

Exhibit 11.1.h.

List of Lot Numbers and Addresses Form
 Subdivision Name: **Baker Farm Ph1**

Lot 1	20 Baker Farm Dr
Lot 2	30 Baker Farm Dr
Lot 3	40 Baker Farm Dr
Lot 4	30 Swift Fields Dr.
Lot 5	40 Swift Fields Dr.
Lot 6	45 Tobacco Woods Dr.
Lot 7	10 Whispering Willow Circle
Lot 8	20 Whispering Willow Circle
Lot 9	30 Whispering Willow Circle
Lot 10	40 Whispering Willow Circle
Lot 11	35 Whispering Willow Circle
Lot 12	25 Whispering Willow Circle
Lot 13	15 Whispering Willow Circle
Lot 14	10 Grazing Crop Court
Lot 22	30 Tobacco Woods Dr.
Lot 23	40 Tobacco Woods Dr.
Lot 24	50 Tobacco Woods Dr.
Lot 25	60 Tobacco Woods Dr.
Lot 26	70 Tobacco Woods Dr.
Lot 48	90 Tobacco Woods Dr.
Lot 49	100 Tobacco Woods Dr.
50	110 Tobacco Woods Dr.
51	120 Tobacco Woods Dr.
52	125 Tobacco Woods Dr.
53	115 Tobacco Woods Dr.
54	105 Tobacco Woods Dr.
55	95 Tobacco Woods Dr.
56	85 Tobacco Woods Dr.
57	75 Tobacco Woods Dr.
58	35 Swift Fields Dr.
59	25 Swift Fields Dr.
60	60 Baker Farm Dr.
61	80 Baker Farm Dr.
62	90 Baker Farm Dr.
63	100 Baker Farm Dr.
64	110 Baker Farm Dr.
65	120 Baker Farm Dr.
66	130 Baker Farm Dr.
67	140 Baker Farm Dr.

68	150 Baker Farm Dr.
69	160 Baker Farm Dr.
70	170 Baker Farm Dr.
72	400 Babbling Creek Dr.
73	390 Babbling Creek Dr.
74	380 Babbling Creek Dr.
76	375 Babbling Creek Dr.
77	355 Babbling Creek Dr.
78	345 Babbling Creek Dr.
79	335 Babbling Creek Dr.
80	315 Babbling Creek Dr.
81	295 Babbling Creek Dr.
82	275 Babbling Creek Dr.
83	265 Babbling Creek Dr.
84	255 Babbling Creek Dr.
85	245 Babbling Creek Dr.
86	235 Babbling Creek Dr.
87	205 Babbling Creek Dr.
115	20 Scenic Rock Dr.
116	30 Scenic Rock Dr.
117	40 Scenic Rock Dr.
144	35 Scenic Rock Dr.
145	25 Scenic Rock Dr.
146	220 Babbling Creek Dr.
147	230 Babbling Creek Dr.
148	240 Babbling Creek Dr.
149	270 Babbling Creek Dr.
150	280 Babbling Creek Dr.
151	290 Babbling Creek Dr.
152	300 Babbling Creek Dr.
153	330 Babbling Creek Dr.
154	340 Babbling Creek Dr.
155	350 Babbling Creek Dr.
156	360 Babbling Creek Dr.
157	10 Hickory Hollow Circle
158	20 Hickory Hollow Circle
159	30 Hickory Hollow Circle
160	35 Hickory Hollow Circle
161	25 Hickory Hollow Circle
162	15 Hickory Hollow Circle
163	125 Baker Farm Dr.
164	115 Baker Farm Dr.
165	105 Baker Farm Dr.

166	95 Baker Farm Dr.
167	85 Baker Farm Dr.
168	75 Baker Farm Dr.
169	65 Baker Farm Dr.
170	45 Baker Farm Dr.
171	15 Baker Farm Dr.
118	60 Scenic Rock Dr.
119	70 Scenic Rock Dr.
120	20 Back Country Ct.
121	30 Back Country Ct.
122	25 Back Country Ct.
123	15 Back Country Ct.
124	140 Scenic Rock Dr.
125	160 Scenic Rock Dr.
126	165 Scenic Rock Dr.
127	155 Scenic Rock Dr.
128	145 Scenic Rock Dr.
129	135 Scenic Rock Dr.
130	20 Granite Falls Way
131	30 Granite Falls Way
132	40 Granite Falls Way
133	50 Granite Falls Way
134	55 Granite Falls Way
135	45 Granite Falls Way
136	25 Granite Falls Way
137	15 Granite Falls Way
138	95 Scenic Rock Dr.
139	85 Scenic Rock Dr.
140	75 Scenic Rock Dr.
141	65 Scenic Rock Dr.
142	55 Scenic Rock Dr.
143	45 Scenic Rock Dr.

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. D R Horton - Terramor LLC	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input checked="" type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ - Exemption from FATCA reporting code (if any) N/A <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. 1341 Horton Circle	Requester's name and address (optional)
6 City, state, and ZIP code Arlington, Texas 76011	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number	
<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
or	
Employer identification number	
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Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of
U.S. person ►

Jayne E Meggs

Date ►

January 17, 2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the instructions for Part II for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships*, earlier.

What is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note: ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C corporation, or S corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box on line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3.

IF the entity/person on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation
• Individual • Sole proprietorship, or • Single-member limited liability company (LLC) owned by an individual and disregarded for U.S. federal tax purposes.	Individual/sole proprietor or single-member LLC
• LLC treated as a partnership for U.S. federal tax purposes, • LLC that has filed Form 8832 or 2553 to be taxed as a corporation, or • LLC that is disregarded as an entity separate from its owner but the owner is another LLC that is not disregarded for U.S. federal tax purposes.	Limited liability company and enter the appropriate tax classification. (P= Partnership; C= C corporation; or S= S corporation)
• Partnership	Partnership
• Trust/estate	Trust/estate

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)

B—The United States or any of its agencies or instrumentalities

C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state

G—A real estate investment trust

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940

I—A common trust fund as defined in section 584(a)

J—A bank as defined in section 581

K—A broker

L—A trust exempt from tax under section 664 or described in section 4947(a)(1)

M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, write NEW at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/Businesses and clicking on Employer Identification Number (EIN) under Starting a Business. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or SS-4 mailed to you within 10 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABLE accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor*
For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee

For this type of account:	Give name and EIN of:
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships*, earlier.

*Note: The grantor also must provide a Form W-9 to trustee of trust.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Visit www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.



Warranty Terms

System: Baker Wells

- Kevin Tyndall Builders will warrant and guarantee the installation of well pumps and controls for a 1-year period. Any additional warranty coverage will need to be provided by the Filter company.
- Damages from operational errors are not covered and included in the warranty.
- Bad Breaker, Electrical Failure, Water Leaks are included in warranty.
- Warranty is effective for 365 days (1 year) after start-up of System on June 1, 2023 and will expire June 1, 2024.

EXHIBIT 10.2

DISTRIBUTION FACILITIES WARRANTY

Project Name: Baker Farm
 Location: Franklin County, NC
 Developer Name: DR Horton, Inc.
 Developer's Contractor Name: Kevin Tyndall Builders, Inc.
 Owner Name: Old North State Water Company

The Developer's and the Contractor's signatures below hereby guarantees the Owner (ONSWC) that the Distribution construction work (mains, valves, meters, blow-offs, etc.) performed on the Project listed above by the Developer's Contractor to be free of defect in the materials furnished and workmanship for a period of one year from the date that the Developer's Engineer's and ONSWC have completed their final inspection of the system and have prepared, signed, and submitted the Engineer Certification Form and the Applicant Certification Form to Public Water Supply.

Should ONSWC become aware of any defect(s) to the water distribution facilities for this Project during the one year warranty period due to improper materials and/or workmanship, the defect(s) shall be made good by the Developer's Contractor at no expense to ONSWC.

ONSWC shall give notice of any defective work found to both the Developer and the Contractor (notice shall be by e-mail and phone call to the Contractor and the Developer). Should the Contractor fail to correct defective work within 45 days after receiving notice, the Owner may, at its option, correct the defects and charge the Developer the costs for such corrections/repairs. Developer agrees to pay such charges upon demand.

This Warranty applies and is limited as follows:

to the construction work that has not been subject to accident, misuse or abuse,
 to the construction work that has not been modified, altered, defaced, or had repairs made or attempted by others,
 that the Developer and the Contractor are notified in writing within 5 days of first knowledge of defect by Owner,
 that the Contractor be given first opportunity to make any repairs, replacement, or corrections to the defective construction at no cost to Developer and Owner within a reasonable period of time.

Developer's Signature, Date: [Signature], 8/3/2023
 Developer's Phone Number and E-mail: (910) 409-6277 patrick.miller@drhorton.com
 Contractor's Signature, Date: [Signature], 8/3/2023
 Contractor's Phone Number and E-mail: 910-237-4237 tyndallbuildersinc@gmail.com

North Carolina Department of Environmental Quality *NC Dept of Environmental Qu*
 Division of Water Resources
 Public Water Supply Section

AUG 19 2021

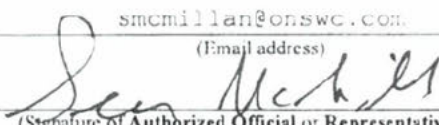
AUG 16 2021

Raleigh Regional Office

OFFICIAL COPY

Jan 23 2024

Application for Approval of Engineering Plans and Specifications For Water Supply Systems

Applicant	Design Engineer
Old North State Water Company, LLC (Name of Board, Council or Owner – the Applicant)	Chris Petree (Name of Design Engineer of Record)
Sean McMillan (Name and Title of Authorized Official or Representative of the Applicant)	Timmons Group (Name of Engineering Firm)
PO Box 10127 (Mailing Address)	5410 Trinity Rd (Mailing Address)
Birmingham, AL 35202-0127 (City, State & ZIP)	Raleigh, NC, 27607 (City, State & ZIP)
205-326-3200 (Phone Number)	919-532-3234 (Phone Number)
205-326-6856 (FAX Number)	N/A (FAX Number)
smcmillan@onswc.com (Email address)	Chris.petree@timmons.com (Email address)
 (Signature of Authorized Official or Representative of the Applicant)	

Project Name: Baker Subdivision Well System Distribution
 (Name of Project to appear on Public Water Supply Section records and tracking system)

A distribution system will be constructed for the new well system in the Baker Farms Subdivision. The distribution system will consist of 13,250 Linear feet of 8-inch PVC waterline and 1,210 linear feet of 4-inch PVC waterline, for a total of 14,460 linear feet of water line being constructed.
 (description of project)

The project is located southeast of Youngsville near the intersection of Sallie Lane and US Highway 98
 (general location of project)

in Franklin County.

Date 11/03/2021
 (for DEQ use only)

Serial No. 21-00697
 (for DEQ use only)

Application for Approval of Engineering Plans and Specifications for Water Supply Systems

To: Division of Water Resources,
Department of Environmental Quality

The **Applicant** applies under and in full accord with the provision of NCGS 130A-317, and such other statutes and rules as relate to public water systems. The **Authorized Official** or **Representative** of the **Applicant** represents that he is authorized to act for the **Applicant**. The **Authorized Official** or **Representative** of the **Applicant** understands and agrees to the following:

1. The **Applicant** shall not award contracts or begin construction without first receiving "Authorization to Construct" from DEQ.
2. The **Applicant** shall make no change or deviation from the engineering plans and specifications approved by DEQ except as allowed by 15A NCAC 18C .0306 or with the written consent and approval of DEQ.
3. The **Applicant** shall obtain Final Approval in accordance with 15A NCAC 18C .0306 prior to placing the project (or any portion thereof) into service.
4. Digital (PDF) submittals are true image copy of the original sealed/signed documents.

An authorized representative of the **Public Water System** (not always the same as the **Applicant**) is to complete and sign the following WSMP section.

Status of Water System Management Plan (WSMP)

Check one of the following, and if applicable, provide the required information:

- ☐ The WSMP for the project, as defined in the attached engineering plans and specifications, has not been submitted.
- ☐ Three copies of the WSMP for the project, as defined in the attached engineering plans and specifications, are submitted with this application.
- ☒ The WSMP that includes this project, as defined in the attached engineering plans and specifications, was previously submitted.

Provide the following:

Public Water System Name: Old North State Water Company, LLC

Owner Name: John McDonald

Water System No.: NC 40-35-028

Serial Number of Deemed Complete WSMP: 13-01053

By my signature below, I certify that the previously submitted WSMP contains the information required by 15A NCAC 18C .0307(c) for the project defined in the attached engineering plans and specifications.

Sean McMillan

(Type or print name of authorized representative of Public Water System)

Vice President

(Title of authorized representative of Public Water System)

Sean McMillan

(Signature of authorized representative of Public Water System)

8/11/21

(Date)

Application for Approval of Engineering Plans and Specifications for Water Supply Systems

In accordance with NCGS 130A-328, the Public Water Supply Section charges a fee for plan review. Any documents submitted for review must be accompanied by a check payable to *DEQ-Public Water Supply Section* before the review will begin.

There is a \$25 fee for returned checks.

The charges for review of plans are shown below. Check one of the following.

Distribution System fees

- | | | |
|-------------------------------------|---|-------|
| <input type="checkbox"/> | Construction of water lines, less than 5000 linear feet | \$150 |
| <input checked="" type="checkbox"/> | Construction of water lines, 5000 linear feet or more | \$200 |
| <input type="checkbox"/> | Other construction or alteration to a distribution system | \$ 75 |

Ground Water System fees

- | | | |
|--------------------------|--|-------|
| <input type="checkbox"/> | Construction of a new ground water system or adding a new well | \$200 |
| <input type="checkbox"/> | Alteration to an existing ground water system | \$100 |

Surface water system fees

- | | | |
|--------------------------|---|-------|
| <input type="checkbox"/> | Construction of a new surface water intake or treatment facility | \$250 |
| <input type="checkbox"/> | Alteration to existing surface water intake or treatment facility | \$150 |

Other fees

- | | | |
|--------------------------|--|-------|
| <input type="checkbox"/> | Water System Management Plan review | \$ 75 |
| <input type="checkbox"/> | Miscellaneous changes or maintenance not covered above | \$ 50 |

Notes:

1. Projects for Tank Rehabilitation use separate "Application for Water Tank Reconditioning Plan Approval."
2. The fee is not refundable if the plans are not approved.
3. Revisions to plans to address the Public Water Supply Section's or other state agency's comments do not incur an additional fee.
4. If one set of plans has multiple related items (such as a new well with construction of water lines) only one fee must be submitted for highest price item. The amounts are not cumulative, except for fees for Water System Management Plans.
5. **If the appropriate plan review fee is not received within ten days after the receipt of plans, specifications, and reports for approval, then all plan documents will be recycled. A new set of documents must then be submitted with the appropriate fee for approval.**

This approval does not address all applicable laws, rules, standards and criteria, and other approvals and licenses that may be required by the local, state or federal government.

The Public Water Supply Section has stamped and sealed the official copies of plans and specifications accompanying this application with the serial number of this application 21-00697. Any erasures, additions or alterations of the proposed improvements except those permitted in 15A NCAC 18C .0306 make this approval null and void.

This approval does not constitute a warranty of the design, construction or future operation of the water system.

Signed: 

Robert W. Midgette, P.E.
Chief, Public Water Supply Section
Division of Water Resources

Application for Approval of Engineering Plans and Specifications for Water Supply Systems

Other Information and Checklist Page

- ☒ Attached is a check for the proper plan review fee amount, in accordance with NCGS 130A-328. See note 4 on page 3.

This submittal includes one paper original with two digital (PDF) CDs of the following items, each item in separate folders:

- ☒ This completed "Application for Approval of Engineering Plans and Specifications for Water Supply Systems"
- ☒ The sealed plan drawings, separate file in PDF format for each drawing. Cover sheet must include drawings index;
- ☒ The project-specific Engineering Report (ER) describing the scope and purpose of the project and addressing each of the items listed in 15A NCAC 18C .0307(b), including the design basis of the project. [15A NCAC 18C .0307(b)(12)];
- ☒ Specifications for this project; **OR**
- ☐ The project will use the following system's previously approved standard specifications for waterline extensions:

Name of System: _____

Serial Number: _____

The Serial Numbers for previously approved standard specifications can be found at the following website:

<http://www.ncwater.org/?page=424>

One of the following:

- ☐ Attached is a letter signed by an authorized representative of the Public Water System agreeing to serve the project and stating that the system has adequate supply;

OR

- ☒ The Applicant is a Public Water System.

If the project has sought funding (for example, DWSRF loan) list the program and (if available) the application or funding number below:

Program Name	Application or Funding Number, if available

Yes No

- ☐ ☐ Project will be completed with significant expenditure of state moneys, greater than ten million dollars (\$1,000,000) in accordance with G.S. 113A-9 (7a).
- ☐ ☐ Project will cause substantial, permanent land-disturbing activity of an area greater than 10 acres of public lands in accordance with G.S. 113A-9 (11).

ROY COOPER
Governor
ELIZABETH S. BISER
Secretary
S. DANIEL SMITH
Director



W-1300, Sub 97

November 3, 2021

Old North State Water Company, LLC
Attention: Sean McMillan, Vice President
PO Box 10127
Birmingham, Alabama 35202

Re: Engineering Plans and Specifications Approval
Groundwater System
Baker SD WSD
Baker S/D
Water System No.: NC4035028, Franklin County
Serial No.: 21-00697

Dear Applicant:

Enclosed please find one copy of the "Application for Approval..." together with one copy of the referenced engineering plans and specifications bearing the Division of Water Resources stamp of approval for the referenced project. These engineering plans and specifications are approved under Division of Water Resources Serial Number 21-00697, dated November 3, 2021. This approval has the following conditions: **A bacteriological sample result that shows no bacteria must be submitted for Well No. 3 and recorded well lot deed/easement documenting that Old North State Water Company, LLC owns or has control over 100 feet around the well head must be submitted to our office before Final Approval can be issued for this project.**

Engineering plans prepared by Joshua Lambert, P.E. and Bruce Strickland, Jr., P.E. and specifications prepared by Chris Petree, P.E., call for the installation of Well No. 3, Well No. 4, Well No. 5, a well house, a uranium treatment system, a sodium hypochlorite feeding system for disinfection, a 6,000-gallon ASME coded hydropneumatic tank with automatic pressure controls, associated piping, valves, and other related appurtenances on Proposed Street I within the proposed Baker Subdivision off of US Highway 98 in Youngsville, Franklin County. Well No. 3 will have a 91 gallon per minute (gpm) pumping capacity (91 gpm yield), 484 feet total dynamic head, a 15.5 horsepower submersible pump, and a well cover. Well No. 4 will have a 25 gpm pumping capacity (25 gpm yield), 555 feet total dynamic head, a 7.5 horsepower submersible pump, and a well cover. Well No. 5 will have a 34 gpm pumping capacity (34 gpm yield), 678 feet total dynamic head, a 7.5 horsepower submersible pump, and a well cover.



North Carolina Department of Environmental Quality | Division of Water Resources
512 North Salisbury Street | 1634 Mail Service Center | Raleigh, North Carolina 27699-1634
919.707.9100

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Jan 23 2024

Combined flow from Well Nos. 3 and 5 will flow through with two (2) 5-micron polypropylene felt bag filters (Rosedale model NC08-30-2F-2-150-S-V-NPOLY) and a uranium treatment and removal system (AdEdge MOD92-IX-1447EX-26-MVH-LL with AD92 anion exchange resin) consisting of twenty-six (26) 14-inch by 47-inch composite pressure vessels in series (thirteen (13) lead and thirteen (13) lag), approximately 3.25 cubic feet of anion resin media (36.5-inch depth) in each vessel, a filtration rate of 9 gpm/sq. ft. in each vessel, and a combined filtration capacity of 125gpm. The system does not require backwashing. Combined water flow from Well Nos. 3, 4, and 5 will be treated with sodium hypochlorite for disinfection.

Plans and specifications also call for approximately 13,250 feet of 8-inch water main, 1,210 feet of 4-inch water main, blow off assemblies, valves, and other related appurtenances along Proposed Streets A, B, C, D, E, F, G, H, I, and J to serve 147 lots within the proposed Baker Subdivision in Youngsville, Franklin County. The project will be completed in phases: Proposed Streets C, D, and E from approximately 150 feet east of Proposed Street A and extending east; Proposed Streets A, B, E from the intersection of Proposed Street A to approximately 150 feet east of Proposed Street A, F, G, H, I from approximately 175 feet east of Proposed Street J to approximately 350 feet north of Proposed Street I (E-W), and J from the intersection of Proposed Street I to approximately 350 feet north of Proposed Street I; and Proposed Streets I from approximately 180 feet east of Proposed Street J to the intersection of Proposed Street I (E-W) and I from approximately 150 feet east of Proposed Street I (N-S) extending east.

Hydropneumatic tanks with a capacity greater than 120 gallons must be constructed and stamped in accordance with the American Society of Mechanical Engineers (ASME) Pressure Vessel Code stamped with the ASME "U" symbol stamp and registered with the National Board of Boiler and Pressure Vessel Inspectors. These tanks must be inspected by the Department of Labor, Boiler Safety Bureau after installation but prior to operation. Please call (919) 707-7918 to schedule an inspection.

Please note that in accordance with 15A NCAC 18C .0309(a), no construction, alteration, or expansion of a water system shall be placed into service or made available for human consumption until the Public Water Supply Section has issued Final Approval. Final Approval will be issued and mailed to the applicant upon receipt of both an Engineer's Certification and an Applicant's Certification submitted in accordance with 15A NCAC 18C .0303 (a) and (c).

These plans and specifications in the foregoing application are approved insofar as the protection of public health is concerned as provided in the rules, standards and criteria adopted under the authority of Chapter 130A-317 of the General Statutes. This approval does not constitute a warranty of the design, construction, or future operation of the water system.

One copy of the "Application for Approval..." and a copy of the plans and specifications with a seal of approval from the department are enclosed. One copy of the documents in a digital format (CD) is being forwarded to our Raleigh Regional Office. The second CD is being retained in our office.

If the Public Water Supply Section can be of further service, please call (919) 707-9100.

Sincerely,

A handwritten signature in dark ink, appearing to read 'R W Midgette', followed by the word 'FOR' in small capital letters.

Robert W. Midgette, P.E.
Chief, Public Water Supply Section

RWM/AKS

Enclosures: Approval Document

cc: Shawn Guyer, P.E., Raleigh Regional Office
Linda Raynor, Compliance Services Branch
Franklin County Health Department
North Carolina Utilities Commission, Water Division
Boiler Safety Bureau, Department of Labor
Timmons Group

ROY COOPER

Governor

ELIZABETH S. BISER

Secretary

RICHARD E. ROGERS, JR.

Director



NORTH CAROLINA
Environmental Quality

W-1300, Sub 97

February 24, 2023

Old North State Water Company, LLC

ATTN: Sean McMillan

PO Box 10127

Birmingham, AL 35202-0127

Re: **Final Approval**

Final Approval Date: February 24, 2023

Baker SD WSD

Serial No.: 21-00697

Water System Name: BAKER S/D

Water System No.: NC4035028

Franklin County

Dear Sir/Madam:

The Department received an Engineer's Certification statement and an Applicant's Certification concerning the above referenced project. The Engineer's Certification verifies that the construction of the referenced project has been completed in accordance with the engineering plans and specifications approved under Department Serial Number 21-00697. The Applicant's Certification verifies that an Operation and Maintenance Plan and Emergency Management Plan have been completed and are accessible to the operator at all times and available to the department upon request and that the system will have a certified operator as required by 15A NCAC 18C .1300.

The Department has determined that the requirements specified in 15A NCAC 18C .0303(a) and (c) have been met, and therefore, issues this **Final Approval** in accordance with Rule .0309(a).

Please contact us at (919) 707-9100 if you have any questions or need additional information.

Sincerely,

A handwritten signature in black ink, reading "Jay Frick".

Jay Frick

Deputy Section Chief

Public Water Supply Section

Division of Water Resources

cc: SHAWN GUYER, P.E., Regional Engineer
Franklin County Health Department
Timmons Group



North Carolina Department of Environmental Quality | Division of Water Resources
512 North Salisbury Street | 1634 Mail Service Center | Raleigh, North Carolina 27699-1634
919.707.9100

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Jan 23 2024

ROY COOPER

Governor

ELIZABETH S. BISER

Secretary

S. DANIEL SMITH

Director



November 03, 2021

Old North State Water Company, LLC

ATTN: Sean McMillan

PO Box 10127

Birmingham, AL 35202-0127

Re: **Authorization to Construct (This is not a Final Approval)**

Issue Date: November 03, 2021

Baker SD WSD

Serial No.: 21-00697

Water System No.: NC4035028

Franklin County

Dear Applicant:

This letter is to confirm that a complete Engineer's Report and a Water System Management Plan have been received, and that engineering plans and specifications have been approved by the Department for **Baker SD WSD, Serial No.: 21-00697**.

The "Authorization to Construct" is valid for 36 months from the issue date. Authorization to construct may be extended if the Rules Governing Public Water Supplies and site conditions have not changed (see Rule .0305). The "Authorization to Construct" and the engineering plans and specifications approval letter shall be posted at the primary entrance of the job site before and during construction.

Upon completion of the construction or modification, **and prior to placing the new construction or modification into service**, the applicant must submit an Engineer's Certification and Applicant's Certification to the Public Water Supply Section.

- **Engineer's Certification:** in accordance with Rule .0303 (a), the applicant shall submit a certification statement signed and sealed by a registered professional engineer stating that construction was completed in accordance with approved engineering plans and specifications, including any provisions stipulated in the Department's engineering plan and specification approval letter.
- **Applicant's Certification:** in accordance with Rule .0303 (c), the applicant shall submit a signed certification statement indicating that the requirements for an Operation and Maintenance Plan and Emergency Management Plan have been satisfied in accordance with Rule .0307 (d) and (e) and that the system has a certified operator in accordance with Rule .1300. The "Applicant's Certification" form is available at <http://www.ncwater.org/> (click on Public Water Supply Section, Plan Review, Plan Review Forms).

Certifications can be sent by mail, fax (919-715-4374), or attachment to an e-mail message to **PWSSection.PlanReview@ncdenr.gov**.

If this "Authorization to Construct" is for a new public water system, the owner must submit a completed **application for an Operating Permit** and the appropriate fee. For a copy of the application for an Operating Permit please call (919) 707-9085.

Once the certifications and permit application and fee (if applicable) are received and determined adequate, the Department will issue a Final Approval letter to the applicant. In accordance with Rule .0309 (a), **no portion of this project shall be placed into service until the Department has issued Final Approval**.

Please contact us at (919) 707-9100 if you have any questions or need additional information.

Sincerely,

A handwritten signature in cursive script, reading "Robert W. Midgette".

Robert W. Midgette, P.E.

Chief, Public Water Supply Section

cc: SHAWN GUYER, P.E., Regional Engineer

Timmons Group



North Carolina Department of Environmental Quality | Division of Water Resources
 512 North Salisbury Street | I634 Mail Service Center | Raleigh, North Carolina 27699-1634
 919.707.9100

North Carolina Department of Environmental Quality
Division of Water Resources

Authorization to Construct

Project Applicant:	Old North State Water Company, LLC
Public Water System Name and Water System No.:	BAKER S/D NC4035028
Project Name:	Baker SD WSD
Serial No.:	21-00697
Issue Date:	November 03, 2021
Expiration Date:	36 Months after Issue Date

In accordance with NCAC 18C .0305, this Authorization to Construct must be posted
at the primary entrance to the job site during construction.



Environmental Chemists, Inc.

6602 Windmill Way, Wilmington, NC 28405 • 910.392.0223 Lab • 910.392.4424 Fax
 710 Bowserstown Road, Manteo, NC 27954 • 252.473.5702 Lab/Fax
 255-A Wilmington Highway, Jacksonville, NC 28540 • 910.347.5843 Lab/Fax

ANALYTICAL & CONSULTING CHEMISTS

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Jan 23 2024

NEW WELL INORGANIC CHEMICAL ANALYSIS

Name of System: Terramor Well #2

County:

Sample Type:

Location: Tap

Facility ID:

Sample Point: SpecialCollected by: Client

Collection Date:

Collection Time:

3/31/20209:05:00 AM

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
0100	Turbidity	SM 2130 B	0.1	0.2 NTU	04/01/2020 16:13	4/2/2020 7:58	
1005	Arsenic	EPA 200.8	0.005	<0.005 mg/L	04/02/2020 10:20	4/6/2020 10:31	0.01
1010	Barium	EPA 200.8	0.4	<0.400 mg/L	04/02/2020 10:20	4/6/2020 10:31	2
1015	Cadmium	EPA 200.8	0.001	<0.001 mg/L	04/02/2020 10:20	4/6/2020 10:31	0.005
1016	Calcium	EPA 200.7	1	20.2 mg/L	04/01/2020 12:33	4/2/2020 11:10	
1017	Chloride	SM 4500 Cl B	5	<5 mg/L	04/07/2020 13:30	4/8/2020 8:11	250
1020	Chromium	EPA 200.8	0.02	<0.020 mg/L	04/02/2020 10:20	4/6/2020 10:31	0.1
1022	Copper	EPA 200.8	0.05	<0.050 mg/L	04/02/2020 10:20	4/6/2020 10:31	1.3
1024	Cyanide	EPA 335.4	0.05	< 0.050 mg/L	04/08/2020 16:37	4/9/2020 12:19	0.2
1025	Fluoride	SM 4500 F C	0.1	2.5 mg/L	04/05/2020 10:45	4/6/2020 14:22	4
1028	Iron	EPA 200.7	0.06	<0.060 mg/L	04/01/2020 12:33	4/2/2020 11:10	0.3
1030	Lead	EPA 200.8	0.003	<0.003 mg/L	04/02/2020 10:20	4/6/2020 10:31	0.015
1031	Magnesium	EPA 200.7	1	4.53 mg/L	04/01/2020 12:33	4/2/2020 11:10	
1032	Manganese	EPA 200.8	0.01	0.039 mg/L	04/02/2020 10:20	4/6/2020 10:31	0.05
1035	Mercury	EPA 245.1	0.0004	<0.0004 mg/L	04/06/2020 11:42	4/27/2020 7:35	0.002
1036	Nickel	EPA 200.8	0.1	<0.100 mg/L	04/02/2020 10:20	4/6/2020 10:31	
1040	Nitrate Nitrogen	EPA 353.2	1	<1.0 mg/L	04/01/2020 11:15	4/22/2020 12:46	10
1041	Nitrite Nitrogen	EPA 353.2	0.1	< 0.10 mg/L	04/01/2020 11:15	4/2/2020 9:21	1
1045	Selenium	EPA 200.8	0.01	<0.010 mg/L	04/02/2020 10:20	4/6/2020 10:31	0.05



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NEW WELL INORGANIC CHEMICAL ANALYSIS

Name of System: Terramor Well #2

County:

Sample Type:

Location: Tap

Facility ID:

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3/31/20209:05:00 AMCollected by: Client

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Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

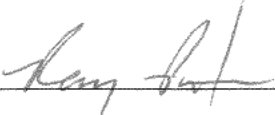
NC

27591

LABORATORY ID #: 37729			<input checked="" type="checkbox"/> SAMPLE UNSATISFACTORY			<input checked="" type="checkbox"/> RESAMPLE REQUIRED				
CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS		ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS		
1050	Silver	EPA 200.8	0.05	<0.05	mg/L	04/07/2020 13:01	4/8/2020 14:55	0.1		
1052	Sodium	EPA 200.7	1	24.0	mg/L	04/01/2020 12:33	4/2/2020 11:10			
1055	Sulfate (NW)	EPA 300.0	5	<5	mg/L	03/31/2020 14:13	4/3/2020 15:06	250		
1068	Acidity	SM 2310 B	1	1	mg/L	04/08/2020 10:30	4/9/2020 8:38			
1074	Antimony	EPA 200.8	0.003	<0.003	mg/L	04/02/2020 10:20	4/6/2020 10:31	0.006		
1075	Beryllium	EPA 200.8	0.002	<0.002	mg/L	04/02/2020 10:20	4/6/2020 10:31	0.004		
1085	Thallium	EPA 200.8	0.001	<0.001	mg/L	04/02/2020 10:20	4/6/2020 10:31	0.002		
1905	Color PtCo	SM 2120B (PtCo)	5	<5	units	04/02/2020 10:43	4/2/2020 10:55	15		
1915	Total Hardness	SM 2340 C	1	72	mg/L	04/02/2020 10:00	4/3/2020 11:28			
1925	pH	SM 4500 H B		8.0	units	04/10/2020 10:00	4/13/2020 12:01			
1927	Alkalinity	SM 2320B	1	80	mg/L	04/01/2020 12:00	4/8/2020 8:23			
1930	Total Dissolved Solids (TDS)	SM 2540 C		142	mg/L	03/31/2020 15:30	4/6/2020 10:38	500		

Note: Except for Iron, Manganese and Sulfate, if result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours.

Comment:

Reviewed by: 



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Jan 23 2024

NEW WELL - PESTICIDES AND SYNTHETIC ORGANIC CHEMICALS (SOC) ANALYSIS

Name of System: Terramor Well #2

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

3/31/20209:05:00 AMCollected by: Client

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell NC 27591

Attn: Kevin Letchworth

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2005	Endrin	EPA 508.1	0.00001	< 0.00001 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.002
2010	Lindane	EPA 508.1	0.00002	< 0.00002 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.0002
2015	Methoxychlor	EPA 508.1	0.0001	< 0.0001 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.04
2020	Toxaphene	EPA 508.1	0.001	< 0.001 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.003
2031	Dalapon	EPA 515.4	0.001	< 0.001 mg/L	04/08/2020 11:00	4/22/2020 15:59	0.2
2035	Di(2-ethylhexyl)adipate	EPA 525.2	0.0006	< 0.0006 mg/L	03/31/2020 08:00	4/10/2020 7:12	0.4
2036	Oxamyl(vydate)	EPA 531.1	0.002	< 0.002 mg/L	04/06/2020 11:41	4/27/2020 7:35	0.2
2037	Simazine	EPA 525.2	0.00007	< 0.00007 mg/L	03/31/2020 08:00	4/10/2020 7:12	0.004
2039	Di(2-ethylhexyl)phthalate	EPA 525.2	0.00132	< 0.00132 mg/L	03/31/2020 08:00	4/10/2020 7:12	0.006
2040	Picloram	EPA 515.4	0.0001	< 0.0001 mg/L	04/08/2020 11:00	4/22/2020 15:59	0.5
2041	Dinoseb	EPA 515.4	0.0002	< 0.0002 mg/L	04/08/2020 11:00	4/22/2020 15:59	0.007
2042	Hexachlorocyclopentadiene	EPA 525.2	0.0001	< 0.0001 mg/L	03/31/2020 08:00	4/10/2020 7:12	0.05
2046	Carbofuran	EPA 531.1	0.0009	< 0.0009 mg/L	04/06/2020 11:41	4/27/2020 7:35	0.04
2050	Atrazine	EPA 508.1	0.0001	< 0.0001 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.003
2051	Alachlor	EPA 508.1	0.0002	< 0.0002 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.002
2065	Heptachlor	EPA 525.2	0.00004	< 0.00004 mg/L	03/31/2020 08:00	4/10/2020 7:12	0.0004
2067	Heptachlor epoxide	EPA 508.1	0.00002	< 0.00002 mg/L	04/03/2020 08:00	4/9/2020 15:32	0.0002

LABORATORY LOG 20-13096

REPORT #: 2020-05299



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Jan 23 2024

NEW WELL - PESTICIDES AND SYNTHETIC ORGANIC CHEMICALS (SOC) ANALYSIS

Name of System: Terramor Well #2

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

3/31/20209:05:00 AMCollected by: Client

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

Attn: Kevin Letchworth

LABORATORY ID #: 37729		<input type="checkbox"/> SAMPLE UNSATISFACTORY			<input type="checkbox"/> RESAMPLE REQUIRED					
2105	2,4-D	EPA 515.4	0.0001	< 0.0001 mg/L	04/08/2020	11:00	4/22/2020	15:59	0.07	
2110	2,4,5-TP (Silvex)	EPA 515.4	0.0002	< 0.0002 mg/L	04/08/2020	11:00	4/22/2020	15:59	0.05	
2274	Hexachlorobenzene	EPA 525.2	0.0001	< 0.0001 mg/L	03/31/2020	08:00	4/10/2020	7:12	0.001	
2306	Benzo(a)pyrene	EPA 525.2	0.00002	< 0.00002 mg/L	03/31/2020	08:00	4/10/2020	7:12	0.0002	
2326	Pentachlorophenol	EPA 515.4	0.00004	< 0.00004 mg/L	04/08/2020	11:00	4/22/2020	15:59	0.001	
2383	(PCB) Total Polychlorinated Biphen	EPA 508.1	0.0001	< 0.0001 mg/L	04/03/2020	08:00	4/9/2020	15:32	0.0005	
2931	1,2-Dibromo-3-chloropropane (DB	EPA 504.1	0.00002	< 0.00002 mg/L	04/01/2020	12:20	4/9/2020	7:06	0.0002	
2946	Ethylene Dibromide (EDB)	EPA 504.1	0.00001	< 0.00001 mg/L	04/01/2020	12:20	4/9/2020	7:06	0.00005	
2959	Chlordane	EPA 508.1	0.0002	< 0.0002 mg/L	04/03/2020	08:00	4/9/2020	15:32	0.002	

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours.

Comment:

Reviewed by:



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramor Well #2

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

3/31/20209:05:00 AMCollected by: Client

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2030	p-Isopropyltoluene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2210	Chloromethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2212	Dichlorodifluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2214	Bromomethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2216	Chloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2218	Trichlorofluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2246	Hexachlorobutadiene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2248	Naphthalene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2378	1,2,4-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	0.07
2380	Cis-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	0.07
2408	Dibromomethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2410	1,1-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2412	1,3-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2413	1,3-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2414	1,2,3-Trichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2416	2,2-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2418	1,2,4-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2420	1,2,3-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2422	n-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2424	1,3,5-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	
2426	tert-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020 02:37	4/9/2020 11:10	



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramor Well #2

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

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Wendell

NC

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LABORATORY ID #: 37729			<input checked="" type="checkbox"/> SAMPLE UNSATISFACTORY	<input checked="" type="checkbox"/> RESAMPLE REQUIRED					
2428	sec-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2430	Bromochloromethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2941	Chloroform	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2942	Bromoform	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2943	Bromodichloromethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2944	Chlorodibromomethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2955	Xylenes(total)	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	10
2964	Dichloromethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2965	o-Chlorotoluene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2966	p-Chlorotoluene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2967	m-Dichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2968	o-Dichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.6
2969	p-Dichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.075
2976	Vinyl chloride	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.002
2977	1,1-Dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.007
2978	1,1-Dichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2979	Trans-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.1
2980	1,2-Dichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2981	1,1,1-Trichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.2
2982	Carbon tetrachloride	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2983	1,2-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2984	Trichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2985	1,1,2-Trichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005



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County:

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Wendell

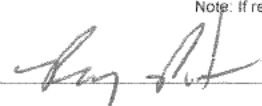
NC

27591

LABORATORY ID #: 37729		<input checked="" type="checkbox"/> SAMPLE UNSATISFACTORY		<input checked="" type="checkbox"/> RESAMPLE REQUIRED					
2986	1,1,1,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2987	Tetrachloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2988	1,1,1,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2989	Chlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.1
2990	Benzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.005
2991	Toluene	EPA 524.2	0.0005	0.0010 mg/L	04/07/2020	02:37	4/9/2020	11:10	1
2992	Ethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.7
2993	Bromobenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2994	Isopropylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	
2996	Styrene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	0.1
2998	n-Propylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	04/07/2020	02:37	4/9/2020	11:10	

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours.

Comment:

Reviewed by: 



Environmental Chemists, Inc.

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 710 Bowserstown Road, Manteo, NC 27954 • 252.473.5702 Lab/Fax
 255-A Wilmington Highway, Jacksonville, NC 28540 • 910.347.5843 Lab/Fax

ANALYTICAL & CONSULTING CHEMISTS

info@environmentalchemists.com

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Jan 23 2024

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Attention: Kevin Letchworth

Date of Report: Apr 23, 2020**Customer PO #:****Report #:** 2020-05299**Report to:** Kevin Letchworth**Project ID:** Terramor Well #2

TTHM - HAA5 FORMATION POTENTIAL

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
20-13096	Site: Tap	3/31/2020 9:05 AM	DW	Client
Test	Method	Results	Date Analyzed	
Bromodichloromethane	EPA 502.2	<0.001 mg/L	04/14/2020	
Bromoform	EPA 502.2	<0.001 mg/L	04/14/2020	
Chloroform	EPA 502.2	<0.001 mg/L	04/14/2020	
Dibromochloromethane	EPA 502.2	<0.001 mg/L	04/14/2020	
TTHMFP	EPA 502.2	<0.001 mg/L	04/14/2020	
Dibromoacetic Acid	EPA 552.2	<0.001 mg/L	04/13/2020	
Dichloroacetic Acid	EPA 552.2	<0.001 mg/L	04/13/2020	
Monobromoacetic Acid (MBAA)	EPA 552.2	<0.001 mg/L	04/13/2020	
Monochloroacetic Acid	EPA 552.2	<0.002 mg/L	04/13/2020	
THAFP	EPA 552.2	<0.002 mg/L	04/13/2020	
Trichloroacetic Acid	EPA 552.2	<0.001 mg/L	04/13/2020	
4 Hour Demand 0.45 mg/L	SM 5710 B	*	04/01/2020	
7 Day Chlorine Residual 5.10 mg/L from 5.14 mg/L dose.	SM 5710 B	*	04/01/2020	

Comment:

Reviewed by: 



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Jan 23 2024

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Attention: Kevin Letchworth

Date of Report: Apr 22, 2020**Customer PO #:****Customer ID:** 14070007**Report #:** 2020-05299**Project ID:** Terramor Well #2

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
20-13096	Site: Tap	3/31/2020 9:05 AM	DW	Client
Test	Method	Results	Date Analyzed	
Uranium	EPA 200.8	71.7 pCi/L	04/02/2020	

Comment:

Reviewed by: 



Environmental Chemists, Inc.

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Jan 23 2024

BACTERIOLOGICAL ANALYSIS

Note: ALL applicable information must be supplied for compliance credit

Water System ID #:

Terramor Well #2

County:

System Type:

Water Source:

Distribution - Total Coliform Rule (TCR)

Sample Type: NW Poole-Terramor Well #2

Facility ID:

Location Code: TapSample Point: SpecialLocation: TapCollected by: ClientDATE: 3/31/2020TIME: 9:05:00 AM

Mail Results to (water system representative):

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Phone Number: 919-266-9223

Fax Number:

Responsible Person's Name

Customer Number

Kevin Letchworth

14070007

Complete for Repeat, Triggered, or Additional / Confirmation Samples:

Previous Positive Laboratory ID Number: _____

" Positive Laboratory Log Number: _____

" Positive Location Code: _____

" Positive Collection Date: _____

Disinfectant Used:

Total Chlorine Residual mg/L

Free Chlorine Residual: mg/L

LABORATORY ID #: 37729

☐ Repeat Samples Required from Client☐ Resample Required from Client

CONTAM CODE	CONTAMINANT	METHOD CODE	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED
3100	Total Coliform	SM 9223B	Present	03/31/2020 16:00	4/1/2020 11:05
3014	E. Coli	SM 9223B	Absent	03/31/2020 16:00	4/1/2020 11:05

Comment:

Reviewed by: Alie Sh



EMSL Analytical, Inc.

2500 Gateway Centre Blvd., Suite 600 Morrisville, NC 27560

Phone/Fax: (919) 465-3900 / (919) 465-3950

<http://www.EMSL.com> / raleighlab@emsl.com

EMSL Order ID: 292003890
 Customer ID: ENCH66
 Customer PO:
 Project ID:

Attn: Jay Baker
 Environmental Chemists
 6602 Windmill Way
 Wilmington, NC 28405

Phone: (910) 392-0223
 Fax: (910) 392-4424
 Received: 04/08/2020
 Analyzed: 04/15/2020

Proj: NW Poole - Terramore #2, 20-05299/13096

Test Report: Determination of Asbestos Structures >10µm in Drinking Water
Performed by the 100.2 Method (EPA 600/R-94/134)

Sample ID Client / EMSL	Sample Filtration Date/Time	Original Sample Vol. Filtered (ml)	Effective Filter Area (mm²)	Area Analyzed (mm²)	ASBESTOS				
					Asbestos Types	Fibers Detected	Analytical Sensitivity	Concentration	Confidence Limits
					MFL (million fibers per liter)				
NW Poole 292003890-0001	4/8/2020 06:06 PM	100	1263	0.0780	None Detected	ND	0.16	<0.16	0.00 - 0.60
Collection Date/Time: 03/31/2020 09:05 AM									

Collection Date/Time: 03/31/2020 09:05 AM

Analyst(s)

Kelly Gallisdorfer (1)

Billy Barnes, Asbestos Lab Manager
 or Other Approved Signatory

Any questions please contact Billy Barnes.

Initial report from: 04/15/2020 13:09:08

Sample collection and containers provided by the client, acceptable bottle blank level is defined as ≤0.01MFL > 10µm. ND=None Detected. This report may not be reproduced, except in full, without written permission by EMSL Analytical, Inc. The test results contained within this report meet the requirements of NELAC unless otherwise noted. This report relates only to the samples reported above. Samples received in good condition unless otherwise noted.

Samples analyzed by EMSL Analytical, Inc. Morrisville, NC

envirochem

Analytical & Consulting Chemists

ENVIRONMENTAL CHEMISTS, INC

NCDENR: DWQ CERTIFICATION # 94 NCDHHS: DLS CERTIFICATION # 37729

6602 Windmill Way Wilmington, NC 28405

OFFICE: 910-392-0223 FAX 910-392-4424

info@environmentalchemists.com

COLLECTION AND CHAIN OF CUSTODY

Client: NW Poole	PROJECT NAME: <u>TERRAMOR WELL #2</u>	REPORT NO: <u>20-5299</u>
ADDRESS:	CONTACT NAME: Kevin Letchworth	PO NO:
	REPORT TO:	PHONE/FAX:
	COPY TO:	email:

Sampled By: B. Diet

SAMPLE TYPE: I = Influent, E = Effluent, W = Well, ST = Stream, SO = Soil, SL = Sludge, Other:

Sample Identification	Collection			Sample Type	Composite or Grab	Container (P or G)	Chlorine mg/L	LAB ID NUMBER	PRESERVATION								ANALYSIS REQUESTED
	Date	Time	Temp						NONE	HCL	H2SO4	HNO3	NAOH	THIO	OTHER		
New Well	3-31-20	9:05			C	P		13-96	X	X	X	X	X	X	X	VOC,SOC,New Well IOC	
					G	G											
					C	P										Asbestos, Rads (5 compounds)	
					G	G					X				X		
					C	P										Total Coliform, THM/HAAFP	
					G	G			X				X				
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											

Transfer	Relinquished By:	Date/Time	Received By:	Date/Time
1.			<u>JCS</u>	
2.				

Temperature when Received: 22Accepted: [Signature]

Rejected:

Resample Requested:

Delivered By: [Signature]Received By: [Signature]Date: 3/31/20Time: 2:00 p

Comments:

TURNAROUND:

OFFICIAL COPY
Jan 23 2024



Florida Radiochemistry Services, Inc.
5456 Hoffner Ave., Suite 201 Orlando, FL 32812
Phone: (407) 382-7733 Fax: (407) 382-7744

RADIOLOGICAL ANALYSIS

Note: All information must be supplied for compliance credit.

WATER SYSTEM ID #: N/A County: N/A

Name of Water System: N.W. POOLE (TERRAMOR #4)

Sample Type: ☐ Distribution ☒ Entry Point ☐ Composite ☐ Special/Non-compliance

Mail Results to (system representative):

ENVIRONMENTAL

6602 WINDMILL WAY

WILMINGTON NC 28405

Phone 910-392-0323

Fax _____

Collection Data					
Period	Date (mm/dd/yyyy)	Time (Specify AM or PM)	FACILITY /SAMPLE Code	Sample Location	Collected By
Single or 1st Qtr	11/3/20	9:10	WELL #4	N/A	CLIENT
2nd Qtr					
3rd Qtr					
4th Qtr					

LABORATORY ID #: 12709

☐ SAMPLE UNSATISFACTORY ☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (RRL)	NOT DETECTED (i.e. < RRL)	QUANTIFIED RESULTS* (pCi/gal)	UNIT CONVERSION	ALLOWABLE LIMIT
4000	X Gross Alpha	435	3 pCi/L	X		0.9	15 pCi/L
4004	Radon	—	100 pCi/L				N/A
4008	Uranium	455	2 pCi/L				20.1 pCi/L
4010	X Combined Radium	N/A	N/A	N/A	< 1.0	0.5	5 pCi/L
4020	X Radium 226	445	1 pCi/L	X		0.3	3 pCi/L
4030	X Radium 228	452	1 pCi/L	X		0.4	2 pCi/L
4100	X Gross Beta	435	4 pCi/L	X		1.5	50 pCi/L

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State within 48 hours.

	DATE:	TIME:
ANALYSES BEGUN:	10/15/20	8:45 AM
ANALYSES COMPLETED:	10/20/20	12:35 PM

Laboratory Log #: 2010083.01

Certified By: [Signature]

COMMENTS: 90-17508/44756

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Jan 23 2024



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ANALYTICAL & CONSULTING CHEMISTS

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Jan 23 2024

VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Water System ID #: Terramore Homes Well #5

County:

Name of Water System: NW Poole Well and PumpSample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin LetchworthMail Results to (water system representative)Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell NC 27591

Attn:

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2030	p-Isopropyltoluene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2210	Chloromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2212	Dichlorodifluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2214	Bromomethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2216	Chloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2218	Trichlorofluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2246	Hexachlorobutadiene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2248	Naphthalene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2378	1,2,4-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34 0.07
2380	Cis-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34 0.07
2408	Dibromomethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2410	1,1-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2412	1,3-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2413	1,3-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2414	1,2,3-Trichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2416	2,2-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2418	1,2,4-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2420	1,2,3-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2422	n-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2424	1,3,5-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2426	tert-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2428	sec-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2430	Bromochloromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34

LABORATORY LOG 20-39540

REPORT #: 2020-15531



Environmental Chemists, Inc.⁸⁶

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ANALYTICAL & CONSULTING CHEMISTS

info@environmentalchemists.com

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Jan 23 2024

VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Water System ID #: Terramore Homes Well #5

County:

Name of Water System: NW Poole Well and PumpSample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin LetchworthMail Results to (water system representative)Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell NC 27591

Attn:

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

2941	Chloroform	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2942	Bromoform	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2943	Bromodichloromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2944	Chlorodibromomethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2955	Xylenes(total)	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	10
2964	Dichloromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2965	o-Chlorotoluene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2966	p-Chlorotoluene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2967	m-Dichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2968	o-Dichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.6
2969	p-Dichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.075
2976	Vinyl chloride	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.002
2977	1,1-Dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.007
2978	1,1-Dichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2979	Trans-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.1
2980	1,2-Dichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2981	1,1,1-Trichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.2
2982	Carbon tetrachloride	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2983	1,2-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2984	Trichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2985	1,1,2-Trichloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2986	1,1,1,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2987	Tetrachloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2988	1,1,2,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2989	Chlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.1
2990	Benzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005

LABORATORY LOG 20-39540

REPORT #: 2020-15531



Environmental Chemists, Inc.

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710 Bowsertown Road, Manteo, NC 27954 • 252.473.5702 Lab/Fax
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ANALYTICAL & CONSULTING CHEMISTS

info@environmentalchemists.com

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Jan 23 2024

VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Water System ID #: Terramore Homes Well #5

County:

Name of Water System: NW Poole Well and Pump

Sample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/2020

6:15:00 AM

Collected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell NC 27591

Attn:

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY

☐ RESAMPLE REQUIRED

2991	Toluene	EPA 524.2	0.0005	0.0017 mg/L	09/18/2020	22:46	9/25/2020	8:34	1
2992	Ethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.7
2993	Bromobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2994	Isopropylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	
2996	Styrene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	0.1
2998	n-Propylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020	22:46	9/25/2020	8:34	

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours

Comment:

Reviewed by: Bonnie A



Florida Radiochemistry Services, Inc.

5456 Hoffer Ave., Suite 201 Orlando, FL 32812

Phone: (407) 382-7733 Fax: (407) 382-7744

RADIOLOGICAL ANALYSIS

Note: All information must be supplied for compliance credit.

WATER SYSTEM ID #: _____

County: _____

Name of Water System: N.W. POOLE - NEW WELL

Sample Type: ☐ Distribution

☒ Entry Point

☐ Composite

☒ Special/Non-compliance

Mail Results to (system representative):

ENVIROCHEM

6602 WINDMILL WAY

WILMINGTON NC 28405

Phone 910.392.0223

Fax _____

Collection Data					
Period	Date (MM/DD/YYYY)	Time (Specify AM or PM)	FACILITY /SAMPLE Code	Sample Location	Collected By
Single or 1st Qtr	9/11/20	6:15	N/A	N/A	LEITCHWORTH
2nd Qtr					
3rd Qtr					
4th Qtr					

LABORATORY ID #: 12709

☐ SAMPLE UNSATISFACTORY

☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (RRL)	NOT DETECTED (i.e. < RRL)	QUANTIFIED UNTIL RESULTS* (pCi/L)	ALLOWABLE LIMIT
4000	* Gross Alpha	435	3 pCi/L		20.7 2.6	15 pCi/L
4004	Radon	—	100 pCi/L			N/A
4006	Uranium	456	2 pCi/L			20.1 pCi/L
4010	* Combined Radium	N/A	N/A	N/A	41.0 0.6	5 pCi/L
4020	* Radium 226	448	1 pCi/L	X	0.3	3 pCi/L
4030	* Radium 228	452	1 pCi/L	X	0.5	2 pCi/L
4100	* Gross Beta	435	4 pCi/L		8.9 1.5	50 pCi/L

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State within 48 hours.

	DATE:	TIME:
ANALYSES BEGUN:	09-18-20	08:45 AM
ANALYSES COMPLETED:	09-25-20	11:42 AM

Laboratory Log #: 2009098.02

Certified By: [Signature]

COMMENTS: 20-15531 / 39540



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Jan 23 2024

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Attention:

Date of Report: Sep 28, 2020**Customer PO #:****Customer ID:** 14070007**Report #:** 2020-15531**Project ID:** Terramore Homes Well #5

Lab ID	Sample ID: Special	Collect Date/Time	Matrix	Sampled by
20-39540	Site: Well 5	9/11/2020 6:15 AM	DW	Kevin Letchworth
Test	Method	Results	Date Analyzed	
Uranium	EPA 200.8	18.3 pCi/L	09/14/2020	

Comment:

Reviewed by: Sammy Duran



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BACTERIOLOGICAL ANALYSIS

Note: ALL applicable information must be supplied for compliance credit

Water System ID #:

Terramore Homes Well #5

County:

System Type:

Water Source:

Distribution - Total Coliform Rule (TCR)

Sample Type: Special

Facility ID:

Location Code: Well 5Sample Point: Special

Location:

Collected by: Kevin LetchworthDATE: 9/11/2020TIME: 6:15:00 AM

Mail Results to (water system representative):

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Phone Number: 919-266-9223

Fax Number:

Complete for Repeat, Triggered, or Additional / Confirmation Samples:

Previous Positive Laboratory ID Number: _____

" Positive Laboratory Log Number: _____

" Positive Location Code: _____

" Positive Collection Date: _____

Disinfectant Used:

Responsible Person's Name

Customer Number

Total Chlorine Residual

mg/L

14070007

Free Chlorine Residual:

mg/L

LABORATORY ID #: 37729

☒ Repeat Samples Required from Client☒ Resample Required from Client

CONTAM CODE	CONTAMINANT	METHOD CODE	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED
3100	Total Coliform	SM 9223B	Absent	09/11/2020 16:00	9/12/2020 10:30
3014	E. Coli	SM 9223B	Absent	09/11/2020 16:00	9/12/2020 10:30

Comment:

Reviewed by:



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NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Attention:

Date of Report: Oct 02, 2020**Customer PO #:****Report #:** 2020-15531**Report to:****Project ID:** Terramore Homes Well #5

TTHM - HAA5 FORMATION POTENTIAL

Lab ID	Sample ID: Special	Collect Date/Time	Matrix	Sampled by
20-39540	Site: Well 5	9/11/2020 6:15 AM	DW	Kevin Letchworth
Test	Method	Results	Date Analyzed	
Bromodichloromethane	EPA 524.2	<0.001 mg/L	09/25/2020	
Bromoform	EPA 524.2	<0.001 mg/L	09/25/2020	
Chloroform	EPA 524.2	<0.001 mg/L	09/25/2020	
Dibromochloromethane	EPA 524.2	<0.001 mg/L	09/25/2020	
TTHMFP	EPA 524.2	<0.001 mg/L	09/25/2020	
Dibromoacetic Acid	EPA 552.2	<0.001 mg/L	09/22/2020	
Dichloroacetic Acid	EPA 552.2	<0.001 mg/L	09/22/2020	
Monobromoacetic Acid (MBAA)	EPA 552.2	<0.001 mg/L	09/22/2020	
Monochloroacetic Acid	EPA 552.2	<0.002 mg/L	09/22/2020	
THAFP	EPA 552.2	<0.002 mg/L	09/22/2020	
Trichloroacetic Acid	EPA 552.2	<0.001 mg/L	09/22/2020	
4 Hour Demand <0.1mg/L	SM 5710 B	*	09/14/2020	
7 Day Chlorine Residual 0.70mg/L from 5mg/L dose.	SM 5710 B	*	09/14/2020	

Comment:

Reviewed by:



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Jan 23 2024

NEW WELL INORGANIC CHEMICAL ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email

Wendell

NC

27591

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
0100	Turbidity	SM 2130 B	0.1	2.4 NTU	09/11/2020 15:26	9/15/2020 13:57	
1005	Arsenic	EPA 200.8	0.005	<0.005 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.01
1010	Barium	EPA 200.8	0.4	<0.400 mg/L	09/14/2020 13:34	9/15/2020 8:20	2
1015	Cadmium	EPA 200.8	0.001	<0.001 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.005
1016	Calcium	EPA 200.7	1	12.2 mg/L	09/16/2020 12:02	9/17/2020 15:10	
1017	Chloride	SM 4500 Cl B	5	6 mg/L	09/14/2020 11:00	9/15/2020 8:40	250
1020	Chromium	EPA 200.8	0.02	<0.020 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.1
1022	Copper	EPA 200.8	0.05	<0.050 mg/L	09/14/2020 13:34	9/15/2020 8:20	1.3
1024	Cyanide	EPA 335.4	0.05	<0.05 mg/L	09/21/2020 16:56	9/22/2020 16:40	0.2
1025	Fluoride	SM 4500 F C	0.1	0.3 mg/L	09/14/2020 08:45	9/15/2020 8:16	4
1028	Iron	EPA 200.7	0.06	<0.060 mg/L	09/16/2020 12:02	9/17/2020 15:10	0.3
1030	Lead	EPA 200.8	0.003	<0.003 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.015
1031	Magnesium	EPA 200.7	1	7.06 mg/L	09/16/2020 12:02	9/17/2020 15:10	
1032	Manganese	EPA 200.8	0.01	<0.010 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.05
1035	Mercury	EPA 245.1	0.0004	<0.0004 mg/L	09/17/2020 13:27	9/18/2020 13:01	0.002
1036	Nickel	EPA 200.8	0.1	<0.100 mg/L	09/14/2020 13:34	9/15/2020 8:20	
1040	Nitrate Nitrogen	EPA 353.2	1	<1.0 mg/L	09/11/2020 16:01	9/22/2020 7:39	10
1041	Nitrite Nitrogen	EPA 353.2	0.1	<0.10 mg/L	09/11/2020 16:01	9/15/2020 8:22	1
1045	Selenium	EPA 200.8	0.01	<0.010 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.05

LABORATORY LOG 20-39540

REPORT #: 2020-15531



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Jan 23 2024

NEW WELL INORGANIC CHEMICAL ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email

Wendell

NC

27591

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
1050	Silver	EPA 200.8	0.05	<0.05 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.1
1052	Sodium	EPA 200.7	1	11.9 mg/L	09/16/2020 12:02	9/17/2020 15:10	
1055	Sulfate (NW)	EPA 300.0	5	<5 mg/L	09/14/2020 12:16	9/15/2020 15:17	250
1068	Acidity	SM 2310 B	1	15 mg/L	09/16/2020 14:00	9/17/2020 12:51	
1074	Antimony	EPA 200.8	0.003	<0.003 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.006
1075	Beryllium	EPA 200.8	0.002	<0.002 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.004
1085	Thallium	EPA 200.8	0.001	<0.001 mg/L	09/14/2020 13:34	9/15/2020 8:20	0.002
1905	Color PtCo	SM 2120B (PtCo)	5	<5 units	09/11/2020 14:15	9/15/2020 7:55	15
1915	Total Hardness	SM 2340 C	1	58 mg/L	09/17/2020 10:30	9/17/2020 14:26	
1925	pH	SM 4500 H B		6.8 units	09/14/2020 12:10	9/15/2020 8:38	
1927	Alkalinity	SM 2320B	1	80 mg/L	09/18/2020 10:00	9/23/2020 8:52	
1930	Total Dissolved Solids (TDS)	SM 2540 C		127 mg/L	09/11/2020 14:00	9/14/2020 13:40	500

Note: Except for Iron, Manganese and Sulfate, if result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours.

Comment:

Reviewed by:



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Jan 23 2024

NEW WELL - PESTICIDES AND SYNTHETIC ORGANIC CHEMICALS (SOC) ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email

Wendell NC 27591

Attn:

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2005	Endrin	EPA 508.1	0.00001	< 0.00001 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.002
2010	Lindane	EPA 508.1	0.00002	< 0.00002 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.0002
2015	Methoxychlor	EPA 508.1	0.0001	< 0.0001 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.04
2020	Toxaphene	EPA 508.1	0.001	< 0.001 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.003
2031	Dalapon	EPA 515.4	0.001	< 0.001 mg/L	09/16/2020 14:00	10/2/2020 9:20	0.2
2035	Di(2-ethylhexyl)adipate	EPA 525.2	0.0006	< 0.0006 mg/L	09/24/2020 08:00	10/8/2020 9:20	0.4
2036	Oxamyl(vydate)	EPA 531.1	0.002	< 0.002 mg/L	09/23/2020 10:49	10/8/2020 8:22	0.2
2037	Simazine	EPA 525.2	0.00007	< 0.00007 mg/L	09/24/2020 08:00	10/8/2020 9:20	0.004
2039	Di(2-ethylhexyl)phthalate	EPA 525.2	0.00132	< 0.00132 mg/L	09/24/2020 08:00	10/8/2020 9:20	0.006
2040	Picloram	EPA 515.4	0.0001	< 0.0001 mg/L	09/16/2020 14:00	10/2/2020 9:20	0.5
2041	Dinoseb	EPA 515.4	0.0002	< 0.0002 mg/L	09/16/2020 14:00	10/2/2020 9:20	0.007
2042	Hexachlorocyclopentadiene	EPA 525.2	0.0001	< 0.0001 mg/L	09/24/2020 08:00	10/8/2020 9:20	0.05
2046	Carbofuran	EPA 531.1	0.0009	< 0.0009 mg/L	09/23/2020 10:49	10/8/2020 8:22	0.04
2050	Atrazine	EPA 508.1	0.0001	< 0.0001 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.003
2051	Alachlor	EPA 508.1	0.0002	< 0.0002 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.002
2065	Heptachlor	EPA 525.2	0.00004	< 0.00004 mg/L	09/24/2020 08:00	10/8/2020 9:20	0.0004
2067	Heptachlor epoxide	EPA 508.1	0.00002	< 0.00002 mg/L	09/17/2020 08:00	9/28/2020 13:17	0.0002

LABORATORY LOG 20-39540

REPORT #: 2020-15531



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Jan 23 2024

NEW WELL - PESTICIDES AND SYNTHETIC ORGANIC CHEMICALS (SOC) ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell NC 27591

Attn:

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

2105	2,4-D	EPA 515.4	0.0001	<0.0001	mg/L	09/16/2020	14:00	10/2/2020	9:20	0.07
2110	2,4,5-TP (Silvex)	EPA 515.4	0.0002	<0.0002	mg/L	09/16/2020	14:00	10/2/2020	9:20	0.05
2274	Hexachlorobenzene	EPA 525.2	0.0001	<0.0001	mg/L	09/24/2020	08:00	10/8/2020	9:20	0.001
2306	Benzo(a)pyrene	EPA 525.2	0.00002	<0.00002	mg/L	09/24/2020	08:00	10/8/2020	9:20	0.0002
2326	Pentachlorophenol	EPA 515.4	0.00004	<0.00004	mg/L	09/16/2020	14:00	10/2/2020	9:20	0.001
2383	(PCB) Total Polychlorinated Biphen	EPA 508.1	0.0001	<0.0001	mg/L	09/17/2020	08:00	9/28/2020	13:17	0.0005
2931	1,2-Dibromo-3-chloropropane (DB	EPA 504.1	0.00002	<0.00002	mg/L	09/16/2020	14:00	9/28/2020	13:18	0.0002
2946	Ethylene Dibromide (EDB)	EPA 504.1	0.00001	<0.00001	mg/L	09/16/2020	14:00	9/28/2020	13:18	0.00005
2959	Chlordane	EPA 508.1	0.0002	<0.0002	mg/L	09/17/2020	08:00	9/28/2020	13:17	0.002

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours

Comment:

Reviewed by: Sammy Duan



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20205:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2030	p-Isopropyltoluene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2210	Chloromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2212	Dichlorodifluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2214	Bromomethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2216	Chloroethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2218	Trichlorofluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2246	Hexachlorobutadiene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2248	Naphthalene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2378	1,2,4-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34 0.07
2380	Cis-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34 0.07
2408	Dibromomethane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2410	1,1-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2412	1,3-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2413	1,3-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2414	1,2,3-Trichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2416	2,2-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2418	1,2,4-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2420	1,2,3-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2422	n-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2424	1,3,5-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34
2426	tert-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	09/18/2020 22:46	9/25/2020	8:34



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email

Wendell

NC

27591

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

2428	sec-Butylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2430	Bromochloromethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2941	Chloroform	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2942	Bromoform	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2943	Bromodichloromethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2944	Chlorodibromomethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2955	Xylenes(total)	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	10
2964	Dichloromethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2965	o-Chlorotoluene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2966	p-Chlorotoluene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2967	m-Dichlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2968	o-Dichlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.6
2969	p-Dichlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.075
2976	Vinyl chloride	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.002
2977	1,1-Dichloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.007
2978	1,1-Dichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2979	Trans-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.1
2980	1,2-Dichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2981	1,1,1-Trichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.2
2982	Carbon tetrachloride	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2983	1,2-Dichloropropane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2984	Trichloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2985	1,1,2-Trichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramore Homes Well #5

County:

Sample Type: Well 5

Location Where Collected:

Facility ID:

Sample Point: Special

Collection Date:

Collection Time:

9/11/20206:15:00 AMCollected by: Kevin Letchworth

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☒ SAMPLE UNSATISFACTORY☒ RESAMPLE REQUIRED

2986	1,1,1,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2987	Tetrachloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2988	1,1,2,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2989	Chlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.1
2990	Benzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.005
2991	Toluene	EPA 524.2	0.0005	0.0017	mg/L	09/18/2020	22:46	9/25/2020	8:34	1
2992	Ethylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.7
2993	Bromobenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2994	Isopropylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	
2996	Styrene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	0.1
2998	n-Propylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	09/18/2020	22:46	9/25/2020	8:34	

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours

Comment:

Reviewed by:

envirochem

Analytical & Consulting Chemists

ENVIRONMENTAL CHEMISTS, INC

NCDENR: DWQ CERTIFICATION # 94 NCDHHS: DLS CERTIFICATION # 37729

6602 Windmill Way Wilmington, NC 28405

OFFICE: 910-392-0223 FAX 910-392-4424

info@environmentalchemists.com

COLLECTION AND CHAIN OF CUSTODY

Client: NW Poole	PROJECT NAME: <i>Terramore Homes Well #5</i>	REPORT NO: <i>20-15531</i>
ADDRESS:	CONTACT NAME: Kevin Letchworth	PO NO:
	REPORT TO:	PHONE/FAX:
	COPY TO:	email:

Sampled By: _____

SAMPLE TYPE: I = Influent, E = Effluent, W = Well, ST = Stream, SO = Soil, SL = Sludge, Other: _____

Sample Identification	Collection			Sample Type	Composite or Grab	Container (P or G)	Chlorine mg/L	LAB ID NUMBER	PRESERVATION								ANALYSIS REQUESTED
	Date	Time	Temp						NONE	HCL	H2SO4	HNO3	NaOH	THIO	OTHER		
Terramore Homes #5 New Well	Sept 11 2020	6:15 AM		W	C	P		39540x		X	X	X	X	X	X	VOC,SOC,New Well IOC	
"					G	G									X	Asbestos, Rads (5 compounds)	
"					C	P											
					G	G			X						X	Total Coliform, THM/HAAFP	
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											

Transfer	Relinquished By:	Date/Time	Received By:	Date/Time
1.				
2.				

Temperature when Received: _____

Accepted: _____

Rejected: _____

Resample Requested: _____

Delivered By: *CC*Received By: *[Signature]*Date: *9-11-20*Time: *1330*

Comments: _____

TURNAROUND: _____

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Jan 23 2024

NORTH CAROLINA DEPARTMENT OF NATURAL RESOURCES
AND COMMUNITY DEVELOPMENT
ENVIRONMENTAL MANAGEMENT COMMISSION
GROUNDWATER SECTION
P.O. Box 27687 - Raleigh, NC 27611

 WELL #2

PUMPING TEST RECORD

Test Conducted By: N.W. Poole Well & Pump Co.

Well Construction Permit No.:

1. WELL LOCATION: Nearest Town: Youngsville County: Franklin
3466 NC Hwy 98 Quadrangle No.: _____
(Road No., Community, or Subdivision and Lot No.)
2. OWNER: Terramor Homes 7208 Falls of Neuse Road, Suite 201, Raleigh, NC 27615
(Name) (Address)
3. USE OF WELL: () Domestic (X) Public () Industrial () Irrigation () _____
(Other)
4. WELL DEPTH: 605' Casing Diameter: 6 1/4" Casing Type: Galv.
5. DRILLING CONTRACTOR: N.W. Poole Well Co. Was casing grouted: Yes
6. STATIC WATER LEVEL: 33.7 **below** top of casing
7. WELL YIELD: 91 gpm Specific Capacity: .411 gpm/ft.-dd
8. PUMPING WATER LEVEL: 255.1
9. CHLORINATION: Type: HTH Amount: 1 lb.
10. TIME AND DATE: PUMP STARTED: 3/30/20 9:30 a.m. PUMP STOPPED: 3/31/20 9:30 a.m.
11. WATER LEVEL MEASURING DEVICE: Eno FLOW MEASURING DEVICE: Meter
12. TEST PUMP: Type: 150 gpm Make: Grundfos Horsepower: 20

Beginning Meter Reading: 1,824,040

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
9:30	33.7	170	
9:35	69.2	160	
9:40	109.8	147	
9:45	128.1	143	
9:50	137.3	140	
9:55	146.1	138	
10:00	152.5	135	

Pump Test – Record (continued)

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
10:05	158.1	130	
10:10	162.1	130	
10:15	165.1	130	
10:20	168.2	130	
10:25	170.7	128	
10:30	172.7	127	
10:40	174.5	125	
10:50	176.6	125	
11:00	188.2	125	
11:10	189.7	125	
11:20	189.9	122	
11:30	190.2	120	
11:45	192.5	120	
12:00	195.0	120	
12:15	198.0	118	
12:30	200.4	118	
1:00	205.0	110	
1:30	205.3	115	
2:30	216.6	110	
3:30	223.5	108	
4:30	228.7	105	
5:30	233.4	103	Throttled to 91 gpm
6:30	236.6	101	

Pump Test – Record (continued)

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
7:30	255.2	91	
8:30	255.1	91	
9:30	255.1	91	End Meter Reading: 1,967,609

Pumping Test - Recovery

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
9:35	201.6		
9:40	170.7		
9:45	147.8		
9:50	133.5		
9:55	124.6		
10:00	119.6		
10:05	116.0		
10:10	114.5		
10:15	113.7		
10:20	112.1		
10:25	110.9		
10:30	109.8		
10:40	108.2		
10:50	105.8		
11:00	104.4		
11:10	102.7		
11:20	101.0		
11:30	99.3		

NORTH CAROLINA DEPARTMENT OF NATURAL RESOURCES
AND COMMUNITY DEVELOPMENT
ENVIRONMENTAL MANAGEMENT COMMISSION
GROUNDWATER SECTION
P.O. Box 27687 - Raleigh, NC 27611

WELL #4

PUMPING TEST RECORD

Test Conducted By: N.W. Poole Well & Pump Co.

Well Construction Permit No.:

1. WELL LOCATION: Nearest Town: Youngsville County: Franklin
3476 NC Hwy 98 Quadrangle No.: _____
(Road No., Community, or Subdivision and Lot No.)
2. OWNER: Terramor Homes 7208 Falls of Neuse Road, Suite 201, Raleigh, NC 27615
(Name) (Address)
3. USE OF WELL: () Domestic (X) Public () Industrial () Irrigation () _____
(Other)
4. WELL DEPTH: 805' Casing Diameter: 6 1/4" Casing Type: Galv.
5. DRILLING CONTRACTOR: N.W. Poole Well Co. Was casing grouted: Yes
6. STATIC WATER LEVEL: 14.5 **below** top of casing
7. WELL YIELD: 25 gpm Specific Capacity: .141 gpm/ft.-dd
8. PUMPING WATER LEVEL: 191.8
9. CHLORINATION: Type: HTH Amount: 2 lbs.
10. TIME AND DATE: PUMP STARTED: 10/12/20 9:30 a.m. PUMP STOPPED: 10/13/20 9:30 a.m.
11. WATER LEVEL MEASURING DEVICE: Eno FLOW MEASURING DEVICE: 2" Meter
12. TEST PUMP: Type: 85 gpm Make: Monarch Horsepower: 7 1/2

Beginning Meter Reading: 2,250,200

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
9:30	14.5	100	
9:35	109.2	92	
9:40	175.6	74	
9:45	221.4	60	Throttled back
9:50	208.1	26	
9:55	205.7	26.5	
10:00	202.1	26.5	

Pump Test – Record (continued)

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
10:05	200.9	27	
10:10	195.5	27	
10:15	191.4	27	
10:20	190.8	27	
10:25	190.1	27	
10:30	189.6	27	
10:40	188.3	27	
10:50	187.4	26	
11:00	186.9	26	
11:10	185.5	26	Opened up slightly
11:20	189.5	26	
11:30	191.2	26	
11:45	191.8	25	Throttled slightly
12:00	192.1	25	
12:15	192.7	25	
12:30	192.9	25	
1:00	192.1	25	
1:30	192.9	25	
2:30	191.8	25	
3:30	192.1	25	
4:30	191.9	25	
5:30	191.8	25	
6:30	191.8	25	

Pump Test – Record (continued)

W-1300, Sub 97

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Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
7:30	191.8	25	
8:30	191.8	25	
9:30	191.8	25	
10:30	191.8	25	
11:30	191.8	25	
12:30	191.8	25	
1:30	191.8	25	
2:30	191.8	25	
3:30	191.8	25	
4:30	191.8	25	
5:30	191.8	25	
6:30	191.8	25	
7:30	191.8	25	
8:30	191.8	25	
9:30	191.8	25	End Meter Reading: 2,285,451

Pumping Test - Recovery

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
9:35	162.3		
9:40	130.7		
9:45	105.5		
9:50	89.6		
9:55	68.3		
10:00	54.1		
10:05	42.6		
10:10	33.8		
10:15	25.3		

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Jan 23 2024



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 255-A Wilmington Highway, Jacksonville, NC 28540 • 910.347.5843 Lab/Fax

ANALYTICAL & CONSULTING CHEMISTS

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Jan 23 2024

NEW WELL INORGANIC CHEMICAL ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location: Tap

Facility ID:

Sample Point:

Collected by:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
	Nitrate+Nitrite-Nitrogen	EPA 353.2	1	< 1.00 mg/L	10/13/2020 19:41	10/15/2020 8:02	10
0100	Turbidity	SM 2130 B	0.1	1.5 NTU	10/13/2020 16:31	10/14/2020 15:27	
1005	Arsenic	EPA 200.8	0.005	<0.005 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.01
1010	Barium	EPA 200.8	0.4	<0.400 mg/L	10/14/2020 10:36	10/14/2020 14:32	2
1015	Cadmium	EPA 200.8	0.001	<0.001 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.005
1016	Calcium	EPA 200.7	1	12.1 mg/L	10/16/2020 09:45	10/20/2020 6:00	
1017	Chloride	SM 4500 Cl B	5	<5 mg/L	10/23/2020 11:00	10/26/2020 15:18	250
1020	Chromium	EPA 200.8	0.02	<0.020 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.1
1022	Copper	EPA 200.8	0.05	<0.050 mg/L	10/14/2020 10:36	10/14/2020 14:32	1.3
1024	Cyanide	EPA 335.4	0.05	<0.050 mg/L	10/20/2020 14:21	10/22/2020 7:42	0.2
1025	Fluoride	SM 4500 F C	0.1	0.3 mg/L	10/16/2020 07:45	10/16/2020 14:43	4
1028	Iron	EPA 200.7	0.06	<0.060 mg/L	10/16/2020 09:45	10/20/2020 6:00	0.3
1030	Lead	EPA 200.8	0.003	<0.003 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.015
1031	Magnesium	EPA 200.7	1	7.12 mg/L	10/16/2020 09:45	10/20/2020 6:00	
1032	Manganese	EPA 200.8	0.01	<0.010 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.05
1035	Mercury	EPA 245.1	0.0004	<0.0004 mg/L	10/28/2020 18:58	10/29/2020 9:50	0.002
1036	Nickel	EPA 200.8	0.1	<0.100 mg/L	10/14/2020 10:36	10/14/2020 14:32	
1040	Nitrate Nitrogen	EPA 353.2	1	<1.0 mg/L	10/13/2020 16:14	10/31/2020 12:50	10
1041	Nitrite Nitrogen	EPA 353.2	0.1	< 0.10 mg/L	10/13/2020 16:14	10/14/2020 15:30	1



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ANALYTICAL & CONSULTING CHEMISTS

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Jan 23 2024

NEW WELL INORGANIC CHEMICAL ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location: Tap

Facility ID:

Sample Point:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Collected by:

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
1045	Selenium	EPA 200.8	0.01	<0.010 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.05
1050	Silver	EPA 200.8	0.05	<0.05 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.1
1052	Sodium	EPA 200.7	1	16.3 mg/L	10/16/2020 09:45	10/20/2020 6:00	
1055	Sulfate (NW)	EPA 300.0	5	<5 mg/L	10/20/2020 13:18	10/23/2020 11:40	250
1068	Acidity	SM 2310 B	1	8 mg/L	11/02/2020 10:30	11/3/2020 14:27	
1074	Antimony	EPA 200.8	0.003	<0.003 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.006
1075	Beryllium	EPA 200.8	0.002	<0.002 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.004
1085	Thallium	EPA 200.8	0.001	<0.001 mg/L	10/14/2020 10:36	10/14/2020 14:32	0.002
1905	Color PtCo	SM 2120B (PtCo)	5	<5 units	10/14/2020 16:06	10/21/2020 6:04	15
1915	Total Hardness	SM 2340 C	1	92 mg/L	10/13/2020 13:00	10/14/2020 16:08	
1925	pH	SM 4500 H B		7.9 units	10/23/2020 12:00	10/26/2020 13:46	
1927	Alkalinity	SM 2320B	1	100 mg/L	10/21/2020 10:00	10/22/2020 14:31	
1930	Total Dissolved Solids (TDS)	SM 2540 C		147 mg/L	10/14/2020 12:30	10/16/2020 10:02	500

Note: Except for Iron, Manganese and Sulfate, if result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours.

Comment:

Reviewed by: *Ken Put*



Environmental Chemists, Inc.

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Jan 23 2024

NEW WELL - PESTICIDES AND SYNTHETIC ORGANIC CHEMICALS (SOC) ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Collected by:

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

Attn:

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2005	Endrin	EPA 508.1	0.00001	< 0.00001 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.002
2010	Lindane	EPA 508.1	0.00002	< 0.00002 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.0002
2015	Methoxychlor	EPA 508.1	0.0001	< 0.0001 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.04
2020	Toxaphene	EPA 508.1	0.001	< 0.001 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.003
2031	Dalapon	EPA 515.4	0.001	< 0.001 mg/L	10/20/2020 14:30	10/30/2020 14:30	9:49 0.2
2035	Di(2-ethylhexyl)adipate	EPA 525.2	0.0006	< 0.0006 mg/L	10/19/2020 08:30	10/30/2020 08:30	9:53 0.4
2036	Oxamyl(vydate)	EPA 531.1	0.002	< 0.002 mg/L	10/16/2020 10:55	10/20/2020 10:55	9:51 0.2
2037	Simazine	EPA 525.2	0.00007	< 0.00007 mg/L	10/19/2020 08:30	10/30/2020 08:30	9:53 0.004
2039	Di(2-ethylhexyl)phthalate	EPA 525.2	0.00132	< 0.00132 mg/L	10/19/2020 08:30	10/30/2020 08:30	9:53 0.006
2040	Picloram	EPA 515.4	0.0001	< 0.0001 mg/L	10/20/2020 14:30	10/30/2020 14:30	9:49 0.5
2041	Dinoseb	EPA 515.4	0.0002	< 0.0002 mg/L	10/20/2020 14:30	10/30/2020 14:30	9:49 0.007
2042	Hexachlorocyclopentadiene	EPA 525.2	0.0001	< 0.0001 mg/L	10/19/2020 08:30	10/30/2020 08:30	9:53 0.05
2046	Carbofuran	EPA 531.1	0.0009	< 0.0009 mg/L	10/16/2020 10:55	10/20/2020 10:55	9:51 0.04
2050	Atrazine	EPA 508.1	0.0001	< 0.0001 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.003
2051	Alachlor	EPA 508.1	0.0002	< 0.0002 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.002
2065	Heptachlor	EPA 525.2	0.00004	< 0.00004 mg/L	10/19/2020 08:30	10/30/2020 08:30	9:53 0.0004
2067	Heptachlor epoxide	EPA 508.1	0.00002	< 0.00002 mg/L	10/14/2020 08:00	10/20/2020 08:00	9:52 0.0002



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Jan 23 2024

NEW WELL - PESTICIDES AND SYNTHETIC ORGANIC CHEMICALS (SOC) ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Collected by:

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email

Wendell NC 27591

Attn:

LABORATORY ID #: 37729		<input type="checkbox"/> SAMPLE UNSATISFACTORY			<input type="checkbox"/> RESAMPLE REQUIRED					
2105	2,4-D	EPA 515.4	0.0001	<0.0001 mg/L	10/20/2020	14:30	10/30/2020	9:49	0.07	
2110	2,4,5-TP (Silvex)	EPA 515.4	0.0002	<0.0002 mg/L	10/20/2020	14:30	10/30/2020	9:49	0.05	
2274	Hexachlorobenzene	EPA 525.2	0.0001	<0.0001 mg/L	10/19/2020	08:30	10/30/2020	9:53	0.001	
2306	Benzo(a)pyrene	EPA 525.2	0.00002	<0.00002 mg/L	10/19/2020	08:30	10/30/2020	9:53	0.0002	
2326	Pentachlorophenol	EPA 515.4	0.00004	<0.00004 mg/L	10/20/2020	14:30	10/30/2020	9:49	0.001	
2383	(PCB) Total Polychlorinated Biphen	EPA 508.1	0.0001	<0.0001 mg/L	10/14/2020	08:00	10/20/2020	9:52	0.0005	
2931	1,2-Dibromo-3-chloropropane (DB	EPA 504.1	0.00002	<0.00002 mg/L	10/20/2020	10:15	10/30/2020	9:52	0.0002	
2946	Ethylene Dibromide (EDB)	EPA 504.1	0.00001	<0.00001 mg/L	10/20/2020	10:15	10/30/2020	9:52	0.00005	
2959	Chlordane	EPA 508.1	0.0002	<0.0002 mg/L	10/14/2020	08:00	10/20/2020	9:52	0.002	

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours

Comment:

Reviewed by: 



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Collected by:

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729

☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT	QUANTIFIED RESULTS	ANALYSES BEGUN	ANALYSES COMPLETED	ALLOWABLE LIMITS
2030	p-Isopropyltoluene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2210	Chloromethane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2212	Dichlorodifluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2214	Bromomethane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2216	Chloroethane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2218	Trichlorofluoromethane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2246	Hexachlorobutadiene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2248	Naphthalene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2378	1,2,4-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38 0.07
2380	Cis-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38 0.07
2408	Dibromomethane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2410	1,1-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2412	1,3-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2413	1,3-Dichloropropene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2414	1,2,3-Trichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2416	2,2-Dichloropropane	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2418	1,2,4-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2420	1,2,3-Trichlorobenzene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2422	n-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2424	1,3,5-Trimethylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38
2426	tert-Butylbenzene	EPA 524.2	0.0005	<0.0005 mg/L	10/15/2020 04:48	10/20/2020	13:38



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Collected by:

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729			<input type="checkbox"/> SAMPLE UNSATISFACTORY		<input type="checkbox"/> RESAMPLE REQUIRED					
2428	sec-Butylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2430	Bromochloromethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2941	Chloroform	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2942	Bromoform	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2943	Bromodichloromethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2944	Chlorodibromomethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2955	Xylenes(total)	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	10
2964	Dichloromethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.005
2965	o-Chlorotoluene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2966	p-Chlorotoluene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2967	m-Dichlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2968	o-Dichlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.6
2969	p-Dichlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.075
2976	Vinyl chloride	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.002
2977	1,1-Dichloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.007
2978	1,1-Dichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	
2979	Trans-1,2-dichloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.1
2980	1,2-Dichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.005
2981	1,1,1-Trichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.2
2982	Carbon tetrachloride	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.005
2983	1,2-Dichloropropane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.005
2984	Trichloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.005
2985	1,1,2-Trichloroethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38	0.005



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Jan 23 2024

NEW WELL - VOLATILE ORGANIC CHEMICALS (VOCs) ANALYSIS

Name of System: Terramor Well #4

County:

Sample Type:

Location Where Collected: Tap

Facility ID:

Sample Point:

Collection Date:

Collection Time:

10/13/20209:10:00 AM

Collected by:

Mail Results to (water system representative)

Phone Number: 919-266-9223

NW Poole Well and Pump

Fax Number:

Post Office box 1958

Responsible Person's email:

Wendell

NC

27591

LABORATORY ID #: 37729			<input type="checkbox"/> SAMPLE UNSATISFACTORY			<input type="checkbox"/> RESAMPLE REQUIRED			
2986	1,1,1,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38
2987	Tetrachloroethylene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38 0.005
2988	1,1,2,2-Tetrachloroethane	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38
2989	Chlorobenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38 0.1
2990	Benzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38 0.005
2991	Toluene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38 1
2992	Ethylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38 0.7
2993	Bromobenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38
2994	Isopropylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38
2996	Styrene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38 0.1
2998	n-Propylbenzene	EPA 524.2	0.0005	<0.0005	mg/L	10/15/2020	04:48	10/20/2020	13:38

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the within 48 hours.

Comment:

Reviewed by: 



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Jan 23 2024

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Attention:

Date of Report: Nov 03, 2020

Customer PO #:

Report #: 2020-17508

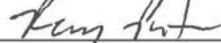
Report to:

Project ID: Terramor Well #4

TTHM - HAA5 FORMATION POTENTIAL

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
20-44756	Site: Well #4	10/13/2020 9:10 AM	DW	
Test	Method	Results	Date Analyzed	
Bromodichloromethane	EPA 524.2	< 0.001 mg/L	10/24/2020	
Bromoform	EPA 524.2	< 0.001 mg/L	10/24/2020	
Chloroform	EPA 524.2	< 0.001 mg/L	10/24/2020	
Dibromochloromethane	EPA 524.2	< 0.001 mg/L	10/24/2020	
TTHMFP	EPA 524.2	<0.001 mg/L	10/24/2020	
Dibromoacetic Acid	EPA 552.2	<0.001 mg/L	10/27/2020	
Dichloroacetic Acid	EPA 552.2	<0.001 mg/L	10/27/2020	
Monobromoacetic Acid (MBAA)	EPA 552.2	<0.001 mg/L	10/27/2020	
Monochloroacetic Acid	EPA 552.2	<0.002 mg/L	10/27/2020	
THAFP	EPA 552.2	<0.002 mg/L	10/27/2020	
Trichloroacetic Acid	EPA 552.2	<0.001 mg/L	10/27/2020	
4 Hour Demand 4.47 mg/L	SM 5710 B	*	10/16/2020	
7 Day Chlorine Residual <0.1 mg/L from 5 mg/L dose.	SM 5710 B	*	10/16/2020	

Comment:

Reviewed by: 



Environmental Chemists, Inc.

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Jan 23 2024

BACTERIOLOGICAL ANALYSIS

Note: ALL applicable information must be supplied for compliance credit

Water System ID #:

Terramor Well #4

County:

System Type:

Water Source:

Distribution - Total Coliform Rule (TCR)

SampleType:

Facility ID:

Location Code: Well #4

Sample Point:

Location: Tap

Collected by:

DATE: 10/13/2020TIME: 9:10:00 AM

Mail Results to (water system representative):

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Phone Number: 919-266-9223

Fax Number:

Complete for Repeat, Triggered, or Additional / Confirmation Samples:

Previous Positive Laboratory ID Number: _____

" Positive Laboratory Log Number: _____

" Positive Location Code: _____

" Positive Collection Date: _____

Disinfectant Used:

Responsible Person's NameCustomer Number

14070007

Total Chlorine Residual

mg/L

Free Chlorine Residual:

mg/L

LABORATORY ID #: 37729

☐ Repeat Samples Required from Client☐ Resample Required from Client

<u>CONTAM CODE</u>	<u>CONTAMINANT</u>	<u>METHOD CODE</u>	<u>QUANTIFIED RESULTS</u>	<u>ANALYSES BEGUN</u>	<u>ANALYSES COMPLETED</u>
3100	Total Coliform	SM 9223B	Absent	10/13/2020 16:00	10/14/2020 11:15
3014	E. Coli	SM 9223B	Absent	10/13/2020 16:00	10/14/2020 11:15

Comment:

Reviewed by:



Environmental Chemists, Inc.

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ANALYTICAL & CONSULTING CHEMISTS

NW Poole Well and Pump

Post Office box 1958

Wendell NC 27591

Attention:

Date of Report: Nov 03, 2020

Customer PO #:

Customer ID: 14070007

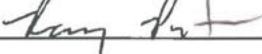
Report #: 2020-17508

Project ID: Terramor Well #4

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
20-44756	Site: Well #4	10/13/2020 9:10 AM	DW	

Test	Method	Results	Date Analyzed
Uranium	EPA 200.8	1.11 pCi/L	10/14/2020

Comment:

Reviewed by: 

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Jan 23 2024



Florida Radiochemistry Services, Inc.

5456 Hoffner Ave., Suite 201 Orlando, FL 32812

Phone: (407) 382-7733 Fax: (407) 382-7744

RADIOLOGICAL ANALYSIS

Note: All information must be supplied for compliance credit.

WATER SYSTEM ID #: N/ACounty: N/AName of Water System: N.W. POOLE (TERRAMOR #4)Sample Type: ☐ Distribution ☒ Entry Point ☐ Composite ☐ Special/Non-compliance

Mail Results to (system representative):

ENVIRO CHEM6602 WINDMILL WAY
WILMINGTON NC 28405Phone 910.392.0223

Fax _____

Collection Data					
Period	Date (MM/DD/YY)	Time (Specify AM or PM)	FACILITY /SAMPLE Code	Sample Location	Collected By
Single or 1st Qtr	10/13/20	9:10	WELL #4	N/A	CLIENT
2nd Qtr					
3rd Qtr					
4th Qtr					

LABORATORY ID #: 12709☐ SAMPLE UNSATISFACTORY☐ RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (RRL)	NOT DETECTED (i.e. < RRL)	QUANTIFIED RESULTS* (pCi/L)	UNITS CERRO	ALLOWABLE LIMIT
4000	<input checked="" type="checkbox"/> Gross Alpha	435	3 pCi/L	<input checked="" type="checkbox"/>		0.9	15 pCi/L
4004	Radon	---	100 pCi/L				N/A
4008	Uranium	458	2 pCi/L				20.1 pCi/L
4010	<input checked="" type="checkbox"/> Combined Radium	N/A	N/A	N/A	< 1.0	0.5	5 pCi/L
4020	<input checked="" type="checkbox"/> Radium 226	448	1 pCi/L	<input checked="" type="checkbox"/>		0.3	3 pCi/L
4030	<input checked="" type="checkbox"/> Radium 228	452	1 pCi/L	<input checked="" type="checkbox"/>		0.4	2 pCi/L
4100	<input checked="" type="checkbox"/> Gross Beta	435	4 pCi/L	<input checked="" type="checkbox"/>		1.5	50 pCi/L

Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State within 48 hours.

	DATE:	TIME:
ANALYSES BEGUN:	10/15/20	8:45 AM
ANALYSES COMPLETED:	10/20/20	12:35 PM

Laboratory Log #: 2010088.01Certified By: [Signature]COMMENTS: 90-17508/44756

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Jan 23 2024

EMSL Analytical, Inc.

2500 Gateway Centre Blvd. Suite 600
Morrisville, NC 27560
919/465-3900

ASBESTOS ANALYSIS - Distribution System

Note: All information must be supplied for compliance credit.

Water System Number: NA**County: NA****Name of Water System: N.W. Poole - Well #4****Sample Type:** ☐ Distribution (Compliance) ☒ Non-compliance**Location Code:** **Tap Location:** **Street Address:** **City:**Check (✓) if sample site is owned or controlled by water system. ☐Check (✓) if sample site is a daycare or a K-12 school. ☐**Facility ID No. (Distribution):** D 0 1**Sample Point:** ASB**Collected By:** Client

(Please Print)

Collection Date

10/13/2020

(MM/DD/YYYY)

Collection Time

09:10 AM

(Specify AM or PM)

Mail Results to (water system representative):

Environmental Chemists Inc.

PO Box 1037

Wrightsville Beach, NC 28480

Phone #: (910) 392-0223**Fax #:** (910) 895-6826**Responsible Person's email:****Laboratory ID #:** 3 7 7 9 2

Contam Code	Contaminant	Method Code	Required Reporting Limit (R.R.L.)	Analysis Started	Analysis Ended	Not Detected (I.e. < R.R.L.)	Quantified Results 1, 2	Allowable Limit
1094	ASBESTOS	100.2	0.2 MFL	10/15/2020 4:04 PM	10/29/2020 11:00AM	<input checked="" type="checkbox"/>	MFL	7 MFL

Notes: ¹ MFL = Million Fibers per Liter > 10 µm.² If result exceeds the allowable limit, the laboratory must report the analytical results to the State within 48 hours.**Laboratory Log #:** 292010822**Certified By:** Billy Barnes


(Print and sign name)

COMMENTS: 20-17508/44756

envirochem

Analytical & Consulting Chemists

ENVIRONMENTAL CHEMISTS, INC

NCDENR: DWQ CERTIFICATION # 94 NCDHHS: DLS CERTIFICATION # 37729

COLLECTION AND CHAIN OF CUSTODY

Client: NW Poole	PROJECT NAME: <u>TERRAMOR HOMES</u>	REPORT NO: <u>20-17508</u>
ADDRESS:	CONTACT NAME: Kevin Letchworth	PO NO:
	REPORT TO:	PHONE/FAX:
	COPY TO:	email:

Sampled By: _____

SAMPLE TYPE: I = Influent, E = Effluent, W = Well, ST = Stream, SO = Soil, SL = Sludge, Other: _____

Sample Identification	Collection			Sample Type	Composite or Grab	Container (P or G)	Chlorine mg/L	LAB ID NUMBER	PRESERVATION								ANALYSIS REQUESTED
	Date	Time	Temp						NONE	HCL	H2SO4	HNO3	NAOH	THIO	OTHER		
New Well	10-13-20	9:10			C	P		44756	X	X	X	X	X	X	X	VOC,SOC,New Well IOC	
					G	G											
					C	P										Asbestos, Rads (5 compounds)	
					G	G					X				X		
					C	P										Total Coliform, THM/HAAFP	
					G	G			X					X			
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											
					C	P											
					G	G											

Transfer	Relinquished By:	Date/Time	Received By:	Date/Time
1.				
2.				

Temperature when Received: _____ Accepted: _____ Rejected: _____ Resample Requested: _____
 Delivered By: LONDON PHILLIPS Received By: [Signature] Date: 10/13/20 Time: 3:00
 Comments: _____ TURNAROUND: _____

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Jan 23 2024

NORTH CAROLINA DEPARTMENT OF NATURAL RESOURCES
AND COMMUNITY DEVELOPMENT
ENVIRONMENTAL MANAGEMENT COMMISSION
GROUNDWATER SECTION
P.O. Box 27687 - Raleigh, NC 27611

PUMPING TEST RECORD

Test Conducted By: N.W. Poole Well & Pump Co.

Well Construction Permit No.:

1. WELL LOCATION: Nearest Town: Youngsville County: Franklin
3476 NC Hwy 98, Youngsville NC 27596 Quandrangle No.:
(Road No., Community, or Subdivision and Lot No.)
2. OWNER: Terramor Homes 7208 Falls of Neuse Road, Suite 201, Raleigh NC 27615
(Name) (Address)
3. USE OF WELL: () Domestic (✓) Public () Industrial () Irrigation () _____
(Other)
4. WELL DEPTH: 805' Casing Diameter: 6 1/4" Casing Type: Galv.
5. DRILLING CONTRACTOR: N.W. Poole Well Co. Was casing grouted: Yes
6. STATIC WATER LEVEL: 21.4 below/above top of casing
7. WELL YIELD: 34 gpm Specific Capacity: .113 gpm/ft.-dd
8. PUMPING WATER LEVEL: 325.6
9. CHLORINATION: Type: HTH Amount: 2 lbs.
10. TIME AND DATE: PUMP STARTED: 9/10/2020 7:00am PUMP STOPPED: 9/11/2020 7:00am
11. WATER LEVEL MEASURING DEVICE: Eno FLOW MEASURING DEVICE: 2" Hersey Meter
12. TEST PUMP: Type: 85 gpm Submersible Make: Monarch Horsepower: 7 1/2 HP

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
7:00 AM	25.31	98	Test Started at 7:00 AM on 9/10/2020 Beginning Meter: 2,198,788
7:05	72.81	83	
7:10	140.94	76	
7:15	161.34	70	
7:20	183.18	66	

Pumping Test - Record

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
7:25 a.m.	189.72	64	
7:30	198.89	60	
7:35	203.19	59	
7:40	209.61	56	
7:45	216.12	55	
7:50	221.86	54	
7:55	224.76	53	
8:00	229.28	52	
8:10	234.76	51	
8:20	235.90	50	
8:30	240.14	50	
8:40	249.12	49	
8:50	258.37	48	
9:00	263.34	47	
9:15	278.14	46	
9:30	289.51	43	
9:45	295.21	42	
10:00	297.65	41	
10:30	301.98	40	
11:00	305.71	39	
12:00 p.m.	310.84	37	
1:00	315.62	36	

Pumping Test – Record

Time	Water Level (feet)	Pumping Rate (gpm)	Remarks
2:00 p.m.	316.41	36	
3:00	317.23	36	
4:00	318.18	36	
5:00	318.81	36	
6:00	319.19	36	
7:00	319.84	35	
8:00	320.35	34	
9:00	321.89	34	
10:00	322.14	34	
11:00	322.21	34	
12:00 a.m.	322.24	34	
1:00	324.92	34	
2:00	325.61	34	
3:00	325.61	34	
4:00	325.61	34	
5:00	325.61	34	
6:00	325.61	34	
7:00	325.61	34	End Meter: 2,250,998

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Jan 23 2024

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Jan 23 2024

[illegible]

**State of North Carolina
Department of Environmental Quality**

W-1300, Sub 97

Applicant Certification Form

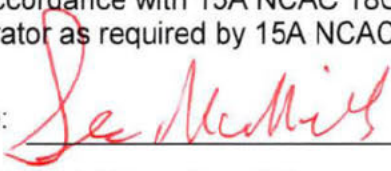
In accordance with 15A NCAC 18C .0303 (c), a signed applicant certification must be submitted to the Department, stating that the Operation and Maintenance (O&M) Plan and the Emergency Management Plan requirements have been satisfied and that the system will have a certified operator as required by Section .1300. No construction, alteration, or expansion of a community or non-transient, non-community public water system shall be placed into final service or made available for human consumption until the applicant has submitted the certification and has received Final Approval from the Department.

Certification must be provided by the following individual or their duly authorized representative:

1. For a corporation, limited liability company, home owner association or non-profit organization: *a president, vice president, secretary, or treasurer.*
2. For a partnership or sole proprietorship: *by a general partner or the proprietor.*
3. For a municipality, State, Federal or other agency: *by either a principal executive officer or ranking elected official.*

By the signature below I certify, under penalty of law:

1. The following actions have been completed for the construction, alteration, or expansion of the water system, as defined in the project documents:
 - I, or personnel under my direct supervision, have completed an O&M Plan and an Emergency Management Plan in accordance with 15A NCAC 18C .0307(d) and (e). Based on my evaluation of the plans, or my inquiry of the person or persons directly responsible for preparing the O&M Plan and Emergency Management Plan, the information contained in the plans is, to the best of my knowledge and belief, true, accurate, and complete.
2. The following actions will be completed before the construction, alteration, or expansion of the water system, as defined in the project documents, is placed into final service or made available for human consumption:
 - In accordance with 15A NCAC 18C .0307(d), the O&M Plan will be made accessible to the operator on duty at all times and available to the Department upon request.
 - In accordance with 15A NCAC 18C .0307(e), the Emergency Management Plan will be made accessible to the system operator on duty at all times and available to the Department upon request.
 - In accordance with 15A NCAC 18C .0303(c), the system will have a certified operator as required by 15A NCAC 18 C. 1300.

Signature: 

Name(Print): Sean McMillan

Title: Chief Operating Officer

Date: 2/21/2023

Project Name: Baker S/D WSD

System Name: Baker S/D

Serial No: 21-00697

Water Sys. ID: NC4035028

**Prepared By (without title examination): Keith A. Satsky, Attorney; Satsky & Silverstein, LLP
415 Hillsborough Street, Suite 201, Raleigh, NC 27603**

Mail to: Grantee

STATE OF NORTH CAROLINA
COUNTY OF FRANKLIN

PERMANENT WELL
& ACCESS EASEMENTS

PIN: Out of 1881-73-3163
Excise Tax: None

THIS EASEMENT made and entered into this 6th day of January 2023, by and between **D.R. Horton, Inc.**, a Delaware corporation, whose mailing address is 2000 Aerial Center Parkway, Suite 110, Morrisville, NC 27560 ("Grantor") and **Old North State Water Company, Inc.**, a North Carolina corporation with its principal office and place of business at 3212 6th Avenue South, Suite 200, Birmingham, AL 35222 ("Grantee").

The designation of the Grantor and the Grantee as used herein shall include said parties, their successors and assigns, and shall include the singular and plural as required and the masculine, feminine and neuter gender as appropriate.

W I T N E S S E T H:

WHEREAS, Grantor is the owner of that certain parcel of land located in Franklin County, North Carolina being more particularly described in Deed Book 2290, Page 74, Franklin County Registry (the "Grantor Property"); and

WHEREAS, it is the desire of Grantor and Grantee that Grantor convey to Grantee, its successors and assigns, by this Easement, a perpetual easement for three well lots for the installation, construction, operation, maintenance,

repair and replacement of a water production and treatment facility to furnish water utility service to the Baker Subdivision, located in Harris Township, City of Youngsville, Franklin County, North Carolina, and also a perpetual 20' wide access and utility easement to the well lots from a public road, which easement shall also be for the installation, construction, operation, maintenance, repair and replacement of a water main and all appurtenant equipment.

Well Lot Easement

NOW THEREFORE, the Grantor for valuable consideration paid by the Grantee, the receipt and sufficiency of which are hereby acknowledged, has and by these presents does grant, bargain, sell, and convey unto Grantee, its successors and assigns, a perpetual easement of ingress, egress, regress and access for the construction, reconstruction, inspection, operation, maintenance, and repair of three wells, three well houses, and all related water production, treatment and storage equipment including the right to interconnect these wells with other wells owned by Grantee. This perpetual easement is also a protective non-contamination easement for the protection of the water wells located on this easement serving the community water system at Baker Subdivision.

This well protective easement prohibits Grantor, Grantor's successors and assigns or any other person or entity from placing within the non-contamination easement or allowing to run within the non-contamination easement any pesticide, herbicide, insecticide or any other contaminant which may violate of the Safe Drinking Water Act, the rules and regulations for community water systems established by the North Carolina Division of Environmental Health, or any other regulatory body. This non-contamination easement also specifically prohibits Grantor and all other persons from parking or locating on the non-contamination easement area any vehicles, equipment, boats or any other type equipment which may contain chemicals, fuels or fluids that may be a source of contamination to the community wells. Grantee, its successors and assigns shall have the right to remove any source of contamination immediately and/or require the person or entity introducing the source of contamination to remove the contamination and the sources of contamination and also require such person or entity to pay all expenses associated with the removal.

In connection to the foregoing, Grantor does hereby grant unto the Grantee, its successors and assigns, the right to grade, ditch, or otherwise change the contour of the land within the easement if the same becomes necessary in order to protect the existing well from sources of pollution.

The perpetual well easement area granted to Grantee by Grantor (together the "Well Lots") is located in Harris Township, City of Youngsville, Franklin County, North Carolina, and is described as follows:

Being all of those certain well lots, each with a 100' radius, shown as "WELL #3" (and "WELL EASEMENT"), "WELL #4" (and "WELL EASEMENT"), and "WELL #5" (and "WELL EASEMENT"), on that Easement Exhibit dated December 21, 2022 and attached hereto as Exhibit A (the "Easement Exhibit").

Well Lot Access, Water Main and Utility Easement

Grantor, for valuable consideration paid by the Grantee, the receipt and sufficiency of which are hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto Grantee a perpetual easement of ingress, regress, egress and access to the Well Lots from the public road known as U.S. Highway 98 and also a perpetual easement for the installation, maintenance, repair, operation, inspection and replacement of a water main and all appurtenant equipment, including, but not limited to, electric utility lines, which easement is located in Harris Township, City of Youngsville, Franklin County, North Carolina and more particularly described as follows:

Being that area shown on and described in the Easement Exhibit as "20' WELL ACCESS EASEMENT"

To have and to hold the aforesaid perpetual easements unto the Grantee, its successors and assigns, and all privileges and appurtenances, thereunto belonging to the Grantee. The Grantor hereby, for itself, its successors and assigns, hereby warrants and covenants that it is the owner of the Grantor Property, that it has the right to grant such easements and will warrant and defend title to the same against lawful claims of all persons whomsoever.

Signature on the Following Page

IN WITNESS WHEREOF, Grantor has caused this instrument to be executed by officers authorized to execute easements on behalf of Grantor, on the day and year first above written.

D.R. Horton, Inc.,
A Delaware corporation

By: Cameron Jones (SEAL)

Name: CAMERON JONES

Title: VP OF CONSTRUCTION

STATE OF North Carolina

COUNTY OF Wake

I, the undersigned, a Notary Public of the County and State aforesaid, certify that Cameron Jones, personally came before me this day and acknowledged that such person, being authorized to do so, voluntarily executed the foregoing instrument under seal for the purpose stated therein and in the capacity indicated.

Witness my hand and official stamp or seal this 6th day of January, 2023.

Anne B. Oakley
Notary Public Signature

Print Name: Anne B. Oakley

My Commission Expires: Nov. 14, 2026

[AFFIX NOTARY SEAL BELOW-NOTE THAT SEAL MUST BE **FULLY LEGIBLE**]



EXHIBIT A

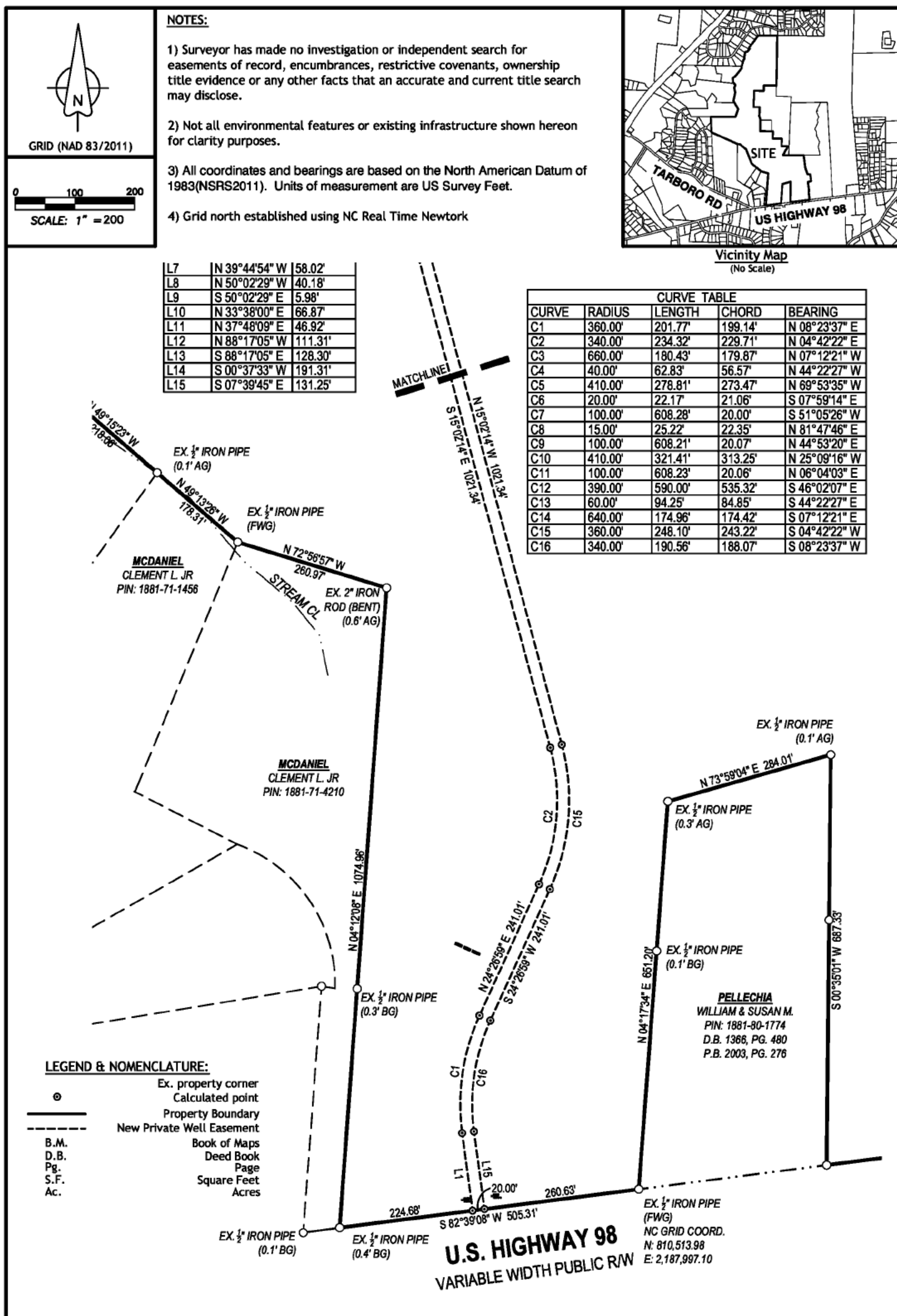
Easement Exhibit

[See Attached Map]

THE ATTACHED MAP MAY NOT BE A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS AND HAS NOT BEEN REVIEWED FOR COMPLIANCE WITH RECORDING REQUIREMENTS FOR PLATS

OFFICIAL COPY

Jan 23 2024



This is not a certified survey and has not been reviewed by a local government agency for compliance with any applicable land development regulations.

TAYLOR
LAND CONSULTANTS, PLLC
License No P-0829
1600 Olive Chapel Rd., Ste 140
Apex, NC 27502
(919) 801-1104

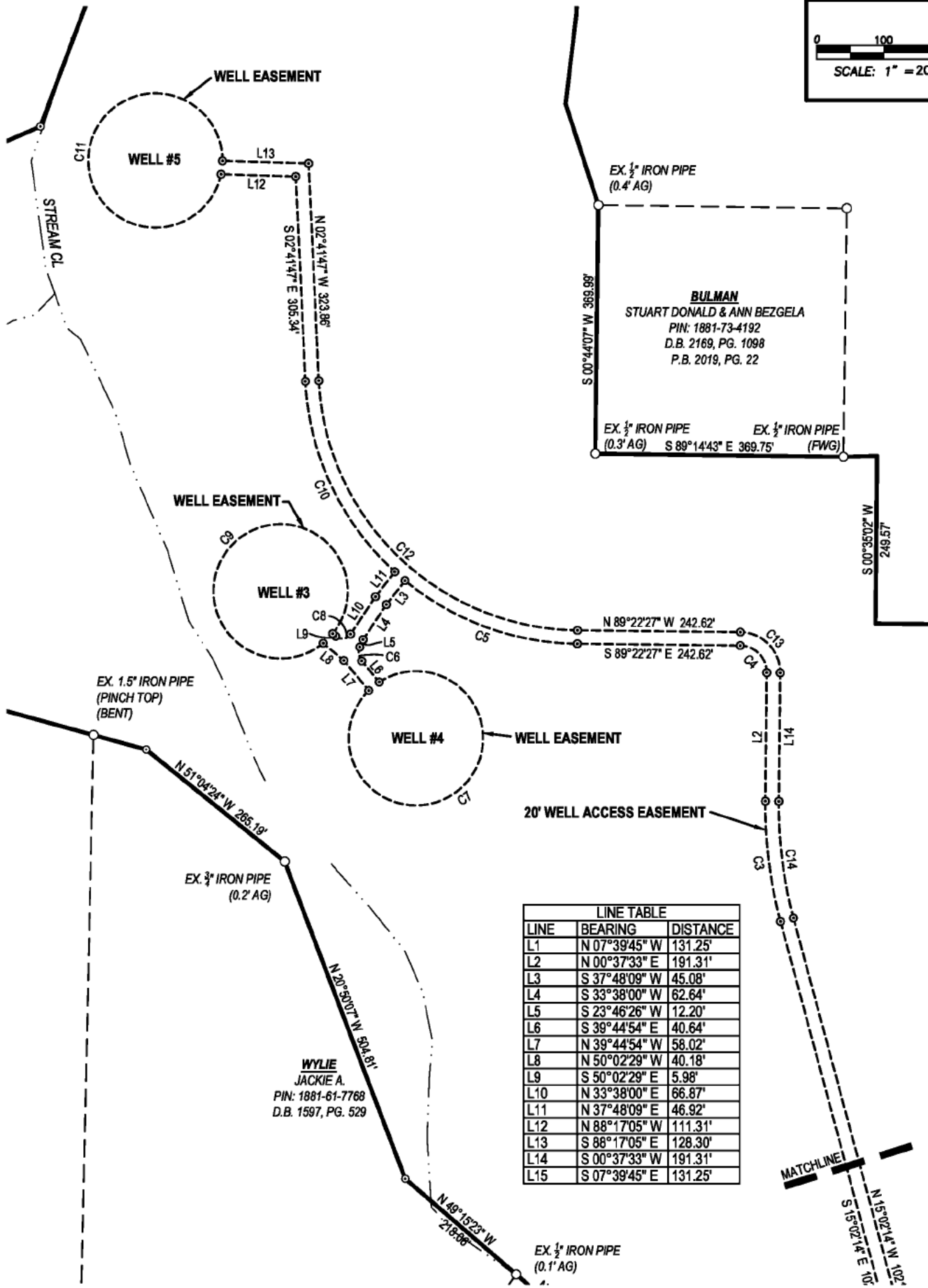
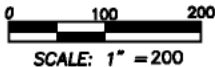


EASEMENT EXHIBIT
SHEET 1 OF 2

Grantor: D.R. HORTON, INC.
Grantee: OLD NORTH STATE WATER COMPANY, LLC
Site Address: N.C. HIGHWAY 98
PIN: 1881-73-3163
Source of Title: D.B. 2290, PG. 74
Plat Ref: P.B. 2021, PG. 353-354
Township: HARRIS
County: FRANKLIN
State: NC
Date: DECEMBER 21, 2022




GRID (NAD 83/2011)

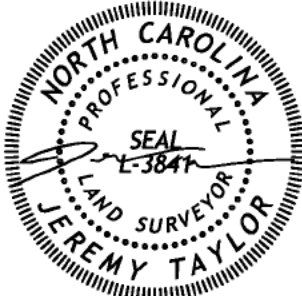


LINE TABLE		
LINE	BEARING	DISTANCE
L1	N 07°39'45" W	131.25'
L2	N 00°37'33" E	191.31'
L3	S 37°48'09" W	45.08'
L4	S 33°38'00" W	62.64'
L5	S 23°46'26" W	12.20'
L6	S 39°44'54" E	40.64'
L7	N 39°44'54" W	58.02'
L8	N 50°02'29" W	40.18'
L9	S 50°02'29" E	5.98'
L10	N 33°38'00" E	66.87'
L11	N 37°48'09" E	46.92'
L12	N 88°17'05" W	111.31'
L13	S 88°17'05" E	128.30'
L14	S 00°37'33" W	191.31'
L15	S 07°39'45" E	131.25'

This is not a certified survey and has not been reviewed by a local government agency for compliance with any applicable land development regulations.



TAYLOR
LAND CONSULTANTS, PLLC
License No P-0829
1600 Olive Chapel Rd., Ste 140
Apex, NC 27502
(919) 801-1104



EASEMENT EXHIBIT
SHEET 2 OF 2

Grantor:
Grantee:
Site Address:
PIN:
Source of Title:
Plat Ref:
Township:
County:
State:
Date:


D.R. HORTON, INC.
OLD NORTH STATE WATER COMPANY, LLC
N.C. HIGHWAY 98
1881-73-3163
D.B. 2290, PG. 74
P.B. 2021, PG. 353-354
HARRIS
FRANKLIN
NC
DECEMBER 21, 2022

Exhibit 3.2STATE OF NORTH CAROLINA
COUNTY OF FRANKLINBILL OF SALE - WATER

KNOW ALL MEN BY THESE PRESENTS that DR HORTON-TERRAMOR, LLC (Seller), in return for valuable consideration received by the Seller from Old North State Water Company, LLC (Buyer), the sufficiency of which is hereby acknowledged, has bargained and sold and does by this instrument bargain, sell, and convey to the Buyer, its successors and assigns, the entire potable distribution system located in Baker Subdivision, Franklin County, North Carolina, including, but not limited to distribution mains, valves, tees, ells, crosses, water main easements within publicly dedicated rights of way, and services, all property conveyed hereby being referred to as the Property.

To have and to hold the Property in fee simple.

IN TESTIMONY WHEREOF, the Seller has hereunto set his hand this the 3rd day of NOVEMBER 2023


Developer

[Notary Page for Bill of Sale –Baker Subdivision Water System]

STATE OF NORTH CAROLINA

COUNTY OF ~~FRANKLIN~~ ^{WAKE}

Cameron Jones

I, the undersigned, a Notary Public of the County and State aforesaid, certify that Cadence, whose identity has been proven by satisfactory evidence, said evidence being:

- ☒ I have personal knowledge of the identity of the principal(s)
☐ I have seen satisfactory evidence of the principal's identity, by a current state or federal identification with the principal's photograph in the form of a _____
☐ A credible witness has sworn to the identity of the principal(s);

personally came before me this day and acknowledged that he, in such capacity and being authorized to do so, voluntarily executed the foregoing on behalf of the corporation for the purpose stated therein and in the capacity indicated.

Witness my hand and official stamp or seal this 3rd day of November 2021.³

Anne B. Oakley
 Notary Public Signature

Print Name: Anne B. Oakley

My Commission Expires: 11/14/2026

[AFFIX NOTARY SEAL BELOW-NOTE THAT SEAL MUST BE **FULLY LEGIBLE**]

