

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

OWNER NAME Jonathan Markovich EMAIL ADDRESS: jonathanmarkovich@gmail.com
PHONE 910-964-9994
PHYSICAL ADDRESS 118 Timber Rail Lane, Holly Springs, NC 27540
MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) N/A
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME N/A

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: Directly off Hwy 42

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.

[Signature] 6/20/24
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) _____

Installer of system _____

Septic Tank Pumper _____

Designer of System _____

1. Number of people who live in house? 2 # adults 1 # children 3 # total
2. What is your average estimated daily water usage? 3700 gallons/month or day 119 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? April 25 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 _____
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?
Water coming out of the end of the last line. Been happening since home was built in 2022. It is documented.
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 2 Showers and wash dishes in sink, it comes up. Same as the last 2 years. It is well documented with the County and state. We have tried other repairs and had the state come out to observe and give advice.

For Registration Matthew S. Willis
 Register of Deeds
 Harnett County, NC
 Electronically Recorded
 2022 Feb 25 11:18 AM NC Rev Stamp: \$ 989.00
 Book: 4119 Page: 317 - 318 Fee: \$ 26.00
 Instrument Number: 2022004086

HARNETT COUNTY TAX ID #
 050646 0019 04

02-25-2022 BY: ED

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax:	\$989.00
Parcel ID:	050646 0019 04
Mail/Box to:	GRANTEE
Prepared by:	Adcock Law Firm, PA, 202 E. Academy St., Fuquay Varina, NC 27526
Brief description for the Index:	Lot 5, Map Number 2021 - 316

THIS GENERAL WARRANTY DEED ("Deed") is made on the 23RD day of FEBRUARY 2022, by and between:

GRANTOR	GRANTEE
TRIANGLE HOME PROS, LLC A North Carolina limited liability company 6312 Lauraca Lane Fuquay-Varina, NC 275826	JONATHAN MARKOVICH, an unmarried person 118 Timber Rail Lane Holly Springs, NC 27540

FOR VALUABLE CONSIDERATION paid by Grantee, the receipt and legal sufficiency of which is acknowledged, Grantor by this Deed does hereby grant, bargain, sell and convey to Grantee, in fee simple, all that certain lot, parcel of land or condominium unit in the City of _____, _____ Township, HARNETT County, North Carolina and more particularly described as follows (the "Property"):

BEING all of Lot 5, having an Area = 1.250± acres, as shown on that map entitled "Minor Subdivision For: Triangle Home Pros LLC," and recorded in Map Number 2021, Page 316, Harnett County Registry, reference to which is hereby made for greater certainty of description.

All or a portion of the Property was acquired by Grantor by instrument recorded in Book 3707 page 386.

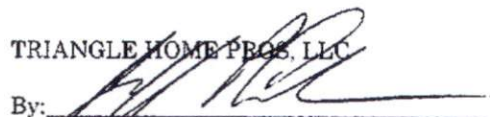
All or a portion of the Property includes or does not include the primary residence of a Grantor.

A map showing the Property is recorded in Plat Book 2021 page 316.

TO HAVE AND TO HOLD the Property and all privileges and appurtenances thereto belonging to Grantee in fee simple. Grantor covenants with Grantee that Grantor is seized of the Property in fee simple, Grantor has the right to convey the Property in fee simple, title to the Property is marketable and free and clear of all encumbrances, and Grantor shall warrant and defend the title against the lawful claims of all persons whomsoever, other than the following exceptions:

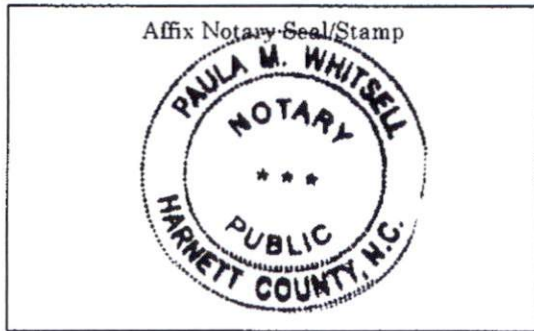
1. All easements, covenants, restrictions and right of ways of record;
2. 2022 ad valorem taxes;
3. All matters as shown in Map Number 2021, PAGE 316, Harnett County Registry;
4. Right of way of Timber Rail Lane.

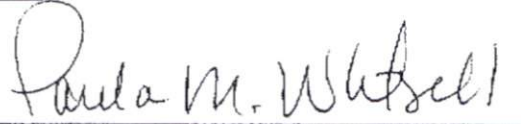
IN WITNESS WHEREOF, Grantor has duly executed this North Carolina General Warranty Deed, if an entity by its duly authorized representative.

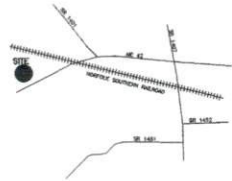
TRIANGLE HOME PROS, LLC
 By: 
 Name: JEFFRY P. CULVER
 Title: MEMBER/MANAGER

STATE OF NORTH CAROLINA, COUNTY OF WAKE

I PAULA M. WHITSELL, a Notary Public, do hereby certify that the following person(s) personally appeared before me on the 24TH day of FEBURARY 2022 each acknowledging to me that he or she signed the foregoing document, in the capacity represented and identified therein (if any): JEFFRY P. CULVER.




 Notary Public (Official Signature)
 My commission expires: 13 AUG 2023



VICINITY MAP (NTS)

N.C. GEO. NORTH, MAG. 83 (2011)
 NAD 83
 AUGUST 30, 2019
 SPECTRA 80

CERTIFICATION OF OWNERSHIP, DEDICATION AND JURISDICTION
 I HEREBY CERTIFY THAT I AM (ONE AND) THE OWNER(S) OR AGENT OF THE PROPERTY SHOWN AND DESCRIBED HEREON AND THAT I (WE) HEREBY ADOPT THE PLAN OF SUBDIVISION WITH ANY/OUR FREE CONSENT, ESTABLISH THE SHOWN BUILDING SETBACK 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 EXCEPT:

DATE: 02/11/2021
 TAX PARCEL ID NUMBER: 0628-60-8574-000
 OWNER: Triangle Home Pros By [Signature]

I HEREBY CERTIFY THAT THE DEVELOPMENT DEPICTED HEREON HAS BEEN GRANTED FINAL APPROVAL FROM THE HARNETT COUNTY E-911 ADDRESSING, ENVIRONMENTAL HEALTH PLANNING, PUBLIC UTILITIES, AND THE NORTH CAROLINA DEPARTMENT OF TRANSPORTATION. THIS PLAN IS SUBJECT TO ANY AND ALL CONDITIONS STATED BELOW AND IS ELIGIBLE FOR RECORDED IN THE HARNETT COUNTY REGISTER OF DEEDS WITHIN THIRTY DAYS OF THE DATE BELOW.

E-911 ADDRESSING - NA
 PUBLIC UTILITIES (NOT FOR CONSTRUCTION) - Water Available
 NCDOT - Change of use requires new permit
 [Signature] 7-22-21
 SUBDIVISION ADMINISTRATOR DATE

STATE OF NORTH CAROLINA
 COUNTY OF HARNETT

[Signature] REVIEW OFFICER OF HARNETT COUNTY
 [Signature] REVIEW OFFICER
 DATE: 7-22-21

NORTH CAROLINA - HARNETT COUNTY

FILED DATE: July 27, 2021 TIME: 2:34 PM
 MAP NUMBER: 2021-316

REGISTER OF DEEDS
 MATTHEW S. WELLS

BY: [Signature] ASST. DEPUTY REGISTER OF DEEDS
Supriya

State of North Carolina, Wake County

I, James W. Mauldin, certify that this map was drawn under my supervision from an actual survey made under my supervision, that the ratio of precision as calculated by latitude and departure is 1/10,000, that the boundaries not surveyed are shown as broken lines plotted from information in book SET page 322, that this map was prepared in accordance with C.S. 47-30 as amended.

Witness my hand and seal this 11 day of Feb, 2021.

SIGNATURE: [Signature]
 Licensed Member L-3247



- I, James W. Mauldin, Professional Land Surveyor No. L-3247, certify to one or more of the following as indicated:
- a. That the plat is a survey that creates a subdivision of land within the area of a county or municipality that has an ordinance that regulates parcels of land.
 - b. That the plat is a survey that is located in each portion of a county or municipality that is unincorporated or to an ordinance that regulates parcels of land.
 - c. That the plat is a survey of an existing parcel or process of land.
 - d. That the plat is a survey of another category, such as the reestablishment of existing parcels, a court-ordered survey or other exception to the definition of subdivision.
 - e. That the information available to the surveyor is such that I am unable to make a determination to the best of my professional ability as to processes contained in (a) through (d) above.

[Signature]
 James W. Mauldin, Professional Land Surveyor No. L-3247

**HARNETT COUNTY
 MINIMUM BUILDING
 SETBACK REQUIREMENTS**

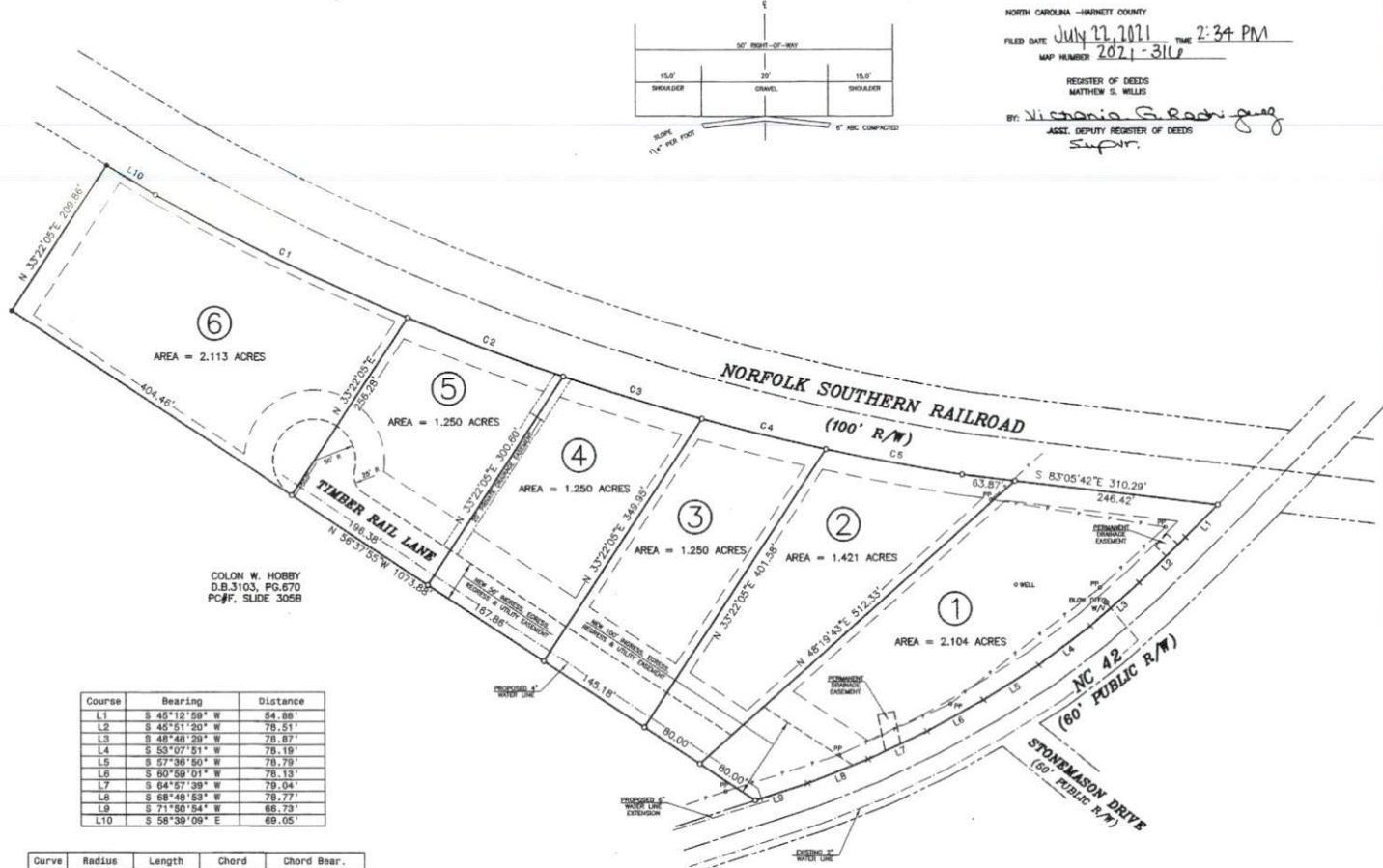
FRONT: 35' FROM R/W
 REAR: 25'
 SIDE: 10'
 CORNER LOT SIDE: 20'

REFERENCES:
 PG#1, SLIDE 331
 D.B. 3707, PG. 369
 OTHER REFERENCES AS SHOWN

NOTES:
 (A.) THE PROPERTY SHOWN HEREON IS SUBJECT TO ALL EASEMENTS OF RECORD AFFECTING SAME.
 (B.) NO TITLE SEARCH HAS BEEN PERFORMED BY THIS FIRM DURING THE COURSE OF THIS SURVEY.
 (C.) THIS SURVEYOR DOES NOT CERTIFY TO THE EXISTENCE OR NON-EXISTENCE OF ANY UNDERGROUND UTILITIES THAT MAY OR MAY NOT BE PRESENT ON THIS SITE.
 (D.) SEAP MAINTENANCE AGREEMENT: D.B. 4011, PG. 577-579
(E.) SEE D.B. 3971, PG. 629-663 FOR HRW UTILITY EASEMENT.
 THE SURVEYOR RELIED UPON THE CITY OR COUNTY FOR APPROVAL OF ALL APPLICABLE ORDINANCE AND HAS MADE NO INTERPRETATIONS OF THE ORDINANCES.

- LEGEND:
 ● Existing Iron Pipe (Control Point)
 ○ Iron Stake Set (unless otherwise noted)
 ■ Existing Concrete Monument (Control Point)
 □ Concrete Monument Set
 X Computed Point Only

All measurements shown are horizontal ground measurements unless otherwise noted.
 Area computed by coordinates
 Zone: 18N-20M Proj: 0628-60-8574-000



COLON W. HOBBY
 D.B. 3103, PG. 670
 PG#F. SLIDE 305B

Course	Bearing	Distance
L1	S 45°12'59" W	84.89'
L2	S 45°51'20" W	78.51'
L3	S 48°48'29" W	78.87'
L4	S 53°07'51" W	78.19'
L5	S 57°39'50" W	78.79'
L6	S 60°59'01" W	78.13'
L7	S 64°57'39" W	79.04'
L8	S 68°48'53" W	78.77'
L9	S 71°50'54" W	88.73'
L10	S 58°39'09" E	69.05'

Curve	Radius	Length	Chord	Chord Bear.
C1	2945.90'	338.51'	338.32'	S 64°08'07" E
C2	2945.90'	201.38'	201.32'	S 69°21'07" E
C3	2945.90'	174.89'	174.86'	S 73°09'43" E
C4	2945.90'	154.10'	154.08'	S 76°12'44" E
C5	2945.90'	168.14'	168.12'	S 79°20'46" E

FOR REGISTRATION
 File# 2021-316
 REGISTER OF DEEDS
 HARNETT COUNTY, NC
 2021 JUL 22 02:34:24 PM
 BK: 2021 PG: 316
 INSTRUMENT # 2021016910



OWNER:
 TRIANGLE HOME PROS LLC
 6312 LAURACA LANE
 FUQUAY-VARINA, N.C. 27526

**MINOR SUBDIVISION FOR:
 TRIANGLE HOME PROS LLC**

BUCKHORN TOWNSHIP, HARNETT COUNTY, NORTH CAROLINA
 SCALE 1" = 100' AUGUST 30, 2019
 REVISED: JANUARY 22, 2020 (REVISE DRIVEWAY INTERSECTION)

MAULDIN - WATKINS SURVEYING, P.A.
 P.O. BOX 444 / 139 N. MAIN STREET
 FUQUAY VARINA, NORTH CAROLINA 27526
 (919) 552-9326 C-929

Harnett County Department of Public Health

Operation Permit

PERMIT # _____

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 118 Timber Rail LN, SR, Hwy 42
SUBDIVISION _____ LOT # 5

Name: (owner) J. Markovich

System Installer: J. Adcock

Basement with plumbing: Garage Number of Bedrooms 3

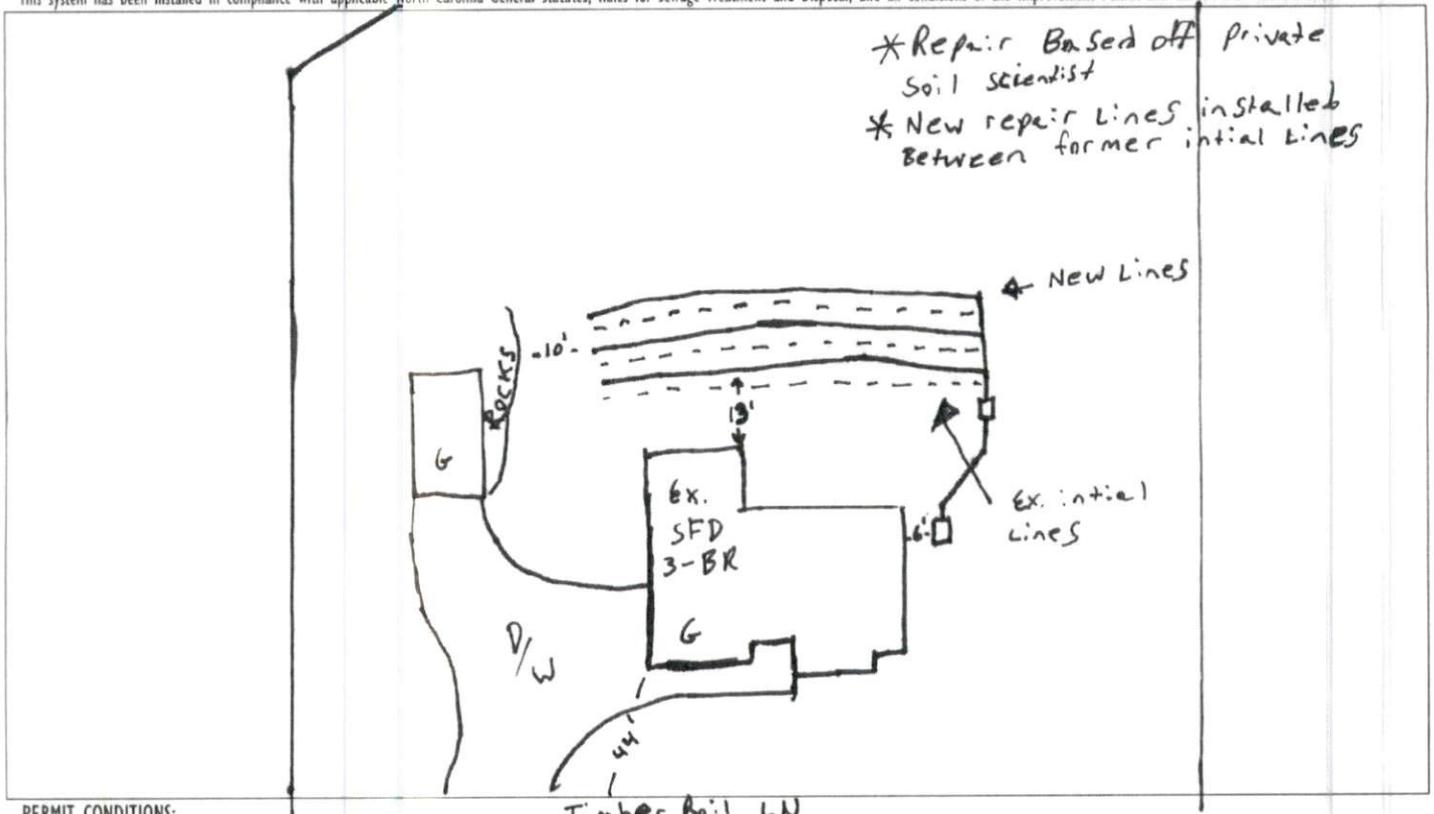
Type of Water Supply: Community Public Well Distance from well _____ feet

System Type: 25% Reduction EZ Flow 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 EZ Flow Septic Tank: 1100 gallons Pump Tank: _____ gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 100 feet ditches 3 feet ditches 12 max inches
French Drain Required: _____ Linear feet

Authorized State Agent James E. Markovich ^{REHS} Date 9-7-23

Harnett County Department of Public Health

Operation Permit

PERMIT # SFD 2108-0022

New Installation Septic Tank Nitrification Line Repair Expansion

PROPERTY LOCATION: 118 TIMBER RAIL LN (NC 42)

Name: (owner) TRIANGLE HOME PROS SUBDIVISION LOT # 5

System Installer: ADCOCK EXCAVATING

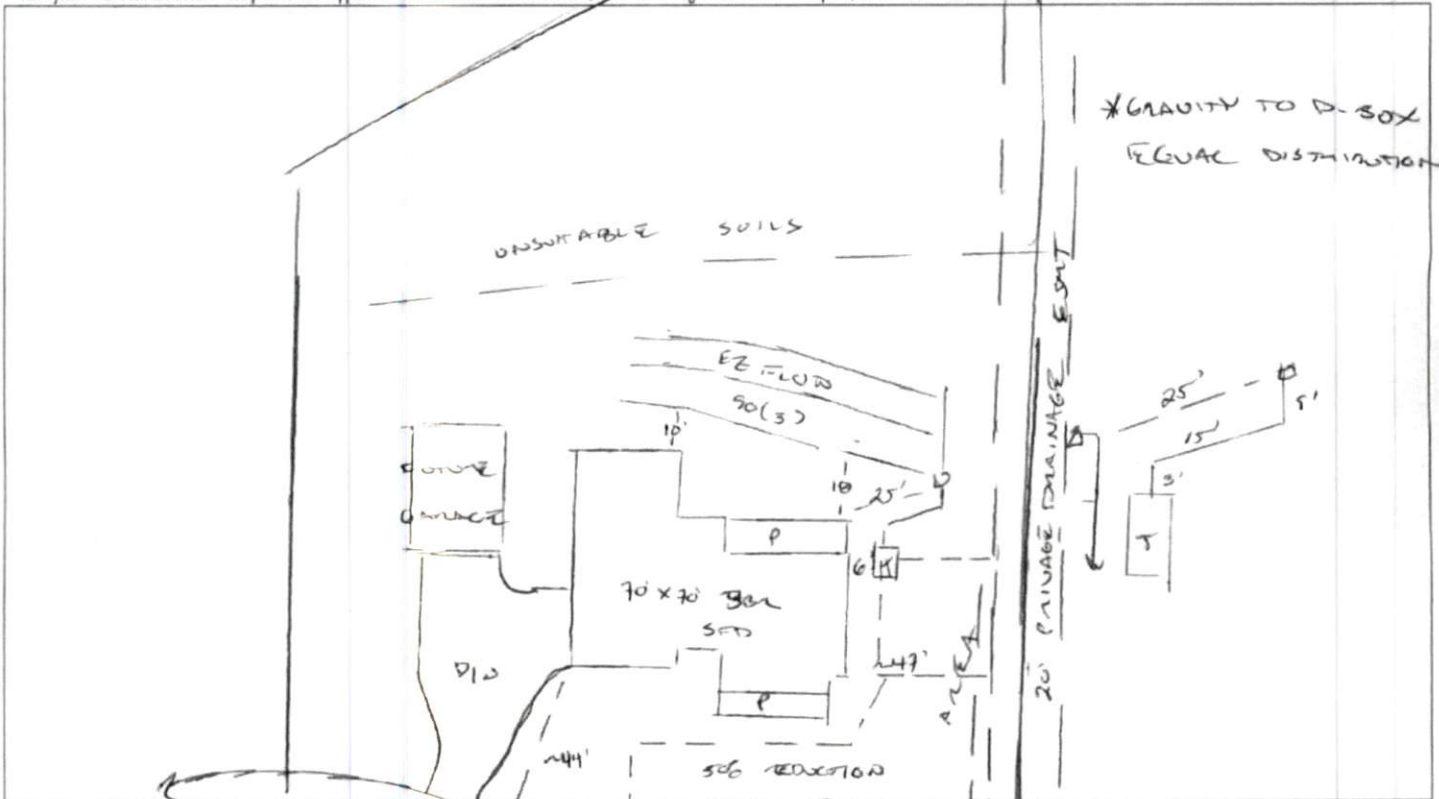
Basement with plumbing: Garage Number of Bedrooms 3

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

System Type: 25% REDUCTION SYS. IIIg 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: TIMBER RAIL LN.
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 EE FLOW IIIg Septic Tank: 1000 gallons Pump Tank: _____ gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 90 feet ditches 3 feet ditches 18 inches
French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 01/11/2022

Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 118 Timber Rail Ln. (NC 42)
 SUBDIVISION _____ LOT # 5

ISSUED TO: Triangle Home Pros
 NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance: _____

Type of Structure: 70x70 sfd. 3 beds 2.5 baths
 Proposed Wastewater System Type: 25% Reduction Sys
 Projected Daily Flow: 360 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 NA feet Permit valid for: Five years
 No expiration
 Permit conditions: _____

Authorized State Agent: [Signature] Date: 08/25/2021 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: Triangle Home Pros PROPERTY LOCATION: 118 Timber Rail Ln. (NC 42)
 SUBDIVISION _____ LOT # 5

Facility Type: 70x70 sfd. 3 beds 2.5 ba New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** 25% Reduction System (Initial) Wastewater Flow: 360 GPD
 (See note below, if applicable
Pump to 50% Red. PPBPS Sys. (Repair)

Installation Requirements/Conditions

Septic Tank Size <u>1000</u> gallons	Number of trenches <u>3</u>	Trench Spacing: <u>9</u> Feet on Center
Pump Tank Size _____ gallons	Exact length of each trench <u>90</u> feet	Soil Cover: <u>6</u> inches
	Trenches shall be installed on contour at a	(Maximum soil cover shall not exceed
	Maximum Trench Depth of: <u>18</u> inches	<u>36"</u> above the trench bottom)
	(Trench bottoms shall be level to +/- 1/4"	
	in all directions)	
Pump Requirements: _____ ft. TDH vs _____ GPM		Aggregate Depth: <u>NA</u> inches below pipe
		<u>NA</u> inches above pipe
Conditions: <u>Gravity to D-Box Equal Distribution Required</u>		<u>NA</u> 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: [Signature] Date: 08/25/2021
[Signature] Construction Authorization Expiration Date: 08/25/2026

Application # SFD2108-0022

Harnett County Department of Public Health Site Sketch

Property Location: 118 Timber Rail Ln. (NC 42)

Issued To: Triangle Home Pros

Subdivision

Lot # 5

Authorized State Agent: *[Signature]*

Date: 08/26/2021

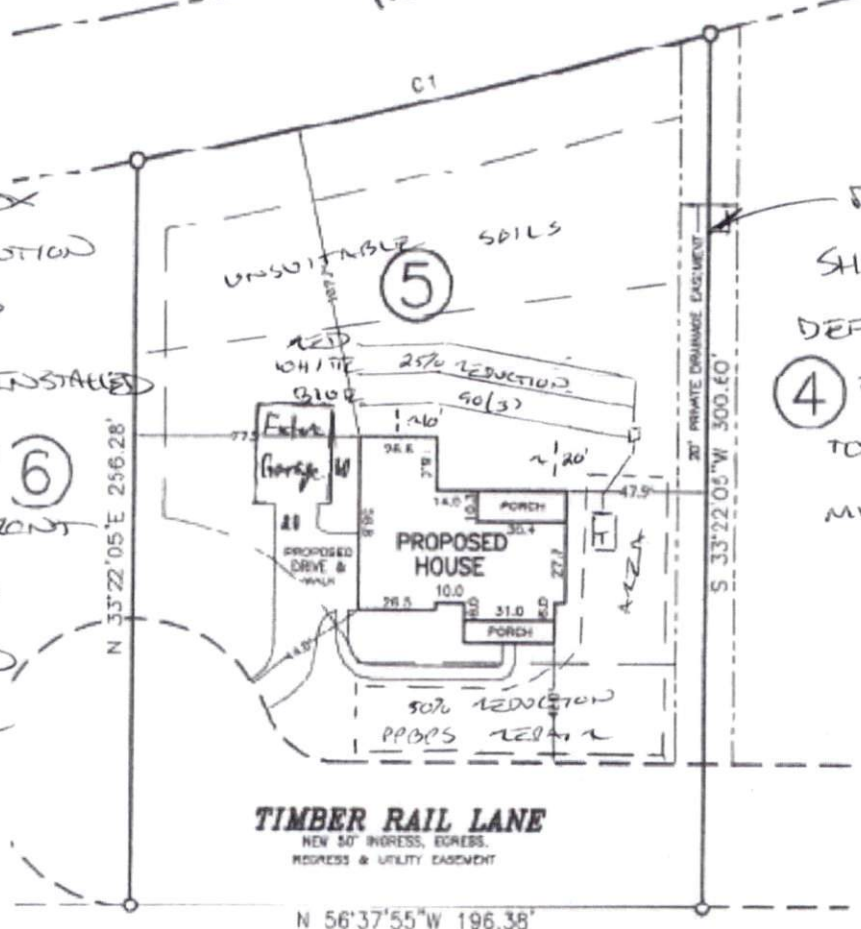
ADDITION CURVE
NORFOLK SOUTHERN RAILROAD
(100' R/W)

*GRAVITY TO D-BOX
EQUAL DISTRIBUTION
REQUIRED

*SIS. SHALL BE INSTALLED
TIGHT TO SID (6)
ON PUMP TO FRONT
REQUIRED

*SIS. FLAGGED
ONSITE

DRAINAGE RESMT
SHALL BE CLEARLY
DEFINED AND
(4) FULLY FUNCTION
TO DIVERT WATER
MUNT OFF SYSTEM



TIMBER RAIL LANE
NEW 50' INGRESS, EGRESS,
REGRESS & UTILITY EASEMENT

N 56°37'55\"/>

LOT 5 OF
PROS TIC S/D

Curve	Radius	Length	Chord	Cho
C1	2945.90'	201.28'	201.22'	C RO

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