### 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:	isettes@amail.com	
NAME Gisette Si	JAG2	PHONE NUMBER 7	87. 237.3603	
PHYSICAL ADDRESS 35 Shelby St., Spring Lake, nc 28390				
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL)				
IF RENTING, LEASING, ETC., LIST PRO	OPERTY OWNER NAME	-		
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				
Garage: Yes [ No [ ]	Dishwasher: Yes 1	No [ ]	Garbage Disposal: Yes No []	
Water Supply: [] Private Well	[] Community System	m (County		
Directions from Lillington to your site: 210 South, right on Ray Rd, take 1st				
right and 1st right onto subdivision. Manu another 1st				
right and 1st left. Second house on left.				
J				
<ol> <li>A <u>"surveyed and recorded r</u> wells on the property by sho</li> </ol>	map" and <u>"deed to your prop</u> owing on your survey map.	perty" must be attached to t	nply by completing the following: his application. Please inform us of any operty 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

#### 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.

lave y Also, v	ou received a violation letter for a failing system from our office? []YES NO vithin the last 5 years have you completed an application for repair for this site? []YES NO
nstalle eptic	ome was built (or year of septic tank installation) er of system Tank Pumper er of System
1. 2.	Number of people who live in house? # adults # total 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 CR MY MONTH OF THE COUNTY
4. 5. 6.	If you have a garbage disposal, how often is it used? [ ] daily   weekly [ ] monthly  When was the septic tank last pumped? How often do you have it pumped?  If you have a dishwasher, how often do you use it? [ ] daily [ ] every other day [ ] weekly [ ] weekly [ ] monthly  Do you have a water softener or treatment system? [ ] YES [ ] NO Where does it drain?
9.	Do you use an "in tank" toilet bowl sanitizer? [ ] YES   NO  Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy?] [ ] YES   NO If yes please list  Do you put household cleaning chemicals down the drain?   YES [ ] NO If so, what kind?
	Have you put any chemicals (paints, thinners, etc.) down the drain? [ ] YES [ NO 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
14.	Do you have an underground lawn watering system? [ ] YES VINO  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 VINO  Are there any underground utilities on your lot? Please check all that apply:
	[] Power [] Phone [] Cable [] Gas [] Water  Describe what is happening when you are having problems with your septic system, and when was this first noticed?  Mud Neg wet men over septic tank. Q months
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

HTE 05-5001191

# H. NETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

17317

# **OPERATIONS PERMIT**

Name: (owner) SHOWEASE CONSTRUCTION	New Installation Septic Tank
Property Location: SR# 1124 RAMBEAUT RO	
Subdivision WESTERFIELD FARMS	Lot # \( \)
Tax ID #	
Contractor: OTIS STRICKLAND	Registration #
Basement with Plumbing: Garage:	
Water Supply: ☐ Well ➤ Public ☐ Community	
Distance From Well: ft.	
Following are the specifications for the sewage disposal system or	n above captioned property.
Type of system:	POLYSTYRENE AGGREGATE TRENCH
Size of tank: Septic Tank: 1000 gallons Pump Ta	ank: 1000 gallons
Desires F' 11 1' 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2	vidth of depth of ditches 3 ft. ditches 24-18 in.
French Drain Required:Linear feet	
PERMIT NO. 21667	Environmental Health Specialist  66  53  23  7  8  8  8  8  8  8  8  8  8  8  8  8

HTE 05-5001191

### H. NETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

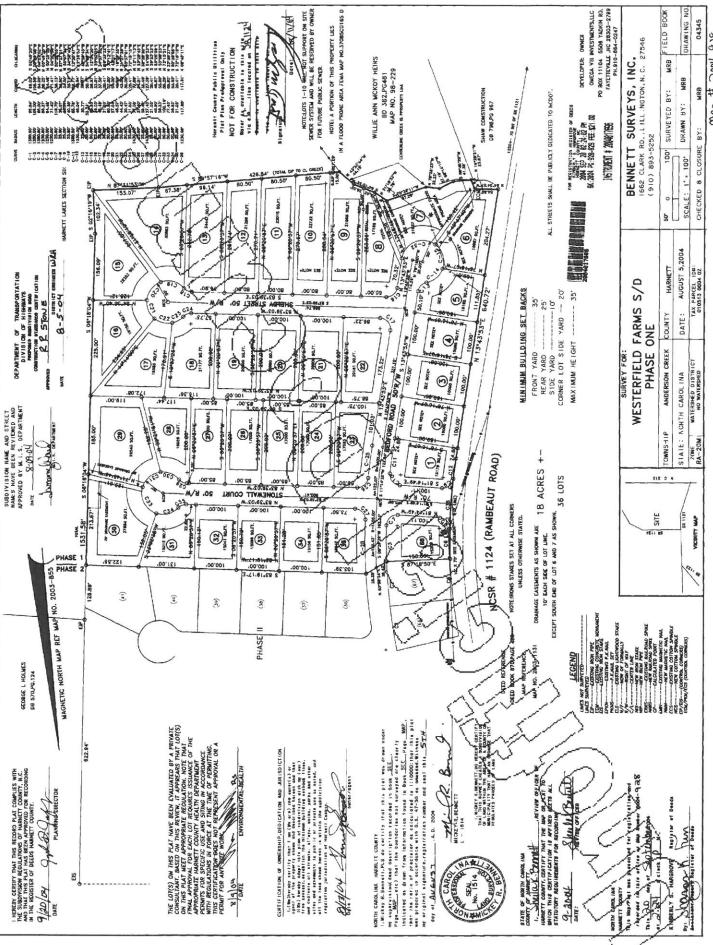
17317

## **OPERATIONS PERMIT**

Name: (owner) SHOWCASE CONSTRUCTION	New Installation Septic Tank			
Property Location: SR#1134 RAMBEAUT RO	•			
Subdivision WESTERFIELD FARMS	Lot # _ 21			
Tax ID #	Quadrant #			
Contractor: OTIS STRICKLAND	Registration #			
Basement with Plumbing:				
Water Supply:				
Distance From Well:ft.				
Following are the specifications for the sewage disposal system on above captioned property.				
Type of system:   Conventional Other Pune To	POLYSTYRENE AGGREGATE TREACH			
Size of tank: Septic Tank: 1000 gallons Pump T	Cank: 1000 gallons			
Subsurface No. of exact length  Drainage Field ditches of each ditch 200 ft.	width of depth of ditches 3 ft. ditches 24-18 in.			
French Drain Required:Linear feet				
Inspected PERMIT NO. 21667	ed by: Environmental Health Specialist  66  30  30  23  30  30  30  30  40  53  53  56  23  58			
	74			

	For Registration Kimberly S. Hargrove Register of Deeds Harnett County, NC Electronically Recorded 2017 Jan 27 12:53 PM NC Rev Stamp: \$ 306.00 Book: 3475 Page: 584 - 585 Fee: \$ 26.00 Instrument Number: 2017001340			
HARNETT COUNTY TAX ID # 010513 0004 24				
NORTH CAROLINA GENE	TRAL WARRANTY DEED			
Excise Tax: \$ 306,00				
Parcel Identifier No. Verified by	County on the day uf 20			
Mail/Box to: The Law Office of Leffrey P. Radford, P.A., 1300 Brage	Blvd, Suite 1316, Fayetteville, NC 28301			
This instrument was prepared by: The Law Office of Jeffrey E. Radfo	erd, P.A., 1300 Brage Blvd, Suite 1316, Favetteville, NC			
Brief description for the Index: LØT 21-PH One, Westerfield Farm	ns			
THIS DEED made this 25th day of January	. 20 <u>17</u> , by and between			
GRANTOR	GRANTEE			
Sean Michael Sweeney and wife, Brandy Sue Sweeney 751 Flynn McPherson Rd	Jeremy Luis Montalvo unmarried 35 Shelby St			
Cameron, NC 28326	Spring Lake, NC 28390			
(OY)/1	\			
7///				
Enter in appropriate block for each Grantor and Grantee: name, mail corporation or partnership.	ing address, and, if appropriate, character of entity, e.g.			
The designation Grantor and Grantee as used herein shall include said plural, masculine, feminine or neuter as required by context.	parties, their heirs, successors, and assigns, and shall include singular,			
WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot, parcel of land or condominium unit situated in the City of Spring Lake Anderson Creek Township, Harnett County.				
North Carolina and more particularly described as follows:  Being all of Lot 21, in a subdivision known as Westerfield Farms, Ph 2004, Slide 928, Harnett County Registry, North Carolina.	esc One, and the same being duly recorded in Plat Cabinet			
	$-(\alpha)$			
The property hereinabave described was acquired by Grantor by insu	ument recorded in Book 2113 page 549			
All or a portion of the property herein conveyed includes or X_ does not include the primary residence of a Grantor.				
A map showing the above described property is recorded in Plat Broad	2004 fuge 928			
Page 1				
NC Bur Association Form No. 3 O 1976, Revised © 1977, 2002, 2013 Printed by Agreement with the NC Bir Association – 1981	Numbl Carolina Bith Association - NC Bitr Form No. 3			
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Submitted electronically by "Jennifer Kirby Fincher, PLLC" in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.>				

TO HAVE AND TO HOLD the aforesaid lot or 25 reel of land and	d all privileges and appurtenances thereto belonging to the Grantee in
feg simple	
And the Grantor covenants with the Grantee, that Grantor is seize	d of the premises in fee simple, has the right to convey the same in fee
simple; that title is marketable and free and clear of all encumbe	ances, and that Grantor will warrant and defend the title against the
lawful etaims of all persons whomsoever, other than the following	
The second will be seen to the second will be se	ig exceptions.
V/ ~ \	
(()) =	
IN WITNESS WHEREOF, the Grantor has duly executed the fo	regoing as of the day and year first above written.
( /) ()	- 21/05
	Sich, SU (SEAL)
(Entity Name)	Print/Type Name: Sean Michael Sweeney
	Print Type Name: Sean Michael Sweeney
Ву:	- 1. 100
( , / , / , ) "	- Stands (SEAL)
Print/Type Name & Title:	Print/Type Name: Brandy Sue Sweeney
By:	(SEAL)
Print/Type Name & Title:	Print/Type Name:
Time Type I talke & Time.	
D	(05.11)
By: Print/Type Name & Title:	(SEAL)
Print Type Name & Title:	Print/Type Name:
State of North Carolina - County of City of Harne	<u>( )                                   </u>
I, the undersigned Notary Public of the County of City	of Cumberland and State aforesaid, certify that
Sean Michael Sweeney and wife, Brandy Sue Sweeney	personally appeared before me this day and
acknowledged the due execution of the foregoing instrument for the	he purposes, therein expressed. Witness my hand and Notarial stamp or
scal this 25th day of January 20 17.	to perpendicular or pressed. Without my maile and trotatal statup of
scal tills, 20_17.	
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HAPPINE.	ACEV.
My Commission Expires: October 18, 2020	Tracey Akers Notary Public
(Affix Seal)	Notary's Printed or Typed Name
	WE WE
State of County or City at	/// } }
I the undersigned Notary Public of the County or City	and State aforesaid, certify that
i, the anatonighted rectangly about of the country of the	propally of the before the this day and advantaged that he is the
	rsonally care before me this day and acknowledged that he is the
010	Tenti Sa North Carolina or
corporation/limited liability company/general partnership/limited	Paralership (strike through the inapplicable), and that by authority
duly given and as the act of such entity, _he signed the foregoin	ig instrument in its name on its behalf as its act and deed. Witness
my hand and Notarial stamp or scal, this day of	
	{ ( / )
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed on Typed Name
(Allix Scal)	Notary Springer of Typed Name
State of - County or City of	
I, the undersigned Notary Public of the County or City of	and State aforesaid, certify that
Witness my hand and Notarial stamp or seal, this day of	,20
	1 (A.V.).
	i %\ //
My Commission Expires	
My Commission Expires:	Notary Public
(Affix Scal)	Notary's Printed or Typed Nume
	"/ /'S" /
NC Bar Association Form No. 3 む 1976, Revised む 1/1/2010	( (
Printed by Agreement with the NC Bar Association	



map # 2004-938