

Complaint # Case 2508-0010

SANITATION COMPLAINT

Date _____

Phone# (910) (919) 984-220-2586

Name of Complainant _____ [] ANONYMOUS

[] Sewer [] Solid Waste [] Other _____

Nature of Complaint Straight pipe in yard flowing
neighbors yard 2 houses down
Septic System draining into neighbors
back yard.

Directions to site of Complaint _____

Owner of property site Thomas Hoffmann

Address and/or phone # 84 Lahinch Dr Fuquay

Inspection Information

DATE _____ TIME _____ PERFORMED BY _____

PROBLEM(S) FOUND _____

Correction of Problem

DATE _____

COMMENTS _____

Name _____ Date Secured _____

Harnett County Department of Public Health Improvement Permit

A building permit cannot be issued with only an Improvement Permit

ISSUED TO: Errol + Keri Barnett PROPERTY LOCATION: 51429 Chalybeate RD
 SUBDIVISION: Avery Pond LOT # 127
 NEW REPAIR EXPANSION Site Improvements required prior to Construction Authorization Issuance:
 Type of Structure: EX SFD
 Proposed Wastewater System Type: Curtain Drain + Beam
 Projected Daily Flow: EX GPD
 Number of bedrooms: EX Number of Occupants: EX max
 Basement Yes No
 Pump Required: Yes No May be required based on final location and elevations of facilities
 Type of Water Supply: Community Public Well Distance from well _____ feet Permit valid for: 1 YEAR
 Five years
 No expiration
 Permit conditions: _____

Authorized State Agent: James E. Manhart REAS Date: 7-31-23 SEE ATTACHED SITE SKETCH
 The issuance of this permit by the Health Department in no way guarantees the issuance of other permits. The permit holder is responsible for checking with appropriate governing bodies in meeting their requirements. This site is subject to revocation if the site plan, plat, or the intended use changes. The Improvement Permit shall not be affected by a change in ownership of the site. This permit is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to conditions of this permit.

Construction Authorization (Required for Building Permit)

The construction and installation requirements of Rules 1950, 1952, 1954, 1955, 1956, 1957, 1958 and 1959 are incorporated by references into this permit and shall be met. Systems shall be installed in accordance with the attached system layout.

ISSUED TO: Errol + Keri Barnett PROPERTY LOCATION: 51429 Chalybeate RD
 SUBDIVISION: Avery Pond LOT # 127
 Facility Type: EX SFD New Expansion Repair
 Basement? Yes No Basement Fixtures? Yes No
 Type of Wastewater System** EX (Initial) Wastewater Flow: EX GPD
 (See note below, if applicable EX (Repair))

Installation Requirements/Conditions

Septic Tank Size <u>EX</u> gallons	Number of trenches <u>—</u>	Trench Spacing: <u>—</u> Feet on Center
Pump Tank Size <u>EX</u> gallons	Exact length of each trench <u>—</u> feet	Soil Cover: <u>—</u> inches
	Trenches shall be installed on contour at a	(Maximum soil cover shall not exceed
	Maximum Trench Depth of: <u>—</u> inches	36" above the trench bottom)
	(Trench bottoms shall be level to +/- 1/4" in all directions)	
Pump Requirements: _____ ft. TDH vs _____ GPM		Aggregate Depth: _____ inches below pipe
		_____ inches above pipe
		_____ inches total

Conditions: Curtain Drain + Beam to be installed
Curtain to 4' deep with plastic on down slope sides

**WATER LINES (INCLUDING IRRIGATION) MUST BE 10FT. FROM ANY PART OF SEPTIC SYSTEM OR REPAIR AREA.
 NO UTILITIES ALLOWED IN INITIAL OR REPAIR DRAIN FIELD AREA.**

**If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.
 Owner/Legal Representative Signature: _____ Date: _____

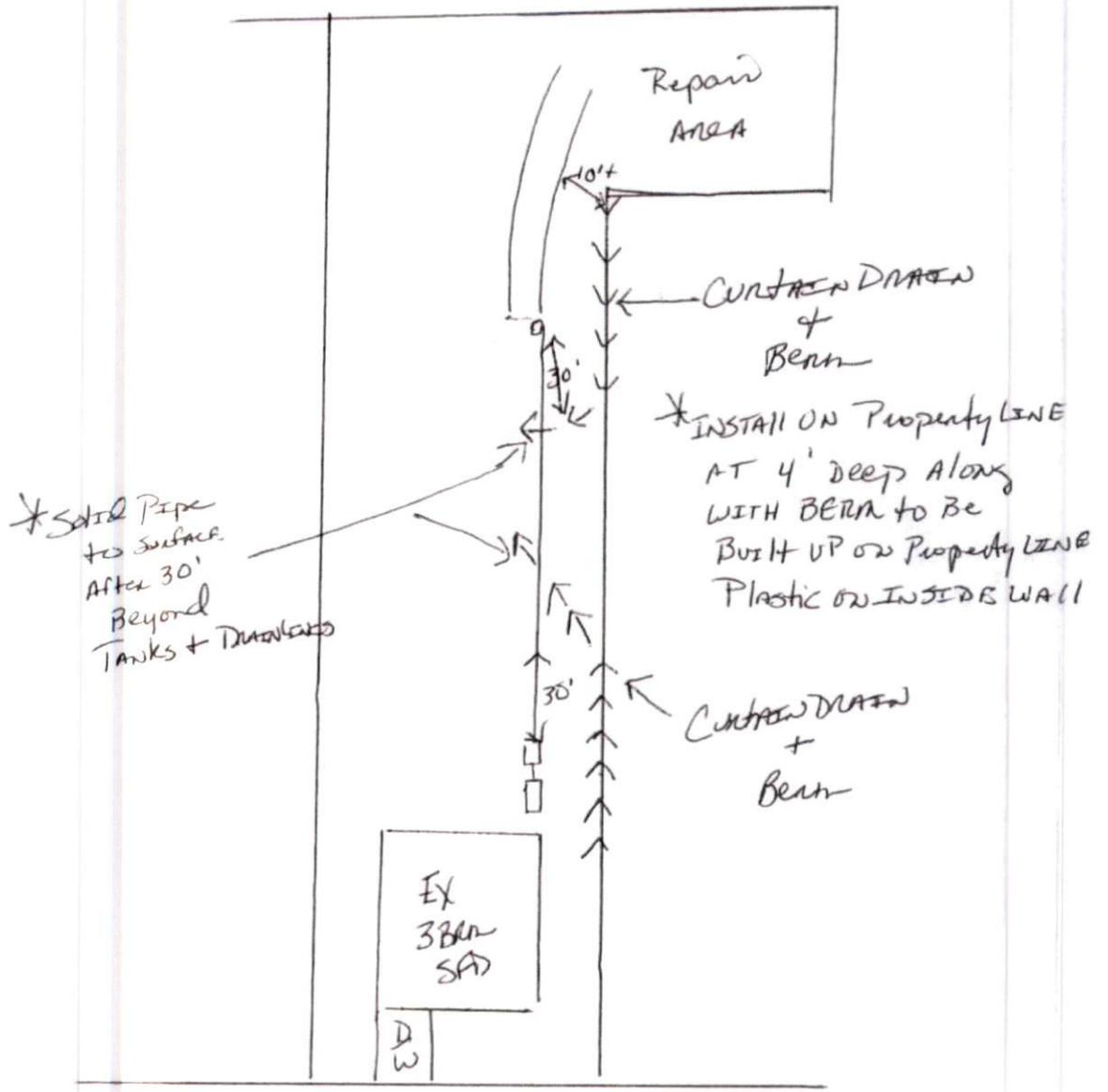
This Construction Authorization is subject to revocation if the site plan, plat, or the intended use changes. The Construction Authorization shall not be transferred when there is a change in ownership of the site. This Construction Authorization is subject to compliance with the provisions of the Laws and Rules for Sewage Treatment and Disposal and to the conditions of this permit. SEE ATTACHED SITE SKETCH

Authorized State Agent: James E. Manhart REAS Date: 7-31-23
 Construction Authorization Expiration Date: 7-31-24

Application # _____

Harnett County Department of Public Health Site Sketch

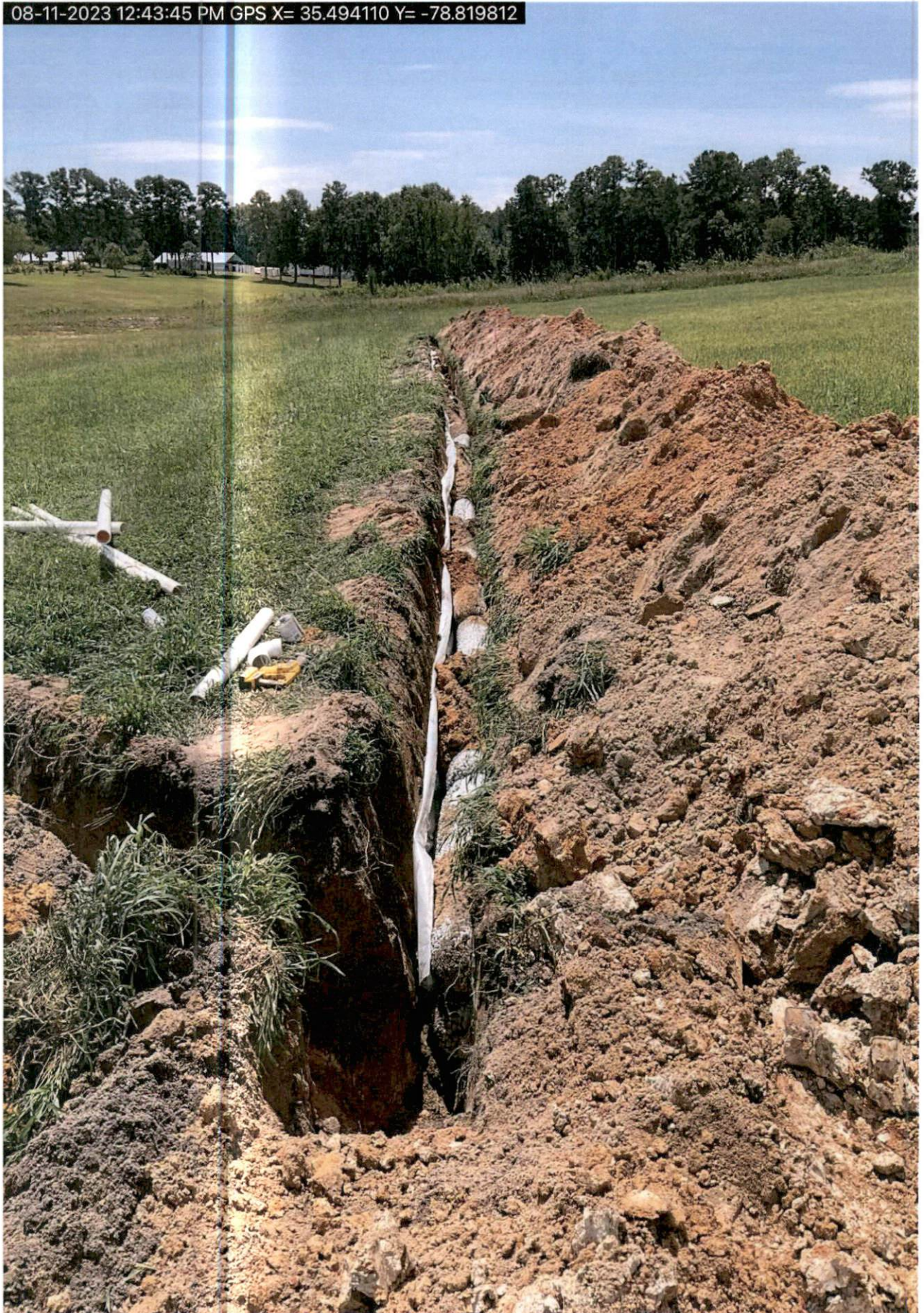
Property Location: 51429 Chalybeate RD
Issued To: Renee + Keani Barnett Subdivision Avery Pond Lot # 127
Authorized State Agent: James E. Newton PH 20115 Date: 7-31-23



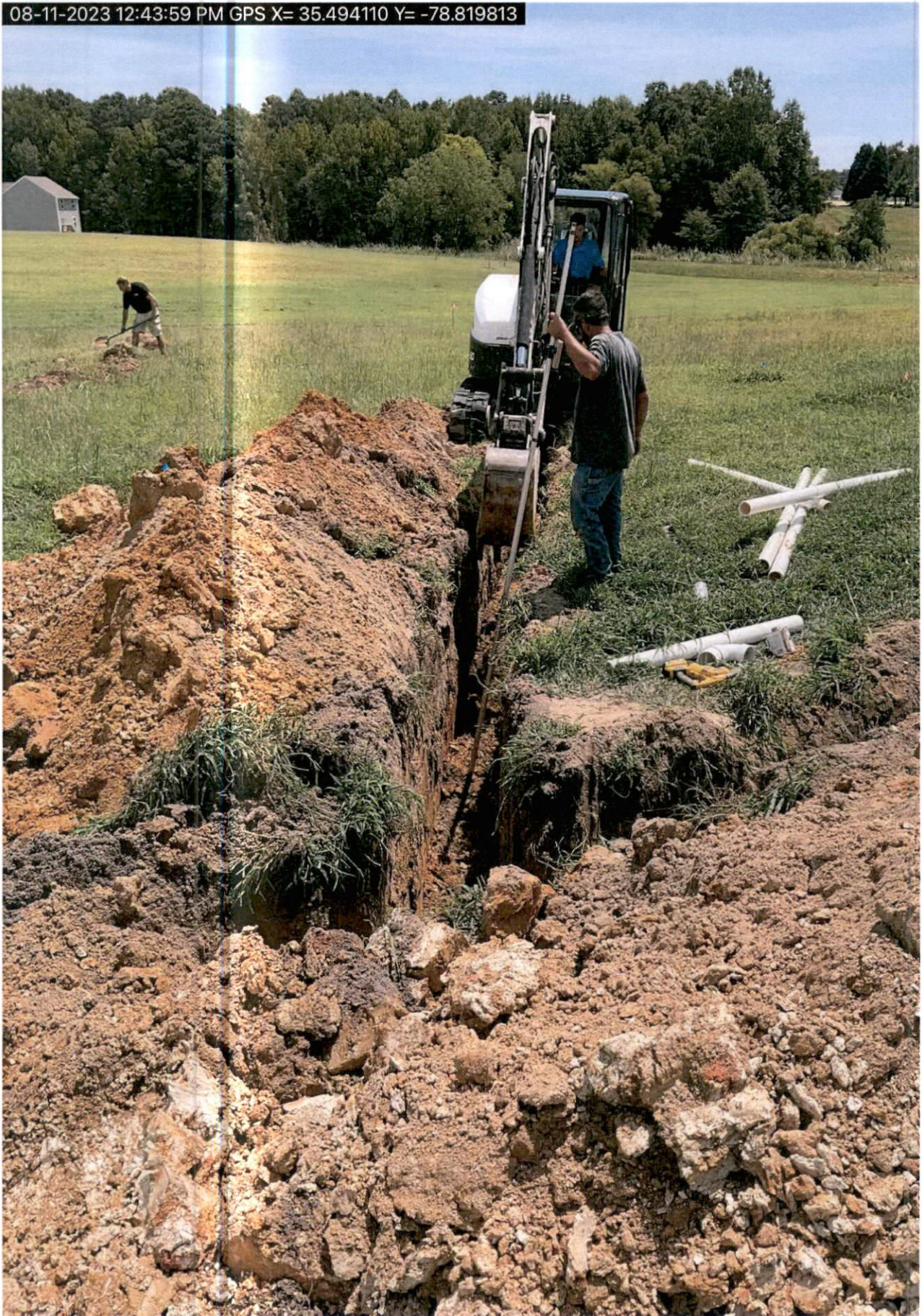
LAUNCH DR

This drawing is for illustrative purposes only. System installation must meet all pertinent laws, rules, and regulations.

08-11-2023 12:43:45 PM GPS X= 35.494110 Y= -78.819812



08-11-2023 12:43:59 PM GPS X= 35.494110 Y= -78.819813



08-11-2023 12:44:45 PM GPS X= 35.494232 Y= -78.819839



08-11-2023 12:45:09 PM GPS X= 35.494232 Y= -78.819820



HTE# SFD2005-0066

Harnett County Department of Public Health

No. 26569

PERMIT # NA

Operation Permit

New Installation Septic Tank Nitrification Line Repair Expansion

SN 1429

PROPERTY LOCATION: 84 LAHAYHI DR. (CHALBEATER)

Name: (owner) LGI HOMES NC LLC SUBDIVISION AVERY POND LOT # 127

System Installer: THORNTONS PLUMBING Registration # _____

Basement with plumbing: Garage Number of Bedrooms 3

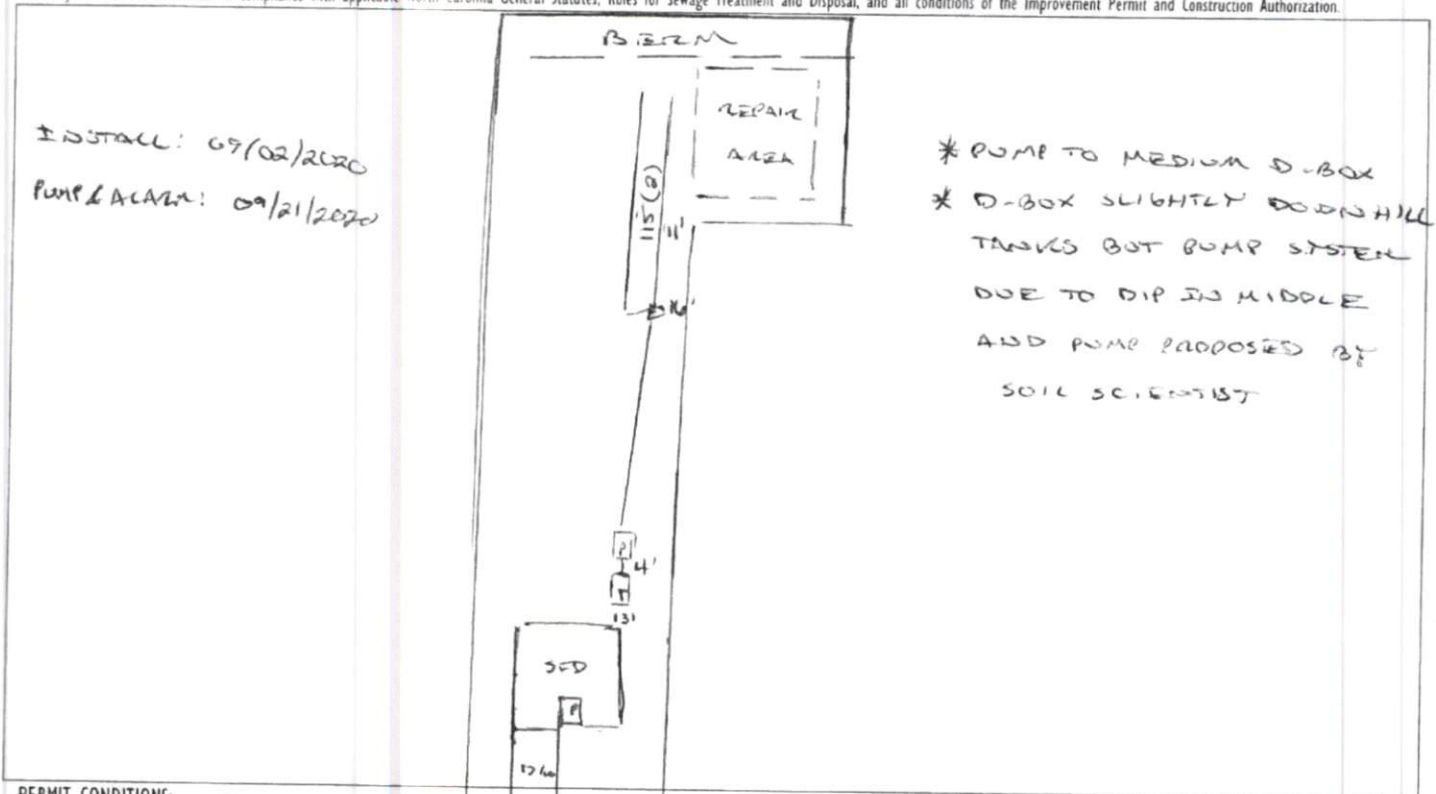
Type of Water Supply: Community Public Well Distance from well NA feet

System Type: 25% REDUCTION SIS, III B Types V and VI Systems expire in 5 years.

(In accordance with Table V a)

Owner must contact Health Department 6 months prior to expiration for permit renewal.

This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and all conditions of the Improvement Permit and Construction Authorization.



PERMIT CONDITIONS:

- I. Performance: System shall perform in accordance with Rule .1961.
- II. Monitoring: As required by Rule .1961.
- III. Maintenance: As required by Rule .1961. Other: _____
Subsurface system operator required? Yes No
If yes, see attached sheet for additional operation conditions, maintenance and reporting.
- IV. Operation: _____
- V. Other: _____

D-Box Pump Alarm H2O Line PWR Line

Following are the specifications for the sewage disposal system on the above captioned property.

Type of system: Conventional Other IEE FLOW III B Septic Tank: 1000 gallons Pump Tank: 1000 gallons
 Subsurface Drainage Field No. of ditches 2 exact length of each ditch 115 feet width of ditches 3 feet depth of ditches 18 inches
 French Drain Required: _____ Linear feet

Authorized State Agent [Signature] Date 09/21/2020



Harnett County GIS

PID: 08065401 0090 17
PIN: 0653-34-6766.000
Account Number: 1500063734
Owner: HOFFMANN THOMAS TRUSTEE & HOFFMANN MICHELE CORINNE TRUSTEE
Mailing Address: 2708 BRIGHTON BLUFF DR APEX, NC 27539-8771
Physical Address: 84 LAHINCH DR FUQUAY-VARINA, NC 27526 ac
Description: LOT#127 AVERY POND S/D PH IIID MAP#2019-417
Surveyed/Deeded Acreage: 0.89
Calculated Acreage: 0.88
Deed Date:
Deed Book/Page: 4233 - 2209
Plat(Survey) Book/Page: 2019 - 417
Last Sale: 2024 - 5
Sale Price: \$0
Qualified Code: E
Vacant or Improved: I
Transfer of Split: T
Actual Year Built: 2020
Heated Area : 1317 SqFt
Building Count : 1

Building Value: \$195570
Parcel Outbuilding Value: \$0
Parcel Land Value: 62220
Market Value: \$257790
Deferred Value: \$0
Total Assessed Value: \$257790
Zoning: RA-30 - 0.88 acres (100.0%)
Zoning Jurisdiction: Harnett County
Wetlands: No
FEMA Flood: Minimal Flood Risk
Within 1mi of Agriculture District: Yes
Elementary School: Northwest Harnett Elementary
Middle School: Harnett Central Middle
High School: Harnett Central High
Fire Department: Northwest Harnett
EMS Department: Medic 16
Law Enforcement: Harnett County Sheriff
Voter Precinct: Northwest Harnett
County Commissioner : Duncan Edward Jagers
School Board Member: John Hair

