



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: James Rumley

Name: Caruso Homes

Mailing address: 110 Horizon Drive - Suite 320 City: Raleigh State: NC Zip: 27615

Phone: 240-886-3229

Email: jrumley@carusohomes.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 #56 (Magnolia Acres) 341 Magnolia Acres Ln - Fuquay-Varina NC 27501

Tax parcel identification number or subdivision lot, block number of property: PIN# 0633-15-1163

County: Harnett

System Information: Accepted Status

Wastewater System Type: Type III (b)

Daily Design Flow: 480 gallons/day

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 Siteplan

☒ Evaluation of Soil and Site Features by Licensed Soil Scientist

Attest: On this the 6th day of April 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 6th day of April 2030.

Signature of Authorized Onsite Wastewater Evaluator: Alex Adams

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: \_\_\_\_\_

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

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April 30, 2025  
Project #2110

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

RE: Magnolia Acres -Lot #56 – 341 Magnolia Acres Ln. – Fuquay-Varina, NC - 4-bedroom Single Family Residence (PIN# 0633-15-1163)

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 480 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.

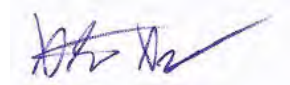
The initial and primary septic fields for the new home were sized based on a flow rate of 480 gallons/day and utilizing Accepted Status system for the initial and a PPBPS repair system. Any unauthorized site disturbance, filling, soil removal, or layout changes may result in the permit being revoked.

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



House footprint to be field staked by surveyor and system verified prior to any construction

\*Septic area must not be altered by construction activities.

\*\*No cuts of 2' or greater within 15' of septic area

\*\*\* Recommend protective barrier around septic field during construction.

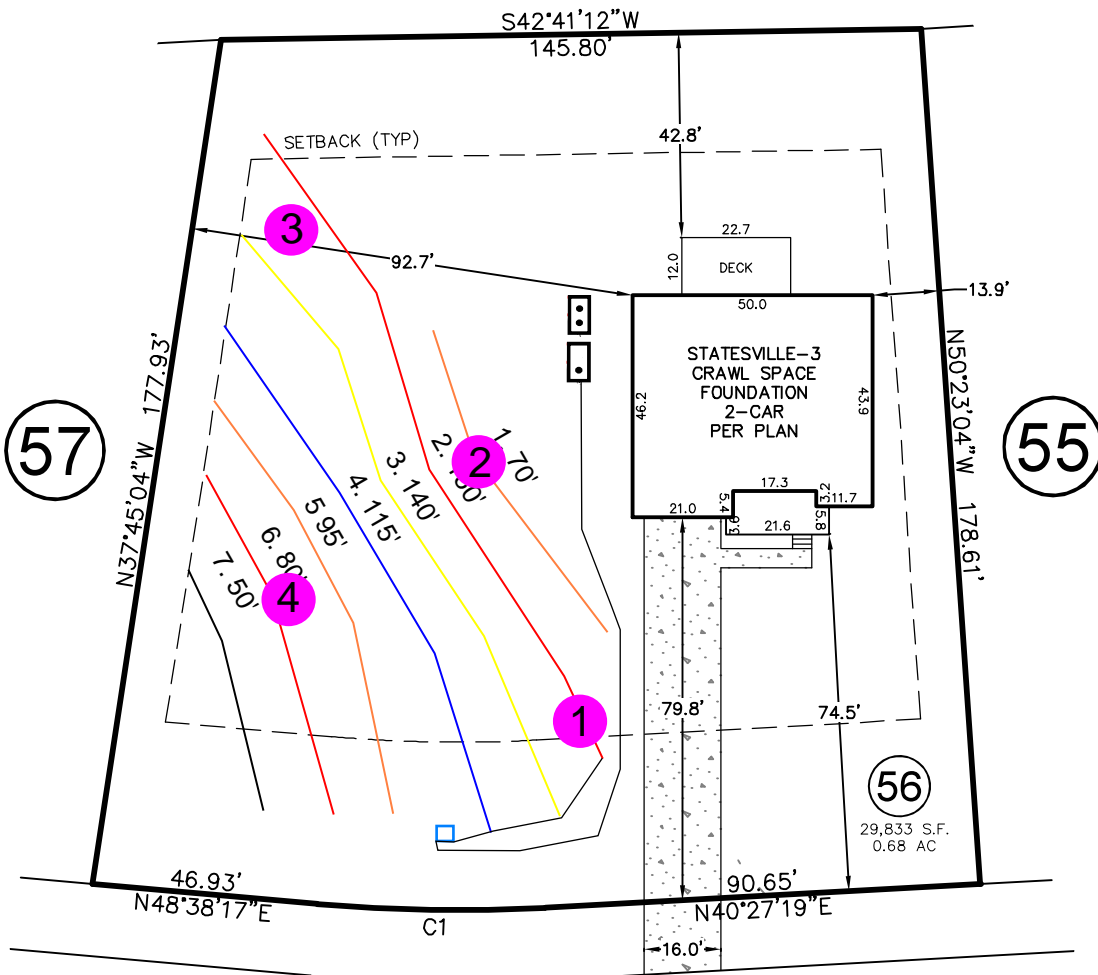
\*If plumbing is not sufficient a pump tank will be required to septic field

# Magnolia Acres

## Lot 56

### 4 BR

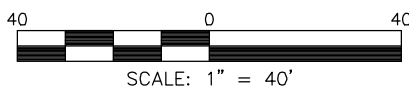
## Harnett County



# MAGNOLIA ACRES LANE

50' PUBLIC R/W

INITIAL: 18 TB  
Lines 2-4 (405')  
Accepted Status  
Pressure Manifold  
REPAIR:  
Lines 1,5-7 (295')  
PPBPS  
Pressure Manifold



Adams  
Soil Consulting  
919-414-6761

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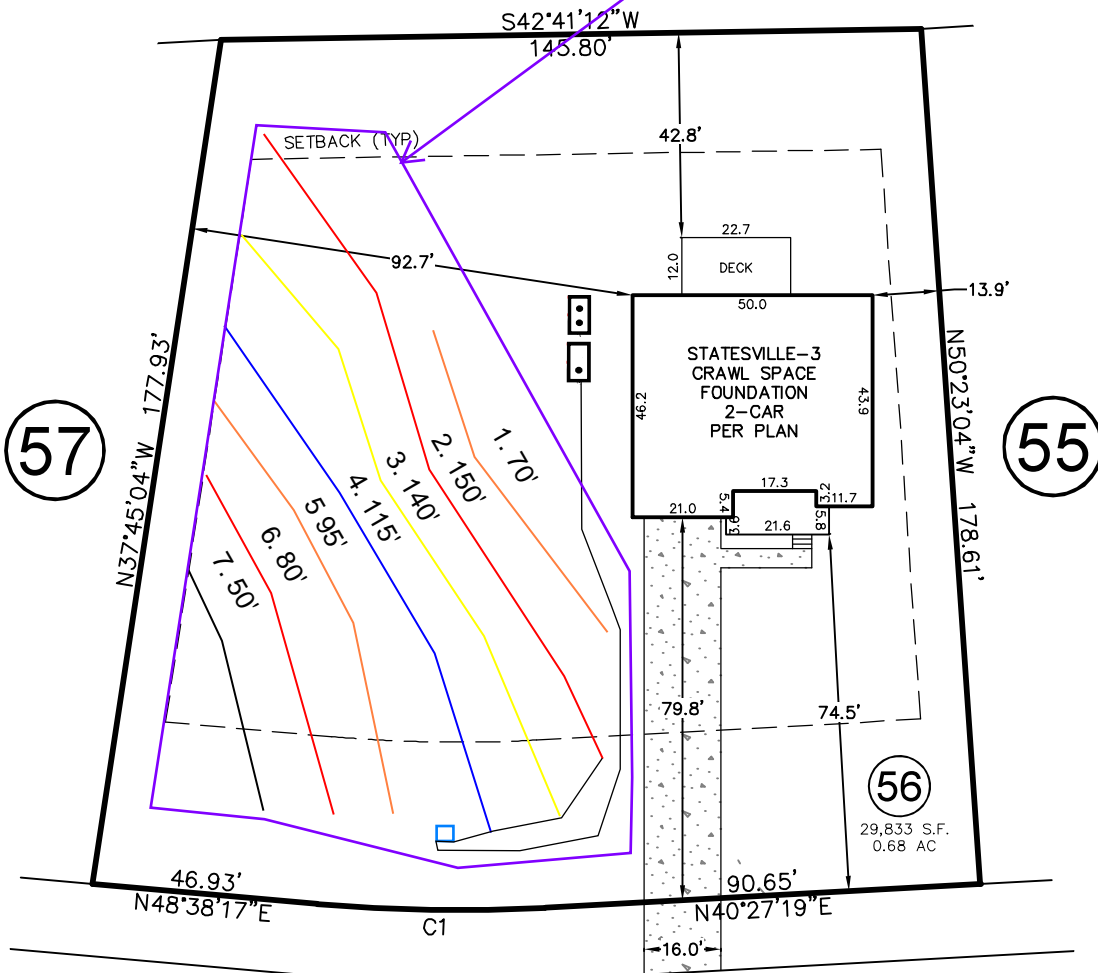
# Magnolia Acres

## Lot 56

### 4 BR

## Harnett County

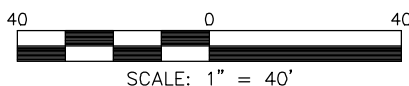
Area to be disturbed for septic purposes only.



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|                               |                      |  |                  |                               |                     |               |               |              |                         |
|-------------------------------|----------------------|--|------------------|-------------------------------|---------------------|---------------|---------------|--------------|-------------------------|
| # of BDR:                     | <u>4</u>             | Daily Flow:  | <u>480</u>       | gal/day                       | L.T.A.R.:           | <u>0.3000</u> | gal/day/sq.ft |              |                         |
| Septic Tank:                  | <u>1200</u>          | gals   | Pump Tank:       | <u>1200</u>                   | gals                | Sq. Foot:     | <u>885</u>    | System Type: | <u>PPBPS-Horizontal</u> |
| Number of Taps:               | <u>4</u>             | Length of Trenches:                                    | <u>295</u>       | ft(See Tap Chart for Details) |                     |               |               |              |                         |
| Depth of Trenches:            | <u>18</u>            | in   | Manifold Length: | <u>42</u>                     | in                  |               |               |              |                         |
| Manifold Diameter:            | <u>4in sch 80pvc</u> | Tap Configuration:                                     | 6 in spacing     | <u>1</u>                      | side(s) of manifold |               |               |              |                         |
| Supply Line: length:          | <u>160</u>           | ft   | Diameter:        | <u>2</u>                      | in sch 40pvc        |               |               |              |                         |
| Friction Loss + Fitting Loss: | <u>8.11</u>          | ft(supply line length + 70' for fittings in pump tank) |                  |                               |                     |               |               |              |                         |
| Design Head:                  | <u>2</u>             | ft   | Elevation Head:  | <u>6.00</u>                   | ft                  |               |               |              |                         |
| Total Head:                   | <u>16.11</u>         | ft   | Pump to Deliver: | <u>39.81</u>                  | gals/min at         | <u>16.11</u>  | ft head       |              |                         |
| Dosing Volume:                | <u>245</u>           | gals,  |                  |                               |                     |               |               |              |                         |
| Drawdown:                     | <u>245</u>           | gals divided by  | <u>20</u>        | gals/in =                     | <u>12.2</u>         | inches        |               |              |                         |

## TAP CHART

[illegible]

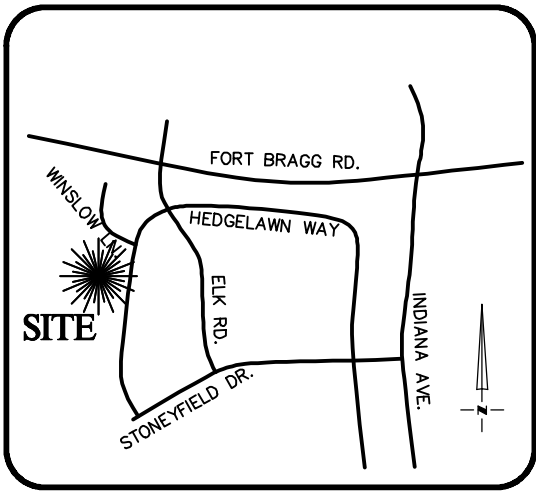
SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM  
(Complete all fields in full)

OWNER: Caruso Homes DATE EVALUATED: 4/25/2025  
ADDRESS: \_\_\_\_\_  
PROPOSED FACILITY: Single Family 4 BR PROPOSED DESIGN FLOW (.0400): 480 gpd PROPERTY SIZE: .70 Acres  
LOCATION OF SITE: 341 Magnolia Acres Ln. Fuquay Varina 27526 PROPERTY RECORDED: Y  
WATER SUPPLY: ☒ Public ☐ Single Family Well ☐ Shared Well ☐ Spring ☐ Other \_\_\_\_\_ WATER SUPPLY SETBACK: \_\_\_\_\_  
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Domestic ☐ High Strength ☐ IPWW

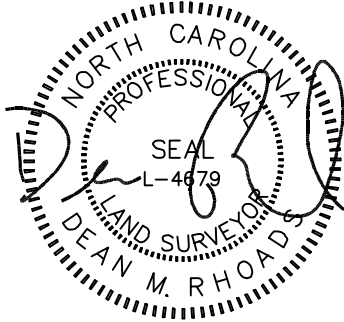
| P<br>R<br>O<br>F<br>I<br>L<br>E<br><br># | .0502<br>LANDSCAPE<br>POSITION/<br>SLOPE % | HORIZON<br>DEPTH<br>(IN.) | SOIL MORPHOLOGY                |                                     | OTHER PROFILE FACTORS              |                        |                         |                         | .0509<br>PROFILE<br>CLASS<br>& LTAR* | .0502(d)<br>SLOPE<br>CORRE<br>CTION |
|--|--|---------------------------|--------------------------------|-------------------------------------|------------------------------------|------------------------|-------------------------|-------------------------|--------------------------------------|-------------------------------------|
|  |  |                           | .0503<br>STRUCTURE/<br>TEXTURE | .0503<br>CONSISTENCE/<br>MINERALOGY | .0504<br>SOIL<br>WETNESS/<br>COLOR | .0505<br>SOIL<br>DEPTH | .0506<br>SAPRO<br>CLASS | .0507<br>RESTR<br>HORIZ |                                      |                                     |
| 1  | Linear<br>12%                              | 0-6                       | GR/LS                          | VFR,SEXP,NS                         | N.O                                | 40"                    | N.O                     | N.O                     | P.S<br>.3                            | 5"                                  |
|  |  | 6-32                      | SBK C                          | FI,SEXP,S                           |                                    |                        |                         |                         |                                      |                                     |
|  |  | 32-40                     | SICL B/C                       | FR,SEXP,S                           |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
| 2  | Linear<br>12%                              | 0-10                      | GR/LS                          | VFR,SEXP,NS                         | N.O                                | 34"                    | N.O                     | N.O                     | U/P.S<br>.3                          | 5"                                  |
|  |  | 10-35                     | SBK C                          | FI,SEXP,S                           |                                    |                        |                         |                         |                                      |                                     |
|  |  | 35                        | AR                             |                                     |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
| 3  | Linear<br>12%                              | 0-6                       | GR/LS                          | VFR,SEXP,NS                         | N.O                                | 40"                    | N.O                     | N.O                     | P.S<br>.3                            | 5"                                  |
|  |  | 6-40                      | SBK C                          | FI,SEXP,S                           |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
| 4  | Linear<br>12%                              | 0-4                       | GR/LS                          | VFR,SEXP,NS                         | N.O                                | 40"                    | N.O                     | N.O                     | P.S<br>.3                            | 5"                                  |
|  |  | 4-30                      | SBK C                          | FI,SEXP,S                           |                                    |                        |                         |                         |                                      |                                     |
|  |  | 30-40                     | WKS BKCL                       | FR,SEXP,S                           |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |
|  |  |                           |                                |                                     |                                    |                        |                         |                         |                                      |                                     |

| DESCRIPTION             | INITIAL SYSTEM | REPAIR SYSTEM | SITE CLASSIFICATION (.0509): U/P.S<br>EVALUATED BY: Bobby Weaver/Alex Adams<br>OTHER(S) PRESENT: _____ |
|-------------------------|----------------|---------------|--|
| Available Space (.0508) | S              | S             |  |
| System Type(s)          | III B          | III B         |  |
| Site LTAR               | .3             | .3            |  |
| Maximum Trench Depth    | 18"            | 18"           |  |

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

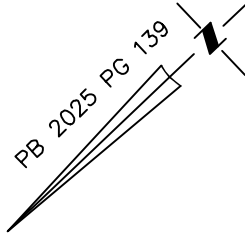
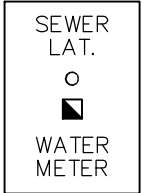


VICINITY MAP  
Not To Scale



| IMPERVIOUS SURFACE AREA |            |
|-------------------------|------------|
| DESCRIPTION             | AREA       |
| HOUSE w/ PORCH          | 2,366 S.F. |
| HVAC/MISC               | 9 S.F.     |
| DRIVEWAY & WALKS        | 1,365 S.F. |
| TOTAL (PROPOSED)=       | 3,740 S.F. |
| *TOTAL (ALLOWED)=       | 3,850 S.F. |

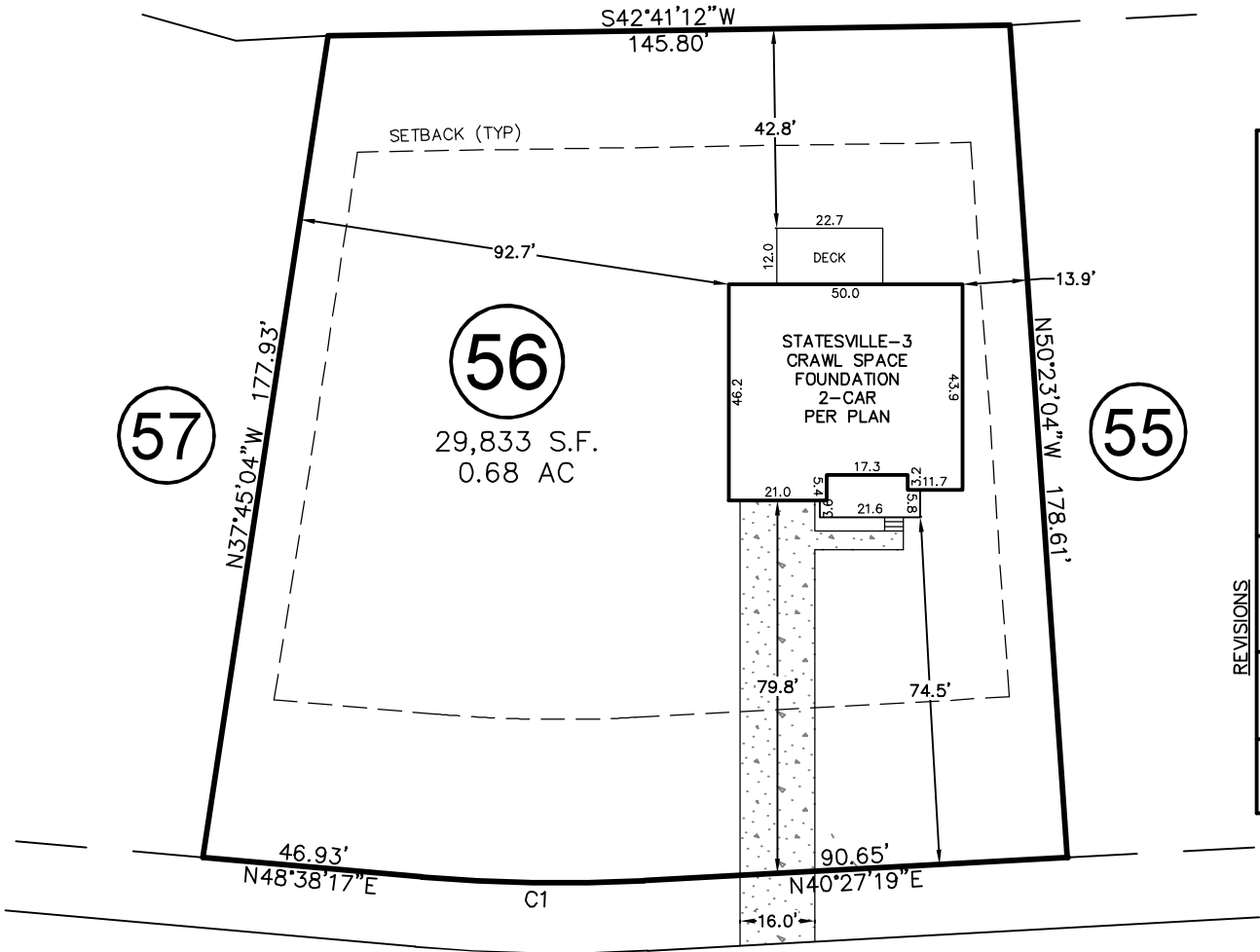
\*PB 2025 PG 139



SETBACKS: (ZONE RA-30)

FRONT - 35'  
REAR - 25'  
SIDE - 10'  
CORNER SIDE - 20'

N/F  
ZONE 4  
PROPERTIES, LLC  
DB 2022 PG 301



| REVISIONS |         | COMMENT                            |
|-----------|---------|------------------------------------|
| REV. #    | DATE    | REVISOR                            |
| REV. 1    | 4/11/25 | JWW                                |
|           |         | MOVED HOUSE RIGHT 45' AND BACK 40' |

# MAGNOLIA ACRES LANE

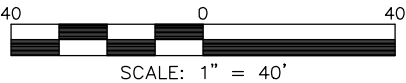
50' PUBLIC R/W

| CURVE | RADIUS  | ARC LENGTH | CH LENGTH | CH BEARING  |
|-------|---------|------------|-----------|-------------|
| C1    | 333.98' | 47.70'     | 47.66'    | S44°32'48"W |

THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED

THIS DRAWING DOES NOT  
REFLECT AS-BUILT INFORMATION

**PRELIMINARY PLAT**  
NOT FOR RECORDATION, CONVEYANCES, OR SALES.



SCALE: 1" = 40'

## RESIDENTIAL LAND SERVICES, PLLC.

1917 Evans Road  
Cary, North Carolina 27513  
Phone (919) 378-9316  
Firm License # P-0873

## HOUSE LOCATION PLOT PLAN

FOR

#341 MAGNOLIA ACRES LANE

LOT 56, MAGNOLIA ACRES SUBDIVISION

Hector's Creek Township, Harnett County, North Carolina

PROPERTY OF: CARUSO HOMES

MAP BOOK 2025 PAGE 139 DEED REFERENCE

DRAWN: JWW

SURVEYED: N/A

CHECKED: DMR

DATE: APRIL 4, 2025





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/22/2025

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).

|   |   |   |
|---|---|---|
| PRODUCER<br>Wade Associates, LLC<br>250 Pollock St.<br><br>New Bern NC 28560                  | CONTACT NAME: Angela Sensenig<br>PHONE (A/C, No, Ext): (252) 631-5269<br>E-MAIL ADDRESS: asensenig@wadeict.com<br>INSURER(S) AFFORDING COVERAGE<br>INSURER A: Lloyd's of London<br>INSURER B:<br>INSURER C:<br>INSURER D:<br>INSURER E:<br>INSURER F: | FAX (A/C, No): (252) 649-2443<br>NAIC #<br>A1122J |
| INSURED<br>Alex Adams, DBA: Adams Soil Consulting<br>1676 Mitchell Rd.<br><br>Angier NC 27501 |   |   |

## COVERAGES

CERTIFICATE NUMBER: 25-26

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICY(S) INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED AND ABOVE OR THE POLICY PRODUCER INDICATED. NOT WITHSTANDING ANY OTHER TERMS OR CONDITIONS OF ANY CONTRACT OR OTHER DOCUMENT, THE POLICY(S) SHALL BE SUBJECT TO THE TERMS, CONDITIONS AND COVERAGE OF THE POLICY(S) LISTED BELOW. THE POLICY(S) SHALL BE PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSD                       | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|--|---------------------------------|----------|---------------|-------------------------|-------------------------|--|
|          | COMMERCIAL GENERAL LIABILITY<br>CLAI S- AD <input type="checkbox"/> OCC R <input type="checkbox"/><br>N/LA R AT LI IT APPLI SP R:<br><input type="checkbox"/> POLIC <input type="checkbox"/> PRO-CT <input type="checkbox"/> LOC<br>OTH R: |                                 |          |               |                         |                         | ACH OCC RR NC<br>DA A TOR NT D<br>PR IS S (a occurrence)<br>D P (Any one person)<br>P RSONAL ADV IN R<br>N RALA R AT<br>PROD CTS - CO P/O PA |
|          | AUTOMOBILE LIABILITY<br>AN A TO<br>ALL O N D<br>A TOS<br>HIR DA TOS<br>SCH D L D<br>A TOS<br>NON-O N D<br>A TOS  |                                 |          |               |                         |                         | CO BIN D SIN L LI IT<br>(a accident)<br>BODIL IN R (Per person)<br>BODIL IN R (Per accident)<br>PROP RT DA A<br>(Per accident)               |
|          | UMBRELLA LIAB<br>EXCESS LIAB<br>D D R T NITION<br>OCC R<br>CLAI S- AD  |                                 |          |               |                         |                         | ACH OCC RR NC<br>A R AT  |
|          | WORKERS COMPENSATION<br>AND EMPLOYERS' LIABILITY<br>AN PROPRI TOR/PARTN R/ C TIV<br>O IC R/ B R CL D D<br>(Mandatory in NH)<br>If yes describe under<br>D DESCRIPTION O OP RATIONS below   | Y/N<br><input type="checkbox"/> | N/A      |               |                         |                         | P R STAT<br>OTH-R<br>.L. ACH ACCID NT<br>.L. DIS AS - A PLO<br>.L. DIS AS - POLIC LI IT  |
| A        | Errors & Omissions   |                                 |          | PSN0040221161 | 1/31/2025               | 1/31/2026               | ach Occurrence<br>eneral Aggregate<br>\$1,000,000<br>\$1,000,000   |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

## CERTIFICATE HOLDER

## CANCELLATION

\*FOR INFORMATIONAL PURPOSES ONLY\*

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
XXXXXXXXXXXXXXXXXXXXXXXXXXXX

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

N Whitsett/RACHEL

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ACORD 25 (2014/01)

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INS025 (201401)