

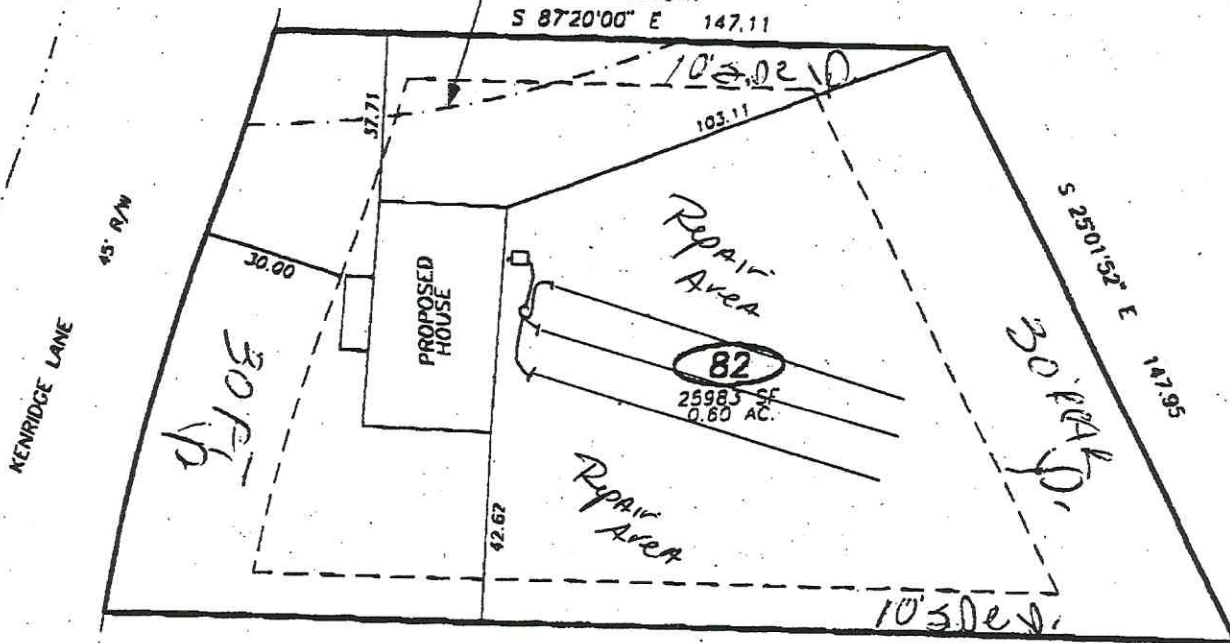
098 2060
D-8767

PRELIMINARY
THIS PLAT IS NOT FOR RECORDATION
OR CONVEYANCES

Zoning R-30 By mt
 Approve ✓ Date 12/22/19
 Revise _____ Use 1000
 Reject _____ MBL _____
 Front 30 Rear 30
 _____ 10 Corner -

~~FLOOD HAZARD SOIL BOUNDARY~~

S 87°20'00" E 147.11



S 87°20'00" E 246.24

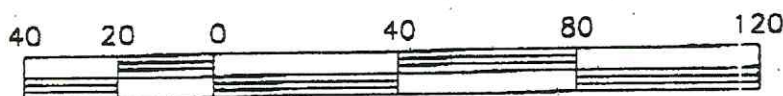
$$C_{tar} = .45$$

S. cell group I
Group I
Group I

83

LEGEND

- - EXISTING IRON PIPE
□ - COMPUTED CORNER
● - IRON PIPE SET



SCALE IN FEET

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0008767

PIN #: 0665810631

OP DATE: 0510711998

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

- ☐ ☐ ☐
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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

DRAINFIELD SIZE(SQ. FT.)

00720

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

MS

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#: D008767 STATUS: A APP DATE: 12/22/1997 BLDG PERMIT#: 0982060
APPLICANT: CANTERBURY COMMUNITIES DAY PHONE: (919) 622 - 2504
ADDRESS: 3807 S WILMINGTON ST FAX#: (000) 000 - 0000
CITY: RALEIGH STATE: NC ZIP: 27603
OWNER: CANTERBURY COMMUNITIES IN DAY PHONE: (919) 999 - 9999
ADDRESS: SAME FAX#: (000) 000 - 0000
CITY: RALEIGH STATE: NC ZIP: 27603
HD USE CD: 120 MODULAR HOME ORIG PERMIT#: REC?: Y
EXIST USE: TAX MAP#: 0885
BEDROOMS: 3 BSMT: N #EMPLOYEES: 0 WATER: C WASTEWATER: I GARB DISPOS: N
TOWNSHIP: 12 MIDDLE CREEK JURIS: WC ZON: R30 PIN: 0665.04 81 0631 000
SUBD#: S 000 000 00 SUBD NAME: FAIRVIEW LOT-SEC: 82 ACRE:
MPRV PRMT: ISSUED?: Y DATE: 01/13/1998 BY: VJM TYPE SYSTEM: II PUMP:
NSTR AUTH: ISSUED?: Y DATE: 01/13/1998 BY: VJM DATE EXPIRED: 01/13/2003
RECEIPT#: 0023419 FEE: 145.00 OP DATE: BY:
ATR SAMPL: REQ?: APPROVED?: DATE: PROPRIETARY SYS:
ST#: 8513 MI: DIR: NAME: KENRIDGE DIR: TYP: DR
IRECTIONS: 401 S TO L ON SR 1301 TO L ON SR 1370 TO L INTO
SUB GO TO KENRIDGE DR

IMPROVEMENT PERMIT

SIZE OF TANK 1000 ST PT GALS. TOTAL SQ. FT. 720 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 30 IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐

I.P. ISSUED BY

Unenid J Manzi RS

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: INSTALL ON CONTOUR USE NO STEP DOWNS IN CONSTRUCTION.

SIZE OF TANK 1000 ST PT GALS. TOTAL SQ. FT. 720 DEPTH OF STONE 12 IN. MAX. DEPTH LINE 30 IN.

NUMBER OF TRENCHES 3 LENGTH OF TRENCHES 80 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY

Unenid J Manzi RS

INSTALLED BY

Ricky Holland

CTR. I.D. #

INNOV. APPL. #: IWWS-

DATE 5/7/98

INSTALLATION APPROVED BY

Ron Dwyer R.S.

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

WELL LOG INFORMATION = DEPTH CASING DEPTH YIELD STATIC LEVEL

WELL CONTRACTOR REG.# PUMP CONTRACTOR REG.#

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☐ DATE EHS

WCHD ID # WELLHEAD APPROVED ☐ DATE EHS

NEGATIVE BACTERIOLOGICAL RESULTS ☐ DATE EHS

SYSTEM FINALIZED ☐ DATE 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.