

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: tyraharding@msn.com

OWNER NAME Tyra A Harding PHONE 678-469-7330

PHYSICAL ADDRESS 140 Brandywood Court, Cameron, NC 28326

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 2101 Woodcrest Dr, Sanford, NC 27330

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

Brandywood - Lot 26/Section Two, Brandywood
SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling: Modular Mobile Home Stick built Other _____

Number of bedrooms 3 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 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.

Tyra A Harding 9-19-22
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 NO

Year home was built (or year of septic tank installation) 1996

Installer of system Wayne Sharpe

Septic Tank Pumper Bullard Septic Service

Designer of System Wayne Sharpe

Vacant Rental

1. Number of people who live in house? _____ # adults _____ # 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 Tyra A. Harding

3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly

4. When was the septic tank last pumped? 8-29-22 How often do you have it pumped? Unknown

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 N/A

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?

Septic Inspection showed hole in outlet side beside the lid. Recommendation is septic replacement

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 _____

* Inspection Report Attached

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

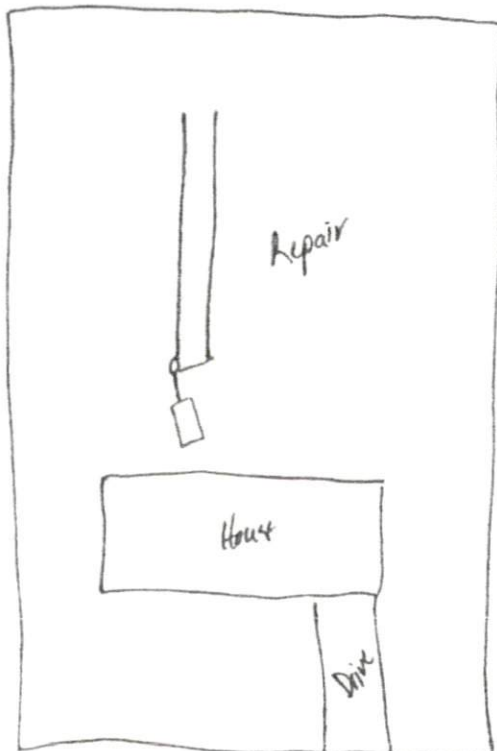
Name: (owner) Bob West New Installation Septic Tank
Property Location: SR# 87 Repairs Nitrification Line
Subdivision Brandywood Lot # 24
TAX ID# _____ Quadrant # _____
Contractor: Wayne Sharpe Registration # _____
Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: 50+ ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other _____
Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
Subsurface Drainage Field No. of ditches 2 exact length of each ditch 67 ft. width of ditches 3 ft. depth of ditches 18-24 in.
French Drain: _____ Linear feet

PERMIT NO. 09634

Date: 4-1-76
Inspected by: Thomas J. Boyer R.S.
Environmental Health Specialist





On-site Wastewater Inspection

Property Address: 140 Brandywood Ct. Cameron NC 28326

Buyer Name: The Tyra Ann Harding Living Trust

Current Owner of Record: Sheila Baker

Realtor: Olin Black

Date of Inspection: 08/29/2022

[X] The Home Was Vacant at Time of The Inspection

3 Advertised number of bedrooms as stated in MLS or as stated in attached sworn statement by owner or owner's representative

3 Gallons per day for designed system size or number of bedrooms as stated in available local health department information

[X] Inspection shall include any part of the system located more than 5 feet from the primary structure that is a part of the operations permit

[X] Copy of Operations/Improvement permit from the Harnett County Environmental Health Department is attached

[] Operations/Improvement permit not available

[] System requires a certified subsurface water pollution control system operator pursuant to G.S. 90A-44

Current Operator's Name

Most recent performance, operation and maintenance reports are [] attached [] not available

Type of water supply [] Well [X] Public Water [] Community Water [] Spring

Location of Septic Tank and septic tank details:

- 8 Ft. from house or structure
N/A Ft. from well if applicable
55 Ft. from water line if applicable and readily visible
Ukn Ft. from property line if said property lines are known
12" Distance from finished grade to top of tank or access riser
No Access riser(s) Describe: N/A
Yes Tank lids intact Describe: Square concrete lids in deteriorating condition
Yes Tank has baffle wall Describe condition of baffle wall: Concrete baffle in good condition
Yes Inflow to tank is noted as sufficient
No Inflow to tank is noted as insufficient or blocked
Yes Water level in tank is relative to tank outlet
Yes Outlet T is present Describe condition of outlet T: Concrete outlet T deteriorated and falling off
No Outlet has filter Describe condition of filter: N/A
Yes Effluent leaves the outlet
No Roots present in tank Describe extent of roots: N/A
No Evidence of tank leakage Describe: N/A
No Evidence of non-permitted connections, such as downspouts or sump pumps
Yes Connection present from house to tank
Yes Connection present from tank to next component
20 Percentage of solids in tank
N/A Unable to locate tank. System inspection cannot be completed until tank is located

Date tank was last pumped: 08/29/2022 [] Unknown

Client requesting this inspection has been advised that for a complete inspection to be performed the tank needs to be pumped. [] Client has declined to have the tank pumped at inspection and hereby acknowledges they have so declined.

Client Signature _____ Date _____



Does system have pump tank? Yes (complete blanks below) No

- Ft. from house or structure
- Ft. from well or spring if applicable
- Ft. from water line if applicable
- Ft. from property line if property lines are known
- Ft. from septic tank
- Distance from finished grade to top of tank or access riser
- Audible and visible alarms (as applicable) work
- Pump turns on and effluent is delivered to next component
- Access risers in place
 - Describe type of access risers:
 - Describe condition of tank lids:
 - Location of control panel:
 - Condition of control panel:

Unable to operate pump due to lack of electricity at site at time of inspection

Dispersal field: Type of system: Conventional Accepted Innovative Experimental Controlled Demonstration Pretreatment; Type of Pretreatment:

Brief Description of System Type: 134' of Conventional Gravel Drain Line

Ukn Ft. from property line if property lines are known
4 Ft. from septic/pump tank
2 # of lines
134 Ft. of lines
No Evidence of past or current surfacing at time of inspection
No Evidence of traffic over the dispersal field
Yes Vegetation, grading and drainage noted that may affect the condition of the septic system
Yes Effluent is reaching the dispersal field
Yes Distribution box present Describe condition: Deteriorating and falling apart

Adverse conditions present that require repair or subsequent observation or warrants further evaluation by the local health department. Description of adverse condition: The septic tank has a hole in it on the outlet side beside the lid. This is from deterioration of the septic tank. Also the septic tank is waffling/bouncing when pressure was applied to open the lids. This is indication that the septic tank is not structurally sound. Both lids are deteriorating, and the handles are broken off. The outlet T on the septic tank is deteriorated and part of it has fallen off allowing for sludge to enter the drain line. The distribution box is deteriorated and dirt/debris has entered into it.

Client should contact the Harnett County Environmental Health and/or a certified on-site wastewater contractor

Other pertinent facts noted during inspection: The septic system for 140 Brandywood Ct consist of a 1000-gallon septic tank, distribution box and 134' of conventional gravel drain line. The system is located in the backyard of the property and marked with flags for the client's knowledge. The septic tank is >6" below finished grade and no access risers are present. Access risers are required for any septic tank buried more than 6" below (See NCAC 18A.1952). It is recommended to pump the septic tank every 3-5 years to prevent backups and drain field issues. Vegetation surrounds the property which may affect the system and its components during its lifespan. Lastly it is recommended to correct the above adverse conditions.

Inspector Name: Boyd J. Bullard Jr. Certification # 25371
Address: 1117 Walker Rd Sanford NC, 27332
Phone: 919-499-1460

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 the date of the inspection.

Inspector Signature: Boyd J. Bullard Jr.

Date: 08/29/2022



Front View of 140 Brandywood Ct



Septic Tank Location



Inlet Side Lid



Outlet Side Lid



Hole In Tank Beside Outlet Lid



Closeup of Hole



Inlet Side Before Pumping



Outlet Side Before Pumping



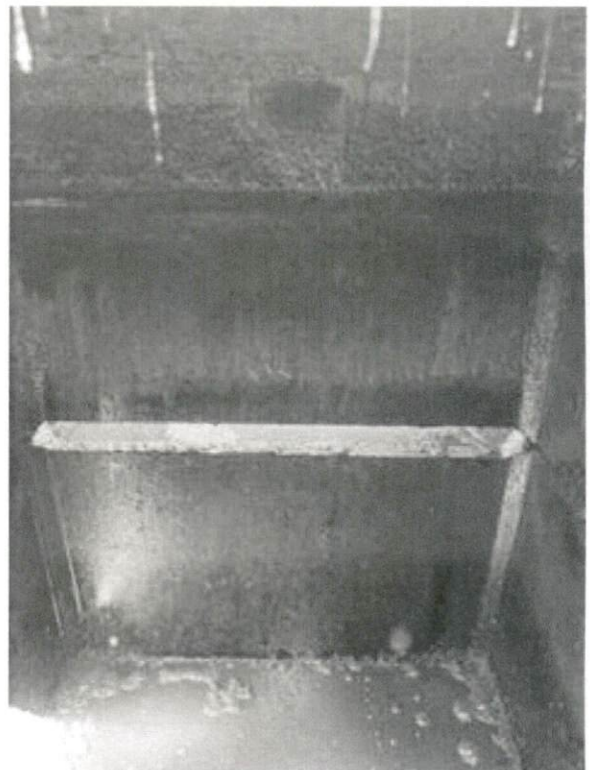
Septic Tank Walls



Septic Tank Walls



Septic Tank Walls



Inlet Side Baffle



Outlet Side Baffle



Inlet Sewer Line



Inlet Sewer Line Cleanout



Concrete Outlet T



Distribution Box



Inside Distribution Box



Inside Distribution Box



Distribution Box Lid



View of Drain Field Area

Matthew S. Willis Register of Deeds
Harnett County, NC
Electronically Recorded
09/15/2022 09:45:57 AM NC Rev Stamp: \$352.00
Book: 4166 Page: 2595 - 2596 (2) Fee: \$26.00
Instrument Number: 2022109483

HARNETT COUNTY TAX ID #
019594 0045 20

09-15-2022 BY: TC

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 352.00

Parcel Identifier No. 019594-0045-20 Verified by _____ County on the ____ day of _____, 20____
By: _____

Mail/Box to: The Law Office of Jeffrey E. Radford, P.A., 1300 Bragg Blvd, 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 26, SEC Two, Brandywood NO TITLE CERTIFICATION

THIS DEED made this 23 day of August, 2022, by and between

GRANTOR
Sheila L Baker, unmarried
1854 Pelican Hill Way
Kissimmee, FL 34759

GRANTEE
The Tyra Ann Harding Living Trust
140 Brandywood Court
Cameron, NC 28326

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 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, parcel of land or condominium unit situated in the City of Cameron, Anderson Creek Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot Number 26, in a subdivision known as Brandywood, Section Two, and the same being duly recorded in Plat Cabinet F, Slide 338-C, Harnett County, North Carolina Registry. Reference to said map is hereby made for greater certainty of description.

The property hereinabove described was acquired by Grantor by instrument recorded in Book _____ page _____.
All or a portion of the property herein conveyed ___ includes or X does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book _____ page _____.

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, other than the following exceptions:

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

(Entity Name) Sheila L Baker (SEAL)
Print/Type Name: Sheila L Baker

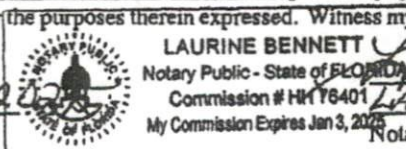
By: _____ (SEAL)
Print/Type Name & Title: _____
Print/Type Name: _____

By: _____ (SEAL)
Print/Type Name & Title: _____
Print/Type Name: _____

By: _____ (SEAL)
Print/Type Name & Title: _____
Print/Type Name: _____

State of FLORIDA - County or City of POLK
I, the undersigned Notary Public of the County or City of POLK and State aforesaid, certify that
Sheila L Baker personally appeared before me this day and acknowledged the
due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 23rd day of
August, 2022

My Commission Expires: 01/03/2025
(Affix Seal)

 Laurine Bennett
Notary's Printed or Typed Name

State of _____ - County or City of _____
I, the undersigned Notary Public of the County or City 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 expressed. Witness my hand and Notarial stamp or seal this _____ day of
_____, 20____.

My Commission Expires: _____
(Affix Seal)

Notary Public
Notary's Printed or Typed Name

State of _____ - County or City of _____
I, the undersigned Notary Public of the County or City of _____ and State aforesaid, certify that
_____ personally came before me this day and acknowledged that
_____ he is the _____ of _____, a North Carolina or
_____ corporation/limited liability company/general partnership/limited partnership (strike through the
inapplicable), and that by authority duly given and as the act of such entity, _____ he signed the foregoing instrument in its name on its
behalf as its act and deed. Witness my hand and Notarial stamp or seal, this _____ day of _____, 20____.

My Commission Expires: _____
(Affix Seal)

Notary Public
Notary's Printed or Typed Name