



**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: GLANDON FOREST EQUITY  
 Mailing address: 3825 BARRET DRIVE SUITE 100 City: RALEIGH State: NC Zip: 27609  
 Phone: 910-459-2602 Email: GBARNES@VANGUARDPG.COM

Authorized Onsite Wastewater Evaluator Information:  
 Name: R HAYWOOD PITTMAN II Certification #: 10033E  
 Mailing address: PO BOX 1387 City: RICHLANDS State: NC Zip: 28574  
 Phone: 910-330-2784 Email: PITTMANSOIL@YAHOO.COM

Site Location Information:  
 Site address: NC HWY 87 N (NEXT TO 7070 NC HWY 87 N)  
 Tax parcel identification number or subdivision lot, block number of property: 0068537  
 County: CHATHAM

System Information:  
 Wastewater System Type: IIIB  
 Daily Design Flow: \_\_\_\_\_  
 Sapolite System:  Yes  No    Subsurface Operator Required:  Yes  No  
 Water Supply Type:  Private Well     Public Water Supply     Spring     Other: \_\_\_\_\_

Facility Type:  
 Residential    # Bedrooms \_\_\_\_\_    Maximum # of Occupants \_\_\_\_\_  
 Business    Type of Business and Basis for Flow: DOLLAR GENERAL 260 GPD  
 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 24 day of SEPTEMBER 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 24 day of SEPTEMBER 2027.

Signature of Authorized Onsite Wastewater Evaluator: R HAYWOOD PITTMAN II

Signature of Owner or Legal Representative: \_\_\_\_\_

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: \_\_\_\_\_

# *Pittman Soil Consulting*

*1003 Gregory Fork Road  
Richlands, NC 28574  
Phone (910)330-2784  
pittmansoil@yahoo.com*

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## INSPECTIONS

All inspections of this AOWE permit shall be scheduled with the AOWE no less than 24 hours prior to start.

Septic and pump tanks shall be concrete, and in accordance with NC Laws and rules. No plastic tanks shall be used without WRITTEN consent of AOWE.

Drain lines shall be conventional rock 4 or 57, polystyrene, infiltrator chamber, or as specified on the permit.

All pipe shall be sch 40 PVC(DWV), and all pipe joints shall be welded with solvent.

Property lines shall be readily identifiable prior to installation.

Any changes that need to be made shall be approved by AOWE prior to installation.

All other systems (fill, type IV and V) shall require preconstruction meetings prior to installation.

This permit shall not be installed in wet conditions. The AOWE will determine when the site is suitable for installation.

## SYSTEM SHALL NOT BE LEFT OPEN TO WEATHER PRIOR TO COVERING

This permit is transferable to Atlantic Construction Inc.

IT IS THE CONTRACTOR/OWNERS RESPONSIBILITY TO PROVIDE PITTMAN SOIL CONSULTING WITH CERTIFICATE OF INSURANCE AND ANY FORMS THAT MAY BE REQUIRED.



R. Haywood Pittman II  
NC Licensed Soil Scientist 1262  
AOWE 10033E

NO INSPECTIONS AFTER 1:00PM MON-THURS & NONE ON FRIDAYS

INSTALLERS SHALL BE LICENSED FOR A MINIMUM OF 5 YEARS.

IF THE SYSTEM IS WRITTEN FOR CONVENTIONAL, THE INSTALLER MUST GET PERMISSION FROM AOWE TO TAKE A REDUCTION.

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## **OPERATION AND MAINTENANCE**

Do not park or drive on any portion of system or repair area

All building foundations shall be 5' from any part of system or repair area

All water lines shall be 10' from any part of initial system to include irrigation lines

Do not irrigate over initial system area once grass is established

Any water leaks shall be addressed

Water usage shall not exceed 60% of daily design flow

Only water, waste, washing machine, and toilet paper shall be in septic tank

Do not use flushable wipes

No latex or feminine hygiene products shall be flushed

Do not pour food waste or dairy products in septic tank

Septic tank shall be pumped every 3 to 5 years

Maintain grass cover and positive drainage over system area

Do not plant trees or bushes on septic tank or system area

Do not install utility lines over system area

System shall be located prior to any fence installation

Septic system area shall be roped off prior to construction of structure

There is no warranty or guarantee that system will perform for any period of time.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/24/2024

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).

<b>PRODUCER</b> N.C. Farm Bureau Ins. Agency 5301 Glenwood Avenue (27612) P.O. Box 27427 Raleigh NC 27611		<b>CONTACT NAME:</b> <b>PHONE (A/C, No, Ext):</b> <b>FAX (A/C, No):</b> <b>E-MAIL ADDRESS:</b>	
<b>INSURED</b> Pittman Soil Consulting C/O Ronald H. Pittman, II 1003 Gregory Fork Rd. Richlands NC 28574		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Capitol Specialty Insurance Corporation <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**

CERTIFICATE NUMBER: CL2472432348

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	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			EV20182381-07	07/19/2024	07/19/2025	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG \$ 2000000 Professional Occ/Agg \$ 1M/2M
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/>						COMBINED SINGLE LIMIT (Ea accident) \$ 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 DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Contractor's Pollution Liability			EV20182381-07	07/19/2024	07/19/2025	Each Occurrence \$1000000 General Aggregate \$2000000

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

Contractors Pollution

**CERTIFICATE HOLDER****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

# Chatham County Web Map



Service Layer  
 Credits: 2023 Aerial  
 Photos: Chatham  
 County, Chatham  
 County Tax  
 Department  
 Road Labels: Esri.,  
 Inc., City of  
 Naperville, Illinois  
 Land Reference:  
 Chatham County,  
 Chatham County  
 GIS



Date: 9/24/2024  
 Time: 1:52 PM

# *Pittman Soil Consulting*

*1003 Gregory Fork Road  
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Phone (910)330-2784  
pittmansoil@yahoo.com*

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SEPTEMBER 24, 2024

Ref: NC HWY 87 N, PARCEL: 0068537

A soil evaluation was conducted on the above referenced tract to determine the sites suitability for septic. The current laws and rules of NC was used as guide for this evaluation.

Hand Auger borings on the site were used to characterize the soil texture, structure, physical and chemical properties, and depth to the soil wetness condition. The attached plot plan shows the location of the septic systems in the most ideal location on the site. The soil wetness condition was found to be 26-28" from the surface with a clay texture. I have assigned an LTAR of 0.2 gpd/sqft for a 260 gpd Dollar General. This will require the installation of 2 (initial and repair) sets of 4-38' horizontal panel block lines that shall be installed in accordance with the current rules. The depth to soil wetness of 26-28" would constitute a 14" trench bottom. The systems will require 6" of Group II or III soil cover that shall extend 5' from the edge of the system. The system will require a 1500 gallon septic tank, 1500 gallon pump tank and flow equalization control panel required. A bull run valve shall be installed as shown and fields shall be alternated every 6 months.

After installation the site should be landscaped to shed surface water. Any alterations to the site may impact soil conditions. System shall not be installed in wet conditions.

If you have any questions please feel free to contact me at 910-330-2784. Thank You.

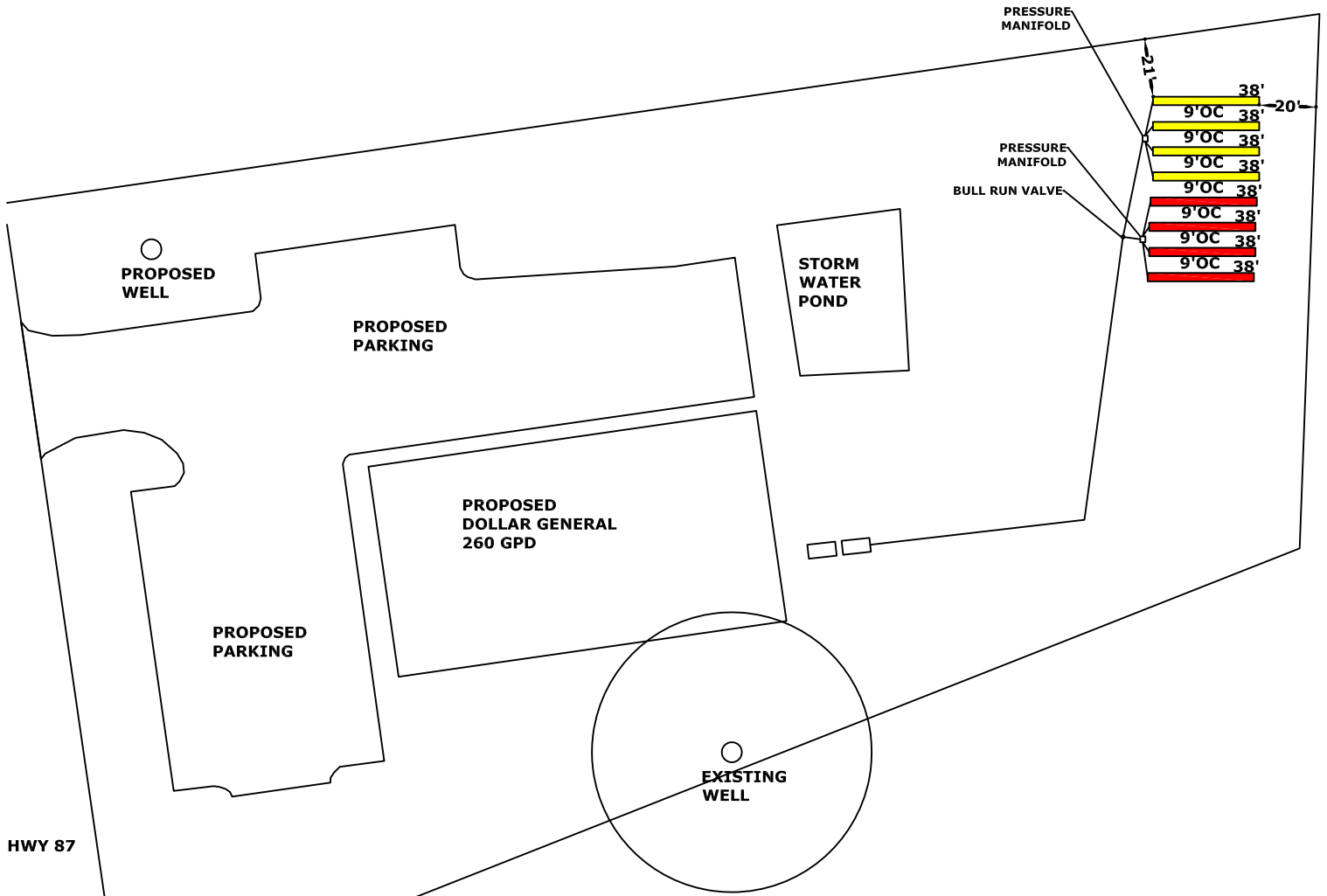
Sincerely,



R. Haywood Pittman II  
NC Licensed Soil Scientist

Owner: DOLLAR GENERAL  
 Address: HWY 87, PITTSBORO  
 Location: CHATHAM COUNTY

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**PRELIMINARY**



**INITIAL AND REPAIR**

DOLLAR GENERAL 260GPD  
 LTAR .2  
 2 EACH 4-38' HORZ PANEL BLK LINES  
 14" TB  
 >6" SOIL COVER REQUIRED OVER  
 SYSTEM AND 5' BEYOND SYSTEM

BULL RUN VALVE AS SHOWN SHALL  
 BE INSTALLED AND FIELDS SHALL  
 BE ALTERNATED EVERY 6 MONTHS

**SEPTIC TANK 1500 GALLONS**  
**PUMP TANK 1500 GALLONS**  
**FLOW EQUALIZATION**  
**CONTROL PANEL REQUIRED**

**APPROX SCALE 1"=60'**

**PITTMAN SOIL CONSULTING**

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 RICHLANDS, NC 28574,  
 910-330-2784

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Sheet 1 of 1  
 PROPERTY ID #: \_\_\_\_\_  
 COUNTY: CHATHAM

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

OWNER DOLLAR GENERAL \_\_\_\_\_

ADDRESS: HWY 87 \_\_\_\_\_

PROPOSED FACILITY: DG, PROPOSED DESIGN FLOW (.1949): 260 \_\_\_\_\_

LOCATION OF SITE: PITTSBORO \_\_\_\_\_

DATE EVALUATED: 9-13-24

PROPERTY SIZE: \_\_\_\_\_

PROPERTY RECORDED: \_\_\_\_\_

WATER SUPPLY:  Private  Public  Well  Spring  Other \_\_\_\_\_

EVALUATION METHOD:  Auger Boring  Pit  Cut TYPE OF WASTEWATER:  Sewage  Industrial Process  Mixed

P R O F I L E #	.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 SAPR O CLASS	.1944 RESTR HORIZ		
1	0-1 LS	0-12	C	ABK	FI	SS SP	U 26" 2.5Y 6/1	S	NA	NA	PS 14" TB 0.2	
		12-28	SIL	ABK	FI	SS SP						
		28-48	C	ABK	FI	SS SP						
2	0-1 LS	0-12	C	ABK	FI	SS SP	U 28" 2.5Y 6/1	S	NA	NA	PS 16" TB 0.2	
		12-28	SIL	ABK	FI	SS SP						
		28-48	C	ABK	FI	SS SP						
3	0-1 LS	0-12	C	ABK	FI	SS SP	U 28" 2.5Y 6/1	S	NA	NA	PS 18" TB 0.2	
		12-30	SIL	ABK	FI	SS SP						
		30-48	C	ABK	FI	SS SP						
4												

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM	OTHER FACTORS (.1946): <u>S</u> SITE CLASSIFICATION (.1948): <u>PS</u> EVALUATED BY: <u>HAYWOOD PITTMAN,</u> OTHER(S) PRESENT: <u>HANNAH STILES</u>
Available Space (.1945)	S	S	
System Type(s)	III	III	
Site LTAR	0.2	0.2	

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_