H ETT COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SECTION 307 CORNELIUS HARNETT BLVD. LILLLINGTON, N.C. 27546 910-893-7547 phone 910-893-9371 fax

APPLICATION FOR REPAIR

CHRIS	BARNETTE	(for Anderson	Creek MHP)	910.964.	0043
NAME /	nail to -	7 Andersk	creek MHP)	PHONE # (home)	PHONE # (work)
71 N.	PEGGY S	T + Sh be	name an	P.O. BOX 31	0, SL 28390
ADDRESS			Permit	MAILING ADDRE	SS IF DIFFERS
		EK MHP	,		
		C., LIST PROPERTY	OWNER NAME	1	
	è			Shact 2	1- 15.20 Ames
SUBDIVIS	ION NAME	LOT# S	TATE ROAD NAME A	ND# SIZE OF L	OT OR TRACT
Type of dw	elling 🗆 Modular&	Mobile Home 🗆 Stick	Built Other		
Number of	bedrooms □1 □ 2	Ø3 □ 4 □or more - Ba	sement with plumbing	Yes. No	
Garage 🗆 Y	es 🛮 No - Dishwash	er □Yes ⊠No - Garbag	ge Disposal □Yes □No		
Water Supp	ply: 🗆 Private Wel	Community System	m & County		
Directions !	from Lillington to	your site:	2- RAY Rd (Foring Lake a	rea), to R- to R-N. Peggy
DVI	SPHILLS	to 1 - Ava	hie de 1	Martin	+ P N D 121
Hor	ME 15 2	nd on left	(past stage	rd.)	10 X - N. Peggg
In order for	Environment Hea	ith to help you with you	er repair you will need to	comply by doing the	fallowing
1. As	owing (a) location of	fed map and deed to you of dwelling (b) location of	r property must be attach of driveway (c) location of	ned to this application of any wells and other	along with a site plan existing structures.
une	e outlet end of the t covered, property li 48 to let us know th	nes are marked and orar	will need to be uncovered age sign has been placed,	ed and property lines r you will need to call	marked. After the tank is us at 893-7547 or 893-
3. Th	e system must be re	epaired within 30 days o	r the set time within rece	ipt of a violation letter	
This certifie of the permi	s that all of the about. The permit is sul	ve information is correct oject to revocation if the	t to the best of my knowl site plan, intended use, o	edge. False information ownership change.	on will result in the denial
9	· 2 3		3/11/04		
Signature			Date		
4					

MEOWNER 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.

Ha	ve you received a letter for a failing septic system from our office? YES [] NO
Als	so, within the last 5 years have you completed an application for repair for this site? [] YES JYNO
Ins	taller of system
Sel	oue rank rumper
De	signer of System
1.	Number of people who live in house? 2 # adults 3 # children # total (last tenants)
2.	What is your average estimated daily water usage? Currently gallons/month or day county water If HCPU please give the name that the water bill is listed in? JEFF & July Scott
3.	If you have a garbage disposal, how often is used? [] daily [] weekly [] monthly
4.	When was the septic tank last pumped? 2 mes. 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?
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?
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 LYNO 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 [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 INO 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. Over flowing / Saturating 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





ILLEGAL REPAIR



0-14'6 L5 2×75'618"