### 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: Seth-mingey chotmail com				
OWNER NAME Seth + Skylar Mingey	PHONE 859-329-7061				
PHYSICAL ADDRESS 269 Pinevalley in Sanfa	270-849-504Z rd NC & 27332				
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL)					
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME	4				
Crestview	State Rd 1/4+01/zAcr-				
SUBDIVISION NAME LOT #/TRACT #	STATE RD/HWY SIZE OF LOT/TRACT				
Type of Dwelling: [] Modular [] Mobile Home [] Sti	ck built [] Other				
Number of bedrooms [] Basement					
Garage: Yes [ ] No [ ] Dishwasher: Yes [ ] No [	Garbage Disposal: Yes [] No []				
Water Supply: [ ] Private Well [ ] Community System	[]/County				
Directions from Lillington to your site:					
In order for Environmental Health to help you with your repai	r you will need to comply by completing the following:				
<ol> <li>A "surveyed and recorded map" and "deed to your propert</li> </ol>					
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 ma	rked, 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 ev					
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	t 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.

	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
nstalle eptic	r of system UNKNOWN  Tank Pumper WILLOWN  er of System UNILLOWN
	Number of people who live in house? 2 # adults # children # total What is your average estimated daily water usage? Whow gallons/month or day Harnet county water. If HCPU please give the name the bill is listed in \$\int \text{Divious} Brianc mingry
3. 4. 5. 6. 7.	If you have a garbage disposal, how often is it used? [   daily [ ] weekly [ ] monthly  When was the septic tank last pumped?   The ISD How often do you have it pumped?   DOS HOW OFTEN DO YOU Have a dishwasher, how often do you use it? [   daily [   every other day [ ] weekly   If you have a washing machine, how often do you use it? [ ] daily [   every other day [ ] weekly   Do you have a water softener or treatment system? [ ] YES [   NO Where does it drain?
9.	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 chemotherapy?] [ ] YES [ ] NO If yes please list
11. 12.	Have you put any chemicals (paints, thinners, etc.) down the drain? [ ] YES [/] NO 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
14.	Do you have an underground lawn watering system? [ ] YES
16.	Describe what is happening when you are having problems with your septic system, and when was this first noticed?  Over fooung Outside
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

DT151 - 1 VT5

HARNETT COUNTY TAX ID # 03958704 0020 91

For Registration Matthew S. Willis
Register of Deeds
Harnett County, NC
Electronically Recorded
2022 Mar 02 01:12 PM NC Rev Stamp: \$ 570.00
Book: 4121 Page: 842 - 843 Fee: \$ 26.00
Instrument Number: 2022004528

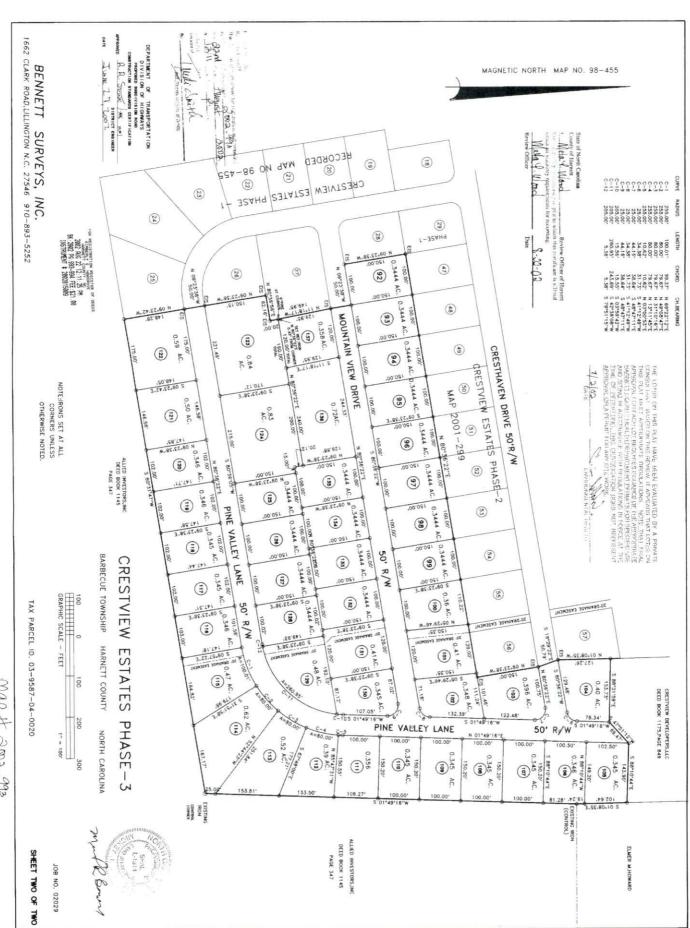
03-02-2022 BY: TC

#### NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 570.00				
Parcel Identifier No. 03958704002091 Verified by By:	County on theday of, 20			
Mail/Box to: The Law Office of Jeffrey E. Radford, P.A., 1300 Bragg B	lvd, Suite 1316, Fayetteville, NC 28301			
This instrument was prepared by: The Law Office of Jeffrey E. Radford, P.A., 1300 Bragg Blvd, Suite 1316, Fayetteville, NC 28301				
Brief description for the Index: LOT 126, PH III, Crestview Estate	NO TITLE CERTIFICATION			
THIS DEED made this day of	, 20, by and between			
GRANTOR David Conty Rivera and spouse	GRANTEE Seth Mingey and spouse			
Betzaida Conty	Skylar Mingey			
Post Office Box 1149	269 Pinevalley Lane			
Utauado, PR 00641	Sanford, NC 27332			
Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership.				
The designation Grantor and Grantee as used herein shall include said paplural, masculine, feminine or neuter as required by context.	arties, their heirs, successors, and assigns, and shall include singular,			
WITNESSETH, that the Grantor, for a valuable consideration paid by these presents does grant, bargain, sell and convey unto the Grantee in situated in the City of Sanford,				
North Carolina and more particularly described as follows:				
BEING all of Lot 126 in a subdivision known as Crestview Estate, Phase Page 993, Hamett County Registry, North Carolina.	III, according to a plat of same duly recorded in Map Book 2002,			

DT161 - 1 VTV

The property hereinabove described was acquired by Grantor by instr All or a portion of the property herein conveyed $\times$ includes or $\times$	
A map showing the above described property is recorded in Plat Bool	<u>2002</u> page 993
TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all psimple.	rivileges and appurtenances thereto belonging to the Grantee in fee
And the Grantor covenants with the Grantee, that Grantor is seized of simple, that title is marketable and free and clear of all encumbrances, claims of all persons whomsoever, other than the following exception	and that Grantor will warrant and defend the title against the lawful
IN WITNESS WHEREOF, the Grantor has duly executed the foregoing	ng as of the day and year first above written.
	(SEAL)
(Entity Name)	Print/Type Name: David Conty Rivera
By:	X Barda PA (SEAL)
Print/Type Name & Title:	Print/Type Name: Betzaida Conty
Bur	(CDAL)
By:	Print/Type Name: (SEAL)
By:	Print/Type Name:(SEAL)
State of North Caroling - County or City of Comb	
I, the undersigned Notary Public of the County or City of Control Private and Groups Petraide Control	
due execution of the foregoing instrument for	personally appeared before me this day and acknowledged the essed. Witness my hand and Notarial stamp or seal this
David Conty Rivera and spouse Betzaida Conty  due execution of the foregoing instrument for the tarposes deprin expr	() 1 () 0
	X (prince Varience Garcia DV
My Commission Expires: 11 78 7026	1 Jennifer Daglene Garcia DV Notary Public
(Affix Seal)	Notary's Printed or Typed Name
State of County to City of which	
I, the undersigned Notary Public of the Compron Chy of	and State aforesaid, certify that
	personally appeared before me this day and acknowledged the
due execution of the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes therein expression and the foregoing instrument for the purposes the foregoing instrument for the purpose and the foregoing instrument for the purpose and the foregoing instrument for the foreg	essed. Witness my hand and Notarial stamp or seal this day of
7 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name
State of County or City of	
State of County or City of  I, the undersigned Notary Public of the County or City of	and State aforesaid, certify that
_he is the of	personally came before me this day and acknowledged that
ne is theof	, a North Carolina or ny/general partnership/limited partnership (strike through the
inapplicable), and that by authority duly given and as the act of such er	
behalf as its act and deed. Witness my hand and Notarial stamp or sea	, this day of, 20
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name
Page 2 o	
rage 2 O	-



Map # ama-993



# KIMBERLY S. HARGROVE REGISTER OF DEEDS, HARNETT COURTHOUSE P.O. BOX 279 LILLINGTON, NC 27546

Filed For Registration:

08/22/2002 12:11:25 PM

Book:

PLAT 2002 Page: 993-994

Document No.:

2002015009

MAP 2 PGS \$21.00

Recorder:

TRUDI C SMITH

State of North Carolina, County of Harnett

KIMBERLY S. HARGROVE, REGISTER OF DEEDS

Deputy/Assistant Register of Deeds

\*2002015009\*

2002015009

HTE 03-5-8330

# HARNET COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

16811

# **OPERATIONS PERMIT**

Name: (owner) / Pent Pira(c	New Installation Septic Tank
Property Location: SR#\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	_ □ Repairs Nitrification Line
	Lot # 126
Tax ID #	Quadrant #
Contractor: Trd Brown	Registration #
Basement with Plumbing:	
Water Supply:	
Distance From Well: 55ft.	
Following are the specifications for the sewage disposal system	
Type of system: Conventional Other (194)	Chp)
Size of tank: Septic Tank: DOO gallons Pump	
Subsurface No. of exact length of each ditch of each ditch.	width of depth of ditches 1821 in.
French Drain Required:Linear feet	ž
Date:	03-10-04
	ected by:
PERMIT NO. 2/156	Environmental Health Specialist
ORIJE 300 PE	136' 600

## HAR TT COUNTY HEALTH DEPARTM T

## HTE 03-5-8330

## **IMPROVEMENT PERMIT**

21156

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." Mew Installation Septic Tank Name: (owner) Nitrification Line Property Location: SR#\_\_\_ CRESTUREW Lot # | 2 6 Subdivision Quadrant # Tax ID # Number of Bedrooms Proposed: 3(46x58) Lot Size: .34Ac Garage: Basement with Plumbing: Community 2 Public ft. Distance From Well: Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Conventional ☐ Other Type of system: Septic Tank: \_\_\_\_\_gallons Pump Tank: \_\_\_\_\_gallons Size of tank: width of exact length Subsurface No. of of each ditch dys ft. ditches /8-24in. ditches Drainage Field ditches Linear feet French Drain Required:\_\_\_\_\_ This permit is subject to revocation if site Signed: plansfor intended use change. Environmental Health Specialist 30, 13 Ouh 100 22 mbing shallow when shown