#### 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:** 

Date

		EMAIL ADDRESS:	
OWNER NAME HARRY MA	TTHEWS	PHONE_910	-237-8357
PHYSICAL ADDRESS 2/ A	every Rd Eru	sin N.C. Z	8339
PHYSICAL ADDRESS A MAILING ADDRESS (IF DIFFFERENT	THAN PHYSICAL) 1522	Cranford Rd Co	ets N.C. 27521
IF RENTING, LEASING, ETC., LIST PI	ROPERTY OWNER NAME		
SUBDIVISION NAME	LOT #/TRACT #	STATE RD/HWY	SIZE OF LOT/TRACT
Type of Dwelling: [] Modular	[ ] Mobile Home	Stick built [] Other	
Number of bedrooms	[] Basement		
Garage: Yes [ No [ ]	Dishwasher: Yes ]	No [ ]	Garbage Disposal: Yes [(No])
Water Supply: [] Private Well			
Directions from Lillington to your	site: U.S. 421 +	oward Erwin.	Turn Right
Directions from Lillington to your	Tirst House	on Left	,
wells on the property by s	d map" and "deed to your prophowing on your survey map.	perty" must be attached to this	application. Please inform us of any
uncovered, property lines		marked, and the orange sign ha	erty lines flagged. After the tank is as been placed, you will need to <b>call</b>
Your system must be repaired with letter. (Whichever is applicable.)			ne set within receipt of a violation
By signing below, I certify that all of the denial of the permit. The perm			dge. False information will result in wnership changes.
Day Mark		<i>a</i> ' 10 2 <i>a</i>	

wner 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)
Septic Tank Pumper
<ol> <li>Number of people who live in house?</li></ol>
<ul> <li>3. If you have a garbage disposal, how often is it used? [ ] daily [ ] weekly [ ] monthly</li> <li>4. When was the septic tank last pumped? 9-8-25 How often do you have it pumped?</li> </ul>
5. If you have a dishwasher, how often do you use it? [ ] daily [ ] every other day [ ] week
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 MO Where does it drain?
8. Do you use an "in tank" toilet bowl sanitizer? [ ] YES [ ] NO
<ol> <li>Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy?] [ ] YES [ ] NO If yes please list</li> </ol>
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, gutte
drains, basement foundation drains, landscaping, etc? If yes, please list
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 the first noticed?
TANK vunning over a few wieles Ago
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 Kenter Said Men
she washed dothes

# **OPERATIONS PERMIT**

Name: (owner) Harry Hen Walther   New Installation   Septic Tank
Property Location: SR# 20/3 Repairs Nitrification Line
Subdivision Lot #
TAX ID# Quadrant #
Contractor: Lary Starfle Registration #
Basement with Plumbing: Garage:
Water Supply:  Well  Community
Distance From Well: 50 ft. ✓
Following are the specifications for the sewage disposal system on above captioned property.
Type of system: Conventional Other  Size of tank: Septic Tank: gallons Pump Tank: gallons
•
Subsurface No. of exact length width of depth of of each ditch 280 ft. ditches ft. ditches ft. ditches
French Drain: Linear feet
Date: 07/29/05
PERMIT NO. 19641  Inspected by Environmental Health Specialist
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### HARNETT COUNTY HEALTH DEPARTMENT

Nº 19641

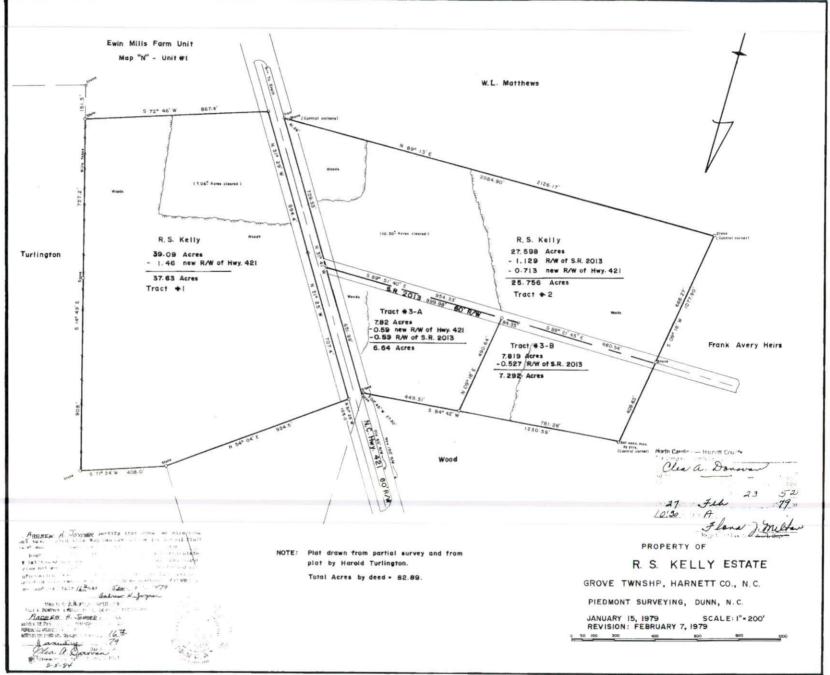
## IMP. . OVEMENT PERMIT

Be it ordained by the Harnett County Board of Health as follows: S tion of any building at which a septic tank system is to be used for disposit from the Harnett County Health Department."	al of sewage without first o	btaining a written permit
Name: (owner) Harry Health Department."	☐ New Installation	☐ Septic Tank
Property Location: SR# 2013  Aury Rd.	Repairs	➡ Nitrification Line
	Lot	
Tax ID #	Quadrant#	
Tax ID #	Size: (2) 25a	ch,
Basement with Plumbing: Garage:		
Water Supply:  Well Public  Community		
Distance From Well: 50 ft.		
Size of tank: Septic Tank: gallons Pun Subsurface No. of exact length of each ditch Drainage Field ditches for each ditch  Erench Drain Required: Linear fact	np Tank: gal	lons epth of 19-24in.
At of were  Start Aire  Aire	All Field	to west on to installat.  L'annect obel L'ar utof A-Box.

# HARNETT COUNTY DEPARTMENT OF PUBLIC HEALTH AU IORIZATION TO CONST. JCT

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.  Have flew flattles & (10) 25) - 3357  Telephone # 1512 Charley & (25)	Authorization is hereby given to construct a wastewater system to the specifications described by
This authorization will be invalid if ownership, site plans, or intended use change.  HANGE REAL MATTER 15 22 Charley RD. Coats, N. C. Telephone #  20/3	Harnett County Department of Public Health, Improvement Permit # 19641. This authorization shall be valid for a period not to exceed five (5) years from the data of in-
Have Sleve Black B	This authorization will be invalid if ownership, site plans, or intended use change.
Address    Property Location SR#   Road Name	$M_{\rm c} = 10^{-1}$
Property Location SR#    Road Name   Subdivision   Lot # # Bedrooms Proposed   Lot Size	21 Fres RS. Es. N.C.
Subdivision  Lot # #Bedrooms Proposed Lot Size  TYPE OF SYSTEM  [] New Installation [Repair [] Septic Tank [] Nitrification Lines  [] Conventional [] Other 25 % flaborate  [] Basement [] With Plumbing [] Without Plumbing  Water Supply: [] Well [] Public Water Supply Minimum Well Setback: 50 Ft. Y  Septic Tank gal Pump Chamber gal  NITRIFICATION FIELD SPECIFICATIONS  Number of fields # of lines per field Length of lines 300 Ft.  Width of ditches 3 ft. Depth of ditches / B - 2 - 4 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.	Address
Subdivision  Lot # #Bedrooms Proposed Lot Size  TYPE OF SYSTEM  [] New Installation [Repair [] Septic Tank [] Nitrification Lines  [] Conventional [] Other 25 % flaborate  [] Basement [] With Plumbing [] Without Plumbing  Water Supply: [] Well [] Public Water Supply Minimum Well Setback: 50 Ft. Y  Septic Tank gal Pump Chamber gal  NITRIFICATION FIELD SPECIFICATIONS  Number of fields # of lines per field Length of lines 300 Ft.  Width of ditches 3 ft. Depth of ditches / B - 2 - 4 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.	20/3 Aven M
Subdivision	Property Location SR# Road Name .
Subdivision	3 1 /0 4 grate @ 25 ncm
[ ] New Installation [ TRepair [ ] Septic Tank [ ] Nitrification Lines [ ] Conventional [ ] Other 25 %	Subdivision Lot # # Bedrooms Proposed Lot Size
[ ] Conventional [ +Other 25 % Clashed.]  [ ] Basement [ ] With Plumbing [ ] Without Plumbing  Water Supply: [ ] Well	TYPE OF SYSTEM
Water Supply: [] Well	[ ] New Installation [   Repair [ ] Septic Tank [   Nitrification Lines
Water Supply: [] Well	[] Conventional [] Other 25% Reduck
Number of fields	[ ] Basement [ ] With Plumbing [ ] Without Plumbing
Number of fields# of lines per field Length of lines Ft.  Width of ditches ft. Depth of ditches / Length of lines Ft.  Width of ditches ft. Depth of ditches / /	Water Supply: [ ] Well [ Public Water Supply Minimum Well Setback: 50 Ft. 8
Number of fields	Septic Tank gal Pump Chamber gal
Width of ditches	NITRIFICATION FIELD SPECIFICATIONS
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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.  Add Add Add Add Add Add Add Add Add Ad	
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the conditions of the Improvement Permit and that a valid Operations Permit has been issued.  After Agral AS  O 2/26/05	Harnett County Health Department has determined that the system has been installed a visible to the
Aft-Byl AS 076105	the conditions of the Improvement Permit and that a valid Operations Permit has been issued.
Standards of Authorized A court for Harnett Courts	
Standards of Authorized A court for Harnett Courts	Alla IAC
Digitally of Authorized Agent for Damet County	Signature of Authorized Agent for Harnett County





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FLURA J. MILTON REGISTER OF DEEDS HARNETT COUNTY. N.C.

	Recording Time, Book and Page
ax Lot No	
erified by County on the	
y	,
fail after recording to Bryan, Jones & Johns	con, Box 387, Dunn, N.C.
his instrument was prepared byBryan _ Jones & J	Johnson
NORTH CAROLINA GENE	RAL WARRANTY DEED
THIS DEED made this 2 of day of April	, 19.79, by and between
GRANTOR	GRANTEE
Robert H. Kelly and wife, Margaret M. Kelly: Robert C. Bryan and wife,	Harry G. Matthews and wife, Debra J. Matthews
Janet K. Bryan, and Richard S. Kelly, Jr. and wife, Rosalie H. Kelly	
Janet K. Bryan, and Richard S. Kelly, Jr. and wife, Rosalie H.	
Janet K. Bryan, and Richard S. Kelly, Jr. and wife, Rosalie H.	
Janet K. Bryan, and Richard S. Kelly, Jr. and wife, Rosalie H.	riate, character of entity, e.q. corporation or partnership.

BEING ALL OF TRACT 2, containing 25.756 acres, as shown on that map entitled "Property of R. S. Kelly Estate", dated January 15, 1979, revised February 7, 1979, as surveyed and platted by Piedmont Surveying Company, which said map is recorded in Map Book 23, Page 52, Harnett County Registry.

Grove

... Township, Harnett

he property hereinabove d	described was acquired by	Grantor by instrument record	led in	
map showing the above d	described property is recor	rded in Plat Book 23	page 52	
to the second se	Market Control of the	el of land and all privileges s	and appurtenances thereto	belonging to
e same in fee simple, the	at title is marketable and t the lawful claims of all	Grantor is seized of the premis free and clear of all encumb persons whomsoever except for to the following exceptions:	orances, and that Grantor	will warrant
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TTEST:	bereby certify that Robe Janet K. Bryan  personally appeared before hand and efficial stamp or se My commission expires:	rt H. Kelly. Margere, Richard S. Kelly. me this day and acknowledged the ceal, this 3.21 day of 5.83	Bryan  A notary public of et M. Kelly, Robey Jr. & Rosalie H.	t C. Bryan Kellymanter
SEAL-STAMP	Carolina corporation, and the	teetary of	e act of the corporation, the foreg	d acknowledged
he foregoing Certificate(s) of .	•	Georette D. O	austy	
	his instrument and this cortific	ate are duly registered at the date a	and time and in the Book and Pag	re shown on the

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