

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: Joshc483@gmail.com

OWNER NAME Joshua Corley PHONE (931) 444-9921

PHYSICAL ADDRESS 3930 Hillman Grove Rd Camerow, NC 28326

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) \_\_\_\_\_

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME \_\_\_\_\_

SUBDIVISION NAME \_\_\_\_\_ LOT #/TRACT # \_\_\_\_\_ STATE RD/HWY \_\_\_\_\_ SIZE OF LOT/TRACT \_\_\_\_\_

Type of Dwelling:  Modular  Mobile Home  Stick built  Other \_\_\_\_\_

Number of bedrooms 4  Basement

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

Water Supply:  Private Well  Community System  County

Directions from Lillington to your site: 27 (R) 24/27 (L) on Hillman Grove 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 \_\_\_\_\_ Date 10 Oct 2024

# 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) 2022

Installer of system \_\_\_\_\_

Septic Tank Pumper \_\_\_\_\_

Designer of System \_\_\_\_\_

1. Number of people who live in house? 4 # adults 2 # children 6 # 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 Joshua Corday

3. If you have a garbage disposal, how often is it used?  daily  weekly  monthly N/A

4. When was the septic tank last pumped? N/A How often do you have it pumped? N/A

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 Pool

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 Shed & Pool

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?  
sewage pooling in front 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 \_\_\_\_\_

HARNETT COUNTY TAX ID #  
099554 0023

For Registration Matthew S. Willis  
Register of Deeds  
Harnett County, NC  
Electronically Recorded  
2021 Jul 27 01:24 PM NC Rev Stamp: \$ 75.00  
Book: 4019 Page: 945 - 946 Fee: \$ 26.00  
Instrument Number: 2021017298

07-27-2021 BY: ED

This instrument prepared by Ashish G Lakhiani, a licensed North Carolina attorney.

**NORTH CAROLINA GENERAL WARRANTY DEED**  
**DELINQUENT TAXES, IF ANY, TO BE PAID BY THE CLOSING ATTORNEY TO THE COUNTY TAX COLLECTOR**  
**UPON DISBURSEMENT OF CLOSING PROCEEDS**

File No.: AL-37628-21-P

Excise Tax: \$75.00

Parcel Identifier No. 099554 0023 and Verified by \_\_\_\_\_ County on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
By: \_\_\_\_\_

Mail/Box to: Single Source Real Estate Services, Inc., 2919 Breezewood Ave., Suite 300, Fayetteville, NC 28303

This instrument was prepared by: Lakhiani Law, PLLC, 2919 Breezewood Avenue, Suite 300, Fayetteville, NC 28303

Brief description for the Index: Lot #E3 & E4, Property of Steven G. Gordon

THIS DEED made this 23rd of May, 2021, by and between

GRANTOR	GRANTEE
Michael J. Morris and Tangela J. Robinson, NKA Tangela T. Morris, married 654 Christian Light Rd Fuquay Varina, NC 27526	Joshua Whitfield Corley and wife, Elizabeth Mary Corley 3930 Hillmon Grove Road Cameron, NC 28326

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, parcel of land or condominium unit situated in the City of Cameron, Johnsonville Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot #E3 & E4, in a subdivision known as Property of Steven G. Gordon, and the same being duly recorded in Plat Book 2011, Page 251, Harnett County Registry, North Carolina.

Parcel ID: 099554 0023

Property Address: 3930 Hillmon Grove Road, Cameron, NC 28326

1

NC Bar Association Form No. 3 © Revised 7/ 2013  
Printed by Agreement with the NC Bar Association

North Carolina Bar Association - NC Bar Form No. 3  
North Carolina Association of Realtors, Inc. - Standard Form 3

The property hereinabove described was acquired by Grantor by instrument recorded in Book 2936 page 204.

All or a portion of the property herein conveyed \_\_\_\_\_ includes or \_\_\_\_\_ does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book 2011 page 251.

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:

Subject to restrictive covenants, easements and rights-of-way as they may appear of public record.

Subject to ad valorem taxes which are a lien but not yet due and payable.

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

\_\_\_\_\_  
(Entity Name)

Michael J. Morris

Print/Type Name: Michael J. Morris

By: \_\_\_\_\_  
Print/Type Name & Title: \_\_\_\_\_

Tangela T. Morris

Print/Type Name: Tangela J. Robinson, NKA Tangela Morris

By: \_\_\_\_\_  
Print/Type Name & Title: \_\_\_\_\_

\_\_\_\_\_  
Print/Type Name: \_\_\_\_\_ (SEAL)

By: \_\_\_\_\_  
Print/Type Name & Title: \_\_\_\_\_

\_\_\_\_\_  
Print/Type Name: \_\_\_\_\_ (SEAL)



State of North Carolina County of Haywood

I, the undersigned Notary Public of the County and State aforesaid, certify that Michael J. Morris and Tangela J. Robinson, NKA Tangela T. Morris 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 23 of May, 2021.

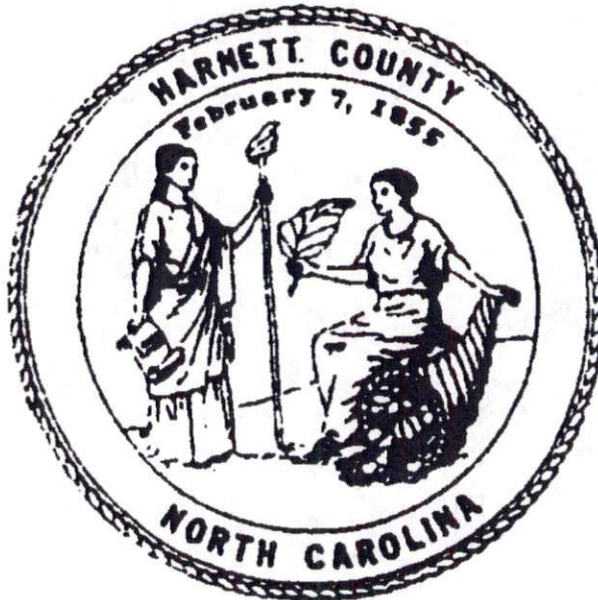
My Commission Expires: NOV 14, 2023

[Signature]  
\_\_\_\_\_  
, Notary Public

The foregoing Certificate(s) of \_\_\_\_\_ is/are certified to be correct. This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof.

\_\_\_\_\_  
Register of Deeds for \_\_\_\_\_ County  
By: \_\_\_\_\_ Deputy/Assistant - Register of Deeds





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

---

**Filed For Registration:** 04/21/2011 02:19:06 PM  
**Book:** PLAT 2011 Page: 251-252  
**Document No.:** 2011005800  
MAP 2 PGS \$21.00  
**Recorder:** ANGELA J BYRD

State of North Carolina, County of Harnett

KIMBERLY S. HARGROVE , REGISTER OF DEEDS

**DO NOT DISCARD**

2011005800

# Harnett County Department of Public Health

PERMIT # CBF16-50039452

## Operation Permit

New Installation    Septic Tank    Nitrification Line    Repair    Expansion

PROPERTY LOCATION: 3930 Hillman Grove Rd (SR 1106)

Name: (owner) Onsite Homes      SUBDIVISION \_\_\_\_\_      LOT # \_\_\_\_\_

System Installer: Yellow Dog

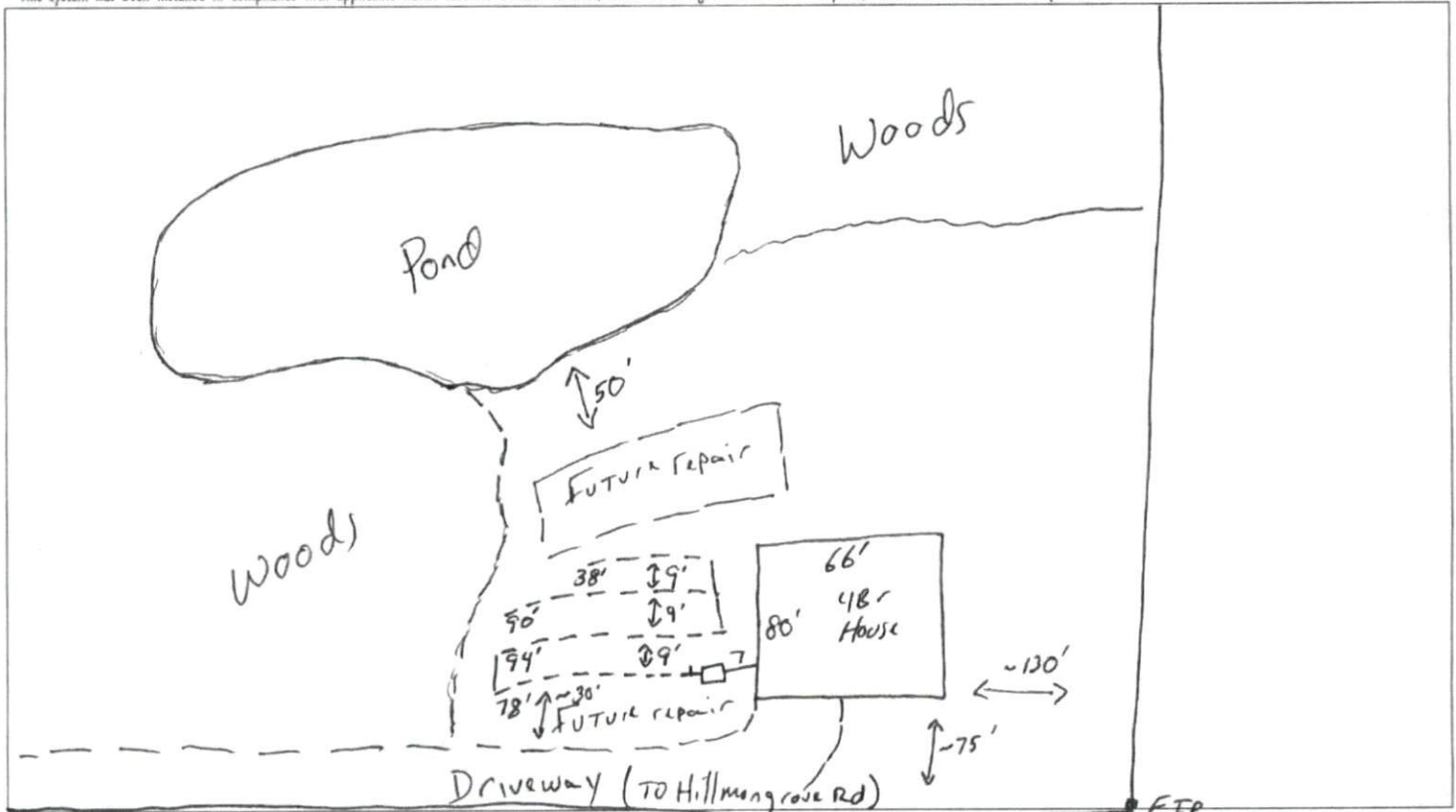
Basement with plumbing:  Garage  Number of Bedrooms 4

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

System Type: TYPE III 9      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: \_\_\_\_\_

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 (FOU)      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 Mah REHS      Date 4-27-22

## Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Onsite Homes PROPERTY LOCATION: 3930 Hillmon Grove Rd (SR1106)  
 SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_  
 NEW  REPAIR  EXPANSION  Site Improvements required prior to Construction Authorization Issuance:  
 Type of Structure: 35' x 73' SFD  
 Proposed Wastewater System Type: 25% reduction  
 Projected Daily Flow: 480 GPD  
 Number of bedrooms: 4 Number of Occupants: 8 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  
 No expiration  
 Permit conditions: \_\_\_\_\_

Authorized State Agent: *M. D. ...* REH Date: 08-17-21 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: Onsite Homes PROPERTY LOCATION: 3930 Hillmon Grove Rd (SR1106)  
 SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_  
 Facility Type: 35' x 73' SFD  New  Expansion  Repair  
 Basement?  Yes  No Basement Fixtures?  Yes  No  
 Type of Wastewater System\*\* 25% reduction (Initial) Wastewater Flow: 480 GPD  
 (See note below, if applicable  25% reduction (Repair))

**Installation Requirements/Conditions**

Septic Tank Size <u>1000</u> gallons	Number of trenches <u>3</u>	Exact length of each trench <u>100</u> feet	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size _____ gallons	Trenches shall be installed on contour at a	Maximum Trench Depth of: <u>12</u> inches	Soil Cover: <u>6</u> inches
	(Trench bottoms shall be level to +/- 1/4" in all directions)	(Maximum soil cover shall not exceed 36" above the trench bottom)	

Pump Requirements: \_\_\_\_\_ ft. TDH vs. \_\_\_\_\_ GPM Aggregate Depth: \_\_\_\_\_ inches below pipe  
 \_\_\_\_\_ inches above pipe  
 \_\_\_\_\_ inches total  
 Conditions: Must bring in 6" of Group II or Group III Soil for cover over ENTIRE Drain Field

**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: *M. D. ...* REH Date: 08-17-21  
 Construction Authorization Expiration Date: 08-17-26



Application # CPSF16-50039452

## Harnett County Department of Public Health Site Sketch

Property Location: 3930 Hillmon Grove Rd (1106)

Issued To: Onsite Homes

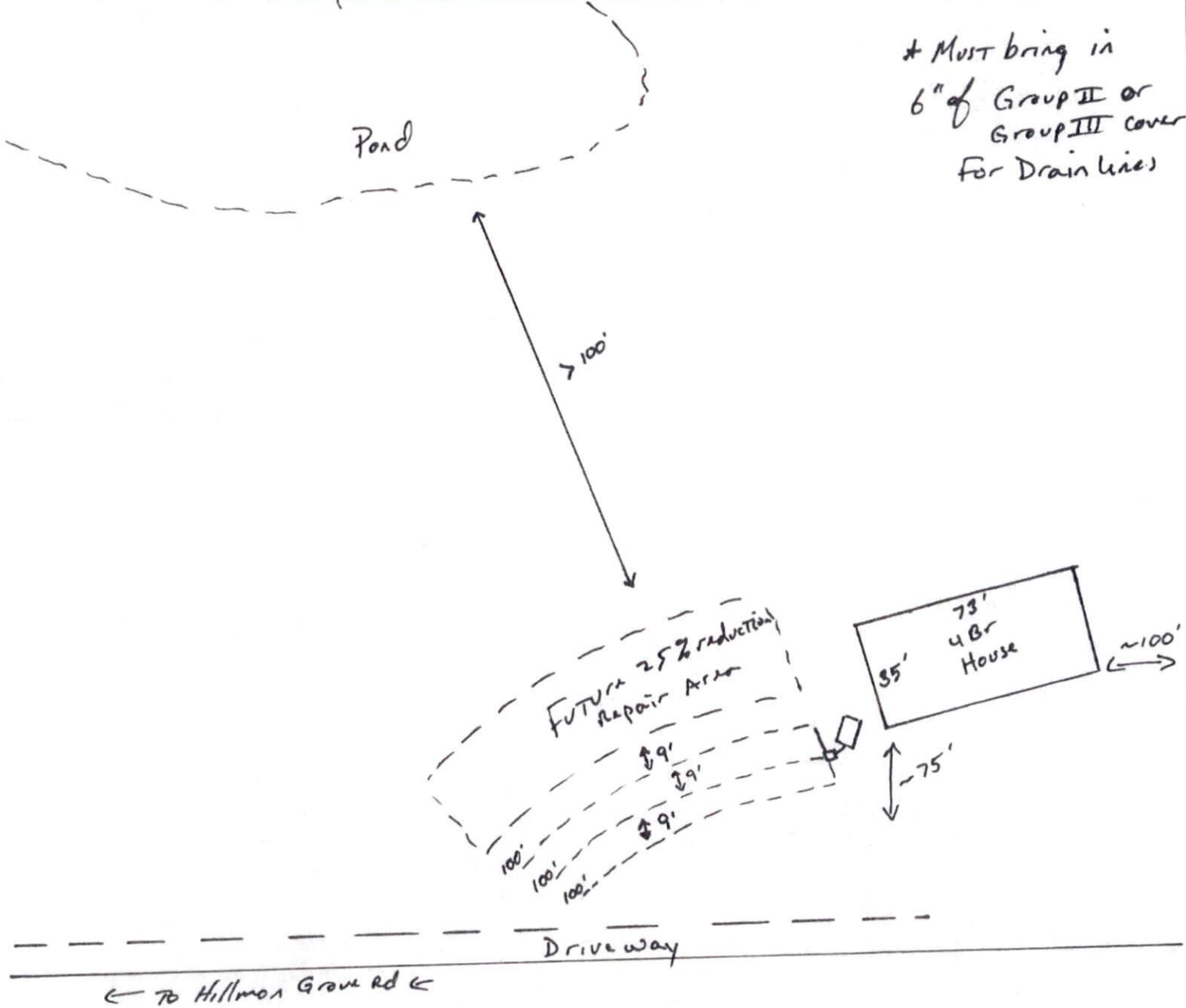
Subdivision \_\_\_\_\_

Lot # \_\_\_\_\_

Authorized State Agent: \_\_\_\_\_

*Moh [Signature]* REHS

Date: 08-17-21



\* Must bring in  
6" of Group II or  
Group III cover  
for Drain lines

This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.