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: _	
NAME = yan	15 lean Dec.	PHONE NUMBER	11 349 9994
PHYSICAL ADDRESS &	75 Trox 1	outier.	P DunnNe
MAILING ADDRESS (IF DIFF	FERENT THAN PHYSICAL) _ \$75	Trave D	48334
IF RENTING, LEASING, ETC.	, LIST PROPERTY OWNER NAME	Term D. Se	mo de significante
	2	1/4)	0 1 5 1
SUBDIVISION NAME	LOT #TRACT	STATE RD/HWY	NGG C DE LOT TOPAGE
Type of Dwelling: [] Mod	lular [] Mobile Home []	Stick built [] Other	SIZE OF LOT/TRACT
Number of bedrooms 5	[] Basement		
Garage: Yes[] No []	Dishwasher: Yes [) N	اوا	Garhage Dienosek V. 13
Water Supply: [] Private V	Vell [] Community System	County	Garbage Disposal: Yes[]No[]
Directions from Lillington to		0 301	Tate Soly
Jou and	3850 n 7	FIFST C	4655 NI. 4
ofpus	1 HORDIS	Road	C: 1 :1
3 Brich	Haase Tate	a Dian's	my/X
In order for Environmental	Health to help you with your reported to your proper	air, you will need to com	nly by completion of a
Wells on the property	hy thousing on law and	Thrust be attached to th	is application. Please inform us of any
The outlet end of the	tank and the distribution hav will -	1	
uncovered, property	lines flagged, underground utilities ma confirm that your site is ready for ex	arked, and the orange sign I	has been placed, you will need to
Our system must be renaired	confirm that your site is ready for ev	valuation.	been placed, you will need to call
etter. (Whichever is applicable	within 30 days of issuance of the Impe.)	provement Permit or the ti	me set within receipt of a violation
y signing below, I certify that he denial of the permit. The p	all of the above information is correctermit is subject to revocation if the si	ct to the best of my knowle	edge. False information will result in
Jenno. To	J.	7~ //	/ / /
gnature		Date	1 4

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 [NO Also, within the last 5 years have you completed an application for repair for this site? [] YES [NO
Year home was built (or year of septic tank installation) Installer of system Septic Tank Pumper Designer of System
1. Number of people who live in house?# adults# children# tota 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
3. If you have a garbage disposal, how often is it used? [] daily [] weekly [monthly 4. When was the septic tank last pumped? ————————————————————————————————————
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 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 15. Are there any underground utilities on your lot? Please check all that apply:
16. Describe what is happening when you are having problems with your septic system, and when was this first noticed? Power [] Phone [(] Cable [)] Gas [] Water first noticed? Gas [] Water growth and when was this growth and when was the growth and when was the growth and when we want the growth and when we wa
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

