

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 4 2 8 5 2

PIN #: 1 7 6 9 8 8 5 7 0 1

OP DATE: 0 1 1 1 3 1 2 0 0 9

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

DRAINFIELD SIZE(SQ. FT.)

DRAIN TYPE:

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|------------------|
| ☐ | ☐ | ☐ | 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 |

0 1 3 5 0

- ☐ 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 DEPARTMENT OF ENVIRONMENTAL SERVICES 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#: D042852 STATUS: A APP. DATE: 07/28/2008 BLDG. PERMIT#: 0090237
PIN: 1769.02 88 5701 000 TAX MAP: 0 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 19 WAKE FOREST JURISDICTION: WC ZONING: R40W SW DEVICE: N S#:
APPLICANT: RISING SUN POOLS
5604 PINE ROCK CT
WAKE FOREST, NC 27587
(919) 851 - 9700
USE: HD USE: 329A OUTDOOR SWIMMING POOL
EXIST USE: 101 ONE-FAMILY HOUSE
LTAR: 0.27 0.27 BEDROOMS: 0 BASEMENT: N #EMPLOYEES: 0
SITE: ADDRESS: 5604 PINE ROCK CT
SUBDIVISION: LAKES OF ROLESV LOT: 75 ACRES: 0.92 EASEMENT: N LOC: SYS:
DIRECTION: 401N FOR 18 MI TL ON CREEK PINE DR TL ON WHITE
FIR DR TR ON PINE ROCK CT

Well System: WATER: COMMUNITY - TYPE: EXISTING

WELL LOG INFORMATION: DEPTH: _____ CASING DEPTH: _____ YIELD: _____ STATIC LEVEL: _____
WELLI CONTRACTOR: _____ REG.# _____ PUMP CONTRACTOR: _____ REG.# _____
Construction Compliance GROUT APPROVED ☐ DATE _____ EHS _____
WELLHEAD APPROVED ☐ DATE _____ EHS _____
SYSTEM FINALIZED ☐ DATE _____ EHS _____

COMMENTS:

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ Operation Permit
INNOVATIVE LETTER: _____

INSTALLED BY: True Works (David Truclove) INSTALLATION APPROVED BY: Timothy L. Bass II
PROPRIETARY SYSTEM: E2-flow FILTER NO: Existing
COMMENTS:

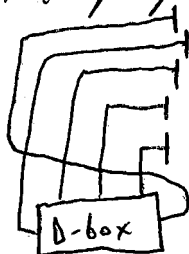
OPERATIONS PERMIT ISSUED? Y OP DATE: 1/13/09 BY: Timothy L. Bass II CHH 4/8/09

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.

As Built Information:

Date: 1/13/09 Benchmark: _____ Rod reading: _____ Distance to Structure: _____
ST: Existing gals ID#: _____ D.O.M.: _____ Elev.: _____ Distance to Well: _____
PT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____
D-box/FD/PM elev.: _____ Supply Line: 6 ft. Pump/Control Panel: _____
Line 1: 4'10" _____ Date: 1/13 _____ Line 6: _____ _____ Date: _____
Line 2: _____ _____ Date: _____ _____ Line 7: _____ _____ Date: _____
Line 3: _____ _____ Date: _____ _____ Line 8: _____ _____ Date: _____
Line 4: _____ _____ Date: _____ _____ Line 9: _____ _____ Date: _____
Line 5: _____ _____ Date: _____ _____ Line 10: _____ _____ Date: _____
Distance to P/L: _____ Notes: _____

D-box is 6' from septic tank, 18' from house corner, and
34' from side property line. TPB



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DIRECTION: 401N FOR 18 MI TL ON CREEK PINE DR TL ON WHITE
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IMPROVEMENT PERMIT

TANK SIZE: EXIST gal. PUMP Tank: _____ gal. SQ FT: _____ INNOVATIVE MAX DEPTH LINE: 19 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: III G PUMP: N P/M: N
DAILY FLOW: 480 gal/day DESIGN FEE REQ?: _____ PAID?: _____ WATER: COMMUNITY

COMMENTS:

IP ISSUED? Y DATE: 11/12/2008 BY: (CHH) Christa H Hayes PHONE#: 868-2564

AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

AUTHORIZATION CONDITIONS:

Contractors shall install system on contours, see attached site plan for wastewater system design and well location. No underground utilities, water lines or sprinkler systems may be located in the original system or repair areas. A septic tank filter with a riser for access is required. The wastewater system shall not be covered or placed into use until inspected by the Wake County Department of Environmental Services and an Operation Permit issued. An Accepted Status System may be used in place of conventional system, if it can be placed in the permitted/authorized trench footprint (except reduction in line length and/or number as allowed for in approval) and the installation is in accordance with the accepted system approval, without unauthorized product alteration. If permit required use of an Accepted Status System, substitution with another accepted status system may be made, as long as no changes are necessary in the location of each nitrification line (including any increase in line length), trench depth or effluent distribution method. If changes are necessary, prior approval by this office is required before system installation. OTHER CONDITIONS:

ABANDON TOP LINE OF EXISTING SYSTEM(Y). INSTALL NEW 1(90'X3') EZFLOW (O) BELOW EXISTING SYSTEM AND CONNECT TO DBOX. TREES WILL HAVE TO BE REMOVED TO INSTALL NEW LINE. 19" MAX TRENCH DEPTH. CALL WITH ANY QUESTIONS OR CONCERNS. 868-2564

TANK SIZE: EXIST gal. PUMP TANK: _____ gal. SQ FT: _____ INNOVATIVE MAX DEPTH LINE: 19 in.
MAINT: N OPER: N L/O: Y TRENCH#: 1 LENGTH: 90 ft. WIDTH: 36 in. DESIGNER: _____
SUBFIELDS: _____ DESIGN HEAD PRESSURE: _____ DESIGN FLOW: _____ gal/min DOSE VOLUME: _____ gal.

CA ISSUED? Y DATE: 11/12/2008 BY: (CHH) Christa H Hayes PHONE#: 868-2564

AS BUILT

PIN#
176902885701

LOT 12

PERMIT #
0090237
D042852

20' PUBLIC STORM
DRAINAGE EASEMENT
B.M. 2006, PG. 326-327

30' REAR
SETBACK

LOT 14
0.919 ACRES
9,081 S.F. MJA

LOT 13

Notice: This plat is subject to the provisions of the North Carolina Subdivision Map Act, Chapter 40B, and the rules and regulations of the North Carolina Department of Transportation. The plat is not to be used for any purpose other than the location of the proposed subdivision. The plat is not to be used for any purpose other than the location of the proposed subdivision. The plat is not to be used for any purpose other than the location of the proposed subdivision.

MISA 9081

IMPERVIOUS SURFACES:
TOTAL LOT AREA=40,044 S.F.
PROPOSED HOUSE=2,585 S.F.
PROPOSED DRIVEWAYS/ETC.=
1,533 S.F. = Total = 4,118 S.F.
PROPOSED IMPERVIOUS AREA
pool 1,000 sq ft @ 10 12.79%
New Total: 5,118 S.F.

SETBACKS

	LI
FRONT-30'	
REAR-30'	(M.I.A.)-M.
CORNER SIDE-30'	
SIDE-15'	

RELIMINARY PLAT- NOT FOR RECORDATION,
CONVEYANCE, OR SALE

LOT 14 THE LAKES OF ROLESVILLE
5604 PINE ROCK COURT
WAKE COUNTY
WAKE FOREST, N.C. 27587

0072251
D 38937

Revised

PROPERTY
THE DREES C
Scale 0' 60'
60'

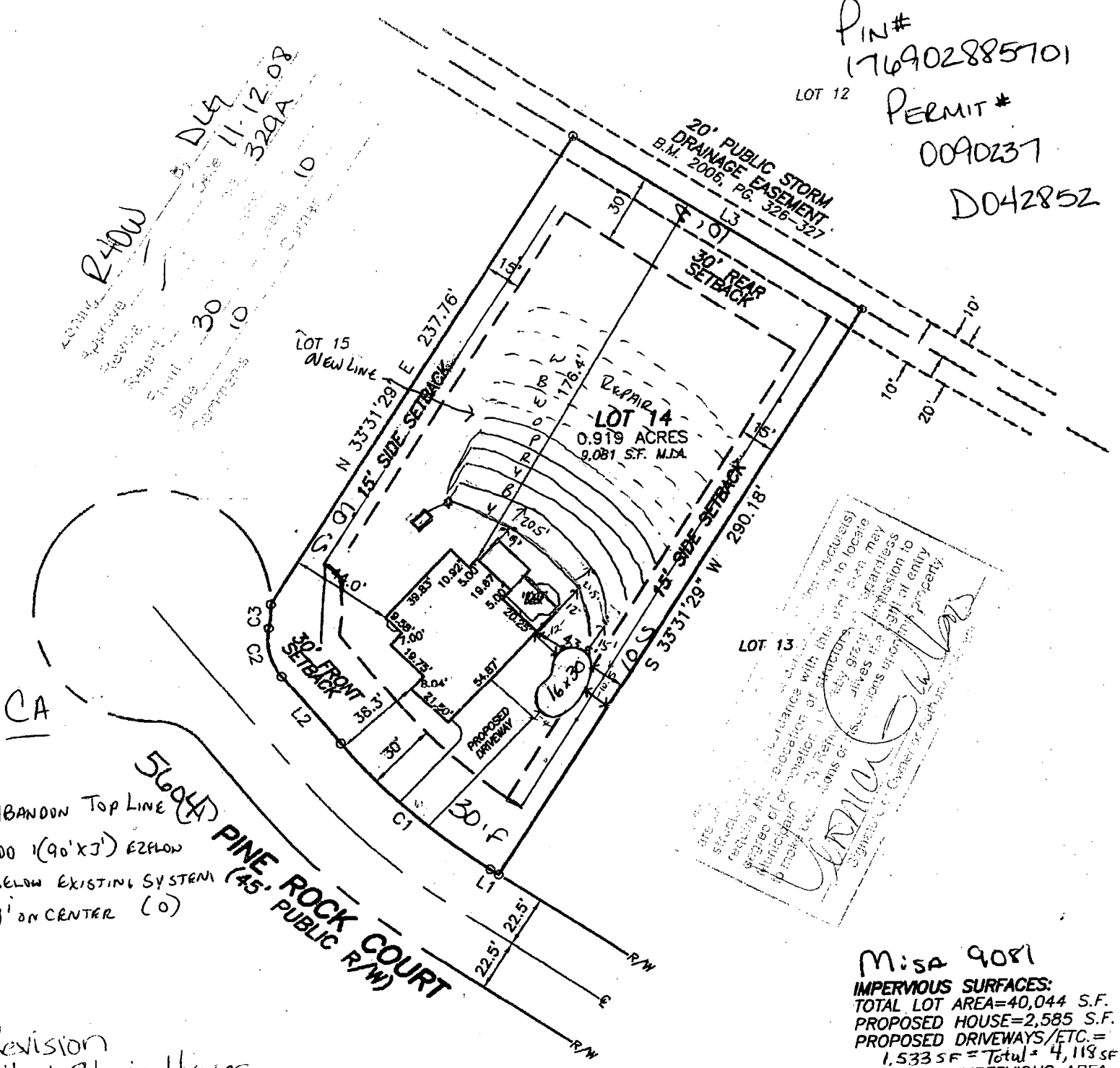
Revision
attn: Chris Hayes

1769 02 88 5701

S:
ALL EASEMENTS, RIGHTS OF WAY, AND BOUNDARY
INFORMATION TAKEN FROM B.M. 2006, PG.'S 1735-1736
AND B.M. 2007, PG. 655-656 UNLESS OTHERWISE NOTED.

PIN#
176902885701

LOT 12
PERMIT #
0090237
D042852



ABANDON Top Line
ADD 1(90'X3') E2FLOW
BELOW EXISTING SYSTEM
9' ON CENTER (0)

Revision
thn: Chris Hayes

1769 02 88 5701

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