

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 024022

PIN #: 1709737234

OP DATE: 0910511996

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 HEALTH DEPARTMENT WELL AND SEWAGE SITE, LOCATION PERMIT

ALL PERMITS VOID 60 MONTHS FROM DATE OF ISSUANCE

Pin # 1709.04737234 Project # 0953845

Tax Map No. _____ Parcel No. _____

Zoning Wake Township Barton's Creek

Owner/Contractor: Wayne Hamilton

Location/Address: (10824 Rondeau Woods Ct.) Six Forks N, (R) Durant, (L) Briggs-
field Rd, (L) 510, lot at end of LOS

Subdivision Name: Rondeau Woods

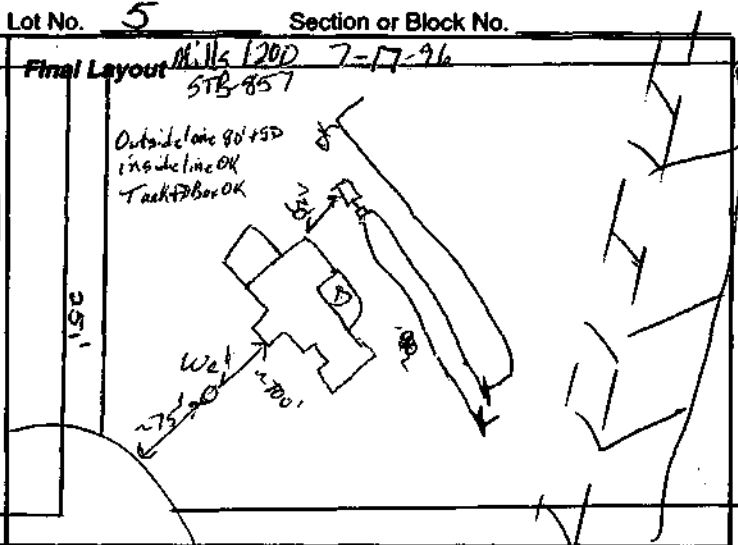
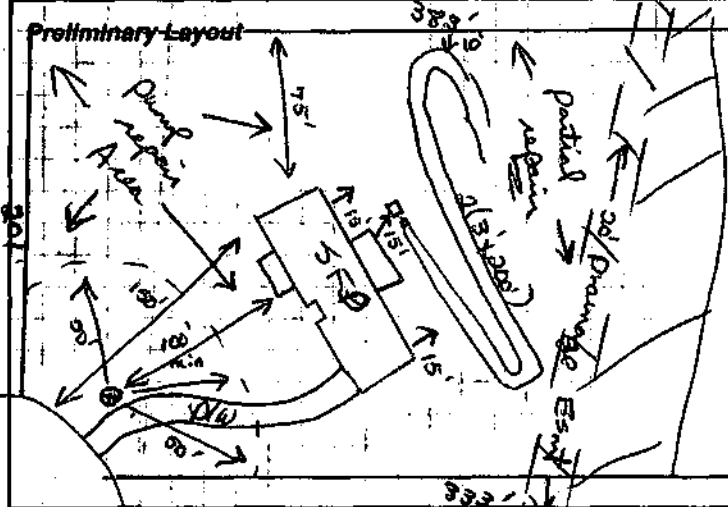
Improvement Permit

Well Permit No. C 24022

Operation Permit []

Date: 7-7-95

S.R. # 2007



Sewage System Specifications

Repair [] Original Permit No. _____
Garbage Disposal Unit Yes [] No [X]
House [X] Mobile Home [] Business []
No. of Bedrooms 4 Lot Area 2.17
Size of Tank 1200 gal.

Nitrification Line 1200' ± 2(3' x 200') sq. ft.
Depth of Stone: 12" [X] Max Depth of Trenches: 30 in.
Riser and Baffle Required [X] Pump Required []
Permit void if not in compliance with zoning regulations
Permits may be voided if site is altered or intended use changed
Layout by: Terry D. Chapell R.S.

*Comments: Keep system shallow! Keep well 100' from House to reserve some
repair area in front yard

Date: 9-5-96 Installed By: Triangle Pump & Tank Approved By: D. R. Parnell

Well System
Individual [X] Semi-Public [] Public []
New [X] Replacement [] Repair []
Fee Paid: Yes [X] No []
Construction Compliance Yes No
Site Approved [X] []
Well Head Approved [X] []
Grouting Approved [X] []
9-7-95 Ralph McDonald, S.
Date Inspected Sanitarian

Final Inspection

	Yes	No
Required Slab	[<u>X</u>]	[]
Chlorinated	[<u>X</u>]	[]
Required Certificate	[]	[]
Variance (Explain)	[]	[]
WCHD I.D. Affixed <u>6341</u>	[<u>X</u>]	[]
Sample Collected	[<u>X</u>]	[]

Comments: _____

Bacteriological Results
Initial Sample: Present Date: _____
* Re-Sample #1 absent Date: 10-23-96
* Re-Sample #2 _____ Date: _____
* Re-chlorination as required [X] Yes [] No
* Fees for all resamples
All checks payable to: Wake County Health Department

Well Installed By: S. Johnston
10-28-96 Ralph McDonald, S.
Date System Finalized Sanitarian

This report is based in part on information provided by the homeowner or his/her representative in the application submitted for this permit. The sanitarian is not responsible for false or misleading information contained in the application. The sanitarian 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 sanitarian warrants that the septic tank system will continue to function satisfactorily in the future or that the water supply will remain potable.

COPY TO HEALTH DEPARTMENT

3002.017 - 5/14/93