

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

*Call for  
pick up*

**Application for Repair**

EMAIL ADDRESS: NIKKIGRIFFIN12@YAHOO.COM

NAME James + Nikki Griffin PHONE NUMBER 919-796-3136 (Nikki) text or call

PHYSICAL ADDRESS 288 Joseph Alexander Dr. Fugucy Varina NC 27526 919-796-3134 (James) text or call

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) same

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

Ballard Woods Wt. 112

SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling:  Modular  Mobile Home  Stick built  Other \_\_\_\_\_

Number of bedrooms 3  Basement *layout att'd*

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

Water Supply:  Private Well  Community System  County

Directions from Lillington to your site: *From Lillington* 101 towards Fugucy. Go about 2 mi. outside of Lillington. Take right onto Ballard Rd take right into Ballard Woods Subdivision (this is Joseph Alexander Dr). Drive straight back to where the pavement ends we are the last house on the

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

Signature Nikki Griffin Date 2/17/16 2/19/16 N

Call Before you Come OUT

# 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  NO

Also, within the last 5 years have you completed an application for repair for this site?  YES  NO

Year home was built (or year of septic tank installation) 2011

Installer of system Jay Adcock

Septic Tank Pumper ~~Precision Septic~~ Precision Septic

Designer of System Jay Adcock

1. Number of people who live in house? 2 # adults 2 # children      # total

2. What is your average estimated daily water usage? 1000 gallons/month or day      county water. If HCPU please give the name the bill is listed in James + Lorna Griffin

3. If you have a garbage disposal, how often is it used?  daily  weekly  monthly

4. When was the septic tank last pumped? Aug. 2015 How often do you have it pumped? That's the only time

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?  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?

Gray Water on Ground (2013)

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 Med Rain +







HTE# 09-5-21618

# Harnett County Department of Public Health

PERMIT # 25187

## Operation Permit

21994

New Installation  Septic Tank  Nitrification Line  Repair  Expansion

PROPERTY LOCATION: \_\_\_\_\_

Name: (owner) OAK CITY HOMES SUBDIVISION BALLARD WOODS LOT # 112

System Installer: JAY ACOCK Registration # \_\_\_\_\_

Basement with plumbing:  Garage  Number of Bedrooms 3

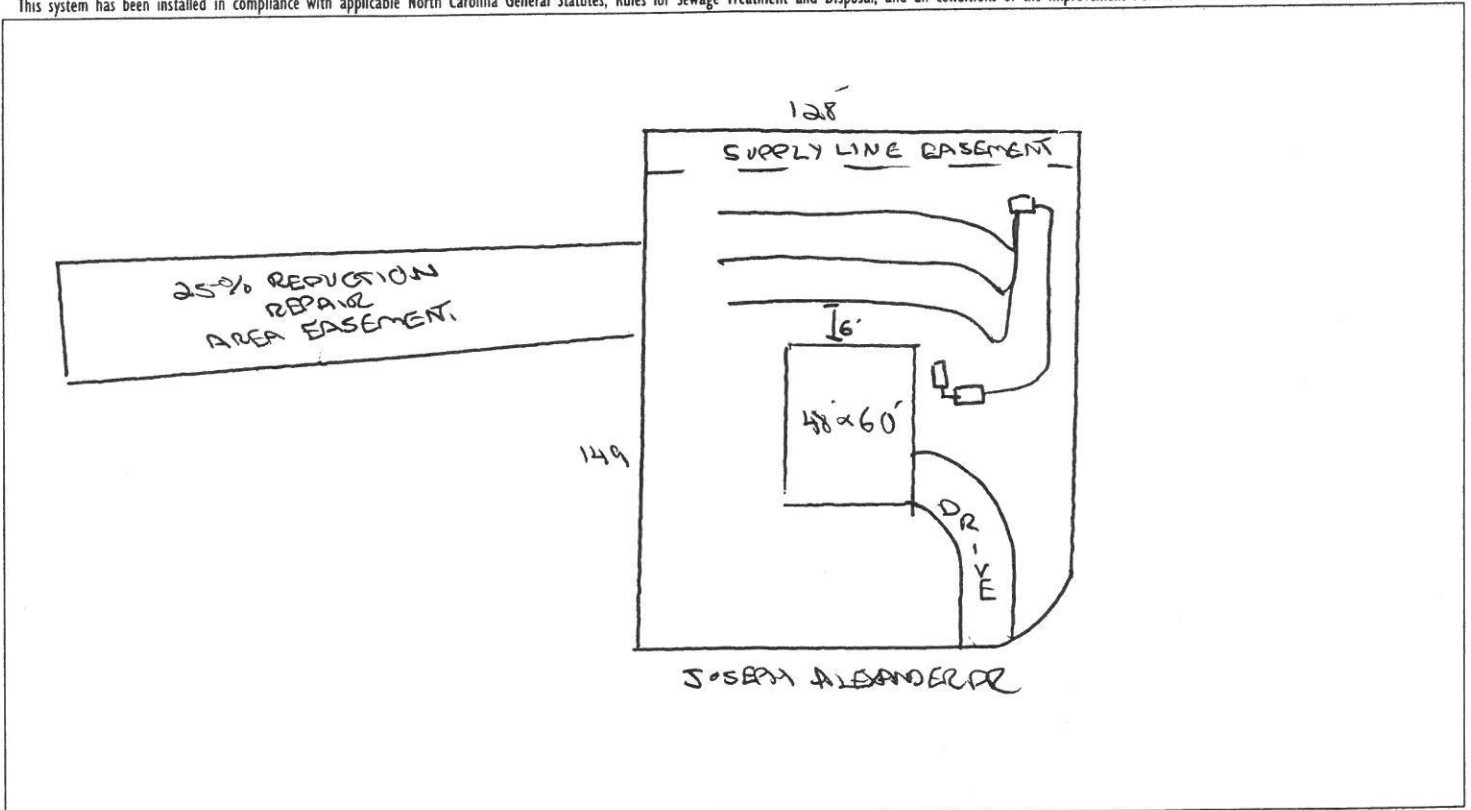
Type of Water Supply:  Community  Public  Well Distance from well 100 feet

System Type: III Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



### PERMIT CONDITIONS:

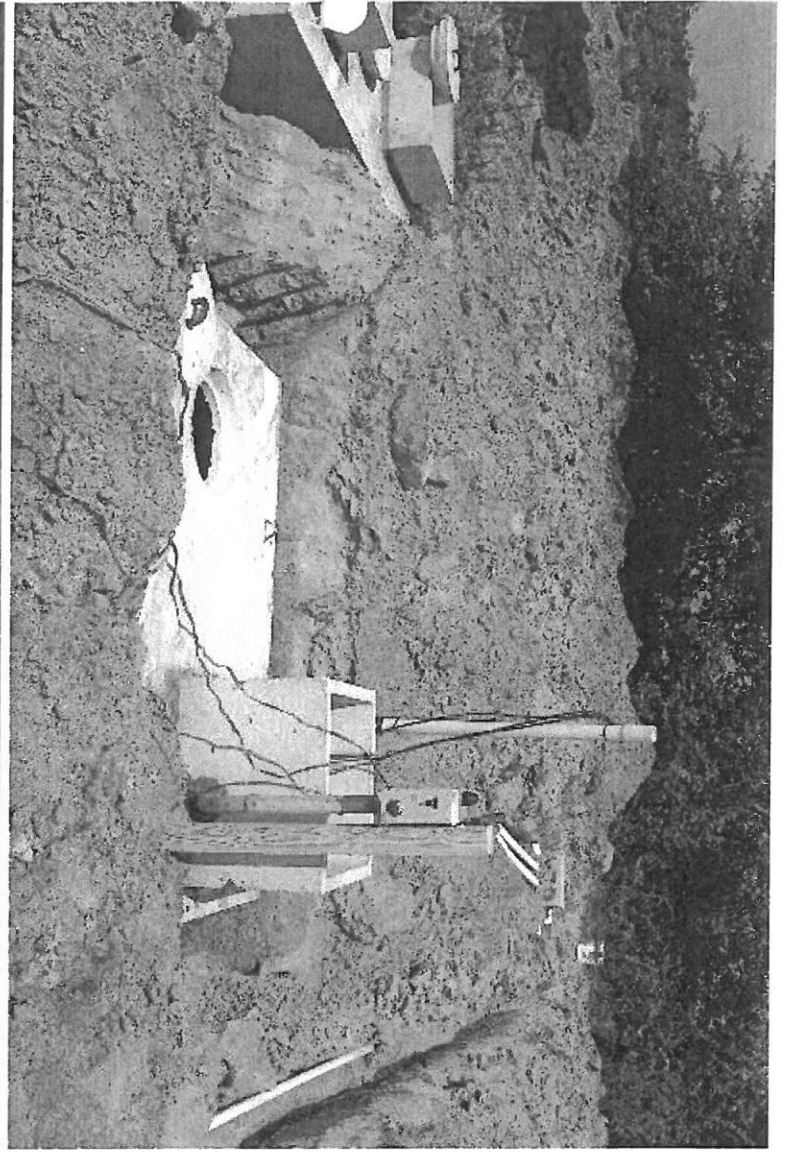
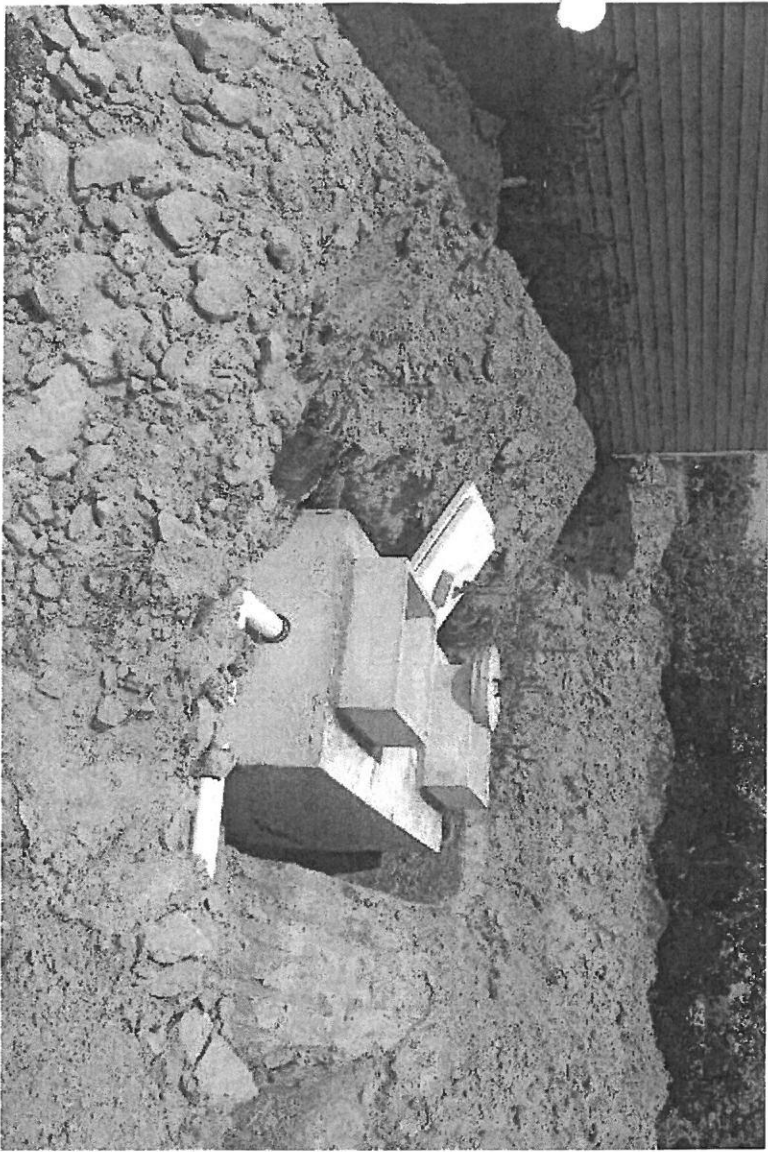
- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: \_\_\_\_\_  
Subsurface system operator required? Yes  No   
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: \_\_\_\_\_
- V. Other: \_\_\_\_\_

D-Box  Pump  Alarm  H2O Line  PWR Line

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

Type of system:  Conventional  Other Pump To EZ Flow Septic Tank: 1000 gallons Pump Tank: 1000 gallons  
 Subsurface Drainage Field No. of ditches 3 exact length of each ditch 90 feet width of ditches 3 feet depth of ditches 24-28 inches  
 French Drain Required: \_\_\_\_\_ Linear feet

Authorized State Agent [Signature] Date 7/23/11



09-5-21619

