

Mitchell Environmental, P.A.

November 1, 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 69 (140 Morningside Lane)
Angier, Johnston County, North Carolina**

Mr. Fulcher:

This letter is in reference to the recently installed pump-to-PPBPS, initial septic system at Weatherford Lot 69, located at 140 Morningside Lane in Angier (PIN:069400-75-1370). An employee of Mitchell Environmental completed system testing with the system installer, and an inspection of the site and system components on October 30, 2023. A member of our staff was present during installation of the drainfield, and supply lines from the pressure manifold to individual nitrification trenches. Based on our observations and system testing that we observed, 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,

Scott Mitchell, PE, LSS



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

Mitchell Environmental, P.A.

**EOP MANAGEMENT PROGRAM MANUAL
for the
SUBSURFACE SEWAGE DISPOSAL SYSTEM
At
WEATHERFORD SUBDIVISION – LOT 69
140 Morningside Lane
Angier, North Carolina**

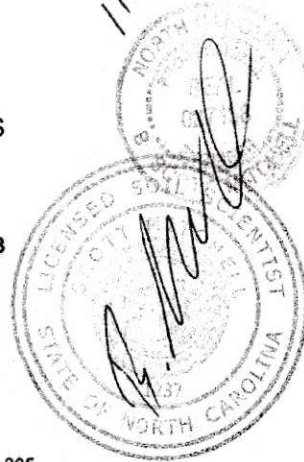
Submitted to:
Johnston County Health Department
Environmental Health Division
309 E. Market Street
Smithfield, NC 27577

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

Prepared by:
Scott Mitchell, PE, LSS

DATE: November 1, 2023
PROJECT NO.: 3421

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



Owner: Davidson Homes

October 31, 2023

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

**Re: Acceptance of Septic System Installation
Weatherford Lot 69 (140 Morningside Lane)
Angier, Johnston County, North Carolina**

Mr. Fulcher:

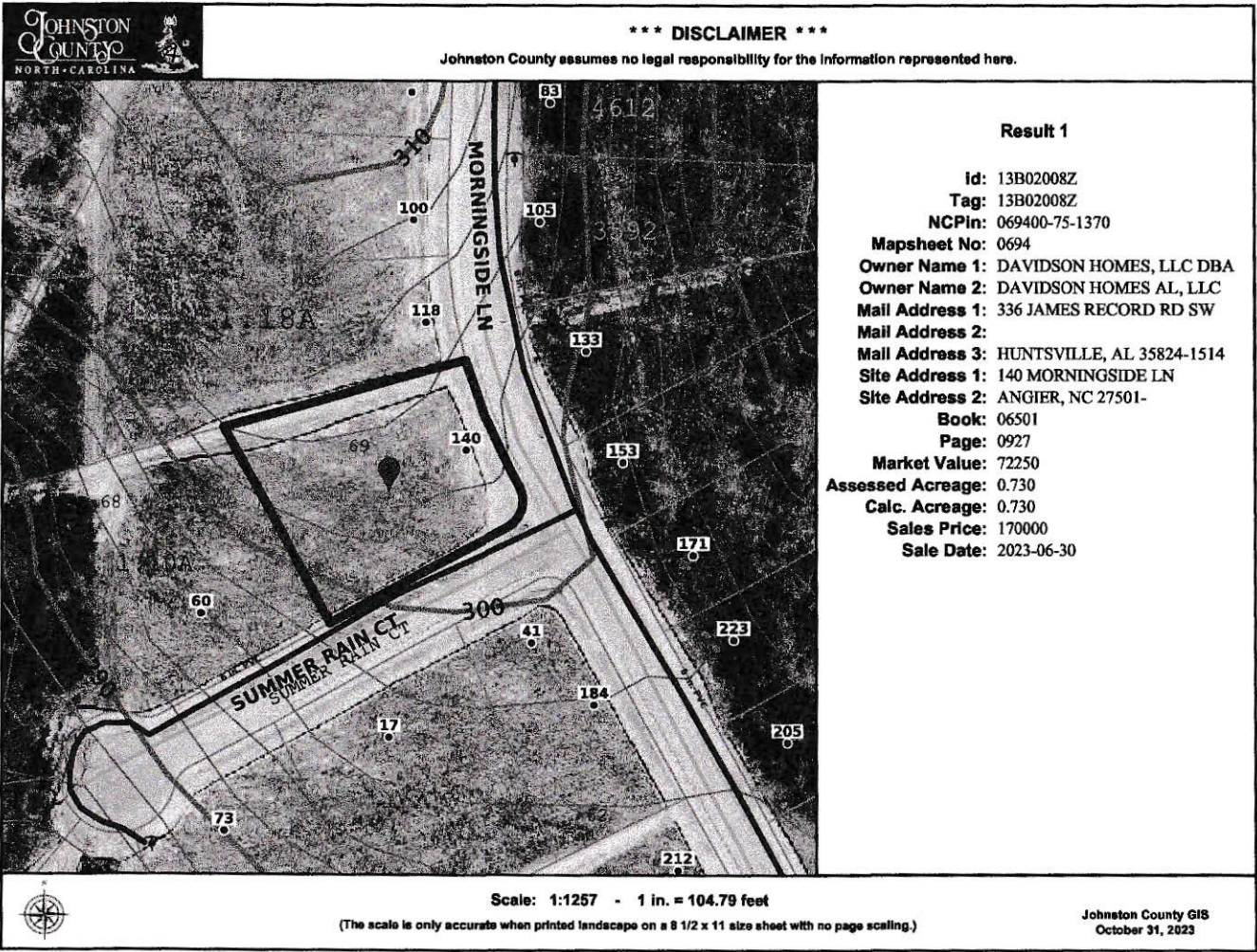
This letter is in reference to the recently installed pump-to-PPBPS, initial septic system at Weatherford Lot 69, located at 140 Morningside Lane in Angier (PIN: 069400-75-1370). By signing below, I certify that Davidson Homes accepts the septic system installation.

Signature: BO nelsonPrinted Name: Brad NelsonTitle: Raleigh Division President Davidson Homes LLCDated this 31st day of October, 2023By Celinda HowellSubscribed and Sworn before me this 31st day of October, 2023Notary Public, State of North Carolina Wake County

Celinda Howell
NOTARY PUBLIC
Wake County
North Carolina
My Commission Expires December 27, 2026

Celinda Howell

336 James Record Road SW
Huntsville, Alabama 35824





NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
HELEN WOLSTENHOLME • Interim Deputy Secretary for Health
MARK T. BENTON • Assistant Secretary for Public Health
Division of Public Health

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: 6-15-2023 by JK 197471
Date 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: Edward Faison-
Quality Septic Services, Inc License number: 4350

Mailing address: PO Box 442 City: Wendell State: NC Zip: 27591

Telephone number: (919) 365-9823 E-mail Address: qualityseptic@yahoo.com

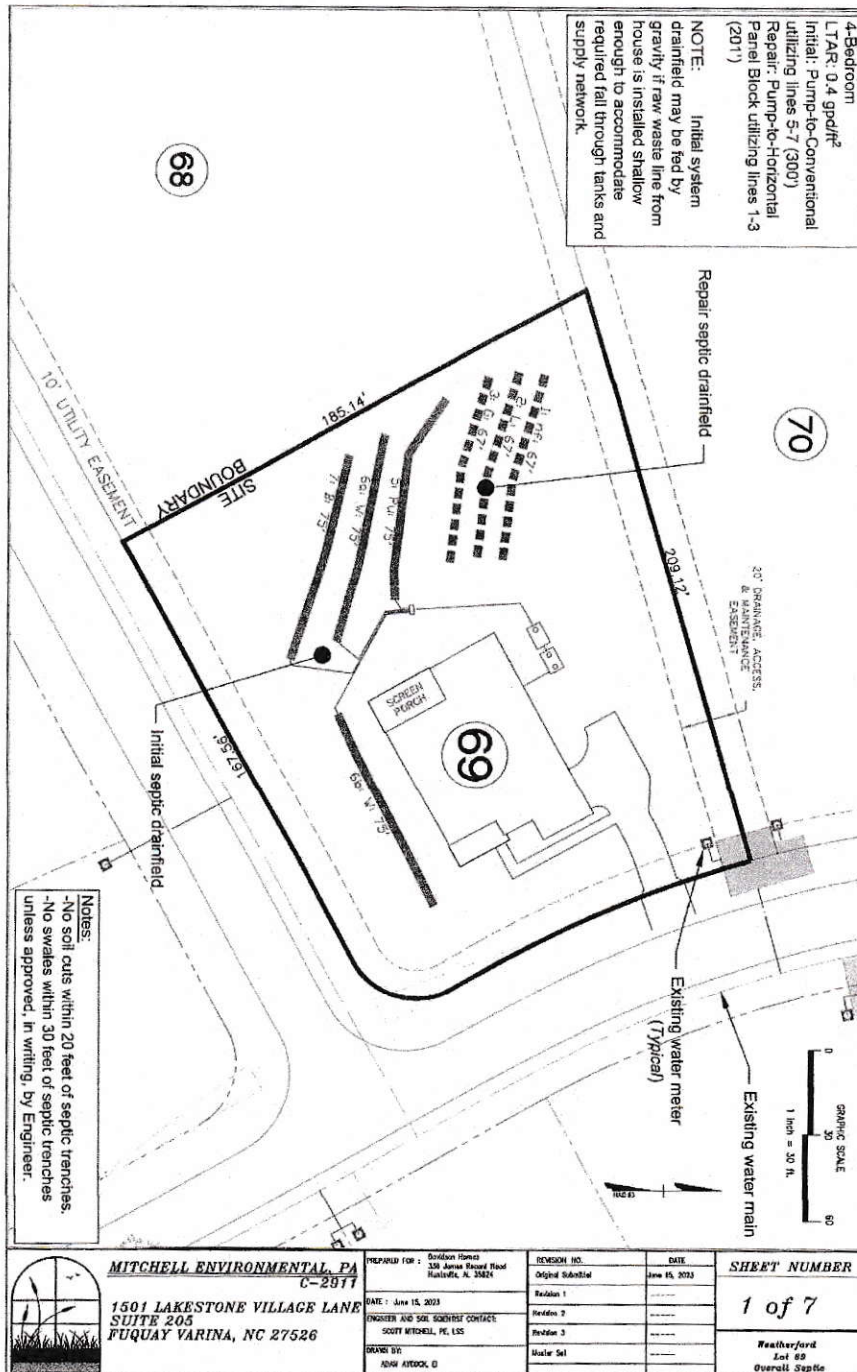
6. Proof of Errors and Omissions or other appropriate liability insurance for the following persons is attached that includes the name of the insurer, name of the insured and the effective dates of coverage:

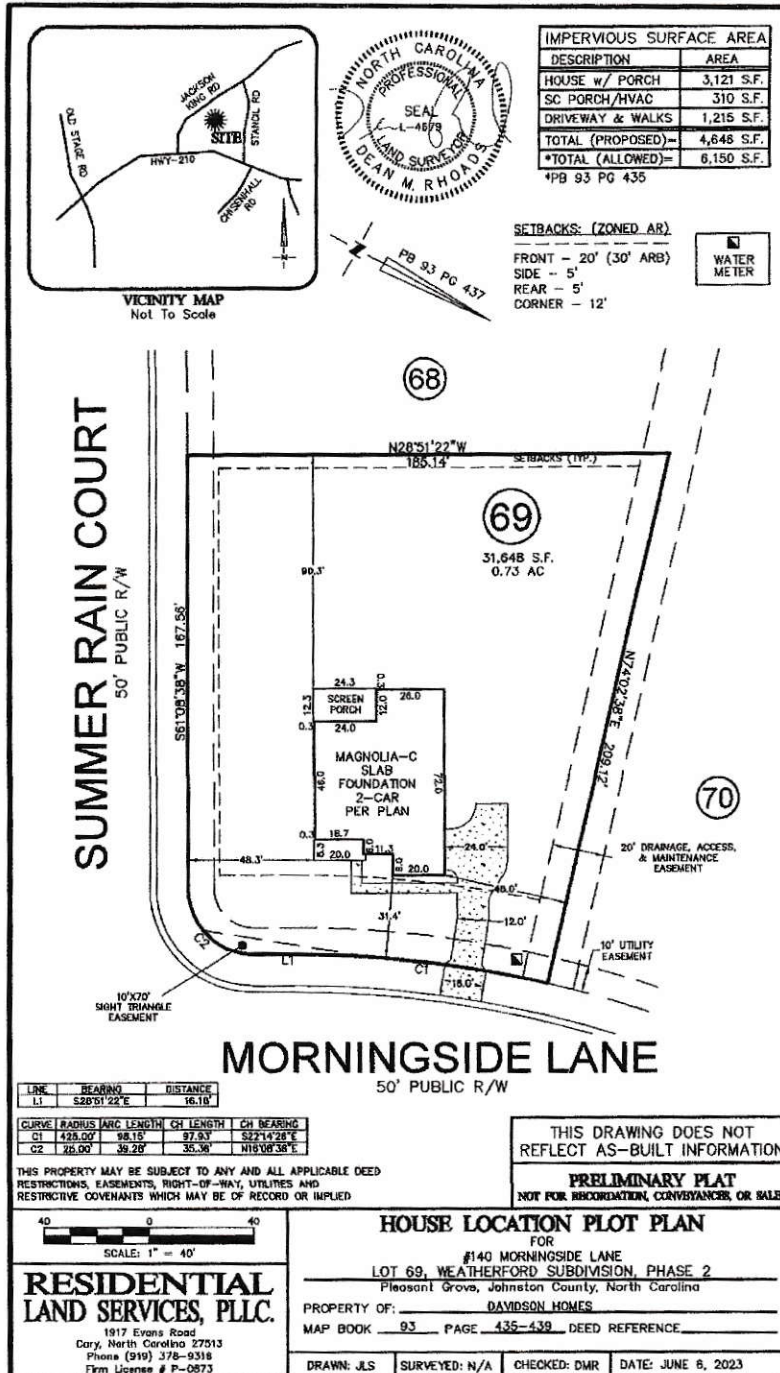
☒ PE ☒ LSS ☐ LG ☒ On-site Wastewater Contractor

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH

LOCATION: 5605 Six Forks Road, Raleigh, NC 27608
MAILING ADDRESS: 1642 Mail Service Center, Raleigh, NC 27699-1642
www.ncdhhs.gov • TEL: 919-707-5874 • FAX: 919-845-3972

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER







*** DISCLAIMER ***

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

Result 2

id: 13B02008Z
Tag: 13B02008Z
NCPin: 069400-75-1370
Mapsheet No: 0694
Owner Name 1: DFC VILLAGE AT TOWNE
LAKE, LLC
Owner Name 2:
Mail Address 1: 13000 SAWGRASS VILLAGE
CIR STE 24
Mail Address 2:
Mail Address 3: PONTE VEDRA, FL 32082-5021
Site Address 1: 24 SUMMER RAIN CT
Site Address 2: ANGIER, NC 27501-
Book: 06350
Page: 0702
Market Value: 72250
Assessed Acreage: 0.730
Calc. Acreage: 0.730
Sales Price: 85000
Sale Date: 2022-09-28

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 majority of the lot contains sufficient provisionally suitable soil depth to accommodate conventional trench subsurface wastewater systems with an LTAR of 0.40 gpd/ft². Observed provisionally suitable soil depths on this site range from 39 to 45 inches, with LTAR controlling soil textures ranging from clay to clay loam.

Topography on this lot can be generally characterized as a relatively linear side slope and ridge top that generally sheds towards the south. 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.

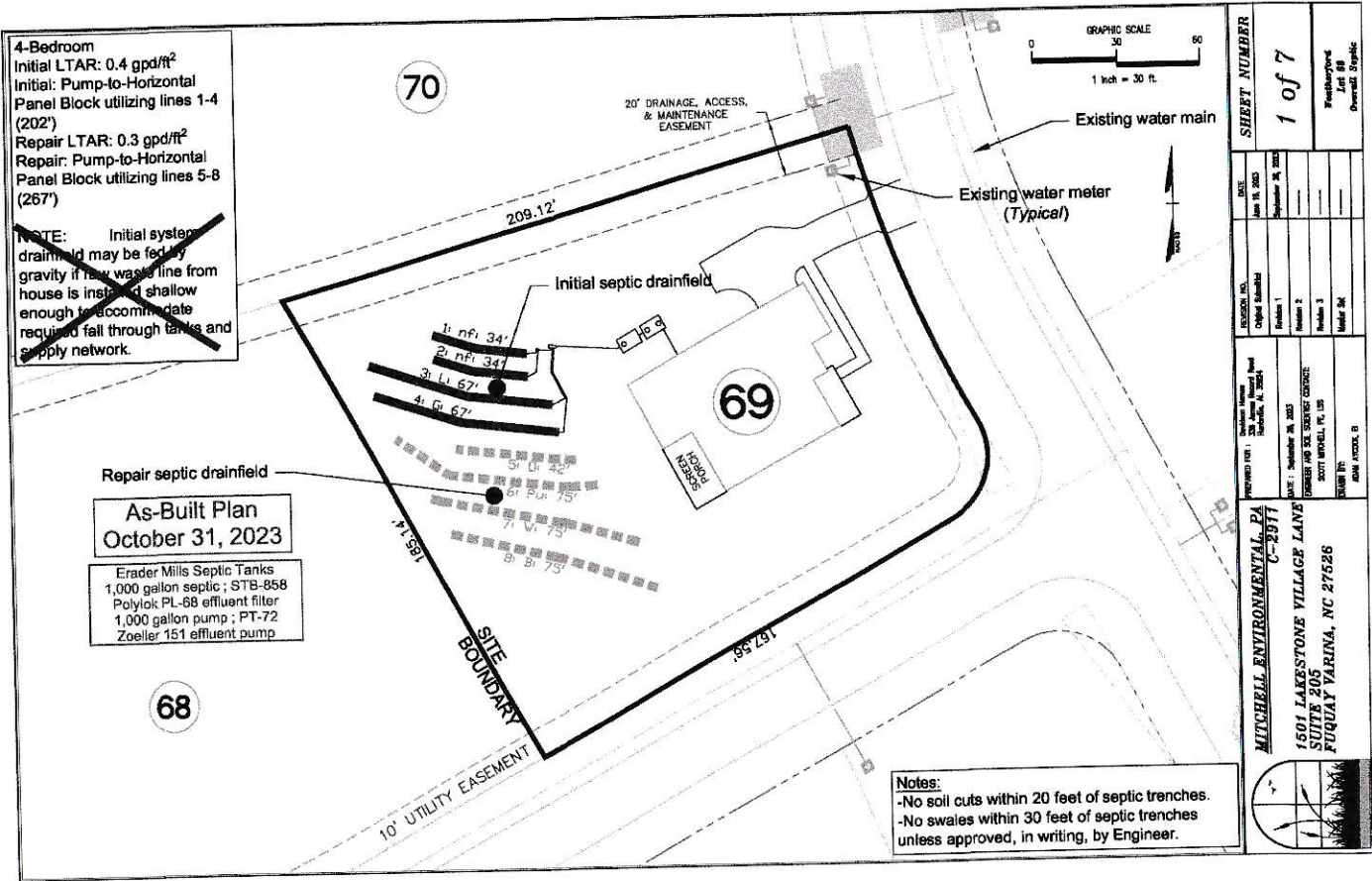
This site evaluation is based upon the conditions of the site at the time of the evaluation. Any alteration of the site, including compaction, clearing, grading, timbering, etc., could negatively affect the suitability for on-site septic systems. Great care should be exercised during site preparation 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







MITCENV-01

LBECK

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/9/2023

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 Alera Group 4325 Lake Boone Trail, Suite 200 Raleigh, NC 27607		CONTACT Kurt J. Sokolowski PHONE (A/C, No, Ext): (919) 468-2473 FAX (A/C, No): (919) 467-4987 E-MAIL: ks@trisure.com ADDRESS:	
INSURED Mitchell Environmental PA Scott Mitchell 5601 Maggie Run Lane Fuquay Varina, NC 27526		INSURER(S) AFFORDING COVERAGE INSURER A: Westchester Surplus Lines INSURER B: Owners Insurance Company INSURER C: Sirius America Insurance Company INSURER D: INSURER E: INSURER F:	
		NAIC # 10172 32700 38776	

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 SUBR INSP: WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☒ PROJECT ☐ LOC OTHER:		G28210486007	1/27/2023	1/27/2024	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 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY ☒ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY		5302764600	9/18/2022	9/18/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	UMBRELLA LIAB ☒ OCCUR EXCESS LIAB ☒ CLAIMS-MADE DED RETENTION \$		G46616182007	1/27/2023	1/27/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	WC 89782 01	2/7/2023	2/7/2024	PER STATUTE ☐ OTHER ☐ E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Professional Liabill		G28210486007	1/27/2023	1/27/2024	Limit 1,000,000
A	Professional Liabill		G28210486007	1/27/2023	1/27/2024	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

ACORD 25 (2016/03)

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Engineer Option Permit Common Form

LHD Reference:

197471

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 INCOMPLETE 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

Quality Septic Services, Inc.

October 31, 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
140 Morningside Lane (Weatherford Subdivision, Lot 69)
Angier, Johnston County, North Carolina**

Mr. Fulcher:

This letter is in reference to the recently installed pump-to-PPBPS, initial septic system at 140 Morningside Lane in Angier (*Weatherford Subdivision, Lot 69; PIN: 069400-75-1370*). All septic system components on this property were installed by employees or representatives of Quality Septic Services. 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,



Wynne Vaughan

7901 Old Stage Road
Raleigh, North Carolina 27603
919-779-7248

Mitchell Environmental, P.A.

October 31, 2023

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

**Re: Request for Waiver of Septic System Post-Construction Conference
140 Morningside Lane (Weatherford Subdivision, Lot 69)
Angier, Johnston County, North Carolina**

Mr. Fulcher:

This letter is in reference to the recently installed pump-to-PPBPS, initial septic system on Weatherford Lot 69, located at 140 Morningside Lane in Angier (PIN:069400-75-1370). Please accept this letter as our official request for waiver of the post-construction conference for this property. The owner of this property approves of this waiver, as evidenced by their signature below.

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

Sincerely,

Scott Mitchell, PE, LSS
Mitchell Environmental, PA

Owner Signature: Brad NelsonPrinted Name: Brad NelsonTitle: Raleigh Division President Davidson Homes LLCDated this 31st day of October, 2023

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

NORTH CAROLINA FARM BUREAU MUTUAL INSURANCE COMPANY, INC.

CERTIFICATE OF LIABILITY INSURANCE

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 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).

INSURED QUALITY SEPTIC SERVICES, INC
NAME AND PO BOX 442
ADDRESS WENDELL, NC 27591

CERTIFICATE MITCHELL ENVIROMENTAL, PA
HOLDER 1501 LAKESTONE VILLAGE LANE
SUITE 205
FUQUAY-VARINA, NC 27526

SCOTT@MITCHELLENVIROMENTAL.COM

COVERAGES

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.

X	TYPE OF INSURANCE	ADDL. SUBR. (NDCI, WCD)	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
☒	COMMERCIAL GENERAL LIABILITY - OCCURRENCE GEN'L AGGREGATE APPLIES PER POLICY		GL 0432524	6/10/2023	6/10/2024	GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPROPS AGGREGATE \$2,000,000 PERSONAL & ADV INJURY \$1,000,000 EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Per Occurrence) \$100,000 MED EXP (Any one person) \$5,000
☐	BUSINESSOWNERS					EACH OCCURRENCE \$ AGGREGATE \$
☒	AUTOMOBILE LIABILITY		BAP 2053451	3/16/2023	9/16/2023	COMBINED SINGLE LIMIT (Each accident) \$1,000,000
☒	SCHEDULED AUTOS					BODILY INJURY (Per person) \$
☐	HIRED AUTOS					BODILY INJURY (Per accident) \$
☐	NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
☐	GARAGE LIABILITY					
☐	(Other)					
☐	EXCESS LIABILITY - OCCURRENCE					EACH OCCURRENCE \$ AGGREGATE \$
☒	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY POLICY APPLIES TO THE WORKERS COMPENSATION LAW IN THE STATE OF NC	N/A	WC 0214226	2/11/2023	2/11/2024	WC STATUTORY LIMITS E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
☐	OTHER:					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES:

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

DATE 5/31/2023

Jane Leese

COI 0910

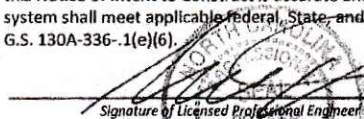
Engineer Option Permit Common Form

LHD Reference: 199471

7. Property location (physical address, tax parcel identification number or subdivision lot, block number of the property to be permitted): Weatherford Lot 69; 140 Morningside Lane; PIN: 069400-75-1370
County Name: Johnston
8. Type of facility: ☒ 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 pump to EZ Flow.
System will be located in the middle of the lot. Type IIIb.
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: ☒ domestic ☐ high strength ☐ industrial process
12. A plat as defined in G.S. 130A-334(7a) is attached: ☒ 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: ☒ Yes ☐ No
This is a saprolite system. ☐ Yes ☒ 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: ☒ Yes ☐ No
15. Evaluation of geologic and hydrogeologic conditions signed and sealed by a LG is attached ☐ Yes ☒ NA
16. Proposed landscape, site, drainage, or soil modifications are attached: ☐ Yes ☒ 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 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).


Signature of Licensed Professional Engineer

June 15, 2023

Date

Mitchell Environmental, P.A.

November 1, 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 69 (140 Morningside Lane)
Angier, Johnston County, North Carolina**

Mr. Fulcher:

This letter is in reference to the recently installed pump-to-PPBPS, initial septic system at Weatherford Subdivision Lot 69, located at 140 Morningside Lane in Angier (PIN: 069400-75-1370). An employee of Mitchell Environmental completed system testing with the system installer, and an inspection of the site and system components on October 30, 2023. A member of our staff was present during installation of the drainfield on October 18, 2023, and supply lines from the pressure manifold to individual nitrification trenches.

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

- Tanks (septic and pump) were inspected on October 18, 2023.
 - Septic Tank: Mills Septic Tank 1000 STB-858
 - Pump Tank: Mills Septic Tank 1000 PT-72
 - Polylok ST effluent filter PL-68
- Drainfield installed (Horizontal PPBPS) and inspected on October 18, 2023.
- System startup inspection completed on October 30, 2023.
- Final inspection completed on October 30, 2023.

Based on our observations and system testing that we observed, 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,

Scott Mitchell, PE, LSS



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

Mitchell Environmental, P.A.

June 15, 2023

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 69; Angier, Johnston County**

Mr. Nelson:

At your request, we have completed a site evaluation for use of on-site sewage disposal systems at Lot 69 of Weatherford Subdivision located at 140 Morningside Lane in Angier, Johnston County. The site evaluation was completed on July 18, 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 majority 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

Engineer Option Permit Common Form

LHD Reference: 197471*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 hereby designate Scott Mitchell
Print Name of Owner 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 4/11/22
Signature of Owner Date

Owner self-submittal of NOI:

I, _____ hereby submit this NOI prepared by _____
Print Name of Owner 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.

Engineer Option Permit Common Form

LHD Reference: 197471**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: _____ by _____
	Date Initials
	Date of Post-construction Conference: _____
	Post-construction Conference waived in accordance with G.S. 130A-336.1(j): _____

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, Scott Mitchell hereby attest that all items indicated above have been provided to the
Print name of Owner or Professional Engineer
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

11-01-2023*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 _____ via _____
Date Email, FAX, USPS, Hand-deliveredPrint name of authorized Agent of the LHDSignature of authorized Agent of the LHDDate☐ COMPLETE

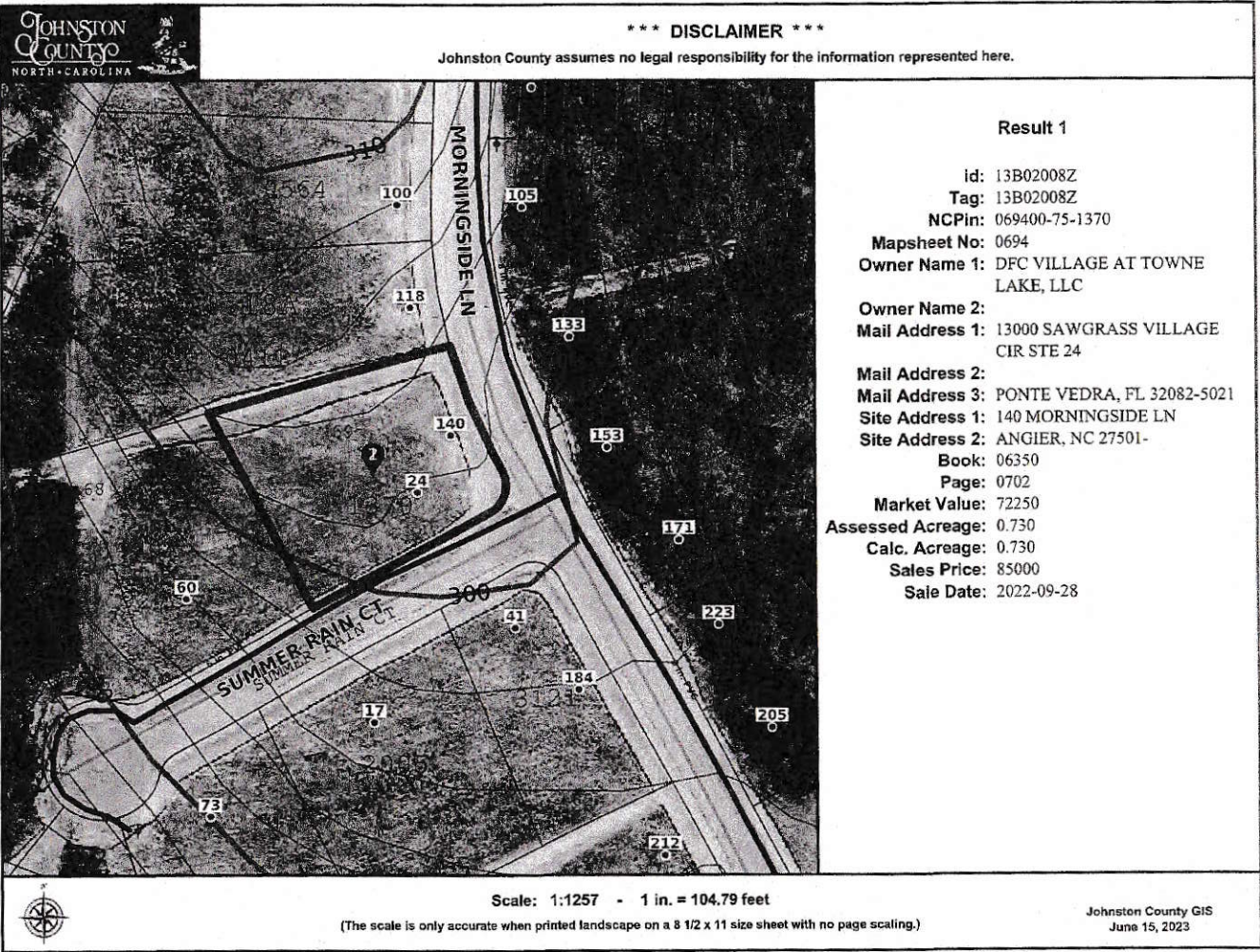
Based upon review of information submitted in the Section above, this Authorization to Operate is hereby issued in accordance with G.S. 130A-336.1(m).

A copy of this complete NOI/ATO with tracking information was sent to the State on _____ via _____
Date Email, FAX, USPS, Hand-deliveredPrint name of authorized Agent of the LHDSignature of authorized Agent of the LHDDate

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.

DHHS/EHS/OSWP – EOP COMMON FORM Updated April 2022

Page 6 of 6



Engineer Option Permit Common Form

LHD Reference:

197471

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

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 6-16-23 via Scott McFadden + Rejoice
Date Email, FAX, USPS, hand-delivered He S
A copy of this NOI and tracking information was sent to the State on 6-16-23 via Scott McFadden
Date 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

6-16-23
Date