 5' BEYOND SYSTEM

REPAIR AREA
 3-4 BEDROOM
 LTAR .2
 30'X80' ANAEROBIC DRIP LINES
 6" 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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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,

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;"> Date Initials </div> Date of Post-construction Conference: _____

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).

<i>Signature of Owner or Professional Engineer</i>	January 10, 2025 <i>Date</i>
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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 _____

Date
Email, FAX, USPS, Hand-delivered

<i>Print name of authorized Agent of the LHD</i>	<i>Signature of authorized Agent of the LHD</i>	<i>Date</i>
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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 _____

Date
Email, FAX, USPS, Hand-delivered

<i>Print name of authorized Agent of the LHD</i>	<i>Signature of authorized Agent of the LHD</i>	<i>Date</i>
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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

Single System or Multiple Systems

AND

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 EMERALD ISLE NC 28594

Telephone number: 919-410-5704 E-mail Address: CAMERON.ADAMS1087@GMAIL.COM
252-777-0141 ATHAN.PARKER@AMPDENGINEERING.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@AMPDENGINEERING.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: _____
GENE'S BACKHOE 3795

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

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

PE LSS LG 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.ncdhs.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 53 Haven


System Type 25% Reduction

Tank Size 1,000 gallon Septic Tank

System Info Installed 5 45' 12" flow lines @ 18"-24" TB.

Installation Date Nov 4, 2024

Final Inspection Date Nov 4, 2024

Installer Signature and Certification # 

Date 12-19-24

