

Comp #1011  
Jm

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

# APPLICATION FOR REPAIR

NAME Jesus I. Nino PHONE # (HOME) 919-577-0178 PHONE # (WORK/CELL) 919-518-2071  
 ADDRESS 102 Loy Ct. Fuquay Varina, NC 27526 MAILING ADDRESS IF DIFFERS \_\_\_\_\_  
 IF RENTING, LEASING, ETC., LIST PROPERTY OWNER NAME \_\_\_\_\_  
 SUBDIVISION NAME Exchange LOT # 16 STATE RD NAME & # 102 Loy Ct. SIZE OF LOT OR TRACT .46

Type of dwelling  Modular  Mobile Home  Stick built  Other \_\_\_\_\_

Number of bedrooms 1  2  3  4  or more  Basement  Other \_\_\_\_\_

Garage  Yes  No Dishwasher  Yes  No Garbage Disposal  Yes  No

Water Supply:  Private Well  Community System  County

Directions from Lillington to your site: 401 N. TL on Allen Dr. TL on Loy Court end driveway on the right (102)

**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" (not your house) 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.
2. 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 910-893-7547 to let Environmental Health know that your site is ready for evaluation.
3. The system must be repaired within 30 days or the time set within receipt of a violation letter.

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 change.

Jesus I. Nino  
Signature Date 12/8/08

2/2/09 N

# 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 letter for a failing septic system from our office?  YES  NO

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

Installer of system \_\_\_\_\_  
Septic Tank Pumper \_\_\_\_\_  
Designer of System \_\_\_\_\_

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 that the water bill is listed in? Jesus L. Nino
3. If you have a garbage disposal, how often is used?  daily  weekly  monthly
4. When was the septic tank last pumped? never How often do you have it pumped? never
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? \_\_\_\_\_
8. Do you use an "in tank" toilet bowl sanitizer?  YES  NO
9. Are you or any member in your family using long term prescription drug(s), 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? Clorox
11. Have you put any chemicals (paints, thinners, etc.) down the drain?  YES  NO  
If yes, what kind? \_\_\_\_\_
12. Have you installed any water fixtures since your system has been installed?  YES  NO If yes, please list  
any additions including any spas, whirlpools, sinks, lavatories, bath/showers, toilets. sink + bathroom
13. Do you have an underground lawn watering system?  YES  NO
14. Has any work been done to your structure since your initial move, such a roof, gutter drains, basement  
foundation drains, landscaping, etc?  YES  NO If yes, please list \_\_\_\_\_
15. Are there any underground utilities on your lot?  YES  NO  
Please check all that apply  Power  Phone  Cable  Gas  Water
16. Describe what is happening when you have problems with your septic system and when was it first  
noticed. after a heavy rain water accumulates around the  
septic tank
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains,  
household guests)?  YES  NO If yes, please list heavy rains

COMMENTS:

Tuesday  
2-10-09 - NO IRONS - NO D-BOX - NO TRASK.

Two soil profiles - probed lines.

HARNETT COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SECTION

No 9168

# OPERATIONS PERMIT

Name: (owner) Jesus Nino  New Installation  Septic Tank  
 Property Location: SR# 401  Repairs  Nitrification Line  
 Subdivision Fox Chase Lot # 16  
 TAX ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_  
 Contractor: Harold Chappell Registration # \_\_\_\_\_

Basement with Plumbing:  Garage:   
 Water Supply:  Well  Public  Community  
 Distance From Well: 50 ft.

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

Type of system:  Conventional  Other Hanco EnviroChamber

Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

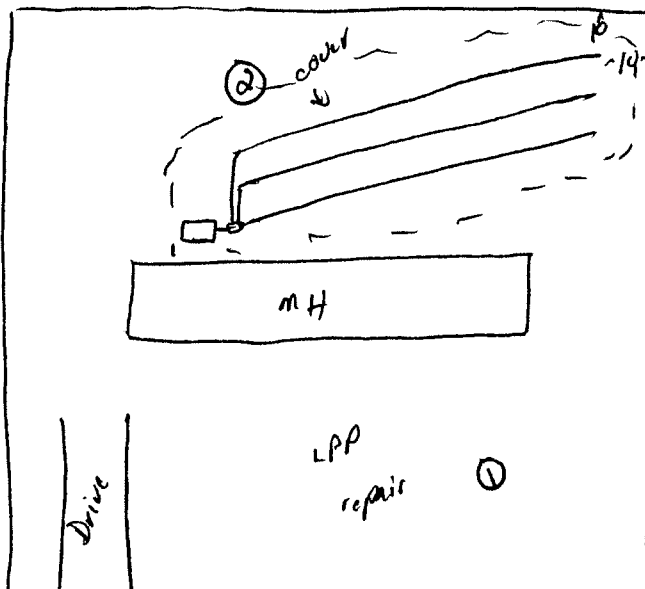
Subsurface Drainage Field No. of ditches 3 exact length of each ditch 99 ft. width of ditches 3 ft. depth of ditches 12 in. *with 12" cover*

French Drain: \_\_\_\_\_ Linear feet

Date: 7-2-96

PERMIT NO. 11096

Inspected by: Thomas J. Boyce R.S.  
Environmental Health Specialist



# 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".

Name: (owner) Jesus Niro  New Installation  Septic Tank  
 Property Location: SR# 401  Repairs  Nitrification Line

Subdivision Fox Chase Lot # 16

Tax ID# \_\_\_\_\_ Quadrant # \_\_\_\_\_

Number of Bedrooms Proposed: 3 Lot Size: .462 ac

Basement with Plumbing:  Garage:   
 Water Supply:  Well  Public  Community  
 Distance From Well: 50+ ft.

Following is the minimum specifications for sewage disposal system on above captioned property. Subject to final approval.

Type of system:  Conventional  Other Infiltrator 100WS-93-2-R1

Size of tank: Septic Tank: 1000 gallons Pump Tank: \_\_\_\_\_ gallons

Subsurface Drainage Field No. of ditches 3 exact length of each ditch 100 ft. width of ditches 3 ft. depth of ditches 12 in.

French Drain required: \_\_\_\_\_ Linear feet

This permit is subject to revocation if site plans or intended use change.

Date: 5-20-96

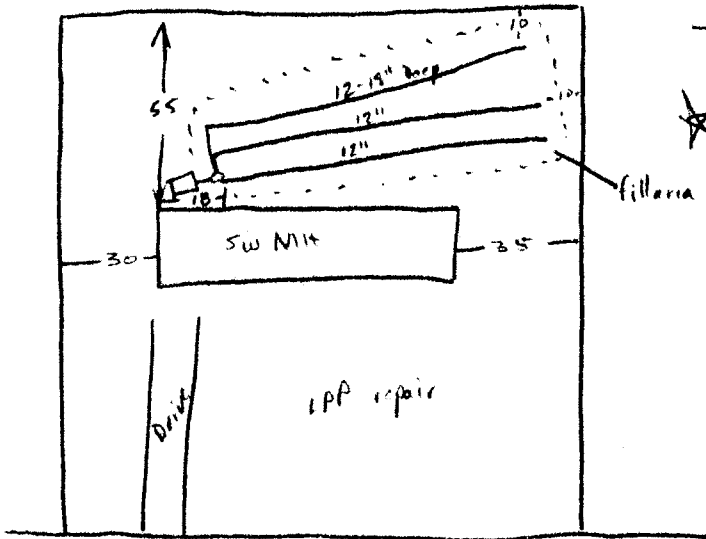
Signed: Thomas J. Boye A.S.

Environmental Health Specialist



Maintain Setbacks

- Contractor to meet on site prior to installation  
 \* 12" cover required over system



Loy Ct





# ONSITE WASTEWATER REPAIR DATA CHECKLIST

1. Physical location of system. (911 address)

102 104 CT

2. Type of landuse being served by system. EXT SWMA

3. Age of system. (approximate is cannot confirm) 13 years

4. Type of system. Infiltration AT 12" Deep

5. Type of replacement system. 25% RBS

6. Contributing factors to failure. CRUSADA

7. Onsite or offsite solution. ON SITE

8. Type of soil in initial system area. CLAY

9. Type of soil in replacement system area. GRAV