

**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

NAME Jon C Allen, Jr EMAIL ADDRESS: N/A
 PHONE NUMBER 910 303 0186
 PHYSICAL ADDRESS 2363 Hodges Chapel Rd Nunn NC
 MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) Box 86 Benson NC 27504
 IF RENTING, LEASING, ETC., LIST PROPERTY 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 Community System County

Directions from Lillington to your site: _____

- 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.

Signature Jon C Allen, Jr Date 3-14-17

317-17
N

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) 1940 -> 1950 ???
Installer of system ??
Septic Tank Pumper ??
Designer of System ??

1. Number of people who live in house? 2 # adults NO # children 2 # total
2. What is your average estimated daily water usage? 50 gallons/month or day 1500 county water. If HCPU please give the name the bill is listed in John Allen month
3. If you have a garbage disposal, how often is it used? daily weekly monthly NONE
4. When was the septic tank last pumped? 15 yrs How often do you have it pumped? When needed
5. If you have a dishwasher, how often do you use it? daily NO 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? NO
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 new sink NONE
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 NO
15. Are there any underground utilities on your lot? Please check all that apply: Power Phone Cable Gas Water NO
16. Describe what is happening when you are having problems with your septic system, and when was this first noticed?
Roots in line
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 _____



35.363 -78.570 Degrees

Harnett County Government Complex
307 W. Cornelius Harnett Boulevard
Lillington, NC 27546

ph: 910-893-7547
fax: 910-893-9371

March 28, 2017

John Allen
PO Box 86
Benson, NC 27504

Re: Status of Repair Permit

John,

An attempt was made to evaluate your property for the purpose of issuing a Repair Permit. The evaluation could not be completed for one or more of the following reasons.

- 1. Use pink flags to mark property lines and irons that are set by surveyor need to be visible.
- 2. Use orange flags to mark house corners (*\$25.00 fee incurred*)
- 3. Directions not clear to property (*\$25.00 fee incurred*)
- 4. Property needs only brush or vegetation removed
- 5. Driveway not shown on site plan
- 6. Backhoe pits required
- 7. Other-

Your application will be put on hold until the selected items above have been addressed. When completed **please call 910-893-7547 to confirm** that the items mentioned have been corrected, we will then reschedule your property for evaluation.

Sincerely,



James Manhart, III, R.E.H.S.
Environmental Health Specialist
Harnett County Department of Public Health

JM/kh

Copy: Central Permitting