

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D009088

PIN #: 1617217928

OP DATE: 0811911999

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.)

00900

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

4-25-14

WAKE COUNTY ENVIRONMENTAL HEALTH 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#: D009088 STATUS: A APP DATE: 01/26/1998 BLDG PERMIT#: 0982412
APPLICANT: BAREFOOT, STANLEY LYNN DAY PHONE: (919) 779 - 9364
ADDRESS: 612 CLEE CIRCLE FAX#: (999) 999 - 9999
CITY: RALEIGH STATE: NC ZIP: 27603
OWNER: ROGERS, BOBBY D & BOBBIE DAY PHONE: (999) 999 - 9999
ADDRESS: 110 HERITAGE RIDGE CT FAX#: (999) 999 - 9999
CITY: KNIGHTDALE STATE: NC ZIP: 27545
HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?: Y
EXIST USE: TAX MAP#: 0845 0083
BEDROOMS: 4 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOS: N
TOWNSHIP: 15 PANTHER BRANCH JURIS: WC ZON: HD PIN: 1617.03 21 7928 000
SUBD#: S 000 000 00 SUBD NAME: ST. JEN'S LOT-SEC: 8 ACRE: 1.46
IMPRV PRMT: ISSUED?: Y DATE: 02/23/1998 BY: KGD TYPE SYSTEM: II PUMP:
CNSTR AUTH: ISSUED?: Y DATE: 02/23/1998 BY: KGD DATE EXPIRED: 02/23/2003
RECEIPT#: FEE: 290.00 OP DATE: BY:
WATR SAMPL: REQ?: Y APPROVED?: DATE: PROPRIETARY SYS:
ST#: 6600 MI: DIR: NAME: ST. JEN'S DIR: TYP: LANE
DIRECTIONS: HWY 50 SOUTH RIGHT HWY 42 GO APPROX 1 1/2 MILE
ST. JEN'S LANE ON RIGHT

IMPROVEMENT PERMIT

SIZE OF TANK 1200 ST PT GALS. TOTAL SQ. FT. 900 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐ I.P. ISSUED BY [Signature]

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 Environmental Health Division and an Operation Permit issued.

OTHER CONDITIONS: _____

SIZE OF TANK 1200 ST PT GALS. TOTAL SQ. FT. 900 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.
ST FILTER REQUIRED ☐ NUMBER OF TRENCHES 3 LENGTH OF TRENCHES 100 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY [Signature] INSTALLED BY TONY CARROLL CTR. I.D. # _____
SEPTIC TANK FILTER USED _____
INNOV. APPL. #: IWWS- _____ DATE 7/20/99 INSTALLATION APPROVED BY [Signature]

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

WELL LOG INFORMATION = DEPTH 245 CASING DEPTH 23 YIELD 6 STATIC LEVEL 20
WELL CONTRACTOR Relia-G-G REG.# _____ PUMP CONTRACTOR [Signature] REG.# _____

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☒ DATE 8/10/99 EHS [Signature]
WCHD ID # 9028 WELLHEAD APPROVED ☒ DATE 8/10/99 EHS [Signature]
NEGATIVE BACTERIOLOGICAL RESULTS ☒ DATE 8/10/99 EHS [Signature]
SYSTEM FINALIZED ☐ DATE _____ EHS _____

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.

St. Jen's Lane
Lot 8

1" = 100 SCALE

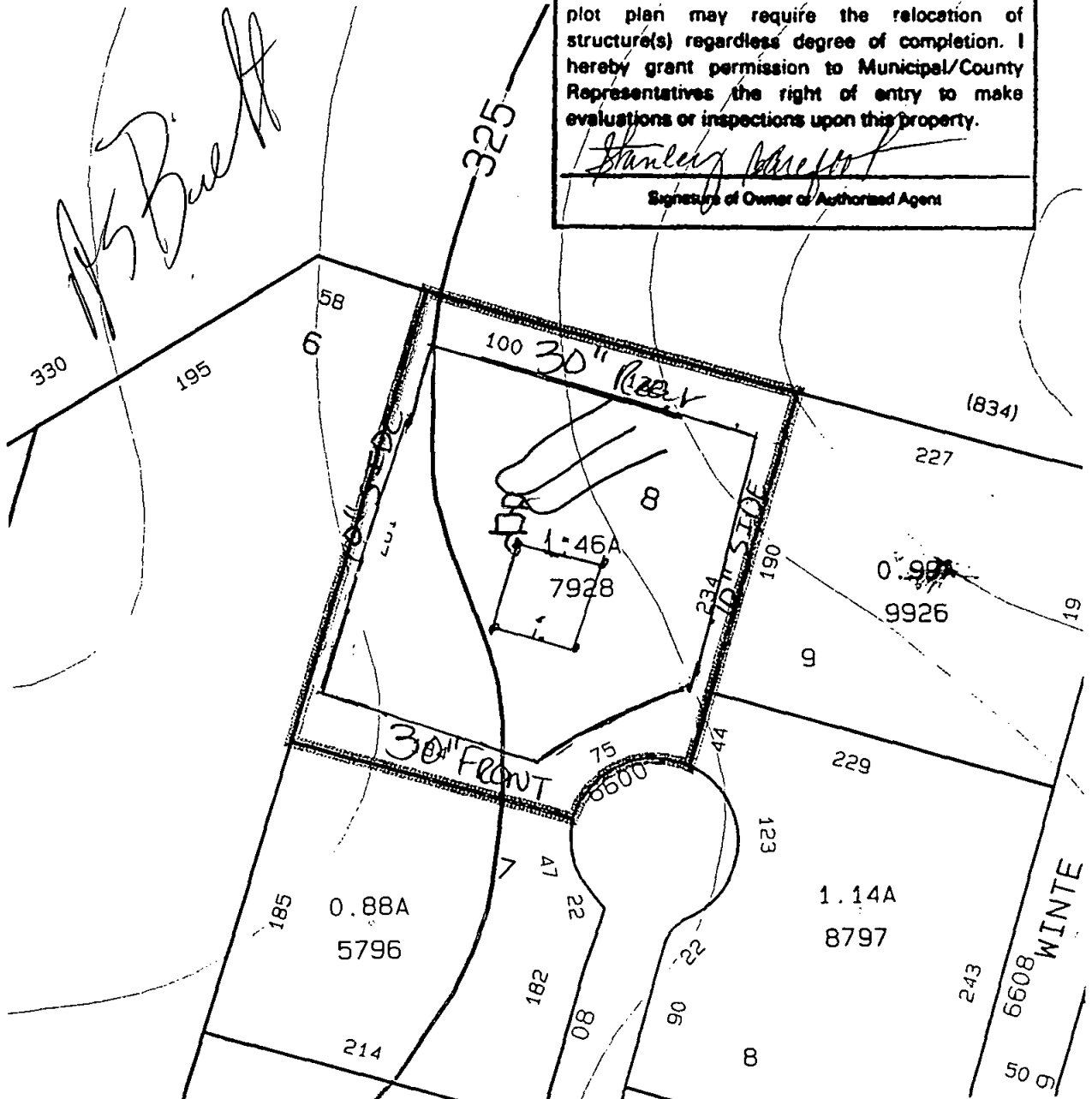
#0982412
D-9088

Zoning HD By swm
Approve ✓ Date 1/26/58
Revise _____ Use 101
Reject _____ MBL _____
Front 30" Rear 30"
Side 10" Corner 30"
Comments _____

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.

Stanley Bueff

Signature of Owner or Authorized Agent



CVS
PROPERTY OF
ST. JEN'S LANE

100' (330' 195')

100' (330' 195')

100' (330' 195')

$1'' = 100 \text{ SCALE}$

#0982412

D-9088

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Stanley R. [Signature]

Signature of Owner or Authorized Agent

