

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: Teri Treffzs Name: Drees Homes Company Mailing address: 211 Grandview Drive - Suite 102 City: Ft. Mitchell State: KY Zip: 41017 Phone: 919-256-5478 Email: ttreffzs@dreeshomes.com
Authorized Onsite Wastewater Evaluator Information: Name: Alex Adams Certification #: AOWE# 10021E Mailing address: 1676 Mitchell Road City: Angier State: NC Zip: 27501 Phone: 919-414-6761 Email: alexadams@bcsoil.com
Site Location Information: Site address: Lot #131 (Tobacco Road) 369 Crop Road- Angier, NC 27501 Fax parcel identification number or subdivision lot, block number of property: PIN# 0693-05-6084 County: Harnett
System Information: Accepted Status Wastewater System Type: Accepted Status Daily Design Flow: 480 gallons/day (Engineer Flow Reduction) Saprolite System:YesXNo Subsurface Operator Required:YesXNo Water Supply Type:Private Well X_Public Water Supply SpringOther:
Acility Type: X_Residential 5 # Bedrooms 10 Maximum # of Occupants Business Type of Business and Basis for Flow: Public Assembly Type of Public Assembly and Basis for Flow:
Requird_Attachments: xPlat_or_Siteplanx Evaluation of Soil and Site Features by Licensed Soil Scientist
Attest: On this the 24th day of October 2025 by signature below I hereby attest that the information required to be accluded with this NOI to Construct is accurate and complete to the best of my knowledge. Furthermore, I hereby ttest that I have adhered to the laws and rules governing onsite wastewater systems in the state of North Carolina. This NOI shall expire on 24h day of October 2030.
Signature of Authorized Onsite Wastewater Evaluatoriques Lex Hormo Signature of Owner or Legal Representative: 10/27/2025 1:17:26 PM
Disclosure: The owner may apply for a building permit for the project upon submitting a complete NOI to Construct and the fee dequired (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: Eignature of Local Health Department Representative: Date: 11-10-25