

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 2 4 4 2 2

PIN #: 0 6 6 5 8 2 6 5 3 2

OP DATE: 0 6 1 2 1 1 2 0 0 2

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 1 0 2 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
☒ 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#: D024422	STATUS: A	APP. DATE: 05/09/2002	BLDG. PERMIT#: 0023301
PIN: 0665.04 82 6532 000		TAX MAP: 0885 0000	RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 12 MIDDLE CREEK		JURISDICTION: WC	ZONING: R30
APPLICANT: FLEETWOOD HOMES			
3813 S WILMINGTON ST			
RALEIGH, NC 27603			
(919) 773 - 4141			
USE:	HD USE: 112 MOBILE HOME		
	EXIST USE:		
	DISPOSAL: N BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0		
SITE:	ADDRESS: 8204 FIELDCREST LA		
	SUBDIVISION: FAIRVIEW	LOT: 59	ACRES: 0.50
DIRECTION:	401S L 1301 L 2770 L INTO SUB		

Well System: WATER: COMMUNITY - TYPE: EXISTING

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

COMMENTS:

Operation Permit

DESIGN FLOW: ____ gal./min. ACTUAL FLOW: ____ INNOVATIVE LETTER: N

INSTALLED BY: <u>Chris Milko</u>	INSTALLATION APPROVED BY: _____
PROPRIETARY SYSTEM: _____	FILTER NO: _____
COMMENTS:	

OPERATIONS PERMIT ISSUED? X OP DATE: 6/21/02 BY: Clement J. Maurizi

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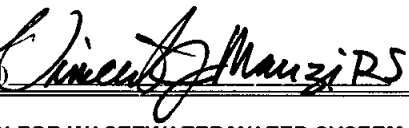
PERMIT VOID IF NOT IN COMPLIANCE WITH ZONING REGULATIONS AND/ OR IF SITE IS ALTERED OR INTENDED USE CHANGED

PERMIT#: D024422 STATUS: A APP. DATE: 05/09/2002 BLDG. PERMIT#: 0023301
PIN: 0665.04 82 6532 000 TAX MAP: 0885 0000 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 12 MIDDLE CREEK JURISDICTION: WC ZONING: R30
APPLICANT: FLEETWOOD HOMES
3813 S WILMINGTON ST
RALEIGH, NC 27603
(919) 773 - 4141
USE: HD USE: 112 MOBILE HOME
EXIST USE:
DISPOSAL: N BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0 FOUND DRAIN:
SITE: ADDRESS: 8204 FIELDCREST LA
SUBDIVISION: FAIRVIEW LOT: 59 ACRES: 0.50
DIRECTION: 401S L 1301 L 2770 L INTO SUB

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: ____ gal. SQ FT: 1020 STONE DEPTH: 12 in. MAX DEPTH LINE: 24 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: II A PUMP: N P/M: N
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: COMMUNITY

COMMENTS:

IP ISSUED? Y DATE: 05/28/2002 BY: (VJM)  PHONE#: 856-7438

AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

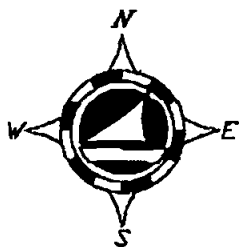
AUTHORIZATION CONDITIONS:

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 DRAINLINES ON CONTOUR ACCORDING TO LAYOUT. SET SEPTIC TANK 5 FEET FROM FOUNDATION; IF NO FOOTING DRAIN IS INSTALLED.

TANK SIZE: 1000 gal. PUMP TANK: ____ gal. SQ FT: 1020 STONE DEPTH: 12 in. MAX DEPTH LINE: 24 in.
MAINT: N OPER: N L/O: Y TRENCH#: 4 LENGTH: 85 ft. WIDTH: 36 in. DESIGNER: ____
SUBFIELDS: ____ DESIGN HEAD PRESSURE: ____ DESIGN FLOW: ____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? Y DATE: 05/28/2002 BY: (VJM)  PHONE#: 856-7438

PLAT NORTH
BOM 1999, PG. 2296



CURVE TABLE				
CURVE #	RADIUS	LENGTH	CHORD BEARING	CHORD
C1	769.81	93.97	S07°53'25"E	93.91

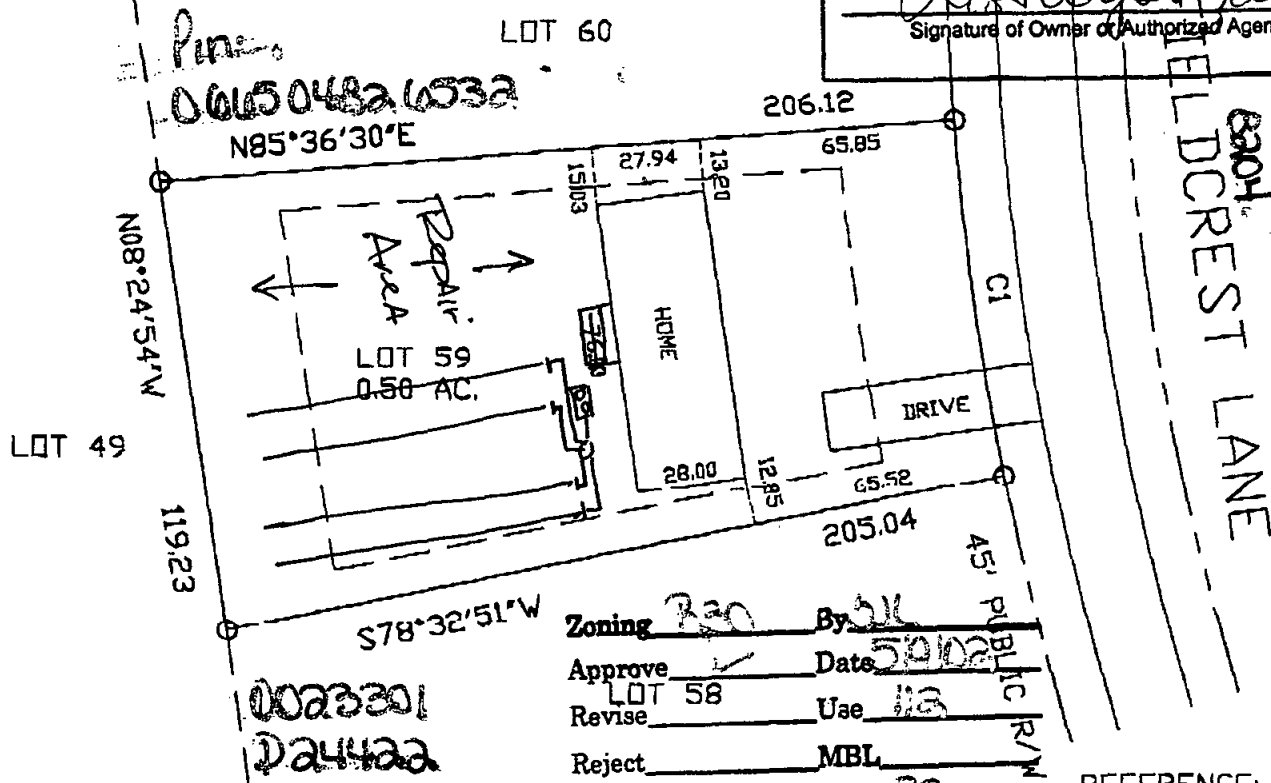
ASBUILT copy

TOTAL IMPERVIOUS AREA =
21,780SF X 30% = 6,534.0SF

TOTAL DISTURBED AREA = 2,762.50SF
HOUSE = 2,128.0
DRIVE = 634.5

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.

Lisa Wyszewalsky
Signature of Owner or Authorized Agent



NOTES:
THIS PLAT IS NOT FOR
RECORDATION

LOT SERVED BY PUBLIC
WATER AND SEPTIC SYSTEMS

Zoning R30 By 311
Approve ✓ Date 5/21/02
Revise LOT 58 Use 113
Reject MBL
Front 30 Rear 30
Side 10 Corner

Comments:

REFERENCE:
FAIRVIEW S/D
PHASE 8
BOM 1999, PG. 2296
LOT 59



NOTE: PRELIMINARY NOT FOR SALES OR CONVEYANCES
BUILDER TO VERIFY DIMENSIONS



PRELIMINARY SITE PLAN FOR:

FLEETWOOD HOMES

OWNER A020360 1"=50'
DATE 5/8/02 PROJ. No. STATE NC CO. WAKE

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PERMIT#: D022256 STATUS: A APP. DATE: 07/13/2001 BLDG. PERMIT#: 0020135
PIN: 0665.04 82 6622 000 TAX MAP: 0885 0000 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 12 MIDDLE CREEK JURISDICTION: WC ZONING: R30
APPLICANT: FLEETWOOD HOMES CENTER
3813 SOUTH WILMINGTON ST
RALEIGH,, NC 27603
(919) 773 - 4141
USE: HD USE: 112 MOBILE HOME
EXIST USE:
DISPOSAL: N BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0
SITE: ADDRESS: 8200 FIELDCREST LA
SUBDIVISION: FAIRVIEW LOT: 60 ACRES: 0.51
DIRECTION: 401S TO PURFORY RD TL ON PURFORY 3 ML TL ON ANG
IER 1/4 ML TL IN SUBDIVISION

Well System: WATER: COMMUNITY - TYPE: EXISTING

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

COMMENTS:

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER: _____

INSTALLED BY: Chris Newcombe INSTALLATION APPROVED BY: [Signature]
PROPRIETARY SYSTEM: _____ FILTER NO: _____
COMMENTS:

OPERATIONS PERMIT ISSUED? ☒ OP DATE: 9/13/01 BY: [Signature]

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