

**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: i.mcdonald5@aol.com

NAME Irene McDonald PHONE NUMBER 910-574-4056

PHYSICAL ADDRESS 3705 Walker Rd Bunnlevel, NC

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 1936 Joel Johnson Rd Lillington, NC 27546

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME Irene McDonald
Walker Rd

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 (No layout) 2262-0055 Deed

Garage: Yes No Dishwasher: Yes No 1974 Dwelling Garbage Disposal: Yes No

Water Supply: Private Well Community System County right No map located

Directions from Lillington to your site: Take 401 South Turn on McLean Chapel then turn

1/2 mi right on Wire Rd - about 1/2 mile turn right on Walker Rd
3705 Walker Road Bunnlevel

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.

Irene McDonald
 Signature

3-2-18
 Date

3-7-18
S

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) _____
Installer of system _____
Septic Tank Pumper _____
Designer of System _____

1. Number of people who live in house? 2 # adults 4 # children 6 # total
2. 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 Sharika Jones
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 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?

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?
BACK UP
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 _____

Harnett GIS

NOT FOR LEGAL USE



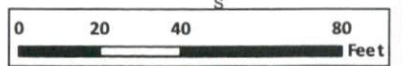
GIS/E-911 Addressing
March 2, 2018

- Recycle Center
- Landfills
- Surrounding County Boundaries
- Federal Property

- City Limits
- Address Numbers
- Airport
- MajorRoads**
- Interstate

- NC
- US
- Roads
- Mile_Markers
- Railroad

Parcels



1 inch = 47 feet

HTE# 0450010606

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

EXISTING SEPTIC SYSTEM INSPECTION

NAME J.A. Agape Visionary Youth Services PHONE # 893-1030

ADDRESS P.O. Box 8 Bunnlevel

NAME OF MOBILE HOME PARK _____

NAME OF OWNER (IF DIFFERENT) Johanne Walker

ADDRESS OF OWNER (IF DIFFERENT) 12 Hudson Bluff Circle Marlboro, NY

PROPERTY LOCATION: STATE ROAD NAME AND # 3705 Walker Rd 12542

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 this 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 changes, and/or
- (4) after six months

Septic Tank lid replaced

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

AUTHORIZATION OF EXISTING SYSTEM

Willie H. Cii
Signature of Inspector

1-13-05
Date

Initial Application Date: 10/18/04

Application # 0450010606

COUNTY OF HARNETT LAND USE APPLICATION

Central Permitting 102 E. Front Street, Lillington, NC 27546

Phone: (910) 893-4759

Fax: (910) 893-2793

LANDOWNER: Johanne Walker Mailing Address: 12 Hudson Bluff Circle
City: Marlboro State: NY Zip: 12542 Phone #: _____
APPLICANT: Agape Visionary Youth Services Mailing Address: PO Box 8
City: Bunnlevel State: NC Zip: 28323 Phone #: 910-893-1030

PROPERTY LOCATION: SR #: 2039 NC SR Name: walker RD
Address: 3705 walker RD Linden NC
Parcel: 2039 NC SR PIN: 0555-47-1362-000
Zoning: NO Subdivision: _____ Lot #: _____ Lot Size: _____
Flood Plain: _____ Panel: _____ Watershed: _____ Deed Book/Page: 1289-0771 Plat Book/Page: _____

DIRECTIONS TO THE PROPERTY FROM LILLINGTON: From Lillington headed toward Bunnlevel on 401 Hwy
Go to Bunnlevel turn Right onto mclerns Chapel Church RD. Go to wire RD turn
left Go to walker RD turn Right

PROPOSED USE:

- Sg. Family Dwelling (Size 24 x 40) # of Bedrooms 3 # Baths 1 Basement (w/wo bath) 0 Garage 1 Deck 1
- Multi-Family Dwelling No. Units _____ No. Bedrooms/Unit _____
- Manufactured Home (Size _____ x _____) # 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 (Size _____ x _____) Use _____
- Other Family care facility - 4 children live-in, 8 employees, 3 shifts (4-12, 12-8)

Additional Information: _____

Water Supply: () County (X) Well (No. dwellings _____) () Other

Sewage Supply: () New Septic Tank (X) 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? YES (NO)

Structures on this tract of land: Single family dwellings 1 existing Manufactured homes _____ Other (specify) _____

Required Residential Property Line Setbacks:

	Minimum	Actual
Front	35	75
Rear	25	50
Side	10	24
Corner	20	30
Nearest Building	10	40

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.

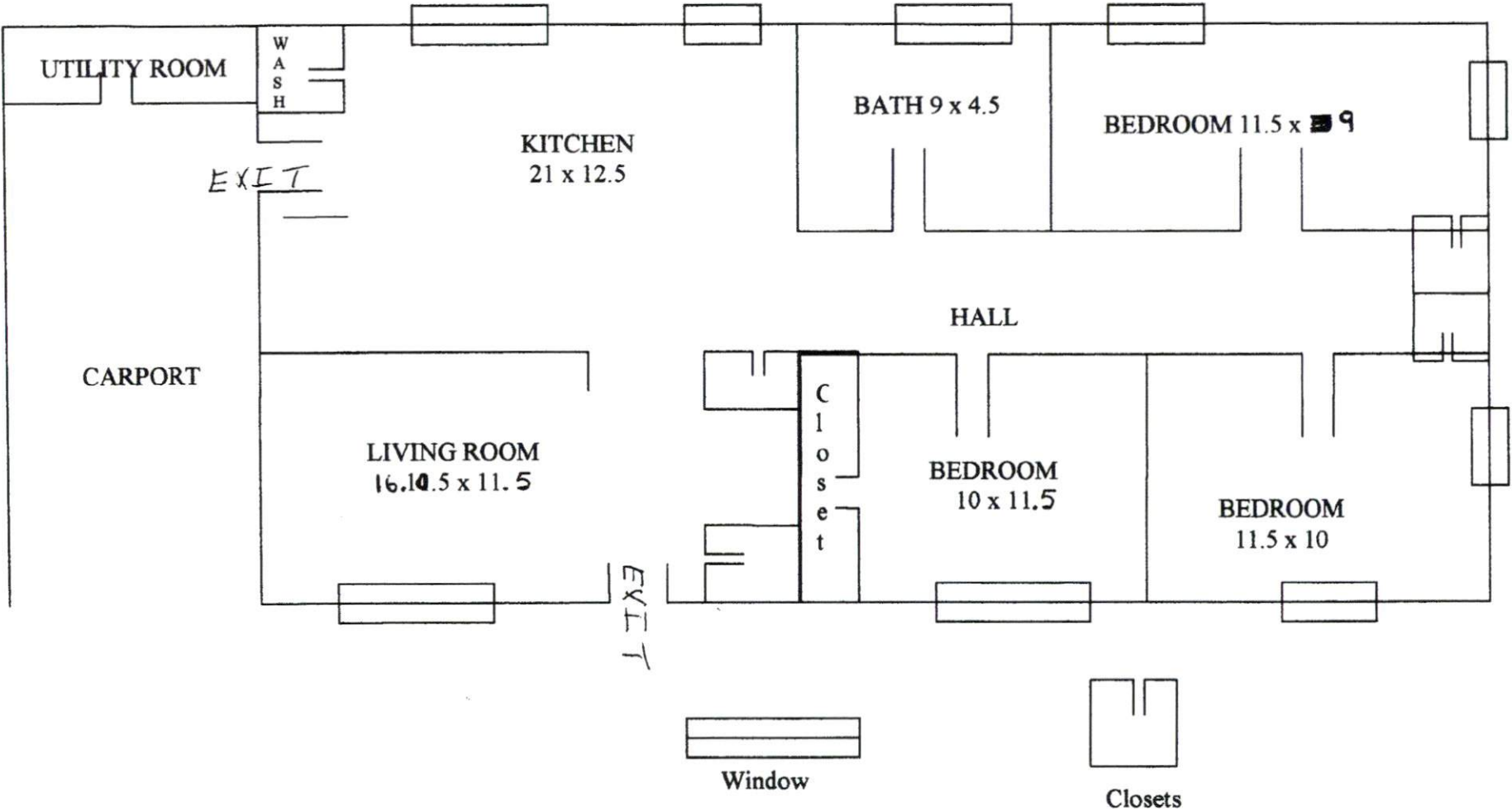
Doris McLaughlin
Signature of Owner or Owner's Agent

9/29/04
Date

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

A RECORDED SURVEY PLAT AND RECORDED DEED ARE REQUIRED WHEN APPLYING FOR A LAND USE APPLICATION

Agape Residential
3705 Walker Rd
Linden, NC



Harnett County Planning Department

PO Box 65, Lillington, NC 27546
910-893-7527

Environmental Health New Septic Systems Test

Environmental Health Code 800

- Place "property flags" in each corner of lot. All property lines must be clearly flagged approximately every 50 feet between corners.
- Place "house corner flags" at each corner of where the house/manufactured home will sit. Use additional flagging to outline driveways, garages, decks, out buildings, swimming pools, etc.
- Place flags at locations as developed on site plan by Customer Service Technician and you.
- Place Environmental Health "orange" card in location that is easily viewed from road.
- If property is thickly wooded, Environmental Health requires that you clean out the undergrowth to allow the soil evaluation to be performed. Inspectors should be able to walk freely around site. *No grading of property should be done.*
- After preparing proposed site call the voice permitting system at 910-893-7527 and give code 800 for Environmental Health confirmation.
- To hear results, call IVR again. Once approved, proceed to Central Permitting for permits

Environmental Health Existing Tank Inspections

Environmental Health Code 800

- Place Environmental Health "orange" card in location that is easily viewed from road.
- Prepare for inspection by removing soil over door as diagram indicates. Open trap door cover.
- After preparing trapdoor call the voice permitting system at 910-893-7527 and give code 800 for Environmental Health confirmation.
- To hear results, call IVR again. Once approved, proceed to Central Permitting for permits

Health and Sanitation Inspections

Health and Sanitation Plan Review 826

- After submitting plans fro food and lodging, call the voice permitting system at 910-893-7527 and give code 826.
- To hear results, call IVR again. Once approved, proceed to Central Permitting for permits

Fire Marshal Inspections

Fire Marshall Plan Review Code 804

- Call the voice permitting system at 910-893-7527 and give code 804 for plan review.
- Pick up Fire Marshal's letter and place on job site until work is completed.
- To hear results, call IVR again. Once approved, proceed to Central Permitting for permits

Public Utilities

- Place stake with "orange" tape/name thirty feet (30) from the center of the road at the location you wish to have water tap installed.
- Allow four to six weeks after application for water/sewer taps. Call Utilities at 893-7575 for technical assistance.

Planning

Planning Plan Review Code 806

- To hear results, call IVR again. Once the plans are approved, proceed to Central Permitting for permits

Building Inspections

Building Plan Review Code 802

- Call the voice permitting system at 910-893-7527 and give code 802 for building plan review.
- For new housing/set up permits ensure you meet E 911 / Addressing prior to calling for final inspection.
- To hear results, call IVR again. Once the plans are approved, proceed to Central Permitting for permits

E911 Addressing

- Address numbers shall be mounted on the house, 3 inches high (5" for commercial).
- Numbers must be a contrasting color from house, must be clearly visible night and day at entrance of driveway if home is 100 ft or more from road, or if mailbox is on opposite side of road.
- Once you purchase permits and footing inspection has been approved call the voice permitting system at 910-893-7527 for address confirmation.
- To hear results, call IVR again.

Applicant Signature: Dois McDougall Date: 10-18-04

Print this page



Legal Description:

0.46AC 1 LOT 100X200 BETHUNE

Harnett County GIS

PID: 120555 0051
 PIN: 0555-47-1362.000
 REID: 0035490
Subdivision:
Deeded Acreage: 0 ac
Total Acreage: 0.4871055 ac
Account Number: 1500021838
Owners: MCDONALD IRENE W

Owner Address : 1936 JOEL JOHNSON RD LILLINGTON, NC 27546

Property Address: 3705 WALKER RD LINDEN, NC 28356

City, State, Zip: LINDEN, NC, 28356

Building Count: 1

Township Code: 12

Fire Code:

Parcel Building Value: \$50280

Parcel Outbuilding Value : \$0

Parcel Land Value : \$18000

Parcel Special Land Value : \$0

Total Value : \$68280

Parcel Deferred Value : \$0

Total Assessed Value : \$68280

Legal Land Units , Unit Type : 0.46, AC

Tax Data Last Modified:

Calculated Land Units / Type: AC ac

Neighborhood: 01200

Actual Year Built: 1974

TotalAcutalAreaHeated: 1025 Sq/Ft

Sale Month and Year: 8 / 2006

Sale Price: \$0

Deed Book & Page: 2262-0055

Deed Date:

Plat Book & Page: -

Instrument Type: SW

Vacant or Improved:

QualifiedCode: I

Transfer or Split: T

Prior Building Value: \$54410

Prior Outbuilding Value : \$0

Prior Land Value : \$18000

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$72410

Prior Land Units: ac



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TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances thereto belonging to Grantee in fee simple. And the Grantor covenants with the Grantee, the 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.

LaSalle Bank National Association, as Trustee for the Pooling and Servicing Agreement referenced above, has delegated certain authority to the undersigned. The undersigned hereby warrants that LaSalle Bank National Association has the authority to delegate its authority to execute all contracts, agreements, deeds, and other instruments necessary to effect any such sale, transfer, or disposition of assets held by the Trust. This deed is a disposition within the authority so delegated.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officers by authority of its Board of Directors, the day and year first above written.

LaSalle Bank National Association, as trustee for the holders of the CSFB Mortgage Pass-Through Certificates, Series 2003-CF14, by and through its Attorney in Fact Select Portfolio Servicing f/k/a Fairbanks Capital Corp

By: [Signature]
Dennis Cook, CEO Vice President
Vice President

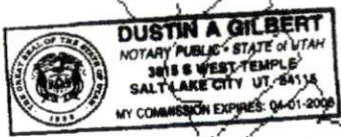
STATE OF Utah
COUNTY OF Salt Lake

On this 24 day of July, 2006, before me, the undersigned Notary Public, personally appeared Dennis Cook personally known to me to be the Vice President of Select Portfolio Servicing f/k/a Fairbanks Capital Corp and being by me duly sworn and known to me to be the person who executed the within instrument on behalf of said Select Portfolio Servicing f/k/a Fairbanks Capital Corp, a company that executed and whose name is subscribed to the within instrument as the attorney-in-fact for LaSalle Bank National Association, as trustee for the holders of the CSFB Mortgage Pass-Through Certificates, Series 2003-CF14 and acknowledged to me that he/she subscribed the name of LaSalle Bank National Association, as trustee for the holders of the CSFB Mortgage Pass-Through Certificates, Series 2003-CF14 thereto as principal and the name of Select Portfolio Servicing f/k/a Fairbanks Capital Corp as attorney-in-fact for said LaSalle Bank National Association, as trustee for the holders of the CSFB Mortgage Pass-Through Certificates, Series 2003-CF14 and that said Company executed the same as such attorney in fact and that the 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, County of HARDETT, State of North Carolina, on the 1st day of August, 2006, Book 226 Page 50.

WITNESS my hand and official seal.

[Signature]
Notary Public

My Commission Expires: _____
FS-5967
0004015202



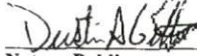
Unofficial Document

 (Seal)

LaSalle Bank National Association, as trustee for the holders of the CSFB Mortgage Pass-Through Certificates, Series 2003-CF14, by and through its attorney in fact Select Portfolio Servicing f/k/a Fairbanks Capital Corp

Dennis Cook, REO Vice President

Subscribed, and sworn to before me this 24 day of July, 2006.



Notary Public

My Commission Expires:

FS-5967
0004015202

