SFD 2509-0076

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: Mattamy Homes LLC
Mailing address: 11000 Regency Parkway City: Cary State: NC Zip: 27518
Phone: 919-233-3886 Email: RALEIGHPLANREVIEW@MATTAMYCORP.COM

Authorized Onsite Wastewater Evaluator Information:
Name: David E. Meyer Certification #: 10037E
Mailing address: 4114 Laurel Ridge Drive City: Raleigh State: NC Zip: 27612
Phone: 919-210-6547 Email: PROTOCOLSAMPLING@YAHOO.COM

Site Location Information:
Site address: 81 Calabella Drive (Lot 3)
Tax parcel identification number or subdivision lot, block number of property: 0635-97-9958
County: Harnett

System Information:
Wastewater System Type: II
Daily Design Flow: 480 GPD
Saprolite System: ___ Yes X No Subsurface Operator Required: ___ Yes X No
Water Supply Type: ___ Private Well X Public Water Supply ___ Spring ___ Other: ___

Facility Type:
X 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:
X Plat or Site Plan
X Evaluation of Soil and Site Features by Licensed Soil Scientist

Attest: On this the 17th day of Sept., 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 17th day of Sept., 2026.

Signature of Authorized Onsite Wastewater Evaluator: [signature]

Signature of Owner or Legal Representative: Drew Brody

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: [signature] Date: 10/6/25