HARNETT COUNTY HEALTH DEP. **ENVIRONMENTAL HEALTH SECTION** 307 CORNELIUS HARNETT BLVD. LILLLINGTON, N.C. 27546

Janka least 910-893-7547 phone 910-893-9371 fax
35 yrs. Had APPLICATION FOR REPAIR

COERT A. LEE	910-461 1712	P-1.
	910 - 491- 1722 PHONE # (home)	RETINED
ADDRESS FREHE ST. Spring LAME, N.C.	2839U	PHONE # (work)
ADDRESS	MAILING ADDRE	CO TE DIFFERENCE
	MALLING ADDRE	55 IF DIFFERS
IF RENTING, LEASING ETC., LIST PROPERTY OWNER N		
12 CONTROLLER TOWNER N	AME	
SUPPLYISION I REEK PLOSILE 405 HACTIE ST (Lot 3	9) /cc x 2	∞'
SUBDIVISION NAME HOME PANK LOT # STATE ROA	D NAME AND # SIZE OF L	OT OR TRACT
Type of dwelling Modular □ Mobile Home □ Stick Built □ Oth		
Number of bedrooms □1 □ 2 ☑ 3 □ 4 □or more - Basement with	plumbing □Yes □No	
Garage Yes ONo - Dishwasher OYes ONo - Garbage Disposal O	/	
Water Supply: ☑ Private Well □ Community System □ County	7	
The same of the sa		
TAKE 210 HWY TO RED LIGHT AT RAY RO TAIL	LEAPINE Q & Ma	11. 1/11 11:
THE 210 HWY TO RED LIEHT AT RAY RO TAIN THEN RIGHT; GO BY HAINET COUNTY WATER TANK STATE SIN WITH ANCH!	10 No FLASI	TING YELLOW LIGHT
STATE	For About + mit 12m.	LE LOOK FOR
County Sien WITH Metie ST. Take LEFT DOWN	N HILL AND LOOK F	me Davilia d
In order for Friday OF HILL 405 ON MAILBOX AND DU	House)	403 MEHIE ST
STATE SIEN WITH Anchie ST. Talle LEFT DOWN ON LETTAT TOP OF HILL 405 on MAILBOX AND DAY In order for Environment Health to help you with your repair you	will need to comply by doing the f	ollowing:
A Surveyed and recorded man and deed to seem	AND AND ADDRESS OF THE PARTY OF	
showing (a) location of dwelling (b) location of driveway (c	e) location of any wells and other a	long with a site plan
2. The outlet end of the tank and distribution have all	Management of the second of th	
 The outlet end of the tank and distribution box will need to uncovered, property lines are marked and orange sign has be 7548 to let us know that it is ready. 	be uncovered and property lines m	arked. After the tank is
7548 to let us know that it is ready.	ben placed, you will need to call us	s at 893-7547 or 893-
3. The system must be renaired within 20 down and		
3. 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 the permit. The permit is subject to revocation if the site plan, inter-	fmv knowledge False information	
of the permit. The permit is subject to revocation if the site plan, inter-	aded use, or ownership change	will result in the denial
2	,	
Signature JAN 23, 2006 Date		
Signature JAN 23, 2006		
Date		

HOMEOWNER INTERVIEV

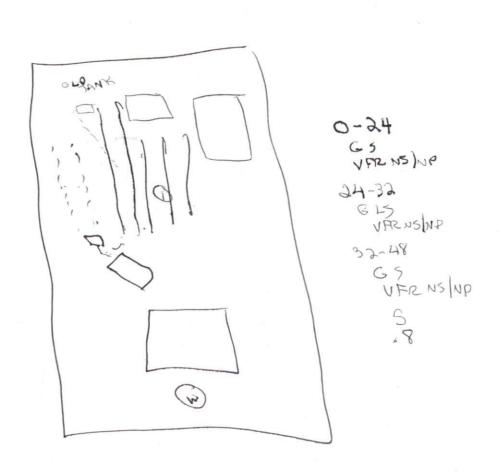
It is important that you answer the following questions for our inspectors. Please do not leave Have you received a letter for a failing septic system from our office? [] YES [] NO Also, within the last 5 years have you completed an application for repair for this site? [] YES [] NO Installer of system Septic Tank Pumper Designer of System Number of people who live in house? # adults # children # total 2. What is your average estimated daily water usage? NA gallons/month or day _____county water If HCPU please give the name that the water bill is listed in? If you have a garbage disposal, how often is used? [] daily [] weekly [] monthly When was the septic tank last pumped? 30 days

How often do you have it pumped? If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] monthly Do you have a water softener or treatment system? [] YES [] NO Where does it drain? 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? 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 [] 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 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 [YNO If yes, please list

15. Are there any underground utilities on your lot? [NYES [] NO
Please check all that apply [] Power [New Phone [] Cable [] Gas [] Water

16. Describe what is happening when you have problems with your septic system and when was it first noticed. Standing water over tank - possible drain

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]]



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