

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

NAME Christine Arnold EMAIL ADDRESS: CGAGLIARDI20@Live.com
PHONE NUMBER 914-420-2181
PHYSICAL ADDRESS 1404 PONDEROSA TRAIL, CAMERON NC 28324
MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

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

CAROLINA SEASONS

SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling: Modular Mobile Home Stick built Other BRICK

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: _____

In order for Environmental Health to help you with your repair, you will need to comply by completing the following:

1. 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.

Christine Arnold

Signature

9-3-2018

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) 1993

Installer of system ?

Septic Tank Pumper ?

Designer of System ?

1. Number of people who live in house? 1 # adults 0 # children 1 # 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 _____

3. If you have a garbage disposal, how often is it used? daily weekly monthly

4. When was the septic tank last pumped? 11/2010 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 roof,

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?

The lines are saturated

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 R+J Septic came out

due to smell and lines are saturated and need to be replaced

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 298.00

Parcel Identifier No. 9556-89-0972.000 Verified by _____ County on the ____ day of _____, 20__
By: _____

Mail/Box to: The Law Office of Jeffrey E. Radford, P.A., 1300 Bragg Blvd, Suite 1316, Fayetteville, NC 28301

This instrument was prepared by: The Law Office of Jeffrey E. Radford, P.A., 1300 Bragg Blvd, Suite 1316, Fayetteville,

Brief description for the Index: LOT J-5, SEC Three, Carolina Season

THIS DEED made this 8th day of November, 2018, by and between

GRANTOR
Jonathan E Flanagan and wife, Esther C Flanagan
3484 Rhodes Hill Drive
Martinez, GA 30907

GRANTEE
Christine Ann Arnold and wife, Jeffrey Brent Arnold
274 Cresthaven Drive
Sanford, NC 27332

Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership.

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, parcel of land or condominium unit situated in the City of Cameron, Johnsonville Township, Harnett County, North Carolina and more particularly described as follows:

Being all of Lot J-5, according to a map entitled Final Plat of Carolina Seasons, Section Three, prepared by Bracken & Associates, dated May 23, 1991 and recorded in Plat Cabinet F, Slide 75-D, Harnett County Registry, NC.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 1502 page 941.
All or a portion of the property herein conveyed ___ includes or X does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book F page 75-D.

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.

By: _____ (Entity Name) X Jonathan E Flanagan (SEAL)
 Print/Type Name: Jonathan E Flanagan

By: _____ X Esther C Flanagan (SEAL)
 Print/Type Name & Title: _____ Print/Type Name: Esther C Flanagan

By: _____ (SEAL)
 Print/Type Name & Title: _____ Print/Type Name: _____

By: _____ (SEAL)
 Print/Type Name & Title: _____ Print/Type Name: _____

State of Georgia - County or City of Columbia
 I, the undersigned Notary Public of the County or City of Columbia and State aforesaid, certify that _____
 and wife, Esther C Flanagan personally appeared before me this day and
 acknowledged the execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or
 seal this November day of 2018
November 8, 2018



Shanna Brothers Notary Public
 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 _____
 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
 (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

PC#F Slide 75-D

PC#F Slide 75-D

FINAL PLAT OF
"CAROLINA SEASONS"
 SECTION THREE
 JOHNSONVILLE TOWNSHIP
 HARNETT CO.,
 N.C.

address
 CAROLINA SEASONS, Inc.
 VAN R. GROCE, President
 P.O. BOX 2825
 SANFORD, N.C., 27330

Agent: DICK HARDY

SCALE - 1" = 200' MAY 23, 1991



ACREAGE SUMMARY

J-1	1.130	J-11	0.579	J-21	0.885	N-1	0.557
J-2	0.776	J-12	0.579	J-22	0.929	N-2	0.582
J-3	0.598	J-13	0.518	J-23	0.975	N-3	0.877
J-4	0.572	J-14	0.519	J-24	1.040	N-4	0.834
J-5	0.680	J-15	0.579	J-25	0.463	N-5	0.682
J-6	0.619	J-16	0.472	J-26	0.456	N-6	0.794
J-7	0.663	J-17	0.586	J-27	0.508	Easement 0.181	
J-8	0.560	J-18	0.669	J-28	0.539		
J-9	0.561	J-19	0.749	J-29	0.661		
J-10	0.567	J-20	0.838	J-30	0.744		

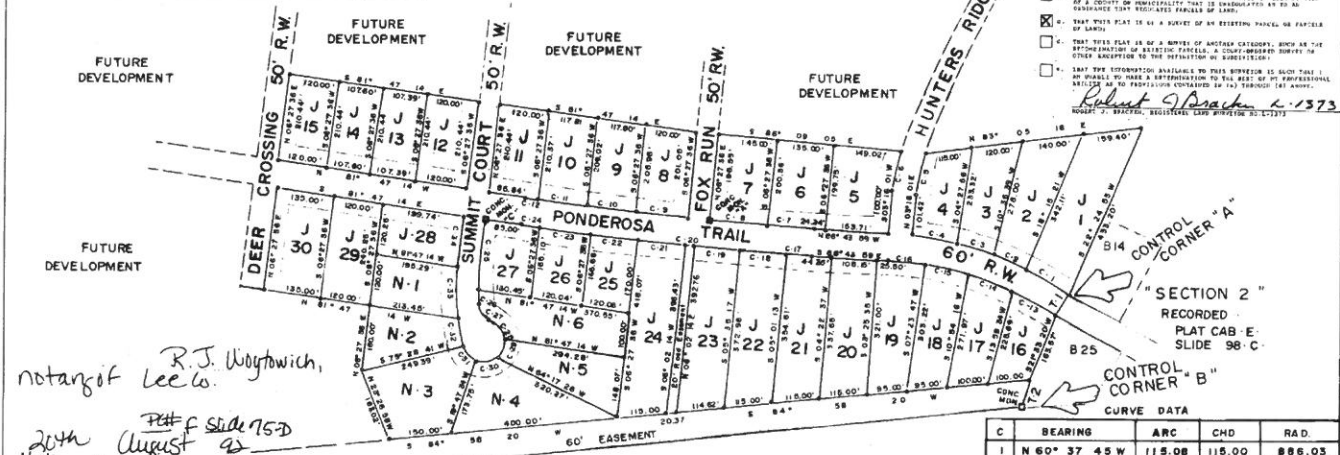
Certificate of Accuracy by Registrar of Deeds
 North Carolina
 Title for Registration on the day of at
 and duly recorded in the Public Office at
 Register of Deeds of Harnett County
 My Commission Expires July 9, 1994

LINE DATA
 T1 S 33° 05' 40" W 60.00'
 T2 S 21° 33' 20" W 67.09'

I, ROBERT J. BRACKEN, CERTIFY THAT UNDER MY DIRECTION AND SUPERVISION THIS MAP WAS DRAWN FROM AN ACTUAL FIELD LAND SURVEY; THAT THE ERROR OF CLOSURE IS CALCULATED BY LATITUDE AND DEPARTURES IS 1-10,000 THAT THE MAP WAS PREPARED IN ACCORDANCE WITH GS 47-30 AS AMENDED.
 Robert J. Bracken 1573
 REGISTERED LAND SURVEYOR

I, A NOTARY PUBLIC OF THE COUNTY AND STATE OF NORTH CAROLINA, CERTIFY THAT ROBERT J. BRACKEN, A REGISTERED LAND SURVEYOR, PERSONALLY APPEARED BEFORE ME THIS DAY AND ACKNOWLEDGED THE EXECUTION OF THE FOREGOING INSTRUMENT. WITNESS MY HAND AND OFFICIAL STAMP OR SEAL THIS 23 DAY OF MAY 1991.
 Robert J. Bracken
 NOTARY PUBLIC
 MY COMMISSION EXPIRES JULY 9, 1994

RECORDED
 Plat Cdb F
 Page 15-D



notary of Lee Co.
 R.J. Wojtowich
 20th August 91
 PC#F Slide 75-D
 4/16
 holder by: Judith C. Smith

CAMERON
 Plat Cdb C
 Page 110-D

25 Jun 91 Michael D. E. E.

Certification of Accuracy and Mapping
 I, Robert J. Bracken, certify that this map was drawn from an actual field land survey; that the error of closure is calculated by latitude and departures is 1-10,000; that the map was prepared in accordance with GS 47-30 as amended.
 Robert J. Bracken 1573
 REGISTERED LAND SURVEYOR

Certification of Accuracy by Registrar of Deeds
 North Carolina
 Title for Registration on the day of at
 and duly recorded in the Public Office at
 Register of Deeds of Harnett County
 My Commission Expires July 9, 1994

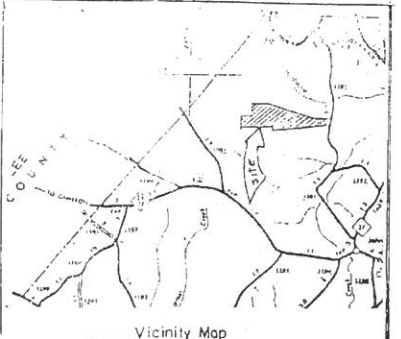
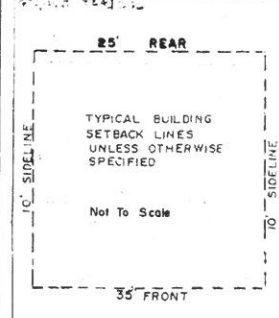
ZONING "RA - 20 R"
 SEPTIC TANKS
 COUNTY WATER

DEED REFERENCE FOR TRACT
 Book - 916
 Pages 287-290

DEPARTMENT OF TRANSPORTATION

B. B. Mason
 JULY 31, 1991

C	BEARING	ARC	CHD	RAD.
1	N 60° 37' 45" W	115.08	115.00	886.05
2	N 67° 15' 31" W	90.04	90.00	886.08
3	N 73° 04' 52" W	90.04	90.00	886.03
4	N 79° 44' 43" W	116.07	116.00	886.03
5	N 07° 18' 01" E	97.74	97.66	700.00
6	S 07° 01' 06" W	98.21	98.14	750.00
7	N 86° 20' 09" W	110.79	110.79	8044.33
8	N 85° 28' 40" W	144.93	144.93	8044.33
9	N 84° 07' 42" W	119.95	119.95	8044.33
10	N 83° 16' 54" W	117.75	117.75	8044.33
11	N 82° 26' 35" W	117.78	117.78	8044.33
12	N 81° 34' 50" W	33.17	33.17	8044.33
13	S 81° 04' 41" E	120.22	120.12	826.00
14	S 69° 03' 47" E	110.08	110.00	826.00
15	S 76° 41' 58" E	110.08	110.00	826.00
16	S 83° 37' 18" E	89.62	89.58	826.00
17	S 86° 29' 53" E	85.14	85.14	8104.00
18	S 85° 03' 06" E	109.55	109.55	8104.00
19	S 85° 08' 37" E	108.59	108.59	8104.00
20	S 84° 39' 09" E	20.00	20.00	8104.00
21	S 84° 11' 36" E	109.78	109.78	8104.00
22	S 83° 22' 52" E	120.00	120.00	8104.00
23	S 82° 32' 03" E	120.00	120.00	8104.00
24	S 81° 57' 01" E	45.45	45.45	8104.00
25	N 06° 27' 36" E	165.49	164.97	600.00
26	N 03° 47' 08" W	49.09	49.09	600.00
27	N 41° 57' 28" W	37.52	38.12	30.00
28	N 48° 50' 27" W	54.01	51.42	80.00
29	N 15° 31' 42" W	54.84	52.13	80.00
30	N 78° 22' 19" E	54.84	52.13	80.00
31	S 41° 46' 13" E	49.87	47.57	80.00
32	S 10° 28' 34" E	67.10	67.07	660.00
33	S 02° 06' 18" E	122.09	121.81	660.00
34	S 08° 34' 55" W	120.37	120.19	660.00



I FURTHER CERTIFY THAT THIS PROPERTY DOES NOT LIE WITHIN A SPECIAL FLOOD HAZARD AREA AS DESIGNATED BY THE DEPT. OF HOUSING AND URBAN DEVELOPMENT.

BRACKEN & ASSOCIATES
 ENGINEERING • SURVEYING
 P. O. BOX 512 • SANFORD, N. C. 27330

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Custom Contracting Corp. New Installation Septic Tank
Property Location: SR# _____ Repairs Nitrification Line
Subdivision Carrollton Seasons Lot # J-5
Contractor: Wayne Spivey Registration # 71
Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: _____ ft.

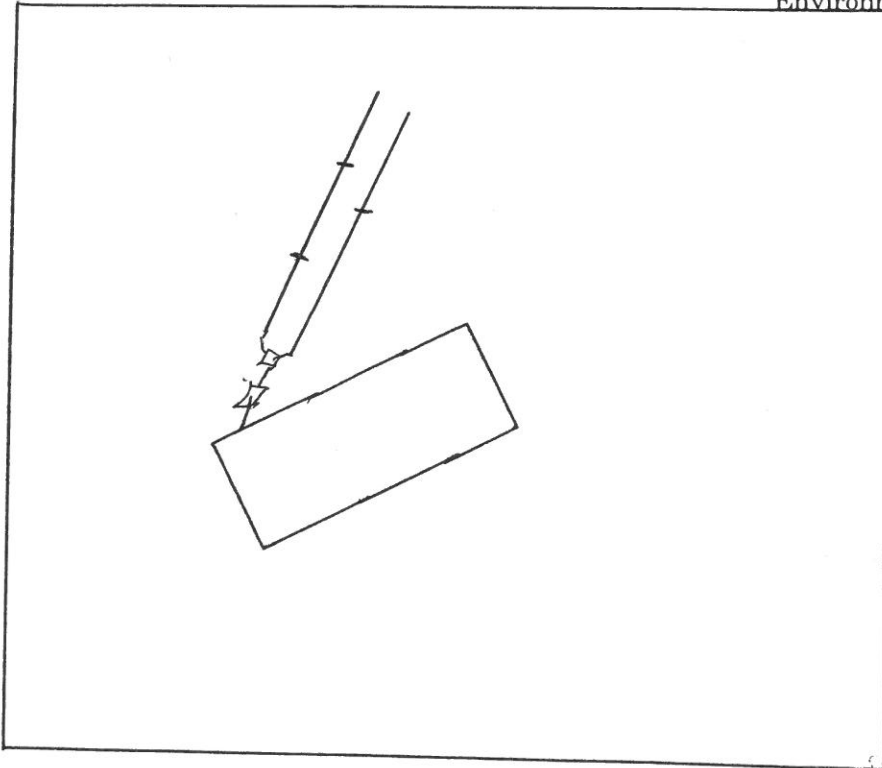
Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other _____
Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18-30 in.
French Drain: _____ Linear feet

PERMIT NO. 7662

Date: 30 June, 1993
Inspected by: Paul A. Verhulst

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) Custom Contracting Corp. New Installation Septic Tank
Property Location: CAROLINA SEASONS Lot J-5 Repairs Nitrification Line
Ponderosa Trail

Number of Bedrooms Proposed: 3 Lot Size: ~30,000 sq ft

Basement with Plumbing: Garage:
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.

Type of system: Conventional Other _____

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

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 36 in.

French Drain required: _____ Linear feet

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

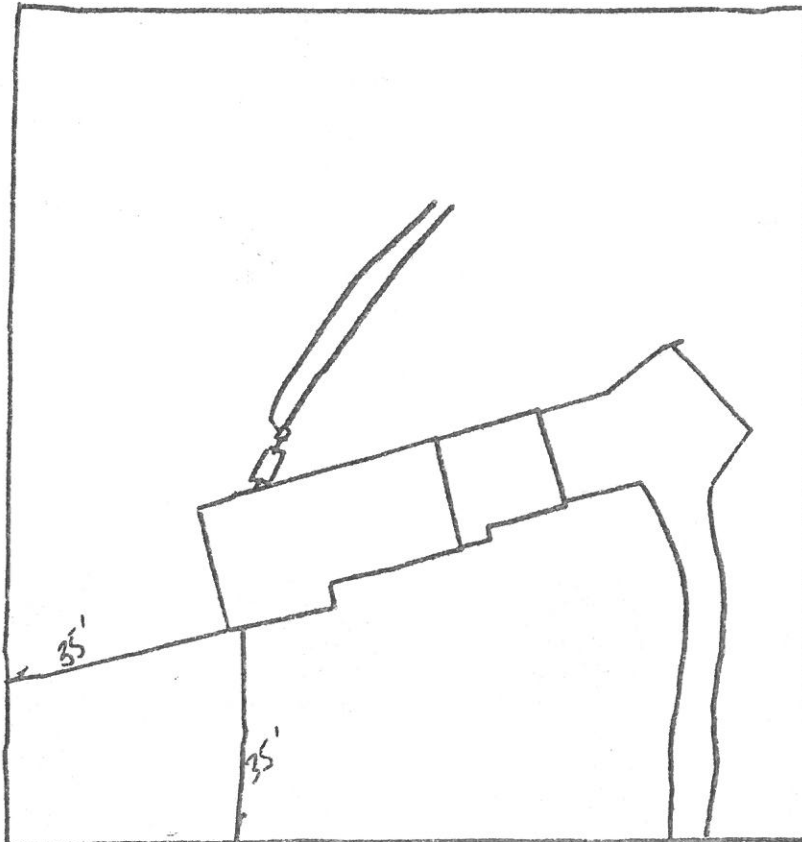
Date: 3/28/93

Signed: Robert G. Zulcher, L.S.

Environmental Health Specialist

VOID AFTER 5 YEARS

INSTALL ON CONTOUR



Print this page



Property Description:

LOT#J-5 CAROLINA SEASONS SEC 3
PC#F-75D

**Harnett County
GIS**

PID: 099567 0006 81

PIN: 9556-89-0972.000

REID: 0012846

Subdivision:

Taxable Acreage: 1.000 LT ac

Caclulated Acreage: 0.69 ac

Account Number: 1500029876

Owners: ARNOLD CHRISTINE ANN & ARNOLD JEFFREY BRENT

Owner Address : 274 CRESTHAVEN DR SANFORD, NC 27332-1339

Property Address: 1404 PONDEROSA TRL CAMERON, NC 28326

City, State, Zip: CAMERON, NC, 28326

Building Count: 1

Township Code: 09

Fire Tax District: Spout Springs

Parcel Building Value: \$115590

Parcel Outbuilding Value : \$0

Parcel Land Value : \$32000

Parcel Special Land Value : \$0

Total Value : \$147590

Parcel Deferred Value : \$0

Total Assessed Value : \$147590

Neighborhood: 00901

Actual Year Built: 1993

TotalAcutalAreaHeated: 1678 Sq/Ft

Sale Month and Year: 12 / 2018

Sale Price: \$149000

Deed Book & Page: 3661-0359

Deed Date: 1544745600000

Plat Book & Page: PC#F-75D

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Q

Transfer or Split: T

Within 1mi of Agriculture District: No

Prior Building Value: \$125320

Prior Outbuilding Value : \$0

Prior Land Value : \$25000

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$150320

