



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: RiverWILD Homes

Mailing address: 114 W Main St City: Clayton State: NC Zip: 27520

Phone: 919-373-6048 Email: kelley@staywild.com

Authorized Onsite Wastewater Evaluator Information:

Name: Trent Bostic Certification #: 10056E

Mailing address: 501 N Salem St, Ste 203 City: Apex State: NC Zip: 27502

Phone: 919-367-6322 Email: tbostic@agriwaste.com

Site Location Information:

Site address: 87 Sundrops Trl, Dunn, NC 28334

Tax parcel identification number or subdivision lot, block number of property: 1509-01-9770

Alton Fields, Lot - 17 County: Harnett

System Information:

Wastewater System Type: IIIb

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 29 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 29 day of MAY, 2028.

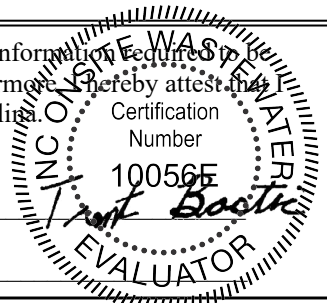
Signature of Authorized Onsite Wastewater Evaluator: Trent Bostic

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.

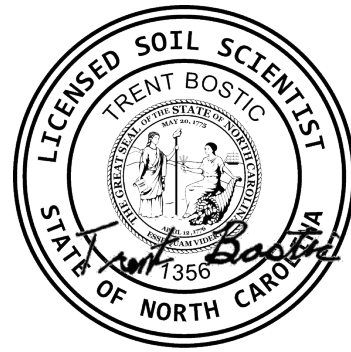
Local Health Department Receipt Acknowledgment:

Signature of Local Health Department Representative: _____ Date: _____





Agri-Waste Technology, Inc.
501 N Salem Street, Suite 203, Apex, NC 27502
agriwaste.com | 919.859.0669



**Soil Suitability for Domestic Sewage Treatment and Disposal Systems
Lot – 17, Sundrops Trl, Dunn, NC 28334
(Harnett County PIN: 1509-01-9770)**

PREPARED FOR: RiverWILD Homes, c/o Kelley Judd

PREPARED BY: Trent Bostic, Senior Soil Scientist

DATE: May 30, 2025

Soil suitability for domestic sewage treatment and disposal systems was evaluated on May 1, 2025, for the property located at the Alton Fields subdivision. Trent Bostic of Agri-Waste Technology, Inc. (AWT) conducted the soil evaluation. This evaluation was done to facilitate permitting for a septic system. This report and attached documents were prepared to meet the requirements for an Authorized On-Site Wastewater Evaluator to meet G.S. 130A-336.2

A drawing of the site plan, septic layout, and boring locations is included in Attachment 1. Profile descriptions for each boring are included in Attachment 2. Additional documentation about the property is included in Attachment 3.

Site Conditions

The total property area is approximately 0.82 acres. The property is a grass field. The drawing in Attachment 1 details the property boundaries, house location, boring locations, and layout of drain field trenches (Completed by AWT).

Soil Suitability for Domestic Sewage Treatment and Disposal Systems

Multiple soil borings/pits were assessed on the property. Soil borings/pits were examined to determine soil suitability for on-site sewage disposal systems in accordance with 15A NCAC 18E: Wastewater Treatment and Dispersal Systems. These borings/pits were advanced with a hand auger and excavator. All soil borings/pits shown are provisionally suitable for a conventional style trench. The proposed LTAR (Long Term Acceptance Rate) by AWT is 0.375 GPD/ft². The soils on this property are group III soils within the distribution and treatment zone as used to define the LTAR. The maximum trench bottom should not exceed 24”.

Field Layout & System Design

A septic layout was performed to demonstrate available space (.0508). The layout in Attachment 1 indicates there is available space for a four-bedroom primary and repair system utilizing a 25% reduction product. With an LTAR of 0.375 GPD/ft², 320 linear feet of trench is necessary to support a four-bedroom home primary, and 320 linear feet of trench is required for the repair system. The attached drawing proves that 640+ linear feet of trench can be installed with the proposed home location on the property.

Any disturbances or grading done in the usable soils area may change the potential of using the area designated for a drain field and can result in a revoked permit.

We appreciate the opportunity to assist you in this matter. Please contact us with any questions, concerns, or comments.

Sincerely,

Trent Bostic, AOWE

A handwritten signature in black ink that reads "Trent Bostic". The signature is written in a cursive, slightly slanted style.

SOIL & SITE EVALUATION for ON-SITE WASTEWATER SYSTEMS

Evaluation Date	5/1/2025	Site Location	87 Sundrops Trl	County	Harnett
PIN/Parcel	1509-01-9770	Property Size (acres)	0.82	Property Recorded	Yes
Proposed Facility	SFR	Bedrooms	4	Wastewater Strength	Domestic
Water Supply	Municipal	Design Flow (.0400)	480	Evaluation Method	Auger

Profile #	.0502 Landscape Position Slope %	Horizon Depth (in)	Soil Morphology		Other Factors					
			.0503 Struct ure Textur e	.0503 Consistence Mineralogy	.0504 Soil Wetness Color	.0505 Soil Depth (in)	.0506 Saprolite	.0507 Restrictive Horizon	.0509 Profile Class LTAR	.0502(d) Slope Corrected Depth
1	2%	Ap 0-9	LS	NS, NP, Vfr	10YR 5/2	36	Suitable	Suitable	0.375	36
		E 9-15	LS	NS, NP, Vfr	10YR 6/4					
		Bt	SCL	SS, SP, Fi	10YR 5/6					
		System Type						Conventional		

2	2%	Ap 0-9	LS	NS, NP, Vfr	10YR 5/2	36	Suitable	Suitable	0.375	36
		E 9-15	LS	NS, NP, Vfr	10YR 6/4					
		Bt	SCL	SS, SP, Fi	10YR 5/6					
		System Type						Conventional		

3	2%	Ap 0-9	LS	NS, NP, Vfr	10YR 5/2	36	Suitable	Suitable	0.375	36
		E 9-15	LS	NS, NP, Vfr	10YR 6/4					
		Bt	SCL	SS, SP, Fi	10YR 5/6					
		System Type						Conventional		

4	2%	Ap 0-9	LS	NS, NP, Vfr	10YR 5/2	36	Suitable	Suitable	0.375	36
		E 9-15	LS	NS, NP, Vfr	10YR 6/4					
		Bt	SCL	SS, SP, Fi	10YR 5/6					
		System Type						Conventional		

Evaluated by:	TB
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Site Classification	Suitable	
Primary LTAR	0.375	Repair LTAR 0.375
Primary Trench Depth	24	Repair Trench Depth 24

SOIL & SITE EVALUATION for ON-SITE WASTEWATER SYSTEMS

LEGEND

Soil Group	Soil Texture	Conventional LTAR	Anaerobic Dip LTAR	Aerobic Drip LTAR (TS-II)	Mineralogy & Consistence		Structure
					Moist	Wet	
I	S (Sand)	0.8-1.2	0.4-0.6	0.8-1.5			SG (Single grain)
	LS (Loamy Sand)				Lo (Loose)	NS (Non Sticky)	M (Massive)
	SL (Sandy Loam)				VFR (Very Friable)	SS (Slightly Sticky)	GR (Granular)
II	L (Loam)	0.6-0.8	0.3-0.4	0.6-0.8			
					FR (Friable)	S (Sticky)	SBK (Subangular Blocky)
	SiL (Silt Loam)				FI (Firm)	VS (Very Sticky)	ABK (Angular Blocky)
III	SCL (Sandy Clay Loam)	0.3-0.6	0.15-0.3	0.2-0.6			
					VFI (Very Firm)	NP (Non Plastic)	PR (Prismatic)
	CL (Clay Loam)				EFI (Extremely Firm)	SP (Slightly Plastic)	
IV	SiCL (Silty Clay Loam)	0.1-0.4	0.05-1.5	0.05-0.2		P (Plastic)	PL (Platy)
	SC (Sandy Clay)					VP (Very Plastic)	
	SiC (Silty Clay)				SEXP (Slightly Expansive)		
	C (Clay)				EXP (Expansive)		

AF 17 - AOWE

Project Location	87 Sundrops Trl Dunn, NC 28334 Harnett County PIN: 1509-01-9770
Project Owner	RiverWILD Homes 114 W Main St Clayton, NC 27520 919-373-6048 kelley@staywild.com
Project Consultant	Trent Bostic, AOWE (919) 367-6322 tbostic@agriwaste.com
	Agri-Waste Technology, Inc. 501 N. Salem Street, Suite 203 Apex, NC 27502 (919) 859-0669 (919) 233-1970 Fax
System Overview	Single Family Residence Four (4) Bedroom, 48 gpd Gravity Fed, Parallel Accepted/Innovative Trench Product



VICINITY MAP

Sheet Index

Sheet 1	Cover Sheet
Sheet 2	Property Layout
Sheet 3	Primary Drainfield
Sheet 6	Detail Sheet

AWT
Engineers and Soil Scientists
Agri-Waste Technology, Inc.
501 N. Salem Street, Suite 203
Apex, North Carolina 27502
919-859-0669
www.agriwaste.com

RiverWILD Homes
AF 17 - AOWE

Project Location:
87 Sundrops Trl
Dunn, NC 28334
Harnett County
PIN: 1509-01-9770

Project Owner:
RiverWILD Homes
114 W Main St
Clayton, NC 27520
919-373-6048
kelley@staywild.com

NC ONSITE WASTEWATER
EVALUATOR SEAL



REV.	ISSUED DATE	DESCRIPTION
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SHEET TITLE

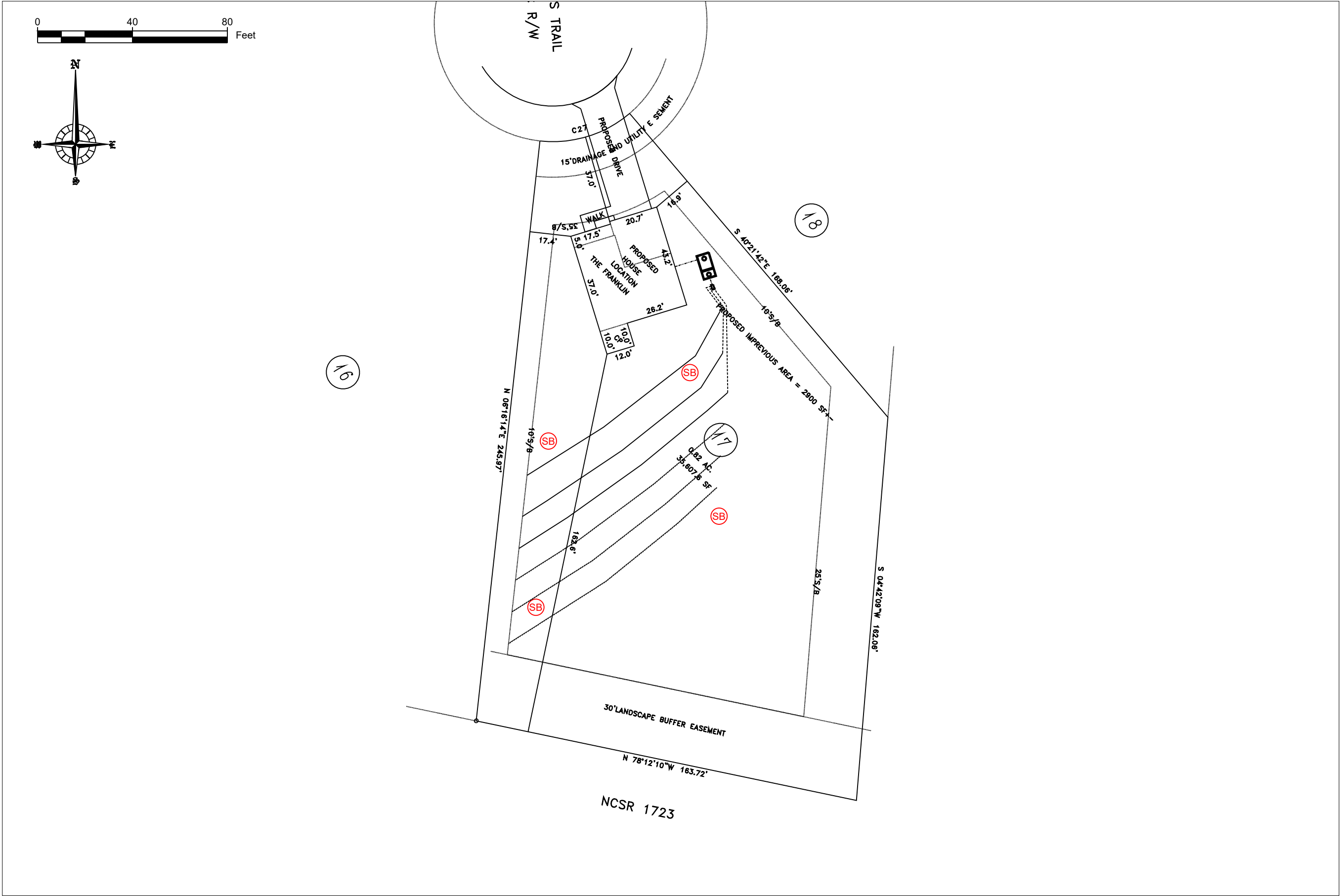
Cover Sheet

DRAWN BY: T. Bostic	CREATED ON: 05/05/2025
REVISED BY: ####	REVISED ON: ####
RELEASED BY: ####	RELEASED ON: ####

DRAWING NUMBER

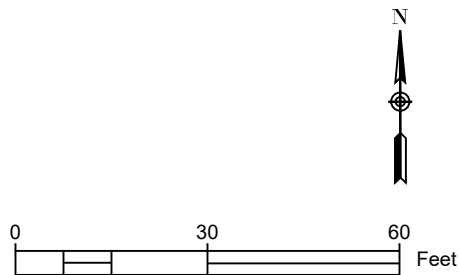
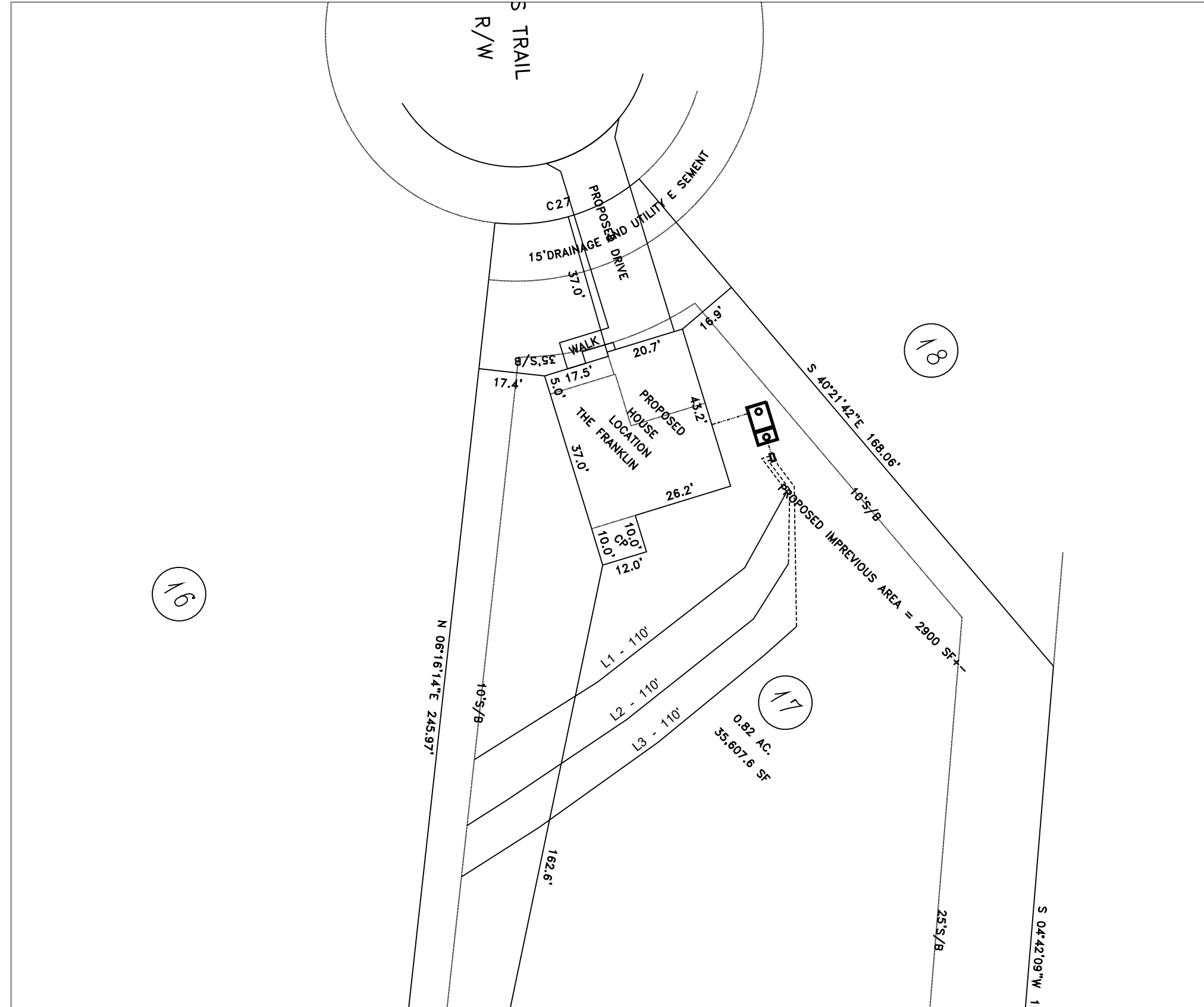
WW-1





1. Clear all trees less than 8" in diameter (measured at a height 3' from soil surface) from the drainfield.
2. Vegetation that will re-grow from a cut stump shall be stumped or pulled from the ground. Stumps shall not be pushed over.
3. Drainfield area shall be cleared of all leaves, pine straw, debris, etc. The accumulated material shall be removed from the drainfield.
4. In clayey soils, sides of trenches shall be raked and limed per manufacturer's instructions.
5. Supply lines shall be installed with a minimum of 18" cover.
6. The trenches shall be backfilled appropriately so that no low areas are present.
7. Apply lime over the drainfield area as needed. Seed fine fescue over the drainfield at the rate
8. recommended by the seed manufacturer. Hand rake the seed into the soil surface. Straw the seeded area at the rate of 1.5-2 bales per 1000 sq. ft.

Primary distribution is parallel w/ D-box. Primary is Infiltrator EZ Flow.



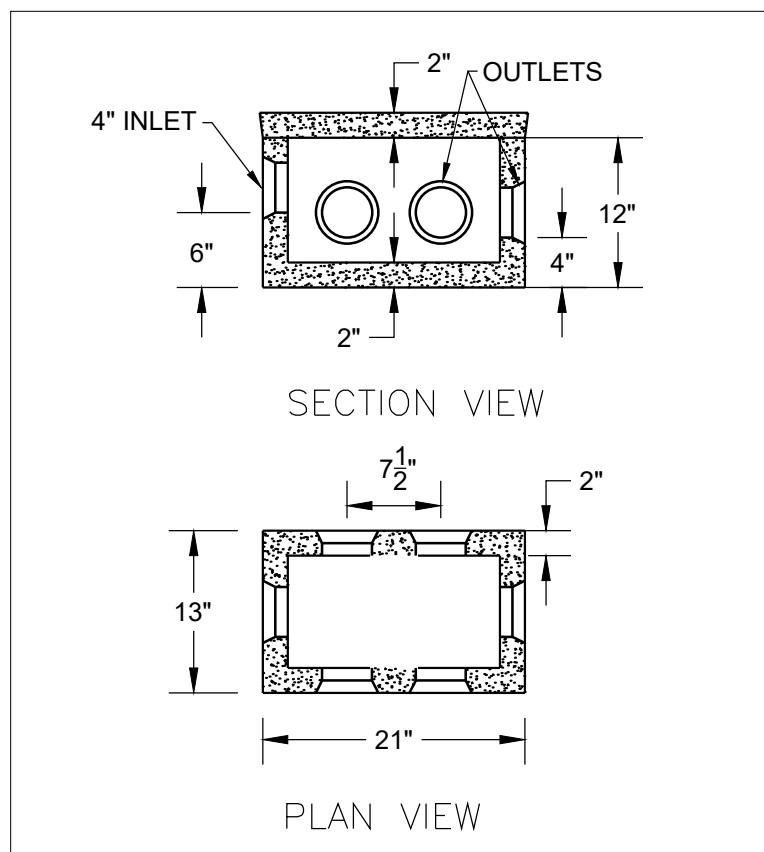
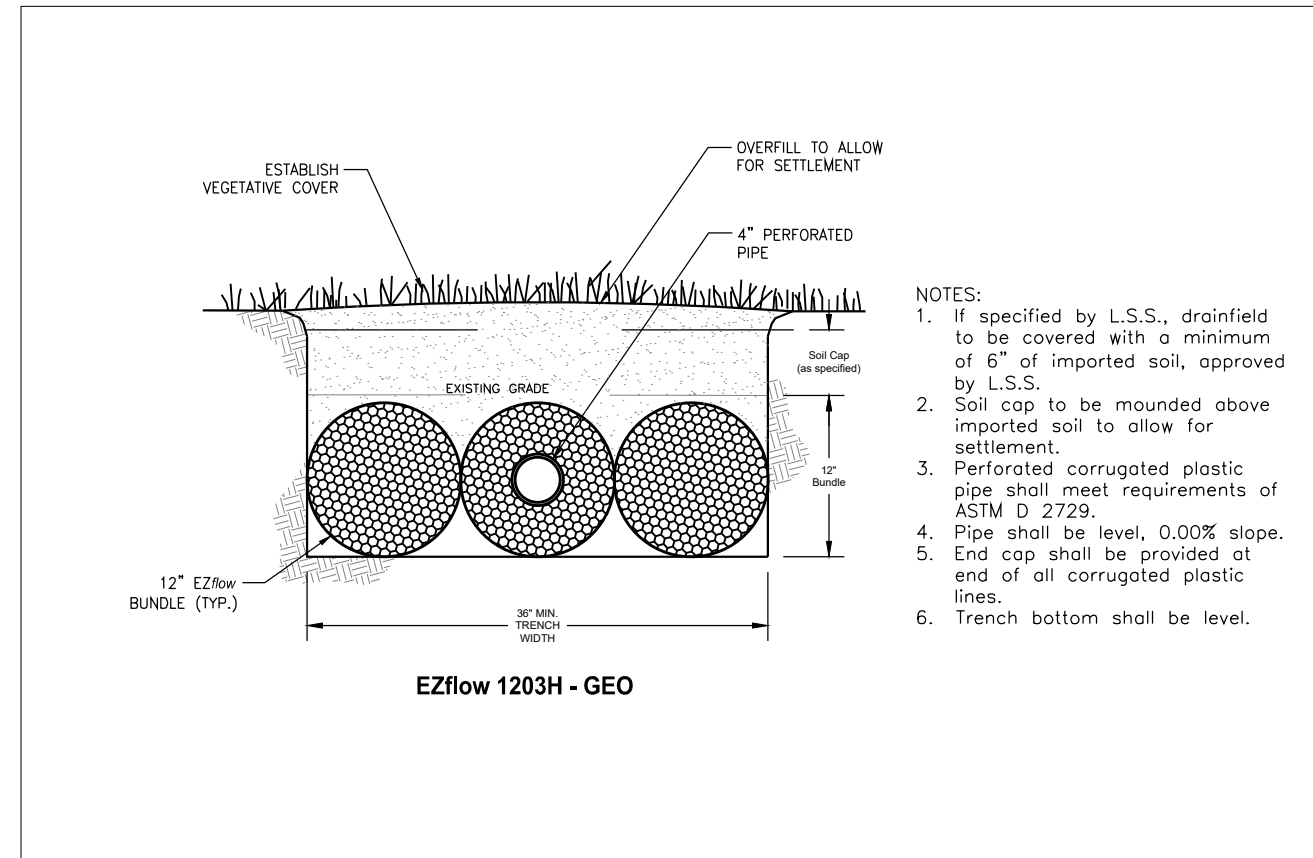
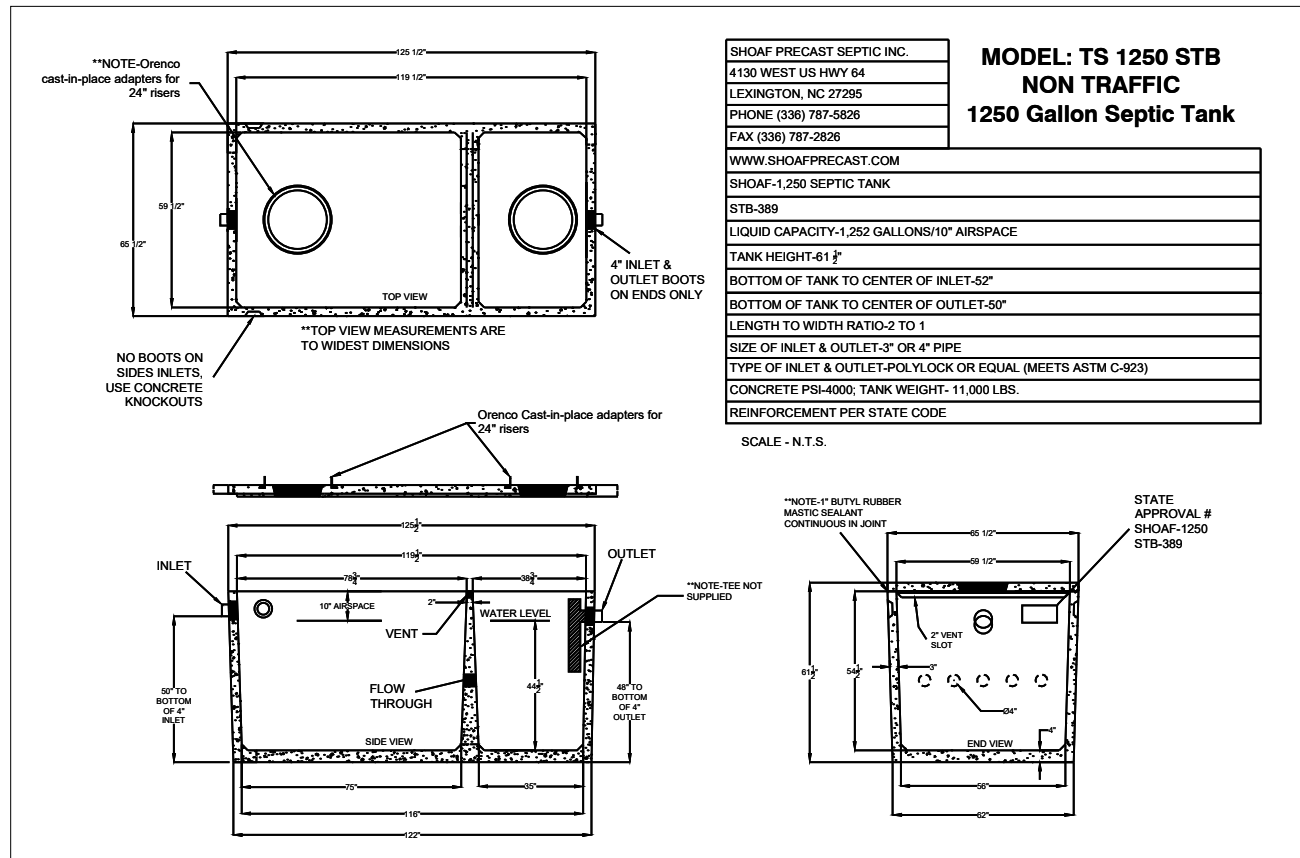
System Layout

SOURCE: Agri-Was

SOURCE: Agri-Waste Technology, Inc.

REV.	ISSUED DATE	DESCRIPTION
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WW-3



- NOTES

1. Installation to follow all NC DHHS and Harnett County applicable rules and regulations.
2. AWT to perform construction inspections and final system certification.
3. Septic Tank to have approved effluent filter.
4. Contractor to abide by all safety regulations during system installation.
5. Contractor shall backfill around all access areas such that storm water is shed away from potential entry points.
6. Invert elevations of all components to be verified in field by contractor to insure proper operation.
7. All system piping to be SCH40 PVC (except where noted).
8. All gravity elbows to be long radius or long sweeping type elbows.
9. Actual installation and placement of treatment system to be overseen by Contractor.
10. Tank hole to be compacted with tamping machine.
11. Contractor to seed and/or mulch disturbed areas to coincide

- with existing landscape. Area shall not be left with uncovered soil.
12. All risers to have cast-in-place tank adapters and be single-piece riser. Risers to extend 6" above soil surface and be designed to prevent surface water inflow.
 13. Backfill around tank(s) shall be gravel or tank hole shall be over-excavated a minimum of 2' in all directions to allow for mechanical tamping of backfill.
 14. All penetrations to be sealed.
 15. Contractor to adjust tank placement to meet site constraints.

REV.	ISSUED DATE	DESCRIPTION
SHEET TITLE		
Detail Sheet		
DRAWN BY: T. Bostic		CREATED ON: 05/05/2025
REVISED BY: ####		REVISED ON: ####
RELEASED BY: ####		RELEASED ON: ####
DRAWING NUMBER		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/20/2025

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 Hartsfield & Nash Agency, Inc. 10405 Ligon Mill Rd., Ste H Wake Forest NC 27587	CONTACT NAME: Connie Garkalns PHONE (A/C. No. Ext): 984-235-4273 FAX (A/C. No): 919-556-8758 E-MAIL ADDRESS: connie@hartsfield-nash.com
INSURED Agri-Waste Technology Inc 501 N. Salem St Ste 203 Apex NC 27502	INSURER(S) AFFORDING COVERAGE INSURER A: Selective Insurance Company of INSURER B: Accident Fund INSURER C: Evanston Insurance Company INSURER D: INSURER E: INSURER F:
License#: 1000009111 AGRITEC-01	NAIC # 39926 10166 35378

COVERAGES**CERTIFICATE NUMBER:** 1304989694**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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			S 2253659	1/18/2025	1/18/2026	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			S 2253659	1/18/2025	1/18/2026	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			S 2253659	1/18/2025	1/18/2026	EACH OCCURRENCE \$2,000,000 AGGREGATE \$2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	100003072	1/18/2025	1/18/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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
C	Prof & Pollution Liability Leased & Rented			MKLV3ENV104794 S 2253659	8/22/2024 1/18/2025	8/22/2025 1/18/2026	Each Claim 5,000,000 Equipment 25,000

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

CERTIFICATE HOLDER**CANCELLATION**Artisan Custom Homes
21016 Catawba Avenue
Cornelius NC 28031
USA

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

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