

Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #:

PIN #:

OP DATE:

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.)

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

TW

WAKE COUNTY DEPARTMENT OF ENVIRONMENTAL SERVICES WELL AND SEWAGE SITE LOCATION PERMITNO 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#: D040249 STATUS: A APP. DATE: 06/25/2007 BLDG. PERMIT#: 0074493
PIN: 0890.03 10 9473 000 TAX MAP: 0 RECORDED: Y ORIG. PERMIT#:
TOWNSHIP: 02 BARTON'S CREEK JURISDICTION: WC ZONING: R40W
APPLICANT: ANTHONY PARSONS
6205 AUTREY CT.
RALEIGH, NC 27615
(919) 846-3404
USE: HD USE: 101 ONE-FAMILY HOUSE
EXIST USE:
DISPOSAL: BEDROOMS: 3 BASEMENT: Y #EMPLOYEES: 0
SITE: ADDRESS: 6205 AUTREY CT
SUBDIVISION: ROSEINGTON LOT: 1 ACRES: 2.06
DIRECTION: CREEDMOOR (50) NO OF I-540 PAST NORWOOD TO
EGLANTYNE CT TL TO AUTREY CT ON RT

Well System: WATER: COMMUNITY - TYPE:

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: COMMUNITY WATER.

Operation Permit

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

INSTALLED BY: _____ INSTALLATION APPROVED BY: JJA
PROPRIETARY SYSTEM: _____ FILTER NO: _____
COMMENTS: _____

OPERATIONS PERMIT ISSUED? ☒ OP DATE: 1-28-08 BY: JJA

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: 1-28-08 Benchmark: _____ Rod reading: _____ Distance to Structure: _____
ST: 1000 gals ID#: _____ D.O.M.: _____ Elev.: _____ Distance to Well: _____
PT: 1000 gals ID#: _____ D.O.M.: _____ Elev.: _____
D-box/FD/PM elev.: _____ Supply Line: _____ ft. Pump/Control Panel: _____
Line 1: _____ Date: _____ Line 6: _____ Date: _____
Line 2: _____ Date: _____ Line 7: _____ Date: _____
Line 3: _____ Date: _____ Line 8: _____ Date: _____
Line 4: _____ Date: _____ Line 9: _____ Date: _____
Line 5: _____ Date: _____ Line 10: _____ Date: _____
Distance to P/L: _____ Notes: _____

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DIRECTION: CREEDMOOR (50) NO OF I-540 PAST NORWOOD TO
EGLANTYNE CT TL TO AUTREY CT ON RT

IMPROVEMENT PERMIT

TANK SIZE: 1000 gal. PUMP Tank: 1000 gal. SQ FT: 900 INNOVATIVE MAX DEPTH LINE: 27 in.
WASTEWATER: INDIVIDUAL SEWAGE: DOMESTIC TYPE SYSTEM: III G PUMP: Y P/M: N
DAILY FLOW: 360 gal/day DESIGN FEE REQ?: PAID?: WATER: COMMUNITY

COMMENTS: SLOPE CORRECTION: 18" DEPTH ON LOW SIDE OF TRENCH; 27" DEPTH ON HIGH SIDE OF TRENCH.

IP ISSUED? Y DATE: 07/06/2007 BY: (AYA) Alan Alcock PHONE#: 868-2560

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. 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:**

INSTALL (3) - 3' WIDTH X 100' LENGTH LINES; 25% REDUCTION SYSTEM - REDUCTION ALREADY TAKEN; 18" TRENCH DEPTH ON LOW SIDE OF TRENCH ; 27" DEPTH ON HIGH SIDE OF TRENCH; INSTALL ON CONTOUR AND MAINTAIN ALL SETBACKS; TRENCH WALLS SHOULD BE SCARIFIED; RE-FLAG SYSTEM AND PROPERTY LINES (IF NECESSARY) PRIOR TO INSTALLATION; SYSTEM IS PUMP TO D-BOX; CALL THIS OFFICE WITH ANY QUESTIONS PRIOR TO INSTALLATION.

TANK SIZE: 1000 gal. PUMP TANK: 1000 gal. SQ FT: 900 INNOVATIVE MAX DEPTH LINE: 27 in.
MAINT: N OPER: N L/O: Y TRENCH#: 3 LENGTH: 100 ft. WIDTH: 36 in. DESIGNER:
SUBFIELDS: _ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _ gal/min DOSE VOLUME: _ gal.

CA ISSUED? Y DATE: 07/06/2007 BY: (AYA) Alan Alcock PHONE#: 868-2560

7/6/07
542

CA

100 year back
Water easement
Elev. 324.85

CA: 1000 Gal. ST; 1000 Gal PT
18" Depth on low side of trench
27" Depth on high side of trench
Initial: (3)-100' Lines; 25% reduction
system - reduction already taken;
Lines (B, O, B)

Permit # 0074493
DH: 046249

Zoning R-30 By DM
Approve Date 6/25/07
Revise Use 101
Reject MBL
Front 30' Rear 30'
Side 10' Corner
Comments:

Repair: 300' +; 25% red.;
pressure manifold

Impervious SF.

Bldg footprint: 5127 SF
Driveway/Patio: 4295 SF
WALKWAYS

TOTAL SF 9522 SF
Imperv.

MISA: 19,630

SITE PLAN

6205 AUTREY COURT

Scale
1" = 60'

