

WANTS TO BE PRESENT AT TIME OF INSPECTION #885

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

*Complaint rec'd
 *ET+ fees to be pd

*Thinks lines are crushed - also storage bldg. built w/o permits? (from CP)? GB to address issue when confirmed - waive ET-fee?

APPLICATION FOR REPAIR

NAME Timothy Mallett PHONE # (HOME) 919-499-5678 / 910-243-0281
 ADDRESS 50 Sweet Bayberry Ct., Sanford, NC 27332 MAILING ADDRESS IF DIFFERS

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____
 SUBDIVISION NAME Crestview LOT # 233 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: Hwy 27W to Buffalo Lakes Rd, turn left onto Cresthaven Rd (Crestview Subdivision) turn left onto Crystal Springs Dr. Right onto Rollingstone Ct. left onto Sweet Bayberry Ct. at the end on the right.

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 T Mallett Date 19 MAY 08

SKYS CP TO CALL CONFIRM
 08-5-2014
 5/28/08(S)
 VIA SW-PHONE

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 [] NO

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

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

1. Number of people who live in house? 2 # adults 2 # children _____ # 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? _____
3. If you have a garbage disposal, how often is used? [] daily [] weekly [] monthly N/A
4. When was the septic tank last pumped? N/A 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 family using long term prescription drug(s), 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? Comet, Clorox
Cleaner
11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES NO
If yes, what kind? _____
12. Have you installed any water fixtures since your system has been installed? [] YES 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? 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 [] NO If yes, please list shed install, gutters
15. Are there any underground utilities on your lot? YES [] NO
Please check all that apply Power Phone Cable [] Gas Water
16. Describe what is happening when you have problems with your septic system and when was it first
noticed. septic leech lines are bubbling in back yard, especially
after washing machine
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 washing clothes, heavy rains