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

Judith Casper EMAIL ADDRESS: james e casperca gnail, ca
NAME James E. Casper PHONE NUMBER 919-349-0038
PHYSICAL ADDRESS 915 Cokesbury Rd. Fuguay Varina, NC 27526
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL)
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME
TR#3 Hardee E/41C 1.76 acres
SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT
Type of Dwelling: [] Modular [] Mobile Home [45fick 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: From intersection of 210/401/421
US 401N toward Fuguay Varina 3.3 miles. Turn left
onto Christian Light Rd 4.4 miles turn left onto Cokesbury Rd
0.9 miles to driveway. House on left.
 In order for Environmental Health to help you with your repair, you will need to comply by completing the following: A "surveyed and recorded map" and "deed to your property" 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 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

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 Crypu

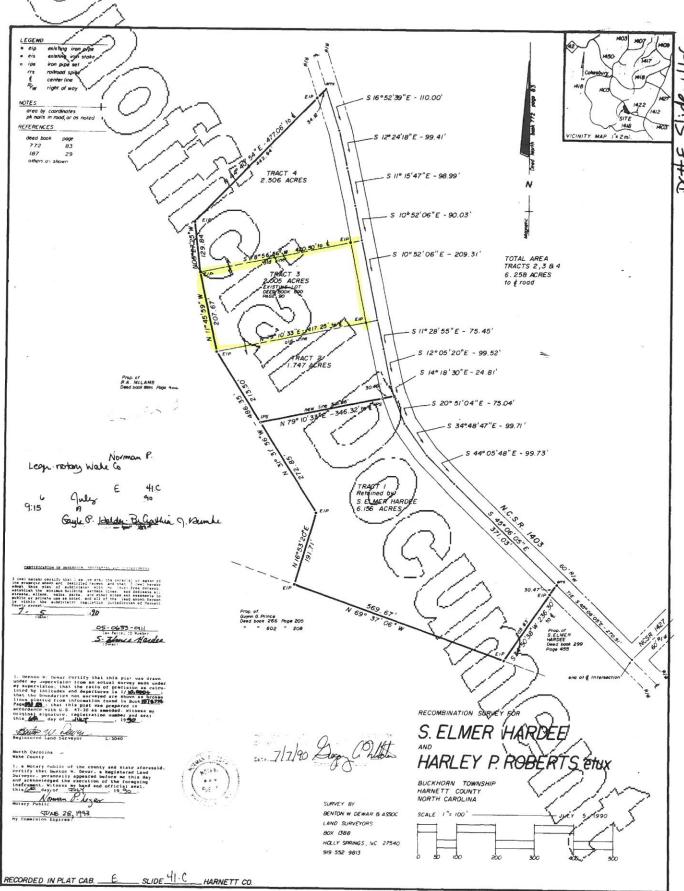
Date

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.

	u received a violation letter for a failing system from our office? []YES []NO thin the last 5 years have you completed an application for repair for this site? []YES []NO
Installer Septic T	me was built (or year of septic tank installation) 1978 of system Unknown ank Pumper Forever Clean r of System Unknown
2. \	Number of people who live in house?# adults# total# t
4. \ 5. l ⁻ 6. l	f you have a garbage disposal, how often is it used? [daily [] weekly [] monthly When was the septic tank last pumped? Dec. 2018 How often do you have it pumped? 15 years before f you have a dishwasher, how often do you use it? [] daily [every other day [] weekly [] monthly f you have a washing machine, how often do you use it? [] daily [] every other day [weekly [] monthly for you have a water softener or treatment system? [] YES [NO Where does it drain?
9. A 10. D	No 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 hemotherapy?] [] YES [] NO If yes please list
11. F 12. F	lave you put any chemicals (paints, thinners, etc.) down the drain? []YES [YNO lave you installed any water fixtures since your system has been installed? []YES [YNO If yes, lease list any additions including any spas, whirlpool, sinks, lavatories, bath/showers, toilets
14. H d	las any work been done to your structure since the initial move into your home such as, a roof, gutter rains, basement foundation drains, landscaping, etc? If yes, please list roof, gutters which were re there any underground utilities on your lot? Please check all that apply: [] Power [] Phone [] Cable [] Gas [] Water
fi	rescribe what is happening when you are having problems with your septic system, and when was this rst noticed? Fluid seeps out around tank lid. First noticed Fall 2017
The The	o you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy sins, and household guests?) [YYES [] NO If Yes, please list heavy usage (laundry day us multiple showers). System is much better since we have hea tank imped out 3 times over last war and pumper (Forever Clean) sushed out the lines to get rid of solids. Forever clean diagnosed plids in lines caused by faulty solid filter (they replaced) and tank not being pumped out for so long.

PC#E Slide 41-C



HARNETT COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH** 307 CORNELIUS HARNETT BOULEVARD LILLINGTON, NC 27546

EXISTING SEPTIC SYSTEM INSPECTION

Name: Wade Vancannon Phone #: 919.427.6745

Address: 101 Parker Drive Fuguay-Varina, NC 27526

Name of Mobile Home Park or S/D: NA

Name of Owner (if different): James & Judy Casper

Address of Owner (if different): 915 Cokesbury Rd. Fuquay-Varina, NC 27526

Property Location (State Road name and #): 915 Cokesbury Rd. (SR 1403)

Purpose of Inspection: 53'X64' Additions to Back of Home-Non-Bedroom (BRES1811-0020) & 40.4'x34.5' Appt add to inside of Exisitng Garage (BRES1811-0020)

Finishing of detached garage and attic over garage granted in 2005 existing tank (HTR#: 05-5-11835) - Preivious existing tank permit reapproved.

The aforementioned site has been evaluated by the Harnett County Health Department Environmental Health Section. At the time of inspection, there appeared to be a septic system serving this site. If the system should malfunction, the owner is responsible for any necessary repairs.

THIS INSPECTION IS VOID IF:

- 1. the intended use of the septic system should change, and/or
- 2. the system should fail or malfunction, and/or
- 3. the owner or tenant of the property change, and/or
- 4. after six months

BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM DO NOT DRIVE OR PARK ON SEPTIC SYSTEM

AUTHORIZATION OF EXISTING SYSTEM

Signature of Environmental Health Specialist

HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH 307 CORNELIUS HARNETT BOULEVARD LILLINGTON, NC 27546

EXISTING SEPTIC SYSTEM INSP	ECTION .
NAME J. m. Cuper	PHONE # 915-557-567/
ADDRESS 915 Charbony Rd. Formy Vine, N.C. 2752	
NAME OF MOBILE HOME PARK	
NAME OF OWNER (IF DIFFERENT)	
ADDRESS OF OWNER (IF DIFFERENT)	
PROPERTY LOCATION: STATE ROAD NAME AND #/9	63 Cokerbury
The aforementioned site has been evaluated by the Harner Environmental Health Section. At the time of inspection, the system serving this site. If this system should malfunction, any necessary repairs.	lere ambeared to be a sentio
THIS INSPECTION IS VOID IF: (1) the intended use of the septic system should change, and/or (2) the system should fail or malfunction, and/or (3) the owner or tenant of the property changes, and/or (4) after six months	

BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM DO NOT DRIVE OR PARK ON SEPTIC SYSTEM

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Sur Misal.	4/21/200
Signature of Inspector	Date The second control of the cont

1/05
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Application # 05500	11835

COUNTY OF HARNETT LAND USE APPLICATION Central Permitting . 102 E. Front Street, Lillington, NC 27546 Phone: (910) 893-4759	Fav: (040) 803 2702
	Commercial Commercial Management Commercial
LANDOWNER: Mailing Address: 915 COKESTBUR	4 ROAD
City: FUQUAY - VARINA State: DC zip: 17516 Phone #: 1.919.53	
APPLICANT: JIM CAS P1572 Mailing Address: 915 COKESBURY R	
City: FUOUAY - VARINA State: NC Zip: 27576 Phone #: 1.919, 5	57.3671
PROPERTY LOCATION: SR #: 1403 SR Name: COLUSIOURY Address: 915 COLUSIOURY Rd. Parcel: 050633 0210 PIN: 0633-17-4193	
VI A 2 A	171.
	Lot Size: 1,70,
Flood Plain: X Panel: 20 Watershed: Deed Book/Page: 182/508 Plat Bo	ok/Page: PGIC / 91-C
DIRECTIONS TO THE PROPERTY FROM LILLINGTON: 401 TOWARDS FUGURY- VARIA	
ONTO CHRISTIAN LIGHT ROAD! LEFT ONTO COXESRURY R	DAD: G.9mi
ON LEFT IS DRIVEWAM FINTRANCE,	
PROPOSED USE:	
☐ Sg. Family Dwelling (Sizex) # of Bedrooms # Baths Basement (w/wo bath) Garage	Deck
Multi-Family Dwelling No. Units	Deck
Manufactured Home (Sizex) # of Bedrooms Garage Deck	
□ Number of persons per household □ Business Sq. Ft. Retail Space Type	
□ Industry Sq. Ft Type □ Church Seating Capacity Kitchen	
Home Occupation (Size x) # Rooms Use	
Additional information:	
□ Accessory Building (Size x) Use	
Addition to Existing Building (Sizex) Use	
other tinish Garage of Attic overgarage Adding Dath, loc	Im Unitchonet
Additional Information: NOME OFFICE + hopbar 100m	arr, perera real
Water Supply: (County () Well (No. dwellings) () Other	
Sewage Supply: (_) New Septic Tank (_) Existing Septic Tank () County Sewer (_) Other	
Erosion & Sedimentation Control Plan Required? YES NO	
Property owner of this tract of land own land that contains a manufactured home w/in five hundred feet (500') of tract listed above	e? YES NO
Structures on this tract of land: Single family dwellings Wife Manufactured homes Other (specify)	a gauroge to
Required Residential Property Line Setbacks: Minimum Actual	ISIN MO
215	13/00
Front <u>35</u>	+ , co existino
Rear <u>25</u> <u>Lyo</u> + Wint	1000
side 10 40 Septic	to use evisting tank for
Corner 20 - AQVAGE	

If permits are granted I agree to conform to all ordinances and the laws of the State of North Carolina regulating such work and the specifications or plans submitted. I hereby swear that the foregoing statements are accurate and correct to the best of my knowledge.

Nearest Building

Signature of Owner/or Owner's Agent

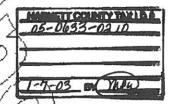
APRIL 7, 2005

Date

This application expires 6 months from the initial date if no permits have been issued

PROJECT: JIM CASTREC

915 COLUSBURY ROAD FUQUEY, VARIDA, NC 27501 (HARNETT COUNTY) 919.557.3671 TRACT 3
2.005 ACCES SITE PLAN APPROVAL DISTRICT RABO USE Finishing havoge #BEDROOMS_ 4/1/05 Zoning Administrator 1:10 House 1"=100' E of Coxie



Prepared by

Pope & Pope, Attorneys at Law, P.A. BO Box-790, Angier, N.C. 27501 File Nd. 02-872

STATE OF NORTH CAROLINA

COUNTY OF HARNEAT

OR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARMETT COUNTY, NC
2003 JAN 07 04:42:18 PM
BK:1709 PG:95-97 FEE:\$17.00
NC REVENUE STAMP:\$360.00
INSTRUMENT # 2003000360

SPECIAL

WARRANTY DEED

This INDENTURE is made this 27 day of December , 20 02 by and between Bankers Trust Company of California, N.A., whose address is 1 East 4th Street, Cincinnati, OH 45202 party of the first part; and James E. Casper and wife, Judith Casper, whose address is 112 Circle Drive, Angier, North Carolina 27501, parties of the second part.

WITNESSETH:

WHEREAS Grantor(s) for and in consideration of the Sum of Ten Dollars (\$10.00) and other good and valuable consideration, receipt of which is kereby acknowledged, have given, granted, bargained, sold and conveyed, and by these presents do hereby give, grant, bargain, sell and convey unto the Grantee(s) in fee simple. Said property being all of that certain blees, parcel or tract of land situated, lying and being in Buckhorn Township, HarnettCounty, North Carolina, and more particularly described as follows:

Street Address: 915 Cokesbury Road, Fuquay-Varina, North Carolina 27526 Parcel ID No.: 050633 0210

BEING all of Tract 3, containing 2.005 acres, more or loss, as shown by a survey by Benton W. Dewar & Associates, RLS, dated July 6, 1990 and recorded in Plat Cabinet E, Slide 41-C, of the Harnett County Registry.

Title Reference: See Book 1553, Page 833; Book 1302, Page 856; Book 915, Page 426; Book 600, Page 90; Book 591, Page 151, Harnett County Registry.

The herein described lands are conveyed to and accepted by the Grantees subject to all other easements, rights-of-way and restrictions shown on said map and listed on the public record.

This conveyance is expressly made subject to the lien created by Grantor's real 2002 Harnett County ad valorem taxes.

TO HAVE AND TO HOLD the above described lands and premises, together with all appurtenances thereunto belonging, or in anyway appertaining, unto the Grantees, their heirs, successors and assigns forever, but subject always, however, to the reservation(s) set forth above.

AND the said Grantor, party of the first part, covenant to and with said Grantees, parties of the second part, their heirs, successors, administrators and assigns that it is lawfully seized in fee simple of said lands and premises, and have full right and power to convey the same to the Grantees in fee simple (but subject, however, to the limitations set out above) and that said lands and premises are free from any and all encumbrances, except as set forth above, and that itself and its heirs, successors, administrators and assigns shall forever warrant and defend the title to the same lands and premises, together with the appurtenances thereunto appertaining unto the Grantees, their heirs, successors, administrators and assigns against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the Grantor has caused this instrument to be signed in its corporate name by its duly authorized officer and its seal to be hereunto affixed by authority of its Board of Directors, the day analysear first above written.

Bankers Trust Company of California, N.A. as Trustee, By, The Provident Bank as Attorney-In-Fact

By: Yrome Actellugilit (Seal)
Jerome A., Geselbracht, VP.

/ /
(/ / (m) +
By: Lebrall (athors)
Deborah Martin, Auth. Agent
STATE OF OHTO
COUNTY OF HAMILTON
I, a Notary Public in and for said County and State, do hereby certify that on the 27 day of necessary process. A like the comporation described herein and who being by me duly sworn, says that he she is the vp of Bankers Trust Company of California, N.A. the corporation described herein and which executed the foregoing instrument; and that the name of the corporation was subscribed thereto by said Legal Fracht. and that said VP subscribed its names thereto all by order of the Board of Directors of said corporation; and that said instrument is the act and deed of said corporation.
(/) ' ~ 2
Witness my hand and official stamp or seal, this the 27 day of December 20 02.
(Saal/Sama)
(Seal/Stamp) Charleve A. Swingle Notary Prising.
My Commission Expires: 10/14/04
CHARLENE F. SWINGLE
Notary Public. State of Onlo My Commission Entres Oct. 14, 2004
STATE OF _OHIO
I, a Notary Public in and for said County and State, do hereby certify that on the 27 day of
December 20 02 before me personally came <u>Deflorah Martin</u> with whom I am personally acquainted, who, being by me duly sworn, says that he/she is the <u>Auth Agenef</u> Bankers Trust Company of California, N.A., the corporation described herein and which executed the foregoing instrument; and that the name of the corporation was subscribed thereto by said Deborah and that said Auth subscribed its names thereto, all by order of the Board of Directors of said corporation; and that said instrument is the act and deed of said corporation.
Witness my hand and official stamp or seal, this the 21sh-day of necember, 20 02.
of the state of th
(Seal/Stamp)
Notary Public Notary Public
My Commission Expires: 10/14/04
CHARLENE F-SWINGLE Notary Public: State of Ortio My Commission Expires Co. 14, 2004
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