

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: **D 0 5 8 9 7 4**

PIN #: **0 6 6 5 8 2 9 9 2 9**

OP DATE: **0 4 / 1 1 / 2 0 1 8**

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

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|------------------|
| ☐ | ☐ | ☐ | 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 0 9 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

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#: **D058974** STATUS: **A** APP. DATE: **01/05/2018** BLDG. PERMIT#: **0182147**
 PIN: **0665 82 9929 000** TAX MAP: **0** RECORDED: **Y** ORIG. PERMIT#:
 TOWNSHIP: **12 MIDDLE CREEK** JURISDICTION: **WC** ZONING: **R30** SW DEVICE: **N S#:**
 APPLICANT: **MUNGO HOMES OF NC (919) 303 - 8525**
2521 SCHIEFFELIN RD STE116 APEX, NC 27526
 USE: HD USE: **101A CONVENTIONAL ONE-FAMILY HOUSE** EXIST USE:
 LTAR: **0.30 0.30** BEDROOMS: **4** BASEMENT: **N** #EMPLOYEES: **0**
 SITE: ADDRESS: **8109 FIELDCREST LN**
 SUBDIVISION: **HAMPTON PARK** LOT: **51** ACRES: **0.62** EASEMENT: **N** LOC: **SYS:**
 DIRECTION: **401 TOPURFOY TO HAMTON PARK WAY TO PARKER MILL TO FIELDCREST**

Well System: WATER: COMMUNITY - TYPE:

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: **COMMUNITY WATER.**

Operation Permit

DESIGN FLOW: **_____** gal./min. ACTUAL FLOW: **_____** DOSE VOLUME: **_____** gal. INNOVATIVE LETTER: **_____**
 INSTALLED BY: **James-Adcock** INSTALLATION APPROVED BY: **Kristi Marks**
 PROPRIETARY SYSTEM: **_____** TYPE SYSTEM: **II A**

COMMENTS: **NEITHER THE STATE NOR LOCAL HEALTH DEPARTMENT SHALL BE LIABLE FOR ANY DAMAGES CAUSED BY AN ENGINEERED SYSTEM APPROVED OR PERMITTED PURSUANT TO SESSION LAW 2014-120 SECTION 53. ENGINEER CERTIFICATION AND ENGINEER CERTIFICATION OF REQUIRED FIXTURE INSTALLATION REQUIRED PRIOR TO ISSUANCE OF OPERATION PERMIT.**

OPERATIONS PERMIT ISSUED? **Y** OP DATE: **4/11/18** BY: **Kristi Marks**

Systems defined as either a Type IIIb, IIIg with a pump, IV, V or VI, in accordance with the North Carolina Administrative Code 15A NCAC 18A .1961, Table V as adopted by reference in the "Regulations Governing Wastewater Treatment and Dispersal Systems in Wake County", require Wake County Environmental Services to conduct periodic inspections on this type system, pursuant to 15A NCAC 18A .1961 (j). Fees for these inspections will be charged as per the approved Fee Schedule. In addition, all systems are to be operated and maintained as specified in 15A NCAC 18A .1961. 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: **4/2/18** Benchmark: **ST** Rod reading: **1'10 1/2"** Distance to Structure: **11.5'**
 ST: **1250** gals ID#: **STB 381** D.O.M.: **12-28-17** Elev.: **1'10 1/2"** Distance to Well: **N/A**
 PT: **_____** gals ID#: **_____** D.O.M.: **_____** Elev.: **_____** Distance to P/L: **11**
 GT: **_____** gals ID#: **_____** D.O.M.: **_____** Elev.: **_____** Pretreatment: **N/A**
 D-box/FD/PM elev.: **2'8 1/2"** Supply Line: **11** ft. Pump/Ctrl Panel: **-** Filter: **red poly lock**
 Line 1: **4'3 1/2"** **4'3 1/2"** Date: **4/2/18** Line 6: **_____** **_____** Date: **_____**
 Line 2: **4'4 3/4"** **4'5"** Date: **↓** Line 7: **_____** **_____** Date: **_____**
 Line 3: **4'10 1/2"** **4'10 3/4"** Date: **↓** Line 8: **_____** **_____** Date: **_____**
 Line 4: **5'5 1/2"** **5'5 1/2"** Date: **↓** Line 9: **_____** **_____** Date: **_____**
 Line 5: **6'8"** **6'8"** Date: **↓** Line 10: **_____** **_____** Date: **_____**
 ETM1: **_____** CCI: **_____** ETM2: **_____** CC2: **_____** OR: **_____** AC: **_____** WM: **_____**
 Notes: **_____**

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APPLICANT: **MUNGO HOMES OF NC (919) 303 - 8525**
2521 SCHIEFFELIN RD STE116 APEX, NC 27526
HD USE: **101A CONVENTIONAL ONE-FAMILY HOUSE** EXIST USE: DESIGN FEE REQ?: **Y** PAID?: **Y**
LTAR: **0.30 0.30** BEDROOMS: **4** BASEMENT: **N** #EMPLOYEES: **0** FOUNDATION DRAIN: **Y**
SITE: ADDRESS: **8109 FIELDCREST LN**
SUBDIVISION: **HAMPTON PARK** LOT: **51** ACRES: **0.62** EASEMENT: **N** LOC: **SYS:**
DIRECTION: **401 TOPURFOY TO HAMTON PARK WAY TO PARKER MILL TO FIELDCREST**

IMPROVEMENT PERMIT

☐ As per GS 130A-335 (f), Improvement Permit is based on a Site Plan and is void Sixty (60) months from date of issuance.

☒ As per GS 130A-335 (f), Improvement Permit is based on a Plat and is valid without expiration.

Permit is subject to revocation if the site plan or plat, whichever is applicable, or the intended use changes.

TANK SIZE: **1200** gal. PUMP Tank: gal. GREASE TRAP: gal. SQ FT: **900** **ACCEPTED STATUS** MAX DEPTH LINE: **18** in.
WASTEWATER: **INDIVIDUAL** SEWAGE: **DOMESTIC** TYPE SYSTEM: **II A** PUMP: **N** P/M: **N** LP: **TD:**
DAILY FLOW: **360** gal/day WATER: **COMMUNITY** PRETREATMENT: **NA** FILL: **DAF: PB** DEEP: **REDUCE35%:**

COMMENTS: **SYSTEM IS DESIGNED AS GRAVITY FLOW TO A DBOX FEEDING 5 LINES OF 60'X3'. INSTALL LINES ON CONTOUR. MAINTAIN ALL SETBACKS. MINIMUM SEPTIC TANK SIZE IS 1200 GAL. MAX TRENCH DEPTH IS 18". PLEASE CALL PRIOR TO INSTALLATION WITH ANY QUESTIONS**

IP ISSUED? **Y** DATE: **01/29/2018** BY: **(ALB) Alex Brown by JL** PHONE#: **(919)-397-7095**

AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION
VALIDITY CONCURRENT WITH THE IMPROVEMENT PERMIT

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. An Accepted Status System may be used in place of conventional system, if it can be placed in the permitted/authorized trench footprint (except reduction in line length and/or number as allowed for in approval) and the installation is in accordance with the accepted system approval, without unauthorized product alteration. If permit required use of an Accepted Status System, substitution with another accepted status system may be made, as long as no changes are necessary in the location of each nitrification line (including any increase in line length), trench depth or effluent distribution method. If changes are necessary, prior approval by this office is required before system installation.

OTHER CONDITIONS: **INITIAL SYSTEM IS DESIGNED AS GRAVITY FLOW TO D-BOX TO FEED 5 60' LINES, FLAGGED IN FIELD. ACCEPTED STATUS MEDIA, 25% REDUCTION ALREADY TAKEN. REPAIR IS DESIGNED AS 5 60' LINES WHEN NEEDED IN FUTURE. KEEP SUPPLY LINE OUT OF REPAIR FIELD. PIPE ALL DISCHARGE OUTLETS AWAY FROM DRAIN FIELD. MAINTAIN ALL SETBACKS, KEEP 100' TO EXISTING WELL. IF 100' SETBACK TO WELL IS NOT MAINTAINED THEN INSTALLATION WILL NOT BE APPROVED. CALL OFFICE WITH ANY QUESTIONS PRIOR TO OR DURING INSTALLATION. THIS ENGINEERED DESIGN FLOW REDUCTION APPROVED UNDER SESSION LAWS 2014-120 SECTION 53 AND IS SEALED BY THOMAS SPEIGHT, JR. P.E. ENGINEER CERTIFICATION OF REQUIRED FLOW REDUCTION FIXTURES AND COMPONENTS REQUIRED. INCLUDING THE USE OF THE MATERIALS SPECIFIED IN THE DESIGN. ANY DEVIATION MUST BE APPROVED BY THE DESIGNER AND WAKE COUNTY ENVIRONMENTAL SERVICES PRIOR TO SYSTEM INSTALLATION. NEITHER THE STATE OR LOCAL HEALTH DEPARTMENT SHALL BE LIABLE FOR ANY DAMAGES CAUSED BY AN ENGINEERED SYSTEM APPROVED OR PERMITTED PURSUANT TO SESSION LAW 2014-120 SECTION 53.**

TANK SIZE: **1200** gal. PUMP TANK: gal. GREASE TRAP: gal. SQ FT: **900** **ACCEPTED STATUS** MAX DEPTH LINE: **18** in.
MAINT: **Y** OPER: **N** L/O: **P** TRENCH#: **5** LENGTH: **60** ft. WIDTH: **36** in. DESIGNER:
SUBFIELDS: DESIGN HEAD PRESSURE: DESIGN FLOW: gal/min DOSE VOLUME: gal. PRETREATMENT: **NA**

CA ISSUED? **Y** DATE: **02/05/2018** BY: **(JXL)** PHONE#: **(919)-856-7418**

AS BUILT

1"=50'

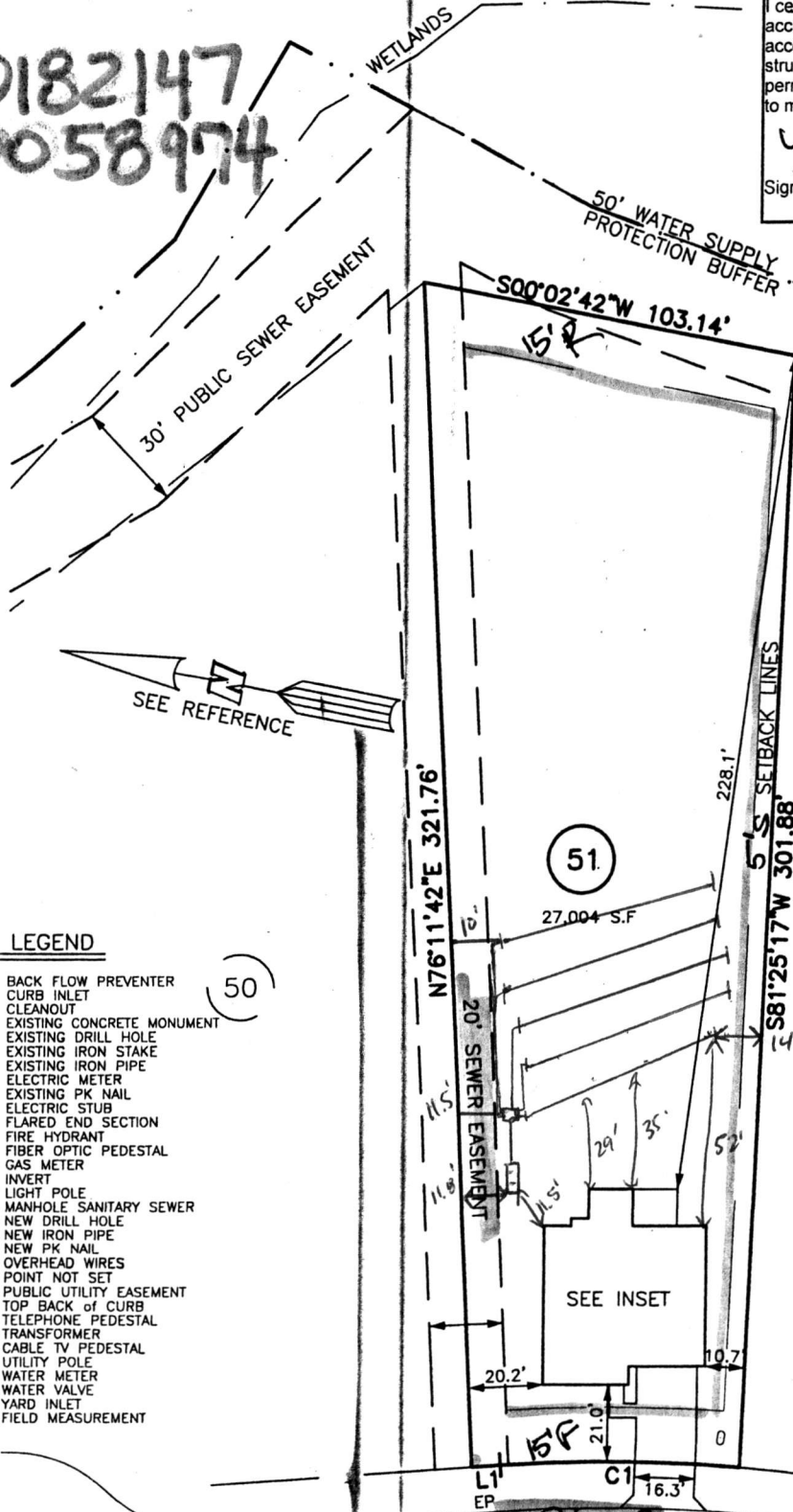
PLOT PLAN FOR
MUNGO HOMES OF NORTH CAROLINA
8109 FIELDCREST LANE
LOT 51, HAMPTON PARK, PHASE 2
MIDDLE CREEK TOWNSHIP, WAKE COUNTY, NORTH CAROLINA

0605 82 9929

0182147
DO 58974

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 relocations 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.

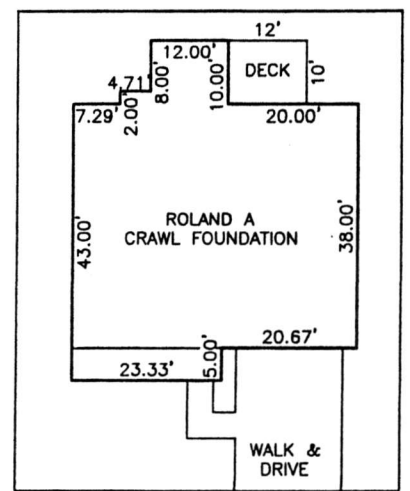
Katherine Dusk
Signature of Owner or Authorized Agent



LEGEND

- BFP BACK FLOW PREVENTER
- CI CURB INLET
- CN CLEANOUT
- ECM EXISTING CONCRETE MONUMENT
- EDH EXISTING DRILL HOLE
- EIS EXISTING IRON STAKE
- EIP EXISTING IRON PIPE
- EM ELECTRIC METER
- EPK EXISTING PK NAIL
- ES ELECTRIC STUB
- FLA FLARED END SECTION
- FHY FIRE HYDRANT
- FOF FIBER OPTIC PEDESTAL
- GM GAS METER
- INV INVERT
- LPO LIGHT POLE
- MNS MANHOLE SANITARY SEWER
- NDH NEW DRILL HOLE
- NIP NEW IRON PIPE
- NPK NEW PK NAIL
- OHW OVERHEAD WIRES
- PNS POINT NOT SET
- PUE PUBLIC UTILITY EASEMENT
- TBC TOP BACK OF CURB
- TEP TELEPHONE PEDESTAL
- TRF TRANSFORMER
- CTV CABLE TV PEDESTAL
- UPU UTILITY POLE
- WM WATER METER
- WV WATER VALVE
- YI YARD INLET
- FM FIELD MEASUREMENT

Comments: SPT cluster
Reflect: 15' Rear 15' Corner
Revised: 15-18
Use: 104
MBL
Date: 1-5-18
R30
1-5-18



INSET, SCALE: 1"=30'

SETBACK INFO

FRONT: 15'
REAR: 15'
SIDES: 5'
CORNER SIDE: 15'

REFERENCES:

B.M. 2013, PG. 287-290

8109
FIELDCREST LANE

50' PUBLIC R/W

NUMBER	DIRECTION	DISTANCE
L1	N14°55'20"W	7.77'

NUMBER	RADIUS'	DELTA	ARC'	CHORD BRG.	CHORD'
C1	425.00	08°46'07"	65.04	N10°32'17"W	64.98

IMPERVIOUS SURFACE TABLE

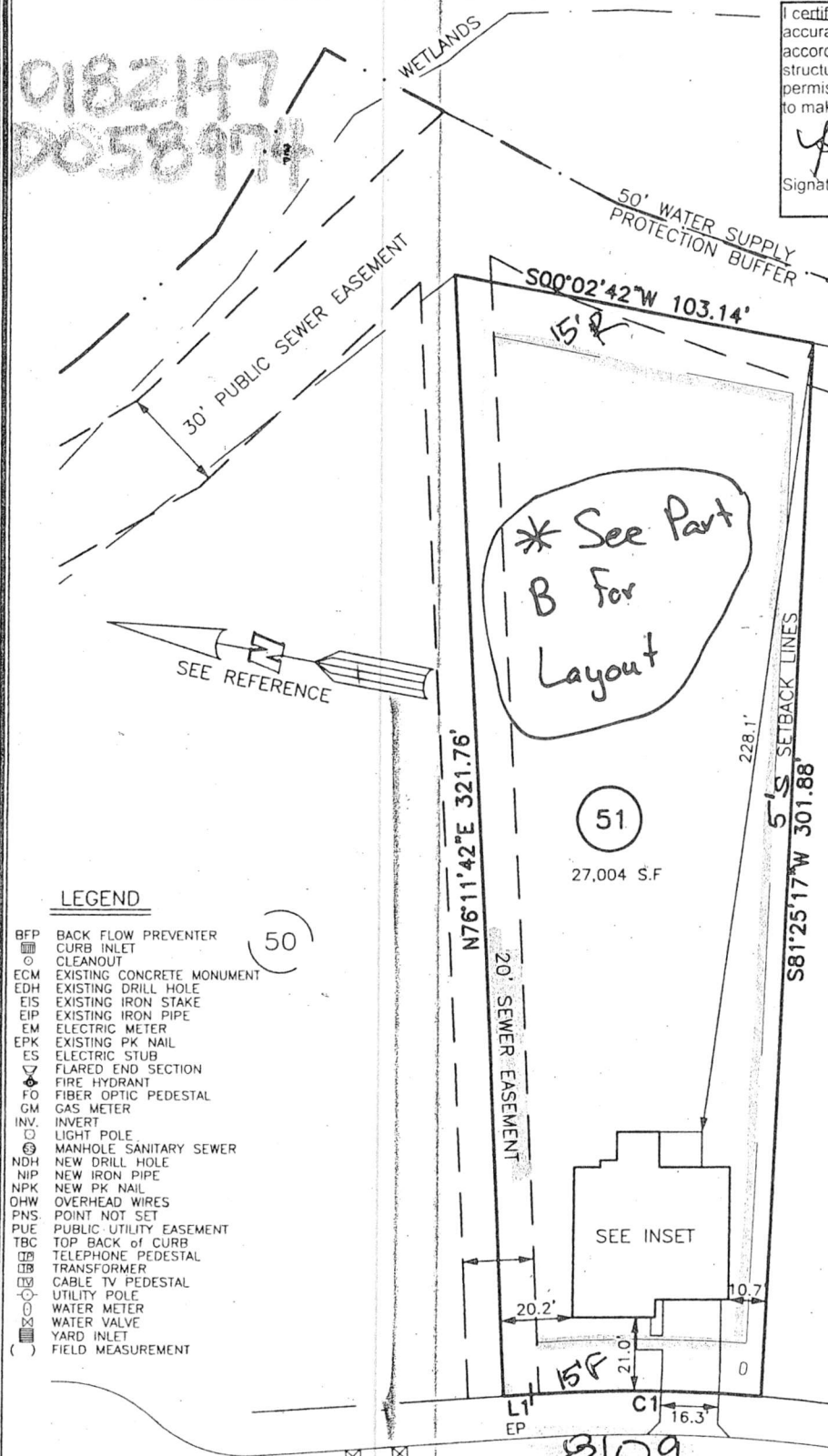
PLOT PLAN FOR
MUNGO HOMES OF NORTH CAROLINA
8109 FIELDCREST LANE
LOT 51, HAMPTON PARK, PHASE 2
MIDDLE CREEK TOWNSHIP, WAKE COUNTY, NORTH CAROLINA

0605 82 9929

0182147
0058974

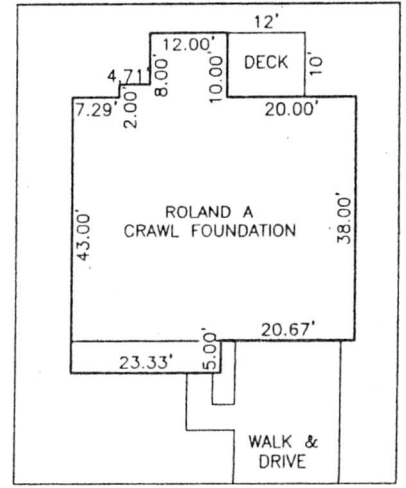
I certify that the location of planned or existing structure(s) are accurately shown. I understand failure to locate structures in accordance with this plot plan may require the relocations of structure(s) regardless degree of completion. I hereby grant permission to Municipal/County Representatives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

Kathleen Fusk
Signature of Owner or Authorized Agent



Comments: SPT cluster
15' Rear Corner
MBL use 10'4
Date 1-5-18
K3D

- LEGEND
- BFP BACK FLOW PREVENTER
 - CURB INLET
 - CLEANOUT
 - ECM EXISTING CONCRETE MONUMENT
 - EDH EXISTING DRILL HOLE
 - EIS EXISTING IRON STAKE
 - EIP EXISTING IRON PIPE
 - EM ELECTRIC METER
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 - PNS POINT NOT SET
 - PUE PUBLIC UTILITY EASEMENT
 - TBC TOP BACK OF CURB
 - TELEPHONE PEDESTAL
 - TRANSFORMER
 - CABLE TV PEDESTAL
 - UTILITY POLE
 - WATER METER
 - WATER VALVE
 - YARD INLET
 - () FIELD MEASUREMENT



INSET, SCALE: 1"=30'

SETBACK INFO

FRONT:	15'
REAR:	15'
SIDES:	5'
CORNER SIDE:	15'

REFERENCES:
B.M. 2013, PG. 287-290

50 0 50

SCALE: 1" = 50'

NUMBER	DIRECTION	DISTANCE
L1	N14°55'20"W	7.77'

IMPERVIOUS SURFACE TABLE

HOUSE.....	1,920 S.F.
DECK.....	120 S.F.
WALK & DRIVE.....	480 S.F.
TOTAL IMPERVIOUS.....	2,520 S.F.
ALLOWABLE IMPERVIOUS =	5,940 S.F. MISA

CONCRETE AREA: 700 S.F.
LANDSCAPE AREA: 25,140 S.F.

NOTES

1. NOT FOR RECORDING IN MAP BOOKS.
2. THIS SURVEY SUBJECT TO ANY FACTS THAT MAY BE DISCLOSED BY A FULL AND ACCURATE TITLE SEARCH.
3. THIS MAP IS NOT A CERTIFIED SURVEY AND HAS NOT BEEN REVIEWED BY A LOCAL GOVERNMENT AGENCY FOR COMPLIANCE WITH ANY APPLICABLE LAND DEVELOPMENT REGULATIONS

PLOT PLAN
PRELIMINARY PLAT- NOT FOR RECORDATION,
CONVEYANCE OR SALES

DATE: OCT. 25, 2017

F.B. _____

REV CODE: 1.FLIP, 2.PLAN, 3.ROTATE, 4.MOVE, 5.SS
6.SEVERAL OF ABOVE, 7.LAND FEATURE, 8. OTHER

RWK, PA
ENGINEERING ~ SURVEYING
CORPORATE LICENSE: C-1771
101 W. MAIN ST., SUITE 202
GARNER, NC 27529
PHONE (919) 779-4854
FAX (919) 779-4056
C:\HMPK\HMPK51\HMPK51.DWG

CA Part B

LINE SCHEDULE SYSTEM

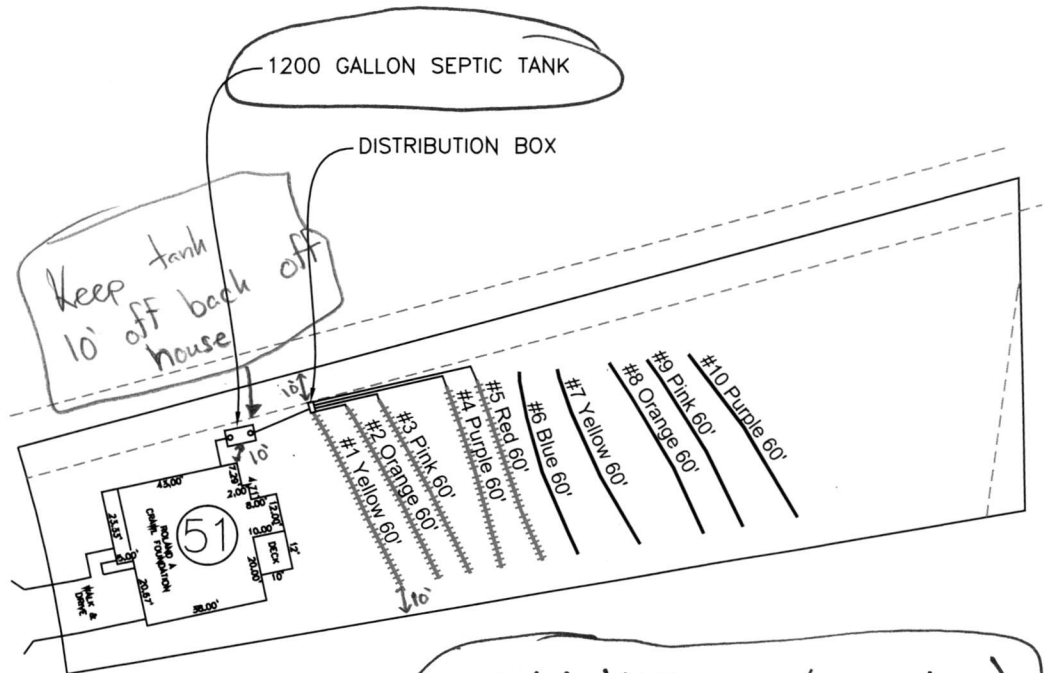
FIELD LAYOUT LINE NUMBER	COLOR	FIELD ELEVATION	LENGTH	DESIGN LENGTH
1	YELLOW	4.0	60	60
2	ORANGE	4.5	60	60
3	PINK	4.9	60	60
4	PURPLE	5.8	60	60
5	RED	7.4	60	60
6	BLUE	9.2	67	60
7	YELLOW	12.1	70	60
8	ORANGE	14.1	74	60
9	PINK	15.6	75	60
10	PURPLE	17.2	79	60

LOT 51 HAMPTON PARK S/D

4-BEDROOM ACCEPTED GRAVITY SYSTEM
WITH ENGINEERED FLOW REDUCTION
LINES 1-5, 300'
EZ-FLOW
LTAR 0.3

4-BEDROOM ACCEPTED GRAVITY REPAIR SYSTEM
WITH ENGINEERED FLOW REDUCTION
LINES 6-10, 300'
LTAR 0.3

FOR GENERAL USE NOT A SURVEY
PRELIMINARY NOT FOR CONSTRUCTION



Initial : HHHHHHH (Lines 1-5)
Repair : ——— (Lines 6-10)
MTD: 18"

0 30 60
SCALE:
1" = 60 ft.



Central Carolina Soil Consulting, PLLC
1900 South Main Street, Suite 110
Wake Forest, North Carolina 27587
Phone (919)569-6704 Fax (919)569-6703

Septic System Layout
Lot 51 Hampton Park Subdivision
Fuquay-Varina, Wake County
North Carolina

Job# : 2006
Drawn By : JR
Date : 1/29/2018
Revision: