

PIN/Lot Identifier: Lot 71Issued To: Ballentine AssociatesProperty Location: Olive Branch Rd. Fuquay Varina, NC 27526Subdivision: Birchwood Trails Lot #: 71 Block: \_\_\_\_\_ Section: \_\_\_\_\_LSS Report Provided: Yes ☒ No ☐If yes, name and license number of LSS: Jeff Vaughan (1227)New ☒ Repair ☐ Expansion ☐ System Relocation ☐Proposed Structure: SFR (4-bedroom)Proposed Wastewater System Type: Accepted (Initial) PPBPS (T&J Panel System) (Repair)Fill System: ☐ Yes ☒ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area please provide a fill plan)Proposed Design Daily Flow: 480 GPD Proposed LTAR (Initial): 0.4 Proposed LTAR (Repair): 0.4Design Wastewater Strength: ☒ domestic ☐ high strength ☐ industrial processNumber of bedrooms: 4 Number of Occupants: 8 Other: \_\_\_\_\_Pump Required: ☐ Yes ☐ No ☒ May be required based upon final location and elevations of facilitiesArtificial Drainage Required: ☐ Yes ☒ No If yes, please specify details: \_\_\_\_\_Type of Water Supply: ☐ Private well ☐ Public well ☒ Municipal Supply ☐ Spring ☐ Other: \_\_\_\_\_Drainfield location meets requirements of Rule .1945: Yes ☒ No ☐Drainfield location meets requirements of Rule .1950: Yes ☒ No ☐Permit valid for: ☒ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]Permit conditions:  
\_\_\_\_\_  
\_\_\_\_\_Licensed Soil Scientist Print Name: Jeff VaughanLicensed Soil Scientist Signature:  Date: 06/01/2023

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

\*See attached site sketch\*

***This Section for Local Health Department Use Only***Initial submittal received: 8/25/25 by 01  
Date InitialsPermit Number: SFD2508-0065

G.S. 130A-335(a4) states the following: 'If a local health department fails to act on an application for an improvement permit submitted pursuant to subsection (a3) of the section within 10 business days of receipt of a complete application, the local health department shall issue the improvement permit.'

In accordance with G.S. 130A-335(a3) the improvement permit application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing:

Copies of this were sent to the LSS and the Owner on \_\_\_\_\_  
Date

State Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_

☐ Denied (See attached report.)Copies of this were sent to the LSS and the Owner on \_\_\_\_\_  
Date

State Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_

☒ CompleteState Authorized Agent: RGSS Date of Issuance: 8/27/25

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2), (a3), and (a4) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 8/27/30

\*See attached site sketch\*

## CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)/SL2022-11

PIN/Lot Identifier: Lot 71Issued To: Ballentine AssociatesProperty Location: Olive Branch Rd. Fuquay Varina, NC 27526AOWE/PE Plans/Evaluations Provided: Yes ☒ No ☐ If yes, name and license number of AOWE/PE: Jeff Vaughan, 10003EFacility Type: SFR (4-bedroom)☒ New ☐ Expansion ☐ Repair System Relocation ☐Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ NoType of Wastewater System\*\* Accepted (Initial) PPBPS (T&J Panel System) (Repair)Design Daily Flow: 480 GPD Wastewater Strength: ☒ domestic ☐ high strength ☐ industrial processSession Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☒ No**Installation Requirements/Conditions**Septic Tank Size: 1200 gallons Total Trench/Bed Length: 300 feet Trench/Bed Spacing: 9 feet on centerDrainfield square footage: 900 Trench/Bed Width: 36 inches LTAR: 0.4 gpd/ft<sup>2</sup>Soil Cover: \_\_\_\_\_ inches Slope Adjusted Maximum Trench/Bed Depth: 22 inches

Aggregate Depth: \_\_\_\_\_ inches above pipe \_\_\_\_\_ inches below pipe \_\_\_\_\_ inches total

Pump Tank Size (if applicable): 1,250 gallons Requires more than 1 pump? ☐ Yes ☒ No

Pump Requirements: \_\_\_\_\_ ft. TDH vs. \_\_\_\_\_ GPM Grease Trap Size (if applicable): \_\_\_\_\_ gallons

Distribution Method: ☐ Serial ☐ D-Box or Parallel ☒ Pressure Manifold(s) ☐ LPP ☐ Other: \_\_\_\_\_Artificial Drainage Required: Yes ☐ No ☒ If yes, please specify details: \_\_\_\_\_**Legal Agreements** (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)Multi-party Agreement Required [.1937(h)]: Yes ☐ No ☒Easement, Right-of-Way, or Encroachment Agreement Required [.1938(j)]: ☐ Yes ☒ NoDeclaration of Restrictive Covenants: ☐ Yes ☒ No**\*\*If applicable:***I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.*

Owner/Legal Representative Print Name: \_\_\_\_\_

Owner/Legal Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Pre-Construction Conference Required: Yes ☐ No ☒

Conditions: \_\_\_\_\_

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

AOWE/PE Print Name: Jeff VaughanAOWE/PE Signature: Jeff Vaughan Date: 06/01/2023

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a5).

\*See attached site sketch\*





County: \_\_\_\_\_

***This Section for Local Health Department Use Only***

Initial submittal received: 8/25/25 by CS  
Date Initials

Permit Number: SFD 2508-0065

G.S. 130A-335(a6) states the following: 'If a local health department fails to act on an application for a construction authorization submitted pursuant to subsection (a5) of the section within 10 business days of receipt of a complete application, the local health department shall issue the construction authorization.'

In accordance with G.S. 130A-335(a5) the construction authorization application is:

☐ Incomplete (If box is checked, information in this section is required.)

The following items are missing: \_\_\_\_\_

Copies of this were sent to the AOWE/PE and the Owner on \_\_\_\_\_  
Date

State Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_

☐ Denied (See attached report.)

Copies of this were sent to the AOWE/PE and the Owner on \_\_\_\_\_  
Date

State Authorized Agent: \_\_\_\_\_ Date: \_\_\_\_\_

☒ Complete

State Authorized Agent: [Signature] Date of Issuance: 8/27/25

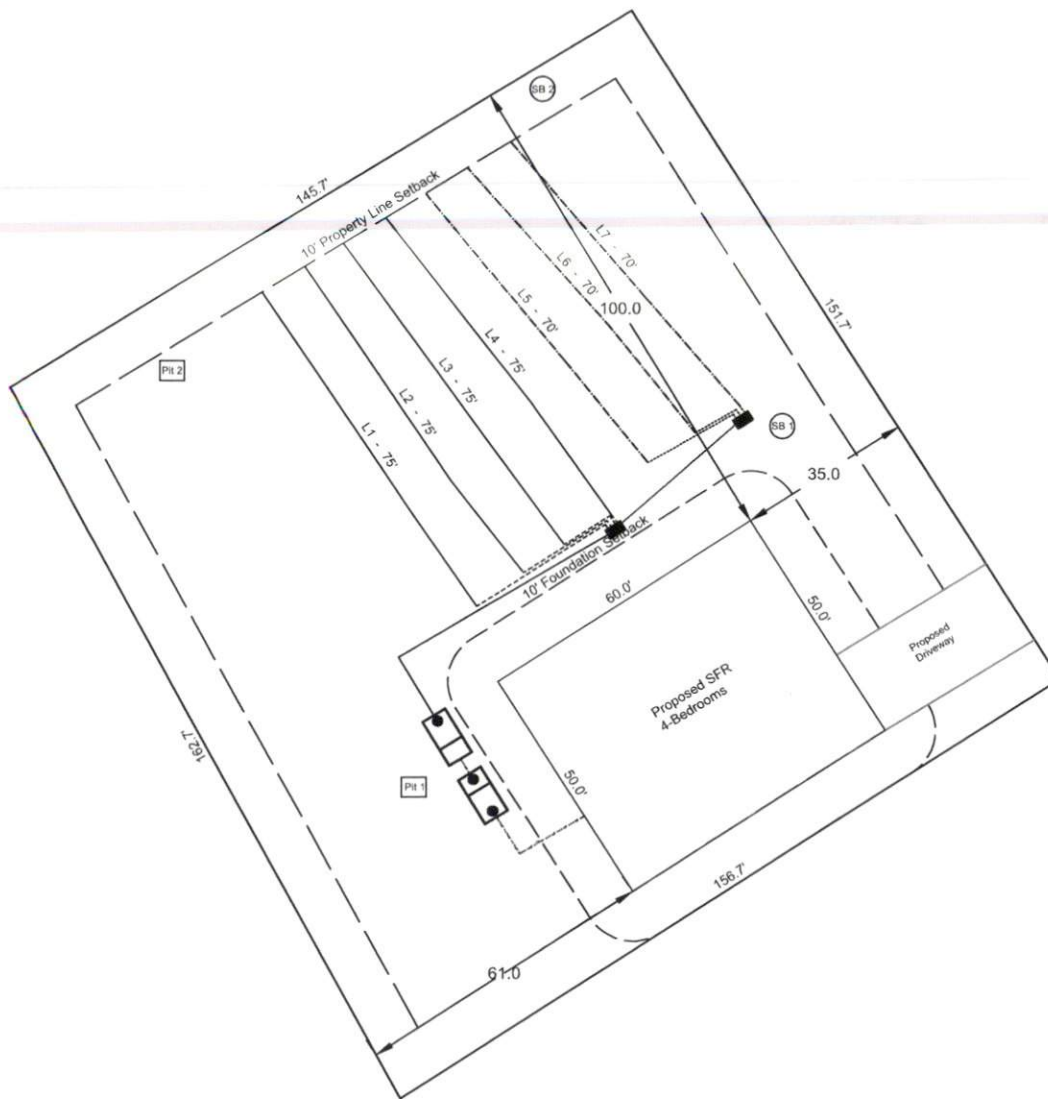
This Construction Authorization is issued pursuant to G.S. 130A-335(a2), (a5), and (a6) using the signed and sealed plans or evaluations attached here. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes, or if information submitted in the application was falsified, inaccurate or misleading. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. The location and identification of all property lines, easements, water lines, and other appropriate utilities shall be the responsibility of the owner. Final landscaping shall be constructed to divert water and establish vegetative cover.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to plans, evaluations, preconstruction conference findings, submittals, or actions from a person licensed pursuant to Chapter 89C of the General Statutes as a licensed engineer or a person certified pursuant to Article 5 of Chapter 90A of the General Statutes as an Authorized On-Site Wastewater Evaluator in GS 130A-335(a2), (a5), and (a7). The Department, the Department's authorized agents, and the local health departments shall be responsible and bear liability for their actions and evaluations and other obligations under State law or rule, including the issuance of the operations permit pursuant to GS 130A-337.

Construction Authorization Expiration Date: 8/27/30

\*See attached site sketch\*

0 25 50 Feet



# PROPERTY LAYOUT

SOURCE: AWT, Inc. (Boundary survey performed by Ballentine Associates)

**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

Ballentine Associates, PA  
Birchwood Trails - Lot 71

Project Location:  
Office Branch Rd  
Fayetteville, NC 27526  
Harnett County  
PIN ---

Project Owner:  
Ballentine Associates, PA  
221 Providence Rd  
Chapel Hill, NC 27514  
919-929-0467  
260ns@ballentmeassociates

NC ONSITE WASTEWATER  
EVALUATOR SEAL



REV. ISSUED DATE DESCRIPTION

SHEET TITLE

Property Layout

DRAWN BY: H. Clapp	CREATED ON: 6/8/2023
REVISED BY: ####	REVISED ON: ####
RELEASED BY: ####	RELEASED ON: ####

DRAWING NUMBER  
**WW-2**