

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: bjfishlayer@yahoo

OWNER NAME William Jeffers PHONE 919 946-2204

PHYSICAL ADDRESS 55 Weatherby Ct ANGLE NC 27501

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

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

Hunters Point
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: 401 N To 55 W To Silas Hays

Right on Hunters Point Right on Weatherby Ct

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.

William B Jeffers
Owner Signature

03-17-23
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 [X] NO
Also, within the last 5 years have you completed an application for repair for this site? [] YES [X] NO

Year home was built (or year of septic tank installation) 2008
Installer of system Builders
Septic Tank Pumper Carolina Trains & Septic
Designer of System Builder

- 1. Number of people who live in house? 2 # adults 0 # children 2 # total
2. What is your average estimated daily water usage? 2000 gallons/month or day HCPUC county water. If HCPU please give the name the bill is listed in
3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly
4. When was the septic tank last pumped? NOV 2009 How often do you have it pumped? WED Full
5. If you have a dishwasher, how often do you use it? [] daily [] every other day [X] weekly
6. If you have a washing machine, how often do you use it? [] daily [] every other day [X] weekly [] monthly
7. Do you have a water softener or treatment system? [] YES [X] NO Where does it drain?
8. Do you use an "in tank" toilet bowl sanitizer? [] YES [X] NO
9. Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy? [] YES [X] NO If yes please list
10. Do you put household cleaning chemicals down the drain? [] YES [X] NO If so, what kind?
11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES [X] NO
12. Have you installed any water fixtures since your system has been installed? [] YES [X] 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 [X] 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 Gutters 2009
15. Are there any underground utilities on your lot? Please check all that apply:
[] Power [] Phone [X] Cable [] Gas [X] Water
16. Describe what is happening when you are having problems with your septic system, and when was this first noticed?
Wet spot in lawn 2 weeks VEHICLE PARKED ON LINE
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 [X] NO If Yes, please list

HTE# 07-5-17001

Harnett County Department of Public Health 19503

PERMIT # 23770

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

PROPERTY LOCATION: SR 1565 Siler Haynes RD

Name: (owner) Randy STEPHENS SUBDIVISION HUNTERS POINT LOT # 13

System Installer: Jeff Thompson Registration # _____

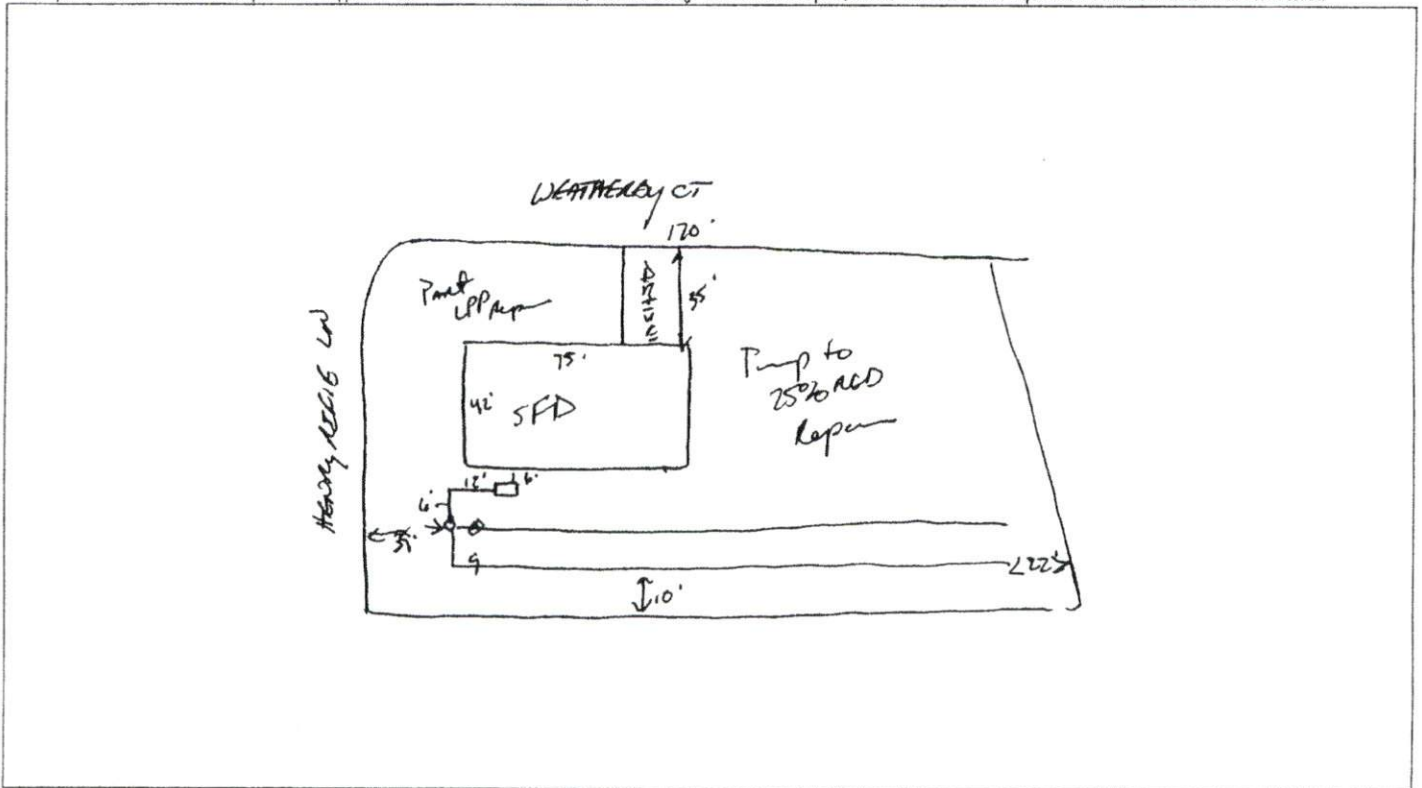
Basement with plumbing: Garage Number of Bedrooms 3

Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: 25% REDUCTION SYSTEM TYPE G Types V and VI Systems expire in 5 years.

(In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

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

Type of system: Conventional Other 25% REDUCTION SYSTEM Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of exact length width of depth of
 Drainage Field ditches 2 of each ditch 150 feet ditches 3 feet ditches 28 inches
 French Drain Required: _____ Linear feet

Authorized State Agent James E. Markham Date 8-22-67

HTE# 07-5-17001

Harnett County Department of Public Health 23770

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Randy STEPHENSON PROPERTY LOCATION: SR1565 Silas Hayes RD
 NEW REPAIR EXPANSION SUBDIVISION: Hunters Point LOT # 13
 Type of Structure: SFD Site Improvements required prior to Construction Authorization Issuance:
 Proposed Wastewater System Type: 25% REDUCTION system
 Projected Daily Flow: 360 GPD
 Number of bedrooms: 3 Number of Occupants: 6 max
 Basement Yes No
 Pump Required: Yes No May be required based on final location and elevations of facilities
 Type of Water Supply: Community Public Well Distance from well _____ feet Permit valid for: Five years
 Permit conditions: DO NOT CUT OR DISTURB TERRACE IN WHICH SYSTEM WILL BE No expiration
INSTALLED.

Authorized State Agent: James E. Manhart Date: 3-30-07 SEE ATTACHED SITE SKETCH
 The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

Construction Authorization

(Required for Building Permit)

The construction and installation requirements of Rules .1950, .1952, .1954, .1955, .1956, .1957, .1958, and .1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Randy STEPHENSON PROPERTY LOCATION: SR1565 Silas Hayes RD
 SUBDIVISION: Hunters Point LOT # 13
 Facility Type: SFD New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% REDUCTION (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable
25% LPP Repe (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons Exact length of each trench 2 X 150 feet Trench Spacing: 9 Feet on Center
 Pump Tank Size 1000 gallons Trenches shall be installed on contour max Soil Cover: 6 inches
 Maximum Trench Depth of: 28-318 inches (Maximum soil cover shall not exceed
 (Trench bottoms shall be level to +/- 1/4" 36" above the trench bottom)
 in all directions)
 Pump Requirements: _____ ft. TDH vs. _____ GPM Aggregate Depth: 6 inches below pipe
2 inches above pipe
 Conditions: DONOT CUT OR DISTURB TERRACE IN WHICH SITE WILL BE INSTALLED 12 inches total
STAPDOWNS WILL BE NEEDED

**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.

Owner/Legal Representative Signature: _____ Date: _____

This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit.

Authorized State Agent: James E. Manhart Date: 3-30-07 SEE ATTACHED SITE SKETCH
 Construction Authorization Expiration Date: 3-30-12

HTE# 07-5-17001

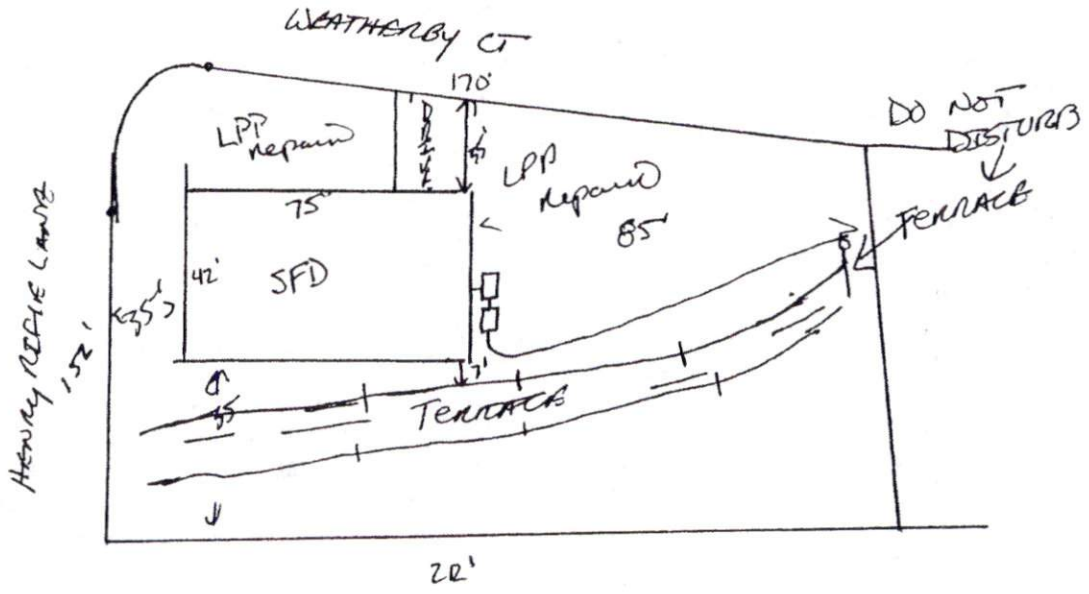
Permit # 23770

Harnett County Department of Public Health Site Sketch

ISSUED TO: RANDY STEINSON PROPERTY LOCATOR: SR 1565 SELAS HAYES RD
SUBDIVISION HUNKERS POINT LOT # 13

Authorized State Agent: James E. Markant Date: 3-30-07

* Septic Contractor to
MEET ON SITE
Prior to install!
for system layout
and detail.



HTE# 115-25885R

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH
307 CORNELIUS HARNETT BOULEVARD
LILLINGTON, NC 27546

EXISTING SEPTIC SYSTEM INSPECTION

NAME William + Linda Jefeerds PHONE #

ADDRESS 55 Weatherly CT ANGIER N.C. 27501

NAME OF MOBILE HOME PARK OR S/D Hunters Point lot 13

NAME OF OWNER (IF DIFFERENT) _____

ADDRESS OF OWNER (IF DIFFERENT) _____

PROPERTY LOCATION: STATE ROAD NAME AND # SR-1565 SILAS HAYES

PURPOSE OF INSPECTION: 10x28 DECK (Preconstructed DECK Before Inspection)

The aforementioned site has been evaluated by the Harnett County Health Department Environmental Health Section. At the time of inspection, there appeared to be a septic system serving this site. If this system should malfunction, the owner is responsible for any necessary repairs.

THIS INSPECTION IS VOID IF:

- (1) the intended use of the septic system should change, and/or
- (2) the system should fail or malfunction, and/or
- (3) the owner or tenant of the property changes, and/or
- (4) after six months

**BUILDING MUST BE 5' FROM ANY PART OF SEPTIC SYSTEM
DO NOT DRIVE OR PARK ON SEPTIC SYSTEM**

AUTHORIZATION OF EXISTING SYSTEM

James E. Mankant JR RCHS
Signature of Environmental Health Specialist

1-21-11
Date



FOR REGISTRATION REGISTER OF DEEDS
KIMBERLY S. HARGROVE
HARNETT COUNTY, NC
2012 MAY 17 02:09:12 PM
BK: 2992 PG: 226-228 FEE: \$26.00
NC REV STAMP: \$300.00
INSTRUMENT # 2012007932

HARNETT COUNTY TAX ID#

07-0691 0073-11
5-17-12 BY JES

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 300.00 NO TITLE SEARCH OR TAX ADVICE GIVEN
Parcel Identifier No. 0066697 Verified by _____ County on the ____ day of _____, 20____
By: _____

Mail/Box to: GRANTEE
This instrument was prepared by: Currie Tee Howell, Attorney, Adams, Howell & Sizemore, P.A.
Brief description for the index: Lot 12, Hunters Point Subdivision

THIS DEED made this 9th day of May, 2012, by and between

GRANTOR	GRANTEE
Stencil Builders, Inc. (a North Carolina corporation) 466 Stencil Road Angier, NC 27501	Jay P. Murray and wife, Amy P. Murray 54 Hunters Point Court Angier, NC 27501

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 or parcel of land situated in the City of _____, Grove Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot 12, Hunters Point Subdivision, as depicted in Map Number 2006, Pages 1128-1131 (1128), Harnett County Registry.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2953, page 910.
All or a portion of the property herein conveyed _____ includes or does not include the primary residence of a Grantor.
A map showing the above described property is recorded in Map Number 2006, pages 1128-1131 (1128).

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:

This conveyance is expressly made subject to the lien created by all the Grantors' real 2012 Harnett County ad valorem taxes on said tract of land which the Grantee(s) agree to assume and pay in full when due.

Subject to all easements, rights-of-way, covenants and other restrictions as shown on the public record or as would be disclosed by an accurate survey and inspection of the land.

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

Stancil Builders, Inc. (a North Carolina corporation) (SEAL)
(Entity Name) _____ Print/Type Name: _____

By: Freddie L. Stancil (SEAL)
Print/Type Name & Title: Freddie L. Stancil, President Print/Type Name: _____

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

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

State of North Carolina - County or City of Johnston

I, the undersigned Notary Public of the County or City of Johnston and State aforesaid, certify that Freddie L. Stancil personally came before me this day and acknowledged that he is the President of Stancil Builders, Inc., a North Carolina corporation, 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 9 day of May, 2012.

My Commission Expires: 11-22-16
(Affix Seal)

Brenda P. Goldston
Brenda P. Goldston Notary Public
Notary's Printed or Typed Name

