

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: elmclea40@gmail.com

OWNER NAME Elmira Garner PHONE 919 356-2483

PHYSICAL ADDRESS 2085 Darroch Rd. Lillington, NC 27546

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 529 Walnut Dr. Sanford, NC 27730

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME Elmira Garner

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: 210 South make right onto Darroch Rd.  
about 15 miles.

**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. NO wells
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.

Elmira Garner  
Owner Signature

12-19-24  
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) built 1970  
Installer of system Narvel Campbell  
Septic Tank Pumper \_\_\_\_\_  
Designer of System \_\_\_\_\_

1. Number of people who live in house? 3 # adults \_\_\_\_\_ # children 3 # 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 \_\_\_\_\_
3. If you have a garbage disposal, how often is it used?  daily  weekly  monthly No disposal
4. When was the septic tank last pumped? This year How often do you have it pumped? 3 or 4 yrs.
5. If you have a dishwasher, how often do you use it?  daily  every other day  weekly N/A
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?  
N/A
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?  
N/A
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 Toilet
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 roof, gutters
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?  
Ongoing problems. The tank was installed but unlevel  
Now I need the tank lifted to level.
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 \_\_\_\_\_

200006990

HARNETT COUNTY NC  
Book 1417  
Pages 0293-0294

A298-10  
R298-04

**QUITCLAIM DEED**

FILED 2 PAGE(S)  
05/12/2000 2:48 PM  
KIMBERLY S. HARGROVE  
Register Of Deeds

PREPARED BY : ELMIRA MCLEAN

THIS QUITCLAIM DEED, Executed this 14 day of APRIL, 2000,

by first party, Grantor, KENNETH M. MCLEAN

whose post office address is 3610 64TH AVE. LANDOVER, MARYLAND 20785.

to second party, Grantee, ELMIRA MCLEAN

whose post office address is 2121 DARROCH ROAD LILLINGTON, NC. 27546

WITNESSETH, That the said first party, for good consideration and for the sum of Dollars (\$ 0 ) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances there-to in the County of HARNETT, State of NORTH CAROLINA to wit:  
ANDERSON CREEK TOWNSHIP

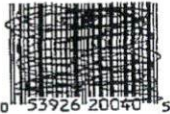
BEGINNING AT A STAKE IN THE WESTERN MARGIN OF STATE PAVED ROAD NUMBER 1128 AT ITS INTERSECTION WITH THE SOUTHEASTERN LINE OF THE MCLEAN LAND, AND RUNNING THENCE WITH THE SOUTHEASTERN LINE SOUTH 23 DEGREES 00 MINUTES WEST 254.8 FEET TO A CORNER, A FINE LIGHTWOOD STAKE; THENCE A NEW LINE NORTH 22 DEGREES 30 MINUTES WEST 273 FEET TO A STAKE; THENCE NORTH 35 DEGREES 30 MINUTES EAST 215.6 FEET TO A STAKE IN THE WESTERN MARGIN OF STATE PAVED ROAD NUMBER 1128; THENCE WITH TAHT LINE SOUTH 22 DEGREES 30 MINUTES EAST 208 FEET TO THE BEGINNING CORNER, CONTAINING ONE ACRE, MORE OR LESS, AND BEING A PART OF THE SAME LAND CONVEYED TO GRANTOR BY H.M. THOMAS AND WIFE, LOULSE THOMAS, BY DEED DATED JANUARY 19, 1957 AND RECORDED IN BOOK 367 PAGE 117 IN THE OFFICE OF THE REGISTER OF DEEDS FOR HARNETT COUNTY, NORTH CAROLINA.

ZAHE  
(1)

(Revised 3/97)

If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

HARNETT COUNTY TAX ID #
01-0526-0049
5-12-00



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IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Douglas H. Devore  
Signature of Witness

Kenneth M. McLean  
Signature of First Party

DOUGLAS H. DEVORE  
Print name of Witness

Kenneth M. McLean  
Print name of First Party

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of First Party

\_\_\_\_\_  
Print name of Witness

\_\_\_\_\_  
Print name of First Party

State of MARYLAND  
County of ALLEGANY  
On 4/18/00 before me,  
appeared KENNETH M. McLEAN

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  
WITNESS my hand and official seal.

MY COMMISSION  
4/28/2001



William D. Heltrick  
Signature of Notary  
William D. Heltrick

Affiant      Known      Produced ID       
Type of ID     

State of \_\_\_\_\_  
County of \_\_\_\_\_  
On \_\_\_\_\_ before me,  
appeared \_\_\_\_\_

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  
WITNESS my hand and official seal.

\_\_\_\_\_  
Signature of Notary

Affiant      Known      Produced ID       
Type of ID       
(Seal)

\_\_\_\_\_  
Signature of Preparer

\_\_\_\_\_  
Print Name of Preparer

\_\_\_\_\_  
Address of Preparer

(2)  
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If your state requires 8 1/2" x 11" forms, cut off the bottom of this page at the dotted line.

North Carolina - Harnett County  
The foregoing certificate(s) of William Stephen Helmick,  
Notary Public, Allegany Co., Maryland  
Notary Public (Notaries Public) is/are certified to be  
correct. This instrument was presented for registration  
and recorded in this office at Book 1411 page 293-294  
This 18th day of May, 2000  
at 2:48 o'clock P. M.  
Kimberly S. Hargrove Sec'y: Linda C Smith  
Register of Deeds - Ass't. Deputy

# Harnett County Department of Public Health

## Operation Permit

PERMIT # EH2108-0020

New Installation  Septic Tank  Nitrification Line  Repair  Expansion  
 PROPERTY LOCATION: 2085 Darroch Rd (SR 1128)

Name: (owner) Elmira Garner SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_

System Installer: Harold Carter #3252

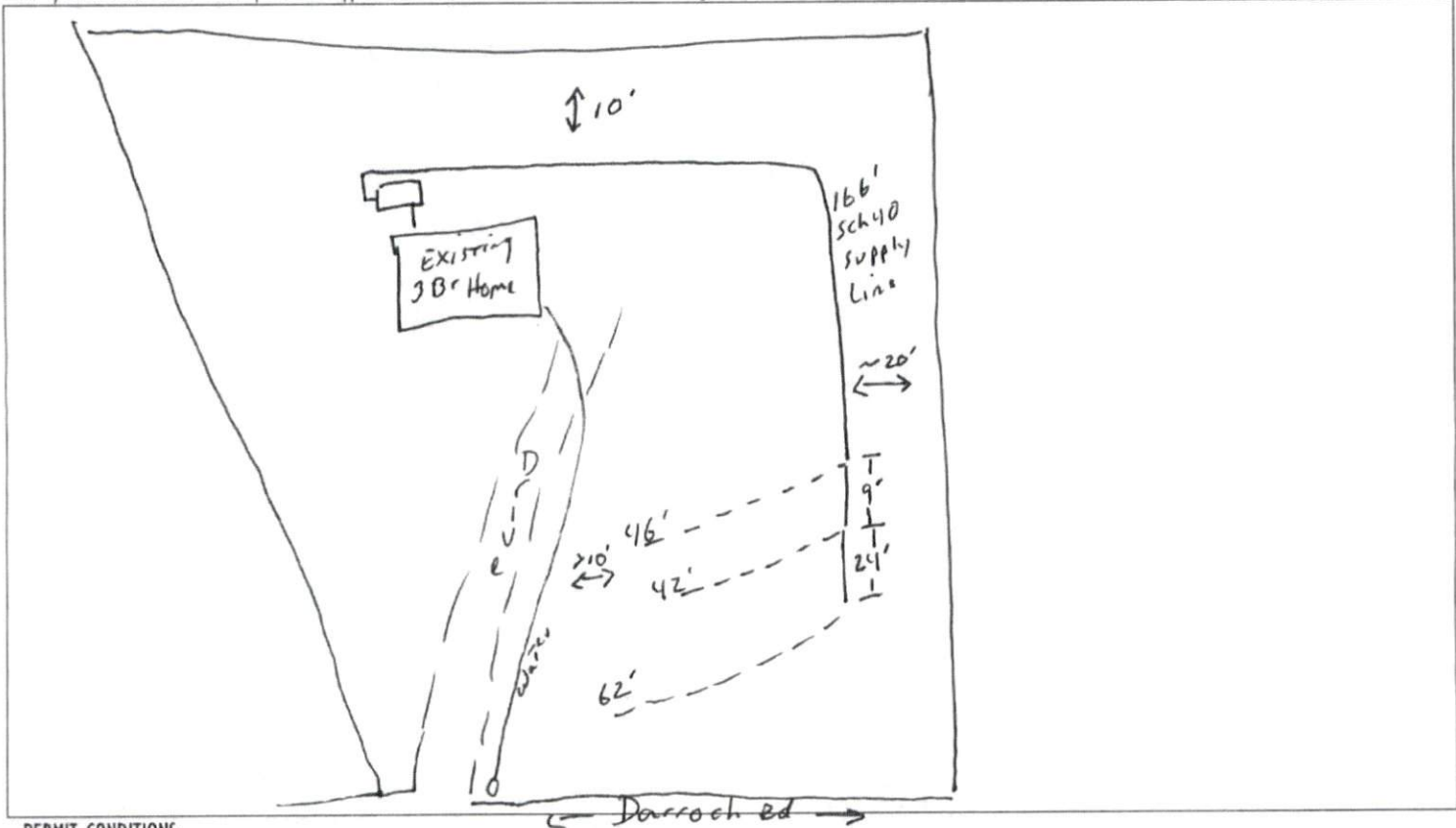
Basement with plumbing:  Garage  Number of Bedrooms 3

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

System Type: 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: \_\_\_\_\_

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 Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons  
 Subsurface No. of exact length width of depth of  
 Drainage Field ditches 1 of each ditch 150 feet ditches 3 feet ditches 24 inches  
 French Drain Required: \_\_\_\_\_ Linear feet

Authorized State Agent Mark RCHS Date 12-10-24

## Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

PROPERTY LOCATION: 2085 Darroch Rd (SR1128)  
 SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_  
 ISSUED TO: Elmira Garner  
 NEW  REPAIR  EXPANSION  Site Improvements required prior to Construction Authorization Issuance:  
 Type of Structure: \_\_\_\_\_  
 Proposed Wastewater System Type: \_\_\_\_\_  
 Projected Daily Flow: \_\_\_\_\_ GPD  
 Number of bedrooms: \_\_\_\_\_ Number of Occupants: \_\_\_\_\_ 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: \_\_\_\_\_ Date: \_\_\_\_\_ 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: Elmira Garner PROPERTY LOCATION: 2085 Darroch Rd (SR1128)  
 SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_  
 Facility Type: Existing SFD  New  Expansion  Repair  
 Basement?  Yes  No Basement Fixtures?  Yes  No  
 Type of Wastewater System\*\* \_\_\_\_\_ (Initial) Wastewater Flow: 360 GPD  
 (See note below, if applicable  25% reduction (Repair))

**Installation Requirements/Conditions**  
 Septic Tank Size Existing gallons Exact length of each trench 3 feet Trench Spacing: 9 Feet on Center  
 Pump Tank Size \_\_\_\_\_ gallons Trenches shall be installed on contour at a Soil Cover: 6 inches  
 Maximum Trench Depth of: 18" - 24" inches (Maximum soil cover shall not exceed 36" above the trench bottom)-  
 (Trench bottoms shall be level to +/- 1/4" in all directions)  
 Pump Requirements: \_\_\_\_\_ ft. TDH vs. \_\_\_\_\_ GPM Aggregate Depth: \_\_\_\_\_ inches below pipe  
 \_\_\_\_\_ inches above pipe  
 \_\_\_\_\_ inches total  
 Conditions: \_\_\_\_\_

**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: Mah A. REHS (Per O.T.) Date: 10-20-21  
 Construction Authorization Expiration Date: 01-20-22

Application # EH2108-0020

## Harnett County Department of Public Health Site Sketch

Property Location: 2085 Darroch Rd (SR1128)

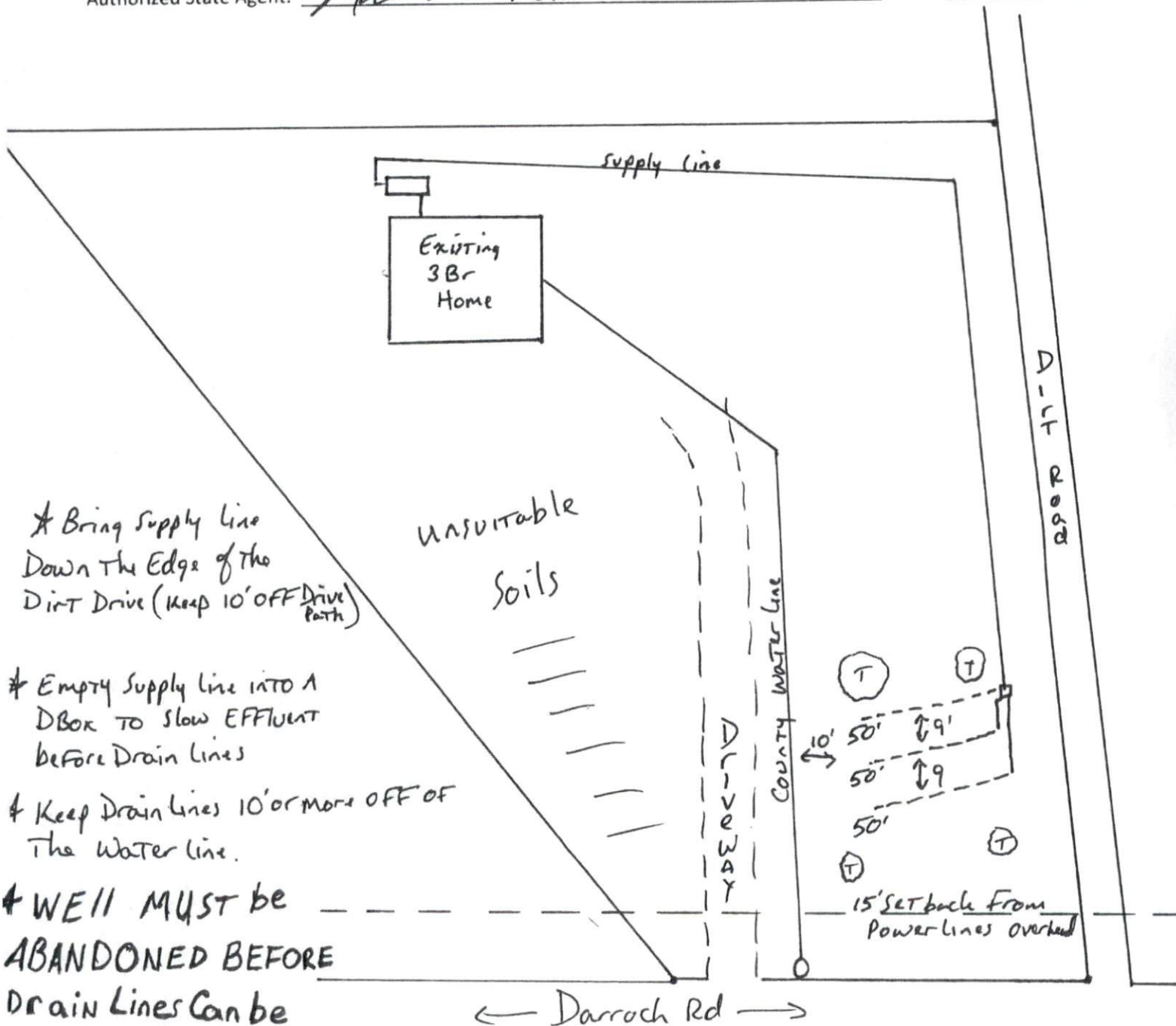
Issued To: Elmira Garner

Subdivision \_\_\_\_\_

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

Authorized State Agent: [Signature] REHS (Per O.T.)

Date: 10-20-21



\* Bring Supply Line Down The Edge of The DIRT Drive (Keep 10' OFF Drive Path)

\* Empty Supply Line INTO A DBOX TO SLOW EFFLUENT BEFORE Drain Lines

\* Keep Drain Lines 10' or more OFF OF The Water Line.

\* WELL MUST BE ABANDONED BEFORE Drain Lines Can be INSTALLED

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

\* All Work MUST be done by a responsible party authorized by the STATE