

RECORD OF INSPECTION-SEWAGE DISPOSAL SYSTEM

Owner MOYERS, Mr. Harold **Rt. #1,** **Date** 8/26/74 **Case No.** 119-74
Address Box 283, Linville, Va. 22834 **Phone** 833-6114
(Mailing Address)
Occupant _____ **Address** _____ **Phone** _____
(Mailing Address)
Exact Location of Premises West of Rd. #752, 1 mile South of Rd. #783.
(Subdivision, Street or Road Name, Section or Lot No.)

WATER SUPPLY INSPECTION

Installed according to Permit Design Yes No. Distance to nearest House Sewer _____ feet. Distance to nearest Sewage Disposal System _____ feet. (Use Form LHS-143 for Detailed inspection of Water Supply Reference Materials.)

SEWAGE DISPOSAL SYSTEM INSPECTION

- (1) LOCATION**
 Allotted Area adequate Yes No. Distance from nearest lot lines 25 feet. Trees _____ feet. Water Supplies 7100 feet. Buildings _____ feet.
- (2) INSTALLATION AND DESIGN**
 Installed according to Permit Design Yes No
 Have additional Household Appliances been added NOT on Permit: Automatic Washer Garbage Disposal Other _____
(Describe)
- (3) SOIL CONDITION**
 Are there soil conditions now evident which indicate system may be unsatisfactory as designed: Yes No. If Yes, show adjustments required under "Remarks" below.
- (4) HOUSE SEWER LINE**
 Installed Yes No. Type of material Sched 40 plastic Size 4 Inches.
- (5) SEPTIC TANK**
 Constructed of Recessed concrete
(Kind of Material)
 Inside Dimensions Length 7 1/2 feet. Width 3 1/2 feet. Liquid Depth 4 feet. Depth of Air Space 12 inches. Inside Fittings comply with requirements Yes No.
- (6) DISTRIBUTION BOX**
 Watertight and equal surcharge to each line by Water Test Yes No. Distribution Box provided with _____ (Number) extra outlets for future use.
- (7) SUBSURFACE ABSORPTION FIELD**
 Total Area in bottom of ditches 800 square feet. Number of ditches 5 Length of ditches 80 feet. Grade of ditches Minimum 2 Inches per 100 feet. Maximum 6 inches per 100 feet. Has system been checked by instruments (Level) Yes No
 Type aggregate used gravel
 Depth of aggregate under Tile _____ inches
 Total depth of aggregate 13 inches
 Depth of backfill over aggregate 10-20 inches
- (8) SURFACE DRAINAGE**
 Storm Drains from House and Basement flowing away from Subsurface Drainage Field: Yes No. Was Surface Drainage required Yes No. If Yes, has this been provided Yes No. Has area been drained by lowering Ground Water Table: Yes No. Not required.
- (9) Are follow-up inspections necessary** Yes No.

Septic Tank Contractor: B. S. H. **Address** _____ **Phone** _____
This Sewage Disposal System (Is) (Is Not) Approved by R. H. H. **Health Department.**
Date 8/26/74 **Signed** Arthur W. R. [Signature] **Date** _____ **Approved** _____
(Sanitarian) (Health Director)
Date _____ **Approved** _____ **Date** _____ **Approved** _____
(Advisory Sanitarian) (Reviewing Authority - Other Agency)

With proper maintenance, approved Sewage Disposal systems may be expected to function satisfactorily, provided no overloading or physical damage occurs to the system. **Remarks:** _____

JHB

PERMIT TO INSTALL REPAIR, REASONS FOR REJECTION
WATER SUPPLY SEWAGE DISPOSAL SYSTEM

(1) Void after (12) twelve months. (2) Automatically cancelled when site conditions are changed from those shown on permit.
 (3) Automatically cancelled should facts later become known that a potential hazard would be created by continuing installation.

Owner Harold Moyer Address Box 283 Rt. 1 L-VILLE Phone _____
 (Mailing Address)

Occupant _____ Address _____ Phone _____
 (Mailing Address)

Exact Location of premises W of Rd. 752 1 mile S of Rd. 783
 (Subdivision, Street or Road Name, Section or Lot No.)

FOR: Dwelling Other _____ Automatic Washing Machine Yes No Consumption _____ gal. per day
 Actual Potential Bedrooms 3 Garbage Disposal Unit Yes No (Actual estimated Water)

(1) WATER SUPPLY (Existing) Class III Approved Yes No Other WELL
 (To be installed) Class _____ Cased _____ ft. to be grouted _____ ft.

(Unless supported by positive evidence Class III is to be considered as to be installed.)

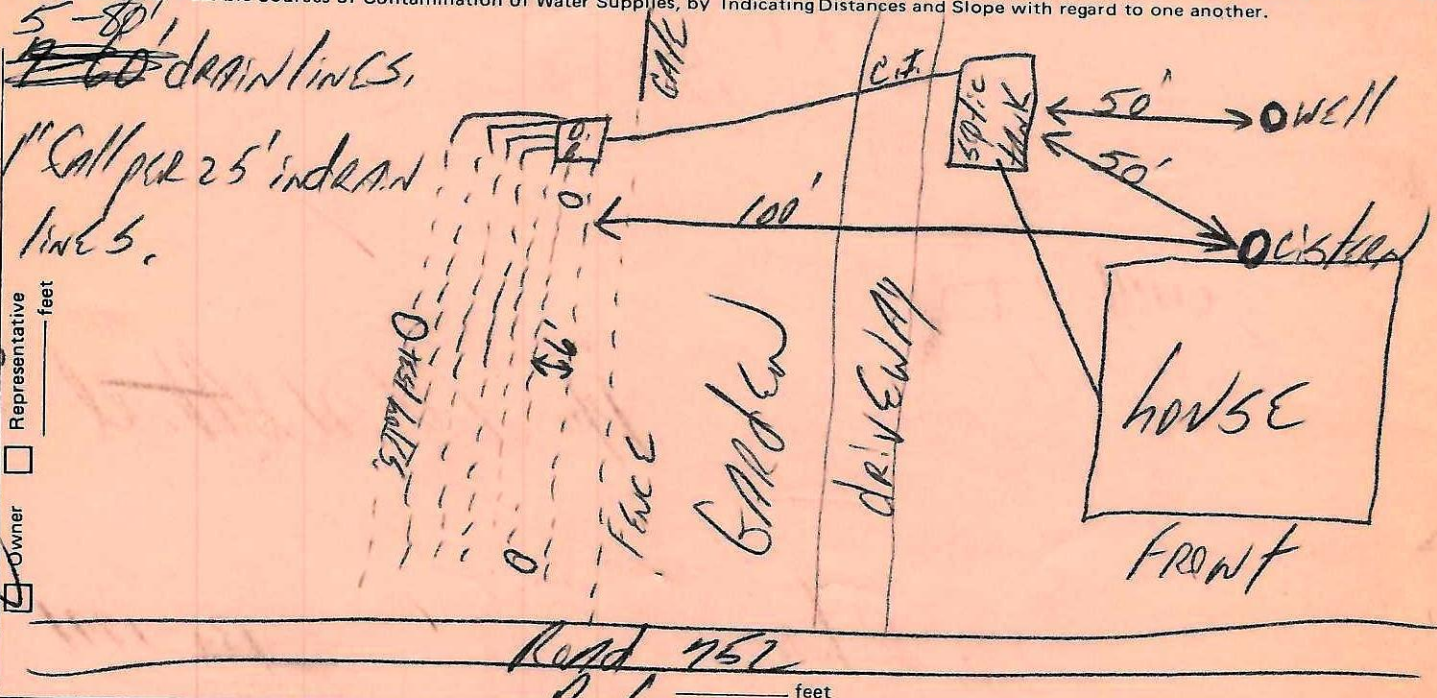
(2) SOIL STUDY Naturally drained, suitable by sight Yes No Technical Classification _____
 Estimated Percolation Rate (Minutes per inch) 1-10 11-25 26-50 > 51 Percolation Test Required Yes No Rate _____ (If Known)
 (Minutes per inch to nearest 10 minutes)
 Depth to Grey Mottles _____ inches (estimate over 4 ft.) OTHER _____
 Surface drainage required Yes No OTHER DRAINAGE _____

(3) HOUSE SEWER LINE Size 4 inches. Type of material required C.I. Distance from Water Supply 50 feet.

(4) DETAILS OF CONSTRUCTION Watertight Septic Tank of CONCRETE Material Liquid Capacity 750 gallons.
 Inside Dimensions Length 7 1/2 feet. Width 3 1/2 feet. Liquid Depth 4 feet. Depth of Air Space 10 feet.

SUBSURFACE ABSORPTION FIELD Number of square feet required 800 Type aggregate required #5 sub grade
 (5) Depth of aggregate from base of tile to bottom of ditches 6 inches. Allowable fall 2 to 6 inches.
 Total aggregate minimum depth 13 inches or more. Depth of drainfield to be 36 inches from surface of original ground.
 Distance from well to septic tank 50 feet; distance from well to drainfield 100 feet.

Rough Sketch of Premises (including adjacent properties if pertinent, Showing Location of Lot Line, Buildings, Water Supplies, Sewage Disposal Systems, Trees, and Other Possible Sources of Contamination of Water Supplies, by Indicating Distances and Slope with regard to one another.



Signature Harold Moyer
 Representative Owner

Note: Owner or his agent must notify Health Department, Phone 434-1771 when installation is ready for inspection. If any Sewage Disposal System, or part thereof, is covered before being inspected by the Health Department, it shall be uncovered at the direction of the Health Director or his agent. CONDITIONS DISCOVERED DURING INSTALLATION MAY REQUIRE ADJUSTMENTS OF SYSTEM DESIGN. Changes from above specifications require Health Department approval before being made.

Based on the above information, the undersigned recommends that this permit be issued.
 Date _____ Approved _____ (Reviewing Authority)
 Date 3/24 Signed Mr. [Signature] (Sanitarian or Health Director)