

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: Trichterbl@gmail.com

OWNER NAME Thomas Nichter PHONE 704-472-3815

PHYSICAL ADDRESS 36 Applecross Ct. Sanford, NC 27332

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) - Same -

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

Persimmon Hill 039577 0028 74 (Lot 74) 0.97
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: NC-27 West to Barbecue Church Rd - Right on BBQ Church Rd

BBQ Church Rd to Hoover Rd. - Left on Hoover Rd

Take Hoover Rd ~ 1/4 mile to Trail Rider Lane - Right on Trail Rider Lane

Trail Rider to Old Corral Ave. - Left on Old Corral Ave - to Fair Barn Rd. Right on Fair Barn Rd.

In order for Environmental Health to help you with your repair, you will need to comply by completing the following: Rt on Applecross Ct.

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.

Thomas W. Nichter
Owner Signature

04/14/2025
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 Cambet land Homes

Septic Tank Pumper ?

Designer of System Infiltrator Quick 4

1. Number of people who live in house? 2 # adults 0 # children 2 # 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 Thomas Nichter

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? 1 yr How often do you have it pumped? New owner

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?

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 lipitor, flecainide, digoxin

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?

A portion of the drain field was damaged while trenching for electric cable to new bldg

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 _____

There is no operational problem with the system

Matthew S. Willis Register of Deeds

Harnett County, NC

Electronically Recorded

05/30/2024 03:04:24 PM

NC Rev Stamp: \$720.00

Book: 4237 Page: 614 - 615 (2)

Fee: \$26.00

Instrument Number: 2024009191

HARNETT COUNTY TAX ID #
039577 0028 74

05-30-2024 BY: SM

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$ 720.00

Parcel Identifier No. 9578-70-7049.000 Verified by _____ County on the _____ day of _____, 20____

By: _____

Mail/Box to: _____

This instrument was prepared by: Jennifer R. Cooney, 1926 Fort Bragg Rd, Fayetteville, NC 28303 WITHOUT TITLE EXAM

Brief description for the Index: LOT 74, PERSIMMON HILL

THIS DEED made this 29th day of May, 2024, by and between

GRANTOR

Jerry Scott Bronson and wife,
Michele Lee Bronson
1281 Candlelight Boulevard
Brooksville, FL 34601

GRANTEE

Thomas William Nichter and wife,
Margaret Marie Nichter
36 Applecross Court
Sanford, NC 27332

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, Barbecue Township, Harnett County, North Carolina and more particularly described as follows:

BEING all of Lot No. 74 of Persimmon Hill Subdivision as shown on plat map recorded in Map Number 2006, Page 894, Harnett County Registry, North Carolina.

The property hereinabove described was acquired by Grantor by instrument recorded in Book 4011 page 787.
All or a portion of the property herein conveyed X includes or _____ does not include the primary residence of a Grantor.

A map showing the above described property is recorded in Plat Book 2006 page 894.

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:

Utility easements, rights of way and restrictive covenants appearing of record.
2024 ad valorem taxes.

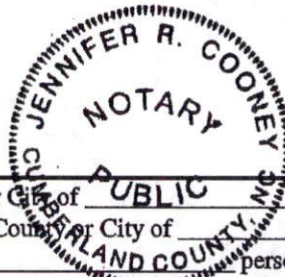
IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.

| | |
|--------------------------------|---|
| _____ | _____ (SEAL) |
| (Entity Name) | Print/Type Name: <u>Jerry Scott Bronson</u> |
| By: _____ | _____ (SEAL) |
| Print/Type Name & Title: _____ | Print/Type Name: <u>Michele Lee Bronson</u> |
| By: _____ | _____ (SEAL) |
| Print/Type Name & Title: _____ | Print/Type Name: _____ |
| By: _____ | _____ (SEAL) |
| Print/Type Name & Title: _____ | Print/Type Name: _____ |

State of North Carolina - County or City of Cumberland

I, the undersigned Notary Public of the County or City of Cumberland and State aforesaid, certify that Jerry Scott Bronson and wife, Michele Lee Bronson 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 29 day of May, 2024.

My Commission Expires: 9/25/2028
(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 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

HTE# 07-500-17533

Harnett County Department of Public Health 19677

PERMIT # 23556

Operation Permit

☒ New Installation ☒ Septic Tank ☐ Repair ☒ Nitrification Line ☐ Expansion

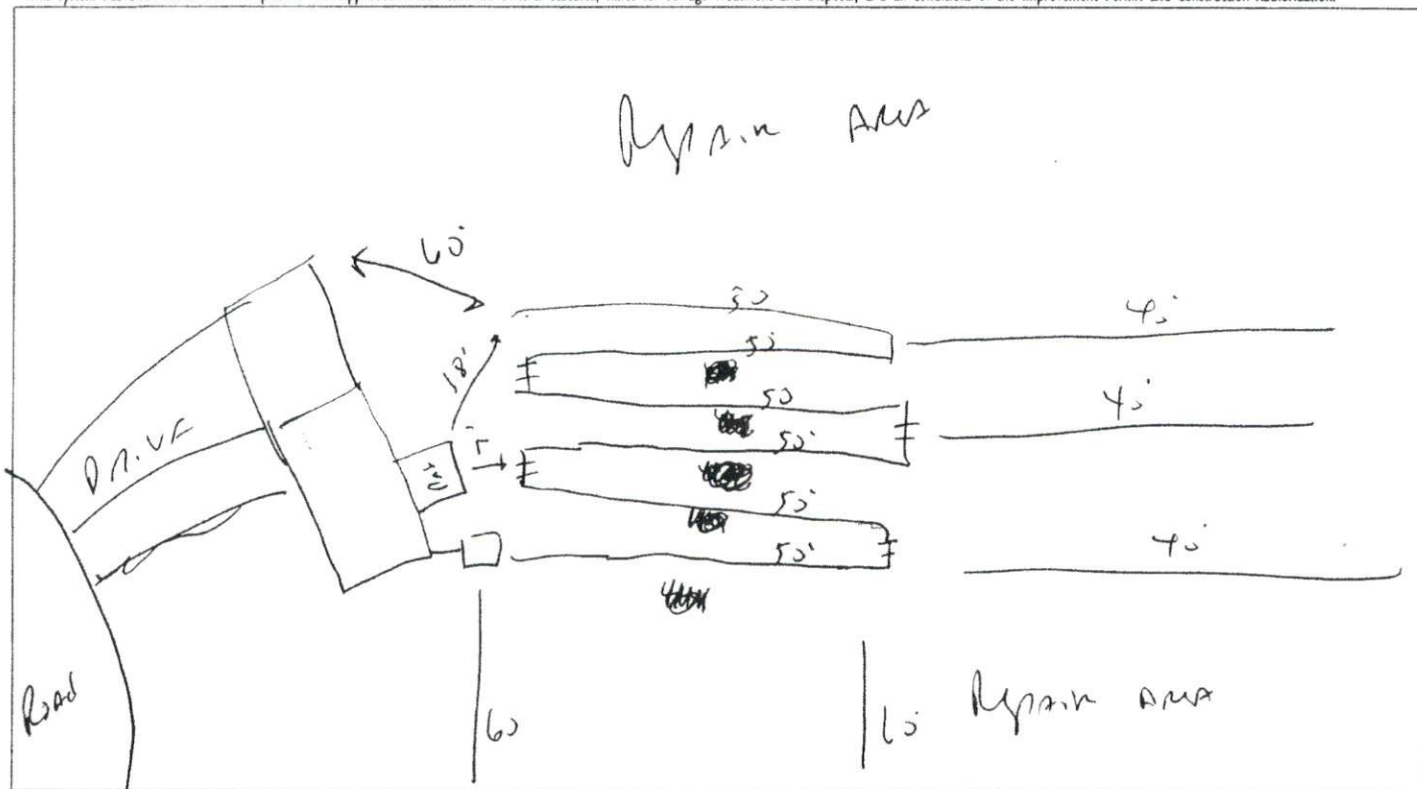
PROPERTY LOCATION: 1210

Name: (owner) Cumberland Homes SUBDIVISION Pearlman H.I. LOT # 74System Installer: Ted Beason Registration # _____Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 3Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well 50 feetSystem Type: Infiltrator Quick 4 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 Quick 4 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 18 inches

French Drain Required: _____ Linear feet

Authorized State Agent [Signature]Date 03-05-06

HTE# 07-500-17533 Harnett County Department of Public Health 23556

Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Cumberland Homes PROPERTY LOCATION: 1210
NEW ☒ REPAIR ☐ EXPANSION ☐ SUBDIVISION: Persimmon Hill LOT # 74
Type of Structure: SFD-60x31 3BR Site Improvements required prior to Construction Authorization Issuance:
Proposed Wastewater System Type: Pump to 25% Reduction
Projected Daily Flow: 360 GPD system
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 50 feet Permit valid for: ☒ Five years
Permit conditions: Meet on site maintain all set-backs ☐ No expiration
Meet plumber on site for plumbing & AB at - may be able to get at d
A pump.

Authorized State Agent: J. W. [Signature] Date: 11-08-07 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: Cumberland Homes PROPERTY LOCATION: 1210
SUBDIVISION: Persimmon Hill LOT # 74
Facility Type: SFD-60x31-3BR ☒ New ☐ Expansion ☐ Repair
Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No
Type of Wastewater System** Pump to 25% Red. sys. (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable ☒) 25% Red. system (Repair)

Installation Requirements/Conditions

Septic Tank Size 1000 gallons Exact length of each trench 1 x 300 feet Trench Spacing: 9 Feet on Center
Pump Tank Size 1000 gallons Trenches shall be installed on contour at a Soil Cover: 6 inches
Maximum Trench Depth of: 18 inches (Maximum soil cover shall not exceed
(Trench bottoms shall be level to $\pm 1/4"$ 36" above the trench bottom)
in all directions)
Pump Requirements: _____ ft. TDH vs. _____ GPM Aggregate Depth: _____ inches below pipe
Conditions: _____ inches above pipe
_____ 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: J. W. [Signature] Date: 11-08-07 SEE ATTACHED SITE SKETCH

Construction Authorization Expiration Date: 11-08-2012

HTE# 07-500-17533

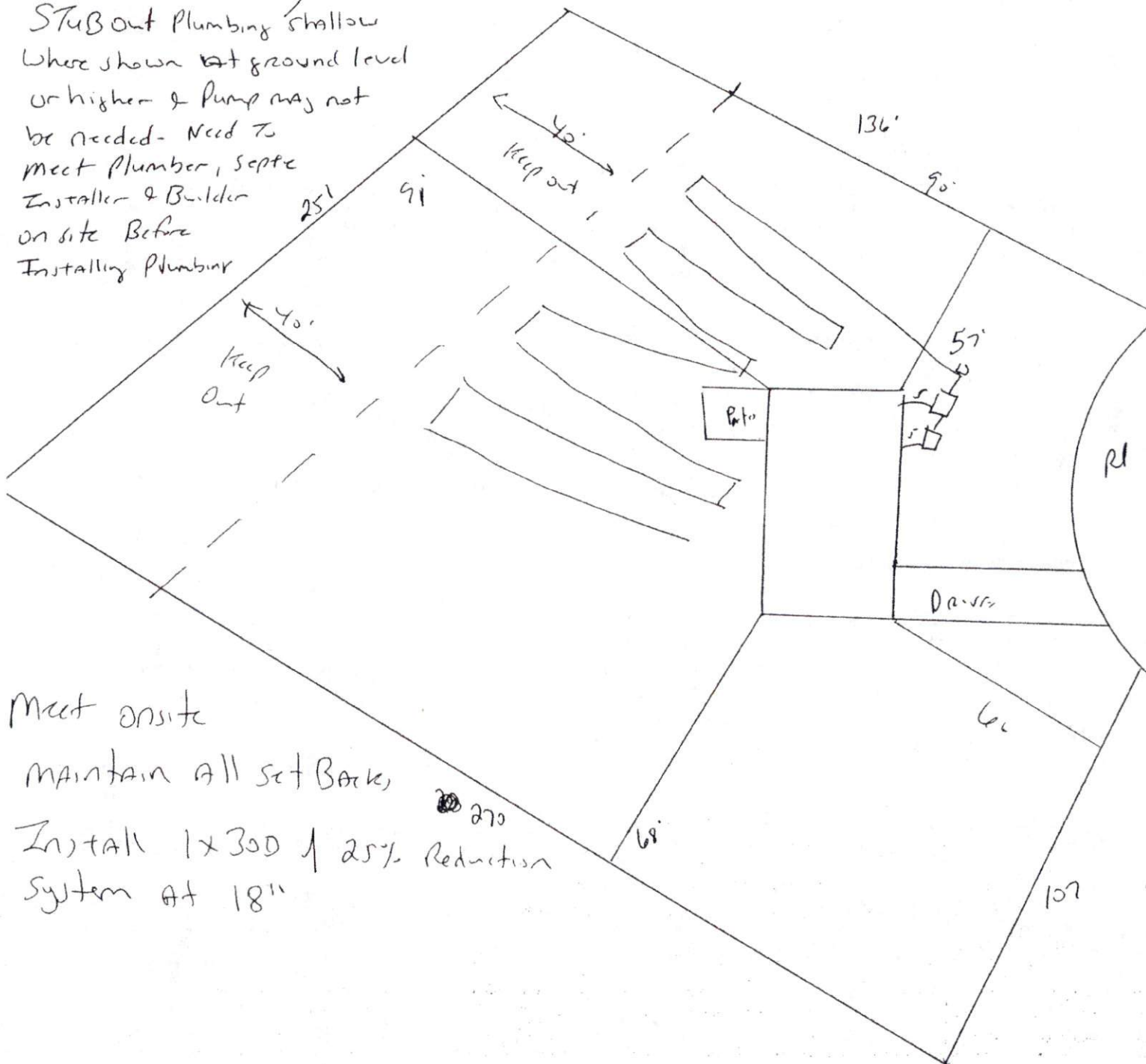
Permit # 23556

Harnett County Department of Public Health Site Sketch

ISSUED TO: Cumberland Home PROPERTY LOCATOR: 1210
SUBDIVISION Persimmon Hill LOT # 74

Authorized State Agent: Joe W. AR Date: 11-08-07

STUBout Plumbing shallow
Where shown ~~at~~ ground level
or higher & Pump may not
be needed- Need to
meet Plumber, Septic
Installer & Builder
on site Before
Installing Plumber



meet onsite

maintain all set Back,

Install 1x300 1/2 25% Reduction
System at 18"