

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0022908

PIN #: 0688492804

OP DATE: 0612311995

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.)

01000

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

B.W 9/16/14

WAKE COUNTY HEALTH DEPARTMENT WELL AND SEWAGE SITE, LOCATION PERMIT

ALL PERMITS VOID 60 MONTHS FROM DATE OF ISSUANCE

Pin # 0688.01 49 2804 Project # 095 2 184

Tax Map No. Wake Parcel No. Middle Creek

Zoning Wake Township Middle Creek

Owner/Contractor: Williams & Williams

Location/Address: 2020 Stone Pond Rd

off Ransdell Rd (US 4015 Rt SR 1392)

Subdivision Name: Ransdell Park

Lot No. 22

Section or Block No.

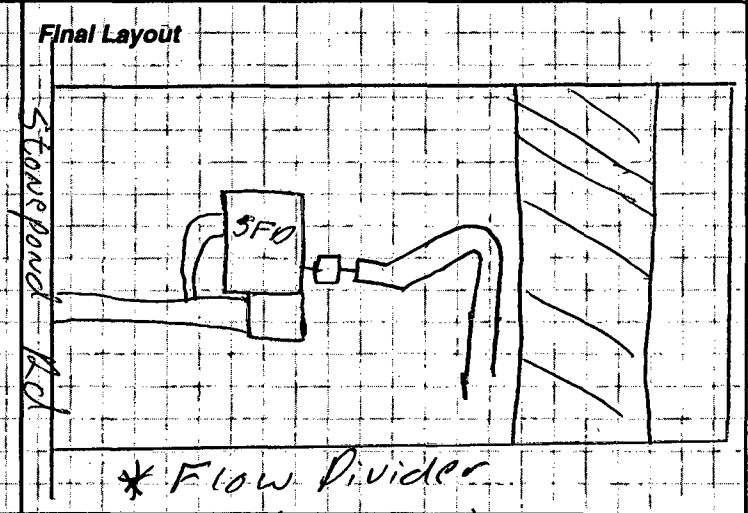
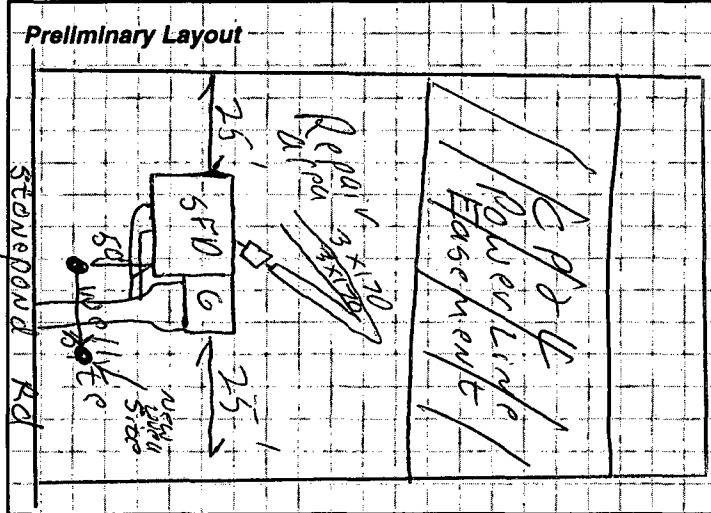
Improvement Permit

Well Permit No. C 22908

Operation Permit []

Date: 2-15-95

S.R. # 1392



Sewage System Specifications

Repair [] Original Permit No.

Garbage Disposal Unit Yes [] No [X]

House [X] Mobile Home [] Business []

No. of Bedrooms 3 Lot Area 1.14

Size of Tank 1000 gal.

*Comments: Set septic tank shallow, stubout shallow

Nitrification Line 2(3x170) 1000 sq. ft.

Depth of Stone: 12" Max Depth of Trenches: 28 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: Edward Jackson R.S.

Date: 5-17-95 Installed By: Tim King

Approved By: Edward Jackson R.S.

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] []

Date Inspected 4-20-95 Sanitarian Mrs. J. Casanova

Bacteriological Results

Initial Sample: 103 Date: 6-11-95

* Re-Sample #1 None Date: 6-23-95

* Re-Sample #2 None Date: 6-23-95

* Re-chlorination as required [] Yes [] No

* Fees for all resamples

All checks payable to: Wake County Health Department

Final Inspection

Required Slab [X] []

Chlorinated [X] []

Required Certificate [X] []

Variance (Explain) [X] []

WCHD I.D. Affixed [X] []

Sample Collected [X] []

Comments: * Laser Transit 570

Well Installed By: Ed. W. Spool

Date System Finalized 6-23-95

Sanitarian Dee Bigh

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 - 5/14/83

Tax Map No.

Parcel No.

Pin # 0688.01 49 2804