Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: 0 0 2 4 9 6 6 PIN #: 2 7 0 7 1 0 8 1 9 9

OP DATE: 0 1 1 1 4 1 2 0 0 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
- [ ] II
- [x] III
- [ ] IV
- [ ] V
- [ ] VI
- [ ] Other

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

NBR BEDROOMS:
- [ ] 1
- [ ] 2
- [x] 3
- [ ] 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 0 9 0 0

DRAIN TYPE:
- [ ] Stone
- [x] 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 20 10
- [ ] 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

B.W 11/19/13

**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#: **D024966** STATUS: **A** APP. DATE: **07/09/2002** BLDG. PERMIT#: **0030052**
PIN: **2707.03 10 8199 000** TAX MAP: **0365 0000** RECORDED: **Y** ORIG. PERMIT#:
TOWNSHIP: **09 LITTLE RIVER** JURISDICTION: **WC** ZONING: **R30**
APPLICANT: **CASH HOMES INC**
**8489 NC 39S**
**ZEBULON, NC 27597**
**( 919 ) 269 - 0204**
USE: HD USE: **101 ONE-FAMILY HOUSE**
EXIST USE:
DISPOSAL: BEDROOMS: **3** BASEMENT: **N** #EMPLOYEES: **0**
SITE: ADDRESS: **9400 PERIMETER CT**
SUBDIVISION: **RED OAK** LOT: **04** ACRES: **0.74**
DIRECTION: **64 E TO ZEBULON EXIT TL ON 96 TR ON PEARCES RD**
**SUB 25 MLS ON L**

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**Well System**: WATER: **INDIVIDUAL** - TYPE: **EXISTING**

WELL LOG INFORMATION: DEPTH: 147 CASING DEPTH: 57 YIELD: 5 STATIC LEVEL: 20
WELLI CONTRACTOR: NW Pole REG.# 4 PUMP CONTRACTOR: Cedar REG.# 846
**Construction Compliance** GROUT APPROVED ☒ DATE 10 21 02 EHS Dan Bigh - Title Exempt
WELLHEAD APPROVED ☑ DATE 11 13 03 EHS
SYSTEM FINALIZED ☑ DATE 2116105 EHS Andrea Reilly RS
COMMENTS: # 12182

**Operation Permit**

DESIGN FLOW: _____ gal./min. ACTUAL FLOW: _____ INNOVATIVE LETTER:
INSTALLED BY: Bartley INSTALLATION APPROVED BY:
PROPRIETARY SYSTEM: FILTER NO:
COMMENTS:

OPERATIONS PERMIT ISSUED? ___ OP DATE: 01/14/03 BY:

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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SUBDIVISION: **RED OAK** LOT: **04** ACRES: **0.74**
DIRECTION: **64 E TO ZEBULON EXIT TL ON 96 TR ON PEARCES RD**
**SUB 25 MLS ON L**

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**IMPROVEMENT PERMIT**

TANK SIZE: **1000** gal. PUMP Tank: _____ gal. SQ FT: **900** INNOVATIVE MAX DEPTH LINE: **20** in.
WASTEWATER: **INDIVIDUAL** SEWAGE: **DOMESTIC** TYPE SYSTEM: **III G** PUMP: **N** P/M: **N**
DAILY FLOW: **360** gal/day DESIGN FEE REQ?: PAID?: WATER: **INDIVIDUAL**

COMMENTS:

IP ISSUED? DATE: 8/12/02 BY: (ERH) Ed Hamm PHONE#:

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**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:**
**4X75X36 LINES INSTALL ON CONTOUR, DIVERT SURFACE WATER, WELLSITE NEEDS TO BE 50' FROM FOUNDATION OF HOUSE. PLEASE CALL WITH ANY QUESTIONS. ERH. 8/12/02**

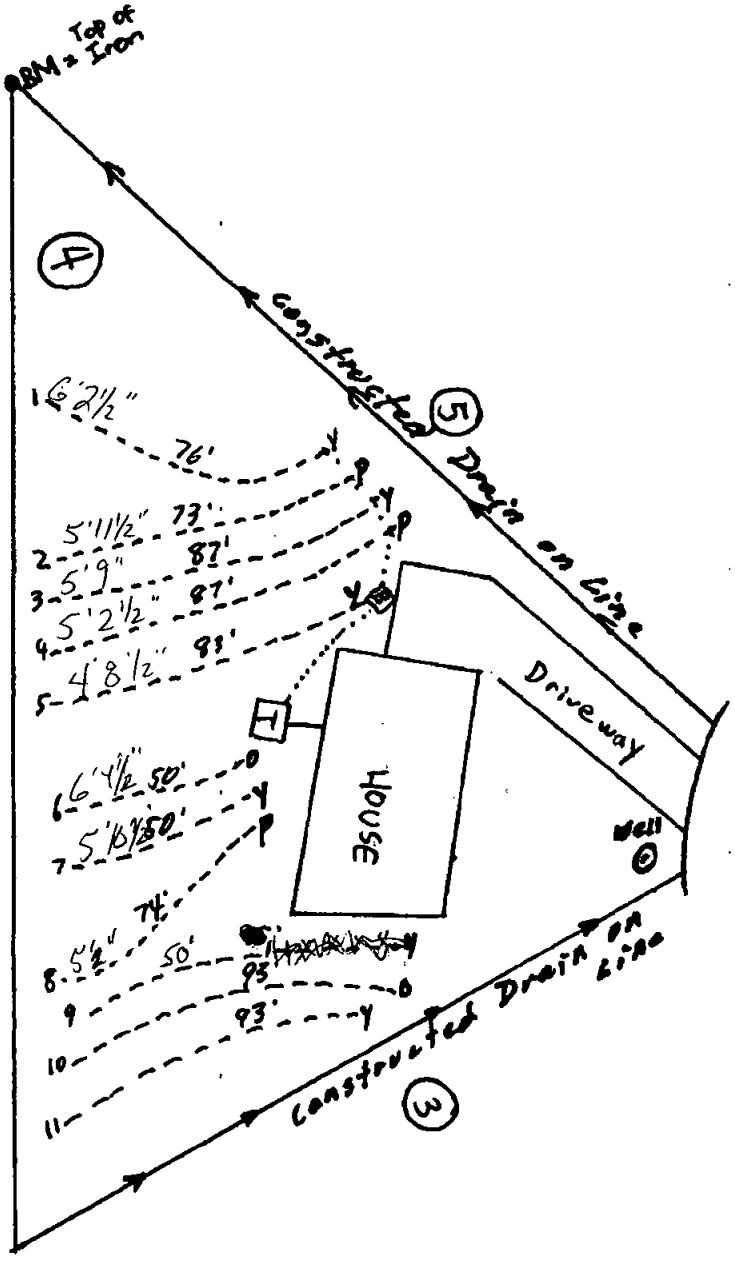
TANK SIZE: **1000** gal. PUMP TANK: _____ gal. SQ FT: **900** INNOVATIVE MAX DEPTH LINE: **20** in.
MAINT: **N** OPER: **N** L/O: **Y** TRENCH#: **4** LENGTH: **75** ft. WIDTH: **36** in. DESIGNER: ___
# SUBFIELDS: __ DESIGN HEAD PRESSURE: _ DESIGN FLOW: _____ gal/min DOSE VOLUME: ____ gal.

CA ISSUED? **Y** DATE: **08/12/2002** BY: **(ERH)** Ed Hamm PHONE#: **856-5844**

# LOT 4 CASH HOMES

SCALE: 1" = 50'

50'




## Initial System

Use Lines 1 through 5 and shorten to 73' each, for a total of 365' Standard conventional trench. Use a standard distribution box for effluent distribution.

## Repair System

Use Lines 6 through 11 for a total of 445' standard conventional trench. Use a pump and pressure manifold for effluent distribution.

y - yellow wire flags
o - orange " "
p - pink " "

- - - - - - Drainfield trenches

# PRELIMINARY PLAN FOR
# CASH HOMES

WAKE COUNTY, NORTH CAROLINA

LOT 4
RED OAK S/D
9400 PERIMETER COURT
CLE RIVER TOWNSHIP

003052
D24966

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.

Signature of Owner or Authorized Agent

Zoning R30
Approve
Revise
Reject
Front 30
Side 10
Comments:
Rear 30
Corner
MBL
Use
Date 7/4/10

x Initial
4 x 150 x 36 Inv.
* 9' centers
* Direct Surface Wtr
* Do not drive over system
* 20" Trench bottom

| CURVE TABLE | | | | |
|---|---|---|---|---|
| CURVE | DELTA | RADIUS | ARC LENGTH | CHORD BEARING | CHORD |
| C5 | 43°40'15" | 50.00 | 38.11 | S16°05'55"W | 37.19 |

S41°26'48"E 257.93'

10 side

4

32,083 sq ft
0.74 acres

5

55.70

D/W

15.00 27.00 22.34 23.84 15.00 11.33 18.00 15.33 PROPOSED DWELLING 12.00 8.00 11.67 12.67 14.00 12.00 8.00

Well Area

30' Rear

30ft

C5

50.

9400 PERIMETER COURT

83.66'

32.77'

Repair Area

10 side

S66°05'50"W 204.97'

NOW OR FORMERLY
ZEBULON INVESTMENT PROPERTIES

N04°56'22"E 313.29'

535 cum

Repair Area
* ~~Syphon~~ "
* 20" Trench bottom
* 9' centers
* Direct Surface
*

House - 2027
Driveway 1000
Sidewalks 108
total 3135
lot 32083
Impervious 1090

THE PREPARER RELIED UPON THE

# WELL CONSTRUCTION RECORD

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

WELL CONTRACTOR (INDIVIDUAL) NAME (print) William Jones CERTIFICATION # 2238

WELL CONTRACTOR COMPANY NAME N.W. Poole Well & Pump Co. PHONE # 828-464-9223

STATE WELL CONSTRUCTION PERMIT# 20249616 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: Zebulon County Lee
Lot 44, 9480 Pennington Ct, Red Oak 515
(Street Name, Numbers, Community, Subdivision, Lot No., Zip Code)

Topographic/Land setting
☐Ridge ☐Slope ☐Valley ☑Flat
(check appropriate box)
Latitude/longitude of well location
_____
(degrees/minutes/seconds)
Latitude/longitude source: ☐GPS ☐Topographic map
(check box)

3. OWNER: Cash Homes, Inc.
Address 8489 NC 39S
(Street or Route No.)
Zebulon NC 27597
City or Town State Zip Code
(919)-269-0204
Area code- Phone number

4. DATE DRILLED 10-21-02
5. TOTAL DEPTH: 147'
6. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☑
7. STATIC WATER LEVEL Below Top of Casing: 20 FT.
(Use "+" if Above Top of Casing)
8. TOP OF CASING IS 1½ 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): 5 METHOD OF TEST Blow
10. WATER ZONES (depth): 100', 140'

| DEPTH From | DEPTH To | DRILLING LOG Formation Description |
|---|---|---|
| | | |

11. DISINFECTION: Type HTH Amount 8oz
12. CASING:

| | Depth | | Diameter | Wall Thickness or Weight/Ft. | Material |
|---|---|---|---|---|---|
| From | 0 | To 57 Ft. | 6¼" | | galv. |
| From | | To Ft. | | | |
| From | | To Ft. | | | |

13. GROUT:

| | Depth | | Material | Method |
|---|---|---|---|---|
| From | 0 | To 20 Ft. | cement | mix & pour |
| From | | To Ft. | | |

14. SCREEN:

| | Depth | | Diameter | Slot Size | Material |
|---|---|---|---|---|---|
| From | | To Ft. | in. | in. | |
| From | | To Ft. | in. | in. | |

15. SAND/GRAVEL PACK:

| | Depth | | Size | Material |
|---|---|---|---|---|
| From | | To Ft. | | |
| From | | To Ft. | | |

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.

House

Well

16. REMARKS: _____

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

William Jones 10-21-02
SIGNATURE OF PERSON CONSTRUCTING THE WELL DATE

**Submit the original to the Division of Water Quality, Groundwater Section, 1636 Mail Service Center - Raleigh, NC 27699-1636 Phone No. (919) 733-3221, within 30 days.**

GW-1 REV. 07/2001

WAKE COUNTY NORTH CAROLINA
Environmental Services

TEL 919 856 7400
FAX 919 856 7407

Water, Wastewater & Development Services
336 Fayetteville St. • P.O. Box 550 • Raleigh, NC 27602

I, Jim Cash hereby request the chamber system or polystyrene aggregate system called _____ to be used in my sewage disposal system. I understand that I will be granted a 25% reduction in the amount of required drainfield for my property. My property is located at Lot #4 Red Oak.

Jim Cash Owner

8-8-02 Date

D# 24766
Biding Permit # 30052
PIN: 2707.05 10 8197

| Generic Name | Proprietary Name |
|---|---|
| __ Drip System | "Perc-Rite" Subsurface |
| __ Chamber Trench Sys. | "Infiltrator" Chambered |
| __ Brunswick Bed/Fill Sys. | "Brunswick" Bed/Fill |
| __ Chamber Trench Sys. | "Hancor EnviroChamber" |
| ✓ Polystyrene Aggregate Tr | Honek Drainage Sys. |
| __ Chamber Trench | "Contractor Model 75,100,125, and field drain" |
| __ Polyethylene | Norwesco P.E. Tanks |
| __ Sand Filter Pretreatment | Pressure Dosed Sand |
| __ Chamber Trench | "Bio Diffuser" Low Profile |
| __ Peat Filter Pret. Sys. | Puraflo Peat Biofilter Sys. |
| __ Fibermesh Reinforced Tanks | Fibermesh Reinforced Tank |