

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0015590

PIN #: 0760293758

OP DATE: 0810911980

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.)

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

B.W 7/10/14

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#: D015590 STATUS: A APP DATE: 08/13/1999 BLDG PERMIT#: 0000620
APPLICANT: WATKINS BUILDING, INC. DAY PHONE: (919) 552 - 8661
ADDRESS: P.O. BOX 337 FAX#: (999) 999 - 9999
CITY: FUQUAY-VARINA STATE: NC ZIP: 27526
OWNER: JOHN S ROSE BUILDING INC DAY PHONE: (919) 233 - 9193
ADDRESS: 4917 WATER EDGE DR FAX#: (919) 233 - 9791
CITY: RALEIGH STATE: NC ZIP: 27603
HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?: Y
EXIST USE: TAX MAP#: 0697 0000
BEDROOMS: 4 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOS: N
TOWNSHIP: 18 SWIFT CREEK JURIS: WC ZON: R30 PIN: 0760.01 29 3758 000
SUBD#: S 000 000 00 SUBD NAME: GRENADIER LOT-SEC: 3 ACRE: 0.69
IMPRV PRMT: ISSUED?: Y DATE: 11/08/1999 BY: BCW TYPE SYSTEM: III G PUMP:
CNSTR AUTH: ISSUED?: Y DATE: 02/24/2000 BY: BCW MAINT: N OPER: N
RECEIPT#: 0045814 FEE: 290.00 OP DATE: BY:
WATR SAMPL: REQ?: Y APPROVED?: DATE: PROPRIETARY SYS:
ST#: 4004 MI: DIR: NAME: FRONTENAC DIR: TYP: CT
DIRECTIONS: TRYON RD LEFT HOLLY SPRINGS RD RIGHT ON SR1010
LEFT INTO SUBDIVISION

IMPROVEMENT PERMIT

SIZE OF TANK 1200 ST PT GALS. TOTAL SQ. FT. 1200 DEPTH OF STONE INNOV IN. MAX. DEPTH LINE 24 IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐ I.P. ISSUED BY [Signature]

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 Department of Environmental Services and an Operation Permit issued.

OTHER CONDITIONS: DO NOT USE FOUNDATION DRAIN ON HOUSE. INNOVATIVE SYSTEM REQUIRED DUE TO SPACE LIMITATIONS. 25% REDUCTION ALREADY TAKEN.

SIZE OF TANK 1200 ST PT GALS. TOTAL SQ. FT. 1200 DEPTH OF STONE INNOV IN. MAX. DEPTH LINE 24 IN.
ST FILTER REQUIRED ☒ NUMBER OF TRENCHES 3 LENGTH OF TRENCHES 133 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY [Signature] INSTALLED BY [Signature] CTR. I.D. # _____
SEPTIC TANK FILTER USED _____
INNOV. APPRL. #: IWWS-_____ DATE 8/9/00 INSTALLATION APPROVED BY [Signature]

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

WELL LOG INFORMATION = DEPTH 280 CASING DEPTH 85 YIELD 40 STATIC LEVEL 20
WELL CONTRACTOR [Signature] REG.# 479 PUMP CONTRACTOR [Signature] REG.# 781

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☒ DATE 3-13-00 EHS [Signature]
WCHD ID # 9785 WELLHEAD APPROVED ☒ DATE 5-18-00 EHS [Signature]
NEGATIVE BACTERIOLOGICAL RESULTS ☒ DATE 5-18-01 EHS [Signature]
SYSTEM FINALIZED ☒ DATE 5-21-01 EHS [Signature]

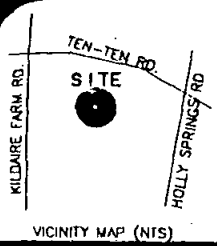
COMMENTS: _____

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.

Pipe y/wall Top Needs to be
SEALED

417-4553

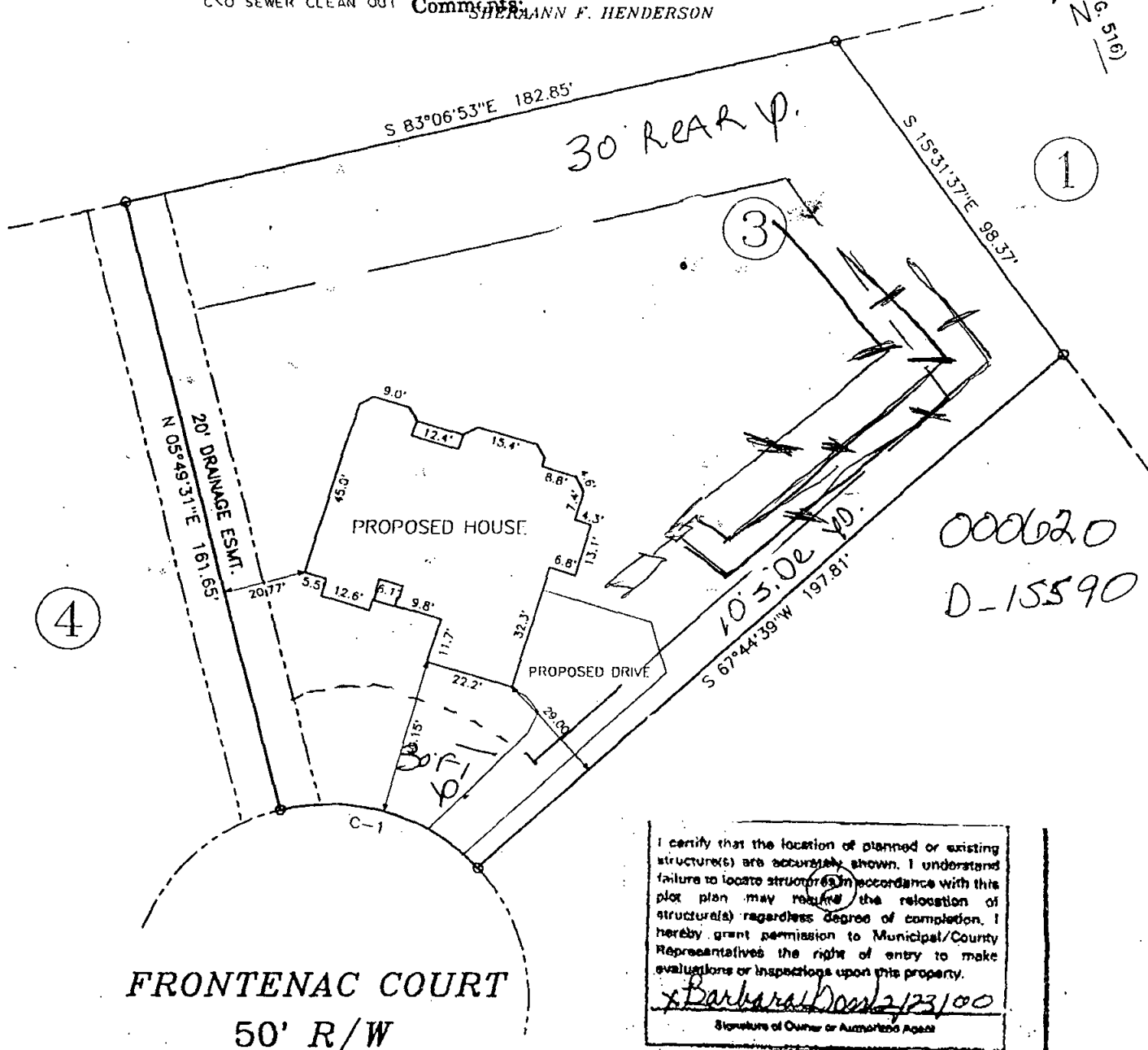
AS BUILT



LEGEND
 EIP EXISTING IRON PIPE
 PP POWER POLE
 W/M WATER METER
 TB TELEPHONE BOX
 IPS IRON PIPE SET
 CPBL TRANSFORMER
 CTV CABLE TV
 L. POLE LIGHT POLE
 OHPL OVERHEAD POWER LINE
 F.E.S. FLARED END
 RCP REINFORCED CONC. PIPE
 B.O.C. BACK OF CURB
 F.H. FIRE HYDRANT
 CNO SEWER CLEAN OUT

NOTE: SUBJECT PROPERTY IS ☒ NOT ☐ LOCATED IN A SPECIAL FLOOD HAZARD AREA SEE F.E.M.A. FLOOD INSURANCE RATE MAP
 Zoning R-20 By MD
 Approved 2/23/00 Date 2/23/00
 Effective Date 101
 Reject MBL
 Front 30 Rear 30
 Side 10 Corner —
 Comments: SHERMANN F. HENDERSON

MAG. NORTH (BM. 1999, PG. 516)



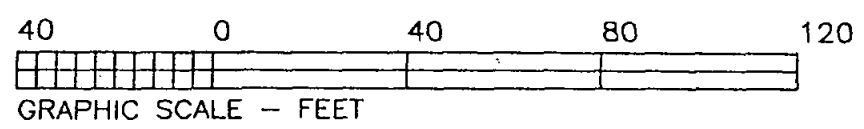
I certify that the location of planned or existing structure(s) are accurately shown. I understand failure to locate structure(s) in accordance with this plot plan may require the relocation of structure(s) regardless degree of completion. I hereby grant permission to Municipal/County Representatives the right of entry to make evaluations or inspections upon this property.

Barbara Don 2/23/00
 Signature of Owner or Authorized Agent

NOTE: SHOWN IS LOT 3 OF PHASE 1, GRENADIER S/D. REF: BM. 1999, PG. 516

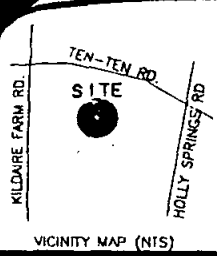
AREA = 0.69 AC.
 4004 FRONTENAC COURT

CURVE	RADIUS	LENGTH	CHORD	CH. BEARING
C-1	50.00'	54.03'	51.44'	S 53°12'55"E



Case 02/As Bldg

CA DINGRAM



- LEGEND
- EIP EXISTING IRON PIPE
 - PP POWER POLE
 - W/M WATER METER
 - TB TELEPHONE BOX
 - IPS IRON PIPE SET
 - CPBL TRANSFORMER
 - CTV CABLE TV
 - L POLE LIGHT POLE
 - OHPL OVERHEAD POWER LINE
 - F.E.S. FLARED END
 - RCP REINFORCED CONC. PIPE
 - B.O.C. BACK OF CURB
 - F.H. FIRE HYDRANT
 - C/O SEWER CLEAN OUT

NOTE: SUBJECT PROPERTY IS ☒ NOT ☐ LOCATED IN A SPECIAL FLOOD HAZARD AREA SEE F.E.M.A. FLOOD INSURANCE RATE MAP

Zoning 1200 By MD

Approved 2/23/00 Date 2/23/00

Effective Date 101

Revise Use

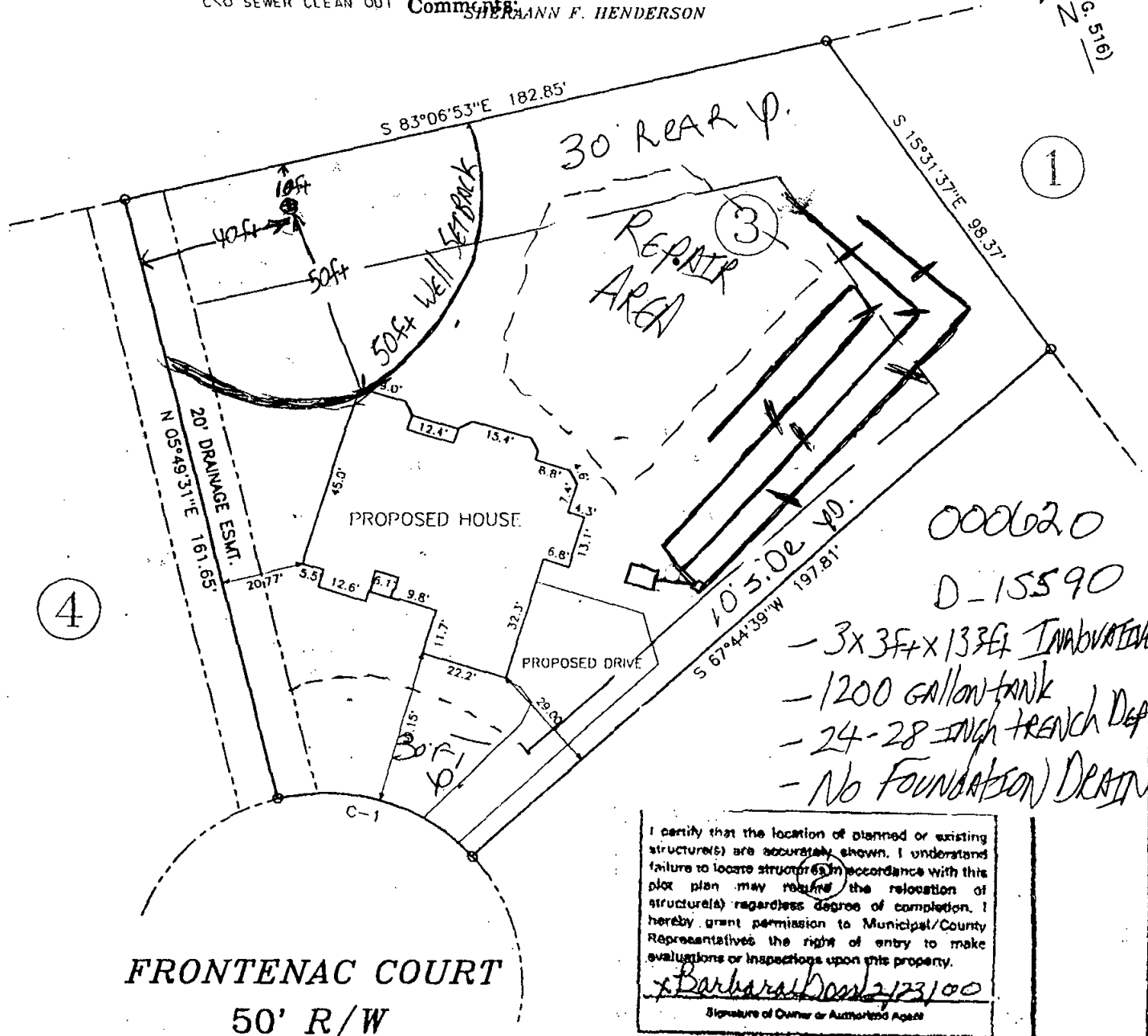
Reject MBL

Front 30 Rear 30

Side 10 Corner

Comments: SHERANN F. HENDERSON

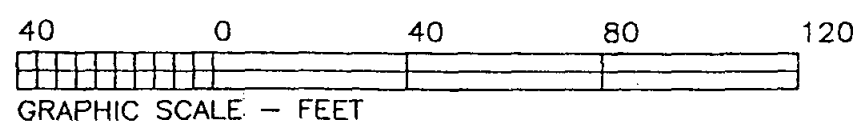
MAG. NORTH (B.M. 1990, PG. 516)



NOTE: SHOWN IS LOT 3 OF PHASE 1, GRENADIER S/D. REF: BM. 1999, PG. 516

AREA = 0.69 AC.
4004 FRONTENAC COURT

CURVE	RADIUS	LENGTH	CHORD	CH. BEARING
C-1	50.00'	54.03'	51.44'	S 53°12'55"E





WAKE COUNTY

Human Services

Environmental Health Division

I Richard Watkins hereby request the chamber system or polystyrene

aggregate system called E-2 Lay to be used in my sewage

disposal system. I understand that I will be granted a 25% reduction in the amount of

required drainfield for my property. My property is located at 400A

Frontenac Ct. Apex

Richard Watkins Owner

8/9/00 Date

D-015590

(919) 856-7400- Fax: (919) 856-7407

336 Fayetteville Street Mall P.O. Box 550 Raleigh, NC 27602

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater
P.O. Box 29578 - Raleigh, N.C. 27626-0578-Phone (919) 733-3221

WELL CONSTRUCTION RECORD

DRILLING CONTRACTOR: Grady PooleDRILLER REGISTRATION #: 298STATE WELL CONSTRUCTION PERMIT: 298D015590

1. WELL USE (Check Applicable Box): Residential ☒ Municipal ☐ Industrial ☐ Agriculture ☐ Monitoring ☐
Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use: _____

2. WELL LOCATION: (Show sketch of the location below)

Nearest Town: Wiley Springs County: WakeLot # 3, Linnardin
(Road, Community, or Subdivision and Lot No.)

3. OWNER
- Watkins, Blay Co.

ADDRESS P.O. Box 339Highway 100 (Street or Route No.)
Wake State27526 Zip Code

4. DATE DRILLED
- 3-13-00

5. TOTAL DEPTH
- 280

6. CUTTINGS COLLECTED YES
- ☐
- NO
- ☒

7. DOES WELL REPLACE EXISTING WELL? YES
- ☐
- NO
- ☒

8. STATIC WATER LEVEL Below Top of Casing:
- 20
- FT.

(Use "+" if Above Top of Casing)

9. TOP OF CASING IS
- 15
- FT. Above Land Surface*

* Casing Terminated at/or below land surface is illegal unless a variance is issued in accordance with 15A NCAC 2C .0118

10. YIELD (gpm):
- 40
- METHOD OF TEST
- Blow

11. WATER ZONES (depth):
- 140-270

12. CHLORINATION: Type
- HTH
- Amount
- 1/2 lb

13. CASING:

From	To	Depth	Diameter	Wall Thickness or Weight/Ft.	Material
0	85	Ft.	6 1/4	188	Galv
From	To	Ft.			
From	To	Ft.			

14. GROUT:

From	To	Depth	Material	Method
0	20	Ft.	Portland Sand	Grout
From	To	Ft.		

15. SCREEN:

From	To	Depth	Diameter	Slot Size	Material
From	To	Ft.			
From	To	Ft.			
From	To	Ft.			

16. SAND/GRAVEL PACK:

From	To	Depth	Size	Material
From	To	Ft.		
From	To	Ft.		

17. REMARKS:

DEPTH

From To

0 2

3 23

23-85

85-280

DRILLING LOG

Formation Description

Topsoil

Clay

Sand

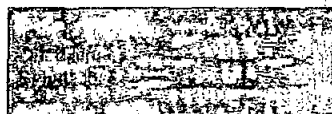
Stone Rock

LOCATION

(Show direction and distance from at least two State

Roads, or other map points.)

I DO HEREBY CERTIFY THAT THIS WELL WAS CONSTRUCTED IN ACCORDANCE WITH 15A NCAC 2C .0118 CONSTRUCTION STANDARDS, AND THAT A COPY OF THIS RECORD HAS BEEN PROVIDED TO THE OWNER.

#2765 Feltner

SIGNATURE OF CONTRACTOR OR AGENT

Submit original to Division of Water Quality and copy to well

DATE

3-13-00

GW-1 REV. 1/78