

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

PIN/Lot Identifier: 0529-88-9339

Issued To: Davidson Homes

Property Location: Unassigned address - Van Winkle St., Lillington, NC

Subdivision: Wellers Knoll Lot #: 44 Block: _____ Section: _____

LSS Report Provided: Yes No

If yes, name and license number of LSS: Alex Adams - LSS#1247

New Repair Expansion System Relocation

Proposed Structure: SFH

Proposed Wastewater System Type: Type III (g) (Initial) Type III (g) (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: 360 GPD Proposed LTAR (Initial): 0.35 Proposed LTAR (Repair): 0.35

Design Wastewater Strength: domestic high strength industrial process

Number of bedrooms: 3 Number of Occupants: 6 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: _____

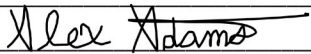
Drainfield location meets requirements of Rule .1945: Yes No

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: Alex Adams

Licensed Soil Scientist Signature:  Date: 5/4/23

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

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(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: 0529-88-9339

Issued To: Davidson Homes

Property Location: Unassigned address - Van Winkle St. - Lillington, NC

AOWE/PE Plans/Evaluations Provided: Yes No If yes, name and license number of AOWE/PE: Alex Adams - AOWE#10021E

Facility Type: SFH

New Expansion Repair System Relocation

Basement? Yes No Basement Fixtures? Yes No

Type of Wastewater System** Type III (g) (Initial) Type III (g) (Repair)

Design Daily Flow: 360 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: 270 feet Trench/Bed Spacing: 9 feet on center

Drainfield square footage: 810 Trench/Bed Width: 36 inches LTAR: 0.35 gpd/ft²

Soil Cover: 6 inches Slope Adjusted Maximum Trench/Bed Depth: 24 inches

Aggregate Depth: 6 inches above pipe 6 inches below pipe 12 inches total

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

Pump Requirements: _____ ft. TDH vs. _____ 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: Celinda Howell

Owner/Legal Representative Signature: *Celinda Howell* Date: 5/15/23

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: Alex Adams

AOWE/PE Signature: *Alex Adams* Date: 5/4/23

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

See attached site sketch

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: _____

Adams Soil Consulting, PLLC
1676 Mitchell Road
Angier, NC 27501
919-414-6761
alexadams@bcsoil.com

May 4, 2023
Project #1623

“The LSS/LG evaluation(s) attached to this application is to be used to issue an Improvement Permit in accordance with G.S. 130A-335(a2) and (a3).”

“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)”

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

RE: Lot #44 Wellers Knoll – “unassigned address” Van Winkle St. NC (Harnett County) for Davidson Homes (PIN# 0529-88-9339)

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 3-bedroom septic design.

The suitable soils found on the subject property were relatively 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 24 inches in depth before a restrictive horizon was encountered.

Please find the attached wastewater soil/site evaluation forms for specific soil properties found in the initial and repair areas as well as assigned soil long term acceptance rate (LTAR). Numerous soil borings were made throughout the property and representative soil profile descriptions for the primary septic field and repair area are provided. A location sketch for profile descriptions is also attached. The initial and primary septic fields were sized based on a flow rate of 360 gallons/day and utilizing Accepted Status. 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 and repair (if needed) system on contour, see attached site plan for the primary system and repair locations. 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 the installation is in question at the time of installation call me (Alex Adams) at 919-414-6761.

This report discusses the location of provisionally suitable soils identified on the property and does not guarantee the future function of any waste water disposal system installed.

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

Sincerely,



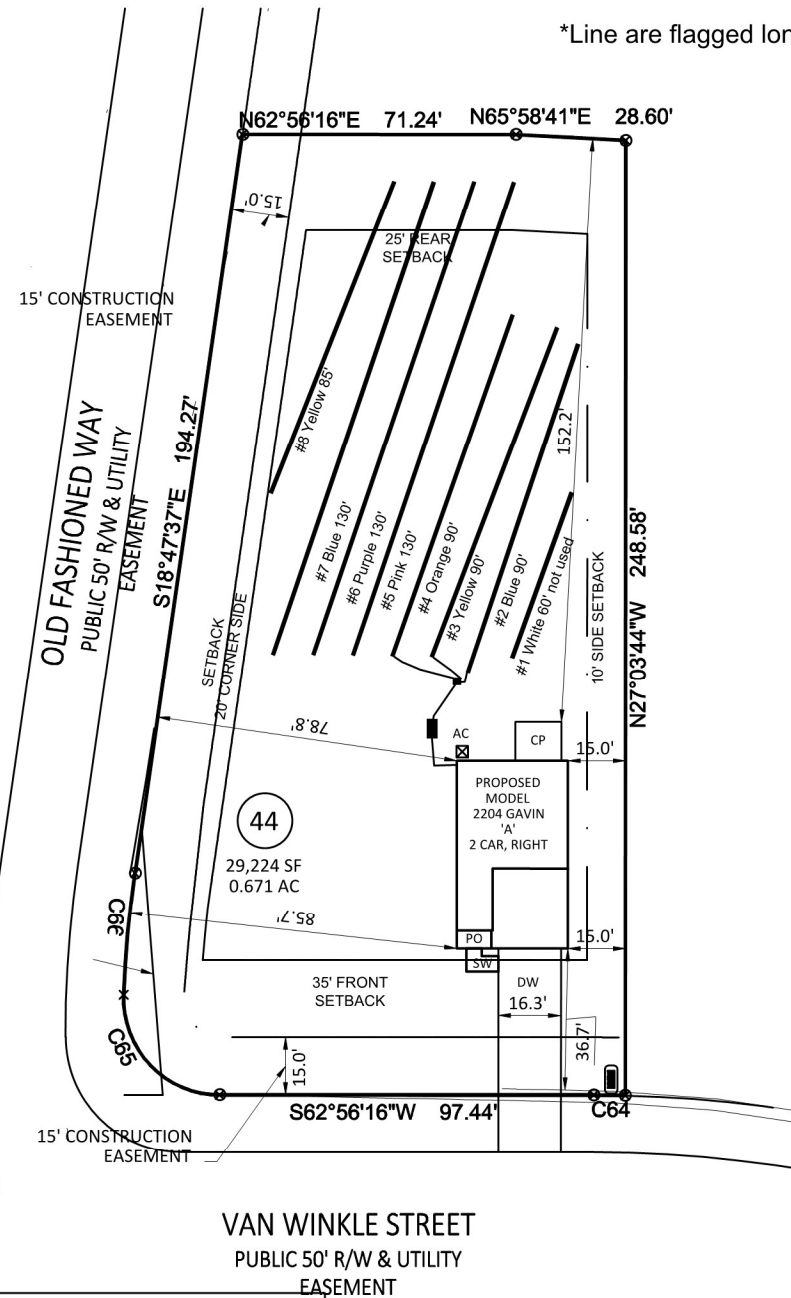
Alex Adams
NC Licensed Soil Scientist #1247
AOWE Certification: 10021E



Wellers Knoll - Lot #44
 3-Bedroom - Septic Design
 Van Winkle St. - Lillington, NC
 Davidson Homes
 Harnett County PIN: 0529-88-9339

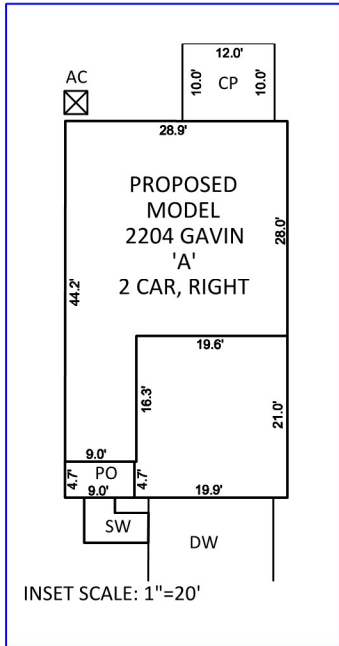
*Not a Survey
 Sketched from a plot plan supplied by owner

*Line are flagged longer on the lot than required for installation.

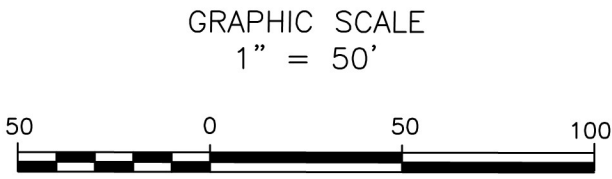


System: Gravity to D-Box
 Lines: 2-4 (270')
 0.35 LTAR
 24" Max Trench Bottom
 Accepted Status System
 Repair: Gravity to D-Box
 Lines: 5-7 (270+)
 0.35 LTAR
 24" Max Trench Bottom
 Accepted Status System

**1000 Gallon Septic and Pump Tank
 Tank and trenches to be located minimum of 10'
 from any property line and minimum of 5'
 from any building foundation.
 *Do Not Cut, Fill, or Alter Drainfield or Repair Area
 *Comply with all setbacks
 *Contact local health dept. and/or Alex Adams prior to
 or during installation with any questions or concerns.



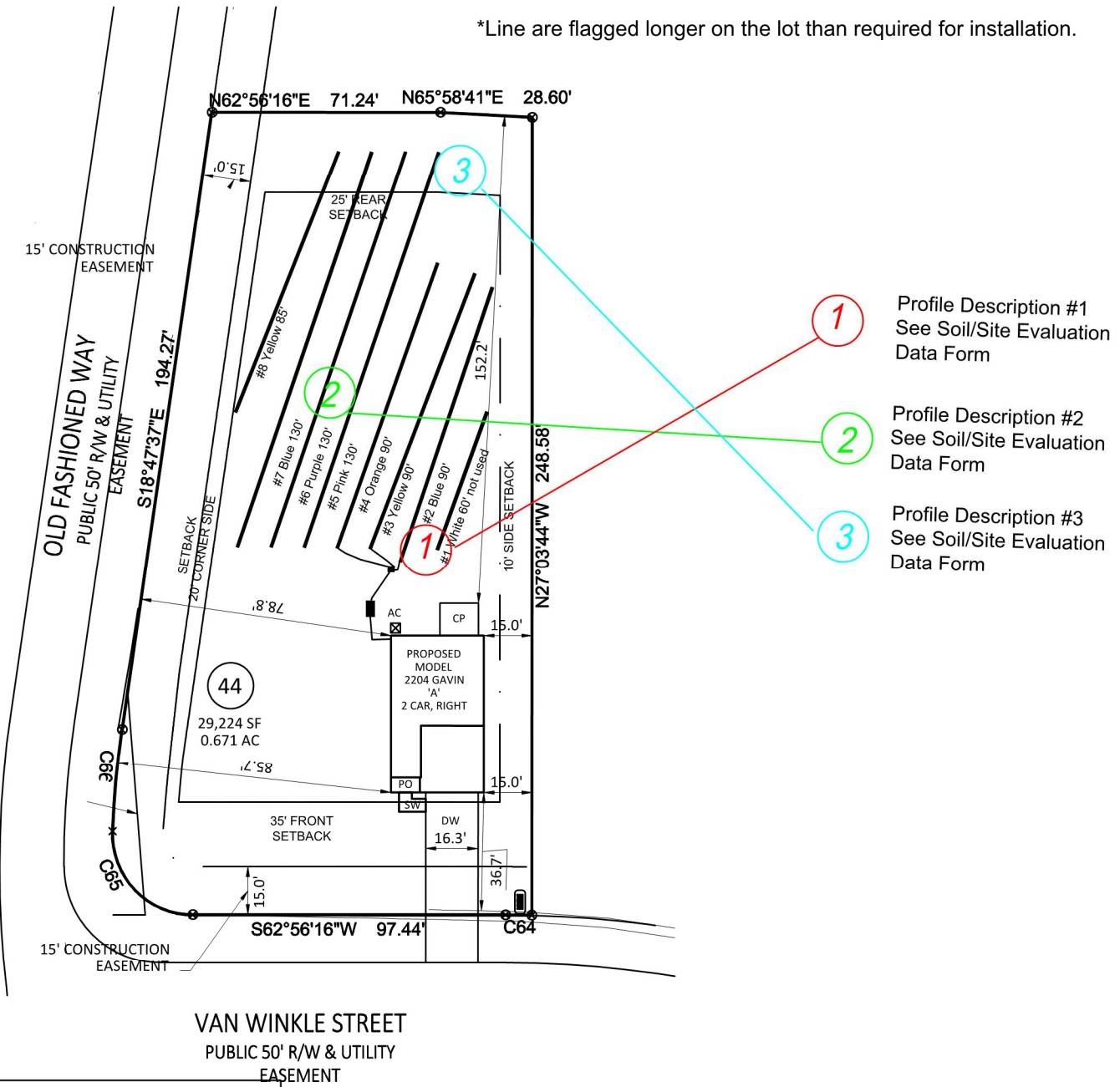
Adams
 Soil Consulting
 919-414-6761
 Job #1623



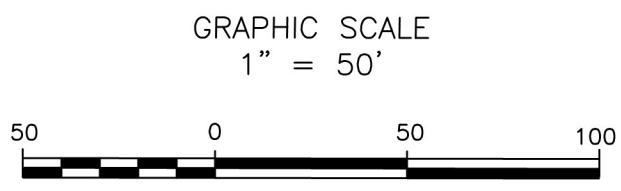
Wellers Knoll - Lot #44
 Soil Boring location map
 Van Winkle St. - Lillington, NC
 Davidson Homes
 Harnett County PIN: 0529-88-9339

*Not a Survey
 Sketched from a plot plan supplied by owner

*Line are flagged longer on the lot than required for installation.



Adams
 Soil Consulting
 919-414-6761
 Job #1623



SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM
 (Complete all fields in full)

OWNER: Davidson Homes
 ADDRESS: Lot #44 Wellers Knoll - Van Winkle St.
 PROPOSED FACILITY: Single Family, 3-bedroom PROPOSED DESIGN FLOW (.1949): 360gpd
 LOCATION OF SITE: Van Winkle St. – Lot #44 Wellers Knoll
 WATER SUPPLY: Public Water
 EVALUATION METHOD: Auger Boring

APPLICATION DATE:
 DATE EVALUATED: 5-3-23
 PROPERTY SIZE: ~0.6 acres

TYPE OF WASTEWATER: Sewage

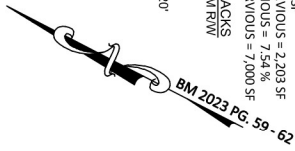
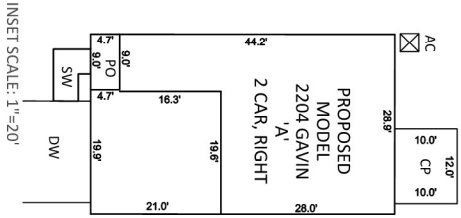
P R O F I L E #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	Linear Slope/3%	0-10	GR/SL	FR/SEXP/NS	36"	N/A	N/A	N/A	PS/0.35
		10-34	SBK/SCL	FI/SEXP/SS					
		34-38 (B/C)	Wk. SBK/SCL	FI/SEXP/SS					
2	Linear Slope/3%	0-12	GR/SL	FR/SEXP/NS	N/A	N/A	N/A	N/A	PS/0.35-0.4
		12-36	SBK/CL	FI/SEXP/SS					
3	Linear Slope/3%	0-16	GR/SL	FR/SEXP/NS	N/A	N/A	N/A	N/A	PS/0.35-0.4
		16-36	SBK/CL	FI/SEXP/SS					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946): _____ SITE CLASSIFICATION (.1948): PS EVALUATED BY: A. Adams OTHER(S) PRESENT:
Available Space (.1945)	>5,000 ft ²	>5,000 ft ²	
System Type(s)	Type III (b)	Type III (b)	
Site LTAR	0.35	0.35	

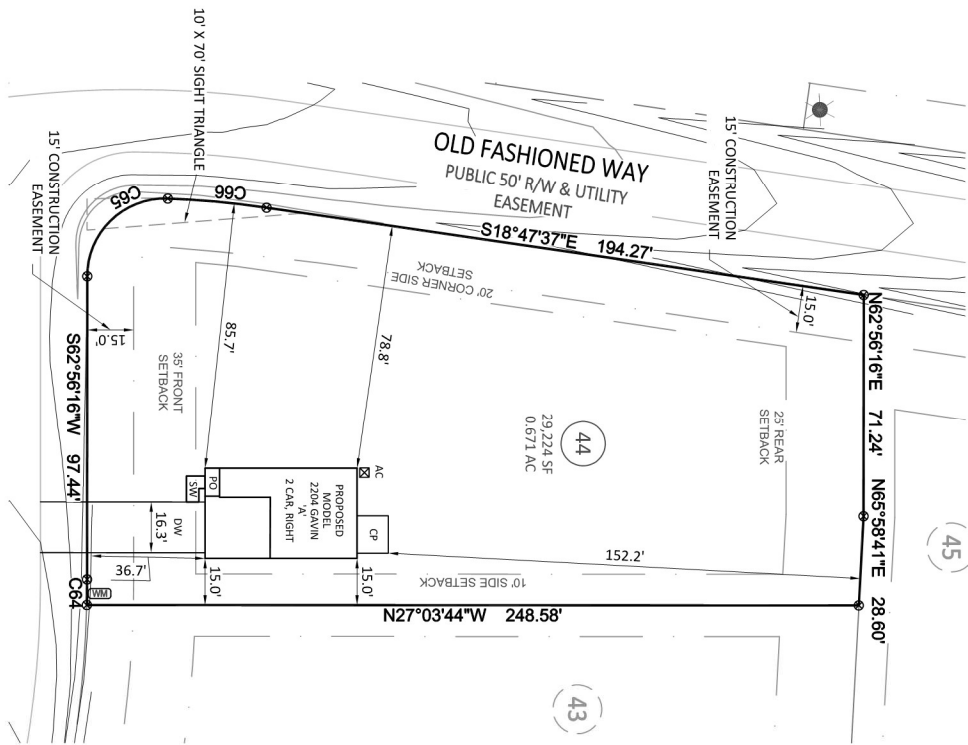
COMMENTS: _____

LOT INFORMATION:

PIN: 0529-88-9399.000
 REFERENCE: DB: 4183, PG: 652-657
 TOTAL LOT AREA = 0.606 AC = 29,224 SF
 HOUSE = 1,373 SF
 PORCH = 42 SF
 COVERED PORCH = 121 SF
 SIDEWALK = 41 SF
 DRIVEWAY = 617 SF
 AC PAD = 9 SF
 PROPOSED IMPERVIOUS = 2,203 SF
 PERCENT IMPERVIOUS = 7.154 %
 MAXIMUM IMPERVIOUS = 7,000 SF
 BUILDING SETBACKS
 FRONT - 35' FROM FRNT
 REAR - 25'
 SIDE - 10'
 SIDE CORNER - 20'



CURVE	RADIUS	LENGTH	CHORD DIRECTION	CHORD
C64	350.00'	8.22'	N63°36'37"E	8.22'
C65	25.00'	40.21'	S70°58'46"E	36.02'
C66	300.00'	31.95'	S21°50'42"E	31.94'



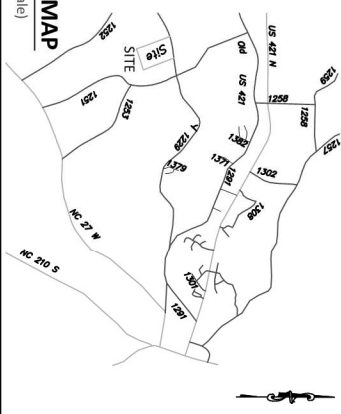
NOTES:

1. THIS SURVEY WAS PREPARED BY BATEMAN CIVIL SURVEY CO., UNDER THE SUPERVISION OF STEVEN P. CARSON, PLS.
2. THIS PLAN HAS BEEN PREPARED FOR LAYOUT AND PERMITTING PURPOSES ONLY.
3. PROPERTY LINES SHOWN WERE TAKEN FROM EXISTING FIELD EVIDENCE, EXISTING DEEDS AND PLATS OF PUBLIC RECORD, AND INFORMATION SUPPLIED TO THE SURVEYOR BY THE CLIENT.
4. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES AND ALL BEARINGS ARE NORTH CAROLINA STATE PLANE COORDINATE SYSTEM UNLESS OTHERWISE SHOWN.
5. THIS MAP IS NOT FOR RECORDATION AND SHOULD BE REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS.
6. THE BASIS OF NORTH AND ALL EASEMENTS, RIGHTS-OF-WAYS, BUFFERS, SETBACKS AND ADJOINERS, ETC. REFERENCED IN TITLE BLOCK.
7. NO INVESTIGATION INTO THE EXISTENCE OF JURISDICTIONAL WETLANDS OR RIPARIAN BUFFERS PERFORMED BY THIS FIRM.
8. SURVEYOR HAS MADE NO INVESTIGATION OR INDEPENDENT SEARCH FOR EASEMENTS OF RECORD, ENCUMBRANCES, RESTRICTIVE COVENANTS, OWNERSHIP TITLE EVIDENCE OR ANY OTHER FACTS THAT AN ACCURATE AND CURRENT TITLE SEARCH MAY DISCLOSE.
9. FEMA FLOOD HAZARD STATEMENT: LOTS SHOWN ON THIS PLAN ARE NOT LOCATED WITHIN THE FEMA FLOOD HAZARD "ZONE AE" AS SHOWN ON FEMA MAP NO. 37200640001 & 37200548001 EFFECTIVE DATE 10/3/2006.
10. ZONING: RA-30
11. PROPERTY OWNER: DAVIDSON HOMES
1903 NORTH HARRISON AVENUE
CARY, NC 27513



Bateman Civil Survey Company
 Engineers • Surveyors • Planners
 2524 Bellshire Avenue, Apex, NC 27539 P: 919.571.1080 F: 919.571.1081
 www.batemancivilsurvey.com info@batemancivilsurvey.com
 NCBELS Firm No. C-2378

VICINITY MAP
 (Not to Scale)



LEGEND

- PO = PORCH
- SP = SCREENED PORCH/PATIO
- CP = COVERED PORCH/PATIO
- VD = VESTIBULE DECK
- SW = SIDEWALK
- DW = CONC DRIVEWAY
- P = CONC PATIO
- CO = COMPUTED POINT
- X = IRON NAIL FOUND
- o = IRON PIPE FOUND
- o = IRON PIPE SET
- o = DRILL HOLE FOUND
- o = WATER METER
- o = CLEAN OUT
- o = SINK CONDITIONER
- o = SINK CONDITIONER
- o = CABLE BOX
- o = TELEPHONE PEDESTAL
- o = CATCH BASIN
- o = IRRIGATION CONTROLLER
- o = LIGHT POLE
- o = UTILITY POLE
- o = FIRE HYDRANT
- DI = DRAIN INLET
- WV = WATER VALVE
- YV = YARD VALVE
- YI = YARD INLET
- E = ELECTRIC METER

This map is of an existing parcel of land and is only intended for the parties and purposes shown. This map not for recordation. No title report provided.

PRELIMINARY

PRELIMINARY PLOT PLAN
 FOR
DAVIDSON HOMES

WELLERS KNOLL - LOT 44
 VAN WINKLE STREET, LILLINGTON, NC
 LITTLE RIVER TOWNSHIP, HARNETT COUNTY

DATE: 4/24/23 DRAWN BY: AMG CHECKED BY: SPC
 REFERENCE: BM 2023 PG. 59-62 BCS# 230051 SCALE: 1" = 40'