

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0029208

PIN #: 1772133946

OP DATE: 09/08/2004

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.)

00900

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 22"

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#: **D029208** STATUS: **A** APP. DATE: **01/14/2004** BLDG. PERMIT#: **0041987**
 PIN: **1772.04 73 3946 000** TAX MAP: **0642 0000** RECORDED: **Y** ORIG. PERMIT#:
 TOWNSHIP: **10 MARKS CREEK** JURISDICTION: **WC** ZONING: **R30**
 APPLICANT: **ADAMSMARK PROPERTIES, INC.**
PO BOX 1519
KNIGHTDALE, NC 27545
(919) 369 - 5356
 USE: **HD USE: 101 ONE-FAMILY HOUSE**
 EXIST USE:
 DISPOSAL: **BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0**
 SITE: **ADDRESS: 7812 TUSCAN RIDGE DR**
 SUBDIVISION: **TUSCAN RIDGE** LOT: **49** ACRES: **0.69**
 DIRECTION: **64 E. TO SMITHFIELD RD TR GO 5 MI TL TURNIPSEED**
RD (WELL & SEPTIC)

Well System: WATER: INDIVIDUAL - TYPE: NEW

WELL LOG INFORMATION: DEPTH: 340 CASING DEPTH: 73 YIELD: 1.5 STATIC LEVEL: 20
 WELL CONTRACTOR: GRADY P. INC REG.# 479 PUMP CONTRACTOR: JOHN ROY REG.# 5175
 Construction Compliance WCDES: 13344 GROUT APPROVED ☒ DATE 4/18/04 EHS Andrea Reje RS - Time Stamp
 WELLHEAD APPROVED ☒ DATE 6/22/04 EHS Andrea Reje RS
 SYSTEM FINALIZED ☒ DATE 9/18/04 EHS Andrea Reje RS
 COMMENTS:
LG

Operation Permit

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER: _____
 INSTALLED BY: _____ INSTALLATION APPROVED BY: Adrienne B
 PROPRIETARY SYSTEM: _____ FILTER NO: _____
 COMMENTS: _____
 OPERATIONS PERMIT ISSUED? Y OP DATE: 9/5/04 BY: Adrienne B

 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: _____ Rod reading: _____ Distance to Structure: _____
 ST: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____ Distance to Well: _____
 PT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____
 D-box/FD/PM elev.: _____ Supply Line: _____ ft. Pump/Control Panel: _____
 Line 1: _____ Date: _____
 Line 2: _____ Date: _____
 Line 3: _____ Date: _____
 Line 4: _____ Date: _____
 Line 5: _____ Date: _____
 Distance to P/L: _____ Notes: _____

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PIN: 1772.04 73 3946 000 TAX MAP: 0642 0000 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 10 MARKS CREEK JURISDICTION: WC ZONING: R30
APPLICANT: ADAMSMARK PROPERTIES, INC.
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KNIGHTDALE, NC 27545
(919) 369 - 5356
USE: HD USE: 101 ONE-FAMILY HOUSE
EXIST USE:
DISPOSAL: BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0 FOUND DRAIN:
SITE: ADDRESS: 7812 TUSCAN RIDGE DR
SUBDIVISION: TUSCAN RIDGE LOT: 49 ACRES: 0.69
DIRECTION: 64 E. TO SMITHFIELD RD TR GO 5 MI TL TURNIPSEED
RD (WELL & SEPTIC)

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: 1000 gal. SQ FT: 900 INNOVATIVE MAX DEPTH LINE: 22 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: III G PUMP: Y P/M: N
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: INDIVIDUAL

COMMENTS:

IP ISSUED? Y DATE: 02/12/2004 BY: (AMB) Adrienne Boren PHONE#: 856-5524

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 ON CONTOUR AS SHOWN ON SITE PLAN. DO NOT GRADE OR FILL IN SYSTEM OR REPAIR AREAS. CHANGES IN SITE PLAN WILL CAUSE PERMIT TO BE VOIDED. OBSERVE ALL SETBACKS. CALL WITH ANY QUESTIONS PRIOR TO INSTALLATION. PUMP WILL NOT BE REQUIRED IF GRAVITY FLOW CAN BE ACHIEVED.

TANK SIZE: 1000 gal. PUMP TANK: 1000 gal. SQ FT: 900 INNOVATIVE MAX DEPTH LINE: 22 in.
MAINT: N OPER: N L/O: Y TRENCH#: 3 LENGTH: 100 ft. WIDTH: 36 in. DESIGNER:
#SUBFIELDS: _ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _ gal/min DOSE VOLUME: _ gal.

CA ISSUED? Y DATE: 02/12/2004 BY: (AMB) Adrienne Boren PHONE#: 856-5524

BEING ALL OF LOT 49 TUSCAN RIDGE SUBDIVISION PHASE I RECORDED IN BOOK OF MAPS 2003 PG. 1214.

PIN: 1772.04-73-3946

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

1-13-04

Zoning R30 By SBC
Approve ✓ Date 1-13-04
Revise _____ Use 101
Reject _____ MBL _____
Front 30' Rear 15'
Side 10' Corner 30'
Comments: SFD

B.O.M. 2003 PG. 1214

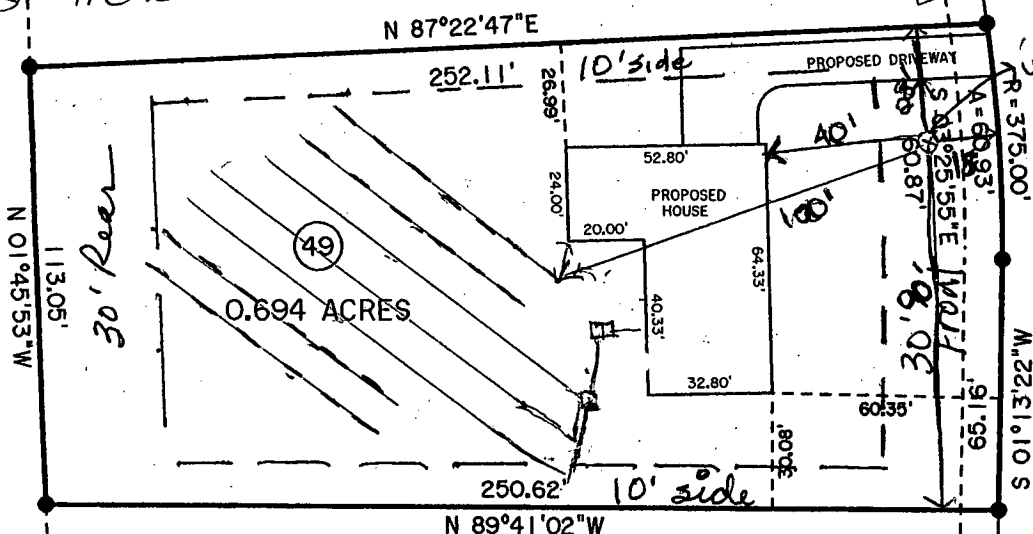
C.A. Site Plan

3x100x3 Innovative System

TUSCAN RIDGE PHASE I
B.O.M. 2003 PG. 1214

4x7.5x3 Innovative Repair
22" Trench Depth

0041987
D-029208



Cluster Reduced setbacks

7812 TUSCAN RIDGE DR. 50' R/W

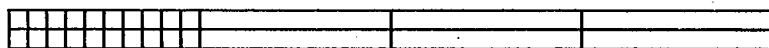
IMPERVIOUS SURFACE:
HOUSE = 2590 SQ. FT.
DRIVEWAY = 1185 SQ. FT.
TOTAL IMP. = 3775 SQ. FT.
TOTAL AREA = 30230 SQ. FT.
12.49% TOTAL IMPERVIOUS

C.A. Site Plan

Legend

— System
--- Repair

50 0 50 100 150



GRAPHIC SCALE - FEET

I, WALLACE G. CLARK, JR. CERTIFY THAT THIS MAP WAS DRAWN UNDER MY SUPERVISION FROM AN ACTUAL SURVEY MADE UNDER MY SUPERVISION; THAT THE RATIO OF PRECISION AS CALCULATED IS 1: 10,000+

DATE 11-12-2003

SCALE 1" = 50'

PROJECT # 22058-49

GIL CLARK SURVEYING

P. O. BOX 1243 KNIGHTDALE, N.C. 27545

TEL (919) 266-9711 FAX (919) 266-9732

SURVEY FOR

ADAMSMARK PROPERTIES

MARKS CREEK TOWNSHIP WAKE COUNTY, N.C.

#1772 0473 3946

ATTN: ANDREA EDGE

Grady Poole Well & Pump Co., Inc.

5809 Farmwell Rd.
Raleigh, NC 27610
919-266-2185

APRIL 12, 2004

Jason

Jon

Grady

PERMIT NO.D-029208

WELL CONSTRUCTION RECORD

WELL CONTRACTOR (INDIVIDUAL) NAME (print) Ke. Russell CERTIFICATION # 2641
 WELL CONTRACTOR COMPANY NAME GRADY POOLE WELL COMPANY PHONE # 919 266-2185
 STATE WELL CONSTRUCTION PERMIT# _____ ASSOCIATED WQ PERMIT# _____
 (if applicable) (if applicable)

1. WELL USE (Check Applicable Box): Residential ☒ Municipal/Public ☐ Industrial ☐ Agricultural ☐
 Monitoring ☐ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use _____

2. WELL LOCATION:

Nearest Town: Wendell County Wake
LOT 49, TUSCAN RIDGE, 7812 TUSCAN RIDGE DRIVE
 (Street Name, Numbers, Community, Subdivision, Lot No., Zip Code)

Topographic/Land setting
☐ Ridge ☐ Slope ☐ Valley ☒ Flat
 (check appropriate box)
 Latitude/longitude of well location

3. OWNER: ADAMSMARK PROPERTIES, INC.

Address PO BOX 1519

(Street or Route No.)

KNIGHTDALE, NC27545

City or Town

State

Zip Code

Area code- Phone number

4. DATE DRILLED 4-8-045. TOTAL DEPTH: 3406. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☒7. STATIC WATER LEVEL Below Top of Casing: 20 FT.

(Use "+" if Above Top of Casing)

8. TOP OF CASING IS 1 FT. Above Land Surface*

*Top of casing terminated at/or below land surface requires variance in accordance with 15A NCAC 2C .0118.

9. YIELD (gpm): 112 METHOD OF TEST Blow10. WATER ZONES (depth): 240

DEPTH

From To

0	3
3	30
30	60
60	23
23	340

DRILLING LOG

Formation Description

top soil
clay
sand
gravel
granite

LOCATION SKETCH

Show direction and distance in miles from at least two State Roads or County Roads. Include the road numbers and common road names.

11. DISINFECTION: Type HTH Amount 1 LB.

12. CASING:

From	To	Depth	Diameter	Wall Thickness	Material
0	73	Ft.	<u>6 1/4"</u>	<u>.188</u>	<u>galv</u>
From	To	Ft.			
From	To	Ft.			

From	To	Depth	Material	Method
0	20	Ft.	<u>Portland</u>	<u>grout</u>
From	To	Ft.		

From	To	Depth	Diameter	Slot Size	Material
From	To	Ft.	in.	in.	
From	To	Ft.	in.	in.	

15. SAND/GRAVEL PACK:

From	To	Depth	Size	Material
From	To	Ft.		
From	To	Ft.		

16. REMARKS:

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C, WELL CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE WELL OWNER

SIGNATURE OF PERSON CONSTRUCTING THE WELL

DATE