

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: **B 0 2 4 6 8 4**

PIN #: **0 6 5 7 9 8 3 1 6 4**

OP DATE: **1 2 / 0 2 / 1 9 8 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 0 9 0 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 HEALTH DEPARTMENT SEPTIC TANK LAYOUT AND PERMIT

TAX MAP NO. 820 PARCEL NO. 14 PERMIT NO. B 24684

CONTRACTOR Charles McLaurin

OWNER _____ DATE 8-25-82

LOCATION Bk of Mnps 1982 p. 698

S. R. NO. 1399 + 1398

SUBDIVISION NAME Northgate LOT NO. 35 SECTION OR BLOCK NO. III

REPAIR ☐ ORIGINAL PERMIT NO. _____

GARBAGE DISPOSAL UNIT YES ☐ NO ☒

HOUSE ☒ MOBILE HOME ☐ BUSINESS ☐ 0.480 ac

NO. BEDROOMS 3 LOT AREA 0.517 ac

SIZE OF TANK 1000 gal.

NITRIFICATION LINE '900+2 (150'x3') sq. ft.

DEPTH OF STONE IN LINES: 12" ☐ 18" ☐

RISER AND BAFFLE REQUIRED ☐ PUMP REQUIRED ☐

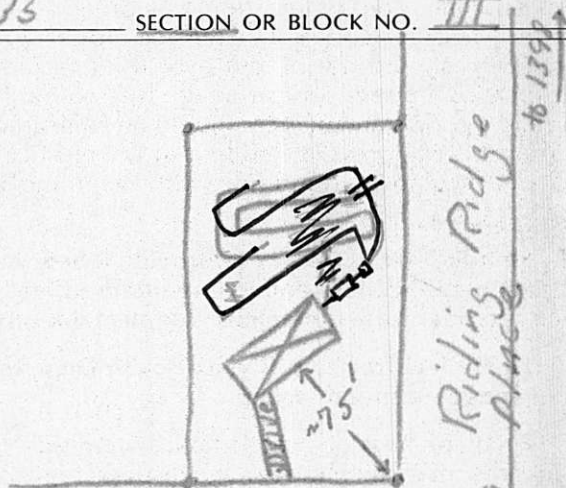
WATER SUPPLY: INDIVIDUAL ☐ PUBLIC ☐ OTHER ☐

* PERMIT VOID 36 MONTHS FROM DATE OF ISSUANCE.

* PERMIT VOID IF NOT IN COMPLIANCE WITH ZONING REGULATIONS

* PERMIT MAY BE VOIDED IF SITE ALTERATIONS MADE

LAYOUT BY W.A. Val. P.S.



590-GP09

DATE 12-2-82

INSTALLED BY A.C. Atkins

APPROVED BY Oak Lake Ct.