

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: Sharalyn Saliger @gmail.com
NAME Saliger, Sharalyn & Rory PHONE NUMBER 910 9871687
PHYSICAL ADDRESS 505 Crystal Spring Drive Sanford NC
MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____
IF RENTING, LEASING, ETC., LIST PROPERTY 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 4 Basement _____
Garage: Yes No Dishwasher: Yes No Garbage Disposal: Yes No
Water Supply: Private Well Community System County _____
Directions from Lillington to your site: 24/27 to buffalo lake rd turn left, follow up left into crestview sub,

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" must be attached to this application. Please inform us of any wells on the property by showing on your survey map.
2. 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 the denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership changes.

Sharalyn J Saliger 20190528
Signature Date

6/3/19

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) 2005
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? 50 gallons/month or day _____ county 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? Aug 18 How often do you have it pumped? yearly
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 _____
10. Do you put household cleaning chemicals down the drain? YES NO If so, what kind?
rid x
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 _____
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 Cable Gas Water
16. Describe what is happening when you are having problems with your septic system, and when was this first noticed?
One area of the yard has water rise up and sits until it drains usually w/ washing machine use
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 washing clothes

Health Department
27754
3-7554
3-942

HT 04-50010987

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

16634

OPERATIONS PERMIT

Name: (owner) Danny Norris New Installation Septic Tank
 Property Location: SR# 1115 Repairs Nitrification Line
 Subdivision Crestview Ct Lot # 160
 Tax ID # _____ Quadrant # _____
 Contractor: Ted Brown Registration # _____

Basement with Plumbing: Garage: Lines OK Tanks OK 3-21-05
 Water Supply: Well Public Community QHW
 Distance From Well: 50 ft. Needs pump & alarm check

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other Pump to Tire Chips

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons

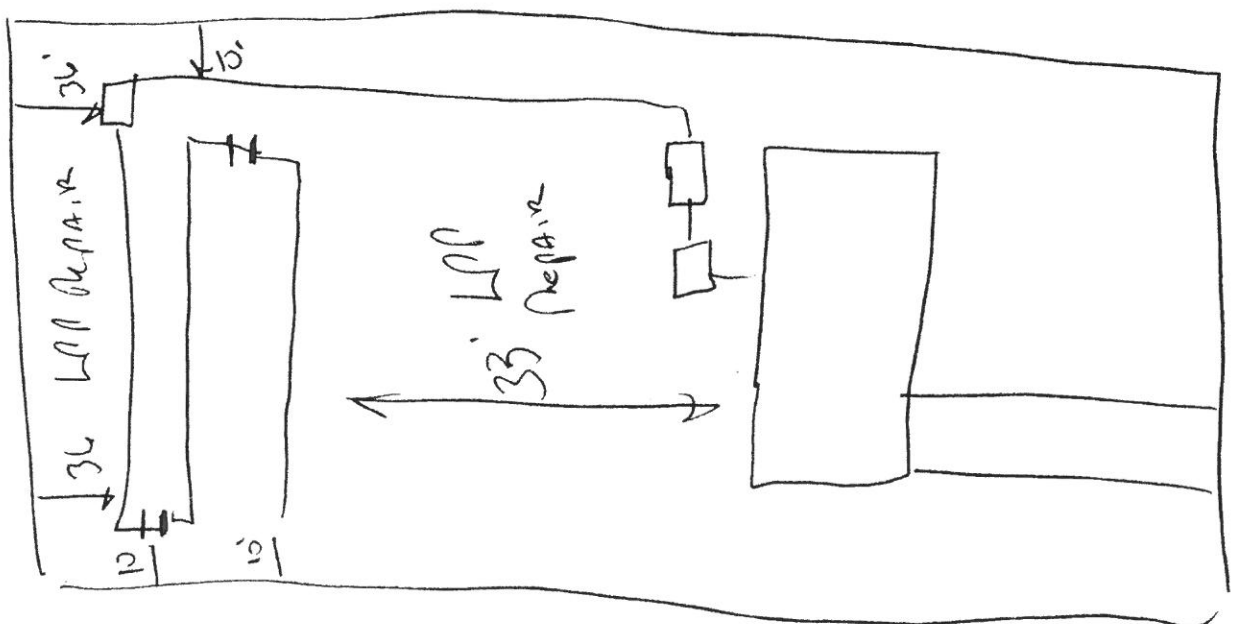
Subsurface Drainage Field No. of ditches 1 exact length of each ditch _____ ft. width of ditches 3 ft. depth of ditches 18 2/4 in.

French Drain Required: _____ Linear feet

Date: 01 27-06

Inspected by: Jim Waters
Environmental Health Specialist

PERMIT NO. 21510



HARNETT COUNTY HEALTH DEPARTMENT

HTE 0450010987

IMPROVEMENT PERMIT

21510

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) Danny Norris New Installation Septic Tank
 Property Location: SR# 1115 Repairs Nitrification Line

Subdivision Crestview Lot # 160

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (54x39) Lot Size: 0.35 AC

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other Pump to Conventional

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons

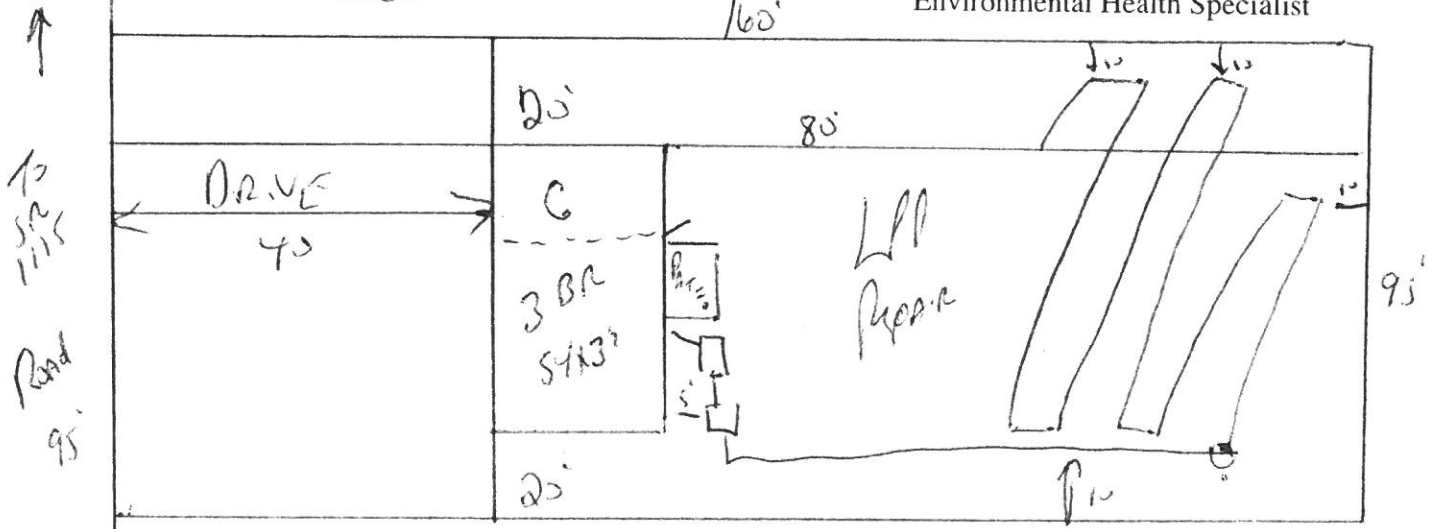
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 200 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet

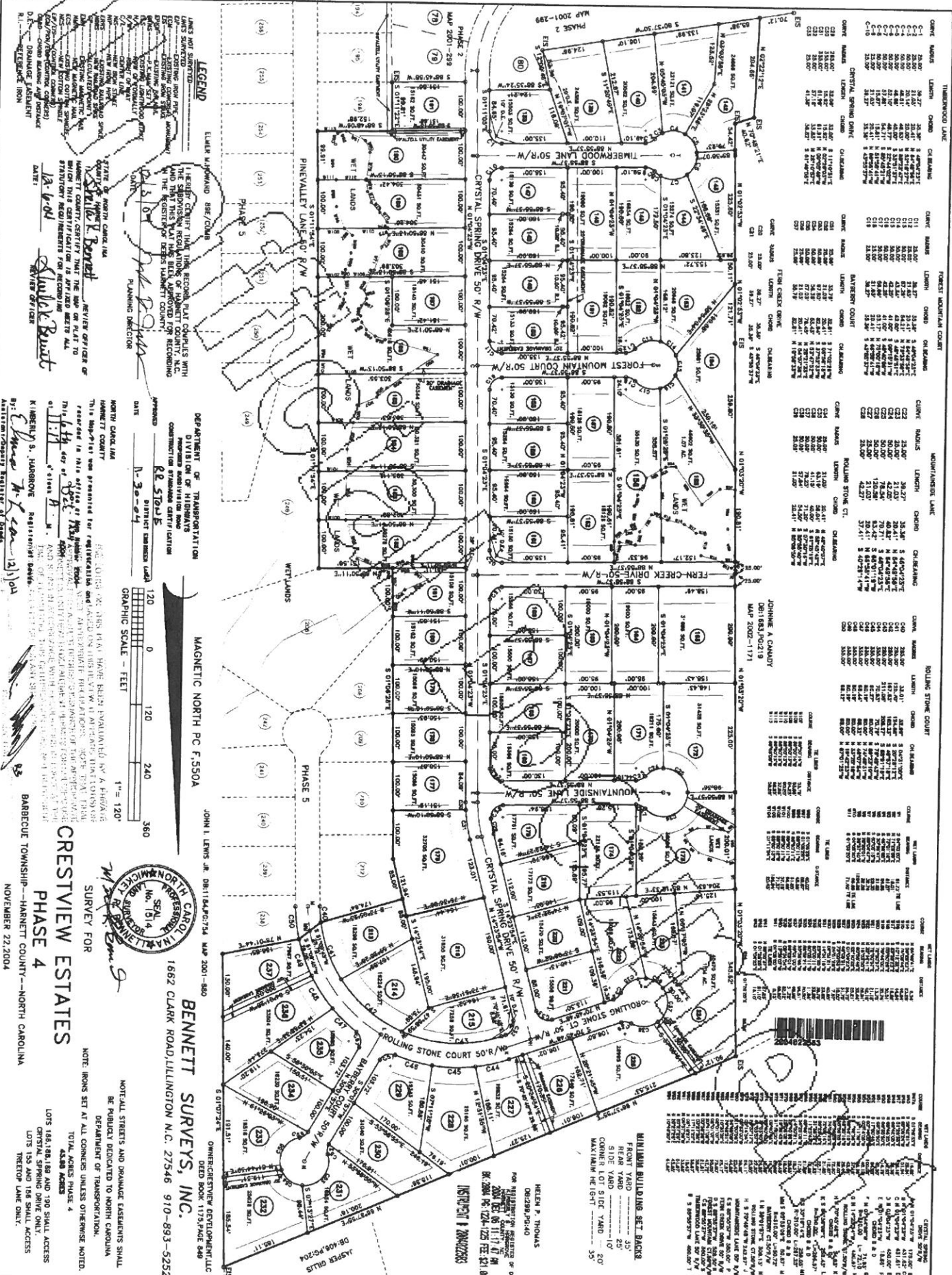
Date: 01-11-05

Signed: [Signature]
 Environmental Health Specialist

This permit is subject to revocation if site plans or intended use change.



Maintain All Setbacks



TIMBERWOOD LANE

OWNER NAME	LENGTH	CHANG	CH/REMARKS
C-1	25.00'	25.00'	25.00'
C-2	25.00'	25.00'	25.00'
C-3	25.00'	25.00'	25.00'
C-4	25.00'	25.00'	25.00'
C-5	25.00'	25.00'	25.00'
C-6	25.00'	25.00'	25.00'
C-7	25.00'	25.00'	25.00'
C-8	25.00'	25.00'	25.00'
C-9	25.00'	25.00'	25.00'
C-10	25.00'	25.00'	25.00'

FOREST MOUNTAIN COURT

OWNER NAME	LENGTH	CHANG	CH/REMARKS
F-1	25.00'	25.00'	25.00'
F-2	25.00'	25.00'	25.00'
F-3	25.00'	25.00'	25.00'
F-4	25.00'	25.00'	25.00'
F-5	25.00'	25.00'	25.00'
F-6	25.00'	25.00'	25.00'
F-7	25.00'	25.00'	25.00'
F-8	25.00'	25.00'	25.00'
F-9	25.00'	25.00'	25.00'
F-10	25.00'	25.00'	25.00'

ROLLING STONE COURT

OWNER NAME	LENGTH	CHANG	CH/REMARKS
R-1	25.00'	25.00'	25.00'
R-2	25.00'	25.00'	25.00'
R-3	25.00'	25.00'	25.00'
R-4	25.00'	25.00'	25.00'
R-5	25.00'	25.00'	25.00'
R-6	25.00'	25.00'	25.00'
R-7	25.00'	25.00'	25.00'
R-8	25.00'	25.00'	25.00'
R-9	25.00'	25.00'	25.00'
R-10	25.00'	25.00'	25.00'

MOUNTAINSIDE LANE 50' R/W

OWNER NAME	LENGTH	CHANG	CH/REMARKS
M-1	25.00'	25.00'	25.00'
M-2	25.00'	25.00'	25.00'
M-3	25.00'	25.00'	25.00'
M-4	25.00'	25.00'	25.00'
M-5	25.00'	25.00'	25.00'
M-6	25.00'	25.00'	25.00'
M-7	25.00'	25.00'	25.00'
M-8	25.00'	25.00'	25.00'
M-9	25.00'	25.00'	25.00'
M-10	25.00'	25.00'	25.00'

CRISTAL SPRING DRIVE 50' R/W

OWNER NAME	LENGTH	CHANG	CH/REMARKS
C-1	25.00'	25.00'	25.00'
C-2	25.00'	25.00'	25.00'
C-3	25.00'	25.00'	25.00'
C-4	25.00'	25.00'	25.00'
C-5	25.00'	25.00'	25.00'
C-6	25.00'	25.00'	25.00'
C-7	25.00'	25.00'	25.00'
C-8	25.00'	25.00'	25.00'
C-9	25.00'	25.00'	25.00'
C-10	25.00'	25.00'	25.00'

MINIMUM BUILDING SET BACKS

TYPE	REAR YARD	SIDE YARD	CORNER LOT SIDE YARD	MAXIMUM HEIGHT
RESIDENTIAL	5'	5'	5'	35'
COMMERCIAL	10'	10'	10'	40'
INDUSTRIAL	15'	15'	15'	45'

LEGEND

- ELMER WILKINSON RES/CO/DB
- PLANNING DIRECTOR
- STATE OF NORTH CAROLINA
- REGISTERED PROFESSIONAL SURVEYOR
- NO. 1514
- DATE: 12-1-04

DEPARTMENT OF TRANSPORTATION

DIVISION OF HIGHWAYS

CONSTRUCTION REVIEW DIVISION

RE: STATE

APPROVED: 1-30-04

DATE: 1-30-04

ON GRAPHIC SCALE - FEET

1" = 120'

BENNETT SURVEYS, INC.

1662 CLARK ROAD, LILLINGTON N.C. 27546 910-893-5252

OWNER: CRESTVIEW DEVELOPMENT, LLC

DEED BOOK 1173/PAGE 848

DATE: 08-06-2004

INSPECTED BY: [Signature]

CRESTVIEW ESTATES

PHASE 4

BARBOCUE TOWNSHIP--HARNETT COUNTY--NORTH CAROLINA

NOVEMBER 22, 2004

SHEET 2 OF 2 JOB NO. 04495PH4

NOTICE TO THE PUBLIC

THIS MAP OR PLAN HAS BEEN EVALUATED BY A PROFESSIONAL SURVEYOR AND FOUND TO BE IN ACCORDANCE WITH THE REQUIREMENTS OF THE PROFESSIONAL SURVEYING ACT AND THE REQUIREMENTS OF THE PROFESSIONAL SURVEYING BOARD. THE SURVEYOR'S OFFICE HAS REVIEWED THE MAP OR PLAN AND HAS FOUND IT TO BE IN ACCORDANCE WITH THE REQUIREMENTS OF THE PROFESSIONAL SURVEYING ACT AND THE REQUIREMENTS OF THE PROFESSIONAL SURVEYING BOARD.

NOTICE TO THE PUBLIC

THESE LOTS ARE BEING OFFERED FOR SALE BY THE DEVELOPER. THE DEVELOPER HAS REPRESENTED THAT THE LOTS ARE BEING OFFERED FOR SALE AS IS. THE BUYER SHALL BE RESPONSIBLE FOR VERIFYING THE ACCURACY OF THE MAP OR PLAN AND THE ACCURACY OF THE SURVEYING DATA. THE DEVELOPER MAKES NO WARRANTY, EXPRESS OR IMPLIED, AS TO THE ACCURACY OF THE MAP OR PLAN OR THE ACCURACY OF THE SURVEYING DATA.

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FOR REGISTRATION REGISTER OF DEEDS
 KIMBERLY S. HARGROVE
 HARNETT COUNTY, NC
 2006 FEB 14 04:42:32 PM
 BK: 2109 PG: 546-548 FEE: \$17.00
 NC REV STAMP: \$367.00
 INSTRUMENT # 2006002530

HARNETT COUNTY TAX ID#

93-9587-82-3206-23

2/14/06 BY [Signature]

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 367.00

Parcel Identifier No. 9587-82-3206 Verified by _____ County on the _____ day of _____, 20____
 By: _____

Mail/Box to: THE BARFIELD LAW FIRM, 2929 Breezewood Avenue, Ste 200, Fayetteville, NC 28303

This instrument was prepared by: THE BARFIELD LAW FIRM, 2929 Breezewood Avenue, Ste 200, Fayetteville, NC 28303

Brief description for the Index: LT 160, PH 4, CRESTVIEW ESTATES

THIS DEED made this 13th day of February, 20 06, by and between

GRANTOR

GRANTEE

Cumberland Homes, INC
 108 Commerce Drive
 Dunn, NC 28335

Sharalyn Jenice Tennis Saliger and husband,
 Rory J. Saliger
 505 Crystal Springs Drive
 Sanford, NC 27332

The designation Grantor and Grantee as used herein shall include said parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter 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 does grant, bargain, sell and convey unto the Grantee in fee simple, all that certain lot or parcel of land situated in the City of Sanford, Barbecue Township, Harnett County, North Carolina and more particularly described as follows:

BEING ALL OF LOT 160 OF CRESTVIEW ESTATES SUBDIVISION, PHASE 4 AS SHOWN ON PLAT MAP RECORDED IN MAP # 2004-122 AND 1224 HARNETT COUNTY REGISTRY, NORTH CAROLINA.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2017 page 584

A map showing the above described property is recorded in Plat Book 2005 page 947

NC Bar Association Form No. L-3 © 1976, Revised © 1977, 2002

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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 has done nothing to impair such title as Grantor received, and Grantor will warrant and defend the title against the lawful claims of all persons claiming by, under or through Grantor, other than the following exceptions: Ad valorem taxes. Restrictions and easements of record.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

Cumberland Homes, Inc. a North Carolina Corporation

(SEAL)

(Entity Name)

By: [Signature]

Title: President, Danny E. Norris



(SEAL)

By: _____

Title: _____

(SEAL)

By: _____

Title: _____

(SEAL)

State of North Carolina - County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____

personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public

State of North Carolina - County of Harnett

I, the undersigned Notary Public of the County and State aforesaid, certify that Danny E. Norris personally came before me this day and acknowledged that he is the President of Cumberland Homes, Inc. a North Carolina Corporation, a North Carolina or corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), 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, this 13 day of February, 2006

My Commission Expires: 03/10/2009

[Signature]
Notary Public

State of North Carolina - County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____

Witness my hand and Notarial stamp or seal, this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public

The foregoing Certificate(s) of _____ is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

By: _____ Register of Deeds for _____ County
Deputy/Assistant - Register of Deeds