

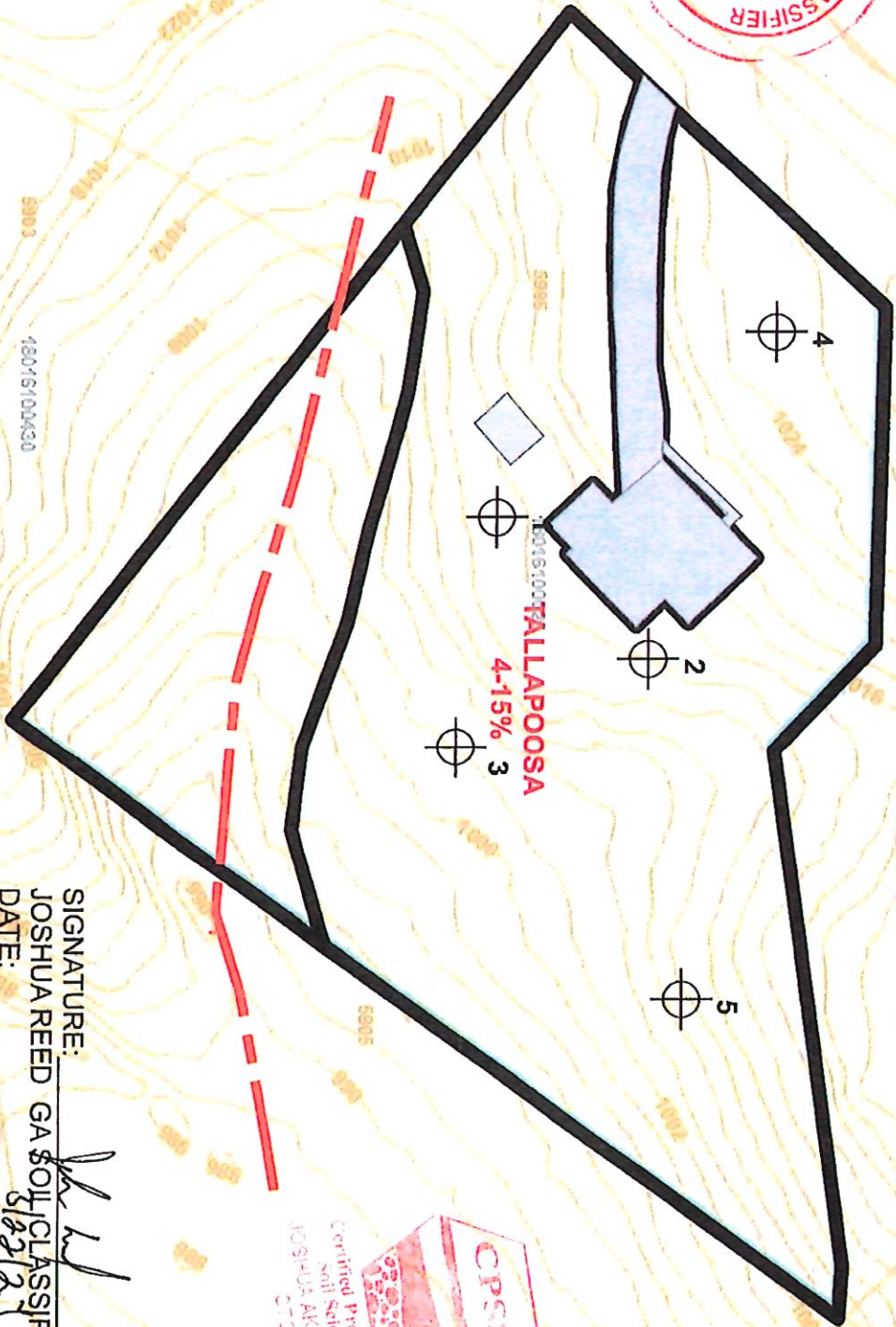


5992 18007200220

18016100010

5904 18016100420

ALLEN RD



18016100010 FALLAPOOSA 4-15% 3

- Legend**
- UrbanFeatures_Countywide_C1121
 - GULLIED_CHANNEL100380
 - soil_data

5995 ALLEN RD
 MABLETON GA 30126
 LL161 DIST 18TH
 COBB COUNTY GEORGIA

1 inch = 50 feet
 Feet
 50 25 0 50 100

SIGNATURE: 
 JOSHUA REED GA SOIL CLASSIFIER 500
 DATE: 5/22/21



ENVIROSOL
 1191 BERRYHILL DR
 LITHONIA, GA 30058



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/25/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Next First Insurance Agency, Inc. PO Box 60787 Palo Alto, CA 94306	CONTACT NAME: PHONE (A/C, No, Ext): (855) 222-5919 E-MAIL: support@nextinsurance.com ADDRESS:	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE	
INSURED ENVIROSOIL, LLC 1191 Berryhill Dr Lithonia, GA 30058	INSURER A: Next Insurance US Company	NAIC # 16285
INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:		

COVERAGES

CERTIFICATE NUMBER: 820722744

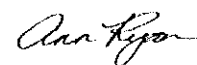
REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER			NXTKSG7FP2-04-GL	04/27/2024	04/27/2025	EACH OCCURRENCE \$1,000,000.00 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000.00 MED EXP (Any one person) \$15,000.00 PERSONAL & ADV INJURY \$1,000,000.00 GENERAL AGGREGATE \$2,000,000.00 PRODUCTS - COMP/OP AGG \$2,000,000.00 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Professional Liability (Errors & Omissions) CLAIMS-MADE			NXT9UDLKNE-04-PL	04/27/2024	04/27/2025	Per Claim Limit: \$1,000,000.00 Aggregate Limit: \$2,000,000.00 Per Claim Deductible: \$2,000.00

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

Proof of insurance.

CERTIFICATE HOLDER ENVIROSOIL, LLC 1191 Berryhill Dr Lithonia, GA 30058	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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EnviroSoil

Soil and Environmental Consultants
 1191 BERRYHILL DRIVE, LITHONIA, GA 30058
 PH: 678-815-8970
 Envirosoilsc@gmail.com



Soil Investigation Report

Report Date: 3/22/2024 Field Investigation Date 3/22/24 Level of Study: III

Site : 5995 ALLEN RD MABLETON GA 30126

Client/Owner/Sponsor: _____ Phone: _____

County: COBB Land lot: 161 District: 18TH Subdivision: _____

Certified by: [Signature] Georgia DPH Certified Soil Classifier #500

SOIL INTERPRETIVE DATA ON-SITE SYSTEM MANAGEMENT

Soil Units	Slope %	Depth to Bedrock (in)	Depth to SHWT* (in)	Adsorption Rate (Min/in) @ Trench Depth	Recommend/ Optimum Trench Depth (in)	Soil Suitability Code
TALLAPOOSA	4-15	72	72	45	24-48	A

- AUGER REFUSAL DEPTH

Soil Notes

The recommendations set forth in this report are based on site/soil conditions at the time of this study & professional judgement of soil scientist/classifier. They are merely professional opinions & imply no guarantee or warranty of performance of any particular system installed.

Soil Suitability Legend

A_ These soils are suitable for installation of on-site systems with proper system design, installation, and maintenance. Position of the site or other soil and landscape considerations may require the drain field area to be greater than the minimum and/or field installation.



Certified Professional Soil Scientist
 JOSHUA AKEEM REED
 37089

General Notes:

All Gutters and Surface water Flow shall/should be directed away from the septic tank(s) and Drain field systems

All Borings are located with Trimble GEOXT Handheld.

The boundary is produced from tax record or client; so the lot size may vary due to GPS locating devices.

