

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: angela.sanders77@yahoo.com

OWNER NAME Angela & Andrew Greene PHONE 609-685-6480

PHYSICAL ADDRESS 397 Adams Pointe Ct, Angier, NC 27501

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

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

Honeycutt Hills Lot #24 0.58 acres
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: From 210, turn left onto James

Norris Rd, turn left onto Shelby Meadow Ln,
right onto Adams Pointe Ct

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.

Angela Greene
Owner Signature

6/4/25
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) 2025
Installer of system C&M Plumbing / DRB Homes
Septic Tank Pumper n/a - new system
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? 10,000 gallons/month or day Harnett county water. If HCPU please give the name the bill is listed in Angela & Andrew Greene
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 - new 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? _____
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?
Standing water in area of drain field after it rains, noticed water was bubbling up from ground, had an oily film on top, sewer odors
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 rain

Matthew S. Willis Register of Deeds
Harnett County, NC
Electronically Recorded
04/10/2025 04:09:18 PM NC Rev Stamp: \$963.00
Book: 4279 Page: 2399 - 2400 (2) Fee: \$26.00
Instrument Number: 2025006190

HARNETT COUNTY TAX ID #
040672 0100 11

04-10-2025 BY: MMC

NORTH CAROLINA SPECIAL WARRANTY DEED

Excise Tax: \$963.00

Real Estate ID No.: 040672010011

The property herein conveyed is not Grantor's primary residence. (NCGS 105-317.2)

After recording mail to: Grantee (25-2139-DRB)

This instrument prepared by Parker Wooten, a licensed North Carolina attorney, Moore & Alphin PLLC.
Delinquent taxes, if any, to be paid by the closing attorney to the county tax collector upon disbursement of closing proceeds.

Brief description for the Index: Lot 24, Honeycutt Hills

THIS DEED made this 10th day of April, 2025, by and between

GRANTOR

DRB Group North Carolina, LLC
f.k.a. Dan Ryan Builders-North Carolina, LLC,
a North Carolina limited liability company
1101 Slater Road
Suite 300
Durham, NC 27703

GRANTEE

Angela Greene and spouse,
Andrew Greene

Grantee's Address:
397 Adams Pointe Court
Angier, NC 27501

[06 AG-] Grantee has confirmed vesting and spelling

The designation Grantor and Grantee as used herein shall include said parties, 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 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 or parcel of land situated in Black River Township, Harnett County, North Carolina and more particularly described as follows:

All of Lot 24, in Honeycutt Hills, as shown on the map recorded in Book of Maps 2023, Pages 248-249, Harnett County Registry, reference to which is hereby made for a more particular description.

Property Address: 397 Adams Pointe Court, Angier, NC 27501

Submitted electronically by "Moore & Alphin, PLLC"
in compliance with North Carolina statutes governing recordable documents
and the terms of the submitter agreement with the Harnett County Register of Deeds.

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 said real property in fee simple, has done nothing to impair such title as Grantor received, and that Grantor will warrant and defend the title against the lawful claims of all persons claiming by, under or through Grantor, except for the exceptions hereinafter stated. Title to the property hereinabove described is subject to the following exceptions:

- 1) The lien of *ad valorem* real property taxes not yet due and payable.
- 2) Easements of record affecting the property.
- 3) Restrictive covenants of record affecting the property.
- 4) Any matters that would appear on an accurate survey of the property.
- 5) Any matters that would appear as exceptions in an Owner's Policy of Title Insurance, if Grantee elected to obtain one.

IN WITNESS WHEREOF, Grantor has caused this Deed to be signed in its name by its duly authorized officer, as of the day and year contained in the notary acknowledgement below.

DRB GROUP NORTH CAROLINA, LLC

By:

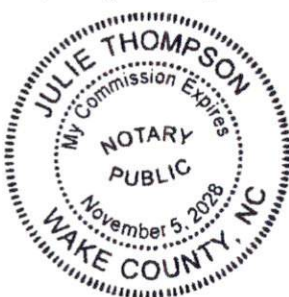

Ricardo J. Rojas, Division President

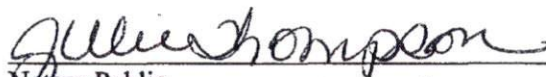
STATE OF NORTH CAROLINA – COUNTY OF DURHAM:

I, the undersigned, a Notary Public of Wake County and State aforesaid, certify that **Ricardo J. Rojas**, personally came before me this day and acknowledged that he is a Division President of **DRB GROUP NORTH CAROLINA, LLC**, a North Carolina limited liability company, and, being by me duly sworn, executed the foregoing instrument for and on behalf of and as an act of the limited liability company pursuant to authority granted to him by that certain Resolution Of The Managers of DRB Group North Carolina, LLC.

Witness my hand and official stamp or seal, this 9th day of April, 2025.

(Stamp or Seal)




Notary Public
Printed Name: Julie Thompson
My Commission Expires: November 5, 2028



CONE TABLE		LINE TABLE		LINE TABLE	
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100	1.00	100	1.00	100	1.00



HONEYCUTT HILLS	
SECTION 44P FOR	ROBINSON & PLANE, P.C.
TOWNSHIP: BLACK RIVER	COUNTY: HANCOCK
STATE: NORTH CAROLINA	P.L.N. 0063-51-007 AND 0063-61-0209
SCALE: 1"=100'	SHEET 1 OF 2
DATE: 3-04-23	DESIGNED BY: NS
DRAWN BY: HW	CHECKED BY: SP

NOTES:
1. SEE SHEET 1 FOR CERTIFICATES, SITE DATA, TABLE, NOTES AND ACRONYM TABLE.
2. SEE SHEET 2 FOR CERTIFICATES, SITE DATA, TABLE, NOTES AND ACRONYM TABLE.

SCALE: 1"=100'
10' 20' 30' 40' 50' 60' 70' 80' 90' 100'

NOTES:
1. SEE SHEET 1 FOR CERTIFICATES, SITE DATA, TABLE, NOTES AND ACRONYM TABLE.
2. SEE SHEET 2 FOR CERTIFICATES, SITE DATA, TABLE, NOTES AND ACRONYM TABLE.



Harnett County Department of Public Health

PERMIT # SFD 2410-0042

Operation Permit

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

PROPERTY LOCATION: 397 Adams Pointe Ct, Angier, 27501

Name: (owner) DRB Group North Carolina LLC SUBDIVISION Honey Cutt Hills LOT # 24

System Installer: CNM Plumbing

Basement with plumbing: ☐ Garage ☒ Number of Bedrooms 4

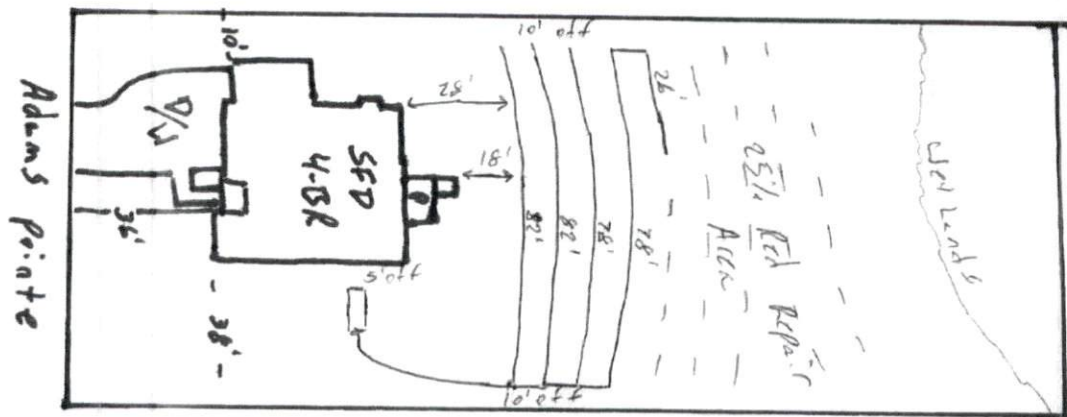
Type of Water Supply: ☐ Community ☒ Public ☐ Well Distance from well _____ feet

System Type: 25% Reduction Type III (S) Tank Chambers 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 Type III (S) Tank Chambers Septic Tank: 1,000 gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 1 exact length of each ditch 346' width of ditches 3' depth of ditches 18"-24" inches

French Drain Required: _____ Linear feet

Authorized State Agent [Signature]

Date 2-3-25

Harnett County Environmental Health

File/Permit Number: SFD2410-0042

IMPROVEMENT PERMIT

County: Harnett

PIN/Lot Identifier: 0663-51-5982.000 Lot 24

Owner: DRB GROUP NORTH CAROLINA LLC

Applicant: DRB GROUP NORTH CAROLINA LLC

Property Location: 397 ADAMS POINTE CT ANGIER, NC 27501

Subdivision (if applicable) HONEYCUTT HILLS

Lot #: 24

Block: _____

Section: _____

New ☒

Expansion ☐

System Relocation ☐

Change of Use ☐

Facility Type: SFD 58.2' x 51.6'

Number of bedrooms: 4 Number of Occupants: 8 Other: _____

Design Wastewater Strength: ☒ Domestic

☐ High Strength

☐ Industrial Process Wastewater

Proposed Design Daily Flow: 480 GPD

Proposed LTAR (Initial): .35

Proposed LTAR (Repair): .35

Proposed Wastewater System Type*: 25% Reduction System (Initial) Pump Required: ☐ Yes ☐ No ☒ May be required

Proposed Wastewater System Type*: 25% Reduction System (Repair) Pump Required: ☐ Yes ☐ No ☒ May be required

*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII

Effluent Standard: ☒ DSE ☐ HSE ☐ NSF/ANSI 40 ☐ TS-I ☐ TS-II ☐ RCW

Saprolite System (Initial): ☐ Yes ☒ No

Saprolite System (Repair): ☐ Yes ☒ No

Fill System (Initial): ☐ Yes ☒ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area provide a fill plan)

Fill System (Repair): ☐ Yes ☒ No If yes, specify: ☐ New ☐ Existing (when adding more than 6 inches of fill to system area provide a fill plan)

Usable Depth to LC (Initial)*: 37"

Usable Depth to LC (Repair)*: 25" * Limiting Condition

Max. Trench Depth (Initial)*: 18"-24"

Max. Trench Depth (Repair)*: 12"

* Measured on the downhill side of the trench

Artificial Drainage Required: ☐ Yes ☒ No If yes, please specify details: _____

Type of Water Supply: ☐ Private well

☐ Public well

☐ Shared well

☒ Municipal Supply

☐ Spring

☐ Other: _____

Drainfield location meets requirements of Rule .0508: Yes ☒ No ☐

Drainfield location meets requirements of Rule .0601: Yes ☒ No ☐

Permit valid for: ☒ Five years [site plan submitted pursuant to GS 130A-334(13a)] ☐ No expiration [plat submitted pursuant to GS 130A-334(7a)]

Permit conditions:

No Foundation or Gutter Drains to be Directed Towards Septic System.

No Cutting or Grading of Soil in Septic or Septic Repair area.

Authorized Agent's Printed Name: Ren Levocz

Expiration Date: 11-1-29

Authorized Agent's Signature: [Signature]

Date: 11-1-24

See attached site sketch

The issuance of this permit 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 permit 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 15A NCAC 18E and to the conditions of this permit.

Harnett County Environmental Health

File/Permit Number: SFD2410-0042

CONSTRUCTION AUTHORIZATION

County: Harnett PIN/Lot Identifier: 0663-51-5982.000 Lot 24
Owner: DRB GROUP NORTH CAROLINA LLC Applicant: DRB GROUP NORTH CAROLINA LLC
Property Location: 397 ADAMS POINTE CT ANGIER, NC 27501
Facility Type: SFD 58.2' x 51.6'

Number of bedrooms: 4 Number of Occupants: 8 Other: _____
☒ New ☐ Expansion ☐ Repair ☐ System Relocation ☐ Change of Use
Basement? ☐ Yes ☒ No Basement Fixtures? ☐ Yes ☒ No
Crawl Space? ☒ Yes ☐ No Slab Foundation? ☐ Yes ☒ No
Type of Wastewater System* 25% Reduction System (Initial) 25% Reduction System (Repair)

*Please include system classification for proposed wastewater system types in accordance with Rule .1301 Table XXXII

Design Daily Flow: 480 GPD Wastewater Strength: ☒ Domestic ☐ High Strength ☐ Industrial Process Wastewater

Rule .0403(e) Engineering Design Utilizing Low-flow Fixtures and Low-flow Technologies (S.L. 2013-413 and 2014-120)? ☐ Yes ☐ No
(if yes, please provide engineering documentation)

Effluent Standard: ☒ DSE ☐ HSE ☐ NSF/ANSI 40 ☐ TS-I ☐ TS-II ☐ RCW

Type of Water Supply: ☐ Private well ☐ Public well ☐ Shared well ☒ Municipal Supply ☐ Spring ☐ Other: _____

Installation Requirements/Conditions

Septic Tank Size: 1,000 gallons Total Trench/Bed Length: 344' feet Trench/Bed Spacing: 9' feet on center
Trench/Bed Width: 36" inches LTAR: .35 gpd/ft² Usable Depth to LC (Initial)*: 37" **Limiting condition*
Soil Cover: 6" inches Slope Corrected Maximum Trench/Bed Depth†: 18"-24" inches *† Measured on the downhill side of the trench*
Pump Tank Size (if applicable): 1,000 gallons Requires more than one pump? ☐ Yes ☐ No
Pump Requirements: _____ ft. TDH vs. _____ GPM Grease Trap Size (if applicable): _____ gallons
Distribution Method: ☐ Serial ☒ D-Box or Parallel ☐ Pressure Manifold(s) ☐ LPP ☐ Other: 4 - 86' Lines
Artificial Drainage Required: Yes ☐ No ☐ If yes, please specify details: _____

Legal Agreements (If the answer is "Yes" to any type of legal agreements, please attach a copy of the agreement.)

Multi-party Agreement Required [Rule .0204(g)]: ☐ Yes ☐ No

Easement, Right-of-Way, or Encroachment Agreement Required [Rule .0204(d)]: ☐ Yes ☐ No

Declaration of Restrictive Covenants: ☐ Yes ☐ No Pre-Construction Conference Required: Yes ☐ No ☐

Management Entity Required: ☐ Yes ☐ No Minimum O&M Requirements: _____

Conditions: No Foundation or Gutter Drains to be Directed Towards Septic System.

No Cutting or Grading of Soil in Septic or Septic Repair area.

The requirements of 15A NCAC 18E are incorporated by reference into this permit and shall be met. Systems shall be installed in accordance with the attached site sketch. ***This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes.*** The Construction Authorization shall not be affected by a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of 15A NCAC 18E, or 15A NCAC 18A .1900, as applicable, and to the conditions of this permit.

Authorized Agent's Printed Name: Ren Levocz

Expiration Date: 11-1-29

Authorized Agent's Signature: 

Date: 11-1-24

See attached site sketch

SITE SKETCH

PIN 0663-51-5982.000

Permit Number SFD2410-0042

DRB GROUP NORTH CAROLINA LLC
Applicant's Name DRB GROUP NORTH CAROLINA LLC
Authorized State Agent DRB GROUP NORTH CAROLINA LLC

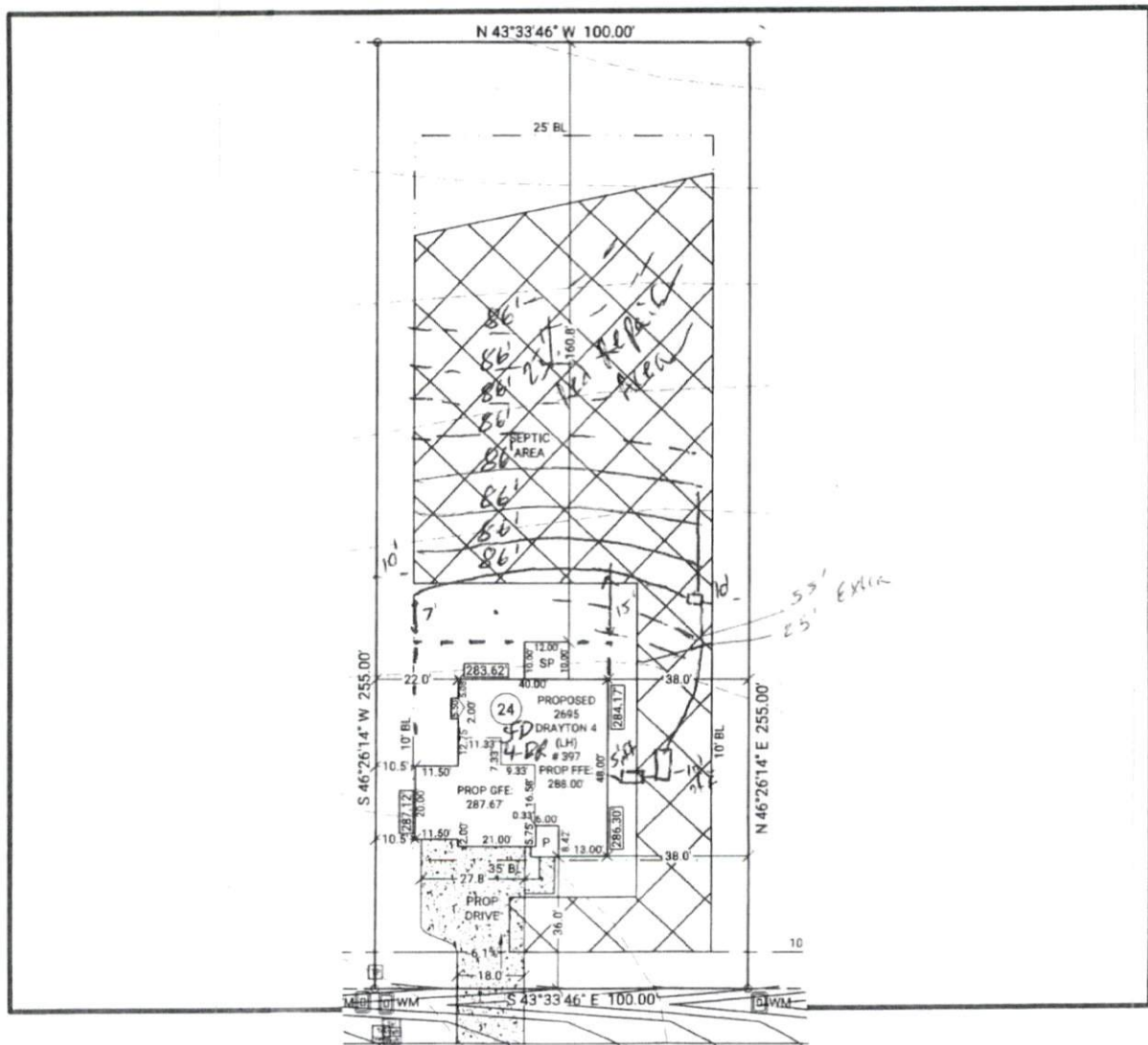
HONEYCUTT HILLS Lot 24

Subdivision/Section/Lot Number
11-1-24

Date _____

System components represent approximate contours only. The contractor must flag the system prior to beginning the installation to ensure that the proper grade is maintained.

Scale = NTS



Adams Pointe