#### 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_Bobby Steele PHONE NUMBER 919-663-2034  PHYSICAL ADDRESS 5965 Old US 421 - Lillington, NC
PHYSICAL ADDRESS 5965 Old US 421 - Lillington NC
MAILING ADDRESS (IF DIFFFERENT THAN PHYSICAL) P.O. BOX 686 - Siler City NC 27344
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 _ 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: 421 N To 421 Bus.
<ol> <li>A "surveyed and recorded map" and "deed to your property" must be attached to this application. Please inform us of an wells on the property by showing on your survey map.</li> <li>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.</li> <li>Your system must be repaired within 30 days of issuance of the Improvement Permit or the time set within receipt of a violation etter. (Whichever is applicable.)</li> </ol>
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

### 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**

			Λ .
NAME_FRANCES	Brown	EMAIL ADDRESS:	TRAN. BROWN 1230 agmail.
PHYSICAL ADDRESS 5965		PHONE NUMBER_	919-196-1066 2-1546
MAILING ADDRESS (IF DIFFFERE			
IF RENTING, LEASING, ETC., LIST	PROPERTY OWNER NAME		
NIA	* ,		
SUBDIVISION NAME	LOT #/TRACT #	STATE RD/HWY	SIZE OF LOT/TRACT
Type of Dwelling: [] Modular	[] Mobile Home	Stick built [] Other_	,
Number of bedrooms	[] Basement	1	No layout
Garage: Yes No[]	Dishwasher: Yes [	] No [ ]	Garbage Disposal: Yes [] No []
Water Supply: [] Private Well	[] Community Syst	em County	
Directions from Lillington to your	site: <u>0/d US 421</u>	approximately 3	T-6 miles
Directions from Lillington to your House /Lot on	left just aft.	er C.P. Stenay	KRD.
wells on the property by sh  2. The outlet end of the tank a uncovered, property lines fi us at 910-893-7547 to confi Your system must be repaired withiletter. (Whichever is applicable.)  By signing below, I certify that all of	owing on your survey map. and the distribution box will n lagged, underground utilities irm that your site is ready for n 30 days of issuance of the l	need to be uncovered and promarked, and the orange sign revaluation.	
the denial of the permit. The permit	is subject to revocation if the	e site plan, intended use, or	neage. False information will result in ownership changes.
Liances Bron	m	3-21-20,	16
Signature		Date	

## 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.

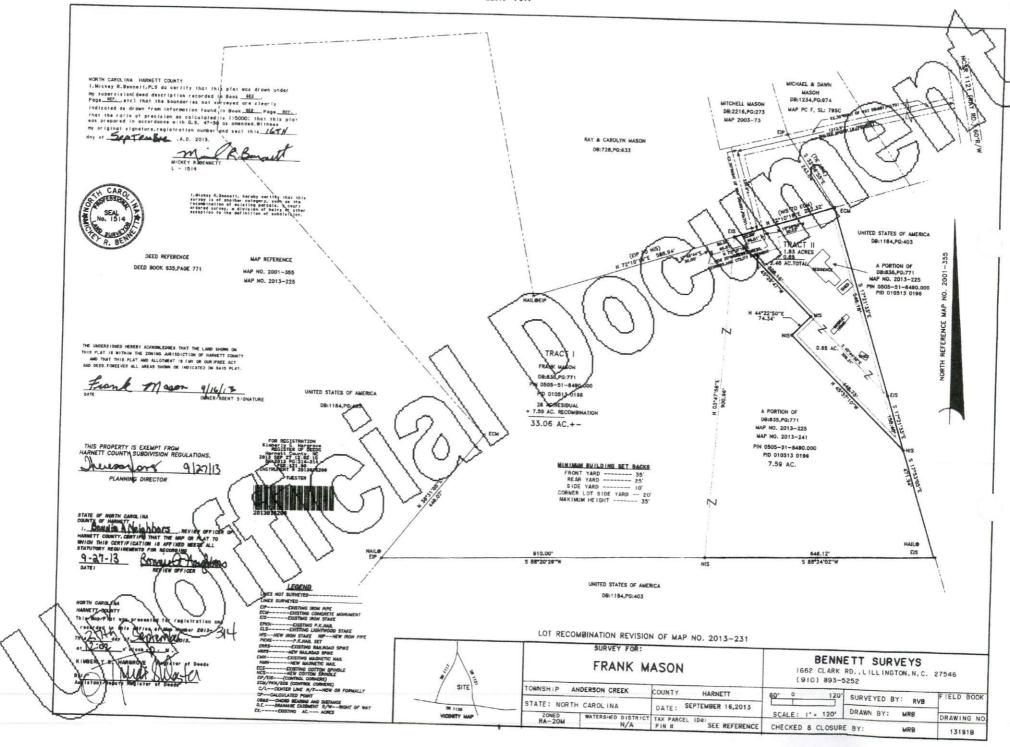
Have you received a violation letter for a failing system from our office? []YES [/]NO Also, within the last 5 years have you completed an application for repair for this site? []YES [/]	NO
Year home was built (or year of septic tank installation) 1975  Installer of system Not Succe  Septic Tank Pumper Not Succe  Designer of System Succe	
<ol> <li>Number of people who live in house?# adults# children</li> <li>What is your average estimated daily water usage?gallons/month or day</li> <li>water. If HCPU please give the name the bill is listed in</li> </ol>	# total county
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 6. If you have a washing machine, how often do you use it? [ ] daily [ ] every other day [ ] weekly 7. Do you have a water softener or treatment system? [ ] YES [ ] NO Where does it drain?	[] weekly
<ol> <li>Do you use an "in tank" toilet bowl sanitizer? [] YES [ ] NO</li> <li>Are you or any member in your household using long term prescription drugs, antibiotics of chemotherapy?] [] YES [ ] NO If yes please list</li> </ol>	or
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  please list any additions including any spas, whirlpool, sinks, lavatories, bath/showers, toiled.	If yes,
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 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[] W  16. Describe what is happening when you are having problems with your septic system, and when the seption of the	en was this
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clother rains, and household guests?) [ ] YES [/] NO If Yes, please list	s, heavy

## 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.

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	
<ol> <li>Number of people who live in house?  # adults  # children  # chil</li></ol>	total unty
4. When was the continuously how often is it used? [ ] daily [ ] weekly [ ] monthly	
	eekly
7. Do you have a water softener or treatment system? [] YES NO Where does it drain?	nthly
8. Do you use an "in tank" toilet bowl sanitizer? [ ] YES NO	
3. Are you or any member in your household using long torm processing	
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 units. 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	_
The strip work been dolle to your structure since the initial many interest	**
drains, basement foundation drains, landscaping, etc? If yes, please list	iter
23. Are there any underground utilities on your lot? Please check all that apply:	_
[ ] Power [ ] Phone [ ] Cable [ ] Gas [ ] Water first noticed?	this
7. 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	_

1/8 5965 Old US Hay 421 L. Mington, Mc27546



13.0070.601)

FOR REGISTRATION
Kimberly S. Hargrove
REGISTER OF DEEDS
HArnett County NC
2017 MAR 21 12:54:10
BK:3488 PG:586-567
EXCISE TAX: \$150.00
INSTRUMENT # 2017004075
THESTER



NORTH CAROLINA GENERAL WARRANTY DEED

Excise Tax \$150.00

Recording Time, Book and Page

Parcel ID: 130620 0017

Mail after Recording to Grantee @ PO Box 686 Siler City, NC 27344

This instrument was prepared by: LEWIS R. FADELY

THIS DEED made this 20th day of March 2017 by and between

GRANTORS

STANLEY P. BRYANT, unmarried PO Box 1452

Lillington, NC 27546

GRANTEE

ALLOY, INC A North Carolina Corporation Property Address: 5965 Old US Hwy 421 Lillington, NC 27546

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 and prore particularly described as follows:

BEING all of Lot 1 as shown on a survey for Stanley P. Bryant dated 10/03/2016 as recorded in Map Number 2016-314 in the Office of the Register of Deeds of Harnett County, North Carolina.

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, that 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 ar persons whomsoever except for the exceptions	nd defend the title against the lawful claims of all hereinafter stated.
Title to the property hereinabove described is su	abject to the following exceptions:
3. Subdivision, zoning, health and FF	A rules, regulations and laws.
IN WITNESS WHEREOF, the Grantor has has caused this instrument to be signed in its officer(s), the day and year first above written	nereunto set his hand and seal, or if corporate, corporate name by its duly authorized 1.
	Dulas Bry
	Stanley P. Bryant
$(Q)_{AQ}$	
STATE OF NC	
COUNTY OF Guldre	
I, hereby certify that, Stanley P. Bryant Grantor(s) acknowledged the execution of the foregoing NC	, a Notary Public of said county do personally appeared before me this day and General Warranty Deed.
WITNESS my hand and notarial seal-stam	up, this the Att day of March,
	(A)-02:1
My Countinsion Expires: 11/28/18	AN PUBLIC
O NOTATION OF THE PARTY OF THE	(0)
PUBLIC NORD COUNTY	
· · · · · · · · · · · · · · · · · · ·	$(\zeta V_{\lambda})$
	V/25
	V/55
	$\langle \langle \rangle \rangle$
	(9)
	7/15
	V//~
	1 /