Please BM assign

called to confirm permit is ready

MENT ON

New D Box installed last year -+ pumped

6/11/09 5

APPLICATION FOR REPAIR

HUEY L. FAIR	CLOTH	910	-436-1428
NAME /		PHO	NE # (HOME) PHONE # (WORK/CELI
NAME 12156 HWY 2105 ADDRESS	SPRING 1	AKE N/ 28	3 9×
ADDRESS	THE TOTAL	MAIL MAIL	ING ADDRESS IF DIFFERS
		,	ADDICEOU II DIFFERS
IF RENTING, LEASING, ETC., LIST PRO	PERTY OWNER NAME		
SUBDIVISION NAME	LOTA		5 acres
	LOT#	STATE RD NAME & #	SIZE OF LOT OR TRACT
Type of dwelling \square Modular \boxtimes M	lobile Home 🗆 Stick built	□ Other	
Number of bedrooms 1 \square 2 \square 3	☑ 4 ☐ or more ☐ Basem	ent Other	
Garage ☐ Yes ☒ No Dishwasher ☐ Yes ☒ No		Garbage Dis	posal □ Yes ☑ No
Water Supply: ☐ Private Well	Community Syste		
	, ,		
Directions from Lillington to your Lake - MR Baref from his store	site: Straight	down 210 1	pward Somia
Labo mo P.	to 11	1	, and the same of
THE DANG	oon Hardwa	ie my lan	d is across
from his store	on the sight	, 0	
	in the recym		
	7		
n order for Environmental Health following:	to help you with your rep	air you will need to com	ply by completing the
A " <u>surveyed and recor</u> this application along with	ded map" and "deed to yo	ur property" (not your ho	ouse) must be attached to
and application along wit	h a site plan showing (a) loo other existing structures.	cation of dwelling (b) loca	tion of driveway (c)
2. The outlet end of the tank	and distribution box will be	and to be upsequent and	property lines marked. After the
tariti is arios voica, proper	Willies are marked and ora	anne sian has boon niage	d var vill = = = 1
THE TOTAL TO THE LITTER	official realth know that	VOUR SITE IS ready for ava	luation
The system must be rep	aired within 30 days or th	e time set within receir	at 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

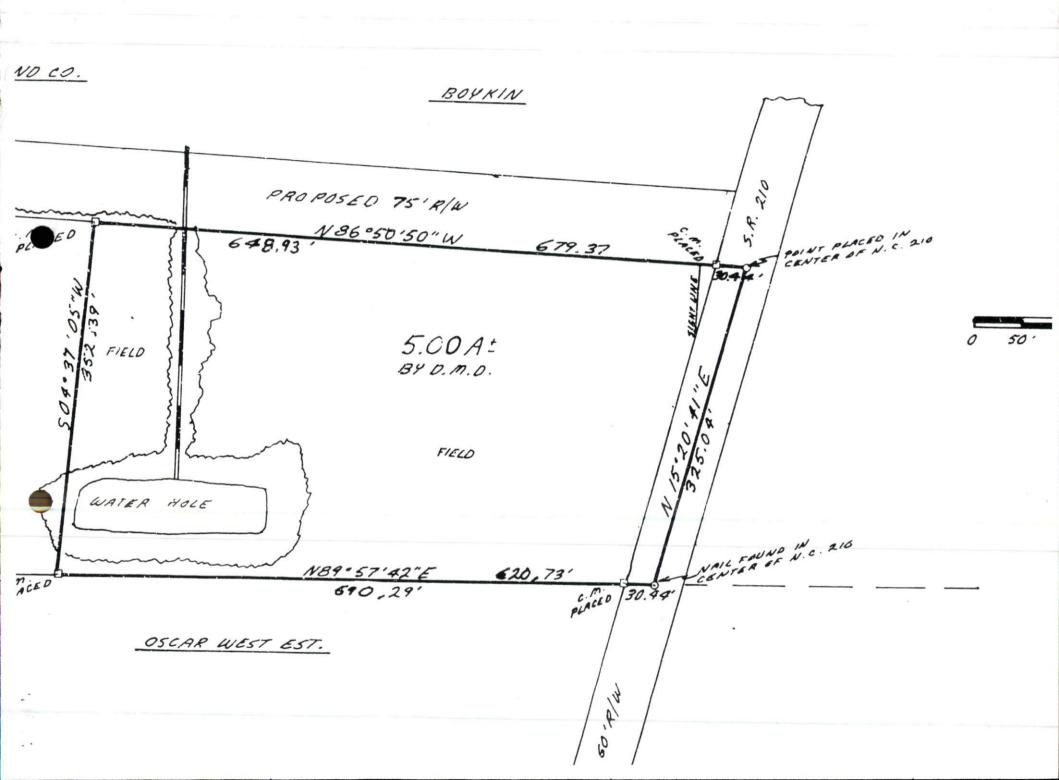
denial of the permit. The permit is subject to revocation if the site plan, intended use, or ownership change.

very Faircloth



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 [X] NO Also, within the last 5 years have you completed an application for repair for this site? [] YES M NO Installer of system Septic Tank Pumper Designer of System _ 1. Number of people who live in house? ___ # adults ____ # children __ 2 # total 2. What is your average estimated daily water usage? _____gallons/month or day ___ If HCPU please give the name that the water bill is listed in? July Jaircloth 3. If you have a garbage disposal, how often is used? [] daily [] weekly [] monthly 4. When was the septic tank last pumped? 2008 How often do you have it pumped? 15+time 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 [x] 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 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? [X] YES [] NO If so, what kind? pine - Sol -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, whirlpools, 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 your initial move, such a roof, gutter drains, basement foundation drains, landscaping, etc? [] YES [] NO If yes, please list Roaf 15. Are there any underground utilities on your lot? [] YES [X] 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. Water comes up on the ground 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 wash Clothus



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