

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

jane@seejaneseilnc.com EMAIL ADDRESS:

NAME Robert Lambert PHONE NUMBER 919-422-6375

PHYSICAL ADDRESS 165 Bess Lane Angier NC 27501

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 10279 Ten Ten Rd. Raleigh NC 27603

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

Adams Pointe 3 Wed Denning/Bess Ln .574
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 No Garbage Disposal: Yes No

Water Supply: Private Well Community System County

Directions from Lillington to your site: 210 to James Norris Rd, left
Wed Denning, Rt onto Bess Lane

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.

Robert W Lambert 4-7-20
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 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) 2003

Installer of system ?

Septic Tank Pumper ?

Designer of System ?

1. Number of people who live in house? 2 # adults _____ # children 2 # total

2. What is your average estimated daily water usage? 35 gallons/month or day Harratt 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 never

4. When was the septic tank last pumped? _____ How often do you have it pumped? Never

5. If you have a dishwasher, how often do you use it? daily every other day weekly monthly

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? _____

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?
Septic Inspection attached.

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 _____

02-07-3950

BENNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

No 15209

OPERATIONS PERMIT

Name: (owner) G. Green Contractor New Installation Septic Tank
 Property Location: SR# 1439 Repairs Nitrification Line
 Subdivision Adam Point Lot # 3
 TAX ID# _____ Quadrant # _____
 Contractor: Mike Ray Registration # _____

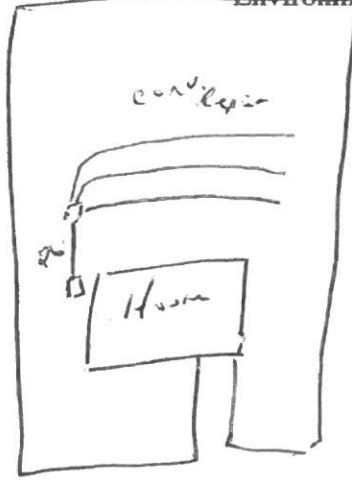
Basement with Plumbing: Garage: Permitted for 3 bedrooms
 Water Supply: Well Public Community
 Distance From Well: 50 ft.

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

Type of system: Conventional Other _____
 Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface Drainage Field: No. of ditches 3 exact length of each ditch 80 ft. width of ditches 3 ft. depth of ditches 18-21 in.
 French Drain: _____ Linear feet

Date: 8/13/2002
 Inspected by: Bryan M. Smith
 Environmental Health Specialist

PERMIT NO. 17676



R.A.

Septic System Inspection Report

Client Name MICHAEL & PRISCILLA DESIMONE
 Prop. Addr. 65 BESS LANE
ANGIER, NC 27501
 Email Address MPDESIMONE5@GMAIL.COM
 Phone No 732-763-9896
 Agent Name STACEY DELGADO

Wastewater Solutions, LLC
 14 Apothecary Ct., Garner, NC 27529
 Phone: 919-661-8602
 Fax: 919-661-8609
 Email: sleonardwvs@gmail.com
Certified Inspectors
 Scott Leonard 27321
 Terry Wiggins 49721
 Nolan Leonard 60801

Date / Time of Inspection: 3/19/2020

IMPORTANT NOTICE / DISCLAIMER

This inspection report indicates the present condition of the system based on recommended inspection procedures, but is in no way a guarantee or warranty of future performance. The inspection report excludes and does not intend to cover components that are concealed or are otherwise not observable. No tests, unless specifically stated, were performed on any system inspected to ascertain the efficiency of the function/utility thereof, and no warranty, express or implied, relative thereto is hereby given.



Homeowner / Occupant Records & Data, as available

Information collected pursuant to this section is to be provided voluntarily and at the discretion of the client, client's representative or property owner. The client, client's representative or property owner is solely responsible for record and data accuracy and completeness. The inspector assumes no responsibility for the accuracy of information provided by the client, client's representative or property owner.

Pre-Inspection Contract, signed by Client is attached to Inspection

Source of Records & Data

Records and data were given to the inspector by: Property Owner Buyer Realtor Other

MLS Stated Bedrooms 3 System Sized for Bedrooms 3

Resident Data

Age of home HOUSE BUILT IN 2002

Yes No Incon. Are all wastewater facilities within property lines

Yes No Incon. Is there a designated repair field

Septic Permit is Attached to this Report Septic Permit is not available at the time of this inspection

System Requires an Operator Yes No Incon. If yes, Operators Name:

Type of Water Supply Well Public Water Community Well

Setback Distances

10 ft. from house or structure

NA ft. from well if applicable

15 ft from property line

Information reported in this section may in part be based on homeowner records and data. The inspector assumes no responsibility for inaccurate records and data.

Yes No Incon. All grey and black water are routed to the Septic Disposal System. Comments:

Yes No Incon. A water softener / treatment appliance is present and may backflush to the Septic System. (Salt can cause breakdown of clayey soils reducing the soils ability to function properly)

Yes No Incon. A garbage disposal is routed to the Septic System and may place added burden on it. (Introduces much more organics into the system - tank should be pumped more often)

System Component Evaluation

Septic Tank

Type of Septic System: Conventional Septic System LPP System Other _____

Type of Tank, if present: Concrete Plastic Other _____

Size of Tank: **1000 GALLON**

Septic Tank Inlet Riser is: Above Grade At Grade Below Grade Not Present

Septic Tank Outlet Riser is: Above Grade At Grade Below Grade Not Present

Condition of Septic Tank Lids **NO ISSUES NOTED WITH TANK LIDS**

Yes No Incon. **NA** Standing water present at riser locations. Comments: _____

Yes No Incon. **NA** Risers watertight / no evidence of infiltration

Yes No Incon. **X** There is evidence of structural damage to the baffle or superstructure to the tank.

Comments: **WATER LEVEL IS BELOW THE OUTLET PIPE WHICH OFTEN INDICATES TANK LEAKAGE**

Indicate if any of the following components or accessories are present: Outlet Tee Effluent Filter Other _____

Comments / Condition: **PVC TEE IS OKAY**

Yes No Incon. Scum and sludge layer measurements were taken. Inlet: Scum 1 In. Sludge 5 In.
Outlet: Scum 0 In. Sludge 1 In.

(pump tank if sludge is 1/3 of volume and or scum is 1/5 of volume, or approx. every three years)

Comments: **SOLIDS LEVELS IN THE TANK INDICATE TANK CLEANING IS NOT RECOMMENDED AT THIS TIME.**

Yes No Inlet pipe where entering the tank is free of obstruction or issue?

Yes No **X** Water level in Septic Tank is relative to Inlet & Outlet? **WATER LEVEL IS BELOW OUTLET PIPE**

Yes No Effluent leaves Outlet? **INCONCLUSIVE DUE TO LOW WATER LEVEL**

Yes No Roots present in Tank **SMALL GRASS ROOTS**

Yes No **X** Tank pumping is Requested at time of Inspection?

Date Tank was last Pumped ? (Unknown?)

Distribution Device

Yes No Incon. Distribution box present. Conventional Pressure Manifold Other _____

Comments: **DBOX IS DETERIORATED**

Yes No Incon. Flow split evenly (Flow adjusters utilized)

Comments: **BOX IS CURRENTLY FUNCTIONAL AND FLOW IS EVENLY SPLIT BUT CONCRETE IS IN POOR CONDITION DUE TO DETERIORATION.**

Yes No **X** Incon. Bull Run valve present?

Pump Tank

Yes No **X** Incon. Does system contain a pump or dosing tank?

Yes No Incon. There is evidence of structural damage to the tank?

Yes No Incon. Access Risers in Place? Condition? _____

Yes No Incon. There is evidence of surface water infiltrating into pump chamber.

Yes No Incon. Pump and panel appear to be in good condition and operating properly.

Yes No Incon. High water alarm present

Yes No Incon. Can the alarm be activated?

Pump tank doses to Pressure Manifold Distribution Box

Comments: **NO PUMP TANK PRESENT**

Photos:

TANK INLET



TANK OUTLET & TEE



SLUDGE LEVEL INLET



SLUDGE LEVEL OUTLET



Disposal Field Evaluation

3

3 Number of Lines **3' WIDE X 80' LONG**

Brief Description of System Type: **GRAVITY TO CONVENTIONAL TRENCH**

Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Impermeable surface such as conc., asphalt, or brick is located approx. over the absorption field
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Good vegetative cover over the absorption field.
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Heavy objects (cars, pools, buildings) or evidence from such objects are in the vicinity of the field.
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Stormwater, sump pumps, foundation drains, or roof runoff is diverted to flow into the septic system or on to the absorption field.
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Surface runoff water is ponding on the absorption field.
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Trees, large shrubs or other plants with extensive root systems were observed in the vicinity.
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Is there surfacing effluent, wet spots, burnt out grass, ground staining or odor evident (circle)
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Patches of lush green grass over the soil absorption system or around any tankage.
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Incon. <input type="checkbox"/>	_____	Soil absorption system probed to check for excessive moisture, odor and /or effluent?
Result of investigation into soil absorption system:			TREES IN THE VICINITY OF THE SEPTIC SYSTEM MAY CAUSE ROOT BLOCKAGE	

Results & Recommendations

Results:

Inspection revealed (indicate one or more of the following):

- System meets minimum standards
- System is substandard or has substandard components. (Note reasons for indicating this on comment line below)
- Structural damage to the system (such as cracks in the septic tank or a soil absorption system cave-in).
- Further evaluation by health dept representative or repair professional is recommended.

Comments: **THE WATER LEVEL IN THE SEPTIC TANK IS BELOW THE OUTLET PIPE. THE ONLY WAY WATER SHOULD GET OUT OF THE TANK IS THROUGH THE OUTLET PIPE SO IF THE WATER IS BELOW THE PIPE IT IS LIKELY LEAKING.**

Additional Photos:

DISTRIBUTION BOX



LOW WATER LEVEL IN TANK AND VOIDS AROUND PIPE



Recommendations: **FURTHER EVALUATION BY A REPAIR PROFESSIONAL IS RECOMMENDED TO DETERMINE IF THE TANK CAN BE REPAIRED OR WILL NEED REPLACEMENT. THIS WILL LIKELY REQUIRE THAT THE TANK BE EMPTIED AND FURTHER INSPECTED FOR STRUCTURAL INTEGRITY.**
WE ALSO RECOMMEND THAT THE DETERIORATED DISTRIBUTION BOX BE REPLACED AND FLOW TESTED TO VERIFY EQUAL FLOW TO EACH TRENCH. ADD SPEED LEVELERS AS NECESSARY.

INSPECTOR SIGNATURE

TERRY WAGGINS

49721

Inspector's Signature

Map # 2001-1100



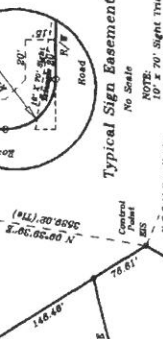
Right-of-way Curve Data

CURVE	RADIUS	LENGTH	CHORD	CHORD BEARING
C-1	325.00'	58.77'	16.25'	S 39°13'34"W
C-2	425.00'	54.89'	16.25'	S 44°14'37"W
C-3	425.00'	54.89'	16.25'	S 44°14'37"W
C-4	275.00'	46.36'	13.97'	N 25°04'00"W
C-5	275.00'	46.36'	13.97'	N 25°04'00"W
C-6	425.00'	54.89'	16.25'	N 02°23'17"W
C-7	425.00'	54.89'	16.25'	N 02°23'17"W
C-8	425.00'	54.89'	16.25'	N 18°18'08"W
C-9	425.00'	54.89'	16.25'	N 18°18'08"W
C-10	425.00'	54.89'	16.25'	N 79°40'56"W
C-11	425.00'	54.89'	16.25'	N 79°40'56"W
C-12	425.00'	54.89'	16.25'	S 77°18'17"W
C-13	425.00'	54.89'	16.25'	S 77°18'17"W
C-14	425.00'	54.89'	16.25'	N 85°35'53"W
C-15	425.00'	54.89'	16.25'	N 85°35'53"W
C-16	425.00'	54.89'	16.25'	N 79°19'29"W
C-17	425.00'	54.89'	16.25'	N 79°19'29"W
C-18	425.00'	54.89'	16.25'	S 82°18'19"W
C-19	425.00'	54.89'	16.25'	S 82°18'19"W
C-20	425.00'	54.89'	16.25'	S 82°18'19"W
C-21	425.00'	54.89'	16.25'	S 82°18'19"W
C-22	425.00'	54.89'	16.25'	S 82°18'19"W
C-23	425.00'	54.89'	16.25'	S 82°18'19"W

Right-of-way Courses

COURSE	BEARING	DISTANCE
L-1	N 01°14'04"E	28.75'
L-2	N 01°14'04"E	28.75'
L-3	N 01°14'04"E	171.91'
L-4	N 01°14'04"E	171.91'
L-5	N 01°14'04"E	171.91'
L-6	N 01°14'04"E	171.91'
L-7	N 01°14'04"E	171.91'
L-8	N 01°14'04"E	171.91'
L-9	N 01°14'04"E	171.91'
L-10	N 01°14'04"E	171.91'
L-11	N 01°14'04"E	171.91'
L-12	N 01°14'04"E	171.91'
L-13	N 01°14'04"E	171.91'

NOTES:
 1. Lots to be served by county water.
 2. Lots to be served by individual septic systems.
 3. Roads to be built to NC DOT standards.



APPROVED
 HARNETT COUNTY PUBLIC UTILITIES
 P. O. Box 1119
 LILLINGTON, N.C. 27649

APPROVED
 HARNETT COUNTY PLANNING BOARD
 P. O. Box 1119
 LILLINGTON, N.C. 27649

APPROVED
 HARNETT COUNTY BOARD OF COMMISSIONERS
 P. O. Box 1119
 LILLINGTON, N.C. 27649

Minimum Building Setbacks
 R-30, R-30 & R-40
 30' Front Y/F
 10' Side
 10' Corner (20' 30' x 30')

Shelby Honeycutt Wilson
 D. B. 1593, Pg. 811

Adams Pointe Court
 D. B. 1439, Pg. 316

Keith Wayne Adams
 D. B. 902, Pg. 778

Alton Wayne Bayard
 D. B. 1217, Pg. 428
 P. C. 1st, Sl. 187-C

CELEBRATION OF DEEDS
 Harnett County
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STANCIL & ASSOCIATES
 Professional Land Surveyor, P.A.
 98 East Dupont Street, P. O. Box 730, Angier, N.C. 27501
 Phone: 919-639-2133 Fax: 919-639-2002

Adams Pointe Subdivision
 Survey for:
Anderson A. Cobb, et al
 P. O. Box 1025, Clayton, NC 27520 (919) 583-7099

REVISIONS:
 02-09-09 Revised Sheet
 Amount: 200

TOWNSHIP: BLACK RIVER **COUNTY:** HARNETT
STATE: NORTH CAROLINA **Parcel ID #** 040643 0008
ZONE: RA-30 **PARCEL NUMBER:** 0665-80-4171

DATE: 02-07-01 **SURVEYED BY:** AJM **FIELD BOOK:** PB-36-C-74
SCALE: 1" = 100' **DRAWN BY:** JMT **DRAWING FILE NO.:** LHRR-716-A
CHECKED & CLOSURE BY: JMT

Map # 2001-1100



FOR REGISTRATION REGISTER OF DEEDS
 KIMBERLY S. HARGROVE
 HARNETT COUNTY NC
 2007 JAN 17 11:14:35 AM
 BK:2330 PG:491-495 FEE:\$23.00
 NC REV STAMP \$380.00
 INSTRUMENT # 2007000988

HARNETT COUNTY TAX ID#

04-0663-0008-02

1-17-07 BY KLD

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 380.00

Parcel Identifier No. 055789 Verified by _____ County on the _____ day of _____, 20____
 By: _____

Mail/Box to: J. Lee Carlton, Jr., 727 W. Hargett St. # 211, Raleigh, NC 27603

This instrument was prepared by: J. Lee Carlton, Jr., 727 W. Hargett St. # 211, Raleigh, NC 27603

Brief description for the Index: _____

THIS DEED made this 17th day of January, 20 07, by and between

GRANTOR	GRANTEE
Howard T. Sanborn, III and wife, Amanda L. Sanborn	Robert M. Lambert and wife, Rochelle S. Lambert 65 Bess Lane Angier, NC 27501

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 Angier Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot No. 3 as shown on map of survey entitled, "Adams Point Subdivision" dated February 7, 2001, drawn by Stancil and Associates, Professional Land Surveyor, P.A., Thomas Lester Stancil, PLS and recorded as Map No. 2001-1160, Harnett County Registry, reference to which is hereby made for greater accuracy of description.

The property hereinabove described was acquired by Grantor by instrument recorded in Book _____ page _____.

A map showing the above described property is recorded in Plat Book _____ page _____.

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

Printed by Agreement with the NC Bar Association - 1981 SoftPro Corporation, 333 E. Six Forks Rd., Raleigh, NC 27609

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:

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

(Entity Name) Howard T. Sanborn, III by: Peggy Hauler ^{AIF} (SEAL)

By: _____
Title: _____ Amanda L. Sanborn by: Peggy Hauler ^{AIF} (SEAL)

By: _____ (SEAL)
Title: _____

By: _____ (SEAL)
Title: _____

State of North Carolina - County of Harnett

I, the undersigned Notary Public of the County and State aforesaid, certify that Howard T. Sanborn, III and wife, Amanda L. Sanborn 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 17th day of January, 2007

My Commission Expires: _____
Notary Public

State of North Carolina - County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____ personally came before me this day and acknowledged that he is the _____ of _____, 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 _____ day of _____, 20__.

My Commission Expires: _____
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

North Carolina

Wake County

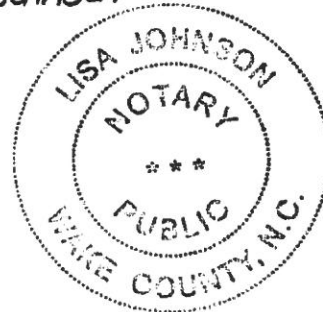
I, Lisa Johnson, a Notary Public for said County and State, do hereby certify that Peggy Harrelson, attorney in fact for Howard T. Sanborn, III personally appeared before me this day, and being by me duly sworn, says that she executed the foregoing and annexed instrument for and in behalf of the said Howard T. Sanborn, III, and that her authority to execute and acknowledge said instrument is contained in an instrument duly executed, acknowledged, and recorded in the office of the Register of Deeds in the County of Harnett, State of North Carolina, on the 17th day of January 2007, and that this instrument was executed under and by virtue of the authority given by said granting power of attorney.

I do further certify that the said Peggy Harrelson acknowledged the due execution of the foregoing and annexed instrument for the purpose therein expressed for and in behalf of the said Howard T. Sanborn, III.

Witness my hand and official seal, this the 17th day of January 2007.

Lisa Johnson
Notary Public
Lisa Johnson

My Commission Expires: 6-17-2008



North Carolina

Wake County

I, Lisa Johnson, a Notary Public for said County and State, do hereby certify that Peggy Harrelson, attorney in fact for Amanda L. Sanborn personally appeared before me this day, and being by me duly sworn, says that she executed the foregoing and annexed instrument for and in behalf of the said Amanda L. Sanborn, and that her authority to execute and acknowledge said instrument is contained in an instrument duly executed, acknowledged, and recorded in the office of the Register of Deeds in the County of Harnett, State of North Carolina, on the 17th day of January 2007, and that this instrument was executed under and by virtue of the authority given by said granting power of attorney.

I do further certify that the said Peggy Harrelson acknowledged the due execution of the foregoing and annexed instrument for the purpose therein expressed for and in behalf of the said Amanda L. Sanborn.

Witness my hand and official seal, this the 17th day of January 2007.


Notary Public Lisa Johnson

My Commission Expires: 6-17-2008

