

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 Michael Mike and Pam Lanier EMAIL ADDRESS: mlaniercsb@aol.com
pamlaniercsb@gmail.com 0093
PHONE NUMBER (910) 890-0035 / (910) 890-0093
PHYSICAL ADDRESS 1692 McNeill Hobbs Rd, Bunnlevel, NC 28323
MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) N/A
IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME Michael W. Lanier / Pamela F Lanier
N/A

SUBDIVISION NAME LOT #/TRACT # STATE RD/HWY SIZE OF LOT/TRACT

Type of Dwelling: Modular Mobile Home Stick built Other _____

Number of bedrooms 4 Basement

Garage: Yes No Dishwasher: Yes No Garbage Disposal: Yes No

Water Supply: Private Well Community System County

Directions from Lillington to your site: go main Street turn right on 210 Hwy
go about 5-6 miles take left (past Harmony Church)
on McNeill Hobbs Rd). Go about 3.5 miles
on McNeill Hobbs Rd and house will be on right.

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.

Pamela J Lanier

Signature

6/23/17

Date

10.26.17
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) 1938?

Installer of system _____

Septic Tank Pumper Gerald Temple

Designer of System ?

1. Number of people who live in house? 2 # adults 2 # children 4 # 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 N/A

4. When was the septic tank last pumped? 4 yrs 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 Bathroom and Kitchen

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

16. Describe what is happening when you are having problems with your septic system, and when was this first noticed?

Bubbling in toilet having to pump septic tank. Septic tank is the original one w/ house. Not holding capacity.

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 some Both times

We had it pumped it has rained a lot.

OPERATIONS PERMIT

Name: (owner) Michael Lanier New Installation Septic Tank
 Property Location: SR# 2072 Repairs Nitrification Line
 Subdivision McNeill Hobbies Lot # _____
 TAX ID# _____ Quadrant # _____
 Contractor: Ottis Strickland Registration # _____

Basement with Plumbing: Garage: EXISTING

Water Supply: Well Public 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: EXISTING gallons Pump Tank: _____ gallons

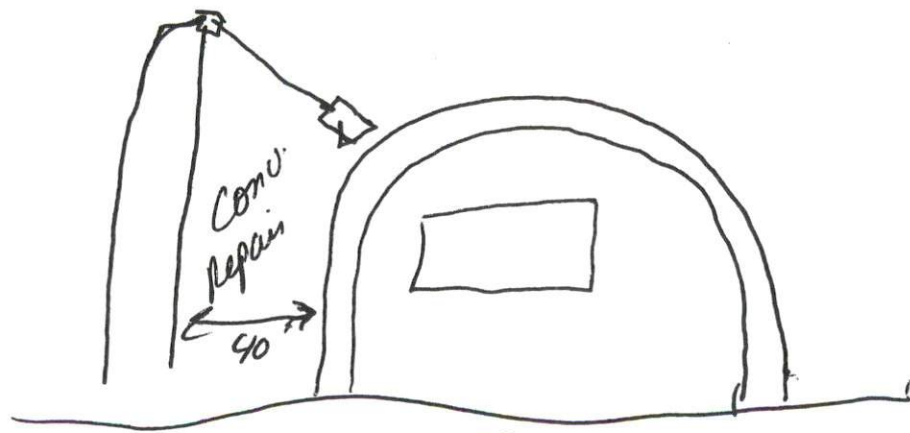
Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 24 in.

French Drain: _____ Linear feet

PERMIT NO. 17193

Date: 01 May 2000
 Inspected by: Vernon R. Doherty
 Environmental Health Specialist

*No building permits can be obtained from this permit. VRD
polylok filter installed.



SR 2072

Attempt to Repair

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) Micheal Lanier

New Installation Septic Tank

Property Location: SR# 2072

Repairs Nitrification Line

Hobbs-11th Well Road

Subdivision _____ Lot # _____

Tax ID # _____ Quadrant # _____

Number of Bedrooms Proposed: THREE Lot Size: _____

Basement with Plumbing: Garage:

Water Supply: Well Public Community

Distance From Well: 50 ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system: Conventional Other _____

Size of tank: Septic Tank: EXISTING gallons Pump Tank: _____ gallons

Subsurface Drainage Field No. of ditches 2 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 18 2/4 in.

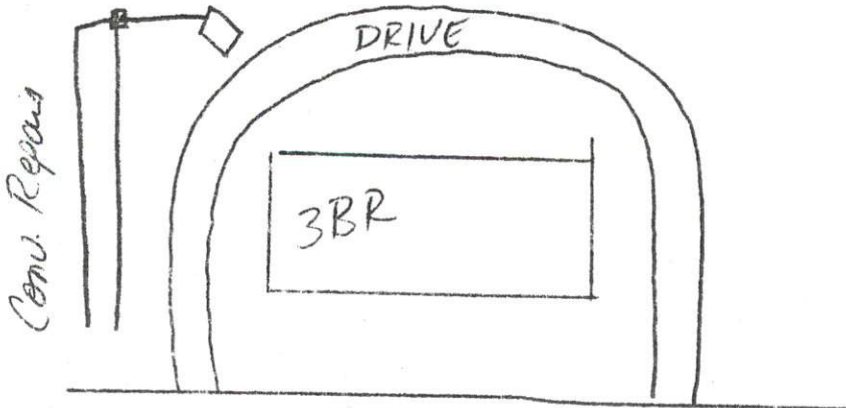
French Drain Required: _____ Linear feet

Date: 25 April 2009

This permit is subject to revocation if site plans or intended use change.

Signed: Vincent R. Deje Environmental Health Specialist

Pump tank & install filter



SR 2072

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
Harnett County, NC
2015 NOV 13 09:18:31 AM
BK:3354 PC:993-994
FEE: \$26.00
EXCISE TAX: \$40.00
INSTRUMENT # 2015015812
ABMCNEILL

HARNETT COUNTY TAX ID#

120557-0018-03
120557-0018-09

11/13/15 BY (CW)



Prepared by and return to: Bain & McRae, LLP, Attorneys at Law, 65 Bain Street,
Lillington, NC 27546

NORTH CAROLINA,

HARNETT COUNTY

SPECIAL WARRANTY DEED

Rev. 4.0.11

THIS DEED, Made and entered into this 12th day of November, 2015, by and between Cape

Fear Farm Credit, ACA, Post Office Box 1117, Lillington, NC 27546, hereinafter called Grantor,
and Michael Lanier and wife, Pamela F. Lanier, 1692 McNeill Hobbs Rd, Bunnlevel, NC 28323,
hereinafter called Grantee;

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 said Grantor, for a valuable consideration paid by the Grantees, 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 parcel of land situated in **Stewart's Creek Township, Harnett County,**
North Carolina, and more particularly described as follows:

**Parcel ID No. 120557 0018 03 and out of Parcel ID No. _____
BEING all of Tract Fourteen, containing 0.65 acres and Tract Fifteen, containing
1.48 acres, as shown upon that Boundary Survey For: Cape Fear Farm Credit,
ACA, prepared by Johnny J. Williams Land Surveying, P.C., dated September
10, 2015 and recorded in Map Book 2015-292, Harnett County Registry. Tract
Fourteen is to be recombined with an existing parcel owned by Grantee and
which appears in Book 1654, Page 214, Harnett County Registry.**

**Tract Fourteen is a portion of Tract 3 and Tract 15 is all of Tract 7 conveyed to
Cape Fear Farm Credit, ACA by deed appearing of recorded in Book 3190, Page
380, Harnett County Registry.**

To have and to hold the aforesaid lots or parcels of land and all privileges thereunto belonging
to the Grantees in fee simple.

And the Grantor covenants with the Grantees, that Grantor has done nothing to impair such title
as Grantor received, and Grantor will warrant and defend the title against the lawful claims of all
persons claiming by, under or through Grantor, except for the exceptions hereinafter stated.

Title to the property hereinabove described is subject to the following exceptions:

Any and all utility easements and road rights of way appearing of record.

IN WITNESS WHEREOF, the Grantor has caused this instrument to be executed, the day and year first above written.

CAPE FEAR FARM CREDIT, ACA

BY: *John O. Patterson* (SEAL)
Johnathan O. Patterson

NORTH CAROLINA
HARNETT COUNTY

I, Lauren Graham, a Notary Public in and for the aforesaid State and County, do hereby certify that **Johnathan O. Patterson**, personally appeared before me this day and acknowledged that he is Vice President of Cape Fear Farm Credit, ACA, a federally established association, and that he, as Vice President, being authorized to do so, executed the foregoing on behalf of the association.

Witness my hand and notarial seal this 12 day of November, 2015.



Lauren Graham
Signature of Notary Public

Lauren Graham
Printed Name of Notary Public

My Commission Expires: 5-26-19