

PART 3: **Authorization to Operate (ATO)**

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

LHD USE ONLY: Initial submittal of request for ATO received: _____ by _____
Date *Initials*
 Date of Post-construction Conference: _____


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

1. Signed and sealed copy of the AOWE's report that includes the information in G.S. 130A-336.2(k) ☒ Yes ☐ No
2. Operation and management program ☒ Yes ☐ No
3. Fee (as applicable) ☐ Yes ☒ No
4. Notarized letter documenting Owner's acceptance of the system from the AOWE ☐ Yes ☒ No
5. On-site Wastewater Contractor name: DAVID BRANTLEY & SONS License number: 4608
- Mailing address: 37 Pine Ridge Rd City: Zebulon State: NC Zip: 27597
- Telephone number: 919 673 2160 E-mail Address: cory@brantleyseptic.com
6. Proof of Errors and Omissions or other appropriate liability insurance for the On-site Wastewater Contractor is attached and includes the name of the insurer, name of the insured, and the effective dates of coverage. ☒ Yes ☐ No


Attestation by the Owner for Authorization to Operate

I, KEVIN SNODGRIDGE hereby attest that all items indicated above have been provided to the
Print name of Owner
HARNETT County LHD and the system shall meet applicable federal, State, and local laws,
 regulations, rules, and ordinances.

regulations, rules, and ordinances.



Signature of Owner



Date

This section for LHD Use Only.

LHD Review of required information for the ATO

☐ INCOMPLETE

Based upon review of information submitted in the Section above, the following items are missing from the information required for an Authorization to Operate for an AOWE permit:

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

<i>Date</i>	<i>Email, FAX, USPS, Hand-delivered</i>
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 Print name of authorized Agent of the LHD Signature of authorized Agent of the LHD Date

☐ COMPLETE

Based upon review of information submitted in the Section above, this Authorization to Operate is hereby issued in accordance with G.S. 130A-336.2(m).

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

Date Email, FAX, USPS, Hand-delivered

Print name of authorized Agent of the LHD _____ Signature of authorized Agent of the LHD _____ Date _____

ISSUANCE OF CERTIFICATE OF OCCUPANCY: Once the LHD determines completeness based upon the ATO submission, the owner may apply to the local permitting agency for permanent electrical service to a residence, place of business or place of public assembly pursuant to G.S. 130A-339.



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 AdministratorPHONE
(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 SUBR INSD 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"/> PROJECT <input type="checkbox"/> LOC OTHER:		35506185	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	<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		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	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTIONS 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) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	WC850-0050098-2025A	7/2/2025	7/2/2026	<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
A	Contractors Equipment		35508165	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?

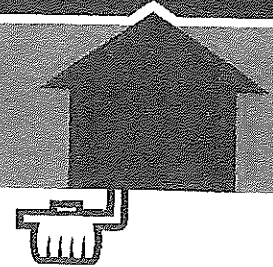
*"Keep this information
for future reference
to help you
properly maintain
your septic system"*

*"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: 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: 493 Black Duck Lane , Lillington, NC 27546

Tax parcel identification number or subdivision lot, block number of property: _____

Parcel # 010527001260 Ducks Landing S/D Lot 105 County: Harnett

System Information:

Wastewater System Type: 1lb-Gravity to Accepted trenches with 25% reduction

Daily Design Flow: 360

Saprolite System: ☐ Yes ☒ No Subsurface Operator Required: ☐ Yes ☒ No

Water Supply Type: ☐ Private Well ☐ Public Water Supply ☒ Spring Other: _____

Facility Type:

☒ Residential 3 # Bedrooms 6 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 10 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 10 day of June, 2030.

Signature of Authorized Onsite Wastewater Evaluator: John Kase

Signature must be in blue ink. Do not use a computer-generated signature. Onsite Wastewater Evaluator Seal and Onsite Wastewater Evaluator Certificate must be attached to this NOI.

Signature of Owner or Legal Representative: [Signature]

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 mlke@southeasternsoil.com

June 10, 2025

Kevin Shortridge
JSJ Builders, Inc.
1135 Robeson Street
Fayetteville, NC 28305

Re: Soil/site evaluation for subsurface waste disposal (GS 130A-335(A2)/SL 2022-11), 493 Black Duck Lane, Lillington, NC 27546, Parcel Number 01027001260, Lot 105, Ducks Landing Subdivision, Harnett County, North Carolina

Dear Mr. Shortridge,

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 (3-bedroom home). All ratings and determinations were made in accordance with "Laws and Rules for Wastewater Treatment and Dispersal Systems, 15A NCAC 18E". **This LSS evaluation is being submitted to meet the requirements of GS 130A-335(a2)/SL 2022-11.**

The soil evaluation was completed on May 29, 2025. Hand auger borings were advanced under moist soil conditions. The site essentially lies on a linear slope landscape (2% slope). Soil borings conducted in most of this area consisted of 20 or more inches of loamy sand underlain by clay loam to 48 or more inches below the soil surface. Soil wetness and/or parent material (greater than 50%) was not observed shallower than 48 inches below the soil surface in the initial system and 48 inches in the 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 gravity flow with parallel distribution to Accepted 25% reduction subsurface waste disposal drainfield (0.4 gal/day/ft² LTAR; initial system). There is enough suitable soil area to allow for gravity flow with serial distribution to Accepted 25% reduction subsurface septic system repair (0.4 gal/day/ft²). A map showing the approximate location of the site and proposed septic layout accompanies this report. If gravity flow cannot be achieved then a design revision may be required for a pump system. **[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.]**

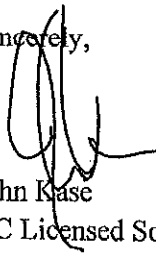
Design Summary

- Initial System: Gravity flow with serial distribution with Accepted 25% Reduction Trenches (225', see septic layout detail)
- 360 gal/day flow rate (3BR)
- 24" maximum trench depth as measured on the downhill side
- 0.4 gpd/ft² LTAR
- 1000-gallon septic pump tank (**certified watertight**)
- Repair System: Gravity flow with serial distribution with Accepted 25% Reduction Trenches (225', see septic layout design detail)
- 24" maximum trench depth as measured on the downhill side
- 0.4 gpd/ft² LTAR
- 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

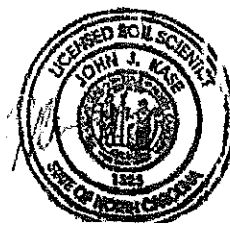
During site construction, it is important not to impact and suitable or provisionally suitable soil areas with activities such as excavation or filling. Only the vegetation should be removed in the areas of the proposed septic drainfields to prevent any disturbance of naturally occurring soil. We recommend 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,



John Kase
 NC Licensed Soil Scientist #1323
 NC Authorized Wastewater Evaluator #10060E
 NC REHS #1785



SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOC., INC.

PROPOSED SUBSURFACE WASTE DISPOSAL SYSTEM DETAIL SHEET

SUBDIVISION: Ducks Landing

LOT 105

INITIAL SYSTEM: Accepted 25% Reduction

REPAIR: Accepted 25% Reduction

DISTRIBUTION: Gravity Parallel

DISTRIBUTION Gravity Serial

BENCHMARK: 100.0

LOCATION H20 Meter - 3.3

NO. BEDROOMS: 3

LTAR 0.4 gpd/ft^2

SEPTIC TANK SIZE 1000 Gallons

PUMP TANK SIZE N/A

	<u>LINE</u>	<u>FLAG COLOR</u>	<u>ELEVATION(FT)</u>	<u>LENGTH(FT)</u>
Initial	1	White	98	58
	2	Blue	97.8	58
	3	Red	97.6	58
	4	White	97.2	58
				Total-232
Repair	5	Blue	96.9	59
	6	Red	96.3	58
	7	White	96	60
	8	Yellow	95.4	60
				Total-238
	9	Red	94.8	60 (Not Used)

BY John Kase

DATE 5-28-25

TYPICAL PROFILE

THERE SHALL BE NO GRADING,

CUTTING, LOGGING OR OTHER SOIL

DISTURBANCE IN SEPTIC AREA

HEALTH DEPARTMENT USE ONLY.

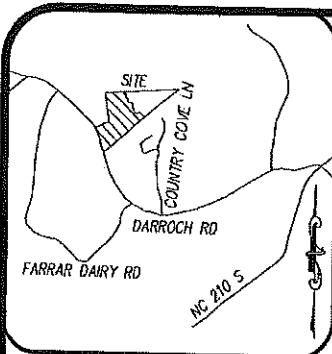
DESIGNS DO NOT GURANTEE FUNCTIONALITY

Initial

0-20	LS GR	VFR/NS/NP
20-48	CL SBK	FR/SS/P

Repair

0-33	LS GR	VFR/NS/NP
33-48	CL SBK	FR/SS/P



VICINITY MAP (NTS)

LEGEND:

EIP - EXISTING IRON PIPE
 EIB - EXISTING IRON BAR
 BEIP - BENT IRON PIPE
 BEIB - BENT IRON BAR
 CM - CONCRETE MONUMENT
 NIP - NEW IRON PIPE SET
 CATV - CABLE TV BOX
 EB - ELECTRIC BOX
 TEL - TELEPHONE PEDESTAL
 PP - POWER POLE
 OHL - OVERHEAD LINE
 LP - LIGHT POLE
 WM - WATER METER
 WV - WATER VALVE
 CO - SEWER CLEAN-OUT
 SW - SIDEWALK
 PO - PORCH
 N/F - NOW OR FORMERLY
 CYRD - COVERED
 CB - CATCH BASIN
 EOP - EDGE OF PAVEMENT
 BOC - BACK OF CURB

IMPERVIOUS SURFACE TABLE	
HOUSE	2,321 S.F.
DRIVEWAY	592 S.F.
PATIO	64 S.F.
SIDEWALKS	63 S.F.
TOTAL IMPERVIOUS AREA	3,040 S.F.

SETBACKS:

P.B. 2025, PG. 268

FRONT	35'
SIDE	10'
REAR	25'
SIDE STREET	20'

NOTES:

1. ALL DISTANCES ARE HORIZONTAL GROUND DISTANCES IN U.S. SURVEY FEET UNLESS OTHERWISE NOTED.

2. AREAS SHOWN HEREON WERE COMPUTED USING THE COORDINATE METHOD.

3. LINES NOT SURVEYED ARE SHOWN AS DASHED LINES FROM INFORMATION REFERENCED ON THE FACE OF THIS PLAT.

4. PROPERTY MAY BE SUBJECT TO ANY/ALL EASEMENTS AND RESTRICTIONS OF RECORD. THIS SURVEY IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND OR DEEDED AND HAS BEEN PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT. A NORTH CAROLINA LICENSED ATTORNEY-AT-LAW SHOULD BE CONSULTED REGARDING CORRECT OWNERSHIP, WIDTH AND LOCATION OF EASEMENTS, AND OTHER TITLE QUESTIONS REVEALED BY TITLE EXAMINATION.

5. THIS PARCEL IS NOT LOCATED WITHIN A FLOOD HAZARD ZONE AS INDICATED ON CID NO. 370328 PANEL 0526, SUFFIX J, HARNETT COUNTY WITH AN EFFECTIVE DATE OF 10/03/2025.

CERTIFICATE OF ACCURACY & MAPPING

I NICHOLAS M. FRENCH PLS CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL FIELD SURVEY DONE UNDER MY SUPERVISION, AND THAT THE ERROR OF CLOSURE AS COMPUTED BY CO-ORDINATES IS LESS THAN 1:10,000.

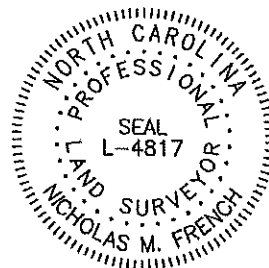
PRELIMINARY

NICHOLAS M. FRENCH, PLS L-4817

DATE

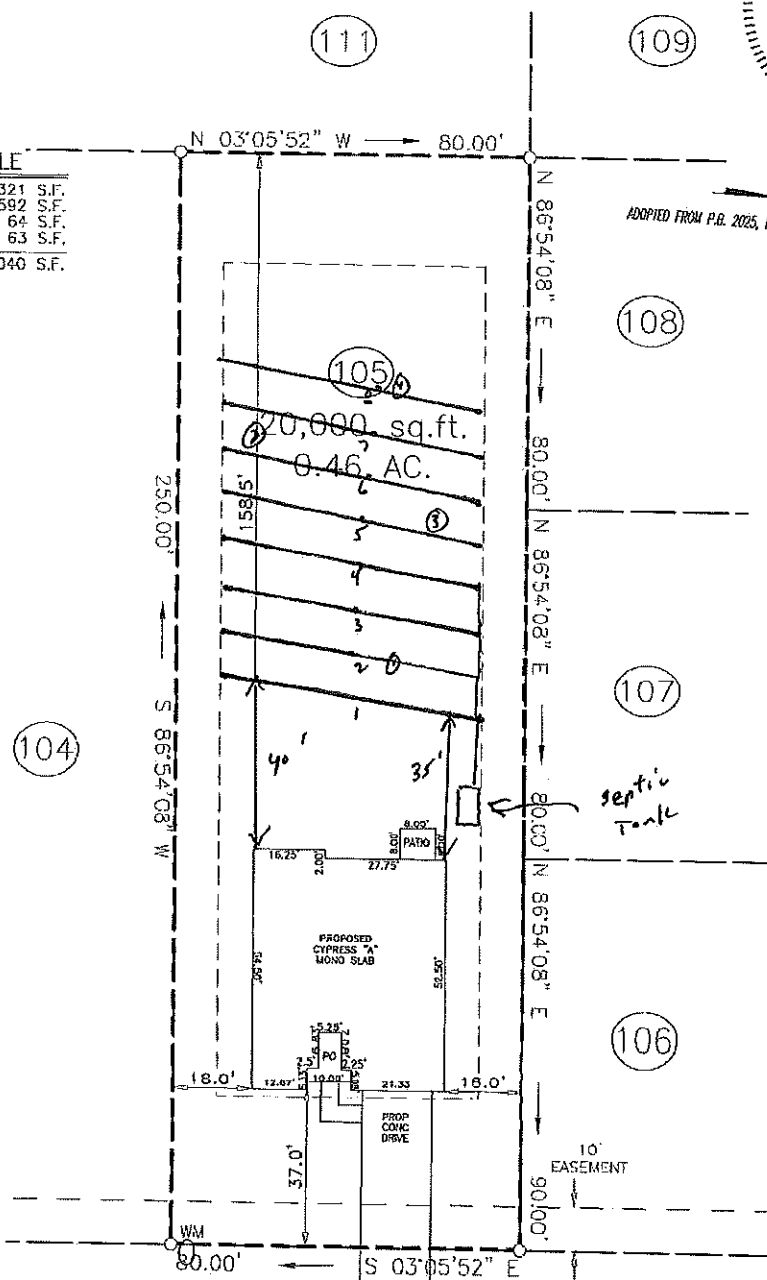
THIS MAP IS ONLY INTENDED FOR THE PARTIES AND PURPOSES SHOWN. THIS MAP IS NOT FOR RECORDATION. NO TITLE REPORT PROVIDED. ANY VISIBLE ENCROACHMENTS ARE SHOWN HEREON.

THIS MAP MAY NOT BE A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS AND HAS NOT BEEN REVIEWED FOR COMPLIANCE WITH RECORDING REQUIREMENTS FOR PLATS.



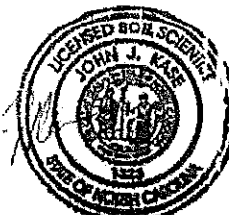
ADOPTED FROM P.B. 2025, PG. 268

AS BUILT
 9/19/25



REVISION: HOUSE UPDATED PER REQUEST 07-14-2025

SOUTHEASTERN SOIL & ENVIRONMENTAL ASSOCIATES, INC.			SOIL/SITE EVALUATION SHEET				Sheet #: 1	
OWNER/APP. NAME:		JSJ Builders Inc.			SUBDIV./LOT#		Ducks Landing Lot 105	
LOCATION OF SITE:		493 Black Duck Lane, Lillington						
COUNTY:		Harnett		PROPERTY ID #:		#010527001260		DATE EVALUATED:
PROPOSED FACILITY:		SFR		PROPOSED DESIGN FLOW (.0400):		360 gpd		PROPERTY SIZE
WATER SUPPLY:		Public		WATER SUPPLY SETBACK:		10'		
TYPE OF WASTEWATER:			Domestic		EVALUATION METHOD:			Auger
P R O F I L E #	.0502 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY		OTHER PROFILE FACTORS			.0509 PROFILE CLASS & LTAR
			.0503 STRUCTURE/ TEXTURE	.0503 CONSISTENCE/ MINERALOGY	.0504 SOIL WETNESS/ COLOR	.0505 SOIL DEPTH	.0506 SAPRO CLASS	
1	L	0-20	LS - GR	VFR/NS/NP	48	NOT OBSER VED	NOT OBSER VED	S - 0.4
		20-48	CL-SBK	FRIABLE/SS/P				
	2%							
	.0502(d) SLOPE CORRECTION							
	0.7"							
2	L	0-33	LS - GR	VFR/NS/NP	48	N.O.	N.O.	S - 0.5
		33-48	CL-SBK	FRIABLE/SS/P				
	2%							
	.0502(d) SLOPE CORRECTION							
	0.7"							
3	L	0-33	LS - GR	VFR/NS/NP	48	N.O.	N.O.	S-0.5
		33-48	CL-SBK	FRIABLE/SS/P				
	2%							
	.0502(d) SLOPE CORRECTION							
	0.7"							
4	L	0-24	LS-GR	VFR/NS/NP	48	N.O.	N.O.	S-0.4
		24-48	CL - SBK	FRIABLE/S/P				
	2%							
	.0502(d) SLOPE CORRECTION							
	0.7"							
DESCRIPTION:		INITIAL SYSTEM	REPAIR SYSTEM	SITE CLASSIFICATION (.0509):		Suitable		
Available Space		Suitable	Suitable	EVALUATED BY:		John Kase		
System Type(s):		25% Reduction	25% Reduction	OTHER(S) PRESENT:				
Site LTAR:		0.400	0.400					
Maximum Trench		24"	24"					
Saprolite System:		No	No					
Comments:		Trench bottoms depth measure on downslope side of trench..						



STANDARD FORM NO. 64

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL LTAR	SAPROLITE	LPP LTAR	MINERALOGY/CONSISTENCE	
CC (Concave Slope)	I	S (Sand)	0.8 - 1.2	0.6 - 0.8	0.4 - 0.6	SEXP (Slightly Expansive) EXP (Expansive)	
CV (Convex Slope)		LS (Loamy Sand)		0.5 - 0.7			
D (Drainage Way)							
FP (Flood Plain)	II	SL (Sandy Loam)	0.6 - 0.8	0.4 - 0.6	0.3 - 0.4	MOIST VFR (Very Friable)	
FS (Foot Slope)		L (Loam)		0.2 - 0.4			
H (Head Slope)						FR (Friable)	
L (Linear Slope)	III	SiL (Silt Loam)	0.3 - 0.6	0.1 - 0.3	0.15 - 0.3	FI (Firm)	
N (Nose Slope)		SCL (Sandy Clay Loam)		0.05 - 0.15*		EFI (Extremely Firm)	
R (Ridge/Summit)		CL (Clay Loam)		N/A		0.15 - 0.3	WET NS (Non-Stick)
S (Shoulder Slope)		SiCL (Silty Clay Loam)					
T (Terrace)		Si (Silt)					
TS (Toe Slope)						SS (Slightly Sticky)	
	IV	SC (Sandy Clay)	0.1 - 0.4	N/A	0.05 - 0.2	S (Sticky)	
		SiC (Silty Clay)				VS (Very Sticky)	
		C (Clay)				NP (Non-plastic)	
						SP (Slightly Plastic)	
	O (Organic)		N/A	N/A	N/A	P (Plastic)	
						VP (Very Plastic)	
NOTES:							

NOTES:

SAPROLITE*	*Sandy clay loam saprolite can only be used with advanced pretreatment in accordance with 15A NCAC
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HORIZON DEPTH	In inches below natural soil surface
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DEPTH OF FILL In inches from land surface

[illegible]

SAPROLITE S (suitable) or U (unsuitable)

SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - re
CLASSIFICATION	S (Catholac) and H (Hollister)

CLASSIFICATION	S (Suitable) or U (Unsuitable)
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Long-term Acceptance Rate (LTAR): gal/day/ft2



Travelers 1st Choice+®

**DESIGN PROFESSIONALS LIABILITY COVERAGE
DECLARATIONS**

POLICY NO. 108840737

Travelers Casualty and Surety Company of America
Hartford, Connecticut
(A Stock Insurance Company, herein called the Company)

Important note: This is a claims-made policy. To be covered, a claim must be first made against an insured during the policy period or any applicable extended reporting period.

This policy is composed of the Declarations, the Professional Liability Coverage, the Professional Liability Terms and Conditions, and any endorsements attached thereto.

ITEM 1	NAMED INSURED: SOUTHEASTERN SOIL AND ENVIRONMENTAL ASSOCIATES DBA: Principal Address: PO BOX 9321 FAYETTEVILLE, NC 28311-9084
ITEM 2	POLICY PERIOD: Inception Date: May 1, 2025 Expiration Date: May 1, 2026 12:01 A.M. standard time both dates at the Principal Address stated in ITEM 1.
ITEM 3	ALL NOTICES PURSUANT TO THE POLICY MUST BE SENT TO THE COMPANY BY EMAIL, FACSIMILE, OR MAIL AS SET FORTH BELOW: Email: BSIclaims@travelers.com Fax: 1-888-460-6622 Mail: Travelers Bond & Specialty Insurance Claim P.O. Box 2989 Hartford, CT 06104-2989 Overnight Mail: Travelers Bond & Specialty Insurance Claim One Tower Square, MN06 Hartford, CT 06183 For questions related to claim reporting or handling, please call 1-800-842-8496.

