

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: TylerK278@gmail.com

NAME Tyler Krantz PHONE NUMBER 919-802-7780

PHYSICAL ADDRESS 254 TROY DRIVE Fuquay Varina NC 27526

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 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: N1 on 401 Right on Rauls Church, left
on Hilliard left on TROY Drive

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.

Tyler Krantz
Signature

7-6-2020
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

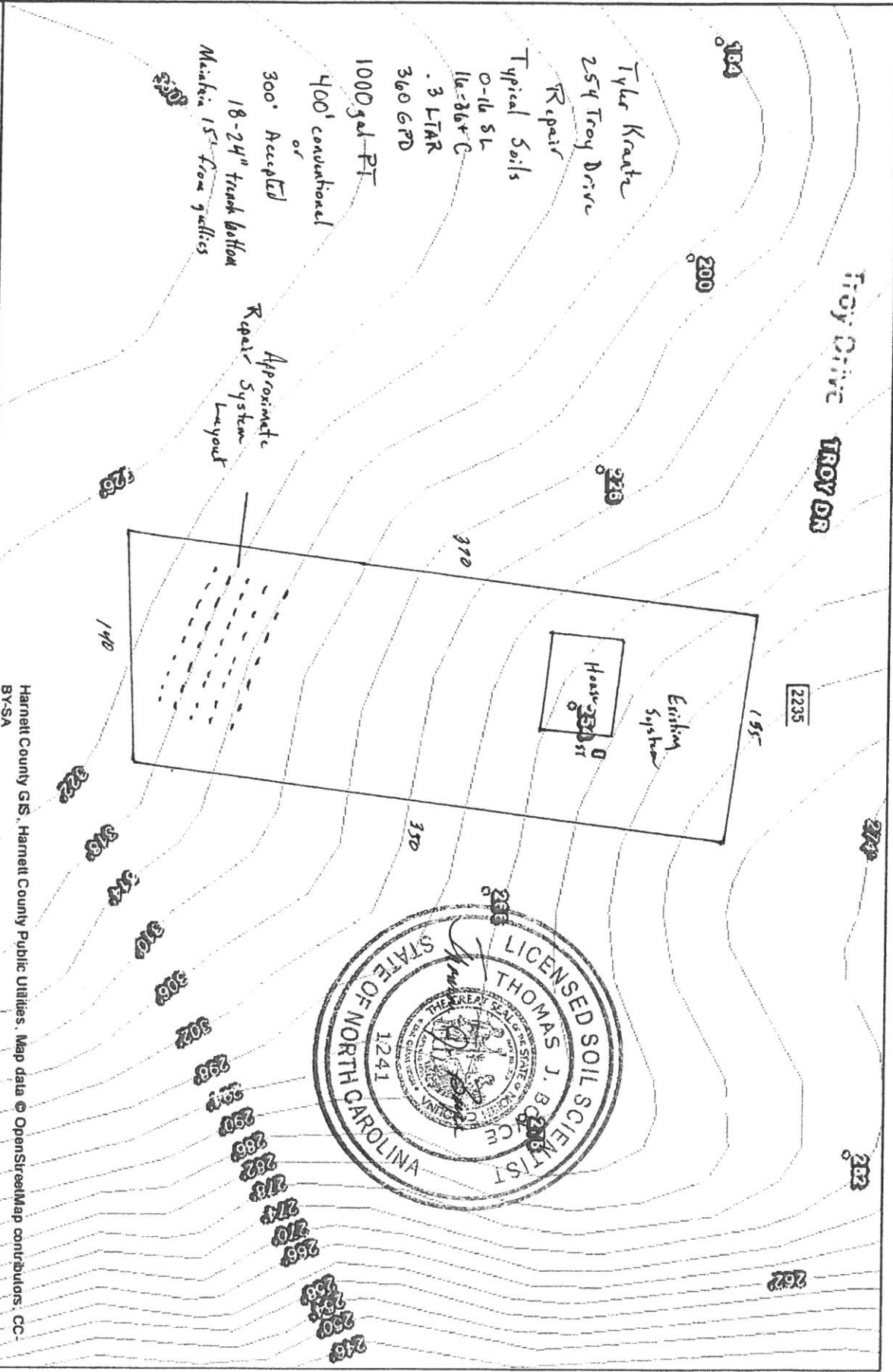
Year home was built (or year of septic tank installation) 1998
Installer of system _____
Septic Tank Pumper _____
Designer of System _____

1. Number of people who live in house? 2 # adults 2 # children 4 # 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 Tyler Krantz
3. If you have a garbage disposal, how often is it used? daily weekly monthly
4. When was the septic tank last pumped? 10 months How often do you have it pumped? 3 years
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 Roof and Gutter
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?
Failing Fill Bed, December 2019
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



Harnett COUNTY

GIS/E-911 Addressing

June 14, 2020

- Recycle Center
- Landfills
- Surrounding County Boundaries
- Federal Property
- City Limits
- Harnett County Boundary
- Major Roads
- Mile Markers
- Address Numbers
- Airport



OPERATIONS PERMIT

Name: (owner) Walters + Batchelor Const

New Installation Septic Tank

Property Location: SR# 1415

Repairs Nitrification Line

Subdivision Hilliard Place

Lot # 20

TAX ID# _____

Quadrant # _____

Contractor: Johnny Jones

Registration # _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: _____ ft.

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

Type of system: Conventional Other Polystyrene Aggregate Trench System 1WWS-95-3R

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

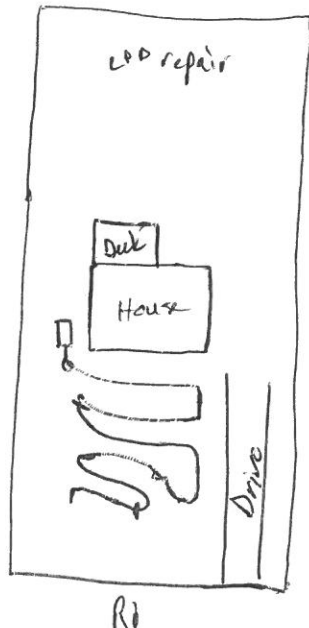
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 260 ft. width of ditches 3 ft. depth of ditches 18-36 in.

French Drain: _____ Linear feet

Date: 8-17-99

PERMIT NO. 15734

Inspected by: Thomas J. Boyer R.S.
Environmental Health Specialist



IMPROVEMENT PERMIT

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) Walters + Batchelor Const. New Installation Septic Tank
 Property Location: SR# 1415 Repairs Nitrification Line

Subdivision Hillward Place Lot # 20

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 1/13ac

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 line

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

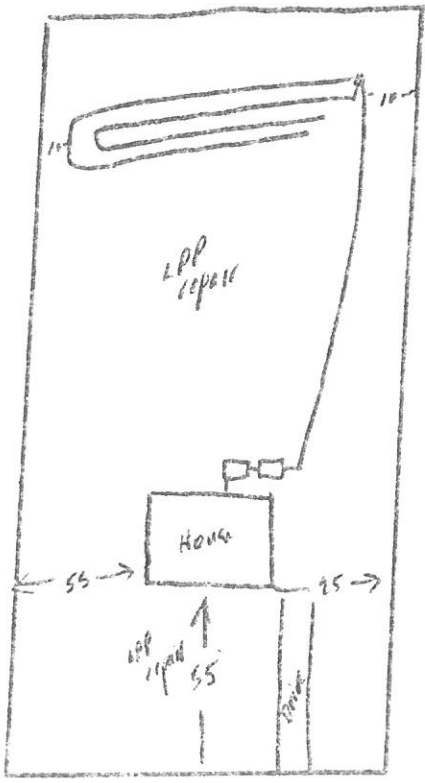
Subsurface Drainage Field No. of ditches 2 exact length of each ditch 200 ft. width of ditches 3 ft. depth of ditches 18-20 in.

French Drain Required: _____ Linear feet

Date: 5-14-99

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

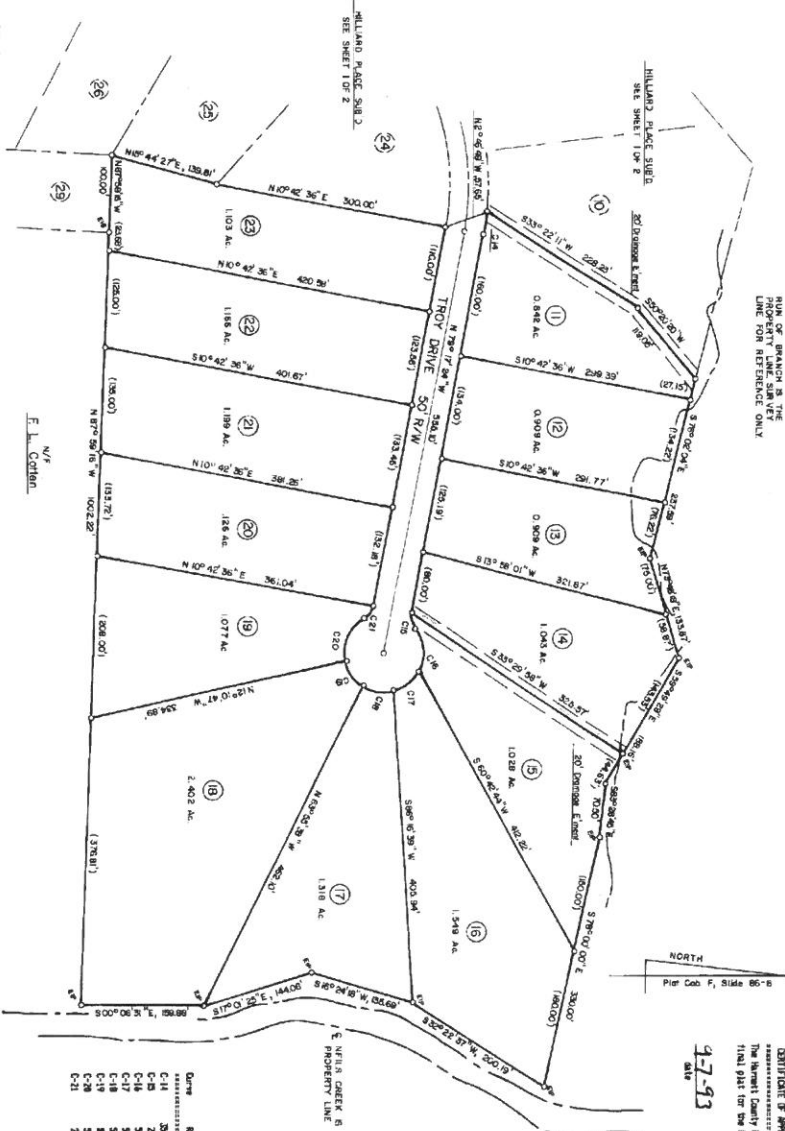
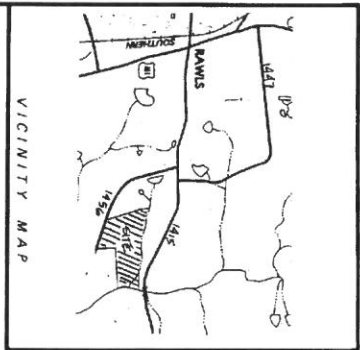
Signed: Thomas J. Boyce R.S.
 Environmental Health Specialist



Maintain setbacks
 Contractor to meet on site prior
 to installation
 Final layout may change
 Can use Polystyrene Aggregate Trench
 System 1-800-95-38

PC# F Slide 213 A (A)

2# F Slide 213 A (H)



Dist	Bearing	Dist	Dist
C-14	284.00'	31.00'	88-04'-11" N, 31.00'
C-15	25.00'	21.00'	87-25'-24" N, 25.00'
C-16	30.00'	46.15'	86-20'-21" N, 30.00'
C-17	30.00'	46.00'	86-20'-21" N, 30.00'
C-18	50.00'	46.00'	86-20'-21" N, 50.00'
C-19	50.00'	46.00'	86-20'-21" N, 50.00'
C-20	50.00'	46.00'	86-20'-21" N, 50.00'
C-21	25.00'	21.00'	85-11'-24" E, 25.00'

I, the undersigned, being duly sworn, certify that the above is a true and correct copy of the original plan as shown to me by the applicant.

NOTICE TO CONTRACTORS
 The undersigned, being duly sworn, certify that the above is a true and correct copy of the original plan as shown to me by the applicant.

LEGEND
 --- Line Not Surveyed
 --- Existing Line Type
 --- Existing Center Measurement
 --- New Line Type
 --- New Center Measurement
 --- Property Line
 --- Easement
 --- Other Measurement
 --- Existing Easement
 --- Existing Easement

REVISIONS

NO.	DATE	DESCRIPTION
1	9/13/93	AS SHOWN

CERTIFICATE OF APPROVAL BY THE COUNTY COMMISSIONERS
 DIVISION OF HIGHWAYS
 I, the undersigned, being duly sworn, certify that the above is a true and correct copy of the original plan as shown to me by the applicant.

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ASHWORTH
 LAND SURVEYOR
 SCALE: 1" = 100'
 DRAWN BY: DPG
 CHECKED & CLOSED BY: MEA

SHEET 2 OF 2



FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY NC
2012 JAN 12 02:31:27 PM
BK:2946 PG:206-209 FEE:\$26.00

HARNETT COUNTY TAX ID#

080654-0141-25

1/12/12 BY (CW)

INSTRUMENT # 2012000591

**NORTH CAROLINA
SPECIAL WARRANTY DEED**

Excise Tax: \$ Exempt

Recording Time, Book and Page

Tax Map No.

Parcel Identifier No. 0027541

Mail after recording to: Grantee @ 266 Santee, Fuquay Varina, NC 27526
This instrument was prepared by: Ronda G. Moore, a North Carolina licensed attorney
WITHOUT THE BENEFIT OF A TITLE EXAMINATION – NO OPINION ON TITLE IS MADE OR
PROFFERED BY THE PREPARATION OF THIS DOCUMENT

THIS DEED made this 13 day of December, 2011 by and between

GRANTOR

NORTH CAROLINA HOUSING FINANCE AGENCY,
a public agency and instrumentality of the State of North Carolina
P.O. Box 28066
Raleigh, North Carolina 27611-8066

GRANTEE

Tyler Franklin Krantz and wife,
Anne Michelle Krantz
254 Troy Drive
Fuquay Varina, North Carolina 27526

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

Being known and designated as Lot 20, of Hillard Place Subdivision, as shown on that plat recorded in Plat Cabinet F, Slide 213A(A) in the Office of the Register of Deeds of Harnett County, reference to which is made for a more accurate description. Together with improvements located thereon; said property being located at 254 Troy Drive, Fuquay Varina, North Carolina.

The property hereinabove described or as set forth in Exhibit A hereto was acquired by Grantor by instrument recorded in Book 2906, Page 147.

All or a portion of the property herein conveyed does not include the primary residence of Grantor.

A map showing the above described property is recorded in Plat Cabinet F, Slide 213-A.

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 that Grantor will warrant and defend the title against the lawful claims of all persons claiming by, under or through Grantor, except for the exceptions hereinafter stated.

Title to the property hereinabove described is hereby conveyed subject to all valid and existing restrictions, reservations, covenants, conditions, rights of ways and easements properly of record and which burden and benefit the property at or prior to the date of Grantor's execution of this Deed, if any, and current year ad valorem taxes.

IN WITNESS WHEREOF, the Grantors have hereunto set their hands and seals, or, if corporate, has caused this Deed to be executed by its duly authorized officers and its seal to be hereunto affixed, the day and year first above written.

North Carolina Housing Finance Agency,
A public agency and instrumentality of the State
of North Carolina

 (SEAL)
A. Robert Kucab, Executive Director

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[NOTARY ACKNOWLEDGEMENT FOLLOWS]

NORTH CAROLINA

WAKE COUNTY

I, the undersigned Notary Public of the County and State aforesaid, certify that A. Robert Kucab personally appeared before me this day and acknowledged that he is the Executive Director of the North Carolina Housing Finance Agency, a public agency and instrumentality of the State, 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 official stamp or seal, this the 13 day of December, 2011.

My Commission Expires: 7-15-2014



Donna A. Pace
Notary Public

Print Notary Name: Donna A. Pace