### 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: htt	be wind stream
NAME Brenda Hitt	_	PHONE NUMBER 919	-499-9654
HYSICAL ADDRESS 83 W	ild Flower (	Court, Cameror	, NC 28326
IAILING ADDRESS (IF DIFFFERENT TH	AN PHYSICAL)		
RENTING, LEASING, ETC., LIST PROF	PERTY OWNER NAME $\underline{\mathcal{B}}$	renda Hitt	
he Highlands	LOT #/TRACT #	24/27	
UBDIVISION NAME	LOT #/TRACT #	STATE RD/HWY	SIZE OF LOT/TRACT
ype of Dwelling: [] Modular	Mobile Home	Stick built [] Other	
umber of bedrooms[]	Basement		
arage: Yes [4] No [ ]	Dishwasher: Yes P] I		Garbage Disposal: Yes [] No[]
ater Supply: [] Private Well	[] Community System	m [] County	
rections from Lillington to your site	L		
order for Environmental Health			
<ol> <li>A <u>"surveyed and recorded ma</u> wells on the property by show</li> </ol>		perty must be attached to this ap	oplication. Please inform us of a
		eed to be uncovered and propert	v lines flagged. After the tank is
		marked, and the orange sign has	
		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.

Branda S. Flut 14 Ours 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)					
Installer of system					
Septic Tank Pumper Maples Septiv					
Designer of System					
1. Number of people who live in house? 2 # adults 4 children 2 # total					
2. What is your average estimated daily water usage?gallons/month or daycounty					
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 $NA$					
4. When was the septic tank last pumped? 13 Ong 20 How often do you have it pumped? 1-2 yra					
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?[1] 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 just all of any water fixtures since your system has been installed 2. 1 NEST 1.00 If you					
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					
please list any additions including any spas, whilipool, sliks, lavatories, path/showers, tollets					
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, gutte					
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 th					
first noticed?					
Water running into yard, not all the time Deptic contract.					
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy					
rains, and household guests? [1] YES [ ] NO If Yes, please list Look Cothes					



HARNETT COUNTY TAX ID#

FOR REGISTRATION REGISTER OF DEEDS KIMBERLY S. HARGROVE HARNETY COUNTY, NC 2011 JUN 27 09:17:17 AM BK:2879 PG:405-407 FEE:\$22.00 NC REV STAMP:\$260.00 INSTRUMENT \$ 2011009122

10.27.11 BY 5745

### NORTH CAROLINA GENERAL WARRANTY DEED

	NOMINI CANOLINA GEI	A ECT	AAL WARRANTI D	LED	
Excise Tax: \$ 260.00					
Parcel Identifier No By:	Verified by		County on the	day of	, 20
Mail/Box to: Jennifer Kirby	Fincher PLLC, 5509 Yadkin Road	, Fa	yetteville, NC 28303		
This instrument was prepared	by: Jennifer Kirby Fincher PLLC	, 55	09 Yadkin Road, Fayettevil	le, NC 28303	
Brief description for the Inde	х:				
THIS DEED made this	5 day of Upuf		, 20// by	and between	
G	RANTOR		GRAI	NTEE	
Malcolm I. Sporer, Sr. and s Virigina L. Sporer	spouse	<i>}</i>	James A. Hitt and spouse Brenda S. Hitt 83 Wildflower Court Cameron, NC 28326	•	
corporation or partnership.  The designation Grantor and	r each Grantor and Grantee: name,	sai	d parties, their heirs, succes		
WITNESSETH, that the Gran by these presents does grant, b	minine or neuter as required by contor, for a valuable consideration paid pargain, sell and convey unto the Granded as follows:	d by	the Grantee, the receipt of when in fee simple, all that certain	n lot or parcel of	nowledged, has and land situated in the nty, North Carolina
BEING all of Lot 19 at the F County Registry, Map #2000	lighlands at Sherwood Forest Subo	livis	ion, Phase I as shown on t	he map recorded	l as Harnett
Restrictive Covenants record	ed in Book 1399, Page 748.				
	cribed was acquired by Grantor by			-	
All or a portion of the propert	y herein conveyed includes or ]	X_ (	does not include the primar	y residence of a	Grantor.
A map showing the above des NC Bar Association Form No. 3 © 19 Printed by Agreement with the NC Bar		Bool	k page	·	

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 forego	oing as of the day and year first above written.
	Melalmo Spose &- (SEAL)
(Entity Name)	Print/Type Name: Malcolm I. Sporer, Sr.
Ву:	Virginia L. Soprer (SEAL)
Print/Type Name & Title:	Print/Type plame: Virigina L. Sporer
Ву:	(SEAL)
Print/Type Name & Title:	Print/Type Name:
Ву:	(SEAL)
By:Print/Type Name & Title:	Print/Type Name:
State of North Carolina Vicainia - County or City of Harnett	Tele of Wight
""""""""""""""""""""""""""""""""""""""	arnett and State aforesaid certify that
Metholica I. Sporer Sr. and spouse Virigina L. Sporer	personally appeared before me this day and
Machine In Spores Sr. and spouse Virigina L. Sporer  Repowledged the day execution of the foregoing instrument for the property this spore.	urposes therein expressed. Witness my hand and Notarial stamp or
real this page day of the page	MI & DIMIN
MY COMMISSION	Wheelow OV Vike
12/31/13 53 12/31/2013	Chrishaunda L. Clarke Notary Public
AN Continues on Charles: 1201/2013	Notary's Printed or Typed Name
CTH OF THE	Hotary s rithlest or Types Hallse
State of County or City of	
I, the undersigned Notary Public of the County or City of	and State aforesaid, certify that
person	nally came before me this day and acknowledged that _he is the
of	, a North Carolina or
corporation/limited liability company/general partnership/limited par	rtnership (strike through the inapplicable), and that by authority
duly given and as the act of such entity, _he signed the foregoing in	strument in its name on its behalf as its act and deed. Witness
my hand and Notarial stamp or seal, this day of	
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name
State of County or City of	
I, the undersigned Notary Public of the County or City of	and State aforesaid, certify that
Witness my hand and Notarial stamp or seal, this day of	, 20
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name
· · · · · · · · · · · · · · · · · · ·	

NC Bar Association Form No. 3 © 1976, Revised © 1/1/2010 Printed by Agreement with the NC Bar Association



### KIMBERLY S. HARGROVE REGISTER OF DEEDS, HARNETT 305 W CORNELIUS HARNETT BLVD SUITE 200 LILLINGTON, NC 27546

Filed For Registration: 06/27/2011 09:17:17 AM

Book: RE 2879

RE 2879 Page: 405-407

Document No.: 2011009122

**DEED 3 PGS \$22.00** 

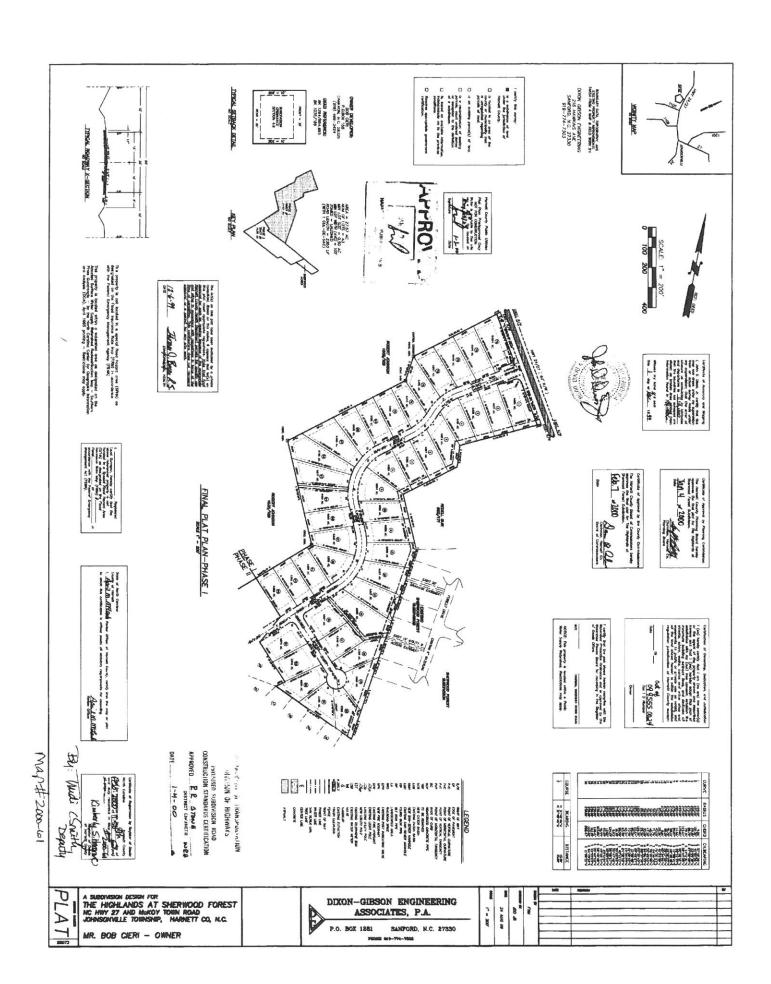
NC REAL ESTATE EXCISE TAX: \$260.00

Recorder: MARY ANNE WOOD

State of North Carolina, County of Harnett

KIMBERLY S. HARGROVE, REGISTER OF DEEDS

# DO NOT DISCARD



Print this page



### **Property Description:**

LT#19 HIGHLDS AT SHERWOODFOREST2000-61



PID: 099565 0136 21

PIN: 9555-87-5460.000

**REID**: 0052815

Subdivision:

Taxable Acreage: 0.520 AC ac

Caclulated Acreage: 0.56 ac

Account Number: 1500002434

Owners: HITT JAMES A & HITT BRENDA S

Owner Address: 83 WILDFLOWER COURT CAMERON, NC 28326

Property Address: 83 WILD FLOWER CT CAMERON, NC 28326

City, State, Zip: CAMERON, NC, 28326

**Building Count: 1** 

Township Code: 09

Fire Tax District: Spout Springs

Parcel Building Value: \$93840

Parcel Outbuilding Value: \$0

Parcel Land Value: \$35000

Parcel Special Land Value: \$0

Total Value: \$128840

Parcel Deferred Value: \$0

Total Assessed Value: \$128840

Neighborhood: 00943

Actual Year Built: 2006

TotalAcutalAreaHeated: 1944 Sq/Ft

Sale Month and Year: 6 / 2011

Sale Price: \$130000

Deed Book & Page: 2879-0405

Deed Date: 1309132800000

Plat Book & Page: 2000-61

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Y

Transfer or Split: T

Within 1mi of Agriculture District: Yes

Prior Building Value: \$103740

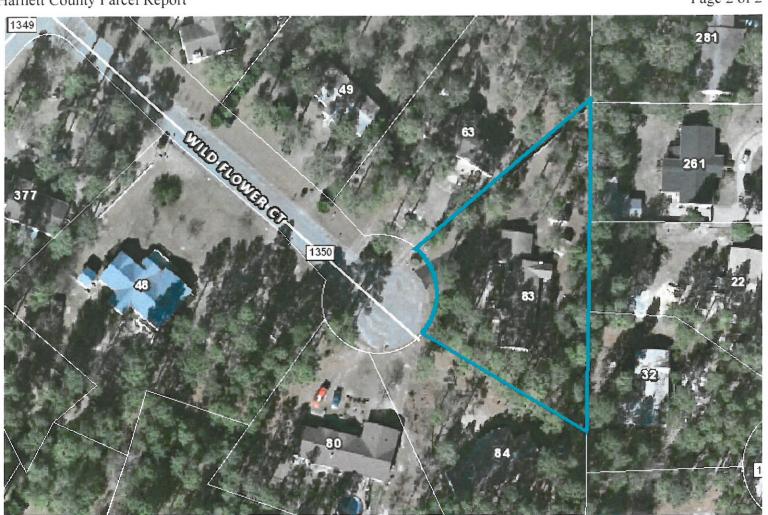
Prior Outbuilding Value: \$0

Prior Land Value: \$25000

Prior Special Land Value: \$0

Prior Deferred Value: \$0

Prior Assessed Value: \$128740



HTE #05-50013340

### HARNETT COUNTY HEALTH DI RTMENT ENVIRONMENTAL HEALTH SECTION

18014

Grand 343 OPERATIONS PERMIT

Name: (owner) HIGHLAND HOME BUILDERD D New Installation D Septic Tank Repair
Property Location: SR# NC 24/27 Nitrification Line Expansion  Subdivision Higher Special Special Tax ID # Quadrant #
Contractor: LARRE Registration #
Basement with Plumbing:  Garage:  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 De Other POLYSTYRENE AGGREGATE TRENCH
Size of tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of ditches I of each ditch 150 ft. ditches 3 ft. ditches 24-16 in.
French Drain Required: Linear feet Date: Date:
PERMIT NO. 22350 Inspected by:
DEAWING NTS
Lee REPAIR AREA FOR LIS 3 BORM  188  188  188  188  188  188  188  1

### HANNETT COUNTY HEALTH DEPAR IENT

OF 500 13343

# **IMPROVEMENT PERMIT** 22350

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) High Land Home Buildens New Installation Septic Tank Repair Property Location: SR# N(24/27) Nitrification Line Expansion Usubdivision The High Lands Q Sheewed Forest Lot # 19

Tax ID# Quadrant # Quadrant # Lot Size: 57 AC Basement with Plumbing: Garage: Garage: Water Supply: Well Distance From Well: ft. Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: \( \subseteq \text{Conventional} \) \( \subseteq \text{Other} \) \( 25\text{25 Red-ction} \) \( 57576m \) Size of tank: Septic Tank: \_\_\_\_\_ gallons Pump Tank: \_\_\_\_\_ gallons No. of ditches ft. of each ditch 150 ft. ditches 3 ft. depth of depth of ditches 1824 in. Subsurface Drainage Field French Drain Required: \_\_\_\_\_Linear feet of 25% helation system This permit is subject to revocation if site plans or intended use change. Signed: Environmental Health Specialist 30' EAsement 3BR 26×72 Do not Drive or 133 Park on septic Wild Flower CZ