

HARNETT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION, PO BOX 09, LILLINGTON, NC 27546
APPLICATION FOR REPAIR

DATE 4-11-01

NAME Suzette ~~S~~ Schump TELEPHONE NO. 910-814-1512

911 ADDRESS (current) 351 Senter Lane

PROPERTY OWNER _____

SUBDIVISION NAME Senter Hill LOT NO. 22

STATE ROAD NAME _____ STATE ROAD NO. _____

LOCATION OF PROPERTY:

SIZE OF LOT OR TRACT _____

DIRECTIONS _____

Type of dwelling _____ Basement with plumbing _____

Number of bedrooms 3 Garage _____

Dishwasher _____ Garbage disposal _____

WATER SUPPLY: PRIVATE WELL _____ COMMUNITY SYSTEM / COUNTY X

1) A surveyed and recorded map must be attached to this application along with a site plan showing: 1) Location of dwelling, 2) Location of driveway, 3) Location of any wells and other existing structures. A copy of the deed must also be attached.

2) The outlet end of the tank and distribution box will need to be uncovered and property lines marked. After the tank is uncovered and property lines are marked, you will need to call us at 893-7547 or 893-7548 and let us know that it is ready.

3) The system must be repaired in the set time of violation letter or if there is no violation letter, then it needs to be repaired within 30 days.

This certifies 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 change.

Signature of Owner or
Authorized Agent ONLY _____

Homeowner Interview Form

Name: _____ Date: _____

Address: _____ Phone: (H) _____

_____ (W) _____

Installer of System: _____

Septic Tank Pumper: _____

Designer of System: _____

1. Number of people who live in the house: _____

How many adults: _____ How many children: _____

2. What is your average daily water usage? _____

3. Do you have a garbage disposal? _____

How often do you use it? _____

4. When was the septic tank last pumped? _____

How often do you have it pumped? _____

5. Do you have a dishwashing machine? _____

How often do you use it? _____

6. Do you have a clothes washing machine? _____

How often do you use it? _____

7. Do you have a water softener or water treatment system? _____

Where does it drain? _____

8. Do you use an "in the tank" toilet bowl sanitizer? _____

9. Is any family member using a (long term) prescription drug, antibiotics or chemotherapy? _____

What kinds? _____

10. Are any household cleaning chemicals put down the drain? _____

What kinds? _____

11. Are any chemicals (paints, thinners, etc.) disposed down the drain? _____

What kinds? _____

12. Have any new water using fixtures been added since the system was installed? _____

What kinds? _____

List plumbing fixtures (like spas, whirlpools) other than sinks, lavatories,

bath/showers and toilets: _____

13. Do you have an underground lawn-watering system? _____

14. Has any site work been done to the house since you moved in, such as underground roof gutter drains, basement/foundation drains, landscaping, etc.? _____

What kinds? _____

15. Are there any underground utilities on your lot? _____

Check which types:

Power _____ Phone _____ Cable _____ Gas _____ Water _____

16. Describe what happens when you have a problem with your septic tank system.

When did you first notice the problem? _____

Does the problem seem to be linked to a specific event (washing clothes, heavy rains, company coming over, etc.)?

SYSTEM
Failed BECAUSE
EEF 222 LAG
Failed - Crushed