

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: lambdesignsnc@gmail.com

OWNER NAME Gregory Lamb PHONE 919-656-4566

PHYSICAL ADDRESS 39 Green Forest Circle Dunn, NC 28344

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) _____

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

SUBDIVISION NAME Myrtlewood 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: 421 South towards Dunn @ 8 mi turn left onto timber creek Ln (Myrtlewood Sub division), Immediate left onto Green Forest (2nd house on left.)

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.

Gregory Lamb
Owner Signature

6/13/2025
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) 2006

Installer of system _____

Septic Tank Pumper _____

Designer of System _____

1. Number of people who live in house? 3 # adults 2 # children 5 # total
2. What is your average estimated daily water usage? 3,665 gallons/month or day _____ county water. If HCPU please give the name the bill is listed in Gregory Lamb
3. If you have a garbage disposal, how often is it used? ☐ daily ☐ weekly ☒ monthly
4. When was the septic tank last pumped? 4/2023 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 roof 2024
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 comes up in the middle of the back yard. Since we moved in 2023. Crushed field lines.
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
when doing laundry or taking multiple showers.

Matthew S. Willis Register of Deeds

Harnett County, NC

Electronically Recorded

01/17/2023 04:02:53 PM

NC Rev Stamp: \$1,080.00

Book: 4179 Page: 2440 - 2441 (2) Fee: \$26.00

Instrument Number: 2023000791

HARNETT COUNTY TAX ID #
070588 0146 22

01-17-2023 BY: AG

NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax: \$1,080.00

Delinquent taxes, if any, to be paid by the closing attorney to the County Tax Collector upon disbursement of closing proceeds

Parcel or Real Estate ID No. 070588 0146 22 Verified by _____ County on the _____ day of _____, 20____

By: _____

Mail/Box to: Grantee

This instrument was prepared by: Jackson Law, P.C., 3605 Glenwood Avenue, Suite 480, Raleigh, NC 27612

Brief description for the Index: LT 2, Myrtlewood, PH 2

THIS DEED made this 13th day of January, 2023, by and between:

GRANTOR	GRANTEE
Jacob Cotten Adams and Leigh Anne Adams, a married couple	Gregory Lamb and Tamara Cunningham Lamb, a married couple
69 Pine Cove Elizabethtown, NC 28337	39 Green Forest Circle Dunn, NC 28334

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

BEING all of Lot 2, Myrtlewood Subdivision, Phase Two, as shown in plat recorded in Map Book 99, Page 646, Harnett County Registry.

Property Address: 39 Green Forest Circle, Dunn, NC 28334

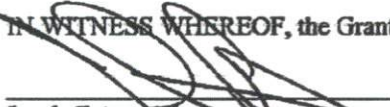
Parcel ID: 070588 0146 22

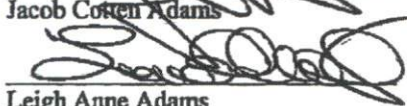
The property hereinabove described was acquired by Grantor by instrument recorded in Book 2142 Page 355

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: Easements and restrictions of record that do not materially affect the value of the property, 2023 Ad Valorem taxes.

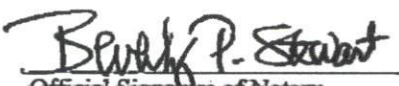
IN WITNESS WHEREOF, the Grantor has duly executed the foregoing as of the day and year first above written.


Jacob Cotten Adams


Leigh Anne Adams

STATE OF NORTH CAROLINA
COUNTY OF Harnett

I, Beverly P. Stewart, Notary Public, do hereby certify that Jacob Cotten Adams and Leigh Anne Adams personally appeared before me this day and acknowledged the due execution of the foregoing instrument.
Witness my hand and official seal this 13th day of January, 2023.


Official Signature of Notary

Printed or typed name of Notary

My Commission Expires: 5/20/2024

Beverly P. Stewart



(affix seal here)

HTE # 05-S-1325RHAF IT COUNTY HEALTH DEPART NT
ENVIRONMENTAL HEALTH SECTION

18681

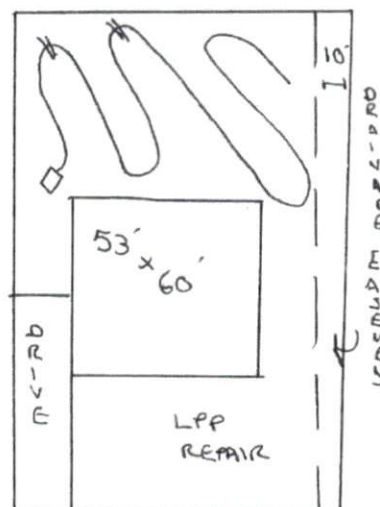
OPERATIONS PERMIT

Name: (owner) JACOB ADAMS ☒ New Installation ☒ Septic Tank ☐ RepairProperty Location: SR# Hwy 421 ☒ Nitrification Line ☐ ExpansionSubdivision MYRTLEWOOD Lot # 2 Tax ID # _____ Quadrant # _____Contractor: LARRY SHARPE Registration # _____Basement with Plumbing: ☐ Garage: ☒Water Supply: ☐ Well ☒ Public ☐ CommunityDistance From Well: 100 ft.

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

Type of system: ☐ Conventional ☒ Other POLYSTYRENE AGGREGATE TRENCHSize of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallonsSubsurface No. of exact length width of depth of
Drainage Field ditches 1 of each ditch 400 ft. ditches 3 ft. ditches 18 in.

French Drain Required: _____ Linear feet

Date: 7/11/06PERMIT NO. 22232Inspected by: [Signature] RS

HTE# 0550013225R

IMPROVEMENT PERMIT 22232

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) JACOB ADAMS New Installation ☒ Septic Tank ☒ Repair ☐
 Property Location: SR# HWY 421 Nitrification Line ☒ Expansion ☐
 Subdivision MYRTLEWOOD Lot # 2
 Tax ID# _____ Quadrant # _____
 Number of Bedrooms Proposed: 4 (480 sqd) Lot Size: .55 AC

Basement with Plumbing: ☐ Garage: ☐
 Water Supply: ☐ Well ☒ Public ☐ Community
 Distance From Well: 100 ft.

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

Type of system: ☐ Conventional ☒ Other 25% REDUCTION SYSTEM

Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons

Subsurface No. of exact length width of depth of
 Drainage Field ditches 1 ft. of each ditch 400 ft. ditches 3 ft. ditches 18 in.

French Drain Required: _____ Linear feet

Date: 10/21/05

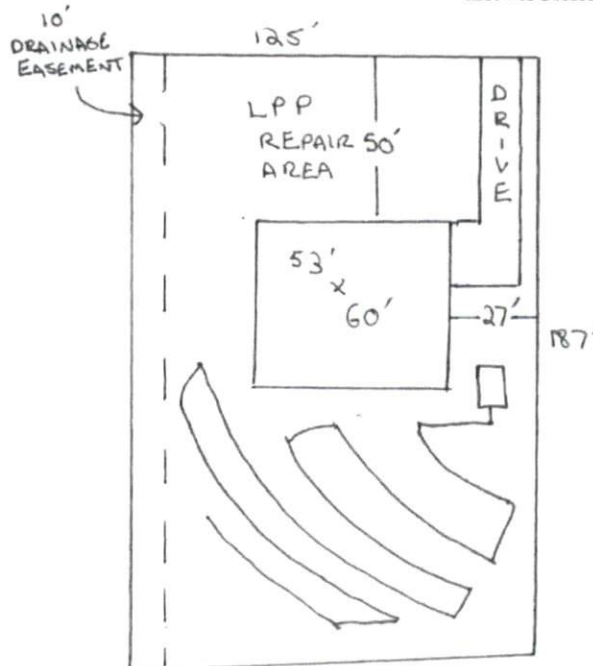
PERMIT EXPIRES 5 YEARS FROM ABOVE DATE

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

*MAINTAIN ALL SETBACKS

*CALL WITH ANY
 QUESTIONS PRIOR
 TO INSTALLATION

Signed: RS (OLIVER TOLKSWORT)
 Environmental Health Specialist



HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH
AUTHORIZATION TO CONSTRUCT

Authorization is hereby given to construct a wastewater system to the specifications described by Harnett County Department of Public Health, Improvement Permit # 22232. 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.*

JACOB ADAMS 919-820-1112
Name Telephone #

PO Box 1603 DUNN, NC 28335
Address

421
Property Location SR# Road Name

MYRTLEWOOD 2 4 (480 gpd) .55 AC
Subdivision Lot # # Bedrooms Proposed Lot Size

TYPE OF SYSTEM

☒ New Installation ☐ Repair ☒ Septic Tank ☒ Nitrification Lines

☐ Conventional ☒ Other 2.5% REDUCTION SYSTEM

☐ Basement ☐ With Plumbing ☐ Without Plumbing

Water Supply: ☐ Well ☒ Public Water Supply Minimum Well Setback: 100 Ft.

Septic Tank 1000 gal Pump Chamber _____ gal

NITRIFICATION FIELD SPECIFICATIONS

Number of fields 1 # of lines per field 1 Length of lines 400 Ft.

Width of ditches 3 ft. Depth of ditches 18 inches

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.

[Signature]
Signature of Authorized Agent for Harnett County

10/21/05
Date