

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

X New ExpansionRepair RelocationRelocation of Repair Area
Owner or Legal Representative Information: Name: Family Building Company
Mailing address: 1016 Mockingbird Dr City: Raleigh State: NC Zip: 27615
Phone: Email: matt@familybuildingco.com
Authorized Onsite Wastewater Evaluator Information:
Name: Hal Owen Certification #: 10036E
Mailing address: PO Box 400 City: Lillington State: NC Zip: 27546
Phone: 910-893-8743 Email: hal@halowensoil.com
Site Location Information: Site address: 31 Bourbon St, Fuquay Varina, NC Tax parcel identification number or subdivision lot, block number of property: Captains Landing, BLK 4 Lot 59 PIN 0613-74-7498 County: Harnett
System Information: Wastewater System Type: Illbg (Pump to Accepted Status 25% reduction) Daily Design Flow: 360 gpd Saprolite System: Yes X No Subsurface Operator Required: Yes X No Water Supply Type: Private Well X Public Water Supply Spring Other:
Facility Type:
X 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: V Plat or Site Plan V Evaluation of Soil and Site Features by Licensed Soil Scientist
Attest: On this the 13 day of May, 2024 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 13 day of May, 2029 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.
Signature of Authorized Onsite Wastewater Evaluator:
Signature of Owner or Legal Representative:
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: Date:
orginature of Local freature Department Representative.





CERTIFICATE OF LIABILITY INSURANCE

OP ID: TOW

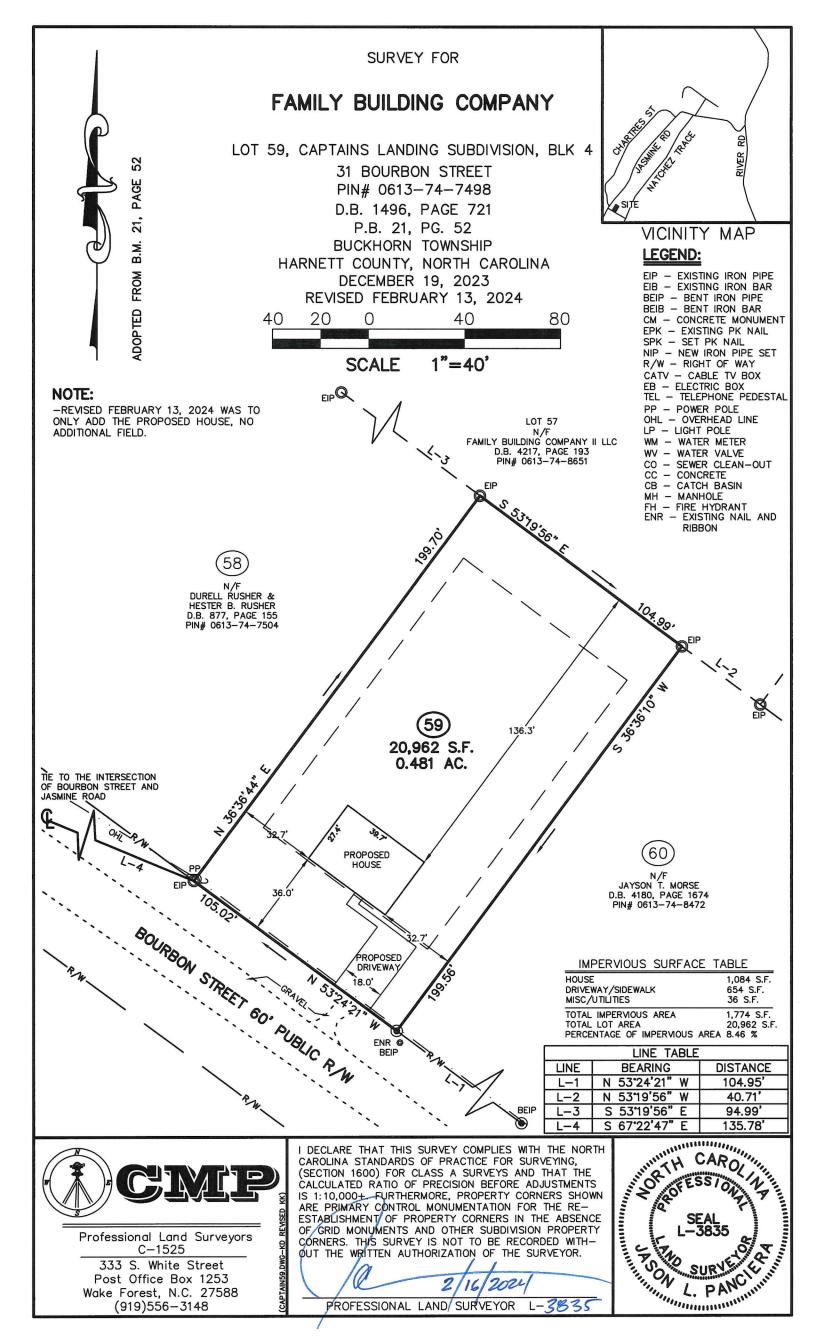
05/16/2024

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.

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						dorsement(s).	require an endo	orsemen	t. A St	atement on
	DUCER URANCE SERVICE CTR -LILLING		910	0-893-5707	CONTACT SHARON WOODY NAME: PHONE (A/C, No, Ext): 910-893-5707 FAX (A/C, No): 910-893-2077						
LILI	LINGTON BRANCH OFFICE				(A/C, No	o, Ext): 910-89	93-5707		FAX (A/C, No):	910-89	3-2077
	Box 1565 LINGTON, NC 27546			,	E-MAIL ADDRESS: SWOODY@ISCFAY.COM						
	NIEL L. BABB			ļ	INSURER(S) AFFORDING COVERAGE					NAIC #	
					INSURER A : STARSTONE NATIONAL						
INSL	JRED LOWEN & ASSOCIATES, INC.				INSURER B:						
PO I	BOX 400				INSURE	RC:					
LILL	LINGTON, NC 27546			ļ	INSURE	RD:					
					INSURE	RE:					
					INSURE	RF:					
				E NUMBER:				REVISION NUM			
C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	PERT POLIC	REME FAIN, CIES.	ENT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH D HEREIN IS SU	H RESPE	CT TO I	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	s	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	CE	\$	
	CLAIMS-MADE OCCUR							DAMAGE TO RENT PREMISES (Ea occu	ED irrence)	\$	
								MED EXP (Any one		\$	
								PERSONAL & ADV		\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG		\$	
	POLICY PRO- LOC							PRODUCTS - COMP		\$	
	OTHER:									\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE (Ea accident)	LIMIT	\$	
	ANY AUTO							BODILY INJURY (Pe	er person)	\$	
	OWNED AUTOS ONLY SCHEDULED AUTOS							BODILY INJURY (Pe	er accident)	\$,
	HIRED AUTOS ONLY NON-OWNED							PROPERTY DAMAG (Per accident)	SE	\$	
										\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	CE	\$	
	EXCESS LIAB CLAIMS-MADE	1						AGGREGATE		\$	
	DED RETENTION \$									\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDEN	NT	\$	
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA E	MPLOYEE	\$	
Α	PROFESSIONAL LIAB.	-		42ESP00143901		04/07/0004	04/07/0005	E.L. DISEASE - POL	ICY LIMIT	\$	4 000 000
А	PROFESSIONAL LIAB.			42ESP00143901		01/2//2024	01/27/2025	A CONTRACTOR OF THE PROPERTY O			1,000,000
								AGGREGATE			2,000,000
DESC	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD) 101, Additional Remarks Schedule	e, may be	attached if more	e space is require	ed)			
CEF	RTIFICATE HOLDER				CANC	ELLATION					
FAMILY BUILDING SUPPLY 1016 MOCKINGBIRD LN					ACC	EXPIRATION	I DATE THE	ESCRIBED POLICI REOF, NOTICE Y PROVISIONS.			
	RALEIGH, NC 28306					Taylor Wall	ace				
						my Court	,				



HAL OWEN & ASSOCIATES, INC.

SOIL & ENVIRONMENTAL SCIENTISTS

P.O. Box 400, Lillington NC 27546-0400 Phone (910) 893-8743 / Fax (910) 893-3594

www.halowensoil.com

13 May 2024

Family Building Company II LLC 1016 Mockingbird Dr Raleigh, NC 27615

Reference: AOWE Evaluation

31 Bourbon St, Harnett Co., NC

PIN 0613-74-7498

Dear Family Building Company,

A soil and site evaluation has been conducted for the referenced property for the purpose of permitting a subsurface wastewater system. This evaluation was prepared based on information provided by the applicant to include the basis for design flow, proposed structure location(s), and property boundaries. Any false, inaccurate, or incomplete information provided by the applicant, owner, or legal representatives may result in denial or revocation of applications, approvals, or permits.

This AOWE/LSS Evaluation is being submitted pursuant to and meets the requirements of G.S.130A-336.2. This evaluation includes a signed and sealed soil and site evaluation, specifications, plans, and reports for the site layout and construction of a proposed onsite wastewater system by an Authorized On-Site Wastewater Evaluator (AOWE). The evaluation of soil conditions and site features is provided in accordance with G.S. 130A-335(e), the Rules for "Wastewater Treatment and Dispersal Systems", 15A NCAC 18E, and local septic regulations (if any). This report represents my professional opinion as a Licensed Soil Scientist and Authorized Onsite Wastewater Evaluator.

This AOWE Evaluation is intended to file a Notice of Intent to construct a wastewater system with the Local Health Department and shall expire in five years.

Sincerely,

Hal Owen

Senior Licensed Soil Scientist

Authorized Onsite Wastewater Evaluator

WAS TELEMINATE WAS THE WAS TELEMINATE WAS TELEMINAT



Steven Boor Soils Associate III

terra E Brez

Contents

SPECIAL TERMS AND CONDITIONS	3
PROPOSED USE	4
WATER SUPPLY	4
EXISTING SITE CONDITIONS	4
SOIL AND SITE INVESTIGATION	4
Figure 1 Soil map showing septic suitability	5
Soil/Site Evaluation Form for On-Site Wastewater System	6
SEPTIC SYSTEM DESIGN	9
SEPTIC AREA PREPARATION	9
PERMIT CONDITIONS	10
WASTEWATER TREATMENT SYSTEM PLANS	11
Septic System Design Specifications	12
Figure 2 Septic System Layout	
Initial System Specifications	
Renair System Specifications	

TERMS AND CONDITIONS

This evaluation is not a permit to develop. The owner and subcontractors will need to abide by all state and local rules and regulations pertaining to planning, zoning, and land use development.

Notice of Intent to Construct – Prior to commencing or assisting in the construction, siting, relocation, or repair of a wastewater system, a complete Notice of Intent (NOI) to Construct a wastewater system using an AOWE must be submitted to the Local Health Department (LHD). The owner may apply for a building permit for the project upon submitting a complete NOI and the required fee.

<u>Plan Alterations</u> – If there are any changes in the site plan that can impact the wastewater system, such as moving the house or driveway, site alterations, or if the applicant chooses to change the design daily flow prior to wastewater system construction, a new NOI shall be submitted to the LHD. The applicant shall request in writing that the PE or AOWE invalidate the prior NOI with a signed and sealed letter sent to the applicant and LHD.

<u>Site Alterations</u> – The applicant shall be responsible for preventing modifications or alterations of the site for the wastewater system and the system repair area before, during, and after any construction activities for the facility, unless approved by the AOWE.

<u>On-Site Wastewater System Contractor</u> – The AOWE shall assist the owner in the selection of a certified on-site wastewater system contractor who shall be under contractual obligation to the owner and have sufficient errors and omissions, liability, or other insurance for the system constructed.

<u>Inspections, Construction Observations, and Reports</u> – The AOWE shall make periodic visits to the site to observe the progress and quality of the construction of the wastewater system.

<u>Authorization to Operate (ATO)</u> – Upon determining that the wastewater system has been properly installed and is capable of being operated in accordance with the conditions of the permit, the AOWE shall provide the owner with a report that includes inspection reports, a written operation and management program, any special reports, and an Authorization to Operate. The owner shall sign confirming acceptance and receipt of the report, and then provide a copy to the LHD who will issue the certificate of occupancy for the facility.

<u>Operation and Management</u> – The owner shall be responsible for continued adherence to the operations and management program established by the AOWE. This permit shall in no way be taken as a guarantee or implied warranty that the septic system will function satisfactorily for any given period of time.

<u>Change in System Ownership</u>. – An authorized wastewater system shall be transferrable to a new owner with the consent of the AOWE. The new owner and the AOWE shall enter a contract for the wastewater system.

<u>Revocation</u> – The AOWE permit is subject to revocation if the site plan, plat, or the intended use changes. This permit is subject to compliance with the provisions of the Laws and Rules Wastewater Treatment and Disposal Systems and to the conditions of this permit.

<u>Repair of Malfunctioning Systems</u>. – The owner may apply for an Improvement Permit and a Construction Authorization from the LHD or obtain a NOI from an AOWE to repair a malfunctioning wastewater system.

PROPOSED USE

A new single-family residence will be built at the site. The home will not have a basement. The proposed single-family residence will contain three bedrooms and have a design wastewater flow of 360 gallons per day. The maximum occupancy of the home is 6 people.

WATER SUPPLY

Water will be provided by public water supplies.

EXISTING SITE CONDITIONS

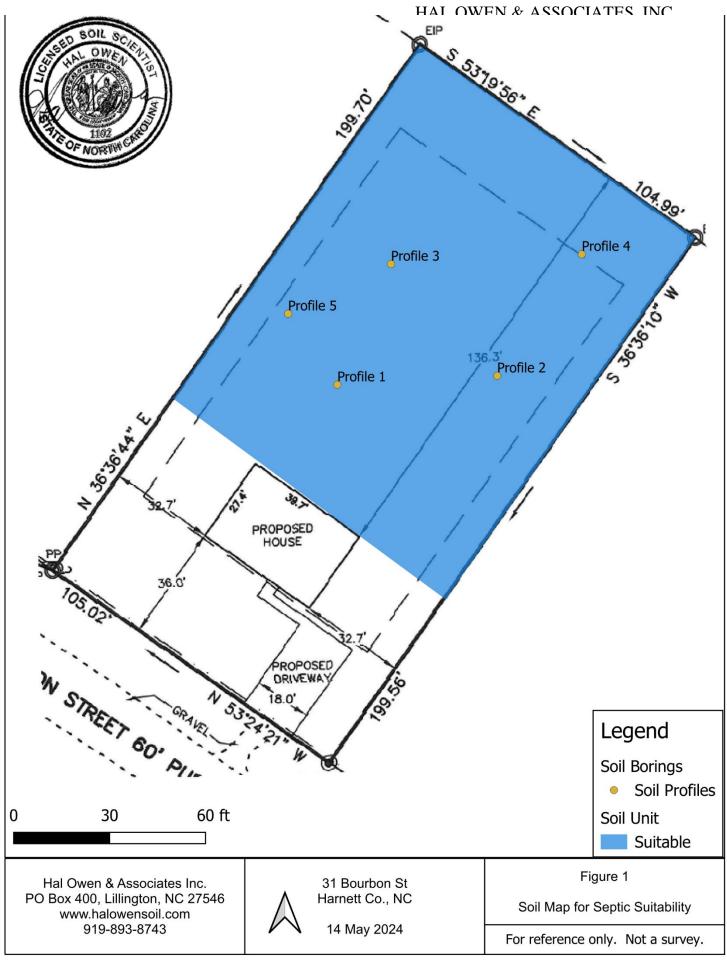
At the time of the investigation, the site had not been cleared, lot corners were staked, and the new building footprint was marked.

No existing wells, streams, or wetlands were observed within 50 feet of the proposed septic system and repair area.

SOIL AND SITE INVESTIGATION

The soils were evaluated under moist soil conditions through the advancing of auger borings. This evaluation included observations of topography and landscape position, soil morphology (texture, structure, clay mineralogy, organics), soil wetness, soil depth, and restrictive horizons. Descriptions of the soil borings located within the investigated portions of the site are provided in the attached Soil/Site Evaluation form.

Soils in the proposed system area were observed to rate as suitable for subsurface sewage waste disposal systems. (Figure 1). The subsoils were observed to be firm clay loams and extended to greater than 42 inches below ground surface. Evidence of a soil wetness condition was not observed within 42 inches below surface. These soils appear adequate to support long-term acceptance rates of 0.3 gal/day/ft² for accepted status drainlines.



SOIL/SITE EVALUATION FORM FOR ON-SITE WASTEWATER SYSTEM

OWNER NAME: Family Building Company OWNER ADDRESS:						1016 Mockingbird Dr	
PROPOSEI	FACILITY	Residential	l P	ROPOSED DESI	GN FLOW:	360 PROPERTY SIZE:	1
LOCATION	OF SITE:	31 Bourbo	n St, Fuquay-	-Varina, NC		PIN: 0613-74-7498	
WASTEWA	ATER TYPE:	Domestic				COUNTY: Harnett	
WATER SU	JPPLY:	Public Wat	er	WATE	R SUPPLY	SETBACK: 10	
EVALUAT	ION METHO	D: AUGE	R BORING	X	PIT	CUT	
EVALUAT	ED BY:	Hal Owen,	LSS 1102 at	nd Steven Boor		DATE EVALUATED:	5/3/24
			INITIAL SY	TSTEM		REPAIR SYSTE	M
AVAILA	BLE SPACE	900	ft ² trench bo	ottom		900 ft ² trench bottom	ı
SYS	STEM TYPE			on) System		Accepted (25% reduction) System
	SITE LTAR	0.30	gpd/ft ²			0.30 gpd/ft ²	
MAX TREN	ICH DEPTH	24	inches (mea	sured on downh	ill side)	24 inches (measured	on downhill side)
SITE CLAS	SIFICATION	Suitable			OTHE	R FACTORS	
C	OMMENTS						
PROFILE	1						
HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	TORS
DEPTH		TENCE			LOGY		
0-4	10YR 6/3	FR	CL	SBK	SEXP	LANDSCAPE POSITION	L
4-34	5YR 5/6	FI	C	ABK	SEXP	SOIL WETNESS DEPTH	>42"
34-42	5YR 6/8	FI	CL	wABK	SEXP	SOIL WETNESS COLOR	
						SOIL DEPTH	42"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	13
PROFILE O	CLASSIFICA	TION	Suitable	LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	4.7
COMMEN'	Γ						
PROFILE	2						
HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	TORS
DEPTH		TENCE			LOGY		
0-11	7.5YR 6/6	FI	CL	ABK	SEXP	LANDSCAPE POSITION	L
11-38	5YR 5/6	FI	C	ABK	SEXP	SOIL WETNESS DEPTH	>42"
38-42	5YR 6/8	FI	CL	wABK	SEXP	SOIL WETNESS COLOR	
						SOIL DEPTH	42"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	13

LTAR gpd/ft² 0.3

Suitable

PROFILE CLASSIFICATION

COMMENT

SLOPE CORRECTION (IN) 4.7

PROFILE 3

HORIZON	RIZON COLOR CONSIS		TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FAC	TORS
DEPTH		TENCE			LOGY		
0-3	10YR 4/3	FR	L	GR	SEXP	LANDSCAPE POSITION	L
3-11	7.5YR 6/6	FR	CL	SBK	SEXP	SOIL WETNESS DEPTH	>42"
11-38	5YR 5/6	FI	С	ABK	SEXP	SOIL WETNESS COLOR	
38-42	5YR 5/8	FI	CL	wABK	SEXP	SOIL DEPTH	42"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	13
PROFILE CLASSIFICATION		Suitable	LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	4.7	
COMMENT							

PROFILE 4

INOTILE 4							
HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-3	10YR 5/4	FR	L	GR	SEXP	LANDSCAPE POSITION	L
3-8	7.5YR 6/6	FR	CL	SBK	SEXP	SOIL WETNESS DEPTH	>42"
8-33	5YR 5/8	FI	С	ABK	SEXP	SOIL WETNESS COLOR	
33-42	5YR 6/8	FI	CL	wABK	SEXP	SOIL DEPTH	42"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	13
PROFILE CLASSIFICATION		TION	Suitable	LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	4.7
COMMENT							

PROFILE 5

TROTTEE						
COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
	TENCE			LOGY		
10YR 3/2	FR	L	GR	SEXP	LANDSCAPE POSITION	L
7.5YR 5/8	FR	CL	SBK	SEXP	SOIL WETNESS DEPTH	>42"
2.5YR 5/6	FI	С	ABK	SEXP	SOIL WETNESS COLOR	
2.5YR 5/8	FI	С	ABK	SEXP	SOIL DEPTH	42"
					SAPROLITE CLASS	NA
					RESTRICTIVE HORIZON	NA
					SLOPE %	13
PROFILE CLASSIFICATION			LTAR gpd/ft ²	0.3	SLOPE CORRECTION (IN)	4.7
COMMENT						
	10YR 3/2 7.5YR 5/8 2.5YR 5/6 2.5YR 5/8	TENCE 10YR 3/2 FR 7.5YR 5/8 FR 2.5YR 5/6 FI 2.5YR 5/8 FI LASSIFICATION	TENCE 10YR 3/2 FR L 7.5YR 5/8 FR CL 2.5YR 5/6 FI C 2.5YR 5/8 FI C LASSIFICATION Suitable	TENCE 10YR 3/2 FR L GR 7.5YR 5/8 FR CL SBK 2.5YR 5/6 FI C ABK 2.5YR 5/8 FI C ABK LASSIFICATION Suitable LTAR gpd/ft²	TENCE	TENCE

LEGEND OF ABBREVIATIONS FOR SITE EVALUATION FORM

	TEXTURE	TEXTURE		<u>LTAR</u>
LANDSCAPE POSITION	GROUP	<u>CLASS</u>		(gal/day/sqft)
CC - Concave Slope	I	S - Sand		1.2-0.8
CV - Convex Slope		LS - Loamy Sand		
DS - Debris Slump				
D - Depression	II	SL - Sandy Loam		0.8 - 0.6
DW - Drainage Way		L - Loam		
FP - Flood Plain				
FS - Foot Slope	III	SCL - Sandy Clay I	_oam	0.6 - 0.3
H - Head Slope		CL - Clay Loam		
L - Linear Slope		SiL - Silt Loam		
N - Nose Slope		Si - Silt		
R - Ridge		SiCL - Silt Clay Loa	ım	
S - Shoulder Slope				
T - Terrace	IV	SC - Sandy Clay		0.4 - 0.1
TS - Toe Slope		C - Clay		
		SiC - Silty Clay		
		O - Organic		none
<u>STRUCTURE</u>	MOIST CONSIST			<u>ISISTENCE</u>
G - Single Grain	VFR - Very Fria	able		on Stick
M - Massive	FR - Friable			ightly Sticky
CR - Crumb	FI - Firm			oderately Stick
GR - Granular	VFI - Very Fire	n	VS - Ve	ery Sticky
SBK - Subangular Blocky	EFI - Extremel	y Firm		
ABK - Angular Blocky			NP - No	on Plastic
PL - Platy	MINERALOGY			ightly Plastic
PR - Prismatic	SEXP - Sligh	tly Expansive	MP - M	oderately Plastic
	EXP - Expa	nsive	VP - Ve	ery Plastic
MOTTLES				
f - few 1 - fine		F - Faint		
c – common 2 - medi		D - Distinct		
m - many 3 - coars	se	P - Prominent		

Give Horizon Depth in inches below natural soil surface and Fill Depth in inches above land surface. Depth to Soil Wetness: inches below land surface to free water or to soil colors with chroma 2 or less.

Classification: S – Suitable U – Unsuitable

SEPTIC SYSTEM DESIGN

See section Wastewater Treatment System Plans and Figure 2 for a diagram of the septic system layout and design specifications.

A 1000 gallon (at minimum) septic tank and an approved septic effluent filter is required. A pump tank (1000 gallon at minimum) is required to lift effluent to the nitrification field. The pump tank may be eliminated if gravity distribution can be demonstrated.

The initial septic system is proposed as a pump driven system to 300 linear feet of Accepted Status drainlines utilizing a 25% reduction in total drainline length (Figure 2). A long-term acceptance rate (LTAR) of 0.30 gal/day/ft² was used to design the dispersal field. A pressure manifold will be used to deliver effluent in parallel distribution to four 75-ft long drainlines. The drainlines shall be installed on contour with maximum trench bottom depths at 24 inches below surface (as measured on low side).

The repair septic system is proposed as a pump driven system to 300 linear feet of Accepted Status drainlines utilizing a 25% reduction in total drainline length (Figure 2). A long-term acceptance rate (LTAR) of 0.30 gal/day/ft² was used to design the dispersal field. A pressure manifold will be used to deliver effluent in parallel distribution to four 75-ft long drainlines. The drainlines shall be installed on contour with maximum trench bottom depths at 24 inches below surface (as measured on low side).

SEPTIC AREA PREPARATION

It is important that you do not disturb the septic areas during site construction. A staked line or protective fence should be placed around the system areas prior to construction to eliminate any potential damage to the soil or the layout of the system. Septic areas should not be used for staging construction materials or subjected to vehicular traffic. Do not cut, grade, fill, install utilities, or otherwise alter the designated septic areas.

Care should be taken when clearing vegetation from the septic area. Work should only occur when the soil is at the appropriate moisture content to limit the impact to the soil structure in the soil treatment area. Do not scrape the ground inside the drainfield. Any clearing or preparation of the septic areas shall be done without removal, disturbance, or compaction of the soil.

PERMIT CONDITIONS

GENERAL CONDITIONS:

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met.

System shall be installed in accordance with the attached Wastewater Treatment System Plans.

Any changes to the site plan or intended use must be approved by Hal Owen & Associates. Permit modification and resubmittal to the LHD may be necessary to ensure regulatory compliance.

Conformance to all regulatory setbacks shall be maintained. Local regulations (such as well or riparian buffer ordinances) may require more stringent setbacks.

Minimum soil cover of six inches shall be established over nitrification field. Soil cover above the original grade shall be placed at a uniform depth over the entire nitrification and shall extend laterally five feet beyond the nitrification trench. Site shall be graded to shed water away from field and a vegetative cover established to prevent erosion.

The nitrification field and repair area shall not be subject to vehicular traffic. Vehicular traffic can damage soils, pipes, and valve boxes. Do not use septic areas for parking.

Do not allow underground utilities, water lines, or sprinkler systems to be installed in the septic areas. Damage to the septic areas could result in the septic permit being revoked.

The wastewater system shall not be covered until inspected by Hal Owen & Associates and shall not be placed into use until an Authorization to Operate is issued.

SPECIAL CONDITIONS:

• To ensure a watertight joint, the inlet and outlet of all tanks shall be equipped with an approved pipe penetration boot.

WASTEWATER TREATMENT SYSTEM PLANS

PROJECT INFORMATION

Wastewater System	New		.0403 Eng Low Flow	No
Wastewater Strength	Domestic			
Effluent Standard	DSE			
Water Supply	Public Water			
Facility Type	Residential			
Design Wastewater Flow	360	gpd	gal/unit	120
Basis for Flow	3	bedrooms	max occupancy	6
Basement	No		Fixtures in basement?	No
Crawl Space	No		Slab Foundation	Yes

PROPERTY INFORMATION

County	Harnett		
Site Address 31 Bourbon St, Fuquay-Varina, NC			
S/D Name and Lot#	Captains Landing, BLK 4, Lot 59		
PIN	0613-74-7498		
County PID			
Size (Acre)	1		

APPLICANT INFORMATION

Name	Family Building Company		
Mailing Address	ess 1016 Mockingbird Dr		
	Raleigh, NC 27615		
Telephone Number			
E-mail Address	matt@familybuildingco.com		

CONSULTANT INFORMATION

Company Name	Hal Owen & Associates, Inc.
Mailing Address	PO Box 400, Lillington, NC 27546
Telephone Number	910-893-8743 Fax: 910-893-3594
E-mail Address	hal@halowensoil.com
Licensed Soil Scientist	Hal Owen, LSS #1102 and AOWE# 10036E
System Designer	Jocelyn Proulx

Septic System Design Specifications

SEPTIC SYSTEM DESIGN

Proposed Design Daily Flow	360	gpd	Drainfield Meeets Requ	uirements:
Septic Tank Size (minimum)	1000	gallons	.0508 Available Space	Yes
Pump Tank Size (minimum)	1000	gallons, if required	.0601 Setbacks	Yes

Initial System *See Detailed Design Parameters

System Type IIIbg -Pump to Other non-conventional systems Pump Required Yes 18.3 ft TDH at 28.4 GPM Accepted (25% reduction) System Trenches: gal/day/ft2 Design LTAR 0.30 Saprolite System No 300 Total Trench/ Bed Length feet Fill System Trench Spacing 9 ft on center Usable soil depth to LC 48 inches Soil Cover 6 inches Maximum Trench Depth 24 inches, measured on downhill side of trench Artificial Drainage Required No

Repair System

System Type: IIIbg -Pump to Other non-conventional systems Accepted (25% reduction) System Trenches: 0.30 Design LTAR gal/day/ft2 Saprolite System No 300 Total Trench/ Bed Length feet Fill System No Trench Spacing 9 ft on center Usable soil depth to LC 48 inches Maximum Trench Depth of 24 inches, measured on downhill side of trench Pump Required Yes

Potential Drainlines flagged at site on 9-ft centers.

Potential Drainlines hagged at site on 9-11 centers.							
		Relative Drainline		Field			
Line #	Color	Elevation (ft)	Length(ft)	Length(ft)			
1	W	95.55	75	88			
2	В	94.08	75	88			
3	Y	92.62	75	88			
4	R	91.20	75	88			
5	W	90.15	75	88			
6	В	88.51	75	88			
7	Y	87.27	75	88			
8	R	86.14	75	86			
Septic Tank:		81.59					
Pump Tank:		82.09					
Reference Elev:		100.00					

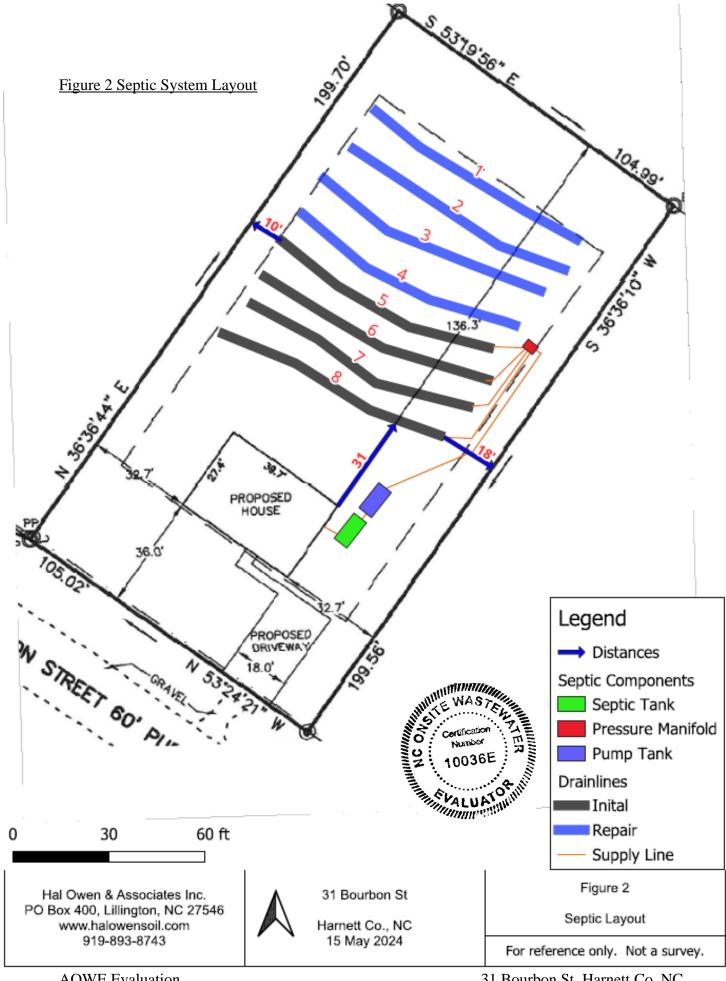
Notes:

^{*}No grading or removal of soil in initial or repair areas

^{*}Property lines per owner

^{*}Trench bottoms shall be level to +/- 1/4" in 10ft

^{*}All parts of septic system must meet minimum setbacks



AOWE Evaluation Pg 13 of 18

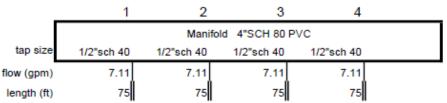
31 Bourbon St, Harnett Co, NC 13 May 2024

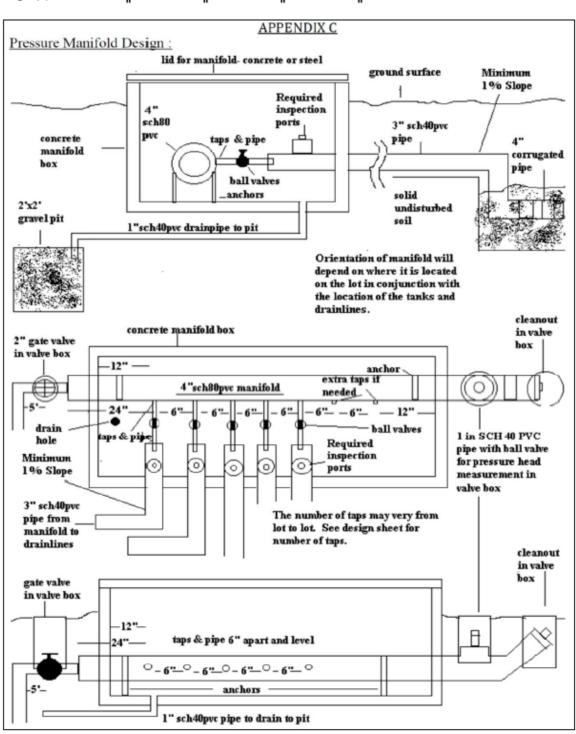
Initial System Specifications

Pressure Manifold Design Criteria

DESIGN DAILY FLOW		360	gallons/day	SOIL LTAR:	0.30	gpd/ft ²			
TANKS (min) Septic Tank				-	Pump Tank: 1000 gallons		-		
SUPF	LY LINE	Length:	68	ft	Diameter: 2 " SCH 40 F		VC		
_			m flow (gpm) to i	maintain 2fps s	cour velocity:	20.9	gpm		
			ply Pipe Volume				•		
					. •				
TREN	ICHES [Accepted (25%						
		Maximum	Trench Depth of	24	inches, meas	sured on lo	ow side of tr	ench	
		French width:	3	_feet			ft		
	Abs	orption Area:	900	.ft²	Minimum Linear Length:			.: <u>300</u> ft	
MANI	FOLD		3.5	•			-		
		# Taps	4	Tap Configura	tion: 6in. spac	ing, 1 sid	e of manifol	d	
TAP (CHART							,	
		Relative		Tap Size/	flow/tap		LTAR		
Line	Color	Elevation	Length(ft)	Schedule	gpm	gpd/ft	(gpd/ft ²)		
5	W	90.15	75	1/2"sch 40	7.11	1.200	0.400		
6	В	88.51	75	1/2"sch 40	7.11	1.200	0.400		
7	Y	87.27	75	1/2"sch 40	7.11	1.200	0.400		
8	R	86.14	75	1/2"sch 40	7.11	1.200	0.400		
	To	otal Drainline:	300	Total Flow:	28.44				
Target LTAR*: 0.40									
PUMI	CALCULA	TIONS			L	TAR + 5%:	0.420		
Dose	Volume:	146.93	gallons, with Pip	e Volume at	75 % *65.3gal/100ft pipe				
Dose	Pump Run	Time (min):	5.17	Daily	Pump Run Ti	me (min):	12.66		
			gallons ÷						
			82.09				•		
Friction Head: 2.22 *Hazen Williams Formula (use supply line length+70' for fittings in pump tank)									
Eleva	tion Head:	14.1	Design Head:	2.0	To	tal Head:	18.28	ft	
Pump	to Deliver:	28.4	gpm @	18.3	ft head				
NEMA 4X Simplex Control Panel with elapsed time meter, event counter, audible and visible alarm (w/									
silence button), hand-off-automatic (HOA) switch, pump run light, and pump on separate circuits is required									
Control panel bottom shall be mounted a minimum of 24 in. above finished grade within 50 ft of pump tank.									
A septic tank filter is required. Floats to be determined by type of pump tank used.									
Possible Septic Tank: Brantley 1000 STB-499 Possible Septic Filter: Polylock PL-122									
	Possible	Pump Tank:	Brantley 1000_F	PT-237	Vol(gal):	1000	GPI:	20.25	
	Possible Pump: Zoeller 150 Series pump height (in) = 12								
Possible Control Panel:									

Pressure Manifold Diagram

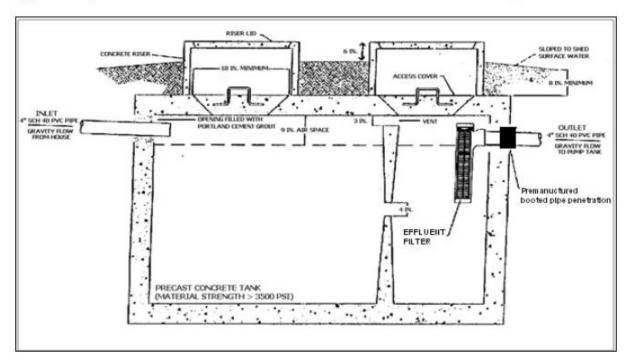




١.

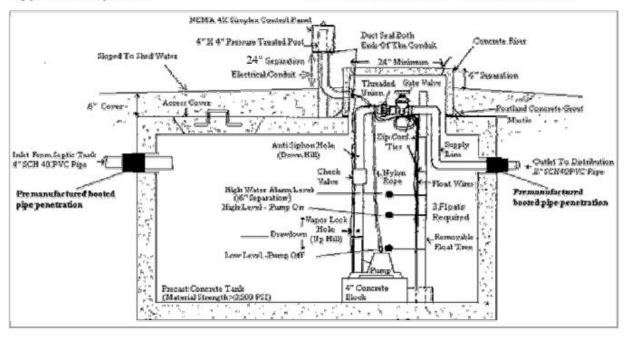
Typical Septic Tank

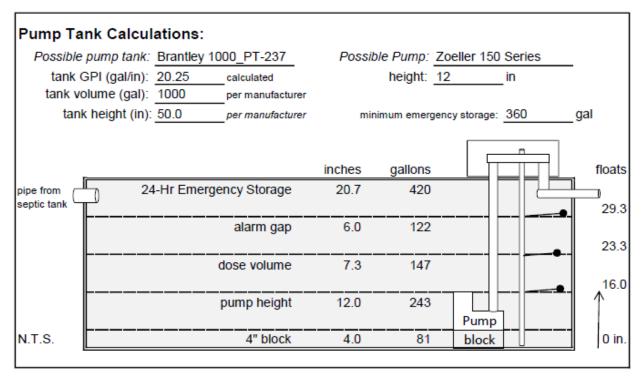
1000 GALLON SEPTIC TANK, minimum

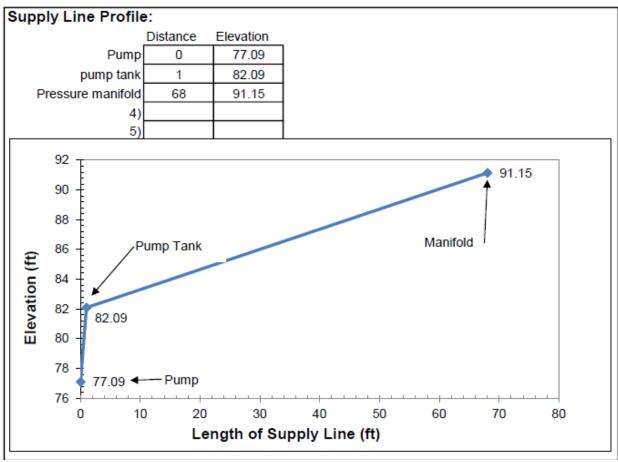


Typical Pump Tank

1000 GALLON PUMP TANK, minimum







Repair System Specifications DESIGN FLOW 360 gal/day SOIL LTAR: 0.30 gpd/ft²								
TAN	KS (minimu	m) S	Septic Tank:	1000	gallons	Pump Tank:	1000	gallons
TRE	NCHES Dra	ninline Type:	Accepted (2	25% reduction	n) System			
						sured on low	side of tren	ch
Maximum Trench Depth of 24 inches, measured on low side of tren Trench width: 3 feet Effective Trench Width: 4								
	Abso	rption Area:	900	ft ²	Minimum L	inear Length:	300	ft
PRESSURE MANIFOLD DESIGN CRITERIA								
MAN	IFOLD	# Taps	4	Tap Configu	uration: 6in. s	pacing, 1 sid	le of manifol	d
		Length (ft):	3.5	Diameter:	4" sch 80 pv	/C	Elevation:	96.55
TAP	CHART							
Тар	Line		Relative	Drainline	Tap Size/	Flow/tap	LTAR	
#	Number	Color	Elevation	Length(ft)	Schedule	(gpm)	(gpd/ft ²)	
1	1	W	95.55	75	1/2"sch 40	7.11	0.400	
2	2	В	94.08	75	1/2"sch 40	7.11	0.400	
3	3	Y	92.62	75	1/2"sch 40		0.400	
4	4	R	91.2	75	1/2"sch 40		0.400]
		Tot	al Drainline:	300	Total Flow:	28.44		
						Target LTAR*:	0.40	
	P CALCULA					LTAR + 5%:		
						2.0		
Daily Pump Run Time: 12.66 min (Daily Flow/Total Flow)								
						75	% (65.3gal/10	Oft pipe)
Dose Pump Run 5.17 minutes (Dose Volume/Total Flow)								
* Target LTAR: Convert LTAR for non-conventional drainline types by dividing by trench length factor								
MANIFOLD DIAGRAM:								
Tap #	#	1	2	3	4			
4" SCH 80 PVC Manifold								
Tap 9	Size	1/2"sch 40	1/2"sch 40	1/2"sch 40	1/2"sch 40			
flow ((gpm)	7.11	7.11	7.11	7.11			
Line I	Length (ft)	75	75	75	75			