

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D032354

PIN #: 1774605074

OP DATE: 0311612005

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.)

01035

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 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#: D032354 STATUS: A APP. DATE: 12/22/2004 BLDG. PERMIT#: 0052017
PIN: 1774.04 60 5074 000 TAX MAP: 0533 0000 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 10 MARKS CREEK JURISDICTION: WC ZONING: R30
APPLICANT: EDWARDS CONTRACTING GROUP INC
PO BOX 1013
CLAYTON, NC 27520
(919) 553 - 1087
USE: HD USE: 101 ONE-FAMILY HOUSE
EXIST USE:
DISPOSAL: BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0
SITE: ADDRESS: 6821 FLYING EAGLE CT
SUBDIVISION: EAGLES CROSSING LOT: 61 ACRES: 0.72
DIRECTION: 64E TO WENDELL, TAKE 64 BUS. TR MARTIN POND RD,
TL ROLESVILLE RD, S/D ON RT

Well System: WATER: COMMUNITY - TYPE: EXISTING

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:

Operation Permit

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER: R
INSTALLED BY: Tony Carroll INSTALLATION APPROVED BY: Adrienne Brown
PROPRIETARY SYSTEM: _____ FILTER NO: _____
COMMENTS:

OPERATIONS PERMIT ISSUED? ☒ OP DATE: 3-16-05 BY: Adrienne Brown (by EDC)

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.

As Built Information:

Date: _____ Benchmark: Riser Rod reading: 8'2" Distance to Structure: _____
ST: 1000 gals ID#: STB214 D.O.M.: 1-18-05 Elev.: 8'9" Distance to Well: _____
PT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____
D-box/FD/PM elev.: 9'9" Supply Line: _____ ft. Pump/Control Panel: _____
Line 1: 11'1" _____ Date: _____
Line 2: 11'6" _____ Date: _____
Line 3: 11'5" _____ 11'4" Date: _____
Line 4: _____ Date: _____
Line 5: _____ Date: _____
Distance to P/L: _____ Notes: Pump taken out of permit - gravity
flow achieved.

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TL ROLESVILLE RD, S/D ON RT

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: 1000 gal. SQ FT: 1035 INNOVATIVE MAX DEPTH LINE: 24 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: III G PUMP: ~~N~~ P/M: N
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: COMMUNITY

COMMENTS:

IP ISSUED? Y DATE: 02/04/2005 BY: (AMB) *Adrianne B...* PHONE#: 422-3751

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 SYSTEM AS SHOWN ON SITE PLAN. DO NOT GRADE OR FILL IN SEPTIC OR REPAIR AREA. PUMP WILL NOT BE REQUIRED IF GRAVITY FLOW CAN BE ACHIEVED. CALL PRIOR TO INSTALLATION WITH ANY QUESTIONS. MAINTAIN ALL SETBACKS, INCLUDING 25 FEET FROM THE HOUSE AND 10 FEET FROM ALL PROPERTY LINES.

TANK SIZE: 1000 gal. PUMP TANK: ~~1000~~ gal. SQ FT: 1035 INNOVATIVE MAX DEPTH LINE: 24 in.
MAINT: N OPER: N L/O: Y TRENCH#: 3 LENGTH: 115 ft. WIDTH: 36 in. DESIGNER:
SUBFIELDS: _ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _ gal/min DOSE VOLUME: _ gal.

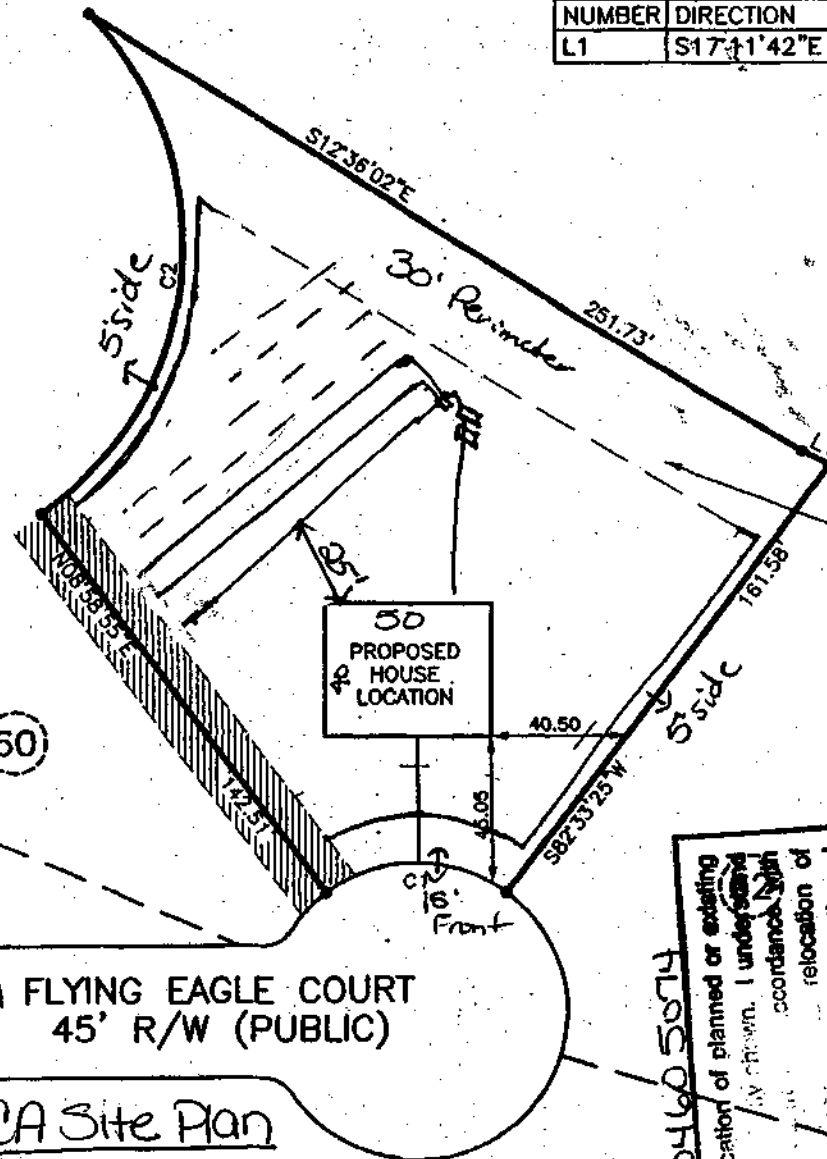
CA ISSUED? Y DATE: 02/04/2005 BY: (AMB) *Adrianne B...* PHONE#: 422-3751

CKS

NUMBER	RADIUS	ARC LENGTH	CHORD LENGTH	CHORD BEARING
C1	45.00	57.79	53.90	N44°13'50"W
C2	100.00	172.80	152.09	N50°49'43"E

NUMBER	DIRECTION	DISTANCE
L1	S17°11'42"E	9.27'

Zoning R3C
 Approve ☒ Da
 Review ☐ Use
 Reject ☐ MBL
 Front 15 Rear 15 Per 30
 Side 5 Corner 5
 Comments:



(61)
 31257 SF
 0.72 AC
 BOM 2004
 PG 193

6821 FLYING EAGLE COURT
 45' R/W (PUBLIC)

CA Site Plan
 3x110x3 Innovative
 Innovative Repair
 24" Trench Depth
 0052017
 D32354

P. # 1774 060 5074
 I certify that the location of planned or existing structure(s) is as shown. I understand that failure to relocate or relocation of completion. I hereby grant the City/County the right to make any necessary evaluations or inspections of the property.
 Signature of Owner or Authorized Agent

NOTES:

PUBLIC WATER SYSTEM ☒ YES ☐ NO
 WELL ☐ YES ☒ NO
 PUBLIC SEWER SYSTEM ☐ YES ☒ NO
 HOUSE DIMENSIONS: 50' x 40'

DOES LOT HAVE STATE ROAD FRONTAGE? ☒ YES ☐ NO
 DOES LOT HAVE RECORDED EASEMENT? ☒ YES ☐ NO

DRIVEWAY OR ACCESS DRIVE DRAINAGE CULVERT
 TYPE AND SIZE

STORMWATER ADMINISTRATOR SIGNATURE

IMPERVIOUS SURFACE TABLE

HOUSE.....2000 SF
 DRIVE & WALK.....901 SF
 TOTAL.....2901 SF
 LOT AREA.....31257 SF
 PERCENTAGE OF IMPERVIOUS AREA.....9.28%

PLOT PLAN
 OF
LOT 61
EAGLE CROSSING
WAKE COUNTY
 FOR
PHILLIP EDWARDS

SCALE: 1" = 60'
 30 0 60 120

TRUE LINE SURVEYING, P.C.



205 W. MAIN STREET
 CLAYTON, N.C. 27520
 TELEPHONE: (919) 359-0427
 FAX: (919) 359-0428
 www.truelinesurveying.com

JOB NO: 320.061 DRAWN: ROGER DATE: 12-16-04 CHECKED: CURK

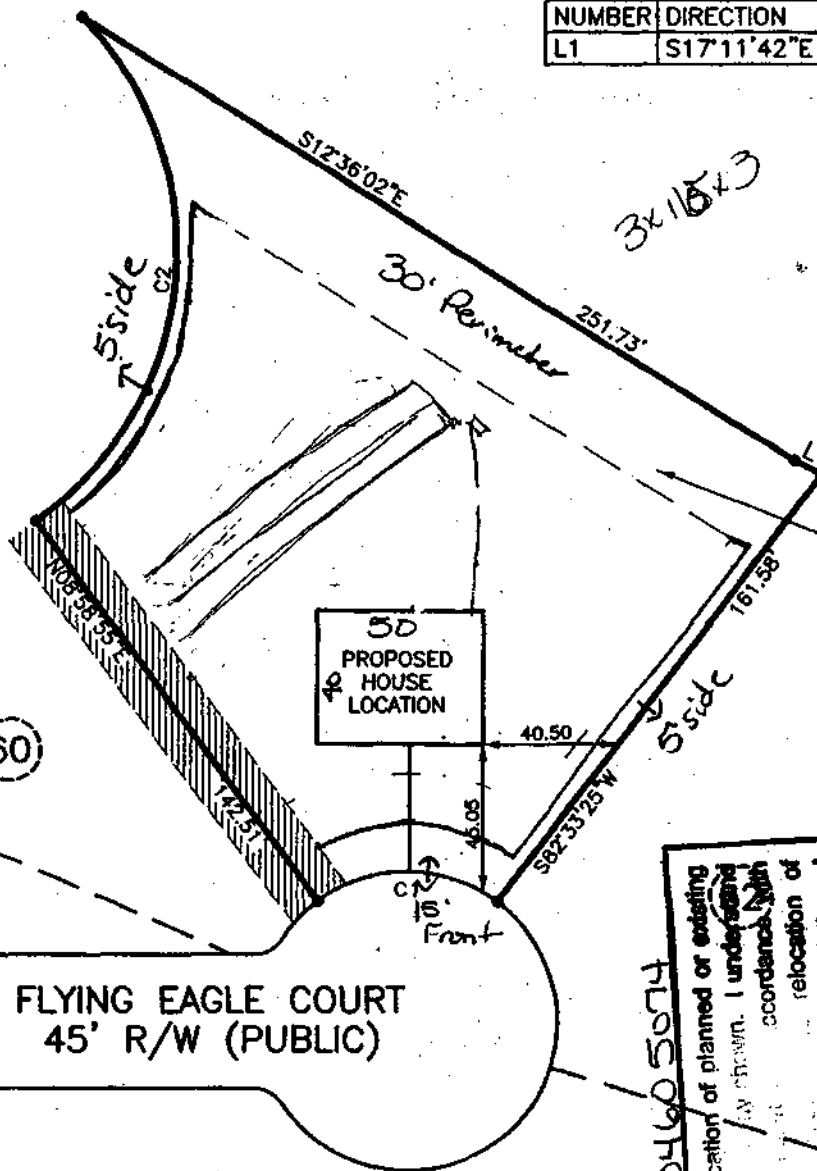
AS BUILT

CKS

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Zoning R3C
Approve ☒ Da
Revise ☐ Use
Reject ☐ MBL
Front 15 Rear 15 30 Per
Side 5 Corner 15
Comments:



(61)
31257 SF
0.72 AC
BOM 2004
PG 193

PLOT # 1774 0460 5074

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Signature of Owner or Authorized Agent

0052.017
D32.354

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WELL ☐ YES ☒ NO
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LOT 61
EAGLE CROSSING
WAKE COUNTY
FOR
PHILLIP EDWARDS

SCALE: 1" = 60'

30 0 60 120

TRUE LINE SURVEYING, P.C.



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