

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

D.C. Carter
Contractor

Call prior to
visit - to meet
on site
↓

APPLICATION FOR REPAIR

wk 910-932-7412
cell 910-309-3798

Demetrius McLaurin
NAME PHONE # (HOME) PHONE # (WORK/CELL)
200 Union Circle Lillington, NC 27546
ADDRESS MAILING ADDRESS IF DIFFERS

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

Woodshire 77 Nursey RD
SUBDIVISION NAME Woodshire LOT # 77 STATE RD NAME & # SIZE OF LOT OR TRACT

Type of dwelling Modular Mobile Home Stick built Other

Number of bedrooms 1 2 3 4 or more Basement Other

Garage Yes No Dishwasher Yes No Garbage Disposal Yes No

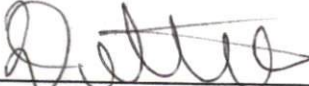
Water Supply: Private Well Community System County

Directions from Lillington to your site: 27 to Nursey RD or
210 to Ray RD then Nursey RD - (off Lemuel Black)

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" (not your house) **must** be attached to this application along with a site plan showing (a) location of dwelling (b) location of driveway (c) location of any wells and other existing structures.
2. The outlet end of the tank and distribution box will need to be uncovered and property lines marked. After the tank is uncovered, property lines are marked and orange sign has been placed, you will need to call us at 910-893-7547 to let Environmental Health know that your site is ready for evaluation.
3. The system must be repaired within 30 days or the time set within receipt of a violation letter.

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 change.


Signature Date
20 Nov 09

3/20/09
S

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 letter for a failing septic 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

Installer of system _____
Septic Tank Pumper _____
Designer of System _____

1. Number of people who live in house? 2 # adults 1 # children 3 # total
2. What is your average estimated daily water usage? _____ gallons/month or day _____ county water
If HCPU please give the name that the water bill is listed in? Detetrius McLaurin
3. If you have a garbage disposal, how often is used? [] daily [X] weekly [] monthly
4. When was the septic tank last pumped? Never How often do you have it pumped? Never, Not yet
5. If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly Never
6. If you have a washing machine, how often do you use it? [] daily [] every other day [X] 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 family using long term prescription drug(s), antibiotics or chemotherapy?
[] YES [X] 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
If yes, what kind? _____
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, whirlpools, sinks, lavatories, bath/showers, toilets. _____
13. Do you have an underground lawn watering system? [X] YES [] NO
14. Has any work been done to your structure since your initial move, such a roof, gutter drains, basement
foundation drains, landscaping, etc? [] YES [X] NO If yes, please list _____
15. Are there any underground utilities on your lot? [] YES [] NO
Please check all that apply [] Power [] Phone [] Cable [] Gas [X] Water
16. Describe what is happening when you have problems with your septic system and when was it first
noticed. 3 week ago, water is coming up from the ground in two spots with a very bad odor
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains,
household guests)? [] YES [] NO If yes, please list I had just wash clothes the first time that I noticed it. Now its there everyday.

OPERATIONS PERMIT

Name: (owner) CAVINES New Installation Septic Tank Repair

Property Location: SR# 1117 Nitrification Line Expansion

Subdivision Woodsman Lot # 77 Tax ID # _____ Quadrant # _____

Contractor: D.C. Carter 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.

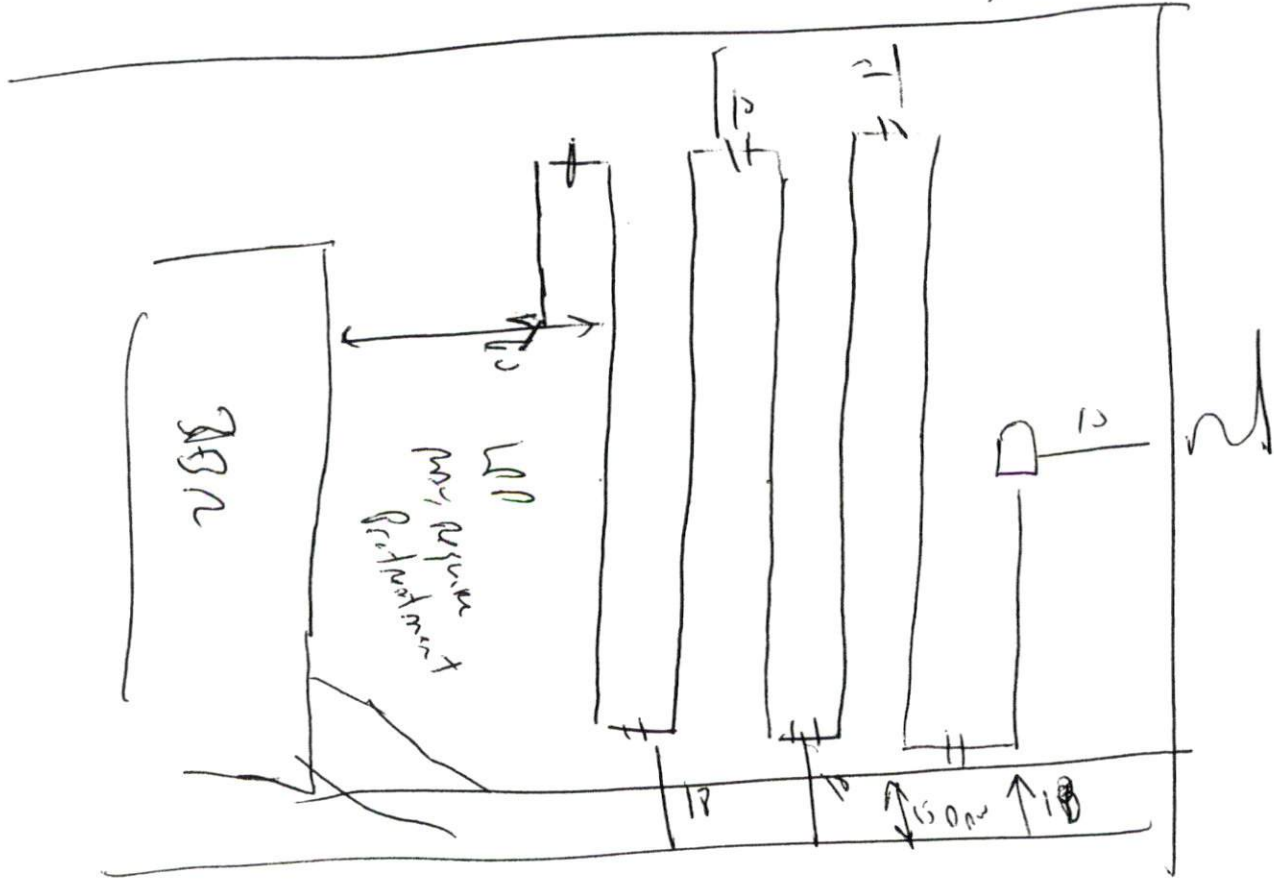
Type of system: Conventional Other Septic 25% Reduct. System

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

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 300 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: _____ Linear feet Date: 11-28-05

PERMIT NO. 21847 Inspected by: Joe W...



HARNETT COUNTY HEALTH DEPARTMENT

HTE 05-50011502 R I IMPROVEMENT PERM...

21847

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) CAVINESS Land Dev. New Installation Septic Tank
Property Location: SR# 1117 Repairs Nitrification Line

Subdivision Woodshine Lot # 77

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (52x64) Lot Size: .44 AC

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 25% reduction system

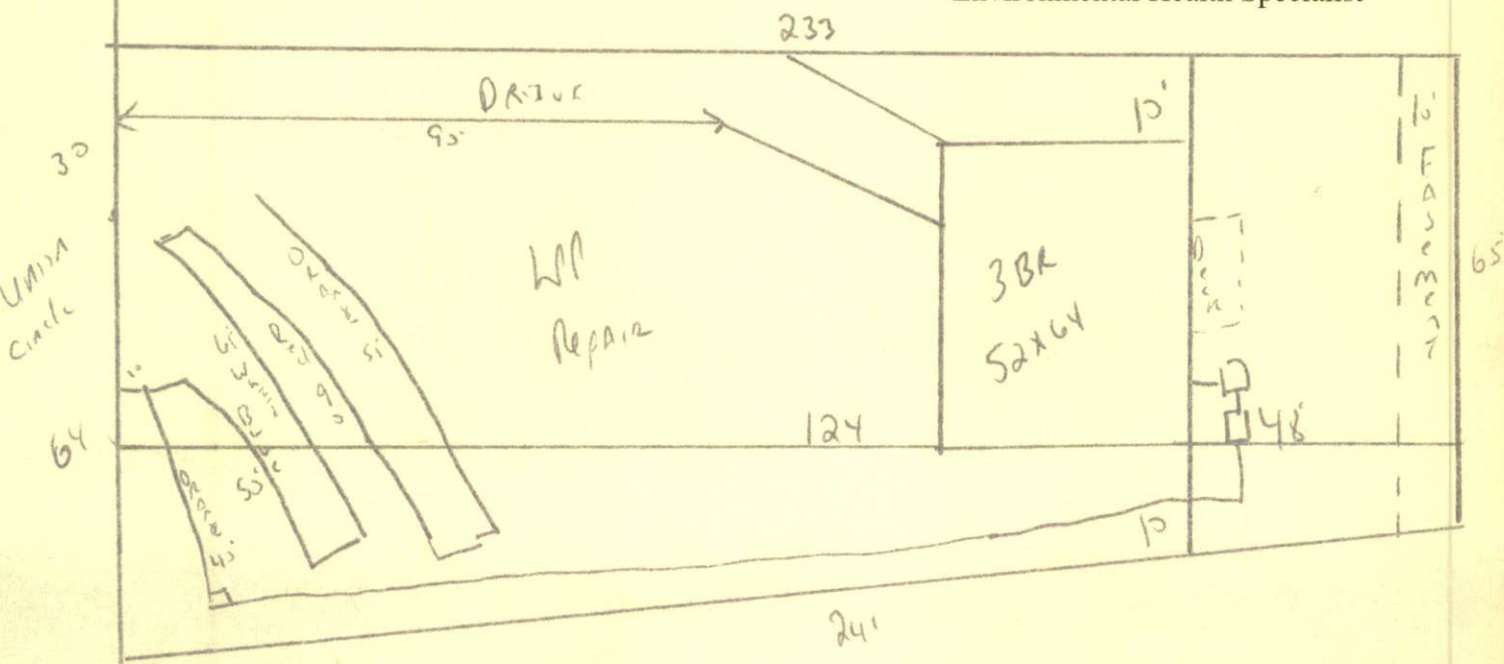
Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 300 ft. width of ditches 3 ft. depth of ditches 18 in.

French Drain Required: _____ Linear feet of 25% Reduction SYSTEM

Date: 05-03-05

This permit is subject to revocation if site plans or intended use change. Signed: Jo Warr
Environmental Health Specialist



Meet onsite Before Installing - Maintain all set Backs 10'