SF0 2509-0059



North Carolina Onsite Wastewater Contractor Inspector Certification Board Authorized Onsite Wastewater Evaluator Permit Option for Non-Engineered Systems Notice of Intent (NOI) to Construct

X New Expansion Repair Relocation Relocation of Repair Area	
Owner or Legal Representative Information:	
Name: BVA ENTERPRISES INC & DBA BVA BUILDERS INC	
Mailing address: 1300 BENSON RD STE 110 City: GARNER State: NC Zip: 27529	
Phone: 919-389-6767 Email: ecampbell@bvabuilders.com	
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Authorized Onsite Wastewater Evaluator Information:	ANTE STATE
Name: Steve Bristow Certification #: 10012E	ER
Mailing address: 920 Garner Rd City: Selma State: NC Zip: 27576	THE THEFT
Phone: 919-906-4737 Email: stevebristow57@gmail.com Les buter	
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Site Location Information:	
Site address: 0 CHARTES ST FUQUAY VARINA NC 27576	
Tax parcel identification number or subdivision lot, block number of property: 0613-76-9380.000	
LOT 17 CAPTAIN'S LANDING County: HARNETT	
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System Information: Wastewater System Type: IIId	
Daily Design Flow: 360 GPD	
Saprolite System: Yes X No Subsurface Operator Required: Yes X No	
Water Supply Type:Private Well X Public Water SupplySpringOther:	
Facility Type:	
X 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:	
X Plat or Site Plan	
× Evaluation of Soil and Site Features by Licensed Soil Scientist	
Attest: On this the 16 day of September, 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 have adhered to the laws and rules governing onsite wastewater systems in the state of North Carolina.	1
This NOI shall expire on 16 day of September , 2030	
Signature of Authorized Onsite Wastewater Evaluator:	
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	
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.	
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Local Health Department Receipt Acknowledgement: Signature of Local Health Department Representative: Date: 9-23-2	5