

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: hbutts@gmail.com

NAME HAROLD BUTTS PHONE NUMBER 910-893-4240 home
910-984-6115 cell

PHYSICAL ADDRESS 53 SAMANTHA AVE, Lot 31, ANGLIER NC 27546

MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 2191 KEITH HILLS RD, LILLINGTON NC 27546

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

TAYLOR VILLAGE MHP Lot 31 HARNETT CENTRAL RD 84 X 150
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: Hwy 210 TOWARD ANGLIER, RT ONTO Hamitt Central Rd,
2.5 mi on RIGHT (3rd entrance to TIVillage (HAROLD DR) TAKE RT ONTO
SAMANTHA AVE, FIRST HOME on RT.

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.

Harold T. Butts
Signature

12/10/14
Date

N. B. B.
12/16/14

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 [X] NO

Also, within the last 5 years have you completed an application for repair for this site? [] YES [X] NO

Year home was built (or year of septic tank installation) 1996

Installer of system PRECISION SEPTIC

Septic Tank Pumper TERRY MAPLES

Designer of System Harritt Co.

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 DAVID C. TOLENTI

3. If you have a garbage disposal, how often is it used? [] daily [] weekly [] monthly

4. When was the septic tank last pumped? 10/13 How often do you have it pumped? 4 YRS ?

5. If you have a dishwasher, how often do you use it? [] daily [X] every other day [] weekly

6. If you have a washing machine, how often do you use it? [] daily [] every other day [X] weekly [] monthly

7. Do you have a water softener or treatment system? [] YES [X] NO Where does it drain?

8. Do you use an "in tank" toilet bowl sanitizer? [] YES [X] NO

9. Are you or any member in your household using long term prescription drugs, antibiotics or chemotherapy? [] YES [X] 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 [X] NO

12. Have you installed any water fixtures since your system has been installed? [] YES [X] 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 [X] 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 N/A

15. Are there any underground utilities on your lot? Please check all that apply:

[X] Power [X] Phone [X] Cable [] Gas [X] Water

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

TENANT RAN OVER TANK MOVING IN IN 2013 AND HAD IT FIXED. (BACK (INTAKE SECTION) had cement pad poured, NOT BACKED UP BUT SEEPING OUT FRONT LID.)

17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains, and household guests?) [X] YES [] NO If Yes, please list ALL ABOVE

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Harold Butts Jr. New Installation Septic Tank
Property Location: SR# 1403 Repairs Nitrification Line
Subdivision Taylor Village MHP Lot # 31
TAX ID# _____ Quadrant # _____
Contractor: Ricky Holland Registration # _____
Basement with Plumbing: Garage:
Water Supply: Well Public Community
Distance From Well: 100 ft.

Following are the specifications for the sewage disposal system on above captioned property.

Type of system: Conventional Other _____
Size of tank: Septic Tank: 1000 gallons Pump Tank: _____ gallons
Subsurface No. of exact length width of depth of
Drainage Field ditches 3 of each ditch 100 ft. ditches 3 ft. ditches 18-24 in.
French Drain: _____ Linear feet

PERMIT NO. 11068

Date: 5-6-96

Inspected by: Thomas J. Boyce R.S.

Environmental Health Specialist

