



* Carolwood lot #1

Permit/File #: 462783

This Section for Local Health Department Use Only

Initial submittal received: 11/13/25 by WTB
Date Initials

G.S. 130A-335(a3) states the following:

When an applicant for an Improvement Permit submits to a local health department an Improvement Permit application, the permit fee charged by the local health department, the common form developed by the Department, and a soil evaluation pursuant to subsection (a2) of this section, the local health department shall, within five business days of receiving the application, conduct a completeness review of the submittal. A determination of completeness means that the Improvement Permit includes all of the required components. If the local health department determines that the Improvement Permit is incomplete, the local health department shall notify the applicant of the components needed to complete the Improvement Permit. The applicant may submit additional information to the local health department to cure the deficiencies in the Improvement Permit. The local health department shall make a final determination as to whether the Improvement Permit is complete within five business days after the local health department receives the additional information from the applicant. If the local health department fails to act within any period set out in this subsection, the applicant may treat the failure to act as a determination of completeness. The Department shall develop a common form for use as the Improvement Permit.

The review for completeness of this Improvement Permit was conducted in accordance with G.S. 130A-335(a3). This Improvement Permit is determined to be:

☐ Incomplete (if box is checked, information in this section is required.)

The following items are missing:

Copies of this were sent to the LSS and the Applicant on _____
Date

State Authorized Agent: _____ Date: _____

☒ Complete

State Authorized Agent: [Signature] FENS Date: 11/19/25

This Improvement Permit is issued pursuant to G.S. 130A-335 (a2) and (a3) using the signed and sealed LSS/LG evaluation(s) attached here. The issuance of this permit in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This permit is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of 15A NCAC 18E and to the conditions of this permit.

The Department, the Department's authorized agents, and the local health departments shall be discharged and released from any liabilities, duties, and responsibilities imposed by statute or in common law from any claim arising out of or attributed to evaluations, submittals, or actions from a licensed soil scientist or licensed geologist pursuant to GS 130A-335(a2).

Improvement Permit Expiration Date: 11/19/30

See attached site sketch

Permit/File #: 462783



**NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Chief Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Submittal Includes: ☒ (a2) Improvement Permit ☒ (a2) Construction Authorization ☐ Fee \$ _____

IMPROVEMENT PERMIT FOR G.S. 130A-335(a2)

County: Granville

PIN/Lot Identifier: 192503000492

Issued To: Pakt Construction

Property Location: 6216 Carole Drive, Oxford, NC 27565

Subdivision (if applicable) Carolwood Lot #: 1 Block: _____ Section: _____

LSS Report Provided: Yes ☒ No ☐

If yes, name and license number of LSS: Jason Hall, NC LSS #1248

New ☒

Expansion ☐

System Relocation ☐

Change of Use ☐

Facility Type: Single-Family Dwelling, 3-Bedroom

Number of bedrooms: 3 Number of Occupants: ≤6 Other: _____

Design Wastewater Strength: ☒ Domestic ☐ High Strength ☐ Industrial Process Wastewater

Proposed Design Daily Flow: 360 GPD Proposed LTAR (Initial): 0.275 Proposed LTAR (Repair): 0.275

Proposed Wastewater System Type*: IIb, accepted (25% reduction) (Initial) Pump Required: ☒ Yes ☐ No ☐ May be required

Proposed Wastewater System Type*: IIb, PPBPS (horizontal) (Repair) Pump Required: ☒ Yes ☐ No ☐ May be required

*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII

Effluent Standard: ☒ DSE ☐ HSE ☐ NSF/ANSI 40 ☐ TS-I ☐ TS-II ☐ RCW

Saprolite System (Initial): ☐ Yes ☒ No Saprolite System (Repair): ☐ Yes ☒ No

Fill System (Initial): ☐ Yes ☒ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area provide a fill plan)

Fill System (Repair): ☐ Yes ☒ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area provide a fill plan)

Usable Depth to LC (Initial)*: 27" Usable Depth to LC (Repair)*: 29" * Limiting Condition

Max. Trench Depth (Initial)*: 12" Max. Trench Depth (Repair)*: 14" * Measured on the downhill side of the trench

Artificial Drainage Required: ☐ Yes ☒ No If yes, please specify details: _____

Type of Water Supply: ☒ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other: _____

Drainfield location meets requirements of Rule .0508: Yes ☒ No ☐ Drainfield location meets requirements of Rule .0601: Yes ☒ No ☐

Permit valid for: ☒ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

8" of additional cover material needed for the initial and repair systems

Licensed Soil Scientist Print Name: Jason Hall

Licensed Soil Scientist Signature: [Signature]

Date: 01-15-2025

The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2).

*See attached site sketch





of Carolwood

Initial submittal received: 11/13/25 by WJB
Date Initials

Revised January 2024
Form A2CE-24.1



CONSTRUCTION AUTHORIZATION FOR G.S. 130A-335(a2)

County: Granville Pre-Construction Conference Required: Yes ☐ No ☒
 PIN/Lot Identifier: 192503000492
 Issued To: Pakt Construction
 Property Location: 6216 Carole Drive, Oxford, NC 27565 (Carolwood, Lot 1)
 AOWE/PE Plans/Evaluations Provided: Yes ☒ No ☐ If yes, name and license number of AOWE/PE: Jason Hall, AOWE #10004E
 Facility Type: Single-Family Dwelling, 3-Bedroom
 Number of bedrooms: 3 Number of Occupants: ≤6 Other: _____
☒ New ☐ Expansion ☐ Repair ☐ System Relocation ☐ Change of Use
 Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No
 Crawl Space? ☒ Yes ☐ No Slab Foundation? ☐ Yes ☒ No
 Type of Wastewater System* IIIb, accepted (25% reduction) (Initial) IIIbe, PPBPS (horizontal) (Repair)

*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII

Design Daily Flow: 360 GPD Wastewater Strength: ☒ Domestic ☐ High Strength ☐ Industrial Process WW

Session Law 2014-120 Section 53, Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies? ☐ Yes ☒ No
 (if yes, please provide engineering documentation)

Effluent Standard: ☒ DSE ☐ HSE ☐ NSF/ANSI 40 ☐ TS-I ☐ TS-II ☐ RCW

Type of Water Supply: ☒ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other: _____

Installation Requirements/Conditions

Septic Tank Size: 1000 gallons Total Trench/Bed Length: 360 feet Trench/Bed Spacing: 9 feet on center
 Trench/Bed Width: 36 inches LTAR: 0.275 gpd/ft² Usable Depth to LC (Initial)*: 27" ^{*Limiting condition}
 Additional Soil Cover: 8 inches Slope Corrected Maximum Trench/Bed Depth*: 12 inches ^{*Measured on the downhill side of the trench}
 Pump Tank Size (if applicable): 1000 gallons Requires more than 1 pump? ☐ Yes ☒ No
 Pump Requirements: 20.35 ft. TDH vs. 32.29 GPM Grease Trap Size (if applicable): _____ gallons
 Distribution Method: ☐ Serial ☐ D-Box or Parallel ☒ Pressure Manifold(s) ☐ LPP ☐ Other: _____
 Artificial Drainage Required: Yes ☐ No ☒ If yes, please specify details: _____

Legal Agreements (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)

Multi-party Agreement Required [.0204(g)]: ☐ Yes ☒ No Declaration of Restrictive Covenants: ☐ Yes ☒ No

Easement, Right-of-Way, or Encroachment Agreement Required [.0301(b)]: ☐ Yes ☒ No

Management Entity Required: ☐ Yes ☒ No Minimum O&M Requirements: _____

Permit conditions:

8" of additional cover material needed over the entire septic area (should extend out past the edge of the trenches before tapering off)
fence off the entire septic area from construction traffic

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached site sketch. This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.

AOWE/PE Print Name: Jason Hall

AOWE/PE Signature: [Signature]

Date: 01-15-2025

This AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-335(a2) and (a3)

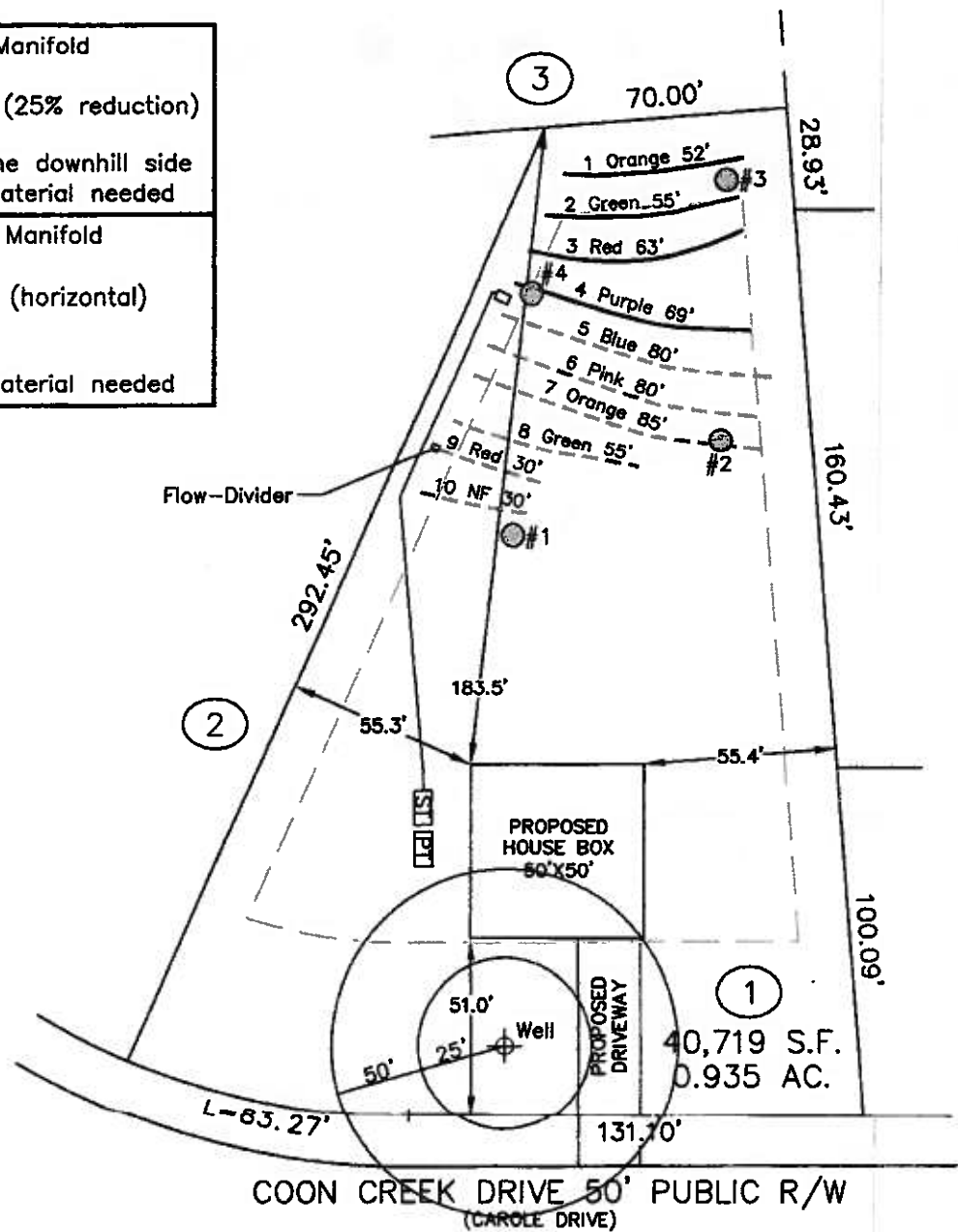
See attached site sketch



Initial System: Pressure Manifold
 Lines: 5-10, (360')
 Accepted Status System (25% reduction)
 0.275 Soil LTAR
 12" Trench Bottom on the downhill side
 8" of additional cover material needed

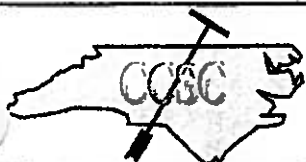
Repair System: Pressure Manifold
 Lines: 1-4, (239')
 T&J Panel Block System (horizontal)
 0.275 Soil LTAR
 14" Trench Bottom
 8" of additional cover material needed

System: - - - - -
 Repair: - - - - -
 [ST] = 1000 gallon tank
 with risers
 [PT] = 1000 gallon tank
 with risers
 #2 = profile description
 locations



- *Keep tanks and drain lines 10' from property lines.
- *Not a survey.
- *Not a guarantee of a septic permit.
- *Keep supply lines >5' from property lines.
- *Some lines are flagged longer in the field than lengths indicate.
- *No grading septic area.
- *No adding soil within septic area
- *No rutting-up septic area
- *No cuts of >2' within 15' of septic areas

GRAPHIC SCALE
 1" = 50'



Central Carolina Soil Consulting, PLLC
 1900 South Main Street, Suite 110
 Wake Forest, North Carolina 27587
 Phone (919)569-6704 Fax (919)569-6703

3-Bedroom Septic Layout
 Lot 1, Carolwood Subdivision
 Granville County, North Carolina

Job#: 4524
 Drawn By: JR
 Date: 01/15/2025
 Revision:



Well Construction Permit

Granville Vance Public Health
Environmental Health
PO Box 367
Oxford NC, 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number 462783

PIN Number: _____

Tax Lot #: 1

Tax Block #: _____

Evaluated For: _____

PERMIT VALID UNTIL: 11/20/2030

Property Owner: PAKT CONATRUCTION INC

Address: 14112 BOLD RUN HILL ROD

City: WAKE FOREST

State/Zip: NC / 27587

Phone #: H: (919) 369-4128

Applicant: PAKT CONATRUCTION INC

Address: 14112 BOLD RUN HILL ROD

City: WAKE FOREST

State/Zip: NC / 27587

Phone #: H: (919) 369-4128

Property Location & Site Information

Address/Road #:

Subdivision: CAROLWOOD

Phase: _____

Lot: 1

6216 CAROL DRIVE

*Proposed use of Well:

If Other:

Applicant Email:

Owner Email:

Directions:GPS

Well Contractor Information

Drilling Contractor:

Driller Registration:

Permit Conditions

*Permit Conditions

Refer to soil scientist plan for well placement. Keep proposed well min. 50' off any part of septic (Including neighboring lots). Min. 25' off house foundation. Keep well min. 40' off right property line to avoid encroachment on neighbor's septic. Well driller responsible for maintaining all setbacks.

Well location, construction and protection must meet all state and local regulations and must be inspected and approved by an authorized representative of the Local Health Department. The permit may be revoked at any time for failure to comply with existing regulations. The siting of approved well construction area(s) by the Health Department is to provide protection from the known possible sources of contamination. The approved well area(s) may not be changed without permission from an authorized representative of the Local Health Department. Issuance of this well permit does not guarantee water quality or adequate water production from the well once it is installed or repaired.

*Issued By: Bullock, Will

Authorized State Agent: [Signature]

Owner/Applicant: PAKT Construction, Inc.

*Date of Issue: 11/19/2025

☐ Hand Drawing

☒ Import Drawing

****Site Plan/Drawing attached.****

GRANVILLE VANCE

public health

Well Construction Permit

Granville Vance Public Health
Environmental Health
PO Box 367
Oxford NC, 27565
Phone: (252) 492-5263 Fax: (252) 492-2361

For Office Use Only

*CDP File Number 462783

PIN Number: _____

Tax Lot #: 1

Tax Block #: _____

Evaluated For: _____

PERMIT VALID UNTIL: 11/20/2030

**Pressure Manifold
Septic System Design**

for

**Carolwood Subdivision, Lot 1
Granville County, North Carolina**

Designed by:

**James Rice
Central Carolina Soil Consulting, PLLC
Wake Forest, North Carolina**

01/13/2025

Carolwood Subdivision, Lot 1
Layout/Design Specifications

Facility Type:	Single-Famil Dwelling
# of Bedrooms:	3
Daily Flow:	360 gal/day
L.T.A.R.:	0.275 gal/day/sq.ft
Trench Depth:	12 in max on the downhill side of trench
Trench Width:	36 in
Stone Depth:	EZ-FLOW in
Manifold Length:	48 in
Manifold Diameter:	4 in sch 80pvc
Supply Line Length:	158 ft
Supply Line Diameter:	2 in sch 40pvc
Supply Line Volume:	27.49 gallons
Friction Loss + Fitting Loss:	5.45 ft(supply line length + 70' for fittings in pump tank)
Design Head:	2 ft
Elevation Head:	12.90 ft
Total Head:	20.35 ft
Dose Volume:	161.46 gals
% of Pipe Vol.	0.69
Drawdown:	8.07 in @ 20.0 gal/in
Pump Run Time:	5.00 Mins
Control Panel:	SJE Rhombus Model112 control panel (or approved equivalent)
Pump:	Zoeller M140 Flow-Mate (or approved equivalent)
Septic Tank Effluent Filter:	Polylok PL-68 residential effluent filter (or approved equivalent)
Septic Tank:	Brantley 1,000 Gallon ST
Pump Tank:	Brantley 1,000 Gallon PT

Carolwood, Lot 1

Initial System TAP CHART

Bench Mark:		is = 100.00		Location of BM:		Elevation Head:		12.90	
Pump tank elev.		12.5	87.50	Pump elev.		82.10	Manifold elevation:		95.00
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR
5	Blue	6.00	94.00	80	1/2in SCH 40	7.11	79.27	240	0.3303
6	Pink	6.50	93.50	80	1/2in SCH 40	7.11	79.27	240	0.3303
7	Orange	6.90	93.10	85	1/2in SCH 40	7.11	79.27	255	0.3109
8	Green	7.20	92.80	55	1/2in SCH 80	5.48	61.10	165	0.3703
9 & 10	Red/NF	7.70	92.30	60	1/2in SCH 80	5.48	61.10	180	0.3394

total feet = 360 gal/min = 32.29 LTAR = 0.2750

LTAR + 5% 0.2888

% of Dose Volume	69	Des. Flow	360	(ltar W/ INOV)	0.3667
Dose Volume	161.48	Pump Run=	11.15	(ltar W/ INOV + 5%)	0.3850
Dose Pump Time	5.00	Tank Gal/IN	20		
Drawdown in Inches	8.07				

Carolwood, Lot 1

T&J Panel Block Repair System, TAP CHART

Bench Mark:		is = 100.00		Location of BM:		Elevation Head:		14.10				
Pump tank elev.		12.5	87.50	Pump elev.		82.10	Manifold elevation:		96.20			
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR	# of Panels	Spacing of Panels (in)	Feet of 1.5in PVC
1	Orange	4.80	95.20	52	1/2in SCH 40	7.11	90.00	156	0.5769	12	5.5	44
2	Green	5.00	95.00	55	1/2in SCH 40	7.11	90.00	165	0.5455	13	4.4	48
3	Red	5.30	94.70	63	1/2in SCH 40	7.11	90.00	189	0.4762	15	4.1	56
4	Purple	5.70	94.30	69	1/2in SCH 40	7.11	90.00	207	0.4348	16	5.4	60

total feet = 239 gal/min = 28.44

Total Number of Panels: 56

T&J Panel Block Orientation: Horizontal

LTAR = 0.2750

LTAR + 5% 0.2888

% of Dose Vol.	0	Des. Flow	360	(ltar W/ INOV)	0.5500
Dose Volume	201.60	Pump Run=	12.66	(ltar W/ INOV + 5%)	0.5775
Dose Pump Time	7.08	Tank Gal/IN	20		
Drawdown in Inches	10.08				

Backfill Sand Needed: 40.7 tons
backfill sand needed +5%: 42.74 tons

Total Footage of 1.5in PVC: 208



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor
KODY H. KINSLEY • Secretary
MARK BENTON • Chief Deputy Secretary for Health
SUSAN KANSAGRA • Assistant Secretary for Public Health
Division of Public Health

Application for Services

This application, in conjunction with the common form established in G.S. 130A-335(a3) and (a5), is optional for local health departments to be used for applications submitted in accordance with G.S. 130A-335(a2), (a3), and (a5).

[hereinafter, G.S. 130A-335(a3) and (a5) permits referred to as (a2) Improvement Permit and (a2) Construction Authorization]

Applying for:

☒ (a2) Improvement Permit ☒ (a2) Construction Authorization ☐ (a2) Repair/Construction Authorization

If applying for a Construction Authorization, please indicate desired system type(s):

☐ Accepted ☐ Conventional ☐ Innovative ☐ Other _____ ☒ Any

☒ New Construction ☐ Expansion ☐ System Relocation ☐ Change of Use ☐ Repair
☒ 5-Year Expiration Requested (site plan provided) ☐ Non-Expiring Permit Requested (plat provided, defined in G.S.130A-334(7a))
Requesting DHHS review? (systems >3000 GPD or IPWW) ☐ Yes ☒ No

Applicant: PAK Construction Inc
Mailing Address: 1412 Bold Run Hill Road
City: Wake Forest
State: NC Zip: 27587
Phone #: 919-369-4128
Email: pakconstruction@gmail.com

Owner: PAK Construction Inc
Mailing Address: 1412 Bold Run Hill Road
City: Wake Forest
State: NC Zip: 27587
Phone #: 919-369-4128
Email: pakconstruction@gmail.com

If the answer to any of the following questions is "yes", applicant must attach supporting documentation.

☐ Yes ☒ No Does the site contain any jurisdictional wetlands?
☐ Yes ☒ No Is any wastewater going to be generated on the site other than domestic sewage?
☐ Yes ☒ No Is the site subject to approval by any other public agency?
☐ Yes ☒ No Are there any easements or right of ways on this property?

I understand that the documentation and fees, as required in G.S. 130A-335(a2), (a3), (a5), and (a6), attached to this application are to be used to issue an Improvement Permit and/or Construction Authorization pursuant to G.S. 130A-335(a2), (a3), and (a5). I understand that authorized county and state officials are granted right of entry to the property indicated on this application to conduct necessary inspections to determine compliance with applicable laws and rules. ***I understand that if the information in the application for an Improvement Permit and/or Construction Authorization is falsified, changed, or the site is altered, then the Improvement Permit and Construction Authorization shall become invalid.***

Applicant Signature: _____ Date: 11-4-25

Owner's Signature: _____ Date: 11-4-25



Central Carolina Soil Consulting, PLLC

1900 South Main Street, Suite 110, Wake Forest, NC 27587

Office Number: 919-569-6704

January 15, 2025

Job #4524

Pakt Construction

Attention: Trey Dillard

RE: Preliminary soil/site evaluation for a single-family dwelling wastewater approval at Carolwood Subdivision, Lot 1 (3-bedroom) in Granville County pursuant to and meets the requirements of G.S. 130A-335(a2)."

Dear Mr. Dillard:

Central Carolina Soil Consulting, PLLC conducted a preliminary soil evaluation on the aforementioned lot to determine the areas of suitable soils that are suitable for subsurface wastewater disposal systems (conventional, Accepted & Innovative). **"The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-335(a2)."** The soil/site evaluation was performed using auger borings in January 2025, under moist soil conditions, based on the criteria found in the State Subsurface Rules, 15A NCAC 18E "Wastewater Treatment and Dispersal Systems". From this evaluation, CCSC laid out and located the septic layout and gps'd for site plan drawing purposes. **Please note that the lot lines must be clearly marked by your surveyor prior to system installation by your installer to verify all setbacks before digging.**

Based on the findings during the field evaluation, the area on the attached map has at least 27 inches (Initial) and 29 inches (repair) of suitable soils for a modified conventional septic system. The assigned LTAR for the initial site is 0.275 gpd/ft² with a maximum depth of 12 inches on the downhill side of the trench, with 8" of additional cover material needed, for the initial system installation of the drain lines due to slope correction. The assigned LTAR for the repair site is 0.275 gpd/ft² with a maximum depth of 14 inches on the downhill side of the trench, with 8" of additional cover material needed, for the repair system installation of the drain lines due to slope correction.

The lot is proposed to have a 3-bedroom system for the house. A septic system field layout was completed based on the house location and property lines surveyed in the field.

The proposed Initial system for the house is a Pressure Manifold distribution using lines 5-10 totaling 360 feet of accepted product (25% reduction). The repair system for the house is a Pressure Manifold distribution using lines 1-4 totaling 239 feet of T&J Panel Block product (horizontal).

Tanks: (All tanks must meet requirements set forth in 15A NCAC 18E .0801)

Minimum tank capacities: 1,000 for septic tank and 1,000 for pump tank, both having risers. The tanks should also have pressed in rubber boots on both the inlets and the outlets of the tank, along with having secondary safety lids or devices on all the openings.

Septic Installation:

The septic system for the lot should be installed during dry soil conditions (no rain events within 72 hours). The septic system should be installed on contour while maintaining all required setbacks. **Lot lines must be clearly marked by your surveyor prior to system installation so your installer can verify all setbacks before digging.**

Setbacks: (see septic design page for locations)

- **Septic and Pump Tanks** (see septic design)
 - 10' minimum from property lines
 - 5' minimum from house
- **Septic Lines** (see septic design)
 - 10' minimum from property lines
 - 5' minimum from house
- **Manifold's and D-Box's** (see septic design)
 - 5' minimum from property lines
- **Supply Lines** (see septic design)
 - 5' minimum from property lines
- **Utilities**
 - Water (10' minimum for all septic components)

Grading:

No grading should be completed within the initial and repair septic areas that change the natural grade of the area. There should be no cutting or filling within the septic areas as well. When grading the lot, no cuts of 2' or greater should be within 15' of the septic areas. If a cut is required near the septic area, keep the cut around 6-8 inches in depth.

HOUSE:

- Initial System: Pressure Manifold Distribution, lines 5-10 totaling 360' (see layout)
- Repair System: Pressure Manifold Distribution, lines 1-4 totaling 239' (see layout)
- 360 gal/day flow rate (3-bedroom)
- 1,000 gallon septic tank, 1,000 gallon pump tank
 - Both with risers and pressed in rubber boots on both the inlet and outlet ends and a secondary lid in each tank opening
- 12" max trench depth on the downhill side for the Initial System
 - 8" of additional cover material needed
- 12" max trench depth on the downhill side for the Repair System
 - 8" of additional cover material needed
- 0.275 LTAR for Initial
- 0.275 LTAR for Repair
- No grading/filling septic areas
- No cuts >2' within 15' of septic areas
- Keep tanks and drain lines 10' from property lines
- Keep supply line >5' property lines
- Install in dry soil conditions (No rain events within 72 hours)
- Maintain natural contours when clearing the lot

This letter discusses the location of provisionally suitable soils for subsurface wastewater disposal systems and does not guarantee the future function of any wastewater system on sites. Central Carolina Soil Consulting, PLLC is a professional consulting firm specializing in soil delineations and designs for on-site wastewater disposal systems.

If you have any questions regarding the findings on the attached map or in this report, please feel free to contact me at any time. Thank you for allowing Central Carolina Soil Consulting to perform this site evaluation for you.

Sincerely,



Jason Hall
NC Licensed Soil Scientist #1248
AOWE certification number 10004E

Encl: Soil Map & septic layout

