### 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**

	EMA	IL ADDRESS: doe	skens 29 Mail.co
	and Amy Doesken	PHONE 919-	1218310
PHONE NUMBER 91972	18310 or 9197218311		
PHYSICAL ADDRESS 810 7	ouchanan Road Lil	lington MC	27546
MAILING ADDRESS (IF DIFFFEREN	T THAN PHYSICAL)		
IF RENTING, LEASING, ETC., LIST P	ROPERTY OWNER NAME		
SUBDIVISION NAME		ATE RD/HWY	SIZE OF LOT/TRACT
	[ ] Mobile Home [ ] Stick built	[ ] Other	
Number of bedrooms			
Garage: Yes [] No 🕅	,		arbage Disposal: Yes [] No []
Water Supply: [] Private Well	[ ] Community System	(X) County	16.10
Directions from Lillington to your	site: Take MC 27 to	western	winett (+5
Take a Right	conto Buchenan R	Loady Hou	vse is
Straight at t	he Calde suc		
			*
	It to be be seen with your rough you	will need to comply h	y completing the following:

In order for Environmental Health to help you with your repair, you will need to comply by completing th

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.

312812 **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 [X] NO Also, within the last 5 years have you completed an application for repair for this site? [] NO
Year home was built (or year of septic tank installation) Home Built 2016 septic was linstaller of system
Year home was built (or year of septic tank installation)
Installer of system
Septic Tank Pumper
Designer of System
<ol> <li>Number of people who live in house?</li> <li>What is your average estimated daily water usage?</li> <li>gallons/month or day dey county water. If HCPU please give the name the bill is listed in Mi weel Doesker</li> </ol>
3. If you have a garbage disposal, how often is it used? [ ] daily [ ] weekly [ ] monthly 4. When was the septic tank last pumped? All All How often do you have it pumped? Every Um 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?
Chunary Detergent
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, gutte
drains, basement foundation drains, landscaping, etc? If yes, please list_\(\cap\circ\)
15. Are there any underground utilities on your lot? Please check all that apply:
M Power M Phone [ ] Cable [ ] Gas X Water
16. Describe what is happening when you are having problems with your septic system, and when was th
first noticed?
Septic system slows after Laundrydays and Heavy Rains noticed 3 years ago
Heavy Rains noticed 3 years ago
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 (alvo)
Laundry days, DESh washer sage, Could be that
Drive way is over Drain Cines Class unknown where
Brain Lines were when moved in)

## HARNETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION

Nº 111003

# **OPERATIONS PERMIT**

1	- 1 21 11: 12	Vicinity South
Name: (owner) LO	RI Whittington	New Installation Septic Tank
Property Location:	SR#_1242	Repairs Nitrification Line
5	Subdivision Myrtle R. Harry ten	Lot #
,	TAX ID#	Quadrant #
Contractor: Cec	BACKLOC	Registration #
Basement with Plumb	BACKLOC  CARTER  Ding:   Garage:	
Water Supply:	Well Public Community	
Distance From Well:	50min ft.	
Following are the sp	ecifications for the sewage disposal sy	stem on above captioned property.
Type of system:	Conventional Other	
Size of tank:	Septic Tank: 1000 gallons P	
Subsurface Drainage Field	No. of exact length of each ditch	width of depth of ft. ditches in.
French Drain:	Linear feet	2 21 00
	Date:	826-57
PERMIT NO.	Name of the Inspector	d by: De WAN!  Environmental Health Specialist
	N	Environmental Frontal Specialist
WB-1000 513-255 7-10-97	1	
513-255	15'	
7-18-97		
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# HARNETT COUNTY HEALTH DEPARTMENT

110 12787

PROVEMENT 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." Whittington New Installation Septic Tank Name: (owner) LORI Buchana Rd - Repairs Property Location: Nitrification Line Subdivision Myrtle R. Harrington Est. \_\_\_\_\_ Quadrant # \_\_\_ Number of Bedrooms Proposed: Lot Size: 29.360c Basement with Plumbing: Garage: Water Supply: ☐ Well ☐ Public ☐ Community Distance From Well: 50 min ft Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval. Type of system: Conventional Other\_ Septic Tank: boo gallons Size of tank: Pump Tank: \_\_\_\_\_ gallons Subsurface No. of exact length width of depth of of each ditch 100 ft. ditches 3 ft. ditches in. ditches\_3 Drainage Field French Drain Required: \_ \_\_\_\_\_ Linear feet Date: This permit is subject to revocation if site Signed: \_\_\_ plans or intended use change. ronmental Health Specialist +HW727 SR 1242 O POWER DIE GUP-UZ 35 DRIVE 14 x 80 3BR MH AS STAKED STUB out Plumbing shallow 40' 18" max otch MAX Maintain All It 3 Lines connot be placed within the 45' behind Required set Briks The house then use a Line, at 150'each DO NOT DRIVE OR PARK ON MY PART of SEPTIC SYSTEM

# HARNETT COUNTY HEALTH DEPARTMENT AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications descri by Harnett County Health Department Improvement Permit # 12 787 \_\_\_. This authorizati shall be valid for a period not to exceed five (5) years from the date of issuance. This authorization will be invalid if ownership, site plans, or intended use change. Owner or Authorized Agent \_\_\_\_\_\_ OR: Whithington Name: \_\_\_\_\_\_ Telephone # \_\_\_\_\_ Property Location: SR# 212 Road Name \_\_\_\_\_ New Installation \_\_\_\_ Repair \_\_\_\_ Septic Tank \_\_\_\_ Nitrification Lines \_\_\_\_ Subdivision Myttle R. Harrington Est Lot# N/A Number of Bedrooms Proposed: \_\_\_\_\_\_\_ Lot size: 29.36 AC Basement \_\_\_\_\_ With Plumbing \_\_\_\_\_ Without Plumbing \_\_\_\_\_ Water Supply: Well \_\_\_\_\_ Public \_\_\_\_ Minimum Well Setback: \_\_\_\_ ft. Type of System: Conventional \_\_\_\_\_ Other \_\_\_\_ Tank Volume: Septic Tank / OOO gallons Pump Chamber \_\_\_\_\_ gallons Nitrification Field Specifications Width of ditches \_\_\_\_\_ ft. Depth of ditches \_\_\_\_\_ inches French Drain: Linear feet required \_\_\_\_\_ Depth of gravel \_\_\_\_ No wastewater system shall be covered or placed into use by any person until an inspection by the Harnett County Health Department has determined that the system has been installed according to the conditions of the improvement permit and that a valid operations permit has been issued. Authorized Agent for Harnett County Health Department 

(Revised 2/96) CNSTRCT. WPD

HARNETT COUNTY TAX ID#

03-0507-0015-01

10/28/16 BY CO

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2016 OCT 28 04:15:55 PM
BK:3451 PG:617-619
FEE:\$26.00
EXCISE TAX: \$350.00
INSTRUMENT # 2016015668



## NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$350.00

Recording Time, Book and Page

Tax Map No.

Parcel Identifier No. 030507 0015 07 & 030507 0015 06

Mail after recording to: Mr and Mrs. Michael R. Doesken @ 810 Buchanan Road, Lillington, NC 27546

This instrument was prepared by: W. W. Seymour, Jr., Attorney at Law

THIS DEED made this 27th day of October, 2016 by and between

### GRANTOR

E.J. WOMACK ENTERPRISES, INC. A North Carolina Corporation 3335 NC Highway 87 Highway Sanford, NC 27330

### GRANTEE

MICHAEL R. DOESKEN AND WIFE, AMY C. DOESKEN 810 Buchanan Road Lillington, NC 27546

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 of their right, title and interest in and to all that certain lots or parcel of land and more particularly described as follows:

### See attached Exhibit A.

All or a portion of the property hereinabove described was acquired by Grantor by instrument recorded in Book 3419, Page 208, Lee County Registry.

### B3451 - P618

A map showing the above described property is recorded in Map Book 2016, Page 205 and referenced within this instrument.
The above described property \( \text{does} \) does not include the primary residence of the Grantors.
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 except for the exceptions hereinafter stated.
Title to the property hereinabove described is subject to the following exceptions:
Any valid easements and restrictions of record.
IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officer(s), the day and year first above written.
E.J. WOMACK ENTERPRISES, INC. (SEAL)  By: (SEAL)
Title: President(SEAL)  By:(SEAL)
STATE OF NORTH CAROLINA COUNTY OF LEE
I, Susan R. Tickle, the undersigned Notary Public of the County and State aforesaid, certify that E.J. Womack personally came before me this day and acknowledged that he is the President of E.J. Womack Enterprises, Inc., a North Carolina Corporation and that by authority duly given and as an act of the Entity, has signed the foregoing instrument in its name and on its behalf as its act and deed.
Witness my hand and official stamp or seal, this the 27th day of October, 2016.
My Commission Expires: 11-15-2016  My Commission Expires: 11-15-2016  Notary Public
SUSAN R. TICKLE  Notary Public Lee County, NC  My Commission Expires: 11/15/2016  Print Notary Name: Susan R. Tickle

### **EXHIBIT A**

BEING ALL OF that certain tract of land containing 2.41 acres, more or less, according to "Recombination Survey for E.J. Womack Enterprises, Inc." by Melvin A. Graham, PLS, dated 07/18/2016 and recorded at Map Book 2016, Slide 205, Harnett County Registry. Reference to said map is hereby made for greater certainty of description.

