

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

Stacy.Palmer@clavita.com

EMAIL ADDRESS: ~~Stacy.Palmer@clavita.com~~

OWNER NAME Stacy Palmer PHONE 300-791-1689

PHYSICAL ADDRESS 18 Five Ponds Cir Sanford NC 27332

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: \_\_\_\_\_

**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.

Stacy Palmer  
Owner Signature

11/25/24  
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) 1999

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

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

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

1. Number of people who live in house? 2 # adults 2 # children 4 # 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 Stacy Palmer

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

4. When was the septic tank last pumped? 2022 How often do you have it pumped? \_\_\_\_\_

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?  
fabuloso

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 \_\_\_\_\_

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?

there was a whole next to the septic now lid has fallen in found 11/23/24. lid collapsed inside

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 \_\_\_\_\_



Matthew S. Willis Register of Deeds

Harnett County, NC

Electronically Recorded

11/10/2022 03:22:39 PM

NC Rev Stamp: \$500.00

Book: 4173 Page: 1211 - 1213 (3) Fee: \$26.00

Instrument Number: 2022113193

HARNETT COUNTY TAX ID #  
03958705 0020 54 AND OTHER

11-10-2022 BY: LA

### NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 500.00

Parcel Identifier No. SEE LEGAL Verified by \_\_\_\_\_ County on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
By: \_\_\_\_\_

Mail/Box to: Law Office Miranda R. McCoy, 3620 Legion Road, Hope Mills, NC 28348

This instrument was prepared by: Law Office Miranda R. McCoy, 3620 Legion Road, Hope Mills, NC 28348

Brief description for the Index: LOT 54 & 60, PH 3, The Farms @ Five Ponds

THIS DEED made this 7 day of November, 2022, by and between

**GRANTOR**

Gabrielle Downs, unmarried  
7722 NC 27  
Lillington, NC 27546

Trustin Michael Downs and wife  
Lissett Barrientos c/o Law Office of Miranda R. McCoy  
3620 Legion Road  
Hope Mills, NC 28348

**GRANTEE**

Stacy Palmer and spouse  
Steven Johnson  
18 Five Ponds Dr  
Sanford, NC 27332

*CR*

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 \_\_\_\_\_ Sanford \_\_\_\_\_ Township, \_\_\_\_\_ Harnett \_\_\_\_\_ County, North Carolina and more particularly described as follows:

BEING ALL OF LOT 54 & 60, IN A SUBDIVISION KNOWN AS FARMS AT FIVE PONDS, PHASE 3, AND THE SAME BEING RECORDED IN PLAT CABINET 99, PAGE 307 HARNETT COUNTY REGISTRY, NORTH CAROLINA.

Property Address: 18 Five Ponds Drive Sanford NC 27332 Lot 54 Parcel 03958705 0020 54  
64 Blanchard Road, Sandford NC 27332 Lot 60 Parcel 03958705 0020 60

The property hereinabove described was acquired by Grantor by instrument recorded in Book 3699 page 540;  
All or a portion of the property herein conveyed \_\_\_\_\_ includes or X does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book 99 page 307.

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 ALL VALID AND SUBSISTING RESTRICTIONS, RESERVATIONS, COVENANTS, CONDITIONS, RIGHTS OF WAYS AND EASEMENTS PROPERLY OF RECORD, IF ANY, AND AD VALOREM TAXES DUE FOR THE CURRENT YEAR.

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

By: \_\_\_\_\_ (Entity Name) Trustin Michael Downs (SEAL)  
Print/Type Name: Trustin Michael Downs

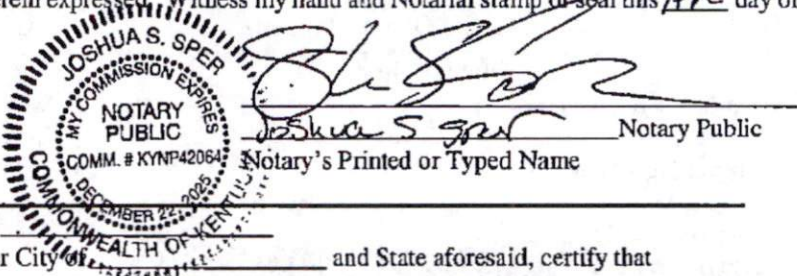
By: \_\_\_\_\_ Lissett Barrientos (SEAL)  
Print/Type Name & Title: \_\_\_\_\_  
Print/Type Name: Lissett Barrientos

By: \_\_\_\_\_ (SEAL)  
Print/Type Name & Title: \_\_\_\_\_  
Print/Type Name: \_\_\_\_\_

By: \_\_\_\_\_ (SEAL)  
Print/Type Name & Title: \_\_\_\_\_  
Print/Type Name: \_\_\_\_\_

State of Kentucky - County or City of Farrar  
I, the undersigned Notary Public of the County or City of Anderson and State aforesaid, certify that Trustin Michael Downs and spouse, Lissett Barrientos 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 7th day of November, 2022.

My Commission Expires: 12/24/2025  
(Affix Seal)



State of \_\_\_\_\_ - County or City of \_\_\_\_\_  
I, the undersigned Notary Public of the County or City of \_\_\_\_\_ and State aforesaid, certify that \_\_\_\_\_ 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 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
(Affix Seal) \_\_\_\_\_ Notary Public  
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 \_\_\_\_\_ personally came before me this day and acknowledged that he is the \_\_\_\_\_ of \_\_\_\_\_, a North Carolina or \_\_\_\_\_ corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity, he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
(Affix Seal) \_\_\_\_\_ Notary Public  
Notary's Printed or Typed Name



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 ALL VALID AND SUBSISTING RESTRICTIONS, RESERVATIONS, COVENANTS, CONDITIONS, RIGHTS OF WAYS AND EASEMENTS PROPERLY OF RECORD, IF ANY, AND AD VALOREM TAXES DUE FOR THE CURRENT YEAR.

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

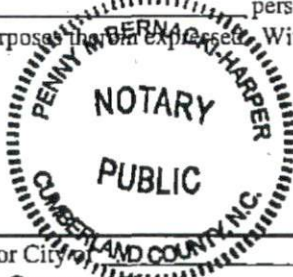
By: \_\_\_\_\_ (Entity Name) Gabrielle Downs (SEAL)  
Print/Type Name: Gabrielle Downs

By: \_\_\_\_\_ (SEAL)  
Print/Type Name & Title: \_\_\_\_\_ Print/Type Name: \_\_\_\_\_

By: \_\_\_\_\_ (SEAL)  
Print/Type Name & Title: \_\_\_\_\_ Print/Type Name: \_\_\_\_\_

By: \_\_\_\_\_ (SEAL)  
Print/Type Name & Title: \_\_\_\_\_ Print/Type Name: \_\_\_\_\_

State of NC - County or City of Cumberland  
I, the undersigned Notary Public of the County or City of Cumberland and State aforesaid, certify that Gabrielle Downs 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 27 day of October, 2022



My Commission Expires: 7/26/2027  
(Affix Seal) Penny H. Bernacki-Harper Notary Public  
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 \_\_\_\_\_ 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 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
(Affix Seal) \_\_\_\_\_ Notary Public  
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 \_\_\_\_\_ personally came before me this day and acknowledged that \_\_\_\_\_ he is the \_\_\_\_\_ of \_\_\_\_\_, a North Carolina or \_\_\_\_\_ corporation/limited liability company/general partnership/limited partnership (strike through the inapplicable), and that by authority duly given and as the act of such entity, \_\_\_\_\_ he signed the foregoing instrument in its name on its behalf as its act and deed. Witness my hand and Notarial stamp or seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My Commission Expires: \_\_\_\_\_  
(Affix Seal) \_\_\_\_\_ Notary Public  
Notary's Printed or Typed Name



# OPERATIONS PERMIT

Name: (owner) Pine Grove Dev.  New Installation  Septic Tank  
 Property Location: SR# ~~1113~~ 1114  Repairs  Nitrification Line  
 Subdivision Farmat 5 Pond Lot # 54  
 TAX ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_  
 Contractor: Ph. Is Backhoe Registration # \_\_\_\_\_  
 Basement with Plumbing:  Garage:  Change from EEE-222 to  
 Water Supply:  Well  Public  Community to conventional because it  
 Distance From Well: 50 ft. would fit & have repair

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

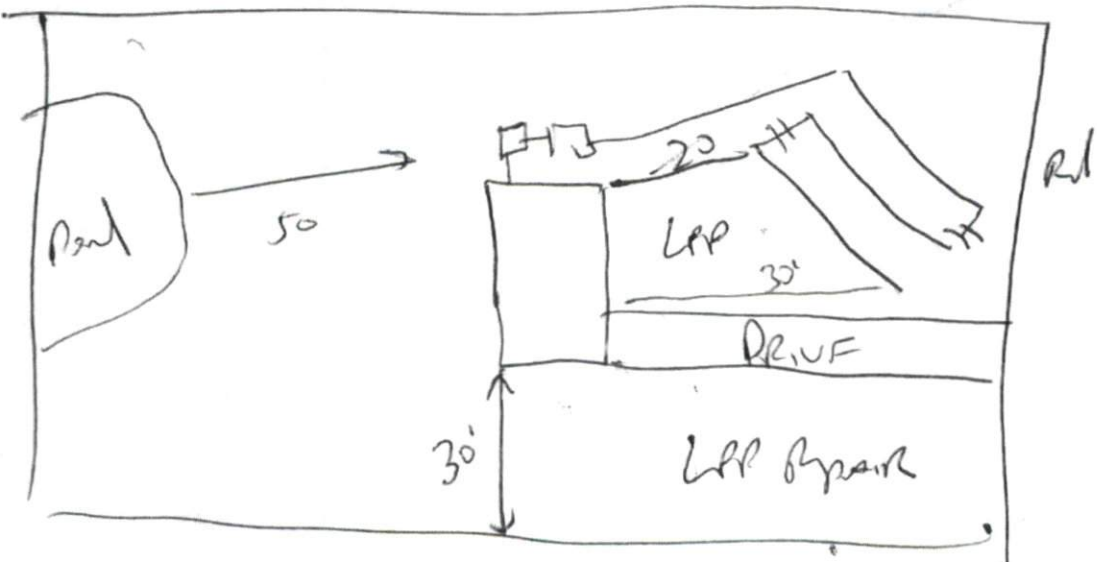
Type of system:  Conventional  Other Repair to Conventional  
 Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons  
 Subsurface Drainage Field No. of ditches 1 exact length of each ditch 220 ft. width of ditches 1 ft. depth of ditches 18 in.  
 French Drain: \_\_\_\_\_ Linear feet

Date: 5-21-99

PERMIT NO. \_\_\_\_\_

Inspected by: Joe WARRS  
Environmental Health Specialist

SR1114





# IMPROVEMENT 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."

Name: (owner) Pine Grove Development Corp  New Installation  Septic Tank  
 Property Location: SR# 1114 Blanchard  Repairs  Nitrification Line

Subdivision Farm @ Five Ponds Ph III Lot # 54

Tax ID # \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 Lot Size: 1.06 AC

Basement with Plumbing:  Garage:  MUST USE Filters & RISERS

Water Supply:  Well  Public  Community

Distance From Well: 50min ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system:  Conventional  Other Pump to ~~Conventional~~ <sup>Polyethylene Aggregate Trench System</sup>

Size of tank: Septic Tank: 1000 gallons Pump Tank: 1000 gallons IWUS-95-3R

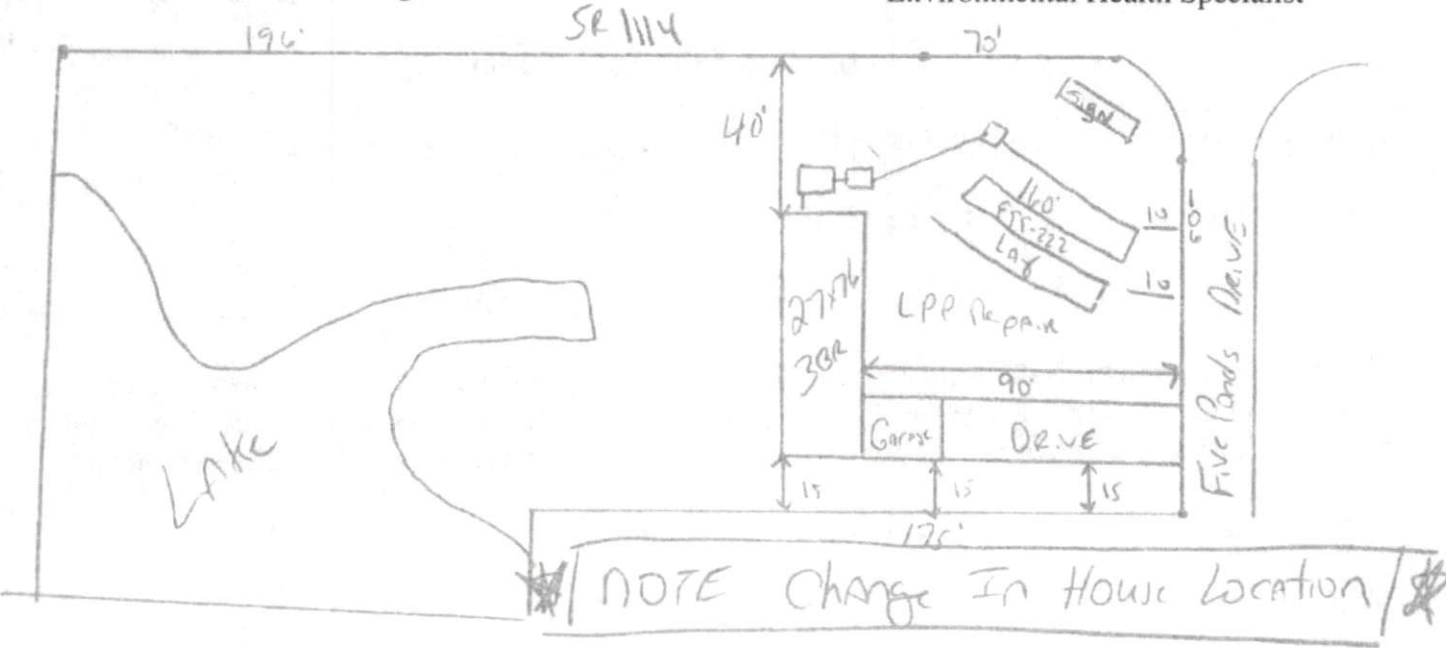
Subsurface Drainage Field No. of ditches 1 exact length of each ditch 160 ft. width of ditches 3 ft. depth of ditches 18 in. EEE-222 Lag

French Drain Required: \_\_\_\_\_ Linear feet EEE-222 Lag

Date: 3-25-99

Signed: [Signature]  
 Environmental Health Specialist

This permit is subject to revocation if site plans or intended use change.



18" dia depth follow contours  
 Meet onsite & be installed  
 Do not Drive or park on septic system



HARNETT COUNTY HEALTH DEPARTMENT  
AUTORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Health Department Improvement Permit # 15879. This 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.

Owner or Authorized Agent Pine Grove Dev

Name: \_\_\_\_\_ Telephone # \_\_\_\_\_

Address: \_\_\_\_\_

Property Location: SR # 1114 Road Name \_\_\_\_\_

New Installation  Repair \_\_\_\_\_ Septic Tank  Nitrification Lines

Subdivision Farm @ Five Barb Ph III Lot # 54

Number of Bedrooms Proposed: 3 Lot size: 1.06 ac

Basement \_\_\_\_\_ With Plumbing \_\_\_\_\_ Without Plumbing \_\_\_\_\_

Water Supply: Well \_\_\_\_\_ Public  Minimum Well Setback: \_\_\_\_\_ ft.

Type of System: Conventional  Other  ES E-2224g

Tank Volume: Septic Tank 1900 gallons Pump Chamber 1000 gallons

Nitrification Field Specifications

Number of fields 1 Number of Lines per Field 1 Length of lines 160

Width of ditches 3 ft. Depth of ditches 18 inches ES E-2224g

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

Name: [Signature] Date: 3-25-97