Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 2 1 0 2 6 PIN #: 1 7 6 6 1 9 6 6 5 8

OP DATE: 0 2 / 1 1 / 3 1 / 2 0 0 2

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 1 2 0 0

DRAIN TYPE:
- [x] 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
- [x] Other (20")

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

AW

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#: **D021026** STATUS: **A** APP. DATE: **03/12/2001** BLDG. PERMIT#: **0012978**
PIN: **1766.01 19 6658 000** TAX MAP: **0387** RECORDED: **Y** ORIG. PERMIT#:
TOWNSHIP: **17 ST. MATTHEWS** JURISDICTION: **WC** ZONING: **R30**
APPLICANT: **HUDSON, JOHNNY LEE**
P O BOX 1009
ATLANTIC BEACH, NC 28512
(252) 247 - 0641
USE: HD USE: **101 ONE-FAMILY HOUSE**
EXIST USE:
DISPOSAL: **N** BEDROOMS: **3** BASEMENT: **N** #EMPLOYEES: **0**
SITE: ADDRESS: **2512 GREENBROOK DR**
SUBDIVISION: **PASTURE GATE** LOT: **3** ACRES: **3.51**
DIRECTION: **GO 64 EAST-LEFT OLD MILBURNIE RD--CROSS WATKINS RD-LEFT GREENBROOK DR--LOT #**

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

WELL LOG INFORMATION: DEPTH: 160 CASING DEPTH: 23 YIELD: 12 STATIC LEVEL: 20
WELLI CONTRACTOR: G. Poole REG.# 479 PUMP CONTRACTOR: _____ REG.# _____

Construction Compliance				
GROUT APPROVED	☑	DATE 6/28/01	EHS	
WELLHEAD APPROVED	☑	DATE 2/13/02	EHS	Charles H Humphrey
SYSTEM FINALIZED	☑	DATE 3-4-02	EHS	Luke Benz

COMMENTS:

Operation Permit

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER:
INSTALLED BY: Glen Carroll INSTALLATION APPROVED BY: _____
PROPRIETARY SYSTEM: FILTER NO: Polylok
COMMENTS:

OPERATIONS PERMIT ISSUED? Y OP DATE: 2-13-02 BY: Charles A Humphrey

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.

BTS 1000
STB 103
9/29/01
Tank & Lines OK (DB)

WAKE COUNTY DEPARTMENT OF ENVIRONMENTAL SERVICES WELL AND SEWAGE SITE LOCATION PERMIT
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ATLANTIC BEACH, NC 28512
(252) 247 - 0641
USE: HD USE: **101 ONE-FAMILY HOUSE**
EXIST USE:
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SUBDIVISION: **PASTURE GATE** LOT: **3** ACRES: **3.51**
DIRECTION: **GO 64 EAST-LEFT OLD MILBURNIE RD--CROSS WATKINS RD-LEFT GREENBROOK DR--LOT #**

IMPROVEMENT PERMIT

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

COMMENTS:

IP ISSUED? **Y** DATE: **04/27/2001** BY: **(DRB)** PHONE#: **856-6231**

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. IF SITE IS ALTERED PERMIT IS VOID. MAINTAIN ALL BACKS. INSTALL CLEANOUTS IN SUPPLY LINE EVERY 50FT. IF SYSTEM CANNOT BE INSTALLED AS SHOWN, CALL ENVIRONMENTAL SERVICES. INSTALL SWALE ABOVE LINES TO DIVERT RUNOFF WATER. WITH SOCK.

TANK SIZE: **1000** gal. PUMP TANK: ~~1000~~ gal. SQ FT: **1200** STONE DEPTH: 12 **in.** MAX DEPTH LINE: **20** in.
MAINT: **N** OPER: **N** L/O: **Y** TRENCH#: **3** LENGTH: **133** ft. WIDTH: **36** in. DESIGNER: ___
SUBFIELDS: __ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? **Y** DATE: **11/21/2001** BY: **(DRB)** PHONE#: **856-6231**

in the
d that I (we)

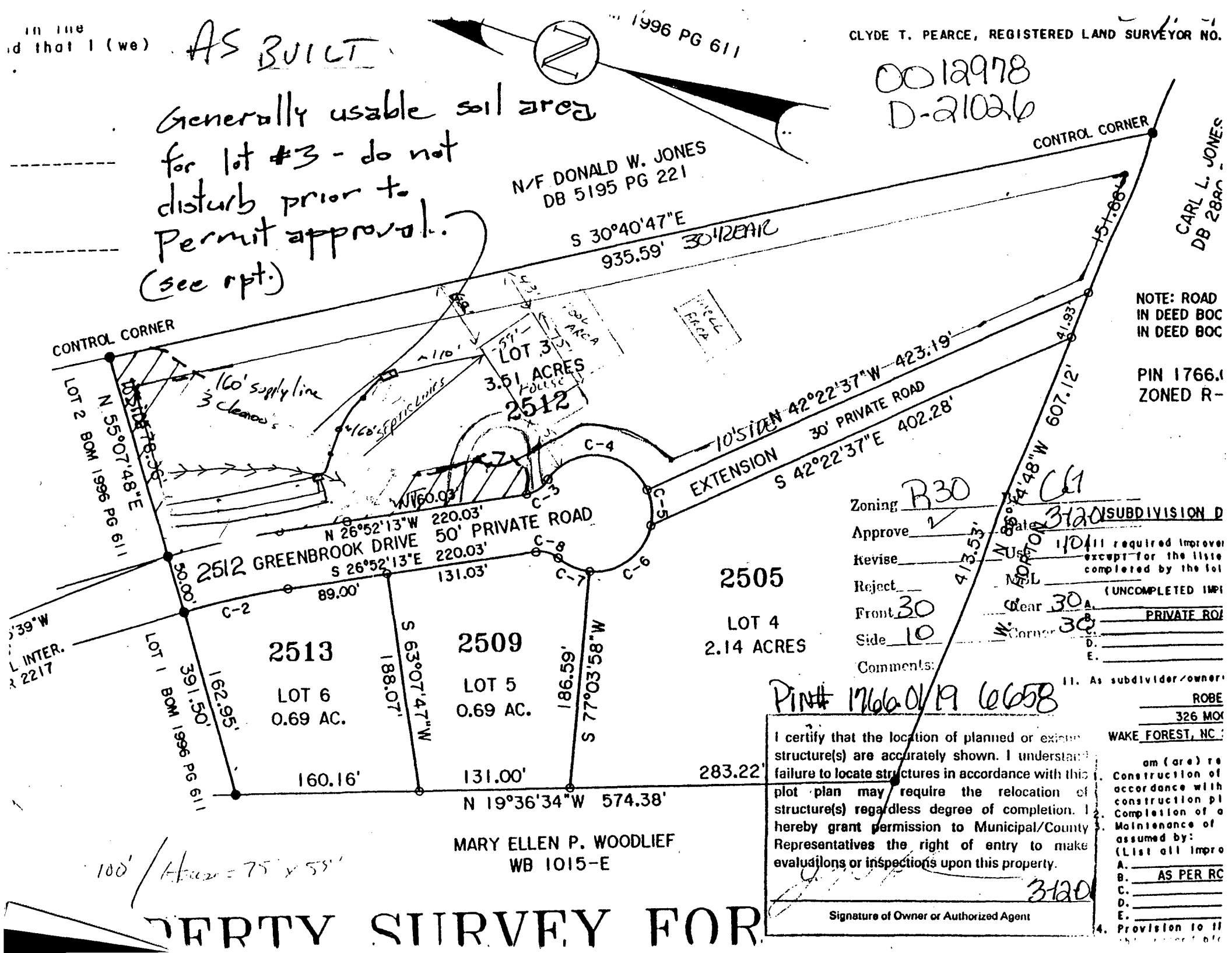
AS BUILT

Generally usable soil area for lot #3 - do not disturb prior to Permit approval. (see rpt.)

1996 PG 611

CLYDE T. PEARCE, REGISTERED LAND SURVEYOR NO.

00 12978
D-21026



Zoning R30 C1
Approve ✓ Date 3/20 SUBDIVISION D
Revise ___ Use 1/0 All required improve
Reject ___ MHL ___ except for the liste
Front 30 Rear 30 A. (UNCOMPLETED IMP
Side 10 Corner 30 B. PRIVATE RO
Comments: C. ___
D. ___
E. ___

PIN# 1766.01 19 66 58

I 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.

3/20

Signature of Owner or Authorized Agent

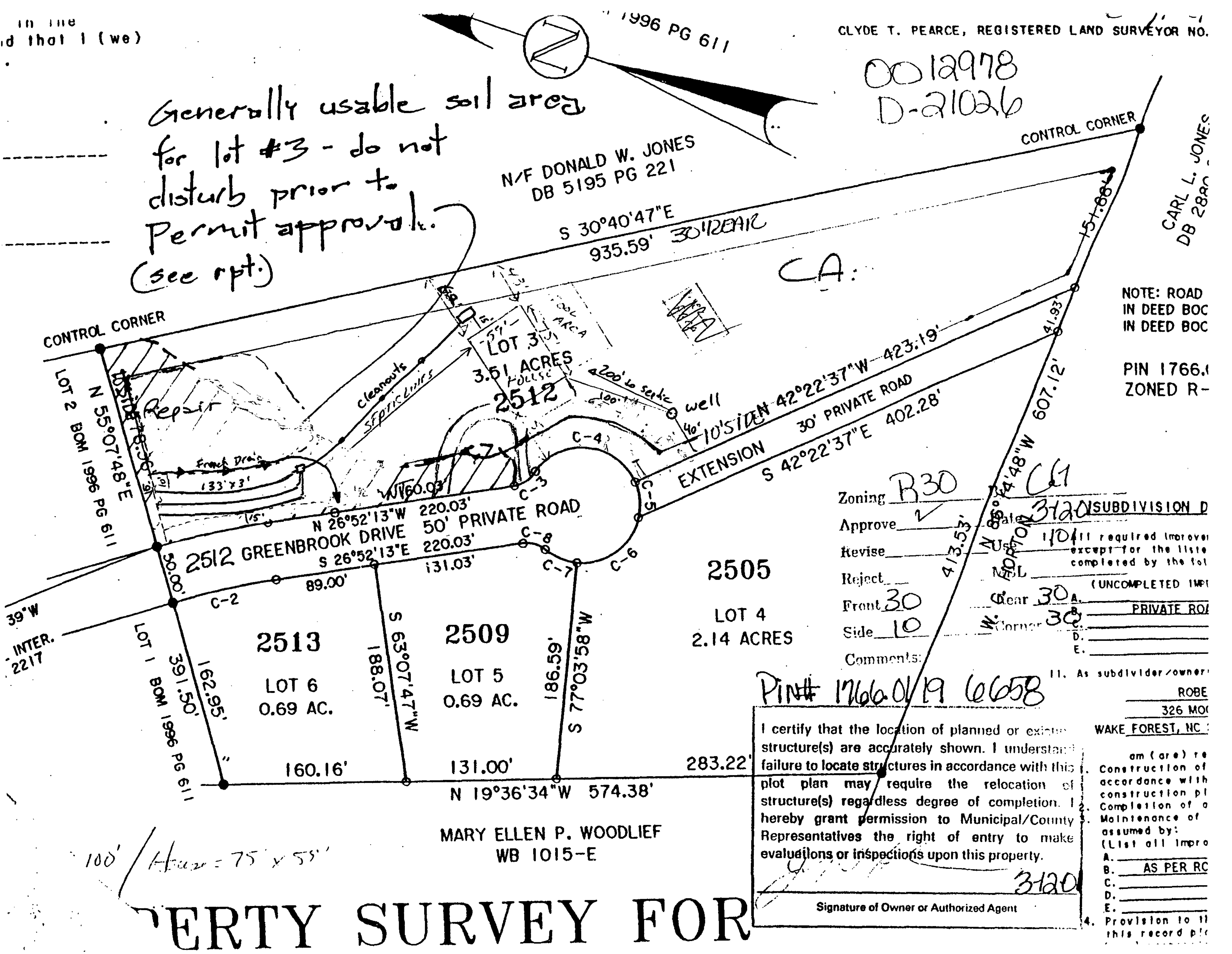
11. As subdivider/owner

ROBE
326 MO
WAKE FOREST, NC

am (are) re
1. Construction of
accordance with
construction pl
2. Completion of a
3. Maintenance of
assumed by:
(List all impro
A. ___
B. AS PER RC
C. ___
D. ___
E. ___
4. Provision to fi

100' / House = 75' x 55'

ERTY SURVEY FOR



in the
d that I (we)
1996 PG 611
CLYDE T. PEARCE, REGISTERED LAND SURVEYOR NO.
0012978
D-21026
Generally usable soil area for lot #3 - do not disturb prior to Permit approval. (see rpt.)
CONTROL CORNER
N/F DONALD W. JONES
DB 5195 PG 221
S 30°40'47"E
935.59' 30' REAR
CA:
CARL L. JONES
DB 288
NOTE: ROAD
IN DEED BOC
IN DEED BOC
PIN 1766.
ZONED R-
CONTROL CORNER
LOT 2 BOM 1996 PG 611
N 55°07'48"E
Repair
French Drain
133' x 3'
cleanouts
septic lines
LOT 3
3.51 ACRES
House
2512
well
200' to septic
10' SIDE
N 42°22'37"W 423.19'
30' PRIVATE ROAD
S 42°22'37"E 402.28'
EXTENSION
C-4
C-3
C-5
N 26°52'13"W 220.03'
2512 GREENBROOK DRIVE 50' PRIVATE ROAD
S 26°52'13"E 220.03'
C-8
C-7
C-6
C-2
131.03'
89.00'
50.00'
151.68'
41.93'
607.12'
413.53'
N 85°54'48"W
W. G. HORTON
Zoning R30
Approve ✓
Revise
Reject
Front 30
Side 10
Comments:
Date 3/20
Use 1101
MBL
Rear 30
Corner 30
CA
SUBDIVISION D
All required improvements except for the listed completed by the fol
(UNCOMPLETED IMP
A. PRIVATE ROA
B.
C.
D.
E.
II. As subdivider/owner
ROBE
326 MOO
WAKE FOREST, NC
am (are) re
1. Construction of accordance with construction pl
2. Completion of a
3. Maintenance of assumed by:
(List all impro
A.
B. AS PER RO
C.
D.
E.
4. Provision to th this record pl
39"W
INTER.
2217
LOT 1 BOM 1996 PG 611
391.50'
162.95'
2513
LOT 6
0.69 AC.
188.07'
S 63°07'47"W
2509
LOT 5
0.69 AC.
186.59'
S 77°03'58"W
2505
LOT 4
2.14 ACRES
PIN# 1766.01 19 6658
160.16'
131.00'
283.22'
N 19°36'34"W 574.38'
MARY ELLEN P. WOODLIEF
WB 1015-E
100' / House = 75' x 55'
I 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.
3120
Signature of Owner or Authorized Agent
ERTY SURVEY FOR

Attn: Gregg Bright 6/28/01

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section
1636 Mail Service Center - Raleigh, N.C. 27699-1636-Phone (919) 733-3221

WELL CONSTRUCTION RECORD

WELL CONTRACTOR: Grady Poole Well Co.
WELL CONTRACTOR CERTIFICATION #: 2265
STATE WELL CONSTRUCTION PERMIT#: D 21026

1. **WELL USE** (Check Applicable Box): Residential ☑ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☐ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use:

2. WELL LOCATION: (Show sketch of the location below)
Nearest Town: Knightdale County: Wake
Lot #3, Pastime Gate, 2512 Greenbrook Drive
(Road Name and Numbers, Community, or Subdivision and Lot No.)

3. OWNER Johnny Hudson
Address PO Box 1009
(Street or Route No.)
Atlantic Beach NC 28512
City or Town State Zip Code

4. DATE DRILLED 6-28-01
5. TOTAL DEPTH 160
6. CUTTINGS COLLECTED YES ☐ NO ☑
7. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☑
8. STATIC WATER LEVEL Below Top of Casing: 20 FT.
(Use "+" if Above Top of Casing)
9. TOP OF CASING IS 1½ FT. Above Land Surface*
*Top of casing terminated at/or below land surface requires a variance in accordance with 15A NCAC 2C .0118
10. YIELD (gpm): 12 METHOD OF TEST Blow
11. WATER ZONES (depth): 80 - 140
12. CHLORINATION: Type HTH Amount 2lb
13. CASING:

	Depth		Diameter	Wall Thickness or Weight/Ft.	Material
From 0	To 25	Ft.	6¼	188	Galv
From	To	Ft.			
From	To	Ft.			

14. GROUT:

	Depth		Material	Method
From 0	To 20	Ft.	Portland Sand	Gravity
From	To	Ft.		

15. SCREEN:

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

16. SAND/GRAVEL PACK:

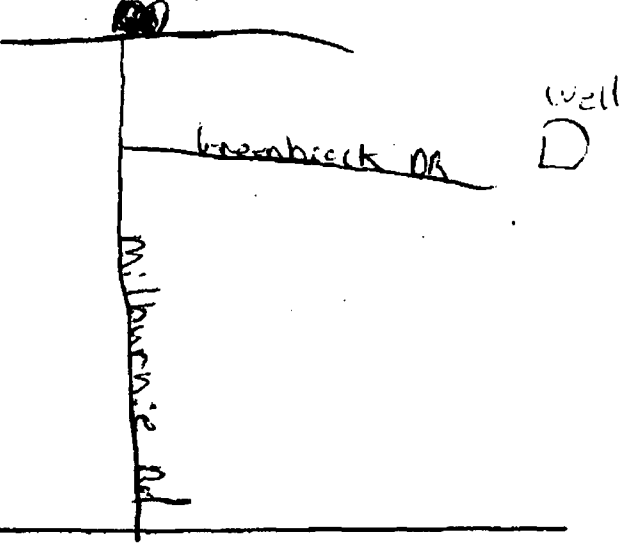
	Depth		Size	Material
From	To	Ft.		
From	To	Ft.		

17. REMARKS:

DRILLING LOG From	To	DEPTH Formation Description
0	3	Topsoil
3	160	Granite Rock

If additional space is needed use back of form

LOCATION SKETCH
(Show direction and distance from at least two State Roads, or other map reference points)



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.

Felton Jacobs 6-28-01
SIGNATURE OF PERSON CONSTRUCTING THE WELL DATE

Submit original to Division of Water Quality, Groundwater Section within 30 days

FOR OFFICE USE ONLY
Quad No:
Serial No.

GW-1 REV. 12/99