

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

DS

WAKE COUNTY ENVIRONMENTAL HEALTH 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#: D008938 STATUS: A APP DATE: 01/13/1998 BLDG PERMIT#: 0982226
APPLICANT: BOYD, CLYDE DAY PHONE: (919) 614 - 0363
ADDRESS: 343 COOKE RD FAX#: (999) 999 - 9999
CITY: LOUISBURG STATE: NC ZIP: 27549
OWNER: HEATH, CHARLES & GERALDIN DAY PHONE: (999) 999 - 9999
ADDRESS: 12729 GARFFE SHEARON RD FAX#: (999) 999 - 9999
CITY: WAKE FOREST STATE: NC ZIP: 27587
HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?: Y
EXIST USE: TAX MAP#: 0173
BEDROOMS: 3 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOSAL: N
TOWNSHIP: 14 NEW LIGHT JURIS: WC ZON: 40W PIN: 1822.01 35 3238 000
SUBD#: S 000 000 00 SUBD NAME: HEATH RIDGE LOT-SEC: 2 ACRE: 0.92
IMPRV PRMT: ISSUED?: Y DATE: 02/02/1998 BY: ACP TYPE SYSTEM: II PUMP:
CNSTR AUTH: ISSUED?: Y DATE: 02/02/1998 BY: ACP DATE EXPIRED: 02/02/2003
RECEIPT#: 0023989 FEE: 290.00 OP DATE: BY:
WATR SAMPL: REQ?: APPROVED?: DATE: PROPRIETARY SYS:
ST#: 1612 MI: DIR: NAME: THAMELINK DIR: TYP: CT
DIRECTIONS: US 1 N L PERNELL R GARFFE SHEARON RD 1ST ST ON
L

IMPROVEMENT PERMIT

SIZE OF TANK 1000 ST PT GALS. TOTAL SQ. FT. 1028 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐

I.P. ISSUED BY

Andre C. Quice, R.S.

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 Environmental Health Division and an Operation Permit issued.

OTHER CONDITIONS: Water and Sewer lines shall not cross; do not trench utilities across wastewater area.

SIZE OF TANK 1000 ST PT GALS. TOTAL SQ. FT. 1028 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 24 IN.

ST FILTER REQUIRED ☐ NUMBER OF TRENCHES 3 LENGTH OF TRENCHES 114 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY *Andre C. Quice*

INSTALLED BY *Joel Powell*

CTR. I.D. #

SEPTIC TANK FILTER USED

INNOV. APPL. #: IWWS- DATE 9/24/98

INSTALLATION APPROVED BY *Cincento Manzetti*

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

WELL LOG INFORMATION = DEPTH 205' CASING DEPTH 74' YIELD 15 STATIC LEVEL

WELL CONTRACTOR Powell/9845 REG.# 1009 PUMP CONTRACTOR jenkr REG.# 847

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☒ DATE 04-02-98 EHS

WCHD ID # 8501 WELLHEAD APPROVED ☒ DATE 12-02-98 EHS

NEGATIVE BACTERIOLOGICAL RESULTS ☒ DATE 01-06-99 EHS

SYSTEM FINALIZED ☒ DATE 01-11-99 EHS

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.

1012
THAMELINK COURT.

45' R/W

49.56'

30' E

SIDE EASEMENT

90'

10,270 S.T.

DRIVE

52'

36x48

PORCH

50'

132.17'

99.71'

LOT ②

40,034 sq FT

0.919 AC.

150.21' 30' R

Purnell Road

CLYDE BOYD

LOT # 2

Heat ...

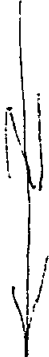
CONFESSIONS &
LAND DIVISION

ASBUILT

COPY

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0982224
DB938



1822.01-35-3238

I certify that the location of planned or existing structure(s) are accurately shown. I understand failure to locate structures in accordance with this plot plan may require the relocation of structure(s) regardless degree of completion. I hereby grant permission to Municipal/County Representatives the right of entry to make evaluations or inspections upon this property.

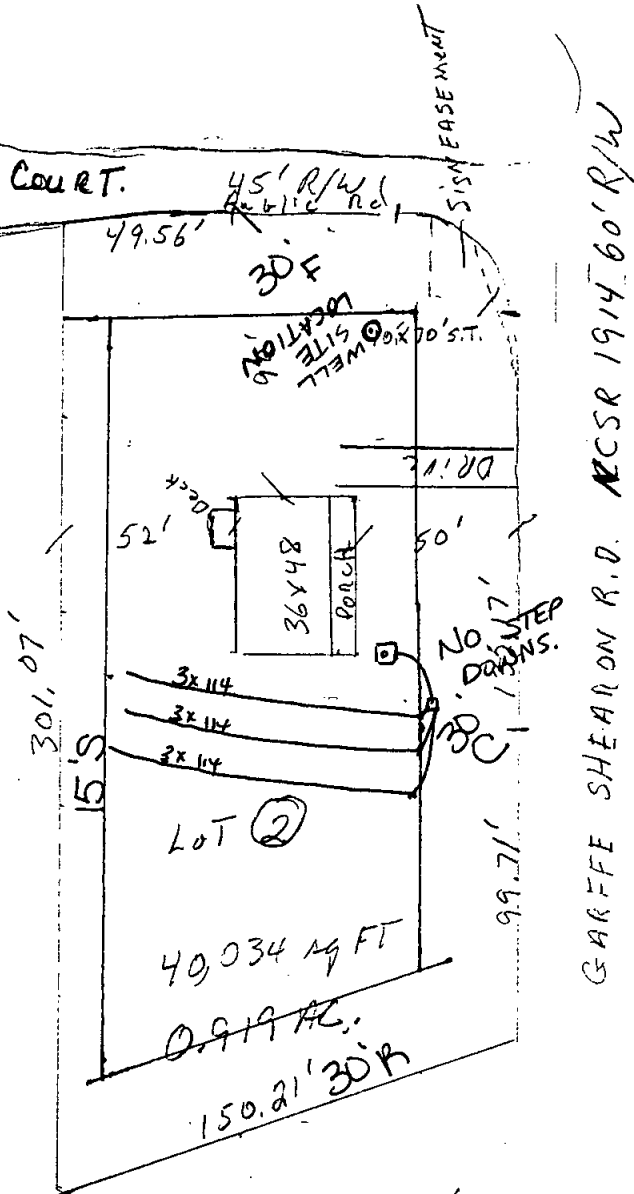
[Signature] 11/13/98
Signature of Owner or Authorized Agent

1" = 60'

Zoning 40W By SIL
 Approve ✓ Date 11/13/98
 Revise Use 101
 Reject MBL
 Front 30 Rear 30
 Side 15 Corner
 Comments: ORANGE CARD
given

1012
THAMEL

0902224
D8938



CLYDE BOYD
LOT # 2
Heart ... subd.

UNITED STATES
LAND USE DISTRICT

2007 9.17.03 03

[illegible]

1822.01-35-3238

Purnell Road

I certify that the location of planned or existing structure(s) are accurately shown. I understand failure to locate structures in accordance with this plot plan may require the relocation of structure(s) regardless degree of completion. I hereby grant permission to Municipal/County Representatives the right of entry to make evaluations or inspections upon this property.

Signature of Owner or Authorized Agent

Zoning 400w By SJC
Approve ✓ Date 11/13/98
Revise _____ Use 101
Reject _____ MBL _____
Front 30 Rear 30
Side 15 Corner _____
Comments: ORANGE CARD
given