

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: mslatina487@gmail.com

OWNER NAME Angel m Santiago

PHONE 862 266 89767

PHONE NUMBER 862 266 89767

PHYSICAL ADDRESS 109 Ribbon Oak ct

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) Same

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME Angel m Santiago

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: Take 27 to Buffalo lakes Road
make left / off of Buffalo lakes to Peachtree
Crossing Community -

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.

Angel m Santiago

12/01/23

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) _____
Installer of system _____
Septic Tank Pumper Bullard
Designer of System _____

1. Number of people who live in house? 3 # 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 _____
3. If you have a garbage disposal, how often is it used? daily weekly monthly
4. When was the septic tank last pumped? 8/23 How often do you have it pumped? every 1 1/2 yr
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 2 wks
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 Heart patient - Pacemaker
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 NO
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?
We serviced our system 8/23 they came out on 11/30 again there was water submerging above ground they said I need to come here
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 _____

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2019 May 03 02:19 PM NC Rev Stamp: \$ 237.00
Book: 3694 Page: 584 - 586 Fee: \$ 26.00
Instrument Number: 2019005762

HARNETT COUNTY TAX ID#
03-9587-06-0020-96

05-03-2019 BY CW

Submitted electronically by April E. Stephenson PA in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

GENERAL WARRANTY DEED

THIS INSTRUMENT PREPARED BY:

Michelle Stinnett, Esq.
Lorenz & Creed Law Firm, PLLC
230 N. Bennett Street
Southern Pines, NC 28387

Return to:
Mr. & Mrs. Santiago
109 Ribbon Oak Ct.
Sanford, NC 27332

TO BE RECORDED IN THE
DEED RECORDS OF
HARNETT COUNTY, NC

Excise Tax: \$237.00

THIS DEED made this 18 day of April, 2019, by and between:

<u>GRANTOR</u>	<u>GRANTEE</u>
GARY E. HEAD, JR. unmarried and NICHOLL LEE f/k/a Nicholl L. Head, unmarried 250 Shaw Ave. Southern Pines, NC 28387	ANGEL M. SANTIAGO and wife, MIGDALIA N. SANTIAGO Tax address: 109 Ribbon Oak Drive Sanford, NC 27332

WITNESSETH:

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, the Grantor, for 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 (referred to in the singular, whether one or more) situated in the City of Sanford, Harnett County, North Carolina, and more particularly described as follows:

Being all of Lot 67, in a subdivision known as Peachtree Crossing, Phase Two, according to a plat of same duly recorded in Book of Plats 98, and Page 413, Harnett County Registry, North Carolina.

This property herein described _____ includes does not include the primary residence of the Grantor.

And being the same property conveyed to Grantor in instrument recorded in Book 2478, Page 564, in the Harnett County, North Carolina, Register of Deeds. The attorney preparing this instrument has not searched the title to the real property hereby conveyed and makes no opinion relative to the status of the title to the real property hereby conveyed.

This conveyance is made subject to (i) the lien of the County of Harnett for taxes and other assessments for the current year, which taxes or other assessments shall be pro-rated as of the date of closing and which Grantee by acceptance of this deed expressly agrees to pay; (ii) utility easements of record; and (iii) unviolated restrictive covenants of record that do not materially affect the value of the property.

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 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 except for the exceptions noted herein.

IN WITNESS WHEREOF, the said Grantor has hereunto set their hand and seal the day and year first above written.

Gary E. Head (SEAL)
GARY E. HEAD, JR.

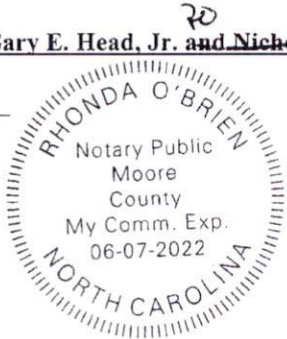
See attached (SEAL)
NICHOLL LEE

STATE OF NC
COUNTY OF Moore

I certify that the following person(s) personally appeared before me this day and () I have personal knowledge of the identity of the principal(s); () I have seen satisfactory evidence of the principal's identity, by a current state or federal identification with the principal's photograph in the form of a driver's license; (X) a credible witness has sworn to the identity of the principal(s); the principal(s) acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:

Name of Principal(s): Gary E. Head, Jr. and Nicholl Lee.

Date: 4/18/19



Rhonda O'Brien
Notary Public

Rhonda O'Brien
Printed or typed name of Notary Public

[SEAL]

My commission expires: 6/7/22

NOTARY PUBLIC: Please place an (X) in the space that describes the method of identifying the principal and (--) in the spaces that do not apply.

This property herein described _____ includes does not include the primary residence of the Grantor.

And being the same property conveyed to Grantor in instrument recorded in Book 2478, Page 564, in the Harnett County, North Carolina, Register of Deeds. The attorney preparing this instrument has not searched the title to the real property hereby conveyed and makes no opinion relative to the status of the title to the real property hereby conveyed.

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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 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 except for the exceptions noted herein.

IN WITNESS WHEREOF, the said Grantor has hereunto set their hand and seal the day and year first above written.

See attached (SEAL)
GARY E. HEAD, JR.

Nicholl Lee (SEAL)
NICHOLL LEE

STATE OF nc
COUNTY OF moore

I certify that the following person(s) personally appeared before me this day and () I have personal knowledge of the identity of the principal(s); () I have seen satisfactory evidence of the principal's identity, by a current state or federal identification with the principal's photograph in the form of a driver's license; () a credible witness has sworn to the identity of the principal(s); the principal(s) acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated:

Name of Principal(s): ~~Gary E. Head, Jr. and Nicholl Lee.~~ [Signature]
Date: 4/18/19

[Signature]
Notary Public
Rhonda O'Brien
Printed or typed name of Notary Public

[SEAL]



My commission expires: 6/1/22

NOTARY PUBLIC: Please place an (X) in the space that describes the method of identifying the principal and (--) in the spaces that do not apply.

OPERATIONS PERMIT

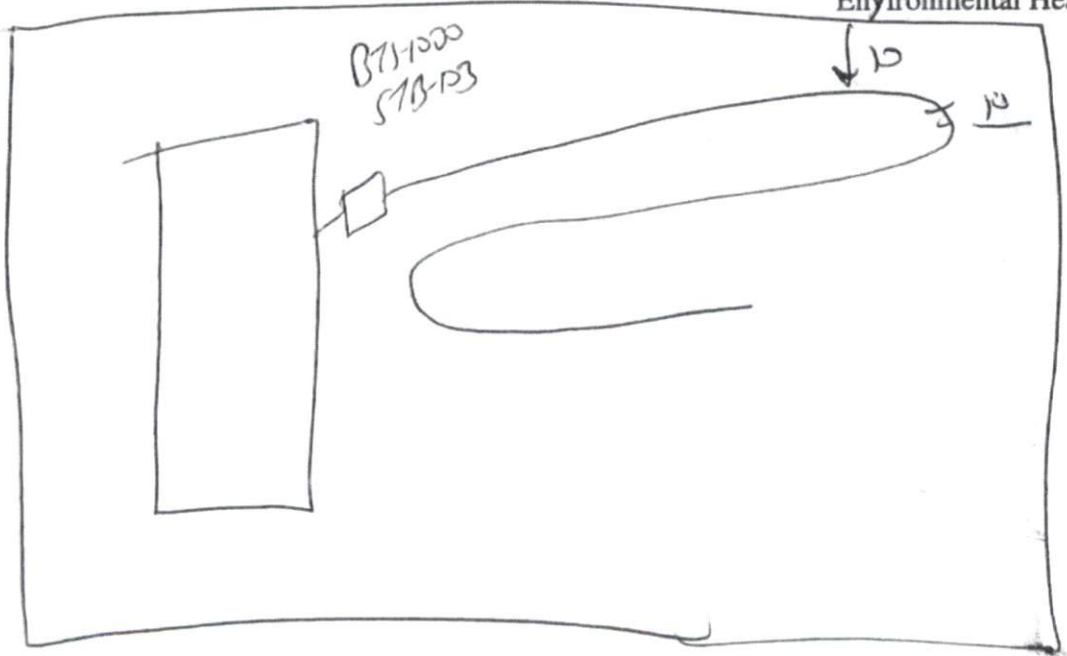
Name: (owner) HomeCo Builders Inc New Installation Septic Tank
 Property Location: SR# 1115 Repairs Nitrification Line
 Subdivision Peachtree Crossing Lot # 67
 TAX ID# _____ Quadrant # _____
 Contractor: Ted Blawn Registration # _____

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 1 exact length 240 ft. width of ditches 3 ft. depth of ditches 18.24 in.
 French Drain: _____ Linear feet

PERMIT NO. 15299 Block Filter Date: 4-19-99
 Inspected by: Jon WARS
 Environmental Health Specialist



IMPROVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: Section III, Item B. "No Person shall begin construction of any building at which a septic tank system is to be used for disposal of sewage without first obtaining a written permit from the Harnett County Health Department."

Name: (owner) HomeG Builders Inc New Installation Septic Tank
Property Location: SR# 1115 Buffalo Lake Rd Repairs Nitrification Line

Subdivision Peachtree Crossing Ph. II Lot # 67

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: 3 Lot Size: 0.46 AC

Basement with Plumbing: Garage: NOTE RIVERS REQUIRED (2)
Water Supply: Well Public Community Filter Required
Distance From Well: 50m ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other _____

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

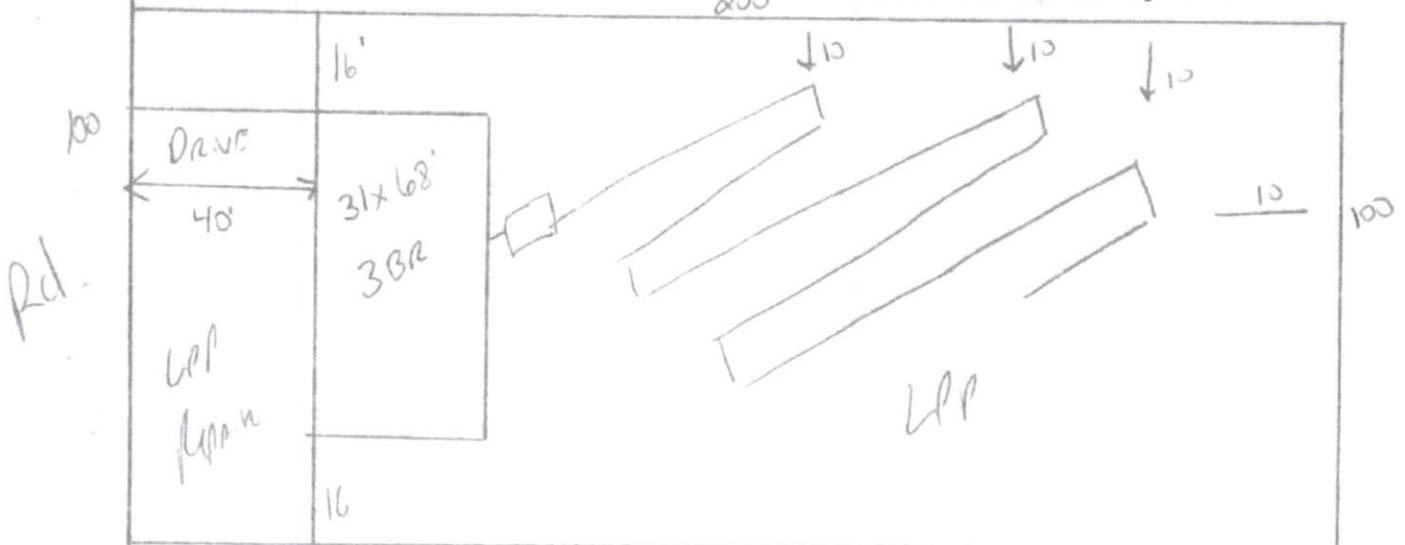
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 240 ft. width of ditches 3 ft. depth of ditches 18-24 in.

French Drain Required: _____ Linear feet

Date: 1-7-99

This permit is subject to revocation if site plans or intended use change.

Signed: [Signature]
200 Environmental Health Specialist



200
STUB out Plumbing shallow 18-24" D.Kh Ditches Follow
Contours maintain all required setbacks
NOTE Filter is required - RIVERS REQUIRED on outlet & inlet
sides