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FROM : CAROLINE ENVIRONMENTAL HEALTH

FAX NO. : 8046336237

May. 17 2010 11:48AM P1

Water Supply and/or Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health

Caroline Co

Health Department

Health Department

Identification Number

SWP-99-279

Map Reference

77-1-3

General Information

Water Supply System: New ☒ Repair ☐ Public ☐ FHA ☐ VA ☐ Case No. ☐

Sewage Disposal System: New ☒ Repair ☐ Expanded ☐ Conditional ☐ Public ☐

Based on the application for a sewage disposal system construction permit filed in accordance with Section 2.13 E, of the Sewage Handling and Disposal Regulations and/or Section 2.13 of the Private Well Regulations a construction permit is hereby issued to:

Owner Donald F. Elsoff

Telephone ☐

Address 5307 Rocklick Road Springfield VA 22151 Sewage Disposal System or Well to be constructed on/at 27625 A to first right from central point go approx 1 mile

Subdivision ☐

Section/Block ☐

Lot ☐

Actual or estimated water use 600 gpd/day
4 seasonal with basement

DESIGN	NOTE: SEWAGE DISPOSAL SYSTEM INSPECTION RESULTS
Water supply, existing: (describe) <u>N/A</u>	Water supply location: Satisfactory <input checked="" type="checkbox"/> no <input type="checkbox"/> comments
To be installed: class <u>III B or III C</u> cased <u>50" E - 20"</u> grouted <u>50" E - 20"</u>	Completion Report G.W. 2 Received: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not applicable <input type="checkbox"/>
Building sewer: <u>4"</u> I.D. PVC Schedule 40, or equivalent. Slope 1.25" per 10' (minimum). <input type="checkbox"/> Other <input type="checkbox"/>	Building sewer: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Septic tank: Capacity <u>12.50</u> gals. (minimum). <input type="checkbox"/> Other <input type="checkbox"/>	Pretreatment unit: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Inlet-outlet structure: PVC Schedule 40, 4" tee or equivalent. <input checked="" type="checkbox"/> Other <u>1" Fall between inlet & outlet</u>	Inlet-outlet structure: <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Pump and pump station: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> describe and show design. If yes: <input type="checkbox"/>	Pump & pump station: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent. <input type="checkbox"/> Other <input type="checkbox"/>	Conveyance method: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Distribution box: Precast concrete with <u>8</u> ports. <input type="checkbox"/> Other <input type="checkbox"/>	Distribution box: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Header lines: Material: 4" I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2" into absorption trench. Slope 2" minimum. <input type="checkbox"/> Other <input type="checkbox"/>	Header lines: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Percolation lines: Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'. <input type="checkbox"/> Other <input type="checkbox"/>	Percolation lines: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Absorption trenches: Square ft. required <u>1260</u> ; depth from ground surface to bottom of trench <u>28"</u> ; aggregate size <u>5 to 1.5</u> ; Trench bottom slope <u>2" to 4" per 100'</u> ; center to center spacing <u>9'</u> ; trench width <u>3'</u> ; Depth of aggregate <u>13" E</u> ; Trench length <u>60</u> ; Number of trenches <u>7</u>	Absorption trenches: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Date <input type="checkbox"/> Inspected and approved by: <input type="checkbox"/> Sanitarian	

FROM : CAROLINE ENVIRONMENTAL HEALTH

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Health Department

Identification Number SWP-99-279**Schematic drawing of sewage disposal and/or water supply system and topographic features.**

Show the lot lines of the building site, sketch of property showing any topographic features which may impact on the design of the well or sewage disposal system, including existing and/or proposed structures and sewage disposal systems and wells within 200 feet. The schematic drawing of the well site or area and/or sewage disposal system shall show sewer lines, pretreatment unit, pump station, conveyance system, and subsurface soil absorption system, reserve area, etc. When a nonpublic drinking water supply is to be permitted, show all sources of pollution within 200 feet.

The information required above has been drawn on the attached copy of the sketch submitted with the application. Attach additional sheets as necessary to illustrate the design.

- * See page 3 for design drawing. This drawing is not to scale!
- * Basement (floor is below surface of ground)? YES NO
- * Fixtures in basement? YES NO N/A If yes, is a basement lift pump required? YES NO N/A
- * Pump required when ground surface over drainfield trenches is at higher elevation than any plumbing fixture?
- * Do not disturb the drainfield or reserve area(s).
- * Permit void if house location interferes with proposed well or drainfield/reserve locations.
- * No buried utility service shall be closer than 10' to any part of this system.
- * Follow OSHA codes.
- * Do not install drainfield system during periods of wet weather or wet soil.
- * Remove all trees within 10' of drainfield area(s).
- * The drainfield trenches shall be placed on contour with center to center spacing no less than that listed on page 1.
- * Place untreated building paper over the trench gravel.
- * The maximum soil cover over septic/pump tanks & distribution boxes is 18" to 24".
- * All tanks shall be watertight.
- * Final grade of drainfield shall be crowned to divert surface water & prevent ponding.
- * Roof drains, basement sump discharges (non-sewage), floor drains, footing drains, etc. being connected to this system is PROHIBITED! Divert these away from drainfield.
- * Keep structures & driveways off drainfield/reserve area(s).
- * Minimum separation between drainfield/reserve area(s) & well sites is 100' for Class IIIC wells & 50' for Class IIB wells. This distance increases by 25' for every 5% of slope for wells downslope of any source of contamination (house site, drainfield/reserve areas, etc).
- * It is the owner's responsibility to ensure that the well is on the property & does not interfere with utilities & easements.
- * Well & all water lines shall be disinfected prior to water sampling.
- * Health Dept Operation Permit & Well Inspection Report required prior to occupancy (refer to dept's Operation Permit & Well Inspection Report checklist).
- * It shall be the responsibility of owner or any subsequent owner to maintain, repair or replace (requires a permit) any sewage disposal system that ceases to operate in a sanitary manner.

THIS PERMIT IS NONTRANSFERABLE

This sewage disposal system and/or water supply is to be constructed as specified by the permit _____ or attached plans and specifications _____.

This sewage disposal system and/or well construction permit is null and void if (a) conditions are changed from those shown on the application (b) conditions are changed from those shown on the construction permit.

No part of any installation shall be covered or used until inspected, corrections made if necessary, and approved, by the local health department or unless expressly authorized by the local health dept. Any part of any installation which has been covered prior to approval shall be uncovered, if necessary, upon the direction of the Department.

Date: 9/13/99Issued by: Julia J. Lumbuto

Sanitarian

Date: _____

Reviewed by: _____

Supervisory Sanitarian

This Construction
Permit Valid until3/13/2001

If FHA or VA financing

FROM : CAROLINE ENVIRONMENTAL HEALTH FAX NO. : 8046336237

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Health Dept LU

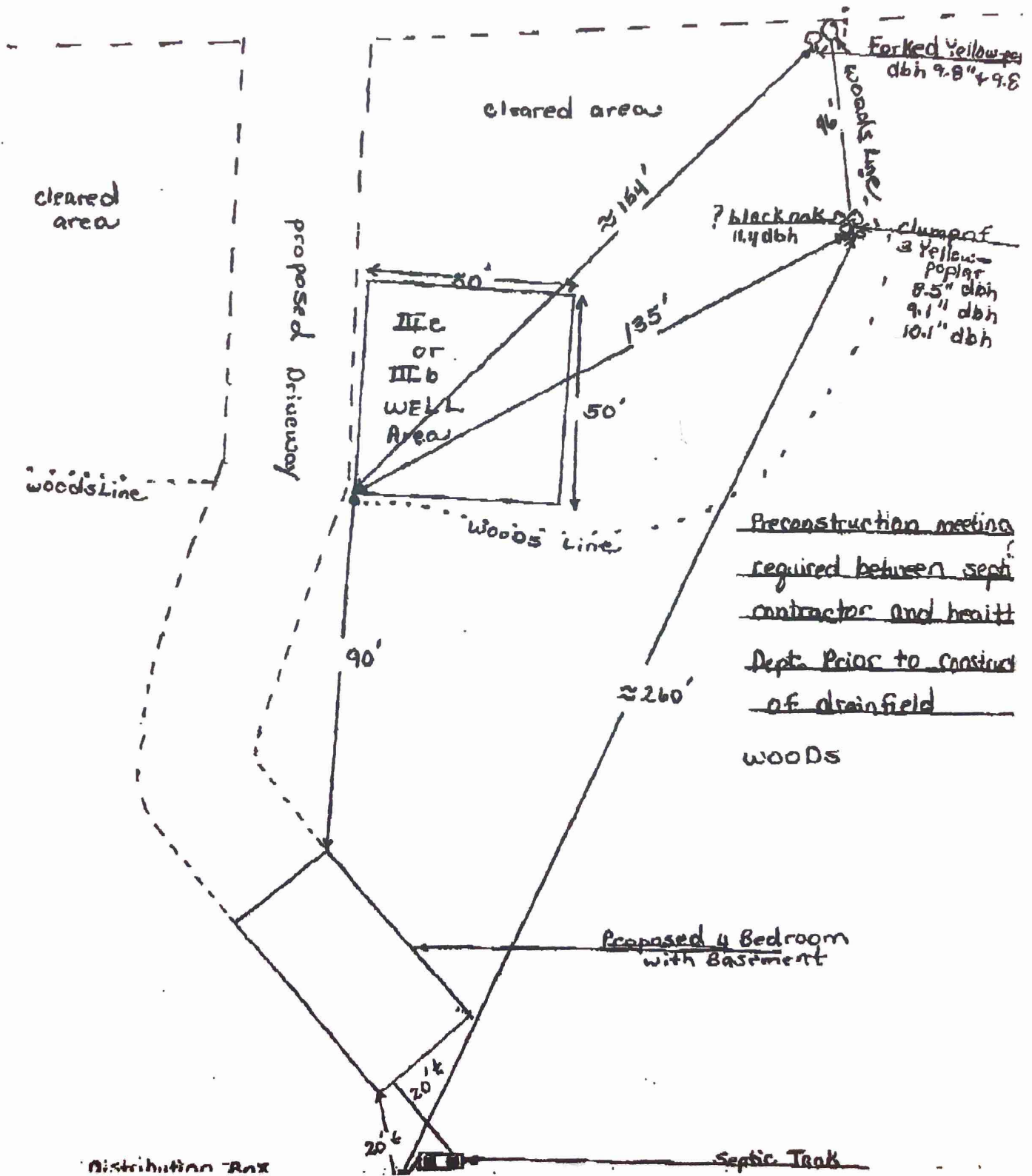
SWP-99-279

Tm# 77-1-3

woods

To Right of way to 625

private Road



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