Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: C 0 1 5 7 1 7 PIN #: 0 7 8 1 2 1 5 7 4 8

OP DATE: 1 0 / 1 2 / 1 9 9 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
☐	☒	☐	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:
- [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
- [x] 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
- [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

HRH

WAKE COUNTY HEALTH DEPARTMENT WELL AND SEWAGE SITE, LOCATION PERMIT

ALL PERMITS VOID 60 MONTHS FROM DATE OF ISSUANCE

Tax Map No. 677 Parcel No. 199 Released 2/25/94 DB Improvement Permit Well Permit No. C 15717

Zoning WAKE Township Swift Creek Operation Permit [ ]

Owner/Contractor: Don Brod Date: 10-29-92

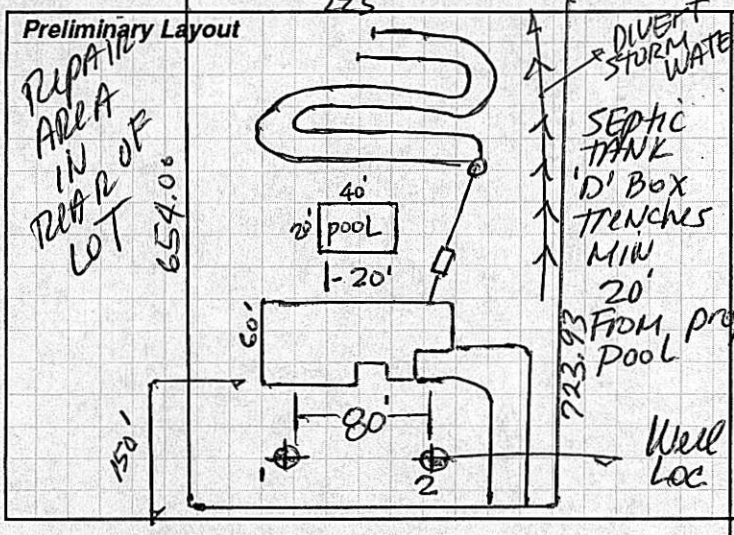
Location/Address: 5708 Crutchfield Rd

1300 to L 1379 L into sub (Baird) to Crutchfield S.R. # 1379

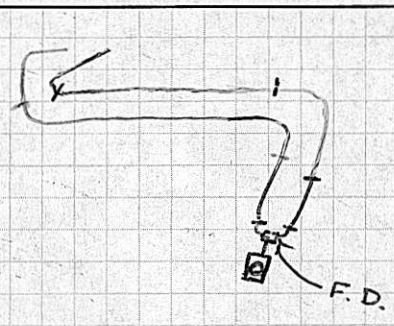
Subdivision Name: Belle Meade Est Lot No. 22 Section or Block No.

Tax Map No. 677 Parcel No. 199

Preliminary Layout



Final Layout



Sewage System Specifications

Repair [ ] Original Permit No.

Garbage Disposal Unit Yes [ ] No [X]

House [X] Mobile Home [ ] Business [ ]

No. of Bedrooms 4 Lot Area R 80 W

Size of Tank 1200 gal.

Nitrification Line 1200 2 (200'X3') sq. ft.

Depth of Stone: 12" [X] Max Depth of Trenches: 24" in.

Riser and Baffle Required [X] Pump Required [ ]

- Permit void if not in compliance with zoning regulations
- Permits may be voided if site is altered or intended use changed

Layout by: V. Mangi (ACP)

Comments: Keep system shallow, on contour & keep layout tight with MIN separation distances observed. DIVERT All storm water AWAY FROM septic system.

Date: 10/12/93 Installed By: C. Bryant Approved By: Andre C. Brian, R.S.

Well System

Individual [X] Semi-Public [ ] Public [ ]

New [X] Replacement [ ] Repair [ ]

Fee Paid: Yes [X] No [ ]

Construction Compliance	Yes	No
Site Approved	[✓]	[ ]
Well Head Approved	[✓]	[ ]
Grouting Approved	[ ]	[ ]

12-31-92 (Date Inspected) D. F. Quinn, R.S. (Sanitarian)

Bacteriological Results

Initial Sample: WG Date: 2/22/94

* Re-Sample #1 Date:

* Re-Sample #2 Date:

* Re-chlorination as required [ ] Yes [ ] No

* *Fees for all resamples*

All checks payable to: **Wake County Health Department**

Final Inspection	Yes	No
Required Slab	[✓]	[ ]
Chlorinated	[✓]	[ ]
Required Certificate	[ ]	[ ]
Variance (Explain)	[ ]	[✓]
WCHD I.D. Affixed 4198	[✓]	[ ]
Sample Collected	[✓]	[ ]

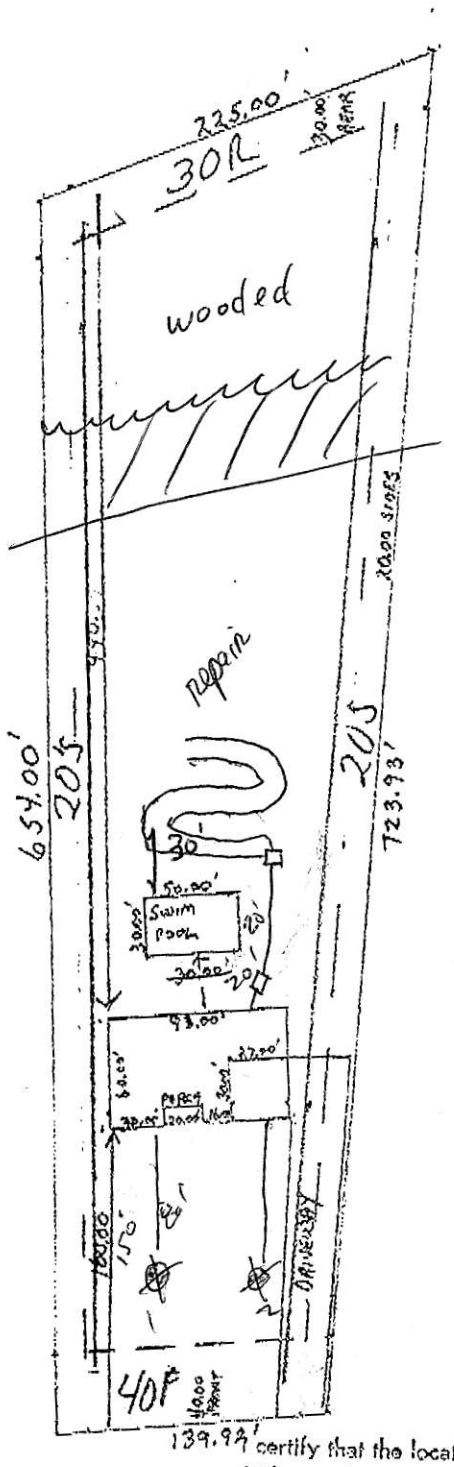
Comments:

Well Installed By: McCall Bros.

2/25/94 (Date System Finalized) David Cashwell (Sanitarian)

This report is based in part on information provided by the homeowner or his/her representative in the application submitted for this permit. The sanitarian is not responsible for false or misleading information contained in the application. The sanitarian 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 sanitarian warrants that the septic tank system will continue to function satisfactorily in the future or that the water supply will remain potable.

COPY TO HEALTH DEPARTMENT



RECEIVED
OCT 14 P.M.
WAKE CO.
HEALTH DEPT.

I certify that the location of this structure is accurately shown. Failure to locate this structure in accordance with this plot plan could require relocation of the structure regardless of its degree of completion.

Jim Broad 10-13-92
Signature

Check one: ( ) Owner (✓) Contractor ( ) Other

1" = 100'

677-199
Lot 22
2.59 AC
Belle Meade Est Sec 2