

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: CREGWILLU@GMAIL.COM

OWNER NAME CREG & ELIZABETH WILLIAMS PHONE \_\_\_\_\_

PHYSICAL ADDRESS 96 JOEL WAY, LILLINGTON N.C. 27546

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) \_\_\_\_\_

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME CREG & ELIZABETH WILLIAMS

N/A SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT -45

Type of Dwelling:  Modular  Mobile Home  Stick built  Other HOME

Number of bedrooms 4  Basement

Garage: Yes  No  Dishwasher: Yes  No  Garbage Disposal: Yes  No

Water Supply:  Private Well  Community System  County

Directions from Lillington to your site: 2.5 miles from 16A in Lillington

Head toward Sanford on New HWY 421. Left

turn onto Willie Cameron RD. 420 meters up left

turn on Joel Way

**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.

Creg Williams  
Owner Signature

14 FEB 2025  
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) 2019

Installer of system yellow Dog

Septic Tank Pumper yellow Dog

Designer of System yellow Dog

1. Number of people who live in house? 2 # adults 3 # children 5 # total

2. What is your average estimated daily water usage? 50 gallons/month or day Harrett County water. If HCPU please give the name the bill is listed in Elizabeth / Craig Williams

3. If you have a garbage disposal, how often is it used?  daily  weekly  monthly N/A

4. When was the septic tank last pumped? 14 FEB 23 How often do you have it pumped? \_\_\_\_\_

5. If you have a dishwasher, how often do you use it?  daily  every other day  weekly N/A

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?

Don't know

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?

Bleach

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 Gutter 2021, French Drain

15. Are there any underground utilities on your lot? Please check all that apply: 2021

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 Water - Bubbling out of Ground <sup>noticed</sup> 2021,

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 Heavy rains / but

it happens all year long

For Registration Kimberly S. Hargrove  
Register of Deeds  
Harnett County, NC  
Electronically Recorded  
2019 Apr 02 02:06 PM NC Rev Stamp: \$ 548.00  
Book: 3685 Page: 492 - 493 Fee: \$ 26.00  
Instrument Number: 2019004028

HARNETT COUNTY TAX ID#  
13-0610-0255-07

04-02-2019 BY CW

**Prepared by and Return to:**  
**Reginald B. Kelly, Attorney at Law, P.O. Box 1118, Lillington, NC 27546**

PID#: 130610 0255 07  
REVENUE STAMPS: \$548.00

STATE OF NORTH CAROLINA  
COUNTY OF HARNETT

**WARRANTY  
DEED**

This **WARRANTY DEED** is made the 27th day of March, 2019, by and between **Moss Home Builders & Realty, Inc.** of Post Office Box 577, Lillington, NC, 27546 (hereinafter referred to in the neuter singular as "the Grantor") and **Creg Lindel Williams and wife, Elizabeth Gloria Williams**, of 29 Albert Court, Sanford, NC, 27332 (hereinafter referred to in the neuter singular as "the Grantee");

**WITNESSETH:**

**THAT** said Grantor, for valuable consideration, receipt of which is hereby acknowledged, has given, granted, bargained, sold and conveyed, and by these presents does hereby give, grant, bargain, sell and convey unto said Grantee, its heirs, successors, administrators and assigns, all of that certain piece, parcel or tract of land situate, lying and being in Upper Little River Township of said County and State, and more particularly described as follows:

Being all of Lot 4, containing 0.575 acre as shown on Minor Subdivision Survey For: "Centrella Subdivision", dated September 20, 2017, by Mickey R. Bennett, PLS and recorded in Map Book 2017, Page 353, Harnett County Registry.

For reference to chain of title see Deed Book 3627, Page 145, Harnett County Registry.

\*\*The property herein described is not the primary residence of the Grantor (NCGS 105-317.2)

**TO HAVE AND TO HOLD** the above-described lands and premises, together with all appurtenances thereunto belonging, or in anywise appertaining, unto the Grantee, its heirs, successors, administrators and assigns forever, but subject always, however, to the limitations set out above.

**AND** the said Grantor covenants to and with said Grantee, its heirs, successors, administrators and assigns that it is lawfully seized in fee simple of said lands and premises, and has full right and power to convey the same to the Grantee in fee simple (but subject, however, to the limitations set out above) and that said lands and premises are free from any and all encumbrances, except as set forth above, and that it will, and its heirs, successors, administrators and assigns shall forever warrant and defend the title to the same lands and premises, together with the appurtenances thereunto appertaining, unto the Grantee, its heirs, successors, administrators and assigns against the lawful claims of all persons whomsoever.

**IN WITNESS WHEREOF**, the Grantor has hereunto set its hand and seal and does adopt the printed word "SEAL" beside its name as its lawful seal.

GRANTOR

Moss Homebuilders & Realty, Inc.,  
a North Carolina Corporation

By: W. Alan Moss (SEAL)  
W. Alan Moss, President

CORPORATE ACKNOWLEDGMENT

STATE OF NORTH CAROLINA  
COUNTY OF HARNETT

I, a Notary Public for said County and State, certify that W. ALAN MOSS, personally appeared before me this day, and being by me duly sworn, acknowledged that he is PRESIDENT of MOSS HOMEBUILDERS & REALTY, INC., a North Carolina Corporation, and that he, as PRESIDENT, being authorized to do so, executed the foregoing on behalf of North Carolina Corporation.

Witness my hand and official seal, this 1<sup>st</sup> day of April, 2019.

(SEAL)



April M McLamb  
Notary Public

My Commission Expires: 29-21



HTE# 19-5-43699

# Harnett County Department of Public Health

25266

PERMIT # 30047

## Operation Permit

New Installation  Septic Tank  Nitrification Line  Repair  Expansion

PROPERTY LOCATION: JOEL WAY

Name: (owner) MOSS HOMEBUILDERS SUBDIVISION CENTRELLA LOT # 4

System Installer: YELLOW DOG Registration # \_\_\_\_\_

Basement with plumbing:  Garage  Number of Bedrooms 3

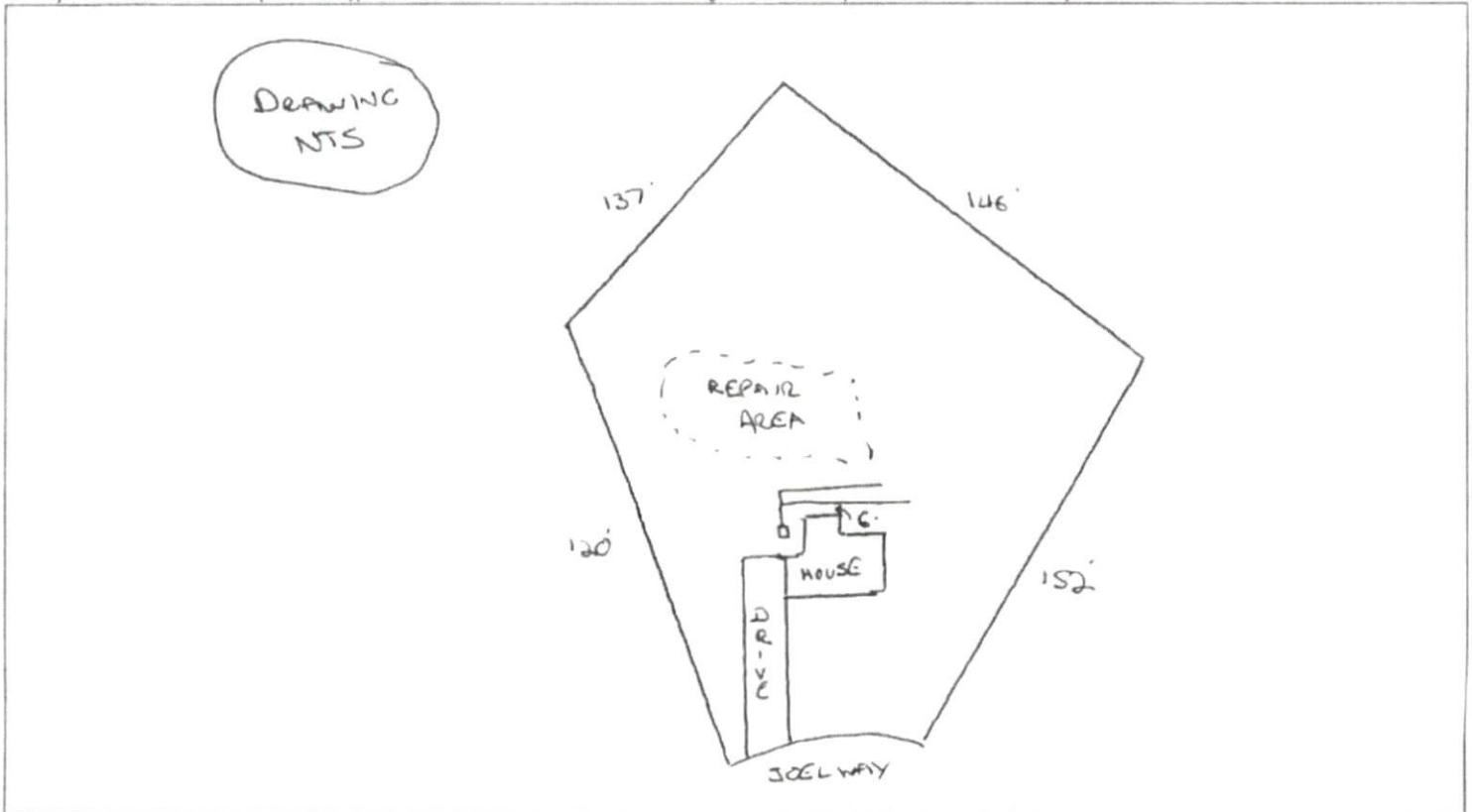
Type of Water Supply:  Community  Public  Well Distance from well \_\_\_\_\_ feet

System Type: III 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: \_\_\_\_\_

D-Box  Pump  Alarm  H2O Line  PWR Line

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

Type of system:  Conventional  Other CHAMBER (Q4) Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 150 feet width of ditches 3 feet depth of ditches 18 inches

French Drain Required: \_\_\_\_\_ Linear feet

Authorized State Agent \_\_\_\_\_

RETA

Date 1/17/19

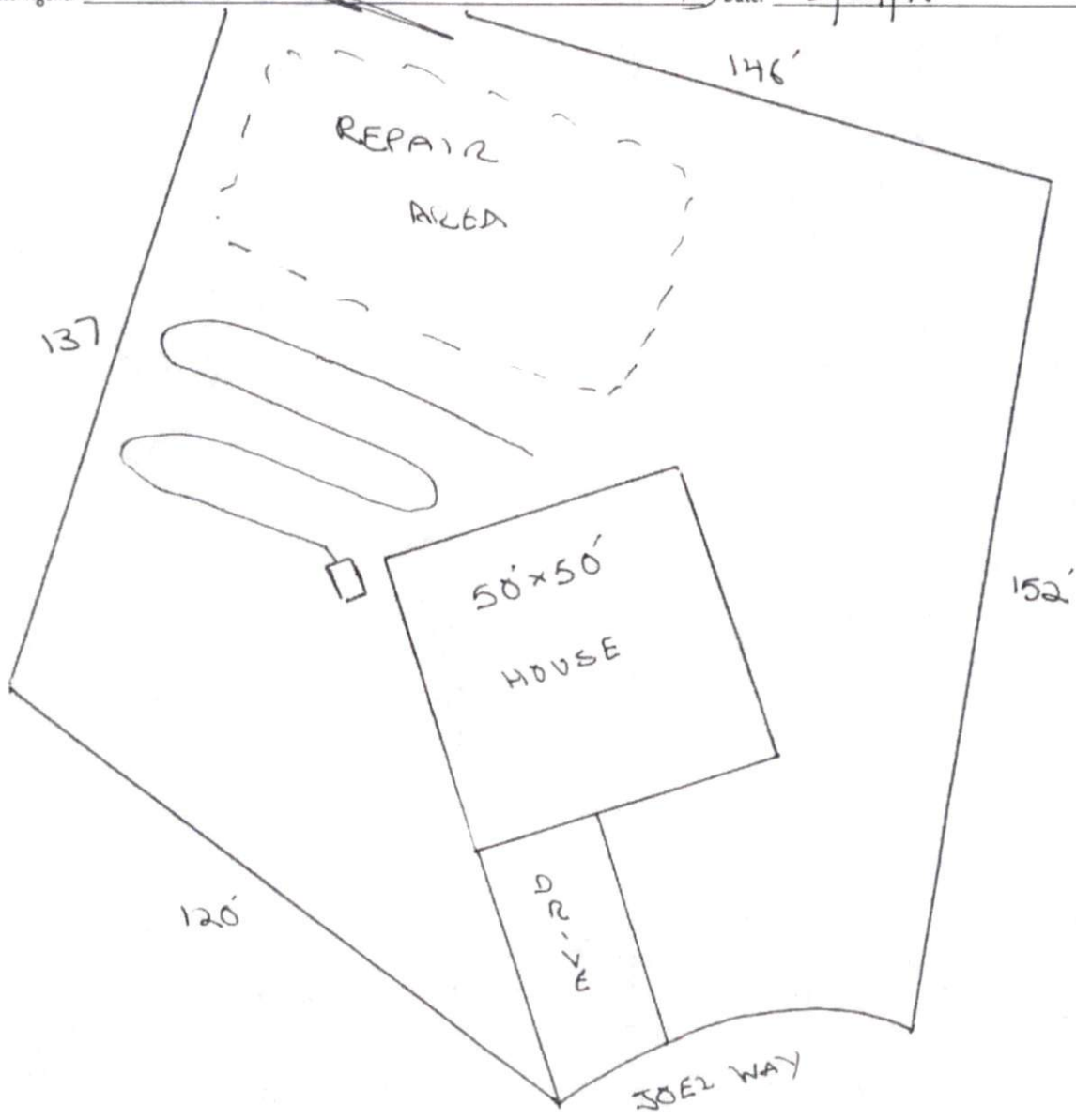
HTE# 18-542879

Permit # 30047

# Harnett County Department of Public Health Site Sketch

ISSUED TO: Moss Homebuilders PROPERTY LOCATOR: JOEL WAY  
SUBDIVISION CENTRELLA LOT # 4

Authorized State Agent: ~~REYS (OLIVER TOLKSON)~~ Date: 5/14/18



HTE# 18-543899

# Harnett County Department of Public Health

30047

## Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: MOSS HOMEBUILDERS PROPERTY LOCATION: JOEL WAY  
 SUBDIVISION CENTRELLA LOT # 4  
 NEW  REPAIR  EXPANSION   
 Type of Structure: SFD (50'x50')  
 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 conditions: \_\_\_\_\_ Permit valid for:  Five years  
 No expiration

Authorized State Agent: [Signature] Date: 5/14/18 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: MOSS HOMEBUILDERS PROPERTY LOCATION: JOEL WAY  
 SUBDIVISION CENTRELLA LOT # 4  
 Facility Type: SFD (50'x50')  New  Expansion  Repair  
 Basement?  Yes  No Basement Fixtures?  Yes  No  
 Type of Wastewater System\*\* 25% REDUCTION SYSTEM (Initial) Wastewater Flow: 360 GPD  
 (See note below, if applicable )  
25% REDUCTION SYSTEM (Repair)

**Installation Requirements/Conditions**

Septic Tank Size <u>1000</u> gallons	Number of trenches <u>1</u>	Exact length of each trench <u>150</u> feet	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size _____ gallons	Trenches shall be installed on contour at a	Maximum Trench Depth of: <u>18</u> inches	Soil Cover: <u>6</u> inches
	(Trench bottoms shall be level to +/- 1/4"	in all directions)	(Maximum soil cover shall not exceed 36" above the trench bottom)
Pump Requirements: _____ ft. TDH vs. _____ GPM			Aggregate Depth: _____ inches below pipe
			_____ inches above pipe
Conditions: _____			_____ inches total

**WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.  
NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.**

*\*\*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. SEE ATTACHED SITE SKETCH

Authorized State Agent: [Signature] Date: 5/14/18  
Construction Authorization Expiration Date: 5/14/23



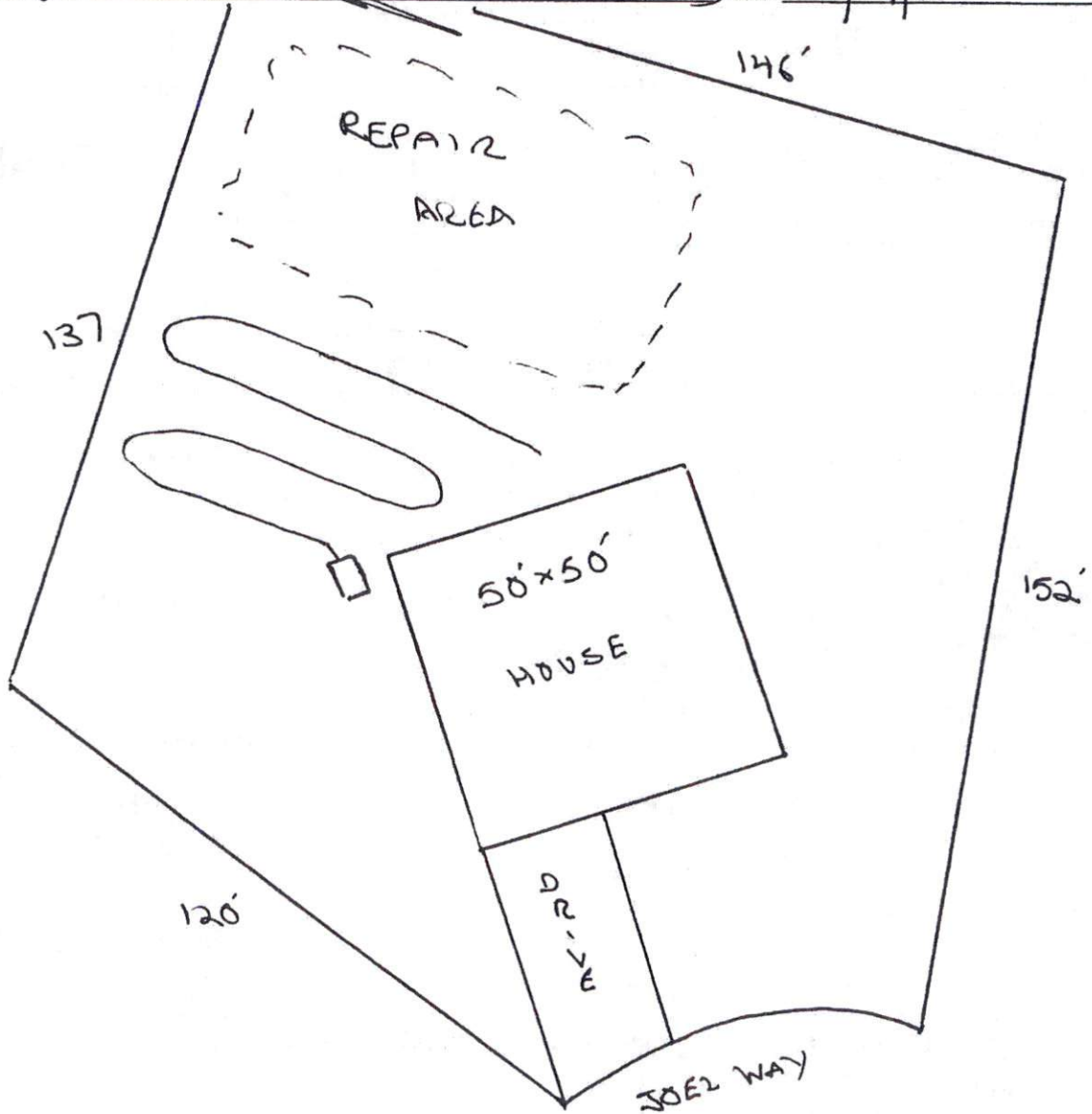
HTE# 18-542819

Permit # 30047

# Harnett County Department of Public Health Site Sketch

ISSUED TO: MOSS HOMEBUILDERS PROPERTY LOCATOR: JOEL WAY  
SUBDIVISION CENTRELLA LOT # 4

Authorized State Agent: REYS (OLIVER TOLSON) Date: 5/14/18





# Harnett County GIS

**PID:** 130610 0255 07  
**PIN:** 0640-13-4103.000  
**Account Number:** 1500031123  
**Owner:** WILLIAMS CREG LINDEL & WILLIAMS ELIZABETH GLORIA  
**Mailing Address:** 96 JOEL WAY LILLINGTON, NC 27546-4901  
**Physical Address:** 96 JOEL WAY LILLINGTON, NC 27546 ac  
**Description:** LOT#4 CENTRELLA SUBDIVISION MAP#2017-353  
**Surveyed/Deeded Acreage:** 0.56  
**Calculated Acreage:** 0.56  
**Deed Date:** 1554181200000  
**Deed Book/Page:** 3685 - 0492  
**Plat(Survey) Book/Page:** 2017 - 353  
**Last Sale:** 2019 - 4  
**Sale Price:** \$274000  
**Qualified Code:** Q  
**Vacant or Improved:** I  
**Transfer of Split:** T  
**Actual Year Built:** 2018  
**Heated Area :** 2525 SqFt  
**Building Count :** 1

**Building Value:** \$289996  
**Parcel Outbuilding Value:** \$0  
**Parcel Land Value:** 25870  
**Market Value:** \$315866  
**Deferred Value:** \$0  
**Total Assessed Value:** \$315866  
**Zoning:** RA-30 - 0.56 acres (100.0%)  
**Zoning Jurisdiction:** Harnett County  
**Wetlands:** No  
**FEMA Flood:** Minimal Flood Risk  
**Within 1mi of Agriculture District:** No  
**Elementary School:** Lillington-Shawtown Elementary  
**Middle School:** Harnett Central Middle  
**High School:** Harnett Central High  
**Fire Department:** Summerville Bunnlevel  
**EMS Department:** Medic 12, D12 EMS  
**Law Enforcement:** Harnett County Sheriff  
**Voter Precinct:** Boone Trail  
**County Commissioner :** Lewis Weatherspoon  
**School Board Member:** Duncan Jagers

