

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: Cdixon2011@nc.rr.com

OWNER NAME Chuck & Donna Dixon PHONE _____

PHYSICAL ADDRESS 59 Grahamridge lane Fuquay Varina, N.C. 27526

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

Wyndham Place Pauls Church Rd
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: From 401 to Pauls Church Rd.
Rt. on Wyndham Place

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.

Chuck Dixon 9-13-24
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) 2007
Installer of system _____
Septic Tank Pumper Carolina Trash: Septic
Designer of System _____

1. Number of people who live in house? 2 # adults _____ # children _____ # total _____
2. What is your average estimated daily water usage? _____ gallons/month or day _____ county not sure
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 NA
4. When was the septic tank last pumped? 9-9-24 How often do you have it pumped? First Time
5. If you have a dishwasher, how often do you use it? daily every other day weekly NA
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 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?
Notice about 3 weeks ago (wet near drain lines)
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 just overflow

HTE# 07-5-16990

Harriet County Department of Public Health 19585

PERMIT # 23498

Operation Permit

New Installation Septic Tank Repair Nitrification Line Expansion

PROPERTY LOCATION: SR 1415

Name: (owner) Michael Shrieves SUBDIVISION Wyndham Place LOT # 1

System Installer: Tommy Coley Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

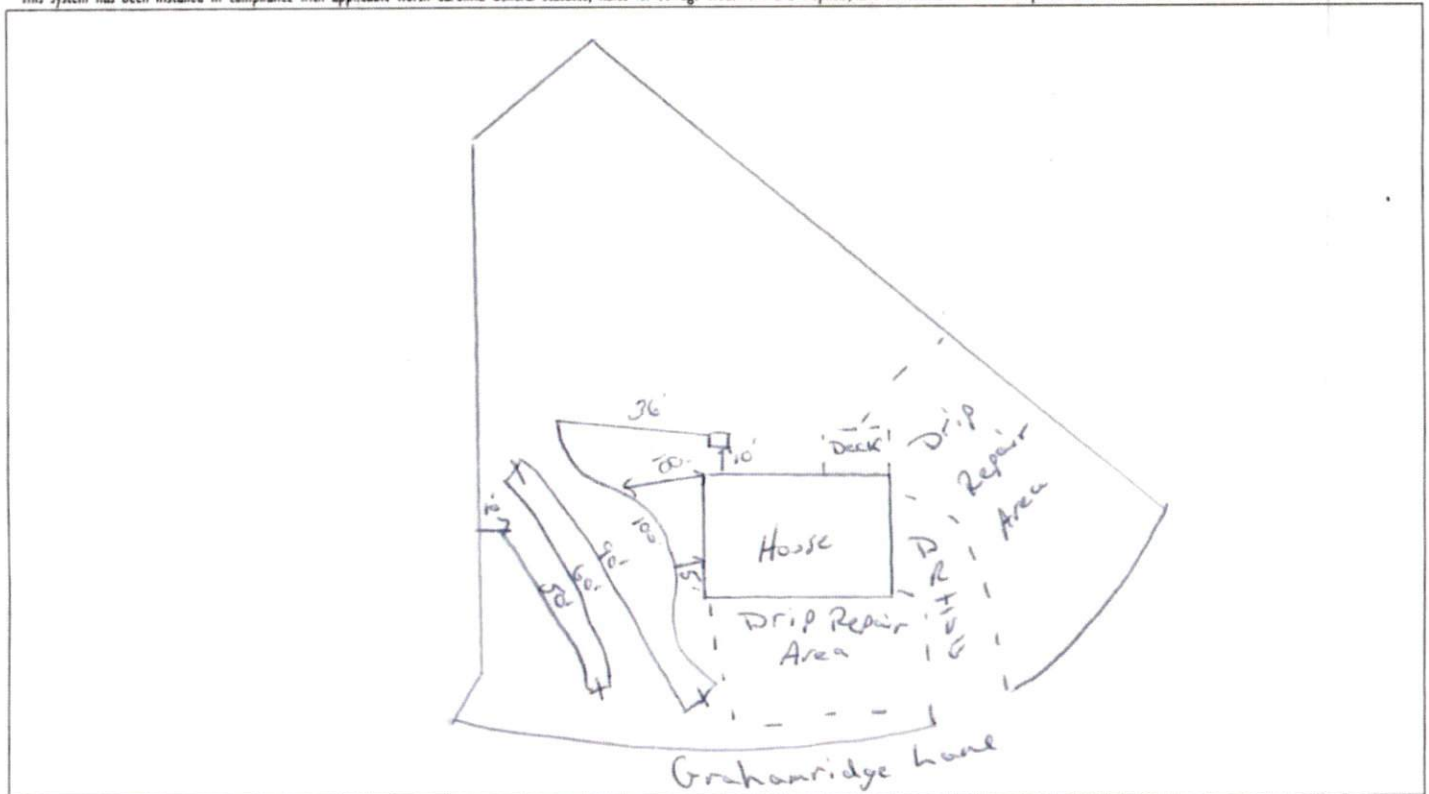
Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: III G 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.



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: _____

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other EFFLOW Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
 Subsurface No. of _____ exact length _____ width of _____ depth of _____
 Drainage Field ditches 1 of each ditch 300 feet ditches 3 feet ditches 12 inches
 French Drain Required: _____ Linear feet

Authorized State Agent Samuel L. S. Date 9/24/2007

HTE# 07-5-16970

Harrell County Department of Public Health 23498

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Michael Shriever PROPERTY LOCATION: SR 1415 Rowb Church
 NEW REPAIR EXPANSION SUBDIVISION: Wyndham Place PH 2 LOT # 1
 Type of Structure: SFD 52X56 Site Improvements required prior to Construction Authorization Issuance: _____
 Proposed Wastewater System Type: Accepted System
 Projected Daily Flow: 300 GPD
 Number of bedrooms: 3 Number of Occupants: 6 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: Bryan M. Swain, P.E. Date: 6/7/2007 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: Michael Shriever PROPERTY LOCATION: SR 1415
 SUBDIVISION: Wyndham Place PH 2 LOT # 1
 Facility Type: SFD 52X56 New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** At Grade Accepted System (Initial) Wastewater Flow: _____ GPD
 (See note below, if applicable)
Drip Irrigation w/ no pretreatment (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons Exact length of each trench 300 feet Trench Spacing: 9 Feet on Center
 Pump Tank Size _____ gallons Trenches shall be installed on contour at a Soil Cover: 6 inches min.
 Maximum Trench Depth of: 12 inches (Maximum soil cover shall not exceed 36" above the trench bottom)
 (Trench bottoms shall be level to $\pm 1/4"$ in all directions)
 Pump Requirements: _____ ft. TDH vs. _____ GPM _____ inches below pipe
 Aggregate Depth: _____ inches above pipe
 Conditions: Drain line to be run on contour; IF full from septic tank can not be achieved & ditch depth maintained a pump will be required _____ inches total

**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.

Authorized State Agent: Bryan M. Swain, P.E. Date: 6/7/2007 SEE ATTACHED SITE SKETCH
 Construction Authorization Expiration Date: 6/7/2012

HTE# 07-5-16990

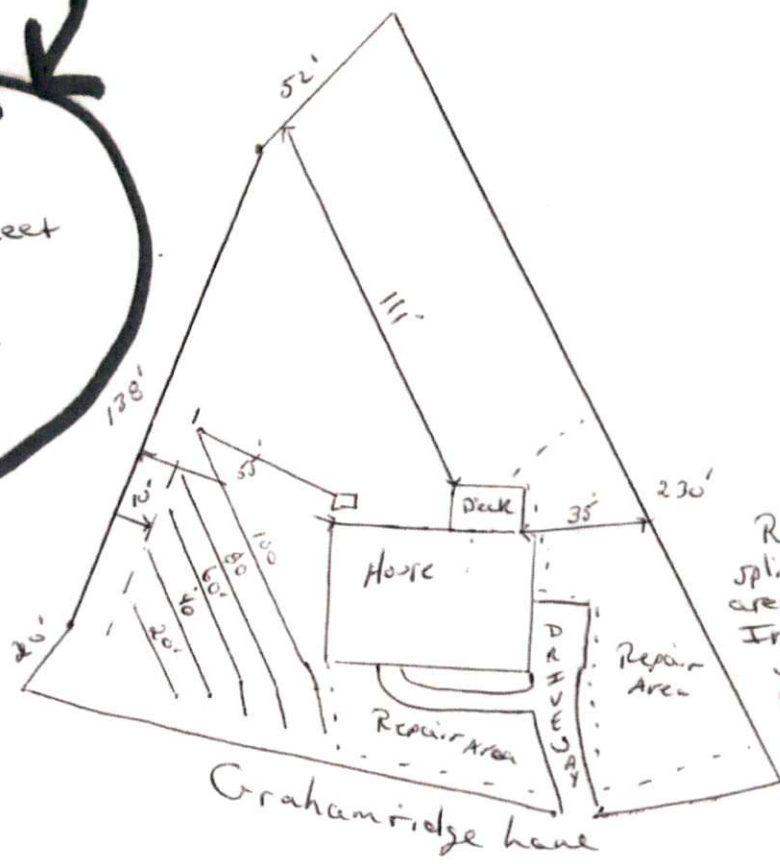
Permit # 23498

Harnett County Department of Public Health Site Sketch

ISSUED TO: Michael Schroever PROPERTY LOCATOR: SR 1415 Lamb's Church Rd
SUBDIVISION: Wyncheon Place #12 LOT # 1

Authorized State Agent: Bryan McSwain, P.S. Date: 6/7/2007

*Contractor to meet onsite prior to installing septic system



Repair Area is split into two areas + is Drip Irrigation w/out pretreatment (3600 ft²)

Graham ridge here

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2017 Nov 22 03:43 PM NC Rev Stamp: \$ 552.00
Book: 3560 Page: 251 - 252 Fee: \$ 26.00
Instrument Number: 2017017506

HARNETT COUNTY TAX ID#
040664 0038

11-22-2017 BY MT

Submitted electronically by Adams Howell Sizemore and Lenfestey - Angier in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$552.00

Parcel Identifier No. 040664 0038 Verified by _____ County on the ____ day of _____, 20____
By: _____

Mail/Box to: GRANTEE

This instrument was prepared by: Currie T. Howell, Attorney, Adams, Howell, Sizemore & Lenfestey, P.A.

Brief description for the Index: Lot 1, Phase II of Wyndham Place Subdivision

THIS DEED made this 20 day of November, 2017, by and between

GRANTOR	GRANTEE
Diem Tan Vo and wife, Jennifer Kuzara	Chuck D. Dixon and wife, Donna B. Dixon
1411 Mount Vernon Avenue Alexandria, VA 22301	59 Grahamridge Lane Fuquay-Varina, NC 27526

Enter in appropriate block for each Grantor and Grantee: name, mailing address, and, if appropriate, character of entity, e.g. corporation or partnership.

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 that certain lot or parcel of land situated in Black River Township, Harnett County, North Carolina and more particularly described as follows:

Being all of Lot 1, Phase II of Wyndham Place Subdivision as depicted in Map # 2006-1094, Harnett County Registry.

_____ If checked, this property is the principal residence of the Grantor.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2854 Page 664.

A map showing the above described property is recorded in Map # 2006-1094.

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.

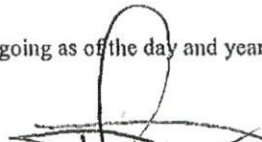
And the Grantor covenants with the Grantee, that Grantor is seized of the premises in fee simple, has the right to convey the same in fee simple, that title is marketable and free and clear of all encumbrances, and that Grantor will warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

This conveyance is expressly made subject to the lien created by all the Grantors' real 2018 Harnett County ad valorem taxes on said tract of land which the Grantee(s) agree to assume and pay in full when due.

Subject to all easements, rights-of-way, covenants and other restrictions as shown on the public record or as would be disclosed by an accurate survey and inspection of the land.

IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

Grantor(s):



Diem Tan Vo (SEAL)

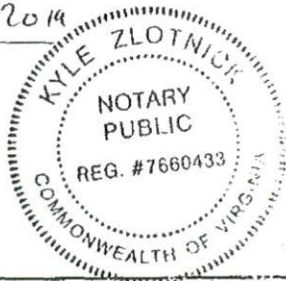


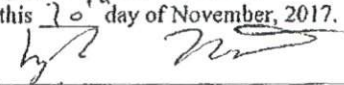
Jennifer Kuzara (SEAL)

State of Virginia - County or City of Alexandria

I, the undersigned Notary Public of the County or City of Alexandria and State aforesaid, certify that Diem Tan Vo and wife, Jennifer Kuzara, personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed. Witness my hand and Notarial stamp or seal this 20th day of November, 2017.

My Commission Expires: 01/31/2019
(Affix Seal)





Kyle Zlotnick, Notary Public
Notary's Printed or Typed Name

