

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #:

PIN #:

OP DATE:

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.)

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#: D021601 STATUS: A APP. DATE: 04/27/2001 BLDG. PERMIT#: _____
PIN: 0788.02 58 4612 000 TAX MAP: 0278 RECORDED: Y ORIG. PERMIT#: B26069
TOWNSHIP: 08 LEESVILLE JURISDICTION: WAX ZONING: R40W
APPLICANT: MARTIN, PAUL & SUE
9812 GRALYN ROAD
RALEIGH, NC 27613
(919) 870 - 6501
USE: HD USE: 0001 REPAIR/EXISTING SYSTEM
EXIST USE: 101 ONE-FAMILY HOUSE
DISPOSAL: N BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0
SITE: ADDRESS: _____
SUBDIVISION: GRALYN LOT: 5 ACRES: 0.95
DIRECTION: SIX FORKS NORTH TL STRICKLAND TR RAY TL CHAMBE
RBERRY TL GRA LYN

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: _____
INSTALLED BY: Brantley's INSTALLATION APPROVED BY: Steve Meyer, RS
PROPRIETARY SYSTEM: _____ FILTER NO: _____
COMMENTS: _____

OPERATIONS PERMIT ISSUED? Y OP DATE: 6/14/01 BY: Steve Meyer, RS

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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IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: ____ gal. SQ FT: 1350 STONE DEPTH: 18 in. MAX DEPTH LINE: 24 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: II PUMP: N P/M: N
DAILY FLOW: 360 gal/day WATER: COMMUNITY

COMMENTS:

IP ISSUED? DATE: BY: () PHONE#:

AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION

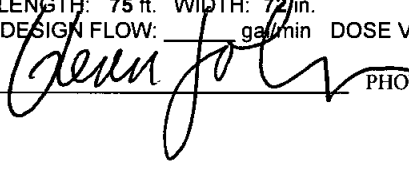
VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

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:**

STAY 10' FROM PROPERTY LINES. ADD BULL RUN VALVE BETWEEN OLD AND NEW SYSTEMS

TANK SIZE: 1000 gal. PUMP TANK: ____ gal. SQ FT: 1350 STONE DEPTH: 18 in. MAX DEPTH LINE: 24 in.
MAINT: N OPER: N L/O: Y TRENCH#: 3 LENGTH: 75 ft. WIDTH: 72 in.
SUBFIELDS: ____ DESIGN HEAD PRESSURE: ____ DESIGN FLOW: ____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? Y DATE: 04/27/2001 BY: (EGJ)  PHONE#: 856-7413

