Environmental Services - Water Quality
Onsite Wastewater Scan Data Entry Form

PERMIT #: D017701 PIN #: 1813037226

OP DATE: 12/12/2002

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
- [x] 3
- [ ] 4
- [ ] 5
- [ ] 6
- [ ] Other

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

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

GT	ST	PT	SIZE
[ ]	[ ]		750
[ ]	[ ]	[ ]	900
[ ]	[x]	[ ]	1,000
[ ]	[ ]	[ ]	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.)

00900

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
- [x] 36 in. or less
- [ ] Other

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

TRENCHES:
- [x] Individual
- [ ] Bed

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

DH2/7

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#: D017707 STATUS: A APP DATE: 03/22/2000 BLDG PERMIT#: 0003270
APPLICANT: CLEARWATER GROUP LTD DAY PHONE: (919) 846 - 0045
ADDRESS: 2308 SUNNYSTONE WAY FAX#: (000) 000 - 0000
CITY: RALEIGH STATE: NC ZIP: 27613
OWNER: WOODLIEF ROAD ASSOCIATES DAY PHONE: (919) 999 - 9999
ADDRESS: 7225 CHURCHILL DR FAX#: (000) 000 - 0000
CITY: WAKE FOREST STATE: NC ZIP: 27587
HD USE CD: 101 ONE-FAMILY HOUSE ORIG PERMIT#: REC?:
EXIST USE: TAX MAP#: 0163 0000
BEDROOMS: 3 BSMT: N #EMPLOYEES: 0 WATER: I WASTEWATER: I GARB DISPOSL:
TOWNSHIP: 14 NEW LIGHT JURIS: WC ZON: 40W PIN: 1813.03 03 8135 000
SUBD#: S 000 000 00 SUBD NAME: WOODLIEF VILLAG LOT-SEC: 18 ACRE:
IMPRV PRMT: ISSUED?: Y DATE: 04/26/2000 BY: DWW TYPE SYSTEM: II PUMP:
CNSTR AUTH: ISSUED?: Y DATE: 04/26/2000 BY: DWW MAINT: N OPER: N
RECEIPT#: 0053282 FEE: 290.00 OP DATE: BY:
WATR SAMPL: REQ?: Y APPROVED?: DATE: PROPRIETARY SYS:
ST#: 9024 MI: DIR: NAME: NEW CENTURY DIR: TYP: RD
DIRECTIONS: 50 N TO R ON NC 98 HWY E TO L ON SR 1907 R ON W
OODLIEF RD TO R INTO SUB

IMPROVEMENT PERMIT

SIZE OF TANK **1000 ST** **PT** GALS. TOTAL SQ. FT. **900** DEPTH OF STONE ____ IN. MAX. DEPTH LINE **36** IN.

WASTEWATER: DOMESTIC ☒ INDUSTRIAL ☐ I.P. ISSUED BY Dee Warden

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: **24 inches gravel in 36 inch deep trench**

SIZE OF TANK **1000 ST** **PT** GALS. TOTAL SQ. FT. **900** DEPTH OF STONE **PSA** IN. MAX. DEPTH LINE **36** IN.
ST FILTER REQUIRED ☒ NUMBER OF TRENCHES **04** LENGTH OF TRENCHES **75** FT. WIDTH OF TRENCHES **3 FT.**

C.A. ISSUED BY Dee Warden INSTALLED BY James Gully CTR. I.D. #
SEPTIC TANK FILTER USED
INNOV. APPRL. #: IWWS-____ DATE _____ INSTALLATION APPROVED BY Aaron L Blake

WELL SYSTEM = PRIVATE ☒ SEMI-PUBLIC ☐ ///// NEW ☒ REPLACEMENT ☐ EXISTING ☐

WELL LOG INFORMATION = DEPTH 605 CASING DEPTH 68 YIELD 8 STATIC LEVEL 25
WELL CONTRACTOR Coldstar **REG.#** 272 **PUMP CONTRACTOR** Jenks **REG.#** 943

CONSTRUCTION COMPLIANCE = GROUT APPROVED ☑ DATE 4/15/02 EHS Andre R Edge
WCHD ID # ____ WELLHEAD APPROVED ☑ DATE 12/12/02 EHS Andre R Edge
NEGATIVE BACTERIOLOGICAL RESULTS ☑ DATE 1/21/03 EHS Andre R Edge
SYSTEM FINALIZED ☑ DATE 1/21/03 EHS Andre R Edge

COMMENTS:

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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

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.

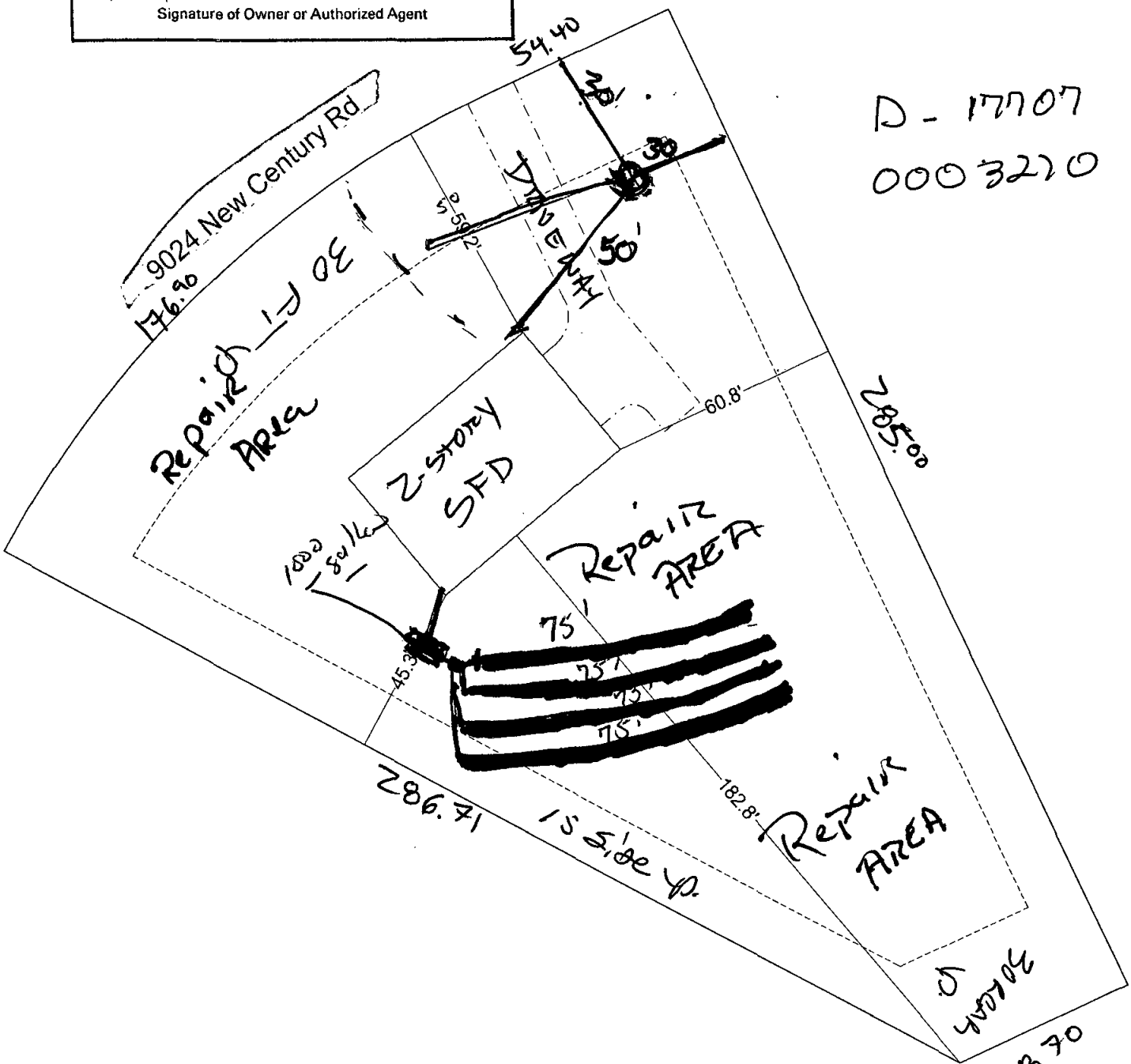
Barbara Gressen

Signature of Owner or Authorized Agent

Zoning	40W	By	mt
Approve	✓	Date	3/22/00
Revise		Use	101
Reject		MBL	
Front	30	Rear	30
Side	15	Corner	—

Comments:

D - 17707
0003220



NORTH

Woodlief Village #18
Scale 1" = 40'
Drawn by R Glass
3/21/00

D17707

North Carolina - Department of Environment and Natural Resources - Division of Water Quality - Groundwater Section
1636 Mail Service Center - Raleigh, N.C. 27699-1636-Phone (919) 733-3221

1813 0303 8135

WELL CONSTRUCTION RECORD

WELL CONTRACTOR: GOLDSTON WELL DRILLING
WELL CONTRACTOR CERTIFICATION #: 3064
STATE WELL CONSTRUCTION PERMIT#:

1. WELL USE (Check Applicable Box): Residential ☑ Municipal ☐ Industrial ☐ Agricultural ☐ Monitoring ☐ Recovery ☐ Heat Pump Water Injection ☐ Other ☐ If Other, List Use:

2. WELL LOCATION: (Show sketch of the location below)
Nearest Town: WAKE FOREST County: WAKE
WOODLIEF VILLAGE LOT-18
(Road Name and Numbers, Community, or Subdivision and Lot No.)

3. OWNER WOODLIEF ROAD ASSOCIATES
Address 7225 CHURCHILL DR.
(Street or Route No.)
WAKE FOREST NC 27587
City or Town State Zip Code

4. DATE DRILLED 4-12-02
5. TOTAL DEPTH 605
6. CUTTINGS COLLECTED YES ☑ NO ☐
7. DOES WELL REPLACE EXISTING WELL? YES ☐ NO ☑
8. STATIC WATER LEVEL Below Top of Casing: 23 FT.
(Use "+" if Above Top of Casing)
9. TOP OF CASING IS 1 FT. Above Land Surface*
*Top of casing terminated at/or below land surface requires a variance in accordance with 15A NCAC 2C .0118
10. YIELD (gpm): 8 METHOD OF TEST BLOW DOWN
11. WATER ZONES (depth): 98' 1 GPM
570' 7 GPM
12. CHLORINATION: Type _____ Amount _____

DRILLING LOG From	To	DEPTH Formation Description
0	88	CLAY
88	605	GRANITE

If additional space is needed use back of form

13. CASING:

	Depth		Diameter	Wall Thickness or Weight/Ft.	Material
From 0	To 85	Ft.	6	SCH 21	PVC
From 85	To 88	Ft.	6	1/4	STEEL
From	To	Ft.			

14. GROUT:

	Depth		Material	Method
From 0	To 20+	Ft.	CEMENT	POURING
From	To	Ft.		

15. SCREEN:

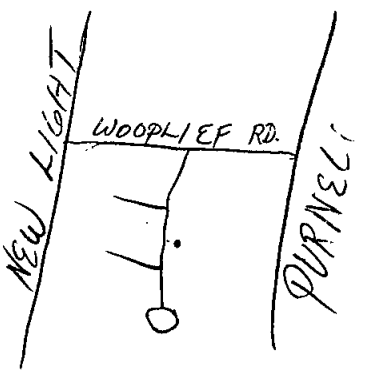
	Depth		Diameter	Slot Size	Material
From	To	Ft	in.	in.	
From	To	Ft.	in.	in.	
From	To	Ft.	in.	in.	

16. SAND/GRAVEL PACK:

	Depth		Size	Material
From	To	Ft.		
From	To	Ft.		

17. REMARKS:

LOCATION SKETCH
(Show direction and distance from at least two State Roads, or other map reference points)



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.

Martin W. Fels 4-12-02
SIGNATURE OF PERSON CONSTRUCTING THE WELL DATE

Submit original to Division of Water Quality, Groundwater Section within 30 days

FOR OFFICE USE ONLY
Quad No:
Serial No.

GW-1 REV. 12/99