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

		FMAIL ADDRESS: K	ethryn caler wgmail.
OWNER NAME Kathr	un Caler	(919-662-0185
OWNER NAME / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	yn carer	PHONE	111 000 0100
PHYSICAL ADDRESS /56	Natures 1	Way, Dunn,	NC 28334
MAILING ADDRESS (IF DIFFFERENT	THAN PHYSICAL)		
IF RENTING, LEASING, ETC., LIST PR	OPERTY OWNER NAME_		
Bennett Place	7		1/2 Acre
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	[] on []	Garbage Disposal: Yes [] No
Water Supply: [] Private Well		/ \ .	
Directions from Lillington to your	site: Hwy	27 to Hoda	ges Chape/Rd
R+ Nei	Ghbors R	d, R+ N	atures Nay
9	1		
	1		
In and or for Free income and all lines	lah ta halawan with wan	u vanaiu vav vill naad ta sam	unly by completing the following:
1. A "surveyed and recorded	map" and "deed to your	property" must be attached to the	ply by completing the following: nis application. Please inform us of any
	howing on your survey map		operty lines flagged. After the tank is
			has been placed, you will need to call
us at 910-893-7547 to con	firm that your site is ready	y for evaluation.	
Your system must be repaired with letter. (Whichever is applicable.)	nin 30 days of issuance of t	the Improvement Permit or the	time set within receipt of a violation
By signing below, I certify that all o the denial of the permit. The perm			rledge. False information will result in ownership changes.
V. 11	()	Π n-	- 1/

Owner Signature

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) 2020 Installer of system Ken Dawson Installer of system Ken Dawson
Septic Tank Pumper Belton Septic Tank SVC Designer of System Ken Dawson Number of people who live in house? _____ # adults _____ # children
 What is your average estimated daily water usage? ______ gallons/month or day _____ / # total water. If HCPU please give the name the bill is listed in Kathryn Caler 3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly 4. When was the septic tank last pumped? 6/25 How often do you have it pumped? 3/25 + 6/255. If you have a dishwasher, how often do you use it? [] daily every other day 6. If you have a washing machine, how often do you use it? [] daily [] every other day [X weekly [] monthly 7. Do you have a water softener or treatment system? [] YES [X] 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 [X] NO If yes please list 10. Do you put household cleaning chemicals down the drain? [] YES [X] NO If so, what kind? 11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES [X] NO 12. Have you installed any water fixtures since your system has been installed? [] YES [X] 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 [X] 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__/\/A 15. Are there any underground utilities on your lot? Please check all that apply: [X] Power [] Phone [X] Cable [] Gas [X] Water 16. Describe what is happening when you are having problems with your septic system, and when was this first noticed? This year, March 2025, backed up into he.

June 2025 possible leach field not draining

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______

	- NIG17- MHI	ŕ
HTE#	SFD1912-0041	

Department of Public Health

No 26134

HTE#_SF 51912-0041	Harnett County Department of Fublic nearth	20.5.
PERMIT # _ NA	Operation Permit S-L 13	07
TENIII #	New Installation Septic Tank Nitrification Line Repair	Expansion
	PROPERTY LOCATION: 15G NATURES WAT (NEIGHBONS	LAN
Name: (owner) KEN DOWSO-	- HOMES FINE SUBDIVISION BENNETT PLACE LOT #_	7_
System Installer: CONT GILBE	Registration #	
Basement with plumbing: Garage N	Number of Bedrooms	
Type of Water Supply: Community System Type:	Public Well Distance from well Feet Sys. TIG 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.	
	North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization	on.
	24' 33' * 6ANITY TO D-OOX	
	FOUL DISTRIBUTIO	2
	- 39 / /- 43	
	- 39' / HA EQUAL DISTRIBUTION * LINES APPROX 18FT FROM STD	
	From STD	
	7 9/ 4	
	3/2/ 2 5	
	8/// 2	
	- 10+	
	10	
	2 T PAT	
	301 SFD	
		6
	PID	
PERMIT CONDITIONS:		
I. Performance: System shall perform in a	accordance with Rule .1961.	
II. Monitoring: As required by Rule 196		
III. Maintenance: As required by Rule .196 Subsurface system operation	tor required? Yes 🗆 No 🖄	
If yes, see attached shee	et for additional operation conditions, maintenance and reporting.	
IV. Operation:		
V. Other:		
D-Box	Pump □ Alarm □ H20Line □	PWR Line
Following are the specifications for the sewage d	disposal system on the above captioned property.	
Type of system: Conventional Oth	her 04 CHAMBER III G Septic Tank: 1000 gallons Pump Tank:	gallons
Subsurface No. of	exact length width of depth of of each ditch 95 feet ditches 3 feet ditches 24	inches
Drainage Field ditches French Drain Required:	Linear feet	
	and the state of t	
Authorized State Agent	Date 04 24 2020	

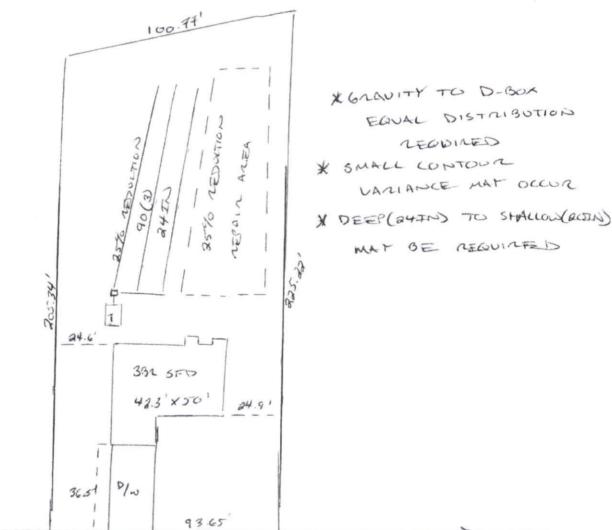
Harnett County Department of Public Health

Improvement Permit

	A building permit cannot be issued with only an Improvement Permit
WELLED TO VOS DO 2500 HO	Mes Inc. SUBDIVISION Bennett Place LOT # 7
	NSION Site Improvements required prior to Construction Authorization Issuance:
NEW REPAIR EXPA	42 2 × 50 SFD
Proposed Wastowater System Type:	
Proposed Wastewater System Type: 25% Projected Daily Flow: 366 GPD	Lastero 75
	ccupants:max
Basement Yes No	ccupantsniax
	required based on final location and elevations of facilities
	Well Distance from well feet Permit valid for: Five years
Permit conditions:	No expiration
Ferning Conditions.	
	4
Authorized State Agent::	Date: 01/09/2020 SEE ATTACHED SITE SKETCH
	parantees 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 con-	ditions of this permit.
	Construction Authorization
Th	(Required for Building Permit)
The construction and installation requirements of Rules 1930, 193 with the attached system layout.	2, 1954, 1955, 1956, 1957, 1958, and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance
A CONTRACTOR OF THE CONTRACTOR	
ISSUED TO: Ken Dasson Ho	omes Inc. PROPERTY LOCATION: \ S6 Notures Way (Neighbors AL. SAL)
	SURDIVISION BE AGENT STACE LOT# T
Facility Type: 7AA +23'x50' 5	New Expansion Repair
Basement? Yes No Basement	Firstures? D Vos. DNo
Dasement: 1 1es Da no Dasement	25% reduction 525 tem (Initial) Wastewater Flow: 360 GPD
Type of wastewater system	25% reduction 5/5 tem (Initial) Wastewater Flow: 360 GPD
(See note below, if applicable (1)	
	section System (Repair)
Installation Requirements/Conditions	Number of trenches 3
Septic Tank Size 1000 gallons	Exact length of each trench 90 feet Trench Spacing: 9 Feet on Center
Pump Tank Sizegallons	Trenches shall be installed on contour at a Soil Cover: 12 inches
,	Maximum Trench Depth of: 34 inches (Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4" 36" above the trench bottom)
	Managery Managery Annual Religion and Park 21 Co. Sec. 2002 Co. Sec. 200
D D	in all directions)
Pump Requirements:ft. TDH vs.	GPMinches below pipe
	Aggregate Depth: NA inches above pipe
Conditions: De Box Egual U.St	ribution, Deep (24) to Shallow (20") inches total
	, 1
NATER LINES (INCLUDING IRRIGATION) MU	ST BE 10FT, FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
NO UTILITIES ALLOWED IN INITIAL OR REPAI	
CHARLE CONTROL OF THE	
**If applicable: I understand the system type speci	ufied is different from the type specified on the application. I accept the specifications of this permit.
Owner/Legal Representative Signature:	Date:
	lan, 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 provision	ons of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH
	2-17
And a state of the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Authorized State Agent:	Valle Valle VI Valle
ANDREW CONT	Construction Authorization Expiration Date: 01/09/18085

Harnett County Department of Public Health Site Sketch

Property Location:	156 Natures Way	(Noighbors	Road - Sa	1707)	
Issued To: Ken T	Dawson Homes Inc. Sub	division Be	mott Place	-	_ Lot #
Authorized State Agent	t: CHARLE		EHP	Date: _O	1/09/2020



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

HARNETT COUNTY TAX ID # 021528 0073 07

For Registration Kimberly S. Hargrove
Register of Deeds
Harnett County, NC
Electronically Recorded
2020 May 29 04:07 PM NC Rev Stamp: \$ 350.00
Book: 3818 Page: 507 - 510 Fee: \$ 26.00
Instrument Number: 2020008382

05-29-2020 BY: MT

NORTH CAROLINA GENERAL WARRANTY DEED

GENERAL WARRANTY DEED		
Excise Tax: \$350.00	Recording Time, Book, and Page:	
Tax Map No.	Parcel ID: 1529-31-4212.000	
Mail after recording to: R. Isaac Parker, Attorney at L	Law, PO Box 235, Benson, NC 27504	
This instrument was prepared by: R. Isaac Parker, Att	torney at Law	
NORTH CAROLINA HARNETT COUNTY THIS DEED made this day of	nay, 20 <u>10</u> , by and between:	
GRANTO Ken Dawson Ho A North Carolina 2493 NC Hwy Benson, NC	omes, Inc., Corporation y 242 N.	
GRANTI	EE	
Kathryn L. 156 Natures Dunn, NC	s Way	
The designation GRANTOR or GRANTEE as used herein shall and shall include singular, plural, masculine, feminine, or neuter		
WITNESSETH, that the Grantor, for valuable conswhich is hereby acknowledged, has and by these presthe said Grantee, their heirs or assigns in fee simple, the City of, Averasboro Township, Haparticularly described as follows: See attached Exhibit "A" incorporated herein by refer	sents does grant, bargain, sell, and convey unto that certain lots or parcels of land situated in ARNETT County, North Carolina, and more	

Submitted electronically by "R. Isaac Parker, Attorney at Law" in compliance with North Carolina statutes governing recordable documents and the terms of the submitter agreement with the Harnett County Register of Deeds.

*_____ If checked this property IS Grantor's Primary Residence
TO HAVE AND TO HOLD the aforesaid lot or parcel of land and all privileges and appurtenances
thereto belonging to the Grantee, forever and 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, except for the exceptions stated. Title to the property hereinabove described is subject to the following exceptions:

2020 and subsequent year's ad valorem real property taxes, prorated at closing. Easements, rights of way, and restrictions of public record.

IN WITNESS WHEREOF, the grantor has hereunto set his hand and seal, the day and year first above written.

Ken Dawson Homes, Inc., A North Carolina Corporation

sy:____

th W. Dawson,

President of Ken Dawson Homes, Inc.

(SEAL)

[REMAINDER OF PAGE LEFT BLANK INTENTIONALLY]

STATE OF NC
Johnston COUNTY
I. Shere D Beasley, a Notary Public, of said State and County aforesaid,
do hereby certify that Kenneth W. Dawson, President of Ken Dawson Homes, Inc.
grantor(s), personally appeared before me this day, and (i) I have personal knowledge of the identity of the grantor(s) or (ii) I have seen satisfactory evidence of the grantor(s) identity, by current state
or federal identification with the grantor(s) photograph in the form of a
or (iii) a credible witness has sworn to the identity of the
grantor(s) each acknowledging to me that he or she voluntarily signed the foregoing document for
the purpose stated therein and in the capacity indicated.
Witness my hand and official seal or stamp, this
the year 3030.
Olamo O D a Da
Stelle is thought
Notary Public Official Signature
Sherpe D Roasles
Notary Printed or Typed Name
TO SITE OF THE
(seal or stamp)
My commission expires: 10-13-2020
The state of the s
W. C. Sameran

Exhibit "A"

Being all of Lot 7 as depicted on a map entitled "Final Subdivision map for Bennett Place S/D" as drafted by Jimmy C. Barbour, Professional Land Surveyor, dated 04/30/2004, and recorded May 28, 2004 in Map Book 2004, pages 472-476, Harnett County Registry, reference to which is hereby made for greater accuracy of description.

