

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: Name: Beth Stephenson
Mailing address: 13429 Old Stage Rd City: Willow Spring State: NC Zip: 27592
Phone: 252-333-2047 Email: twomorehomesllc@gmail.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: 8461 Old US 421, Lillington, NC 27546
Tax parcel identification number or subdivision lot, block number of property:
PIN 0610-15-8515, Lot 2 Harnett
System Information: Wastewater System Type: IIIbg (Pump to Accepted Status 25% reduction) Daily Design Flow: 360 gpd Saprolite System: Yes _X No
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 23 day of September 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 23 day of September, 2029 Signature of Authorized Onsite Wastewater Evaluator:
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:



OP ID: TOW

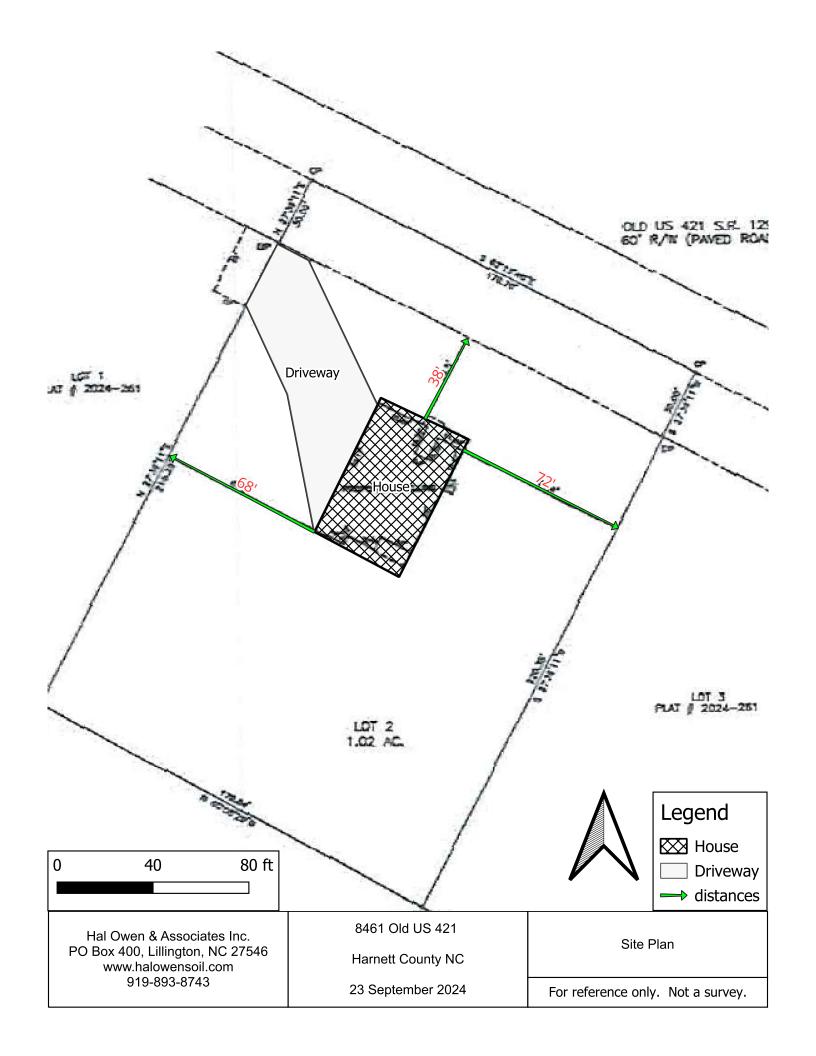


CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/10/2024

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.

lf	MPORTANT: If the certificate holder in SUBROGATION IS WAIVED, subject his certificate does not confer rights to	to ti	ne te	rms and conditions of th	e poli	cy, certain p	olicies may			
PRODUCER 910-893-5707 INSURANCE SERVICE CTR -LILLING		CONTACT SHARON WOODY								
LILL	INGTON BRANCH OFFICE				(A/C, N	910-89	93-5707	FAX (A/C, No):	910-89	3-2077
PO Box 1565 LILLINGTON, NC 27546				ADDRE	ss: SWOOD					
DAN	NEL L. BÁBB						-	DING COVERAGE		NAIC #
INICI	WALIPED					RA:STARS	TONE NATI	IONAL		
HÄL	RED . OWEN & ASSOCIATES, INC. BOX 400				INSURE					
	INGTON, NC 27546				INSURE					
					INSURE					
	COVERAGES CERTIFICATE NUMBER:				INSURE					
CO								REVISION NUMBER:		
IN C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY SCLUSIONS AND CONDITIONS OF SUCH	QUIF PERT POLI	REME AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN ED BY	Y CONTRACT THE POLICIE REDUCED BY	OR OTHER IS DESCRIBED PAID CLAIMS.	DOCUMENT WITH RESPECT TO	CT TO	WHICH THIS
INSR LTR	I THE OF INSURANCE	INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	3	
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	\$	
	CLAIMS-MADE OCCUR							PREMISES (Ea occurrence)	\$	
								MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	
	POLICY PRO- JECT LOC							GENERAL AGGREGATE	\$	
	OTHER:							PRODUCTS - COMP/OP AGG	\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$							DED OTH	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDENT	\$	
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE		
Α	PROFESSIONAL LIAB.			42ESP00143901		01/27/2024	01/27/2025	PER OCC.	\$	1,000,000
,								AGGREGATE		2,000,000
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORI	D 101, Additional Remarks Schedu	le, may b	attached if mo	re space is requir	red)		
CE	RTIFICATE HOLDER				CAN	CELLATION				
	BETH STEPHENSON 13429 OLD STAGE RD WILLOW SPRING, NC 27592					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE				
						Taylor Wallace				



HOA-A2-2409-03 Issue date 9/23/2024 Expiration 9/23/2029

APPLICANT INFORMATION

Name	Beth Stephenson					
Mailing Address	13429 Old Stage Road Willow Spring NC					
E-mail Address	twomorehomesllc@gmail.com	Telephone Number	2523332047			

PROPERTY IDENTIFIERS

County	Harnett	PIN	0610-15-8515				
Size (Acre)	1.02	County PID	130610 9000 03				
Site Address	8461 Old US 421 Lillington NC 27546						
S/D Name and Lot#	S/D Name and Lot# Larry Taylor Subdivision Lot 2						

PROJECT INFORMATION

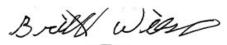
Wastewater System	New		.0403 Eng Low Flow	No		
Wastewater Strength	Domestic		Effluent Standard	DSE		
Facility Type	Residential		Water Supply	Public Water		
Design Wastewater Flow	360 gpd		gal/unit	120		
Basis for Flow	Basis for Flow 3 bedrooms		max occupancy	6		
Basement	No		Fixtures in basement?	No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

Proposed Design Daily Flow	360	gpd	Drainfield Meeets Req	uirements:
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 Other non-conventional systems						
Pump Required	Yes			11	ft TDH at	23	GPM
Trenches:	Accepted (25%	reduction) Sys	stem				
Design LTAR		0.60	gal/day/ft ²		Sapro	lite System	No
Total Trench/ Bed	otal Trench/ Bed Length 150 feet Fill System			No			
Trench Spacing		9	ft on center	-			
Usable soil depth to LC		36	inches				
Maximum Trench Depth		20	inches, measured on downhill side of trench				
Minimum Soil Co	ver	6	inches				
Artificial Drainage	e Required	No					

Repair System

System Type: IIIbe – Pump to PPBPS system Pump Required Yes Trenches: PPBPS, horizontal Design LTAR 0.80 gal/day/ft² Saprolite System No Total Trench/ Bed Length 75 feet Fill System Trench Spacing 9 ft on center Usable soil depth to LC 48 inches Maximum Trench Depth of inches, measured on downhill side of trench 24 6 Minimum Soil Cover inches

Potentia	al Drainline	es flagged at sit	te on 9-ft cente	rs.		_	
		Relative El	evation (ft)	Drainline	Field		
Line #	Color	North	South	Length(ft)	Length(ft)		
2	R	97.31	97.06	30	35] ¬	
3	Υ	97.06	96.81	30	35] _	
4	W	97.06	96.49	30	34		
5	В	96.66	96.36	30	34] <u>=</u>	
6	R	96.13	96.15	30	32]_	
						_	
		East	West			Repair	
1	В	96.51	97.51	75	80	Se .	
Septic Tank: 95.11			-	-			
Pump Tank: 95.11				*Property lines per owner			
Reference Elev: 100.00			*Trench bottoms shall be level to +/- 1/4" in 10ft				

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

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 well or riparian buffer ordinances) may require more stringent setbacks than specified in the 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

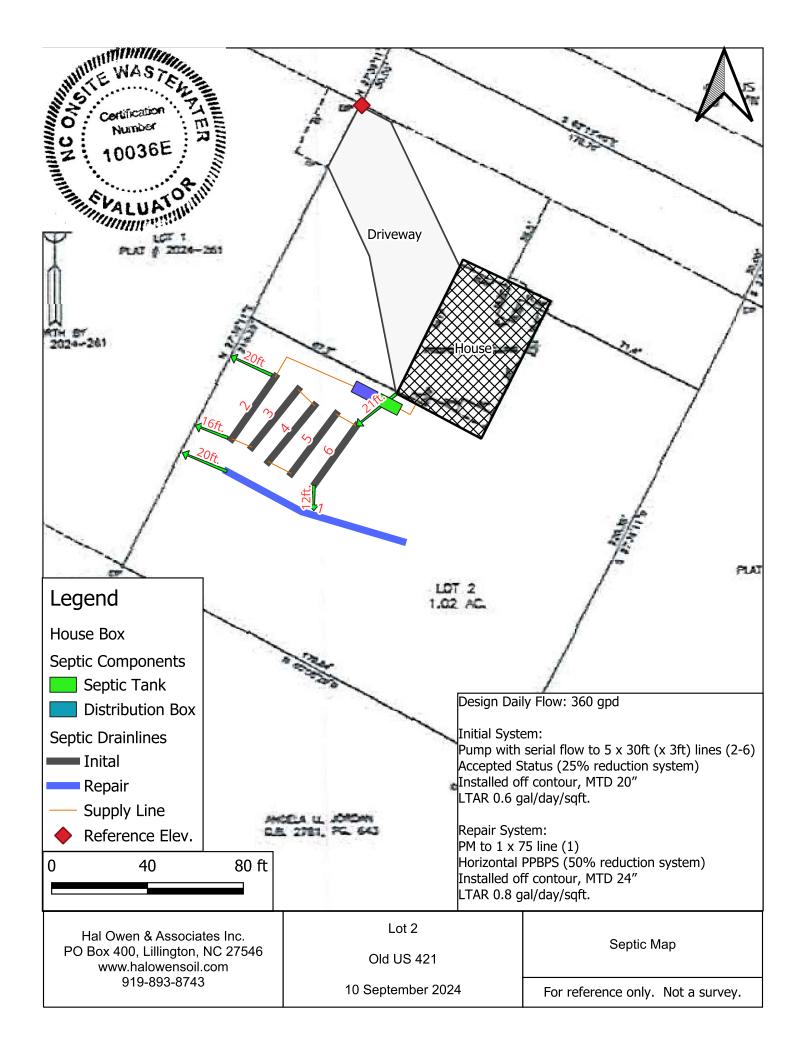
A pre-construction conference with the septic contractor is required prior to installation. Call Hal Owen & Associates at least five days in advance to schedule 910-893-8743

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.

No additional grading in the septic area is permitted.

Initial system to be installed no more than 3" off contour.



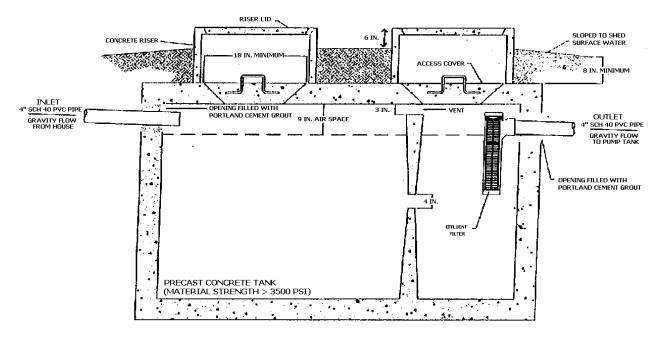
INITIAL WASTEWATER SYSTEM

Pump System	Design Criteria				
DESIGN DAILY	FLOW	360	_gallons	SOIL LTAR: 0.60	_gpd/ft ²
TANKS (min)	Septic Tank:	1000	_gallons	Pump Tank: 1000	_gallons
SUPPLY LINE	Length (ft):	37	_ Diameter:	sch 40 ¡	ovc
	•		ps scour velocity =		
	Sup	ply Pipe Volume	e6	_gallons -	
TRENCHES	Drainlina Tuna:	Accepted (25%	raduation) Sva	tom	
	Drainline Type: n Trench Depth	• •		ured on low side	
Maximun	Trench height:	12	_inches, measo inches	Trench width:	3 ft
Trench	Length Factor:	75		Effective Trench Width:	
	bsorption Area:	450	- ⁷⁰ ft ²	Minimum Linear Length:	
	Trench Length:	1	-'' X	150 ft =	150 ft
7 10 10.0.		·	- ^		
PUMP CALCUL	ATIONS:				
Total Flow:	23	gpm			
Daily Pump Run	Time 15.65		Flow/Total Flow	·)	
Dose Volume (g	jal): 73	gallons, with Pi	pe Volume at	75 %	*65.3gal/100ft pipe
Dose Pump Rur	n Time 3.19	minutes (Dose	Volume/Total F	low)	
Drawdown (in.):	73	gallons ÷	20.25	gal/ inch = 3.63	inches
Pump Tank Elev	vation (ft):	95.11	Pump	Elevation (ft): 90.11	-
Top Line Elevati	ion: 97.31	feet		. ,	-
Friction Head:	1.16	*Hazen Williams F	ormula (use supply	line length+70' for fittings in	pump tank)
Elevation Head:	8.2				
Design Head:	2.0		Total	Dynamic Head (TDH):	11.36feet
Pump to Deliver	23.00	gpm @	11.36	ft TDH	
NEMA 4X Simp	lex Control Pane	el with elapsed t	ime meter, eve	nt counter, audible and	visible alarm (w/
silence button),	hand-off-automa	atic (HOA) swite	ch, pump run lig	ht, and pump on separa	ate circuits required.
Control panel bo	ottom shall be m	ounted a minim	ium of 24 in. ab	ove finished grade with	in 50 ft of pump tanl
A septic tank filt	er is required. F	loats to be dete	rmined by type	of pump tank used.	
Possib	le Septic Tank:	Brantley 1000 \$	STB-499	Septic Filter:	
	ole Pump Tank:			Vol(gal): 1000	GPI: 20.25
	Possible Pump:	<u>, </u>		pump height (in) =	
	Control Panel:				
					-

INITIAL WASTEWATER SYSTEM

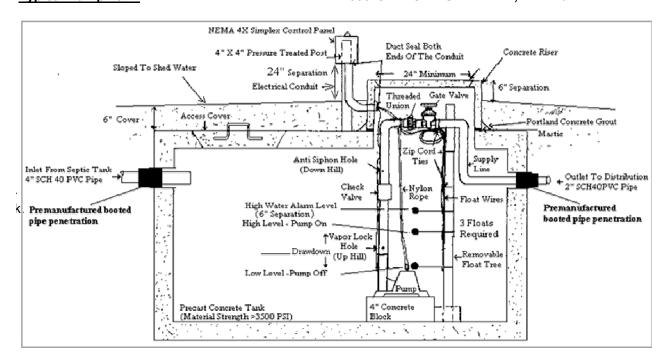
Typical Septic Tank

1000 GALLON SEPTIC TANK, minimum

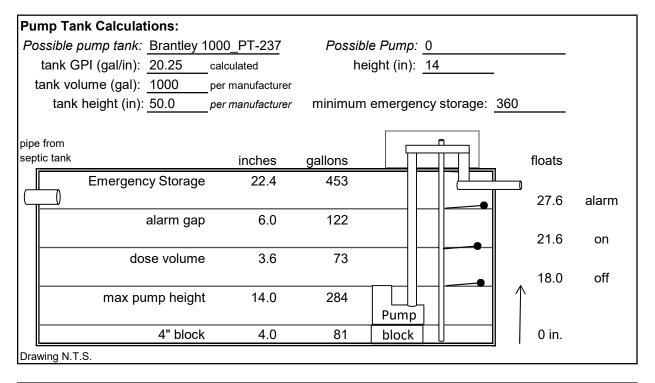


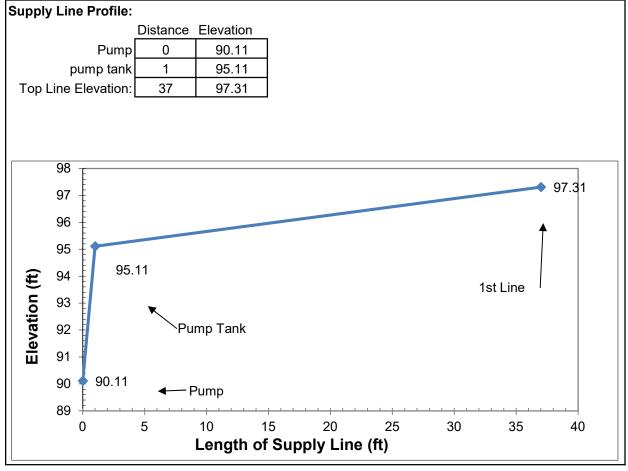
Typical Pump Tank

1000 GALLON PUMP TANK, minimum



INITIAL WASTEWATER SYSTEM

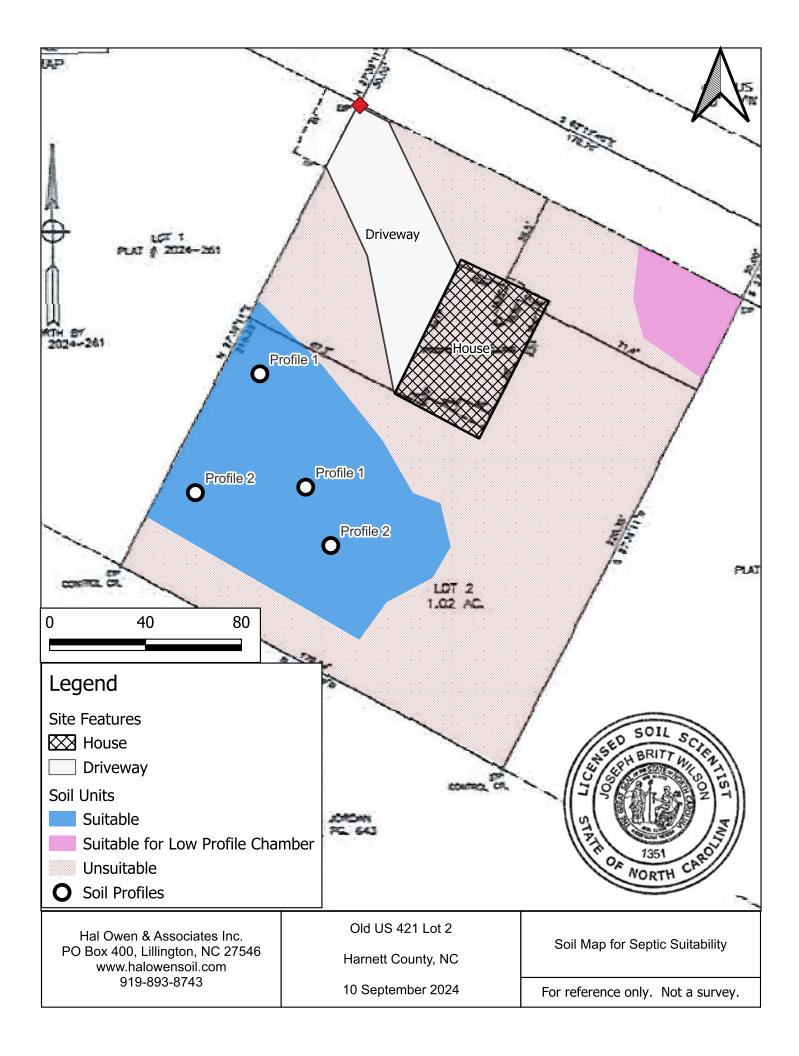




REPAIR WASTEWATER SYSTEM

Pump System D	esign Criteria				
DESIGN DAILY I	FLOW	360	_gallons	SOIL LTAR: 0.80 gpd/ft ²	
TANKS (min)	Septic Tank:	1000	_gallons	Pump Tank: 1000 gallons	
SUPPLY LINE	Length (ft): Min total flow (gpm) to		_	2 " sch 40 pvc 20.9 gpm	
TRENCHES	Drainline Type: PF	PBPS, hor	izontal		
	Maximum Trencl	h Depth of	24	_inches, measured on low side	
	Trench height:	16	inches	Trench width: 3	_ft
Trench	Length Factor:	50	_%	Effective Trench Width: 6	_ft
Α	bsorption Area:	225	_ft²	Minimum Linear Length: 75	_ft
Actual	Trench Length:	1	_ X	ft = 75	_ft
				÷ 4.33 ft per panel :17	_panels
PUMP CALCULA Total Flow: Daily Pump Run Dose Volume: Dose Pump Run Drawdown (in.): Pump Tank Elevation Friction Head: Elevation Head: Design Head: Pump to Deliver:	23 gp Time 15.65 mi 122.4 g Time 5.32 mi 122 g ation (ft): 97.51 fee 1.78 *Ha 8.4 2.0	inutes (Da gallons = inutes (Do gallons ÷ 95.11	se Volume/Tota 20.25 Pump s Formula (use su	# of panels X7.2gallons/ pa	
NEMA 4X Simple silence button), h Control panel bot A septic tank filte	ex Control Panel wir and-off-automatic (tom shall be moun	th elapsed (HOA) swi ted a mini s to be det antley 100	I time meter, eventch, pump run lemum of 24 in. a termined by typ	vent counter, audible and visible aladight, and pump on separate circuits above finished grade within 50 ft of e of pump tank used. Septic Filter: Vol(gal): 1000 GPI:	s is required pump tank.
ŀ	Possible Pump:			pump height (in) =14	-

Possible Control Panel:



Soil/Site Evaluation Form for On-Site Wastewater System

OWNER NAME:	Beth Stephenson					
PROPOSED FACILITY:	Residential	DESIGN DAILY FLOW:	360	WATER SUPPLY Public Water		
LOCATION OF SITE:	8461 Old US 421 Lillington	n NC 27546	PIN:	0610-15-8515		
WASTEWATER TYPE:	WATER TYPE: Domestic			COUNTY: Harnett		
EVALUATION METHOD	: AUGER BORING X	PIT	-	CUT 🔲		
EVALUATED BY:	Britt Wilson, LSS#1351		_ DA	ATE EVALUATED: <u>9/2/24</u>		
	INITIAL SYSTE	ΞM		REPAIR SYSTEM		
AVAILABLE SPACE	450 ft ² trench botto	om	225	ft ² trench bottom		
SYSTEM TYPE	Accepted (25% re	duction) System		PPBPS, horizontal		
SITE LTAR	0.60 gpd/ft ²		0.80	gpd/ft ²		
MAX TRENCH DEPTH	20 inches (measu	red on downhill side)	24	inches (measured on downhill side		
SITE CLASSIFICATION	Suitable	OTHE	R FACTORS			
		_				

COMMENTS:

Heavy Mechanical Disturbance

PROFILE 1

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FACTORS	
DEPTH		TENCE			LOGY		
0-8	2.5Y 6/3	FR	SL	GR	SEXP	LANDSCAPE POSITION	L
8-30	2.5Y 7/3	FR	LS	GR	SEXP	SOIL WETNESS DEPTH	>36"
30-36+	10YR 5/8	FR	SL	GR	SEXP	SOIL WETNESS COLOR	N/A
						SOIL DEPTH	36"
						SAPROLITE CLASS	N/A
						RESTRICTIVE HORIZON	N/A
						SLOPE %	2
PROFILE CLASSIFICATION			Suitable	LTAR gpd/ft ²	0.6	SLOPE CORRECTION (IN)	0.7
COMMENT							

PROFILE 2

HORIZON	COLOR	CONSIS	TEXTURE	STRUCTURE	MINERA	OTHER PROFILE FA	CTORS
DEPTH		TENCE			LOGY		
0-6	2.5Y 6/3	FR	SL	GR	SEXP	LANDSCAPE POSITION	L
6-40	2.5Y 7/3	FR	LS	GR	SEXP	SOIL WETNESS DEPTH	>48"
40-48+	10YR 8/4	FR	LS	GR	SEXP	SOIL WETNESS COLOR	N/A
						SOIL DEPTH	48"
						SAPROLITE CLASS	N/A
						RESTRICTIVE HORIZON	N/A
						SLOPE %	15
PROFILE CLASSIFICATION			Suitable	LTAR gpd/ft ²	0.8	SLOPE CORRECTION (IN)	5.4
COMMENT				-			

Soil/Site Evaluation Form for On-Site Wastewater System

LEGEND OF ABBREVIATIONS

LANDSCAPE	TEXTURE	TEXTURE			<u>LTAR</u>	
POSITION	<u>GROUP</u>	<u>GROUP</u>			(gal/day/sqft)	
CC - Concave Slope	1	ı s			1.2-0.8	
CV - Convex Slope			LS - Loamy	Sand		
DS - Debris Slump						
D - Depression	II	II SL		_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	am		
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 C	lay		
			O - Organic		none	
STRUCTURE	MOIST CONS	MOIST CONSISTENCE		WET CONSISTENCE		
G - Single Grain	VFR - Very Fr	VFR - Very Friable		NS - Non Stick		
M - Massive	FR - Friable	FR - Friable		SS - Slightly Sticky		
CR - Crumb	FI - Firm	FI - Firm		MS - Moderately Stick		
GR - Granular	VFI - Very Fir	VFI - Very Firm		VS - Very 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	SEXP - Slightly Expansive		MP - Moderately Plastic		
	EXP - Expans	EXP - Expansive		VP - Very Plastic		
MOTTLES	f – few	1 - fine		F - Faint		
	c – common	non 2 - medium		D - Distinct		
	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.

<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.

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.