Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0 0 4 1 1 3 1

PIN #: 2 7 1 7 0 0 3 2 0 1

OP DATE: 0 3 / 2 6 / 2 0 0 8

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 0 9 0 0

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

MAX DEPTH (IN.):
- [ ] 12 in. or less
- [ ] 18 in. or less
- [x] 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
- [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

BW 1/2/14

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#: **D041131** STATUS: **A** APP. DATE: **10/22/2007** BLDG. PERMIT#: **0081370**
PIN: **2717.03 00 3201 000** TAX MAP: **0** RECORDED: **Y** ORIG. PERMIT#:
TOWNSHIP: **09 LITTLE RIVER** JURISDICTION: **WC** ZONING: **R30** SW DEVICE: **N** S#:
APPLICANT: **AMIDON BUILDERS**
3160 PEARCES RD
ZEBULON, NC 27597
(919) 291 - 5000
USE: HD USE: **101 ONE-FAMILY HOUSE**
EXIST USE:
LTAR: **0.30 0.30** BEDROOMS: **3** BASEMENT: **N** #EMPLOYEES: **0**
SITE: ADDRESS: **3304 BLACK STALLION CT**
SUBDIVISION: **JOEY MCLEOD** LOT: **6** ACRES: **3.69** EASEMENT: **N** LOC: SYS:
DIRECTION: **96 NORTH PEARCES NORTH TR PIPPIN TL SHEPARD SCH**
OOL TR BLACK STALLION

Well System: WATER: **INDIVIDUAL** - TYPE: **NEW**

WELL LOG INFORMATION: DEPTH: 245 CASING DEPTH: 46 YIELD: 25 STATIC LEVEL: 20
WELLI CONTRACTOR: NW POOLE REG.# 4 PUMP CONTRACTOR: _____ REG.# _____

Construction Compliance

GROUT APPROVED	☑	DATE 1-18-08	EHS	GWS
WELLHEAD APPROVED	☑	DATE 01-25-08	EHS	GWS
SYSTEM FINALIZED	☐	DATE 3-26-08	EHS	GWS

COMMENTS: **WELL SETBACKS: 50' FROM HOUSE, 40' FROM RIGHT P/L AND 100' FROM SEPTIC SYSTEM**

Operation Permit

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

INSTALLED BY: David Brantley & Sons INSTALLATION APPROVED BY: Timothy L. Bass II C.HH 3/20/08

PROPRIETARY SYSTEM: E2-Lay (Geo) FILTER NO: Sim/Tech

COMMENTS:

OPERATIONS PERMIT ISSUED? Y OP DATE: 3/26/08 BY: Eric Finn REHS for TPB

****

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: 3/7/08 Benchmark: DB StB-646 Rod reading: 3'3½" Distance to Structure: 15'
ST: 1000 gals ID#: DB StB-646 D.O.M.: 6-11-07 Elev.: 3'3½" Distance to Well: _____
PT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____
(D-box)/FD/PM elev.: 4'0" Supply Line: 2 ft. Pump/Control Panel: _____

Line 1:	5'5"	5'5"	5'5"	____	Date: 3/7	Line 6:	____	____	____	____	Date: ____
Line 2:	6'0"	6'0"	6'0"	____	Date: ↓	Line 7:	____	____	____	____	Date: ____
Line 3:	6'9½"	6'9½"	6'9½"	____	Date: ↓	Line 8:	____	____	____	____	Date: ____
Line 4:	____	____	____	____	Date: ____	Line 9:	____	____	____	____	Date: ____
Line 5:	____	____	____	____	Date: ____	Line 10:	____	____	____	____	Date: ____

Distance to P/L: _____ Notes: _____

3/7 - Raining at time of inspection. TPB - still waiting on water sample approval.

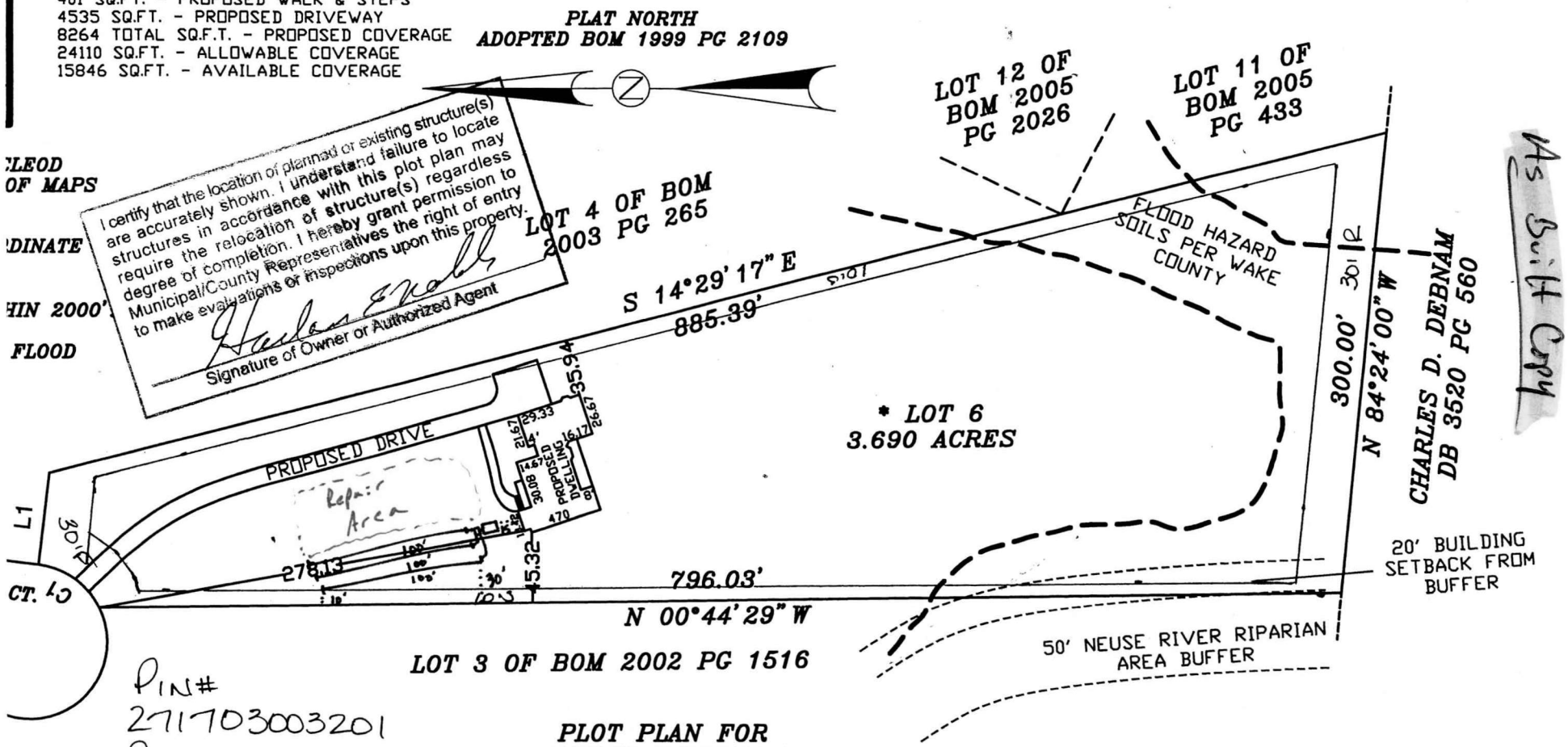
PRELIMINARY PLAT– NOT FOR RECORDATION, CONVEYANCES, OR SALES.

NOTE: THIS PROPERTY IS SUBJECT TO EASEMENTS AND RESTRICTIONS OF RECORD.

IMPERVIOUS SURFACE COVERAGE
3328 SQ.FT. - PROPOSED HOUSE, GARAGE & PORCHES
401 SQ.FT. - PROPOSED WALK & STEPS
4535 SQ.FT. - PROPOSED DRIVEWAY
8264 TOTAL SQ.F.T. - PROPOSED COVERAGE
24110 SQ.FT. - ALLOWABLE COVERAGE
15846 SQ.FT. - AVAILABLE COVERAGE

Course	Bearing	Distance
L1	S 83°13'53" E	60.00'

Curve	Radius	Length	Chord	Chord Bear.
C1	50.00'	50.00'	47.94'	N 35°24'59" E



PIN# 2717703003201
PERMIT #0081370
D041135

PLOT PLAN FOR
AMIDON BUILDERS
LITTLE RIVER TOWNSHIP
WAKE COUNTY
NORTH CAROLINA

100 0 100 200 300
GRAPHIC SCALE – FEET

DRAWN BY: DOW & BGW
CHECKED BY: DOW
DATE: 10-19-2007
SCALE: 1" = 100'
JOB: 9994 CF
FB:

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EXIST USE:
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SUBDIVISION: **JOEY MCLEOD** LOT: **6** ACRES: **3.69** EASEMENT: **N** LOC: SYS:
DIRECTION: **96 NORTH PEARCES NORTH TR PIPPIN TL SHEPARD SCH**
OOL TR BLACK STALLION

IMPROVEMENT PERMIT

TANK SIZE: **1000** gal. PUMP Tank: _____ gal. SQ FT: **900** INNOVATIVE MAX DEPTH LINE: **24** in.
WASTEWATER: **@wastewater@** SEWAGE: **DOMESTIC** TYPE SYSTEM: **III G** PUMP: **N** P/M: **N**
DAILY FLOW: **360** gal/day DESIGN FEE REQ?: PAID?: WATER: **INDIVIDUAL**

COMMENTS:

IP ISSUED? **Y** DATE: **11/05/2007** BY: (**SCR**) _____ PHONE#: **856-6194**

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:**
INITIAL SYSTEM AND REPAIR AREA 3 100' LINES, FLAGGED OUT IN FIELD. INN/ACC. TYPE SYSTEM, 25% REDUCTION ALREADY TAKEN. KEEP PLUMBING HIGH ENOUGH FOR GRAVITY FLOW. CALL OFFICE WITH ANY QUESTIONS PRIOR TO INSTALLATION.

TANK SIZE: **1000** gal. PUMP TANK: _____ gal. SQ FT: **900** INNOVATIVE MAX DEPTH LINE: **24** in.
MAINT: **N** OPER: **N** L/O: **Y** TRENCH#: **3** LENGTH: **100** ft. WIDTH: **36** in. DESIGNER: ___
SUBFIELDS: __ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? **Y** DATE: **11/05/2007** BY: (**SCR**) _____ PHONE#: **856-6194**

JAN. 21. 2008 8:13AM N W POOLE WEL. CO NO. 255 P. 1
TO: WAKE CO Attn: Hiriam Casebolt

RESIDENTIAL WELL CONSTRUCTION RECORD

North Carolina Department of Environment and Natural Resources- Division of Water Quality

WELL CONTRACTOR CERTIFICATION # 3441

1. WELL CONTRACTOR:
Landon E. Phillips
Well Contractor (Individual) Name
N.W. Poole Well & Pump Co.
Well Contractor Company Name
STREET ADDRESS PO Box 1958
Wendell, NC 27591
City or Town State Zip Code
(919) 266-9223
Area code- Phone number

2. WELL INFORMATION:
SITE WELL ID #(if applicable)
STATE WELL PERMIT#(if applicable)
DWQ or OTHER PERMIT #(if applicable) No 4/1131
WELL USE (Check Applicable Box): Residential Water Supply ☐
DATE DRILLED 1-18-08
TIME COMPLETED 2:15 AM ☐ PM ☑

3. WELL LOCATION:
CITY: Zebulon COUNTY Wake
3304 Black Stallion, Lot 6
(Street Name, Numbers, Community, Subdivision, Lot No., Parcel, Zip Code)
TOPOGRAPHIC / LAND SETTING: Joey Meads/D
☐ Slope ☐ Valley ☑ Flat ☐ Ridge ☐ Other
(check appropriate box)
LATITUDE 3 — —
LONGITUDE — — —
May be in degrees, minutes, seconds or in a decimal format
Latitude/longitude source: ☐ GPS ☐ Topographic map
(location of well must be shown on a USGS topo map and attached to this form if not using GPS)

4. WELL OWNER
OWNER'S NAME Avalon Builders
STREET ADDRESS 3160 Beatties
Zebulon N.C. 27597
City or Town State Zip Code
(919) 291-5000
Area code - Phone number

5. WELL DETAILS:
a. TOTAL DEPTH: 245'
b. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☑
c. WATER LEVEL Below Top of Casing: 20 FT.
(Use "+" if Above Top of Casing)
d. TOP OF CASING IS 1-5 FT. Above Land Surface*
*Top of casing terminated at/or below land surface may require a variance in accordance with 15A NCAC 2C .0118.
e. YIELD (gpm): 25 METHOD OF TEST Blow

f. DISINFECTION: Type H-H Amount 12 oz

g. WATER ZONES (depth):

From	To	From	To
55	60		
220	225		

h. CASING:

	Depth To	Ft.	Diameter	Thickness/ Weight	Material
From 0	46	Ft.	6	.188	gal
From		Ft.			
From		Ft.			

7. GROUT:

	Depth To	Ft.	Material	Method
From 0	20	Ft.	portland	pour
From		Ft.		
From		Ft.		

8. SCREEN:

	Depth To	Ft.	Diameter In.	Slot Size In.	Material
From		Ft.	In.	In.	
From		Ft.	In.	In.	
From		Ft.	In.	In.	

9. SAND/GRAVEL PACK:

	Depth To	Ft.	Size	Material
From		Ft.		
From		Ft.		
From		Ft.		

10. DRILLING LOG

From	To	Formation Description
0	2	Top Soil
2	30	Sand & clay
30	195	Sand stone & Granite
195	245	granite

11. REMARKS:

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER.

SIGNATURE OF CERTIFIED WELL CONTRACTOR — DATE 1-18-08

Landon E. Phillips
PRINTED NAME OF PERSON CONSTRUCTING THE WELL

Submit the original to the Division of Water Quality within 30 days. Attn: Information Mgt., 1617 Mail Service Center – Raleigh, NC 27699-1617 Phone No. (919) 733-7015 ext 560.

Form GW-1a
Rev. 7/05