

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0017705

PIN #: 0647057398

OP DATE: 0910412000

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.)

01200

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#: D017705 STATUS: A APP DATE: 03/22/2000 BLDG PERMIT#: 0003260
APPLICANT: HOLTON, BRAD DAY PHONE: (919) 567 - 1660
ADDRESS: 1312 TROTTERS BLUFFS RD FAX#: (999) 999 - 9999
CITY: HOLLY SPRINGS STATE: NC ZIP: 27540
OWNER: WALTERS, KENNETH R & VICT DAY PHONE: (999) 999 - 9999
ADDRESS: PO BOX 98932 FAX#: (999) 999 - 9999
CITY: RALEIGH STATE: NC ZIP: 27624
HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?: Y
EXIST USE: TAX MAP#: 0817 0000
BEDROOMS: 3 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOSAL: N
TOWNSHIP: 06 HOLLY SPRINGS JURIS: WC ZON: R30 PIN: 0647.01 05 7379 000
SUBD#: S 000 000 00 SUBD NAME: OLIVER CREEK LOT-SEC: 88 ACRE: 0.68
IMPRV PRMT: ISSUED?: Y DATE: 05/04/2000 BY: DR TYPE SYSTEM: II A PUMP:
CNSTR AUTH: ISSUED?: Y DATE: 05/04/2000 BY: DR MAINT: N OPER: N
RECEIPT#: 0053266 FEE: 290.00 OP DATE: BY:
WATR SAMPL: REQ?: Y APPROVED?: DATE: PROPRIETARY SYS:
ST#: 6304 MI: DIR: NAME: HILBERT RIDGE DIR: TYP: DR
DIRECTIONS: HWY 55 R AVENT FERRY L PINE GROVE R ROUSE 2ND R
INTO SUB

IMPROVEMENT PERMIT

SIZE OF TANK 1000 ST 1000 PT GALS. TOTAL SQ. FT. 1200 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐ I.P. ISSUED BY James P. Pove

AUTHORIZATION FOR WASTEWATER SYSTEM CONSTRUCTION
VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE
AUTHORIZATION CONDITIONS

Contractor To Follow Contours, See Attached Site Plan For Wastewater System Design And Well Location. 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 on contour, Install force main 10' off property line, Keep tanks and any other part of system 25' from back of house, Maintain 9' centers to maximize repair, No stepdowns

SIZE OF TANK 1000 ST 1000 PT GALS. TOTAL SQ. FT. 1200 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.
ST FILTER REQUIRED ☒ NUMBER OF TRENCHES 4 LENGTH OF TRENCHES 100 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY James P. Pove INSTALLED BY 919-422-7126 CTR. I.D. # _____
SEPTIC TANK FILTER USED _____
INNOV. APPL. #: IWWS- _____ DATE 9-21-2006 INSTALLATION APPROVED BY Brian Walker

WELL SYSTEM = PRIVATE ☒ SEMI-PUBLIC ☐ NEW ☒ REPLACEMENT ☐ EXISTING ☐

WELL LOG INFORMATION = DEPTH 340 CASING DEPTH 85 YIELD 2 STATIC LEVEL 20
WELL CONTRACTOR Buddy P. Pove REG.# 479 PUMP CONTRACTOR _____ REG.# 731

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☐ DATE 9/10/00 EHS James P. Pove
WCHD ID # 731 WELLHEAD APPROVED ☒ DATE 9-14-2000 EHS James P. Pove
NEGATIVE BACTERIOLOGICAL RESULTS ☒ DATE 9-14-2000 EHS James P. Pove
SYSTEM FINALIZED ☒ DATE 9-14-2000 EHS James P. Pove

COMMENTS: _____

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.

...the right of
evaluations or inspections upon th

Sam
Signature of Owner or Authorized

Zoning R30 By 2/11
 Approve ✓ Date 3/1
 Use IC MBL
 Front 30 Rear 01
 Side 10 Corner 1
 Comments: M.

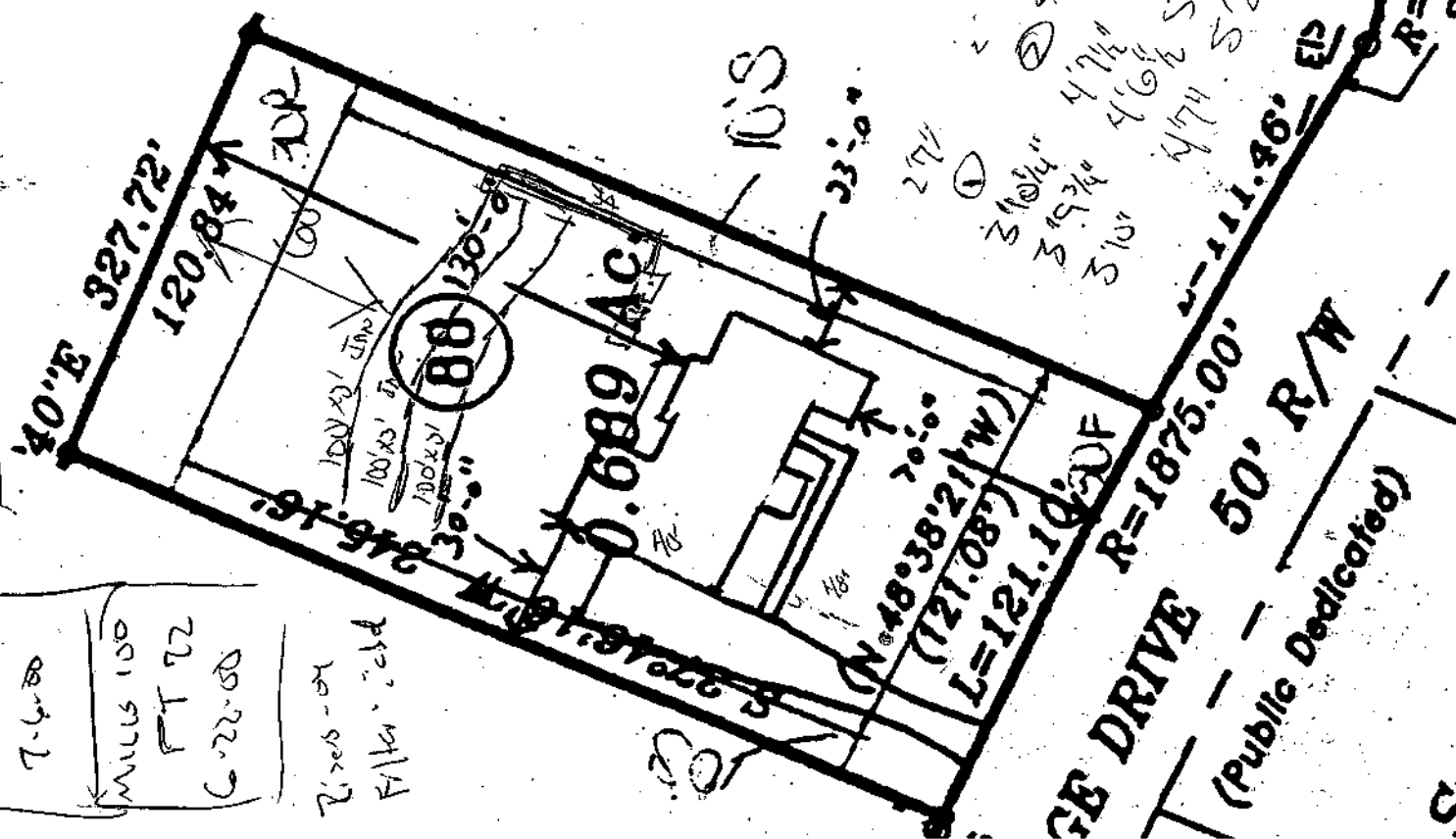
As Built

Could
SPBULAC

MILLS=1000
STB=850
7.6.80

MILLS 100
PT 72
6.22.80

Rises - 01
F/161 - 2.01d



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R

78