

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0019103

PIN #: 1607262370

OP DATE: 041111994

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.)

01080

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 # 1607.01262370 Project # 0941465

Tax Map No. _____ Parcel No. _____

Zoning WAKE Township Panther Branch

Owner/Contractor: William Barker

Location/Address: 6220 King Crofton Ct.

Released
4/11/94
DB

Improvement Permit

Well Permit No. **C 19103**

Operation Permit []

Date: November 20, 1993

Tax Map No.

Parcel No.

Subdivision Name: Hampton Ridge Lot No. 52 Section or Block No. _____ S.R. # _____

Preliminary Layout	Final Layout

Sewage System Specifications

Repair [] Original Permit No. _____

Garbage Disposal Unit Yes [] No ☒

House ☒ Mobile Home [] Business []

No. of Bedrooms 3 Lot Area _____

Size of Tank 1000 gal.

Comments: _____

Nitrification Line 2 (3' X 180') 1080 sq. ft.

Depth of Stone: 12" ☒ Max Depth of Trenches: 28 in.

Riser and Baffle Required ☒ 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: Robert G. Zulehner

Date: 4/11/94 Installed By: R. Eberhart Approved By: H. B. Phillips

Well System		
Individual []	Semi-Public []	Public ☒
New []	Replacement []	Repair []
Fee Paid: Yes []	No []	
Construction Compliance	Yes	No
Site Approved	[]	[]
Well Head Approved	[]	[]
Grouting Approved	[]	[]

Date Inspected	Sanitarian
Bacteriological Results	
Initial Sample: _____	Date: _____
* Re-Sample #1 _____	Date: _____
* Re-Sample #2 _____	Date: _____
* Re-chlorination as required [] Yes [] No	
* Fees for all resamples	

All checks payable to: **Wake County Health Department**

Final Inspection	Yes	No
Required Slab	[]	[]
Chlorinated	[]	[]
Required Certificate	[]	[]
Variance (Explain)	[]	[]
WCHD I.D. Affixed	[]	[]
Sample Collected	[]	[]

Comments: _____

Well Installed By: _____

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