

No pump

PAID 35

POP 2024-100285



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: Caviness & Cates Building and Dev. Co. of Greenville
 Mailing address: 639 Executive Pl Ste 400 City: Fayetteville State: NC Zip: 28305
 Phone: 910 709 9801 Email: pam@cavinessandcates.com

Authorized Onsite Wastewater Evaluator Information:
 Name: Gene Aston Certification #: 10011E
 Mailing address: P O Box 86 City: Simpson State: NC Zip: 27879
 Phone: 252 341 9707 Email: astonsoil@gmail.com

Site Location Information:
 Site address: 0 Appaloosa Tr
 Tax parcel identification number or subdivision lot, block number of property: 88517
Beddard Ranch Lot 7 County: Pitt

System Information:
 Wastewater System Type: II-B
 Daily Design Flow: 480
 Saprilit System: Yes No Subsurface Operator Required: Yes No
 Water Supply Type: Private Well Public Water Supply Spring Other: _____

Facility Type:
 Residential 4 # Bedrooms 8 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 15 day of November, 2024 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 15 day of Nov, 2034.

Signature of Authorized Onsite Wastewater Evaluator: [Signature]

Signature of Owner or Legal Representative: Pamela M Geddie

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: [Signature] Date: 11-21-24

Aston Soil Works, Inc.

November 18,2024

P.O. Box 86
Simpson, NC 27879

Caviness & Cates
639 Executive PL
Suite 400
Fayetteville NC 28305

Re: Soil/Site Evaluation for single family wastewater approval (G.S. 130A-336.2)
property located at Beddard Ranch Lot 7 in Pitt County, NC. (parcel **88517**)

Caviness & Cates,

The referenced property was evaluated for septic system suitability using the *18E Onsite Wastewater Rules* as a reference. As requested, an investigation of this property was performed to locate soil areas suitable for a four-bedroom septic system that would allow placement of conventional drain lines. **The LSS evaluation is being submitted pursuant to and meets the requirements of G.S. 130A-336.2.** The evaluation involved methodically conducting hand auger borings across the property to determine suitability for septic systems. Each boring was located by using a global positioning system (GPS) capable of sub-meter accuracy. The enclosed map identifies primary and repair septic system field areas based on soil findings. An auger boring location map and soil profile descriptions are also included with this this report.

The primary drain field area has sandy clay loam textured sub-soils and morphology suggests the seasonal soil wetness condition to be **36 inches** below the natural surface. These areas should allow shallow placement of the drain lines, which places the bottom of the drain lines a conservative maximum of **24 inches** below the surface. The area around the drain field must be shaped to remove surface water. The recommended LTAR for septic systems in this area is **0.5 gallons/day/ft².**

The repair drain field area has sandy clay loam textured sub-soils and morphology suggests the seasonal soil wetness condition to be **36** below the surface. These areas should allow shallow placement of the drain lines, which places the bottom of the drain lines a conservative maximum of **24 inches** below the surface. The recommended LTAR for a septic system in this area is **0.5 gallons/day/ft².**

Any disturbance in the form of filling or excavation can alter the suitability class of the soil group. This report is for information and planning purposes only. The local health department must process and file private permits for septic systems. This property

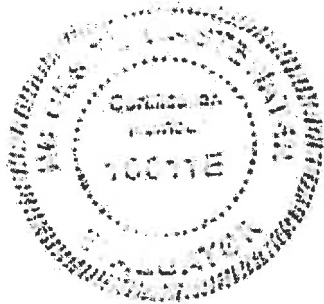
may be subject to approval by other local, state, or federal agencies. If you have any further questions, please contact me at (252) 341-9707.

Sincerely,

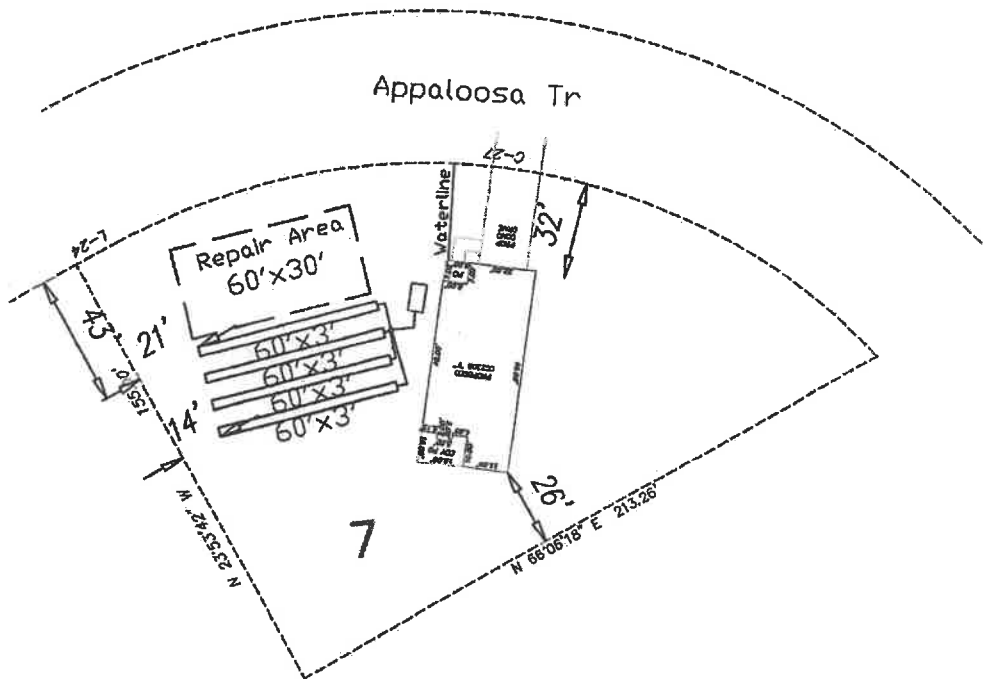
Gene Aston

Gene Aston

Licensed Soil Scientist # 1261



Wastewater System Plan for Caviness & Cates
 Parcel 88517, Appaloosa Trail - Lot 7
 Pitt County, NC

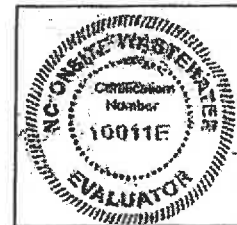


Primary System

Type: Accepted Product 25% Reduced
 Design Flow: 480 GPD(4 Bedroom)
 Long Term Acceptance Rate: .5 GPD/SQ FT
 Linear Feet of Drainfield: 240
 Installation Depth: 18-20"
 Septic Tank Volume: 1000 Gallons

Repair System

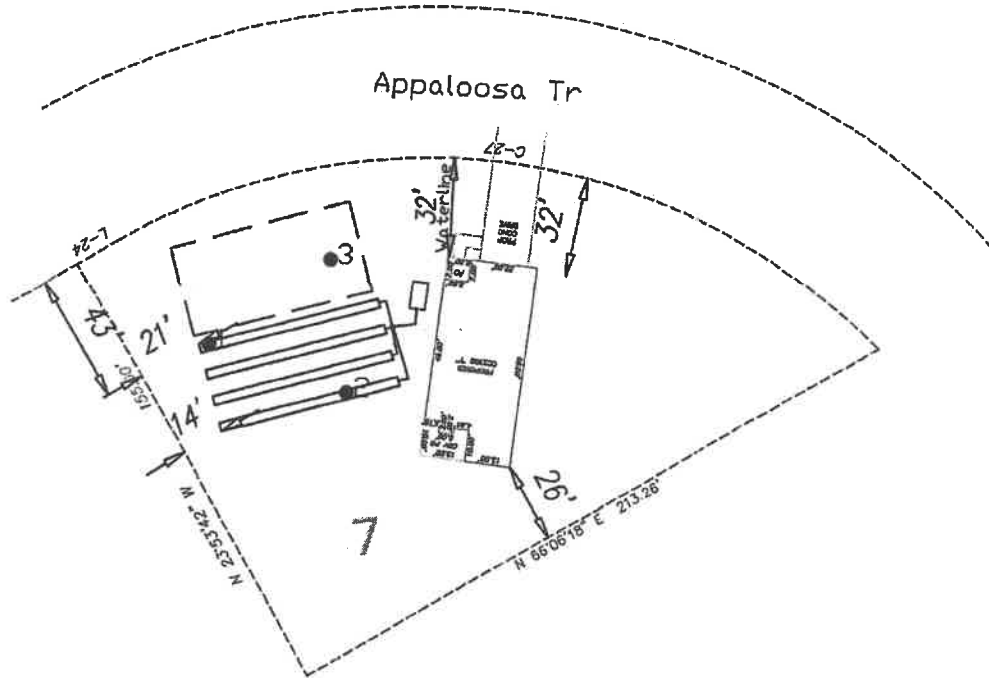
Type: Same as Primary



SCALE: 1" = 60'

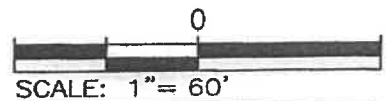
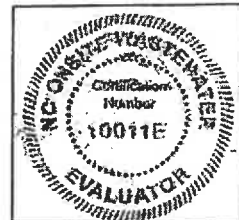
Aston Soil Works, Inc.
 2858 Madison Grove
 Greenville, NC 27858

Boring Location Map for Caviness & Cates
Parcel 88517, Beddard Ranch - Lot 7
Pitt County, NC



LEGEND—

- - Boring Location



Aston Soil Works, Inc.
2858 Madison Grove
Greenville, NC 27858

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

APPLICATION:

APPLICANT:	Caviness & Cates	DATE EVALUATED:	11/18/2024
SITE ADDRESS:	Beddard Ranch lot 7	PARCEL:	88517
PROPOSED FACILITY:	Residential	ACREAGE:	
WATER SUPPLY:	<input type="checkbox"/> ONSITE WELL EVALUATION <input checked="" type="checkbox"/> AUGER <input type="checkbox"/> SHARED WELL METHOD: <input type="checkbox"/> PIT <input checked="" type="checkbox"/> PUBLIC	DAILY DESIGN FLOW (.0400):	480 GPD

PROFILE #	.0502 LANDSCAPE POSITION & SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.0503)			COLOR (.0504)		OTHER PROFILE FACTORS	
			TEXTURE	STRUCTURE	CONSISTENCE MINEROLOGY	MATRIX	MOTTLE		
1	0-2% L	0 12	SL	GR	FR NS NP	10YR 3/3		SOIL WETNESS (.0504) - 36+	
		12 36	SCL	SBK	FR SS SP	10YR 5/6		SOIL DEPTH (.0505) -	
									RESTR HORIZ (.0507) - S
									PROF CLASS (.0509) - PS
									PROFILE LTAR - 0.5
2	0-2% L	0 12	SL	GR	FR NS NP	10YR 3/3		SOIL WETNESS (.0504) - 36	
		12 36	SCL	SBK	FR SS SP	10YR 5/6		SOIL DEPTH (.0505) -	
									RESTR HORIZ (.0507) - S
									PROF CLASS (.0509) - PS
									PROFILE LTAR - 0.5
3	0-2% L	0 12	SL	GR	FR NS NP	10YR 3/3		SOIL WETNESS (.0504) - 36+	
		12 36	SCL	SBK	FR SS SP	10YR 5/6		SOIL DEPTH (.0505) -	
									RESTR HORIZ (.0507) - S
									PROF CLASS (.0509) - PS
									PROFILE LTAR - 0.5
4								SOIL WETNESS (.0504) -	
								SOIL DEPTH (.0505) -	
								RESTR HORIZ (.0507) -	
								PROF CLASS (.0509) -	
								PROFILE LTAR -	

DESCRIPTION	INITIAL SYS	REPAIR SYS
AVAILABLE SPACE (.0508)	S	S
SYSTEM TYPE(S)	II-B	II-B
SITE LTAR	0.5	0.5
MAXIMUM TRENCH DEPTH	24	24

SITE CLASSIFICATION (.0509): PS

EVALUATED BY: Gene Aston

OTHERS PRESENT: _____

COMMENTS: _____

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

HE134978



CERTIFICATE OF LIABILITY INSURANCE

DATE (mm/dd/yyyy)
03/14/2023

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 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 Walters & Associates Po Box 91687 Raleigh NC 27676	CONTACT NAME Emery Walters	FAX (A/C No.) 919-847-0307
	PHONE (A/C No. Ext.) 919-847-0348	E-MAIL ADDRESS emwalt13@gmail.com
INSURER(S) AFFORDING COVERAGE INSURER A: StarStons Specialty Insurance Company		NAIC # 44776
INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		

INSURED
 Aston Soil Works Inc
 2858 Madison Grove Road
 Greenville NC 27858

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSTR. LTR.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFF. (mm/dd/yyyy)	POLICY EXP. (mm/dd/yyyy)	LIMITS
A	GENERAL LIABILITY <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 AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> HIRED AUTOS UMBRELLA LIAB. <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB. <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> COB <input type="checkbox"/> RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NC) If yes, describe under DESCRIPTION OF OPERATIONS below	M71888231AEM	03/09/2023	03/09/2023	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$50,000 MED EXP (Per injured person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$ COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ EACH OCCURRENCE \$ AGGREGATE \$ \$ NC STATE TORT LIMITS \$ OTH-ER \$ EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
A	Contractors Pollution Liability	M71888231AEM	03/09/2023	03/09/2023	\$1,000,000 Ea Pol. \$2,000,000 Agg. \$5,000 Deductible

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

Refer to page 2 addendum

CANCELLATION

CERTIFICATE HOLDER

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

SAMPLE
 P.O. Box 98
 Simpson, NC 27679

AUTHORIZED REPRESENTATIVE
Danielle A. White

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ACORD 25 (01/08)

AGENCY CUSTOMER ID: _____

100# _____



ADDITIONAL REMARKS SCHEDULE

AGENCY Walters & Associates		MAILED INDUSTRY Aston Soil Works Inc 2858 Madison Grove Road Greenville NC 27959	
POLICY NUMBER N71868231AEM		EFFECTIVE DATE 7	
CARRIER StarKone Specialty Insurance Company	NAIC CODE 4776		

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

Septic System Contractor

Professional Liability:
 \$1,000,000 Each Wrongful Act
 \$2,000,000 Aggregate
 \$5,000 Deductible
 Professional Liability is Claims Made.
 Retroactive Date: 03/09/2018
 Retroactive Date- Hold: 03/09/2018

Transportation Pollution Liability:
 \$1,000,000 Each Pollution Event
 \$2,000,000 Aggregate
 \$5,000 Deductible

Flynn, Lisinda

From: gene aston <astonsoil@gmail.com>
Sent: Wednesday, November 20, 2024 1:33 PM
To: Pitt County Environmental Health
Subject: NOI Beppard Ranch lot 7
Attachments: NOI-lot7.pdf

EXTERNAL EMAIL: This email originated from outside of Pitt County Government. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

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Thank you,

Gene Aston
Aston Soil Works Inc.
(252)341-9707