

Environmental Services - Water Quality  
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0006893

PIN #: 1719498693

OP DATE: 0512611998

SYSTEM USE:

- ☒ House  
☐ Mobile Home  
☐ Business  
☐ Other

SEWAGE TYPE:

- ☒ Domestic  
☐ Industrial

PUMP/SIPHON?:

- ☒ Yes  
☐ No

PRESSURE MANIFOLD:

- ☒ Yes  
☐ No

SYSTEM TYPE:

- ☐ I  
☐ II  
☒ III  
☐ IV  
☐ V  
☐ VI  
☐ Other

SUB TYPE:

- ☐ A  
☒ B  
☐ C  
☐ D  
☐ E  
☐ F  
☐ G

NBR BEDROOMS:

- ☐ 1  
☐ 2  
☐ 3  
☐ 4  
☒ 5  
☐ 6  
☐ Other

MAINT. SCHEDULE:

- ☐ Yes  
☒ No

CERT. OPERATOR

- ☐ Yes  
☒ No

| GT                                  | ST                                  | PT                                  | SIZE             |
|-------------------------------------|-------------------------------------|-------------------------------------|------------------|
| <input type="checkbox"/>            | <input type="checkbox"/>            |                                     | 750              |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 900              |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 1,000            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 1,200            |
| <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 1,500            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 1,800            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 2,100            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 2,500            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 3,000            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 4,000            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 5,000            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 8,000            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 10,000           |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | Other            |
| <input checked="" type="checkbox"/> |                                     | <input type="checkbox"/>            | None/NA GT or PT |

DRAINFIELD SIZE(SQ. FT.)

01500

DRAIN TYPE:

- ☐ 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  
☐ Other

STONE DEPTH (IN.):

- ☐ 8 in. or less  
☒ 12 in. or less  
☐ 18 in. or less  
☐ 24 in. or less  
☐ Other

TRENCHES:

- ☒ Individual  
☐ Bed

TRENCH WIDTH (IN.):

- ☐ 12 in. or less  
☐ 18 in.  
☐ 24 in.  
☒ 36 in.  
☐ 6 ft. or less  
☐ 9 ft. or less  
☐ Other

# WAKE COUNTY ENVIRONMENTAL HEALTH WELL AND SEWAGE SITE LOCATION PERMIT

NO PERMIT(S) FOR CONSTRUCTION, LOCATION OR RELOCATION ACTIVITY SHALL BE ISSUED  
UNTIL AN AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION HAS BEEN ISSUED.

\*PERMIT VOID IF NOT IN COMPLIANCE WITH ZONING REGULATIONS AND/ OR IF SITE IS ALTERED OR INTENDED USE CHANGED\*

PERMIT#: D006893 STATUS: A APP DATE: 07/01/1997 BLDG PERMIT#: 0980026  
APPLICANT: SPAINHOUR, REEVES DAY PHONE: ( 919 ) 554 - 1079  
ADDRESS: 342 W PINE AVE FAX#: ( 000 ) 000 - 0000  
CITY: WAKE FOREST STATE: NC ZIP: 27587  
OWNER: FELTON, BRIAN H & DAWN F DAY PHONE: ( 000 ) 000 - 0000  
ADDRESS: 8620 SWARTHMORE DR FAX#: ( 000 ) 000 - 0000  
CITY: RALEIGH STATE: NC ZIP: 27615  
HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?: Y  
EXIST USE: TAX MAP#: 0228  
BEDROOMS: 5 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOSAL: N  
TOWNSHIP: 02 BARTON'S CREEK JURIS: WC ZON: 80W PIN: 1719.01 49 8693 000  
SUBD#: S 000 000 00 SUBD NAME: BRIGHTWATER LOT-SEC: 14 ACRE: 2.88  
IMPRV PRMT: ISSUED?: Y DATE: 08/20/1997 BY: TW TYPE SYSTEM: III PUMP: Y  
CNSTR AUTH: ISSUED?: Y DATE: 11/05/1997 BY: ETD DATE EXPIRED: 11/05/2002  
RECEIPT#: 0017370 FEE: 290.00 OP DATE: BY:  
WATR SAMPL: REQ?: APPROVED?: DATE: PROPRIETARY SYS:  
ST#: 1512 MI: DIR: NAME: BRIGHTWATER DIR: TYP: CT  
DIRECTIONS: 2000W L 2002 WILL L BEFORE 2009 ONTO RAVEN RIDG  
E 2ND ENT TO BRIGHTWATER LOT MARKED SFD FLOOD  
CK REQD

## IMPROVEMENT PERMIT

SIZE OF TANK 1500 ST 1500 PT GALS. TOTAL SQ. FT. 2000 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐

I.P. ISSUED BY

*Ed Dufresne for Tim Warren*

## AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

### AUTHORIZATION CONDITIONS

Contractor To Follow Contours, See Attached Site Plan For Wastewater System Design And Well Location. The wastewater system shall not be covered or placed into use until inspected by the Wake County Environmental Health Division and an Operation Permit issued.

OTHER CONDITIONS: Install system according to plans submitted by February Assoc., Inc. Remove ALL trees 6 inches in diameter and less from the drainfield area. TREES are NOT to interfere with drainfield installation.

SIZE OF TANK 1500 ST 1500 PT GALS. TOTAL SQ. FT. 2000 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.

NUMBER OF TRENCHES 5 LENGTH OF TRENCHES 134 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY

*Ed Dufresne*

INSTALLED BY

*Patrick Backhoe*

CTR. I.D. #

INNOV. APPRL. #: 1WWS-953R

DATE 5-26-98

INSTALLATION APPROVED BY

*Ed Dufresne*

WELL SYSTEM = PRIVATE ☒ SEMI-PUBLIC ☐ NEW ☒ REPLACEMENT ☐ EXISTING ☐

WELL LOG INFORMATION = DEPTH 305' CASING DEPTH 53' YIELD 25 STATIC LEVEL

WELL CONTRACTOR Goldston's REG.#        PUMP CONTRACTOR        REG.#       

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☒ DATE 12-03-97 EHS

WCHD ID # 1812 WELLHEAD APPROVED ☒ DATE 6-29-98 EHS

NEGATIVE BACTERIOLOGICAL RESULTS ☒ DATE 06-02-98 EHS

SYSTEM FINALIZED ☒ DATE 06-17-98 EHS

COMMENTS:

\*\*\*\*\*  
This permit is based in part on information provided by the homeowner or his/her representative in the application submitted for this permit. The Environmental Health Specialist is not responsible for false or misleading information contained in the application. The Environmental Health Specialist is also not responsible for concealed conditions on the property or for statements in this report that may have resulted from false or misleading statements provided to him in the application. Neither Wake County nor the Environmental Health Specialist warrants that the septic tank system will continue to function satisfactorily in the future or that the water supply will remain potable.

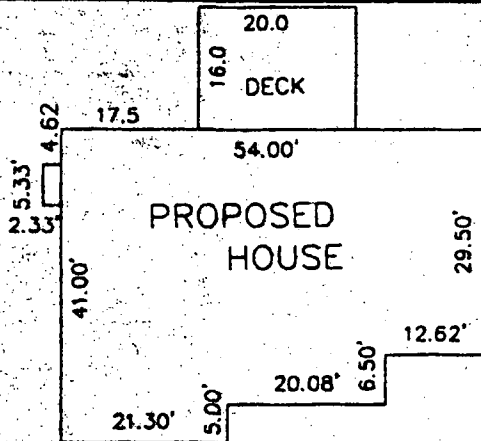
SUBJECT PROPERTY IS \_\_\_\_\_ IS NOT \_\_\_\_\_ LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DESIGNATED ON FEDERAL EMERGENCY MANAGEMENT AGENCY (F.E.M.A.) FLOOD INSURANCE RATE MAP NUMBER \_\_\_\_\_ ZONE \_\_\_\_\_

0980026

\* REVISE D SITE

Construction Authorization Site Plan PLAN.

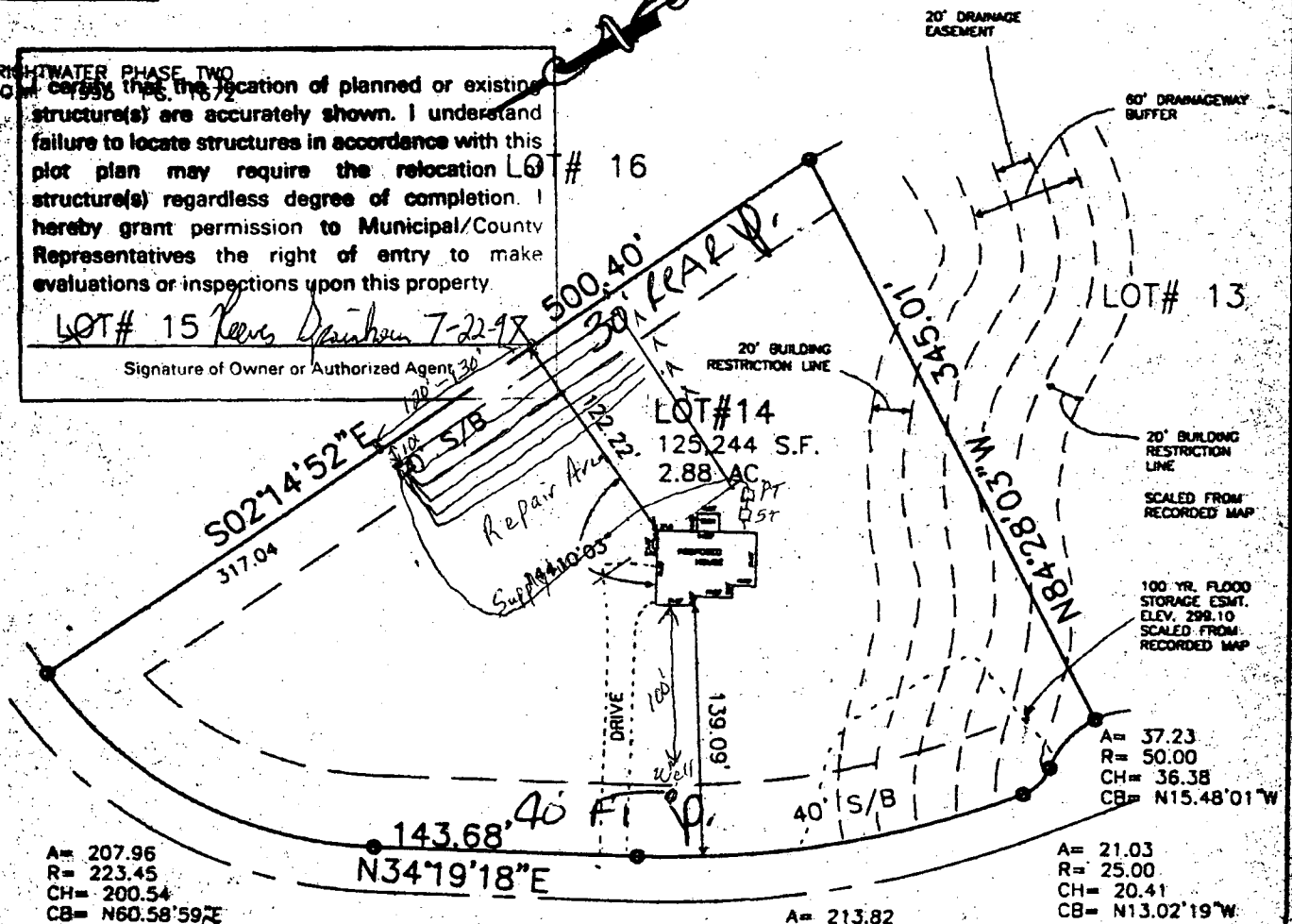
D-6893



BRIGHTWATER PHASE TWO  
8.0' 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.

LOT# 15 *Revised 7-22-97*

Signature of Owner or Authorized Agent



Zoning R-80W By M BRIGHTWATER COURT

Approve ✓ Date 7/22/97

Revise ✓ Use 101

Reject MBL

Front 40 Rear 30

Side 20 Corner —

Comments:

BRIGHTWATER SUBDIVISION

PHASE THREE - SHEET 1 OF 2

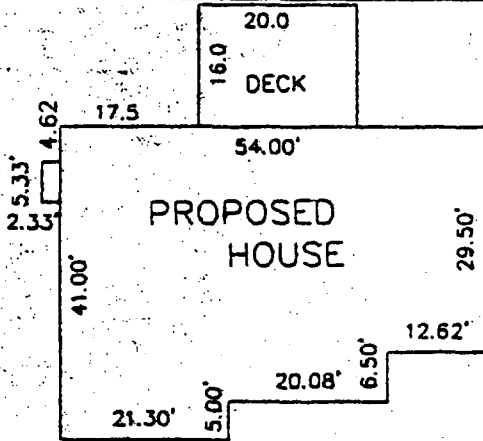
REVISED TO SHOW NEW HOUSE LOCATION 07/09/97  
REVISED TO SHOW NEW HOUSE LOCATION 07/22/97

PRELIMINARY PLAT, NOT FOR  
RECORDATION, CONVEYANCE  
OR SALE

BUILDER TO VERIFY HOUSE  
DIMENSIONS

SUBJECT PROPERTY IS \_\_\_\_\_ IS NOT \_\_\_\_\_ LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DESIGNATED ON FEDERAL EMERGENCY MANAGEMENT AGENCY (F.E.M.A.) FLOOD INSURANCE RATE MAP NUMBER \_\_\_\_\_ ZONE \_\_\_\_\_

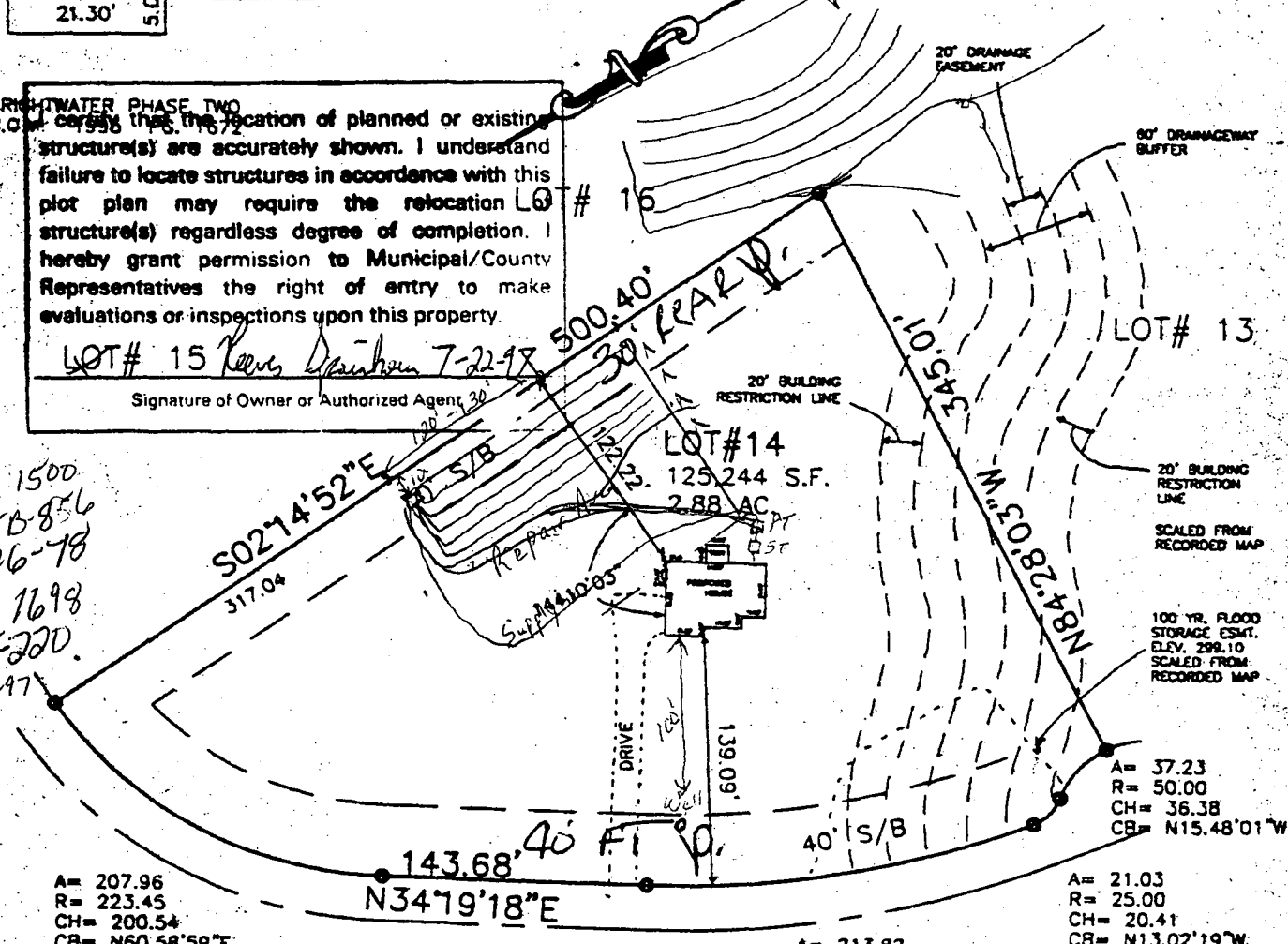
0980026



\* *REVISE D SITE*  
*Construction Authorization Site Plan PLAN.*  
*D-6893*

BRIGHTWATER PHASE TWO  
8.00' CORNER 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.  
*LOT# 15*  
Signature of Owner or Authorized Agent

*Mile 1500*  
*510-856*  
*126-78*  
*Mile 1698*  
*PT-200*  
*7-2497*



A= 207.96  
R= 223.45  
CH= 200.54  
CB= N60.58°59'E

A= 213.82  
R= 526.56  
CH= 212.35  
CB= N22.41°20'E

A= 21.03  
R= 25.00  
CH= 20.41  
CB= N13.02°19'W

Zoning R-80W By M-BRIGHTWATER COURT  
Approve ✓ Date 7/22/97  
Revise ✓ Use 101  
Reject \_\_\_\_\_ MBL \_\_\_\_\_  
Front 40 Rear 30  
Side 20 Corner \_\_\_\_\_

REVISED TO SHOW NEW HOUSE LOCATION 07/09/97  
REVISED TO SHOW NEW HOUSE LOCATION 07/22/97

Comments:  
BRIGHTWATER SUBDIVISION  
PHASE THREE - SHEET 1 OF 2

PRELIMINARY PLAT, NOT FOR  
RECORDATION, CONVEYANCE  
OR SALE  
BUILDER TO VERIFY HOUSE  
DIMENSIONS



## FEBRUARY ASSOCIATES, INC.

P.O. Box 5427  
Cary, N.C. 27512

Ph: 919/467-5427  
Fax: 919/467-5463

12/27

October 23, 1997

Mr. Ed Duke, R.S.  
Wake County Department of Health  
PO Box 550  
Raleigh NC 27602

Dear Mr. Duke:

Attached please find two copies of our proposal for a Pressure Manifold to Conventional Trenches for:

Lot 14, Brightwater permit D-6893

The proposal includes:  
Plans & specifications, including calculations  
Site plan  
Manifold details  
Tank specifications  
Pump, controls, and accessory specifications  
Installation information

Please note that specific manufacturers mentioned in the proposal are for example only; other products that meet or exceed the specifications may be substituted.

When review of the plans has been completed, please forward one copy of the plans (and permit, if applicable) to:

Reeves Spainhour 422-4325  
342 W. Pine Ave.  
Wake Forest NC 27587

- ( ) APPROVED  
(X) APPROVED AS NOTED  
( ) DISAPPROVED

If you have questions or require additional information, please feel free to call me.

Sincerely,

  
Katherine H. Morris, R.S., P.G.  
President

coverwk.let

Review of this document has been made only for compliance with the design concept of the project and approval or approval as noted shall not relieve the contractor from responsibility for any errors in plan or for furnishing the materials, and equipment of proper dimension, size, quantity, quality and performance characteristics to meet the requirements and intent of the contract documents.

WAKE COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH DIVISION

Date 11-5-97 By ED Duke



# FEBRUARY ASSOCIATES, INC.

P.O. Box 5427  
Cary, N.C. 27512

Ph: 919/467-5427  
Fax: 919/467-5463

## ALTERNATIVE SYSTEM DESIGN

date: 10-22-97

OWNER REEVES SPAINHOUR

TYPE OF SYSTEM PRESSURE MANIFOLD

ADDRESS 342 W. PINE AVE

COUNTY WAKE

WAKE FOREST NC 27587

SITE LOT 14 BRIGHTWATER

D-6893

PHONE 422-4325(M)

1719.01-49-8693

Site evaluation by TIM WARREN, R.S

SPECIFICATIONS: (Source: permit site evaluation, other: \_\_\_\_\_)

Daily waste load 600 gpd. for 5 BR. HOUSE LTAR .3 gal/sq.ft./day

### Trenches

Maximum depth 24 inches  
Width 36 inches

Gravel size ≥ 1 inches  
Gravel depth 12 inches

### DESIGN PARAMETERS:

Septic tank 1500 gallons Pump tank 1500 gallons, 33 gallons per inch

Nitrification line 2000 square feet; 667 linear feet, 3 feet wide

Configuration 5 @ 134

Supply line ~240 feet, 2 " diam. Schedule 40 PVC

All pipe and fittings Sch. 40 PVC unless noted. See "Site Plan" and "Manifold" sheets for details.

Manifold(s) > 4 feet, 4 " diam. Schedule 80 PVC

Number of taps 5 tap size 1/2 tap spacing 6" on (one) both sides of manifold

Dosing rate 35.5 gpm

Dosing volume 297 (327) gallons

Total dynamic head 23.0 feet

Drawdown in pump tank 9 inches Dependent on Pump Tank

Pump HYDROMATIC SP50M Controls RHOMBUS TYPE 112 PANEL w/ 7"

ALARM OPTION, ELAPSED TIME METER, CYCLE COUNTER, NEMA 4X BOX  
Other equipment which meets or exceeds the specifications may be substituted

OTHER REQUIREMENTS: \_\_\_\_\_

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SPRAIN HOUR

### PRESSURE MANIFOLD SPECIFICATIONS AND CALCULATIONS

Number of taps 5 Orifice 1/2" (nominal) .622" (actual)  
SCH. 40 TAP PIPE

Flow per orifice 7.1 gallons per minute

System flow 35.5 gallons per minute

Manifold diameter 4 inches, Schedule 80 PVC

Manifold length (minimum) 4 feet

Tap configuration 6" MINIMUM SPACING, ONE SIDE OF MANIFOLD

Supply line length ~ 240 feet, 2 " diameter Schedule 40 PVC

Elevation head ~ 14.0 feet

Friction loss 5.8 feet =  $\frac{1.35}{4.87} \times .00113 \times \frac{L}{D} \times Q$

Fittings loss (+20%) 1.2 feet

L = supply line length  
Q = system flow  
D = actual inside diameter  
(new pipe)

Design head 2.0 feet

TOTAL DYNAMIC HEAD 23.0 FEET

Pipe volume 438 GAL gallons =  $\frac{670}{65.3} \times \text{pipe length}$  (this is for 4" pipe)

Dosing volume 297 gallons =  $\frac{263}{60\%}$  to  $\frac{328}{75\%}$  pipe volume

Interior dimensions length " X width " X 1" = 33 gallons per inch  
230 cubic inches per gallon

Drawdown 9 inches =  $\frac{\text{dosing volume}}{\text{gallons per inch}}$   
*Dependent on pump tank*

Note: pump tank dimensions vary by manufacturer. Drawdown should be re-calculated using dimensions of specific tank selected. A minor adjustment in the dosing volume to achieve a whole number of inches is acceptable.  
newpm2.doc