

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: **D 0 1 2 0 6 0**

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

OP DATE: **0 8 / 1 9 / 1 9 9 9**

WELL ONLY PERMIT

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 N/A |
| ☒ | | ☒ | None/NA GT or PT |

DRAINFIELD SIZE(SQ. FT.)

0 0 0 0 0

WELL ONLY PERMIT

Septic information Not Applicable

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 N/A

STONE DEPTH (IN.):

- ☐ 8 in. or less
☐ 12 in. or less
☐ 18 in. or less
☐ 24 in. or less
☒ Other N/A

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 N/A

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#: D012060 STATUS: A APP DATE: 09/30/1998 BLDG PERMIT#:0992747

APPLICANT: KLOSE, STEVEN F & THERESA S DAY PHONE: (919) 319 - 1645

ADDRESS: 619 APPLECROSS DRIVE FAX#: (000) 000 - 0000

CITY: CARY, STATE: NC ZIP: 27511

OWNER: KLOSE, STEVEN F & THERESA DAY PHONE: (919) 319 - 1645

ADDRESS: SAME FAX#: (000) 000 - 0000

CITY: SAME STATE: NC ZIP: 27511

HD USE CD: 0006 NEW WELL ORIG PERMIT#: REC?: Y

EXIST USE: 0006 NEW WELL TAX MAP#: 0667 0000

BEDROOMS: 3 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOS: N

TOWNSHIP: 03 BUCKHORN JURIS: WC ZON: PIN: 0711.03 41 5078 000

SUBD#: S 000 000 00 SUBD NAME: WEAVER CROSSING LOT-SEC: 11A ACRE: 6.19

IMPRV PRMT: ISSUED?: DATE: BY: TYPE SYSTEM: PUMP:

CNSTR AUTH: ISSUED?: Y DATE: 11/04/1998 BY: HJC M/O: N N

RECEIPT#: FEE: 145.00 OP DATE: BY:

WATR SAMPL: REQ?: Y APPROVED?: DATE: PROPRIETARY SYS:

ST#: 2713 MI: DIR: NAME: WEAVER HILL DIR: TYP: DR

DIRECTIONS: US1S TOWARD CARY,64W CROSS OVER 751-NEW HILL

OLIVE CHAPEL RD.2-3MI RT INTO WEAVER CROSS.100

YARDS ON LT,SIGN WITH NAME IN FRONT OF PROPERTY

IMPROVEMENT PERMIT

SIZE OF TANK ST PT GALS. TOTAL SQ. FT. _____ DEPTH OF STONE _____ IN. MAX. DEPTH LINE _____ IN.

WASTEWATER: DOMESTIC ☐ INDUSTRIAL ☐

I.P. ISSUED BY _____

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

AUTHORIZATION CONDITIONS

Contractor To Follow Contours, See Attached Site Plan For Wastewater System Design And Well Location. 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:

SIZE OF TANK ST PT GALS. TOTAL SQ. FT. _____ DEPTH OF STONE _____ IN. MAX. DEPTH LINE _____ IN.

ST FILTER REQUIRED ☐ NUMBER OF TRENCHES _____ LENGTH OF TRENCHES _____ FT. WIDTH OF TRENCHES _____

C.A. ISSUED BY William Casareto INSTALLED BY _____ CTR. I.D. # _____

SEPTIC TANK FILTER USED _____

INNOV. APPRL. #: IWWS-_____ DATE _____ INSTALLATION APPROVED BY _____

WELL SYSTEM = PRIVATE ☒ SEMI-PUBLIC ☐ NEW ☒ REPLACEMENT ☐ EXISTING ☐

WELL LOG INFORMATION = DEPTH 25' CASING DEPTH 48' YIELD 15 STATIC LEVEL 46'

WELL CONTRACTOR Pat Chiles REG.# _____ PUMP CONTRACTOR William Casareto REG.# _____

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☒

DATE 12/2/98 EHS William Casareto

WCHD ID # 9038 WELLHEAD APPROVED ☒

DATE 8/19/99 EHS William Casareto

NEGATIVE BACTERIOLOGICAL RESULTS ☒

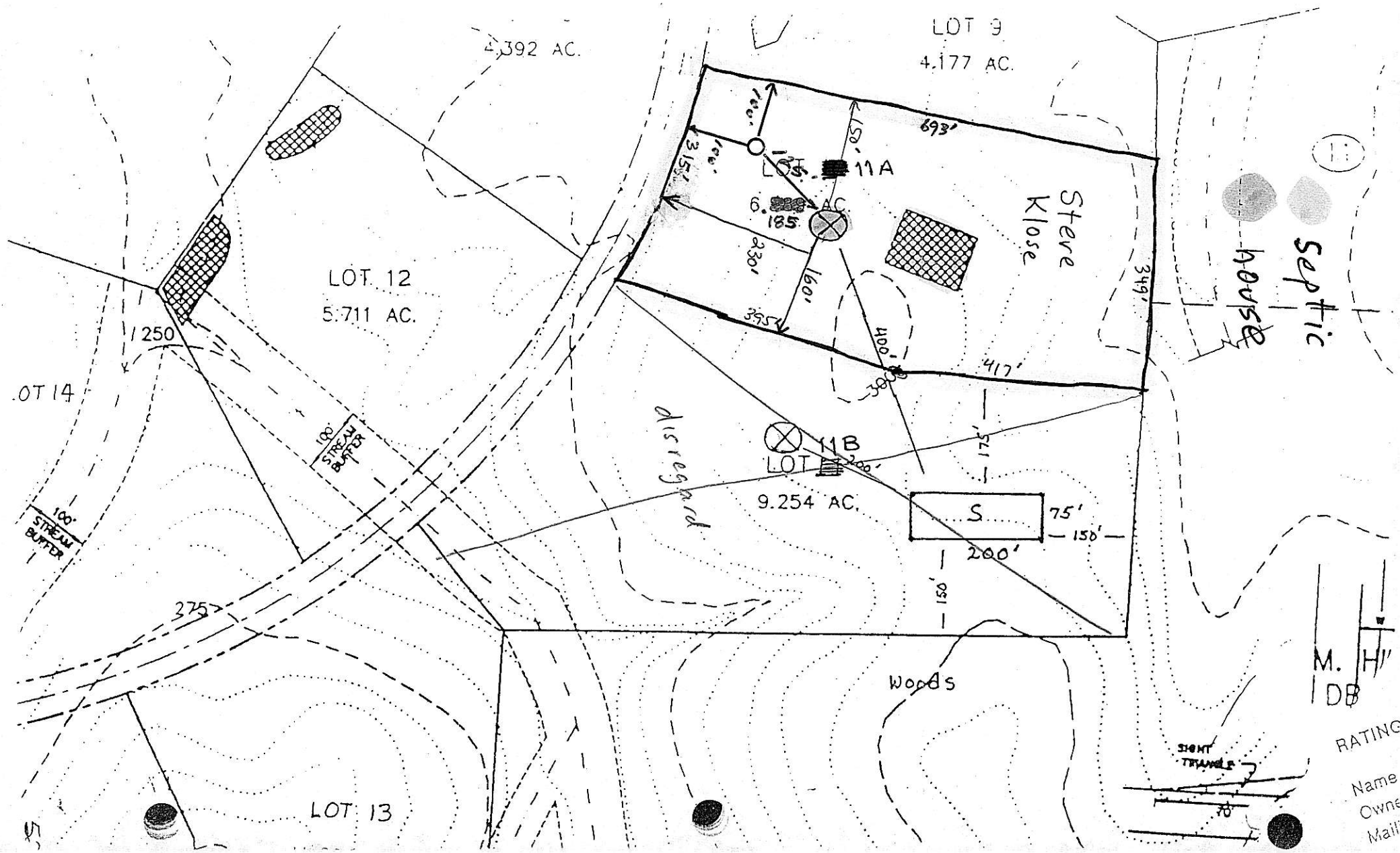
DATE 8/19/99 EHS William Casareto

SYSTEM FINALIZED ☒

DATE 8/19/99 EHS William Casareto

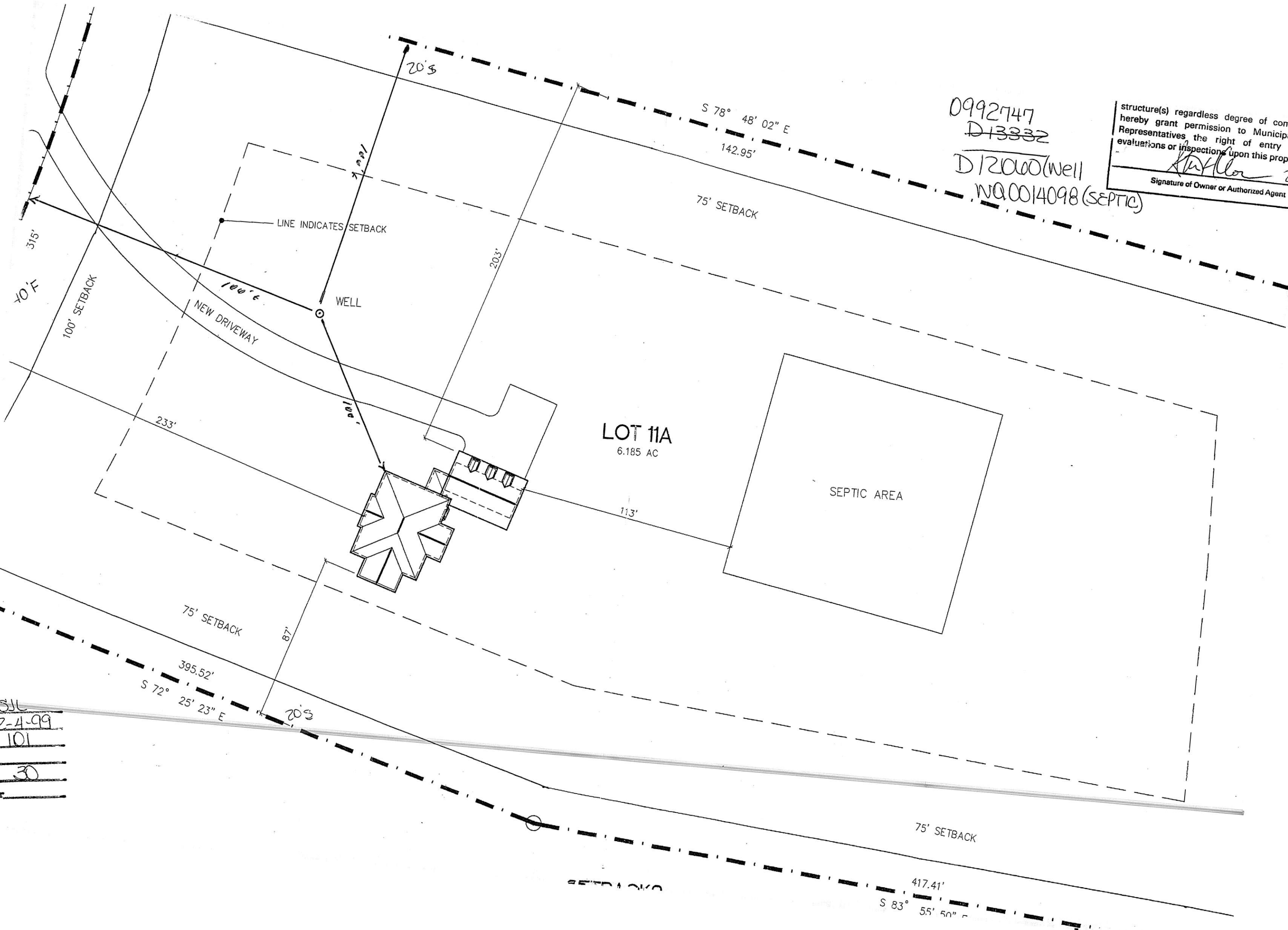
COMMENTS: _____

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.



Signature of Owner or Authorized Agent

WQ00/4098 (SEPTIC)



Site 35L
2-4-99
 se 101
 MBL
 Bear- 30
 Corner