

SFD 2408 0122



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: Teri Treffzs  
Name: Drees Homes Company  
Mailing address: 211 Grandview Drive - Suite 102 City: Ft. Mitchell State: KY Zip: 41017  
Phone: 919-256-5478 Email: ttreffzs@dreeshomes.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: Lot #64 (Tobacco Road) Grading Stick Ct. - Angier, NC 27501  
Tax parcel identification number or subdivision lot, block number of property: PIN# 0693-25-8758  
County: Harnett

System Information: Accepted Status  
Wastewater System Type: Type III (g)  
Daily Design Flow: 360 gallons/day  
Saprolite 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: \_\_\_\_\_

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

Attest: On this the 27th Day of August 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 27 th day of August 2029.  
Signature of Authorized Onsite Wastewater Evaluator: Alex Adams  
Signature of Owner or Legal Representative: Bradley Weikley 8/28/2024 | 8:52:52 AM EDT

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: \_\_\_\_\_

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

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August 27, 2024  
Project #1215

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

RE: Tobacco Road -Lot #64, Grading Stick Ct. - Angier, NC - 3-bedroom Single Family Residence (PIN# 0693-25-8758)

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 18E. 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.

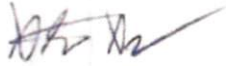
The initial and primary septic fields for the new home were sized based on a flow rate of 360 gallons/day and utilizing Accepted Status system for the initial and a PPBPS repair system. Any unauthorized site disturbance, filling, soil removal, or layout changes may result in the permit being revoked.

The septic installer contractor shall install the repair (if needed) 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 trench 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,



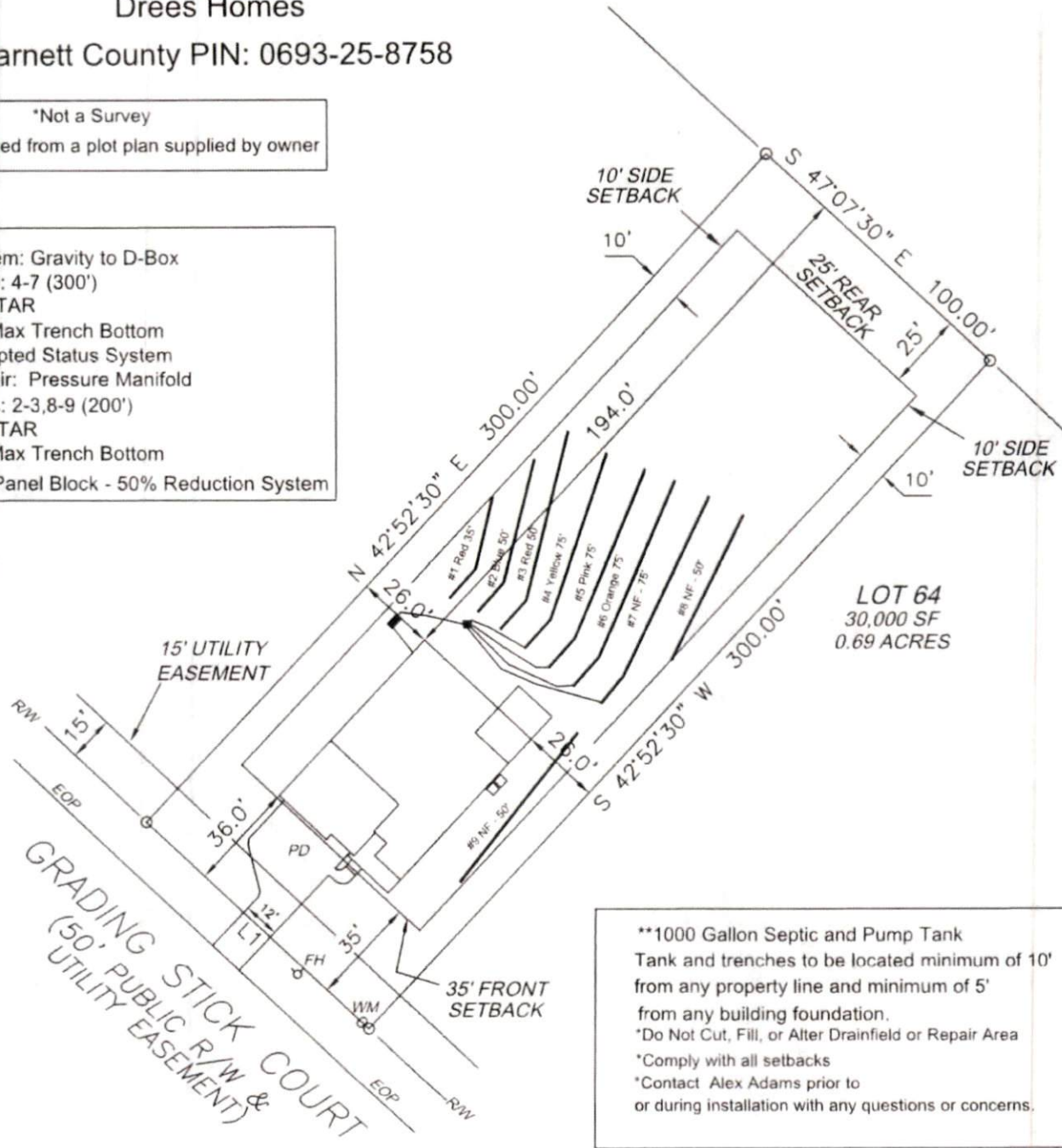
Alex Adams  
NC Licensed Soil Scientist #1247  
AOWE Certification: 10021E



Tobacco Road S/D  
 3-Bedroom Septic Design  
 Lot #64 - 266 Grading Stick Ct.  
 Drees Homes  
 Harnett County PIN: 0693-25-8758

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

System: Gravity to D-Box  
 Lines: 4-7 (300')  
 0.3 LTAR  
 18" Max Trench Bottom  
 Accepted Status System  
 Repair: Pressure Manifold  
 Lines: 2-3,8-9 (200')  
 0.3 LTAR  
 18" Max Trench Bottom  
 T&J Panel Block - 50% Reduction System

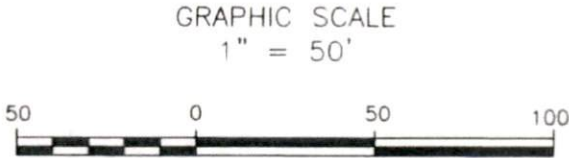


LOT 64  
 30,000 SF  
 0.69 ACRES

\*\*1000 Gallon Septic and Pump Tank  
 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 Alex Adams prior to  
 or during installation with any questions or concerns.

\*Contact Alex Adams at least 10 days prior to installation.

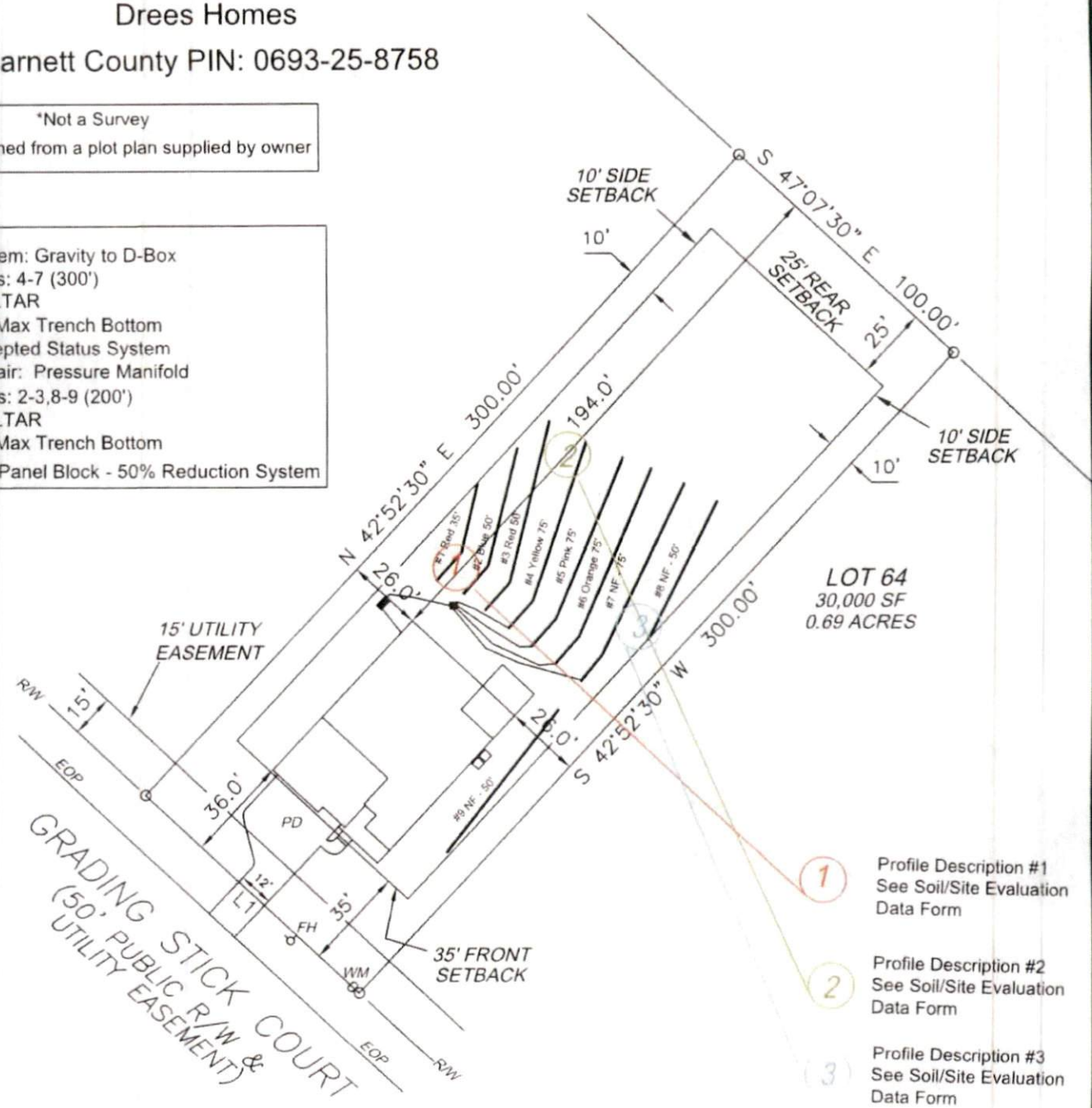
Adams  
 Soil Consulting  
 919-414-6761  
 Job #1215  
 8-26-24



Tobacco Road S/D  
 Soil Boring Locations  
 Lot #64 - 266 Grading Stick Ct.  
 Drees Homes  
 Harnett County PIN: 0693-25-8758

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

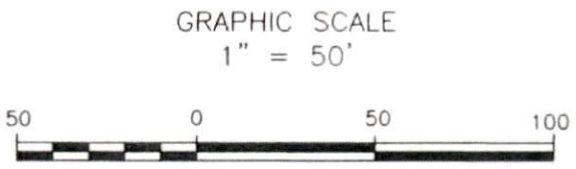
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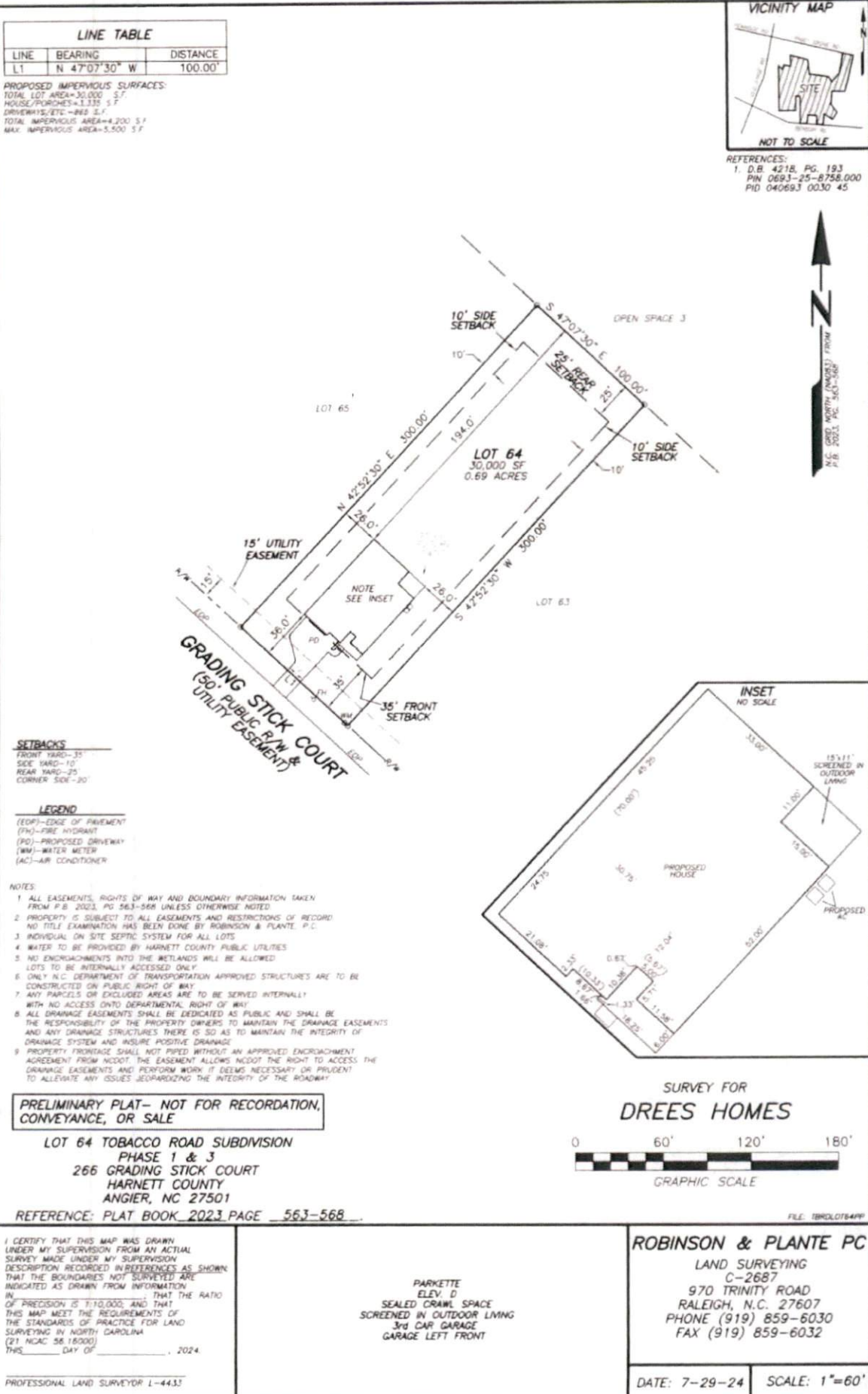


LOT 64  
 30,000 SF  
 0.69 ACRES

- ① Profile Description #1  
 See Soil/Site Evaluation Data Form
- ② Profile Description #2  
 See Soil/Site Evaluation Data Form
- ③ Profile Description #3  
 See Soil/Site Evaluation Data Form

Adams  
 Soil Consulting  
 919-414-6761  
 Job #1215  
 8-26-24





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

OWNER: Drees Homes,  
 ADDRESS:  
 PROPOSED FACILITY: Single Family, 3-bedroom PROPOSED DESIGN FLOW (.1949): 360 gpd  
 LOCATION OF SITE: 266 Grading Stick Ct., Angier, NC, 27501  
 WATER SUPPLY: Public Water  
 EVALUATION METHOD: Auger Boring

APPLICATION DATE:  
 DATE EVALUATED: 08/17/2024  
 PROPERTY SIZE: 0.69 Acres

TYPE OF WASTEWATER: Sewage

P R O F I L E  #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	Linear Slope/8%	0-26	GR/SL	VFR,NS,NP,SEXP	N.O	40"	N.O	N.O	P.S/.35
		26-40	SBK/SC	FR,SS,SP,SEXP					
2	Linear Slope/8%	0-32	GR/SL	VFR,NS,NP,SEXP	N.O	40"	N.O	N.O	P.S .30
		32-40	SBK/C	FR,SS,SP,SEXP					
3	Linear Slope/8%	0-8	GR/SL	VFR,NS,NP,SEXP	N.O	33"	N.O	N.O	U/P.S .3
		8-33	SBK/C	FR,SS,SP,SEXP					
		33	M C	VFI, EXP					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946):
Available Space (.1945)	S	S	SITE CLASSIFICATION (.1948): U/PS
System Type(s)	Type III B	Type III B	EVALUATED BY: A Adams OTHER(S) PRESENT:
Site LTAR	0.3	0.3	

COMMENTS:  
 Updated February 2014



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
1/17/2024

**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.**

**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).**

<b>PRODUCER</b> Wade Associates, LLC 250 Pollock St.  New Bern NC 28560	<b>CONTACT NAME:</b> Angela Sensenig <b>PHONE (A/C, No, Ext):</b> (252) 631-5269 <b>FAX (A/C, No):</b> (252) 649-2443 <b>E-MAIL ADDRESS:</b> asensenig@wadeict.com														
<b>INSURED</b> Alex Adams, DBA: Adams Soil Consulting 1676 Mitchell Rd.  Angier NC 27501	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td><b>INSURER A:</b> Markel Insurance Company</td> <td style="text-align: center;">38970</td> </tr> <tr> <td><b>INSURER B:</b></td> <td></td> </tr> <tr> <td><b>INSURER C:</b></td> <td></td> </tr> <tr> <td><b>INSURER D:</b></td> <td></td> </tr> <tr> <td><b>INSURER E:</b></td> <td></td> </tr> <tr> <td><b>INSURER F:</b></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	<b>INSURER A:</b> Markel Insurance Company	38970	<b>INSURER B:</b>		<b>INSURER C:</b>		<b>INSURER D:</b>		<b>INSURER E:</b>		<b>INSURER F:</b>	
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**COVERAGES      CERTIFICATE NUMBER: 24-25      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> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$												
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$												
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$												
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;">PER STATUTE</td> <td style="width: 50%;">OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> <td></td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> <td></td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> <td></td> </tr> </table>		PER STATUTE	OTH-ER	E.L. EACH ACCIDENT	\$		E.L. DISEASE - EA EMPLOYEE	\$		E.L. DISEASE - POLICY LIMIT	\$	
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E.L. DISEASE - POLICY LIMIT	\$																		
A	<b>Errors &amp; Omissions</b>			ME01118-06	1/31/2024	1/31/2025	General Aggregate \$1,000,000 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**

<p style="text-align: center;">*FOR INFORMATIONAL PURPOSES ONLY*</p> XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p> <p style="text-align: center;">N Whitsett/RACHEL <span style="float: right;"><i>N. Whitsett</i></span></p>
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