

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0042887

PIN #: 0647338238

OP DATE: 0410712009

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.)

01104

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 PERMITNO 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#: D042887 STATUS: A

APP. DATE: 08/08/2008

BLDG. PERMIT#: 0090374

PIN: 0647.03 33 8238 000

TAX MAP: 0

RECORDED: Y ORIG. PERMIT#:

TOWNSHIP: 06 HOLLY SPRINGS

JURISDICTION: WC

ZONING: R30 SW DEVICE: N S#:

APPLICANT: KEVIN REINERT HOMES INC

207 NEW EDITION COURT

CARY, NC 27511

(919) 868 - 3610

USE: HD USE: 101 ONE-FAMILY HOUSE

EXIST USE:

LTAR: 0.25 0.30 BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0

SITE: ADDRESS: 6716 STEPHYERLY WAY

SUBDIVISION: WHITETAIL FARM

LOT: 10

ACRES: 0.89 EASEMENT: N LOC: SYS:

DIRECTION: US1 TOWARDS HOLLY SPRINGS ESIT HWY 55 TL TR ADV

ENT FERRY TL PINEY GROVE WILBON RD TR ADCOCK RD

TR STEPHYERLY WAY

Well System: WATER: COMMUNITY TYPE:

WELL LOG INFORMATION: DEPTH: CASING DEPTH: YIELD: STATIC LEVEL:

WELL CONTRACTOR: REG.# PUMP CONTRACTOR: REG.#

Construction Compliance GROUT APPROVED ☐ DATE EHSWELLHEAD APPROVED ☐ DATE EHSSYSTEM FINALIZED ☐ DATE EHS

COMMENTS: COMMUNITY WELL.

DESIGN FLOW: gal./min. ACTUAL FLOW: Operation Permit
INNOVATIVE LETTER:INSTALLED BY: Quality Landscape INSTALLATION APPROVED BY: Travis D. HowardPROPRIETARY SYSTEM: Yellow Gate FILTER NO: GateCOMMENTS: YOPERATIONS PERMIT ISSUED? Y OP DATE: 4-7-09 BY: Travis D. Howard

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: 4-7-09 Benchmark: _____ Rod reading: _____ Distance to Structure: 15'ST: 1000 gals ID#: M-15 D.O.M.: 11-12-08 Elev.: _____ Distance to Well: _____

PT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____

D-box/FD/PM elev.: _____ Supply Line: ~75 ft. Pump/Control Panel: _____Line 1: 6'3 3/4" Date: _____ Line 6: _____ Date: _____Line 2: 7'2 1/2" Date: _____ Line 7: _____ Date: _____Line 3: 8'0 3/4" Date: _____ Line 8: _____ Date: _____Line 4: 8'7 1/4" Date: _____ Line 9: _____ Date: _____

Line 5: _____ Date: _____ Line 10: _____ Date: _____

Distance to P/L: _____ Notes: _____

4-9 1/2' x 3' Quiet 4 Chamber

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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#: D042887 STATUS: A APP. DATE: 08/08/2008 BLDG. PERMIT#: 0090374
PIN: 0647.03 33 8238 000 TAX MAP: 0 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 06 HOLLY SPRINGS JURISDICTION: WC ZONING: R30 SW DEVICE: N S#:
APPLICANT: KEVIN REINERT HOMES INC
207 NEW EDITION COURT
CARY, NC 27511
(919) 868 - 3610
USE: HD USE: 101 ONE-FAMILY HOUSE
EXIST USE:
LTAR: 0.25 0.30 BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0 FOUNDATION DRAIN: Y
SITE: ADDRESS: 6716 STEPHERLY WAY
SUBDIVISION: WHITETAIL FARM LOT: 10 ACRES: 0.89 EASEMENT: N LOC: SYS:
DIRECTION: US1 TOWARDS HOLLY SPRINGS ESIT HWY 55 TL TR ADV
ENT FERRY TL PINEY GROVE WILBON RD TR ADCOCK RD
TR STEPHERLY WAY

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: ____ gal. SQ FT: 1080 INNOVATIVE MAX DEPTH LINE: 18 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: III G PUMP: N P/M: N
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: COMMUNITY

COMMENTS:

IP ISSUED? Y DATE: 01/12/2009 BY: (CPS)  PHONE#: 796-9637

AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

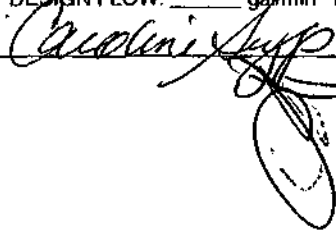
AUTHORIZATION CONDITIONS:

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:

INSTALL LINES ON CONTOUR. MAINTAIN ALL SETBACKS. IF SITE OR SITE PLAN CHANGES, PERMIT IS VOID. DO NOT GRADE OR REMOVE ANY SOIL FROM SEPTIC SYSTEM OR REPAIR AREA. TAKE CARE NOT TO INSTALL UTILITIES OR IRRIGATION SYSTEM OVER SEPTIC SYSTEM OR REPAIR AREA. PLEASE CALL 796-9637 PRIOR TO INSTALLATION WITH ANY QUESTIONS, CONCERNS, OR COMMENTS.

TANK SIZE: 1000 gal. PUMP TANK: ____ gal. SQ FT: 1080 INNOVATIVE MAX DEPTH LINE: 18 in.
MAINT: N OPER: N L/O: Y TRENCH#: 4 LENGTH: 90 ft. WIDTH: 36 in. DESIGNER: ____
SUBFIELDS: ____ DESIGN HEAD PRESSURE: ____ DESIGN FLOW: ____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? Y DATE: 02/02/2009 BY: (CPS)  PHONE#: 796-9637

AS BUILT

Revised
Attn: Jill Woodard

