

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: **B 0 3 8 7 5 8**

PIN #: **1 7 9 4 3 5 2 9 0 0**

OP DATE: **1 0 / 2 9 / 1 9 8 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 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 1 2 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

HRH

Wake

WAKE COUNTY HEALTH DEPARTMENT SEPTIC TANK LAYOUT AND PERMIT

38758

TAX MAP NO. 507 PARCEL NO. 59

PERMIT NO. B

OPERATION PERMIT ☐

Mark's Crk

CONTRACTOR Boy 1459 WARDEN 27591OWNER Joseph CalderDATE 27 June 86LOCATION from Warden on L before Photo PressS. R. NO. 64 B

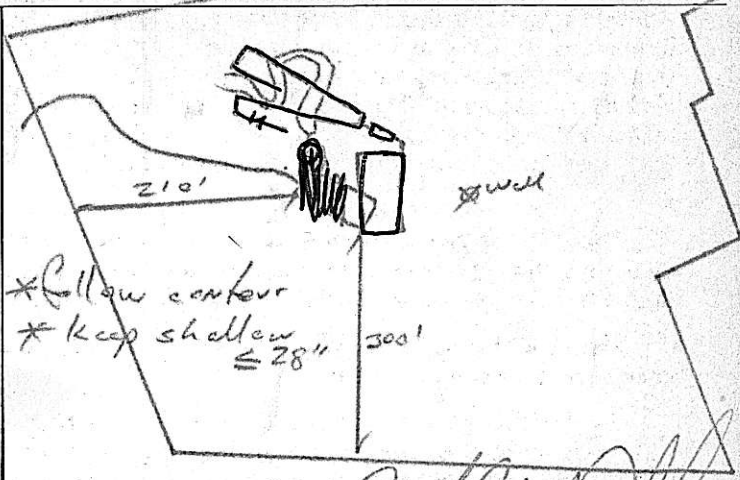
SUBDIVISION NAME _____ LOT NO. _____ SECTION OR BLOCK NO. _____

REPAIR ☐ ORIGINAL PERMIT NO. _____GARBAGE DISPOSAL UNIT YES ☐ NO ☒HOUSE ☒ MOBILE HOME ☐ BUSINESS ☐NO. BEDROOMS 4 LOT AREA 7.7 AcSIZE OF TANK 1200 gal.NITRIFICATION LINE 1200 2 x (3' x 200') sq. ft.DEPTH OF STONE IN LINES: 12" ☒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

G E Dietrich



29 Oct 86

DATE

Norman Dean

INSTALLED BY

C. H. Smith

APPROVED BY