

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 5 1 6 0 6

PIN #: 1 7 7 5 8 4 5 2 0 2

OP DATE: 0 9 1 2 3 1 2 0 1 4

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

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|------------------|
| ☐ | ☐ | ☐ | 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
☒ EZ Flow
☐ Infiltrator
☐ Biodiffuser
☐ Cultec
☐ Drip
☐ Hancor
☐ Large Dia. Pipe
☐ Multi-Pipe
☐ Other

MAX DEPTH (IN.):

- ☐ 12 in. or less
☒ 18 in. or less (6"
☐ 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#: **D051606** STATUS: **A** APP. DATE: **08/04/2014** BLDG. PERMIT#: _____
 PIN: **1775 84 5202 000** TAX MAP: **0** RECORDED: **Y** ORIG. PERMIT#: _____
 TOWNSHIP: **10 MARKS CREEK** JURISDICTION: **WC** ZONING: **R40W** SW DEVICE: **N S#:** _____
 APPLICANT: **GUNTER, JEANNE** (919) 782 - 9769
4420 GATES ST RALEIGH, NC 27609
 USE: **HD USE: 433 ADD/ALT-HSEKEEPING MORE UNITS** EXIST USE: **101A CONVENTIONAL ONE-FAMILY HOUSE**
 LTAR: **0.30 0.30** BEDROOMS: **1** BASEMENT: **N** #EMPLOYEES: **0**
 SITE: ADDRESS: **1612 EDMONT RD**
 SUBDIVISION: **ALFORD** LOT: **1** ACRES: **0.94** EASEMENT: **N** LOC: **SYS:** _____
 DIRECTION: **US 64 BUS E, L TOWARD NC 97 E, R ONTO NC 97 E, L ON EDMONT, LOT ON R**

Well System: WATER: INDIVIDUAL - TYPE: EXISTING

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

COMMENTS: **EXISTING WELL**

Operation Permit

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ DOSE VOLUME: _____ gal. INNOVATIVE LETTER: _____
 INSTALLED BY: **BEAUTEYS** INSTALLATION APPROVED BY: *Christ H. Hays*
 PROPRIETARY SYSTEM: **R2FLOW** TYPE SYSTEM: **II A**

COMMENTS:

OPERATIONS PERMIT ISSUED? ☒ OP DATE: **9-23-14** BY: *Christ H. Hays*

Systems defined as either a Type IIIb, IIIg with a pump, IV, V or VI, in accordance with the North Carolina Administrative Code 15A NCAC 18A .1961, Table V as adopted by reference in the "Regulations Governing Wastewater Treatment and Dispersal Systems in Wake County", require Wake County Environmental Services to conduct periodic inspections on this type system, pursuant to 15A NCAC 18A .1961 (j). Fees for these inspections will be charged as per the approved Fee Schedule. In addition, all systems are to be operated and maintained as specified in 15A NCAC 18A .1961. 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: **9-16-14** Benchmark: _____ Rod reading: _____ Distance to Structure: _____
 ST: **DB1000** gals ID#: **STA 646** D.O.M.: **5-29-14** Elev.: **1' 11 3/4"** Distance to Well: _____
 PT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____ Distance to P/L: _____
 GT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____ Pretreatment: _____
 D-box/FD/PM elev.: **5' 3 1/4"** Supply Line: **90** ft. Pump/Ctrl Panel: **NA** Filter: **SIM TACH**
 Line 1: **7'** **7'** **7'** Date: **9-16-14** Line 6: _____ Date: _____
 Line 2: **7' 6 1/2"** **7' 6 1/2"** Date: **↓** Line 7: _____ Date: _____
 Line 3: **8' 3 1/2"** **8' 3 1/2"** Date: **↓** Line 8: _____ Date: _____
 Line 4: _____ Date: _____ Line 9: _____ Date: _____
 Line 5: _____ Date: _____ Line 10: _____ Date: _____
 ETM1: _____ CC1: _____ ETM2: _____ CC2: _____ OR: _____ AC: _____ WM: _____
 Notes: _____

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

PERMIT#: D051606 STATUS: A

APP. DATE: 08/04/2014

BLDG. PERMIT#:

PIN: 1775 84 5202 000

TAX MAP: 0

RECORDED: Y ORIG. PERMIT#:

TOWNSHIP: 10 MARKS CREEK

JURISDICTION: WC

ZONING: R40W SW DEVICE: N S#:

APPLICANT: GUNTER, JEANNE

(919) 782 - 9769

4420 GATES ST

RALEIGH, NC 27609

HD USE: 433 ADD/ALT-HSEKEEPING MORE UNITS EXIST USE: 101A CONVENTIONAL ONE-FAMILY HOUSE DESIGN FEE REQ?: PAID?:

LTAR: 0.30 0.30 BEDROOMS: 1 BASEMENT: N #EMPLOYEES: 0 FOUNDATION DRAIN: N

SITE: ADDRESS: 1612 EDMONT RD

SUBDIVISION: ALFORD LOT: 1 ACRES: 0.94 EASEMENT: N LOC: SYS:

DIRECTION: US 64 BUS E, L TOWARD NC 97 E, R ONTO NC 97 E, L ON EDMONT, LOT ON R

IMPROVEMENT PERMIT

As per GS 130A-335 (f), Improvement Permit is based on a Site Plan and is void Sixty (60) months from date of issuance: ☐

As per GS 130A-335 (f), Improvement Permit is based on a Plat and is valid without expiration: ☐

Permit is subject to revocation if the site plan or plat, whichever is applicable, or the intended use changes.

TANK SIZE: 1000 gal. PUMP Tank: _____ gal. GREASE TRAP: _____ gal. SQ FT: 900 ACCEPTED STATUS MAX DEPTH LINE: 16 in.

WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: II A PUMP: N P/M: N LP: TD:

DAILY FLOW: 360 gal/day WATER: INDIVIDUAL PRETREATMENT: NA FILL: DAF: DEEP: REDUCE35%:

COMMENTS:

IP ISSUED? DATE: BY: () NA PHONE#: (919)-

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.

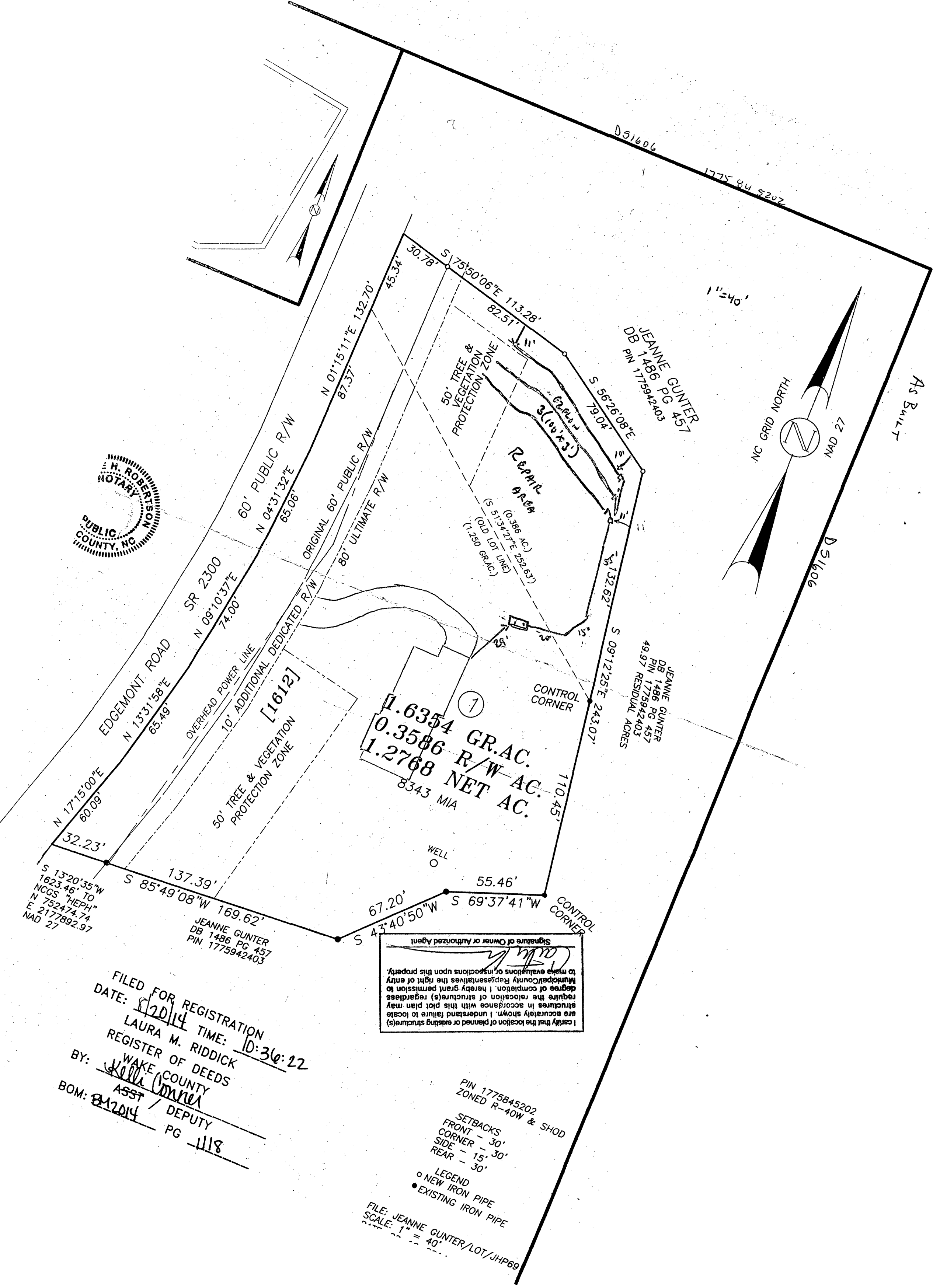
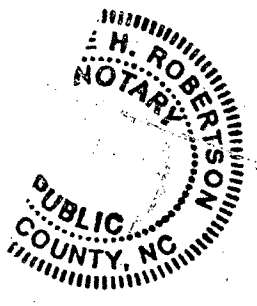
OTHER CONDITIONS: PROPERLY ABANDON EXISTING SEPTIC TANK. INSTALL NEW 1000 GAL SEPTIC TANK WITH RISERS AND FILTER. 3(100'X3') ACCEPTED STATUS. 16" TRENCH DEPTH. "AT GRADE SYSTEM" SEE INSTRUCTIONS. SOIL MUST BE APPROVED BEFORE INSTALLATION. WILL NEED TO FENCE OFF SEPTIC SYSTEM AREA AFTER INSTALLATION TO PROTECT SEPTIC SYSTEM FROM TRAFFIC. CALL WITH ANY QUESTIONS, CHANGES OR CONCERNS.

TANK SIZE: 1000 gal. PUMP TANK: _____ gal. GREASE TRAP: _____ gal. SQ FT: 900 ACCEPTED STATUS MAX DEPTH LINE: 16 in.

MAINT: N OPER: N L/O: P TRENCH#: 3 LENGTH: 100 ft. WIDTH: 36 in. DESIGNER: DAN BILEY.

SUBFIELDS: _____ DESIGN HEAD PRESSURE: _____ DESIGN FLOW: _____ gal/min DOSE VOLUME: _____ gal. PRETREATMENT: NA

CA ISSUED? Y DATE: 08/29/2014 BY: (CHH) Christine H. Hays RCHS PHONE#: (919)-868-2564



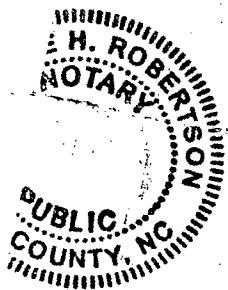
1.6354 GR.AC.
0.3586 R/W-AC.
1.2768 NET AC.
8343 MIA

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

Signature of Owner or Authorized Agent

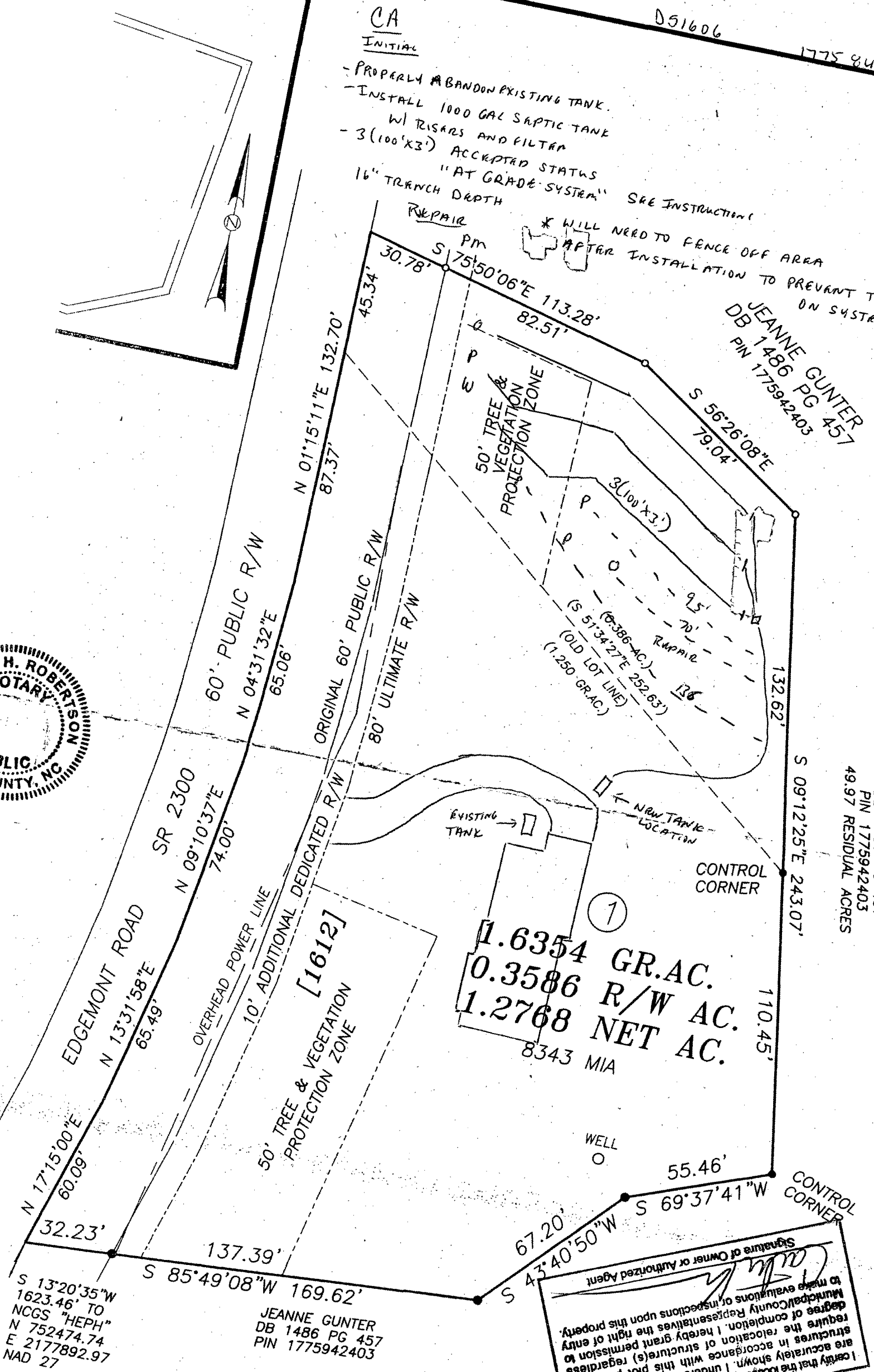
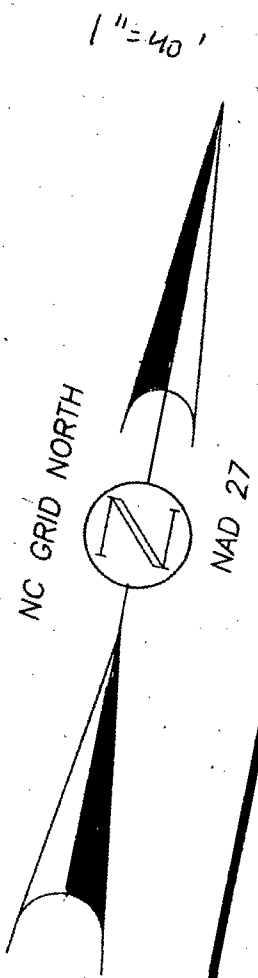
FILED FOR REGISTRATION
DATE: 8/20/14 TIME: 10:30:22
LAURA M. RIDDICK
REGISTER OF DEEDS
BY: Kelli Conner
WAKE COUNTY
ASST / DEPUTY
BOM: 8/20/14 PG 118

PIN 1775845202
ZONED R-40W & SHOD
SETBACKS
FRONT - 30'
CORNER - 30'
SIDE - 15', 30'
REAR - 30'
LEGEND
○ NEW IRON PIPE
● EXISTING IRON PIPE
FILE: JEANNE GUNTER/LOT/JHP69
SCALE: 1" = 40'



CA
INITIAL

- PROPERLY ABANDON EXISTING TANK.
- INSTALL 1000 GAL SEPTIC TANK W/ RISERS AND FILTER
- 3 (100'X3') ACCEPTED STATUS "AT GRADE SYSTEM" SEE INSTRUCTIONS
- 16" TRENCH DEPTH
- * WILL NEED TO FENCE OFF AREA AFTER INSTALLATION TO PREVENT TRAFFIC ON SYSTEM!



1.6354 GR.AC.
0.3586 R/W AC.
1.2768 NET AC.
8343 MIA

I certify that the location of planned or existing structures are accurately shown. I understand failure to locate structures in accordance with this plot plan may require the relocation of structure(s) regardless of 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

FILED FOR REGISTRATION
DATE: 8/20/14 TIME: 10:36:22
LAURA M. RIDDICK
REGISTER OF DEEDS
WAKE COUNTY
BY: Kelli Conner
ASST / DEPUTY
BOM: 8/20/14 PG 118

PIN 1775845202
ZONED R-40W & SHOD

SETBACKS
FRONT - 30'
CORNER - 30'
SIDE - 15'
REAR - 30'

LEGEND
○ NEW IRON PIPE
● EXISTING IRON PIPE

FILE: JEANNE GUNTER/LOT/JHP69
SCALE: 1" = 40'

REPAIR

D 51606

1612 ROBEY RD

1775 845202

Tap Chart

TAP CHART

Bench Mark is = 100.00 set at

Pump tank elev.			100.00	Pump elev.	95.00	Manifold elev.			101.00
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR
1	P		100.00	135	3/4in SCH 80	10.1	160.25	405	0.396
2	O		100.00	70	1/2in SCH 80	5.48	86.95	210	0.414
3	P		100.00	95	1/2in SCH 40	7.11	112.81	285	0.396

	total	feet =	300	gal/min =	22.69	<u>LTAR =</u>	0.30
% of Dose Vol.	70.00	<u>Des. Flow</u>	360			(ltar W/ INOV)	0.40
Dose Volume	136.50	Pump Run=	15.87			(ltar + 5%)	0.42
Dose Pump Time	6.02	Tank Gal/IN	20				
Drawdown in Inches	6.83	Elevation Head	6.00				

* INCLUDE w/ PERMIT

CONSTRUCTION SEQUENCE FOR AT-GRADE WASTEWATER SYSTEM:

1. Wake County Department of Environmental Services (WCDES) and the system designer must be contacted for a pre-construction conference prior to any construction work on the wastewater system. A representative sample of proposed capping material must be available for evaluation and approval by WCDES. The capping material is to be Soil Group II or III, with a clay content of less than 35% and a silt content of less than 50% (laboratory analysis in accordance with rule .1941 (F) may be required). The material is to have no more than 10% by volume of fibrous organics, building rubble, or other rubble / debris.
2. Vegetation on the disposal area (the area occupied by the disposal lines and at least 5 feet around the perimeter) is to be removed without significant soil disturbance and the area tilled to a depth of 2-4 inches. Drainage features, etc. required by the permit are to be constructed.
3. Each disposal line is to be staked on contour as indicated in the approved plans. Note that the stakes are to extend at least 2 feet above grade so that they can be utilized as grade stakes for placement of proper cap depth. The specified depth of fill cap is to be marked (permanent type marking) on each grade stake.
4. The approved capping material is to be installed as follows:
 - a. The capping material is to be applied in lifts of 3-4 inches, with the initial lift being disked or roto-tilled into the original soil surface.
 - b. The cap is to extend at least 5 feet beyond the perimeter of the disposal field and be of adequate thickness to provide a minimum of 6-8 inches of finished depth. This will normally require 10-12 inches of cap to allow for settling.
 - c. If WCDES deems necessary, the Department is to be contacted for an inspection of capping prior to proceeding with construction.
5. Disposal lines are to be installed such that the trench bottom extends 12 inches (or as otherwise specified in the permit) into the natural soil surface and be constructed as specified in the permit. WCDES is to be contacted for an inspection before covering any system components. Note that material excavated from the trench that does not meet the textural requirements set forth in item 1. above is to be removed from the disposal area and not utilized as capping. This will necessitate use of additional approved capping material as trench cover.
6. The final cover shall be shaped to shed rainfall, be seeded and mulched. An inspection of finished cover may be required.