Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D 0 4 9 5 3 9 PIN #: 1 7 0 9 9 1 7 7 8 9

OP DATE: 0 7 / 2 6 / 2 0 1 3

SYSTEM USE:
- [x] House
- [ ] Mobile Home
- [ ] Business
- [ ] Other

SEWAGE TYPE:
- [x] Domestic
- [ ] Industrial

PUMP/SIPHON?:
- [ ] Yes
- [x] No

PRESSURE MANIFOLD:
- [ ] Yes
- [x] No

SYSTEM TYPE:
- [ ] I
- [x] II
- [ ] III
- [ ] IV
- [ ] V
- [ ] VI
- [ ] Other

SUB TYPE:
- [x] A
- [ ] B
- [ ] C
- [ ] D
- [ ] E
- [ ] F
- [ ] G

NBR BEDROOMS:
- [ ] 1
- [ ] 2
- [ ] 3
- [x] 4
- [ ] 5
- [ ] 6
- [ ] Other

MAINT. SCHEDULE:
- [ ] Yes
- [x] No

CERT. OPERATOR
- [ ] Yes
- [x] No

GT	ST	PT	SIZE
[ ]	[ ]		750
[ ]	[ ]	[ ]	900
[ ]	[ ]	[ ]	1,000
[ ]	[x]	[ ]	1,200
[ ]	[ ]	[ ]	1,500
[ ]	[ ]	[ ]	1,800
[ ]	[ ]	[ ]	2,100
[ ]	[ ]	[ ]	2,500
[ ]	[ ]	[ ]	3,000
[ ]	[ ]	[ ]	4,000
[ ]	[ ]	[ ]	5,000
[ ]	[ ]	[ ]	8,000
	[ ]	[ ]	10,000
[ ]	[ ]	[ ]	Other
[x]		[x]	None/NA GT or PT

DRAINFIELD SIZE(SQ. FT.)

0 1 5 0 0

Bedroom upgrade 3 to 4. original system was installed large enough to handle 4 bedrooms.

DRAIN TYPE:
- [x] 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
- [x] Other

STONE DEPTH (IN.):
- [ ] 8 in. or less
- [x] 12 in. or less
- [ ] 18 in. or less
- [ ] 24 in. or less
- [ ] Other

TRENCHES:
- [x] Individual
- [ ] Bed

TRENCH WIDTH (IN.):
- [ ] 12 in. or less
- [ ] 18 in.
- [ ] 24 in.
- [x] 36 in.
- [ ] 6 ft. or less
- [ ] 9 ft. or less
- [ ] Other

RSB
10/14/13 TW

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#: **D049539** STATUS: **C** APP. DATE: **07/23/2013** BLDG. PERMIT#: **0140217**
PIN: **1709.04 91 7789 000** TAX MAP: **0261 0242** RECORDED: **Y** ORIG. PERMIT#: **C01323**
TOWNSHIP: **02 BARTON"S CREEK** JURISDICTION: **WC** ZONING: **R40W** SW DEVICE: **N** S#:
APPLICANT: **ROMAIN, JACK**
10828 CAHILL RD
RALEIGH, NC 27614
(919) 518 - 8261
USE: HD USE: **433 ADD/ALT-HSEKEEPING MORE U**
EXIST USE: **101A CONVENTIONAL ONE-FAMILY H**
LTAR: **0.32 0.32** BEDROOMS: **1** BASEMENT: **N** #EMPLOYEES: **0**
SITE: ADDRESS: **10828 CAHILL RD**
SUBDIVISION: **MANCHESTER** LOT: **63** ACRES: **1.18** EASEMENT: **N** LOC: SYS:
DIRECTION: **N ON SIX FORKS R DURANT L BRASSFIELD R CAHILL**

Well System: WATER: **COMMUNITY** - TYPE:

WELL LOG INFORMATION: DEPTH: ____ CASING DEPTH: ___ YIELD: _____ STATIC LEVEL: _____
WELLI CONTRACTOR: _____ REG.# _____ PUMP CONTRACTOR: _____ REG.# _____
Construction Compliance GROUT APPROVED ☐ DATE _____ EHS _____
WELLHEAD APPROVED ☐ DATE _____ EHS _____
SYSTEM FINALIZED ☐ DATE _____ EHS _____
COMMENTS:

Operation Permit

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER:
INSTALLED BY: — INSTALLATION APPROVED BY: Tom Whaley
PROPRIETARY SYSTEM: **: GTR** FILTER NO: _____
COMMENTS:
OPERATIONS PERMIT ISSUED? Y OP DATE: 7-26-13 BY: Tom Whaley

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: 7-26-13 Benchmark: _____ Rod reading: _____ Distance to Structure: _____
ST: Exist 1200 gals ID#: _____ D.O.M.: _____ Elev.: _____ Distance to Well: _____
PT: _____ 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: _____

This permit allows for a bedroom upgrade from 3 to 4 bedrooms. The original septic system was sized sufficiently for a four bedroom home however was built/listed as a three bedroom. There are no malfunctions at this time and available space exists for a four bedroom repair.

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IMPROVEMENT PERMIT

TANK SIZE: **EXIST** gal. PUMP Tank: _____ gal. SQ FT: **1500** STONE DEPTH: 12 **in.** MAX DEPTH LINE: ___ in.
WASTEWATER: **INDIVIDUAL** SEWAGE: **DOMESTIC** TYPE SYSTEM: **II A** PUMP: **N** P/M: **N**
DAILY FLOW: **480** gal/day DESIGN FEE REQ?: PAID?: WATER: **COMMUNITY**

COMMENTS: **ORIGINAL PERMIT C01323 WAS ISSUED FOR A THREE BEDROOM HOME BUT HAS A SYSTEM LARGE ENOUGH FOR A FOUR BEDROOM HOME, 1200 GALLON TANK , AND 1500 SQUARE FOOT DRAINFIELD. THE CURRENT HOMEOWNER HAS APPLIED AND PAID THE FEES ASSOCIATED WITH INCREASING THE BEDROOM COUNT TO A FOUR BEDROOM HOME. ENVIRONMENTAL SERVICES HAS CONFIRMED THAT THERE ARE NO CURRENT MALFUNCTIONS AND THAT THERE IS ENOUGH AREA FOA A FOUR BEDROOM REPAIR.**

IP ISSUED? **Y** DATE: **07/26/2013** BY: **(TXW)**_____ PHONE#: **868-6412**

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:**
THIS PERMIT ALLOWS FOR THE ADDITION OF A BEDROOM TO THE HOME. DUE TO THE EXISTING SEPTIC TANK AND DRAINFIELD ALREADY BEING SIZED ACCORDINGLY FOR A FOUR BEDROOM HOUSE, THERE WILL BE NO ADDITIONAL DRAINLINE ADDED AT THIS TIME.

TANK SIZE: **EXIST** gal. PUMP TANK: _____ gal. SQ FT: **1500** STONE DEPTH: 12 **in.** MAX DEPTH LINE: ___ in.
MAINT: **N** OPER: **N** L/O: **N** TRENCH#: **2** LENGTH: **250** ft. WIDTH: **36** in. DESIGNER: ___
SUBFIELDS: __ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? **Y** DATE: **07/26/2013** BY: **(TXW)** _____ PHONE#: **868-6412**

SUBJECT PROPERTY: IS ☐ IS NOT ☒ LOCATED IN A SPECIAL FLOOD HAZARD AREA AS DESIGNATED ON FEDERAL EMERGENCY MANAGEMENT AGENCY (F.E.M.A.) FLOOD INSURANCE RATE MAP (F.I.R.M.) NUMBER 37183C0135E B 0165E ZONE X

CA
57 - Existing 1200 gal Recorded Map
DL - Existing Gravel Trench 2 (250' x 5')

58
0140217
D049539

57

56

205.00'

EIP

S 19°37'05" W

273.13'

30'R

Repair

LOT 63
61,505 S.F.

Repair

UNSUITABLE FOR SEPTIC FIELDS (SCALED FROM MAP)

195.22'

8.8' DECK

TWO STORY BRICK & FRAME

CONC. DRIVE

15'S

41.4'

25.3'

25.0'

21.9'

18.0'

8.5

33'

181.0'

P.O.R.

Repair

Repair

110.5'

S 59°07'53" E

N 61°09'32" W

62

20' DRAINAGE ESMN'T. (SCALED FROM MAP)

RIP RAP

30'F

L.P.

EIP

C-2

N 33°35'00" E 151.23'

C-1

EIP

715.88 TO POINT WHERE CAHILL RD. BEGINS TO CURVE INTO MARABOU CT.

CAHILL ROAD - 10828

50' R/W

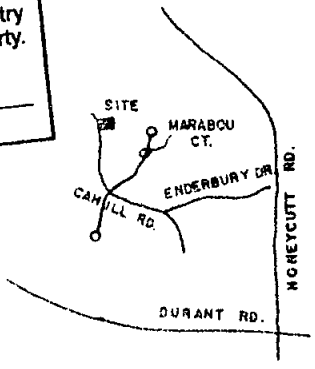
Zoning RLGW By JCAS
Approve ✓ Date 7-23-13
Revise Use 433
Reject MBL 101A
Front 30 Rear 30'
Side 15 Corner
Comments:

17090491789

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.

Jack Roman
Signature of Owner or Authorized Agent

	RAD	ARC
C-1	563.73	46.66'
C-2	275.00	13.03'



1=50

CLOSURE (FIELD): 1:29,100
NO GEODETIC MON. WITHIN 2000'

LEGEND
EIP EXISTING IRON PIPE MH MANHOLE

MANCHESTER
PHASE III