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

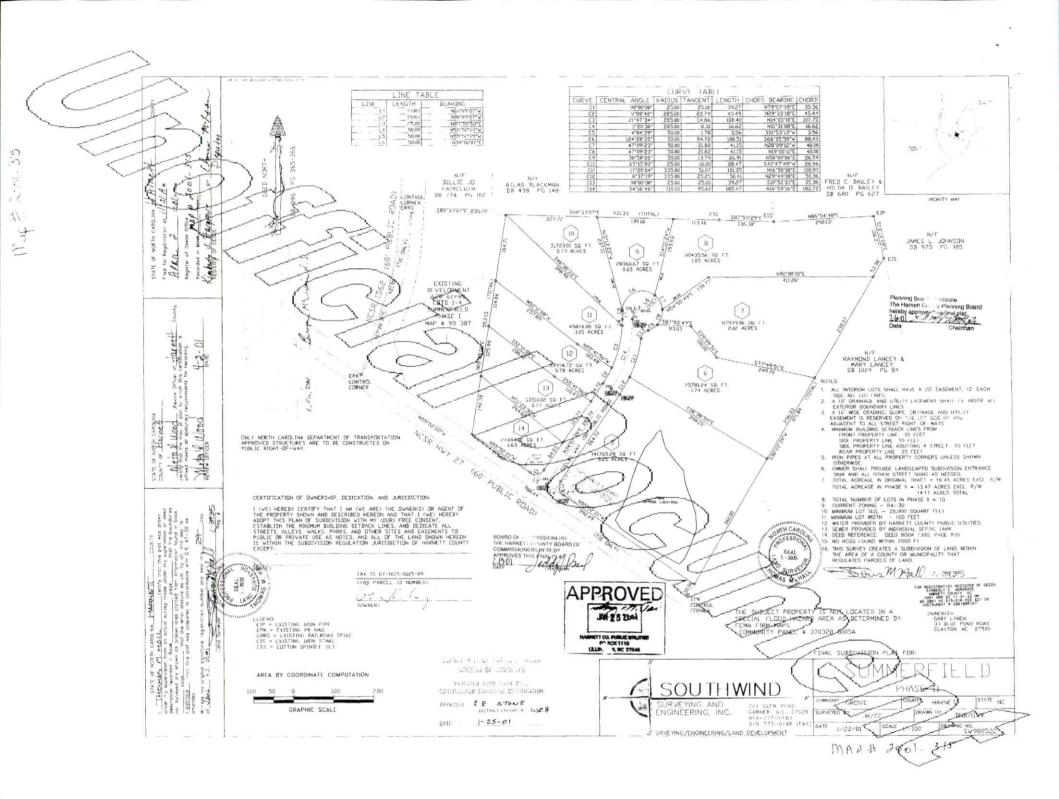
### **Application for Repair**

|  | EMAIL ADDRESS:         | 5 Lucar coat Gemberg mil                  |
|--|------------------------|---|
| NAME JORY LUCGOT   | PHONE NUMBER_          | 419-848-834>                              |
| PHYSICAL ADDRESS 28 Field = 4/24 C   | ogto K                 |   |
| MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL)  | Fields Way             | Coats NC 27521                            |
| IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME  |                        |   |
| Jummer Field 5   | NC >                   | 3 1/1                                     |
| SUBDIVISION NAME LOT #/TRACT #   | STATE RD/HWY           | SIZE OF LOT/TRACT                         |
| Type of Dwelling: [] Modular [] Mobile Home  | ick built []Other_     |   |
| Number of bedrooms 3 [] Basement   |                        |   |
| Garage: Yes [] No [] Dishwasher: Yes [] No [   | 1 /                    | Garbage Disposal: Yes [] No [/            |
| Water Supply: [] Private Well [] Community System  | County                 | ( 10 K)                                   |
| Directions from Lillington to your site: The Coats   | toward                 | Buron 4. miles                            |
|  |                        |   |
| In order for Environmental Health to help you with your repair,  | you will need to se    |   |
| <ol> <li>A <u>"surveyed and recorded map"</u> and <u>"deed to your property</u> wells on the property by showing on your survey map.</li> </ol>  | " must be attached to  | this application. Please inform us of any |
| <ol> <li>The outlet end of the tank and the distribution box will need t<br/>uncovered, property lines flagged, underground utilities mark<br/>us at 910-893-7547 to confirm that your site is ready for eval</li> </ol> | ed, and the orange sig | n has been placed, you will need to call  |
| our system must be repaired within 30 days of issuance of the Improetter. (Whichever is applicable.)   | ovement Permit or the  | e time set within receipt of a violation  |
| ly signing below, I certify that all of the above information is correct the denial of the permit. The permit is subject to revocation if the site   | to the best of my kno  | wledge. False information will result in  |

#### 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)   |
| Installer of system   |
| Septic Tank 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   |
| <ol> <li>If you have a garbage disposal, how often is it used? [ ] daily [ ] weekly [ ] monthly</li> <li>When was the septic tank last pumped?How often do you have it pumped?</li> </ol> |
| 5 If you have a dishwasher how often developed it 2 f 1 1 1   |
| 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 you   |
| 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 Gable 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 nousehold guests?) [-TYES [] NO If Yes, please list with washing   |
| - seasting martine, should  |

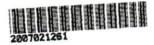


01-5-2994

# I RETT COUNTY HEALTH DEPARAMENT ENVIRONMENTAL HEALTH SECTION

№ 15186

## **OPERATIONS PERMIT**



HARNETT COUNTY TAX ID#

FOR REGISTRATION REGISTER OF DEEDS
HARRETY COUNTY NO
2007 DEC 04 12:21:41 PM
BX:2452 PG:341-344 FE:\$20 00
NC REV STAMP:\$294.00
INSTRUMENT \$ 200702:261

3.3.07 BY SC3

| NORTH CAROLINA G  | ENERAL WARRANTY DEED   |
|---|--|
| xcise Tax: \$ 294,00  |  |
| arcel Identifier No. 1610-61-9938 00 Ventied by   | County on the day of, 20   |
|   |  |
| ail/Box to. GRANTEE   |  |
| his instrument was prepared by: David Smith, 1218 Broad   | St Durham NC 27705   |
|   | 15t Daniality No. 27705  |
| rief description for the Index: LT , SUMMERFIELD  |  |
| HIS DEED made this 30th day of Movember , 20  | 07, by and between   |
| 1/06/   |  |
| GRANTOR   | GRANTEE  |
| eramie J Slaughterbeck and wife,  | Joey Lee Lucas   |
| ean-Anne Slaughterbeck  | 28 Fields Way<br>Coats, NC 27521   |
| *   | A  |
|   | <i>X</i> \   |
|   |  |
|   |  |
| he designation Grantor and Grantee as used herein shall inc<br>ingular, plural, masculine, feminine or neuter as required b | clude said parties, their heirs, successors, and assigns, and shall include  |
| inguist, plurat, mascumie, reminine or neuter as required o   | y combat.  |
| VITNESSETH, that the Grantor, for a valuable consideration  | on paid by the Grantee, the receipt of which is hereby acknowledged, ha  |
| nd by these presents does grant, bargain, sell and convey un<br>a the City of Grove   | to the Grantee in fee simple, all that certain lot or parcel of land simate.  Township, Harnett County, North Carolina and |
| nore particularly described as follows  | 7777   |
| ee Attached   |  |
|   |  |
|   |  |
| he property hereinabove described was acquired by Grante  | for by instrument recorded in Book 2216 page 458   |
|   |  |
| map showing the above described property is recorded in   | Plat Book page   |
| IC Bar Association Form No. L-3 © 1976, Revised © 197   | 7, 2002  |
| rinted by Agreement with the NC Bar Association - 1981  | SoftPro Corporation, 333 E. Six Forks Rd., Raleigh, NC 27609   |
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|   | Y / / <  |

| TO HAVE AND TO HOLD the aforesaid lot or parcel of la  | nd and all p                                 | rivileges and appurtenances thereto belonging to the Grantee   |
|--|--|--|
| And the Grantor covenants with the Grantee, that Grantor is<br>fee simple that title is marketable and free and clear of all e<br>the lawful claims of all persons whomsoever, other than th   | ncumbranc                                    | ne premises in fee simple, has the right to convey the same in es, and that Grantor will warrant and defend the title against exceptions |
| IN WITNESS WHEREOF, the Grantor has duly   | garacunoó ti                                 | e foregoing is of the day and year first above written.  |
| (Edibty Name)  | 20_8   | Jeramovi. Slaughterbeck/ (SEAL)  |
| By Title:  | NOTARY P<br>NOTARY P<br>NOTARY P<br>NORTH CA | Jean-Anne Slaughterbeck (SEAL)   |
| By:  | ACINA<br>SERVICES<br>SERVICES                | (SEAL)   |
| By:  |  | (SEAL)   |
| State of North Carolina - County of Wake   |  |  |
| I, the undersigned Notary Public of the County ar<br>Jean-Anne Slaughterbeck   | nd State afor                                | resaid, certify that Jeramie J Slaughterbeck and wife,   |
| acknowledged the due execution of the foregoing instrume   | ent for the p                                | personally appeared before me this day and<br>surposes therein expressed. Witness my hand and Notarial                                   |
| stamp or seal this 30th day of November  | , <u>20_0</u> 7                              |  |
| My Commission Expires. 41173014  |  | h a  |
|  |  | Notary Public Branci R. Walter   |
| State of North Carolina - County of  |  |  |
| I, the undersigned Notary Public of the County and   | State afores                                 | said, certify that   |
| personally came before me this day and acknowledged tha  | t he is the                                  | of , a North Carolina or   |
| that by authority duly given and as the act of such entity,l deed. Witness my hand and Notarial stamp or seal, this  My Commission Expires:  State of North Carolina - County of  I, the undersigned Notary Public of the County and | day of                                       |  |
|  | _  |  |
|  | ty of  | 20_  |
| My Commission Expires:   | (  | Notary Public  |
| The foregoing Certificate(s) of  |  |  |
| is/are certified to be correct. This instrument and this certifies<br>on the first page hereof.  | te are duly                                  |  |
| Register of Clean  |  |  |
| By: Register of Deec   | is for                                       | County  Assistant - Register of Decels   |
|  | is for                                       | County   |
| By:  | is for                                       | Assistant - Register of Dackis   |
| By:  | is for                                       | Assistant - Register of Deckis   |
| By:  | is for                                       | Assistant - Register of Dackis   |