

From: ENVIRONMENTAL HEALTH

910 893 9371

09/06/2013 12:31

#055 P.001/002

\* Terry Maples is to call to set up inspection -

HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION  
307 W. CORNELIUS HARNETT BLVD.  
LILLINGTON, NC 27546  
910-893-7547 PHONE  
910-893-9371 FAX



RECEIVED by fax  
9/10/13 sjs

Application for Repair (no info - phone call)

NAME Mr. Connie W. Marion EMAIL ADDRESS: cwmarion@tc.com  
PHONE NUMBER 919 498 4986  
PHYSICAL ADDRESS 1367 Cool Springs Rd Lillington NC 27546  
MAILING ADDRESS (IF DIFFERENT THAN PHYSICAL) 526 Brown Rd Lillington NC  
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 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: US 421 North  
turn right on Cool Springs Rd at Boone Trail  
Emergency Service Building, property 1 mile  
on left

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.

Connie W. Marion  
Signature

9-09-13  
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 [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) don't know
Installer of system don't know
Septic Tank Pumper Terry Maples
Designer of System don't know

- 1. Number of people who live in house? 2 # adults 4 # children 6 # 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 Steve or Madene Mullen
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? June 2013 How often do you have it pumped? @ 5 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? [X] daily [ ] every other day [ ] 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? [X] YES [ ] NO If so, what kind? bleach
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 roof
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? septic surfacing in a couple of spots several months ago
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 [X] NO If Yes, please list



**Harnett COUNTY NORTH CAROLINA** Soils Overlay Results **HARNETT GIS**

Zoom in Zoom out Pan



Map Scale = One Inch = 58 feet

**Owner Information:**

|         |                             |
|---------|-----------------------------|
| PID     | 130611 0024 19              |
| NAME    | WOMACK KEVIN B & ANNA MARIE |
| ADDRESS | PO BOX 654                  |
| CITY/ST | MAMERS, NC 27552-0000       |
| ACRES   | 0.90252389                  |

Download Results: [SoilsPolygon\\_130611\\_0024\\_19.zip](#)

| ID | Soil Name | Hydric | Description                                   | Acres |
|----|-----------|--------|---|-------|
| 1  | CeB       |        | Cecil fine sandy loam, 2 to 8 percent slopes  | 0.48  |
| 1  | CeD       |        | Cecil fine sandy loam, 8 to 15 percent slopes | 0.42  |

