

Except for date received, the Section below is to be completed by the Owner.

The following items are included in this submittal for an Authorization to Operate under an AOWE permit:

- ### ***Attestation by the Owner for Authorization to Operate***

Christopher E. Cates 11/17/25
Signature of Owner Date

This section for LHD Use Only.

☐ INCOMPLETE

Copies of this signed form were sent to the AOWE and the Owner on _____ via _____.

Date *Email, FAX, USPS, Hand-delivered*

Date _____

☐ COMPLETE

A copy of this complete NOI/ATO with tracking information was sent to the State on _____ via _____.

Date Email, FAX, USPS, Hand-delivered

Date _____

Page 6 of 6



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/29/2025

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 have **ADDITIONAL INSURED** provisions or 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

SIA Group, Inc.
827 Gum Branch Road
Jacksonville NC 28540

CONTACT

NAME: Certificate Administrator

PHONE
(A/C, No, Ext): 910-455-7576FAX
(A/C, No): 910-455-7481E-MAIL
ADDRESS: certs@siagroup.com**INSURER(S) AFFORDING COVERAGE**

NAIC #

INSURER A : Owners Insurance Company

32700

INSURER B : Auto-Owners Insurance Company

18988

INSURER C : FFVA Mutual Insurance Co.

10385

INSURER D :

INSURER E :

INSURER F :

INSURED

David Brantley & Sons, Inc.
37 Pine Ridge Road
Zebulon NC 27597

DAVIBRA-02

COVERAGES

CERTIFICATE NUMBER: 1213285082

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☐ LOC OTHER:			35506165	7/2/2025	7/2/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☒ HIRED AUTOS ONLY ☒ NON-OWNED AUTOS ONLY			5391466100	7/2/2025	7/2/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE DED ☒ RETENTION \$ 10,000			5391466101	7/2/2025	7/2/2026	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) ☐ Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC850-0050098-2025A	7/2/2025	7/2/2026	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Contractors Equipment			35506165	7/2/2025	7/2/2026	Leased/Rented \$50,000

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

CERTIFICATE HOLDER

Southeastern Soil & Environmental Assoc., Inc
PO Box 9321
Fayetteville NC 28311

CANCELLATION

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

Understanding and Protecting Your Septic System

If you currently discharge wastewater to a septic system, if you are looking to purchase a place of residence, public assembly, or business, or to move to a place that is served by a septic system, this guidance document should be helpful. Contact your local health department for additional assistance and information.

Know Your Septic System

Not all septic systems are the same. It is important to know about your septic system, such as the components that make up the system and their location on the property, the system functioning and maintenance history, as well as what to do and what not to do. Traditional conventional septic systems have a septic tank and a drainfield with gravel-filled trenches or a gravel bed. Newer septic systems may have polypropylene or polyethylene "chambers" or polystyrene aggregate in place of the gravel.

Some systems use advanced technologies that require a higher level of maintenance than traditional conventional septic systems, and state rules have specific maintenance requirements for these systems. Sometimes owners will be required by state rules to hire a state-certified operator to regularly inspect and maintain the system. In addition, state rules require the local health department to inspect these systems on a periodic basis.

Some properties are legally required to have a "repair area or replacement area" in which a second drainfield could be installed if needed. This repair area should have been identified typically by the health department when the site was permitted and should be shown on your septic system permit ("Improvement Permit"). State rules also require you to protect this area from any soil disturbance activities such as excavation; building a house addition, garage, or other structure; swimming pool construction and installation; and grading.

If you are not sure what type of wastewater system you have, contact the local health department to request a copy of the septic system permit and soil evaluation sheet for your property. These forms should indicate the approved design daily flow, type of system, size of each of the system components (septic tank, any other tanks or pretreatment units, the drainfield, and the repair area), and approximate locations of those components. Also, ask the previous owner or the seller for information about the system (e.g., installations, repairs, maintenance).



Ask Questions

Ensure you have answers to the following questions:

- What type of septic system do you have?
- How old is the system (i.e., when were the system components installed)?
- Where are all the system components located, including the drainfield and repair area? (Note: They may not be at the same location or even on the same lot.)
- How many gallons a day (e.g., number of bedrooms, occupants, seats in the restaurant) is the septic system designed to treat and dispose of?
- What is the volumetric (liquid) capacity of each tank in the septic system?
- Which drainfield option or product was used for your system?
- Is the septic system working properly?
- Does the system require a certified operator?
- What are the legal requirements for long-term maintenance?
- Has the septic system been maintained in the past?

*"Keep this information
for future reference
to help you
properly maintain
your septic system"*

*"Let your
Health
Department
know the
problem"*

Signs of Possible Septic System Failure

- Sewage backing up into your toilets, tubs, or sinks.
- Sewage backing up in the septic and/or pump tank
- Slowly draining plumbing fixtures, particularly during and after it has rained.
- The smell of raw sewage accompanied by soggy soil or sewage discharged over the ground or in nearby ditches or woods.
- Sewage comes to the ground surface when the pump turns on and then disappears after the pump turns off.
- An alarm flashing (red light) and/or blaring horn coming from the pump control panel.

Understanding and Protecting Your Septic System



DOs and DON'Ts

DO

- Do learn the location of the septic tank, drainfield and repair area. Keep a sketch of the system location and layout with your maintenance record for service visits.
- Do keep your septic tank cover accessible for inspections and pumping.
- Do keep suitable vegetation growing over the drainfield and repair area to stabilize the soil and prevent erosion.
- Do have a maintenance plan for your system.
- Do have your septic system inspected in accordance with state regulations.
- Do make sure you have an effluent filter installed on your septic tank to prevent solids from reaching the drainfield and to increase the life of your system.
- Do have solids pumped out of the septic tank by a State-permitted pumper every 3 to 5 years (typical primary residence) or as required per the permit. Do make sure both compartments of the septic tank are pumped out. If the septic system includes a pump tank have it pumped out too.
- Do periodically check to ensure the septic system, pumps and electrical components, continue working properly between scheduled maintenance visits.
- Do call the local health department or an onsite wastewater contractor certified by the North Carolina Onsite Wastewater Contractor Inspector Certification Board (NCOWCICB) whenever you experience problems with your system, or if there are any signs of system failure.
- Do keep a detailed record of installations, repairs, and tank pump outs.
- Do hire a state-certified subsurface system operator when required by the septic system permit.

DON'T

- Don't ignore problems with your septic system hoping they will just go away.
- Don't enter the septic tank.
- Don't wait until the tank overflows, the drainfield fails, or the system backs up to have the tank pumped.
- Don't expand the size of the place of residence, business, or public assembly without obtaining prior written approval to adjust the size of the septic system accordingly.
- Don't make or allow repairs to your septic system without obtaining required permits from the local health department.
- Don't direct downspouts, water softeners, sump pumps, water features, swimming pool, hot tubs, HVAC condensate drains or similar discharges into the septic system or toward the drainfield.
- Don't install sprinkler systems or wells in the septic system and repair areas.
- Don't perform construction of any type over the septic system and repair areas (e.g., decks, patios, sheds).
- Don't cover the septic tank, d-box, or drainfield with structures (e.g., planters, firepits, grills) or hardened surfaces (e.g., asphalt, concrete, stone, brick).
- Don't drive or park vehicles over the septic system.
- Don't put cigarette butts, paper towels, disposable wipes, sanitary napkins/tampons, condoms, cotton swabs, kitty litter, coffee grounds, disposable diapers, plastics or other non-biodegradables into the septic system.
- Don't pour grease or cooking oil down the drain or foul up the septic system with harmful chemicals (e.g., solvents, paint, medications, disinfectants, pesticides) and other hazardous substances.
- Don't install garbage grinders at sinks.

State-Certified Septic System Installers and Inspectors

Contact the North Carolina Onsite Wastewater Contractor Inspector Certification Board (NCOWCICB)
Phone: (336) 202-3126 • Website: <https://ncowcicb.info>

State-Certified Subsurface System Operators

Contact the North Carolina Water Pollution Control System Certification Commission (WPCSOCC)
Phone: (919) 707-9089 • Website: <https://deq.nc.gov/about/divisions/water-resources/operator-certification>



NC Department of Health and Human Services • Division of Public Health • On-Site Water Protection •
<https://ehs.ncpublichealth.com/oswp> • NCDHHS is an equal opportunity employer and provider. • 9/2020



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: Caviness and Cates

Mailing address: 639 Executive Place Ste. 400 City: Fayetteville State: NC Zip: 28305

Phone: 910-709-9801 Email: pam@cavinessandcates.com

Authorized Onsite Wastewater Evaluator Information:

Name: Mike Eaker Certification #: 10013E

Mailing address: PO Box 9321 City: Fayetteville State: NC Zip: 28311

Phone: 910-822-4540 Email: Mike@southeasternsoil.com



Site Location Information:

Site address: 32 Black Duck Lane, Lillington, NC 27546

Tax parcel identification number or subdivision lot, block number of property: Ducks Landing Lot 119
0526-49-3933.000 County: Harnett

System Information:

Wastewater System Type: Accepted (25% Reduction)

Daily Design Flow: 480 gpd

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 9 day of May, 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 9 day of May, 2030.

Signature of Authorized Onsite Wastewater Evaluator: [Signature]

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: _____

Southeastern Soil & Environmental Associates, Inc.

P.O. Box 9321
Fayetteville, NC 28311
Phone/Fax (910) 822-4540
Email mike@southeasternsoil.com

May 9, 2025

Ms. Pamela Geddie
Caviness & Cates
639 Executive Place, Suite 400
Fayetteville, NC 28305

Re: Soil/site evaluation for subsurface waste disposal (GS 130A-336.2) AOWE, Ducks Landing, Lot 119, PIN 0526-49-3933.000, 32 Black Duck Lane, Lillington, Harnett County, North Carolina

Dear Ms. Geddie,

A soil/site evaluation has been conducted on the aforementioned property at your request. The purpose of the investigation was to determine if soils were suitable or provisionally suitable for a subsurface waste disposal system (conventional, accepted and innovative) to serve a proposed single-family residence (4-bedroom home). All ratings and determinations were made in accordance with "Onsite Wastewater Rules, 15A NCAC 18E". **This LSS evaluation is being submitted to meet the requirements of GS 130A-336.2 (AOWE).**

The soil evaluation was completed on March 13, 2025. Hand auger borings were advanced under moist soil conditions. The site essentially lies on a linear slope landscape (1-3% slope). Soil borings conducted in most of this area consisted of 20 or more inches of loamy sand underlain by sandy loam, sandy clay loam, clay loam and/or sandy clay to 48 or more inches below the soil surface. Soil wetness and/or parent material (greater than 50%) was not observed shallower than 38 inches below the soil surface (initial system) and 36 inches (repair system). All other soil characteristics were suitable to at least 48 inches.

Based on soil borings and site conditions, the site would be designated suitable for a shallow accepted subsurface waste disposal drainfield (0.40 gal/day/ft² LTAR; initial system). There is enough suitable soil area to allow for a shallow accepted subsurface septic system repair (0.40 gal/day/ft²). A map showing the approximate location of the site and proposed septic layout accompanies this report. **[Note: No grading, rutting or other soil disturbance can occur in or near the proposed septic area. Any grading can alter the findings of this report and render the site unusable. As such, we recommend the builder protect the proposed septic areas with rope, flagging, fencing, etc.]**

Design Summary

- Accepted product (300', see septic layout)
- 480 gal/day flow rate (4BR)
- 22" maximum trench depth (upslope side)
- 0.40 gpd/ft² LTAR (initial and repair)
- 1000-gallon septic tank (**certified watertight**)
- No grading, rutting or filling in septic areas
- No vertical cuts (greater than 2') within 15' of septic lines/areas
- Keep tanks and drainlines 10' from property lines
- Keep supply line 5 or more feet from property lines
- **Install in dry soil conditions**
- Maintain natural contours when clearing the lots
- Direct gutter water away from septic system
- **AOWE must preapprove Licensed installer**
- **Preconstruction conference required 2 weeks prior to installation of septic**
- **Contractor to provide 2 week's notice prior to installation**

During site construction, it is important not to impact and suitable or provisionally suitable soil areas with activities such as excavation or filling. Only the vegetation should be removed in the areas of the proposed septic drainfields to prevent any disturbance of naturally occurring soil. We recommend all lot clearing activity be delayed until the local health department issues a permit.

To the extent possible, we have identified the soil types that will impact the flow of wastewater on this site and have provided a professional opinion as to the best septic system layout. This report does not guarantee that the proposed septic system will properly function for any specific length of time.

Sincerely,



Mike Eaker
NC Licensed Soil Scientist # 1030
NC Authorized Wastewater Evaluator 10013E



SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: Ducks Landing

LOT 119

INITIAL SYSTEM: Accepted 25% Reduction

REPAIR: Accepted 25% Reduction

DISTRIBUTION: Gravity Serial

DISTRIBUTION Gravity Serial

BENCHMARK: 100.0

LOCATION FC 24/25

NO. BEDROOMS: 4

LTAR 0.40 gpd/ft²

SEPTIC TANK SIZE 1000 Gallons

PUMP TANK SIZE N/A

	<u>LINE</u>	<u>FLAG COLOR</u>	<u>ELEVATION</u>	<u>LENGTH</u>
Initial	1	P	95.00	75
	2	W	94.90	75
	3	P	94.70	75
	4	W	94.50	75
				300 TOTAL
Repair	5	P	94.20	75
	6	W	94.00	75
	7	P	93.70	75
	8	W	93.40	75
				300 TOTAL

BY Mike Eaker

DATE 3/27/25

TYPICAL PROFILE

Initial

0-20	LS/SL	VFr/Fr/Gr
20-48	SC/SCL	Fi/SBk
CR2	40"	

Repair

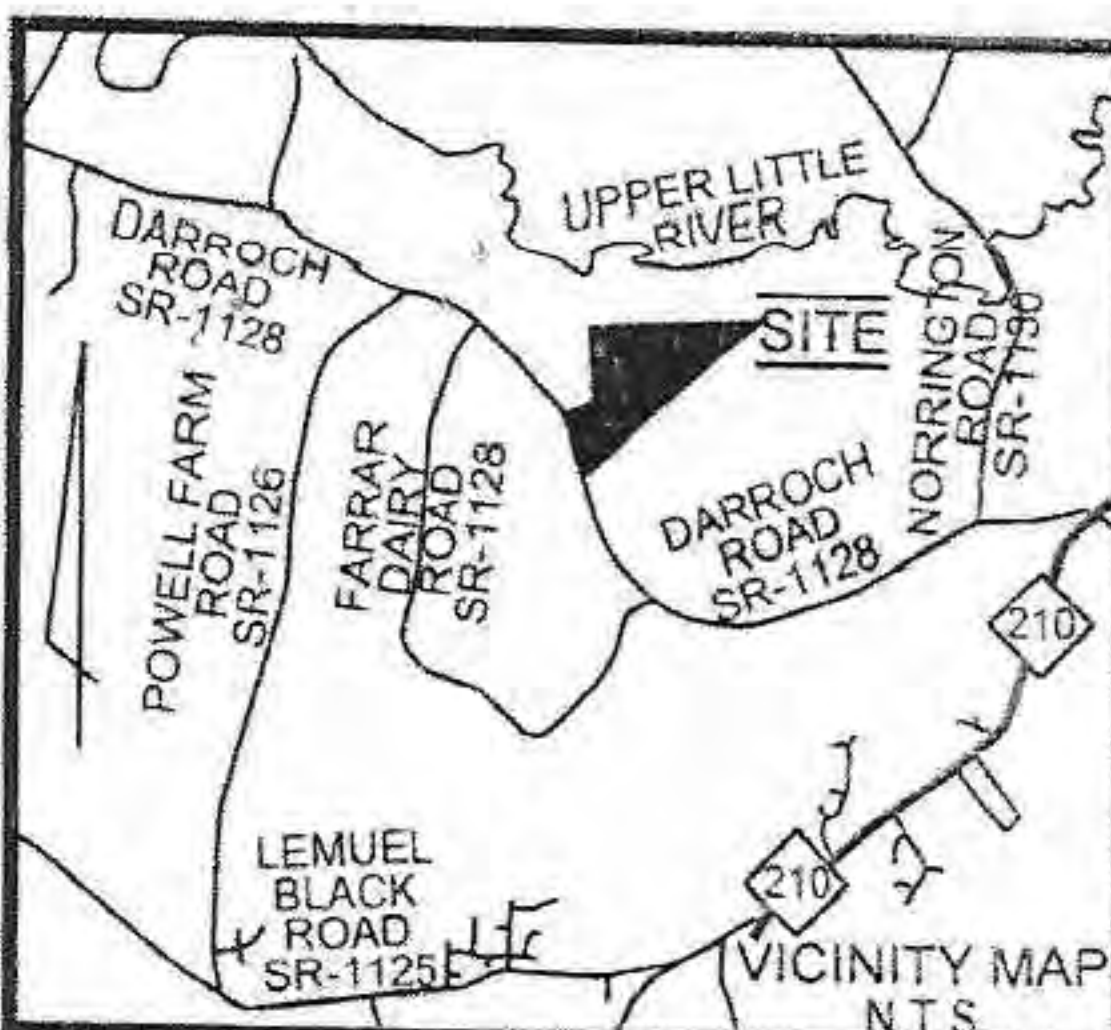
0-20	LS/SL	VFr/Fr/Gr
20-48	SC/SCL	Fi/SBk
CR2	36"	

**THERE SHALL BE NO GRADING,
CUTTING, LOGGING OR OTHER SOIL
DISTURBANCE IN SEPTIC AREA**

HEALTH DEPARTMENT USE ONLY.

DESIGNS DO NOT GURANTEE FUNCTIONALITY



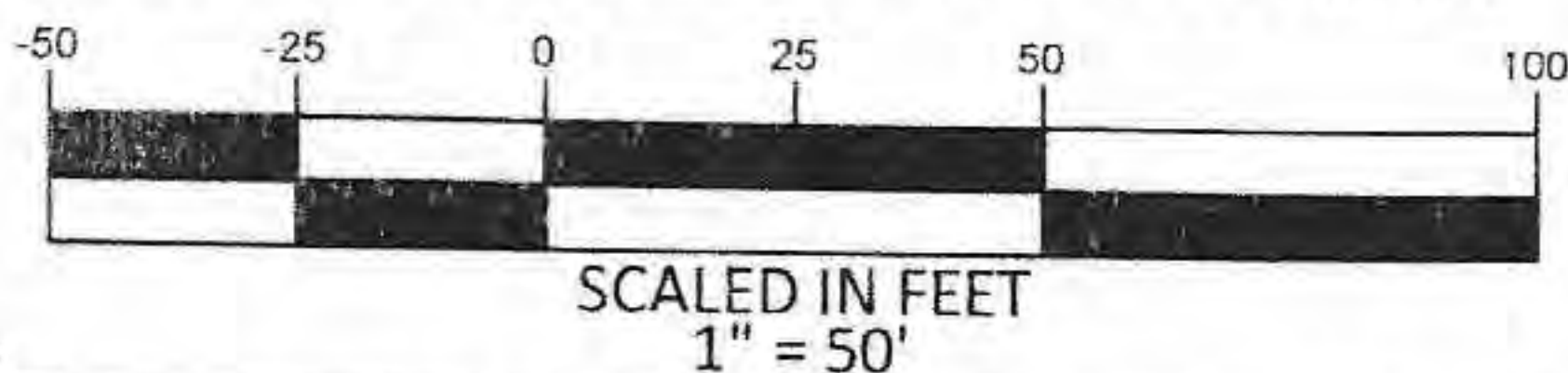


Notes:

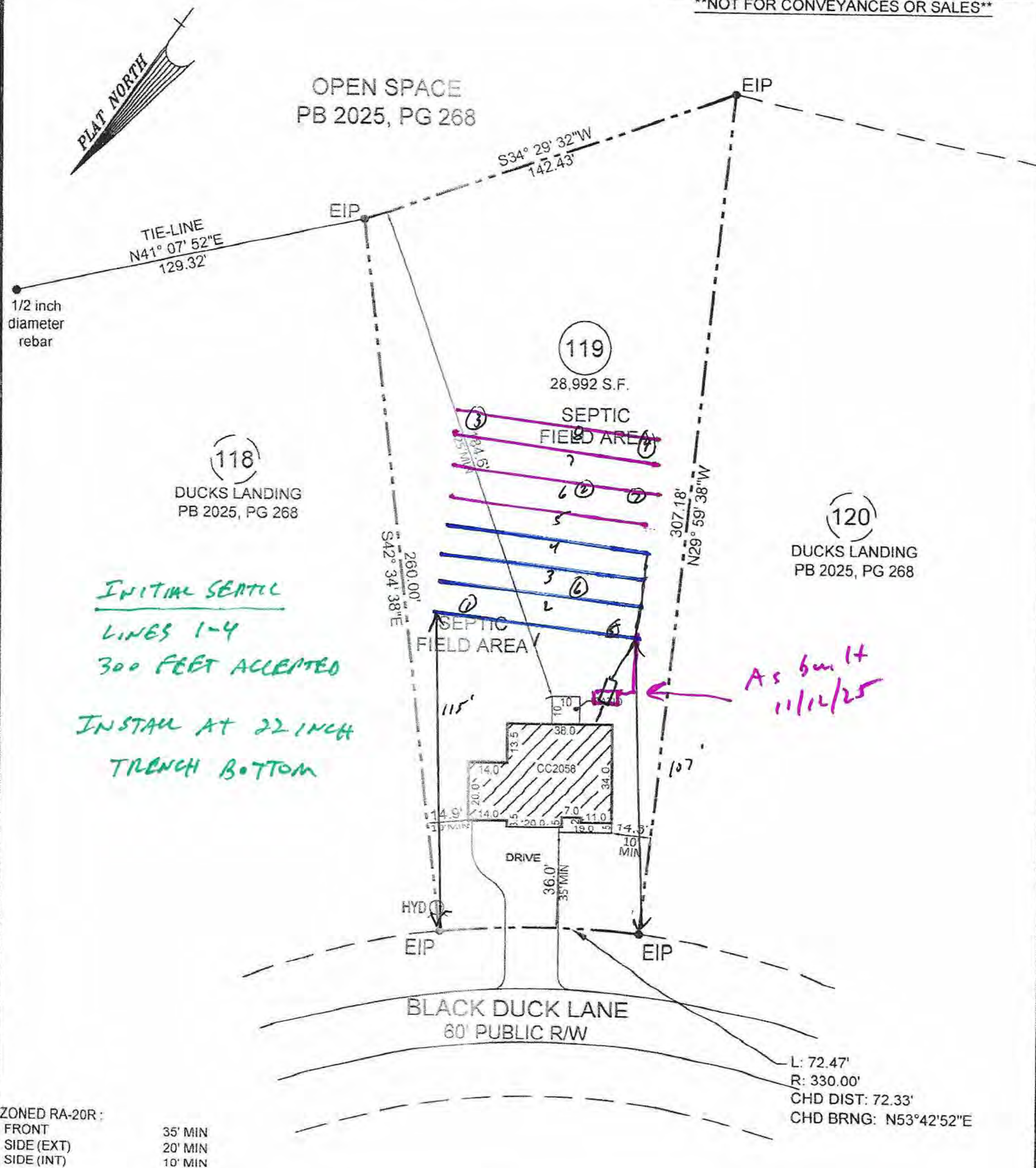
- This plat is for location purposes only. Builder should verify foundation information with plans before construction begins.
- There is no USCE or NCGS monument within 2000' of this site.
- The subject property is not within a special flood hazard area as determined by the Department of Housing and Urban Development.
- The easement information shown hereon was obtained from the recorded plat. No updated title search was performed by the surveyor.
- All distances are measured in feet.
- This map reflects the information contained on the Record Plat and does not represent compliance with the Restrictive Covenants.

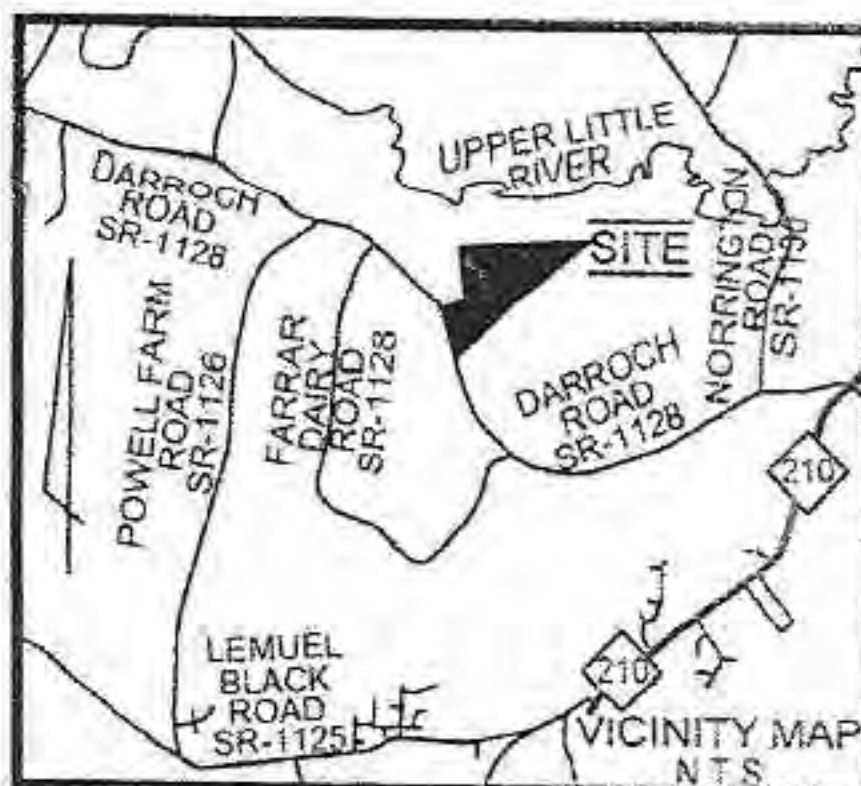
LEGEND

- - EXISTING IRON PIPE
- - CURVE PT / PC
- - SURVEYED LINE
- - - - EASEMENT LINE
- - - - ADJOINER
- - - - SURVEYED BY OTHERS



MAP NOT DRAWN IN ACCORDANCE WITH GS 47-30
NOT FOR CONVEYANCES OR SALES





Notes:

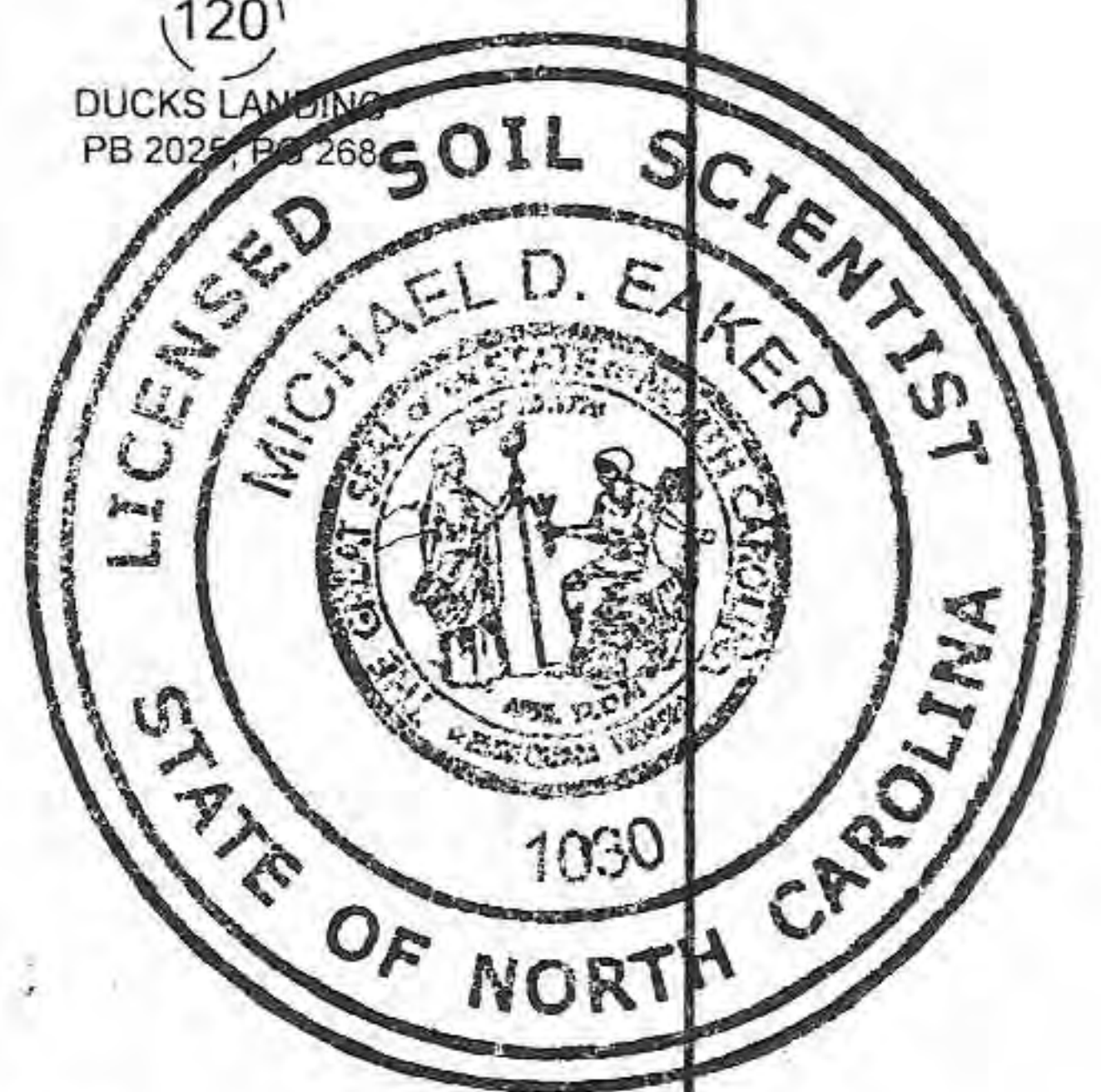
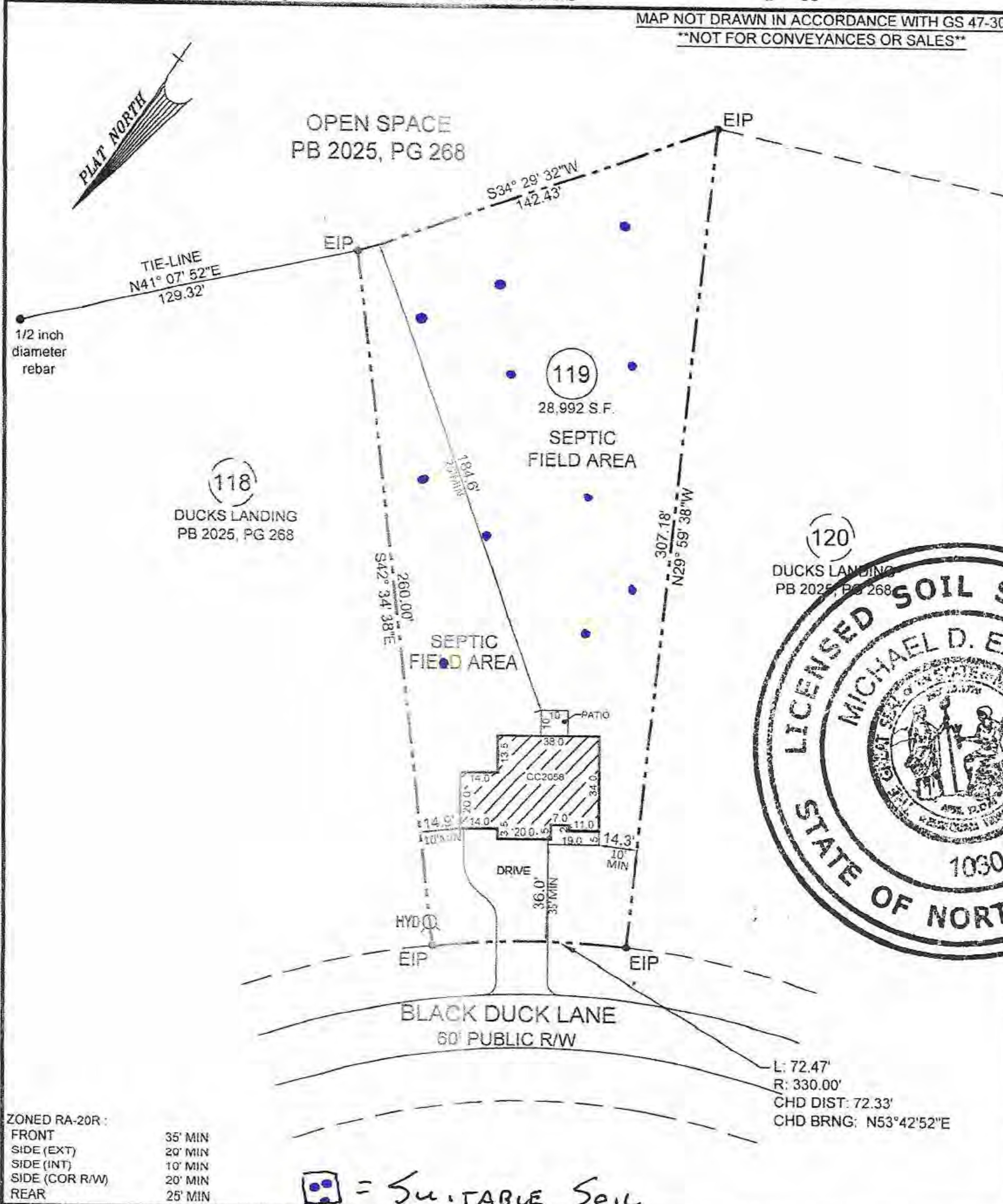
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LEGEND

- EXISTING IRON PIPE
- CURVE PT / PC
- SURVEYED LINE
- EASEMENT LINE
- ADJOINER
- SURVEYED BY OTHERS

Scale: 1" = 50'

MAP NOT DRAWN IN ACCORDANCE WITH GS 47-30
NOT FOR CONVEYANCES OR SALES



PLOT PLAN FOR -
CAVINESS & CATES BUILDING & DEVELOPMENT, CO.
- SUBDIVISION -
DUCKS LANDING

ANDERSON CREEK TOWNSHIP
HARNETT COUNTY
NORTH CAROLINA

REFERENCE
PB 2025, PG 268
HARNETT COUNTY NORTH CAROLINA REGISTRY

115 broadfoot ave.
p.o. box 53774
fayetteville, n.c., 28305
phone 910-484-5191
fax 910-484-0388
LICENSE # F-0106

JULY 21, 2025
SCALE 1" = 50'
FIELD BOOK:

SEAL
L-3196
THOMAS J. GOODEN
NORTH CAROLINA
PROFESSIONAL
LAND SURVEYOR

ENGINEERS
PLANNERS
SURVEYORS
MOORMAN, KIZER & REITZEL, INC.

PROF SURVEYOR NO. L-3196 REVISED 7-21-25

**SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM**

(Complete all fields in full)

OWNER: Caviness & Cates

ADDRESS: 639 Executive Place, Suite 400, Fayetteville, NC 28305

PROPOSED FACILITY: SFD

PROPOSED DESIGN FLOW (.1949): 480 GPD (4BR)

LOCATION OF SITE: Black Duck Lane, Lillington, NC (Lot 119) Ducks Landing

WATER SUPPLY: ☐ Private ☒ Public Well ☐ Spring ☐ Other _____

EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut

TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

APPLICATION DATE

DATE EVALUATED: 03/27/25

PROPERTY SIZE: 0.66 Ac

PROPERTY RECORDED

P R O F I L E #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPR O CLASS	.1944 RESTR HORIZ	
1	LS 1-3%	0-10	LS/Gr	VFr/Nexp	44"	NA	NA	NA	Suitable 0.40
		10-24	LS/Gr	VFr/NExp	10YR 6/4				
		24-44	SCL/mm sbk	Fi/SExp	10YR 5/8				
		44-48	SCL/wf sbk	Fi, SExp	10YR 5/8				
					10YR 7/1 mot				
2	LS 1-3%	0-11	LS/Gr	VFr/Nexp	40"	NA	NA	NA	Suitable 0.40
		11-31	LS/Gr	VFr/Nexp	10YR 6/4				
		31-40	SCL/mm sbk	Fi/SExp	10YR 5/8				
		40-48	SCL/wf sbk	Fi/SExp	10YR 5/8				
					10YR 7/1 mot				
3	LS 1-3%	0-8	LS/Gr	VFr/Nexp	41"	NA	NA	NA	Suitable 0.40
		8-26	LS/Gr	VFr/NExp	10YR 6/4				
		26-41	SCL/SC/mm sbk	Fi/SExp	10YR 5/8				
		41-48	SCL/wfsbk	Fi, SExp	10YR 5/8				
					10YR 7/1 mot				
4	LS 1-3%	0-7	LS/Gr	Fr/Nexp	>48"	NA	NA	NA	Suitable 0.40
		7-31	LS/Gr	VFr/Nexp	10YR 6/4				
		31-48	SCL/mm sbk	Fi/SExp	10YR 5/8				
					1				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946): SITE CLASSIFICATION (.1948): Suitable EVALUATED BY: M. Eaker OTHER(S) PRESENT: D. Eaker
Available Space (.1945)	Yes	Yes	
System Type(s)	Accepted	Accepted	
Site LTAR	0.40	0.40	

COMMENTS:

(Continuation Sheet-Complete all field in full)

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

DATE OF EVALUATION: 03/27/25

COUNTY: Harnett

COMMENTS: _____