

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

November 29, 2023

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

**Ref: Pop Homes-RDU LLC EOP
Lot 23 – Poplar Mills
Bunn Level, 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 SFD2306-0011 on November 14, 2023. Thornton's Plumbing, the on-site wastewater contractor as permitted installed 3-67' vertical panel block lines, Type IIIe, with 24" TB as designed and permitted. 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,

 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: 2023.11.29 11:59:00 -0500

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



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

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OWNER'S ACCEPTANCE LETTER

November 16, 2023

To: POP HOMES-RDU LLC (the "Owner")
117 Christopher Dr.
Clayton, NC 27520

Ref: Pop Homes-RDU LLC EOP
Lot 23 – Poplar Mills
Bunn Level, Harnett County, NC

Dear Pop Homes-RDU, LLC,

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 SFD2306-0011 on November 14, 2023. Thornton's Plumbing, the on-site wastewater contractor as permitted installed 3-67' vertical panel block lines, Type IIIe, with 24" TB as designed and permitted. 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.

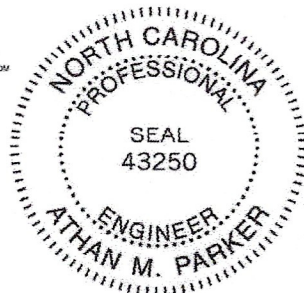
If you have any questions, please feel free to give me a call (252) 777-0141 or email me (athan.parker@ampdengineering.com).

Sincerely,



Digitally signed by ATHAN M. PARKER, PE
DN: cn=ATHAN M. PARKER, PE, c=US, o=AMPD
ENGINEERING, PLLC,
email=ATHAN.PARKER@AMPDENGINEERING.COM
Date: 2023.11.16 09:57:26 -0500

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

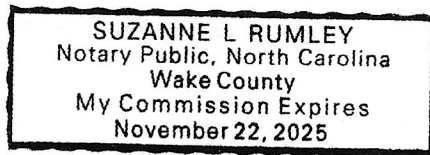
Owner: PATRICK LAMM [Signature] 11/14/2023
Print Name Sign Name Date

North Carolina

WAKE County

I, SUZANNE L. RUMLEY, a Notary Public for said County and State, do hereby certify that PATRICK LAMM 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 16th day of NOVEMBER, 2023.



[Signature]

Notary Public

My commission expires NOVEMBER 22, 2025

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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

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: 2023.11.28 11:59:43 -05'00'

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



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

LHD USE ONLY: Initial submittal of request for ATO received: _____ by _____
Date Initials

- 1. Signed and sealed copy of the Engineer’s report that includes the information in G.S. 130A-336.1(k)(1) and 15A NCAC 18A .1971(f) Yes No
- 2. Operation and management program and ORC contract, if applicable Yes No
- 3. Letter documenting Owner’s acceptance of the system from the PE Yes No
- 4. Owner meets requirements of ownership or control of the system per 15A NCAC 18A .1938(j) Yes No
- 6. Easement, right of way, or encroachment agreement required per 15A NCAC 18A .1938(j) Yes No
- 7. Multi-party agreements required, as applicable, pursuant to 15A NCAC 18A .1937(h) Yes No
If yes, agreements filed in _____ County Register of Deeds in Deed Book _____ Page _____

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
Print name of Owner or Professional Engineer
and the system meets 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 _____
Date

NOTES:

LIABILITY: The Department, the Department’s authorized agents, or local health departments shall have no liability for wastewater systems designed, constructed, and installed pursuant to an Engineer Option Permit [G.S. 130A-336.1(f)]



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.): _____

POP HOMES-RDU, LLC
T AND H PROPERTIES

Mailing address: 117 CHRISTOPHER DR. CLAYTON NC 27520
PO BOX 578 DUNN NC 28335

Telephone number: 919-525-5856 E-mail Address: PATRICK@MYPOPHOMES.COM
859-489-7514

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: _____

5. On-Site Wastewater Contractor name: THORTON'S PLUMBING, INC License number: 2534
HAYWOOD PITTMAN, LSS License number: 3825

Mailing address: 3160-A VINSON ROAD CLAYTON NC 27527
1073-1 GREGORY FORK RD RICHLANDS NC 28574

Telephone number: 919-550-4833 E-mail Address: TPIPLANNER@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.ncdhhs.gov • TEL: 919-707-5874 • FAX: 919-845-3972

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

3160-A Vinson Road
Clayton, NC 27527
919-550-4833 Office
919-550-1637 Fax

Thornton's Plumbing, Inc.
Thornton's Footing, Hauling & Septic, Inc.

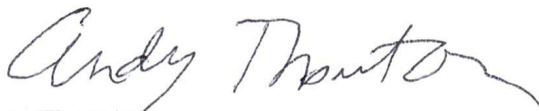
November 22, 2023

RE: **Septic Install**
Lot 23 Poplar Mills
POP Homes
35 Drake Circle Bunnlevel NC

On November 14, 2023, our company installed a 1000 gallon gravity panel block system, and 201 square ft of drain field for POP Homes.

Any questions please contact our office.

Sincerely,



Andy Thornton
License # 2534 Grade Level II
Thornton's Footing, Hauling and Septic
tpiplanner@gmail.com
919-550-4833
Fax:919-550-1637



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

5/22/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| PRODUCER Oakbridge Insurance Agency LLC 4011 Westchase Boulevard, Raleigh, NC 27607 120 Raleigh NC 27607 | CONTACT NAME: Rhonda Brooks, CISR PHONE (A/C No. Ext): 9197415284 E-MAIL ADDRESS: rhonda@pittgrouppllc.com | FAX (A/C, No): | | | | | | | | | | | | | |
|--|--|-----------------------|-------------------------------|--------|---|-------|--|-------|--|-------|-------------|--|-------------|--|-------------|
| | <table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Firstline Insurance Company</td> <td>40100</td> </tr> <tr> <td>INSURER B : Harford Mutual Insurance Company</td> <td>14141</td> </tr> <tr> <td>INSURER C : Builders Premier Insurance Company</td> <td>13036</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table> | | INSURER(S) AFFORDING COVERAGE | NAIC # | INSURER A : Firstline Insurance Company | 40100 | INSURER B : Harford Mutual Insurance Company | 14141 | INSURER C : Builders Premier Insurance Company | 13036 | INSURER D : | | INSURER E : | | INSURER F : |
| INSURER(S) AFFORDING COVERAGE | NAIC # | | | | | | | | | | | | | | |
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| INSURER B : Harford Mutual Insurance Company | 14141 | | | | | | | | | | | | | | |
| INSURER C : Builders Premier Insurance Company | 13036 | | | | | | | | | | | | | | |
| INSURER D : | | | | | | | | | | | | | | | |
| INSURER E : | | | | | | | | | | | | | | | |
| INSURER F : | | | | | | | | | | | | | | | |
| INSURED THORPLU-01 Thornton's Plumbing, Inc. & Thornton's Footings, Hauling And Septic Inc 3160A Vinson Rd Clayton 27527 | | | | | | | | | | | | | | | |

COVERAGES

CERTIFICATE NUMBER: 1404072231

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|---|--|----------|---------------|-------------------------|-------------------------|--|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER: | | | MP10804025 | 5/26/2023 | 5/26/2024 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | CA10803332 | 5/26/2023 | 5/26/2024 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| B | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000 | | | CU10815458 | 5/26/2023 | 5/26/2024 | EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ |
| C | <input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N <input checked="" type="checkbox"/> N | N/A | PWC1016269 | 5/26/2023 | 5/26/2024 | <input checked="" type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: Septic Install 76 Bunn Ct. Bunnlevel, NC 28323

CERTIFICATE HOLDER**CANCELLATION**
 Amp'd Engineering
 PO BOX 4580
 Emerald Isle NC 28594

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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