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

-	_			
	FMAIL	ADDRESS: dc	hoson 466@	gmail. Con
Olack Tolo.		0)0	-01522	J
NAME_Clark John		NUMBER 919.	754-1220	2
PHYSICAL ADDRESS 25 Doug	Johnson L	one, An	ger, NC	2750/
MAILING ADDRESS (IF DIFFFERENT THAN PHYS	SICAL)	-		
IF RENTING, LEASING, ETC., LIST PROPERTY OV	VNER NAME			
None				
SUBDIVISION NAME LO	T #/TRACT # STAT	E RD/HWY	SIZE OF LO	T/TRACT
Type of Dwelling: [] Modular [] Mobil	e Home M Stick built	[] Other		
Number of bedrooms [] Baseme	ent			
Garage: Yes [v] No [] Dis	shwasher: Yes [/] No []	Ga	rbage Disposal: Yes	[] No []
Water Supply: [] Private Well []	Community System	[v] County		_
Directions from Lillington to your site: 42	15 TL on	NC27 to	(outs, T	LNC55
so appx + miles	lic on Da	as Johns	on Ln	<u>15t</u>
1100000				
In order for Environmental Health to help	you with your repair, you wi	ll need to comply by	completing the fo	llowing:
1.The outlet end of the tank and the distribution uncovered, property lines flagged, undergroun 910-893-7547 to confirm that your site is read Your system must be repaired within 30 days letter. (Whichever is applicable.)	on box will need to be uncovered utilities marked, and the orang y for evaluation.	I and property lines flage ge sign has been place	agged. After the tank d, you will need to c a	is I ll us at
By signing below, I certify that all of the above		•		ill result in

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.

ar h	ome was built (or year of septic tank installation) 2010 Eastern Septic to make
stalle	
ptic	Tank Pumper
esign	er of System ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
	7
1.	Number of people who live in house?# adults# children# 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 Clark & Kathy Johnson
3.	If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly
4.	When was the septic tank last pumped? Were How often do you have it pumped? When have a dishurcher how often do you have it pumped?
5.	If you have a distinuasher, now often do you use it? [1] daily [4] every other day [1] 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?
	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
	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:
	[v] Power [] Phone [v] Cable [] Gas [v] Water
16.	Describe what is happening when you are having problems with your septic system, and when was this
	first noticed? Net 500t in front yard does not go away 10 10 buby 6 months from septic Line per Eastern sep
	Low puby 6 months from some him as Fistern Ser
17	Do you notice the problem as being patterned or linked to a specific eyent (i.e., wash clothes, heavy
<u> </u>	rains, and household guests?) [] YES [] NO If Yes, please list

Harnett County Department of Public Health HTE# 08.5-19465 20034 Operation Permit PERMIT # 24607 New Installation Septic Tank Repair Nitrification Line Expansion PROPERTY LOCATION: Thung 55 Name: (owner) GARY + NICKEE BROWN SUBDIVISION Jones & JOHNSON LOT # System Installer. Ottos STRICKIAND Registration # Basement with plumbing: Garage Number of Bedrooms Type of Water Supply:
Community Public Well Distance from well System Type: 25% REDUCTION System Type TIG GZ Cay Types V and VI Systems expire in 5 years. (In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal. This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization. AND INSTALLED AS DERECTEN! + Full STORAGE ON DITCUS 12" From THEOS WATERLEW &

INSTAN FOR END

* HINSPECTED

ON

5-21-08 45 PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule . 1961. Monitoring: II. As required by Rule .1961. III. As required by Rule .1961. Other: Maintenance: Subsurface system operator required? Yes 🗆 No 🗀 If yes, see attached sheet for additional operation conditions, maintenance and reporting. Operation: Other:

IV. Following are the specifications for the sewage disposal system on the above captioned property. Other 5% REDUCTION System Type TILE Septic Tank: 1000 Type of system:

Conventional gallons Pump Tank: Subsurface No. of exact length width of depth of Drainage Field of each ditch ditches 28 -> 18 inches French Drain Required: Linear feet Manhontens Authorized State Agent 5-21-08 Date

HTE# <u>08-5-19465</u>

Harnett County Department of Public Health 24607 Improvement Permit

A building permit cannot be issued with only an Improvement Permit PROPERTY LOCATION: HWY 55 GARLY NECKER BROWN SUBDIVISION James D JOHNSON NEW 😿 EXPANSION | Site Improvements required prior to Construction Authorization Issuance: Type of Structure: Proposed Wastewater System Type: Projected Daily Flow: _ Number of bedrooms: Number of Occupants: Basement TYes May be required based on final location and elevations of facilities Pump Required: Yes □ No Type of Water Supply: Community Public Well Distance from well ______feet Five years Permit valid for: Permit conditions: ☐ No expiration The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit. Construction Authorization (Required for Building Permit) The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout. ISSUED TO: GARY+NICKEE BROWN PROPERTY LOCATION: Hwy 55
SUBDIVISION James & Johnson ☐ Expansion Basement? Yes Basement Fixtures? Yes D No Type of Wastewater System** 2596REDVCTION Is Admitial Wastewater Flow: 360 GPD (See note below, if applicable (1) Installation Requirements/Conditions Exact length of each trench 150 Septic Tank Size 1000 gallons Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: Maximum Trench Depth of: 26-718 (Maximum soil cover shall not exceed (Trench bottoms shall be level to +/-1/4" 36" above the trench bottom) in all directions) Pump Requirements: ______ft. TDH vs. inches above pipe Conditions: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit. Owner/Legal Representative Signature: This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Freatment and Disposal and to the conditions of this permit. Authorized State Age

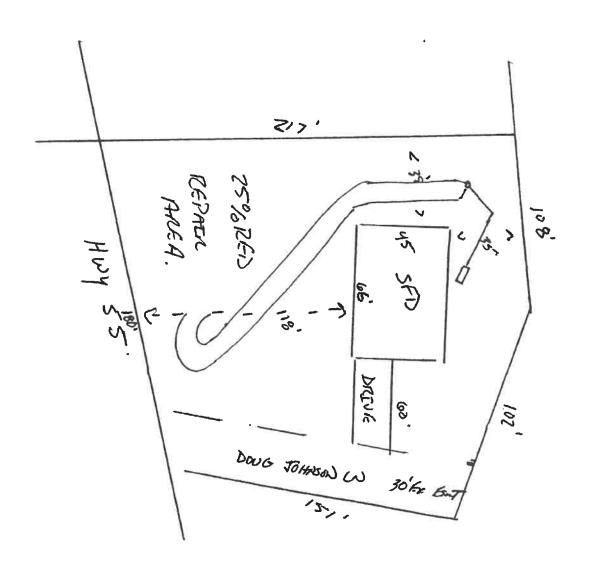
Construction Authorization Expiration Date:

HTE# 08-5-19465

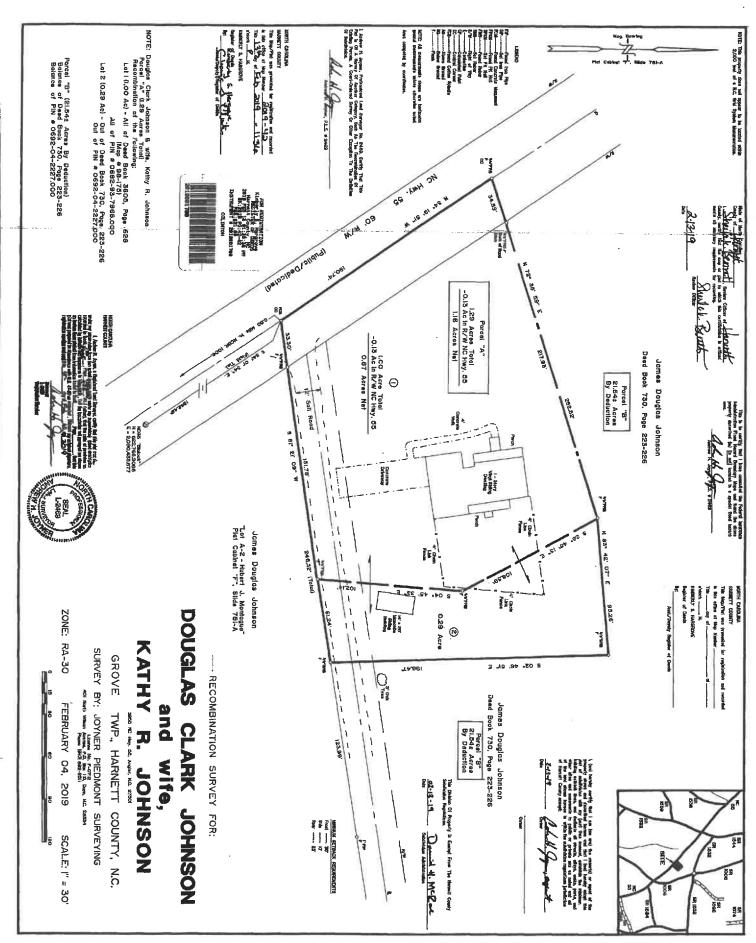
Permit # 24607

Harnett County Department of Public Health Site Sketch

Authorized State Agent James C Markon Leves Date: 3-4-08



t	Customer: 22	6543 - 030881		Balance:	\$40.90		Active				Residential
	CLARK JOHNSON 25 DOUG JOHNSON LN ANGIER, NC 27501 (919) 754-7222		Deposit; (\$25.00)		Collections Okay	Collections Okay			Owner		
1			Last Bill:	Last Bill: \$40.90 Due 12/10/2020		OUE#					
			Plan:	None		Meter Number:	1340327	0			
-			Next:	Next:		Cycle/Book: East Central 9 / Book 55 Call Number: 02860				Moved in 6/12/; Eligible for Arra	
	Bills	Comments		Move <u>I</u> n/Out	L	pans/POS	Coll <u>e</u> ctions	<u>N</u> o	tes	Attachme	nts
-	<u>C</u> ustomer	Service	e Address	Cust	tomer/Account	Services	<u>A</u> ddresses		<u>T</u> ran	saction History	<u>R</u> e
			A Page	11 (20	7.0.	0			-	-	
	- 7	1 7	O Reco	rd 1 of 30	1.0.	0			400		N. P. C. L.
	Service A	Read Date ▼	O Reco	rd 1 of 30 Read Type	Read Status	Previous Reading	Current Reading	n m	Days	Consumption	Unit Of Measu
	Service ▲ > Water	Read Date ▼ 11/2/2020	4414	Read Type	Read Status Actual Read	Previous Reading 1071950.000	Current Reading		Days 34	Consumption 5800.000	
	упитовический по	-	Meter	Read Type Potable		1		111 111			Gallons
	> Water	11/2/2020	Meter 13403270	Read Type Potable Potable	Actual Read	1071950.000	1077750.000	111 111	34	5800.000	Gallons Gallons
A CHARLES OF THE CHAR	> Water Water	11/2/2020 9/29/2020	Meter 13403270 13403270	Read Type Potable Potable Potable	Actual Read Actual Read	1071950.000 1066190.000	1077750.000 1071950.000		3 4 34	5800.000 5760.000	Gallons Gallons Gallons
- Charles of Martin Charles (Charles of Charles of Char	> Water Water Water	11/2/2020 9/29/2020 8/26/2020	Meter 13403270 13403270 13403270	Read Type Potable Potable Potable Potable	Actual Read Actual Read Actual Read	1071950.000 1066190.000 1061620.000	1077750.000 1071950.000 1066190.000		34 34 27	5800.000 5760.000 4570.000	Gallons Gallons Gallons Gallons
	> Water Water Water Water Water	11/2/2020 9/29/2020 8/26/2020 7/30/2020	Meter 13403270 13403270 13403270 13403270	Read Type Potable Potable Potable Potable Potable Potable	Actual Read Actual Read Actual Read Actual Read	1071950.000 1066190.000 1061620.000 1048740.000	1077750.000 1071950.000 1066190.000 1061620.000		34 34 27 34	5800.000 5760.000 4570.000 12880.000	Gallons Gallons Gallons Gallons Gallons Gallons
	Water Water Water Water Water Water Water	11/2/2020 9/29/2020 8/26/2020 7/30/2020 6/26/2020	Meter 13403270 13403270 13403270 13403270 13403270	Read Type Potable Potable Potable Potable Potable Potable Potable	Actual Read Actual Read Actual Read Actual Read Actual Read	1071950.000 1066190.000 1061620.000 1048740.000 1040710.000	1077750.000 1071950.000 1066190.000 1061620.000 1048740.000		34 34 27 34 30	5800,000 5760,000 4570,000 12880,000 8030,000	Gallons Gallons Gallons Gallons Gallons Gallons Gallons



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HARNETT COUNTY TAX ID#	Ė
040.82-0108-03	_
	-
5/16/18 BY CW	



NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: 15 36 5.00	
Parcel Identifier No. 040682010803 Verified by	County on the day of, 20
Mail/Box to: McLeod Law Firm, 209 S. Wilson Avenue, Dunn, NC 23	8334
This instrument was prepared by: McLeod Law Firm, 209 S. Wilson A	venue, Dunn, NC 28334
Brief description for the Index:	
THIS DEED made this 16th day of May	, 20 <u>18</u> , by and between
GRANTOR Gary W Brown and wife, Nickie J Brown 3955 NC 55 W Angier, NC 27501 Enter in appropriate block for each Grantor and Grantee: name, mai corporation or partnership.	GRANTEE Douglas Clark Johnson and wife, Kathy R Johnson 6263 Green Path Road Dunn, NC 28334 ling address, and, if appropriate, character of entity, e.g.
The designation Grantor and Grantee as used herein shall include said plural, masculine, feminine or neuter as required by context.	parties, their heirs, successors, and assigns, and shall include singular,
WITNESSETH, that the Grantor, for a valuable consideration paid by these presents does grant, bargain, sell and convey unto the Grantee i situated in the City of,	
See Attached Exhibit A	
The property hereinabove described was acquired by Grantor by inst All or a portion of the property herein conveyed includes or X	
A map showing the above described property is recorded in Plat Boo	ok 98 page 175.
Page 1	of 2

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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 e	xecuted the foregoing as of the day and year first above written.
	Hay W. Brown (SEAL)
(Entity Name)	Print/Type Name: Gary W Brown
Ву:	hielei J. Bronn (SEAL)
Print/Type Name & Title:	Print/Type Name: Nicke I Brown (SEAL)
Ву:	(SEAL)
By:Print/Type Name & Title:	Print/Type Name:
By:	(SEAL)
Print/Type Name & Title:	Print/Type Name:
State of North Carolina - County or	City of Hamett
0 100	ounty or City of Hamett and State aforesaid, certify that
Gary W Brown and wife, Nickie J Brown	personally appeared before me this day and acknowledged the du
, 20_16.	personally appeared before me this day and acknowledged the du oses therein expressed. Witness my hand and Notarial stamp or seal this 16th day of the day
My Commission Expires: 12-04-2030 (Affix Seal)	Dt. of Relaises
My Commission Empires: 15-04-2050	Patricial Scharfer
(Affix Seal)	Notary's Printed or Typed Name
State of County or G	City of County of
I, the undersigned Notary Public of the Co	
avagution of the foregoing instrument for the sur-	personally appeared before me this day and acknowledged the due
, 20	ses therein expressed. Witness my hand and Notarial stamp or seal this day or
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name
State of County or C	City of and State aforesaid, certify that
I, the undersigned Notary Public of the Co	ounty or City of and State aforesaid, certify that
	personally came before me this day and acknowledged that , a North Carolina or
_he is the of	, a North Carolina or
corporation/limi	ted liability company/general partnership/limited partnership (strike through the
behalf as its act and deed. Witness my hand and N	as the act of such entity,he signed the foregoing instrument in its name on its otarial stamp or seal, this day of, 20
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name

EXHIBIT A for DOUGLAS CLARK JOHNSON AND WIFE, KATHY R. JOHNSON

Black River Township, Harnett County:

BEING all of that tract of land containing 1.00 total acres, (0.87 acres net), more or less, according to that final plat drawn by Joyner Piedmont Surveying, Andrew H. Joyner, RLS, entitled, "Property of Nickie L. J. Purser and husband, Russell Wayne Purser,' dated April 9, 1998 and recorded in Map No. 98-175, Harnett County Registry, said plat being incorporated herein by reference as if fully set forth.

Parcel ID:

040682010803

Address:

25 Doug Johnson Lane, Angier, NC 27501