## 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**

			EM	AIL ADDRESS:	Joe-Pl	605438 14Hoz.c
OWNER NAME	e f	RHOUSE		PHONE	910-57	14.5301
PHYSICAL ADDRESS	103	ANDENSON	CReek	ScHool	RD.	
MAILING ADDRESS (IF DI	FFERENT	THAN PHYSICAL)				
IF RENTING, LEASING, ET	., LIST PR	OPERTY OWNER NAM	IE			
SUBDIVISION NAME		LOT #/TRACT	# 5	TATE RD/HW	Y	SIZE OF LOT/TRACT
Type of Dwelling: [] M	odular	[] Mobile Home	[] Stick bu	ilt []Other	Block	
Number of bedrooms(	2	[] Basement				
Garage: Yes[]No[]		Dishwasher:	Yes [ ] No [ ]		Garbage	e Disposal: Yes [] No []
Water Supply: [] Privat	e Well	[] Communit	y System	[]Count	<b>y</b>	
Directions from Lillington	to your s	site: 96 210	South	its	or the	Riget ABout
	Ē	Zeauty Str	p - 3	L CHAIR	-5	
wells on the pro 2. The outlet end o	recorded perty by sl f the tank	I map" and <u>"deed to ye</u> howing on your survey and the distribution be	our property" me map. ox will need to be	ust be attached e uncovered ar	d to this application	npleting the following: on. Please inform us of any flagged. After the tank is laced, 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

June 1/

## HOMEOWNER INTERVIEW FORM

	portant that you answer the following questions for our inspectors. Please do not leave any blanks if le, 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 [YNO vithin the last 5 years have you completed an application for repair for this site? []YES [YNO						
ear h	ome was built (or year of septic tank installation)OT Sugler of systemAlexS						
	Tank Pumper						
	er of System						
Jesigii	ei di System						
1. 2.	Number of people who live in house?# adults# children# total What is your average estimated daily water usage?# gallons/month or daycounty						
	water. If HCPU please give the name the bill is listed in SAMMIR RHODES						
	If you have a garbage disposal, how often is it used? [ ] daily [ ] weekly [ ] monthly						
	When was the septic tank last pumped? <u>Not Gaze</u> How often do you have it pumped? <u>New</u>						
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						
/.	Do you have a water softener or treatment system? [ ] YES [ ] WO Where does it drain?						
0	Do you you on "in touls" toilet houd conition? [ ] VES [ ] 160						
	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						
10.	chemotherapy?] [ ] YES [ ] NO If yes please list						
11.	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						
	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						
4.5	drains, basement foundation drains, landscaping, etc? If yes, please list $^{\circ}$						
15.	Are there any underground utilities on your lot? Please check all that apply:						
16.	Describe what is happening when you are having problems with your septic system, and when was this first noticed?  WOT work is						
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						
_							

SEP 4 49 PH'77

FLORA J. MILTON REGISTER OF DEEDS HARNETT COUNTY, N.C.



Excise Tax	Recording Time, Book and Page		
Tax Lot No.	Parcel Identifier No.		
Verified by County en	the day of		
by			
Mail after recording to .Mr Mrs Sam .Burgess,	Route 1, Box 512, Spring Lake, NC 28390		
This instrument was prepared by James F. Penny, J	r., Attorney at Law, Lillington, N. C.		
NORTH CAROLINA GEN	ERAL WARRANTY DEED		
THIS DEED made this 14 day of September			
GRANTOR	GRANTEE  SAM BURGESS and wife, JEAN M. BURGESS of Harnett County, North Carolina		
MRS. LESTER BOLIN of Harnett County, North Carolina (widow)			
	** *** *** ***		

Enter in appropriate block for each party: name, address, and, if appropriate, character of entity, e.g. 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 certain lot or parcel of land situated in Anderson Creek Township, .... North Carolina and more particularly described as follows:

A parcel containing 0.103 acre, more or less, located parallel to a parcel heretofore conveyed to Sam Burgess and being described by a survey dated September 3, 1977, by Artis P. Spence, Surveyor, and being more particularly described as follows:

BEGINNING at a point in the center of S. R. 2064 being northwest corner of Sam Burgess parcel; thence with old call South 84 degrees 14 minutes 32 seconds East 285.28 feet to the northeast corner of Sam Burgess tract; thence North 29 degrees 14 minutes 40 seconds East 5.71 feet; thence North 79 degrees 59 minutes West 281.32 feet to margin of Secondary Road 2064; thence North 79 degrees 59 minutes East 30 feet to the center of Secondary Road 2064; thence South 20 degrees 55 minutes West 27 feet to the BEGINNING.

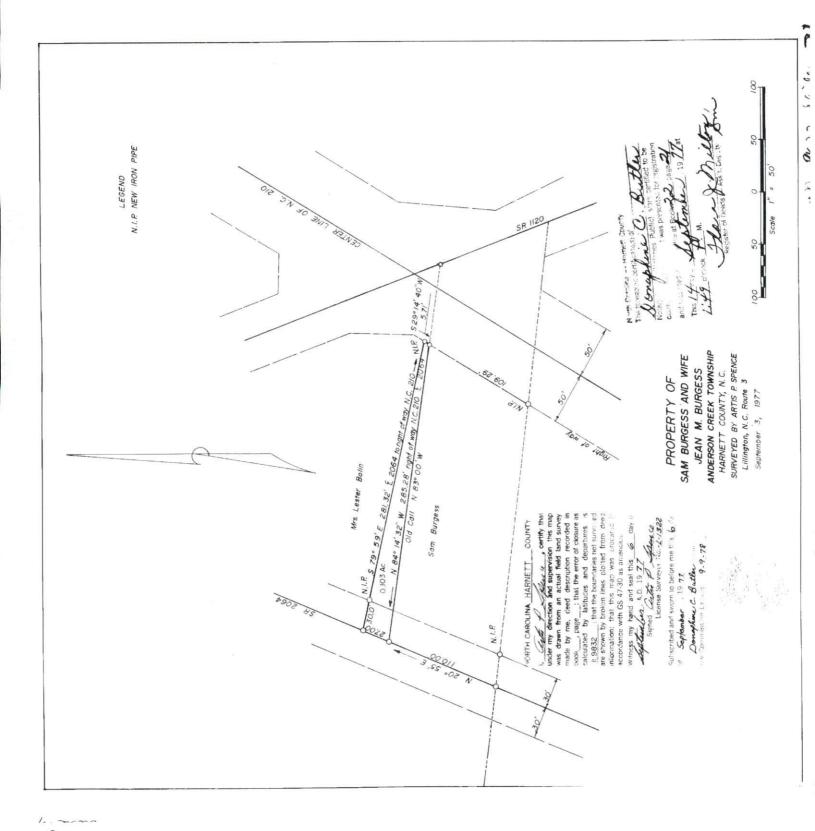
For reference to chain of title, see deed recorded in Book 413, Page26, Registry of Harnett County, and for reference to above property see map recorded in Map Book 22 Page 3/ , Registry of Harnett County.

400

The property hereinabove	described was acquired by G	rantor b	y instrument recorded in	***************************************	***************************************
					***************************************
A map showing the above	e described property is recorde	ed in Pla	Book	. page	15
TO HAVE AND TO HOL	LD the aforesaid lot or parcel	of land	and all privileges and ap	purtenances thereto	belonging to
the same in fee simple,	nts with the Grantee, that Grantee that title is marketable and finst the lawful claims of all perinabove described is subject to	free and ersons w	clear of all encumbrance homsoever except for the	s, and that Granto	will warrant
	G2 49				
S	£34.				
	•		*		
		*		*	
4 44				* *	*
	the action of	959			
			,		
abere written.	P, the Granter has bereunte set utherized efficers and its seal to be		Mrs Lester	Belin	SEAL
(0	Corporate Name)	USE BLACK INK ONLY	Mrs, Lester	Bolin (widow	<b>?</b> }
By:		- ¥			SHAL
•		Z			
***********************	President	K			
ATTEST:		Į.			(3KAL
******************	*********************				
	Secretary (Corporate Scal)	SE	(4)		(SPAL
14 665					
SKAL-STAMP	NORTH CAROLINA, COUNTY	Y OF HE	rnett		
	r peria corema	n (Poy	vell) ER BOLIN (widow)	a netary public	of said county d
÷ " '	hereby certify that	. LES	ER BOLLN (MIGOM)	**************	
3.					Granto
1.5	2 personally appeared before m	e this day	and acknowledged the execution	on of the foregoing insti	ument Witness m
The state of the s	hand and official stamp or sea	d, this 1	th day of Septemb	er 19.1.19/	.)
	My commission expires: Aug	ust 2	L, 1978. Miliali	Joman Clubic	Notary Pow
Service of the last of the las		Contraction (Section )		PRODUCED AND THE PRODUC	torney and the said in the party of the said
BEAL-STAMP	NORTH CAROLINA, COUNT				
	Ľ,	*********	a Notary	Public of the County :	and solveniedes
	g certify that		perforally	cauta natola ma tura gal	and seanowiees
16 E	Carolina corporation, and that	t by autho	rity duly given and as the act	of the corporation, the f	oregoing instrumer
	was signed in its name by its		President, sealed with its cor	porate seal and attested	by
	as its		Becretary.		
	Witness my hand and official	stamp or	seal, thisday of	, 19	
	My commission expires:		***************************************		Notary Publ
Control of the second s	A	-	019	7	
The foregoing Certificate(s)	" NIO O TOAL	oma	a) Howell		
***************************************					
is/are certified to be correct	2. This instrument and this certifica	te are du	y registered at the date and tim	ne and in the Book and	Page shows on th
first pige hereof.	- mint			2/2 -4	_
Jea >	(1) Jellon		REGISTER OF DEEDS FOR	Land	COUNT
There 7	no Lean		Deputy/Assistant - Register of D	eeds	
B) WILLIAM STATE OF THE STATE O					
7)					
17					

788

the state of the state of the state of



144 BOOK 27