ENVIRONMENTAL HEALTH SECTION

307 CORNELIUS HARNETT BLVD. Please call him

LILLLINGTON, N.C. 27546

910-893-7547 phone 910-893-9371 fax for pick up _ When IP WRITTER

APPLICATION FOR REPAIR IP WRITTEN -
NAME SANFORD NC 27332 PHONE # (home) PHONE # (work) 175 Fine Wash Rd 9/9-499-5519
NAME SANFORD NC 27339 PHONE # (home) PHONE # (wnet)
175 Pine Work Rd 9/9-499-55/9
MAILING ADDRESS IF DIFFERS
IF RENTING, LEASING ETC., LIST PROPERTY OWNER NAME
Buffalo & STATES LA & Block 5-A 5 acres SUBDIVISION NAME LOT # STATE ROAD NAME AND # SIZE OF LOT OR TRACE
LOT # STATE ROAD NAME AND # SIZE OF LOT OR TRACE
Three of bulling the same of t
Type of dwelling Modular Mobile Home Stick Built Other Add-A-Raym With A Roof
Number of bedrooms 1 2 3 4 or more - Basement with plumbing Yes No
Garage NYes DNo - Dishwasher DYes DNo - Garbage Disposal DYes DNo
Water Supply: Private Well Community System County
Buffall Supply 27 West 10 Buffall LAKE ROAD, PASS
THE START TO
Res Second Drive way on the 2 st
In order for Environment Health to help you with your repair you will need to comply by doing the following:
will need to comply by doing the following:
1. A surveyed and recorded map and deed to your property must be attached to this application along with a site plan showing (a) location of dwelling (b) location of driveway (c) location of any wells and other existing structures.
wens and other existing structures
2. The outlet end of the tank and distribution box will need to be uncovered and

The outlet end of the tank and distribution box will need to be uncovered and property lines marked. After the tank is
uncovered, property lines are marked and orange sign has been placed, you will need to call us at 893-7547 or 893-

The system must be repaired within 30 days or the set time within receipt of a violation letter.

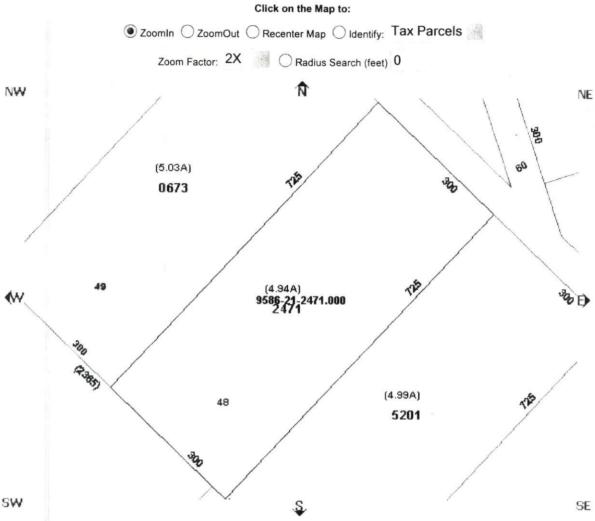
This certifies that all of the above information is correct to the best of my knowledge. False information will result in the denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership change.

Signature | 0 x | 6-14-2007

6/14/07(5)

HOMEOWNER INTERVIEW FORM

	DRVIEW FORW
It i	s important that you answer the following questions for our inspectors. Please do not leave any blanks if possible answer all questions to the best of your ability. Thank you.
Ha	ve you received a letter for a failing septic system from our office? [] YES NO
Als	taller of system
Inst	taller of system
Sep	tic Tank Pumper
Des	tic Tank Pumperigner of System
1.	Number of people who live in house? 2 # adults # children # children
4.	What is your average estimated daily water usage? gallons/month or county water county water
3.	f you have a garbage disposal, how often is used? daily weekly monthly
4.	when was the septic tank last pumped? Yeve How often do you have it pumped?
	you have a dishwasher, how often do you use it? [] daily [] avery others
	washing machine, how often do you use it? [] daily & aver-
	of treatment system? [] YES KI NO Where does it I is a
	Santizer! YES M NO
9. A	re you or any member in your family using long term prescription drug(s), antibiotics or chemotherapy?
10. De	you put household cleaning chemicals down the drain? [] YES [X] NO If so, whether to
If	yes, what kind? NO
12. Ha	ve you installed any water fixtures since your system has been installed? [] YES NO If yes, please list additions including any spas, whirlpools, sinks, lavatories, bath/showers, toilets.
13. Do	you have an underground lawn watering system? [] YES XI NO
14. Has	any work been done to your structure since your initial move, such a roof, gutter drains, basement and ation drains, landscaping, etc? [] YES [] NO If yes, please list
15. Are Plea	there any underground utilities on your lot? [] YES [] NO use check all that apply [] Power [] Phone [] Cable [] Gas [] Water
16. Desc	cribe what is happening when you have problems with your septic system and when was it first
W/2	asking & Sometimes An order ader a
house	ou notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains, whold guests)? [NO If yes, please list whysh, no clothes, heavy rains,
	1 C/05/14 (



Parcel Data

Find Adjoining Parcels

- Account Number:000301222000
- Owner Name: SPINDLE WILEY O & J
- Owner/Address 1: 175 PINE WOOD RD
- Owner/Address 2:
- Owner/Address 3:
- City, State Zip: SANFORD ,NC 273300000
- Commissioners District: 5
- Voting Precinct: 301
- Census Tract: 301
- Determine Flood Zone(s)
- In Town:
- Fire Ins. District: Spout Springs
- School District: 5

- PIN: 9586-21-2471.000
- PIN: 9586-21-2471.000

 REID: 31206 Lf .48 Butfolo

 Parcel ID: 03958612 0013
- Legal 1:5 AC #48 BLK 5A PROF MED
- Legal 2:REC
- Property Address: 1180 NC SR X
- Assessed Acres: 5.00AC
- Calculated Acres: 4.94
- Deed Book/Page: 0720/0949
- Deed Date: 1981/01/01
- Sale Price: \$5,000.00
- Revenue Stamps: \$ 5.00
- Year Built: 1977

Map La Draw L Draw select Boundary Townships **✓** Tax Parcels **Aerial Phot** 2005 **Aerial Phot** 2002 Fire Tax Dis Fire Insurai Districts Rescue Dis Zoning Governmen Commissio Districts Voting Pred Census Tra School Dis Infrastructu **✓** Major Road

Physical Soils

Roads

Multi Sy Rivers

Watershed

Flood Zone

Multi Sy

Draw L

MAP Cu

This map is prepa inventory of real | within this jurisdic compiled from replats, and other p and data. Users of hereby notified th aforementioned g information sourc consulted for veri information conta map. The Harnet mapping, and sof companies assur responsibility for contained on this website. Data Effective Da

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