### 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 Jennifer Cabrera 94 & Janob : com

OWNER NAME Jennifer Cabrera PHONE (254) 423 6996
PHONE NUMBER (254) 423.6994
PHYSICAL ADDRESS 51 Union circle Lillington, NC 27546
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL)
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME
SURDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT
SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF EST/THATS
Type of Dwelling: [] Modular [] Mobile Home [] Stick built [] Other
Number of bedrooms 3 Plus bonus [] Basement
Garage: Yes [ No [ ] Dishwasher: Yes [ No [ ] Garbage Disposal: Yes [ No [ ]
Water Supply: [] Private Well [] Community System [] County Septic
Directions from Lillington to your site: 210 to Ray Rd to Lemuel Bix turn into
woodshire turn left down to Union Cir turn Right down on left
In order for Environmental Health to help you with your repair, you will need to comply by completing the following:
1. A <u>"surveyed and recorded map"</u> and <u>"deed to your property</u> " must be attached to this application. Please inform as or any
<ol> <li>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.</li> </ol>
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

#### 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 [YNO Also, within the last 5 years have you completed an application for repair for this site? [ ] YES [YNO Year home was built (or year of septic tank installation) 2006 Installer of system Do not know Septic Tank Pumper Do not know Designer of System Do not know 2. What is your average estimated daily water usage? So a gallons/ gallons/month or day Harnetcounty water. If HCPU please give the name the bill is listed in knn for Cabrera 3. If you have a garbage disposal, how often is it used? [ ] daily [ weekly [ ] monthly 4. When was the septic tank last pumped? 61134 How often do you have it pumped? 5. If you have a dishwasher, how often do you use it? [ ] daily [ ] every other day 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? RID ex 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 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? Sartic is overflowing into yard. Had it pumped a week ago and the fitter is clean according to co. The trank filled right vock up and flooding yard 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 Any time there is running water such as dishwasher or washer machine the water continues to purple putside of septic and continues to flow into the yard and cont.

to smell worse.

HARNETT COUNTY TAX ID # 0506-63-3973.000

For Registration Kimberly S. Hargrove Register of Deeds Harnett County, NC Electronically Recorded 2020 Jun 10 02:23 PM NC Rev Stamp: \$ 396.00 Book: 3823 Page: 102 - 103 Fee: \$ 26.00 Instrument Number: 2020009114

06-10-2020 BY: EG

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#### NORTH CAROLINA GENERAL WARRANTY DEED

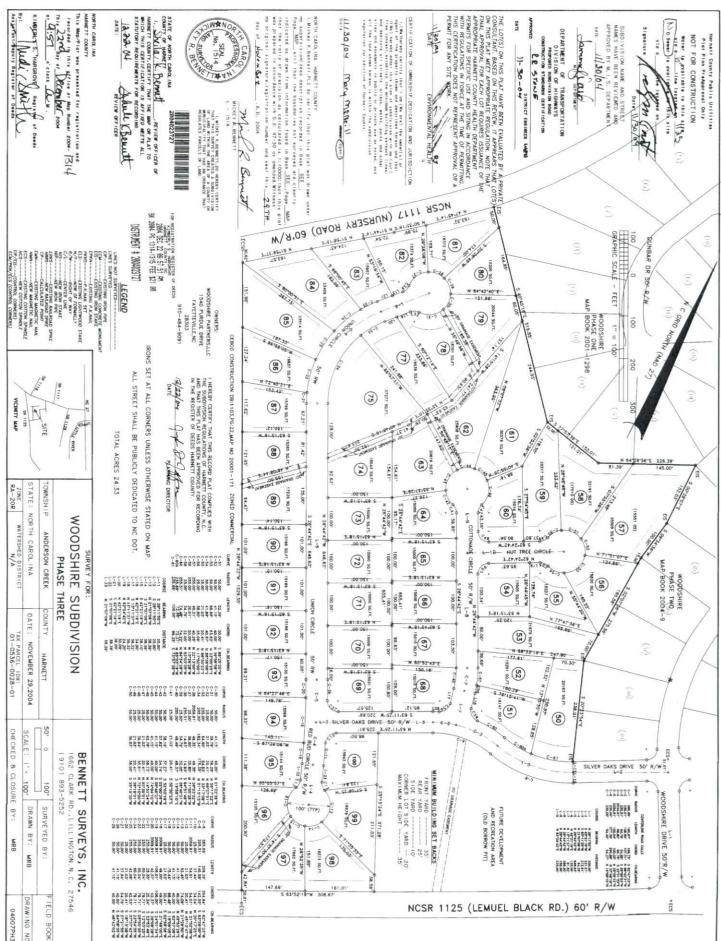
Excise Tax: \$ 396.00	
Parcel Identifier No. 0506-63-3973.000 Verified by	County on theday of, 20
Mail/Box to: Jeffrey E. Radford, The Law Office of Jeffrey E. Radford	, 232 Hay Street, Fayetteville, NC 28301
This instrument was prepared by: The Law Office of Jeffrey E. Radfor	rd, 232 Hay Street, Fayetteville, NC 28301
Brief description for the Index: LOT 92, Woodshire	
THIS DEED made this 18th day of May	. 20 <u>20</u> , by and between
GRANTOR Wade H Smith and wife, Jennifer E Smith 211 S. Tulip Street Fort Knox, KY 40121	GRANTEE Jennifer Lynn Cabrera (unmarried) 51 Union Circle Lillington, NC 27546
Enter in appropriate block for each Grantor and Grantee: name, ma corporation or partnership.  The designation Grantor and Grantee as used herein shall include said	
plural, masculine, feminine or neuter as required by context.  WITNESSETH, that the Grantor, for a valuable consideration paid by these presents does grant, bargain, sell and convey unto the Grantee situated in the City of Lillington, And North Carolina and more particularly described as follows:	in fee simple, all that certain lot, parcel of land or condominium unit
Being all of Lot 92, as shown on a plat entitled "WOODSHIRE SUBD Page 1314, Harnett County Registry, North Carolina.	IVISION, PHASE THREE" duly recorded in Map Book 2004,
The property hereinabove described was acquired by Grantor by ins All or a portion of the property herein conveyed includes or _X	trument recorded in Book 2182 page 118 does not include the primary residence of a Grantor.
A map showing the above described property is recorded in Plat Bo	ok
Page	1 of 2
NC Bar Association Form No. 3 © 1976. Revised © 1977, 2002, 2013 Printed by Agreement with the NC Bar Association – 1981	This standard form has been approved by: North Carolina Bar Association - NC Bar Form No. 3

Submitted electronically by "The Law Office of Jeffrey E. Radford" in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

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, other than the following exceptions: Restrictive covenants recorded in Book 2027, Page 921, Harnett County Registry.

Easements and Restrictions of record.	
IN WITNESS WHEREOF, the Grantor has duly executed the forego	ning as of the day and year first above written.
	More
(Parklank)	Print/Type Name: Wade H Smith
(Entity Name)	Print/Type Name: wide H Smith
Ву:	TXYNATA (SEAL
Print/Type Name & Title:	Print Type Name: Jennifer E Smith
A TO SHOULD A PERSONNEL SOUTH OF THE STATE O	9
By: Print/Type Name & Title:	(SEAL
Print/Type Name & Title:	Print/Type Name:
By:	(SEAL
By:Print/Type Name & Title:	Print/Type Name:
State of Kentucky - County or City of Har	Hardyn
I, the undersigned Notary Public of the County or City of _	Hardin and State aforesaid, certify that
Wade H Smith and wife. Jennifer E Smith acknowledged the due execution of the foregoing instrument for the pu	personally appeared before me inis day and
acknowledged the due execution of the foregoing instrument for the pu	irposes therein expressed. Witness my hand and Novariai stamp o
seal this 16th day of May 20.20.  MATTHEW V. Notary Publicher V. Notary P. Notary V. Notary P. Notary V. N	The state of the s
MATTHEW V	W. KOESTER
Notary Public	State a. Large
(Affix Seal)	xpites 12-21 2022 Printed or Typed Name
State of County or City of	
I the undersigned Notary Public of the County or City of	and State aforesaid, certify that
nerson	nally came before me this day and acknowledged that _he is the
of	, a North Carolina or
corporation/limited liability company/general partnership/limited par	tnership (strike through the inapplicable), and that by authority
duly given and as the act of such entity, _he signed the foregoing in	strument in its name on its behalf as its act and deed. Witness
my hand and Notarial stamp or seal, this day of	. 20 .
inj inition and its analysis and in the same and its analysis and analysis and analysis and analysis and analysis analysis and ana	
	N. D. IV
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name
State of County or City of	
I, the undersigned Notary Public of the County or City of	and State aforesaid, certify that
Witness my hand and Notarial stamp or seal, this day of	20
withess my hand and rotatian stamp of sear, this day of	
My Commission Expires:	Notary Public
(Affix Seal)	Notary's Printed or Typed Name



MEP - 1904-1314



### KIMBERLY S. HARGROVE REGISTER OF DEEDS, HARNETT 305 W CORNELIUS HARNETT BLVD SUITE 200 LILLINGTON, NC 27546

### PLEASE RETAIN YELLOW TRAILER PAGE

It is part of recorded document, and must be submitted with original for re-recording and/or cancellation.

Filed For Registration:

12/22/2004 09:57:51 AM

Book:

PLAT 2004 Page: 1314-1315

Document No.:

2004023727

MAP 2 PGS \$21.00

Recorder:

TRUDI C SMITH

State of North Carolina, County of Harnett

Deputy/Assistant Register of Deeds

\*2004023727\*

2004023727

HTE# 04-50011062

### ARNETT COUNTY HEALTH DE TMENT ENVIRONMENTAL HEALTH SECTION

17829

### **OPERATIONS PERMIT**

OI ERATIONS I ERWITT	
Name: (owner) And De New Installation Septic Tank Repair	
Property Location: SR# 117 Nitrification Line Expansion Subdivision Woodshipe Lot # 92 Tax ID # Quadrant #	_
Contractor: D.C. CANTER Registration #	_
Basement with Plumbing:  Garage:  Garage:	
Water Supply: ☐ Well ☒ Public ☐ Community  Distance From Well:ft.	
Following are the specifications for the sewage disposal system on above captioned property.	
Type of system:  Conventional Other 25% Deduction System E.Z. Fbu	
Size of tank: Septic Tank: Doo gallons Pump Tank: gallons	
Subsurface No. of exact length width of ditches ft. depth of ditches ft.	1.
French Drain Required: Linear feet Date: Date:	_
PERMIT NO. 21518 Inspected by:	_
E. Drue Sor Apper	1

### HARN Γ COUNTY HEALTH DEPARTM

### HTE 0450011062 IMPROVEMENT PERMI' 21518

Be it ordained by the Harnett County Board of Health as follows: tion of any building at which a septic tank system is to be used for disposal from the Harnett County Health Department."	of sewage without first obtaining a written permit	
Name: (owner) CAUNCH Land Dev.	_ ONew Installation Septic Tank	
Property Location: SR#	_ ☐ Repairs	
Subdivision Wood Shipe		
Tax ID #	_ Quadrant #	
Number of Bedrooms Proposed: 3(38259) Lot S.	ize:, 35	
Basement with Plumbing: Garage: 🗵		
Water Supply: ☐ Well ☑ Public ☐ Community		
Distance From Well:ft.		
Following is the minimum specifications for sewage disposal sy to final approval.	ystem on above captioned property. Subject	
Type of system:	Reduction system	
Size of tank: Septic Tank: Dog gallons Pump		
Subsurface No. of exact length	width of depth of	
Drainage Field ditches of each ditch 30 ft.	ditches 3 ft. ditches 18-24 in.	
French Drain Required:Linear feet % 25%	Reduction System	
Date:	01-17-05	
This permit is subject to revocation if site Signe	ed: Je LM	
plans or intended use change.	Environmental Health Specialist	
	75'	
10'		
1 33 C C		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
38x59 5	Repair	
	1   Cellini	0
1   27 \		
	15 10	
150'		
STUB out Plumbing shallow		
MAINTAIN All Set BACK		
Meet onste it any questions Arine		

## HAKNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AUTLORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 2\5\x\  The system of Publi	
authorization 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.	пѕ
LAVINON LONG	
Name Telephone #	
Address	_
Property Location SR#  Road Name	
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
Subdivision Lot # Bedrooms Proposed Lot Size	_
TYPE OF SYSTEM	
New Installation [] Repair Septic Tank Nitrification Lines  [] Conventional Other 25% Reduction 5775	
[] Conventional Other 25% Reduction 17) 7EN	
[ ] Basement [ ] With Plumbing [ ] Without Plumbing	
Water Supply: [ ] Well Public Water Supply Minimum Well Setback: 50 Ft.	
Septic Tank gal Pump Chamber gal	
NITRIFICATION FIELD SPECIFICATIONS	
Number of fields # of lines per field Length of lines XX	
Width of ditches	
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.	
Signature of Authorized Agent To Hand S	=
Signature of Authorized Agent for Harnett County  Date	