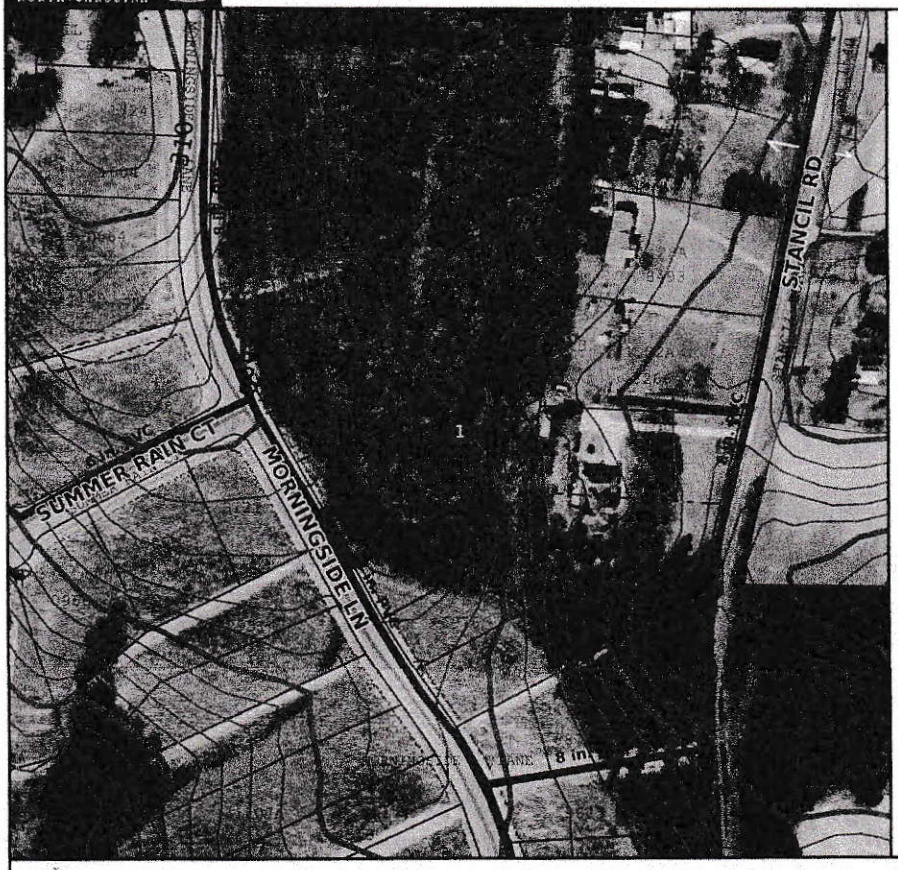
JOHNSTON COUNTY
NORTH CAROLINA

*** DISCLAIMER ***

Johnston County assumes no legal responsibility for the information represented here.



Result 1

id:	13B02008B
Tag:	13B02008B
NCPin:	069400-75-5193
Mapsheet No:	0694
Owner Name 1:	DFC VILLAGE AT TOWNE LAKE, LLC
Owner Name 2:	
Mail Address 1:	14701 PHILIPS HWY STE 300
Mail Address 2:	
Mail Address 3:	JACKSONVILLE, FL 32256-3742
Site Address 1:	205 MORNINGSIDE LN
Site Address 2:	ANGIER, NC 27501-
Book:	06149
Page:	0133
Market Value:	72250
Assessed Acreage:	0.550
Calc. Acreage:	0.550
Sales Price:	84667
Sale Date:	2021-12-29

Scale: 1:2515 - 1 in. = 209.58 feet

(The scale is only accurate when printed landscape on a 8 1/2 x 11 size sheet with no page scaling.)

Johnston County GIS
April 1, 2022

Engineer Option Permit Common Form LHD Reference: 184824

7. Property location (physical address, tax parcel identification number or subdivision lot, block number of the property to be permitted): Weatherford Lot 46; 205 Morningside Lane; PIN: 069400-75-5193
   County Name: Johnston
8. Type of facility: [X] Place of residence No. Bedrooms: 4 No. Occupants: 8 or less
   [ ] Place of business Basis for flow calculation:
   [ ] Place of public assembly Basis for flow calculation:
9. Factors that would affect the wastewater load: Wastewater will be domestic strength as this is a residence.
10. Type and location of proposed wastewater system: Initial system will be a gravity conventional using EZ Flow. System will be located in the rear of the lot. Type IIa.
11. Design wastewater flow: 480 gpd *(For flow > 3,000 gpd and industrial process, duplicate plans shall be sent to the State.)*
    Design wastewater strength: [X] domestic [ ] high strength [ ] industrial process
12. A plat as defined in G.S. 130A-334(7a) is attached: [X] Yes [ ] No
13. Location of proposed or existing wells (drinking water, irrigation, geothermal, groundwater monitoring, sampling, etc.) and any potable and non-potable water conveyance lines is indicated on attached plans and complies with 15A NCAC 18A .1950: [X] Yes [ ] No
    This is a saprolite system. [ ] Yes [X] No
14. Evaluation(s) of soil conditions and site features in accordance with G.S. 130A-335(a1) signed and sealed by a LSS is attached: [X] Yes [ ] No
15. Evaluation of geologic and hydrogeologic conditions signed and sealed by a LG is attached [ ] Yes [X] NA
16. Proposed landscape, site, drainage, or soil modifications are attached: [ ] Yes [X] NA

Attestation by Professional Engineer licensed in North Carolina pursuant to G.S. 89C

I, Scott Mitchell hereby attest that the information required to be included with
Registered Professional Engineer (Print Name)
this Notice of Intent to Construct is accurate and complete to the best of my knowledge and that the proposed system shall meet applicable federal, State, and local laws, regulations, rules, and ordinances in accordance with G.S. 130A-336-.1(e)(6).

NORTH CAROLINA PROFESSIONAL 027458 ENGINEER SCOTT MITCHELL

Signature of Licensed Professional Engineer April 26, 2022 *Date*

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

COMMON FORM FOR ENGINEERED OPTION PERMIT
See Instructions for Use in Appendix A

Except for "Date received", this Section to be completed by the Professional Engineer licensed in accordance with G.S. 89C

LHD USE ONLY: Initial submittal of this NOI received: 4-27-22 (Date) by DMT (Initials)

PART 1: Notice of Intent to Construct (NOI) - Please check all that apply

☒ Single System or ☐ Multiple Systems

AND

☒ New ☐ Expansion ☐ Relocation of all or part of the Existing System ☐ Relocation of Repair Area

☐ Repair – LHD Permit Number_____ ☐ Repair – EOP/LSS COVID 19/AOWE Permit Number _____

1. Facility Owner's name: (Owner, Company Name, Utility, Partnership, Individual, etc.): Davidson Homes, LLC

Mailing address: 336 James Record Road SW City: Huntsville State: AL Zip: 35824

Telephone number: (919) 376-6869 E-mail Address: BNelson@DavidsonHomesLLC.com

2. Professional Engineer (PE) name: Scott Mitchell License number: 27458

Mailing address: 1501 Lakestone Village Ln, #205 City: Fuquay-Varina State: NC Zip: 27526

Telephone number: 919-669-0329 E-mail Address: Scott@MitchellEnvironmental.com

3. Licensed Soil Scientist (LSS) name: Scott Mitchell License number: 1237

Mailing address: 1501 Lakestone Village Ln, #205 City: Fuquay-Varina State: NC Zip: 27526

Telephone number: 919-669-0329 E-mail Address: Scott@MitchellEnvironmental.com

4. Licensed Geologist (LG) (if applicable) name: _____ License number: _____

Mailing address: _____ City: _____ State: _____ Zip: _____

Telephone number: _____ E-mail Address: _____

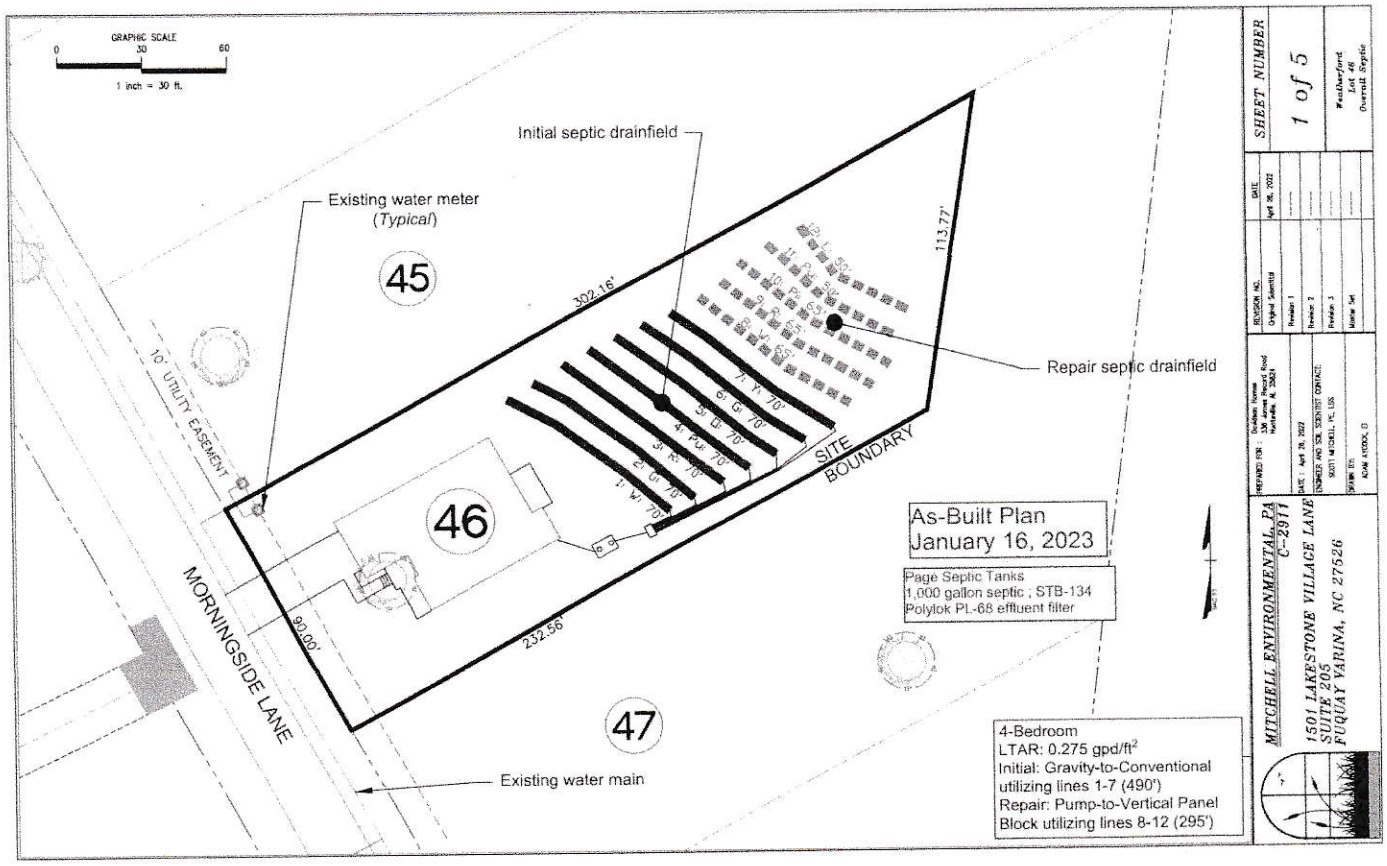
5. On-Site Wastewater Contractor name: Zachary Woody Full Circle Environmental, LLC License number: 6095

Mailing address: 107 Lee Court City: Clayton State: NC Zip: 27520

Telephone number: (919) 359-9984 E-mail Address: Zach@FullCircleEnv.com

6. Proof of Errors and Omissions or other appropriate liability insurance for the following persons is attached that includes the name of the insurer, name of the insured and the effective dates of coverage:

☒ PE ☒ LSS ☐ LG ☒ On-site Wastewater Contractor


GRAPHIC SCALE
0 30 60
1 inch = 30 ft.
Initial septic drainfield
Existing water meter
(Typical)
45
302.16'
113.77'
Repair septic drainfield
10' UTILITY EASEMENT
46
SITE
BOUNDARY
MORNINGSIDE LANE
93.00'
232.56'
47
Existing water main
As-Built Plan
January 16, 2023
Page Septic Tanks
1,000 gallon septic ; STB-134
Polylok PL-68 effluent filter
4-Bedroom
LTAR: 0.275 gpd/ft²
Initial: Gravity-to-Conventional
utilizing lines 1-7 (490')
Repair: Pump-to-Vertical Panel
Block utilizing lines 8-12 (295')
SHEET NUMBER
1 of 5
MITCHELL ENVIRONMENTAL, PA
C-2911
1501 LAKESTONE VILLAGE LANE
SUITE 205
FUQUAY VARINA, NC 27526

Mitchell Environmental, P.A.

April 26, 2022

Mr. Brad Nelson
Davidson Homes
1903 N. Harrison Avenue, Suite 200
Cary, North Carolina 27513

Re: On-Site Sewage Disposal Site and Soils Evaluation Report for:
Weatherford Subdivision – Lot 46; 205 Morningside Lane, Johnston County

Mr. Nelson:

At your request, we have completed a site evaluation for use of on-site sewage disposal systems at Lot 46 of Weatherford Subdivision located at 205 Morningside Lane in Angier, Johnston County. The site evaluation was completed on April 1, 2022.

Site Evaluation for Use of On-Site Sewage Disposal Systems:

The evaluation included all usable areas of the property as limited by state and local laws, rules, and regulations. The purpose of the evaluation was to determine the suitability of the site for on-site waste disposal systems per applicable laws, rules, and regulations.

A soil/site evaluation for use of on-site waste disposal systems on any site in North Carolina must include an evaluation of each of the following criteria: 1) topography and landscape position, 2) soil morphology, 3) soil wetness, 4) soil depth, 5) restrictive horizons and 6) available space. Upon field evaluation of the site, the entirety of the lot was confirmed to contain sufficient provisionally suitable depth and area for on-site waste disposal systems.

Sites classified as provisionally suitable may be utilized for ground absorption sewage treatment and disposal systems consistent with the rules listed above but have moderate limitations. Sites classified provisionally suitable require some modifications and careful planning, design, and installation in order for a ground absorption sewage treatment and disposal system to function satisfactorily. Typically, a minimum of 36 inches of provisionally suitable soil is required for a site to receive a classification of provisionally suitable; however, shallower soil depths can be classified as provisionally suitable where all other evaluation criteria are acceptable and alternative septic system designs (*shallow placement, fill systems, low-pressure pipe systems (LPP), large diameter pipe (LDP), sub-surface drip, etc.*) are proposed.

Most septic systems in North Carolina that include a sub-surface waste disposal element require nitrification trenches to distribute effluent for final treatment. Any nitrification trench that has an associated width (*conventional, LPP, LDP, etc.*) must be designed to accommodate slope corrections (*typically 1 to 4 inches*). Slope corrections are based on trench width and cross slope to ensure the minimum separation distance between the trench bottom and an unsuitable soil condition is maintained over the entire trench width. Sloping sites are required to have greater provisionally suitable soil depth to accommodate slope correction as opposed to flat sites that require no slope correction. Please note that all proposed lots that utilize sub-surface nitrification fields must have sufficient area for the initial septic system as well as a full repair system. However, the initial and repair systems are not required to be the same type of system, nor are they required to be contiguous. For example, a lot may have a conventional, gravity system

1501 Lakestone Village Lane, Suite 205
Fuquay-Varina, North Carolina 27526
919-669-0329

installed as the initial septic system and specify an LPP or subsurface drip system for its repair, several hundred feet away from the house or other structure being served.

The number of bedrooms or wastewater design flowrate that any lot will accommodate is entirely dependent upon the usable area of the lot and the long-term acceptance rate (*LTAR; LTAR is the effluent application rate for a septic system. For conventional systems, the LTAR indicates the number of gallons that can be applied to each square foot of the trench bottom per day. For an LPP or subsurface drip system, the LTAR indicates the number of gallons that can be applied to each square foot of the nitrification field per day. An LTAR of 0.2 gallons per day per ft² (gpd/ft²) will require a nitrification field that is twice as large as a field that has an LTAR of 0.4 gpd/ft².*). Assigned LTARs will affect the number of bedrooms or wastewater design flowrate lots will accommodate as illustrated above. LTARs can vary from one location to another on a property. Our observations indicate that the entirety of the lot contains sufficient provisionally suitable soil depth to accommodate conventional trench subsurface wastewater systems with an LTAR range of 0.275 to 0.35 gpd/ft². Observed provisionally suitable soil depths on this site range from 41 inches to greater than 48 inches, with LTAR controlling soil textures ranging from clay to sandy loam.

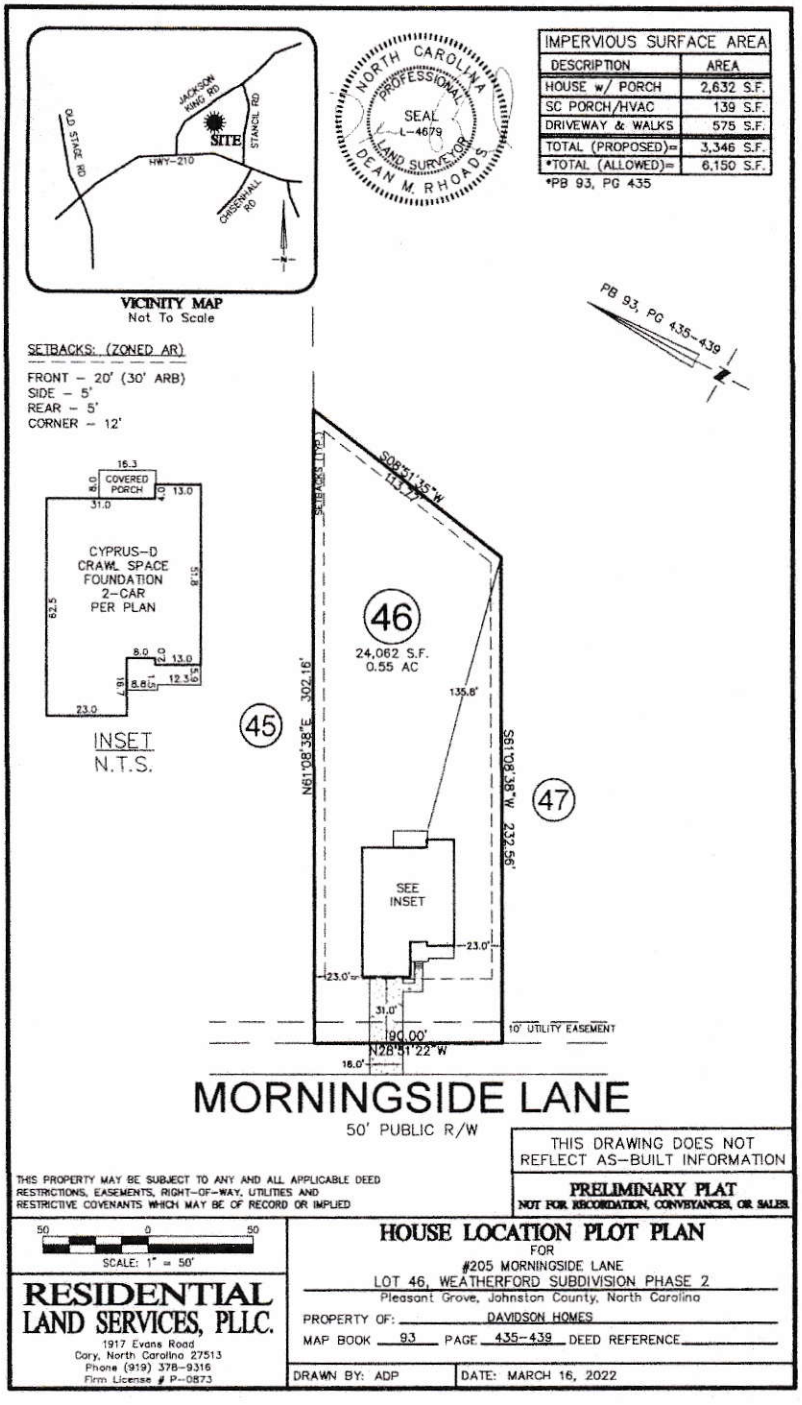
Topography on this lot can be generally characterized as a relatively linear side slope that sheds towards the northeast. Observed usable soil depths on this lot range from 41 inches to greater than 48 inches. Based on observed site and soil characteristics, in combination with the proposed plot plan, it is my professional opinion that adequate available space exists on this lot for properly designed septic system drainfields (*initial and repair*) sufficient for one, four-bedroom home.

This site evaluation is based upon the conditions of the site at the time of the evaluation. Any alteration of the site, including compaction, clearing, grading, timbering, etc., could negatively affect the suitability for on-site septic systems. Great care should be exercised during site preparation to protect areas that are to be utilized for septic system nitrification fields. No vehicular or construction traffic should be allowed on these areas. Additionally, no sedimentation and erosion control devices or stormwater collection, treatment, diversion, or dispersal devices should be allowed on or near these areas.

Thank you for the opportunity to provide you with this wastewater system soil suitability evaluation. Do not hesitate to call me if you have any questions or concerns about this evaluation or if you need any additional information.

Sincerely,

Scott Mitchell, PE, LSS
President


JACKSON RING RD
SITE
STANCIL RD
OLD STAGE RD
HWY-210
CHISENHALL RD
VICINITY MAP
Not To Scale
NORTH CAROLINA PROFESSIONAL SEAL L-4679 LAND SURVEYOR DEAN M. RHOADS
IMPERVIOUS SURFACE AREA
DESCRIPTION | AREA
HOUSE w/ PORCH | 2,632 S.F.
SC PORCH/HVAC | 139 S.F.
DRIVEWAY & WALKS | 575 S.F.
TOTAL (PROPOSED)= | 3,346 S.F.
*TOTAL (ALLOWED)= | 6,150 S.F.
*PB 93, PG 435
PB 93, PG 435-439
SETBACKS: (ZONED AR)
FRONT – 20' (30' ARB)
SIDE – 5'
REAR – 5'
CORNER – 12'
16.3
COVERED PORCH
13.0
31.0
CYPRUS-D
CRAWL SPACE
FOUNDATION
2-CAR
PER PLAN
62.5
51.8
8.0
13.0
12.5
8.8
23.0
INSET
N.T.S.
SETBACKS (TYP.)
S08°51'35"W
(TYP.)
46
24,062 S.F.
0.55 AC
45
N61°08'38"E 302.16'
135.8'
S61°08'38"W 232.56'
47
SEE INSET
23.0'
23.0'
31.0'
10' UTILITY EASEMENT
190.00'
N28°51'22"W
16.0'
MORNINGSIDE LANE
50' PUBLIC R/W
THIS DRAWING DOES NOT REFLECT AS-BUILT INFORMATION
PRELIMINARY PLAT
NOT FOR RECORDATION, CONVEYANCES, OR SALES
THIS PROPERTY MAY BE SUBJECT TO ANY AND ALL APPLICABLE DEED RESTRICTIONS, EASEMENTS, RIGHT-OF-WAY, UTILITIES AND RESTRICTIVE COVENANTS WHICH MAY BE OF RECORD OR IMPLIED
50 0 50
SCALE: 1" = 50'
RESIDENTIAL LAND SERVICES, PLLC.
1917 Evans Road
Cary, North Carolina 27513
Phone (919) 378-9316
Firm License # P-0873
HOUSE LOCATION PLOT PLAN
FOR
#205 MORNINGSIDE LANE
LOT 46, WEATHERFORD SUBDIVISION PHASE 2
Pleasant Grove, Johnston County, North Carolina
PROPERTY OF: DAVIDSON HOMES
MAP BOOK 93 PAGE 435-439 DEED REFERENCE
DRAWN BY: ADP
DATE: MARCH 16, 2022

Engineer Option Permit Common Form LHD Reference: 184824

PART 3: Authorization to Operate (ATO)

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

LHD USE ONLY: Initial submittal of request for ATO received: 1-17-23 (Date) by DWF (Initials)

Date of Post-construction Conference: N/A

Post-construction Conference waived in accordance with G.S. 130A-336.1(j): DWF

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

1.	Signed and sealed copy of the Engineer's report that includes the information in G.S. 130A-336.1(k)(1) and 15A NCAC 18A .1971(f)	☒ Yes	☐ No
2.	Operation and management program and ORC contract, if applicable	☒ Yes	☐ No
3.	Fee (as applicable)	☐ Yes	☒ No
4.	Notarized letter documenting Owner's acceptance of the system from the PE	☒ Yes	☐ No
5.	Owner meets requirements of ownership or control of the system per 15A NCAC 18A .1938(j)	☒ Yes	☐ No
6.	Easement, right of way, or encroachment agreement required per 15A NCAC 18A .1938(j)	☐ Yes	☒ No
7.	Multi-party agreements required, as applicable, pursuant to 15A NCAC 18A. .1937(h)	☐ Yes	☒ No

If yes, agreements filed in _____ County Register of Deeds in Deed Book _____ Page _____

Attestation by the Owner or the PE for Authorization to Operate

I, Seth Mitchell (Print name of Owner or Professional Engineer) hereby attest that all items indicated above have been provided to the Johnston County LHD and the system shall meet applicable federal, State, and local laws, regulations, rules and ordinances in accordance with G.S. 130A-336-.1(e)(6).

Signature of Owner or Professional Engineer — Date: 1-17-2023

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 EOP: _____

Copies of this signed form were sent to the design PE and the Owner on _____ (Date) via _____ (Email, FAX, USPS, Hand-delivered).

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-336.1(m).

A copy of this complete NOI/ATO with tracking information was sent to the State on 1-17-23 (Date) via SCOTHG-DPHP (Email, FAX, USPS, Hand-delivered).

David W. Fulcher — Signature of authorized Agent of the LHD — 1-17-23 (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.

FULL CIRCLE ENVIRONMENTAL

"ENVIRONMENTALLY CONSCIOUS TODAY FOR A CLEANER TOMORROW"

NC Grade IV Installer (6098)
NC Certified Wastewater System Inspector (65381)
NC Certified Wastewater Subsurface System Operator (313161)
NC Licensed Utility Contractor (58199)

January 13, 2023

Mr. David Fulcher, REHS
Johnston County Health Department - Environmental Health Division
309 E. Market Street
Smithfield, North Carolina 27577

Re: Certification of Septic System Installation
Weatherford Subdivision, Lot 46 (*205 Morningside Lane*)
Angier, Johnston County, North Carolina

Mr. Fulcher:

This letter is in reference to the recently installed gravity to EZ Flow, initial septic system at Weatherford Subdivision Lot 46, located at 205 Morningside Lane (*PIN: 069400-75-5193*). All septic system components on this property were installed by employees or representatives of Full Circle Environmental. Based on our system installation, testing, and observations, I certify that the system operates and was installed within reasonable conformance with the PE sealed design by Scott Mitchell, Mitchell Environmental. This certification is not intended as, nor should it be construed as a guarantee that the septic system will function properly for any period of time.

Do not hesitate to call me if you have any questions about this certification or if you need any additional information.

Sincerely,

Zachary Woody

Full Circle Environmental | 107 Lee Court, Clayton, NC 27520 | 919-359-9984 | www.fullcircleenv.com

Mitchell Environmental, P.A.

EOP MANAGEMENT PROGRAM MANUAL
for the
SUBSURFACE SEWAGE DISPOSAL SYSTEM
At
WEATHERFORD SUBDIVISION – LOT 46
205 Morningside Lane
Angier, North Carolina

Submitted to:
Johnston County Health Department
Environmental Health Division
309 E. Market Street
Smithfield, NC 27577

Prepared for:
Davidson Homes
336 James Record Road SW
Huntsville, AL 35824

Prepared by:
Scott Mitchell, PE, LSS

1-17-2023

NORTH CAROLINA PROFESSIONAL ENGINEER SEAL 027459 SCOTT MITCHELL

LICENSED SOIL SCIENTIST SCOTT MITCHELL 1237 NORTH CAROLINA

DATE: January 17, 2023
PROJECT NO.: 3421

1501 Lakestone Village Lane, Suite 205
Fuquay-Varina, North Carolina 27526
919-669-0329

Engineer Option Permit Common Form LHD Reference: 184824

This section is for Owner use to either designate PE as their legal representative or to self-submit the NOI.

Designation of Registered Professional Engineer as legal representative of Owner for this Notice of Intent:

I, Brad Nelson (*Print Name of Owner*) hereby designate Scott Mitchell (*Print Name of Registered Professional Engineer*)

as my legal representative for purposes of this Notice of Intent pursuant to G.S. 130A-336.1.

Brad Nelson (*Signature of Owner*) 4/11/22 (*Date*)

Owner self-submittal of NOI:

I, _____ (*Print Name of Owner*) hereby submit this NOI prepared by _____ (*Print Name of Licensed PE*)

pursuant to G.S. 130A-336.1.

_____ (*Signature of Owner*) _____ (*Date*)

NOTES:

LIABILITY: The Department, the Department's authorized agents, or local health departments shall have no liability for wastewater systems designed, constructed, and installed pursuant to an Engineer Option Permit [G.S. 130A-336.1(f)]

RIGHT OF ENTRY: The submittal of this **Notice of Intent to Construct** *grants right of entry to the Local Health Department and the State to the referenced property.*

ISSUANCE OF BUILDING PERMIT: Once the LHD deems that the Notice of Intent to Construct is complete via signature in the section below, the owner may apply to the local permitting agency for a permit for electrical, plumbing, heating, air conditioning or other construction, location, or relocation activity under any provision of general or special law pursuant to G.S. 130A-338.

MITCENV-01 LSULLIVAN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 2/18/2022

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	CONTACT NAME: Sterling S. Parker
Trisure, an Alera Group Company 4325 Lake Boone Trail, Suite 200 Raleigh, NC 27607	PHONE (A/C, No, Ext): (919) 469-2473 FAX (A/C, No): (919) 467-4987 E-MAIL ADDRESS: sparker@trisure.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Westchester Surplus Lines	10172
INSURER B : Owners Insurance Company	32700
INSURER C : Sirius America Insurance Company	38776
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Mitchell Environmental PA
Scott Mitchell
5601 Maggie Run Lane
Fuquay Varina, NC 27526

COVERAGES CERTIFICATE NUMBER: 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY							
	CLAIMS-MADE [X] OCCUR			G28210486 005	1/27/2022	1/27/2023	EACH OCCURRENCE	$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 50,000
							MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	POLICY [X] PRO-JECT [ ] LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
B	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	X ANY AUTO			5302764600	9/18/2021	9/18/2022	BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	UMBRELLA LIAB [X] OCCUR						EACH OCCURRENCE	$ 1,000,000
	X EXCESS LIAB [ ] CLAIMS-MADE			G46616182 006	1/27/2022	1/27/2023	AGGREGATE	$ 1,000,000
	DED RETENTION $							$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						X PER STATUTE OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N [N]	N/A		WC89782	2/7/2022	2/7/2023	E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
A	Professional Liab			G28210486 005	1/27/2022	1/27/2023	Limit	1,000,000
A	Pollution Liab			G28210486 005	1/27/2022	1/27/2023	Limit	1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Operations of the Named Insured covered by the above referenced policies.

CERTIFICATE HOLDER	CANCELLATION
Insured's Copy	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 Kimberly S. Sullivan

ACORD 25 (2016/03)

Engineer Option Permit Common Form LHD Reference: 184824

This section for Local Health Department use only.

PART 2: *LHD Completeness Review of the Notice of Intent to Construct*

"(c) Completeness Review for Notice of Intent to Construct. – The local health department shall determine whether a notice of intent to construct, as required pursuant subsection (b) of this section, is complete within 15 business days after the local health department receives the notice of intent to construct. A determination of completeness means that the notice of intent to construct includes all of the required components. If the local health department determines that the notice of intent to construct is incomplete, the department shall notify the owner or the professional engineer of the components needed to complete the notice. The owner or professional engineer may submit additional information to the department to cure the deficiencies in the notice. The local health department shall make a final determination as to whether the notice of intent to construct is complete within 10 business days after the department receives the additional information from the owner or professional engineer. If the department fails to act within any time period set out in this subsection, the owner or professional engineer may treat the failure to act as a determination of completeness."

The review for completeness of this Notice of Intent was conducted in accordance with G.S. 130A-336.1(c). This NOI is determined to be:

☐ INCOMPLETE (If box is checked, Information in this section is required.)

Based upon review of information submitted in Part 1, the following items are missing: _____

_____

Copies of this form listing missing items were sent to the design PE and the Owner on _____ (Date)

via _____ (Email, FAX, USPS, hand-delivered) with directions to re-submit missing items using Page 5 of this form.

_____ (Print Name of Authorized Agent of the LHD) _____ (Signature of Authorized Agent of the LHD) _____ (Date)

☑ COMPLETE (If box is checked, information in this section is required.)

Based upon review of information submitted in Part 1 of this form, this NOI is deemed COMPLETE.

Copies of this signed form were sent to the design PE and the Owner on 5-2-22 (Date) via Scott Mitchell + Davidson HES (Email, FAX, USPS, hand-delivered)

A copy of this NOI and tracking information was sent to the State on 5-2-22 (Date) via Scott Green (Email, FAX, USPS, hand-delivered)

David W. Fulcher (Print Name of Authorized Agent of the LHD) David W. Fulcher (Signature of Authorized Agent of the LHD) 5-2-22 (Date)

Engineer Option Permit Common Form LHD Reference: 184824

Re-submittal of NOI with missing items included

This Section is for use by the owner or PE to submit items noted as missing during LHD Completeness Review above. Resubmittals must be accompanied by a cover letter from the PE.

LHD USE ONLY: This NOI resubmittal received: _____ by _____
Date *Initials*

Item # from initial NOI	Resubmittal description

Attestation by Professional Engineer licensed in North Carolina pursuant to G.S. 89C

I, _____ hereby attest that the information re-submitted for this Notice of
Licensed Professional Engineer (Print Name)
Intent to Construct is accurate and complete to the best of my knowledge and that the proposed system shall meet applicable federal, State, and local laws, regulations, rules and ordinances in accordance with G.S. 130A-336-.1(e)(6).

_____ _____
Signature of Licensed Professional Engineer *Date*

The section below is for Local Health Department use after submittal of items noted as missing above.

LHD Follow-up Completeness Review of Notice of Intent to Construct

This follow-up review for completeness of this Notice and Intent was conducted in accordance with G.S. 130A-336.1(c). This NOI is determined to be:

☐ INCOMPLETE
Based upon review of information submitted in the RESUBMITTAL above, this Notice of Intent remains INCOMPETE because the following items from Part 1 of this form remain missing: _____
_____.

Copies of this signed form were sent to the design PE and the Owner on _____ via _____.
Date *Email, FAX, USPS, Hand-delivered*

_____ _____ _____
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 RESUBMITTAL above in addition to information provided in Part 1 of this form, this NOI is deemed complete.

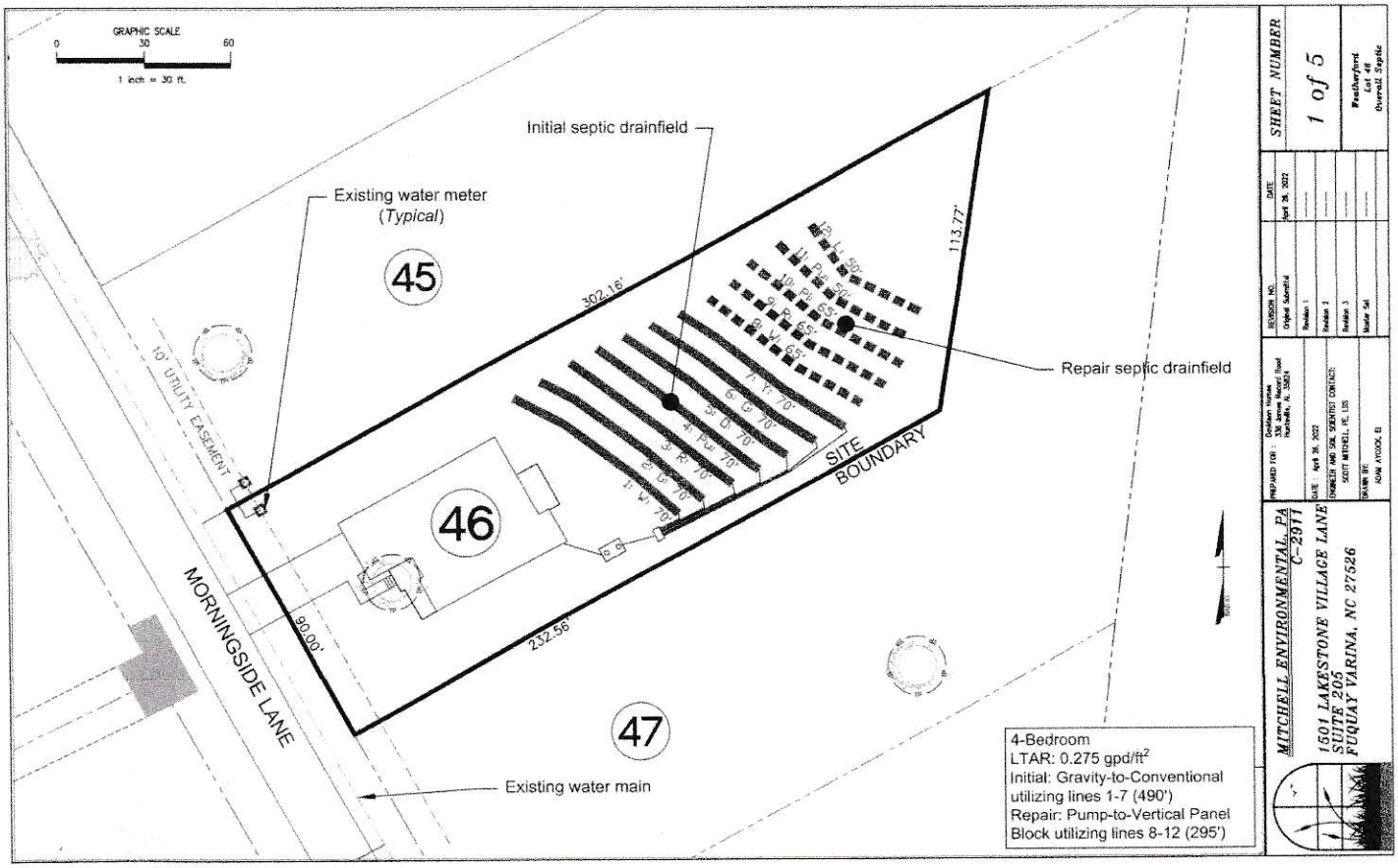
Copies of this signed form were sent to the PE and the Owner on _____ via _____.
Date *Email, FAX, USPS, Hand-delivered*

A complete copy of this form with tracking information was sent to the State: _____ via _____.
Date *Email, FAX, USPS, hand-delivered*

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

Septic system components on this property shall be inspected and maintained per the schedule below:

System Component	Frequency	Maintenance or Inspection
Septic Tank	6-12 months	Check riser condition for (*must be accessible from ground surface*), excess in/exfiltration, entry of water at riser, and solids accumulation.
	1-4 years	Pump septage.
Supply Lines	6-12 months	Check for settling, pipe exposure, and leakage.
Drainfield(s)	1-4 weeks	Maintain vegetative cover (*mow grass and remove weeds and brush*).
	6-12 months	Check for settling, erosion and surfacing of effluent. Check site drainage and eliminate low or settled areas and divert surface or shallow groundwater movement around fields.
General	At all times	Prohibit irrigation systems and vehicular or equipment traffic on ground absorption field. Prohibit tillage (*gardening*) or other soil disturbance over ground absorption field (*initial and repair drainfields*). Practice water conservation to reduce wastewater load on system. Do not permit entry of grease and non-domestic waste to system. Use of a garbage disposal is prohibited. Addition of chemical or biological additives has not been demonstrated to be necessary to maintain proper system function. Prevention of root intervention on trenches may be necessary on certain sites. Surface and groundwater diversion structures must be maintained.


GRAPHIC SCALE
0 30 60
1 inch = 30 ft.
Initial septic drainfield
Existing water meter
(Typical)
45
302.18'
113.77'
Repair septic drainfield
10' UTILITY EASEMENT
SITE
BOUNDARY
46
MORNINGSIDE LANE
90.00'
232.56'
47
Existing water main
4-Bedroom
LTAR: 0.275 gpd/ft²
Initial: Gravity-to-Conventional
utilizing lines 1-7 (490')
Repair: Pump-to-Vertical Panel
Block utilizing lines 8-12 (295')
SHEET NUMBER
1 of 5
MITCHELL ENVIRONMENTAL, PA
C-2911
1501 LAKESTONE VILLAGE LANE
SUITE 205
FUQUAY VARINA, NC 27526

Mitchell Environmental, P.A.

January 17, 2023

Mr. David Fulcher, REHS
Johnston County Health Department - Environmental Health Division
309 E. Market Street
Smithfield, North Carolina 27577

Re: Certification of Septic System Installation
Weatherford Lot 46 (*205 Morningside Lane*)
Angier, Johnston County, North Carolina

Mr. Fulcher:

This letter is in reference to the recently installed gravity to EZ Flow, initial septic system at Weatherford Lot 46, located at 205 Morningside Lane in Angier (*PIN:069400-75-5193*). An employee of Mitchell Environmental completed an inspection of the site and system components on January 13, 2023. A member of our staff was present during installation of the drainfield, and supply lines from the D-box to individual nitrification trenches. Based on our observations, I certify that the system operates and was installed within reasonable conformance with the design. This certification is not intended as, nor should it be construed as a guarantee that the septic system will function properly for any period of time.

Do not hesitate to call me if you have any questions about this certification or if you need any additional information.

Sincerely,

1-17-2023

Scott Mitchell, PE, LSS

1501 Lakestone Village Lane, Suite 205
Fuquay-Varina, North Carolina 27526
919-669-0329

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 03/14/2022

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	CONTACT NAME: Betsy Darst
RIC, A Bankers Insurance Company PO Box 155 Wentworth NC 27375	PHONE (A/C, No, Ext): (336) 280-0316 FAX (A/C, No): (800) 899-0146 E-MAIL ADDRESS: bdarst@bankersinsurance.net

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Frankenmuth Mutual Insurance Company	13986
INSURER B: Ansur America Insurance Company	10984
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

INSURED
Full Circle Environmental
107 Lee Ct
Clayton NC 27520-7927

COVERAGES CERTIFICATE NUMBER: CL2231409296 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	[X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC OTHER:			6684801	03/26/2022	03/26/2023	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 1,000,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ $ $ $
A	[X] UMBRELLA LIAB [ ] OCCUR EXCESS LIAB [ ] CLAIMS-MADE DED [X] RETENTION $ 10,000			6684801	03/26/2022	03/26/2023	EACH OCCURRENCE AGGREGATE	$ 4,000,000 $ 4,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: Y If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		6684800	03/26/2022	03/26/2023	[X] PER STATUTE [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000
	Leased or Rented Equipment Replacement Cost Valuation			6684801	03/26/2022	03/26/2023	Limit / RC Deductible	$75,000 $1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

Mitchell Environmental, PA
1501 Lakestone Village Lane
Suite 205
Fuquay-Varina NC 27526

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

Kathy R Hall

Mitchell Environmental, P.A.

January 17, 2023

Mr. David Fulcher, REHS
Johnston County Health Department - Environmental Health Division
309 E. Market Street
Smithfield, North Carolina 27577

Re: Certification of Septic System Installation
Weatherford Subdivision Lot 46 (*205 Morningside Lane*)
Angier, Johnston County, North Carolina

Mr. Fulcher:

This letter is in reference to the recently installed gravity to EZ Flow, initial septic system at Weatherford Subdivision Lot 46, located at 205 Morningside Lane in Angier (*PIN: 069400-75-5193*). An employee of Mitchell Environmental completed an inspection of the site and system components on January 13, 2023. A member of our staff was present during installation of the drainfield on October 27, 2022, and supply lines from the D-box to individual nitrification trenches.

The schedule of events for septic components inspection and final inspection is listed below:

- Tank (*septic*) was inspected on January 13, 2023.
  - Septic Tank: Page Septic Tank 1000 STB-134
  - Polylok ST effluent filter PL-88
- Drainfield installed (*EZ Flow*) and inspected on October 27, 2022.
- Final inspection completed on January 13, 2023.

Based on our observations, I certify that the system operates and was installed within reasonable conformance with the design. This certification is not intended as, nor should it be construed as a guarantee that the septic system will function properly for any period of time.

Do not hesitate to call me if you have any questions about this certification or if you need any additional information.

Sincerely,

1-17-2023

Scott Mitchell, PE, LSS

1501 Lakestone Village Lane, Suite 205
Fuquay-Varina, North Carolina 27526
919-669-0329