

**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: Avileroo@rootingnc@gmail

OWNER NAME Feliciano Aviler

PHONE 919-398-1326

PHONE NUMBER 919-398-1326

PHYSICAL ADDRESS 5859 christian light rd ferguson varina

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 5675 christian light rd ferguson varina

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME Feliciano Aviler

None SUBDIVISION NAME NC LOT #/TRACT # 2 Acre STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling: Modular Mobile Home Stick built Other _____

Number of bedrooms 2 Basement

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

Water Supply: Private Well Community System County

Directions from Lillington to your site: Down 701 towards Ferguson turn on christian light rd

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.

Owner Signature [Signature]

03/18/24
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) 2018

Installer of system Tommy Coley

Septic Tank Pumper _____

Designer of System _____

1. Number of people who live in house? 2 # adults 2 # children 4 # total

2. What is your average estimated daily water usage? _____ gallons/month or day Harris 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? Jan-2024 How often do you have it pumped? Every 3 years

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 Addition 2 more Bathrooms

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 has a really Bad Smell randomly. Also lid to transfer Box starts leaking & noticed last year.

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 yes Shower / rain

HTE# 6-5-38861

Harnett County Department of Public Health

28978

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: FELICIANO AVILEZ PROPERTY LOCATION: 21412 Christian legend rd
 NEW REPAIR EXPANSION SUBDIVISION _____ LOT # 1
 Type of Structure: SFD Site Improvements required prior to Construction Authorization Issuance: _____
 Proposed Wastewater System Type: 25% recd
 Projected Daily Flow: 240 GPD
 Number of bedrooms: 2 Number of Occupants: 4 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: _____ No expiration

Authorized State Agent: James E. Markham Date: 8-12-14 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: FELICIANO AVILEZ PROPERTY LOCATION: 21412 Christian legend rd
 SUBDIVISION _____ LOT # 1
 Facility Type: SFD New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% RGDW system (Initial) Wastewater Flow: 240 GPD
 (See note below, if applicable
25% RGDW system (Repair)
 Installation Requirements/Conditions
 Septic Tank Size 1000 gallons Number of trenches 2
 Pump Tank Size 1060 gallons Exact length of each trench 75 feet Trench Spacing: 7 Feet on Center
 Trenches shall be installed on contour at a Soil Cover: 6 inches
 Maximum Trench Depth of: 18 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: 4 inches below pipe
2 inches above pipe
 Conditions: _____ 12 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: James E. Markham Date: 8-12-14
 Construction Authorization Expiration Date: 8-12-21

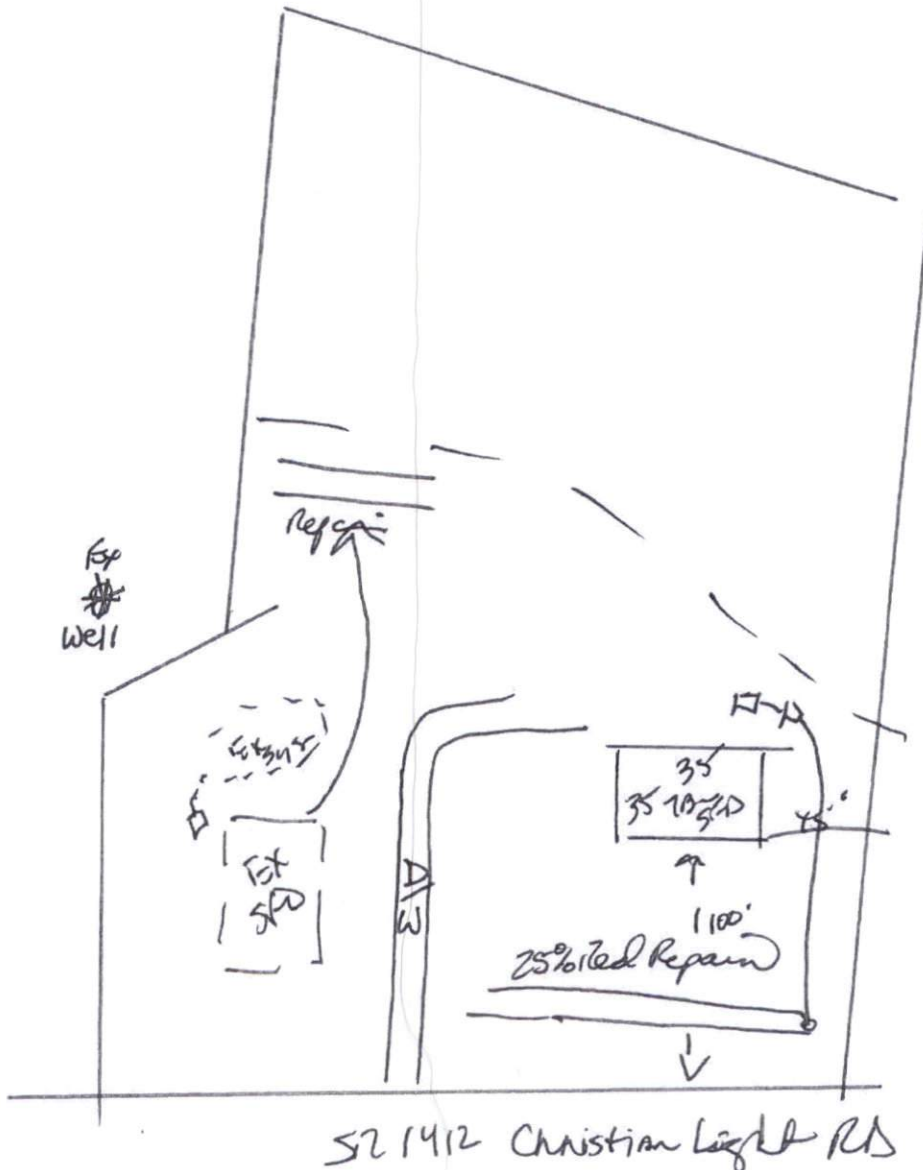
HTE# 16-5-38861

Permit # 28978

Harnett County Department of Public Health Site Sketch

ISSUED TO: Feliciano Avalez PROPERTY LOCATOR: 521412 Christian Light RD
SUBDIVISION _____ LOT # 1

Authorized State Agent: James S. Mashburn Date: 8-12-16





FOR REGISTRATION REGISTER OF DEEDS
 KIMBERLY S. HARGROVE
 HARNETT COUNTY, NC
 2008 FEB 21 11:04:06 AM
 BK: 2477 PG: 367-369 FEE: \$17.00
 NC REV STAMP: \$152.00
 INSTRUMENT # 2008002718

HARNETT COUNTY TAX ID#

05-0634-0038-01

2-21-08 BY [Signature]

Prepared by: Senter, Stephenson & Johnson, P.A.
 114 Raleigh Street, Fuquay-Varina, NC 27526
 Delinquent taxes, if any, to be paid by the closing attorney to the county tax collector upon disbursement of closing proceeds. This instrument prepared without title examination or tax advice.

Tax ID: OUT OF 050634 0038
 Excise Tax: \$152.00

THIS GENERAL WARRANTY DEED, made this 21st day of February, 2008, by and between:

**JOSEPH KENT REVELS and wife,
 BRENDA REVELS**
 230 Revels Road
 Fuquay-Varina, NC 27526 hereinafter called Grantors;

to:

**FELICIANO AVILEZ and wife,
 MELISSA C. AVILEZ**
 5675 Christian Light Road
 Fuquay-Varina, NC 27526 hereinafter called Grantees:

WITNESSETH:

The designation Grantor and Grantee used herein shall include parties, their heirs, successors, and assigns, and shall include singular, plural, masculine, feminine or neuter as required by context.

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 Buckhorn Township, Harnett County, NC and more particularly described as follows:

BEING all of Lot 1, containing 1.64 acres net (0.11 acres in r/w), more or less, as shown on that map entitled "Minor Subdivision of the Property of: Joseph Kent Revels, Et. Ux." and recorded in Map Number 2007, page 1051, Harnett County Registry, reference to which is hereby made for greater certainty of description.

SUBJECT to 40' x 20' Joint Driveway Easement as shown on recorded map.

SUBJECT to 60' Public R/W of Christian Light Road (N.C.S.R. 1412) as shown on recorded map.

ALSO, SUBJECT to general services easements, restrictions and rights of way of public record; and 2008 ad valorem taxes, not yet due and payable.

SEE DEED: Book 2242, page 163 and Estate of Eva Cain Senter (Harnett County Estate File 00-E-472).

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 in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all adverse encumbrances, and that the grantor will warrant and defend the title against the lawful claims of all persons whomsoever except for exceptions hereinafter stated.

IN WITNESS WHEREOF, the grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be executed by duly authorized officers and its seal affixed by authority of its Board of Directors, the day and year first above set forth.



Joseph Kent Revels (SEAL)



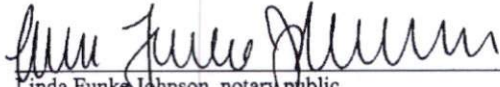
Brenda Revels (SEAL)

NORTH CAROLINA
COUNTY OF WAKE

I, **Linda Funke Johnson**, a Notary Public of Wake County, North Carolina, do hereby certify that **JOSEPH KENT REVELS** and wife, **BRENDA REVELS**, each personally appeared before me this day and acknowledged the due execution of the foregoing and annexed instrument.

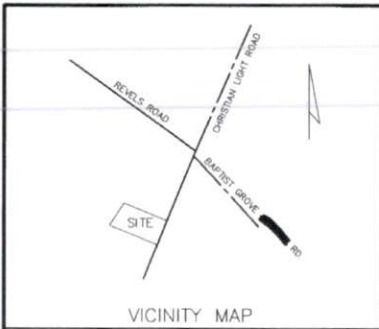
Witness my hand and notary seal, this 21st day of February 2008.





Linda Funke Johnson, notary public

My commission expires: 21 OCT 08



- LEGEND**
- EP ----- EXISTING IRON PIPE/ CONTROL CORNER
 - ES ----- EXISTING IRON STAKE/ CONTROL CORNER
 - EPK ----- EXISTING P-K NAIL/ CONTROL CORNER
 - IPS ----- IRON PIPE SET
 - NIF ----- NO IRON FOUND
 - RRS ----- RAILROAD SPIKE SET
 - CON MON. ----- CONCRETE MONUMENT
 - PK ----- PK NAIL
 - R/W ----- RIGHT OF WAY
 - CL ----- CENTER LINE

NORTH CAROLINA
WAKE COUNTY

I, Max E. Ashworth, Jr., certify that this plat was drawn under my supervision from an actual survey made under my supervision using references shown hereon; that the boundaries not surveyed are shown as broken lines plotted from information shown hereon; that the ratio of precision as calculated is 1:10,000+; that this plat was prepared in accordance with G.S. 47-30 as amended. Witness my original signature, registration number and seal this 1st day of NOVEMBER, A.D. 2007



Max E. Ashworth, Jr.
MAX E. ASHWORTH, JR.
L-3099

This survey creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land:

- NOTES:**
1. ALL DISTANCES SHOWN ARE HORIZONTAL GROUND DISTANCES.
 2. AREAS COMPUTED BY COORDINATE METHOD.
 3. PROPERTY SHOWN HEREON IS SUBJECT TO ALL EASEMENTS AND RESTRICTIONS OF RECORD.
 4. 5/8" INSIDE DIAMETER IRON PIPES SET AT CORNERS UNLESS OTHERWISE NOTED.
 5. NO TITLE SEARCH HAS BEEN PERFORMED BY THIS OFFICE DURING THE COURSE OF THIS SURVEY.
 6. THIS SURVEYOR DOES NOT CERTIFY TO THE EXISTENCE OR NON-EXISTENCE OF ANY UNDER GROUND UTILITIES THAT MAY OR MAY NOT BE PRESENT ON THIS SITE.

THE LOT(S) ON THIS PLAT HAVE BEEN EVALUATED BY A PRIVATE CONSULTANT, BASED ON THIS REVIEW, IT APPEARS THAT LOT 1 AND 2 ON THIS PLAT MEET APPROPRIATE REGULATIONS. NOTE THAT FINAL APPROVAL FOR EACH LOT REQUIRES ISSUANCE OF THE APPROPRIATE HARNETT COUNTY HEALTH DEPARTMENT PERMITS FOR SPECIFIC USE AND SITING IN ACCORDANCE WITH REGULATIONS IN FORCE AT THE TIME OF PERMITTING. THIS CERTIFICATION DOES NOT REPRESENT APPROVAL OR A PERMIT FOR ANY SITE WORK.

12/6/07 DATE
Benjamin McWhorter ENVIRONMENTAL HEALTH

FILED FOR REGISTRATION
12-14-07 DATE
2007-1051 MAP NUMBER
KIMBERLY S. HARGROVE REGISTER OF DEEDS HARNETT COUNTY



FOR REGISTRATION REGISTER OF DEEDS HARNETT COUNTY, NC
2007 DEC 14 10:30:37 AM
BK: 2007 PG: 1051-1052 FEE: \$21.00
INSTRUMENT # 2007021935

By: *Judith Hanilton, asst.*
Recorded in Harnett County MAP NUMBER 2007-1051

CERTIFICATION OF OWNERSHIP, DEDICATION & JURISDICTION

(OWNER) HEREBY CERTIFY THAT I AM/WE ARE THE OWNER(S) OR AGENT OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I/WE HEREBY ADOPT THIS PLAN OF SUBDIVISION WITH MY(OUR) FREE CONSENT, ESTABLISH THE APPROPRIATE BOUNDARY LINES AND DEDICATE ALL STREETS, ALLEYS, WALKS, PARKS, AND OTHER SITES AND EASEMENTS TO PUBLIC OR PRIVATE USE AS NOTED, AND ALL OF THE LAND SHOWN HEREON IS WITHIN THE SUBDIVISION REGULATION JURISDICTION OF HARNETT COUNTY.

12-13-07 DATE

TAX PARCEL ID NUMBER
Joseph Kent Revels
OWNER/AGENT

HARNETT COUNTY PUBLIC UTILITIES
PLAT PLAN PRE-APPROVAL ONLY
NOT FOR CONSTRUCTION
WATER IS AVAILABLE TO THIS SITE
VA LINE LOCATED ON _____

SIGNATURE DATE

DEPARTMENT OF TRANSPORTATION
DIVISION OF HIGHWAYS
NO APPROVAL NECESSARY
C.W. McGEE
DISTRICT ENGINEER RDP
12/10/07 DATE

N/F
JOSEPH KENT REVELS, ET UX
DB 2242 PG. 163
MAP BOOK 2001-371
PIN # 0634-92-2234.000

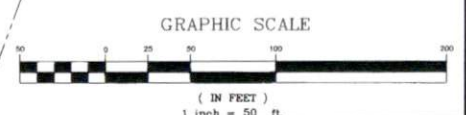
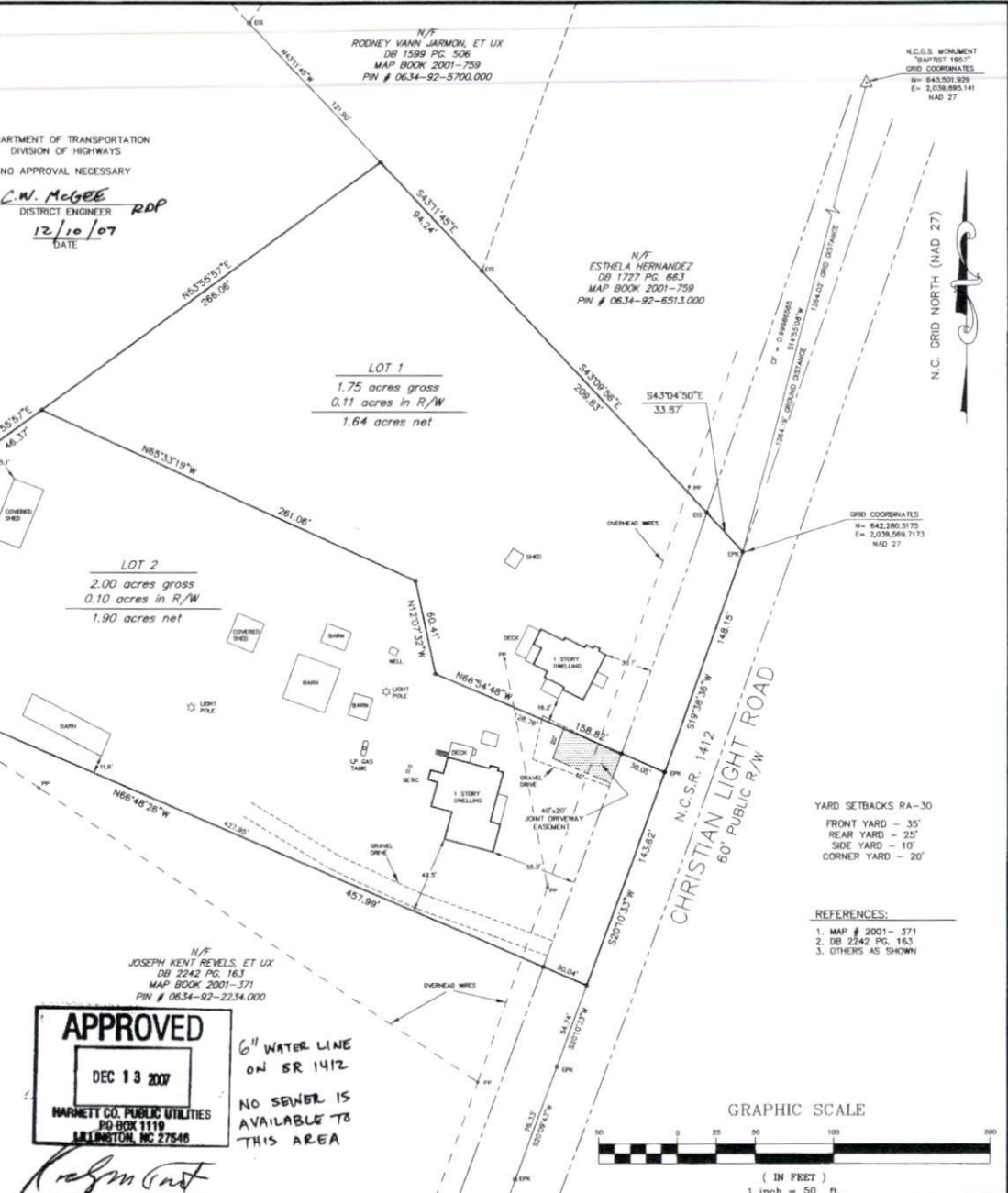
NIS
ROAD NAMES HAVE BEEN REVIEWED
AND APPROVED BY E-911
J. Ward
APPROVED BY
12-13-07 DATE



6" WATER LINE ON SR 1412
NO SEWER IS AVAILABLE TO THIS AREA

I HEREBY CERTIFY THAT THIS RECORD PLAT COMPLES WITH THE SUBDIVISION REGULATIONS OF HARNETT COUNTY, N.C.; AND THAT THIS PLAT HAS BEEN APPROVED FOR RECORDING IN THE REGISTER OF DEEDS IN HARNETT COUNTY.
12/13/07 DATE
Shailak Bennett PLANNING DIRECTOR

STATE OF NORTH CAROLINA
COUNTY OF HARNETT
Shailak Bennett
REVIEW OFFICER OF HARNETT COUNTY. CERTIFY THAT THE PLAT TO WHICH THIS CERTIFICATION IS AFFIXED MEETS ALL STATUTORY REQUIREMENTS FOR RECORDING.
12-14-07 DATE
Shailak Bennett REVIEW OFFICER



REVISIONS		MINOR SUBDIVISION OF THE PROPERTY OF:		ASHWORTH LAND SURVEYING	
		JOSEPH KENT REVELS, ET UX		PO BOX 388, FUQUAY-VARINA, N.C. 27526 919-552-1857	
		230 REVELS ROAD, FUQUAY-VARINA, N.C. 27526		DATE: 11/01/07 FIELD BOOK	
BUCKHORN TOWNSHIP		HARNETT COUNTY		NORTH CAROLINA	
PARENT TRACT PIN # 0634-92-2234.000		ZONE: RA-30		SCALE: 1" = 50'	
				DRAWING NO. 2988	

Map # 2007-1051

HTE# 165-38861

Harnett County Department of Public Health

24356

PERMIT # 28978

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION SR 1412 Christen Light Rd

Name: (owner) Feliciano Avalez SUBDIVISION _____ LOT # 1

System Installer: Tommy Coley Registration # _____

Basement with plumbing: Garage Number of Bedrooms 2

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

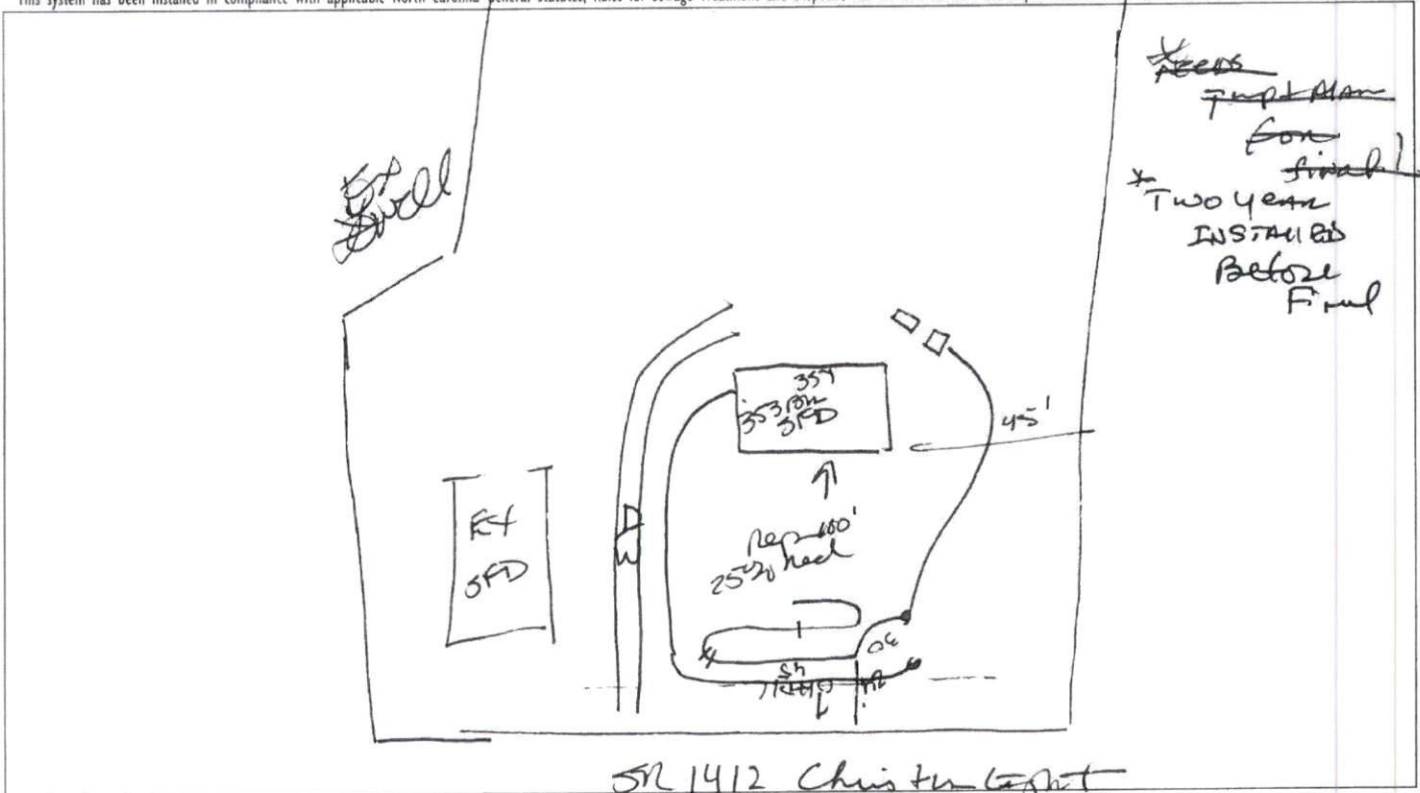
System Type: Pump to 25% reduction type II B Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

ELCAG

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 25% Reduction Septic Tank: 1000 gallons Pump Tank: 1000 gallons

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

French Drain Required: _____ Linear feet

Authorized State Agent James E. Mansfield Date 6-13-18