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:		
NAME_SEC	U* RE Inc.	Attni Jay Green st	tock PHONE	NUMBER	719-934-	151
		lly Ln. Cocts, 1				
MAILING ADDRES	S (IF DIFFFERENT THA	N PHYSICAL) PO E	30x 2590	7 Rola	sh, NC 27	611
		RTY OWNER NAME				
				10.00		
SUBDIVISION NAM	1E	LOT #/TRACT #	STA	TE RD/HWY		SIZE OF LOT/TRACT
Type of Dwelling:	[] Modular	Mobile Home	[] Stick built	[] Other		
Number of bedroo	oms_3 [] B	Basement				
Garage: Yes[]N) [\ <u>}</u>	Dishwasher: Yes [/	No []		Garbage Dis	posal: Yes[]No
Water Supply: [Private Well	[] Community Syst	em	[] County		
Directions from Li		Huy 27 toward Ln., follow			left on	Bill A very Rd.
Tun lie	ht on Prosi	La Billow	1411611.	by to	bottom of	h.1(
)	The pring	71-1	1-5/10/10	
		help you with your r				
		" and <u>"deed to your pro</u> ng on your survey map.	operty must b	e attached to	this application. F	lease inform us of any
		the distribution box will				
		ed, underground utilities that your site is ready fo		the orange sig	n nas been placed	i, you will need to call
Your system must letter. (Whichever		days of issuance of the	e Improvemen	t Permit or the	e time set within	receipt of a violation
	is applicable.)					
		above information is coupling to the above information if the above the abov				
the denial of the p	ermit. The permit is so	ubject to revocation if t	the site plan, i	ntended use, o	or ownership cha	nges.
the denial of the p	ermit. The permit is so	ubject to revocation if t	the site plan, i	ntended use, o	or ownership cha	nges.
Signature	ermit. The permit is so		the site plan, in $\cap C$	Date	_ Clfsv fn	nges.

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) nstaller of system Septic Tank Pumper Designer of System
 Number of people who live in house?# adults# children# total What is your average estimated daily water usage?gallons/month or daycounty
water. If HCPU please give the name the bill is listed in
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
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
 Do you have an underground lawn watering system? [] YES [] NO 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? Possible leak in Septic lank
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

Hardee's Septic Tank Service



1061 White Memorial Church Road Willow Spring, NC 27592 919-639-2060

July 30, 2018

2002.51 map 3501-90 - Deed

Commercial Building Service 1117 Fuller St. Raleigh, NC 27603

Dear Ms. Tucker:

We went out on Thursday, July 26, 2018 to check the septic tank at 44 Hillbilly Ln., Coats, for a leak. On the initial visit, the tank was filled back to normal operating level. A return visit was made on Friday, July 27 to recheck the level. It was down about 7.5 inches. It was filled back to normal operating level again and we waited about an hour. The level had not gone down much in that time. On Saturday, we made another visit (just to make sure) and found the level back down 7.5 inches. A leak is indicated.

To evaluate the walls of the tank for cracks, it would need to be pumped. If there are no cracks that would structurally compromise the tank, it may be able to be patched. Sometimes the seal starts leaking at the mid-seam. If the leak is not too large, a patch may work. If the tank is structurally unsound or if the leak is too large, the tank would need to be replaced.

I hope this has been some help to you. Thank you for your business!

Sincerely,

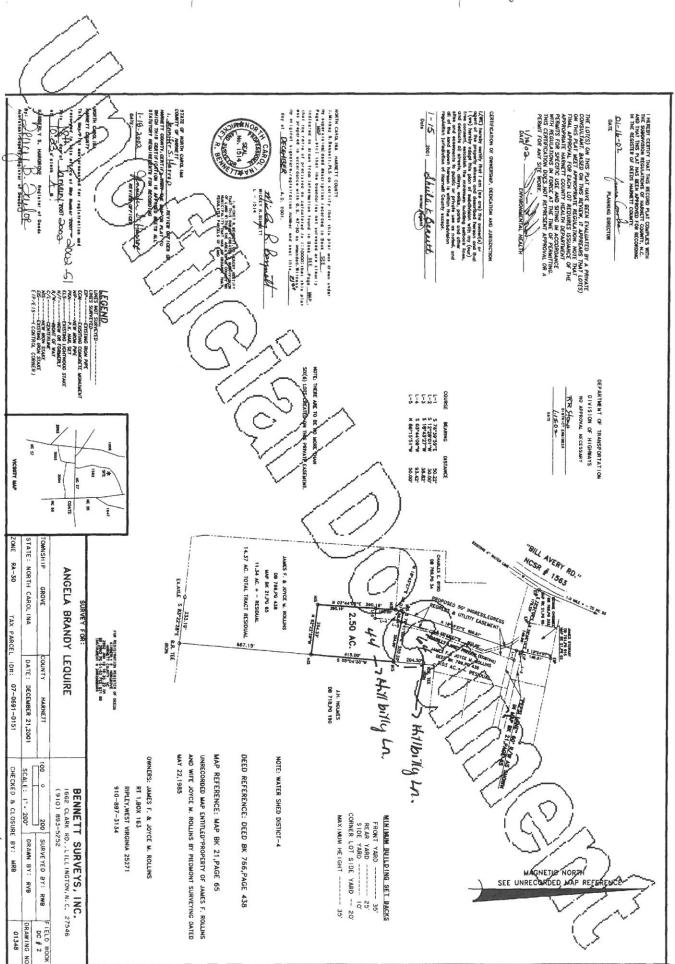
Bill Hardee

Owner/Certified Inspector

Bill Harder

NCOWCICB #1087I

Map# awa - v.



15-rap 4 44M

TARNETT COUNTY HEALTH DEF ?TMENT ENVIRONMENTAL HEALTH SE_TION

Nº13476

1-5-1938

OPERATIONS PERMIT

Name: (owner)	John T. Le Quire		New Installation	Septic Tank
Property Location:	SR# 1563		Repairs	Nitrification Lin
	Subdivision		Lot #	_
	TAX ID#		Quadrant #	
Contractor: Gero	de Temple		Registration #	
Basement with Plum	ibing:	Garage:		
Water Supply:	Well Public	Community		
Distance From Well	:ft.			
Following are the s	pecifications for the sew	vage disposal sys	tem on above caption	ed property.
Type of system:	Conventional	Other		
Size of tank:	Septic Tank: 1000	gallons Pu	ımp Tank: ga	llons
Subsurface Drainage Field	No. of ditches 4 exact of each	length ch ditch 50 ft	width of ditches ft. d	epth of litches 18-24 in.
French Drain:	Linear feet		1 /	
		Date:	7/19/201	
PERMIT NO. /	1981			Pin R.S
PERMIT NO	70 (9	inspected.	by: Environmental I	Health Specialist
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01-500 1938

HARNETT COUNTY HEALTH DEPARTMENT

Nº17986

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) John T. Le Quire Property Location: SR# 1567 D: 11 Avery Rd.	New InstallationRepairs	Septic Tank Nitrification Line
Subdivision		
Tax ID #		
Number of Bedrooms Proposed:	Lot Size: 18. 62 40	
Basement with Plumbing: Garage:		
Water Supply: Well Public Communit	ty	
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal final approval.		
Type of system: Conventional Other		
Size of tank: Septic Tank: / COO gallons		
Subsurface No. of exact length of each ditch 8	width of de ft. ditches 3 ft. di	epth of tches 18.24 in.
French Drain Required: Linear feet	1	
plans or intended use change.	Environmental Heal	R. S. th Specialist
of Readitaly excustour	contiepair	
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35	4 CP M H 28'X80'	
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	BSAXTY	7 . + . 0 20
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North Carolina General Warranty Deed

Excise Tax: \$88.00

PIN #070691015102

Mail after recording to SECH*RE, Inc., 119 N. Salisbury Street, Raleigh, NC 27603

This instrument prepared by Nodell, Class & Haskell, LLP, 5540 Centerview Drive, Ste. 416, Raleigh, NC 27606

Brief description of the index

THIS DEED made this the,

2017, by and between

Grantor

Grantee

State Employees' Credit Union Mailing Address: PO Drawer 25279 Raleigh, NC 27611

SECU*RE, Inc. 1,19 N. Salisbury Street Raleigh, NC 27603

The designation Grantor and Grantee as used herein shall include said parties, their heirs and successors, and assigns, and shall include singular, plural, masculine, feminine, or heuter as required by context.

WITNESSETH, that the Grantor, for a valuable consideration paid by the Grantee, the receipt of which is hereby acknowledged, has and by these presents foes grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in Harnett County, North Carolina, and more particularly described as follows:

BEING that certain parcel of land containing 2.50 acres, more or less, located on Hillbidly Lane, an existing private street off of Pepsi Lane, a 60 foot right of way as shown of Map Book 21, Page 65, Harnett County Registry, adjoining Bill Avery Road (NCSR 1563), said 2.50 agre tract is described on that map dated December 21, 2001, by Bennett Surveys, Inc., titled "Survey for Angela Brandy Lequire," recorded January 18, 2002, in Map Book 2002, Page 51, Harnett County Registry, which map is incorporated herein as if set out in full.

This property is conveyed with full right to the use of the above mentioned easement for ingress and egress as described in Map Book 21, Page 65 and Map Book 2002, Page 51, Harnett County Registry.

/ /∑
Parcel #070691 0151 02
Property Address: 44 Hillbilly Lane, Coats, NC
14 Operty Address: 44 Fillibility Lane, Coats, NC
The property hereinabove described was acquired by Grantor by instrument recorded in Book 3475, Page 550, Harnett County Register of Deeds.
All or a portion of the property herein conveyed does not include the primary residence of the Grantor.
The property address of the above described property is known as 44 Hillbilly Lane, Coats, NC 27521.
TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto
belonging to the Grantee in fee simple.
And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to
convey the same in fee simple, that title is marketable and is free and clear of encumbrances, and that Grantor will
warrant and defend the title against the lawful claims of all persons whomsoever, other than the following
exceptions:
(0, 1/2)
~ // /
IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.
STATE EMPLOYEES' CREDIT UNION
By:
Print/Type Name: ALAS V. SALZANO
Title: SVP
1 ())
State of North Carolina
County of Wake
Plan Sa base
I, the undersigned Notary Public of the County and State aforesaid, certify that
personally came before me this day and acknowledged the he is the
Employees' Credit Union, a North Carolina corporation, 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, the 18 day of Hpn 1, 2017.
My Commission Expires: (0-12-2021 Dentily Karlos)
(Affix Seal) Danielle Smallweek, Notary Public
Newada Divisid on Toward Nilson
Notary's Printed or Typed Name
SMALL VOOR
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The second of th

HAP TT DEPARTMENT OF PUBLIC HEALTH TRMIT TO SINSTRUCT A DRINKING WATER SUPPL WELL

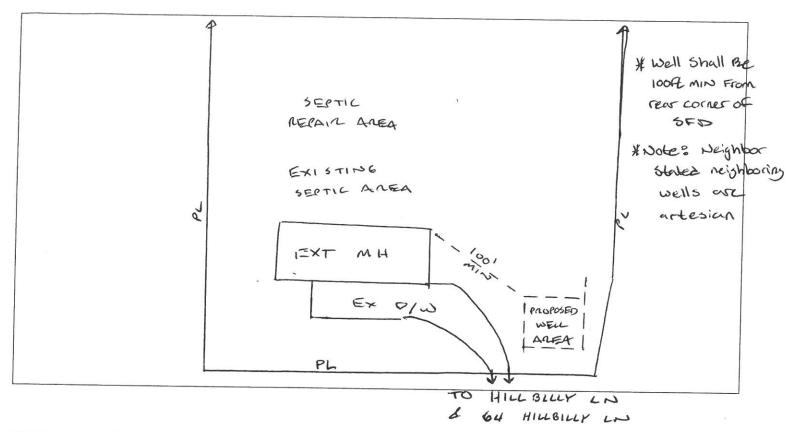
PIN #: <u>0691-01-6254.000</u> Parcel #: <u>070691 0151 02</u> Application #: <u>17-5-42816</u> Subdivision: <u>NA</u> Lot #: <u>NA</u>
Applicant Name: <u>SECU RE Inc. (Sam Adams)</u> Address: <u>119 N SALISBURY ST RALEIGH, NC 27603</u>
Type of Facility Served by Well: SFD
Sewage System: Conventional Gravity-Feed Gravel wells ore curtesian
Sewage System: Conventional Gravity-Feed Gravel Permit Conditions: Location - 44 HILLBILLY LN COATS, NC 27521 General Permit Conditions: Description water and the second services and the second services are contestion. See : 01-5-1938 - Septic
 The permitted drinking water supply well shall be located in accordance with the SITE PLAN ANY ALTERATION of the site of the site (including location of structures and appurtenance) or modification in use of the well, may subject this Permit to revocation
Authorized State Agent Community Date 12/06/17
Grouting Inspection Witnessed Date Grouting self-certified by driller GW-1 provided? Yes No
See attachment for construction sketch
WELL CERTIFICATE OF COMPLETION
Date: 12/2017 Application #: 17-5-49816 Well Contractor: Byothe well
Applicant Name: Address: Directions to Site:
Use of Well: Date Drilled: Total Depth: Replacement Well? _ Yes _ No Static Water Level: Top of Casing is in. above surface. Yield: gpm at ft. Disinfection: Type Amount
Water Zone (depth) Casing Grout From _ To _
Inspector: On Hold Date: Release Date:
Remarks:
Well Head Information Casing Height: 44: (above finished grade) Well ID Tag: Pump ID Tag: Sampling Tap: Backflow Preventer: Sample Taken? No Well Head properly sealed:
Remarks:
Authorized State Agent Care Care Care 12/20/17

See Attachment for completion sketch

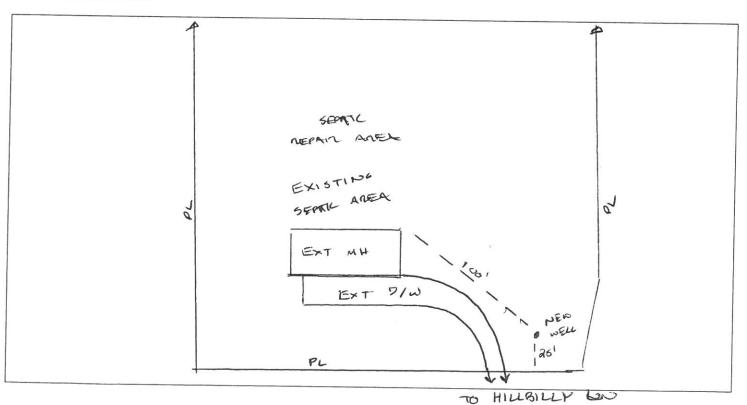
Applice Name: SECU RE Inc. (Sam Adams)

Sub sion: ____ Lot #: ____

Well Construction Sketch



Well Completion Sketch



& 64 HILLBILLY LN