



**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: DRB Group
Mailing address: 1101 Slater Road, Suite 300 City: Durham State: NC Zip: 27703
Phone: 919-505-0035, ext. 4006 Email: ksoffe@drbgroup.com

Authorized Onsite Wastewater Evaluator Information:

Name: Jason Hall Certification #: AOWE #10004E
Mailing address: 1900 South Main Street, Suite 110 City: Wake Forest State: NC Zip: 27587
Phone: 919-625-5948 Email: jhall@centralcarolinasoil.com



Site Location Information:

Site address: 315 Adams Pointe Court, Angier, NC
Tax parcel identification number or subdivision lot, block number of property: 040672 0100 08
Honeycutt Hills, lot 21 County: Harnett

System Information:

Wastewater System Type: IIIb, PM to PPBPS, Horizontal
Daily Design Flow: 480
Saprolite System: ☐ Yes ☒ No Subsurface Operator Required: ☐ Yes ☒ No
Water Supply Type: ☐ Private Well ☒ Public Water Supply ☐ Spring ☐ Other: _____

Facility Type:

☒ 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:

☒ Plat or Site Plan
☒ Evaluation of Soil and Site Features by Licensed Soil Scientist

Attest: On this the 14 day of July, 2025 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 14 day of July, 2030.

Signature of Authorized Onsite Wastewater Evaluator: Jason Hall

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: 7-21-25