HTE# 12-5= 30119,2 - pool house 11-5-27323 R-pool

#### HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH 307 CORNELIUS HARNETT BOULEVARD LILLINGTON, NC 27546

#### **EXISTING SEPTIC SYSTEM INSPECTION**

NAME Todd White-ton	PHONE # 919-427-8465
ADDRESS 863 NASEABAS RS DUNN N.C.	78534
NAME OF MOBILE HOME PARK OR S/D My Hewood	d Lt. 33
NAME OF OWNER (IF DIFFERENT) Loundes Peredo	<u>.</u>
ADDRESS OF OWNER (IF DIFFERENT) 95 Timber Cue	K W DUNN N.C. 18334
PROPERTY LOCATION: STATE ROAD NAME AND #	. 421
PURPOSE OF INSPECTION: Pool Horse &	×38 -
The aforementioned site has been evaluated by the Harne Environmental Health Section. At the time of inspection, to system serving this site. If this system should malfunction any necessary repairs.	tt County Health Department here appeared to be a septic

#### THIS INSPECTION IS VOID IF:

- (1) the intended use of the septic system should change, and/or
- (2) the system should fail or malfunction, and/or
- (3) the owner or tenant of the property changes, and/or
- (4) after six months

## BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM DO NOT DRIVE OR PARK ON SEPTIC SYSTEM

AUTHORIZATION OF EXISTING SYSTEM	
James & Manharton 2643	12-4-12
Signature of Environmental Health Specialist	Date

Initial Application Date:	A.	10.	11
initial Application Date			

Application #	1.5002	1323
	011#	

Central Permitting

Residential Land Use Application

**COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION** 108 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793

www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" Mailing Address: 95 The LANDOWNER State: NC Zip: 28334 Contact No: 913-489-5456 Email: PA Fre Mailing Address: PO Box 1189 State: NC Zip: 27529 Contact No: 5/9-665-97/3 Email: Ben@ Cap. Lil Pools Com CONTACT NAME APPLYING IN OFFICE: State Road Name \*New structures with Progress Energy as service provider need to supply premise number from Progress Energy. PROPOSED USE: Monolithic \_) # Bedrooms: \_\_\_ # Baths: \_\_\_ Basement(w/wo bath): \_\_\_ Garage: \_\_\_ Deck: \_\_\_ Crawl Space: \_\_\_ Slab: SFD: (Size\_ (Is the bonus room finished? (\_\_) yes (\_\_) no w/ a closet? (\_\_) yes (\_\_) no (if yes add in with # bedrooms) \_) # Bedrooms\_\_\_ # Baths\_\_\_ Basement (w/wo bath)\_\_\_ Garage:\_\_\_ Site Built Deck:\_\_\_ On Frame\_\_ Off Frame (Is the second floor finished? (\_\_\_) yes (\_\_\_) no Any other site built additions? (\_\_\_) yes (\_\_\_) no Manufactured Home: \_\_\_SW \_\_DW \_\_TW (Size\_\_\_\_x\_\_\_) # Bedrooms: \_\_\_ Garage:\_\_\_(site built?\_\_\_) Deck:\_\_\_(site built?\_\_\_) \_\_) No. Buildings:\_ No. Bedrooms Per Unit: a Hours of Operation: Closets in addition? (\_\_\_) yes (\( \subsete \)) no Existing Well \_\_\_\_ New Well # of dwellings using well \_\_\_\_\_) \*Must have operable water before final New Septic Tank (Complete Checklist) \_\_\_\_\_ Existing Septic Tank (Complete Checklist) \_\_\_\_\_ County Sewer Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? (\_\_) yes (\_\_) no Does the property contain any easements whether underground or overhead (\_\_) yes (\_\_) no Structures (existing or proposed): Single family dwellings: Manufactured Homes: Other (specify) MINTING Required Residential Property Line Setbacks: Front Minimum Rear Closest Side Sidestreet/corner lo Nearest Building on same lot

> Page 1 of 2 **APPLICATION CONTINUES ON BACK**

Confid 8/11/1

95 Trabe Cred Lare on left

<sup>\*\*\*</sup>It is the owner/applicants responsibility to provide the county with any applicable information about the subject property, including but not limited to: boundary information, house location, underground or overhead easements, etc. The county or its employees are not responsible for any incorrect or missing information that is contained within these applications.\*\*\*

<sup>\*\*</sup>This application expires 6 months from the initial date if permits have not been issued\*\*

NAME: BEN L. NIL \*This application to be filled out when applying for a septic system inspection.\* County Health Department Application for Improvement Permit and/or Authorization to Construct IF THE INFORMATION IN THIS APPLICATION IS FALSIFIED, CHANGED, OR THE SITE IS ALTERED, THEN THE IMPROVEMENT PERMIT OR AUTHORIZATION TO CONSTRUCT SHALL BECOME INVALID. The permit is valid for either 60 months or without expiration depending upon documentation submitted. (Complete site plan = 60 months; Complete plat = without expiration) 910-893-7525 option 1 **CONFIRMATION #** Environmental Health New Septic System Code 800 All property irons must be made visible. Place "pink property flags" on each corner from of lot. lines must be clearly flagged approximately every 50 feet between corners. Place "orange house corner flags" at each corner of the proposed structure. Also flag driveways, garages, decks, out buildings, swimming pools, etc. Place flags per site plan developed at/for Central Permitting. Place orange Environmental Health card in location that is easily viewed from road to assist in locating property. If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. Do not grade property. All lots to be addressed within 10 business days after confirmation. \$25.00 return trip fee may be incurred for failure to uncover outlet lid, mark house corners and property lines, etc. once lot confirmed ready. After preparing proposed site call the voice permitting system at 910-893-7525 option 1 to schedule and use code 800 (after selecting notification permit if multiple permits exist) for Environmental Health inspection. Please note confirmation number given at end of recording for proof of request.

Use Click2Gov or IVR to verify results. Once approved, proceed to Central Permitting for permits.
 Environmental Health Existing Tank Inspections
 Code 800

Follow above instructions for placing flags and card on property.

Prepare for inspection by removing soil over outlet end of tank as diagram indicates, and lift lid straight up (if possible) and then put lid back in place. (Unless inspection is for a septic tank in a mobile home park)

DO NOT LEAVE LIDS OFF OF SEPTIC TANK

- After uncovering outlet end call the voice permitting system at 910-893-7525 option 1 & select notification permit
  if multiple permits, then use code 800 for Environmental Health inspection. Please note confirmation number
  given at end of recording for proof of request.
- Use Click2Gov or IVR to hear results. Once approved, proceed to Central Permitting for remaining permits.

If applying for authorization	on to construct please indicate desired system type(s): can be ranked in order of preference, must choose one.	
Accepted	{} Innovative {} Conventional {} Any	
( Alternative	{}} Other	
The applicant shall notify question. If the answer is	the local health department upon submittal of this application if any of the following apply to the proper "yes", applicant MUST ATTACH SUPPORTING DOCUMENTATION:	ty i
(_)YES (_) NO	Does the site contain any Jurisdictional Wetlands?	
{ YES {_} NO	Do you plan to have an irrigation system now or in the future?	
YES {} NO	poes or will the building contain any drains? Please explain.	
[_]YES [_] NO /	Are there any existing wells, springs, waterlines or Wastewater Systems on this property?	
(_) YES (_) NO	Is any wastewater going to be generated on the site other than domestic sewage?	
[_]YES [_] NO	Is the site subject to approval by any other Public Agency?	
	Are there any Easements or Right of Ways on this property?	
_ YES   NO	Does the site contain any existing water, cable, phone or underground electric lines?	
	If yes please call No Cuts at 800-632-4949 to locate the lines. This is a free service.	

I Have Read This Application And Certify That The Information Provided Herein Is True, Complete And Correct. Authorized County And State Officials Are Granted 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 So That A Complete Site Evaluation Can Be Performed.

PROPERTY OWNERS OR OWNERS LEGAL REPRESENTATIVE SIGNATURE (REQUIRED)

8/18/11 DATE

31'--1"

STONE SHRUCTURE

LAYOUT START POINT (Derived from property line as shown)

MILJICA PEREDA POOL

CASSAN SULLISTS
DESIGN OPERAL!

TS, LLC. POOL DEDY, AND LANDSCAPE IN

DISTRICT SITE PLANAPP BEDROOMS BOX EQUIPMENT FAXLOSWRE (CES) 147.44 ● N66\* 19' 09" @ S 19+ 00. 52" E HOOD TRELLIS ! @ S19\* 90' 52\* HOUSE / 150.00 ● 582· 33′ 59·

no to send

HTE 03-5-8503

#### H/ LETT COUNTY HEALTH DEPAR' ENT ENVIRONMENTAL HEALTH SECTION

17441

## **OPERATIONS PERMIT**

Name: (owner) Bobby Bynd  Property Location: SR# 16 421	New Installation Septic Tank
Troporty Education. Six##W9461	_ ☐ Repairs
Subdivision Mystle wood	Lot # <b>35</b>
Tax ID #	Quadrant #
Contractor: Gerald Taple	
Basement with Plumbing:	
Water Supply:	
Distance From Well:ft.	
Following are the specifications for the sewage disposal system	on above captioned property.
Type of system: Onventional Other 15 % less	action Eysten
Size of tank: Septic Tank: 1208 gallons Pump	
Subsurface No. of exact length Drainage Field ditches 3 of each ditch 100 ft.	width of depth of
French Drain Required:Linear feet	
Date	7-27-04
	ted by: Jame & Montanto 18
PERMIT NO. 20343	Environmental Health Specialist
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Not Zenton	JANK UNCOVERED Ulaco-to til les
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OUT TO SHOWY 421 RTARRET	





www.harnett.org

Harnett County Government Complex 307 Cornelius Harnett Boulevard Lillington, NC 27546

> ph: 910-893-7547 fax: 910-893-9371

August 15, 2011

Capitol Pool & Spa, Inc. P O Box 1189 Garner, NC 27529

RE: Existing Septic System Inspection HTE# 11-5-27323 For: Lourdes Pereda - Myrtlewood Subdivision Lot 33

To Whom It May Concern,

An attempt was made to evaluate your property for the purpose of issuing an Existing Tank Permit. The evaluation could not be completed for one or more of the following reasons.

\_\_X\_\_1. Uncover outlet lid on septic tank and break seal (\$25.00 fee incurred)
\_\_\_\_\_\_2. Have system pumped out
\_\_\_\_\_\_3. Replace sanitary T

\_X\_4. Other - Locate property irons. Please contact me at the number listed below between the hours of 8 a.m. - 9:00 a.m. regarding the site plan.

Your application will be put on hold until the selected items above have been addressed. When completed **call 893-7547 to confirm** that the items mentioned have been corrected, we will then reschedule your property for evaluation.

Sincerely,

James & Manhant @ stores

James E. Manhart, III, R.E.H.S.

Environmental Health Specialist

Harnett County Department of Public Health

**Environmental Health** 

JEM/sgs

Copy - Central Permitting

#### HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH 307 CORNELIUS HARNETT BOULEVARD LILLINGTON, NC 27546

#### **EXISTING SEPTIC SYSTEM INSPECTION**

NAME <u>Capital Pool + SPA</u> PHONE # 919-665-9713
ADDRESS P.O. BOX 1189 GARNER D.C. 27529
NAME OF MOBILE HOME PARK OR S/D Mystlewood 810 Lot 33
NAME OF OWNER (IF DIFFERENT) Lourdes Pereda
ADDRESS OF OWNER (IF DIFFERENT) 95 Timber Copele LN DUNN N.C. 28534
PROPERTY LOCATION: STATE ROAD NAME AND # Hwy 421
The aforementioned site has been evaluated by the Harnett County Health Department Environmental Health Section. At the time of inspection, there appeared to be a septic system serving this site. If this system should malfunction, the owner is responsible for any necessary repairs.  Told Costoner Do Not Drive, on Concere oven restative system.  8-72-11 - Loft Lod - No Gree space - Cleaned Falker - Free space returned.  THIS INSPECTION IS VOID IF: * Carled Ban Lanticon to purp out TANK.  (1) the intended use of the septic system should change, and/or  (2) the system should fail or malfunction, and/or  (3) the owner or tenant of the property changes, and/or  (4) after six months

# BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM DO NOT DRIVE OR PARK ON SEPTIC SYSTEM

AUTHORIZATION OF EXISTING	SYSTEM
James & Markant E roas	8-23-11
Signature of Environmental Health Specialist	Date

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION

Cantant	Darmitting
Central	Permitting

Initial Application Date:

108 E. Front Street, Lillington, NC 27546

Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits

"A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" Mailing Address: 95 Timber LANDOWNER State: NC Zip: 28334 Contact No: 913-489-5456 Email: SPA FOR Mailing Address: PO Box 1189 State: NC Zip: 27529 Contact No: 519-665-9713 Email: Ben @ Cap. Lil Pools Com \*Please fill out applicant information if different than landowner CONTACT NAME APPLYING IN OFFICE: PROPERTY LOCATION: Subdivision: Map Book State Road Name Power Company from Progress Energy. \*New structures with Progress Energy as service provider need to supply premise number PROPOSED USE: Monolithic \_) # Bedrooms: \_\_\_ # Baths: \_\_\_ Basement(w/wo bath): \_\_\_ Garage: \_\_\_ Deck: \_\_\_ Crawl Space: SFD: (Size (Is the bonus room finished? (\_\_) yes (\_\_) no w/ a closet? (\_\_) yes (\_\_) no (if yes add in with # bedrooms) # Baths\_\_\_ Basement (w/wo bath)\_\_\_ Garage:\_\_\_ Site Built Deck:\_\_\_ On Frame\_\_\_ Off Frame\_\_\_ ) # Bedrooms\_\_\_ (Is the second floor finished? (\_\_) yes (\_\_) no Any other site built additions? (\_\_) yes (\_\_) no Manufactured Home: \_\_\_SW \_\_DW \_\_TW (Size\_\_\_\_x\_\_\_) # Bedrooms: \_\_\_Garage: \_\_(site built?\_\_\_) Deck: \_\_\_(site built?\_\_\_) No. Bedrooms Per Unit:\_ Duplex: (Size \_\_\_\_x\_\_\_) No. Buildings:\_ #Employees: Hours of Operation: Home Occupation: # Rooms: Closets in addition? (\_\_) yes (/\_) no New Well f# of dwellings using well \_\_\_\_\_\_) \*Must have operable water before final Water Supply: County \_ Existing Well \_ New Septic Tank (Complete Checklist) \_\_\_\_ Existing Septic Tank (Complete Checklist) \_\_\_\_ County Sewer Does owner of this tract of land, own land that contains a manufactured home within five hundred feet (500') of tract listed above? (\_\_) yes (\_\_) no Does the property contain any easements whether underground or overhead (\_\_) yes (\_\_) no Manufactured Homes Structures (existing or proposed): Single family dwellings: Required Residential Property Line Setbacks: Front Rear Closest Side Sidestreet/corner lo Nearest Building on same lot 03/11 Page 1 of 2 Residential Land Use Application

APPLICATION CONTINUES ON BACK

Rec'd 11/20/12 11/19/12

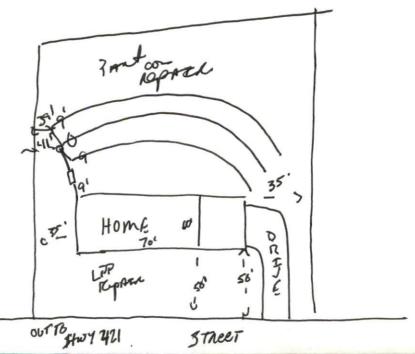
HTE 03 - 5 - 8503

## H. IETT COUNTY HEALTH DEPAR ENT ENVIRONMENTAL HEALTH SECTION

17441

### **OPERATIONS PERMIT**

Name: (owner) Bobby Byrd	New Installation Septic Tank
Property Location: SR# Huy 421	Repairs Nitrification Line
Subdivision Mystle wood	
Tax ID #	
Contractor: Gerald Taple	
Basement with Plumbing:	
Water Supply:	
Distance From Well:ft.	
Following are the specifications for the sewage disposal sys	tem on above captioned property.
Type of system: Onventional Other 15%	Reduction Eysten
Size of tank: Septic Tank: 1208 gallons Pu	ump Tank:gallons
Subsurface No. of exact length of each ditch_/o ft.	width of depth of ditches 5 ft. depth of
French Drain Required:Linear feet	
D	ate: 7-27-09
	spected by: Ame Emphasis Specialist



application Date: 11-19-12

Nearest Building on same lot

Residential Land Use Application

# Ret Part 11.50027323 R

COUNTY OF HARNETT RESIDENTIAL LAND USE APPLICATION Phone: (910) 893-7525 ext:2 Fax: (910) 893-2793 www.harnett.org/permits 108 E. Front Street, Lillington, NC 27546 Central Permitting "A RECORDED SURVEY MAP, RECORDED DEED (OR OFFER TO PURCHASE) & SITE PLAN ARE REQUIRED WHEN SUBMITTING A LAND USE APPLICATION" Mailing Address: 95 Timber Cheefe State: NC Zip: 28334 Contact No: 913 - 489 - 5456 Email: WHITTENTON Mailing Address: BL3 NEIGHBORES State: NC Zip: 28334: ontact No: 9194278465 \_mail: +toda@ whittenton builders. \*Please fill out applicant information if different than landowner Phone # CONTACT NAME APPLYING IN OFFICE: Power Company from Progress Energy. \*New structures with Progress Energy as service provider n PROPOSED USE: Monolithic eck: Crawl Space: # Baths:\_ ) # Bedrooms: ) no (if yes add in with # bedrooms) (Is the bonus room finished? \_ On Frame\_\_\_ ite Built Deck:\_ ) # Bedrooms\_ ons? (\_\_\_) yes (\_\_\_) no (Is the second floor finished? \_(site built?\_\_\_) Deck:\_\_\_(site built?\_\_\_) Manufactured Home: \_\_\_SW \_\_\_DW \_\_\_TW (Size Pump BASIN Duplex: (Size x NST BE USBD #Employees: Home Occupation: # Rooms: Closets in addition? (\_\_\_) yes (\u22222) no Addition/Accessor Other: (Size ) \*Must have operable water before final **Existing Well** County Water Supply: e Checklist) County Sewer .... New Septic Tank (Complete Chi Sewage Supply: \_\_\_\_ (500') of tract listed above? (\_\_\_) yes (\_\_\_) Does owner of this tract of land, own land that contains Does the property contain any easements whether underground or overhead (\_ Manufactured Homes Structures (existing or proposed): Single family dwellings Required Residential Property Line Setbacks: , Front Actual Rear Closest Side Sidestreet/corner los

Page 1 of 2

APPLICATION CONTINUES ON BACK

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03/11

11/20/12 N

8156-669 (616)

E.q

MATE: DI 116

Kidz Pediatrics