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

application for Repair
EMAIL ADDRESS: /yonpa windstream no
NAME LYON Builder's Inc. PHONE NUMBER 919 353 0370
PHYSICAL ADDRESS 9/ Green Links Dr. Cumeron, NC 28326
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL) P.O. BOX 569 Olivia NC 28368
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME
Carolina Seasons 26 H Green Links Dr. 6 SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT
Type of Dwelling: [] Modular [] Mobile Home [Stick built [] Other
Number of bedrooms [] Basement
Garage: Yes [] No [] Dishwasher: Yes [] No [] Garbage Disposal: Yes [] No []
Water Supply: [] Private Well [] Community System [† County
Directions from Lillington to your site: To Carolina Seasons onto
Ponderosa Tr. Pight on Fern Dr. Right onto
Green Links Dr.
In order for Environmental Health to help you with your repair, you will need to comply by completing the following:
 A <u>"surveyed and recorded map"</u> and <u>"deed to your property"</u> must be attached to this application. Please inform us of any wells on the property by showing on your survey map.
 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 etter. (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.
the state of the s

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 MO 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) 2005 Installer of system Sohnny Fair eloth Septic Tank Pumper
Designer of System <u>Sue</u> west
1. Number of people who live in house?# adults# children# total
2. What is your average estimated daily water usage?gallons/month or daycounty
water. If HCPU please give the name the bill is listed in Kathleen Prussian
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? [] 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
[] 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? demolished
removed During removal existing take was etestroyed,
removed During removal existing take was etestroyed.
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

	2011007788
HARNETT COUNTY TAX ID# OG GS[0] - 01 - 000 [0 0 5-31 BX SV/2 NORTH CAROLINA	FOR REGISTRATION REGISTER OF DEEDS HERRETT COUNTY NO. PM 2011 NAY 31 03:12:23 PM BK:2070 PG:925-927 FEE:\$22.00 WC REV STAP: \$50.00 [INSTRUMENT & 2011007790]
Excise Tax: 50.00 Parcel Identifier No. 09936781 0006 60 Verified by	County on theday of, 20
Ву:	
Mail/Box to: The Law Office of Jeffrey E. Radford, P.A.	., 1300 Bragg Blvd, Suite 1316, Fayetteville, NC 28301
This instrument was prepared by: The Law Office of Jeffi	rey E. Radford, P.A., 1300 Bragg Blvd, Suite 1316, Fayetteville, NC
Brief description for the Index: LOT H-26, SECHY, C	arolina Seasons
THIS DEED made this 25th day of May	, 20 11 by and between
Nathan J. Prussian and wife, Kathleen H. Prussian 4514 Avumere St. Bethesdu, MD 20814 Enter in appropriate block for each Grantor and Grantee: a corporation or partnership.	Lyon Builders, Inc. PO Box 569 Olivia, NC 28368 name, mailing address, and, if appropriate, character of entity, e.g.
singular, plural, masculine, feminine or neuter as required WITNESSETH, that the Grantor, for a valuable considerati	ion paid by the Grantee, the receipt of which is hereby acknowledged, has and the Grantee in fee simple, all that certain lot or parcel of land situated in the
Being all of Lot No. H-26 as shown on "Final Plat of Care Associates, recorded in Plat Cabinet F, Slide 360-D, Harri	rolina Seasons-Section IV*, dated 8/12/93 prepared by Bracken & nett County Registry.
The property hereinabove described was acquired by Gran	ntor by instrument recorded in Book 1960 page 194.
All or a portion of the property herein conveyed include	des or X does not include the primary residence of a Grantor.
A map showing the above described property is recorded i NC Bar Association Form No. 3 © 1976, Revised © 1/1/2010 Printed by Agreement with the NC Bar Association	in Plat Book F page 360-D

DO HAVE AND TO HOLD the aforesaid lot or purcel of land and all privileges and appurtenances thereto belonging to the Grantee in And the Grantor covenants with the Grantee, that Grantot is seized of the premises in foe simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions: Subject to all Easements, Restrictive Covenants and Rights of Way of Record. IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written. (SEAL) rint/Type Name: Nathan J. Prussian (Entity Name) (SEAL) Print/Type Name: Kathleen H. Prussian Print/Type Name & Title (SEAL) Print/Type Name & Tkle: Print/Type Name:_ (SEAL) Print/Type Name: Print/Type Name & Title: State of North Carolina County or City of ... and State aforesaid, certify that Nathan I, the undersigned Notery Public of the County or City of personally appeared before me this day and J. Prussian and wife. Kuthleen H. Prussian acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Normal Pump or Mar soal this 5 day of ERIKA P MENDEZ Notary Public-Maryland Montgomery County Commission Expires My Commission Bapties January 25, 2014 Notary's Printed or Typed Diame (Affix Seal) - County or City of State of I, the undersigned Notary Public of the County or City of. and State aforesaid, certify that personally came before me this day and acknowledged that he is the _ a North Carolina or corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity. _he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this _____ day of _ Notary Public My Commission Expires:____ Notary's Printed of Typed Name (Affix Seal) State of - County or City of and State aforesaid certify that L the undersigned Notary Public of the County or City of Witness my hand and Notarial stamp or seal, this ____ day of _ Notary Public My Commission Expires:_ Notary's Printed of Typed Name (Affix Seal) NC Ber Association Form No. 3 @ 1976, Revised @ 1/1/2010 Printed by Agreement with the NC Bar Association



KIMBERLY S. HARGROVE REGISTER OF DEEDS, HARNETT 305 W. CORNELIUS HARNETT BLVD

> SUITE 200 ILLINGTON, NC 27546

Filed For Registration:

05/31/2011 03:12:23 PM

Book:

RF 2870 Page: 925-927

Document No.:

2011007788

EED 3 PGS

NC REAL ESTATE EXCISE TAX:

\$50.00

Recorder:

ANGELAJ BYRD

State of North Carolina, County of Harnett

KIMBERLY S. HARGROVE, REGISTER OF DEEDS

DO NOT DISCARD

HTE 03-5-8186

H. NETT COUNTY HEALTH DEPART ENT ENVIRONMENTAL HEALTH SECTION

17033

OPERATIONS PERMIT

Name: (owner) Contracting New Installation Septic Tank
Property Location: SR# 1201
Subdivision Carolina Season Lot # 17-26
Tax ID # Quadrant #
Contractor: Johns FAMelsth Registration#
Basement with Plumbing: Garage:
Water Supply:
Distance From Well: 50 ft.
Following are the specifications for the sewage disposal system on above captioned property.
Type of system: Conventional Other
Size of tank: Septic Tank: 1000 gations Pump Tank: gations
Subsurface No. of exact length width of depth of ditches ft. ditches ft. ditches ft.
French Drain Required:Linear feet
French Diani Required. Linear feet
Date: 03-04-04
Inspected by: $9a$ Lower
Date: 03-04-04 Inspected by: 90 Lower
Inspected by: $9a$ Lower
Inspected by: $9a$ Lower
Inspected by: $9a$ Lower
Inspected by: $9a$ Lower
PERMIT NO. 20381 Date: US-04-04 Inspected by: Journal Health Specialist Environmental Health Specialist
PERMIT NO. 20386 Date: 03-04-04 Inspected by: 9a Lows Environmental Health Specialist
PERMIT NO. 20386 Date: U3-04-04 Inspected by: 90 Long Environmental Health Specialist
PERMIT NO. 20386 Date: 03-04-04 Inspected by: 9a Lows Environmental Health Specialist

