

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: Celia.arroyo33@gmail.com
NAME Celia Arroyo PHONE NUMBER (910)-605-3981
PHYSICAL ADDRESS 155 Roping Lane Cameron N.C 28326
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: Take Hwy 27 towards Western Harnett Schools

fill you get to Hwy 24-27 take a right, 3 minutes down the road you
take ^{the 1st} left after passing fire fighters onto Hilmon Grove Rd. Drive
approx. 5 mins, Roping Lane is on the 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.

Celia Arroyo
Signature

1-8-2021
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 _____

Designer of System _____

1. Number of people who live in house? 5 # adults 1 # children 6 # total
2. What is your average estimated daily water usage? 6000 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? 3 yrs ago How often do you have it pumped? every 3 years
5. If you have a dishwasher, how often do you use it? daily every other day weekly Never
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?

I didnt notice I had a septic system problem until I got a notification letter, started looking and notice I had a leak in my bathroom toilet / tub which has been

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 repaired already.

OPERATIONS PERMIT

Name: (owner) Thomas Wamble New Installation Septic Tank
 Property Location: SR# 1106 Repairs Nitrification Line
 Subdivision Longhorn Est Lot # 9
 TAX ID# _____ Quadrant # _____
 Contractor: Mike Ray Registration # _____

Basement with Plumbing: Garage:
 Water Supply: Well Public Community
 Distance From Well: 50 ft.

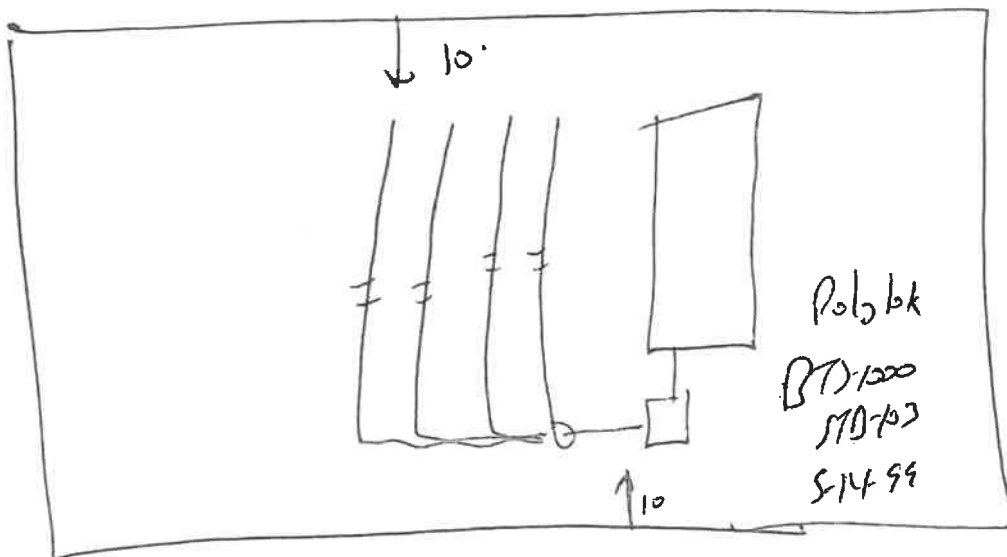
Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other _____
 Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface Drainage Field: No. of ditches 4 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18 in.
 French Drain: _____ Linear feet

Date: 7-2-99

PERMIT NO. 15634

Inspected by: J. W. [Signature]
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) Thomas W. Womble New Installation Septic Tank
Property Location: SR# 1106 Repairs Nitrification Line

Subdivision Langhorne Est Sect 2 Lot # 9

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (28x70) Lot Size: .69 AC

Basement with Plumbing: Garage: MUST USE FILTER & MAEKER

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 _____

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

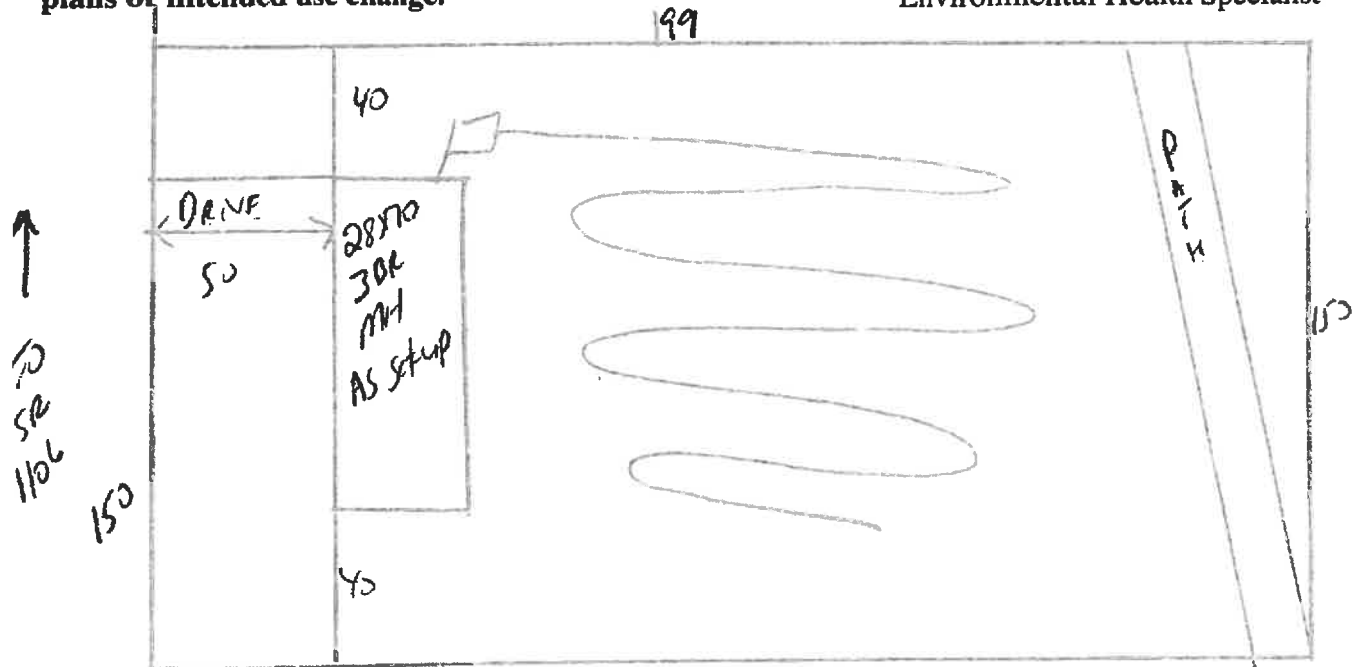
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 300 ft. width of ditches 3 ft. depth of ditches 18" in.

French Drain Required: _____ Linear feet

Date: 7-1-99

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

Signed: [Signature]
Environmental Health Specialist



Stub out Plumbing shallow 18" ditch depth
Follow contours

I HEREBY CERTIFY THAT THIS RECORD PLAT COMPLETS WITH THE SUBDIVISION REGULATIONS OF HARNETT COUNTY, N.C. IN THE REGISTER OF DEEDS HARNETT COUNTY.

DATE: 4-21-99 Bob J. Donnan
PLANNING DIRECTOR

THE LOTS ON THIS PLAT HAVE BEEN EVALUATED BY A PRIVATE CONSULTANT, BASED ON THIS REVIEW, IT APPEARS THAT LOT(S) ON THIS PLAT MEET APPROPRIATE REGULATION, AND THAT THE PROPOSED SUBDIVISION IS IN ACCORDANCE WITH THE APPROPRIATE HARNETT COUNTY HEALTH DEPARTMENT PERMITS FOR SPECIFIC USE AND SITING IN ACCORDANCE WITH REGULATIONS IN FORCE AT THE TIME OF PERMITTING. THE DESIGN AND DIMENSIONS REPRESENT APPROVAL OF A PERMIT FOR ANY SITE WORK.

DATE: 5-11-97 Thomas G. Brown
ENVIRONMENTAL HEALTH

CERTIFICATION OF OWNERSHIP, DEDICATION AND JURISDICTION

I, (We) hereby certify that I (am we are) the owner(s) or agent of the property shown and described herein and that I (we) have the right to execute this instrument with full power and authority. I (we) have examined the plat and the description of the property and find that the same is in accordance with the laws of the State of North Carolina and the regulations of the Department of Transportation and the Department of Health and Human Services. I (we) have also examined the plat and the description of the property and find that the same is in accordance with the laws of the State of North Carolina and the regulations of the Department of Transportation and the Department of Health and Human Services.

DATE: 4-15-99 Bill S. Thomas
OWNER

DEED REF: DB 921, PG 979

MAP REF: MAP NO. 98-403
MAP BK 8, PG 65



REGISTERED PLAT BOOK NO. 1314
PLAT NO. 98-403
REGISTERED PLAT BOOK NO. 1314

STATE OF NORTH CAROLINA
COUNTY OF HARNETT

I, Thomas G. Brown, REVIEWER OF DEEDS FOR THE REGISTER OF DEEDS HARNETT COUNTY, N.C., DO HEREBY CERTIFY THAT THIS PLAT IS IN ACCORDANCE WITH THE SUBDIVISION REGULATIONS OF HARNETT COUNTY, N.C. AND THE PERMITS FOR SPECIFIC USE AND SITING IN ACCORDANCE WITH REGULATIONS IN FORCE AT THE TIME OF PERMITTING.

DATE: 4-21-99 Thomas G. Brown
REVIEWER OF DEEDS

HARNETT COUNTY, N.C.
FILED: 4-21-99 TIME: 3:55 PM
MAP NO. 98-403

REGISTER OF DEEDS
HARNETT COUNTY, N.C.
BY: Thomas G. Brown
ASSISTANT COUNTY CLERK

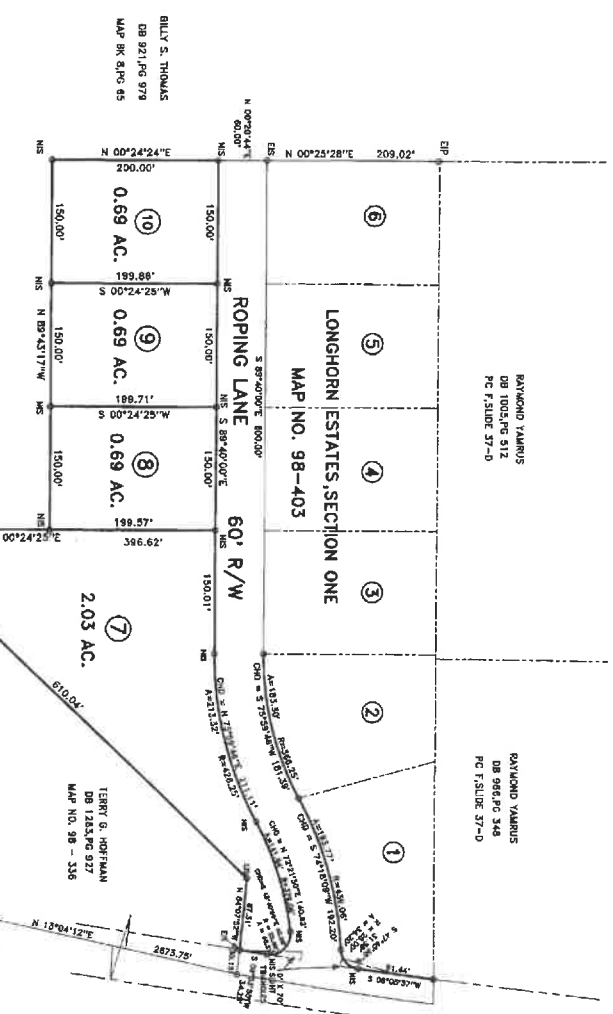
DEPARTMENT OF TRANSPORTATION
DIVISION OF HIGHWAYS
PROPOSED SUBDIVISION ROAD
CONSTRUCTION STANDARDS CERTIFICATION

APPROVED: Thomas G. Brown
DISTRICT ENGINEER

DATE: 4-19-99

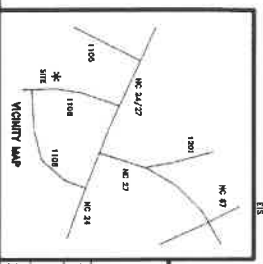
Harnett County Public Utilities
Plat Plan Pre-approval only
NOT FOR CONSTRUCTION
Water is available to this site
via 1.5 inch located on 1106
via 1.5 inch located on 1106

Signature: Thomas G. Brown
Date: 4-19-99



U-1-99
Chairman

- LEGEND**
- LINES NOT SURVEYED
 - EXISTING CONCRETE MONUMENT
 - EXISTING IRON PIPE
 - EXISTING LIGHTWOOD STATE
 - CENTRAL LINE
 - RIGHT OF WAY
 - CONTROL CORNERS
 - CONTROL CORNERS
 - CONTROL CORNERS



SURVEY FOR:		TOWNSHIP		COUNTY		HARNETT	
LONGHORN ESTATES SUBDIVISION		JOHNSONVILLE		HARNETT		HARNETT	
SECTION TWO		STATE: NORTH CAROLINA		DATE: MAY 18, 1999		CHECKED & CLOSURE BY: WRB	
TAX PARCEL IDH: DB-9564-0052		TOWNSHIP		COUNTY		HARNETT	
TAX PARCEL IDH: DB-9564-0052		JOHNSONVILLE		HARNETT		HARNETT	

MINIMUM SETBACKS
FRONT = 33.0'
BACK = 25.0'
SIDE = 10.0'
CORNER LOTS = 15.0'

OWNER/DEVELOPER: THOMAS WOMBLE
1616 MCKOY TOWN RD.
CAMERON N.C. 28526
919-499-2301

DATE: 4-19-99
Chairman

NCSR # 1106
"HILLMON GROVE ROAD"

MAGNETIC NORTH
MAP NO. 98-403

Map # 98-403



FOR REGISTRATION REGISTER OF DEEDS
 KIMBERLY B. HARGROVE
 HARNETT COUNTY, NC
 2009 DEC 03 04:46:27 PM
 BK:2695 PG:686-688 FEE:\$22.00
 NC REV STAMP:\$160.00
 INSTRUMENT # 2009018383

09-9064-0105-10

12-3-09 9045

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 160.00

Parcel Identifier No. 099564 0105 10 Verified by _____ County on the _____ day of _____, 20____

By: _____

Mail/Box to: REGINALD B. KELLY, PO BOX 1118, LILLINGTON, NC 27546

This instrument was prepared by: REGINALD B. KELLY, 900 S MAIN STREET, LILLINGTON, NC 27546

Brief description for the Index: _____

THIS DEED made this 1st day of December, 2009, by and between

GRANTOR	GRANTEE
ANNA MARIE ROBERTS and husband, THOMAS KENDALL ROBERTS 1705 CAMERON RD BROADWAY, NC 27505	YULIANA ARROYO and CELIA ARROYO 27 SADDLEVIEW LN CAMERON, NC 28326

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 the City of CAMERON, Johnsonville Township, HARNETT County, North Carolina and more particularly described as follows:

BEING ALL OF LOT NO. 9 AS SHOWN UPON THAT PLAT OF SURVEY ENTITLED, "SURVEY FOR LONGHORN ESTATES SUBDIVISION, SECTION TWO", PREPARED BY BENNETT SURVEYS, INC., DATED MAY 18, 1999 AND RECORDED AT MAP NO. 99-309, HARNETT COUNTY REGISTRY.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2276 page 709.

A map showing the above described property is recorded in Plat Book _____ page _____.

NC Bar Association Form No. L-3 © 1976, Revised © 1977, 2002

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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 executed the foregoing as of the day and year first above written.

(Entity Name)

Anna Marie Roberts (SEAL)
ANNA MARIE ROBERTS

By: _____
Title: _____

Thomas Kendall Roberts (SEAL)
THOMAS KENDALL ROBERTS

By: _____
Title: _____

(SEAL)

By: _____
Title: _____

(SEAL)

State of North Carolina - County of HARNETT

I, the undersigned Notary Public of the County and State aforesaid, certify that ANNA MARIE ROBERTS and husband, THOMAS KENDALL ROBERTS 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 25 day of November, 2009.

My Commission Expires:  APRIL M. McLAMB
NOTARY PUBLIC
HARNETT COUNTY, N.C.

April M. McLamb
Notary Public

State of North Carolina - County of _____ My Commission Expires 7/29/11

I, the undersigned Notary Public of the County and State aforesaid, certify that _____ 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

State of North Carolina - County of _____

I, the undersigned Notary Public of the County and State aforesaid, certify that _____

Witness my hand and Notarial stamp or seal, this _____ day of _____, 20__.

My Commission Expires: _____

Notary Public

The foregoing Certificate(s) of _____ is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

By: _____ Register of Deeds for _____ County
Deputy/Assistant - Register of Deeds

Print this page



Property Description:

LT#9 LONGHORN ESTATES SC2MAP#99-309

Harnett County GIS

PID: 099564 0105 10

PIN: 9564-17-6572.000

REID: 0051069

Subdivision:

Taxable Acreage: 1.000 LT ac

Caclulated Acreage: 0.69 ac

Account Number: 1400040446

Owners: ARROYO YULIANA & ARROYO CELIA

Owner Address : 155 ROPING LN LOT 9 CAMERON, NC 28326-0000

Property Address: 155 ROPING LN CAMERON, NC 28326

City, State, Zip: CAMERON, NC, 28326

Building Count: 1

Township Code: 09

Fire Tax District: Spout Springs

Parcel Building Value: \$33560

Parcel Outbuilding Value : \$0

Parcel Land Value : \$20000

Parcel Special Land Value : \$0

Total Value : \$53560

Parcel Deferred Value : \$0

Total Assessed Value : \$53560

Neighborhood: 00942

Actual Year Built: 1999

TotalAcutalAreaHeated: 1620 Sq/Ft

Sale Month and Year: 12 / 2009

Sate Price: \$80000

Deed Book & Page: 2695-0686

Deed Date: 1259798400000

Plat Book & Page: -

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Y

Transfer or Split: T

Within 1ml of Agriculture District: Yes

Prior Building Value: \$51880

Prior Outbuilding Value : \$0

Prior Land Value : \$20000

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$71880

