Civil Engineer - Consulting Engineer - Land Development

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 Ille, 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,

Athan M Parker, PE

President

AMP'd Engineering, PLLC

Firm License No. P-1532

ALE

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

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

> **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,

Athan M Parker, PE President

AMP'd Engineering, PLLC Firm License No. P-1532

ALE

Page 1 of 2

Civil Engineer - Consulting Engineer - Land Development

Owner: Print Name	AMM	Sign Name		4 /14 2023 Date
North Carolina				
WAKE C	County			
I, SUZANNE L. RUNLEY, of certify that PATRICK L				
acknowledged the due exec	cution of the pag	e 1 of 2 "Accep	otance Lette	r" from the PE.
Notary Pub Wa My Comi	NE L RUMLEY olic, North Carolina ake County mission Expires mber 22, 2025		Augun Notan	red Runla
My commission expires	NOUEMBER	22, 2025		

Owner: POPLAR MILLS

Address: LOT 23

Location: 35 DRAKE COURT

PROPERTY INFORMATION OBTAINED VIA SURVEY BY PIEDMONT SURVEYING, FOR POPLAR MILLS RUN SUBDIVISION, PHASE II, DATED JANUARY 3, 1996

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





INITIAL 4 REDRO

4 BEDROOM
LTAR.4 VERTICAL
3-67' PANEL BLOCK LINES
24" TB
>6" SOIL COVER REQUIRED OVER
SYSTEM AND 5' BEYOND SYSTEM

REPAIR AREA

4 BEDROOM LTAR 0.4 3-67' PANEL BLOCK 18" TB >6" SOIL COVER REQUIRED OVER SYSTEM AND 5' BEYOND SYSTEM

Civil Engineer - Consulting Engineer - Land Development

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:
 - o 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 SEAL 43250

NGINEEN AND M. PARKING M. PARKIN

١,	ATHAN M. PARKER, PE	hereby attest that all items indicated above have been provided
	Print name of Owner or Professional E	ngineer
ar	nd the system meets applicable	federal, State, and local laws, regulations, rules, and ordinances in accordance
w	vith G.S. 130A-3361(e)(6).	
		Digitally signed by ATHAN M. PARKER, PE DN. cn-ATHAN M. PARKER, PE, C-US, S-AMPD ENGINEERING, PLLC. enis-ATHAN FARKER, PARKER, PE, C-US, S-AMPD DN. Cn-RESING, PLLC. enis-ATHAN FARKER)AMPDENGINEERING, COM Distr. 2002. 11 29 12 2003 6-3000

Date

Signature of Owner or Professional Engineer

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)]



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				
PART 1: Notice of Intent to Construct (NOI) - Please check all that apply				
AND				
Repair – LHD Permit Number Repair – EOP/LSS COVID 19/AOWE Permit Number				
1. Facility Owner's name: (Owner, Company Name, Utility, Partnership, Individual, etc.):				
117 CHRISTOPHER DR. CLAYTON 275 Mailing address: PO BOX 578 City: DUNN State: NC Zip: 283 919-525-5856	20 35			
919-525-5856 Telephone number: 859-489-7514 E-mail Address: PATRICK@MYPOPHOMES.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.	<u>COM</u>			
3. Licensed Soil Scientist (LSS) name: <u>HAYWOOD PITTMAN</u> , LSS License number: 1262				
Mailing address: 1073-1 GREGORY FORK RD City: RICHLANDS State: NC Zip: 285	<u>74</u>			
Telephone number: 910-324-2892 E-mail Address: PITTMANSOIL@YAHOO.COM				
4. Licensed Geologist (LG) (if applicable) name: License number:				
Mailing address: State: State: Zip:				
Telephone number: E-mail Address: THORTON'S PLUMBING, INC 2534				
5. On-Site Wastewater Contractor name: <u>HAYWOOD_PITTMAN, LSS</u> License number: <u>3825</u>				
3160-A VINSON ROAD CLAYTON 27527 Mailing address: 1073 1 GREGORY FORK RD City: RICHLANDS State: NC Zip: 28574				
919-550-4833 TPIPLANNER@GMAIL.COM Telephone number: 910-324-2892 E-mail Address: 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

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

indy Thouto

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).

tilis certificate does not come	inglies to the certificate holder in fied of st				
PRODUCER		CONTACT NAME: Rhonda Brooks, CISR			
Oakbridge Insurance Agency 4011 Westchase Boulevard, F	.LC	PHONE (A/C, No. Ext): 9197415284	FAX (A/C, No):		
120		E-MAIL ADDRESS: rhonda@pittgroupllc.com			
Raleigh NC 27607		INSURER(S) AFFORDING COVERAGE	NAIC#		
		INSURER A: Firstline Insurance Company	40100		
INSURED	THORPLU-01	ınsurer в : Harford Mutual Insurance Company	14141		
Inc. & II	hornton's Footings, Hauling And Septic	INSURER C : Builders Premier Insurance Company	13036		
3160A Vinson Rd		INSURER D:			
Clayton 27527		INSURER E :			
		INSURER F:			
COVERACES	CERTIFICATE NUMBER, 1404073334	DEVICION NUI	MDED.		

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.

ISR TYPE OF INSURANCE INSD WYD POLICY NUMBER (MM/DD/YYYY) (MM/DD/YYYY) LIMITS							
			POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	s
Х	COMMERCIAL GENERAL LIABILITY		MP10804025	5/26/2023	5/26/2024	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$1,000,000
GEN						GENERAL AGGREGATE	\$2,000,000
	POLICY X PRO- X LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
	OTHER:						\$
AUT	TOMOBILE LIABILITY		CA10803332	5/26/2023	5/26/2024	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
Х	ANY AUTO					BODILY INJURY (Per person)	\$
	OWNED SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
Х	HIRED X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
							\$
Х	UMBRELLA LIAB X OCCUR		CU10815458	5/26/2023	5/26/2024	EACH OCCURRENCE	\$5,000,000
	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$ 5,000,000
	DED X RETENTION \$ 10,000						\$
	EMPLOYEDC! LIADILITY		PWC1016269	5/26/2023	5/26/2024	X PER X OTH- STATUTE X OTH-	
ANY	PROPRIETOR/PARTNER/EXECUTIVE N	N / A				E.L. EACH ACCIDENT	\$1,000,000
(Mar	ndatory in NH)					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
If yes	s, describe under CRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
	X AUT X X WOII AND OFF	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY X HIRED AUTOS ONLY X UMBRELLA LIAB EXCESS LIAB DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY X COCUR CLAIMS-MADE V/ N	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRODIECT X LOC OTHER: AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY AUTOS ONLY X HIRED AUTOS ONLY X AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under	TYPE OF INSURANCE X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO- POLICY X PRO- OTHER: AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY X HIRED AUTOS ONLY X AUTOS ONLY X UMBRELLA LIAB EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under	TYPE OF INSURANCE TYPE OF INSURANCE ADDL SUBR INSD POLICY NUMBER (MM/DD/YYYY) MP10804025 5/26/2023 GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X JECT X LOC OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY X HIRED AUTOS ONLY X HIRED CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OMINATION OF ICERMEMBER EXCLUDED? (Mandatory in NH) If yes, describe under	TYPE OF INSURANCE ADDL SUBR WVD POLICY NUMBER POLICY EXP (MM/DD/YYYY) X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-OTHER: AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY X HIRED AUTOS ONLY X AUTOS ONLY X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE DED X RETENTION \$ 10,000 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY N / A WYD MP10804025 POLICY NUMBER MP10804025 FOLICY EXP (MM/DD/YYYY) MP10804025 FOLICY EXP (MM/DD/YYYY) FOLI	TYPE OF INSURANCE ADDIL SURR INSD POLICY NUMBER POLICY EFF (MM/DD/YYY) (MM/DD/YYY) COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR MP10804025 MP1080404 MP10804025 MP10804025 MP1080404 MP10804025 MP1080404 MP1

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

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