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

lv.	EI	MAIL ADDRESS: 500	ells@ha	mettorg
OWNER NAME Pristin Wells		PHONE		
PHONE NUMBER 919-413-79			_	
PHYSICAL ADDRESS 254 MISTY	pwoon Dr. to	quay !	27521	e
MAILING ADDRESS (IF DIFFFERENT THAN PH				
IF RENTING, LEASING, ETC., LIST PROPERTY				
South Ridge Farmers	5	Hwy 401		.65
SUBDIVISION NAME	LOT #/TRACT #	STATE RD/HWY		SIZE OF LOT/TRACT
Type of Dwelling: [] Modular [] Mo	bile Home [] Stick b	uilt []Other_10	V8-	
Number of bedrooms 3 [] Baser	ment			
Garage: Yes [] No []	Dishwasher: (Yes]] No []	,	Garbage Disp	oosal: Yes [No [/]
Water Supply: [] Private Well	Community System	[-] County		
Directions from Lillington to your site:				
Left on 401,	Right on N	Goordei	Dr.	
254 on right	+			X

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

- 1. 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.

Owner 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.

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	6[FNO
Year home was built (or year of septic tank installation) 994 Installer of system ? Septic Tank Pumper ? Designer of System ?	-
 Number of people who live in house?	# total county
3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthled. When was the septic tank last pumped? 2 years How often do you have it pumpe 5. If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] weekly [] monthled. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [d? <u>Every Cype</u> y [] weekly eekly[] monthly
 Do you use an "in tank" toilet bowl sanitizer? [] YES [] NO . Are you or any member in your household using long term prescription drugs, antibior chemotherapy?] [] YES [] NO If yes please list	
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 [] please list any additions including any spas, whirlpool, sinks, lavatories, bath/showers,	
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 drains, basement foundation drains, landscaping, etc? If yes, please list 100 +	as, a roof, gutter
15. Are there any underground utilities on your lot? Please check all that apply: [}Power [}Phone [] Cable [] Gas 16. Describe what is happening when you are having problems with your septic system, a first noticed? Sink gurgles Standing Water in Yand	
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash or rains, and household guests?) [] YES [-] NO If Yes, please list DO TO TO TO TO TO TO TO	

IPROVEMENT PEP ...T

tion of any building at which a sentic tank system is to be used	d for disposal of sewage without first obtaining a written permi
Name: (owner) John G Mangum Construction	New Installation Septic Tank
Name: (owner) John G Margum Construction Property Location: SR# 401 N	Repairs Nitrification Line
Subdivision Jent! Redge form	Lot # Quadrant #
Tax ID #	Quadrant #
Number of Bedrooms Proposed:	Lot Size:
Basement with Plumbing: Gara	ge:
Water Supply: Well Public Com	munity
Distance From Well:ft.	
Following is the minimum specifications for sewage disfinal approval. Type of system: Conventional Other	A.
Size of tank: Septic Tank: 1000 gallons	Pump Tank: gallons
Subsurface No. of exact length of each ditch	width of depth of 160 ft. ditches 3 ft. ditches 18-20 in.
French Drain Required: Linear feet	
D	Date:
This permit is subject to revocation if site plans or intended use change.	igned: James & Manha & E165. Environmental Health Specialist
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5Tubb Plumber 8	* Maintain all setbock 5 ! * Run LINES ON
out shallow	X 0. 17165 B)
Sc septic Trank	1 1 1
Stallow to	CONTOUR
	1 1/2
Allow for peopler ditch depth.	1/12
34-1-1	
	4
32 HO1	ME 35:401 >
Partition	
V	
777	weet.

OPERATIONS PERMIT

		4.		
Name: (owner)	GM Construe	tion	New Installation	Septic Tank
Property Location:	SR#_401 N		□ Repairs	Nitrification Line
	Subdivision 304	Ridge	Lot #/5	
	TAX ID#		Quadrant #	
Contractor:			Registration #	
Basement with Plum	bing:	Garage:		
Water Supply:	Well Public	Community		
Distance From Well:	<i>5</i> 8ft.			
Following are the s	pecifications for the s	ewage disposal syst	tem on above captione	d property.
Type of system:	Conventional	Other.		
Size of tank:	sepuc rank: 1000	_ gallons Pu	mp Tank: gal	ions
_	ditches3 of e	each ditch 180 ft.	width of de ditches ft. di	epth of tches 19^{-28} in.
French Drain:	Linear fee			
			4-16-58	
PERMIT NO/3			by: Omes C. Ma Environmental H	ealth Specialist
DIZEU E ON WILD'S FROM Par	mit o	Home -	FLOST TWO LE Special Special	Than

HARNETT COUNTY TAX ID# 080653 0018 18

10-21-2015 BY MT

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2015 Oct 21 11:02 AM NC Rev Stamp: \$ 0.00
Book: 3349 Page: 165 Fee: \$ 26.00
Instrument Number: 2015014651

Submitted electronically by Knowledge Splice Services in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

Mail after recording to: Certified Title Corporation 11459 Cronhill Drive Suite M Owings Mills, MD 21117

This Instrument prepared by: PC Law Associates (no title examination), 2015 Ayrsley Town Blvd, Suite 202, Charlotte, NC 28273

Brief Description for the Index:

Parcel ID No.: 080653 0018 18

File No.: 15NC5062

Excise Tax: \$0.00

NORTH CAROLINA QUIT CLAIM DEED

THIS QUIT CLAIM DEED made this 7th day of Hugust, in the year 20/5, by and between:

GRANTORS	GRANTEES
KRISTIN S. WELLS f/k/a KRISTIN S. DENNY, a married woman, joined by her spouse, STUART M. WELLS	KRISTIN S. WELLS and STUART M. WELLS, wife and husband, as tenants by the entirety with full rights of survivorship
Mailing Address: 254 Mistywood Drive Fuquay Varina, NC 27526	Mailing Address: 254 Mistywood Drive Fuquay Varina, NC 27526

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 content.

WITNESSETH, that the grantors, for no consideration, have granted, bargained, remised and released and by these presents do grant, bargain, remise and forever quitclaim into the Grantee and his heirs and assigns all right, title, claim, and interest of the said grantors in and to a certain tract or parcel of land lying and being in the County of Harnett, and State of North Carolina, and more particularly described as follows:

SEE LEGAL DESCRIPTION ATTACHED HERETO AS EXHIBIT "A" AND MADE A PART HEREOF.

Commonly Known As: 254 Mistywood Drive, Fuquay Varina, NC 2752

TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges thereunto to the said grantee and his heirs and assigns, free and discharged from all right, title, claim, or interest of the said grantors or anyone claiming by, and through or under them.

Title to the property hereinabove described is subject to the following exceptions:
 2015 ad valorem taxes for which Grantee hereby assumes and agrees to pay. Easements and restrictions of public record as of the date hereof.
This property is not the principal residence of the Grantor(s).
IN TESTIMONY WHEREOF, said grantors have hereunto set their hands and seals the day and year first above written. Crush Company C
STUART M. WELLS
STATE OFNC
I. DAGE L. THOMAS J. a Notary Public of said State and County aforesaid, do hereby certify that grantor(s). KRISTIN S. WELLS f/k/a KRISTIN S. DENNY and STUART M. WELLS personally appeared before me this day, and (i) I have personal knowledge of the identity of the person(s) or (ii) I have seen satisfactory evidence of the grantor(s) identity, by current state or federal identification with the grantor(s) photograph in the form of a NCDL or (iii) a credible witness has sworn to the identity of the grantor(s) each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated.
Witness my hand and official seal or stamp, this day of ALGUT, in the year 20_15. (seal or stamp) DALE L THOMAS JR NOTARY PUBLIC WAKE COUNTY NORTH CAROLINA Notary Printed or Typed Name
My Commission Expires: 7-22-17

EXHIBIT A LEGAL DESCRIPTION

Real property in the City of Fuquay Varina, County of Harnett, State of North Carolina, described as follows:

Being all of Lot 15, Phase 1, of South Ridge Farms, as shown on map recorded in Plat Cabinet F, Slide 806-A, of Harnett County Registry.

Being all of that certain property conveyed to KRISTIN S. DENNY from WAYNE M. MCDOUGAL and MARILYN S. MCDOUGAL, by deed dated January 31, 2007 and recorded January 31, 2007 in Book 2336, Page 186 of official records.

Commonly known as: 254 Mistywood Drive, Fuquay Varina, NC 27526.

Parcel ID: 080653 0018 18

The preparer of this document has been engaged solely for the purpose of preparing this instrument, has prepared the instrument only from the information given and has not been requested to provide, nor has the preparer provided an examination of the legal description, an opinion on title or advice on the tax, legal or non-legal consequences of that may arise as a result of the conveyance, nor has the perparer verified the accuracy of the amount of consideration stated to have been paid or upon which any tax may have been collected.



