



North Carolina Onsite Wastewater Contractor Inspector Certification Board  
 Authorized Onsite Wastewater Evaluator Permit Option for Non-Engineered Systems  
 Notice of Intent (NOI) to Construct

New  Expansion  Repair  Relocation  Relocation of Repair Area

Owner or Legal Representative Information: SBM Homes, LLC  
 Name: Johnny Byrd  
 Mailing address: 301 Fayetteville St Suite 1700 City: Raleigh State: NC Zip: 27601  
 Phone: 919-478-0965 Email: jbyrdconstruction9@gmail.com

Authorized Onsite Wastewater Evaluator Information:  
 Name: Alex Adams Certification #: AOWE# 10021E  
 Mailing address: 1676 Mitchell Road City: Angier State: NC Zip: 27501  
 Phone: 919-414-6761 Email: alexadams@bcsoil.com

Site Location Information:  
 Site address: 345 Ray Byrd Road - Lillington, NC 27546  
 Tax parcel identification number or subdivision lot, block number of property:  
 PIN# 0558-39-4334 County: Harnett

System Information:  
 Wastewater System Type: Type III (g)  
 Daily Design Flow: 360 gallons/day  
 Saproliite System:  Yes  No Subsurface Operator Required:  Yes  No  
 Water Supply Type:  Private Well  Public Water Supply  Spring  Other:

Facility Type:  
 Residential  3 # Bedrooms  6 Maximum # of Occupants  
 Business Type of Business and Basis for Flow: \_\_\_\_\_  
 Public Assembly Type of Public Assembly and Basis for Flow: \_\_\_\_\_

Required Attachments:  
 Plat or Siteplan  
 Evaluation of Soil and Site Features by Licensed Soil Scientist

Attest: On this the 15 day of September, 2023 by signature below I hereby attest that the information required to be included with this NOI to Construct is accurate and complete to the best of my knowledge. Furthermore, I hereby attest that I have adhered to the laws and rules governing onsite wastewater systems in the state of North Carolina.  
 This NOI shall expire on 15 day of September, 2028.

Signature of Authorized Onsite Wastewater Evaluator: Alex Adams

Signature of Owner or Legal Representative: Johnny Byrd 9-18-23

Disclosure: The owner may apply for a building permit for the project upon submitting a complete NOI to Construct and the fee required (if any) to the local health department. An onsite wastewater system authorized by an authorized onsite wastewater evaluator shall be transferable to a new owner with the consent of the authorized onsite wastewater evaluator.

Local Health Department Receipt Acknowledgement:  
 Signature of Local Health Department Representative: Mohammed REH Date: 9-26-23



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/7/2023

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 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<br>Wade Associates, LLC<br>250 Pollock St.<br><br>New Bern NC 28560 | CONTACT NAME: Angela Sensenig                                      |
|  | PHONE (A/C, No, Ext): (252) 631-5269 FAX (A/C, No): (252) 649-2443 |
|  | E-MAIL ADDRESS: asensenig@wadeict.com                              |
|  | INSURER(S) AFFORDING COVERAGE                                      |
|  | INSURER A: Markel Insurance Company NAIC # 38970                   |
|  | INSURER B:   |
|  | INSURER C:   |
|  | INSURER D:   |
|  | INSURER E:   |
|  | INSURER F:   |

COVERAGES CERTIFICATE NUMBER: 23-24 Master 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   |
|----------|---|-----------|----------|---------------|-------------------------|-------------------------|--|
|          | <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br><input type="checkbox"/> OTHER |           |          |               |                         |                         | EACH OCCURRENCE \$<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$<br>MED EXP (Any one person) \$<br>PERSONAL & ADV INJURY \$<br>GENERAL AGGREGATE \$<br>PRODUCTS - COMPIOP AGG \$<br>\$ |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS  |           |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$                                    |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br>DED <input type="checkbox"/> RETENTION \$   |           |          |               |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$   |
|          | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N N/A<br>If yes, describe under DESCRIPTION OF OPERATIONS below  |           |          |               |                         |                         | PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/><br>E L EACH ACCIDENT \$<br>E L DISEASE - EA EMPLOYEE \$<br>E L DISEASE - POLICY LIMIT \$                            |
| A        | Errors & Omissions  |           |          | MEO11181      | 1/31/2023               | 1/31/2024               | General Aggregate \$1,000,000<br>Each Occurrence \$1,000,000   |

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

## CERTIFICATE HOLDER

## CANCELLATION

\*FOR INFORMATIONAL PURPOSES ONLY\*  
 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

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

N Whitsett/RACHEL

© 1988-2014 ACORD CORPORATION. All rights reserved.



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

---

September 15, 2023  
Project #1763

*"This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-336.2*

RE: 345 Ray Byrd Road – Lillington, NC - 3-bedroom Single Family Residence

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 septic system design for a new single-family home sized for a 360 gallon/day septic system.

The suitable soils found on the subject property were somewhat variable 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.

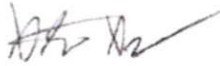
The initial and primary septic fields for the new home were sized based on a flow rate of 360 gallons/day and utilizing Accepted Status system for the initial and repair system. Any unauthorized site disturbance, filling, soil removal, or layout changes may result in the permit being revoked.

The septic installer contractor shall install the primary system on contour, see attached site plan for the primary system and repair. 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 flags are missing at the time of installation, they must be remarked by Adams Soil Consulting staff. Contact Alex Adams at 919-414-6761. A preconstruction conference is required with the septic installer prior to construction activities at least 14 days in advance of construction activities.

This report does not guarantee the future function of any waste water disposal system installed.

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

Sincerely,



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



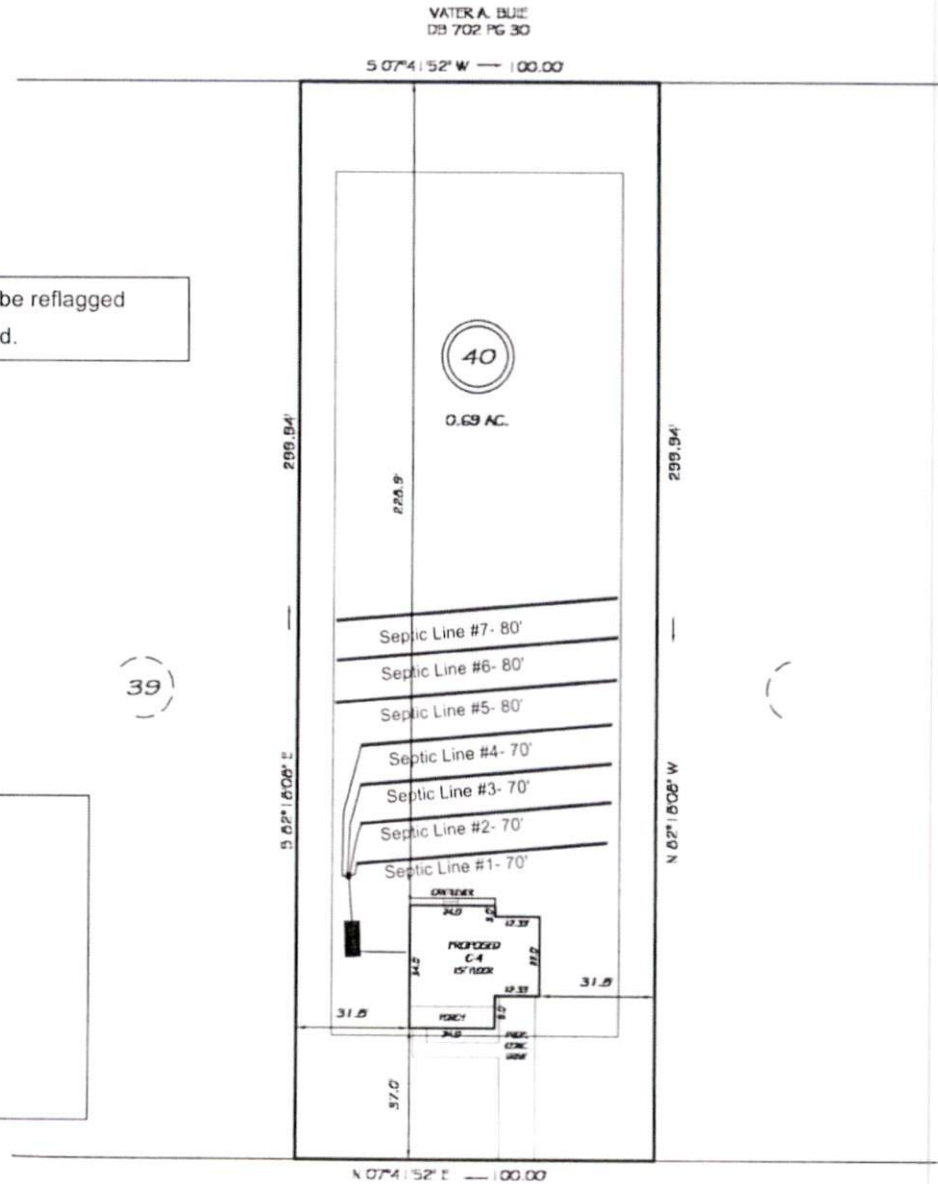
SBM Homes, LLC  
 3-Bedroom Septic Design  
 345 Ray Byrd Road- Lillington, NC  
 Harnett County PIN: 0558-39-4334

\*\*1000 Gallon Septic and Pump Tanks  
 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.

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

Septic Lines will need to be reflagged  
 once vegetation is cleared.

System: Gravity to D-Box  
 Lines: 1-4 (280')  
 0.4 LTAR  
 16" Max Trench Bottom  
 Accepted Status System  
 Repair: Gravity to D-Box  
 Lines: 5-7 (240')  
 0.3 LTAR  
 16" Max Trench Bottom  
 Accepted Status System



39

RAY BYRD ROAD  
 50' PUBLIC RW

GRAPHIC SCALE  
 1" = 50'



Adams  
 Soil Consulting  
 919-414-6761  
 Job #1763  
 9-15-23



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

OWNER: SBM Homes, LLC

APPLICATION DATE:

ADDRESS:

DATE EVALUATED: 8-10-23

PROPOSED FACILITY: Single Family, 3-bedroom PROPOSED DESIGN FLOW (.1949): 360gpd

PROPERTY SIZE: ~0.5 Acres

LOCATION OF SITE: 345 Ray Byrd Road - Lillington, NC

WATER SUPPLY: Private Well

EVALUATION METHOD: Auger Boring

TYPE OF WASTEWATER: Sewage

| P<br>R<br>O<br>F<br>I<br>L<br>E<br><br># | .1940<br>LANDSCAPE<br>POSITION/<br>SLOPE % | HORIZON<br>DEPTH<br>(IN.) | SOIL<br>MORPHOLOGY<br>(.1941)  |                                     | OTHER<br>PROFILE FACTORS           |                            |                         |                         | PROFILE<br>CLASS<br>& LTAR |
|--|--|---------------------------|--------------------------------|-------------------------------------|------------------------------------|----------------------------|-------------------------|-------------------------|----------------------------|
|  |  |                           | .1941<br>STRUCTURE/<br>TEXTURE | .1941<br>CONSISTENCE/<br>MINERALOGY | .1942<br>SOIL<br>WETNESS/<br>COLOR | .1943<br>SOIL<br>DEPT<br>H | .1956<br>SAPRO<br>CLASS | .1944<br>RESTR<br>HORIZ |                            |
| 1  | Linear<br>Slope/3%                         | 0-8                       | GR/SL                          | FR/NS/NP/SEXP                       | N/A                                | N/A                        | N/A                     | N/A                     | P.S/.4                     |
|  |  | 8-36                      | SBK/SCL                        | FI/SEXP/S/P                         |                                    |                            |                         |                         |                            |
|  |  |                           |                                |                                     |                                    |                            |                         |                         |                            |
| 2  | Linear<br>Slope/3%                         | 0-8                       | GR/SL                          | FR/NS/NP/SEXP                       | 32"                                | N/A                        | N/A                     | N/A                     | P.S/.4                     |
|  |  | 8-36                      | SBK/SCL                        | FI/SEXP/S/P                         |                                    |                            |                         |                         |                            |
|  |  |                           |                                |                                     |                                    |                            |                         |                         |                            |
| 3  | Linear<br>Slope/3%                         | 0-8                       | GR/SL                          | FR/NS/NP/SEXP                       | 28"                                | N/A                        | N/A                     | N/A                     | P.S/.4                     |
|  |  | 8-36                      | SBK/SCL                        | FI/SEXP/S/P                         |                                    |                            |                         |                         |                            |
|  |  |                           |                                |                                     |                                    |                            |                         |                         |                            |
| 4  |  |                           |                                |                                     |                                    |                            |                         |                         |                            |
|  |  |                           |                                |                                     |                                    |                            |                         |                         |                            |
|  |  |                           |                                |                                     |                                    |                            |                         |                         |                            |

| DESCRIPTION             | INITIAL SYSTEM | REPAIR SYSTEM | OTHER FACTORS (.1946):<br>SITE CLASSIFICATION (.1948): U/PS<br><br>EVALUATED BY: A. Adams<br>OTHER(S) PRESENT: |
|-------------------------|----------------|---------------|--|
| Available Space (.1945) | S              | S             |  |
| System Type(s)          | Type III (g)   | Type III (g)  |  |
| Site LTAR               | 0.4            | 0.4           |  |

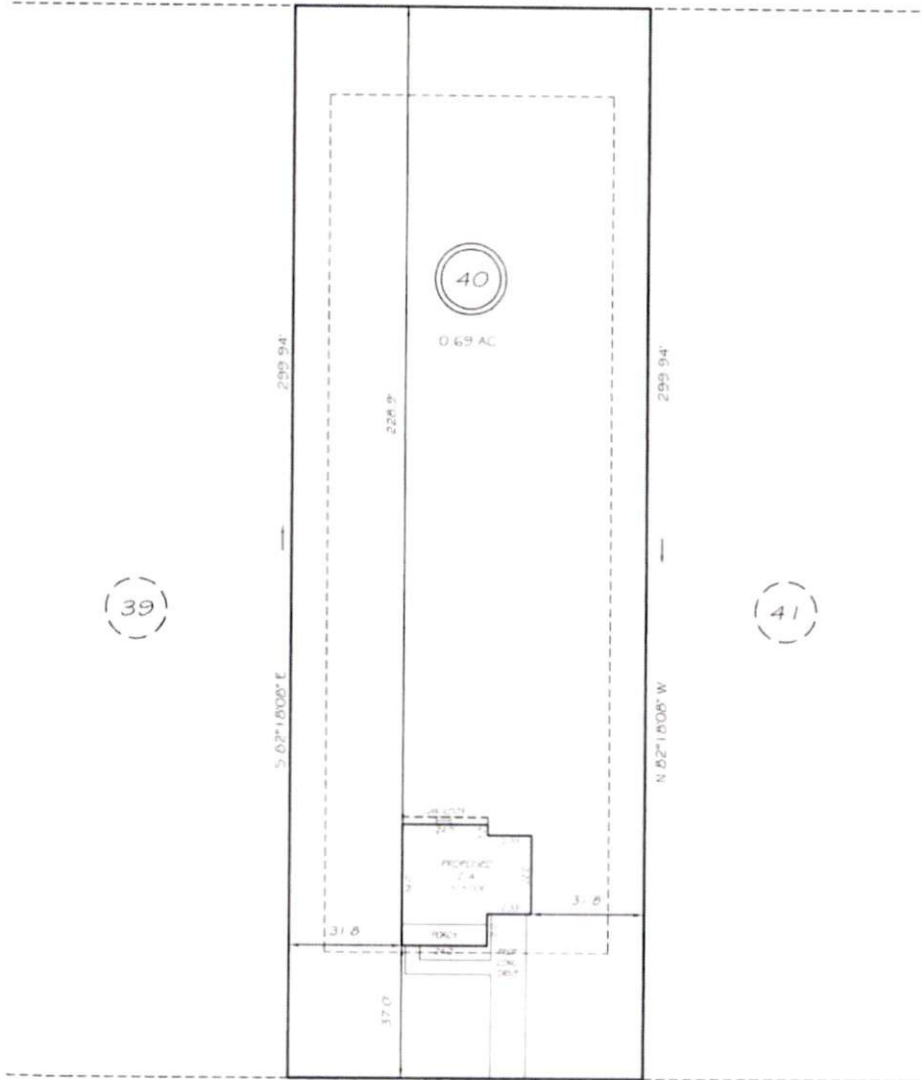


I, MICHAEL P. GRIFFIN, certify that under my direction and supervision this map was drawn from an actual field survey; that the error of closure of the survey as calculated by coordinates is 1:10,000+; that the area shown hereon was calculated by coordinates.  
 Witness my hand and seal this day of MONTH 2023.

PB 2002 PG 89  
 HARNETT CO REGISTRY

WATER A. BU:  
 DB 702 PG 30

S 07°41'52" W — 100.00



N 07°41'52" E — 100.00

RAY BYRD ROAD  
 50' PUBLIC R/W

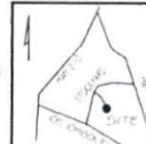
SETBACKS

|             |    |
|-------------|----|
| FRONT       | 35 |
| REAR        | 25 |
| SIDE        | 10 |
| CORNER SIDE | 20 |

**PRELIMINARY**  
 NOT FOR RECORDATION,  
 SALES OR CONVEYANCE

LEGEND

|     |                     |     |                    |
|-----|---------------------|-----|--------------------|
| EIP | EXISTING IRON PIPE  | FES | FLARED END SECTION |
| IPS | IRON PIPE SET       | WM  | WATER METER        |
| RAW | RIGHT OF WAY        | CO  | CLEAN OUT          |
| NF  | NOW OR FORMERLY     | FH  | FIRE HYDRANT       |
| EIS | EXISTING IRON STAKE | CB  | CATCH BASIN        |



GRIFFIN LAND SURVEYING, INC.

P.O. BOX 148  
 FUQUAY-VARINA, NC 27528  
 (919) - 567 - 1963

PLOT PLAN  
 FOR

**SBM HOMES LLC**

STOCKYARD ROAD ESTATES II

LOT 40

345 RAY BYRD ROAD

LILLINGTON, N.C.

HARNETT COUNTY LILLINGTON TOWNSHIP

DRAWN BY KDF

DATE 9/11/23

CHECKED BY MPG

SCALE 1" = 40'