

COMMONWEALTH of VIRGINIA

In Cooperation with the State Department of Health

Phone (434) 972-6219 Fax (434) 972-4310 Thomas Jefferson Health District
1138 Rose Hill Drive
P. O. Box 7546
Charlottesville, Virginia 22906

ALBEMARLE - CHARLOTTESVILLE FLUVANNA COUNTY (PALMYRA) GREENE COUNTY (STANARDSVILLE) LOUISA COUNTY (LOUISA) NELSON COUNTY (LOVINGSTON)

December 14, 2018

Tori Kanellopoulos Department of Community Development Division of Zoning and Current Development 401 McIntire Road Charlottesville, Virginia 22902-4596

RE: Review of Proposed Subdivision Plat and attached Soils Information for Individual Onsite Sewage Systems as part of a division of Tax Map 66 Parcel 28 located in Albemarle County, Virginia.

Dear Ms. Kanellopoulos:

On November 27, 2018, the County of Albemarle requested the Virginia Department of Health (via the Albemarle County Health Department) review the proposed subdivision plat identified above. This letter is to inform you that the above referenced subdivision plat is approved for individual Onsite Sewage Systems in accordance with the provisions of the *Code of Virginia*, the *Sewage Handling and Disposal Regulations*, and local ordinances.

This request for subdivision review was submitted pursuant to the provisions of § 32.1-163.5 of the *Code of Virginia* which requires the Health Department to accept private soil evaluations and designs from an Authorized Onsite Soil Evaluator (AOSE) or a Professional Engineer working in consultation with an AOSE for residential development. This subdivision was certified as being in compliance with the Board of Health's Regulations by William J. Loth; Onsite Soil Evaluator Number 1940001316. This subdivision approval is issued in reliance upon that certification.

Pursuant to § 360 of the *Regulations* this approval is not an assurance that Sewage Disposal System Construction Permits will be issued for any lot in the subdivision identified above *unless* that lot is specifically identified on the above referenced plat as having an approved site for an onsite sewage disposal system, and unless all conditions and circumstances are present at the time of application for a permit as are present at the time of this approval. This subdivision may contain lots that to do not have approved sites for onsite sewage systems.

This subdivision approval does pertain to the requirements of local ordinances.

Sincerely,

Josh Kirtley

Environmental Health Technical Consultant

Thomas Jefferson Health District



COUNTY OF ALBEMARLE

Department of Community Development 401 McIntire Road, Room 227 Charlottesville, Virginia 22902-4596

Phone (434) 296-5832

Fax (434) 972-4126

November 27, 2018

Josh Kirtley Virginia Department of Health 1138 Rose Hill Drive Charlottesville, VA 22906

RE: SUB-201800124

Dear Mr. Kirtley:

The County of Albemarle has received application for a two-lot subdivision in the Rural Area for Tax Map Parcel 66-28. There is also a Boundary Line Adjustment with Tax Map Parcel 82-4. This project requires Health Department approval before receiving final County approval. The applicant has provided additional soils information, which is attached. Please review the proposal for suitable subsurface drainfields which comply with the provisions of Chapter 18, Sections 4.2.2, 4.2.3, 4.2.4, and Chapter 14, Sections 14-309 and 14-310 of the Albemarle County Code. Should you have any comments please feel free to contact me.

Sincerely,

Tori Kanellopoulos

Tori Kanellopoulos

Planner

Department of Community Development

Voice: (434) 296-5832 ext. 3270

Fax: (434) 972-4035

OSE/PE Report For: Construction Repair Voluntary Upgrade Certification \boxtimes Subdivision Inspection Approval Report Permit Permit Permit Letter **Property Identification:** 911 Address: ____ City: ____ Lot: Residue Section: ____ Subdivision: ____ GPIN or Tax Map #: 66-28 Health Department ID #: Latitude: ____ Longitude: ___ Applicant or Client Mailing Address: Name: Jeremy Manning-Smith Street: P.O. Box 109 City: Keswick State: VA Zip Code: 22947 Prepared by: OSE Name: William J. "Jeff" Loth, IV License Number: 1940001316 Address: 222 Sycamore Lane City: Afton State: Virginia Zip Code: 22920 PE Name: ____ License Number: ____ Address: City: ____ State: ___ Zip Code: ____ Date of Revision 1: Date of Report: 11/16/18 Date of Revision 2: OSE/PE Job Number:____ Contents/Index of this report (e.g., Site Evaluation Summary, Soil Profile Descriptions, Site Sketch, Abbreviated Design, etc.) Cover Page Application Soil Summary Report Soil Profile & Design Calculations 1" = 100' Sanitary Survey, Well Location, Topography, Boring Locations Reduced Plat **Certification Statement** I hereby certify that the evaluations and/or designs contained herein were conducted in accordance with the applicable provisions of the Sewage Handling and Disposal Regulations (12 VAC5-610), the Private Well Regulations (12 VAC5-630), the Regulations for Alternative Onsite Sewage Systems (12VAC5-613) and all other applicable laws, regulations and policies implemented by the Virginia Department of Health. I further certify that I currently possess any professional license required by the laws and regulations of the Commonwealth that have been duly issued by the applicable agency charged with licensure to perform the work contained herein. ☐ The work attached to this cover page has been conducted under an exemption to the practice of engineering, specifically the exemption in Code of Virginia Section 54.1-402.A.11 I recommend that a (select one): Construction Permit, Certification Letter, Subdivision Approval, Repair Permit, Voluntary Upgrade be (select one): Issued, Denied PE/OSE Signature: Date: 11/16/18

SUB 2018-00124

Commonwealth of Virginia				VDH Use Only					
					Health Department ID# Due Date:				
-		pplication for: Sewage System Water Supply							
-	Owner:				Phone:		-		
1	Mailing Address:	Mailing Address: 1212 Friendship Church Rd.			Phone:	()	-		
+	A gant:	Drakes Branch, VA			Fax:		-		
F	Agent: Mailing Address:	Jeremy Manning-S P.O. Box 109	mith		Phone: () -				
	Maning Address:		7		Phone: Fax:				
+	Site Address:	Keswick, VA 22947					-		
	one Address.				Email:				
T	Directions to Property: west of Rt. 686, 1.6 miles north of Rt. 600								
	2. 1. 2. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.								
	Subdivision:		Section:		Block:		Lot:	Residue	
1	Tax Map: 66-28	Tax Map: 66-28 Other Property			***************************************	Dimension/Acre	eage	151.8588	
L		· Identific	cation:			of Property:			
Г									
	Type of Approval: A.	mliaanta fan naw aanst		Sewage Sy	stem				
	system and to apply fo	r a construction permit	(valid for 18 m	ised to apply I	or a certiii hen ready	to build	rmine ii	land is suitable for a sewage	
	For New Construction		ion Letter	Construc	ction Perm	it Subdi	vision R	eview	
	For New Construction: Certification Letter Construction Permit Subdivision Review For Existing Construction: Repair Modification Expansion Replacement								
						•		•	
	Proposed Use:	a							
	Other (describe)	ne (Number of Bedroom	ms <u>3</u>)	☐ Multi-Far	nily Dwell	ling (Total Number	of Bedro	ooms)	
	U Other (describe)								
	Will there be a basement: ✓ Yes No If yes, will there be fixtures in the Basement? ✓ Yes No								
	Are any conditions pro	posed on this construct	tion permit?	Yes 🛛 No	If yes, pl	lease check or descr	ibe all p	roposed	
	Conditions that apply: Reduced Water Flow Limited Occupancy Intermittent or seasonal use								
L	☐ Temporary use not to exceed 1 year ☐ Other (describe)								
Γ	Water Supply								
	Will the water supply be ☐ Public or ☒ Private Is the Water supply ☐ Existing or ☒ Proposed								
	If proposed, is this a replacement well? Yes No Will the old well be abandoned Yes No								
	Have or will any buildings within 50' of the proposed well been or be termite treated? ☒ No ☐ Yes								
L									
Г	All Applicants								
	Is this an AOSE/PE ap	plication? X Yes	No If ye	es, is the AOS	E/PE pack	age attached?	Yes 🗌	No	

	In order for VDH to process your application you must attach a cita skatch and plot of the property. The cita skatch should show your property. The								
	In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted the property lines, building								
	location and the proposed well and sewage system sites must be clearly marked and the property sufficiently visible to see the topography, otherwise this								
application will be denied.									
	I give permission to the Virginia Department of Health (VDH) to enter onto the property described during normal business hours for the purpose of processing								
	this application and to perform quality assurance checks of evaluations and designs certified by an Authorized Onsite Soil Evaluator (AOSE) or a Professional								
	Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.								
	G!		m	N			11000	21,20/8	
	Signature of Owner/Ag	gent ere	myll	- July 12		Date _	Ded 5	1 1	

Soil Summary Report

General Information							
Date: 11/8/18 Submitted to Albemarle County Health Department							
Applicant: Jeremy Manning-Smith Telephone: () -							
Address: P.O. Box 109, Keswick, V.							
Owner: REW Land LLC & RLP Investments LC Address: 1212 Friendship Church Rd., Drakes Branch, VA 23837							
Location: west of Rt. 686, 1.6 miles north of Rt. 600							
Tax Map: 66-28	Subdivision:						
Block/Section:	Lot: Residue						
	Soil Information Summary						
1. Position in landscape satisfactory? Yes ☒ No ☐							
Describe: shoulder & sideslope							
2. Slope 12 %							
3. Depth to Rock or impervious strat	a: Max. 60+ in. Min. 56 in.						
4. Depth to seasonal water table (gray mottling or gray color): No 🛛 Yes 🗌 Inches							
5. Free water present: No ⊠ Yes ☐ range in inches -							
Yes ⊠ Texture Group I ☐ II ☐ III ⊠ IV ☐							
6. Soil percolation rate estimated?	No Estimated rate 75 min/inch						
7. Permeability test performed Yes \(\subseteq \text{No } \subseteq \)							
If yes, note type of test performed and attach							
⊠ Site Approved	Drainfield to be placed at 30" depth at site designated on sketch.						
☐ Site Disapproved							
Reason for Rejection							
1. Position in landscape subject to flooding or periodic saturation							
	 Insufficient depth of suitable soil over hard rock Insufficient depth of suitable soil to seasonal water table 						
4. Rates of absorption too slow.							
 Insufficient area of acceptable soil for required drainfield, and or reserve area Proposed system too close to well 							
7. Cother Specify							

Soil Profile

Hole	Horizon	Depth (in)	Material Description	Txt Grp
1	Ap	0-3	10yr3/3 dark brown Loam	2
	В	3-8	7.5yr4/4 brown Clay Loam, weak granular	3
	BtC	8-60	2.5yr5/8 red Clay Loam, weak fine SBK, with common very soft 10yr5/8 yellowish	3
			brown Silt Loam, 10yr8/1 white feldspars, very highly weathered schist fragments and	
			quartz fragments	
				1
2	Ap	0-2	10yr3/3 dark brown Loam	2
	В	2-7	7.5yr4/4 brown Clay Loam, weak granular	3
	BtC	7-60	2.5yr5/8 red Clay Loam, weak fine SBK, with common very soft 10yr5/8 yellowish	3
			brown Silt Loam, 10yr8/1 white feldspars, very highly weathered schist fragments and	
			quartz fragments	
	· · · · · · · · · · · · · · · · · · ·			
3	Ap	0-2	10yr3/3 dark brown Loam	2
	В	2-5	7.5yr4/4 brown Clay Loam, weak granular	3
	BtC	4-56	2.5yr5/8 red Clay Loam, weak fine SBK, with common very soft 10yr5/8 yellowish	3
	ĺ		brown Silt Loam, 10yr8/1 white feldspars, very highly weathered schist fragments and	
			quartz fragments	
	R	56	Auger refusal on schist	
				······································
4	Ap	0-5	10yr3/3 dark brown Loam	2
	В	5-8	7.5yr4/4 brown Clay Loam, weak granular	3
	BtC	8-60	2.5yr5/8 red Clay Loam, weak fine SBK, with common very soft 10yr5/8 yellowish	3
			brown Silt Loam, 10yr8/1 white feldspars, very highly weathered schist fragments and	
			quartz fragments	<u> </u>
5	Ap	0-5	10yr3/3 dark brown Loam	2
	В	5-11	7.5yr4/4 brown Clay Loam, weak granular	3
	BtC	11-60	2.5yr5/8 red Clay Loam, weak fine SBK, with common very soft 10yr5/8 yellowish	3
			brown Silt Loam, 10yr8/1 white feldspars, very highly weathered schist fragments and	
			quartz fragments	

Design Basis

A. Estimated Percolation Rate	<u>75 @ 30"</u>		
B. Trench bottom square feet required per bedroom	<u>596</u>		
C. Number of bedrooms	<u>3</u>		
Area Calculations A. Length of trench (ft.)	<u>100</u>		
B Length of available area (ft.)	200		
C. Width of trench (ft.)	<u>3</u>		
D. Number of trenches	<u>6</u>		
E. Center-to-center spacing (ft.)	9		
F. Width required (ft.)	<u>48</u>		
G. Width of available area (ft.)	<u>70</u>		
H. Total square footage required	<u>1788</u>		
I. Square footage in design	1800		
J. Is a reserve area required?	Yes, 100% Reserve Area provided		



