



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: JSJ Builders Inc
 Mailing address: 1135 Robeson St. City: Fayetteville State: NC Zip: 28305
 Phone: 910-483-0796 Email: kevinshortridge@gmail.com

Authorized Onsite Wastewater Evaluator Information:

Name: John Kase Certification #: 10060E
 Mailing address: PO Box 9321 City: Fayetteville State: NC Zip: 28311
 Phone: 910-539-5439 Email: john@southeasternsoil.com



Site Location Information:

Site address: 423 Black Duck Lane, Lillington, NC 27546
 Tax parcel identification number or subdivision lot, block number of property: _____
 Parcel # 010527001255 Ducks Landing S/D Lot 100 County: Harnett

System Information:

Wastewater System Type: IIIb-Pump to Accepted Trenches with 25% reduction
 Daily Design Flow: 480 GPD
 Saproli 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 2 day of June, 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 2 day of June, 2030.

Signature of Authorized Onsite Wastewater Evaluator: John Kase

I hereby certify that I am a duly licensed and qualified professional engineer or architect, and I am not providing any other services to the owner of this project.

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: _____

RCMS

Date: 7/24/25