



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 \_\_\_ Expansion \_\_\_ Repair \_\_\_ Relocation \_\_\_ Relocation of Repair Area

Owner or Legal Representative Information:
Name: RiverWILD Homes
Mailing address: 114 W Main St City: Clayton State: NC Zip: 27520
Phone: 919-766-8782 Email: brittany@staywild.com

Authorized Onsite Wastewater Evaluator Information:
Name: Trent Bostic Certification #: 10056E
Mailing address: 501 N Salem St, Ste 203 City: Apex State: NC Zip: 27502
Phone: 919-367-6322 Email: tbostic@agriwaste.com

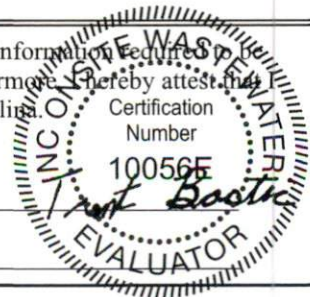
Site Location Information:
Site address: 3981 Baileys XRDS Rd, Benson, NC
Tax parcel identification number or subdivision lot, block number of property: 1610-58-7651
Stewart Farms - Lot 4 County: Harnett

System Information:
Wastewater System Type: IIIb
Daily Design Flow: 480
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 4 # Bedrooms 8 Maximum # of Occupants
\_\_\_ Business Type of Business and Basis for Flow: \_\_\_
\_\_\_ Public Assembly Type of Public Assembly and Basis for Flow: \_\_\_

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

Attest: On this the 9 day of JUL, 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 9 day of JUL, 2027.
Signature of Authorized Onsite Wastewater Evaluator: [Signature]
Signature of Owner or Legal Representative: [Signature]



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: [Signature] Date: 8-26-24