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

01 1	EMA	IL ADDRESS:	aronda718@ayail.c
NAME Sharonda Mitche	PHO	IE NUMBER (917)659-9014
PHYSICAL ADDRESS 27 Over 100	KRd. Canero	1/1	3326
MAILING ADDRESS (IF DIFFFERENT THAN PH	YSICAL)		
IF RENTING, LEASING, ETC., LIST PROPERTY	OWNER NAME		
Starwood	H	WY 87	
SUBDIVISION NAME	OT #/TRACT # ST/	ATE RD/HWY	SIZE OF LOT/TRACT
Type of Dwelling: [] Modular [] Mol	oile Home [] Stick built	[] Other	
Number of bedrooms 3 [] Basen	nent		
Garage: Yes [] No []	Dishwasher: Yes [] No []		Garbage Disposal Yes] No []
Water Supply: [] Private Well [] Community System	County	
Directions from Lillington to your site:	ry 87 going to	owards F	ort Bragg,
1. A "surveyed and recorded map" and wells on the property by showing on y. 2. The outlet end of the tank and the dis uncovered, property lines flagged, unus at 910-893-7547 to confirm that y. Your system must be repaired within 30 days letter. (Whichever is applicable.)	"deed to your property" must be your survey map. It is the tribution box will need to be underground utilities marked, and pur site is ready for evaluation.	covered and proper the orange sign has	application. Please inform us of any rty lines flagged. After the tank is been placed, you will need to call
By signing below, I certify that all of the above the denial of the permit. The permit is subject	information is correct to the b to revocation if the site plan, in	est of my knowled	ge. False information will result in
Shamps I fell	14	Jun 13	manages.
Signature \checkmark		Date	

Date

6/18/135

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 [JNO] Also, within the last 5 years have you completed an application for repair for this site? []YES [JNO]
Year home was built (or year of septic tank installation) 1994 Installer of system Septic Tank Pumper
Designer of System
 Number of people who live in house?# adults# children# total What is your average estimated daily water usage?gallons/month or daycounty 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? 13 Jun 13 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?
 Do you use an "in tank" toilet bowl sanitizer? [] YES [] NO 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 landscaping and start 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? It was first noticed yesterday 13 Jun 13 ? a landscrap
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

HARITE IT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SI TON

Nº 9585

OPERATIONS PERMIT

Attempt to RAPAIR HAdin New Installation Septic Tank Name: (owner) Plux 80 Repairs Nitrification Line Property Location: SR# Subdivision STARWOOD Lot#____ TAX ID#_____ Quadrant # _____). Sharpe Registration #____ Basement with Plumbing: Garage: ☐ Well ☐ Public ☐ Community Water Supply: Distance From Well: 50 min ft. Following are the specifications for the sewage disposal system on above captioned property. Other____ Septic Tank: _____ gallons Pump Tank: _____ gallons Size of tank: exact length width of depth of of each ditch 75 ft. ditches ft. ditches in. Subsurface No. of Drainage Field ditches French Drain: _____ Linear feet Inspected by: Qr UARS
Environmental Health Specialist PERMIT NO.

Nº11178

IMPROVEMENT PERMIT A HEADY TO REPAIR

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)	Repairs New Installation Septic Tank Repairs Nitrification Line
Property Location: SI	R# HW9871
Subdivision STAR	WOD Lot# 24
Tax ID#	Quadrant #
Number of Bedrooms P	Proposed: Existing 3 Lot Size:
Basement with Plumbi	ng: Garage:
Water Supply: Wel	Public Community
Distance From Well:	
property. Subject to	
	nventional Other
Size of tank: Septic	Tank: gallons Pump Tank: gallons
Subsurface No Drainage Field dit	exact length width of depth of the ditches ft. ditches ft. ditches ft.
French Drain required	: Linear feet STAY Shallow As possibly
This permit is subject plans or intended us	ct to revocation if site Date:
	/
	Environmental Health Specialist
福度 18 1 	Environmental Health Specialist
Add 50	Environmental Health Specialist of Line to the end of each Line (2)
STAY A)	shallow As possible,
STAY A)	

CERTIFICATE OF COMPLETION / OPERATIONAL PERMIT

Name: (owner) Weaver Dalelpr A New Installation Septic Tank Property Location: SR# HUT 87
Basement with Plumbing: Garage: Garage:
Water Supply: □ Well Public □ Community
Distance From Well: 50'miv 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 Drainage Field ditches 2 exact length of each ditch 125 ft. ditches 3 ft. ditches 3 in. French Drain: Linear feet PERMIT NO. 08849 Inspected by:: 97
Environmental Health Specialist
Houn 12012, 1301

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".

sewage without his obtaining a written permit from the flat new country fleath Department.
Name: (owner) Weaver Development A New Installation Septic Tank
Property Location: SR# 57 South DUS Repairs Nitrification Line
Dangers in lett
Subdivision Stanwood as Overhells Lot# 24
Tax ID# Quadrant #
Number of Bedrooms Proposed: Lot Size:
Basement with Plumbing: Garage: Garage:
Water Supply: Well Public Community
Distance From Well: ft.
Following is the minimum specifications for sewage disposal system on above captioned
Type of system: Conventional Other
Size of tank: Septic Tank: Septic Tank: gallons Pump Tank: gallons
Subsurface No. of exact length width of depth of ditches in.
French Drain required: Linear feet
This permit is subject to revocation if site plans or intended use change. Date: Signed:
Environmental Health Specialist
VOID AFTER 5 YEARS
Repair I
167 (3x120)
18 R. Care 35 DRIVE

OVERLOOK ROAD