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

	ion nepan
NAME_Sutt TARPLEZ	PHONE NUMBER 918 489 1882
PHYSICAL ADDRESS 119 FOREST POND	CAMERON, NC 28326
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL)	
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME	
CAROLINA SEASONS D-9	POMPETOSA TRE . 41
SUBDIVISION NAME LOT #/TRACT #	STATE RD/HWY SIZE OF LOT/TRACT
Type of Dwelling: [] Modular [] Mobile Home	Stick built [] Other
Number of bedrooms [] Basement	[] Circle
- 4	V
*	No[] Garbage Disposal: Yes[] No [x]
Water Supply: [] Private Well [] Community System (County	
Directions from Lillington to your site: 421 N -> 875 -> Right on Milton Welch -> left at	
end of milton welch > immediate &	Eght into Carolina Seasons > 2nd Right
IS FUREST PEND -> 3Ad House on	le Ft - 119
In order for Environmental Health to help you with your	repair, you will need to comply by completing the following:
wells on the property by showing on your survey map. 2. The outlet end of the tank and the distribution box will uncovered, property lines flagged, underground utilities us at 910-893-7547 to confirm that your site is ready for Your system must be repaired within 30 days of issuance of the letter. (Whichever is applicable.)	need to be uncovered and property lines flagged. After the tank is marked, and the orange sign has been placed, you will need to call or evaluation. Improvement Permit or the time set within receipt of a violation
By signing below, I certify that all of the above information is co the denial of the permit. The permit is subject to revocation if the	orrect to the best of my knowledge. False information will result in the site plan, intended use, or ownership changes

Date

Signature

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 [刘 NO Also, within the last 5 years have you completed an application for repair for this site? []YES [八] NO
Year home was built (or year of septic tank installation)
Installer of system
Septic rank Pumper
Designer of System
1. Number of people who live in house?# adults# 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? 2011 How often do you have it pumped?
5. If you have a dishwasher, how often do you use it? [] daily [] every other day [] 4 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 [M] NO If yes please list
10. Do you put household cleaning chemicals down the drain? [X] 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? Myes 1. No 15 year
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 [A Phone [] Cable [] Gas [Water
16. Describe what is happening when you are having problems with your septic system, and when was this
first noticed?
Sewage is Running over front Sidewall - Fall 2012
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains, and household guests?) [7] YES [] NO If Yes, please list Every time Septic Pump Operates.