Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: B 0 3 5 9 7 0

PIN #: 1 7 0 9 0 2 2 9 2 5

OP DATE: 0 1 1 2 9 1 1 9 8 6

SYSTEM USE:
- [x] House
- [ ] Mobile Home
- [ ] Business
- [ ] Other

SEWAGE TYPE:
- [x] Domestic
- [ ] Industrial

PUMP/SIPHON?:
- [ ] Yes
- [x] No

PRESSURE MANIFOLD:
- [ ] Yes
- [x] No

SYSTEM TYPE:
- [ ] I
- [x] II
- [ ] III
- [ ] IV
- [ ] V
- [ ] VI
- [ ] Other

SUB TYPE:
- [x] A
- [ ] B
- [ ] C
- [ ] D
- [ ] E
- [ ] F
- [ ] G

NBR BEDROOMS:
- [ ] 1
- [ ] 2
- [x] 3
- [ ] 4
- [ ] 5
- [ ] 6
- [ ] Other

MAINT. SCHEDULE:
- [ ] Yes
- [x] No

CERT. OPERATOR
- [ ] Yes
- [x] No

GT	ST	PT	SIZE
☐	☐		750
☐	☐	☐	900
☐	☒	☐	1,000
☐	☐	☐	1,200
☐	☐	☐	1,500
☐	☐	☐	1,800
☐	☐	☐	2,100
☐	☐	☐	2,500
☐	☐	☐	3,000
☐	☐	☐	4,000
☐	☐	☐	5,000
☐	☐	☐	8,000
	☐	☐	10,000
☐	☐	☐	Other
☒		☒	None/NA GT or PT

DRAINFIELD SIZE(SQ. FT.)

0 1 0 0 0

DRAIN TYPE:
- [x] Stone
- [ ] EZ Flow
- [ ] Infiltrator
- [ ] Biodiffuser
- [ ] Cultec
- [ ] Drip
- [ ] Hancor
- [ ] Large Dia. Pipe
- [ ] Multi-Pipe
- [ ] Other

MAX DEPTH (IN.):
- [ ] 12 in. or less
- [ ] 18 in. or less
- [ ] 24 in. or less
- [ ] 26 in. or less
- [ ] 28 in. or less
- [ ] 30 in. or less
- [ ] 32 in. or less
- [ ] 36 in. or less
- [x] Other

STONE DEPTH (IN.):
- [ ] 8 in. or less
- [x] 12 in. or less
- [ ] 18 in. or less
- [ ] 24 in. or less
- [ ] Other

TRENCHES:
- [x] Individual
- [ ] Bed

TRENCH WIDTH (IN.):
- [ ] 12 in. or less
- [ ] 18 in.
- [ ] 24 in.
- [x] 36 in.
- [ ] 6 ft. or less
- [ ] 9 ft. or less
- [ ] Other

WAKE COUNTY HEALTH DEPARTMENT SEPTIC TANK LAYOUT AND PERMIT

35970

TAX MAP NO. _____ PARCEL NO. 3674

PERMIT NO. B

OPERATION PERMIT ☐

CONTRACTOR _____

OWNER _____ DATE _____

LOCATION _____

S. R. NO. _____

SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

REPAIR ☐ ORIGINAL PERMIT NO. _____

GARBAGE DISPOSAL UNIT YES ☐ NO ☒

HOUSE ☒ MOBILE HOME ☐ BUSINESS ☐

NO. BEDROOMS 3 LOT AREA _____

SIZE OF TANK _____ gal.

NITRIFICATION LINE _____ sq. ft.

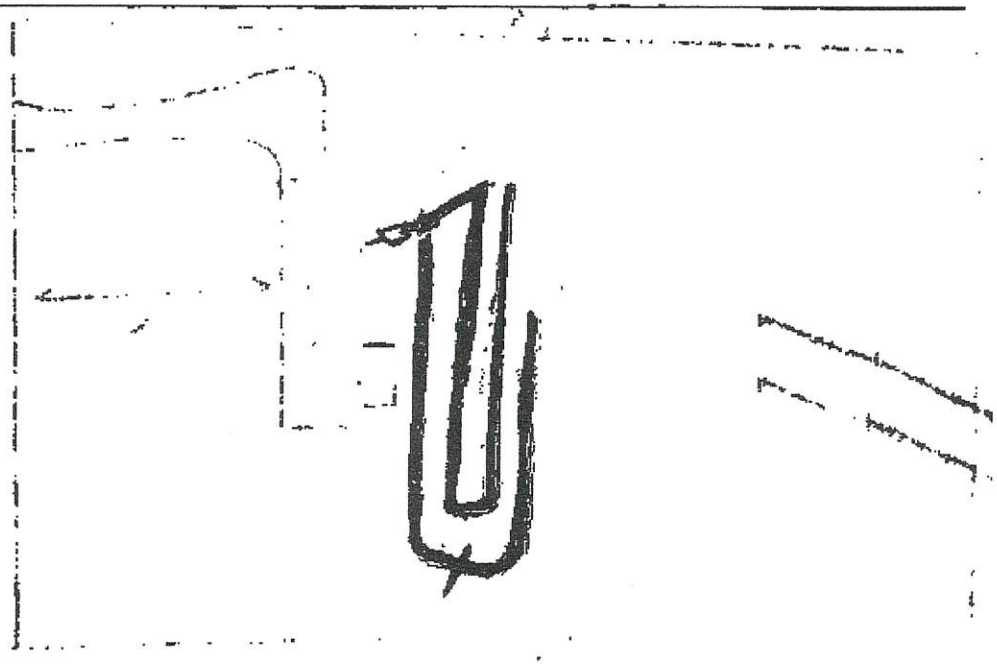
DEPTH OF STONE IN LINES: 12" ☒

RISER AND BAFFLE REQUIRED ☒ PUMP REQUIRED ☐

WATER SUPPY: INDIVIDUAL ☐ PUBLIC ☒ OTHER ☐

* PERMIT VOID 36 MONTHS FROM DATE OF ISSUANCE.
* PERMIT VOID IF NOT IN COMPLIANCE WITH ZONING REGULATIONS
* PERMIT MAY BE VOIDED IF SITE ALTERATIONS MADE

LAYOUT BY _____



1-29-86
DATE

Youngs construct..
INSTALLED BY

APPROVED BY

LOT 68 SECTION --- BLOCK --- PHASE --- SUBDIVISION STONE CREEK

AS RECORDED IN MAP BOOK 1986 VOL. --- PAGE 524

OF THE WAKE COUNTY REGISTRY.

I declare that this survey complies with the North Carolina Standards of Practice for Surveying (section .1600) for class A surveys and that the calculated ratio of precision before adjustments is 10,000+. Furthermore, building corners shown are primary control monumentation for the re-establishment of property corners in the absence of grid monuments and other subdivision property corners. This survey is not to be recorded without the written authorization of the surveyor.

____________________, Registered Land Surveyor

Notes
1) North arrow is referenced to recorded document shown above unless denoted otherwise.
2) House ties are radial to property lines unless shown otherwise.
3) Underground pipes not located with this survey.
4) All areas are computed by coordinates.

LEGEND:

o = EXISTING IRON PIPE
• = NEW IRON PIPE
P = PORCH, S = STOOP, SH = SHED
-x-x- = FENCE, R = RADIUS
— -- = CREEK (APPROX. LOCATION)
—E— = OVERHEAD ELECTRIC LINE
LP = LIGHT POLE, PP = POWER LINE
CP = CARPORT, PK = MASONRY NAIL
PL = PROPERTY LINE, MH = MANHOLE
PM = PRELIMINARY MAP
LBS = LOCATION BY SCALE
CL = CHAIN LINK, WD = WOOD
C = CHIMNEY, ⊠ = ELECT. TRANSFORMER
— — — = RECORDED BUILDING ENVELOPE
L = ARC LENGTH, CH = CHORD LENGTH
YI = YARD INLET

I certify that the location of planned or existing structure(s) are accurately shown. I understand failure to locate structures in accordance with this plot plan may require the relocation of structure(s) regardless degree of completion. I hereby grant permission to Municipal/County Representatives the right of entry to make evaluations or inspections upon this property.

Signature of Owner or Authorized Agent

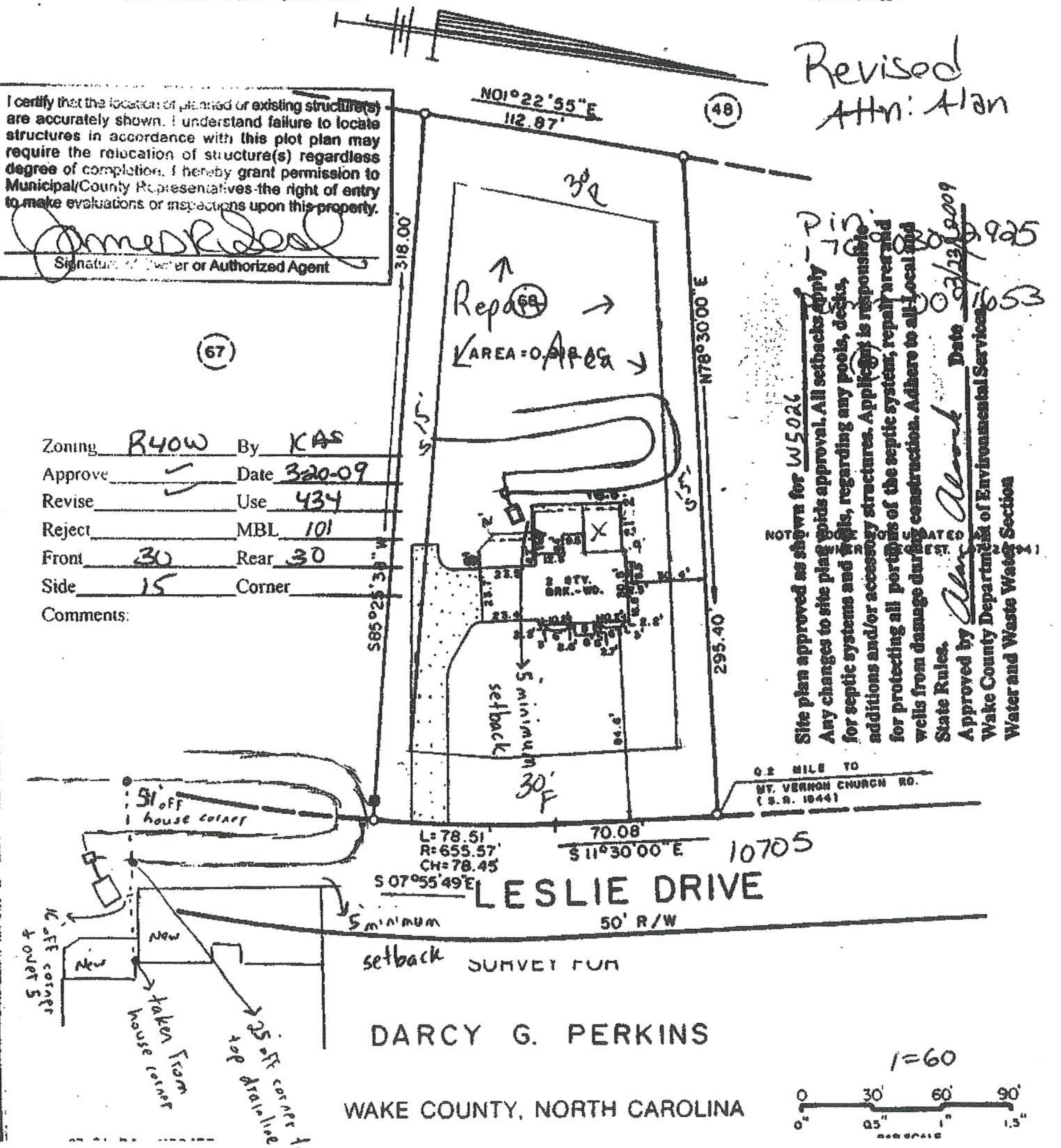
Revised Attn: Alan

Zoning	R40W	By	KAS
Approve	✓	Date	3-20-09
Revise		Use	434
Reject		MBL	101
Front	30	Rear	30
Side	15	Corner	

Comments:

Site plan approved as shown for W5026. All setbacks apply. Any changes to site plan voids approval. All setbacks apply for septic systems and wells, regarding any pools, decks, additions and/or accessory structures. Applicant is responsible for protecting all portions of the septic system, repair area and wells from damage during construction. Adhere to all Local and State Rules.
Approved by [signature] Date 3/23/2009
Wake County Department of Environmental Services
Water and Waste Water Section

PIN: 0700 80 2925
0700 1653



SUHVEY FUH

DARCY G. PERKINS

WAKE COUNTY, NORTH CAROLINA

1=60

0 30' 60' 90'
0" 0.5" 1" 1.5"