

Environmental Services - Water Quality  
Onsite Wastewater Scan Data Entry Form

PERMIT #: 1025371

PIN #: 1765599897

OP DATE: 0311012003

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 checked="" type="checkbox"/> | <input type="checkbox"/>            | 1,000            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | 1,200            |
| <input type="checkbox"/>            | <input type="checkbox"/>            | <input 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 checked="" type="checkbox"/> | None/NA GT or PT |

DRAINFIELD SIZE(SQ. FT.)

00900

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 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#: D025371 STATUS: A APP. DATE: 09/10/2002 BLDG. PERMIT#: 0030636  
PIN: 1765.02 59 9897 000 TAX MAP: 0416 0000 RECORDED: Y ORIG. PERMIT#:   
TOWNSHIP: 10 MARKS CREEK JURISDICTION: WC ZONING: R40  
APPLICANT: UNDERHILL, WILLIAM R. JR  
PO BOX 1721, 43 N. MAIN ST  
WENDELL, NC 27591  
(919) 427 - 1494  
USE: HD USE: 101 ONE-FAMILY HOUSE  
EXIST USE:   
DISPOSAL: BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0  
SITE: ADDRESS: 6001 GLENNEVIS LN  
SUBDIVISION: ARRANGLEN LOT: 8 ACRES: 1.08  
DIRECTION: 64 E, TL SR 1003, TO 2.5 MILES TR QUAIL COVEY  
LN, GO 1 MI. TR GLENNEVIS LN

Well System: WATER: INDIVIDUAL TYPE: NEW

WELL LOG INFORMATION: DEPTH: 140 CASING DEPTH: 31 YIELD: 40 STATIC LEVEL: 20  
WELL CONTRACTOR: Conley Pools REG.# 477 PUMP CONTRACTOR: Fulcr REG.# 1047  
Construction Compliance GROUT APPROVED ☒ DATE 11/27/02 EHS: Eric L. Carter  
WELLHEAD APPROVED ☒ DATE 2-28-03 EHS: Andrew S. ORS  
SYSTEM FINALIZED ☐ DATE \_\_\_\_\_ EHS: \_\_\_\_\_

COMMENTS:

Operation Permit

DESIGN FLOW: \_\_\_\_\_ gal./min. ACTUAL FLOW: \_\_\_\_\_ INNOVATIVE LETTER: \_\_\_\_\_

INSTALLED BY: Alvin Todd INSTALLATION APPROVED BY: Eric L. Carter  
PROPRIETARY SYSTEM: \_\_\_\_\_ FILTER NO: \_\_\_\_\_

COMMENTS:

OPERATIONS PERMIT ISSUED? ☒ OP DATE: 3-10-03 BY: Eric L. Carter

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.

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IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: N gal. SQ FT: 1200 STONE DEPTH: 12 in. MAX DEPTH LINE: 20 in.  
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: II A PUMP: N P/M: N  
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: INDIVIDUAL

COMMENTS:

IP ISSUED? Y DATE: 10/04/2002 BY: (ELS)  PHONE#:   

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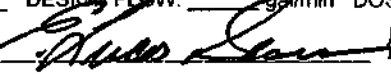
AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION

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. **OTHER CONDITIONS:**  
**INSTALL LINES ON CONTOUR NINE FEET ON CENTER. MAINTAIN ALL SETBACKS**

TANK SIZE: 1000 gal. PUMP TANK: N gal. SQ FT: 1200 STONE DEPTH: 12 in. MAX DEPTH LINE: 20 in.  
MAINT: N OPER: N L/O: Y TRENCH#: 4 LENGTH: 100 ft. WIDTH: 36 in. DESIGNER:   
# SUBFIELDS: DESIGN HEAD PRESSURE: DESIGN FLOW: gal/min DOSE VOLUME: gal.

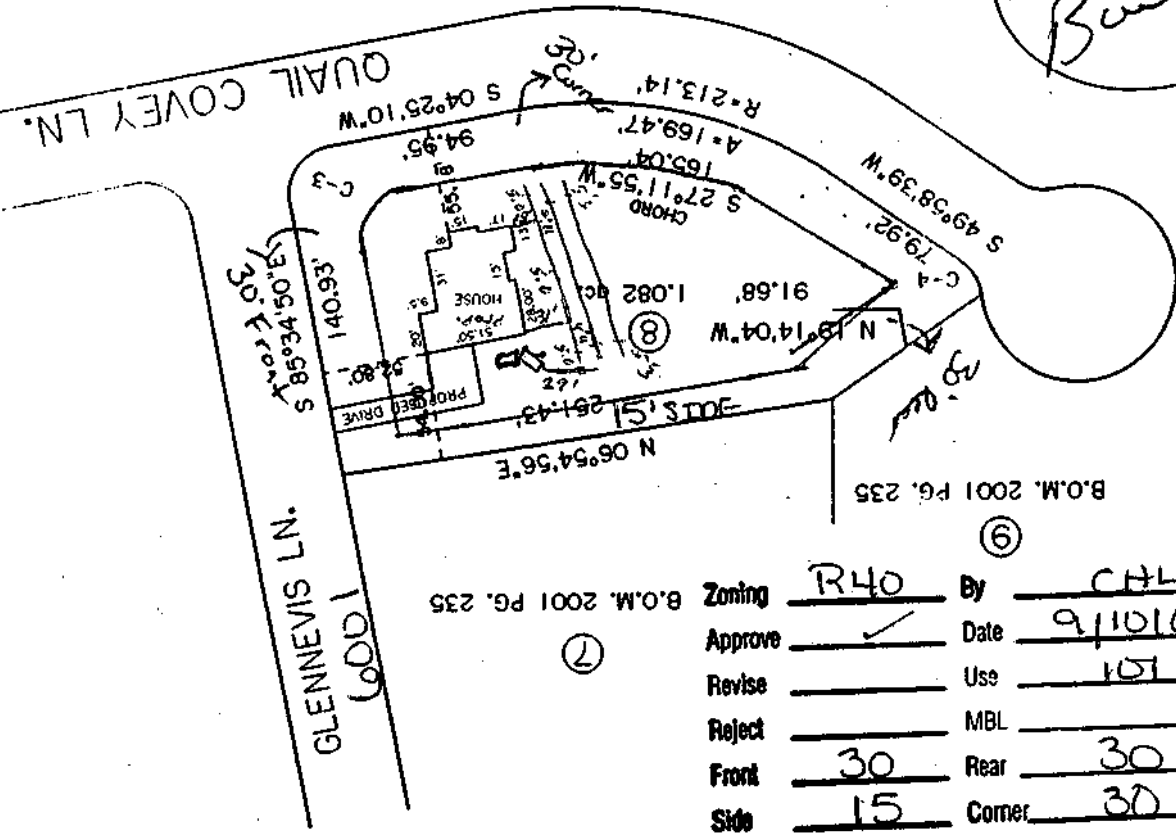
CA ISSUED? Y DATE: 10/04/2002 BY: (ELS)  PHONE#:   

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PRELIMINARY PLAT  
NOT FOR RECONSTRUCTION  
CONVEYANCES, OR SALES.

IMPERVIOUS SURFACE:  
HOUSE - 2471 SQ. FT.  
DRIVEWAY - 1352 SQ. FT.  
TOTAL IMP. - 3823 SQ. FT.  
TOTAL AREA - 47132 SQ. FT.  
8.1% TOTAL IMPERVIOUS

AS Built



⑦

B.O.M. 2001 PG. 235

Zoning R40 By CHL

Approve ✓ Date 9/10/02

Revise \_\_\_\_\_ Use LOT

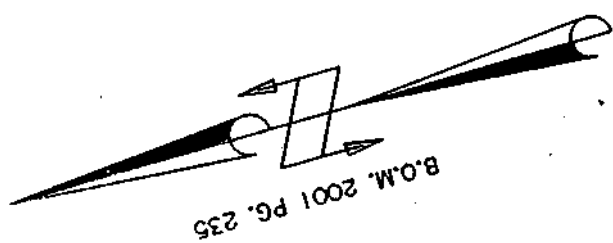
Reject \_\_\_\_\_ MBL \_\_\_\_\_

Front 30 Rear 30

Side 15 Corner 30

Comments:

0030436  
D25371



Pin# 1765 0259 9897

I certify that the location of planned or existing structure(s) are accurately shown. I understand failure to locate structures in accordance with this plat 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.

William R. Underhill  
Signature of Owner or Authorized Agent

# INARY PLAT