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	: angleugene Flowgmail con
		PHONE NUMBER	910-303-1428
PHYSICAL ADDRESS 301 High	land Forest D	rive Sanfo	rd NC 27337
MAILING ADDRESS (IF DIFFFERENT TH		2: 1	
IF RENTING, LEASING, ETC., LIST PROP	ERTY OWNER NAME		
Highland Forest			
SUBDIVISION NAME	LOT #/TRACT #	STATE RD/HW	SIZE OF LOT/TRACT
Type of Dwelling: [] Modular [[] Mobile Home [1]-S	tick built [] Other	
Number of bedrooms []	Basement		
Garage: Yes [] No []	Dishwasher: (Yes)[] No	[]	Garbage Disposal: Yes] No []
Water Supply: [] Private Well	[] Community System	Count	у
Directions from Lillington to your site:	2105 to Hu	1 24/27 (1ic	jut aflight) take 24/27
Old the way to.	tingen Pol max	cealeff, to	ate the first Might
on to into hichland	(Grest Susdin	Sia.	
O			
In order for Environmental Health t	to help you with your repo	ir, you will need to	comply by completing the following:
910-893-7547 to confirm that your site	erground utilities marked, an e is ready for evaluation.	d the orange sign has	erty lines flagged. After the tank is been placed, you will need to call us at the time set within receipt of a violation
By signing below, I certify that all of th the denial of the permit. The permit is	e above information is corre subject to revocation if the	ct to the best of my k site plan, intended us	knowledge. False information will result in se, or ownership changes.
Anosla Esserie)	5/6/20	

Date

Signature

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.

	you received a violation letter for a failing system from our office? []YES []NO within the last 5 years have you completed an application for repair for this site? []YES []NO
Install Septic	ome was built (or year of septic tank installation) 2004 er of system know Tank Pumper ner of System
	Number of people who live in house? 3 # adults 3 # children What is your average estimated daily water usage? gallons/month or day county water. If HCPU please give the name the bill is listed in Angela Euglie
	If you have a garbage disposal, how often is it used? [] daily [4] weekly [] monthly When was the septic tank last pumped? 12 2019 How often do you have it pumped? 37 monthly If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] monthly Do you have a water softener or treatment system? [] YES [4] NO Where does it drain?
9.	Do 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 chemotherapy?] [] YES [] NO If yes please list
	Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES [] NO 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
14.	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 \(\buildref{D} \) Are there any underground utilities on your lot? Please check all that apply:
16.	Describe what is happening when you are having problems with your septic system, and when was this first noticed? Werflowing backing up in the yard thouse
	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 when wash clothes take Shows, Auch tallet

HTE 04-5-8897

HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

17096

OPERATIONS PERMIT

Name: (owner) Kent Pience	New Installation N. Santia To 1
11161	
Property Location: SR# [14] Subdivision Highland Forest	Lot # 4
Tax ID #	Quadrant #
Contractor: Ted Crown	Registration #
Basement with Plumbing: Garage:	
Water Supply:	
Distance From Well: 59 ft.	
Following are the specifications for the sewage disposal system	
Type of system:	ligs
Size of tank: Septic Tank: gallons Pump	Tank:gallons
Subsurface No. of exact length of each ditch 200_ft.	width of depth of 8. of in.
French Drain Required: Linear feet	
Date:_	6.14.04
Inspec	ted by: Qu Lites
PERMIT NO. 20690	Environmental Health Specialist
301 ADI ADI	Deve Deve

HARNETT COUNTY HEALTH DEPARTMENT

HTE 04-5-8897

IMPROVEMENT PERMIT

20690

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." New Installation Septic Tank Kent Name: (owner) Nitrification Line Property Location: SR# Subdivision High Land Tax ID # Quadrant # Number of Bedrooms Proposed: 33x54) Lot Size: # 45 AC Basement with Plumbing: Garage: 又 Water Supply: ☐ Well Public ☐ Community Distance From Well:____ ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional Other_ Type of system: Septic Tank: 1003 gallons Pump Tank: gallons Size of tank: Subsurface No. of exact length of each ditch 255 ft. width of depth of. ditches 18 2 in. Drainage Field ditches Linear feet French Drain Required: This permit is subject to revocation if site Signed: plans or intended use change. Environmental Health Specialist 156 35 125 Keep depending 25 from Reac Property Line (Ensement)
Maintain All Set Backs 5743 Ort Plumbing Shallow

HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTHORIZATION TO CONSTRUCT

Harnett County Department of Public Health, Improvement Permit # 206090. This authorization shall be valid for a period nat to exceed for (5)				
This authorization will be invalid if ownership site plans or intended.				
Name Telephone #				
Name Telephone #				
Telephone #				
Address				
Property Location SR#				
Koad Name				
Highland Friest 41 3(33) 54) Subdivision Lot # #Bedrooms Proposed Lot Size				
Lot # # Bedrooms Proposed Lot Size				
TYPE OF SYSTEM				
[New Installation [] Repair Septic Tank Nitrification Lines				
Conventional [] Other				
[] Basement [] With Plumbing [] Without Plumbing				
Water Supply: [] Well Public Water Supply Minimum Well Setback:Ft.				
Septic Tankgal Pump Chambergal				
NITRIFICATION FIELD SPECIFICATIONS				
Number of fields # of lines per field Length of lines Ft.				
Width of ditches ft. Depth of ditches inches				
French Drain: Linear feet required Depth of gravel				
No wastewater system shall be covered or placed in the				
No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to				
the conditions of the Improvement Permit and that a valid Operations Permit has been issued.				
Signature of Authorized Authorize				
Signature of Authorized Agent for Harnett County Date				

MAP # 2003-1163



FOR REGISTRATION REGISTER OF DEEDS HARRESTY COUNTY NC 2006 OCT 23 11:55:35 AM BK-2295 PG:828-830 FEE:\$17.00 NC REV STAMP.\$321.00 INSTRUMENT \$ 2006019926

D3-9587-10-000-81

NORTH CAROLINA GENERAL WARRANTY DEED

Parcel Identification No 03-9587-10-0020-81 Verified by Harnett County					
avetteville, NC 28305					
File#14784-06L					
Brief description for the Index 301 Highland Forest Drive, Sanford, NC 27332					
n					
GRANTEE					
Angela Eugene and husband, Jeffery Eugene					
aka Jeff Eugene 301 Highland Forest 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 or near the City of Sanford, Barbecue Township, Harnett County, North Carolina and more particularly described as follows:

Being all of lot 41 in a subdivision known as HIGHLAND FOREST, and the same being duly recorded in Book of Plats 2003 Page 1163, Harnett County Registry, North Carolina.

Property Address. 301 Highland Forest Drive, Sanford, NC 27332 Parcel Identification No 03-9587-10-0020-81

The property hereinabove described was acquired by Grantor by instrument recorded in Book 1974 Page 933.

A map showing the above described property was acquired by Grantor by instrument recorded in Plat Book 2003 Page 1163.

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 the 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 claim of all persons whomsoever, other than the following exceptions

Restrictions, casements and Rights-of-way of Record. Ad-valorem taxes not yet due and payable.

IN WITNESS WHEREOF, t	he Grantor has duly executed the foregoing as of the day and year first written	(SEAL)
(Entity Name)	Richard T Lord	(,
Ву		(SEAL)
Title	· · · · · · · · · · · · · · · · · · ·	
Ву		(SEAL)
Title		
		(SEAL)
Title		
E NOIN E	State of North Carolina County of Cumberland 1, the undersigned Notary Public of County, State of North Carolina certify that,	Richard T
FEB 3 X X X X X X X X X X X X X X X X X X	Lord personally appeared before this day and acknowledged the due execution of it instrument for the purposes therein expressed. Witness my hand and Notarial stamp	or seal this
2007	16th day of October, 2006.	,
FEB 17 2007 P 18 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	My Commission Expires 2117107 () DOCK TOWN	22
· ·	State of North Carolina County of	
DNLY	I, the undersigned Notary Public of County, State of North Carolina, certify that	me this day
ž	and acknowledged that _he is the of	 .
X	a North Carolinacorporation/limited liability company/general partner partnership (strike through the inapplicable), and that by authority duly given and a	ship/limited
USE BLACK INK ONLY	cach entity, he signed the forgoing instrument in its name on its behalf as its at Witness my hand and Notarial stamp or seal this day of,	t and deed
ŝ	W. C	
	My Commission Expires Notary Public	
	State of North Carolina County of	
, LINK	I, the undersigned Notary Public of County, State of North Carolina, certify that	
USE BLACK INK	Witness my hand and Notarial stamp or scal this, day of,	
SE		
2	My Commission Expires	
	Notary Public	
This instrument and this certificate are duly	registered at the date and time and the Book and Page shown on the first page hereof	rect
	Register of Deeds for COU	JN'I Y