

# 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	RelocationRelocation of Repair Area
Owner or Legal Representative Information:  Name: BVA Builders, Inc.  Mailing address: 1300 Benson Rd, Suite 110 City: Garage Phone: 919-520-2181 Email: aford@vfgrealt	
Authorized Onsite Wastewater Evaluator Information:  Name: Hal Owen  Mailing address: PO Box 400 City: Lil  Phone: 910-893-8743 Email: hal@halowens	
Site Location Information: Site address: 1220 W Blackman Rd  Tax parcel identification number or subdivision lot, block number Lot 4, PIN 1504-29-4638	of property: County: Harnett
System Information:  Wastewater System Type: Illbg (Pump to Accepted Status 25°)  Daily Design Flow: 360 gpd  Saprolite System: Yes X No Subsurface Operator  Water Supply Type: Private Well X Public Water Supply	r Required: Yes X No
Facility Type:  X Residential 3 # Bedrooms 6 Maximum # of Occu 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 Scient	tist
included with this NOI to Construct is accurate and complete to the have adhered to the laws and rules governing onsite wastewater sy This NOI shall expire on 30 day of January , 2030 .	
Signature of Authorized Onsite Wastewater Evaluator:  Signature of Owner or Legal Representative:	<u>.                                    </u>
Disclosure: The owner may apply for a building permit for the pre required (if any) to the local health department. An onsite wastew evaluator shall be transferable to a new owner with the consent of	ater system authorized by an authorized onsite wastewater
Local Health Department Receipt Acknowledgement: Signature of Local Health Department Representative:	Date:



OP ID: SGW

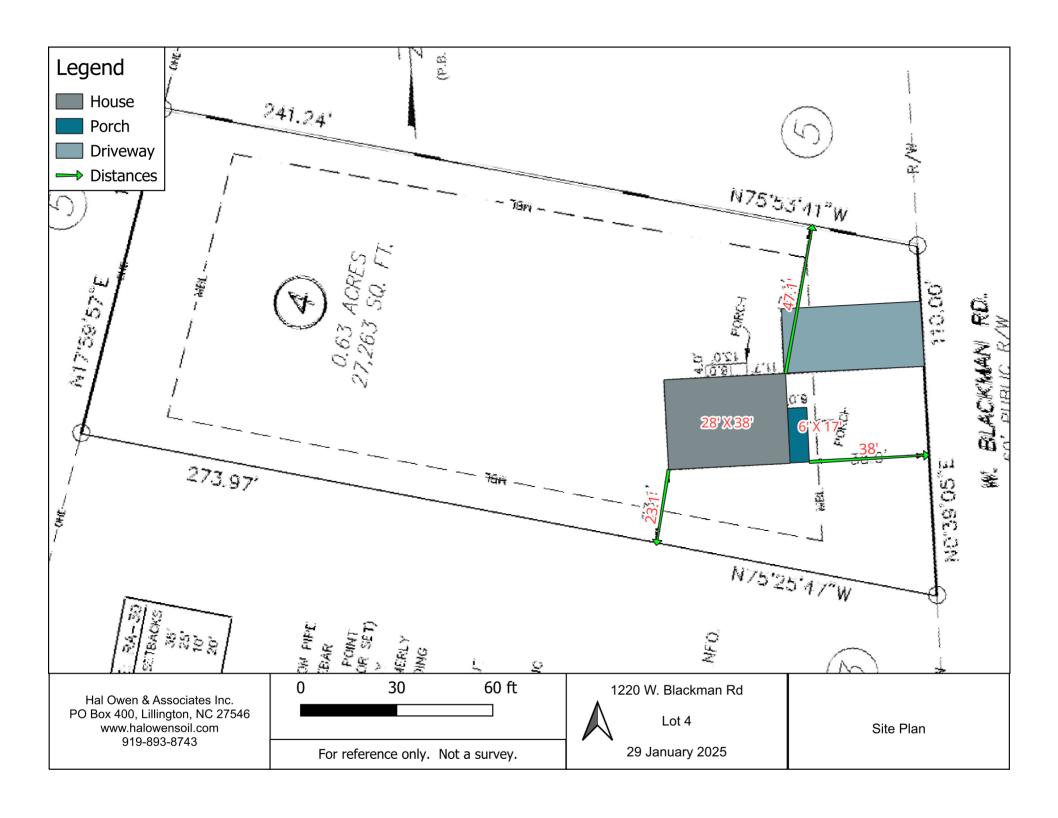


# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/30/2025

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.

lf	SUBROGATION IS WAIVED, subject nis certificate does not confer rights to	to th	ne te	rms and conditions of th	e polic	y, certain p	olicies may				
	DUCER	, 1110		0-893-5707	CONTA	CT SHARO	V WOODY				
INS	URANCE SERVICE CTR -LILLING LINGTON BRANCH OFFICE				NAME: PHONE (A/C, No, Ext): 910-893-5707  (A/C, No, Ext): 910-893-2077					93-2077	
PO	Box 1565				E-MAIL	SWOOD	Y@ISCFAY	.COM	(A/O, NO).		
	LINGTON, NC 27546 NIEL L. BABB				ADDRE			DING COVERAGE			NAIC#
ואט	VICE E. DABB				INCLIDE		TONE NATI				IVAIC#
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HĂĹ	IRED OWEN & ASSOCIATES, INC.				INSURE						
	BOX 400 INGTON, NC 27546				INSURE						
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					INSURE	RF:					
				E NUMBER:				REVISION NUM			
	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE										
	ERTIFICATE MAY BE ISSUED OR MAY F										
	XCLUSIONS AND CONDITIONS OF SUCH I				BEEN F						
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	3	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURREN		\$	
	CLAIMS-MADE OCCUR							DAMAGE TO RENT PREMISES (Ea occ	ED urrence)	\$	
								MED EXP (Any one	person)	\$	
								PERSONAL & ADV	INJURY	\$	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREG		\$	
	POLICY PRO- JECT LOC							PRODUCTS - COM		\$	
	OTHER:								.,0.,,.00	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE	LIMIT	\$	
	ANY AUTO							(Ea accident) BODILY INJURY (Po	or norson)	\$	
	OWNED SCHEDULED AUTOS ONLY										
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAG (Per accident)		\$	
	AUTOS ONLY AUTOS ONLY							(Per accident)		\$	
	UMBRELLA LIAB OCCUR									\$	
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE							EACH OCCURREN	CE	\$	
								AGGREGATE		\$	
	DED RETENTION \$							PER	OTH-	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDE	NT	\$	
	(Mandatory in NH)  If yes, describe under							E.L. DISEASE - EA	EMPLOYEE	\$	
	DÉSCRIPTION OF OPERATIONS below			40505004 40004		04/07/0005	04/07/2026	E.L. DISEASE - POI	LICY LIMIT	\$	4 000 000
Α	PROFESSIONAL LIAB.			42ESP00143901		01/2//2025	01/27/2026				1,000,000
								AGGREGATE			2,000,000
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	ACORE	D 101, Additional Remarks Schedu	le, may b	e attached if mo	re space is requir	ed)			
CF	RTIFICATE HOLDER				CANO	ELLATION					
OL	KIII IOATE HOLDEN				CAN	<u> </u>					
	BVA BUILDERS	40			THE	EXPIRATION	N DATE THE	ESCRIBED POLICE EREOF, NOTICE CY PROVISIONS.			
	1300 BENSON RD., STE 1 GARNER, NC 27529	IU			AUTHO	RIZED REPRESE	NTATIVE				
	CARILLY, NO 21323						· ellow				
								X			



# HOA-AOWE-2412-06

Issue date 1/30/2025

Expiration 1/30/2030

#### APPLICANT INFORMATION

Name	BVA Builders, Inc					
Mailing Address	1300 Benson Rd, St 110, Garner, NC 27529					
E-mail Address	aford@vfgrealty.com Telephone Number 919-520-21					

#### **PROPERTY IDENTIFIERS**

County	Harnett	PIN	1504-29-4638
Size (Acre)	0.63	County PID	
Site Address	1220 W Blackman Rd, Dunn, NC 2833	34	
S/D Name and Lot#	Lot 4		

#### **PROJECT INFORMATION**

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

#### **CONSULTANT INFORMATION**

Company Name	Hal Owen & Associates, Inc.		
Mailing Address	PO Box 400, Lillington, NC 27546		
E-mail Address	hal@halowensoil.com	Telephone Number	910-893-8743
Licensed Soil Scientist	Britt Wilson, LSS#1351	AOWE	Hal Owen, #10036E

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 Evaluation is being submitted pursuant to and meets the requirements of G.S.130A-336.2. This evaluation includes a 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.









# **WASTEWATER SYSTEM DESIGN SPECIFICATIONS**

# Permit # HOA-AOWE-2412-06

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

# **Initial System**

System Type	IIIbg –Pump to						
Pump Required	Yes			10.3	ft TDH at	27.3	GPM
Trenches:	Accepted (25%	reduction	) System				
Design LTAR		0.40	gal/day/ft <sup>2</sup>		Sapro	lite System	No
Total Trench/ Bed	d Length	225	feet			Fill System	No
Trench Spacing		9	ft on center				
Usable soil depth	to LC	26	inches				
Maximum Trench	13	inches, measured on downhill side of trench					
Minimum Soil Cover 6			inches				
Artificial Drainage	Required	No					

#### **Repair System**

System Type:	IIIbg –Pump to	Other nor	n-conventional systems	;		
Pump Required	Yes				•	
Trenches:	Accepted (25%	reduction	n) System			
Design LTAR		0.40	gal/day/ft²	Sapro	lite System	No
Total Trench/ Bed	d Length	225	feet		Fill System	No
Trench Spacing		9	ft on center			
Usable soil depth	to LC	26	inches			
Maximum Trench Depth of		13	inches, measured on	downhill	side of trench	ı
Minimum Soil Cover		6	inches			

Potential Drainlines flagged at site on 9-ft centers.

i otoriti	41 B (411 1111 1	co nagged at or			-		
		Relative	Drainline	Field			
Line #	Color	Elevation (ft)	Length(ft)	Length(ft)			
1	R	101.49	80	99	]า 늘		
2	W	101.19	60	78	Repair		
3	Υ	101.08	85	118	] ] 🕊		
4	В	100.81	85	123	]┐ <b>ॣ</b>		
5	R	100.73	80	85	nitia -		
6	W	100.71	60	65	] ] =		
Septic 1	Tank:	100.56			_		
Pump T	ank:	100.56		Notes:			
Reference	e Elev:	100.00	*No grading or removal of soil in initial or repair areas				

<sup>\*</sup>Property lines per owner

<sup>\*</sup>Trench bottoms shall be level to +/- 1/4" in 10ft

<sup>\*</sup>All parts of septic system must meet minimum setbacks

#### # HOA-AOWE-2412-06

#### **PERMIT 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 System Design Specificaitons. See attached SYSTEM LAYOUT for wastewater system design and location.

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 County, well, or riparian ordinances) may require more stringent setbacks than specified in the State septic regulations.

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

The dispersal 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.

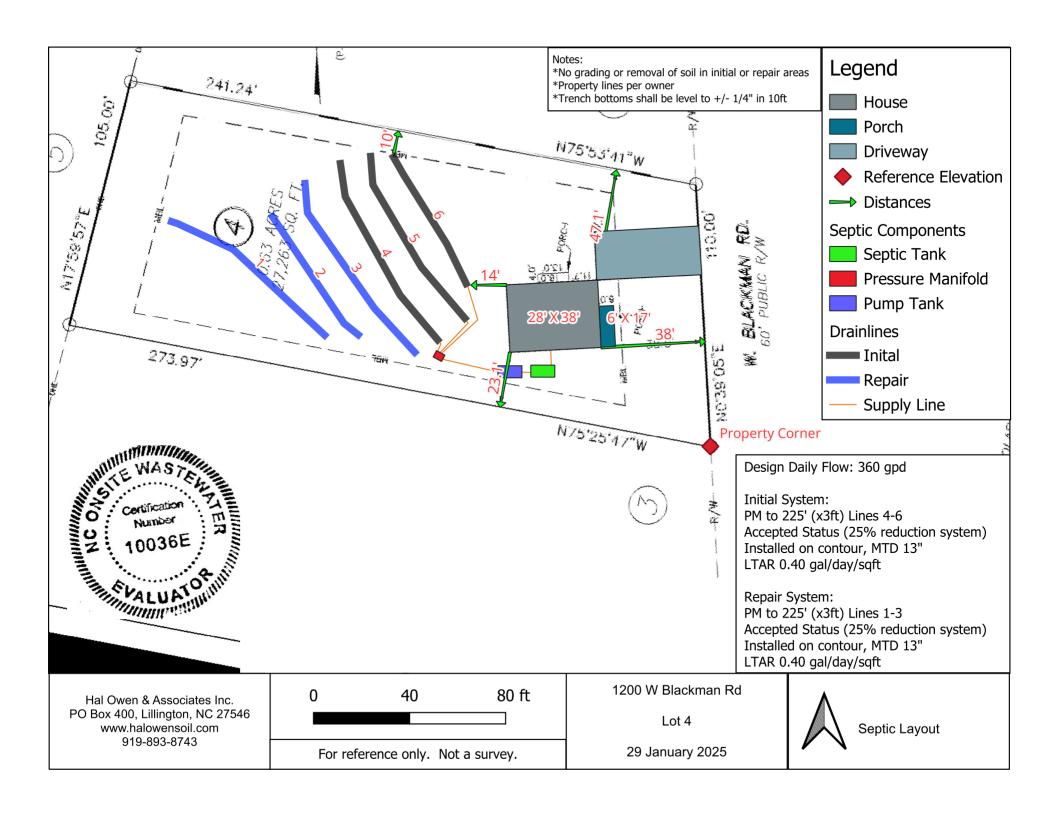
The wastewater system shall not be covered until inspected by Hal Owen & Associates and shall not be placed into use until an Authorization to Operate is issued.

#### **SPECIFIC REQUIREMENTS**

A pre-construction conference with the septic contractor is required prior to installation. Call Hal Owen & Associates at least five days in advance to schedule 910-893-8743

The inlet and outlet of all tanks shall be equipped with an approved pipe penetration boot.

The pump tank may be eliminated if gravity distribution can be demonstrated.

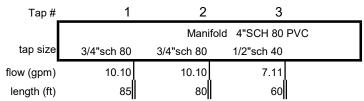


# Permit # HOA-AOWE-2412-06

Press	sure Manif	fold Design Cri	teria					
DESI	GN DAILY	FLOW	360	gallons/day	SOIL LTAR:	0.40	gpd/ft <sup>2</sup>	
TAN	(S (min)	Septic Tank:	1000	– gallons	Pump Tank:	1000	- gallons	
SUPF	PLY LINE	Length:	20	ft	Diameter:	2	" SCH 40 F	PVC
		Minimur	m flow (gpm) to	_ maintain 2fps s	cour velocity:	20.9	gpm	
TREN	ICHES	Drainline Type:	Accepted (25%	reduction) Syst	tem		_	
		Maximum <sup>-</sup>	Trench Depth o	f <u>13</u>	inches, meas	sured on l	ow side of tr	ench
		Trench width:	3		Effective Tren	ch Width:	4	_ft
	Ak	osorption Area:	675	ft²	Minimum Line	ar Length:	225	_ft
MAN	IFOLD	Length (ft):	3	Diameter:	4" sch 80 pv		Elevation:	101 81
IVIAIN	II OLD	# Taps		Tap Configura			-	
TAD	CHART	π гарз	<u> </u>	_ rap Comigura	ilion. om. spac	Jirig, i siu	e oi illalilloi	u
IAI .	OTIAICI	Relative		Tap Size/	flow/tap		LTAR	1
Line	Color	Elevation	Length(ft)	Schedule	gpm	gpd/ft	(gpd/ft <sup>2</sup> )	
4	В	100.81	85	3/4"sch 80	10.10	1.566	0.522	†
5	R	100.73	80	3/4"sch 80	10.10	1.664	0.555	†
6	W	100.71	60	1/2"sch 40	7.11	1.562	0.521	1
								]
								]
								]
	_	Total Drainline:	225	Total Flow:	27.31			]
DUINA	D 0 A 1 O 1 II	ATIONO				rget LTAR*:		-
	P CALCUL		gallana with Di	no Valumo et		TAR + 5%:		<b>-</b>
			-	pe Volume at		-	*65.3gal/100f	t pipe
		n Time (min):		_ Daily 20.25	Pump Run Ti			-
					-		- inches	
	o i ank ⊑ie√ on Head:	vation (ft):		_	Elevation (ft):		-	
	ภา ⊓ead. tion Head:		Hazen Williams F	ormula (use supply	line length+70 to	or illungs in [	pump tank)	
		<u>6.3</u> 2.0		Total	Dynamia Ha	-4 (ТDU).	0.60	ft
Desig	ın Head:			i Olai	Dynamic Hea	au (TDH).	9.60	-11
Pump	to Deliver	9.6	ft TDH @	27.3	gpm			
NEM	4 4X Simpl	lex Control Pan	el with elapsed	time meter, eve	nt counter, au	idible and	visible alarr	m (w/
silenc	e button),	hand-off-autom	atic (HOA) swit	ch, pump run lig	ht, and pump	on separa	ate circuits i	s required
Contr	ol panel bo	ottom shall be m	nounted a minin	num of 24 in. ab	ove finished o	grade with	in 50 ft of p	ump tank.
A sep	tic tank filt	er is required. F	loats to be dete	ermined by type	of pump tank	used.		
	Possibl	e Septic Tank:	Brantley 1000 S	STB-502	Possible Se	ptic Filter:		
	Possibi	le Pump Tank:	Brantley 1000_	PT-237	Vol(gal):	1000	GPI:	20.25
	P	Possible Pump:			pump he	ight (in) =	14	
	Possible	Control Panel:		<u> </u>				

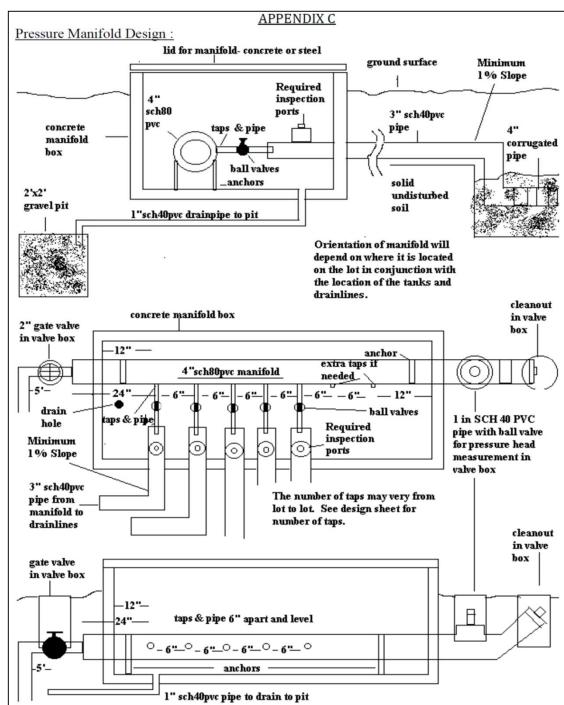
#### Permit # HOA-AOWE-2412-06

#### **Pressure Manifold Diagram**



# Typical

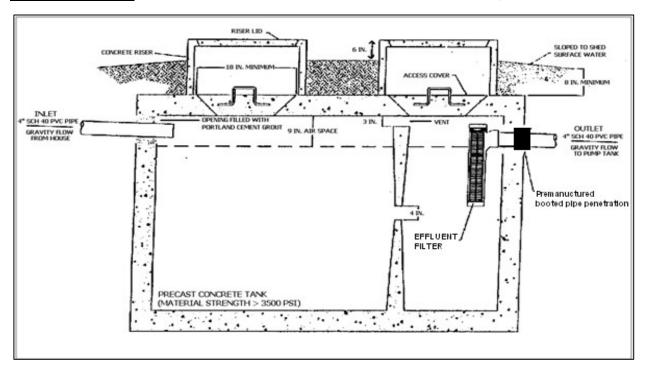
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# Permit # HOA-AOWE-2412-06

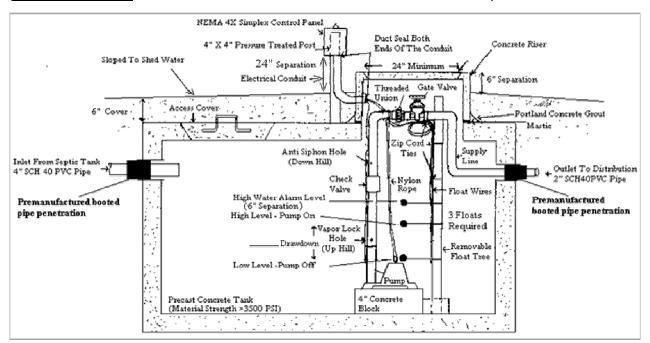
# **Typical Septic Tank**

#### 1000 GALLON SEPTIC TANK, minimum

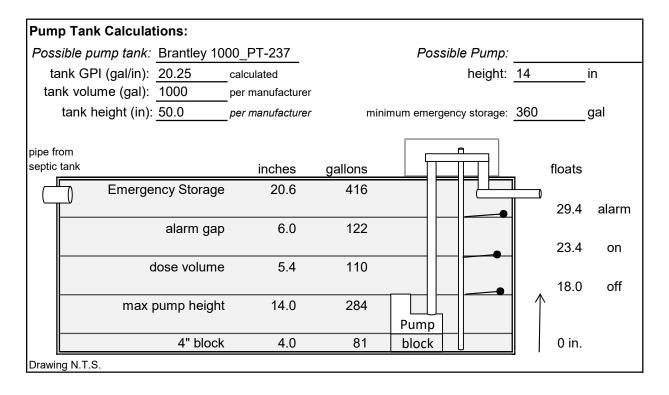


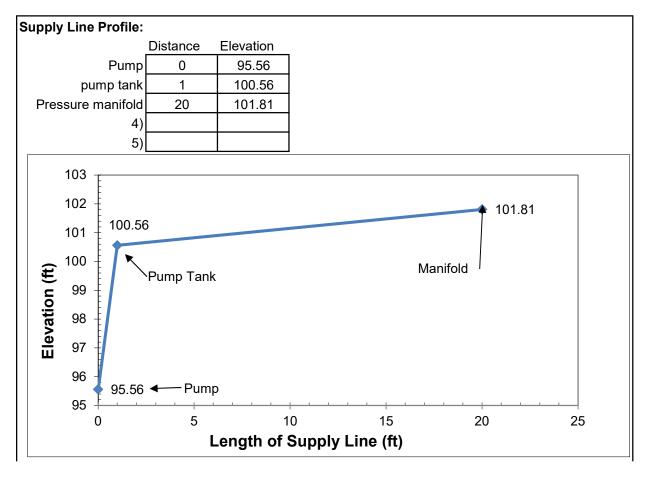
#### **Typical Pump Tank**

#### 1000 GALLON PUMP TANK, minimum



# Permit # HOA-AOWE-2412-06





REPAIR AREA

# Permit # HOA-AOWE-2412-06

# Pressure Manifold Design Criteria

**DESIGN FLOW** 360 gal/day **SOIL LTAR:** 0.40 gpd/ft<sup>2</sup>

TANKS (minimum) Septic Tank: 1000 gallons Pump Tank: 1000 gallons

**TRENCHES** Drainline Type: Accepted (25% reduction) System

Maximum Trench Depth of 13 inches, measured on low side of trench

Trench width: 3 feet Effective Trench Width: 4 ft

bearntion Area: 675 ft² Minimum Linear Longth: 235 ft

Absorption Area: <u>675</u> ft<sup>2</sup> Minimum Linear Length: <u>225</u> ft

MANIFOLD # Taps \_\_\_\_\_ 3 \_\_\_ Tap Configuration: 6in. spacing, 1 side of manifold

Length (ft): 3 Diameter: 4" sch 80 pvc Elevation: 102.49

#### **TAP CHART**

Тар	Line	Line	Relative	Drainline	Tap Size/	Flow/tap	LTAR
#	Number	Color	Elevation	Length(ft)	Schedule	(gpm)	(gpd/ft <sup>2</sup> )
1	1	R	101.49	80	3/4"sch 80	10.10	0.555
2	2	W	101.19	60	1/2"sch 40	7.11	0.521
3	3	Υ	101.08	85	3/4"sch 80	10.10	0.522

Total Drainline: 225 Total Flow: 27.31

Target LTAR\*: 0.53

### **PUMP CALCULATIONS**

LTAR + 5%: 0.560

Total Flow: 27.31 gpm Design Head (ft): 2.0

Daily Pump Run Time: 13.18 min (Daily Flow/Total Flow)

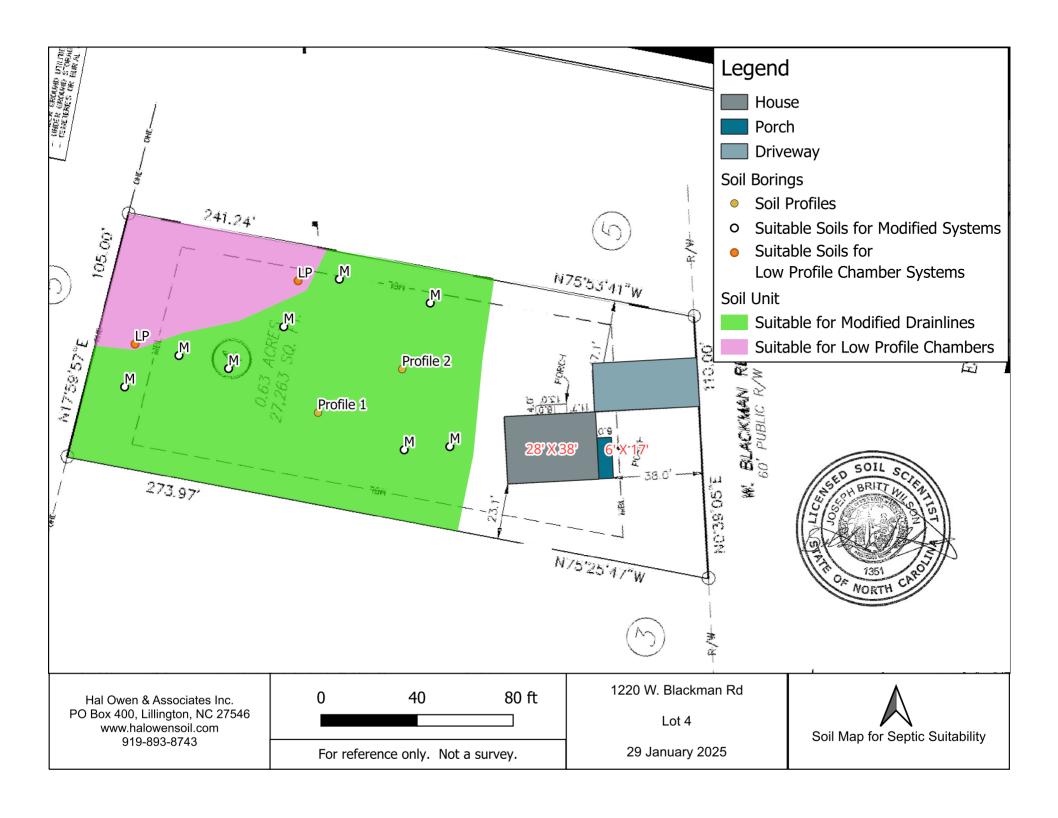
Dose Volume: 110.19 gallons with Pipe Volume at 75 % (65.3gal/100ft pipe)

Dose Pump Run 4.03 minutes (Dose Volume/Total Flow)

# MANIFOLD DIAGRAM:

Tap#	1	2	3	
		4" SCH 80	PVC Manifold	
Tap Size	3/4"sch 80	1/2"sch 40	3/4"sch 80	
flow (gpm)	10.10	7.11	10.10	-
Line Length (ft)	80	60	85	

<sup>\*</sup> Target LTAR: Convert LTAR for non-conventional drainline types by dividing by trench length factor



# Permit # HOA-AOWE-2412-06

# SOIL/SITE EVALUATION FORM FOR ON-SITE WASTEWATER SYSTEM

OWNER NAME:	BVA Builders, In	nc				
PROPOSED FACILITY:	Residential	DESIGN DAILY FLO	W: 360		WATER SUPPLY Public Water	
LOCATION OF SITE:	1220 W Blackm	an Rd, Dunn, NC 28334		PIN:	1504-29-4638	
WASTEWATER TYPE:	Domestic		CO	UNTY:	Harnett	
EVALUATION METHOD	AUGER B	ORING	PIT		CUT	
EVALUATED BY:	Britt Wilson, LS	S#1351		DA	TE EVALUATED: <u>12/23/24</u>	
	INIT	IAL SYSTEM			REPAIR SYSTEM	
AVAILABLE SPACE	675 ft <sup>2</sup> t	rench bottom		675	ft <sup>2</sup> trench bottom	
SYSTEM TYPE	Accepte	ed (25% reduction) System		Ассер	ted (25% reduction) System	
SITE LTAR	0.40 gpd	l/ft <sup>2</sup>		0.40	gpd/ft <sup>2</sup>	
MAX TRENCH DEPTH	13 inch	es (measured on downhill side)		13	inches (measured on downhill si	de
SITE CLASSIFICATION	Suitable	01	HER FAC	CTORS		

# COMMENTS:

# **PROFILE 1**

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-4	10YR 5/3	VFR	LS	GR	SEXP	LANDSCAPE POSITION	Т
4-31	10YR 6/6	FR	SCL	SBK	SEXP	SOIL WETNESS DEPTH	26"
31-48+	10YR 6/6	FI	SC	SBK	SEXP	SOIL WETNESS COLOR	10YR 7/2
						SOIL DEPTH	48"
						SAPROLITE CLASS	NA
						RESTRICTIVE HORIZON	NA
						SLOPE %	3
PROFILE CLASSIFICATION			Suitable	LTAR gpd/ft <sup>2</sup>	0.4	SLOPE CORRECTION (IN)	1.1
COMMENT Suitable for modified systems							

# PROFILE 2

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS		TORS
DEPTH		TENCE			LOGY			
0-4	10YR 4/2	VFR	LS	GR	SEXP	LANDSCAPE	LANDSCAPE POSITION	
4-10	10YR 5/3	VFR	LS	GR	SEXP	SOIL WETNESS DEPTH		28"
10-40	10YR 6/4	FR	SCL	SBK	SEXP	SOIL WETNESS COLOR		10YR 7/2
40-48+	10YR 6/4	FI	SCL	SBK	SEXP	SOIL DEPTH		48"
						SAPROLITE CLASS NA		NA
						RESTRICTIVE HORIZON NA		NA
						SLOPE %		1
PROFILE CLASSIFICATION Suitable			Suitable	LTAR gpd/ft <sup>2</sup>	0.4	SLOPE COR	RECTION (IN)	0.4
COMMENT Suitable for modified systems								

#### SOIL/SITE EVALUATION FORM FOR ON-SITE WASTEWATER SYSTEM

# **LEGEND OF ABBREVIATIONS**

LANDSCAPE	TEXTURE		TEXTURE		<u>LTAR</u>	
POSITION	<u>GROUP</u>		CLASS		(gal/day/sqft)	
CC - Concave Slope	1		S - Sand		1.2-0.8	
CV - Convex Slope			LS - Loamy	Sand		
DS - Debris Slump						
D - Depression	l II		SL - Sandy L	₋oam	0.8 – 0.6	
DW - Drainage Way			L - Loam			
FP - Flood Plain						
FS - Foot Slope	III		SCL - Sandy	Clay Loam	0.6 – 0.3	
H - Head Slope			CL - Clay Lo	am		
L - Linear Slope			SiL - Silt Loa	ım		
N - Nose Slope			Si - Silt			
R - Ridge			SiCL - Silt C	lay Loam		
S - Shoulder Slope						
T - Terrace	IV		SC - Sandy	Clay	0.4 – 0.1	
TS - Toe Slope			C - Clay			
			SiC - Silty Clay			
			O - Organic		none	
			O - Organic		none	
STRUCTURE	MOIST CONS	SISTENCE		WET CONSISTE	NCE_	
G - Single Grain	VFR - Very Fr			NS - Non Stick		
M - Massive	FR - Friable			SS - Slightly Stick	ку	
CR - Crumb	FI - Firm			MS - Moderately Stick		
GR - Granular	VFI - Very Firi	FI - Very Firm VS - Very S		VS - Very Sticky	Sticky	
SBK - Subangular Blocky	EFI - Extreme	EFI - Extremely Firm				
ABK - Angular Blocky				NP - Non Plastic		
PL - Platy	MINERALOG	MINERALOGY		SP - Slightly Plastic		
PR - Prismatic	SEXP - Slight	ly Expansive	MP - Moderately		Plastic	
	EXP - Expans	sive	VP - Very Plastic			
MOTTLES f	- few	1 - fine		F - Faint		
d	c – common 2 - med		n D - Distinct			
r	m – many	3 - coarse		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

All soil characteristics were described in accordance with the USDA Field Book for Describing and Sampling Soils. The soils were evaluated under moist soil conditions. This evaluation included observations of topography and landscape position, soil morphology (texture, structure, clay mineralogy, organics), soil wetness, soil depth, and restrictive horizons.

# **TERMS AND CONDITIONS**

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. 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.

On-Site Wastewater System Contractor – 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.

Operation and Management – 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 for Wastewater Treatment and Dispersal Systems and to the conditions of this permit.

Repair of Malfunctioning Systems – 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.