

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: **D 0 5 4 I 8 4**

PIN #: **I 6 0 7 8 9 0 4 I 4**

OP DATE: **0 5 / I 7 / 2 0 I 7**

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.)

0 I 3 0 5

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#: 0064184 STATUS: A APP. DATE: 11/24/2015 BLDG. PERMIT#: 0161675
 PIN: 1607 89 0414 000 TAX MAP: 0486 0000 RECORDED: Y ORIG. PERMIT#:
 TOWNSHIP: 15 PANTHER BRANCH JURISDICTION: WC ZONING: R30 SW DEVICE: N S#:
 APPLICANT: LOCKHART HOMES LLC (910) 384-8151
 5924-B BRAXTON RD HOPE MILLS, NC 28348
 USE: HD USE: 101A CONVENTIONAL ONE-FAMILY HOUSE EXIST USE:
 LTAR: 0.35 0.35 BEDROOMS: 5 BASEMENT: N #EMPLOYEES: 0
 SITE: ADDRESS: 1001 BELLEWOOD FARMS RD
 SUBDIVISION: BELLEWOOD FARMS LOT: 01 ACRES: 0.92 EASEMENT: N LOC: SYS:
 DIRECTION: HWY 50 S R 1010 L SAULS L BELLEWOOD FARMS

Well System: WATER: INDIVIDUAL - TYPE: NEW

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: WELL SITED 25' OFF HOUSE, 32' OFF FRONT AND SIDE PROPERTY LINES, AND 20' OFF OVERHEAD POWERLINE.

Operation Permit

DESIGN FLOW: 26.13 gal/min. ACTUAL FLOW: 28.7 DOSE VOLUME: _____ gal. INNOVATIVE LETTER: C. Morel
 INSTALLED BY: Cardenas Construction INSTALLATION APPROVED BY: C. Morel
 PROPRIETARY SYSTEM: EZ-Flow TYPE SYSTEM: III B
 COMMENTS: Y
 OPERATIONS PERMIT ISSUED? Y OP DATE: 5-17-17 BY: C. Morel

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: 8/5/16 Benchmark: _____ Rod reading: _____ Distance to Structure: _____
 ST: 1500 gals ID#: STB 35 D.O.M.: 2/17/16 Elev.: _____ Distance to Well: 83'
 PT: 1500 gals ID#: PT 365 D.O.M.: 1/8/15 Elev.: 5.7' Distance to P/L: 7'
 GT: _____ gals ID#: _____ D.O.M.: _____ Elev.: _____ Pretreatment: _____
 D-box/FD/PM elev.: 4.23 Supply Line: 90' ft. Pump/Ctrl Panel: _____ Filter: _____
 Line 1: 5.36' _____ Date: _____ Line 6: _____ Date: _____
 Line 2: 5.6' _____ Date: _____ Line 7: _____ Date: _____
 Line 3: 5.87' _____ Date: _____ Line 8: _____ Date: _____
 Line 4: _____ Date: _____ Line 9: _____ Date: _____
 Line 5: _____ Date: _____ Line 10: _____ Date: _____
 ETM1: 287485 H CCI: 1416 ETM2: _____ CC2: _____ OR: _____ AC: _____ WM: _____
 Notes: _____

5-17-17 PF Approved TAIT

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#: **D054184** STATUS: **A** APP. DATE: **11/24/2015** BLDG. PERMIT#: **0161675**
PIN: **1607 89 0414 000** TAX MAP: **0486 0000** RECORDED: **Y** ORIG. PERMIT#:
TOWNSHIP: **15 PANTHER BRANCH** JURISDICTION: **WC** ZONING: **R30** SW DEVICE: **N S#:**
APPLICANT: **LOCKHART HOMES LLC** (910) 364 - 6151
5924-B BRAXTON RD HOPE MILLS, NC 28348
HD USE: **101A CONVENTIONAL ONE-FAMILY HOUSE** EXIST USE: DESIGN FEE REQ?: **PAID?:**
LTAR: **0.35 0.35** BEDROOMS: **5** BASEMENT: **N** #EMPLOYEES: **0** FOUNDATION DRAIN: **P**
SITE: ADDRESS: **1001 BELLEWOOD FARMS RD**
SUBDIVISION: **BELLEWOOD FARMS** LOT: **01** ACRES: **0.92** EASEMENT: **N** LOC: **SYS:**
DIRECTION: **HWY 50 S R 1010 L SAULS L BELLEWOOD FARMS**

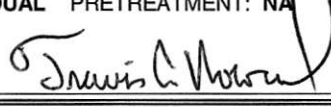
IMPROVEMENT PERMIT

[] As per GS 130A-335 (f), Improvement Permit is based on a Site Plan and is void Sixty (60) months from date of issuance.
[X] 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: **1500** gal. PUMP Tank: **1500** gal. GREASE TRAP: gal. SQ FT: **1305** STONE DEPTH: in. MAX DEPTH LINE: **24** in.
WASTEWATER: **INDIVIDUAL** SEWAGE: **DOMESTIC** TYPE SYSTEM: **III/B** PUMP: **Y** P/M: **N** LP: TD:
DAILY FLOW: **600** gal/day WATER: **INDIVIDUAL** PRETREATMENT: **NA** FILL: **DAF:** **DEEP:** **REDUCE35%:**

COMMENTS:

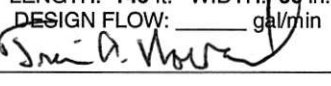
IP ISSUED? **Y** DATE: **12/07/2015** BY: (TAH)  PHONE#: **(919)-369-5974**

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

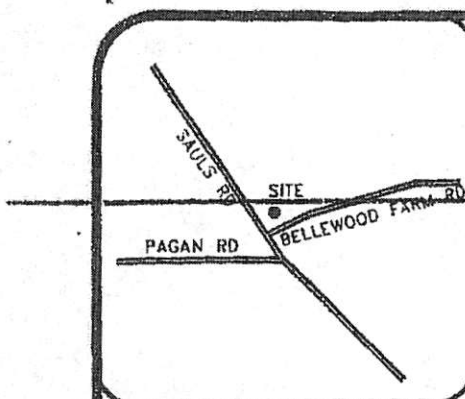
Contractors shall install system on contours, see attached site plan for wastewater system design and well location. No underground utilities, water lines or sprinkler systems may be located in the original system or repair areas. A septic tank filter with a riser for access is required. The wastewater 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: SEPTIC SYSTEM DESIGNED AS AN ACCEPTED STATUS SYSTEM WITH A 25% REDUCTION TAKEN IN DRAINLINE LENGTH. THERE WILL BE A 1500 GALLON SEPTIC TANK AND PUMP TANK. EFFLUENT WILL PUMP TO A MANITEE AND FEED 3-145'X 3' INNOVATIVE DRAINLINES. THE MAXIMUM TRENCH DEPTH IS 24". THE REPAIR IS LOCATED BELOW. THERE SHALL BE NO GRADING OR FILLING OF SOIL MATERIAL WITHIN THE INITIAL OR REPAIR SEPTIC AREAS. PLEASE CALL WITH QUESTIONS, CHANGES, OR CONCERNS. TAH

TANK SIZE: **1500** gal. PUMP TANK: **1500** gal. GREASE TRAP: gal. SQ FT: **1305** STONE DEPTH: in. MAX DEPTH LINE: **24** in.
MAINT: **N** OPER: **N** L/O: **Y** TRENCH#: **3** LENGTH: **145** ft. WIDTH: **36** in. DESIGNER:
SUBFIELDS: DESIGN HEAD PRESSURE: DESIGN FLOW: gal/min DOSE VOLUME: gal. PRETREATMENT: **NA**

CA ISSUED? **Y** DATE: **12/07/2015** BY: (TAH)  PHONE#: **(919)-369-5974**





VICINITY MAP (NTS)

LEGEND

PO=PORCH
P=PATIO
SW=SIDEWALK
DW=CONC DRIVEWAY
EB=ELECTRIC BOX
SCD=CLEANOUT
TP=TELEPHONE PEDESTAL
WM=WATER METER
AC=AIR CONDITIONING UNIT
BOC=BACK OF CURB
EOP=EDGE OF PAVEMENT

- IRON PIPE FOUND
- IRON PIPE SET
- NAIL SET

SETBACKS

FRONT 30'
SIDE 10'
REAR 25'
SIDE STREET 30'

THIS SURVEY IS OF AN EXISTING PARCELS OF LAND AND DOES NOT NEW STREET OR CHANGE AN EXIST

SHAWN T. RUMBERGER, PLS L-491

IMPERVIOUS AREA

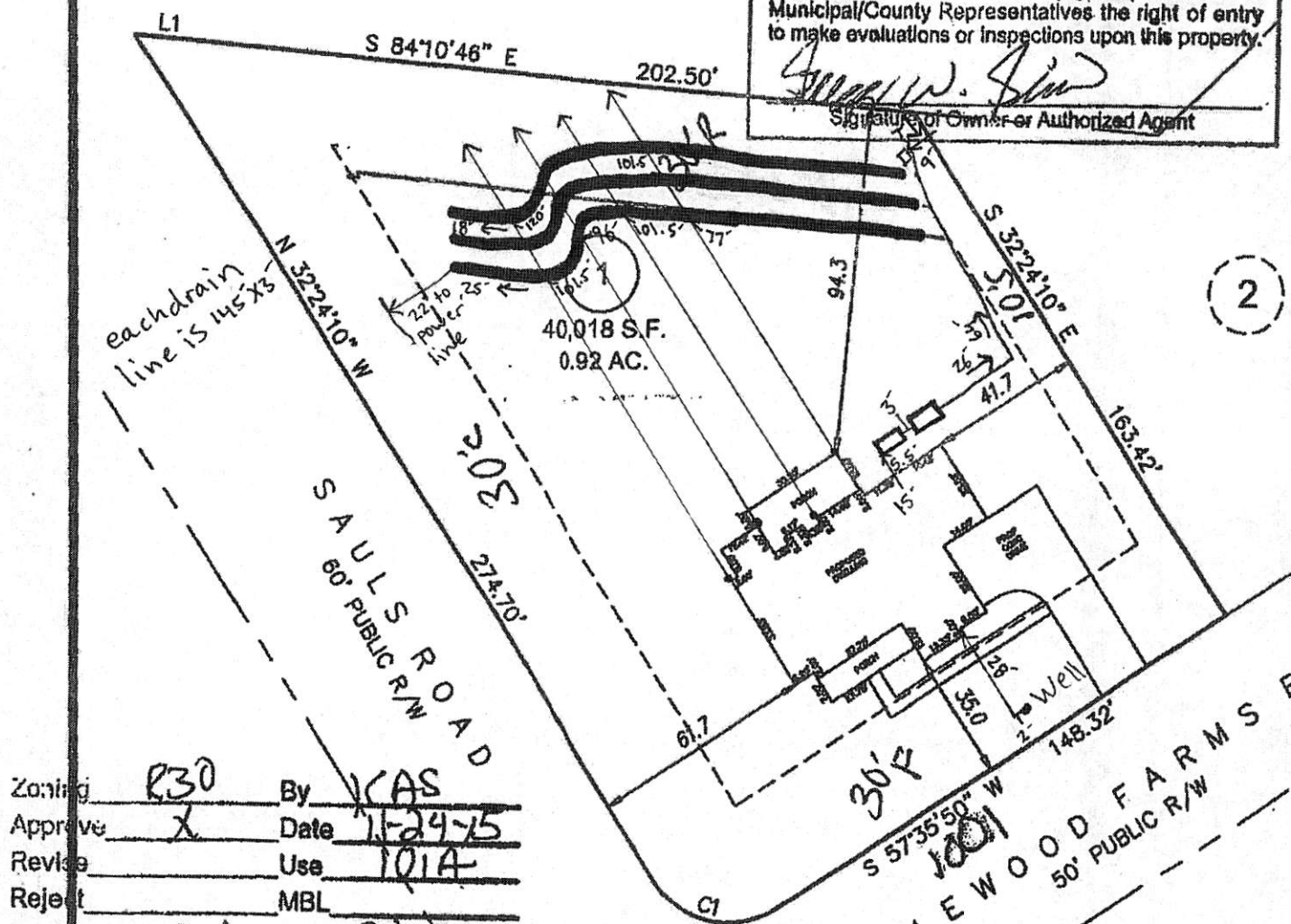
HOUSE 3,302 SQ.FT.
DRIVE 1,208 SQ.FT.
WALK 244 SQ.FT.
TOTAL 4,754 SQ.FT.

THIS MAP IS ONLY INTENDED FOR AND PURPOSES SHOWN. THIS MAP RECORDATION. NO TITLE REPORT I

AS BUILT

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 relocation 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.

Signature of Owner or Authorized Agent



Zoning R30 By KAS
Approve X Date 11-24-15
Revised Use 101A
Reject MBL
Front 30' Rear 30'
Side 10' Corner 30'

Comments: GRAPHIC SCALE



1 inch = 50 ft.

PRELIMINARY PLOT PLAN

CURVE TABLE			
CURVE	BEARING	LENGTH	R.
C1	N 77°24'10" W	35.36'	2

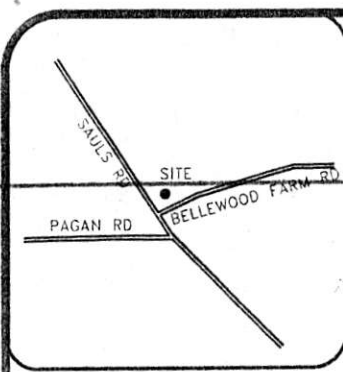
LINE TABLE		
LINE	BEARING	DIST
L1	N 84°44'49" W	17

PROJECT: 15-008
DRAWN BY: APS
SCALE: 1"=50'
DATE: 10-22-15

FOR
ON TOP BUILDING COMPANY
1001 BELLEWOOD FARMS ROAD
LOT 1 BELLEWOOD FARMS SUBDIVISION
PANTHER BRANCH TWP., WAKE CO., NC
B.M. 2001, PG. 838

ECLC
SURVEYING THE EAST COAST
227 FISH DRIVE
ANGIER, NC 27801

910.897.3257 ECLC.COM 910.8



LEGEND

- PO=PORCH
- P=PATIO
- SW=SIDEWALK
- DW=CONC DRIVEWAY
- EB=ELECTRIC BOX
- SC=CLEANOUT
- TP=TELEPHONE PEDESTAL
- WM=WATER METER
- AC=AIR CONDITIONING UNIT
- BOC=BACK OF CURB
- EOP=EDGE OF PAVEMENT
- IRON PIPE FOUND
- IRON PIPE SET
- NAIL SET

SETBACKS

- FRONT 30'
- SIDE 10'
- REAR 25'
- SIDE STREET 30'

THIS SURVEY IS OF AN EXISTING PARCEL OR PARCELS OF LAND AND DOES NOT CREATE A NEW STREET OR CHANGE AN EXISTING STREET.

SHAWN T. RUMBERGER, PLS L-4909 DATE

IMPERVIOUS AREA

- HOUSE 3,302 SQ.FT.
- DRIVE 1,208 SQ.FT.
- WALK 244 SQ.FT.

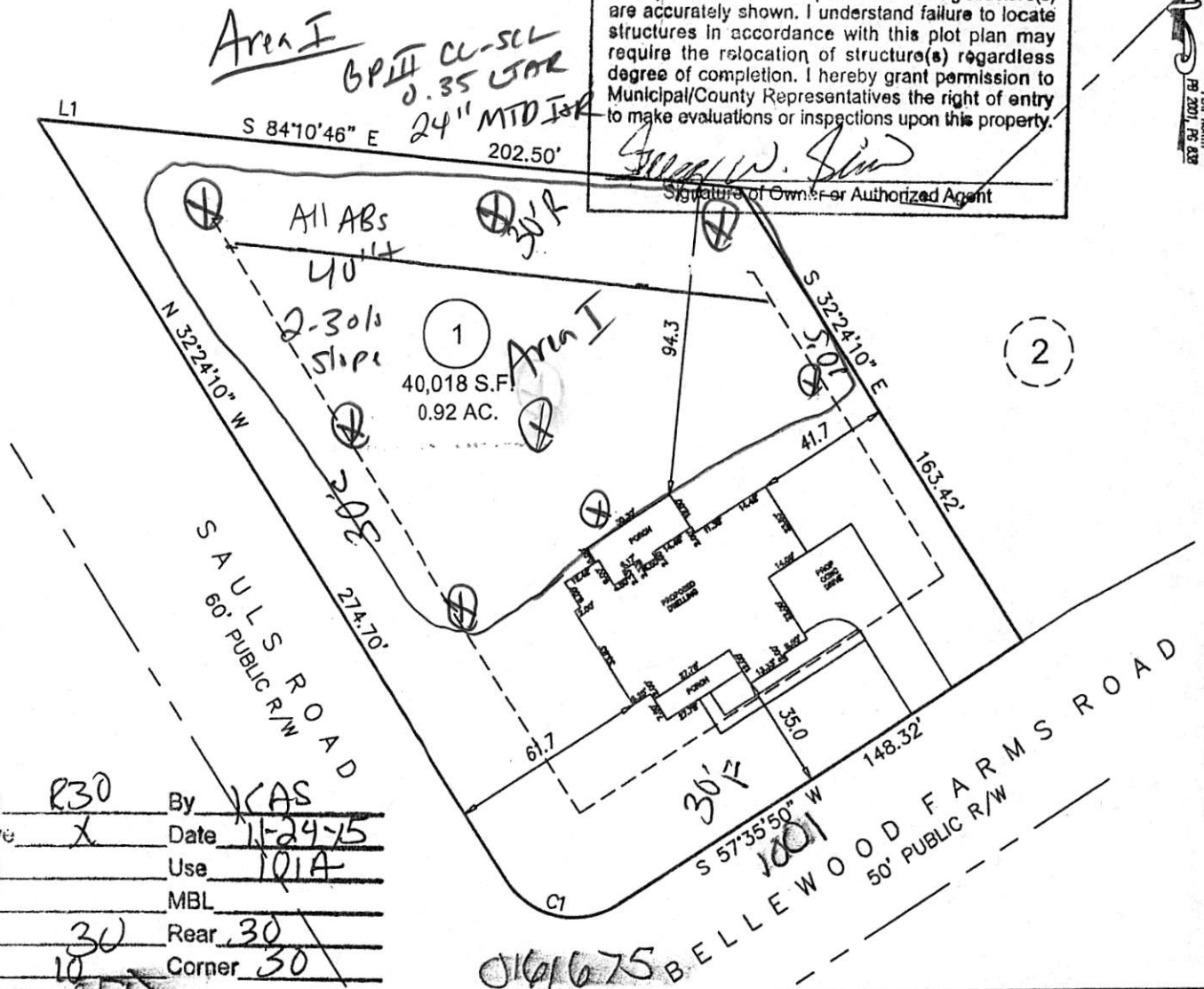
THIS MAP IS ONLY INTENDED FOR THE PARTIES AND PURPOSES SHOWN. THIS MAP IS NOT FOR RECORDATION. NO TITLE REPORT PROVIDED.

4,754 SQ.FT. *1607890419*

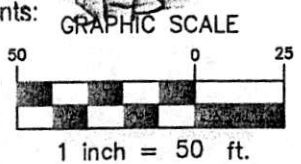
VICINITY MAP (NTS)

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 relocation 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.

Signature of Owner or Authorized Agent



Zoning R30 By KAS
 Approve X Date 11-24-15
 Revise _____ Use 101A
 Reject _____ MBL _____
 Front 30 Rear 30
 Side 10 Corner 30
 Comments: SFD



PRELIMINARY PLOT PLAN

CURVE TABLE				
CURVE	BEARING	LENGTH	RADIUS	ARC
C1	N 77°24'10" W	35.36'	25.00'	39.28'

LINE TABLE		
LINE	BEARING	DISTANCE
L1	N 84°44'49" W	17.98'

ECLS
 PROJECT: 15-008
 DRAWN BY: APS
 SCALE: 1"=50'
 DATE: 10-22-15

FOR
ON TOP BUILDING COMPANY
 1001 BELLEWOOD FARMS ROAD
 LOT 1 BELLEWOOD FARMS SUBDIVISION
 PANTHER BRANCH TWP., WAKE CO., NC
 B.M. 2001, PG. 838

ECLS
 SURVEYING THE EAST COAST
 227 FISH DRIVE
 ANGIER, NC 27501
 910.897.3257 ECLSINC.COM 910.897.2329 (FAX)

WAKE COUNTY DEPARTMENT OF ENVIRONMENTAL SERVICES

3 TAP PRESSURE MANI-TEE DESIGN

Name: Lockhart Homes LLC

P.I.N. #: 1607890414

D#: 54184

Address: 1001 Bellewood Farms Rd

Subdiv: Bellewood Farms

Lot#: 1

of BDR: 5 Daily Flow: 600 gal/day L.T.A.R.: 0.35 gal/day/sq.ft

Septic Tank: 1500 gals Pump Tank: 1500 gals Sq. Foot: 1305 Stone Depth:

Number of Taps: 3 Length of Trenches: 435 ft(See Tap Chart for Details)

Depth of Trenches: 24 in Manifold Length: 36 in

Manifold Diameter: 2in sch 40pvc Mani-Tee Tap Configuration: 6 in spacing 1 side(s) of manifold

Supply Line: length: 0 ft Diameter: 2 in sch 40pvc

Friction Loss + Fitting Loss: 1.13 ft(supply line length + 70' for fittings in pump tank)

Design Head: 3 ft Elevation Head: 6.00 ft

Total Head: 10.13 ft Pump to Deliver: 26.13 gals/min at 10.13 ft head

Dosing Volume: 212 gals,

Drawdown: 212 gals divided by 20 gals/in = 10.6 inches

Simplex Control Panel required; elapsed time meter and cycle counter required; Floats to be determined by type of pump tank used. A septic tank filter is required.

TAP CHART

Bench Mark	<u> </u>	is = 100.00	set at	<u> </u>				Design Head:	<u>3</u>	
Pump tank elev.	<u> </u>		100.00	Pump elev.	<u>95.00</u>			Manifold elev.	<u>101.00</u>	
line	color	rod read	Elevation	length	hole size	flow/tap	gal/day	trench area	LINE LTAR	
1	pink	<u> </u>	100.00	145	1/2in SCH 40	8.71	200.00	435	0.460	
2	orange	<u> </u>	100.00	145	1/2in SCH 40	8.71	200.00	435	0.460	
3	red	<u> </u>	100.00	145	1/2in SCH 40	8.71	200.00	435	0.460	
		total	feet =	435	gal/min =	26.13		LTAR =	0.35	
% of Dose Vol.		75		Des. Flow	600			(ltar + 5%)	0.37	
Dose Volume		212		Pump Run=	22.96			(ltar W/ INOV)	0.47	
Dose Pump Time		8.12		Tank Gal/IN	20			(ltar + 5%)	0.49	
Drawdown in Inches		10.6		Elev. Head	6.00					
Supply Line Length		<u> </u>								
Comments:	<u> </u>									
	<u> </u>									

Hydraulic Profile

Manifold Elevation	101.00	0
Pump tank elev.	100.00	2
Pump elev.	95.00	0