

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION
307 W. CORNELIUS HARNETT BLVD.
LILLINGTON, NC 27546
910-893-7547 PHONE
910-893-9371 FAX

Application for Repair

Please call
him if no permit
is needed -

EMAIL ADDRESS: PWC49@embarqmail.com

NAME WILBUR L CROOM JR PHONE NUMBER 919 639 2721

PHYSICAL ADDRESS 270 WHEELER DR, Angier, NC 27501

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

NEKS CREEK FARM LX.8 2 acre
SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling: Modular Mobile Home Stick built Other BRICK VENEER

Number of bedrooms 4 Basement

Garage: Yes No Dishwasher: Yes No Garbage Disposal: Yes No

Water Supply: Private Well Community System County

Directions from Lillington to your site: _____

In order for Environmental Health to help you with your repair, you will need to comply by completing the following:

1. A "surveyed and recorded map" and "deed to your property" must be attached to this application. Please inform us of any wells on the property by showing on your survey map.
2. The outlet end of the tank and the distribution box will need to be uncovered and property lines flagged. After the tank is uncovered, property lines flagged, underground utilities marked, and the orange sign has been placed, you will need to call us at 910-893-7547 to confirm that your site is ready for evaluation.

Your system must be repaired within 30 days of issuance of the Improvement Permit or the time set within receipt of a violation letter. (Whichever is applicable.)

By signing below, I certify that all of the above information is correct to the best of my knowledge. False information will result in the denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership changes.

Wilbur L Croom Jr.
Signature

11-20-2015
Date

From: ENVIRONMENTAL HEALTH

910 893 9371

08/16/2013 07:58

#030 P.004/004

Repair

NO 1st page -
this is all we
need per Ricky.

COMMENTS:

Lot 8 Neills Cile farms

- tank uncovered

address:

270 Wheeler Drive

- NO need to flag

- NO need for

Property owner's name

Wilbur Croom 919-639-2721

utilities to
be marked

(layout att'd w/ map from file
see)

per Ricky.

Approximate length of trench to first stepdown

is 130'. Step down was opened and found

SATISFACTORY (not crushed). Hole was dug to bottom

OF E2 LAY BUNDLE WITH NO HUGE Release

of effluent. Water was still coming to top of

TANK with stepdown open and hole dug below

E2 LAY @ Stepdown.

I spoke with Mr. Croom about possibly installing

a "new" 130' ditch beside existing one up to the

stepdown essentially MAKING this section 6' wide.

Just one idea — whatever you'll think.

Ricky Holland

Precision Septic

919-639-8929

From: ENVIRONMENTAL HEALTH

910 893 9371

08/16/2013 07:55

#029 P.002/004

HOMEOWNER INTERVIEW FORM

It is important that you answer the following questions for our inspectors. Please do not leave any blanks if possible, and answer all questions to the best of your ability. Thank You.

Have you received a violation letter for a failing system from our office? [] YES [X] NO
Also, within the last 5 years have you completed an application for repair for this site? [] YES [X] NO

Year home was built (or year of septic tank installation) 6/17/05
Installer of system JAMES BALLEWAT
Septic Tank Pumper RICKY HOLLAND
Designer of System OLIVER TOLKSDAL ?

- 1. Number of people who live in house? 2 # adults 0 # children 2 # total
2. What is your average estimated daily water usage? gallons/month or day county
water. If HCPU please give the name the bill is listed in WATER CREW WILBUR
3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly
4. When was the septic tank last pumped? 2014 How often do you have it pumped?
5. If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly
6. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] monthly
7. Do you have a water softener or treatment system? [] YES [X] NO Where does it drain?
8. Do you use an "in tank" toilet bowl sanitizer? [] YES [X] NO
9. Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy? [] YES [] NO If yes please list
10. Do you put household cleaning chemicals down the drain? [] YES [X] NO If so, what kind?
11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES [X] NO
12. Have you installed any water fixtures since your system has been installed? [] YES [X] NO If yes, please list any additions including any spas, whirlpool, sinks, lavatories, bath/showers, toilets
13. Do you have an underground lawn watering system? [] YES [X] NO
14. Has any work been done to your structure since the initial move into your home such as, a roof, gutter drains, basement foundation drains, landscaping, etc? If yes, please list
15. Are there any underground utilities on your lot? Please check all that apply:
[] Power [] Phone [] Cable [] Gas [] Water
16. Describe what is happening when you are having problems with your septic system, and when was this first noticed?
BACKING UP IN TANK AND COMING OUT TOP OF TANK
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains, and household guests)? [] YES [] NO If Yes, please list
HEAVY RAIN AND GUESTS

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

Owner: _____ Applicant: _____ Date Evaluated: _____
 Address: _____ Design Flow (.1949): 360 gpd Property Size: _____
 Proposed Facility: 39000 Property Recorded: _____
 Location of Site: _____
 Water Supply: Public Individual Well Spring Other
 Evaluation Method: Auger Boring Pit Cut
 Type of Wastewater: Sewage Industrial Process Mixed

P R O F I L E #	.1940 Landscape Position/ Slope %	Horizon Depth (In.)	SOIL MORPHOLOGY		OTHER PROFILE FACTORS				Profile Class & LTAR
			.1941		.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	
			.1941 Structure/ Texture	.1941 Consistence Mineralogy					
1	<u>LS</u> <u>3-7</u>	<u>0-22</u>	<u>G2</u>	<u>WFA w/hp</u>					
		<u>12-36</u>	<u>SG2 C</u>	<u>FA skp</u>					

Description	Initial System	Repair System	Other Factors (.1946): Site Classification (.1948): <u>e3</u> Evaluated By: <u>UX</u> Others Present: <u>8/15</u>
Available Space (.1945)			
System Type(s)			
Site LTAR			

REGALIA TO OWN - DAMAGED

County: 1" = 100 ft
 Deed: Area: 2.059 acre
 Page: Closing Distance = 0.00 ft
 Tract: Closing Error = 0.00 %
 User: Perimeter = 1261.40 ft



CALLS	BEARING	DISTANCE
1 2	NE 26 56 1	373.63
2 3	SE 31 23 19	387.77
3 4	SW 26 56 1	170.00
4 5	NW 63 3 56	330.00

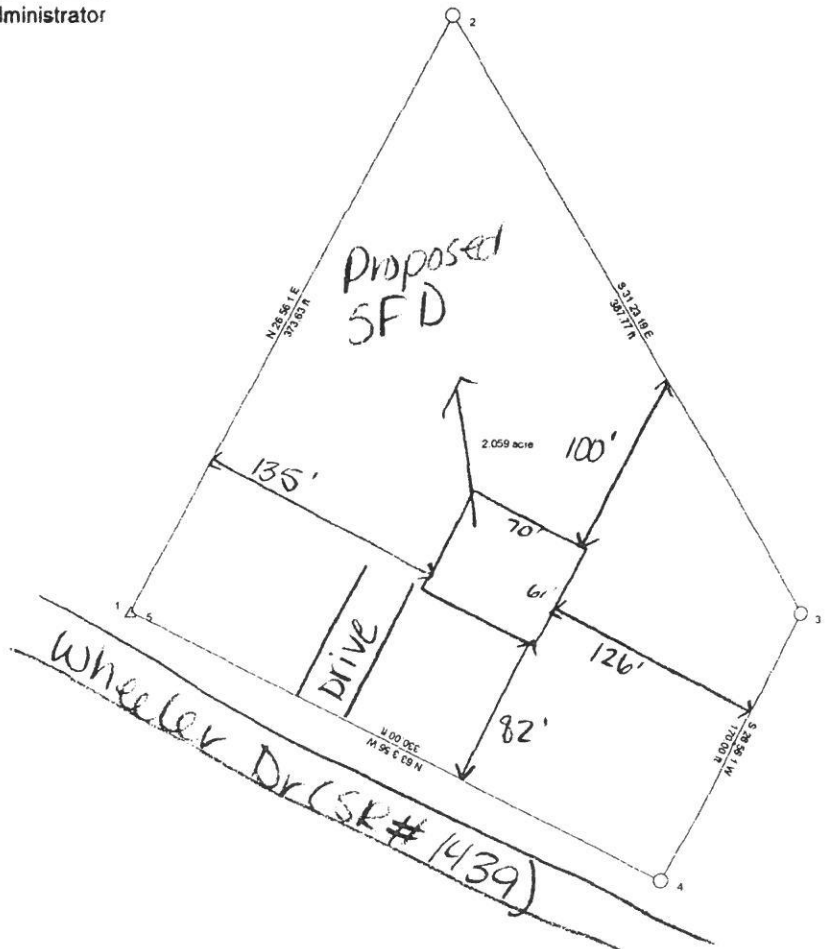
SITE PLAN APPROVAL

DISTRICT RA40 USE SFD

#BEDROOMS 3

9/3/04 PRUSSELL

Date Zoning Administrator



HTE # 04-5-10804

ERNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

17557

OPERATIONS PERMIT

Name: (owner) LARRY SWANSON New Installation Septic Tank Repair

Property Location: SR# 1439 JAMES NORRIS RD Nitrification Line Expansion
Subdivision NEILS CR FMS Lot # 2 Tax ID # _____ Quadrant # _____

Contractor: JAMES BAREFOOT Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community
Distance From Well: 50 ft.

Following are the specifications for the sewage disposal system on above captioned property.

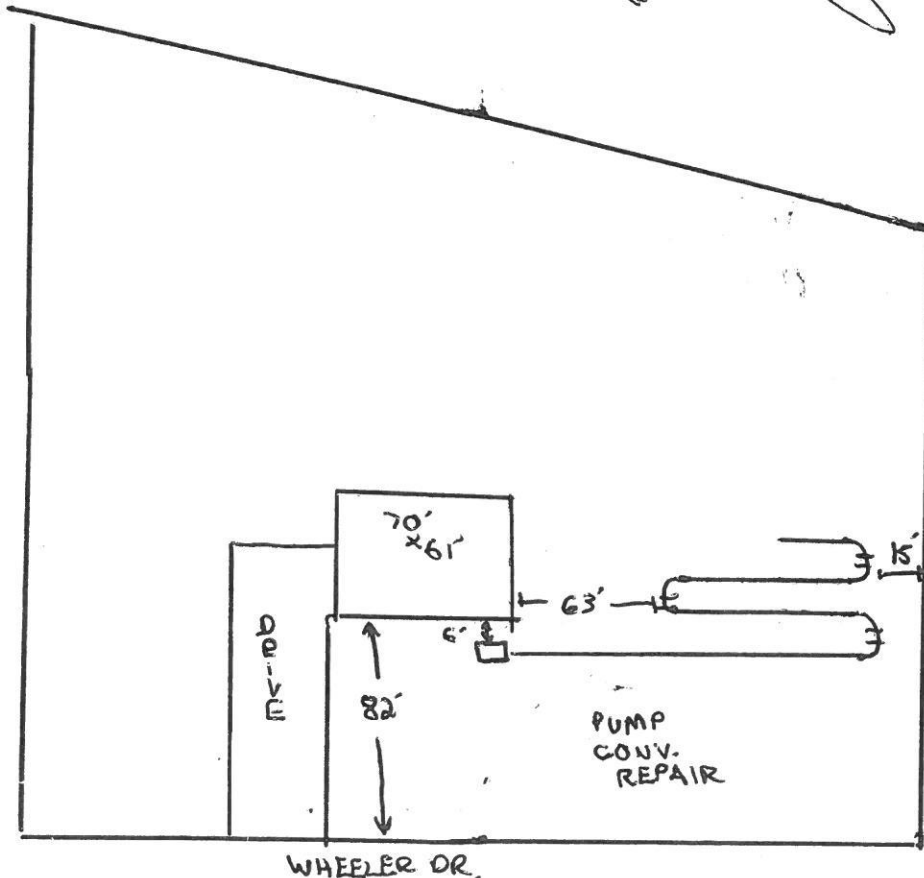
Type of system: Conventional Other POLYSTYRENE AGGREGATE TRENCH

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 230 ft. width of ditches 3 ft. depth of ditches 20 in.

French Drain Required: _____ Linear feet Date: 6/14/05

PERMIT NO. 20997 Inspected by: [Signature] RS



HTE 04-5-10304

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) LARRY SWANSON New Installation Septic Tank
Property Location: SR# 1439 James Norriss Repairs Nitrification Line
Wheeler DR

Subdivision Neells Creek Farms Lot # 8

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 2.09

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50' ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Pump to Conventional MANITREE

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 20-31 1/2 in.

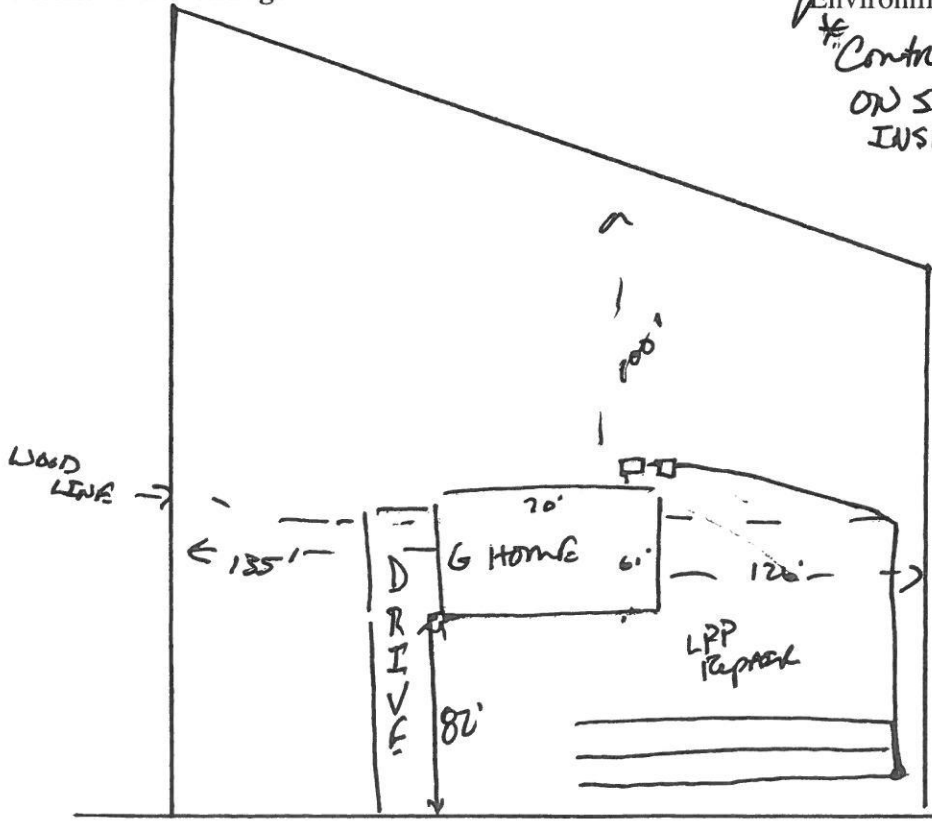
French Drain Required: - Linear feet

Date: 9-22-04

This permit is subject to revocation if site plans or intended use change.

Signed: James E. Manhart
Environmental Health Specialist

**Contractor to MEET ON SITE PRIOR TO INSTALLATION!*



**MANITREE SEPTIC SPECIFICATIONS
3 1/2" SCH 40 VALVES
2" SCH 40 Supply
* IN LARGE D-BOX.*

Wheeler DR