

**Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form**

PERMIT #: 0016101

PIN #: 1718337000

OP DATE: 04/27/2000

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.)

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

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#: D016101 STATUS: A APP DATE: 10/08/1999 BLDG PERMIT#: 0001289
 APPLICANT: PARK HOMES INC DAY PHONE: (919) 876 - 4788
 ADDRESS: 4030 WAKE FOREST RD STE 102 FAX#: (999) 999 - 9999
 CITY: RALEIGH STATE: NC ZIP: 27609 872-6727
 OWNER: PARK HOMES INC DAY PHONE: (999) 999 - 9999
 ADDRESS: 4030 WAKE FOREST RD STE 102 FAX#: (999) 999 - 9999
 CITY: RALEIGH STATE: NC ZIP: 27609
 HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?: Y
 EXIST USE: TAX MAP#: 0303 0000
 BEDROOMS: 4 BSMT: N #EMPLOYEES: 0 WATER: C WASTEWATER: I GARB DISPOS: N
 TOWNSHIP: 02 BARTON'S CREEK JURIS: WC ZON: 40W PIN: 1718.14 33 7000 000
 SUBD#: S 000 000 00 SUBD NAME: SHEFFIELD PLACE LOT-SEC: 13 ACRE: 1.01
 IMPRV PRMT: ISSUED?: Y DATE: 12/02/1999 BY: GY TYPE SYSTEM: III B PUMP: Y
 CNSTR AUTH: ISSUED?: Y DATE: 12/02/1999 BY: GY MAINT: N OPER: N
 RECEIPT#: 0047786 FEE: 145.00 OP DATE: BY:
 WATR SAMPL: REQ?: N APPROVED?: DATE: PROPRIETARY SYS:
 ST#: 1000 MI: DIR: NAME: OAK CREEK DIR: TYP: RD
 DIRECTIONS: SIX FORKS N L HONEYCUTT R LOINKER R KOUPELAR L
 MANOR GLEN

IMPROVEMENT PERMIT

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

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐

I.P. ISSUED BY

C. Rene Young ES

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: System permitted for innovative septic system (polystyrene aggregate or chamber) 25% reduction is already calculated. Complete and return innovative septic system. Install system on contour, contours shown are approximate. Contractor must verify contours in field prior to installation. Keep system 20 feet from foundation drain. Keep tanks 15 feet from foundation drain. Keep system 100 feet from well.

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

SEPTIC TANK/FILTER REQUIRED ☒ NUMBER OF TRENCHES 4 LENGTH OF TRENCHES 100 FT. WIDTH OF TRENCHES 3 FT.

C.A. ISSUED BY *C. Rene Young ES* INSTALLED BY *Tim King* CTR. I.D. #

SEPTIC TANK/FILTER USED *HEP* DATE *11/10/99* INSTALLATION APPROVED BY *C. Rene Young ES*

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

WELL LOG INFORMATION - DEPTH _____ CASING DEPTH _____ YIELD _____ STATIC LEVEL _____

WELL CONTRACTOR _____ REG.# _____ PUMP CONTRACTOR _____ REG.# _____

CONSTRUCTION COMPLIANCE - GROUT APPROVED ☐ DATE _____ EHS _____
 WCHD ID # _____ WELLHEAD APPROVED ☐ DATE _____ EHS _____
 NEGATIVE BACTERIOLOGICAL RESULTS ☐ DATE _____ EHS _____
 SYSTEM FINALIZED ☐ DATE _____ EHS _____

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.

2. (102.201 2)

WELL 107

- * Keep system on contour
- * Contour must be verified in field prior to installation
- Keep system 100' from well
- * Trench Bottom Depth 24".

1010
621 77

Zoning	By SA	Approve	Date 10-8-99	Revised	Use 101	Refect	MBL	Reel 30	Side 15	Corner	Comment:
--------	-------	---------	--------------	---------	---------	--------	-----	---------	---------	--------	----------

Signature of Owner or Authorized Agent

