

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 2 5 3 5 5

PIN #: 1 7 7 3 2 9 5 7 0 9

OP DATE: 0 1 1 2 1 1 2 0 0 3

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 1 2 0 0

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#: D025355 STATUS: A APP. DATE: 09/06/2002 BLDG. PERMIT#: 0030614
PIN: 1773.01 29 5709 000 TAX MAP: 0561 0073 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 10 MARKS CREEK JURISDICTION: WC ZONING: R40
APPLICANT: TURPIN ASSOCIATES INC
PO BOX 91
FALCON, NC 28342
USE: (910) 980 - 1280
HD USE: 112 MOBILE HOME
EXIST USE:
DISPOSAL: BEDROOMS: 3 BASEMENT: N #EMPLOYEES: 0
SITE: ADDRESS: 6304 PETUNIA DR
SUBDIVISION: B. COFFEY PROP. LOT: 15 ACRES: 5.91
DIRECTION: 64 N TR EAGLE ROCK, CROSS RR TRACKS GO 2MI.
TR PETUNIA

Well System: WATER: INDIVIDUAL - TYPE: NEW

WELL LOG INFORMATION: DEPTH: 190 CASING DEPTH: 43 YIELD: 3.0 STATIC LEVEL: 25
WELL CONTRACTOR: JR'S WELL REG.# PUMP CONTRACTOR: REG.# 687
Construction Compliance GROUT APPROVED ☒ DATE 1/7/03 EHS Eric Green
WELLHEAD APPROVED ☒ DATE 1/16/03 EHS Eric Green
SYSTEM FINALIZED ☐ DATE EHS
COMMENTS: # 11616

Operation Permit

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER: _____

INSTALLED BY: Harold Strickland

INSTALLATION APPROVED BY: Aaron L. Ehlkenes II

PROPRIETARY SYSTEM: _____

FILTER NO: _____

COMMENTS: _____

OPERATIONS PERMIT ISSUED? Y

OP DATE: 01/21/03

BY: Aaron L. Ehlkenes II

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.

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TR PETUNIA

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: _____ gal. SQ FT: 1200 STONE DEPTH: 12 in. MAX DEPTH LINE: 24 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: II A PUMP: N P/M: N
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: INDIVIDUAL

COMMENTS:

IP ISSUED? Y DATE: 12/23/2002 BY: (ELC) Everett L. Luster PHONE#: 356-5380

AUTHORIZATION FOR WASTEWATER/WATER SYSTEM CONSTRUCTION

VOID SIXTY (60) MONTHS FROM DATE OF ISSUANCE

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. **OTHER CONDITIONS:**

TANK SIZE: 1000 gal. PUMP TANK: _____ gal. SQ FT: 1200 STONE DEPTH: 12 in. MAX DEPTH LINE: 24 in.
MAINT: N OPER: N L/O: N TRENCH#: 4 LENGTH: 100 ft. WIDTH: 36 in. DESIGNER: _____
SUBFIELDS: _____ DESIGN HEAD PRESSURE: _____ DESIGN FLOW: _____ gal/min DOSE VOLUME: _____ gal.

CA ISSUED? Y DATE: 01/21/2003 BY: (ALE) Aaron L. Elanko Jr PHONE#:

A3 Built

12-30-02
M: 45-1000
6TB-858

H15-03
#11 SM
1/2/03
3300 CSI
JDL

NOW OR FORMERLY HALL PROPERTY

NAIL
AT BASE
BENT EIP

COMPUTED

15' side

EIP

N 02°12'11" E

N 02°12'11" E

332.45'

257.19'

S 89°40'04" E

838.24'

15' side

Lot 16

5.91 acres

257560.38 sq ft

TOTAL INCLUDING
EASEMENT

BOM 1976 PG 159

N 87°48'08" W

428.88'

IPS

S 00°05'29" W

271.02'

N 87°13'04" W

441.33'

EIP

EIP

S 87°21'31" E

313.85'

Road 337.15'

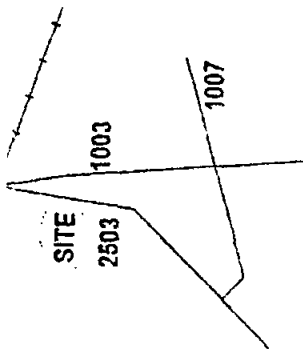
LOT 16
BOM 1976 PG 1

S 87°48'08" E

417.23'

419.12'

" = 100'



VICINITY MAP NOT TO SCALE

0030614
 25355
 1459
 1100
 2559
 257439.60
 Total - 00990

(William X Heber) 1000 PG 159
 Gerald C. Gutzwiller & Robert F. Fittell

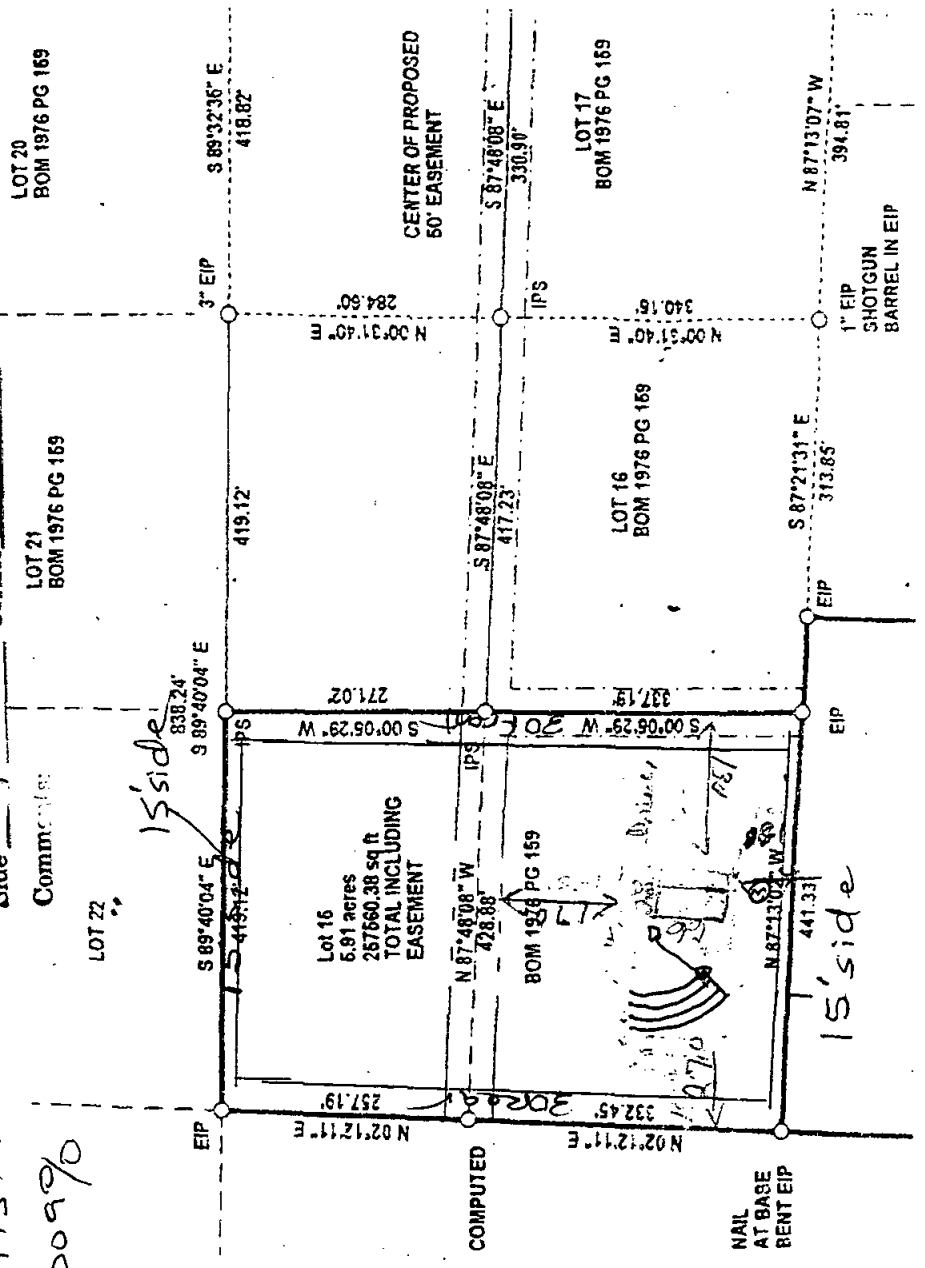
Attn: Everett
 Coates

Revised

Zoning R4D
 Approved 11/22/03
 Reviser Sept
 Reject 30
 Front 30
 Side 15
 Corner 30
 MBL 30
 Rear 30
 Comment: LOT 21 BOM 1976 PG 159

I hereby certify that the location of planned structure(s) are accurately shown. I understand the authority 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
 Blake T. Sullivan



NOW OR FORMERLY HALL PROPERTY

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WELL CONSTRUCTION RECORD

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section

WELL CONTRACTOR (INDIVIDUAL) NAME (print) Jimmy Flowers CERTIFICATION # 2519WELL CONTRACTOR COMPANY NAME J.R.'s Well Service PHONE # (919) 334-7332STATE WELL CONSTRUCTION PERMIT# D-025355 ASSOCIATED WQ PERMIT# _____
(if applicable) (if applicable)1. WELL USE (Check Applicable Box): Residential ☒ Municipal/Public ☐ Industrial ☐ Agricultural ☐
Monitoring ☐ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use _____

2. WELL LOCATION:

Nearest Town: Knightdale County Wake
Martin Pond Rd.
(Street Name, Numbers, Community, Subdivision, Lot No., Zip Code)Topographic/Land setting
☐ Ridge ☐ Slope ☐ Valley ☒ Flat
(check appropriate box)
Latitude/longitude of well location _____3. OWNER: Turpin Associates Inc.Address P.O. Box 91
(Street or Route No.)
Falcon, NC 28342
City or Town State Zip Code(degrees/minutes/seconds)
Latitude/longitude source: ☐ GPS ☐ Topographic map
(check box)

DEPTH		DRILLING LOG
From	To	Formation Description
0 - 2		Topsoil
2 - 15		clay
15 - 22		Boulder
22 - 30		clay
30 - 35		Boulder
35 - 38		clay
38 - 190		Gneiss

Area code- Phone number 64. DATE DRILLED 1-8-035. TOTAL DEPTH: 190'6. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☒7. STATIC WATER LEVEL Below Top of Casing: 25 FT.

(Use "+" if Above Top of Casing)

8. TOP OF CASING IS 1 FT. Above Land Surface*

*Top of casing terminated at/or below land surface requires a variance in accordance with 15A NCAC 2C.0118.

9. YIELD (gpm): 3 METHOD OF TEST Timed10. WATER ZONES (depth): 17511. DISINFECTION: Type HTH Amount .1402

12. CASING: _____ Wall Thickness _____

From	To	Depth	Diameter	or Weight/Ft.	Material
From <u>0</u>	To <u>43</u>	Ft. <u>6 1/4</u>			<u>Gal.</u>
From _____	To _____	Ft. _____			
From _____	To _____	Ft. _____			

13. GROUT: _____ Material _____ Method _____

From	To	Depth	Material	Method
From <u>0</u>	To <u>20</u>	Ft. <u>Quickrete</u>		<u>Handmix</u>
From _____	To _____	Ft. _____		

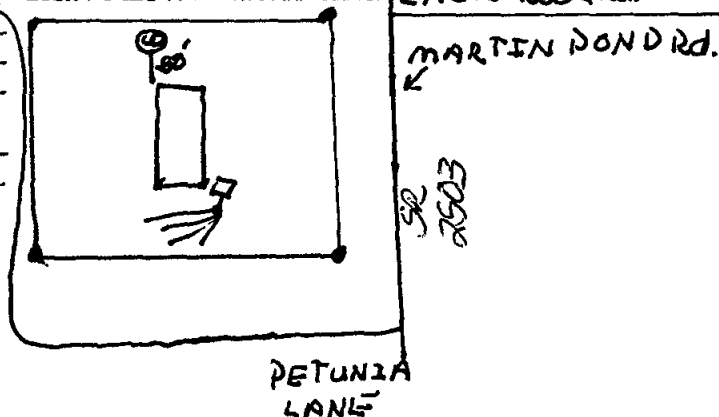
14. SCREEN: _____ Diameter _____ Slot Size _____ Material _____

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

15. SAND/GRAVEL PACK: _____

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

16. REMARKS: _____

LOCATION SKETCH
Show direction and distance in miles from at least two State Roads or County Roads. Include the road numbers and common road names.

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

Rodney Gordon/J.R.'s Well Ser./Certification #2477 1-8-03
SIGNATURE OF PERSON CONSTRUCTING THE WELL DATE