

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D020633

PIN #: 1608766614

OP DATE: 0812312001

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.)

01028

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

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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#: D020633 STATUS: A
PIN: 1608.02 76-3895 000 6614
TOWNSHIP: 15 PANTHER BRANCH
APPLICANT: STANCIL BUILDERS

APP. DATE: 01/31/2001
TAX MAP: 0789
JURISDICTION: WC

BLDG. PERMIT#: 0012459
RECORDED: Y ORIG. PERMIT#:
ZONING: R30

466 STANCIL RD
ANGIER, NC 27501
(919) 639-2073

USE: HD USE: 101 ONE-FAMILY HOUSE
EXIST USE:

DISPOSAL: N BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0

SITE: ADDRESS: 1013 DEER OAKS CT

SUBDIVISION: AUTUMN CREST FA LOT: 21

ACRES: 0.57

DIRECTION: 401S L OLD STAGE L 1010 R SAULS RD SUB ON L
CLUSTER SUB

Well System: WATER: COMMUNITY - TYPE: NEW

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:

DESIGN FLOW: 25 gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER: _____

INSTALLED BY: Stancil INSTALLATION APPROVED BY: _____
PROPRIETARY SYSTEM: _____ FILTER NO: _____
COMMENTS:

OPERATIONS PERMIT ISSUED? Y OP DATE: 8-23-01 BY: Stephen Robinson

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#: D020633 STATUS: A APP. DATE: 01/31/2001 BLDG. PERMIT#: 0012459
PIN: 1608.02 76-~~3893~~ 000 *6614* TAX MAP: 0789 0000 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 15 PANTHER BRANCH JURISDICTION: WC ZONING: R30
APPLICANT: STANCIL BUILDERS
466 STANCIL RD
ANGIER, NC 27501
(919) 639-2073
USE: HD USE: 101 ONE-FAMILY HOUSE
EXIST USE:
DISPOSAL: N BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0
SITE: ADDRESS: 1013 DEER OAKS CT
SUBDIVISION: AUTUMN CREST FA LOT: 21 ACRES: 0.57
DIRECTION: 401S L OLD STAGE L 1010 R SAULS RD SUB ON L
CLUSTER SUB

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: ____ gal. SQ FT: 1028 STONE DEPTH: 12 in. MAX DEPTH LINE: 36 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: II A PUMP: N P/M: N
DAILY FLOW: 00360 gal/day WATER: COMMUNITY

COMMENTS:

IP ISSUED? Y DATE: 02/15/2001 BY: (DR) *David R. Rouse* PHONE#:

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 3 LINES-3'X114'(GRAVEL), DO NOT ALLOW WATER AND SEWER UTILITIES TO CROSS, STAY 10' OFF HOME WITH TANKS AND LINES, NO STEP-DOWNS OR FOUNDATION DRAINS, MAINTAIN 9'CENTERS-SOIL DEPTH ADEQUATE TO MEANDER OFF CONTOUR A LITTLE, 36" MAXIMUM TRENCH BOTTOM, DUAL RISERS AND FILTER, PERMIT VOID IF SITE PLAN CHANGES.

TANK SIZE: 1000 gal. PUMP TANK: ____ gal. SQ FT: 1028 STONE DEPTH: 12 in. MAX DEPTH LINE: 36 in.
MAINT: N OPER: N L/O: Y TRENCH#: 3 LENGTH: 114 ft. WIDTH: 36 in.
SUBFIELDS: ____ DESIGN HEAD PRESSURE: ____ DESIGN FLOW: ____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? Y DATE: 02/15/2001 BY: (DR) *David R. Rouse* PHONE#:

Ch. Sister Rhema?

- $L^H = 5013$

