SFD 2503-00-13



North Carolina Onsite Wastewater Contractor Inspector Certification Board Authorized Onsite Wastewater Evaluator Permit Option for Non-Engineered Systems Notice of Intent (NOI) to Construct

	_ Expansion _	Repair	Relocation	Relocation of Repair Area	
Owner or Legal Representative In Name: Lamco Homes	formation:				
Mailing address: 7424 Chapel H	Hill Rd Suite 20	03 City:	Raleigh,	State: NC Zin: 27607	
The state of the s	Email:	The state of the s			
Authorized Onsite Wastewater Ev Name: Thomas Boyce, LSS, A			Certific	ation #: 10006E	
11/04/02/03/03/04/03/03				State: NC Zip: 27376	
Phone: (910)295-1899				State Zip	
Site Location Information: Site address: Lot 20- 122 Gates Tax parcel identification number of					
System Information: Wastewater System Type:	No Sub Well _x Publi ms 6Max	osurface Oper ic Water Supp imum # of O	ply Spring _	Other:	Aponov Ap
Public Assembly Type of P	iblic Assembly	and Basis for	r Flow:		*COWC \CS
Required Attachments: X Plat or Site Plan X Evaluation of Soil and Site	Features by Lic	ensed Soil So	cientist		
Attest: On this the 17 day of A included with this NOI to Construction have adhered to the laws and rules. This NOI shall expire on 17 day	et is accurate an governing onsi y of April ,	d complete to te wastewate 2030	o the best of my ker systems in the s		
Signature of Authorized Onsite W	astewater Evalu	ator:			
Signature of Owner or Legal Repr	esentative:		Touy Toro		
Disclosure: The owner may apply required (if any) to the local health evaluator shall be transferable to a Local Health Department Receipt Signature of Local Health Department	department. A new owner with Acknowledgem	an onsite was h the consent ent:	tewater system at of the authorized	uthorized by an authorized ons d onsite wastewater evaluator.	