APPENDIX H

AFFIDAVIT OF ON-SITE WASTEWATER EXISTING SYSTEM PURSUANT TO N.C.G.S. §160D-1110(h1)

[This form is only required with a permit application if the permit applicant is applying for exemption as allowed by N.C.G.S. § 160D-1110(h1)]

STATE OF NORTH CAROLINA

COUNTY OF MECKLENBURG

_____ Inspection Department

Address and Parcel Identification of Real Property Where Building is to be Constructed or Altered:

2220 MCMANUS ROAD, MIDLAND, NC 28107

I, MICHAEL JAMES CRANFORD,

(Print Full Name)

owner of the property, do hereby under penalties of perjury affirm that the proposed building construction will meet local and State on-site wastewater system setback requirements pursuant to N.C.G.S. § 130A-335. Additionally, the proposed construction shall not increase the design daily flow or wastewater strength of the existing system and thereby absolves the State, Inspection Department, and Local Health Department of any responsibility or liability regarding the existing wastewater system to the extent allowed by law.

The property owner may, at his or her discretion, consult with an authorized on-site wastewater evaluator certified by the North Carolina On-Site Wastewater Contractors and Inspectors Certification Board or an inspector, as defined in N.C.G.S. § 90A-71(5), to locate the on-site wastewater existing system and verify setbacks requirements prior to executing this affidavit.

_____ 10/21/26

(Signature of Affiant) Date

Sworn to (or affirmed) and Subscribed before me this the 21st day of October, 2026

_____

Signature of Notary Public

Jonathan Claxton

Printed Name of Notary Public

Jonathan Claxton
NOTARY PUBLIC
Mecklenburg County, NC
My Commission Expires April 30, 2030

My Commission Expires: April 30, 2030 (Notary Stamp or Seal)

MECKLENBURG COUNTY
North Carolina
Public Health

Mecklenburg County Public Health

Kimberly Scott, DrPH, MPH
Interim Health Director

File/Permit #: 7366B

B472281

EXISTING SYSTEM APPROVAL

☐ Existing System Approval
- ☑ Site modification (e.g., storage shed) or footprint addition with no DDF or wastewater strength increase
- ☐ Reconnection when the proposed facility is in the same footprint as existing/previous facility

☐ Construction Authorization/Notice of Intent to Construct

[issued for reconnection when the proposed facility is not in the same footprint as existing/previous facility pursuant to Session Law 2023-77, Section 5.(c)]

[certified inspectors are not authorized to approve reconnections outside of footprint pursuant to Session Law 2023-77, Section 5.(c)]

Applicant: Michael Cranford
Mailing Address: ~~222 McManus Rd~~ 2220 McManus Road (MC)
City: Midland
State: NC Zip: 28017
Phone #: 980-428-1220
Email: michael.cranford@icloud.com

Owner: SAME
Mailing Address:
City:
State: Zip:
Phone #:
Email:

Parcel #: 13920114
Property Location/Address: 2220 McManus Rd

Facility Type: ☑ House/Modular ☐ Mobile/Manufactured Home ☐ Business ☐ Other:

Operation Permit/ATO #: n/a Design Daily Flow: GPD
Number of Bedrooms: X 4 (MC) Max # Occupants: 6 Other:
Wastewater Strength: ☑ Domestic ☐ High Strength ☐ Industrial Process Wastewater
Water Supply: ☑ Private well ☐ Public well ☐ Shared well ☐ Municipal Supply ☐ Spring ☐ Other:

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:

☐ BEDROOM ☑ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☑ PORCH ☐ DECK ☐ OTHER

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:

☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

Site plan or plat showing the locations of the existing and proposed facilities, existing wastewater systems and repair areas, existing and proposed water supplies, easements, rights-of-way, encroachments, artificial drainage, and all appurtenances is attached:

☑ Yes ☐ No

IF THE INFORMATION IN THE APPLICATION FOR AN EXISITING SYSTEM AUTHORIZATION (ESA) IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE ESA SHALL BECOME INVALID.

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted the right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible. I understand that if the information in the application is falsified, changed, or the site is altered, then the Existing System Approval shall be invalid.

Property owner's signature (required) — Date: 10/21/26

Applicant's signature (required) — Date: 10/21/26