BLDR-2022-8055
OSWP- 2022-5224

Sharon TRACE Lot #31 ✓

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 LICENSED SOIL SCIENTIST COVID-19 PERMIT OPTION FOR NON-ENGINEERED SYSTEMS
See Instructions for Use in Appendix A

Except for "Date received", this Section to be completed by the LSS in accordance with S.L. 2020-97, Section 3.19 and G.S. 130A-336.2

LHD USE ONLY: Initial submittal of this NOI received: 10/13/2022 (Date) by BB (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.): Anthony and Joy Sims

Mailing address: 131 Cherokee Drive City: Mooresville State: NC Zip: 28117

Telephone number: 704-885-4470 E-mail Address: gerald16san@gmail.com

2. Licensed Soil Scientist (LSS) name: Larry Thompson, LSS LSS License number: 1287

Mailing address: PO Box 541 City: Midland State: NC Zip: 28107

Telephone number: 704-301-4881 E-mail Address: larry@thompsonenv.com

3. Licensed Geologist (LG) (if applicable) name: N/A License Number: _____

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

Telephone number: _____ E-mail Address: _____

4. 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:

☒ LSS ☐ LG

5. Property location (physical address, tax parcel identification number or subdivision lot, block number of the property to be permitted): 167 Falling Creek Drive, Statesville, NC 28625 (Parcel: 3784909277.000) ✓

County Name: Iredell

6. Type of facility: ☒ Place of residence No. Bedrooms: 3 No. Occupants: 6

☐ Place of business Basis for flow calculation: _____

☐ Place of public assembly Basis for flow calculation: _____

7. Factors that would affect the wastewater load: Design is for domestic strength wastewater only.

8. Type and located of proposed wastewater system: Gravity flow accepted system located behind the proposed house site. System type IIIe.

9. Design wastewater flow: 360 gpd

   Design wastewater strength: ■ domestic ☐ high strength ☐ industrial process *(For industrial process wastewater, a Professional Engineer licensed in accordance with G.S. 89C shall design the on-site wastewater system.)*

10. A plat as defined in G.S. 130A-334(7a) is attached: ■ Yes ☐ No

    A site plan as defined in G.S. 130A-334(13a) is attached: ■ Yes ☐ No

11. 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

12. 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

13. Evaluation of geologic and hydrogeologic conditions signed and sealed by a LG is attached ☐ Yes ■ NA

14. Proposed landscape, site, drainage, or soil modifications are attached: ☐ Yes ■ NA

Attestation by LSS pursuant to S.L. 2020-97, Section 3.19 and G.S. 130A-336.2

I, Larry Thompson, LSS hereby attest that the information required to be included with
Licensed Soil Scientist (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, and that the proposed system does not require a Professional Engineer, licensed in accordance with G.S. 89C, and in accordance with 15A NCAC 18A .1938 and activities determined to be engineering as determined by the North Carolina Board of Examiners for Engineers and Surveyors.

Signature of Licensed Soil Scientist 09-21-22 *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 LSS COVID-19 Permit Option [S.L. 2020-97, Section 3.19(d) and G.S. 130A-336.2(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.

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 the notice of intent to construct required pursuant to subsection (b) of this section is complete within five business days after receiving 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 local health department shall notify the owner and list the information needed to complete the notice. The owner may then submit additional information to the local health department to cure the deficiencies in the initial notice. The local health department shall make a final determination as to whether the notice of intent to construct is complete within five business days after the department receives the additional information. If the local health department fails to act within any time period set out in this subsection, the owner may treat the failure to act as a determination of completeness. The owner shall be able to apply for the building permit for the project upon the decision of completeness of the notice of intent by the local health department or if the local health department fails to act within the five business day time period."

The review for completeness of this Notice of Intent was conducted in accordance with G.S. 130A-336.2(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 LSS 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 LSS and the Owner on 10/18/2022 via Email.
Date *Email, FAX, USPS, hand-delivered*

A copy of this NOI and tracking information was sent to the State on 10/18/22 via Email.
Date *Email, FAX, USPS, hand-delivered*

Benjamin A. Botkins	Benjamin A. Botkins	10/18/22
Print Name of Authorized Agent of the LHD	*Signature of Authorized Agent of the LHD*	*Date*

Re-submittal of NOI with missing items included

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

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

Item # from initial NOI	Resubmittal description

Attestation by LSS pursuant to S.L. 2020-97, Section 3.19

I, _____ hereby attest that the information required to be included with
Licensed Soil Scientist (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.

_____ _____
Signature of Licensed Soil Scientist *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-336.2(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 LSS 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 LSS 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*

PART 3: Authorization to Operate (ATO)

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

LHD USE ONLY: Initial submittal of request for ATO received: _____ (*Date*) by _____ (*Initials*)

Date of Post-construction Conference: _____

The following items are included in this submittal for an Authorization to Operate under an LSS COVID-19 permit:

1. Signed and sealed copy of the LSS's report that includes the information in G.S. 130A-336.2(k) ☐ Yes ☐ No
2. Operation and management program ☐ Yes ☐ No
3. Fee (as applicable) ☐ Yes ☐ No
4. Notarized letter documenting Owner's acceptance of the system from the LSS ☐ Yes ☐ No
5. On-site Wastewater Contractor name: _____ License number: _____

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

   Telephone number: _____ E-mail Address: _____
6. Proof of Errors and Omissions or other appropriate liability insurance for the On-site Wastewater Contractor is attached and includes the name of the insurer, name of the insured, and the effective dates of coverage.
   ☐ Yes ☐ No

Attestation by the Owner for Authorization to Operate

I, _____ (*Print name of Owner*) hereby attest that all items indicated above have been provided to the _____ County LHD and the system shall meet applicable federal, State, and local laws, regulations, rules, and ordinances.

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

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 LSS COVID-19 permit: _____.

Copies of this signed form were sent to the LSS 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-336.2(m).

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

_____ (*Print name of authorized Agent of the LHD*) _____ (*Signature of authorized Agent of the LHD*) _____ (*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.

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ **1. * APPLICANT AND OWNER ARE THE SAME. * (*Sign here*)** _____

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*

In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:

Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.

By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

☒ **2.** I, Gerald Sanchez, am the legal owner(s) of the property located at 167 Falling Creek Drive, Statesville, NC 28625, identified as PIN (Parcel Identification Number) 3784909277.000, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**)

Larry Thompson, Thompson Environmental Consulting, Inc., to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

G. Sanchez
Gerald Sanchez (Sep 21, 2022 16:46 EDT)

Signature of Owner(s)

Sep 21, 2022
Date

Mooresville - Environmental Health
barbara.nebel@co.iredell.nc.us
Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 9/7/2022

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 Higginbotham Insurance Agency, Inc. 500 W. 13th Street Fort Worth TX 76102 License#: 2081754	CONTACT NAME: David Vaughan PHONE (A/C, No, Ext): 9187797880 FAX (A/C, No): 817-882-9284 E-MAIL ADDRESS: dlvjr@higginbotham.net
INSURED Thompson Environmental Consulting, Inc. PO Box 541 Midland NC 28107-0541 THOMENV-01	INSURER(S) AFFORDING COVERAGE — NAIC # INSURER A : Mid-Continent Casualty Company — 23418 INSURER B : Hartford Underwriters Insurance Company — 30104 INSURER C : INSURER D : INSURER E : INSURER F :

COVERAGES **CERTIFICATE NUMBER:** 1600075032 **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			04-GL-001086672	9/25/2022	9/25/2023	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE [X] OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 100,000
	X Professional						MED EXP (Any one person)	$ Excluded
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	X POLICY [ ] PRO-JECT [ ] LOC						GENERAL AGGREGATE	$ 3,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ 3,000,000
								$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB [ ] OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB [ ] CLAIMS-MADE						AGGREGATE	$
	DED [ ] RETENTION $							$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N	N / A		38WECNW6175	10/17/2021	10/17/2022	X PER STATUTE [ ] OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N (Mandatory in NH)						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

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

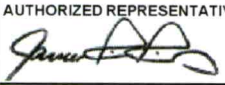
CERTIFICATE HOLDER

For Informational Purposes

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



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Residential Subsurface Wastewater Treatment and Disposal System LSS COVID-19 Proposal

for

Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

Tax Parcel # 3784909277.000
September 21, 2022

Prepared for:

Five Star Holding Contractors Inc
2226 Laurens Drive
Concord NC 28027
704-885-4470



Prepared by:

Larry Thompson, REHS, LSS
Thompson Environmental Consulting, Inc.
PO Box 541
Midland, NC 28107-0541
Phone: 704-301-4881
larry@thompsonenv.com



Details

Five Star Holding Contractors Inc has contracted with Thompson Environmental Consulting, Inc. (TEC) to prepare a septic proposal for a new 3-bedroom single family residence to be constructed at 167 Falling Creek Drive, Statesville, North Carolina (Iredell County Parcel Number: 3784909277.000).

Based upon a soil investigation performed by TEC, it was determined that a sufficient amount of "Suitable" Group IV soils are available for the installation of a **Gravity Flow Accepted System** for a 360 gallon-per-day residence at a 0.3 GPD/sq/ft long-term acceptance rate (LTAR). The proposed repair system type would be a Prefabricated Permeable Block Panel System and the property will be served by a municipal water supply.

The enclosed Licensed Soil Scientist Evaluation is being submitted pursuant to and meets the requirements of SL 2020-97 Section 3.19. The property owner would like to request that the county issue the appropriate permits for a subsurface wastewater treatment and disposal system based upon the enclosed LSS COVID-19 permit option.

Location

From Statesville, take I-40 west to Exit 141 for Sharon School Road. Turn right onto Sharon School Road and right onto Falling Creek Drive. Lot 31 is located on the left.

References

Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, Section .1900, Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, April 1, 2017.

Accepted Wastewater System No. AWWS-2005-02-R6; North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, August 21, 2015.

Primary Investigator's Credentials

NC Registered Sanitarian No. 1208
NC Licensed Soil Scientist No. 1287
NC Authorized On-Site Wastewater Evaluator No. 10016E
SC Certified Professional Soil Classifier No. 111
NC Subsurface Septic System Operator No. 22199
NC Grade IV Wastewater System Installer No. 1762
NC Certified Wastewater System Inspector No. 17621

Plans and Specifications

A. Septic Tank

1. The septic tank shall be State approved (Section .1953 of 15A NCAC 18A), watertight, structurally sound, and 1,000 gallons in capacity.
2. The septic tank shall be fitted with an approved effluent filter.
3. It is the responsibility of the septic contractor to thoroughly inspect the septic tank prior to accepting delivery to assure that the tanks have had time to properly cure and are free of cracks or other structural deficiencies.

B. Pipes and Fittings

1. All discharge piping, connectors and supply lines should be made of SCH 40 PVC.
2. All joints must be properly "welded" utilizing the appropriate PVC cement for each application.

C. Distribution Method

1. The drainlines will be fed via a distribution box.
2. Distribution box shall be water tested at the time of the final inspection.

D. Drainfield Installation

1. The drainfield has been previously laid out on-site utilizing metal stemmed flags. The property owner/builder should mark this area and isolate it as much as possible from construction traffic.
2. Under no circumstances shall any construction take place within the drainfield area while the soil is in a wet condition.
3. The specified system is an accepted wastewater system, specifically the Infiltrator Quick 4 chamber system or any other system with a state-approved 25% reduction in required drainline length.
4. The drainfield consists of three (3) lateral trenches to be constructed 3-foot wide by 100 feet long. Total drainline length is 300 feet.
5. The maximum trench depth for this system shall be **36 inches (low side)**.
6. The laterals are to be installed on contour with the land, keeping the individual trench bottoms level from beginning to end.
7. The trenches should be left open for the final inspection by the local health department.

E. Final Landscaping

1. Final cover over the drainfield shall be at least 6 inches deep. Additional soil cover may be required to achieve the 6 inch requirement.
2. The drainfield shall be shaped to shed rainwater and be free from low spots.
3. The drainfield area should be planted with grass as soon as possible to prevent erosion. The soil should be properly tilled, limed (if necessary) and fertilized prior

to planting. After applying grass seed, the area should be heavily mulched with straw or other suitable material.

F. Utility Conflicts

1. The builder and property owner must take special care in planning for water, power, gas, telephone, and cable lines. These utilities shall be kept clear of all parts of the septic system and its proposed repair area. Improper planning for underground utilities can negatively impact the installation and, in some cases, cause irreparable damage and permit revocation. If there are any questions regarding preferred routes, contact the local health department as soon as possible.
2. Lawn irrigation should not be placed over the drainfield area.

Maintenance

G. In General

1. The homeowner must maintain the drainfield area through periodic mowing. The drainfield must not be allowed to become overgrown.
2. The septic tank should be pumped every 4 years or when the solids within the septic tank reach an elevation that is equivalent to 25 percent of the volume of the tank. In some situations, the tanks may need to be pumped more frequently. If using a garbage disposal, it is recommended that the homeowner has the septic and pump tanks cleaned out annually.
3. When it becomes necessary to clean the effluent filter, the filter should be removed, and the accumulated debris washed back into the septic tank – not onto the lawn.
4. Any damp areas, leakages, or malfunctions in the drainfield area should be addressed immediately.
5. Divert gutter downspouts and surface water runoff away from the septic and pump tanks.

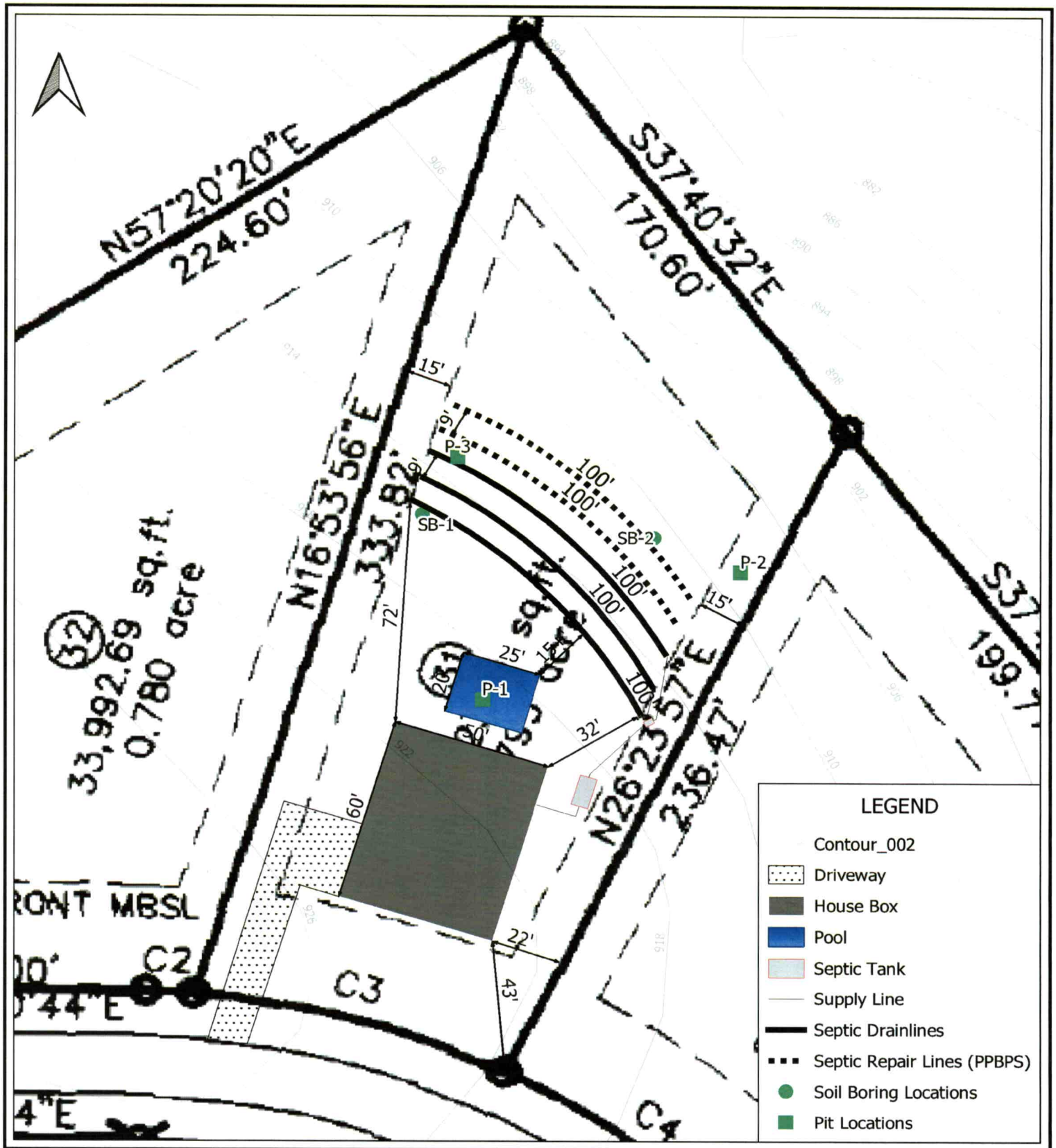
Design Specifics

Daily Design Flow:	360 GPD – 3 bedroom house
Septic Tank Size:	1,000 Gallons (minimum)
Effluent Loading Rate:	0.3 GPD per sq. ft.
Drainfield Type:	Accepted 25% Reduction
Distribution Method:	Distribution Box
Number of Drainlines:	(3) 3' Wide x 400' Long
Total Trench Length:	300 Linear Feet

Maximum Trench Depth:	36 Inches (Low Side)
Final Cover Requirement:	6 Inches

Repair Option

Effluent Loading Rate:	0.3 GPD per sq. ft.
Drainfield Type:	PPBPS
Required Linear Footage:	200 Linear Feet
Available Linear Footage:	200 Linear Feet
Maximum Trench Depth:	36 Inches (Low Side)
Installation Depth:	6 Inches



Thompson Environmental Consulting
WATER · WASTEWATER · WETLANDS

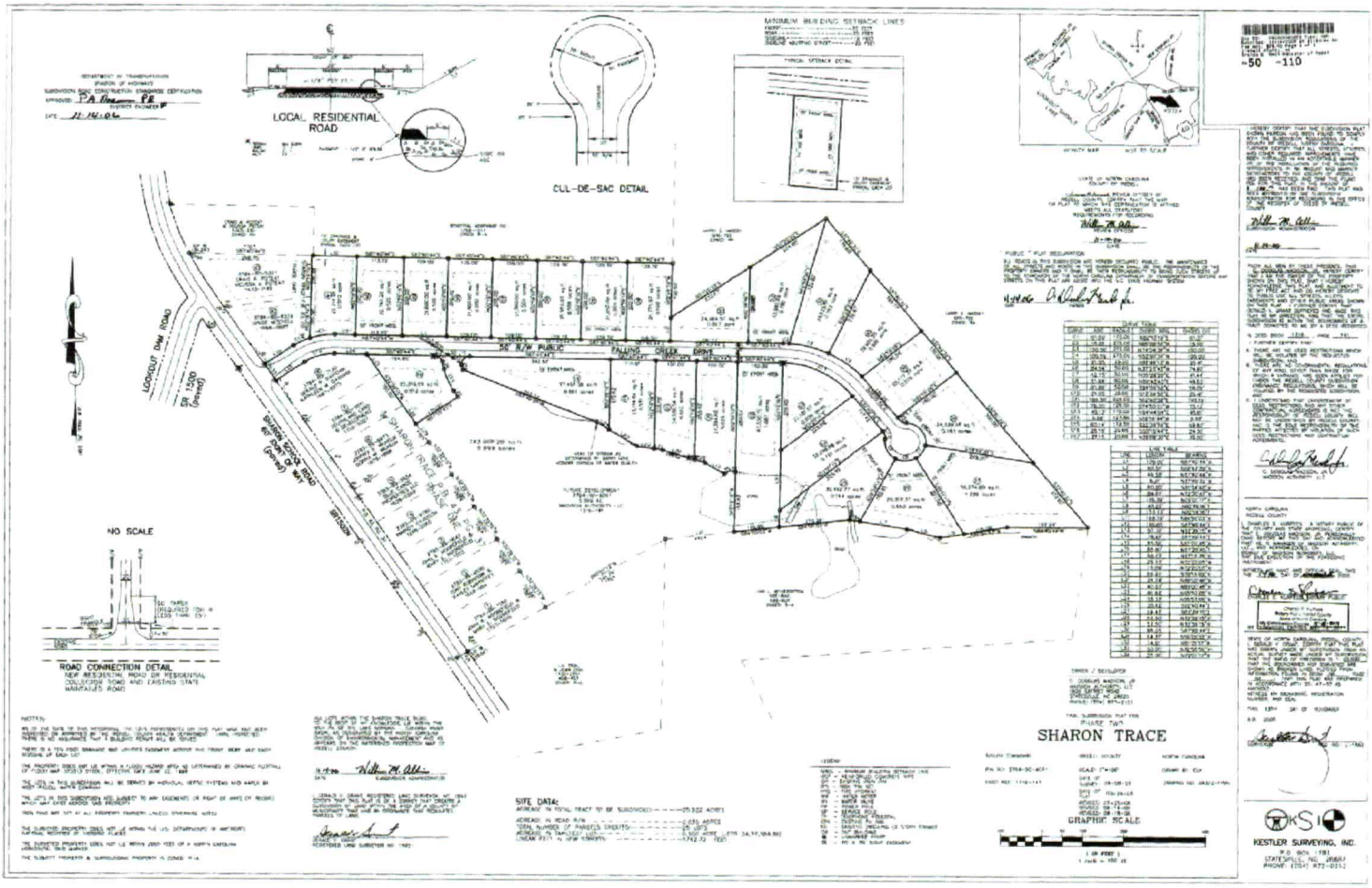
Prepared For:
Anthony and Joy Sims

Soil and Site Evaluation

Lot 31 - Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625
Iredell County

Date: September 2022
Scale: 0 20 40 ft
TEC Job #: 22-238

Figure 1


LOCAL RESIDENTIAL ROAD
CUL-DE-SAC DETAIL
MINIMUM BUILDING SETBACK LINES
TYPICAL SETBACK DETAIL
VICINITY MAP NOT TO SCALE
LOOKOUT DAM ROAD
SR 1320 (Paved)
SHARON RIDGE ROAD (SR 1319) (Paved)
50' R/W PUBLIC FALLING CREEK DRIVE
SHARON TRACE PHASE ONE
NO SCALE
ROAD CONNECTION DETAIL
NEW RESIDENTIAL ROAD OR RESIDENTIAL COLLECTOR ROAD AND EXISTING STATE MAINTAINED ROAD
SHARON TRACE
GRAPHIC SCALE
SITE DATA:
KESTLER SURVEYING, INC.
P.O. BOX 1781
STATESVILLE, NC 28687
PHONE: (704) 872-0312

PRELIMINARY SOIL AND SITE EVALUATION

Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

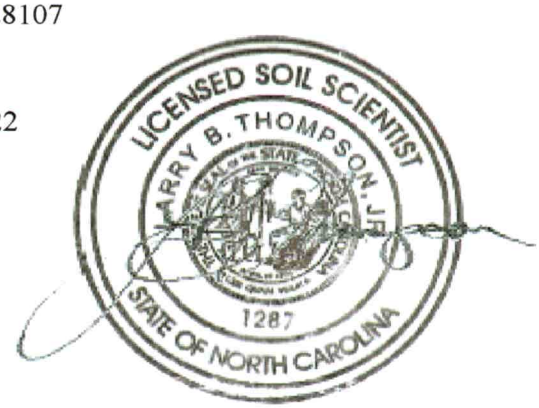
Prepared For:

Five Star Holding Contractors Inc
2226 Laurens Drive
Concord NC 28027

Thompson Environmental Consulting
WATER • WASTEWATER • WETLANDS

Thompson Environmental Consulting, Inc.
PO Box 541
Midland, NC 28107

June 6, 2022



INTRODUCTION & SITE DESCRIPTION

This Soil and Site Evaluation was performed a 0.793 acre lot (Lot 31 – Sharon Trace) located at 167 Falling Creek Drive, Statesville, North Carolina.

Thompson Environmental Consulting, Inc. (TEC) was retained to determine whether the soils were suitable for onsite subsurface wastewater treatment and disposal. The property was evaluated in accordance with North Carolina statutes for waste disposal ("Laws and Rules for Sewage Treatment and Disposal Systems", amended April 1, 2017).

INVESTIGATION METHODOLOGY & SITE PHYSICAL CHARACTERISTICS

Individual soil borings were evaluated, and soil color was determined with a Munsell Soil Color Chart. Observations of the landscape (slope, drainage patterns, etc.) as well as soil properties (depth, texture, structure, seasonal wetness, restrictive horizons, etc.) were recorded.

The property is currently undeveloped and is vegetated with a mixed deciduous forest.

FINDINGS

A field survey was conducted by Larry Thompson, LSS. Two soil borings and three pits were advanced within the project study area and locations noted in the attached Figure 1.

All soil profiles were rated as Provisionally Suitable for the installation of a subsurface wastewater treatment and disposal system utilizing Accepted System and Prefabricated Permeable Block Panel System drainfield products and are denoted in the attached Figure as green points. Surfaces typically exhibited friable sandy loam textures with weak, medium, granular structure 8 to 11 inches in depth. Upper subsurface horizons exhibited firm clay textures with moderate, medium, subangular blocky structure 55 inches and greater in depth. A long-term acceptance rate (LTAR) of 0.3 gal./day/sq. ft. would be recommended for these soils.

DISCUSSION

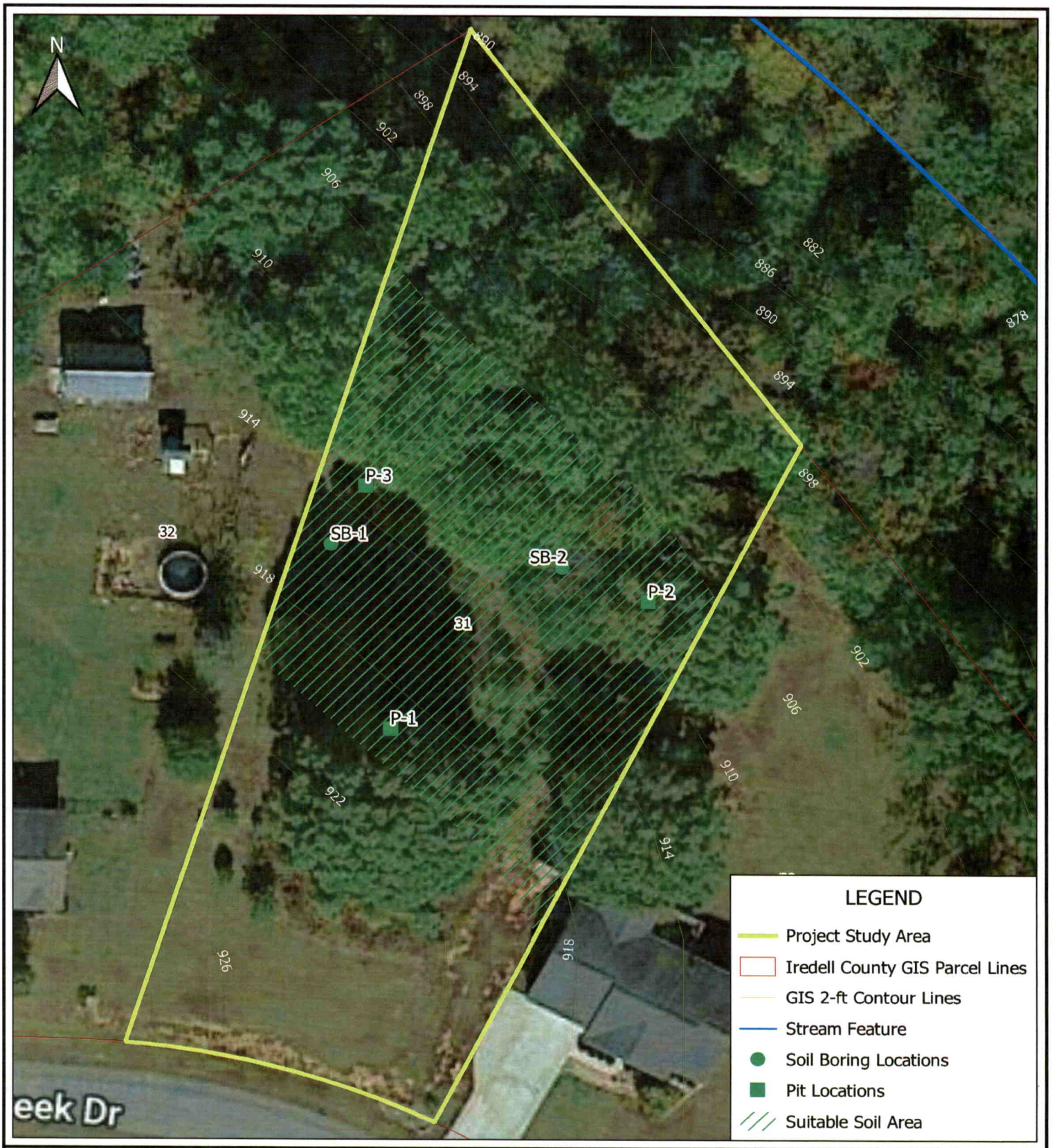
The soils observed within the project study area will support the installation of a subsurface wastewater treatment and disposal system utilizing Accepted System or Prefabricated Permeable Block Panel System drainfield products. It is estimated that 4,800 square feet of suitable soil area would need to be allocated and left completely available for the installation and required repair area for an Accepted System serving a 3-bedroom single family residence.

The required drainfield area can be reduced by 25% if using the Prefabricated Permeable Block Panel System.

CONCLUSION

The findings presented herein represent TEC's professional opinion based on our Soil and Site Evaluation and knowledge of the current laws and rules governing on-site wastewater systems in

North Carolina. Soils naturally change across a landscape and contain many inclusions. As such, attempts to quantify them are not always precise and exact. Due to this inherent variability of soils and the subjectivity when determining limiting factors, there is no guarantee that a regulating authority will agree with the findings of this report.



Thompson Environmental Consulting
WATER · WASTEWATER · WETLANDS

Prepared For:

Five Star Holding Contractors Inc

Soil and Site Evaluation

Lot 31 - Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625
Iredell County

Date: June 2022

Scale: 0 20 40 ft

TEC Job #: 22-159

Figure 1

Thompson Environmental Consulting, Inc.
PO Box 541
Midland, NC 28107

Sheet 1 of 1
PROPERTY ID #: 3784902778
COUNTY: Iredell

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**

OWNER: Dreckmann
ADDRESS: 4 Glenwood St, Sanford, MA 04073
PROPOSED FACILITY: Res PROPOSED DESIGN FLOW (.1949):
LOCATION OF SITE: 167 Fallin Creek Drive, Statesville, NC 28625
DATE EVALUATED: 6/6/22
PROPERTY SIZE: 0.79ac
PROPERTY RECORDED:
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other Sharon Trace
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	LS 8%	0-11	GR/SL	FR/NS/NP/NEP	—	55"	—	—	S 0.3
		11-55	SBK/C	FI/SS/PEP					
2	LS 10%	0-8	GR/SL	FR/NS/NP/NEP	—	55"	—	—	S 0.3
		8-55	SBK/C	FI/SS/PEP					
3	LS 10%	0-11	GR/SL	FR/NS/NP/NEP	—	60"	—	—	S 0.3
		11-60	SBK/C	FI/SS/PEP					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	8"	8"
System Type(s)	Accepts/ABDS	
Site LTAR	0.3	0.3

OTHER FACTORS (.1946):
SITE CLASSIFICATION (.1948): Provisionally Suitable
EVALUATED BY: L. Thompson, CSS
OTHER(S) PRESENT: Jeff Cox

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) Sil. (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
					MOIST	**WET**
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay)	0.4 - 0.1	0.2 - 0.05	VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky)	NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky)
		O (Organic)	None	None	EFI (Extremely Firm)	NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality.

NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

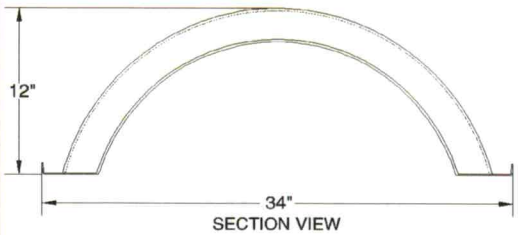
Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).

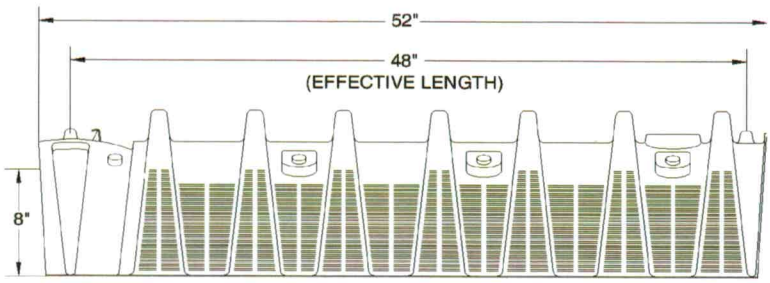
SEE FIGURE 1

Quick4™
STANDARD CHAMBER

Quick4 Standard Chamber

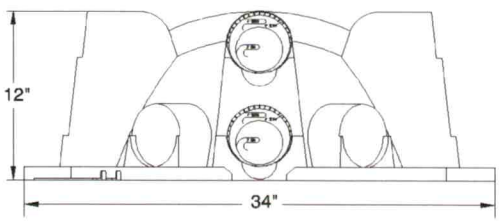


SECTION VIEW

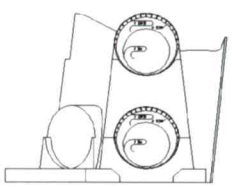


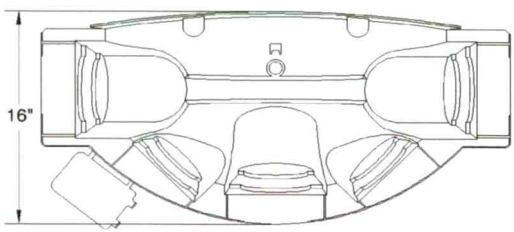
SIDE VIEW

MultiPort End Cap



FRONT VIEW


SIDE VIEW



TOP VIEW

Quick4 Standard Chamber Nominal Specifications

Size (W x L x H)	34" x 52" x 12"
Effective Length	48"
Invert Height	8"

MultiPort End Cap Nominal Specifications

Size (W x L x H)	34" x 16" x 12"
Invert Height	8" or 1.25"

INFILTRATOR SYSTEMS, INC. STANDARD LIMITED WARRANTY

(a) The structural integrity of each chamber, end plate, wedge and other accessory manufactured by Infiltrator ("Units"), when installed and operated in a leachfield of an onsite septic system in accordance with Infiltrator's instructions, is warranted to the original purchaser ("Holder") against defective materials and workmanship for one year from the date that the septic permit is issued for the septic system containing the Units; provided, however, that if a septic permit is not required by applicable law, the warranty period will begin upon the date that installation of the septic system commences. To exercise its warranty rights, Holder must notify Infiltrator in writing at its Corporate Headquarters in Old Saybrook, Connecticut within fifteen (15) days of the alleged defect. Infiltrator will supply replacement Units for Units determined by Infiltrator to be covered by this Limited Warranty. Infiltrator's liability specifically excludes the cost of removal and/or installation of the Units.

(b) THE LIMITED WARRANTY AND REMEDIES IN SUBPARAGRAPH (a) ARE EXCLUSIVE. THERE ARE NO OTHER WARRANTIES WITH RESPECT TO THE UNITS, INCLUDING NO IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

(c) This Limited Warranty shall be void if any part of the chamber system is manufactured by anyone other than Infiltrator. The Limited Warranty does not extend to incidental, consequential, special or indirect damages. Infiltrator shall not be liable for penalties or liquidated damages, including loss of production and profits, labor and materials, overhead costs, or other losses or expenses incurred by the Holder or any third party. Specifically excluded from Limited Warranty coverage are damage to the Units due to ordinary wear and tear, alteration, accident, misuse, abuse or neglect of the Units; the Units being subjected to vehicle traffic or other conditions which are not permitted by the installation instructions; failure to maintain the minimum ground covers set forth in the installation instructions; the placement of improper materials into the system containing the Units; failure of the Units or the septic system due to improper siting or improper sizing, excessive water usage, improper grease disposal, or improper operation; or any other event not caused by Infiltrator. This Limited Warranty shall be void if the Holder fails to comply with all of the terms set forth in this Limited Warranty.

Further, in no event shall Infiltrator be responsible for any loss or damage to the Holder, the Units, or any third party resulting from installation or shipment, or from any product liability claims of Holder or any third party. For this Limited Warranty to apply, the Units must be installed in accordance with all site conditions required by state and local codes; all other applicable laws; and Infiltrator's installation instructions.

(d) No representative of Infiltrator has the authority to change or extend this Limited Warranty. No warranty applies to any party other than the original Holder.

* * * * * * *

The above represents the Standard Limited Warranty offered by Infiltrator. A limited number of states and counties have different warranty requirements. Any purchaser of Units should contact Infiltrator's Corporate Headquarters in Old Saybrook, Connecticut, prior to such purchase, to obtain a copy of the applicable warranty, and should carefully read that warranty prior to the purchase of Units.

INFILTRATOR® SYSTEMS INC
Environmental Onsite Wastewater Solutions℠
6 Business Park Road • P.O. Box 768
Old Saybrook, CT 06475
860-577-7000 • FAX 860-577-7001
800-221-4436

U.S. Patents: 4,759,661; 5,017,041; 5,156,488; 5,336,017; 5,401,116; 5,401,459; 5,511,903; 5,716,163; 5,588,778; 5,839,844
Canadian Patents: 1,329,959; 2,004,564 Other patents pending.

Infiltrator, Equalizer and SideWinder are registered trademarks of Infiltrator Systems Inc. Infiltrator is a registered trademark in France. Infiltrator Systems Inc. is a registered trademark in Mexico. Contour, Contour Swivel Connection, MicroLeaching, PolyTuff, SnapLock, ChamberSpacer, PosiLock, QuickCut, QuickPlay and Quick4 are trademarks of Infiltrator Systems Inc. © 2003 Infiltrator Systems Inc. Printed in U.S.A.

RECYCLED PAPER

Q011203HP-0

State of NC LSS Permit Option COVID-19 LHD Reference: OSWP-2022-5224

PART 3: Authorization to Operate (ATO)

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

LHD USE ONLY: Initial submittal of request for ATO received: 6/8/2023 (Date) by BB. (Initials)

Date of Post-construction Conference: N/A

The following items are included in this submittal for an Authorization to Operate under an LSS COVID-19 permit:

1. Signed and sealed copy of the LSS's report that includes:
   a. Signed and sealed evaluation of soil conditions and site features — [X] Yes [ ] No
   b. Drawings, specifications, plans — [X] Yes [ ] No
   c. Reports on special inspections and final inspection — [X] Yes [ ] No
   d. Management Program manual — [X] Yes [ ] No
   e. On-site Wastewater Contractor's signed statement — [X] Yes [ ] No
2. Fee (as applicable) — [X] Yes [ ] No
3. Notarized letter documenting Owner's acceptance of the system from the LSS — [X] Yes [ ] No
4. On-site Wastewater Contractor name: Chuck Jenks License number: 5887

   Mailing address: 5212 Old Mill Road City: Morganton State: NC Zip: 28655

   Telephone number: 704-300-9937 E-mail Address: servantforhim7777@gmail.com
5. Proof of Errors and Omissions or other appropriate liability insurance for the On-site Wastewater Contractor is attached and includes the name of the insurer, name of the insured, and the effective dates of coverage.
   [X] Yes [ ] No

Attestation by the Owner for Authorization to Operate

I, Five Star Holdings Contractors, Inc. (Print name of Owner) hereby attest that all items indicated above have been provided to the Iredell County LHD and the system shall meet applicable federal, State, and local laws, regulations, rules and ordinances.

Gerald Sanchez (May 17, 2023 21:56 EDT) — May 17, 2023

Signature of Owner *Date*

This section for LHD Use Only.

LHD Review of required information for the ATO

[ ] INCOMPLETE

Based upon review of information submitted by the Owner in the Section above, the following items are missing from the information required for an Authorization to Operate for an LSS COVID-19 permit: _____.

Copies of this signed form were sent to the LSS 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*

[X] COMPLETE

Based upon review of information submitted by the Owner in the Section above, this Authorization to Operate is hereby issued in accordance with G.S. 130A-336.2(m).

A copy of this complete NOI/ATO with tracking information was sent to the State on 6/9 (Date) via Email (Email, FAX, USPS, Hand-delivered).

Benjamin A. Bottesir — Benjamin A. Bottesir — 6/9/2023

Print name of authorized Agent of the LHD *Signature of authorized Agent of the LHD* *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.

Five Star Holding Contractors Inc
2226 Laurens Drive
Concord NC 28027

Subject: Septic System Installation
Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

The septic system installed on the above-referenced property was specified by Larry Thompson, LSS, with the final installation work being performed by Chuck Jenks.

The owner does hereby accept the septic system installed for 167 Falling Creek Drive, Statesville, NC 28625

(signature) Date 05/19/2023.

NORTH CAROLINA NOTARY ACKNOWLEDGMENT

THE STATE OF NORTH CAROLINA

COUNTY OF Mecklenburg

I, Ashish KC, Notary Public, do hereby certify that Gerald H. Sanchez (name of individual(s) whose acknowledgment is being taken) personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal this 19th day of May, 2023

Notary Public Signature

ASHISH K C NOTARY PUBLIC CABARRUS COUNTY, NC

Print Ashish KC

My commission expires: 04/03/2027

(Official Seal)

May 17, 2023

RE: Septic System Installation
Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

The purpose of this letter is to confirm that the septic system installation for 167 Falling Creek Drive, Statesville, NC 28625 was installed in general accordance with the LSS COVID-19 proposal submitted to your office by Larry Thompson, LSS.

Sincerely,

Chuck Jenks (Jun 8, 2023 16:07 EDT)
Chuck Jenks
R&C Construction

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/16/2023

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	CONTACT NAME:	
Next First Insurance Agency, Inc. PO Box 60787 Palo Alto, CA 94306	PHONE (A/C, No, Ext): (855) 222-5919	FAX (A/C, No):
	E-MAIL ADDRESS: support@nextinsurance.com	

INSURED	INSURER(S) AFFORDING COVERAGE	NAIC #
Chuck Jenks Chuck Jenks DBA R&C Construction 5212 Old Mill Rd Morganton, NC 28655	INSURER A : Next Insurance US Company	16285
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 157619534 **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:			NXTKC4JCLL-00-GL	05/16/2023	05/16/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG 	$1,000,000.00 $100,000.00 $10,000.00 $1,000,000.00 $1,000,000.00 $1,000,000.00 $
	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) 	$ $ $ $ $
	UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION $						EACH OCCURRENCE AGGREGATE 	$ $ $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y / N If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	 $ $ $
A	Contractors Errors and Omissions			NXTKC4JCLL-00-GL	05/16/2023	05/16/2024	Each Occurrence: Aggregate:	$10,000.00 $20,000.00

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

Proof of Insurance.

CERTIFICATE HOLDER

Chuck Jenks
Chuck Jenks DBA R&C Construction
5212 Old Mill Rd
Morganton, NC 28655

LIVE CERTIFICATE

Click or scan to view

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

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THOMPSON ENVIRONMENTAL CONSULTING, INC.
WATER ♦ WASTEWATER ♦ WETLANDS

May 18, 2023

RE: Septic System Installation
Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

The purpose of this letter is to confirm that the septic system installation for 167 Falling Creek Drive, Statesville, NC 28625 was installed in general accordance with the permit package submitted to your office. This system has been inspected for the LSS COVID-19 permit closeout process.

Sincerely,

Larry B. Thompson, Jr.

PO BOX 541 • MIDLAND, NC • 28107
PHONE: 704-301-4881 • EMAIL: LARRY@THOMPSONENV.COM
WEB: WWW.THOMPSONENV.COM

Residential Subsurface Wastewater Treatment and Disposal System LSS COVID-19 Proposal

for

Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

Tax Parcel # 3784909277.000
September 21, 2022

Prepared for:

Five Star Holding Contractors Inc
2226 Laurens Drive
Concord NC 28027
704-885-4470



Prepared by:

Larry Thompson, REHS, LSS
Thompson Environmental Consulting, Inc.
PO Box 541
Midland, NC 28107-0541
Phone: 704-301-4881
larry@thompsonenv.com



Details

Five Star Holding Contractors Inc has contracted with Thompson Environmental Consulting, Inc. (TEC) to prepare a septic proposal for a new 3-bedroom single family residence to be constructed at 167 Falling Creek Drive, Statesville, North Carolina (Iredell County Parcel Number: 3784909277.000).

Based upon a soil investigation performed by TEC, it was determined that a sufficient amount of "Suitable" Group IV soils are available for the installation of a **Gravity Flow Accepted System** for a 360 gallon-per-day residence at a 0.3 GPD/sq/ft long-term acceptance rate (LTAR). The proposed repair system type would be a Prefabricated Permeable Block Panel System and the property will be served by a municipal water supply.

The enclosed Licensed Soil Scientist Evaluation is being submitted pursuant to and meets the requirements of SL 2020-97 Section 3.19. The property owner would like to request that the county issue the appropriate permits for a subsurface wastewater treatment and disposal system based upon the enclosed LSS COVID-19 permit option.

Location

From Statesville, take I-40 west to Exit 141 for Sharon School Road. Turn right onto Sharon School Road and right onto Falling Creek Drive. Lot 31 is located on the left.

References

Laws and Rules for Sewage Treatment and Disposal Systems, 15A NCAC 18A, Section .1900, Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, April 1, 2017.

Accepted Wastewater System No. AWWS-2005-02-R6; North Carolina Department of Environment and Natural Resources, Division of Environmental Health, On-Site Wastewater Section, August 21, 2015.

Primary Investigator's Credentials

NC Registered Sanitarian No. 1208
NC Licensed Soil Scientist No. 1287
NC Authorized On-Site Wastewater Evaluator No. 10016E
SC Certified Professional Soil Classifier No. 111
NC Subsurface Septic System Operator No. 22199
NC Grade IV Wastewater System Installer No. 1762
NC Certified Wastewater System Inspector No. 17621

Plans and Specifications

A. Septic Tank

1. The septic tank shall be State approved (Section .1953 of 15A NCAC 18A), watertight, structurally sound, and 1,000 gallons in capacity.
2. The septic tank shall be fitted with an approved effluent filter.
3. It is the responsibility of the septic contractor to thoroughly inspect the septic tank prior to accepting delivery to assure that the tanks have had time to properly cure and are free of cracks or other structural deficiencies.

B. Pipes and Fittings

1. All discharge piping, connectors and supply lines should be made of SCH 40 PVC.
2. All joints must be properly "welded" utilizing the appropriate PVC cement for each application.

C. Distribution Method

1. The drainlines will be fed via a distribution box.
2. Distribution box shall be water tested at the time of the final inspection.

D. Drainfield Installation

1. The drainfield has been previously laid out on-site utilizing metal stemmed flags. The property owner/builder should mark this area and isolate it as much as possible from construction traffic.
2. Under no circumstances shall any construction take place within the drainfield area while the soil is in a wet condition.
3. The specified system is an accepted wastewater system, specifically the Infiltrator Quick 4 chamber system or any other system with a state-approved 25% reduction in required drainline length.
4. The drainfield consists of three (3) lateral trenches to be constructed 3-foot wide by 100 feet long. Total drainline length is 300 feet.
5. The maximum trench depth for this system shall be **36 inches (low side)**.
6. The laterals are to be installed on contour with the land, keeping the individual trench bottoms level from beginning to end.
7. The trenches should be left open for the final inspection by the local health department.

E. Final Landscaping

1. Final cover over the drainfield shall be at least 6 inches deep. Additional soil cover may be required to achieve the 6 inch requirement.
2. The drainfield shall be shaped to shed rainwater and be free from low spots.
3. The drainfield area should be planted with grass as soon as possible to prevent erosion. The soil should be properly tilled, limed (if necessary) and fertilized prior

to planting. After applying grass seed, the area should be heavily mulched with straw or other suitable material.

F. Utility Conflicts

1. The builder and property owner must take special care in planning for water, power, gas, telephone, and cable lines. These utilities shall be kept clear of all parts of the septic system and its proposed repair area. Improper planning for underground utilities can negatively impact the installation and, in some cases, cause irreparable damage and permit revocation. If there are any questions regarding preferred routes, contact the local health department as soon as possible.
2. Lawn irrigation should not be placed over the drainfield area.

Maintenance

G. In General

1. The homeowner must maintain the drainfield area through periodic mowing. The drainfield must not be allowed to become overgrown.
2. The septic tank should be pumped every 4 years or when the solids within the septic tank reach an elevation that is equivalent to 25 percent of the volume of the tank. In some situations, the tanks may need to be pumped more frequently. If using a garbage disposal, it is recommended that the homeowner has the septic and pump tanks cleaned out annually.
3. When it becomes necessary to clean the effluent filter, the filter should be removed, and the accumulated debris washed back into the septic tank – not onto the lawn.
4. Any damp areas, leakages, or malfunctions in the drainfield area should be addressed immediately.
5. Divert gutter downspouts and surface water runoff away from the septic and pump tanks.

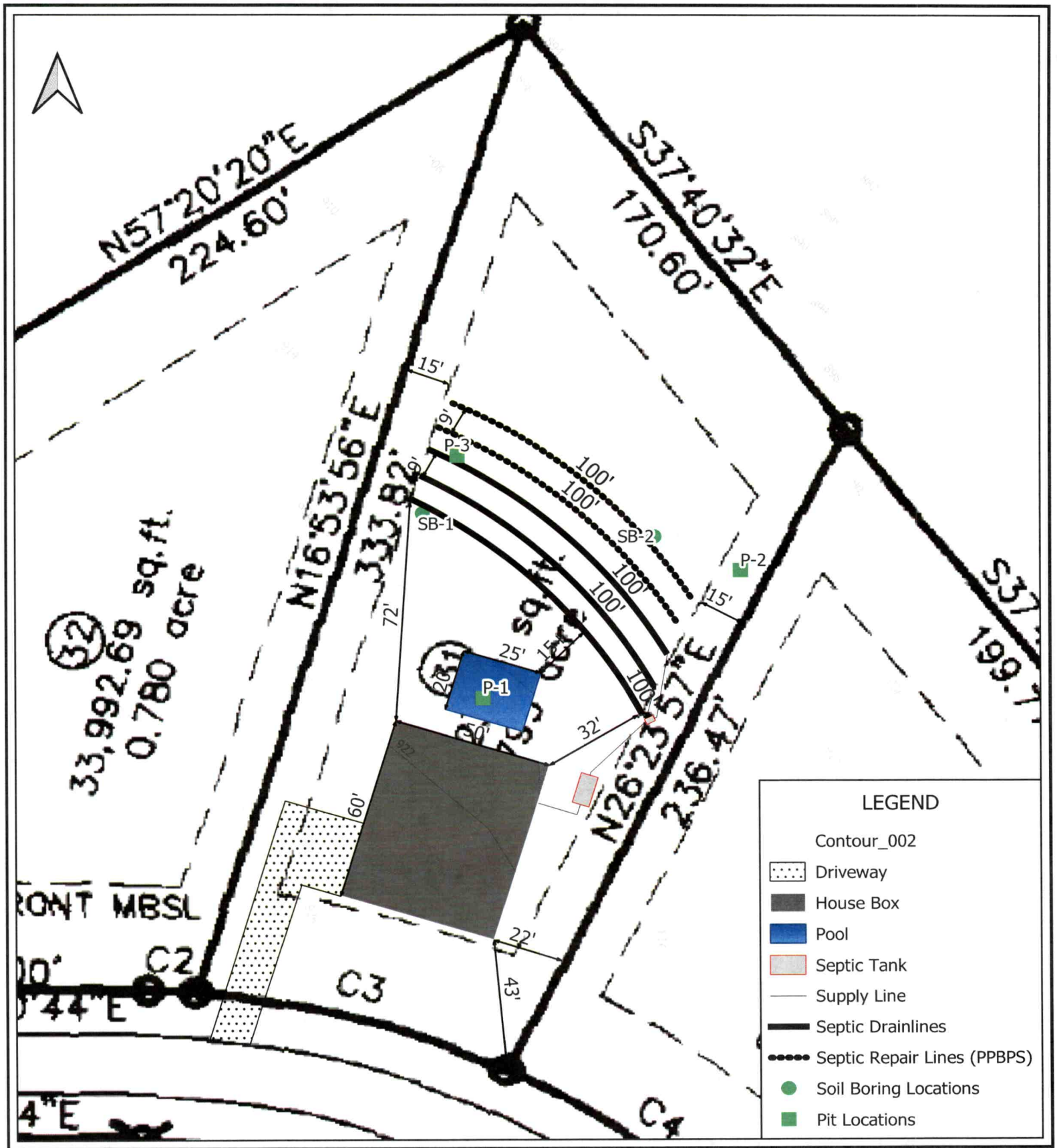
Design Specifics

Daily Design Flow:	360 GPD – 3 bedroom house
Septic Tank Size:	1,000 Gallons (minimum)
Effluent Loading Rate:	0.3 GPD per sq. ft.
Drainfield Type:	Accepted 25% Reduction
Distribution Method:	Distribution Box
Number of Drainlines:	(3) 3' Wide x 400' Long
Total Trench Length:	300 Linear Feet

Maximum Trench Depth:	36 Inches (Low Side)
Final Cover Requirement:	6 Inches

Repair Option

Effluent Loading Rate:	0.3 GPD per sq. ft.
Drainfield Type:	PPBPS
Required Linear Footage:	200 Linear Feet
Available Linear Footage:	200 Linear Feet
Maximum Trench Depth:	36 Inches (Low Side)
Installation Depth:	6 Inches



Thompson Environmental Consulting
WATER · WASTEWATER · WETLANDS

Prepared For:

Anthony and Joy Sims

Soil and Site Evaluation

Lot 31 - Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

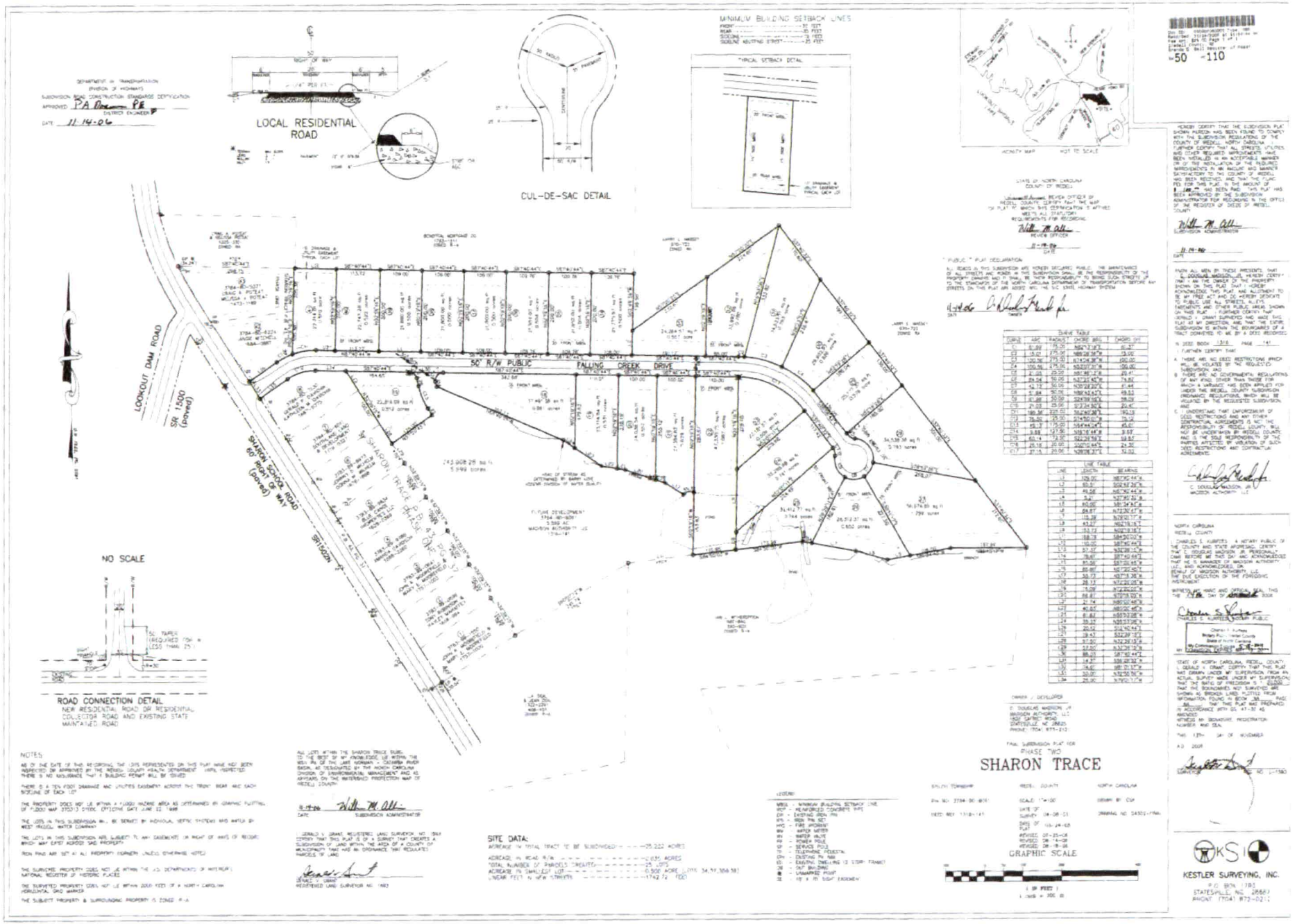
Iredell County

Date: September 2022

Scale: 0 20 40 ft

TEC Job #: 22-238

Figure 1



NOTES:

AS OF THE DATE OF THIS RECORDING, THE LOTS REPRESENTED ON THIS PLAT HAVE NOT BEEN INSPECTED OR APPROVED BY THE IREDELL COUNTY HEALTH DEPARTMENT (ICHD). INSPECTED. THERE IS NO ASSURANCE THAT A BUILDING PERMIT WILL BE ISSUED

THERE IS A TEN FOOT DRAINAGE AND UTILITIES EASEMENT ACROSS THE FRONT, REAR AND EACH SIDELINE OF EACH LOT

THE PROPERTY DOES NOT LIE WITHIN A FLOOD HAZARD AREA AS DETERMINED BY GRAPHIC PLOTTING OF F-2000 MAP 3750 I SYDEC OFFICIAL DATE JUNE 22, 1998

THE LOTS IN THIS SUBDIVISION WILL BE SERVED BY MONOLA, WATER SYSTEMS AND WATER BY WEST IREDELL WATER COMPANY

THE LOTS IN THIS SUBDIVISION ARE SUBJECT TO ANY EASEMENTS OR RIGHT OF WAYS OF RECORD WHICH MAY EXIST ACROSS SAID PROPERTY

IRON PINS ARE SET AT ALL PROPERTY CORNERS UNLESS OTHERWISE NOTED

THE SURVEYED PROPERTY DOES NOT LIE WITHIN THE U.S. DEPARTMENT OF INTERIOR'S NATIONAL REGISTER OF HISTORIC PLACES

THE SURVEYED PROPERTY DOES NOT LIE WITHIN 2000 FEET OF A NORTH CAROLINA HORIZONTAL GRID MARKER

THE SUBJECT PROPERTY & SURROUNDING PROPERTY IS ZONED R-A

ALL LOTS WITHIN THE SHARON TRACE SUBD. TO THE BEST OF MY KNOWLEDGE LIE WITHIN THE WEST FK OF THE LAKE NORMAN - CATAWBA RIVER BASIN, AS DESIGNATED BY THE NORTH CAROLINA DIVISION OF ENVIRONMENTAL MANAGEMENT AND AS APPEARS ON THE WATERSHED PROTECTION MAP OF IREDELL COUNTY

11-19-06 DATE — SUBDIVISION ADMINISTRATOR

GERALD V. GRANT, REGISTERED LAND SURVEYOR NO. L-1580 CERTIFY THAT THIS PLAT IS OF A SURVEY THAT CREATES A SUBDIVISION OF LAND WITHIN THE AREA OF A COUNTY OR MUNICIPALITY THAT HAS NO ORDINANCE THAT REGULATES PARCELS OF LAND

GERALD V. GRANT
REGISTERED LAND SURVEYOR NO. L-1580

SITE DATA:
ACREAGE IN TOTAL TRACT TO BE SUBDIVIDED = 35.222 ACRES
ACREAGE IN ROAD R/W = 6.85 ACRES
TOTAL NUMBER OF PARCELS CREATED = 25 LOTS
ACREAGE IN SMALLEST LOT = 0.906 ACRE (LOT# 34,37,38&39)
LINEAR FEET IN NEW STREETS = 1742.72 (50')

LEGEND
MBSL - MINIMUM BUILDING SETBACK LINE
RCP - REINFORCED CONCRETE PIPE
EIP - EXISTING IRON PIN
IPS - IRON PIN SET
HYC - FIRE HYDRANT
WM - WATER METER
WV - WATER VALVE
PP - POWER POLE
SP - SERVICE POLE
TP - TELEPHONE PEDESTAL
CPI - EXISTING PK NAIL
EO - EXISTING DWELLING (2 STORY FRAME)
OB - OUT BUILDING
M - UNMARKED POINT
SE - 10' & 15' SIGHT EASEMENT

STATE OF NORTH CAROLINA
COUNTY OF IREDELL

I, _____, REVIEW OFFICER OF IREDELL COUNTY, CERTIFY THAT THE MAP OR PLAT TO WHICH THIS CERTIFICATION IS ATTACHED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.

REVIEW OFFICER — DATE 11-19-06

"PUBLIC" PLAT DEDICATION

ALL ROADS IN THIS SUBDIVISION ARE HEREBY DEDICATED PUBLIC. THE MAINTENANCE OF ALL STREETS AND ROADS IN THIS SUBDIVISION SHALL BE THE RESPONSIBILITY OF THE PROPERTY OWNERS WHO IT SHALL BE THEIR RESPONSIBILITY TO BRING SUCH STREETS UP TO THE STANDARDS OF THE NORTH CAROLINA DEPARTMENT OF TRANSPORTATION BEFORE ANY STREETS ON THE PLAT ARE ADDED INTO THE S.C. STATE HIGHWAY SYSTEM

OWNER — DATE 11-14-06

DRIVE TABLE

CURVE	ARC	RADIUS	CHORD BRG.	CHORD DIST.
C1	61.89	175.00	N82°13'18"E	61.57
C2	47.51	175.00	N69°28'38"E	47.36
C3	130.56	275.00	S74°04'38"W	129.35
C4	159.56	275.00	S53°03'31"W	157.30
C5	47.20	50.00	N81°18'27"E	45.47
C6	24.54	50.00	N37°22'45"E	24.29
C7	42.72	50.00	N39°28'20"E	41.44
C8	49.53	50.00	N88°43'47"E	48.53
C9	61.88	50.00	S84°59'08"E	58.09
C10	21.03	25.00	S73°24'30"E	20.41
C11	180.32	225.00	N42°40'38"E	175.53
C12	76.30	25.00	S04°50'01"E	75.14
C13	69.17	175.00	S36°44'24"E	68.71
C14	3.88	125.00	S39°15'44"W	3.87
C15	80.14	75.00	S64°23'58"E	76.37
C16	25.16	20.00	S50°10'44"E	24.30
C17	47.13	20.56	N28°06'37"E	34.82

LINE TABLE

LINE	LENGTH	BEARING
L1	126.00'	N87°40'44"W
L2	60.67'	S00°57'26"E
L3	49.56'	N87°40'44"W
L4	5.61'	N27°40'32"W
L5	60.00'	S81°34'54"E
L6	28.87'	N72°30'47"E
L7	15.28'	N26°01'17"E
L8	43.27'	N62°19'15"E
L9	15.73'	N09°19'16"E
L10	18.73'	S84°30'42"E
L11	100.00'	S87°40'44"E
L12	57.47'	N32°28'12"E
L13	79.00'	S87°40'44"E
L14	85.00'	S87°05'45"E
L15	80.80'	N67°20'40"E
L16	56.73'	N27°13'36"E
L17	28.13'	N74°20'05"E
L18	15.09'	N14°26'05"E
L19	88.81'	S72°59'09"E
L20	21.74'	N89°50'48"E
L21	40.67'	N80°06'48"E
L22	61.82'	N58°37'08"E
L23	59.33'	N38°37'08"E
L24	20.12'	S04°40'44"E
L25	38.43'	S32°28'12"E
L26	57.50'	N32°28'12"E
L27	49.50'	S37°19'12"E
L28	88.35'	S87°40'44"E
L29	14.37'	S86°28'32"E
L30	74.62'	S81°01'17"E
L31	50.07'	N32°58'36"E
L32	29.06'	N79°01'17"W

I, DOUGLAS MADISON, JR. HEREBY CERTIFY THAT THE SUBDIVISION PLAT SHOWN HEREON HAS BEEN FOUND TO COMPLY WITH THE SUBDIVISION REGULATIONS OF THE COUNTY OF IREDELL, NORTH CAROLINA. I FURTHER CERTIFY THAT ALL STREETS, UTILITIES AND OTHER REQUIRED IMPROVEMENTS HAVE BEEN INSTALLED IN AN ACCEPTABLE MANNER OR OF THE INSTALLATION OF THE REQUIRED IMPROVEMENTS IN AN ADEQUATE AND MANNER SATISFACTORY TO THIS COUNTY OF IREDELL HAS BEEN SECURED, AND THAT THE FUNDS FOR SAID PLAT IS THE AMOUNT OF $ [illegible] HAS BEEN PAID. THIS PLAT HAS BEEN APPROVED BY THE SUBDIVISION ADMINISTRATOR FOR RECORDING IN THE OFFICE OF THE REGISTER OF DEEDS OF IREDELL COUNTY.

SUBDIVISION ADMINISTRATOR — DATE 11-14-06

FROM ALL MEN BY THESE PRESENTS, THAT I, DOUGLAS MADISON, JR., HEREBY CERTIFY THAT I AM THE OWNER OF THE PROPERTY SHOWN ON THIS PLAT THAT I HEREBY ACKNOWLEDGE THIS PLAT AND ALLOTMENT TO BE MY FREE ACT AND DO HEREBY DEDICATE TO PUBLIC USE ALL STREETS, ALLEYS, EASEMENTS AND OTHER PUBLIC AREAS SHOWN ON THIS PLAT. FURTHER CERTIFY THAT GERALD V. GRANT SURVEYED AND MADE THIS PLAT AT MY DIRECTION, AND THAT THE ENTIRE SUBDIVISION IS WITHIN THE BOUNDARIES OF A TRACT CONVEYED TO ME AS A DEED RECORDED IN DEED BOOK 1316 PAGE 141.

I FURTHER CERTIFY THAT

A. THERE ARE NO DEED RESTRICTIONS WHICH WILL BE VIOLATED BY THE REQUESTED SUBDIVISION OF LAND.

B. THERE ARE NO GOVERNMENTAL REGULATIONS OF ANY KIND, OTHER THAN THOSE FOR WHICH A VARIANCE HAS BEEN APPLIED FOR UNDER THIS IREDELL COUNTY SUBDIVISION ORDINANCE REGULATIONS, WHICH WILL BE VIOLATED BY THE REQUESTED SUBDIVISION, AND

C. UNDERSTAND THAT ENFORCEMENT OF DEED RESTRICTIONS AND ANY OTHER CONTRACTUAL AGREEMENTS IS NOT THE RESPONSIBILITY OF IREDELL COUNTY, WILL NOT BE UNDERTAKEN BY IREDELL COUNTY AND IS THE SOLE RESPONSIBILITY OF THE PARTIES AFFECTED BY VIOLATION OF SUCH DEED RESTRICTIONS AND CONTRACTUAL AGREEMENTS.

C. DOUGLAS MADISON, JR.
MADISON AUTHORITY, LLC

NORTH CAROLINA
IREDELL COUNTY

I, CHARLES S. KUMPERS, A NOTARY PUBLIC OF THE COUNTY AND STATE AFORESAID, CERTIFY THAT C. DOUGLAS MADISON, JR. PERSONALLY CAME BEFORE ME THIS DAY AND ACKNOWLEDGED THAT HE IS MANAGER OF MADISON AUTHORITY, LLC, AND ACKNOWLEDGED ON BEHALF OF MADISON AUTHORITY, LLC THE EXECUTION OF THE FOREGOING INSTRUMENT.

WITNESS MY HAND AND OFFICIAL SEAL THIS THE 17th DAY OF November 2006

CHARLES S. KUMPERS, NOTARY PUBLIC

My Commission Expires: 8-19-2012

STATE OF NORTH CAROLINA, IREDELL COUNTY

I, GERALD V. GRANT, CERTIFY THAT THIS PLAT WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION (DEED BOOK 1316, PAGE 141, ETC.); THAT THE RATIO OF PRECISION IS 1: 10,000+; THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN AS BROKEN LINES PLOTTED FROM INFORMATION FOUND IN BOOK 1316, PAGE 141; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH GS. 47-30 AS AMENDED.

WITNESS MY SIGNATURE, REGISTRATION NUMBER AND SEAL

THIS 13th DAY OF NOVEMBER, A.D. 2006

L-1580

PROJECT INFORMATION
TAX NO: 3784-90-8974
DEED REF: 1316-141
TOWNSHIP: FALLS
COUNTY: IREDELL
STATE: NORTH CAROLINA
SCALE: 1"=100'
DATE OF SURVEY: 04-06-06
DATE OF PLAT: 10-24-06
REVISED: 07-25-06
REVISED: 08-14-06
REVISED: 09-18-06
DRAWN BY: CW
DRAWING NO: 34501-FINAL

KESTLER SURVEYING, INC.
P.O. BOX 1785
STATESVILLE, NC 28687
PHONE (704) 872-0211

PRELIMINARY SOIL AND SITE EVALUATION

Lot 31 – Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625

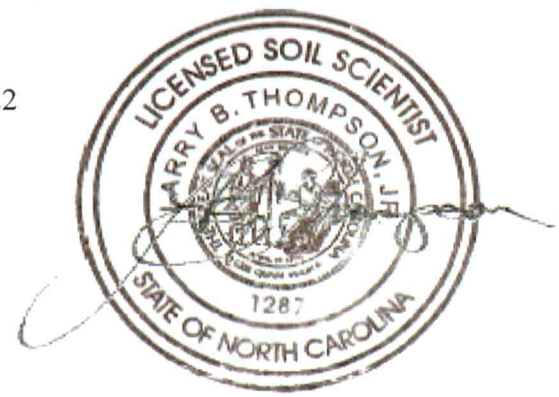
Prepared For:

Five Star Holding Contractors Inc
2226 Laurens Drive
Concord NC 28027

Thompson Environmental Consulting
WATER • WASTEWATER • WETLANDS

Thompson Environmental Consulting, Inc.
PO Box 541
Midland, NC 28107

June 6, 2022



INTRODUCTION & SITE DESCRIPTION

This Soil and Site Evaluation was performed a 0.793 acre lot (Lot 31 – Sharon Trace) located at 167 Falling Creek Drive, Statesville, North Carolina.

Thompson Environmental Consulting, Inc. (TEC) was retained to determine whether the soils were suitable for onsite subsurface wastewater treatment and disposal. The property was evaluated in accordance with North Carolina statutes for waste disposal ("Laws and Rules for Sewage Treatment and Disposal Systems", amended April 1, 2017).

INVESTIGATION METHODOLOGY & SITE PHYSICAL CHARACTERISTICS

Individual soil borings were evaluated, and soil color was determined with a Munsell Soil Color Chart. Observations of the landscape (slope, drainage patterns, etc.) as well as soil properties (depth, texture, structure, seasonal wetness, restrictive horizons, etc.) were recorded.

The property is currently undeveloped and is vegetated with a mixed deciduous forest.

FINDINGS

A field survey was conducted by Larry Thompson, LSS. Two soil borings and three pits were advanced within the project study area and locations noted in the attached Figure 1.

All soil profiles were rated as Provisionally Suitable for the installation of a subsurface wastewater treatment and disposal system utilizing Accepted System and Prefabricated Permeable Block Panel System drainfield products and are denoted in the attached Figure as green points. Surfaces typically exhibited friable sandy loam textures with weak, medium, granular structure 8 to 11 inches in depth. Upper subsurface horizons exhibited firm clay textures with moderate, medium, subangular blocky structure 55 inches and greater in depth. A long-term acceptance rate (LTAR) of 0.3 gal./day/sq. ft. would be recommended for these soils.

DISCUSSION

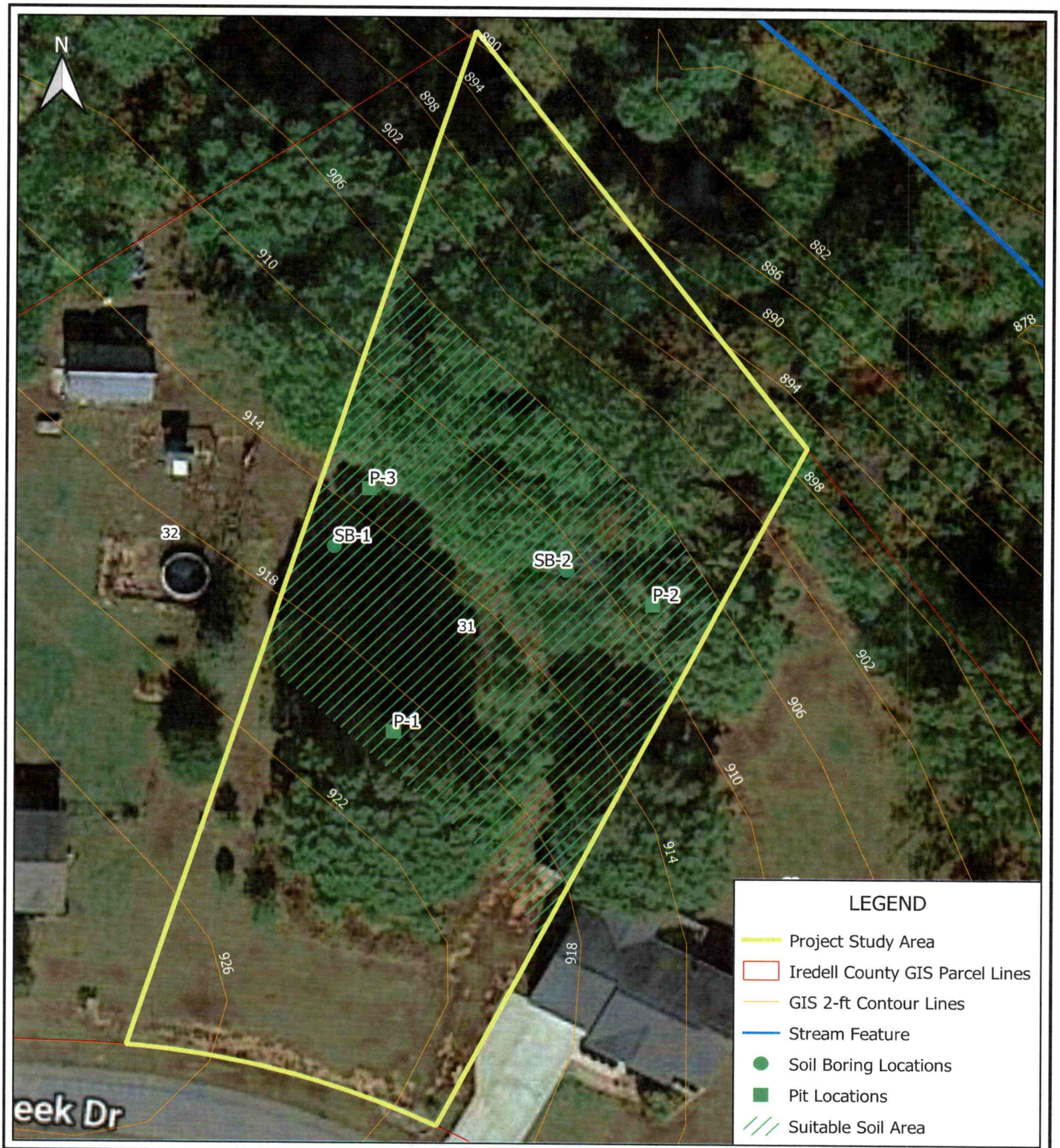
The soils observed within the project study area will support the installation of a subsurface wastewater treatment and disposal system utilizing Accepted System or Prefabricated Permeable Block Panel System drainfield products. It is estimated that 4,800 square feet of suitable soil area would need to be allocated and left completely available for the installation and required repair area for an Accepted System serving a 3-bedroom single family residence.

The required drainfield area can be reduced by 25% if using the Prefabricated Permeable Block Panel System.

CONCLUSION

The findings presented herein represent TEC's professional opinion based on our Soil and Site Evaluation and knowledge of the current laws and rules governing on-site wastewater systems in

North Carolina. Soils naturally change across a landscape and contain many inclusions. As such, attempts to quantify them are not always precise and exact. Due to this inherent variability of soils and the subjectivity when determining limiting factors, there is no guarantee that a regulating authority will agree with the findings of this report.



Thompson Environmental Consulting
WATER · WASTEWATER · WETLANDS

Prepared For:

Five Star Holding Contractors Inc

Soil and Site Evaluation

Lot 31 - Sharon Trace
167 Falling Creek Drive
Statesville, NC 28625
Iredell County

Date: June 2022

Scale: 0 20 40 ft

TEC Job #: 22-159

Figure 1

Thompson Environmental Consulting, Inc.
PO Box 541
Midland, NC 28107

Sheet 1 of 1
PROPERTY ID #: 3784 [illegible]
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Drockmann
ADDRESS: 11 Glenwood St, Swansea, MA 02693
PROPOSED FACILITY: Res PROPOSED DESIGN FLOW (.1949):
LOCATION OF SITE: 167 Fallingcreek Drive, Statesville, NC 28625
DATE EVALUATED: 6/22
PROPERTY SIZE: 0.79ac
PROPERTY RECORDED:
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other Sharon Forge
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LS 8%	0-11	GR/SL	FR NS NP NP	—	55	—	—	S 0.3
		11-55	SBK C	FI F F F					
2	LS 10%	0-8	GR/SL	FR NS NP NP	—	55	—	—	S 0.3
		8-55	SBK C	FI F F F					
3	LS 10%	0-11	SBK	FR NS NP NP	—	60	—	—	S 0.3
		11-60	SBK C	FI F F F					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	RS	RS
System Type(s)	Accepted/RSDS	
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): Provisionally Suitable
SITE CLASSIFICATION (.1948):
EVALUATED BY: L. Thompson CSS
OTHER(S) PRESENT: Jeff Cox

COMMENTS:

LEGEND

use the following standard abbreviations

LANDSCAPE POSITION	GROUP	SOIL TEXTURE	CONVENTIONAL .1955 LTAR*	LPP .1957 LTAR*	MINERALOGY/ CONSISTENCE	STRUCTURE
CC (Concave Slope) CV (Convex Slope) D (Drainage Way) DS (Debris Slump) FP (Flood Plain) FS (Foot Slope) H (Head Slope) L (Linear Slope) N (Nose Slope) R (Ridge) S (Shoulder Slope) T (Terrace)	I	S (Sand) LS (Loamy Sand)	1.2 - 0.8	0.6 - 0.4	SEXP (Slightly Expansive) EXP (Expansive)	G (Single Grain) M (Massive) CR (Crumb) GR (Granular) SBK (Subangular Blocky) ABK (Angular Blocky) PL (Platy) PR (Prismatic)
	II	SL (Sandy Loam) L (Loam)	0.8 - 0.6	0.4 - 0.3		
	III	Si (Silt) SiCL (Silty Clay Loam) CL (Clay Loam) SCL (Sandy Clay Loam) SiL (Silt Loam)	0.6 - 0.3	0.3 - 0.15		
					MOIST	**WET**
	IV	SC (Sandy Clay) SiC (Silty Clay) C (Clay) O (Organic)	0.4 - 0.1 None	0.2 - 0.05 None	VFR (Very Friable) FR (Friable) FI (Firm) VFI (Very Firm v. Very Sticky) EFI (Extremely Firm)	NS (Non-sticky) SS (Slightly Sticky) S (Sticky) VS (Very Sticky) NP (Non-plastic) SP (Slightly Plastic) P (Plastic) VP (Very Plastic)

*Adjust LTAR due to depth, consistence, structure, soil wetness, landscape, position, wastewater flow and quality

NOTES

HORIZON DEPTH	In inches below natural soil surface
DEPTH OF FILL	In inches from land surface
RESTRICTIVE HORIZON	Thickness and depth from land surface
SAPROLITE	S(suitable) or U(unsuitable)
SOIL WETNESS	Inches from land surface to free water or inches from land surface to soil colors with chroma 2 or less - record Munsell color chip designation
CLASSIFICATION	S (Suitable), PS (Provisionally Suitable), or U (Unsuitable)

Evaluation of saprolite shall be by pits.

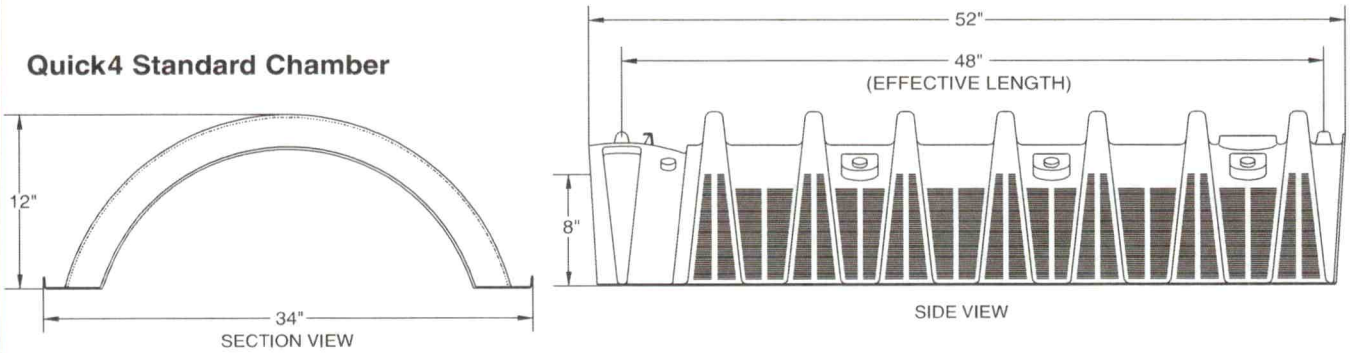
Long-term Acceptance Rate (LTAR): gal/day/ft^2

Show profile locations and other site features (dimensions, reference or benchmark, and North).

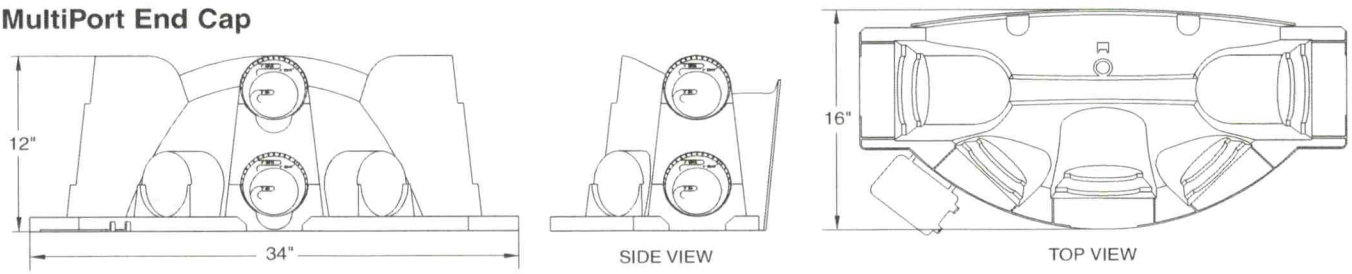
SEE FIGURE 1

Quick4™
STANDARD CHAMBER

Quick4 Standard Chamber



MultiPort End Cap



Quick4 Standard Chamber Nominal Specifications	
Size (W x L x H)	34" x 52" x 12"
Effective Length	48"
Invert Height	8"

MultiPort End Cap Nominal Specifications	
Size (W x L x H)	34" x 16" x 12"
Invert Height	8" or 1.25"

INFILTRATOR SYSTEMS, INC. STANDARD LIMITED WARRANTY

(a) The structural integrity of each chamber, end plate, wedge and other accessory manufactured by Infiltrator ("Units"), when installed and operated in a leachfield of an onsite septic system in accordance with Infiltrator's instructions, is warranted to the original purchaser ("Holder") against defective materials and workmanship for one year from the date that the septic permit is issued for the septic system containing the Units; provided, however, that if a septic permit is not required by applicable law, the warranty period will begin upon the date that installation of the septic system commences. To exercise its warranty rights, Holder must notify Infiltrator in writing at its Corporate Headquarters in Old Saybrook, Connecticut within fifteen (15) days of the alleged defect. Infiltrator will supply replacement Units for Units determined by Infiltrator to be covered by this Limited Warranty. Infiltrator's liability specifically excludes the cost of removal and/or installation of the Units.

(b) THE LIMITED WARRANTY AND REMEDIES IN SUBPARAGRAPH (a) ARE EXCLUSIVE. THERE ARE NO OTHER WARRANTIES WITH RESPECT TO THE UNITS, INCLUDING NO IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

(c) This Limited Warranty shall be void if any part of the chamber system is manufactured by anyone other than Infiltrator. The Limited Warranty does not extend to incidental, consequential, special or indirect damages. Infiltrator shall not be liable for penalties or liquidated damages, including loss of production and profits, labor and materials, overhead costs, or other losses or expenses incurred by the Holder or any third party. Specifically excluded from Limited Warranty coverage are damage to the Units due to ordinary wear and tear, alteration, accident, misuse, abuse or neglect of the Units; the Units being subjected to vehicle traffic or other conditions which are not permitted by the installation instructions; failure to maintain the minimum ground covers set forth in the installation instructions; the placement of improper materials into the system containing the Units; failure of the Units or the septic system due to improper siting or improper sizing, excessive water usage, improper grease disposal, or improper operation; or any other event not caused by Infiltrator. This Limited Warranty shall be void if the Holder fails to comply with all of the terms set forth in this Limited Warranty.

Further, in no event shall Infiltrator be responsible for any loss or damage to the Holder, the Units, or any third party resulting from installation or shipment, or from any product liability claims of Holder or any third party. For this Limited Warranty to apply, the Units must be installed in accordance with all site conditions required by state and local codes; all other applicable laws; and Infiltrator's installation instructions.

(d) No representative of Infiltrator has the authority to change or extend this Limited Warranty. No warranty applies to any party other than the original Holder.

- - - - - - -

The above represents the Standard Limited Warranty offered by Infiltrator. A limited number of states and counties have different warranty requirements. Any purchaser of Units should contact Infiltrator's Corporate Headquarters in Old Saybrook, Connecticut, prior to such purchase, to obtain a copy of the applicable warranty, and should carefully read that warranty prior to the purchase of Units.

INFILTRATOR® SYSTEMS INC
Environmental Onsite Wastewater Solutions℠
6 Business Park Road • P.O. Box 768
Old Saybrook, CT 06475
860-577-7000 • FAX 860-577-7001
800-221-4436

U.S. Patents: 4,759,661; 5,017,041; 5,156,488; 5,336,017; 5,401,116; 5,401,459; 5,511,903; 5,716,163; 5,588,778; 5,839,844
Canadian Patents: 1,329,959; 2,004,564 Other patents pending.

Infiltrator, Equalizer and SideWinder are registered trademarks of Infiltrator Systems Inc. Infiltrator is a registered trademark in France. Infiltrator Systems Inc. is a registered trademark in Mexico. Contour, Contour Swivel Connection, MicroLeaching, PolyTuff, SnapLock, ChamberSpacer, PosiLock, QuickCut, QuickPlay and Quick4 are trademarks of Infiltrator Systems Inc. © 2003 Infiltrator Systems Inc. Printed in U.S.A.

RECYCLED PAPER

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