MJW General Cont.
permit # 22285
2X60 E2 FLW
effluent Surfacing
IN Both Lines

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

919-909-4389

EMAIL ADDRESS: _____

NAME Ricky Holland for Ronnie Walker PHONE NUMBER 919-820-0803

PHYSICAL ADDRESS 360 Willowcroft Drive Ct., Dunn NC 28334

MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL) _____

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

Leigh Laurel	3	Fairground Rd 1705	
SUBDIVISION NAME	LOT #/TRACT #	STATE RD/HWY	SIZE OF LOT/TRACT

Type of Dwelling: [ ] Modular [ ] Mobile Home [X] Stick built [ ] Other _____

Number of bedrooms 3 [ ] Basement

Garage: Yes [✓] No [ ] Dishwasher: Yes [ ] No [ ] Garbage Disposal: Yes [ ] No [ ]

Water Supply: [ ] Private Well [ ] Community System [ ] County

Directions from Lillington to your site: Fairground Rd, Leigh Laurel Subd.

Sept 2014 3,110g / Oct 2014 10,360g / Nov 2014 3,525g / Dec 2014 7,510g
Jan 2015 3,370g / Feb 2015 4,420g /// Oct 2014 HCDPU made water
Adjustment to possible error • Dec 2014 Family visiting / staying for 30 days

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.

Ricky Holland
Signature

3/19/15
Date

Processed on 3/19/15
N

Lot 3
Leigh Laurel

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) 1-9-2006
Installer of system Jason Butler
Septic Tank Pumper _____
Designer of System Brian McSwain ??

1. Number of people who live in house? 2 # adults grand kids over alot in summer-pool _____ # children _____ # 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 _____
3. If you have a garbage disposal, how often is it used? [ ] daily [ ] weekly [ ] monthly
4. When was the septic tank last pumped? _____ 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 [ ] NO Where does it drain? _____
8. Do you use an "in tank" toilet bowl sanitizer? [ ] YES [ ] 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 [ ] NO If so, what kind? _____
11. Have you put any chemicals (paints, thinners, etc.) down the drain? [ ] YES [ ] NO
12. Have you installed any water fixtures since your system has been installed? [ ] YES [ ] 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? [X] YES [ ] 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?
_____
_____
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
Mr. Walker stated: Wife uses large whirlpool almost daily. He uses shower with multiple body jets.

Rusty Holland

* please call Mr. Walker to schedule site visit
· Ronnie Walker 919-820-0803

HTE # 05-5-12405R

H NE T COUNTY HEALTH DEPA MENT
ENVIRONMENTAL HEALTH SECTION

18150

OPERATIONS PERMIT

Name: (owner) ~~Lot~~ MSW ☑ New Installation ☑ Septic Tank ☐ Repair

Property Location: SR# 1705 ☑ Nitrification Line ☐ Expansion

Subdivision Leigh Laurel Lot # 3 Tax ID # _____ Quadrant # _____

Contractor: Jason Batten 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.

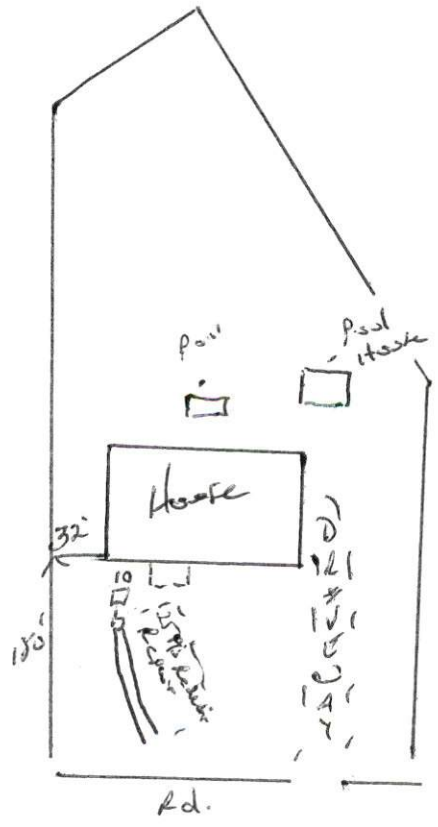
Type of system: ☐ Conventional ☑ Other E2F/ow

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

Subsurface Drainage Field	No. of ditches 2	exact length of each ditch 60 ft.	width of ditches 3 ft.	depth of ditches 12 in.

French Drain Required: _____ Linear feet Date: 4/25/2006

PERMIT NO. 22285 Inspected by: Susan McSwain



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