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

	EMAII	LADDRESS: Feds bench 2 at 6 mg: 110
OWNER NAME RANdy N	Drison	PHONE 910 890 0250
PHYSICAL ADDRESS 270 M	orrison Rd. Lil	lington N.C.
MAILING ADDRESS (IF DIFFFERENT TH	AN PHYSICAL)	
IF RENTING, LEASING, ETC., LIST PROP	ERTY OWNER NAME	
SUBDIVISION NAME	LOT #/TRACT # STA	ATE RD/HWY SIZE OF LOT/TRACT
Type of Dwelling: [] Modular	[] Mobile Home	[] Other
Number of bedrooms _ []	Basement	
Garage: Ves[]No[]	Dishwasher: Ves] No []	Garbage Disposal: Yes []No[]
Water Supply: [] Private Well	[] Community System	© County
Directions from Lillington to your site	: Take McDougale	2 to A.C. Morrison Rd
to Morrison	Rd. Brick or	end of a dead
end id		
 A <u>"surveyed and recorded m</u> wells on the property by show The outlet end of the tank an uncovered, property lines flag us at 910-893-7547 to confire Your system must be repaired within letter. (Whichever is applicable.) 	<u>ap</u> " and <u>"deed to your property</u> " must wing on your survey map. d the distribution box will need to be ungged, underground utilities marked, and m that your site is ready for evaluation 30 days of issuance of the Improveme	ent Permit or the time set within receipt of a violation
By signing below, I certify that all of t the denial of the permit. The permit i	he above information is correct to the s subject to revocation if the site plan,	best of my knowledge. False information will result in intended use, or ownership changes.

Owner Signature

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) 200 2 Installer of system Septic Tank Pumper By March Septic Designer of System
 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 62.0
3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly 4. When was the septic tank last pumped? How often do you have it pumped? Twice you 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? [NO If yes please list
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 MO 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
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? Water Coming to top of ground Bad for 2415.
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 wash wash wash wash wash sathing

This Deed Prepared by Reginald B. Kelly, Attorney at Law

NO TITLE CERTIFICATION
Out of Parcel #13-0611-0107-13

FOR REGISTRATION REGISTER OF DEEDS KINDERLY S. HARGROVE HARMETT COUNTY, NC 2002 MAR 26 11:13:05 AM BK:1604 PG:737-739 FEE:\$17.00 INSTRUMENT # 2002005787

STATE OF NORTH CAROLINA COUNTY OF HARNETT WARRANTY DEED

ANT N 13-0611-0107-13

This WARRANTY DEED is made the day of March, 2002, by and between A. C. MORRISON, JR., and his wife, LENORA ANN MORRISON, of 259 A. C. Morrison Road, Lillington, North Carolina 27546 (hereinafter referred to in the neuter singular as "the Grantor") and RANDALL C. MORRISON of 259 A. C. Morrison Road, Lillington, North Carolina 27546 (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:

All of a 0.98 acre tract as shown on "Division of Heirs Survey For: Randall Morrison" dated March 13, 2002, by Mickey R. Bennett, PLS, and recorded in Map Number 2002-329, Harnett County Registry.

Parcel previously conveyed to Grantor in Deed Book 699, Page 532, Harnett County Registry.

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 HARNETT COUNTY TAXID#

KELLY & WEST ATTORNEYS AT LAW 900 S. MAIN STREET P.O. BOX 1118 LILLINGTON, NC 27546 910-893-8183 FAX: 910-893-5814

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 hand and seal and does adopt the printed word "SEAL" beside its name as its lawful seal.

GRANTOR

a. C. Morrison, Jr.

STATE OF NORTH CAROLINA COUNTY OF HARNETT

I, a Notary Public of the County and State aforesaid, certify that A. C. MORRISON, JR., and his wife, LENORA ANN MORRISON, personally appeared before me this day acknowledged the due execution of the foregoing instrument.

Witness my hand and notarial seal, this 23 day of March, 2002.

(notarial seal)

KELLY & WEST ATTORNEYS AT LAW 900 S. MAIN STREET P.O. BOX 1118 ULLINCTON, NC 275 910-893-8183 FAX: 910-893-98

1.14.11/2 Notas Notas Expires: Aug 13 2065



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

Filed For Registration:

03/26/2002 11:13:05 AM

Book:

RE 1604 Page: 737-739

Document No.:

2002005787

DEED 3 PGS \$17.00

Recorder:

TRACY B TAYLOR

State of North Carolina, County of Harnett

The foregoing certificate of T. H. MORRISON Notary is certified to be correct. This 26TH of March 2002

2002005787

2002005787

110 17 a 202-324

KIMBERLY S. HARGROVE Register of Deeds

By: PLUBLY P. Do. C.

ANTHERSON DEPOSITY REGISTER of Deeds MARTH COMMITTO COMMITTEE TO THE PROPERTY OF THE MARTHET COMMITTEE TO THE PROPERTY OF THE PROPE STATE OF MAPTH CAMOLINA
COMMY OF HAME!

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MICH THIS CERTIFOLITON IS STATED BETS ALL
STATUTORY REGULARMENTS FOR RECORDING. INDITY CADA, INA. ADMITT COUNTY

INDITY REPORT OF THE SECRET THE PROPERTY HAS BEEN AND OF OWN UNder MAY ADMITT THE SECRET DI.PKN CL INTERSECTION OF NCSR # 1248 & 1288 SOUTH PLANTING DEPARTMENT SAME o' clock M. MICKEY K. BENNETT OF ROAD VICINITY MAP STATE: NORTH CAROLINA OWNSHIP UPPER LITTLE RIVER RANDALL MORRISON MAP REFERENCE: PLAT CAB.1, SLIDE-44 DEED REFERENCE: DEED BK 699, PAGE 532 DIVISION OF HEIRS TAX PARCEL ID#: NCSR # 1246 "MORRISON RD." (UNPAVED) COUNTY A.C. & LENORA ANN MORRISON, JR. DATE: T.HARRINGTON MORRISON
DB 699,PG 525
PLAT CAB.1,SLIDE-44 PLAT CAB.1, SLIDE-44 DB 699,PG 532 FOR REGISTRATION REGISTER OF CREDS
THE TRANSPORT COUNTY OF THE TRANSPORT COUNTY COUNTY COUNTY COUNTY COUNTY COUNTY COUNTY CO 0.98 AC. 13-0611-01-0713 MARCH 13,2002 HARNETT CHECKED & CLOSURE BY: SCALE: 1" = 100' OWNERS: A.C. MORRISON, JR. & LENORA ANN MORRISON N 88*43*20"W 386.11* (910) 893-5252 1662 CLARK RD., LILLINGTON, N. C. 27546 BENNETT SURVEYS, INC. map # 2002.329 100 DRAWN BY: SURVEYED BY: RWB MAGNETIC NORTH PLAT CAB.1, SLIDE 44 RVB DUSTING COCNER FIELD BOOK DC # 1 DRAWING NO



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

Filed For Registration:

03/19/2002 04:14:05 PM

Book:

PLAT 2002 Page: 329-330

Document No.:

2002005301

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

2002005301

2002005301

HTE# 14-5-33811

Harnett County Department of Public Health

23402 Operation Permit PERMIT # 27943 New Installation 🖂 Septic Tank 📈 Nitrification Line 🗆 Repair 🗆 Expansion PROPERTY LOCATION: MORRISON Ro Name: (owner) Moss HomeBullocas SUBDIVISION LOT # YELLOW DOG System Installer: Registration # Garage Mumber of Bedrooms DETAQNED CARREE of BONDS ROOM Basement with plumbing: Public | Well Distance from well 100 feet Type of Water Supply:

Community System Type: _ 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. morrison Ro 2 E × 13+1NC HOUSE 289 CARAGE REPAIR 200 PERMIT CONDITIONS: Performance: System shall perform in accordance with Rule .1961. Monitoring: 11. As required by Rule .1961. 111. 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: ٧. Other: Pump □ Alarm □ H20Line □ **PWR Line** Following are the specifications for the sewage disposal system on the above captioned property. Septic Tank: _1000 Type of system:

Conventional & Other EZ Flow gallons Pump Tank: Subsurface No. of exact length width of depth of ditches 24-18 of each ditch _ ditches Drainage Field ditches French Drain Required: Authorized State Agent