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

LOW

		1 1	SEPERATOR STATE OF THE	
	Bogde	an Ionescu	EMAIL ADDRESS: S	ociald1978@gmail.
OWNER I	NAME		PHONE	10 188 13 3 1
PHYSICA	LADDRESS 281	TROY Drive	Fuavay Varina,	NC 27526
MAILING	ADDRESS (IF DIFFFER	RENT THAN PHYSICAL)		
IF RENTIN	NG, LEASING, ETC., LIS	ST PROPERTY OWNER NAME_	n/a	
N	A			1.03 acres
SUBDIVIS	SION NAME	LOT #/TRACT #	STATE RD/HWY	SIZE OF LOT/TRACT
	Owelling: [] Modula	ar [] Mobile Home	Stick built [] Other	
				× .
Garage:	Yes (No[]	Dishwasher: Ye	sX(No []	Garbage Disposal: Yes [] No.
Water Su	pply: [] Private We	II [] Community S	ystem	
Direction	s from Lillington to y	our site: Drive No	orth on 401. T	urn Reght
01	Rawls Ch	urch turn	Right on Hil	liard Brire,
				on The left
ÍΥ	, the cu	1 de sac	,	
In order	for Environmental	Health to help you with you	ır repair, you will need to com	ply by completing the following:
1.	A <u>"surveyed and reco</u>	rded map" and "deed to your	property" must be attached to the	is application. Please inform us of any
	A CONTRACTOR OF THE PARTY OF TH	by showing on your survey ma	-	morty lines flagged After the toul in
)	uncovered, property l		ities marked, and the orange sign	perty lines flagged. After the tank is has been placed, you will need to call
		committee your site is read	i craidation.	

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.

Owner Signature 22oct 25

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 yo	ou received a violation letter for a failing system from our office? [] YES NO
Also, w	ithin the last 5 years have you completed an application for repair for this site? [] YES XNO
Installe Septic	r of system Whown Tank Pumper Carolina Trash and Septic
Design	er of System UN KNOWN
1. 2.	Number of people who live in house? # adults # total What is your average estimated daily water usage? 4 gallons/month or day county water. If HCPU please give the name the bill is listed in Boydow Lowson
4. 5. 6.	If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly NA When was the septic tank last pumped? (ACC) How often do you have it pumped? (ACC) How often do you have a dishwasher, how often do you use it? (Adaily [] every other day [] weekly If you have a washing machine, how often do you use it? (Adaily [] every other day [] monthly Do you have a water softener or treatment system? [] YES (NO) Where does it drain?
9.	Do you use an "in tank" toilet bowl sanitizer? [] YES NO Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy?] [] YES NO If yes please list Do you put household cleaning chemicals down the drain? [] YES NO If so, what kind?
11. 12.	Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES NO 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
14.	Do you have an underground lawn watering system? [] YES NO 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 (00+ 100+ 100+ 100+ 100+ 100+ 100+ 100+
	Describe what is happening when you are having problems with your septic system, and when was this first noticed? Noticed standing water in the front yard after no rain on 15 oct 25. Immediately called for an inspection for 160ct 2
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
7	d-box detericiated, lives arusual in spots,

Grade A Septic Inspectors LLC

4066 NC Highway 55 E Dunn, NC. 28334 910-729-9004/ 919-586-1785

Dear Bogden Ionescu,

October 16, 2025

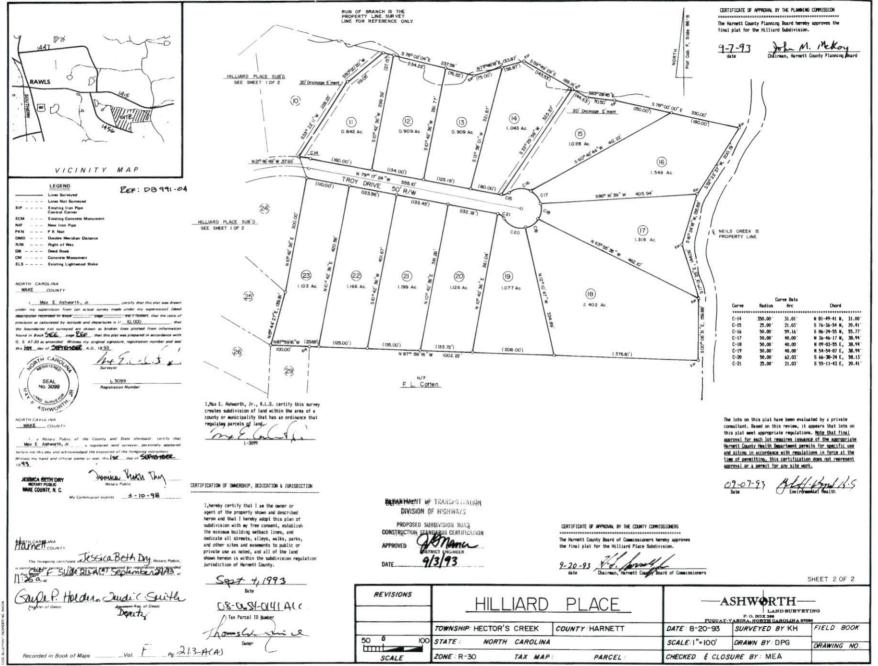
At your request, a service was done of the septic system at 281 Troy Dr. Fuquay- Varina, NC 27526, on October 16, 2025.

Upon arriving, the septic tank was opened and the distribution box (D-box) was attempted to be located. While locating the d-box, it was noted that there was seepage in the left side yard (facing the front of the house) just before the fence. A camera was run down the outlet pipe to locate the d-box. The box was dug up and evaluated. The box and lid are deteriorated. The rest of the box was cleaned out and a suction on the lines was done. The camera was run down each line. The lines had solid material and crush spots in them. Drain line one (closest to the house) is under a retaining wall and a pool. Further evaluations is needed from Harnett County Environmental Health.

Sincerely,

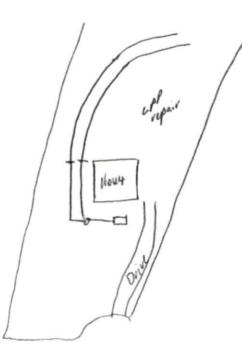
Julian Stanbro Certification #: 58341

(919)586-1785



OPERATIONS PERMIT

Name: (owner)	Walterst Batchelor Const.	New Installation	Septic Tank
Property Location:	SR#		☑ Nitrification Line
	Subdivision Hilliard Place	Lot #	
	TAX ID#	177	
Contractor:	Johany Jones	Registration #	
Basement with Plum	bing: Garage:		
Water Supply:	Well Public Community		
Distance From Well:	ft.		1 1 2
Following are the sp	pecifications for the sewage disposal sys	stem on above captione	d property.
Type of system:	Conventional A Other Polys	tyren Aggregate Treat	System 14W5 95-30
Size of tank:	Septic Tank: 1000 gallons Pu	ımp Tank: gal	lons
	No. of exact length ditches 2 of each ditch 150 f		epth of tches <u>ey</u> in.
French Drain:	Linear feet		
PERMIT NO	Date: Inspected	by: Homes Of Environmental H	Royu Ris, lealth Specialist



IMPROVEMENT PERMIT

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) Waffers & Betievler Coast		☐ Septic Tank
Property Location: SR# /45//	☐ Repairs	Nitrification Line
Subdivision Hillian Place	Lot #	15
Tax ID#	Quadrant #	
Number of Bedrooms Proposed: 3 Lot Si	ize: /.028ac	
Basement with Plumbing: Garage:		
Water Supply: Well Public Communit	у	
Distance From Well:ft.		
Following is the minimum specifications for sewage diproperty. Subject to final approval.		
Type of system: Conventional Other Polyslycom		
Size of tank: Septic Tank: gallons Pump		
Subsurface No. of exact length of each ditch	width of ft. ditches 3 ft.	depth of ditches in
French Drain required: Linear feet	ate: 6-14-9	
This permit is subject to revocation if site plans or intended use change. VOID AFTER 5 YEARS	gned: Menus	Boya R.S. Health Specialist

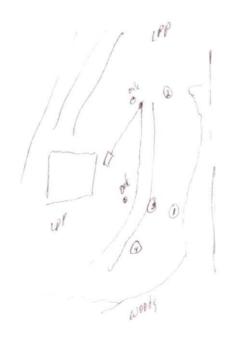
HA ITT COUNTY HEALTH DEPAR ENT AUTHORIZATION TO CONSTRUCT

Owner or Authorized Agent Walkers + Betekeles Cont
Name: Telephone #
Address:
Property Location: SR # Road Name
New Installation Repair Septic Tank Nitrification Lines &
Subdivision Hilliero Place Lot # 15
Number of Bedrooms Proposed: Lot size:
Basement With Plumbing Without Plumbing
Water Supply: Well Public Minimum Well Setback: ft.
Type of System: Conventional Other Polystynn Aggregate Inch System 1005-95-31
Tank Volume: Septic Tank gallons Pump Chamber gallons
Nitrification Field Specifications
Number of fields Number of Lines per Field Length of lines
Width of ditches ft. Depth of ditches 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.
Authorized Agent for Harnett County Health Department
Name:
(Revised 2/96)cnstrct.wpd

SITE/SOIL	EVALUATION	FOR OIL-OILE	1170	
		DAT		

APPLICANT NAME

		PROFILES						diameter			
FACTORS		1	2	3	4	5	6	7	8	9	10
LANDSCAPE POSITION	.1940									201	
SLOPE (%)	.1940			_				-			12
HORIZON 1 DEPTH		06	5-24	0-8	0-8	1			-		75
Texture Group	.1941(A)(1)	52	SL	SL	SL						
Consistence	.1941				-						
Structure	.1941(A)(2)				-						112
Mineralogy	.1941(A)(3)			-	+						1
HORIZON 2 DEPTH		6-24	2436	8-36	8-36				-		
Texture Group	.1941(A)(1)	CL	SCL	Ber	CL						
Consistence	.1941										
Structure	.1941(A)(2)										1
Mineralogy	.1941(A)(3)									-	
HORIZON 3 DEPTH		24-42		-		-					1234
Texture Group	.1941(A)(1)	SAPSIL									7-1
Consistence	.1941			-		-			-	1	
Structure	.1941(A)(2)			-		-				<u> </u>	
Mineralogy	.1941(A)(3)									1	
HORIZON 4 DEPTH		- 1		-							1
Texture Group	.1941(A)(1)			-		-			-		
Consistence	.1941			-		-	-				
Structure	.1941(A)(2)					-	_				
Mineralogy	.1941(A)(3)				-	-	-				
SOIL WETNESS	.1942					-					
RESTRICTIVE HORIZON	.1944				-	-	-				
SAPROLITE	.1943/.1953						-				
CLASSIFICATION	.1948					-	-	 	_		
LONG TERM			.4								
ACCEPTANCE RATE	.1955										_



1

SITE PLAN APPROVAL DISTRICT PA 30 USE SF Lat#15 1.028A 75'

Installing EZZLAY System

Lat # 15 1.028A Hilliard Place Plat F Slide 2/3-A(A) 08 0654 0/4/ 20 080054.0141.20 3126115 BY (02) FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2015 MAR 26 12:02:29
BK:3292 PG:932-935
FEE:\$26.00
INSTRUMENT # 2015003968
THESTER
2015003968

NORTH CAROLINA NON WARRANTY DEED

Excise Tax: \$0,00

Recording Time, Book and Page:

Brief ID: Lot 15, Hilliard Place Sub

Parcel Identifier No. 08-0654-0141-20

Mail after recording to: ATTN: Recording United Lender Services, Corp., 1000 Commerce Drive, Suite 110, Park Place One, Pittsburgh, PA 15275 (Phone #866-902-7569 File No. 99058)

This instrument was prepared by: Chester Lee Jenkins, NC Associate Attorney, McDonnell & Associates, PA. Any delinquent taxes to be paid by closing attorney upon disbursement of closing proceeds to the county tax collector. This Deed is exempt from transfer tax as a conveyance in no consideration in property or money due or paid by the transferee or transferor, under North Carolina General Statutes Article 5 § 105-228.29. TITLE NOT EXAMINED BY PREPARING ATTORNEY

THIS DEED made this 9h day of March, 2015 by and between

GRANTOR

Bogdan Adrian Ionescu AKA Bogdan A. Ionescu, joined by spouse, Nicole Joann Meyer

281 Troy Drive, Fuquay Varina, NC 27526

GRANTEE

Bogdan Adrian Ionescu and Nicole Joann Meyer, husband and wife

281 Troy Drive, Fuquay Varina, NC 27526

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 or parcel of land in **Harnett County**, North Carolina and more

	All or a portion of the property hereinabove described was acquired by Grantor by instrument recorded in Book 2816 at Page 1, Harnett County Registry.
	A map showing the above described property is recorded in Plat Cabinet F, Slide 213-A(A), and referenced within this instrument.
	The above described property \square does \square does not include the primary residence of the Grantor.
	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.
	The Grantor makes no warranty, express or implied, as to title to the property hereinabove described.
•	IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officer(s), the day and year first above written. By Clay Advisor Clay MAA By Clay Advisor Clay MAA Bogdan Adrian Ionescu AKA Bogdan A. Ionescu
	NORTH CAROLINA Linett COUNTY
	I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document: Bogdan Adrian Ionescu AKA Bogdan A. Ionescu: Witness my hand and official stamp or seal, this the
	Print Notary Name: 11/26/2016
	JOAN B. TODD Notary Public, North Carolina Wake County My Commission Expires November 26, 2016

IN WITNESS WHEREOF, the Grantor has hereunto set his hand and seal, or if corporate, has caused this instrument to be signed in its corporate name by its duly authorized officer(s), the day and year first above written.

Nicole Joann Meyer

NORTH CAROLINA LAMET COUNTY

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she signed the foregoing document: **Nicole Joann Meyer**: Witness my hand and official stamp or seal, this the ____O_9__ day of ________, __ZO_1≦__.

My Commission Expires: _

11/26/2016

Jan B. To

Print Notary Name: Jon B. Tolo

JOAN B. TODD

Notary Public, North Carolina

Wake County

My Commission Expires

November 26, 2016

particularly described as follows:

See Attached "Exhibit A"

Exhibit A

All that certain lot or parcel of land situated in the Township of Hectors Creek, Harnett County, North Carolina and more particularly described as follows:

Being all of Lot 15 Hilliard Place Subdivision, as recorded in Plat Cabinet F, Slide 213-A(A) of the Harnett County Registry.

Parcel ID: 08-0654-0141-20

Commonly known as: 281 Troy Drive, Fuquay Varina, NC 27526