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:		
NAME Jeffrey RAY		PHONE NUMBER_9/	9-498-0693	
PHYSICAL ADDRESS 919 Bella Bridge Rd. Broadway NC. 27505				
MAILING ADDRESS (IF DIFFFERENT	THAN PHYSICAL)			
IF RENTING, LEASING, ETC., LIST PR	OPERTY OWNER NAME Te	ffrey RAY		
		,	5.15	
SUBDIVISION NAME	LOT #/TRACT #	STATE RD/HWY	SIZE OF LOT/TRACT	
Type of Dwelling: [] Modular	[4] Mobile Home []	Stick built [] Other		
Number of bedrooms	[] Basement			
Garage: Yes [] No [/]	Dishwasher: Yes [] N	0[]	Garbage Disposal: Yes [] No []	
Water Supply: [4] Private Well	[] Community System	[] County		
Directions from Lillington to your site: US 27 East Turn Right on Bella Bridge Rd.				
Turn Left First L	eft after cross	bridge up Hil	I pare Left at End.	
		,		

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

- A <u>"surveyed and recorded map"</u> and <u>"deed to your property"</u> must be attached to this application. Please inform us of any wells on the property by showing on your survey map.
- 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.

Aylly Ray 4-21-21
Signature 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.

ave y	ou received a violation letter for a failing system from our office? [] YES [] NO
	ithin the last 5 years have you completed an application for repair for this site? [] YES [] NO
	1222
ar h	ome was built (or year of septic tank installation)
stalle	r of system
ptic	Tank Pumper
esign	er of System
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
3.	If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly
4.	When was the septic tank last pumped? Never 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
	Are you or any member in your household using long term prescription drugs, antibiotics or
٥.	chemotherapy?] [] YES [>] NO If yes please list
10	Do you put household cleaning chemicals down the drain? [] YES [] NO If so, what kind?
10.	bo you put household cleaning chemicals down the drains [] 125 [] 10 is 30, what kind.
11.	Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES [YNO
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 <u>foilet</u>
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 No
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?
	That the septic tank was Busted.
	That the septic tank was Busted.
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
_	

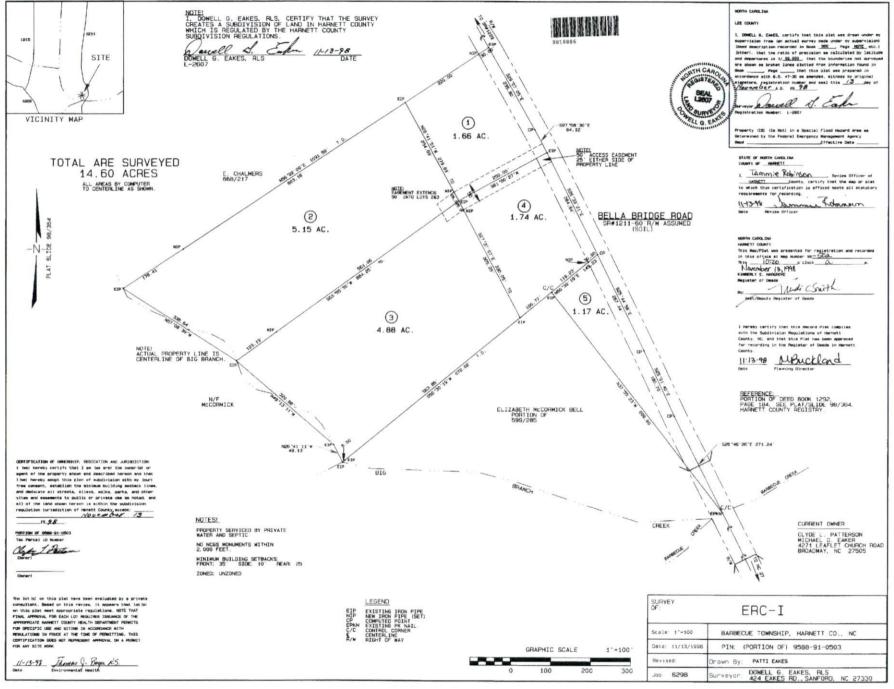
OPERATIONS PERMIT

Name: (owner)	JEAP RAY		New Installation	Septic Tank
Property Location:	SR#_ 1211		☐ Repairs	Nitrification Line
	Subdivision ERC-1	I	Lot #	_
	TAX ID#	(Quadrant #	
Contractor: 3	FAIRcloth			
Basement with Plum	abing: 🔲 Gar	rage: 🔲		
, -	Well Public Con	mmunity		
Distance From Well:	/DDft.			
Following are the s	pecifications for the sewage di	isposal syste	em on above caption	ned property.
Type of system:	Conventional Oth	her		
Subsurface Drainage Field	No. of lexact length of each ditch	<u> </u>	width of ditches ft.	depth of ditches in.
French Drain:	Linear feet		0.0	
r .		Date:	20-99	,
PERMIT NO. 14	662	Inspected b	by: 974 Environmental	Health Specialist
			Liiviroimentai	
			Cul-de sac	
	1121.48 STB +03 BTHOOD			
	STB +03		1	
	BIHOOS			
	23'		= 20	
			1	

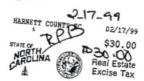
HARNF COUNTY HEALTH DEPARTMENT Nº 14662

IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Stion of any building at which a septic tank system is to be used for disposfrom the Harnett County Health Department."		
	New Installation	Septic Tank
Property Location: SR# 1211 Bella Bridge		Nitrification Line
Subdivision ERC-1	Lot	# 02
Tax ID# 9588-91-0503		
Number of Bedrooms Proposed: THREE Low	Size: 5,15	acres
Basement with Plumbing: Garage:		
Water Supply: Well Public Community		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal syste	em on above captioned	property. Subject to
Type of system: Conventional Other		
Size of tank: Septic Tank: 1000 gallons Pur	np Tank: gal	llons
Subsurface No. of a exact length of each ditch of each ditch.	width of ditches ft. di	epth of tches 18-22in.
French Drain Required: Linear feet		1 00
This permit is subject to revocation if site plans or intended use change. Date: Signed:	Environmental Hea	Ith Specialist
Must meet on-site prior to installar	hon cul-da	-sac .
Lines must be on contour		
May require pupp if fall can not be achieved.		
Car not be achieved.		
		0//
3BR MH		
Proposi	ed Drainfield	100



9902809



FILED BOOK /330 PAGE 935-936 '99 FEB 17 PM 2 38 KIMBERLY S. HARGROVE REGISTER OF DEEDS HARNETT COUNTY, NO

Excise Tax 30

Tax Lot No.	Parcel Identifier No
Verified by County	on the day of, 19
by	
, ,	Old US 421, Lillington, N.C. 27546
m:	

Recording Time Book and Page

This instrument was prepared by Clyde L. Patterson

Brief description for the Index

Lot 2, ERC I Subdivision

NORTH CAROLINA GENERAL WARRANTY DEED

GRANTOR

Clyde L. Patterson, Unmarried

Michael D. Eaker and wife,

Nicole R. Eaker

4271 Leaflet Church Road Broadway, N. C. 27505

Jeffery S. Ray

2858 Old US 421 Lillington, N. C. 27546

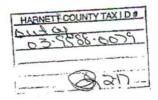
Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.q. corporation or partnership.

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 ... Barbecue certain lot or parcel of land situated in the City of

BEING ALL OF LOT NO. 2, containing 5.15 acres, more or less, as shown on map entitled "ERC-1 Subdivision", dated November 13, 1998, by Dowell G. Eakes, RLS, recorded in the Office of the Register of Deeds of Harnett County at Map Number 98-502. Reference to said map is hereby made for greater certainty of description.

Conveyed with the foregoing is road access easement along the boundary lines of Lots 1, 2, 3 and 4, and RESERVED is road access easement along the boundary line of Lots Nos. 1, 2, 3 and 4 as shown on map hereinbefore set out ..



HARNETT COUNTY, NORTH CAROLINA FILED DATE 2.1799 TIME 2.38 PM BOOK 1330 PAGE 935 - 936 REGISTER OF DEEDS KIMBERLY S. HARGROVE

The property hereinabou	re described was acquired by Gra	antor by instrument recorded	in	
A map showing the abov	e described property is recorded	in Plat Rook Map No. 98	B page 502	******************
TO HAVE AND TO HO	LD the aforesaid lot or parcel of			
the same in fee simple, defend the title against Title to the property he Restrictions: No inoperable No junk yards Road Maintena incurred in of ERC-1 (M	nts with the Grantee, that Gran that title is marketable and free the lawful claims of all persons we reinabove described is subject to or unlicensed vehicl	and clear of all encumbrance chomsoever except for the except the following exceptions: es allowed on the process acceptance of this cot roadway easement	es, and that Grantor will eptions hereinafter sta or operty. s deed that the at as shown on	H warrant and ted. expenses map
above written.	, the Grantor has hereunto set his uthorized officers and its seal to be he orporate Name)	Clydeyl. Patte	Pallersa	be signed in its y and year first ————————————————————————————————————
	Precident	Michael Da Eal	er	(SEAL)
ATTEST:	TACOMO NO.	Michael D. Eak Michael E. Eake Nicole R. Eake	lix	(SEAL)
	Secretary (Corporate Scal)	SIS	er	(SEAL)
NOTARY PUBLIC COUNTY	NORTH CAROLINA, Le I, a Notary Public of the County Unmarried, Micha NICOIE K. EaKer personally appeared before me the hand and official stamp or seal, the My commission expires: \$2.12	county. and State aforesald, certify that el D. Eaker and wif	Clyde L. Patte e,	rson
SEAL-STAMP	NORTH CAROLINA,	County.		
	I, a Notary Public of the County personally came before me this da given and as the act of the corpo given and as the act of the corporate Witness my hand and official stamp	y and acknowledged that he a North Care ration, the foregoing instrument w seal and attested bya	is clina corporation, and that b as signed in its name by its s its	y authority duly
	My commission expires:			Notary Public
The foregoing Certificate(s) of	This instrument and this certificate are		ne and in the Book and Par Harnett	ge shown on the
By	2000	Deputy/Assistant Register of I	eeds	936