

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 Robert Hoyle EMAIL ADDRESS: Robert Hoyle 1987@gmail.com
PHONE NUMBER 910-885-4175
PHYSICAL ADDRESS 2684 Leaflet Church Road, Broadway NC 27505
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 1.3 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: 27 to Leaflet Church Road, our home is on the right, brick home with garage

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.

Robert Hoyle
Signature

2-2-21
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) June 2002
Installer of system ~~Do not know~~ Mike RAY
Septic Tank Pumper Nanny's
Designer of System Mike Ray

1. Number of people who live in house? 2 # adults 5 # children 7 # 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 Robert Hoyle
3. If you have a garbage disposal, how often is it used? daily weekly monthly None
4. When was the septic tank last pumped? 2019 How often do you have it pumped? 1-2 yrs
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 Landscaping
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?
When we have days of Rain we noticed a place where water is coming out of ground, last year went away over summer
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 Heavy Rain

HENNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

No 15308

OPERATIONS PERMIT 01-5-3672

Name: (owner) Patricia & Timothy Adams New Installation Septic Tank

Property Location: SR# 1234 Repairs Nitrification Line

Subdivision Linwood Glenwood Lot # 2

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 1 exact length of each ditch 350 ft. width of ditches 3 ft. depth of ditches 18 in.

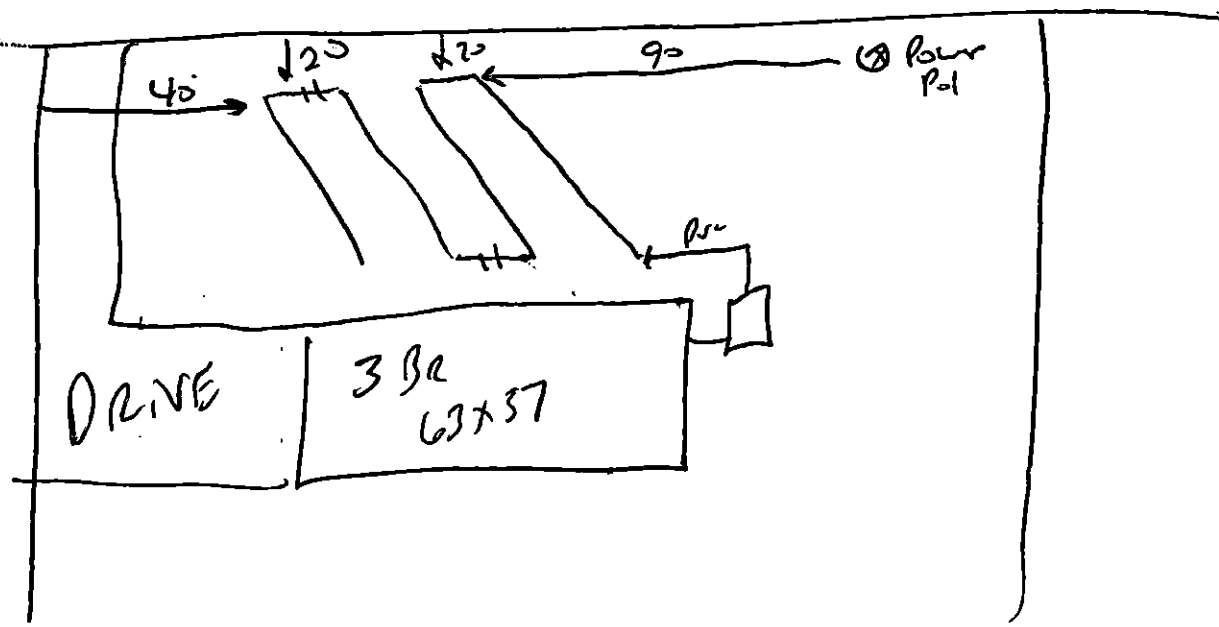
French Drain: _____ Linear feet

Date: 6-13-02

PERMIT NO. 18884

Inspected by: J. L. ARS
Environmental Health Specialist

SR



HARNETT COUNTY HEALTH DEPARTMENT

No 18884

IMPROVEMENT PERMIT

01-5-3676

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) Patricia J. Timothy Adams

New Installation Septic Tank

Property Location: SR# 1234

Repairs Nitrification Line

Subdivision Linwood Colman DOH

Lot # 2

Tax ID #

Quadrant #

Number of Bedrooms Proposed: 3 (63x57)

Lot Size: 1.330

Basement with Plumbing:

Garage:

Please note that the house location has changed. Also

Water Supply: Well Public

Community

Distance From Well: 50 ft.

Note that drive must be along property line. House site moved to remove use of a pump.

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 350 ft. width of ditches 3 ft. depth of ditches 18 in. max

French Drain Required: _____ Linear feet

Date: 01-16-02

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

Signed: J. WARS
Environmental Health Specialist

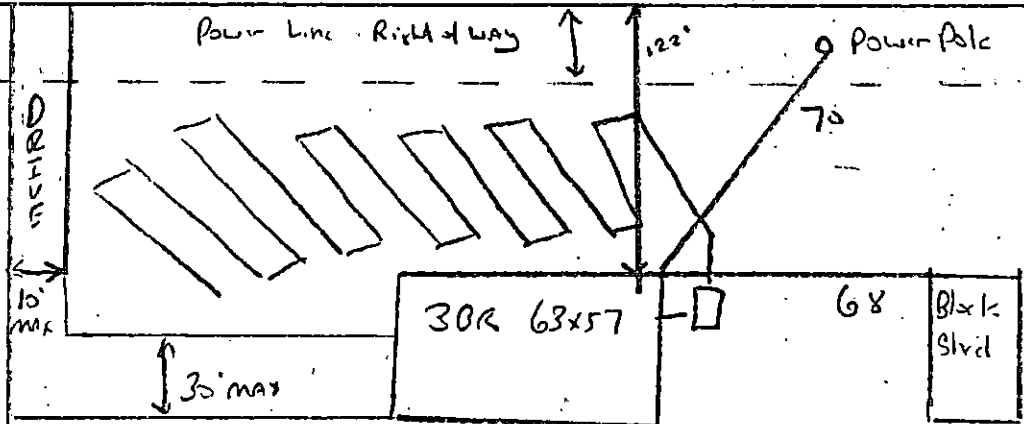
← to HWY 27

Road

→ SR 1229

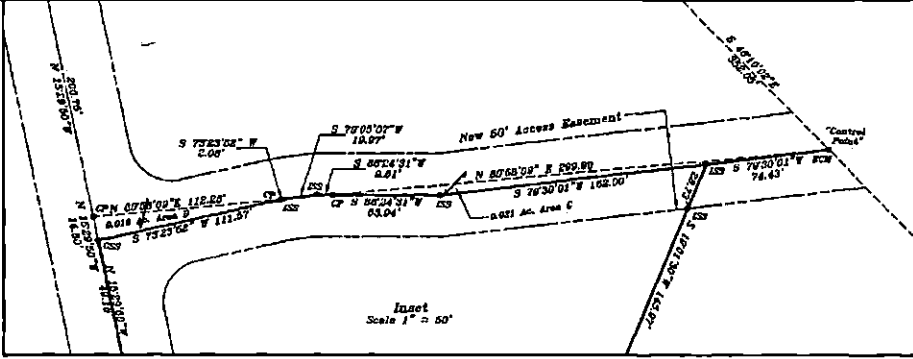
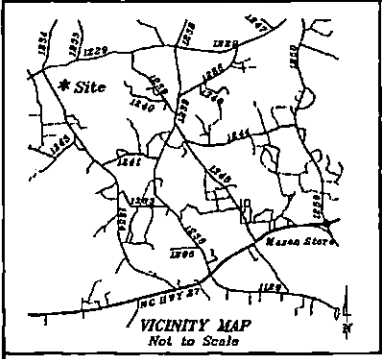
Leveled Cypress Trees

MUST meet on site before installing plumber - STUB out plumbing as shallow as possible ground level in the upper corner as shown - DO NOT DRIVE OR PARK ON SEPTIC SYSTEM. MUST meet on site. Final layout may change



← LPP Repair

Road



- LEGEND:**
- Lines Surveyed
 - - - Lines Not Surveyed
 - Right of Way Lines
 - Existing Power Pipe or Stake
 - Existing Concrete Monument
 - Existing P.E. Nail
 - E.P. Nail Set
 - Iron Stake Set
 - Cotton Spindle Set
 - Nailrod Spike
 - Existing Lightwood Stake
 - Power Pole
 - Light Pole
 - Overhead Electric Line
 - Computed Point
 - CP Computed Point
 - TR Telephone Pedestal
 - MA Manhole
 - TRNS Electric Transformer
 - ETM Water Meter
 - EMT Easement
 - R/W Right-of-Way
 - CC Contour
 - P.C. Plat Cabinet
 - D.B. Deed Book
 - M.B. Map Book
 - B.M. Book of Maps
 - P.I. Parcel Identifier Number
 - Ac. Acres
 - Sq. Ft. square feet

NAD 83 North American Datum of 1983
NAD 83 North American Datum of 1983
N.C.G.S. North Carolina Geodetic Survey

NOTES:

- Iron Stakes set at all property corners unless noted otherwise.
- Areas determined by coordinate method.
- All distances (Dimensions are Horizontal) ground distances unless otherwise indicated.

North Carolina
Harnett County

I, Thomas Lester Stancil, certify that this plat was drawn under the supervision of (an actual survey made under my supervision) (and description recorded in Book _____ Page _____) (date) that the ratio of precision as calculated by latitude and departure is 1:10,000, that the boundaries and corners are shown as broken lines plotted from information found in Book _____ Page _____ that this plat was prepared in accordance with G.S. 47-30 and amended, witness my original signature, registration number and seal this the _____ day of _____, A.D. 2001.

Thomas Lester Stancil
Surveyor
L-1218

Registration Number
I hereby certify that this survey is of such a nature, such as the reconstruction of existing parcels a division of land, a new ordered survey or other operation to the definition of boundaries.

Thomas Lester Stancil, P.L.S.

State of North Carolina
County of Harnett

Annette L. Moore, Review Officer of Harnett County, certify that the map or plat to which this certification is applied meets all statutory requirements for recording.

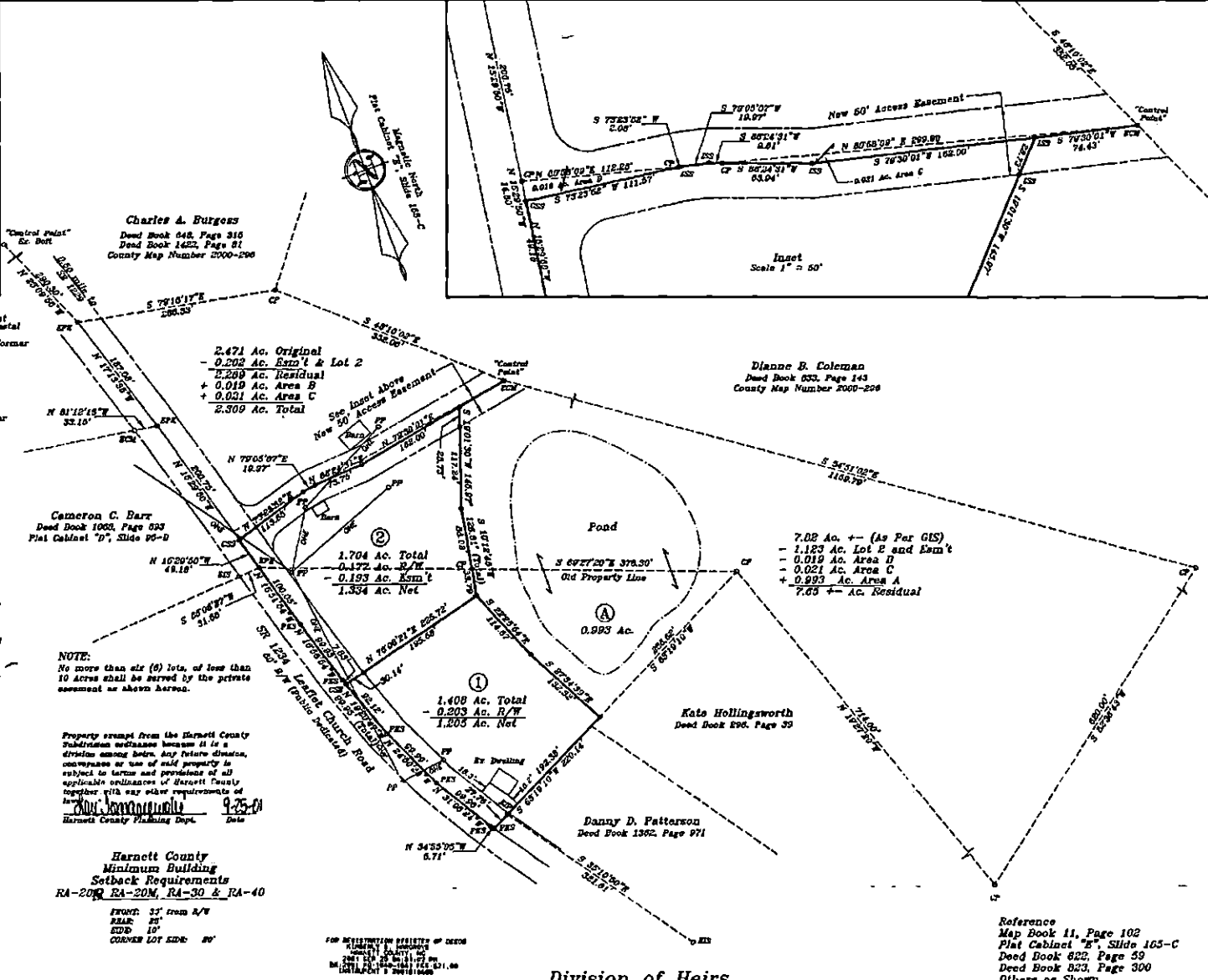
Christine S. Mayo, 9/25/01
Review Officer

HARNETT COUNTY, N.C.
FILED DATE 9/25/2001 TIME 4:31 PM
MAP NUMBER 2001-1040

REGISTER OF DEEDS
KIMBERLY S. HARGROVE

By *Maureen B. Swain*
Deputy Register of Deeds

Recorded in Harnett County, Map Number 2001-1040



| | | | | | |
|------------------------------|---|--|------------------|--|--|
| Revisions: | | Survey For: Linwood J. Coleman | | STANCIL & ASSOCIATES, Professional Land Surveyor, P.A. | |
| 2738 Leaflet Church Road | | Broadway, NC 27505 910-893-8621 | | 88 East Depot Street, P. O. Box 730, Angier, N.C. 27501 Phone: 910-639-2139 Fax: 919-639-2602 | |
| TOWNSHIP: Upper Little River | COUNTY: Harnett | DATE: 09-08-01 | SURVEYED BY: CTS | FIELD BOOK 38-N, Pg. 17 | |
| STATE: NORTH CAROLINA | Parcel ID: 130508 0001 130509 0112 | SCALE: 1" = 100' | DRAWN BY: PAN | DRAWING FILE NO. | |
| ZONE: RA-30 | PARCEL NUMBER: 0509-90-2771 0509-90-3236 0518-00-2830 | CHECKED & CLOSURE BY: | LHULH-856 | | |

Map# 2001-1040

HARNETT COUNTY TAX ID#

13.0509.01264

2/14/14 BY ES

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2014 FEB 14 02:40:02 PM
BK:3192 PG:364-368
FEE:\$26.00
EXCISE TAX: \$368.00
INSTRUMENT # 2014001802
TWESTER



**NORTH CAROLINA
GENERAL WARRANTY DEED**

Excise Tax: \$368.00

Recording Time, Book and Page

Tax Map No.

Parcel Identifier No. 0509-90-3434.000

Mail after recording to: Mr. & Mrs. Robert Hoyle 745 Wheelless Rd Spring Lake, NC 28390

This instrument was prepared by: April E. Stephenson, Attorney at Law

THIS DEED made this 5th day of February, 2014 by and between

GRANTORS

TRACI D. DALTON and husband, MATTHEW J. MAISEL
5443 Pacifica Drive
La Jolla, CA 92037

GRANTEES

ROBERT S. HOYLE and wife, JEANNIE HOYLE
745 Wheelless Rd
Spring Lake, NC 28390

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 Upper Little River Township, Harnett County, North Carolina and more particularly described as follows:

BEING ALL OF LOT 2, containing 1.704 acres, more or less, according to that final plat drawn by Stencil & Associates, Professional Land Surveyor, P.A. entitled "Division of Heirs Survey for: Linwood J. Coleman" dated September 6, 2001 and recorded at Map No. 2001-1040 of the Harnett County Registry, said plat being incorporated herein by reference as if fully set forth. This lot is conveyed subject to that certain 50' non-exclusive, ingress/egress and utility easement as shown on the above referenced map of survey.

All or a portion of the property hereinabove described was acquired by Grantor by instrument recorded in Book 3187, Page 443, Hamett County Registry.

A map showing the above described property is recorded in Map No. 2001-1040 and referenced within this instrument.

The above described property does does not include the primary residence of the Grantor.

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 except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officer(s), the day and year first above written.

SEE ATTACHED FOR SIGNATURE AND NOTARY PAGES.

Traci D. Dalton (SEAL)
TRACI D. DALTON

STATE OF CALIFORNIA COUNTY OF _____

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document: Traci D. Dalton Witness my hand and official stamp or seal, this the _____ day of February, 2014.

My Commission Expires: _____

Notary Public

SEAL-STAMP

Print Notary Name: _____

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of San Diego

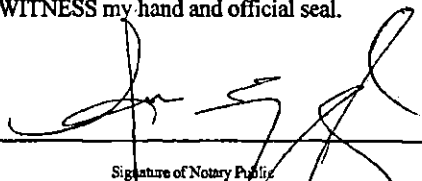
On Feb. 5th 2014 before me, Jose A. Esparza / Notary Public
(Here insert name and title of the officer)

personally appeared Tara D. Dalton

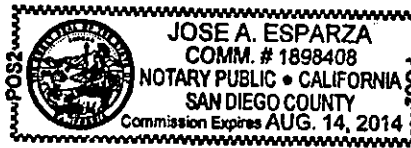
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature of Notary Public



(Notary Seal)

ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
 - Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
 - The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
 - Print the name(s) of document signer(s) who personally appear at the time of notarization.
 - Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~ is/are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
 - The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
 - Signature of the notary public must match the signature on file with the office of the county clerk.
 - ☒ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ☒ Indicate title or type of attached document, number of pages and date.
 - ☒ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document.

| |
|---|
| <p>DESCRIPTION OF THE ATTACHED DOCUMENT</p> <p><u>(North Carolina - General Warranty Deed)</u></p> <p>(Title or description of attached document)</p> <hr/> <p>(Title or description of attached document continued)</p> <p>Number of Pages <u>(3)</u> Document Date <u>N/A</u></p> <p><u>Roller ID # OS09-90-3434-000</u></p> <p>(Additional information)</p> |
|---|

| |
|--|
| <p>CAPACITY CLAIMED BY THE SIGNER</p> <p><input checked="" type="checkbox"/> Individual (s)</p> <p><input type="checkbox"/> Corporate Officer</p> <p>_____ (Title)</p> <p><input type="checkbox"/> Partner(s)</p> <p><input type="checkbox"/> Attorney-in-Fact</p> <p><input type="checkbox"/> Trustee(s)</p> <p><input type="checkbox"/> Other _____</p> |
|--|

Matthew J. Maisel (SEAL)
MATTHEW J. MAISEL

NORTH CAROLINA Mecklenburg COUNTY

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document: Matthew J. Maisel Witness my hand and official stamp or seal, this the 5th day of February, 2014.

My Commission Expires: May 05, 2018

Jeffrey L. Alexander
Notary Public

Print Notary Name: Jeffrey L. Alexander

SEAL-STAMP

JEFFREY L ALEXANDER
Notary Public
Mecklenburg Co., North Carolina
My Commission Expires May 05, 2018