Water Supply and/or Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health
GREENE CO. HEALTH DEPARTMENT

Health Department
Identification Number: 139-98-0058
Tax Map Number: 50(A)14--25

General Information

Water Supply System: PUBLIC **Sewage Disposal System:** REPAIR

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: **VALLEY VIEW LAND TRUST C/O P. MORRIS** Telephone: 804-985-~~0058~~ 7694

Agent: **RODNEY KIBLER** Address: **P.O. BOX 224, QUINQUE, VA 22965**

For a Type I Sewage Disposal System or Well to be constructed on/at
RT 33 NEXT TO KINGDOM HALL

Sec/Bk ____ Lot ____ Actual or estimated water use **900 gpd - 6 bedrooms**

DESIGN	NOTE: SEWAGE DISPOSAL SYSTEM INSPECTION RESULTS
Water supply, PUBLIC SUPPLY	Water supply location: Satisfactory yes__ no__ EHS _____ DATE _____
Building Sewer: 4" I.D. PVC Schedule 40, or equivalent. Slope 1.25" per 10ft(min.) Other _____	Building Sewer: Satisfactory yes__ no__ EHS _____ DATE _____
Septic Tank: Capacity: 1800 Gals.(min.) Other _____	Pretreatment unit: Satisfactory yes__ no__ EHS _____ DATE _____
Inlet-outlet structure: PVC Schedule 40, 4" tees or equivalent. Other _____	Inlet-outlet structure: Satisfactory yes__ no__ EHS _____ DATE _____
Pump and pump station: NO	Pump & pump station: Satisfactory yes__ no__ EHS _____ DATE _____
Gravity mains: 3" or larger I.D., min. 6" fall per 100 ft., 1500 lb. crush strength or equivalent. Other _____	Conveyance method: Satisfactory yes__ no__ EHS _____ DATE _____
Distribution Box: Precast concrete with 10 ports. Other _____	Distribution box: Satisfactory yes__ no__ EHS _____ DATE _____
Header lines: Material: 4" I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2 ft into absorption trench. Slope 2" min. Other _____	Header lines: Satisfactory yes__ no__ EHS _____ DATE _____
Percolation lines: Gravity 4" plastic 1000 lb. per foot bearing load or equiv. slope 2" - 4" (min. max.) per 100ft Other _____	Percolation lines: Satisfactory yes__ no__ EHS _____ DATE _____
Absorption trenches: Sq ft. required: 2160 depth from ground surface to bottom of trench 60": aggregate size .5-1.5": Trench bottom slope 2-4"/100 ft center to center spacing 9 FT: Trench width 36" Depth of aggregate 13": Trench length 80 ft: Number of trenches 9 :	Absorption trenches: Satisfactory yes__ no__ EHS _____ DATE _____ Date _____ Approved by: _____ Environmental Health Specialists

C.H.S. 202A

Page Number 2 of 3

Health Department Identification Number 139-98-0058

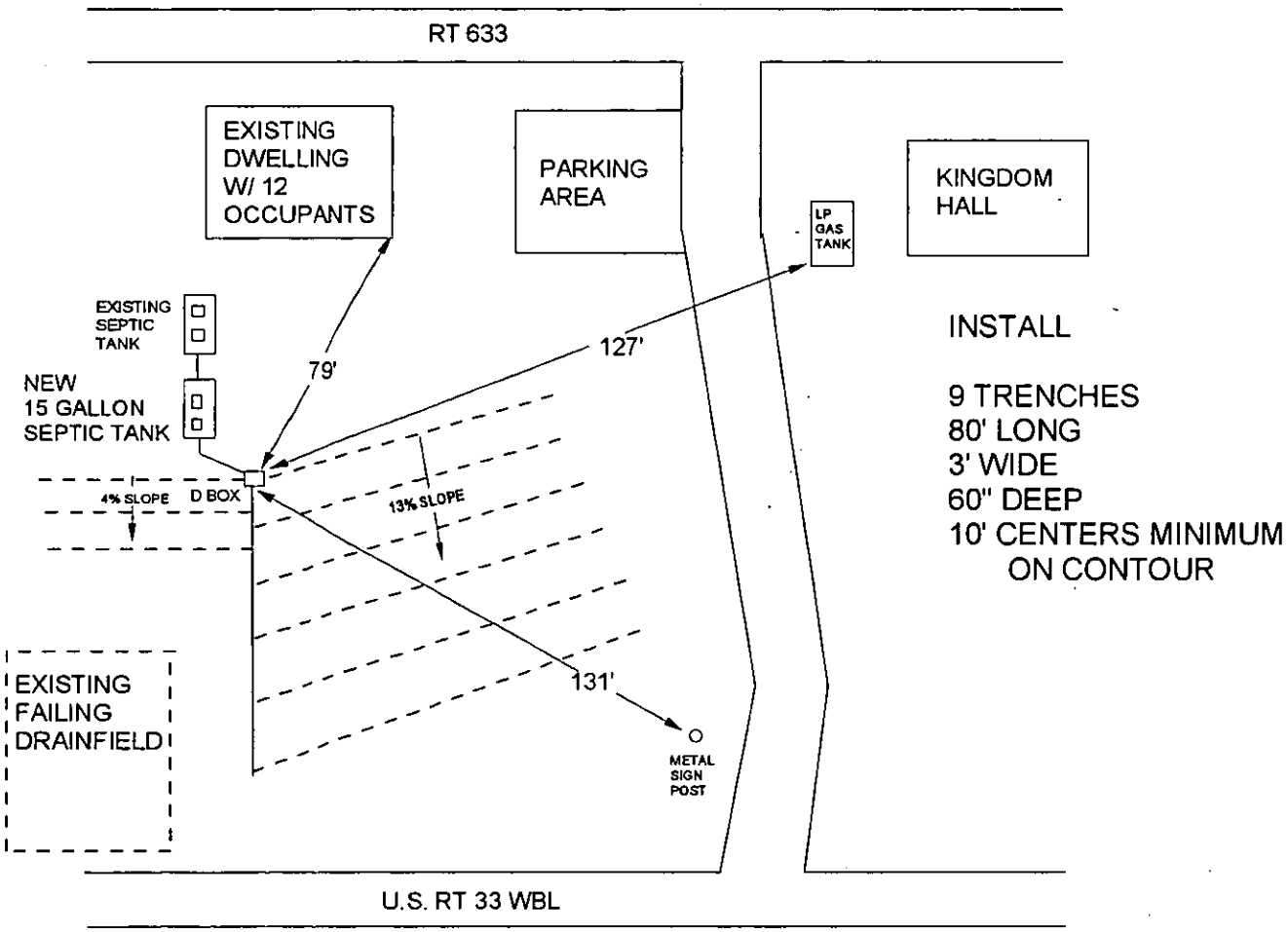
Schematic drawing of sewage disposal and/or water supply system and topographic features.

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.

DRAWING NOT TO SCALE

OUTER TRENCHES OPEN FOR INSPECTION
INNER TRENCHES 3-4 INSPECTION POINTS
DO NOT ATTEMPT TO INSTALL DRAINFIELD
DURING PERIODS OF INCLEMENT WEATHER



REPLACE INLET/OUTLET STRUCTURES IN EXISTING SEPTIC TANK

ADD 1500 GALLON SEPTIC TANK TO SYSTEM

RECOMMEND INSTALLATION OF ZABELL FILTER IN 1500 GALLON SEPTIC TANK

This sewage disposal system and/or water supply is to be constructed as specified by this permit.

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.

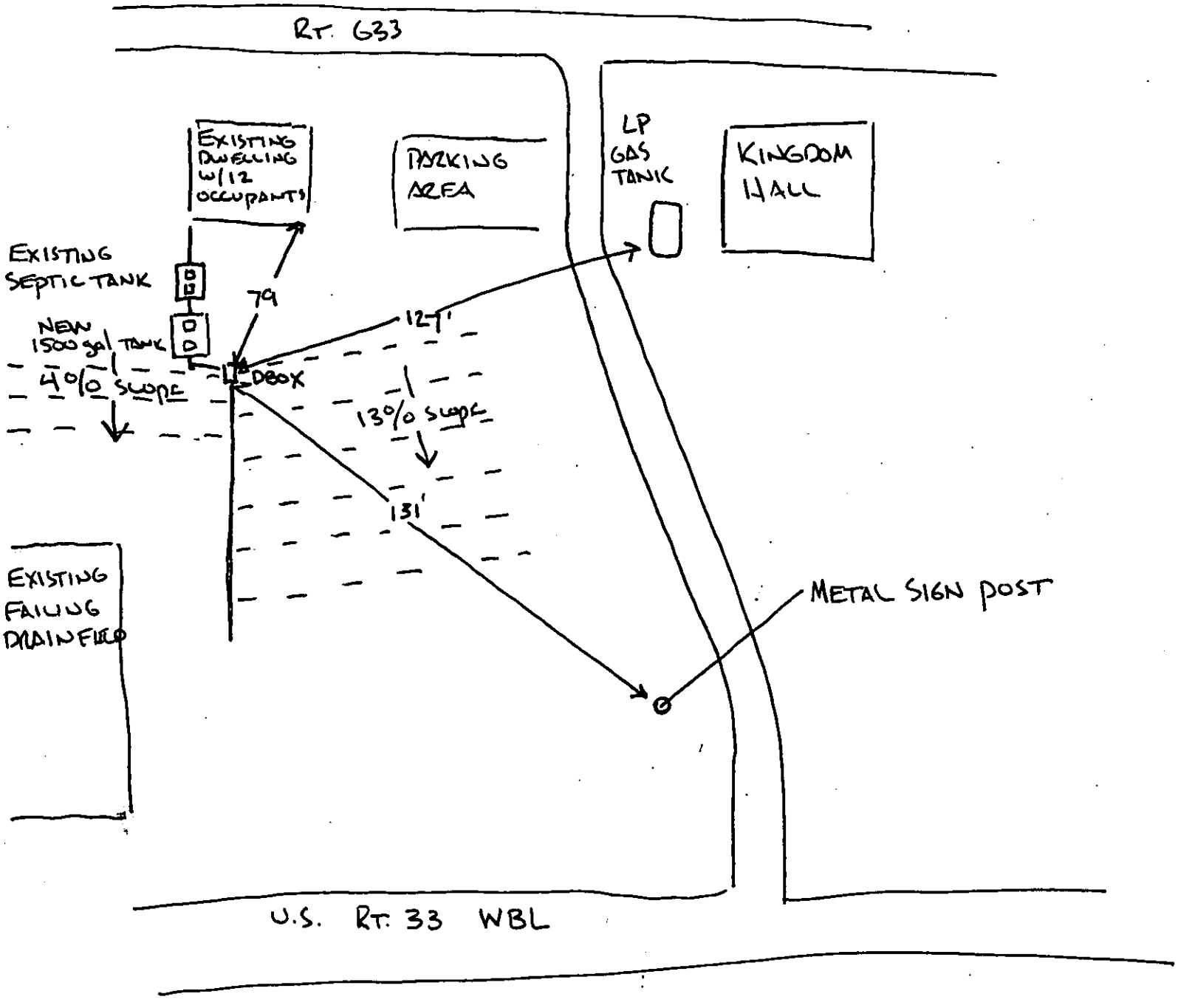
Date: 4/15/98 Issued by: _____
Environmental Health Specialist

Date: _____ Reviewed by: _____
Environmental Health Supervisor

This Construction Permit Valid until 10/15/98

Health Department Identification Number: 139 98 0058
Tax Map Number: 50(A)14--25

* See page #3 for design drawing. This drawing is not to scale!
* Basement (floor is below surface of ground)? (YES) NO Walkout (YES) NO
* Fixtures in basement? (YES) NO If yes, is a lift pump required? YES NO
* Pump is required when the ground surface over the drainfield trenches is at a higher elevation than any plumbing fixture or the sewer line leaving the house.
* Do not disturb the drainfield or reserve area(s).
* Permit is void if the house location interferes with the proposed well or drainfield/reserve locations.
* No buried utility service shall be closer than 10' to any part of this system.
* Follow all OSHA requirements
* Do not install drainfield system during periods of wet weather or wet soil.
* It is recommended that all trees be removed from the drainfield area and all hydrophilic trees within 10' of the drainfield area MUST be removed.
* Placed untreated building paper or approved material over the trench gravel.
* The maximum soil cover over septic/pump tanks and 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, discharge from water treatment systems, 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 IIIB wells. This distance increases by 25' for every 5% of slope for wells down slope of any source of contamination (house site, drainfield/reserve areas, etc).
* It is the owner's responsibility to ensure that the well and septic system is on the property & does not interfere with utilities and easements.
* Well & all water lines shall be disinfected prior to water sampling.
* Health Dept. Operation Permit & Well Inspection Report required prior to occupancy.
* 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 operated in a sanitary manner.
* All septic and well contractors must have a current license with the Va. Dept. of Commerce.
* Dry holes must be permanently abandoned in accordance with the Private Well Regulations.
* Is septic tank location in a place of suspected high water table? YES NO If yes, please refer to tank manufacturer's instructions on placing tanks in saturated areas.
* It is illegal to put either well or septic system into use without final Health Department approval.



REPLACE INLET/OUTLET STRUCTURES IN EXISTING SEPTIC TANK

ADD 1500 GALLON SEPTIC TANK TO SYSTEM

RECOMMEND INSTALLATION OF ZABELL FILTER IN 1500 gal. SEPTIC TANK

Mail to PO Box 224
Quinque Va 22965

Commonwealth of Virginia
Application for a Sewage Disposal and/or Water Supply Permit

Health Department ID 139 98 0058

To Be Completed By The Applicant

Type of sewage system: ___ New X Repair ___ Expanded ___ Conditional
FHA/VA yes ___ no ___ Case No. ___ 985-7694

Owner Rodney Kibler Address PO Box 115 Stanardsville Va Phone 985-7473

Agent ___ Address ___ Phone ___

Directions of Property Quinque (Near Talus Manns)

Subdivision ___ Section ___ Block ___ Lot ___

Other Property Identification Rt 33 next to Kingdom Hall

Dimension/size of Lot/Property ___

Other Application Information

I. **Building/facility** ___ New ✓ Existing
Intermittent Use ✓ Yes ___ No If yes, describe ___

II. **Residential Use** ✓ Yes ___ No
Termite Treatment ✓ Yes ___ No
___ Single Family (Number of Bedrooms ___) ✓ Multi-family (Number of Units 2)

Basement ✓ Yes ___ No
Fixtures in Basement ✓ Yes ___ No

III. **Commerical Use** ✓ Yes ___ No Describe: ___

Commerical/Wastewater ___ Yes ✓ No Number of Patrons ___
Number of Employees ___

If yes, give volumes and describe ___

IV. **Water Supply:** ✓ Public ___ New ___ Existing
___ Private ___ New ___ Existing
Describe: ___

V. **Proposed Sewage Disposal Method:**
Onsite Sewage Disposal System: ✓ Septic Tank Drainfield ___ LPD ___ Mound ___ Other

Public Sewerage System

Attach a site plan (rough sketch) showing dimensions of property, proposed and/or existing structures and driveways, underground utilities, adjacent soil absorption system, bodies of water, drainage ways, and wells and springs within 200 feet radius of the center of the proposed well or drainfield. Distances may be paced or estimated.

The property lines and building location are clearly marked and the property is sufficiently visible to see the topography. I give permission to the Department to enter onto the property described for the purpose of processing this application.

Rodney Kibler — Signature of Owner/Agent

3/3/98 — Date

CHS 200

79/127 | 131

Page 1 of _____ DATE: 4/7/98

ID #: 139-98-0058 ASSIGNED TO: Roger Nelson

OWNER'S NAME: VALLEY VIEW LAND TRUST C/O P. MORRIS

SYSTEM TYPE: I DIRECTIONS: _____

WELL TYPE: PUBLIC _____

TRENCH DEPTH: 60" _____

OF TRENCHES: 9 DEPTH TO ROCK: N/A

LENGTH: 80 DEPTH TO WATER TABLE: N/A

CENTERS: 10' DEPTH TO FREE WATER: N/A

SLOPE: 13% /LANDSCAPE: SIDESLOPE TEXTURE GROUP: II

PERK RATE: 45 MAIL TO: _____

H#	Hz	DEPTH	DESCRIPTION	TEX. GRP
1	A	0-4	Brown 7.5yr 4/4 Loam	
	B	4-29	Weak red 10yr 4/6 clay loam	
	C	29-72	Reddish Brown 5yr 4/4 Loam	
2	A	0-5	Brown 7.5yr 4/4 Loam	
	B	5-22	Reddish Brown 2.5yr 4/4 clay loam	
	C	22-72	Yellowish red 5yr 4/6 Loam	

SIGNATURE OF EVALUATOR: B. C. N.

RECORD OF INSPECTION-SEWAGE DISPOSAL SYSTEM

33-2

Date 11/1/80 Case No. ——

Owner Alvis Morris Address Stanardsville, Va Phone
(Mailing Address)

Occupant Ai Rent Address Phone
(Mailing Address)

Exact Location of Premises To the west of Rt. 33 about 0.1 mi west of Rt. 633
(Subdivision, Street or Road Name, Section or Lot No.)

WATER SUPPLY INSPECTION

Installed according to Permit Design ☒ Yes ☐ No. Distance to nearest House Sewer 50+ feet. Distance to nearest Sewage Disposal System 100+ 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 5+ feet. Trees none feet.
Water Supplies 100+ feet. Buildings none feet.

(2) INSTALLATION AND DESIGN
Installed according to Permit Design ☒ Yes ☐ No.
Have additional Household Appliances been added NOT on Permit? ~~Yes~~ No
☐ 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 ———
Size ——— Inches.

(5) SEPTIC TANK
Constructed of Concrete (1000 gal) (Kind of Material)
Inside Dimensions Length 8 feet. Width 4 feet.
Liquid Depth 4 feet. Depth of Air Space 1 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 5 (Number) extra outlets for future use.

(7) SUBSURFACE ABSORPTION FIELD
Total Area in bottom of ditches 1200 square feet.
Number of ditches 4 Length of ditches 100X3 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 6 inches
Total depth of aggregate 15 inches
Depth of backfill over aggregate 30 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: Earl Shifflett Address Stanardsville, Va Phone

This Sewage Disposal System (Is) ~~(Is Not)~~ Approved by Greene, C Health Department

Date 11/1/80 Signed W. H. Crews (Sanitarian)

Date Approved (Reviewing Authority)

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

Virginia Department of Health
LHS-141 Rev. 1/76

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.

FHA/VA ☐ Yes ☒ No Date 11/1/80 Case No. _____

Owner Julius Morris Address Stanardsville, Va Phone _____
(Mailing Address)

Occupant for Rent Address _____ Phone _____
(Mailing Address)

Exact Location of premises To the south of Rt. 33 about 0.6 mi. west of Rt. 633
(Subdivision, Street or Road Name, Section or Lot No.)

FOR: ☒ Dwelling ☒ Other offices Automatic Washing Machine ☐ Yes ☒ No Consumption Avg gal. per day
Actual ☐ Potential ☐ Bedrooms _____ Garbage Disposal Unit ☐ Yes ☒ No (☐ Actual ☒ Estimated Water)
Additional wastes none

(1) WATER SUPPLY (Existing) Class _____ Approved Yes ☐ No ☐ Other well
(To be Installed) Class n/a Cased 11 ft. to be grouted n/a 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 Unknown (If Known)
Estimated Percolation Rate (Minutes per inch) 1-10 ☐ 11-25 ☐ 26-50 ☐ > 51 ☒ Percolation Test Required ☐ Yes No ☒ Rate _____ (Minutes per inch to nearest 10 minutes)
Depth to Grey Mottles >60 inches (estimate over 4 ft.) OTHER None
Surface drainage required ☐ Yes ☒ No OTHER DRAINAGE _____

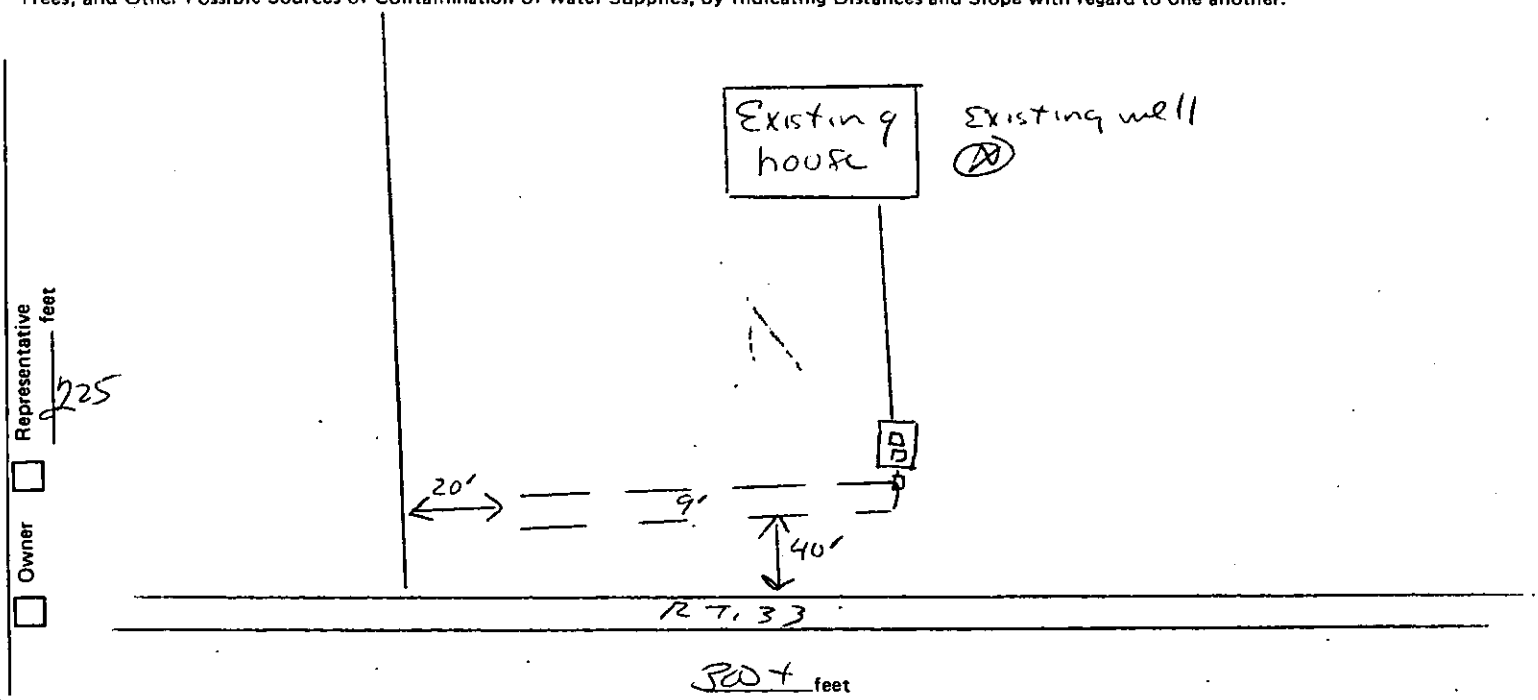
(3) HOUSE SEWER LINE Size 4 inches. Type of material required PVC Distance from Water Supply 50+ feet.

(4) DETAILS OF CONSTRUCTION Watertight Septic Tank of Concrete Material Liquid Capacity 750 gallons.
Inside Dimensions Length 7 feet. Width 3.6 feet. Liquid Depth 4.0 feet. Depth of Air Space 1.0 feet.

SUBSURFACE ABSORPTION FIELD Number of square feet required 600 Type aggregate required gravel

(5) Depth of aggregate from base of tile to bottom of ditches 6 inches. Allowable fall 2 to 6 inches.
Total aggregate minimum depth 12 inches or more. Depth of drainfield to be 40 inches from surface of original ground.
Distance from well to septic tank 50+ feet; distance from well to drainfield 100+ feet. MIN TO ALL INDIV. water supplies

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

Note: Owner or his agent must notify Lewis G Health Department, Phone 985-2160 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 _____ Date 11/1/80 Signed _____
(Reviewing Authority) (Sanitarian or Health Director)

LHS - 121 REV. 12/71
Virginia State Department of Health

DUPLICATE

GREENE COUNTY HEALTH DEPARTMENT
STANARDSVILLE, VIRGINIA

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

TO: Greene Co Dept Zoning

FROM: GREENE COUNTY HEALTH DEPARTMENT

DATE: Nov 21, 1989

SUBJECT: Change of use of Building

D.B.# _____ TAXMAP # _____ PARCEL # _____

OWNER Rodney D. Kibler Phd.

SUBDIVISION _____ LOT# ____ BLOCK ____ SECT. ____

GENERAL LOCATION North of Rt 33 about 0.1 mile west of Rt 633

TRAILER PARK _____ LOT# _____

PERSON CONTACTED, IF BY PHONE _____

☒ THIS IS TO INFORM YOUR DEPARTMENT THET THE EXISTING SYSTEM IS ADEQUATE FOR THE PROPOSED USE.

☒ OTHER Proposed use will not include more than 6 occupants and will have no more than 3 bedrooms per letter from Mr Kibler (enclosed)

Dwayne Z Dietz
Environmental Health Specialist

GREENE COUNTY HEALTH DEPARTMENT
STANARDSVILLE, VIRGINIA

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

MEMORANDUM

TO: Ruckersville Congregation of Jehovah's Witnesses
800 Norwood Lane
Earlysville Va 22936

FROM: Dwayne E Dixon, Sanitarian
Greene County Health Department

OWNER: —

The soil at 3.01 acre parcel

located at North west intersection of Rt 33 and 633

appears to be suitable for the placement of subsurface drainfields. These findings are based on soils studies conducted by myself or a soil scientist under my supervision.

The lot sizes are such that there appears to be enough area to install the required amount of drainfield for an average size dwelling, plus any reserve area required by section 8.06 of the Commonwealth of Virginia State Board of Health Sewage Handling and Disposal Regulations.

However, each lot will be evaluated on its own merit, and further tests may be required at the time the septic permit is applied for. Issuance or denial of the permit can be based on these tests.

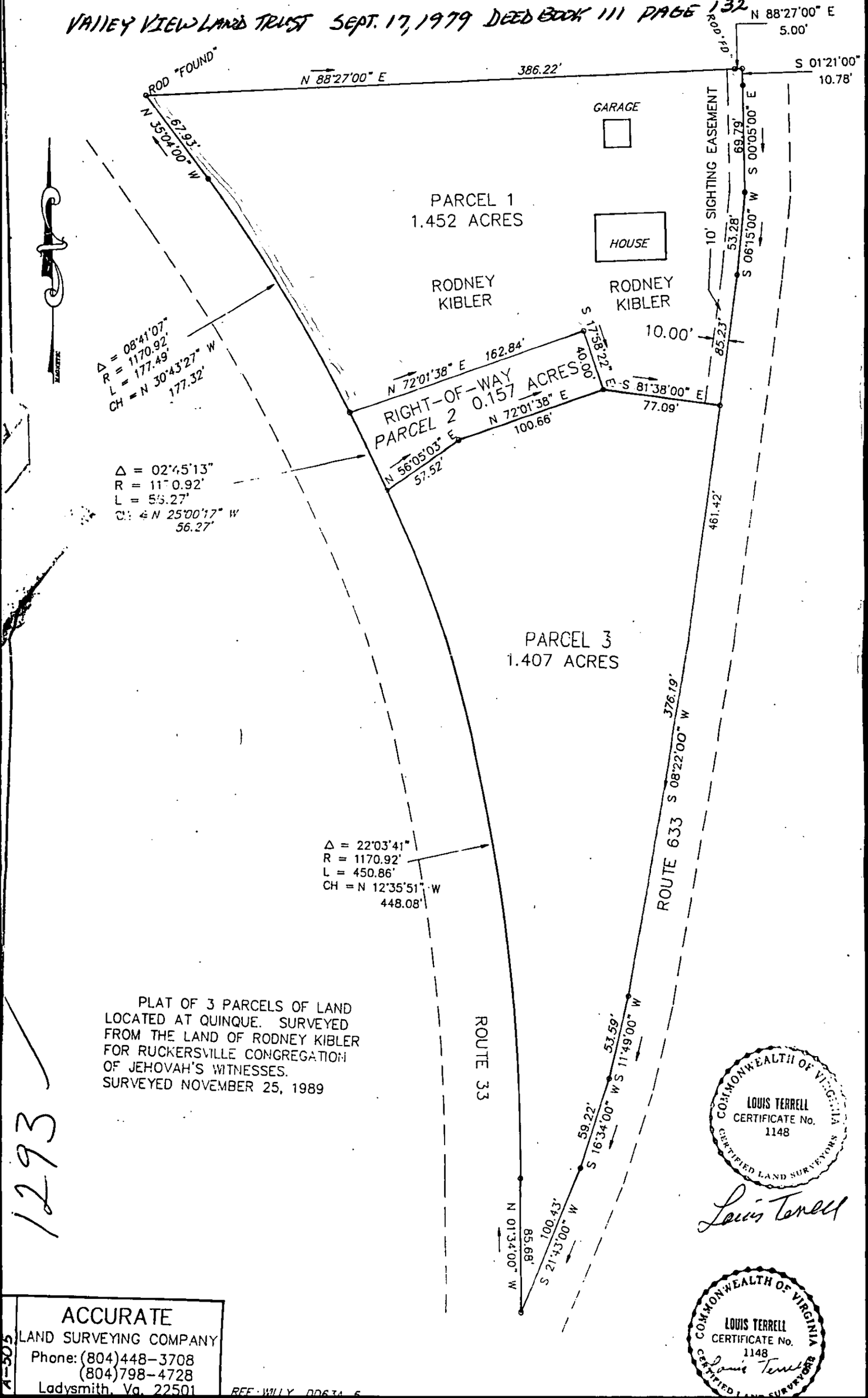
Copies of these preliminary soil studies are on file at the Greene County Health Department showing proposed drainfield sites, house sites, and well sites if applicable. No change to these sites are to be made without proir approval from the approprite authorities. No work is to be started without proir approval from the approprite authorities.

REMARKS: pine Rate 22 requiring 1800 square feet of drainfield. Enough to serve congregation of 200 and a 2 bedroom apartment

Based on Pine Rate obtained from report by E.O. Gooch and assoc. Owner will RETURN Copy of Results.

J.W. LAMB JULY 20, 1929 DEED BOOK 21 PAGE 310

VALLEY VIEW LAND TRUST SEPT. 17, 1979 DEED BOOK 111 PAGE 132



PLAT OF 3 PARCELS OF LAND LOCATED AT QUINQUE. SURVEYED FROM THE LAND OF RODNEY KIBLER FOR RUCKERSVILLE CONGREGATION OF JEHOVAH'S WITNESSES.
SURVEYED NOVEMBER 25, 1989

COMMONWEALTH OF VIRGINIA
LOUIS TERRELL
CERTIFICATE No. 1148
CERTIFIED LAND SURVEYORS

Louis Terrell

COMMONWEALTH OF VIRGINIA
LOUIS TERRELL
CERTIFICATE No. 1148
CERTIFIED LAND SURVEYORS

Louis Terrell

1293

ACCURATE
LAND SURVEYING COMPANY
Phone: (804)448-3708
(804)798-4728
Ladysmith, Va. 22501

REF: WILL 00634 6

A-305