

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: bryon.coro@yahoo.com

NAME Bryon Coro PHONE NUMBER 336 932 4870

PHYSICAL ADDRESS 72 Macon Ct E, Sanford, NC 27332

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 306 Quartermaster Dr, Sanford NC 27330

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

| | | | |
|------------------------|---------------|-------------------|-------------------|
| <u>Highland Forest</u> | <u>103</u> | <u>Macon Ct E</u> | <u>0.37 Acres</u> |
| SUBDIVISION NAME | LOT #/TRACT # | STATE RD/HWY | SIZE OF LOT/TRACT |

Type of Dwelling: Modular Mobile Home Stick built Other _____

Number of bedrooms 4 Basement
(bonus room)

Garage: Yes No Dishwasher: Yes No Garbage Disposal: Yes No

Water Supply: Private Well Community System County

Directions from Lillington to your site: NC 27W (13 miles), Left on
Tingen Rd (1.3 mi) turn right Lansing Ct E (600ft),
Turn Left on Highland Forest Dr (350ft) turn
left on Macon Ct E

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.

Bryon Coro
Signature

8/7/21
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) 2004
Installer of system DC Carter
Septic Tank Pumper Martin
Designer of System _____

1. Number of people who live in house? 2 # adults 2 # children _____ # 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 Bryon Coro
3. If you have a garbage disposal, how often is it used? [] daily weekly [] monthly
4. When was the septic tank last pumped? 2021 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
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?
Distribution box and tank issues discovered during inspection
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 _____



FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY, NC
2011 FEB 17 10:37:51 AM
BK: 2838 PG: 461-463 FEE: \$22.00
NC REV STAMP: \$322.00
INSTRUMENT # 2011002475

HARNETT COUNTY TAX ID#
03-9587-11-002044

2-17-11 BY [Signature]

GENERAL WARRANTY DEED

REVENUE: \$322.00

PARCEL ID: 03-9587-11-002044

PREPARED BY AND RETURN TO:
The Law Firm of Hutchens, Senter & Britton, P.A.
3800 Raeford Road, Fayetteville, NC 28303
File no. 1052201

Brief Legal Description: Lot 103 Highland Forest

NORTH CAROLINA

COUNTY OF HARNETT

THIS DEED made this **16th day of February, 2011**, by and between

Danielle M. Reynolds and husband, Joseph C. Reynolds, whose address is
20 Benelli Court, Bunlevel, NC 28323,
hereinafter called Grantor,

and

Bryon Christopher Coro and wife, Angela C. Coro, whose address is
72 Macon Court East, Sanford, NC 17332,
hereinafter called Grantee;

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 or near the City of Sanford, **Harnett** County, North Carolina and more particularly described as follows:

Being all of Lot 103, of the Highland Forest Subdivision, as recorded in Map Number 2003-1163 of the Harnett County Registry, North Carolina.

The property hereinabove described was acquired by Grantor by instrument recorded in **Book 2056, Page 341, Harnett** County Registry, North Carolina.

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.


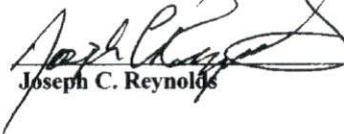
And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for the exceptions hereinafter stated.

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

Restrictive covenants, easements and rights of way as may appear of record in the aforesaid registry.

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in the corporate name by its duly authorized officers and its seal to be hereunto affixed by authority of its Board of Directors, the day and year first above written.

The property being conveyed herein ___ is or is not the principle residence of the Grantors.

 _____ (SEAL)
Danielle M. Reynolds
 _____ (SEAL)
Joseph C. Reynolds

STATE OF NORTH CAROLINA

CUMBERLAND COUNTY

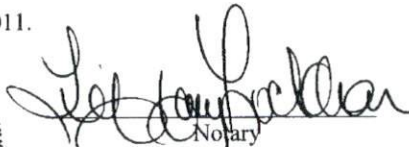
I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:

Danielle M. Reynolds and husband, Joseph C. Reynolds

Name of Principal

This the 16th day of February, 2011.





Notary

Tiffany Locklear
Type or Print Name

My Commission Expires: July 21, 2012

Print this page



Property Description:

L#103 HIGHLAND FOREST .37MAP#2003-1165

Harnett County GIS

PID: 03958711 0020 44

PIN: 9596-09-7585.000

REID: 0059365

Subdivision:

Taxable Acreage: 1.000 LT ac

Caclulated Acreage: 0.35 ac

Account Number: 1500001227

Owners: CORO BRYON CHRISTOPHER & CORO ANGELA C

Owner Address : 306 QUARTERMASTER DR SANFORD, NC 27330-7441

Property Address: 72 MACON CT E SANFORD, NC 27332

City, State, Zip: SANFORD, NC, 27332

Building Count: 1

Township Code: 03

Fire Tax District: Benhaven

Parcel Building Value: \$132360

Parcel Outbuilding Value : \$0

Parcel Land Value : \$22000

Parcel Special Land Value : \$0

Total Value : \$154360

Parcel Deferred Value : \$0

Total Assessed Value : \$154360

Neighborhood: 00350

Actual Year Built: 2004

TotalAcutalAreaHeated: 1860 Sq/Ft

Sale Month and Year: 2 / 2011

Sale Price: \$161000

Deed Book & Page: 2838-0461

Deed Date: 1297900800000

Plat Book & Page: 2003-1165

Instrument Type: WD

Vacant or Improved:

QualifiedCode: Q

Transfer or Split: T

Within 1mi of Agriculture District: Yes

Prior Building Value: \$143660

Prior Outbuilding Value : \$0

Prior Land Value : \$22000

Prior Special Land Value : \$0

Prior Deferred Value : \$0

Prior Assessed Value : \$165660



HTE 0458881

H. NETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION

16747

OPERATIONS PERMIT

Name: (owner) CAVINUS Land Dev. New Installation Septic Tank
 Property Location: SR# 1141 Repairs Nitrification Line
 Subdivision HIGHLAND Forest Lot # 103
 Tax ID # _____ Quadrant # _____
 Contractor: D.C. CARTER 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 25% Reduction System Polysarone 888-222 F150

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

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet

Date: 12-22-04

Inspected by: J. W. [Signature]
Environmental Health Specialist

PERMIT NO. 20698

MCP-1000
STB-814
9-9-04



NOV 24 12 22 04

HTE 04-5-8881

IMPROVEMENT PERMIT

20698

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) CAVINESS LAND New Installation Septic Tank
Property Location: SR# 1141 Repairs Nitrification Line

Subdivision Highland Forest Lot # 103

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 (50x60) Lot Size: 0.37 AC

Basement with Plumbing: Garage:

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 25% Reduction SYSTEM

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

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 75 ft. width of ditches 3 ft. depth of ditches 18-21 in.

French Drain Required: _____ Linear feet of 25% Reduction

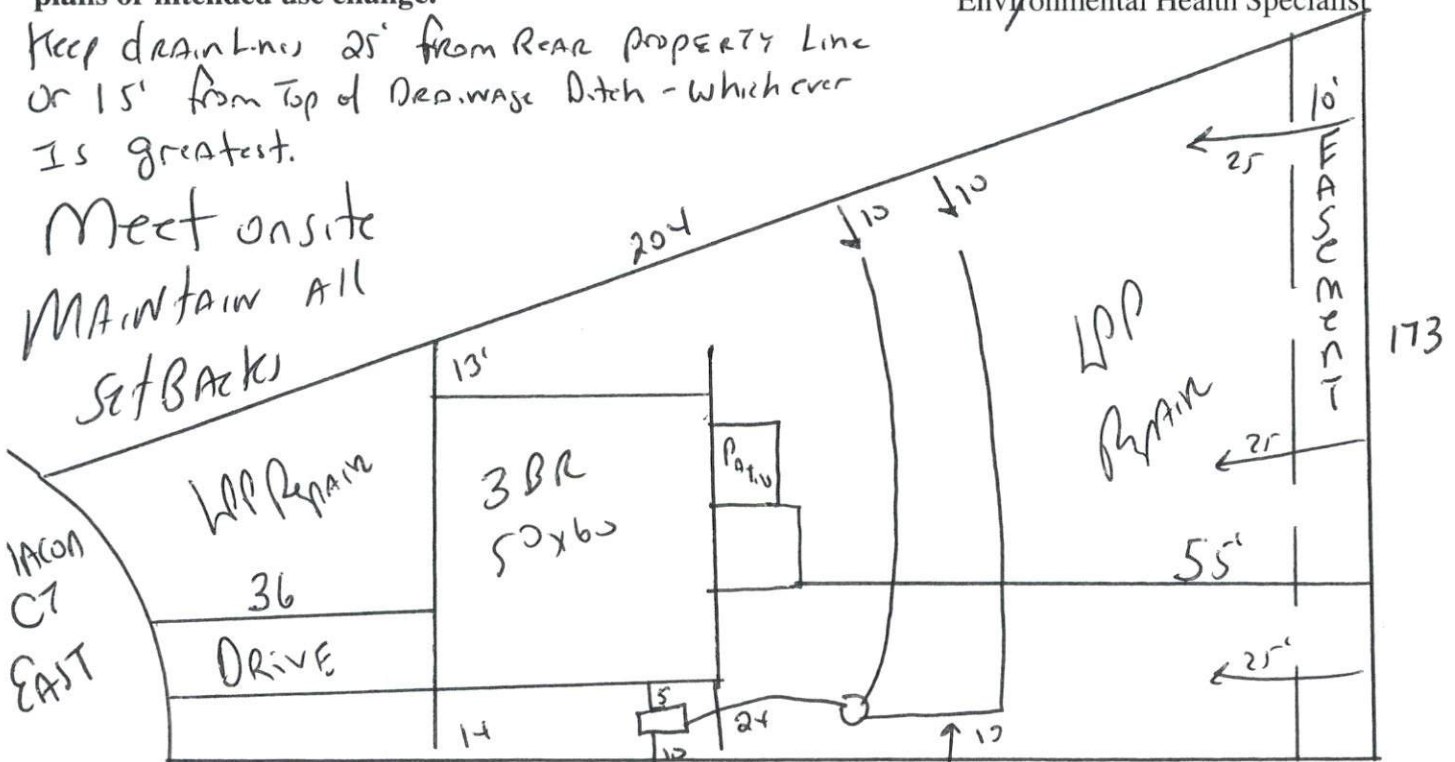
Date: 03-14-04

Signed: Jon W. [Signature]
Environmental Health Specialist

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

Keep drain lines 25' from Rear Property Line or 15' from Top of Drainage Ditch - whichever is greatest.

Meet onsite
Maintain all
Setbacks



If ~~using~~ Chamber SYSTEM must place wash zone Along sides To prevent clogging



MARLIN

Onsite Wastewater System Inspection

Audit Title

72 Macon

Conducted on

8/26/21

Location

72 Macon Ct E
Sanford NC 27332
United States
(35.31542319331565, -79.03145646930545)

Prepared by

Marlin

Completed on

Adverse conditions present that require repair or warrant further evaluation:

1. Septic Tank
 - a. Filter was inaccessible due to proximity to tank top.
 - b. Cracking and deterioration visible in tank. One of the cracks extends from the outlet port to the mid-seam. Significant deterioration of tank top on outlet end.
 - i. Repair/replace septic tank.
 - ii. Contact a certified onsite wastewater contractor for further evaluation and repair.
2. Distribution Box
 - a. Severe deterioration of distribution box.
 - i. Repair/replace distribution box.
3. Leach Field
 - a. See notes below regarding structures/vegetation that may affect the system.

Other pertinent facts noted at the time of inspection:






The operation permit indicates this system was designed for a 3-Bedroom/360GPD Home. See the operation permit for the location of a designated LPP repair area.











Disclaimer


No representation, warranties or opinions are hereby given, written or expressed otherwise, as to the future performance of onsite wastewater system described herein. This onsite wastewater system inspection is a presentation of system facts in place on date of inspection. The inspectors do not accept responsibility for any consequences arising from the use of the information herein. The report is based on matters which were observed or came to the attention of the inspectors during the day of the inspection and should not be relied upon as an exhaustive record of all possible issues that may exist or potential improvements that can be made.

Confidentiality Statement

In order to maintain the integrity and credibility of the inspection processes and to protect the parties involved, it is understood that the the inspectors will not divulge to unauthorized persons any information obtained during this inspection unless legally obligated to do so. Unless otherwise specified, Marlin will only discuss the results of this inspection with the buyer, seller and their respective representatives.

| Question | Response | Details |
|---|---|---------|
| Approximate total holding capacity: | 1000 Gallon | |
| Date of Inspection | 8/26/21 | |
| Septic System Location | | |
| Tank Location: | Right Side Back | |
| Approximate distance from house or other structure to septic tank (ft): | 6 | |
| Distance from swimming pool, if applicable (ft): | N/A | |
| Distance from well, if applicable (ft): | N/A | |
| Septic Tank Location | | |
|   | | |
| Media 1 | Media 2 | |
| Distance from water lines / property lines unknown. | | |
| Evidence of irrigation within 10 feet any system component? | No | |
| Evidence of traffic over the septic system: | No | |
| System appears to be as shown on operations permit from local Environmental Health Department. | | |
| Septic Tank | | |
| Single Tank or Double Tank? | Single Tank | |
| Approximate total holding capacity: | 1,000 | |
| Subsurface wastewater pollution control system operator required? | No | |
| Septic Tank is accessible. | Yes | |
| Percentage of solids (sludge and scum) in tank: | 35 | |
| Tank pumped at time of inspection: | Yes | |
| Did any water return to the tank from the next component when the tank was pumped? | No | |
| Tank Structure is in good condition. No strong signs of deterioration or cracks: | -Small cracks around outlet lid -Crack formed near outlet port and runs to mid seam. | |
|    | | |
| Media 3 | Media 4 | Media 5 |
| Access risers are present: | N/A | |
| Distance from finished grade to top of tank (in): | 4 | |

| Question | Response | Details |
|--|----------------------|---------|
| Both access lids on tank are accessible and were opened during inspection: | Yes | |
| Tank lids are in tact and in good condition. No strong signs of deterioration or cracks: | Yes | |
| Baffle is in tact and in good condition: | Yes | |
| Water level in tank relative to tank outlet: | Yes | |
| Water level in tank is below the invert of the inlet. | Yes | |
| Signs of root intrusion in tank: | No | |
| Evidence of tank leakage. | No | |
| Outlet Tee / Baffle | | |
| Outlet Tee / baffle is present: | Yes | |
| Outlet baffle / tee is constructed of: | Manufactured Plastic | |
| Outlet tee is in good condition. No strong signs of deterioration. | Yes | |
| Outlet tee is at an appropriate height relative to the inlet. | Yes | |
| Filter is present in outlet tee: | Yes | |
| Filter was cleaned at the time of inspection. | No | |
| Filter is accessible and seated properly. | No | |
|    <p>Media 6 Media 7 Media 8</p> | | |
| Connection present from tank to next component: | Yes | |
| Does the system have a pump and pump tank? | No | |
| Distribution device present: | Yes | |
| Distribution Device | | |
| Distribution device is accessible: | Yes | |
| Distribution Device Location | | |
|        <p>Media 9 Media 10 Media 11 Media 12 Media 13 Media 14 Media 15</p> | | |
| Type of distribution device: | Distribution Box | |
| Size of Distribution Box | Small | |
| Distribution device is providing equal distribution of effluent. | Yes | |
| Presence of roots in distribution device. | No | |
| Distribution device appears to be watertight: | No | |
| Corrosion / deterioration present in distribution device: | Severe Deterioration | |
| Confirmation that system effluent is reaching the drain field from the distribution device: | Yes | |

| Question | Response | Details |
|--|-----------------|--|
| Conditions present that have prevented or hindered the inspection of the distribution device. | No | |
| Drain Field | | |
| Drain Field Location | | |
|  Media 16 Media 17 Media 18 Media 19 Media 20 | | |
| Method for dosing to the field. | Gravity | |
| Configuration for dispersal in the field: | Parallel Trench | |
| Nature of media: | Polystyrene | |
| Evidence of past or current surfacing at time of inspection: | No | |
| Evidence of surface water inflow: | No | |
| Adequate ground cover over drain field (6" or more): | Yes | |
| Objects or structures that may affect the condition of the system or system components: | Yes | Post supporting a ramp to the deck is over the line closest to house |
| Leach lines probed: | Yes | |
| System effluent is reaching the leach field: | Yes | |
| Soil Condition at Leach Lines: | Normal | |
| Number of leach lines: | 2 | |
| Vegetation, grading and drainage noted that may affect the condition of the system or system components. | Yes | Several low areas over both lines possibly caused by a digging dog. |
| Additional Information | | |

Media



Media 1

Media 2



Media 3

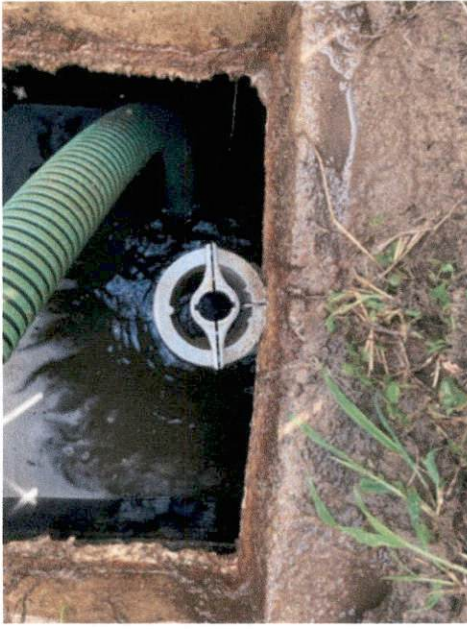
Media 4



Media 5



Media 6



Media 7



Media 8



Media 9



Media 10



Media 11



Media 12



Media 13



Media 14



Media 15



Media 16



Media 17



Media 18



Media 19



Media 20