

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 SANTIAGO E AGUILAR EMAIL ADDRESS: rhapsody.property.grap@gmail.com
PHONE NUMBER 919-335-3699

PHYSICAL ADDRESS 134 GREEN SPRING DR; SANFORD, NC 27332

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 2504 PLOWRIDGE RD; FURQUAY VARINA, NC 27526

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME N/A

SUBDIVISION NAME SUNSET RIDGE LOT #/TRACT # 122 STATE RD/HWY NEAR NC-27 SIZE OF LOT/TRACT 0.42 ACRE

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: TAKE NC-27 W/E EAST FOR 13 MILES,
TURN LEFT ONTO TINGEN RD (1.6 MILES); TURN RIGHT ON ALPINE
DRIVE (0.2 MILES); TURN LEFT ONTO GREEN SPRING DR, HOUSE
NUMBER IS 134 ON RIGHT

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.


Signature

12/29/2020
Date

HOMEOWNER INTERVIEW FORM

(INVESTMENT PROPERTY BOUGHT ON 10/30/2020 AND REMODELED)

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) 1997

Installer of system NO SEPTIC PERMIT ON FILE

Septic Tank Pumper _____

Designer of System _____

- 1. Number of people who live in house? HOUSE IS CURRENTLY VACANT, WILL BE SOLD TO
2 # adults 2 # children 4 # total
- 2. What is your average estimated daily water usage? NOT KNOWN gallons/month or day _____ county water. If HCPU please give the name the bill is listed in N/A

- 3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly NO GARBAGE DISPOSAL
- 4. When was the septic tank last pumped? NOT KNOWN How often do you have it pumped? NOT KNOWN
- 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 NONE

- 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 NONE
- 15. Are there any underground utilities on your lot? Please check all that apply: ~~POWER~~
 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?
SEPTIC INSPECTION WAS PERFORMED ON 12/11/2020 BY AWT AND FOUND THE SEPTIC SYSTEM NEEDED REPAIRS. HOUSE IS CURRENTLY VACANT AND IN PROCESS OF SALE

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 _____



Agri-Waste Technology, Inc.
501 North Salem Street, Suite 203
Apex, NC 27502
919-859-0669
www.agriwaste.com

SEPTIC SYSTEM INSPECTION REPORT
For
134 Green Spring Drive, Sanford, NC. 27332

PREPARED FOR: Santiago Aguilar, Home Seller

PREPARED BY: Alex Thompson, Associate Agronomist/Soil Scientist
NCOWCICB Inspector #4941I

DATE: December 11, 2020

The septic system serving the home at 134 Green Spring Drive was inspected by Alex Thompson of Agri-Waste Technology, Inc., (AWT) on December 8, 2020. The residence is served by a conventional gravity septic system consisting of a septic tank and drain field components. The house is advertised as a 3-bedroom home. The septic permit, however, could not be obtained to confirm this number. Water is supplied to the home via a public water supply. A copy of the septic permit request to the Harnett County Health Department is included in Attachment 1. A copy of the septic system inspection checklist, pictures taken during the inspection, and the inspection request form can be found in Attachment 2. A detailed discussion of the inspection is below.

General septic system information can be found on the North Carolina State University - Soil Science Department website. The address is www.soil.ncsu.edu. Additional routine septic system and maintenance information is in Attachment 3 following this report.

Septic Drain Field

The septic drain field is located in the back yard. Two gravel trenches were located during the inspection. The drain field was assessed with a soil probe. The trenches are not saturated. The drain field is gravity fed via distribution device. The distribution device could not be located during the inspection. The outlet pipe of the septic tank is obstructed, and no water could be conveyed to the drain field. The area is well-maintained. There was no surfacing effluent within the drain field at the time of inspection. Surface water did not collect in the drain field area during the inspection. Normal daily dosage of liquid effluent flow to the drain field is not

occurring at this location, due to the fact, that the home is vacant. Therefore, the drain field conditions during daily usage of the septic system cannot be replicated during the inspection.

Septic Tank

The septic tank is located near the back of the house. Excavation was required to access the septic tank. A cement sidewalk is built over the inlet access point of the tank, and the inlet compartment of the septic tank could not be accessed. Extensive root intrusion is occurring in the septic tank. A large tree is located next to the tank. The liquid level in the septic tank is well below the appropriate height and leakage is suspected. The top of the tank is buried approximately 8 inches deep. A total of 8-10 inches of residuals were measured in the septic tank. The outlet tee is deteriorated. The outlet pipe is obstructed. The baffle wall was found to be functioning properly.

Attachment 3 contains a table entitled *Estimated Septic Tank Inspection and Pumping Frequency in Years* that indicates the recommended pumping frequency based on the number of occupants in the house and the septic tank size.

Conclusions

- The liquid level in the septic tank is well below the appropriate height and leakage is suspected.
- A cement sidewalk is built over the inlet access point of the tank, and the inlet compartment of the septic tank could not be accessed.
- Extensive root intrusion is occurring in the septic tank.
- A large tree is located next to the tank.
- The outlet tee is deteriorated.
- The outlet pipe is obstructed.
- I recommend contacting a certified septic installer/repair company to ensure these issues are addressed properly. After the repairs have been made I recommend having the repair company evaluate the distribution device and the drain field to ensure that no further repairs are needed.

We appreciate the opportunity to assist you. Please contact us with any questions, concerns, or comments.

Sincerely,



Alex Thompson

As indicated in the AGREEMENT FOR PROFESSIONAL ENVIRONMENTAL SERVICES Point of sale "septic system inspections constitute a snapshot evaluation in time of the system(s) and do not guarantee future performance of the system(s) due to numerous factors including, but not necessarily limited to, the following: water use patterns of the inhabitants of the dwelling, occupancy of the dwelling (no occupancy for an extended period of time or occupancy in excess of the system design parameters), acts of God or natural disasters, lack of visibility of many of the system components, placement of inappropriate items into the system (non-degradable items, water softener brine, etc.), physical disturbance of or damage to the system or system components, etc."

**ATTACHMENT 1: Harnett County Health Department
Septic Permit Documentation**

ATTACHMENT 2: Septic System Inspection Checklist

SUBSURFACE WASTEWATER SYSTEM INSPECTION CHECKLIST

<u>12/08/2020</u>	<u>Alex Thompson</u>	<u>49411</u>
Date of Inspection	Inspector's Name	Certification Number 3
Permit Number	Date of Operation Permit 134 Green Spring Drive	Advertised # of Bedrooms
Buyer	Address of Property	Current Owner Public
Tax Map	Parcel	Water Source
	Lot #	PIN

INSPECTION RESULTS:

<u>COLLECTION/TANK SYSTEM:</u>	YES / NO / NA	<u>REMARKS</u>
Evidence of leaks ?	<input checked="" type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>	
Water level in tank: <u>Low</u>		Root intrusion is occurring in the septic tank
Tank risers accessible, free of infiltration and surface water diverted ?		
Inlet riser?	<input type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/>	A large tree is next to the septic tank
Type: <u>Not Required</u>		
Outlet riser?	<input type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/>	A sidewalk is built over the inlet access point, preventing the inlet compartment from being accessed
Type: <u>Not Required</u>		
Estimated distance from soil surface to Top of tank: <u>8</u> inches		
Tank has baffle wall?	<input checked="" type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>	The outlet tee is deteriorated
Outlet T is present/intact?	<input type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/>	
Roots present in tank?	<input checked="" type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>	The outlet pipe is obstructed
Inlet pipe clear/unobstructed?	<input type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/>	
Outlet pipe clear/unobstructed?	<input type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/>	
Septic tank needs pumping?	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>	The liquid level is well below the invert of the outlet pipe and leakage is suspected
Inches of solids: <u>8-10</u>		
Date of last tank pumping known?	<input type="checkbox"/> / <input checked="" type="checkbox"/> / <input type="checkbox"/>	
If known, when: <u> </u> / <u> </u> / <u> </u>		
Estimated Distance From:		
House/Structure: <u>5+</u> ft		
Well: <u>-</u> ft		
Water Line: <u>-</u> ft		
Property Line: <u>10+</u> ft		
Septic tank filter cleaned?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	

PRETREATMENT SYSTEM:

(Sand Filter or Peat Biofilter)		
Certified operator required?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	
Filter surface maintained ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	
Evidence of ponding ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	
Filter effluent free of excess solids ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	
Peat modules free of damage, accessible, properly ventilated & free of insects ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	
Samples collected at this inspection ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>	

EFFLUENT DOSING SYSTEM:

Required pumps present & functional ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
High water alarm operating properly ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
Floats, valves, etc. in good condition ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
Control panel & components in good condition ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
Evidence of leaks ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
Water level in tank: <u> </u>	
Tank riser accessible, free of infiltration and surface water diverted ?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
Type <u> </u>	
Roots present in tank?	<input type="checkbox"/> / <input type="checkbox"/> / <input checked="" type="checkbox"/>
Estimated distance from soil surface to Top of tank: <u> </u> inches	

Date of last tank pumping known? / /
 If known, when: ___ / ___ / ___
 Estimated Distance From:
 House/Structure: ___ ft
 Well: ___ ft
 Water Line: ___ ft
 Property Line: ___ ft
 Septic Tank: ___ ft
 Effluent free of excess solids? / /
 Inches of solids(pump/dose tank): _____
 Elapsed time readings? _____
 Counter readings? _____

DISPOSAL FIELD:

Evidence of effluent surfacing?	<input type="checkbox"/>	/	<input checked="" type="checkbox"/>	/	<input type="checkbox"/>	The distribution box could not be located
Evidence of effluent ponding in trenches?	<input type="checkbox"/>	/	<input checked="" type="checkbox"/>	/	<input type="checkbox"/>	
Surface water effectively diverted?	<input checked="" type="checkbox"/>	/	<input type="checkbox"/>	/	<input type="checkbox"/>	Two gravel trenches were located
Diversions/swales properly maintained?	<input type="checkbox"/>	/	<input type="checkbox"/>	/	<input checked="" type="checkbox"/>	
Vegetative cover maintained?	<input checked="" type="checkbox"/>	/	<input type="checkbox"/>	/	<input type="checkbox"/>	Home is vacant and the system could not be dosed during the inspection
Protected from traffic/unauthorized uses?	<input checked="" type="checkbox"/>	/	<input type="checkbox"/>	/	<input type="checkbox"/>	
Distribution devices in good condition?	<input type="checkbox"/>	/	<input type="checkbox"/>	/	<input type="checkbox"/>	
Field free of settled or low areas?	<input checked="" type="checkbox"/>	/	<input type="checkbox"/>	/	<input type="checkbox"/>	

Estimated Distance From:
 House/Structure: 10+ ft
 Well: - ft
 Water Line: - ft
 Property Line: 10+ ft
 Septic Tank: 5+ ft

PRESSURE DISTRIBUTION SYSTEM:

Certified operator required? / /
 Turnups/cleanouts/valves intact & accessible? / /
 Laterals free of excess solids? / /
 Laterals flushed this inspection? / /
 Pressure heads properly adjusted? / /

SYSTEM PERFORMANCE:

Design Pressure Head (ft): N/A Adjusted Pressure Head (ft): N/A
 Design Delivery Rate (gpm): N/A Measured Delivery Rate (gpm): N/A % of Design: N/A
 Dosing Volume (gal.): N/A
 Note: Delivery Rate(gpm) = (N/A inches drawdown N/A gallons/in) N/A minutes of run time
 Dose Volume(gal.) = N/A inches between float on & float off N/A gallons/in.

“Client requesting this inspection has been advised that for a complete inspection to be performed, the tank needs to be pumped. Client has declined to have the tank pumped at inspection and hereby acknowledges they have so declined.”
 See Electronic Form

Signature

ADDITIONAL COMMENTS:

086698

ESTIMATE
1000000000

1117 Walker Rd.
Sanford, NC 27332
919-499-1460

SOLD TO: Home Team Hope Dyck
ADDRESS: 134 Greenspring Dr
CITY, STATE, ZIP: Sanford, NC

SHIP TO: ADDRESS: CITY, STATE, ZIP: DATE: 12/21/20

TERMS: F.O.B. PRICE UNIT AMOUNT

QUANTITY & SERVICE	DESCRIPTION	PRICE	UNIT	AMOUNT
	Option 2 New 1000 sq ft concrete Supply, Fuel and Distribution		Box/Item	2600.00
	Option 2 New 1000 sq ft plastic Supply, Fuel and Distribution Box/Item			3000.00
	Paul G			
	Paul G			

B-16



PLANNING BOARD CERTIFICATE
 The Planning Board of Commissioners of the Town of Huntersville, North Carolina, hereby approves this final plan.

Robert R. Davidson
 Chairman

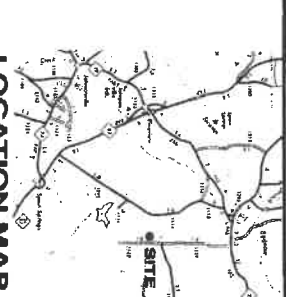
BOARD OF COMMISSIONERS CERTIFICATE
 The Board of Commissioners of the Town of Huntersville, North Carolina, hereby approves this final plan.

Robert R. Davidson
 Chairman

DEPARTMENT OF TRANSPORTATION
 DIVISION OF HIGHWAYS
 PROPOSED SUBDIVISION ROAD
 CONSTRUCTION STANDARDS CERTIFICATION

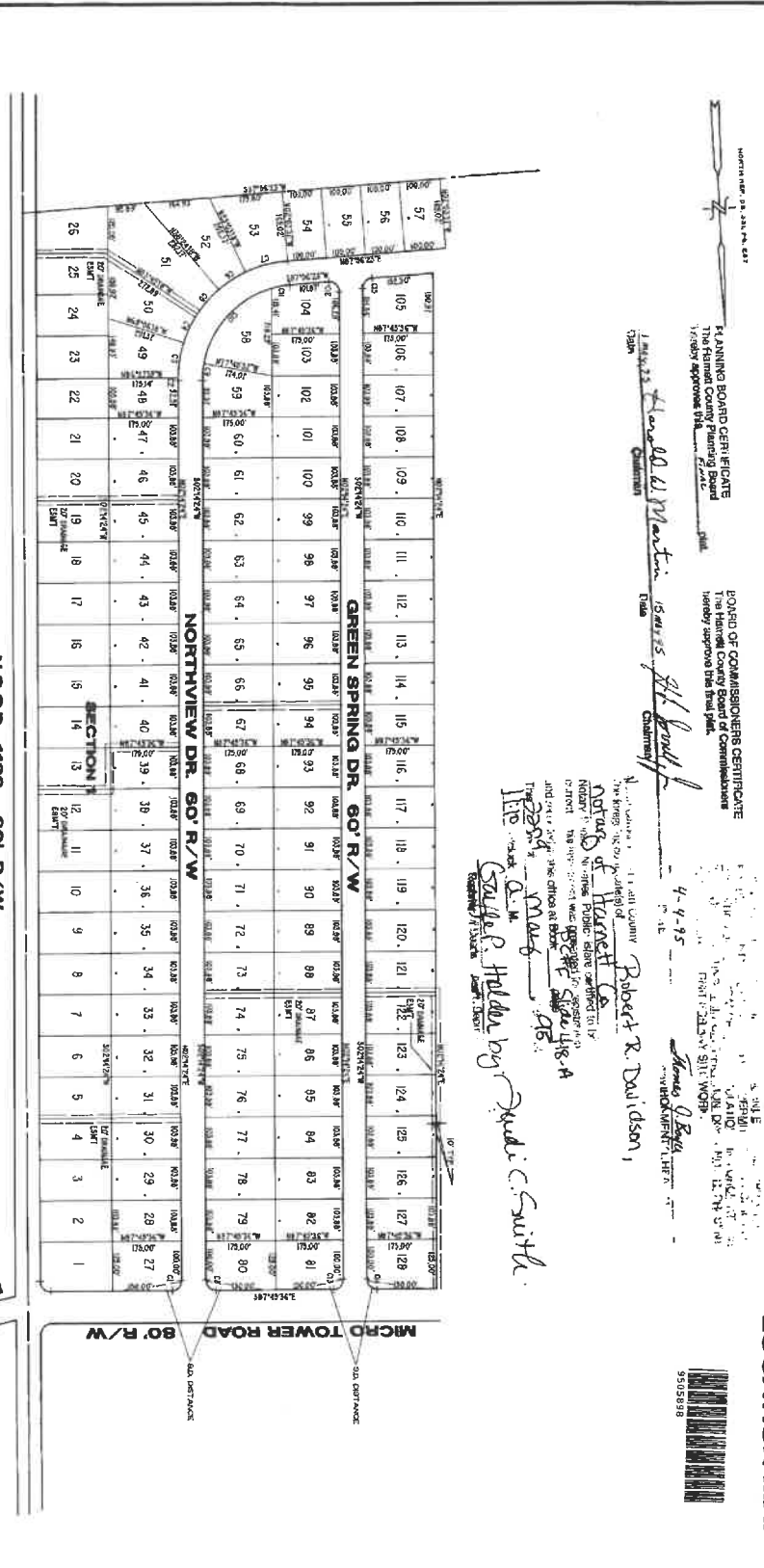
APPROVED: *[Signature]*
 DATE: 4/3/95

APPROVED: *[Signature]*
 DATE: 4/3/95



GODWIN - JORDAN & ASSOCIATES, P.A.
 ENGINEERING, SURVEYING & PLANNING
 P.O. BOX 248 DUNN, N.C. 28335
 DUNN PH. (919) 892-5159 FAYE PH. (919) 483-1488

CONTRACT NO. DATE 4-13-94 DRAWN BY R. DAVIDSON CHECKED BY R. JORDAN



C1	= 17'-4.52'	C2	= 15'-21.96'	C3	= 5'-5.04'	C11	= 11'-5.75'	C12	= 5'-11.40'	C13	= 5'-11.40'
C1	= 30'-00.00'	C2	= 15'-21.96'	C3	= 5'-5.04'	C11	= 11'-5.75'	C12	= 5'-11.40'	C13	= 5'-11.40'
C1	= 25.00'	C2	= 29.5131'	C3	= 29.5131'	C11	= 29.5131'	C12	= 29.5131'	C13	= 29.5131'
C1	= 30.20'	C2	= 30.20'	C3	= 30.20'	C11	= 30.20'	C12	= 30.20'	C13	= 30.20'
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C1	= 97.50'	C2	= 97.50'	C3	= 97.50'	C11	= 97.50'	C12	= 97.50'	C13	= 97.50'
C1	= 100.00'	C2	= 100.00'	C3	= 100.00'	C11	= 100.00'	C12	= 100.00'	C13	= 100.00'

MINNCO INVESTMENTS, INC.
SUNSET RIDGE
 SECTION 2
 BARBECUE TWPSP. HARNETT CO., NC.

SCALE 1" = 200'

OWNER'S AGREEMENT:
 L.B. WILLSON, INC.
 P.O. BOX 28333
 PH. 982-1953

SHEET NO. 04

PCH#E slide 418A

HARNETT COUNTY TAX ID#
03958703 0020 22

10-30-2020 BY SB

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2020 Oct 30 08:08 AM NC Rev Stamp: \$ 196.00
Book: 3889 Page: 469 - 470 Fee: \$ 26.00
Instrument Number: 2020019964

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$196.00

Parcel Identifier No. 03958703 0020 22 Verified by _____ County on the _____ day of _____, 20____
By: _____

Mail/Box to: Grantee

This instrument was prepared by: Roper & Taylor, PA Attorneys at Law, P.A., 5660 Six Forks Rd., Suite 104, Raleigh, NC 27609

Brief description for the Index: LOT 122, Sunset Ridge, Section 2

THIS DEED made this 28 day of October, 2020, by and between

GRANTOR

GRANTEE

Kenneth S. Mitchell and spouse,
Elizabeth Mitchell
134 Green Spring Drive
Sanford, NC 27332

Rhapsody Property Group, LLC
2504 Plowridge Rd.
Fuquay Varina, NC 27526

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

BEING all of Lot 122 in Sunset Ridge, Section 2 as shown on plat recorded in Plat Cabinet F Slide 418A, Harnett County Registry.

Submitted electronically by ROPER AND TAYLOR PA ATTORNEYS AT LAW in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2355 page 923.
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 418A.

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: 2020 ad valorem real property taxes and subsequent years. All easements, restrictions and rights-of-way of record, if any.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

By: _____ (Entity Name) _____ (SEAL)
Print/Type Name: Kenneth S. Mitchell
By: _____ (SEAL)
Print/Type Name: Elizabeth Mitchell
By: _____ (SEAL)
Print/Type Name: _____
By: _____ (SEAL)
Print/Type Name: _____

State of NC - County or City of Wake
I, the undersigned Notary Public of the County or City of Hamett Wake and State aforesaid, certify that Kenneth S. Mitchell and spouse, Elizabeth Mitchell personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 29 day of October, 2020.

My Commission Expires: 6/8/2024 (Affix Seal)
Wayne Arthur Roper Notary Public
Comm. Exp. 6-8-2024
Notary's Printed or Typed Name

State of _____ - County or City of _____
I, the undersigned Notary Public of the County or City of Hamett _____ and State aforesaid, certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this _____ day of _____, 20____.

My Commission Expires: _____ (Affix Seal)
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: _____ (Affix Seal)
Notary Public
Notary's Printed or Typed Name

