

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: david.w.clouse@mail.com

NAME David & Karla Clouse

PHONE NUMBER (910)308-1378

PHYSICAL ADDRESS 192 Cypress RD, Cameron NC 28326

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) P.O. Box 384 Hopkinsville KY, 42241

IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME _____

NA

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 No Garbage Disposal: Yes No

Water Supply: Private Well Community System County

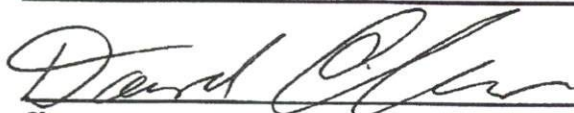
Directions from Lillington to your site: Head south on S Main St Toward e Front St, Turn right onto W Old Rd, Turn left onto NC-27 W, Turn Left onto NC-24W/NC-27W, Turn left onto Line RD, Turn left onto Cypress Rd, 192 Cypress RD.

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

14 Mar 18
Date

3-15-18
S

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) _____

Installer of system _____

Septic Tank Pumper _____

Designer of System _____

1. Number of people who live in house? _____ # adults _____ # children _____ # total
2. What is your average estimated daily water usage? _____ gallons/month or day _____ county water. If HCPU please give the name the bill is listed in _____
3. If you have a garbage disposal, how often is it used? daily weekly monthly
4. When was the septic tank last pumped? _____ How often do you have it pumped? _____
5. If you have a dishwasher, how often do you use it? daily 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?

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 _____
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 _____
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 this first noticed?

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 _____



MARLIN

Onsite Wastewater System Inspection

Audit Title

192 Cypress

Conducted on

3/9/18

Location

192 Cypress Rd
Cameron, NC 28326

Prepared by

Marlin Wastewater Services

Completed on

3/9/18, 10:27 AM

Licensed Inspector:

Jeffrey Kerr

jeff@marlinw.com

NC-OWCICB Level IV Installer / Inspector 192311

Jeffrey Kerr

Marlin Wastewater Services, LLC

P.O. Box 865 West End NC, 27376

(910)295-1899 / (910)673-0599

NCDEQ Septage Management Firm NCS-00371

Adverse conditions present that require repair, subsequent observation or warrant further evaluation by the local health department:

1. Septic Tank

- a. Crack in upper baffle.
- b. Cracks in tank top around outlet lid.
- c. Deteriorated outlet baffle.
 - i. Repair/replace septic tank.

2. Distribution Box

- a. Significant deterioration and root growth in distribution box.
- b. Box is not watertight.
- c. Distribution device is not distributing effluent evenly. One line appears to be receiving all of the effluent.
 - i. Repair/replace distribution box. Flow should be adjusted so that each line is receiving an equal amount of water.

Client should contact a licensed an on-site wastewater contractor for repair.

Replacement of any component may require a permit from the Environmental Health Department.

Other pertinent facts noted at the time of inspection:




- 1. There is a tree growing in the leach line closest to the driveway. Roots from this type of vegetation may affect the condition of the system/system components. If growth is addressed we recommend cutting down at the base rather than uprooting to prevent damage to the leach line.
- 2. Harnett County Environmental Health Department was unable to locate any information about the septic system on this property. The number of bedrooms/GPD this system was designed to serve is unknown.




Disclaimer






No representation, warranties or opinions are hereby given, written or expressed otherwise, as to the future performance of onsite wastewater system described herein. This onsite wastewater system inspection is a presentation of system facts in place on date of inspection. The inspectors do not accept responsibility for any consequences arising from the use of the information herein. The report is based on matters which were observed or came to the attention of the inspectors during the day of the inspection and should not be relied upon as an exhaustive record of all possible issues that may exist or potential improvements that can be made.

Confidentiality Statement

In order to maintain the integrity and credibility of the inspection processes and to protect the parties involved, it is understood that the the inspectors will not divulge to unauthorized persons any information obtained during this inspection unless legally obligated to do so. Unless otherwise specified, Marlin will only discuss the results of this inspection with the buyer, seller and their respective representatives.

Question	Response	Details
Approximate total holding capacity:	1000 Gallon	
Date of Inspection	3/9/18	
Septic System Location		
Tank Location:	Front Center	
Approximate distance from house or other structure to septic tank (ft):	4	
Every sanitary sewage treatment and disposal system shall be located at least the minimum horizontal distance from the following: Any building foundation 5 feet (NCAC .1950)		
Distance from swimming pool, if applicable (ft):	N/A	
Distance from well, if applicable (ft):	Unknown	
Septic Tank Location		
 <p>Moore County Environmental Health considers a deck/porch post a foundation.</p> <p>Media 5</p>		
Distance from water lines / property lines unknown.		
Evidence of irrigation within 10 feet any system component?	No	
Evidence of traffic over the septic system:	No	
System appears to be as shown on operations permit from local Environmental Health Department.		
Septic Tank		
Single Tank or Double Tank?	Single Tank	
Approximate total holding capacity:	1,000	
Subsurface wastewater pollution control system operator required?	No	
Septic Tank is accessible.	Yes	
Percentage of solids (sludge and scum) in tank:	50	
Tank pumped at time of inspection:	Yes	
Did any water return to the tank from the next component when the tank was pumped?	No	
Tank Structure is in good condition. No strong signs of deterioration or cracks:	No	Crack in upper baffle wall.
  <p>Media 1 Media 2</p>		
Tank component in need of repair:	Baffle Wall, Outlet Baffle, Cracks around Inlet Lid	
Access risers are present:	N/A	
Distance from finished grade to top of tank (in):	11	

Question	Response	Details
Both access lids on tank are accessible and were opened during inspection:	Yes	
Tank lids are in tact and in good condition. No strong signs of deterioration or cracks:	Yes	
Baffle is in tact and in good condition:	No	
 <p>Media 3</p>		
Water level in tank relative to tank outlet:	Yes	
Water level in tank is below the invert of the inlet.	Yes	
Signs of root intrusion in tank:	No	
Evidence of tank leakage.	No	
Outlet Tee / Baffle		
Outlet Tee / baffle is present:	Strong Deterioration	
 <p>Media 6</p>		
Connection present from tank to next component:	Yes	
Does the system have a pump and pump tank?	No	
Distribution device present:	Yes	
Distribution Device		
Distribution device is accessible:	Yes	
Distribution Device Location		
 <p>Media 7</p>		
Type of distribution device:	Distribution Box	
Size of Distribution Box	Small	
Distribution device is providing equal distribution of effluent.	No	
Is the distribution device settled or tilted?	Yes	Line closest to driveway is taking most of the water
Presence of roots in distribution device.	Yes	
Distribution device appears to be watertight:	No	
Corrosion / deterioration present in distribution device:	Significant Deterioration	
Confirmation that system effluent is reaching the drain field from the distribution device:	Yes	

Question	Response	Details
Conditions present that have prevented or hindered the inspection of the distribution device.	No	
Drain Field		
Drain Field Location		
    <p data-bbox="199 411 662 432">Media 8 Media 9 Media 10 Media 11</p>		
Method for dosing to the field.	Gravity	
Configuration for dispersal in the field:	Parallel Trench	
Nature of media:	Gravel	
Evidence of past or current surfacing at time of inspection:	No	
Evidence of surface water inflow:	No	
Adequate ground cover over drain field (6" or more):	Yes	
Objects or structures that may affect the condition of the system or system components:	No	
Leach lines probed:	Yes	
System effluent is reaching the leach field:	Yes	
Soil Condition at Leach Lines:	Normal	
Number of leach lines:	3	
Vegetation, grading and drainage noted that may affect the condition of the system or system components.	Yes	Tree over line closest to driveway
 <p data-bbox="199 1230 272 1251">Media 4</p>		
Additional Information		

Media



Media 1



Media 2



Media 3



Media 4



Media 5



Media 6



Media 7



Media 8



Media 9



Media 10



Media 11



FOR REGISTRATION REGISTER OF DEEDS
 KIMBERLY S HARGROVE
 HARNETT COUNTY NC
 2006 MAR 15 04 35 17 PM
 BK 2200 PG 553 555 FEE \$17 00
 NC REV STAMP \$184 00
 INSTRUMENT # 2006004453

HARNETT COUNTY TAX ID#

09-9545-0303-14
 3/15/06 BY [Signature]

NORTH CAROLINA GENERAL WARRANTY DEED

Prepared by / Return to Jeff Dunham

222FH06

Excise Tax \$184.00

Parcel Identifier No 95 45 37 2683 Verified By _____ County on the _____ day of _____ 200
 By _____

Mail to McCoy Weaver Wiggins et al 202 Fairway Drive Fayetteville NC 28305

This Instrument was prepared by McCoy Weaver Wiggins et al 202 Fairway Drive Fayetteville NC 28305

Brief description for the Index Lot 19 Section KNOTTY PINES Subdivision

THIS DEED made this 3 March 2006 by and between

GRANTOR	GRANTEE
MATTHEW A CARROLL and wife LISA M CARROLL 192 Cypress Rd Cameron, NC 28326	DAVID W CLOUSE and wife KARLA CLOUSE 192 CYPRESS ROAD CAMERON NC 28326

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 situated in the City of CAMERON _____ Township HARNETT County North Carolina and more particularly described as follows

BEING all of Lot No 19 in a subdivision known as KNOTTY PINES according to a plat of the same duly recorded in Plat Cabinet 2 Slide 312 Harnett County North Carolina Registry Together with improvements thereon said property being located 192 Cypress Rd Cameron NC

The Property hereinabove described was acquired by Grantor by instrument in Book 2064 Page 649

A Map Showing the above described property is recorded in Plat Cabinet 2 Slide 312

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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

And the Grantor covenants with the Grantee the 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 other than the following exceptions
Easements restrictions and rights of way of record Current year ad valorem taxes

IN WITNESS WHEREOF the Grantor has duly executed the foregoing as of the day and year first above written

(Entity Name)

Matthew A Carroll (SEAL)
MATTHEW A CARROLL

By _____
Title

Lisa M Carroll (SEAL)
LISA M CARROLL

State of NORTH CAROLINA County of CUMBERLAND

I FRIEDA S HUGHES the undersigned Notary Public of the County and State aforesaid certify that MATTHEW A CARROLL and LISA M CARROLL personally appeared before me this day and acknowledged the due execution of the foregoing instrument for the purposes therein expressed.

Witness my hand and Notarial Seal or Stamp this 15th day of MARCH 2006

My Commission Expires

10-8-2009



Frieda S Hughes
Notary Public

State of _____ County of _____

I the undersigned Notary Public of the County and State aforesaid certify that _____ attorney in fact for _____ personally appeared before me this day and acknowledged the due execution of the foregoing and annexed instrument for and on behalf of _____ and that her/his authority to execute and acknowledge the said instrument is contained in an instrument duly recorded in the HARNETT County Registry and that this instrument was executed under and by virtue of the authority duly given by said instrument granting her/him Power of attorney that the said _____ acknowledged the due execution of the foregoing and annexed instrument for the purposes therein expressed for and on behalf of the said _____

Witness my hand and Notarial Seal or Stamp this day of _____

My Commission Expires _____

Notary Public

The foregoing Certificate(s) of _____ is/are Certified to be correct This instrument and this certificate are duly registered at the date and time and in the Book and Page shown on the first page hereof

By _____ Register of Deeds for HARNETT County
Deputy/Assistant - Register of Deeds