

Environmental Services - Water Quality  
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 3 5 4 8 7

PIN #: 1 6 0 8 5 4 6 6 8 2

OP DATE: 0 8 1 2 5 1 2 0 0 6

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

- |                                     |                                     |                                     |
|-------------------------------------|-------------------------------------|-------------------------------------|
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| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |

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 7 6 5

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#: D035487 STATUS: A APP. DATE: 11/15/2005 BLDG. PERMIT#: 0061599  
 PIN: 1608.04 54-466-000 66 82 TAX MAP: 0807 0005 RECORDED: Y ORIG. PERMIT#:   
 TOWNSHIP: 15 PANTHER BRANCH JURISDICTION: WC ZONING: R30  
 APPLICANT: STANCIL BUILDERS, INC  
 466 STANCIL ROAD  
 ANGIER, NC 27501  
 (919) 639 - 2073  
 USE: HD USE: 101 ONE-FAMILY HOUSE  
 EXIST USE:   
 DISPOSAL: BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0  
 SITE: ADDRESS: 1104 TAVERNIER KNOLL LN  
 SUBDIVISION: TAVERNIER LOT: 21 ACRES: 0.83  
 DIRECTION: 401 S R 1010 R SAULS RD SUB ON R

Well System: WATER: COMMUNITY - 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:

**Operation Permit**

DESIGN FLOW: \_\_\_\_\_ gal./min. ACTUAL FLOW: \_\_\_\_\_ INNOVATIVE LETTER: \_\_\_\_\_  
 INSTALLED BY: STANCIL INSTALLATION APPROVED BY: Casem Fugh  
 PROPRIETARY SYSTEM: E-E-Z LAY PIPE FILTER NO: 268  
 COMMENTS:

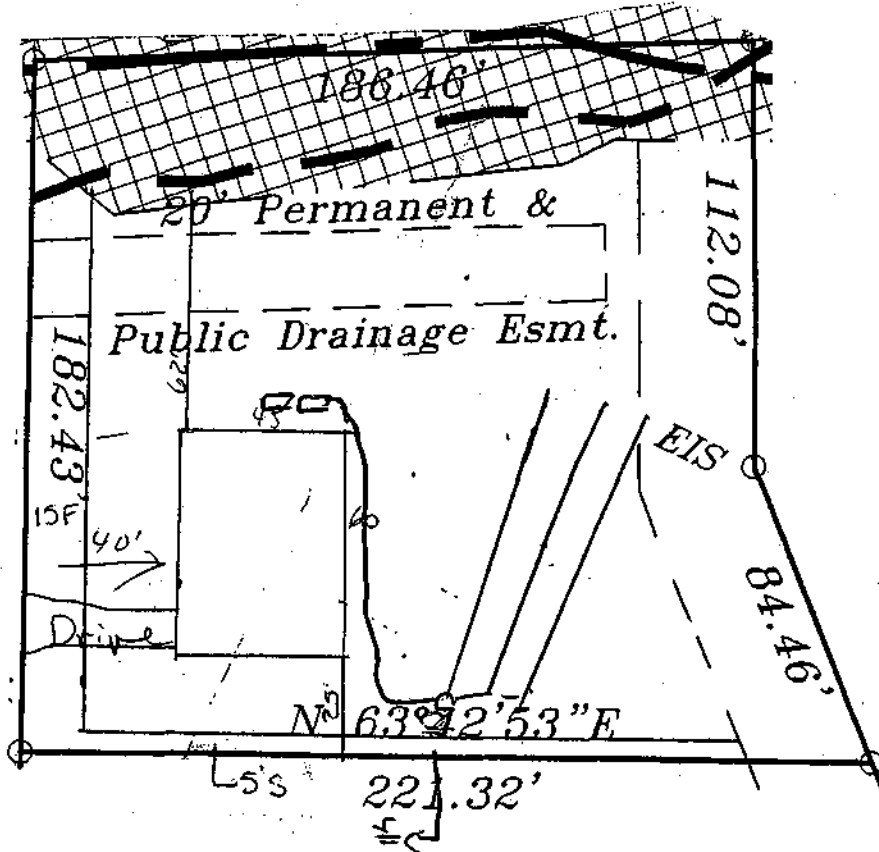
OPERATIONS PERMIT ISSUED? Y OP DATE: 8-25-06 BY: CWF

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: \_\_\_\_\_ Benchmark: \_\_\_\_\_ Rod reading: \_\_\_\_\_ Distance to Structure: \_\_\_\_\_  
 ST: 1000 gals ID#: STB 914 D.O.M.: 6-5-06 Elev.: 5'8" Distance to Well: \_\_\_\_\_  
 PT: 1000 gals ID#: PT 53 D.O.M.: 6-5-06 Elev.: 5'4"  
 D-box/FD/PM elev.: \_\_\_\_\_ Supply Line: \_\_\_\_\_ ft. Pump/Control Panel: \_\_\_\_\_  
 Line 1: 5'8" \_\_\_\_\_ Date: \_\_\_\_\_  
 Line 2: 5'6" \_\_\_\_\_ Date: \_\_\_\_\_  
 Line 3: 6'1" \_\_\_\_\_ Date: \_\_\_\_\_  
 Line 4: \_\_\_\_\_ Date: \_\_\_\_\_  
 Line 5: \_\_\_\_\_ Date: \_\_\_\_\_  
 Distance to P/L: \_\_\_\_\_ Notes: \_\_\_\_\_

As Built



0061599  
D35481

House 2700 SF

Drive 450 SF

Total 3150 SF

4616 Allowed

Lot - 36,285 SF 1"=50'

8.6 % Impervious

Lot 21 Tavernier

1104 Tavernier Knoll Lane

Raleigh

I certify that the location of planned or existing structure(s) are accurately shown and 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.

*[Signature]*  
Signature of Owner or Authorized Agent

PIN: 100804544664

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Signature of Owner or Authorized Agent

Zoning R30 By SJL  
 Approve ✓ Date 11.15.05  
 Revise \_\_\_\_\_ Use 101  
 Reject \_\_\_\_\_ MBL \_\_\_\_\_  
 Front 15 Rear 30  
 Side 5135 Corner \_\_\_\_\_  
 Comments CLUSTER

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IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: 1000 gal. SQ FT: 765 INNOVATIVE MAX DEPTH LINE: 20 in.  
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: III G PUMP: Y P/M: N  
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: COMMUNITY

COMMENTS:

IP ISSUED? Y DATE: 11/21/2005 BY: (CHH) *Christie H. Hayes* PHONE#: 868-2564

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:**

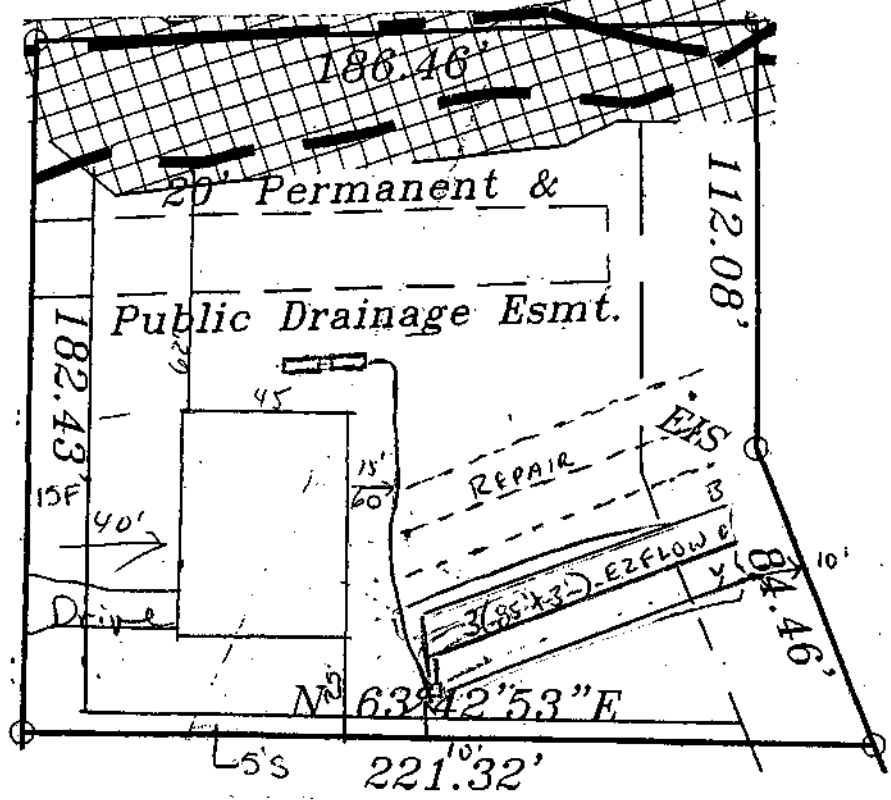
**INSTALL LINES ON CONTOUR. MAINTAIN ALL SETBACKS. DO NOT GRADE OR REMOVE SOIL FROM SEPTIC SYSTEM AREA. INSTALL 3(85'X3') EZFLOW, 20" MAX TRENCH DEPTH. 1000 GAL SEPTIC TANK AND 1000 GAL PUMP TANK. CALL PRIOR TO INSTALLATION WITH ANY QUESTIONS, CHANGES OR CONCERNS.**

TANK SIZE: 1000 gal. PUMP TANK: 1000 gal. SQ FT: 765 INNOVATIVE MAX DEPTH LINE: 20 in.  
MAINT: N OPER: N L/O: Y TRENCH#: 3 LENGTH: 85 ft. WIDTH: 36 in. DESIGNER:   
# SUBFIELDS: \_ DESIGN HEAD PRESSURE: \_ DESIGN FLOW: \_ gal/min DOSE VOLUME: \_ gal.

CA ISSUED? Y DATE: 11/21/2005 BY: (CHH) *Christie H. Hayes* PHONE#: 868-2564

CA

INITIAL  
(3'-8.5" x 3') E2 FLOW  
(20" MAX TRENCH DEPTH)  
(1000 GAL SEPTIC TANK)  
REPAIR  
III 6



0061599  
D35487

House 2700 SF  
Drive 450 SF  
Total 3150 SF

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