

OLIVER HAS
ALREADY VISITED THE
SITE AS NEW
SYSTEM.

HAI...IT COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SECTION
307 CORNELIUS HARNETT BLVD.
LILLINGTON, N.C. 27546
910-893-7547 phone
910-893-9371 fax

Fax # 919 775-2957
to Clayton Homes
Attn: Chris

APPLICATION FOR REPAIR

STEVE & TAMMY MELZAC (910) 496-0453 (910) 286-8737
NAME PHONE # (home) PHONE # (work)

451 IVORY ST. SPRING LAKE, NC 28390
ADDRESS

MAILING ADDRESS IF DIFFERS

NA
IF RENTING, LEASING ETC., LIST PROPERTY OWNER NAME

SUBDIVISION NAME LOT # STATE ROAD NAME AND # SIZE OF LOT OR TRACT

Type of dwelling ☐ Modular ☒ Mobile Home ☐ Stick Built ☐ Other _____

Number of bedrooms ☐ 1 ☒ 2 ☐ 3 ☐ 4 ☐ or more - Basement with plumbing ☐ Yes ☒ No

Garage ☐ Yes ☒ No - Dishwasher ☐ Yes ☒ No - Garbage Disposal ☐ Yes ☒ No

Water Supply: ☐ Private Well ☐ Community System ☒ County

Directions from Lillington to your site:

210 SOUTH TO FAYETTEVILLE RIGHT ON BILL SHAW RD. LEFT
ON OVERHILLS RD, RIGHT ON ARCHIE RD. ARCHIE TURNS
to IVORY.

In order for Environment Health to help you with your repair you will need to comply by doing the following:

1. A surveyed and recorded map and deed to your property 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 893-7547 or 893-7548 to let us know that it is ready.
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 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.

Signature Steve Melzac Date 9 Nov 04

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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.

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 UNKNOWN

Septic Tank Pumpers UNKNOWN

Designer of System UNKNOWN

1. Number of people who live in house? 2 # adults 1 # children 3 # 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? STATE MARRAC Tammy Marrac

3. If you have a garbage disposal, how often is used? [] daily [] weekly [] monthly N/A

4. When was the septic tank last pumped? 2 Mo. Ago How often do you have it pumped? ONLY DONE IT ONCE

5. If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly N/A

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? N/A

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? COMET etc. & DOWN DRAINING SOAP. CLOTHES DETERGENT.

11. Have you put any chemicals (paints, thinners, etc.) down the drain? [] YES ☒ NO
If yes, what kind? N/A

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. N/A

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 BACK TO BACK AMERICANS AREA (SMALL AREA BELOW SEPTIC TANK IS DAMP)

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 _____