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

0		EMAII	. ADDRESS:	airelizablthglays
NAME CLOURE GROW	1	PHONE	NUMBER 5	(40)597-5776 g
PHYSICAL ADDRESS 227	Arbor Cres	t lan	e lill	ington, NC 27541
MAILING ADDRESS (IF DIFFFERENT	THAN PHYSICAL)			0 1
IF RENTING, LEASING, ETC., LIST PR	OPERTY OWNER NAME	-	-	
Arbor Crest	97			,58 acre
SUBDIVISION NAME	LOT #/TRACT #		TE RD/HWY	SIZE OF LOT/TRACT
Type of Dwelling: [] Modular	[] Mobile Home	Stick built	[] Other	
Number of bedrooms 3	[] Basement			
Garage: Yes [] No [v]	Dishwasher: Yes M	No[]		Garbage Disposal: Yes [] No [/]
Water Supply: [] Private Well	[] Community System	em	County	
Directions from Lillington to your s	ite:			
			A subject of the second	
In order for Environmental Heal	th to help you with your r	epair. vou wi	ll need to com	ply by completing the following:
1. A <u>"surveyed and recorded</u>	map" and "deed to your pro	perty" must b	e attached to th	is application. Please inform us of any
	owing on your survey map.			
uncovered, property lines f	and the distribution box will	need to be und	overed and pro	perty lines flagged. After the tank is has been placed, you will need to call
us at 910-893-7547 to conf	irm that your site is ready fo	or evaluation.		
our system must be repaired with	n 30 days of issuance of the	Improvement	Permit or the t	ime set within receipt of a violation
etter. (Whichever is applicable.)				
By signing below, I certify that all of	the above information is co	orrect to the be	est of my know	edge. False information will result in
he denial of the permit. The permi	is subject to revocation if t	he site plan, in	tended use, or	ownership changes.
Plande	916	16	2/30/10	
Signature			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.

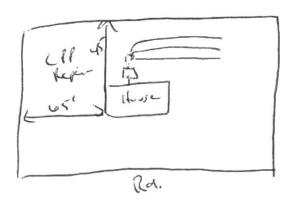
Have you received a violation letter for a failing system from our office? [] YES [V] NO
Also, within the last 5 years have you completed an application for repair for this site? [] YES [V] NO
Year home was built (or year of septic tank installation)
Installer of system
Septic Tank Pumper
Designer of System
1. Number of people who live in house?# adults # children# to
2. What is your average estimated daily water usage? gallons/month or daycount
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 [] wee
6. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] month
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? [V] YES [] NO
9. Are you or any member in your household using long term prescription drugs, antibiotics or
chemotherapy?] [] YES [\sqrt{j}] NO If yes please list
10. Do you put household cleaning chemicals down the drain? [] YES [V] NO If so, what kind?
11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES [V] 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, gut
drains, basement foundation drains, landscaping, etc? If yes, please list
15. Are there any underground utilities on your lot? Please check all that apply:
[V] Power [] Phone [] Cable [] Gas [V] Water
16. Describe what is happening when you are having problems with your septic system, and when was t
first noticed?
Home inspection uncovered some deterioration
- OF the tank & D boy
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 [V] NO If Yes, please list

E NETT COUNTY HEALTH DEPAI 1ENT ENVIRONMENTAL HEALTH SECTION

Nº 12613

OPERATIONS PERMIT

Name: (owner)	IAK Day Co. Inc		New Installation	Septic Tank
Property Location:	sr#_27		Repairs	☐ Nitrification Line
	Subdivision Arbercost		Lot #	
	TAX ID#			
Contractor:	Re Ray		Registration #	
Basement with Plum	bing: Ga	rage: 🔲		
Water Supply:	Well Public Co	mmunity		
Distance From Well:	ft.			
Following are the sp	pecifications for the sewage di	isposal sys	tem on above captioned	d property.
Type of system:	Conventional	ner Lystys	· Agregate Trench	LINWS-95-3R
Size of tank:	Septic Tank: 1000 gallons	Pu	mp Tank: gal	lons
Subsurface Drainage Field	No. of exact length of each ditch	80_ft		pth of tches Zero8 in.
French Drain:	Linear feet		1 - 1 - 0	
		Date:		2 -
PERMIT NO. 15	404	Inspected	by: Environmental H	ealth Specialist



IMPROVEMENT PERMIT

Nº 1540

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) MAK Deu Co. Inc.	New Installation Septic Tank
Property Location: SR#27	☐ Repairs ☑ Nitrification Line
Subdivision Arboi erist	Lot #_ 7
Tax ID #	Quadrant #
Number of Bedrooms Proposed: Lo	ot Size: 15%ac
Basement with Plumbing: Garage:	
Water Supply: Well Public Community	
Distance From Well:ft.	
Following is the minimum specifications for sewage disposal sys final approval.	
Type of system: Conventional Other Polyplan	vene Agegrephic Trench System 1445-45-31
Size of tank: Septic Tank: 1000 gallons Pu	
Subsurface No. of exact length Drainage Field ditches of each ditch for the substitution of each ditch.	width of depth of t. ditches 2 ft. ditches 30-18 in.
French Drain Required: Linear feet	
Date:	10-20-98
This permit is subject to revocation if site plans or intended use change.	Environmental/Health Specialist

RU

Maintain Settacks

Contractor to medi en site
prior to installing

Statt at 30"

The state of the s	and the second		magas 5	CERTIFICATION OF OWNERSHIP, DEDICATION AND JURISDICTION LIPE) hereby earthy that it am (we are) the award(s) or agent of the property shown and described hereon and that I (we) hereby depth the plan of muchation with my (ear) free consent, satisfain the minimum building authoric flows, after described in the minimum building authoric flows free described in the	THE LOT(S) ON THIS PLAT HAVE BEEN EVALUATED BY A POPVATE CONSULTANT, BASED ON THIS REVERN, IT APPREASE THAT LOT(S) ON THIS TEXT APPROPRIATE REGULATION, MOTE THAT I FAVOR AND AND ADDRESS THAT APPROPRIATE WHICH EACH OF RECURRES SESSUANCE OF THE PROPRIATE OF THE PROPRIATE OF SPECIFIC USE MAY ATT THE TIME OF PERMITTING THE PROPRIATE OF A PROPRIATE OF A STATE OF THE PROPRIATE OF A PERMIT FOR ANY STEE WORK, THE PROPRIATE APPROVAL OR A PERMIT FOR ANY STEE WORK.	I HERREY CERTBY THAT THIS RECORD PLAT COMPLES WITH THE SUBDIVISION REGULATIONS OF MAINETT COUNTY, M.C., MAI THAT RECORDING THE R
ACT Brain by Laborated States ACT	the Sarriged time to Francis Corner) Listing to the Desired Corner)	To go of the state	NCSR 20002	MC HAM	C-4 384.312 C-7 384.312 C-7 384.312 C-1 38	Municipal in company and a serial company of the co
ARBOR CREST SUBDIVISION TOWNSHIP HEIL'S CREEK COUNTY HARHETT CAROLINA CATE: AUGUST 25,1988 DONE: RA-30 TAX PARCEL D 9: 07-0880-0021	DEPAREMENT OF TRANSPORTATION DIVERSITY OF HIGHWAYS DIVERSITY OF THE PROPERTY ROME CONSTRUCTIVE OF THE PROPERTY ROME APPROPRIED TO THE COMMON OF THE PROPERTY	Parent 42.98 Slam B. Orban	TO ALLY BYTO DO STATE OF THE PROPERTY OF THE P		MART THE PRESENT LAW RESPONDE AND REW HOW HOW A CASE OF THE PRESENT LAW RESPONDE AND REW HOW HOW A CASE OF THE PRESENT LAW REW HOW AND	PSENTE LIMITY CHIND CHINDANN C-16 ARRAY: MARKET WATER THE C-1 X MARK
BENNETT SURVEYS, INC. Rt.e., Box 134, Lillington, KC. 27946 910-923-5252 TOT 0 3URVEYED BY RWS FIELD BOOK SCALE: [- 200 Dealer BY: NRB 95051A	OWNERS/DEVELOPERS: M.A.K. DEVELOPMENT CO.,L.L.C. 106 PINECROFT ROAD ANGIER N.C.,27501 910-639-7424		SETBACK LINES SETBACK LINES 35.00' FRONT A.A. SETWIN THE RAW A. CANAGE THE THE TATE CORNER LOT 20.00' SIDES A. C. SETWIN TATE CORNER LOT 20.00' SIDES A. SETWIN TATE MAXIMUM HEIGHT 35.00' M. SETWIN TATE MAXIMUM HEIGHT 35.00'	Garden and Later	DB 1226 PC 829 WACHERIC WORTH	

514 - 86 # Jum

For Registration Kimberly S. Hargrove Register of Deeds Harnett County, NC Electronically Recorded 2019 Dec 30 02:51 PM NC Rev Stamp: \$ 292.00 HARNETT COUNTY TAX ID# 0119 07 Book: 3769 Page: 631 - 632 Fee: \$ 26.00 Instrument Number: 2019019301 12-30-2019 BY TW Submitted electronically by Adams, Howell, Sizemore & Adams, P.A. in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds. NORTH CAROLINA GENERAL WARRANTY DEED Excise Tax: \$292.00 Parcel Identifier No. 110680 0119 07 Verified by ,20 County on the day of By: Mail/Box to: GRANTEE This instrument was prepared by: Currie Tee Howell, Adams, Howell, Sizemore & Adams, P.A. Brief description for the Index: Lot 7/Arbor Crest Subdivision THIS DEED made this 30th day of December, 2019, by and between **GRANTOR** GRANTEE Sarah L. Erbaugh Levan (f/k/a Sarah L. Erbaugh) Claire Elizabeth Gray, Unmarried and husband, Eric Levan 103 Kelsey Court 227 Arbor Crest Ln Lillington, NC 27546 Clayton, NC 27520 Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership. 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, parcel of land or condominium unit situated in Neill's Creek Township, Harnett County, North Carolina and more particularly described as follows: BEING ALL OF LOT 7, CONTAINING 0.58 ACRES, MORE OR LESS AS SHOWN ON MAP ENTITLED. "SURVEY FOR ARBOR CREST SUBDIVISION", PREPARED BY BENNETT SURVEYS, INC.,,MICKEY R. BENNETT, RLS, DATED AUGUST 25, 1998, AND RECORDED IN MAP NO. 98-415, HARNETT COUNTY REGISTRY. All or a portion of the property herein conveyed ____ includes or ___ does not include the primary residence of a Grantor.

NC Bar Association Form No. 3 © Revised 7/2013
Printed by Agreement with the NC Bar Association
North Carolina Bar Association – NC Bar Form No. 3
North Carolina Association of Realtors, Inc. – Standard Form 3

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 free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions: Subject to all easements, rights-of-way, covenants and other restrictions as shown on the public record or as would be disclosed by an accurate survey and inspection of the land. IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written. GRANTOR(S): · Whatstati Clur L. Erbaugh Levan (f/k/a Sarah L. Erbaugh) Eric Levan Mary Couralin - County of Harriet I, the undersigned Notary Public of the County or City of Harrice and State aforesaid, certify that Sarah L. Erbaugh Levan (f/k/a Sarah L. Erbaugh) and personally appeared before methis day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 30 day of December, 2019. Notary's Printed or Typed Name James Crowder My Commission Expires: **NOTARY PUBLIC** Alamance County, NC (Affix Seal)

NC Bar Association Form No. 3 © Revised 7/2013
Printed by Agreement with the NC Bar Association
North Carolina Bar Association – NC Bar Form No. 3
North Carolina Association of Realtors, Inc. – Standard Form 3