



VOLUNTARY RELINQUISHMENT OF ADMINISTRATIVE APPEAL RIGHTS

Date prepared: 5/4/2026

Owner(s): AIRLIE INVESTMENTS, LL

Mailing Address: 1906 ERIN CT
WILMINGTON, NC 28403-3551

Property location/site legal description:
Parcel # 173CA006 – 1200 Monroe Rd, Boiling Spring Lakes, NC 28461

Original Improvement Permit (IP) # NOI 2006067716A Date issued: 1/30/2025

I, Deans Hackney III, voluntarily relinquish my rights to pursue a formal appeal through the North
(print full name)

Carolina Office of Administrative Hearings pursuant to NC General Statute 130A-24 and 150B-23 and all other applicable provisions of Chapter 150B for the above referenced permit(s) (which includes the IPs and ACs) in order for the authorized agent/local health department to issue the applicable permit (new IP and/or CA) for the site. I understand by completing this form that the permit(s) for a

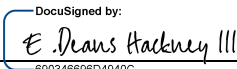
T&J Panel Block (IIIe) for a 4-bedroom dwelling

(System description)

will be revoked immediately by the authorized agent/local health department.

I understand that the local health department’s revocation of a permit can be appealed to the North Carolina Office of Administrative Hearings within 30 days of the revocation pursuant to the North Carolina Administrative Procedure Act. I understand that in order for the local health department to issue another IP and AC that the current IP and AC must be revoked. I understand that the local health department’s revocation of an IP or CA is not effective until 30 days from the revocation or, if the revocation is appealed, at the time that the Office of Administrative Hearings issues a final decision. I understand that by signing this form and relinquishing my right to appeal the permit revocation at the Office of Administrative Hearings that the local health department’s permit revocation will become effective immediately. I understand and agree that the revocation of a permit that takes effect immediately is in my best interest. I understand that by signing this form that I agree that I do not want to appeal the permit revocation.

I understand that I am not required to relinquish my appeal rights but that this is an option available to me so I do not have to wait 30 days for the revocation of the permit to take effect.

Signature of Property Owner:  _____
690346696D4940C...

Date signed: 5/4/2026



**North Carolina Onsite Wastewater Contractor Inspector Certification Board
Authorized Onsite Wastewater Evaluator Permit Option for Non-Engineered Systems
Notice of Intent (NOI) to Construct**

New Expansion Repair Relocation Relocation of Repair Area

Owner or Legal Representative Information:
 Name: Airlie Investments, LLC (contact: Deans Hackney III)
 Mailing address: 1906 ERIN CT City: WILMINGTON State: NC Zip: 28403
 Phone: 910-508-6658 Email: deans@hackneycompany.com

Authorized Onsite Wastewater Evaluator Information:
 Name: Nicholas Howell Certification #: 10020E
 Mailing address: 3805 Wrightsville Ave, Suite 15 City: Wilmington State: NC Zip: 28403
 Phone: 910-452-0001 Email: nicholas.howell@davey.com, shannon.bradley@davey.com


Site Location Information:
 Site address: 1200 Monroe Rd, Boiling Spring Lakes, NC 28461
 Tax parcel identification number or subdivision lot, block number of property: 173CA006
L-6 B-E S-5 PLAT 6/159 BSL County: Brunswick

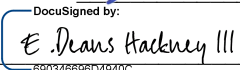
System Information:
 Wastewater System Type: T&J Panel Block (IIIe)
 Daily Design Flow: 360
 Saprolite System: Yes No Subsurface Operator Required: Yes No
 Water Supply Type: Private Well Public Water Supply Spring Other: _____

Facility Type:
 Residential # Bedrooms 6 Maximum # of Occupants _____
 Business Type of Business and Basis for Flow: _____
 Public Assembly Type of Public Assembly and Basis for Flow: _____

Required Attachments:
 Plat or Site Plan
 Evaluation of Soil and Site Features by Licensed Soil Scientist

Attest: On this the 4 day of May, 2026 by signature below I hereby attest that the information required to be included with this NOI to Construct is accurate and complete to the best of my knowledge. Furthermore, I hereby attest that I have adhered to the laws and rules governing onsite wastewater systems in the state of North Carolina.
 This NOI shall expire on 4 day of May, 2031.

Signature of Authorized Onsite Wastewater Evaluator: 

Signature of Owner or Legal Representative: 
DocuSigned by: 690346696D4940C...

Disclosure: The owner may apply for a building permit for the project upon submitting a complete NOI to Construct and the fee required (if any) to the local health department. An onsite wastewater system authorized by an authorized onsite wastewater evaluator shall be transferable to a new owner with the consent of the authorized onsite wastewater evaluator.

Local Health Department Receipt Acknowledgement:
 Signature of Local Health Department Representative: _____ Date: _____



AGENT AUTHORIZATION FORM

TO WHOM IT MAY CONCERN:

I/we, the undersigned, hereby authorize Davey Resource Group to act as our agent in the for the septic system permit application for the subject property, **1200 Monroe Rd, Boiling Spring Lakes, Brunswick County, NC**. Any questions regarding the septic permit application or proposed septic plan should be directed to Davey Resource Group (Nicholas Howell LSS#1294 & Shannon Bradley & Christine Purdy & Mason Freeman)

Property Address and Parcel ID Number: 1200 Monroe Rd, BSL, NC 28461
173CA006

Current Property Owner Name and Phone Number: Airlie Investments LLC
deans@hackneycompany.com, 910-508-6658

Owner Address: 1906 ERIN CT
WILMINGTON, NC 28403-3551

I hereby acknowledge that:

"The AOWE/PE submittal is pursuant to and meets the requirements of G.S. 130A-336.2"

E .Deans Hackney III
Print Owner's Name:

Nicholas Howell
Print Authorized Agent / LSS Name:

DocuSigned by:
E .Deans Hackney III
Owner's Signature:


Authorized Agent / LSS Signature:

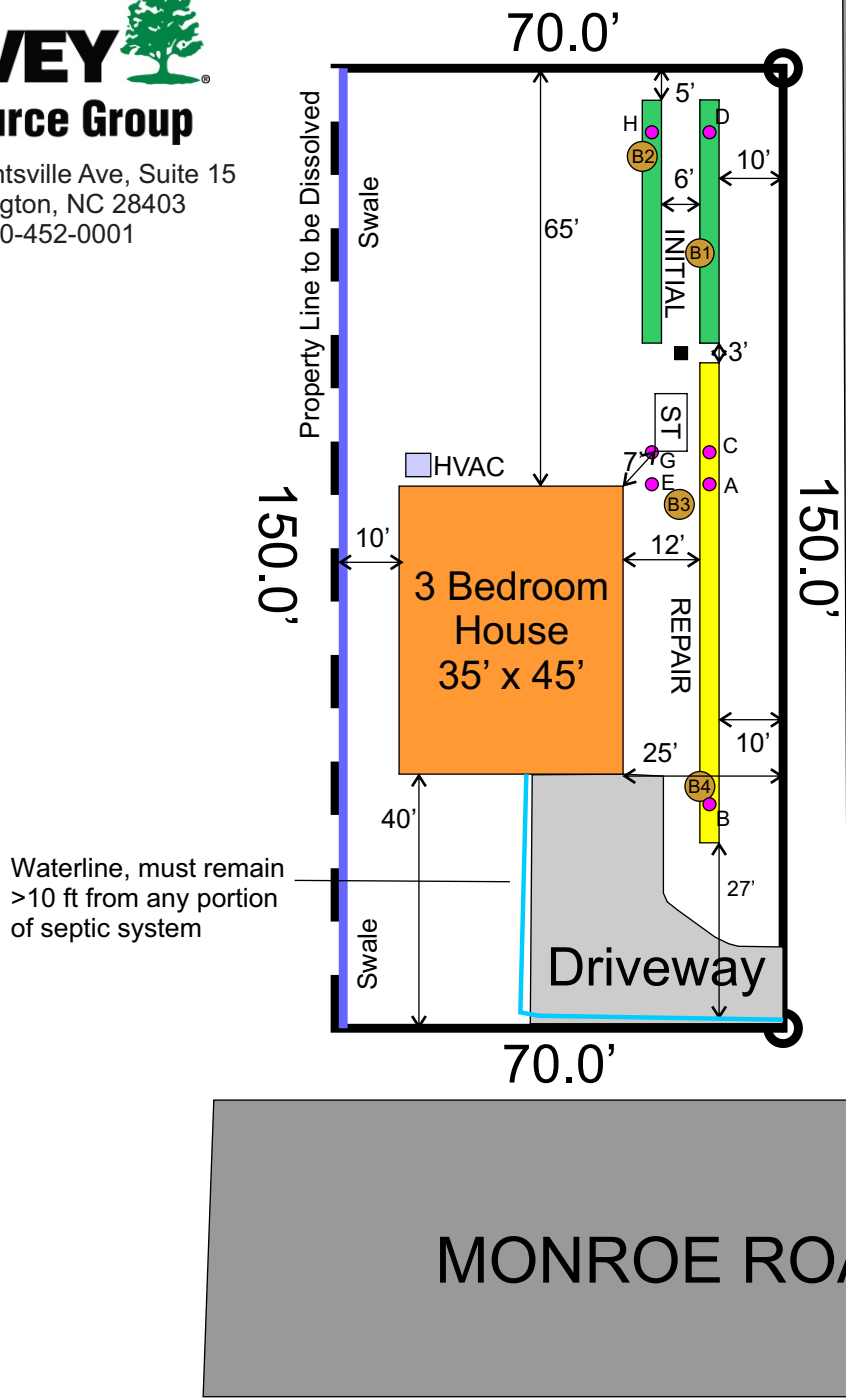
Date: 5/4/2026

Date: 5/4/2026



3805 Wrightsville Ave, Suite 15
Wilmington, NC 28403
910-452-0001

**1200 Monroe Road
Lot 6 Boiling Spring
Lakes Section 5
Site Plan Proposal
/ House Site**
1" = 30'
May 5, 2026
Parcel #s: 173CA006



CHARLESTOWN ROAD

MONROE ROAD

MOREHEAD ROAD

Legend

- Relative Elevation Points
- Soil Boring Locations

**Wastewater System Design Details
3 Bedroom - 360 GPD
1000 Gallon septic tank**

**Initial (Green) & Repair (Yellow)
T&J Panel Block System (PPBPS)
Soil wetness condition 38-42"
0.8 LTAR**

360 GPD / 0.8 LTAR = 450 ft²
450 ft² / 3 ft = 150 x 0.5 = 75 Linear Feet
INITIAL:

- (2) 3' Horizontal placed lines at 75'
- (9) PPBPS panels per lateral, spaced 5" apart
Installed at 26-29" below ground surface as shown in Table 1

REPAIR:

- (1) 3' Horizontal placed lines at 75'
- (17) PPBPS panels per lateral, spaced 6" apart
Installed at 26" below ground surface as shown in Table 1

Table 1: Relative Elevations

Data Point	Relative Elevation (feet)	Trench Depth Below Ground (inches)	Bottom of C33/S4 Sand Depth Below RP (inches)	Bottom of Panel Depth Below RP (Inches)
RP	20.00			
PT	-			
Initial				
Flag C	19.50	26	32	26
Flag D	19.65	28	32	26
Flag G	19.40	26	34	28
Flag H	19.60	29	34	28
Repair				
Flag A	19.40	26	33	27
Flag B	19.40	26	33	27

Note: This lot was platted on Nov 2, 1962, Book 6 Page 159 thus exemptions for horizontal setbacks can be reduced per .0602 (a).

Property Lines and Dimensions are referenced from a Feb 12, 2025 survey by Danford & Associates With DRG site testing overlay

This is NOT a survey
*****Findings are based upon current site conditions, any alteration to the areas proposed for wastewater treatment can affect the provisionally suitable status of the soil resources*****

This septic system should be routinely evaluated and pumped every 3-5 years. This system was not designed for a facility that uses the following: Garbage disposal, Reverse Osmosis, Commercial Laundry. The system is designed on the basis of the design flow rate and for domestic strength effluent quality. Design Daily Flow is 360 gpd with a total occupancy of NO MORE than 6 occupants. Daily flow volume that exceeds 75% of design rates is considered excessive. Any changes to these parameters outside the ability of the proposed design and may cause premature failure of the system function.



Per NC LSS AOWE Permit Regulations, a pre-construction, construction, and post-construction coordination meeting needs to be conducted with DRG staff prior to any work on the septic system. Failure to notify DRG will result in voiding of the propose septic design.

Nicholas P. Howell LSS
NC LSS #1294
CPSS# 328892
SC Soil Classifier #113
Drawing by SNB
Job # P.ENV0004100
Printed on 11 x 17" Paper

This evaluation is limited to accessible areas of the property at the time of inspection, subsurface conditions may exist that were not encountered within the observation points and could affect system performance. Soil Conditions can vary significantly over short distances. Conclusions and recommendations are based on discrete observation dependent upon proper use, maintenance, and loading. Failure to maintain the system or exceeding design capacity may result in system failure. Proper installation in accordance with approved plans, manufacturer specifications and regulatory requirements is essential for system performance. The author is not responsible for construction means, methods, or deviations from approved design. This evaluation represents professional opinions based on site conditions observed at the time of investigation. No warranty or guarantee, expressed or implied, is made regarding the long-term performance of any onsite wastewater system.

177125 Monroe Lots 5/6

Test Hole # B3 Location Latitude/Longitude: _____

Horizon	Depth (inches)	Matrix Color	Estimating Soil Saturation			Estimating Soil Permeability			Comments and Other Pertinent Soil Features			
			Munsell Color (hue, value, chroma)	Redoximorphic Features/Mottos	Depletions	L/AR Class USDA Class	Texture Silt/Clay Class	Plastic Class		Grade	Structure Type (shape)	Consistence (Moist)
AE	6	2.5Y 5/1	—	—	—	I S	So	Ps	1	GK	VFR	
E	28	2.5Y 8/1	—	—	—	I S	So	R	1	SBK	VFR	
Bw1	42	10YR 4/4	—	—	—	I LS	So	Ps	1	SBK	UFR	
Bw2	48	10YR 3/4	10YR 3/2	10YR 4/2	10YR 4/2	I LS	So	Ps	1	SBK	VFR	
Additional Comments												

Horizon	Depth (inches)	Matrix Color	Estimating Soil Saturation			Estimating Soil Permeability			Comments and Other Pertinent Soil Features			
			Munsell Color (hue, value, chroma)	Redoximorphic Features/Mottos	Depletions	L/AR Class USDA Class	Texture Silt/Clay Class	Plastic Class		Grade	Structure Type (shape)	Consistence (Moist)
AE	5	2.5Y 5/1	—	—	—	I S	So	Ps	1	GR	VFR	
E	29	2.5Y 7/1	—	—	—	I S	So	Ps	1	SBK	VFR	
Bw1	38	10YR 4/4	—	—	—	I LS	So	Ps	1	SBK	VFR	
Bw2	48	10YR 3/3	10YR 3/2	10YR 4/2	10YR 4/2	I LS	So	Ps	1	SBK	VFR	
Additional Comments												

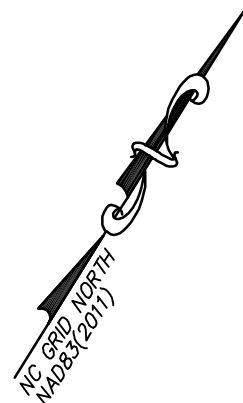
Most Limiting Soil Conditions	Depth (in.) and Description	Most Limiting Soil Conditions	Depth (in.) and Description	Most Limiting Soil Conditions	Depth (in.) and Description
Zone of Saturation	38"	Clean Saprolite		Restrictive Horizon	
Loading Rate gads/m ²	0.8	Free Water	748"	Overburden/Fill Material	

I, VERNON DEREK DANFORD, CERTIFY THAT THIS PROPERTY WAS SURVEYED AND MAP DRAWN UNDER MY SUPERVISION: DESCRIPTION AS SHOWN ON THE FACE OF THIS PLAT; RATIO OF PRECISION AS CALCULATED BY COMPUTER IS 1:10,000+; THAT THE BOUNDARIES NOT SURVEYED ARE SHOWN BY BROKEN LINES PLOTTED FROM INFORMATION REFERENCED; THAT THIS PLAT WAS PREPARED IN ACCORDANCE WITH "THE STANDARDS OF PRACTICE FOR LAND SURVEYING IN NORTH CAROLINA"; WITNESS MY ORIGINAL SIGNATURE, LICENSURE NUMBER AND SEAL THIS 12TH DAY OF FEBRUARY A.D. 2025

PRELIMINARY

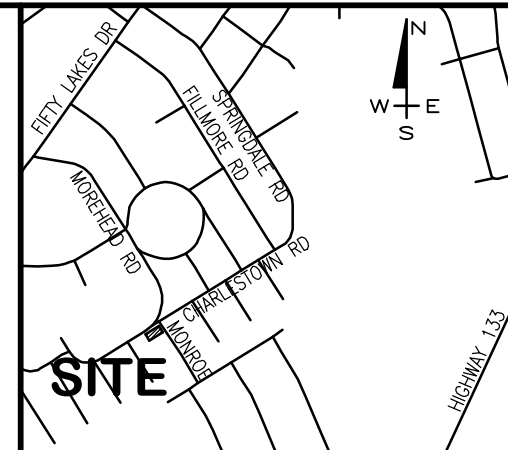
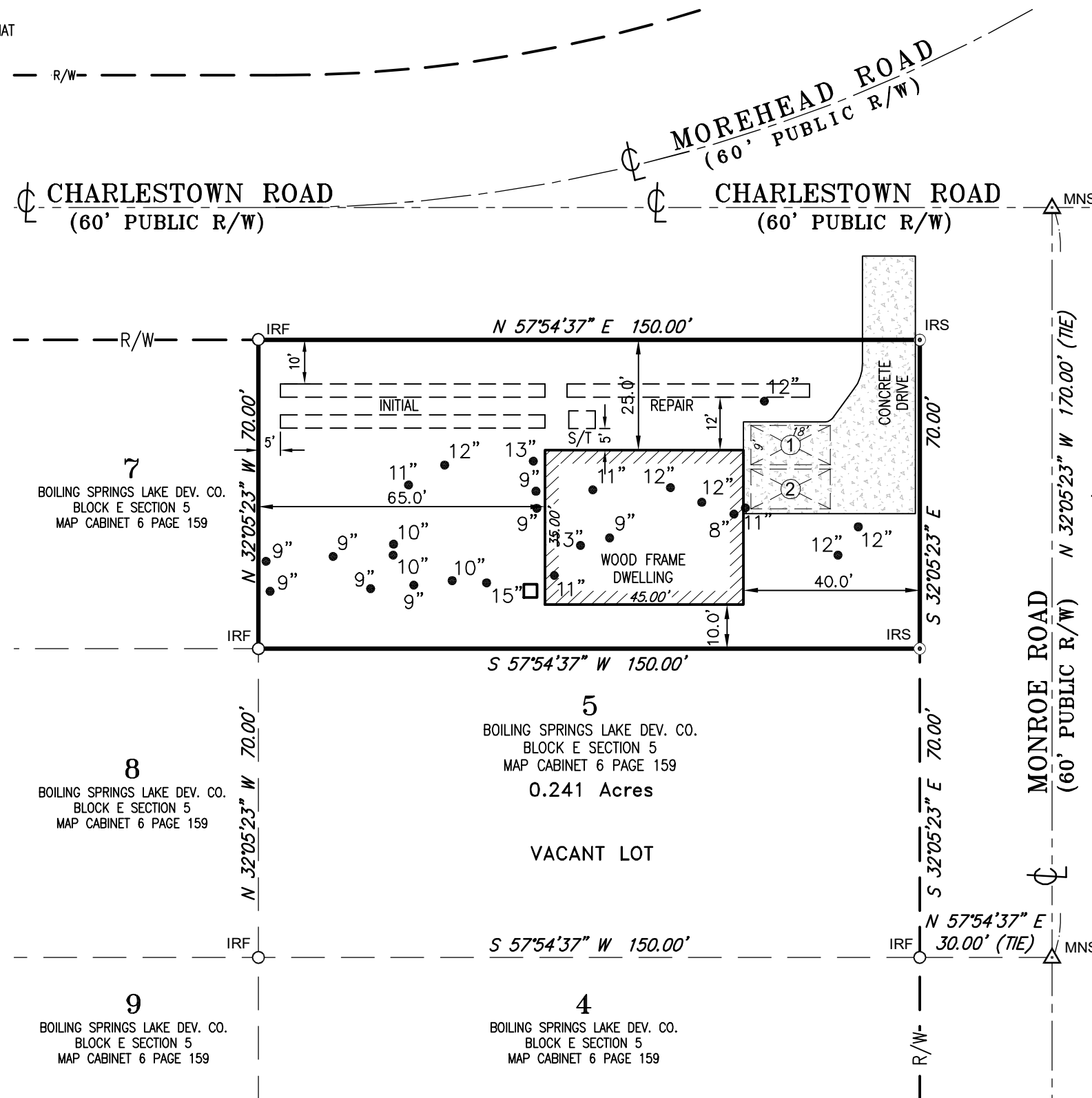
VERNON DEREK DANFORD
N.C. PLS No. L-4528

8816-BOILING SPRINGS LAKES BLK E SEC 5 LTS 5-6 - HACKNEY & COMPANY
FB: BC15-12



LEGEND

- = IRON PIPE FOUND (IPF)
- = IRON REBAR FOUND (IRF)
- = IRON PIPE OPEN FOUND (IPOF)
- = IRON PIPE PINCH TOP (IPPTF)
- ⊙ = IRON PIPE SET (IPS)
- ⊙ = IRON REBAR SET (IRS)
- ◻ = CONCRETE MONUMENT FOUND (CMF)
- ◻ = CONCRETE MONUMENT SET (CMS)
- △ = MAG NAIL FOUND (MNF)
- △ = MAG NAIL SET (MNS)
- ⊕ = SCRIBE IN CONCRETE FOUND (SCF)
- ⊕ = SCRIBE IN CONCRETE SET (SCS)
- ∅ = NON-MONUMENTED POINT (NMP)
- ⊕ = BENCHMARK LOCATION
- (D) = DISTURBED
- (B) = BENT
- ⊕ = CENTERLINE
- R/W = RIGHT OF WAY



LOCATION MAP
NOT TO SCALE

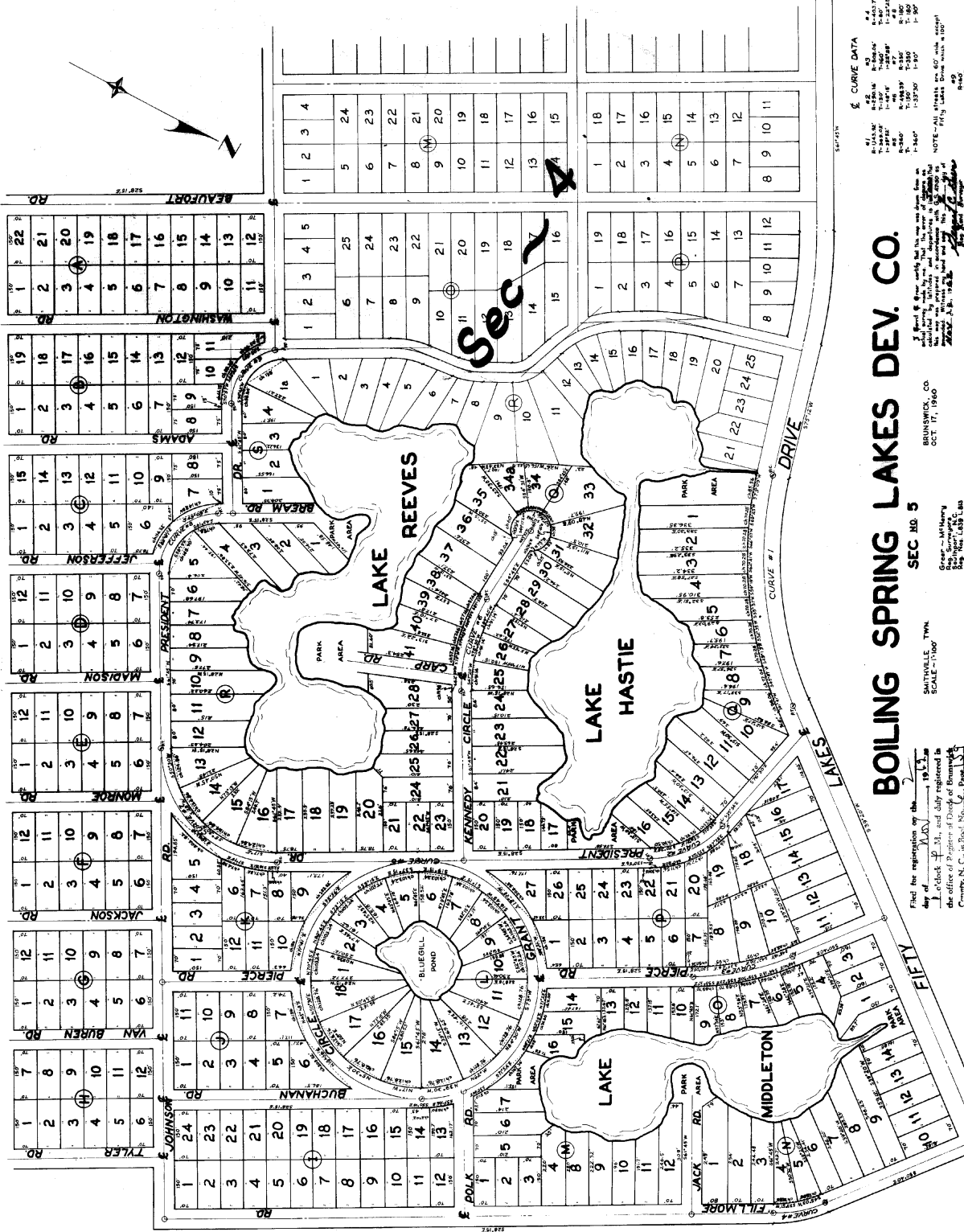
- NOTES**
1. THIS LOT IS LOCATED IN ZONE "X" PER FRIS ON FIRM MAP NUMBER 3720209900K DATED: 08/28/2018.
 2. THIS LOT IS SUBJECT TO ALL EASEMENTS, RESTRICTIONS, OR COVENANTS OF RECORD.
 3. THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT, WHICH MAY REVEAL ADDITIONAL CONVEYANCES, EASEMENTS OR RIGHT OF WAYS NOT SHOWN HEREIN.
 4. "BEST FIT MODEL" UTILIZED BASED UPON THE PREPONDERANCE OF EVIDENCE FOUND.
 5. NC GRID BEARINGS DERIVED USING TOPCON UNIT, UTILIZING NORTH CAROLINA VRS SYSTEM.
 6. ALL BEARINGS SHOWN ARE NC GRID (NAD83 2012B) EXCEPT AS SHOWN.
 7. ALL PROPERTY CORNERS ARE IRON PIPES OR REBARS, UNLESS OTHERWISE NOTED. THE WOODEN STAKES SERVE TO PROTECT AND MARK THE AREA OF THE ACTUAL CORNERS, WHICH ARE TYPICALLY AT OR BELOW GROUND.
 8. ALL DISTANCES ARE HORIZONTAL GROUND, IN US SURVEY FEET.
 9. AREA COMPUTED BY COORDINATE METHOD.
 10. COMBINED FACTOR: 1.00010347.
 11. ZONING = BS-R-2, BOILINGS SPRINGS LAKE, NC. MINIMUM SETBACKS MUST BE VERIFIED WITH ZONING DEPARTMENT.

SITE PLAN: MARCH 17, 2025

DANFORD & ASSOCIATES
LAND SURVEYING, P.C.
4002 1/2 OLEANDER DRIVE
SUITE 203
WILMINGTON, NC 28403
PHONE (910) 799-4916
FIRM LIC# C-2797
email: ddanford@danfordsurveying.com

SITE PLAN FOR
AIRLIE INVESTMENTS, LLC
LOT 6 PARCEL ID: 173CA006 DEED BOOK 5016 PAGE 674
BOILING SPRINGS LAKE DEVELOPMENT
BLOCK E SECTION NO. 5 MAP BOOK 6 PAGE 159
BOILING SPRINGS LAKE BRUNSWICK COUNTY NORTH CAROLINA

FEBRUARY 12, 2025 0.241 ACRES
30 0 15 30 60
1 INCH = 30 FEET
© DANFORD & ASSOCIATES LAND SURVEYING, PC



§ CURVE DATA

R-1/4"	R-1/2"	R-3/4"	R-1"	R-1 1/4"	R-1 1/2"	R-1 3/4"	R-2"	R-2 1/4"	R-2 1/2"	R-2 3/4"	R-3"	R-3 1/4"	R-3 1/2"	R-3 3/4"	R-4"	R-4 1/4"	R-4 1/2"	R-4 3/4"	R-5"	R-5 1/4"	R-5 1/2"	R-5 3/4"	R-6"	R-6 1/4"	R-6 1/2"	R-6 3/4"	R-7"	R-7 1/4"	R-7 1/2"	R-7 3/4"	R-8"	R-8 1/4"	R-8 1/2"	R-8 3/4"	R-9"	R-9 1/4"	R-9 1/2"	R-9 3/4"	R-10"	R-10 1/4"	R-10 1/2"	R-10 3/4"	R-11"	R-11 1/4"	R-11 1/2"	R-11 3/4"	R-12"	R-12 1/4"	R-12 1/2"	R-12 3/4"	R-13"	R-13 1/4"	R-13 1/2"	R-13 3/4"	R-14"	R-14 1/4"	R-14 1/2"	R-14 3/4"	R-15"	R-15 1/4"	R-15 1/2"	R-15 3/4"	R-16"	R-16 1/4"	R-16 1/2"	R-16 3/4"	R-17"	R-17 1/4"	R-17 1/2"	R-17 3/4"	R-18"	R-18 1/4"	R-18 1/2"	R-18 3/4"	R-19"	R-19 1/4"	R-19 1/2"	R-19 3/4"	R-20"	R-20 1/4"	R-20 1/2"	R-20 3/4"	R-21"	R-21 1/4"	R-21 1/2"	R-21 3/4"	R-22"	R-22 1/4"	R-22 1/2"	R-22 3/4"	R-23"	R-23 1/4"	R-23 1/2"	R-23 3/4"	R-24"	R-24 1/4"	R-24 1/2"	R-24 3/4"	R-25"	R-25 1/4"	R-25 1/2"	R-25 3/4"	R-26"	R-26 1/4"	R-26 1/2"	R-26 3/4"	R-27"	R-27 1/4"	R-27 1/2"	R-27 3/4"	R-28"	R-28 1/4"	R-28 1/2"	R-28 3/4"	R-29"	R-29 1/4"	R-29 1/2"	R-29 3/4"	R-30"	R-30 1/4"	R-30 1/2"	R-30 3/4"	R-31"	R-31 1/4"	R-31 1/2"	R-31 3/4"	R-32"	R-32 1/4"	R-32 1/2"	R-32 3/4"	R-33"	R-33 1/4"	R-33 1/2"	R-33 3/4"	R-34"	R-34 1/4"	R-34 1/2"	R-34 3/4"	R-35"	R-35 1/4"	R-35 1/2"	R-35 3/4"	R-36"	R-36 1/4"	R-36 1/2"	R-36 3/4"	R-37"	R-37 1/4"	R-37 1/2"	R-37 3/4"	R-38"	R-38 1/4"	R-38 1/2"	R-38 3/4"	R-39"	R-39 1/4"	R-39 1/2"	R-39 3/4"	R-40"	R-40 1/4"	R-40 1/2"	R-40 3/4"	R-41"	R-41 1/4"	R-41 1/2"	R-41 3/4"	R-42"	R-42 1/4"	R-42 1/2"	R-42 3/4"	R-43"	R-43 1/4"	R-43 1/2"	R-43 3/4"	R-44"	R-44 1/4"	R-44 1/2"	R-44 3/4"	R-45"	R-45 1/4"	R-45 1/2"	R-45 3/4"	R-46"	R-46 1/4"	R-46 1/2"	R-46 3/4"	R-47"	R-47 1/4"	R-47 1/2"	R-47 3/4"	R-48"	R-48 1/4"	R-48 1/2"	R-48 3/4"	R-49"	R-49 1/4"	R-49 1/2"	R-49 3/4"	R-50"	R-50 1/4"	R-50 1/2"	R-50 3/4"
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BOILING SPRING LAKES DEV. CO.

SEC. NO. 5

BRUNSWICK, CO.
OCT. 17, 1960

SMITHVILLE, TN.
SCALE - 1"=100'

Filed for registration on the 15th day of JAN. 1961, and duly registered in the office of Register of Deeds of Brunswick County, N. C., at Rock Hill, N. C., Page 13

Scale - 1"=100'

NOTE: ALL LOTS ARE TO BE CONVEYED BY A DEED, UNLESS OTHERWISE SPECIFIED THEREIN. SEE ALSO SEC. 1 & 2 HEREON.

891 21-0-700



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/04/2025

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 MARSH USA LLC. 200 Public Square, Suite 3760 Cleveland, OH 44114-1824 104370 RESOU KLUCZ	CONTACT NAME: Marsh U.S. Operations & Technology PHONE (A/C, No, Ext): (866) 966-4664 E-MAIL ADDRESS: Cleveland.CertRequest@marsh.com FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE INSURER A : Old Republic Insurance Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
	NAIC # 24147

COVERAGES **CERTIFICATE NUMBER:** CLE-006313011-41 **REVISION NUMBER:** 33

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			MWZY 314042 25	09/01/2025	09/01/2026	EACH OCCURRENCE	\$ 5,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 5,000,000
							MED EXP (Any one person)	\$ 25,000
							PERSONAL & ADV INJURY	\$ 5,000,000
							GENERAL AGGREGATE	\$ 5,000,000
							PRODUCTS - COMP/OP AGG	\$ 5,000,000
								\$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			MWTB 314041 25	09/01/2025	09/01/2026	COMBINED SINGLE LIMIT (Ea accident)	\$ 5,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
A	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input checked="" type="checkbox"/> N / A			MWC 314040 25 (AOS)	09/01/2025	09/01/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 5,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 5,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 5,000,000
A	Excess Workers Compensation			MWXS 314043 25 (NC, OH, PA, WA)	09/01/2025	09/01/2026	Workers Compensation	Statutory
A	SIR: \$5,000,000			MWXS 316391 25 (CA)	09/01/2025	09/01/2026	Employer's Liability	1,000,000

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

CERTIFICATE HOLDER *Davey Resource Group, Inc. 295 S. Water Street, Suite 300 Kent, OH 44240	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 <i>Marsh USA LLC</i>
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ADDITIONAL REMARKS SCHEDULE

AGENCY MARSH USA LLC.		NAMED INSURED Davey Resource Group, Inc. 295 S. Water Street, Suite 300 Kent, OH 44240	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance**

Workers Compensation does not apply in MN. Coverage is obtained from Workers Compensation reinsurance association (W.C.R.A.) as required by the state. Minnesota
Employers Liability is covered by policy number MWC 314040 25.