

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: 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:YesX_No Subsurface Operator Required:YesXNo | |
| Water Supply Type:Private WellX_Public Water SupplySpringOther: | |
| 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: | |
| Requird Attachments: | |
| x_Plat_or_Siteplan | |
| x_ 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: | |
| Signature of Owner or Legal Representative: Bradley Welley 8/28/2024 8:52:52 | AM ED |
| 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: 9-9-24 | |
| Signature of Local Health Department Representative: 14 15 Date: 9-9-24 | |