

10-5-94.



COMMONWEALTH OF VIRGINIA

ORANGE COUNTY HEALTH DEPARTMENT

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

350 MADISON ROAD
ORANGE, VIRGINIA 22960
703-672-1291

OWNER: James A Hopkins

ADDRESS: 10050 Tindley Lane
Unionville, VA 22567

PHONE: 854-5739

AGENT: _____

ADDRESS: _____

PHONE: _____

EXACT LOCATION: _____

Rt 20 To Right on 621, 2.5 mi

To Left on Tindley Lane. To end of private road

TAX MAP AND PARCEL NUMBER: _____

35-50

TOTAL EXISTING ACREAGE: _____

150

NUMBER OF PROPOSED LOTS: _____

3

A PLAT OF THE PROPERTY AND A SKETCH OF THE PROPOSED LOT (S) SHOWING IS REQUIRED. THE PROPERTY MUST BE SUFFICIENTLY CLEARED AND MARKED FOR EVALUATION. I James A Hopkins (OWNER/AGENT), GRANT REPRESENTATIVE(S) OF THE ORANGE COUNTY HEALTH DEPARTMENT RIGHT OF ACCESS TO THIS PROPERTY FOR THE PURPOSE OF PROCESSING THIS APPLICATION.

VOID NO Follow UP
by Applicant

Department Use Only:

DATE RECEIVED: _____

DATE OF EVALUATION: _____

DATE PLAT SIGNED: _____

FINAL PLAT RECEIVED: _____

No sites located -
Bad Soil.

Mr. Hopkins is trying
to locate something better.

VDH VIRGINIA
DEPARTMENT
OF HEALTH

0-4 2.5Y 5/4 Sat
 4-9 2.5Y 6/6 O.Y. Sat.
 9-15"
 15- (5") 2.5Y 7/2 H. ^{not} grey + 10YR 5/6 YB
 Heavy Clay.
 7.5YR 5/8 Str. Burn mot.

Same as above.
 Clay @ 20"

0-18"
 18"-30 2.5YR 4/8 + 5YR 5/8 YR + 10YR 7/2 a3
 Clay ↑ Mottling
 30- 2.5Y 6/4 + Strong Burn + 10YR 5/6 Y Burn
 Shrink Swell. Clay.

0-18 2.5Y 5/4 U.O. Burn Sat.
 18-28 2.5Y 6/6 O.Y.
 28- ↓ 2.5Y 7/2 U. grey.

0-9 2.5Y 5/3 L.
 9-18 2.5Y 6/4 Sat.
 18- 2.5Y 6/4 H. Clay.
 2.5Y 7/3
 7.5YR 5/8.

0-9
9-18
18'+

104R 5/3
2.5Y 6/4
104R 5/6

SaL.

2.5Y 6/4 + 8/1

Heptkins CD

Soil Evaluation Form

PAGE _____ OF _____

Commonwealth of Virginia
Department of Health

Health Department
Identification Number NA
Tax Map Number BS-50

General Information

Date 10-5-94 Health Department
Applicant James A. Hopkins Telephone No. 854-5739
Address 10050 Tinder Lane, Unimville, VA
Owner _____ Address _____
Location _____
Subdivision _____ Block/Section _____ Lot _____

Soil Information Summary

1. Position in landscape satisfactory Yes ☐ No ☐ Describe _____
2. Slope ≤ 10 %
3. Depth to rock/impervious strata Max. _____ Min. _____ None _____
4. Depth to seasonal water table (gray mottling or gray color) No ☐ Yes ☒ 18" inches
5. Free water present No ☒ Yes ☐ _____ range in inches
6. Soil percolation rate estimated Yes ☒ Texture group I II III IV
No ☐ Estimated rate _____ min/inch
7. Percolation test performed Yes ☐ Number of percolation test holes _____
No ☒ Depth of percolation test holes _____
Average percolation rate _____
- Name and title of evaluator: Suzanne C. Haldin-Coates
- Signature: Suzanne C. Haldin-Coates

Department Use

☐ Site Approved: Drainfield to be placed at _____ depth at site designated on permit.

☒ Site Disapproved:

Reasons for rejection:

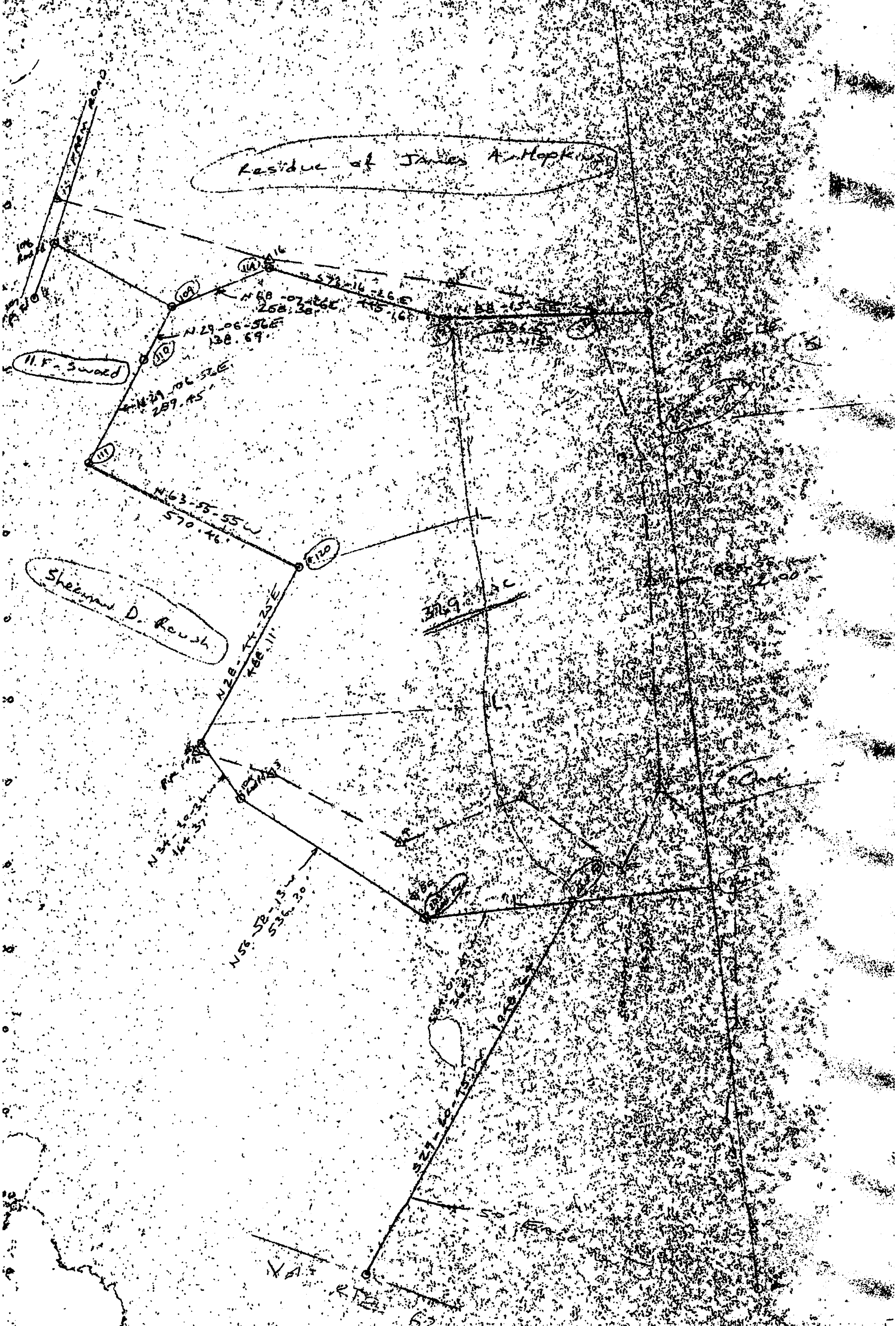
1. ☐ Position in landscape subject to flooding or periodic saturation.
2. ☐ Insufficient depth of suitable soil over hard rock.
3. ☒ Insufficient depth of suitable soil to seasonal water table.
4. ☒ Rates of absorption too slow.
5. ☒ Insufficient area of acceptable soil for required drainfield, and/or Reserve Area.
6. ☐ Proposed system too close to well.
7. ☐ Other Specify _____

~~SECRET~~

~~ATTN: Mr. Savage~~

~~832 7546~~

WORK SHEET





COMMONWEALTH of VIRGINIA

ORANGE COUNTY HEALTH DEPARTMENT

450 N. MADISON ROAD

ORANGE, VIRGINIA 22960

540-672-1291

Environmental Health # 540-672-0223

COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

OWNER: James Hopkins

ADDRESS: 10050 Tinder Lane PHONE: 540-854-5739
Unionville, Va 22566

AGENT:

ADDRESS: _____ PHONE: _____

EXACT LOCATION: RT 20 W TO Rm 621 To Left at

Tinder Lane To 2mi To Farm house

TAX MAP AND PARCEL NUMBER: 35-50

TOTAL EXISTING ACREAGE: 122.5

NUMBER OF PROPOSED LOTS: 2

A PLAT OF THE PROPERTY AND A SKETCH OF THE PROPOSED LOT(S) SHOWING IS
REQUIRED. THE PROPERTY MUST BE SUFFICIENTLY CLEARED AND MARKED FOR
EVALUATION. I James Hopkins (OWNER/AGENT), GRANT
REPRESENTATIVE(S) OF THE ORANGE COUNTY HEALTH DEPARTMENT RIGHT TO
ACCESS TO THIS PROPERTY FOR THE PURPOSE OF PROCESSING THIS APPLICATION.

PQ 70.00
21996712
PQ 2000
22003468

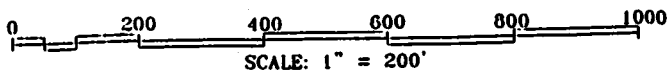
DEPARTMENT USE ONLY:

DATE RECEIVED: 11/12/04

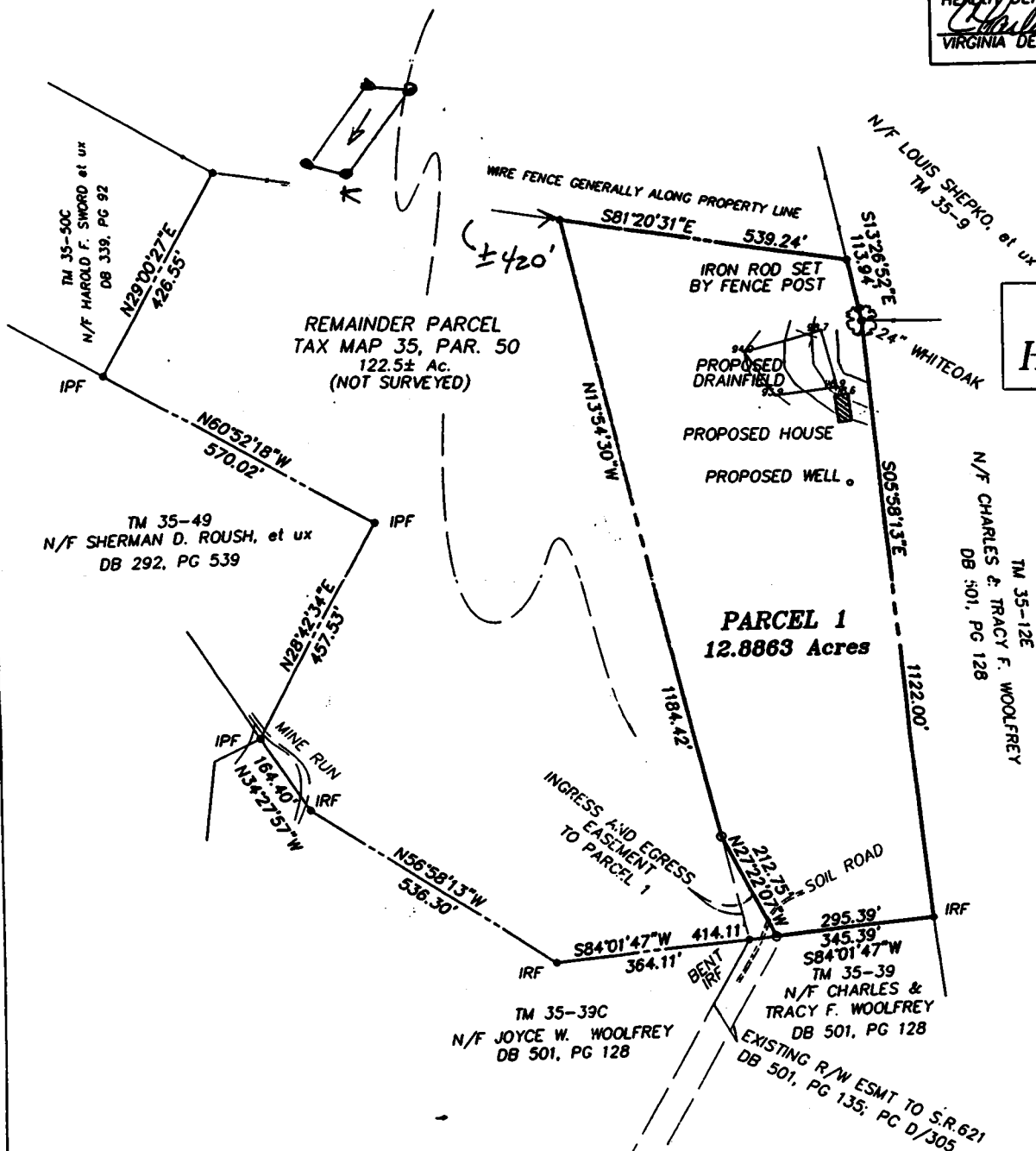
DATE OF EVALUATION: No site visit no plats until 8/9/05

DATE PLAT SIGNED: 8/9/05

FINAL PLAT RECEIVED: 8/26/05



APPROVED:
 THE CONSOLIDATION OF PROPI
 BEEN REVIEWED AND APPROVE
 WITH EXISTING REGULATIONS. N
Carol S. Lendall
 AGENT, BOARD OF SUPERVISOR
Charles A. Richards
 HEALTH DEPARTMENT
Charles A. Richards
 VIRGINIA DEPARTMENT OF TRANSPORTATION



Health

This copy intended for
 Health Department purposes only.

NOTES:

1. THIS SURVEY PREPARED WITHOUT BENEFIT OF TITLE REPORT.
2. OTHER EASEMENTS AND/OR RIGHTS OF WAY MAY EXIST IN ADDITION TO THOSE SHOWN.
3. THE PROPERTY AS SHOWN HEREON IS CURRENTLY IN THE NAME OF JAMES A. HOPKINS, et ux AS RECORDED IN DEED BOOK 300, PAGE 172
4. THIS SURVEY ADDRESSES NEITHER THE EXISTENCE NOR THE LOCATION OF UNDERGROUND UTILITIES OTHER THAN AS SHOWN.
5. FIELD TRAVERSE CLOSURE = 1 : 31,435

ORANGE COUNTY

DEPARTMENT OF PLANNING AND ZONING

DEBORAH S. KENDALL, AICP
PLANNING DIRECTOR
ZONING ADMINISTRATOR
E&S PROGRAM ADMINISTRATOR
(540) 672-4347
(540) 972-1455



R. LINDSAY GORDON III BUILDING
112 WEST MAIN STREET
POST OFFICE BOX 111
ORANGE, VIRGINIA 22960
FAX: (540) 672-1679
ocplandir@orange-co.va.net

MEMORANDUM

TO: Charles Richardson
Orange County Health Department

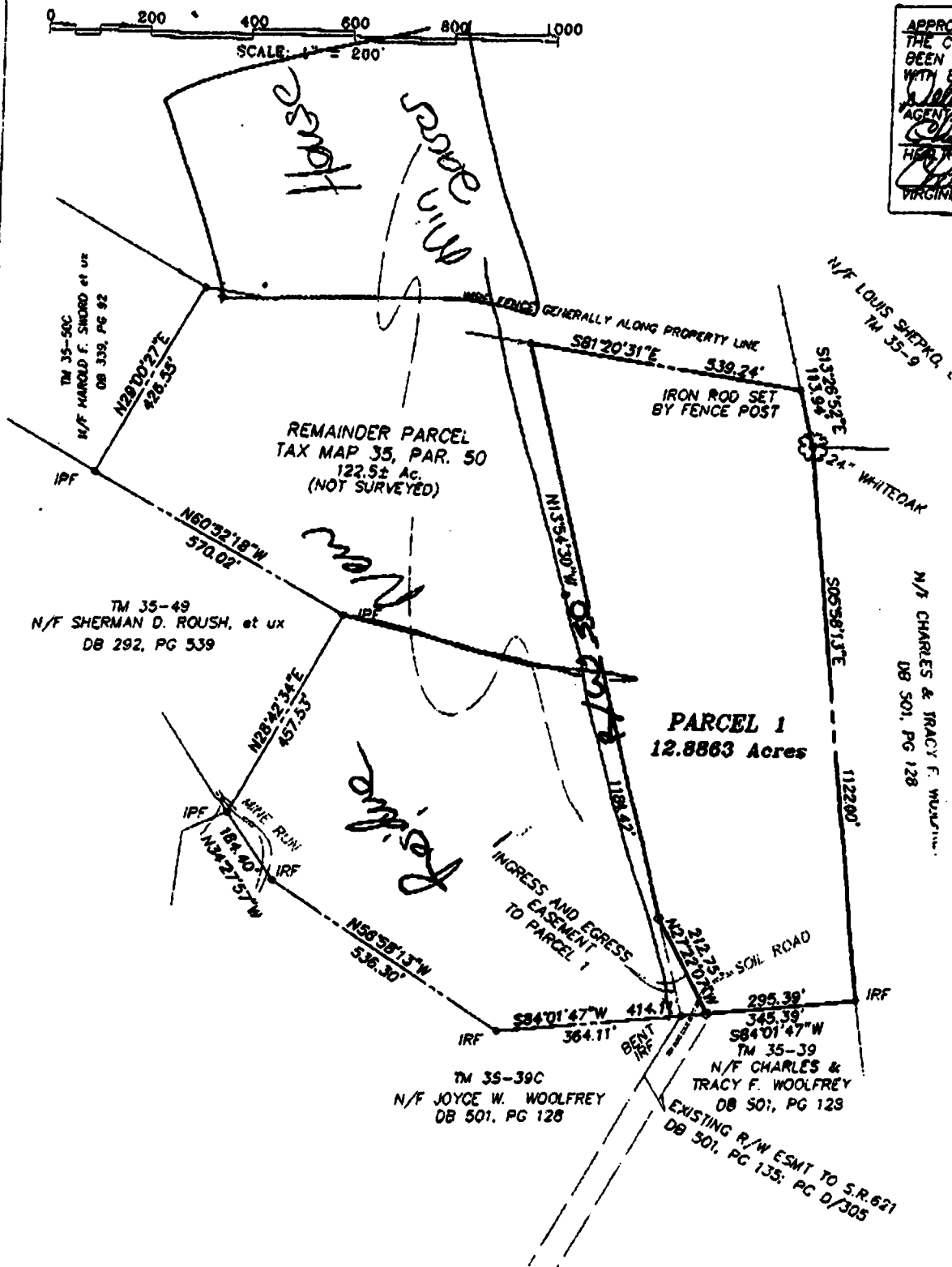
FROM: Deborah S. Kendall, AICP

DATE: 11/12/04

SUBJ: Certification of Proposed Subdivision

Upon review of preliminary plans presented to me, I certify that the proposed subdivision, known as 35-50 James Hopkins, meets the requirements of Chapter 54 (Subdivisions) of the Orange County Code of Ordinances and may be reviewed by the Orange County Health Department for compliance with environmental health regulations.

Wilderness Surveys
31435 Indiantown Road
Locust Grove, Virginia 22506
540.054.0101



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6. IRON ROD SET AT ALL CORNERS UNLESS NOTED OTHERWISE.
7. IRF = IRON ROD FOUND, IPF = IRON PIPE FOUND

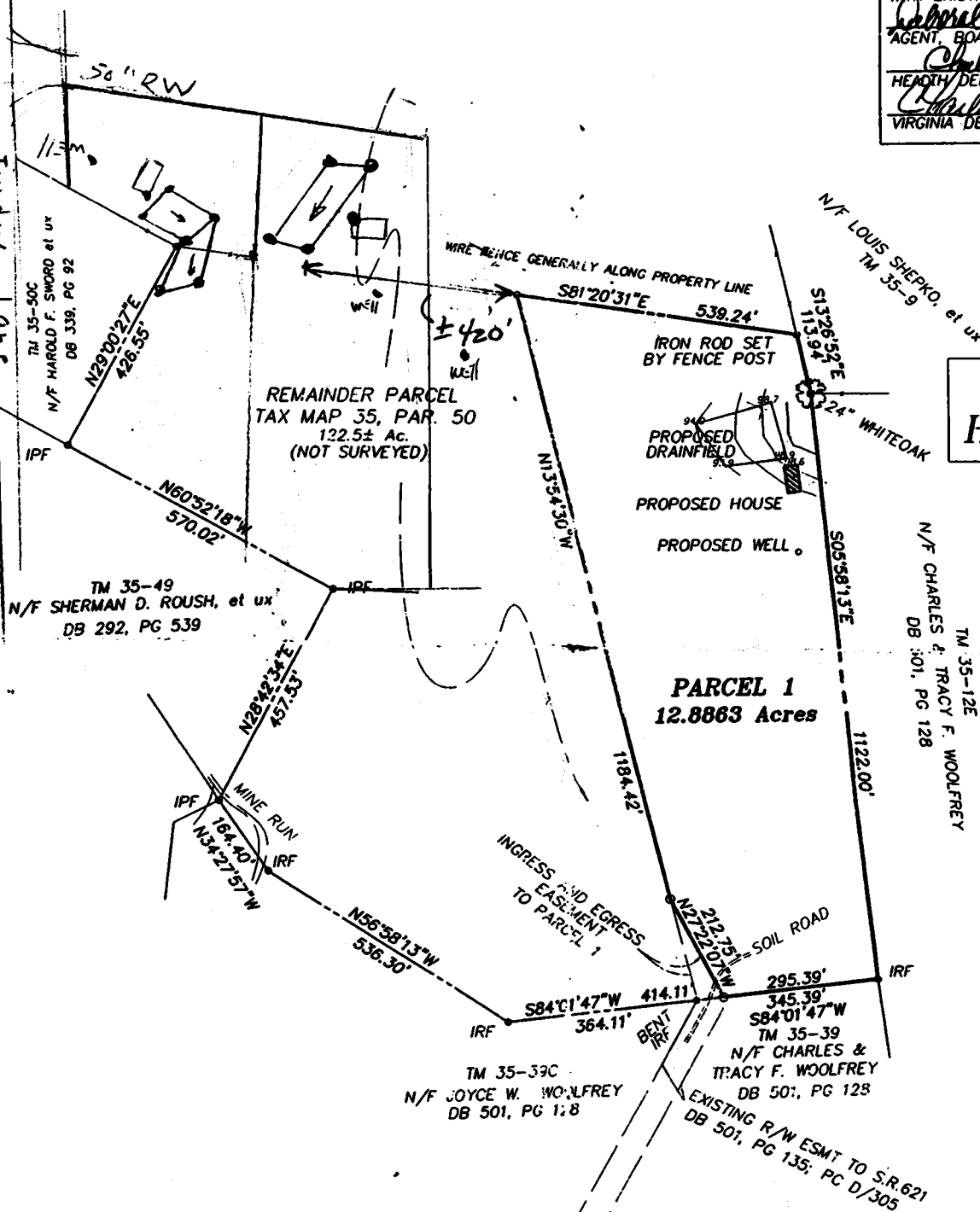
0 200 400 600 800 1000
SCALE: 1" = 200'

APPROVED:
THE CONSOLIDATION OF PROPI
BEEN REVIEWED AND APPROVL
WITH EXISTING REGULATIONS A
Charles S. Leadell
AGENT, BOARD OF SUPERVISOR
Charles A. R. R. R.
HEALTH DEPARTMENT
Charles A. R. R. R.
VIRGINIA DEPARTMENT OF TRAI

H
A
F
C

Health

1



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ORANGE COUNTY
DEPARTMENT OF PLANNING AND ZONING

DEBORAH S. KENDALL, AICP
PLANNING DIRECTOR
ZONING ADMINISTRATOR
E&S PROGRAM ADMINISTRATOR
(540) 672-4347
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POST OFFICE BOX 111
ORANGE, VIRGINIA 22960
FAX: (540) 672-1679
ocplandir@orange-co.va.net

MEMORANDUM

TO: Charles Richardson
Orange County Health Department

FROM: Deborah S. Kendall, AICP

DATE: 11/12/04 / 1/27/05

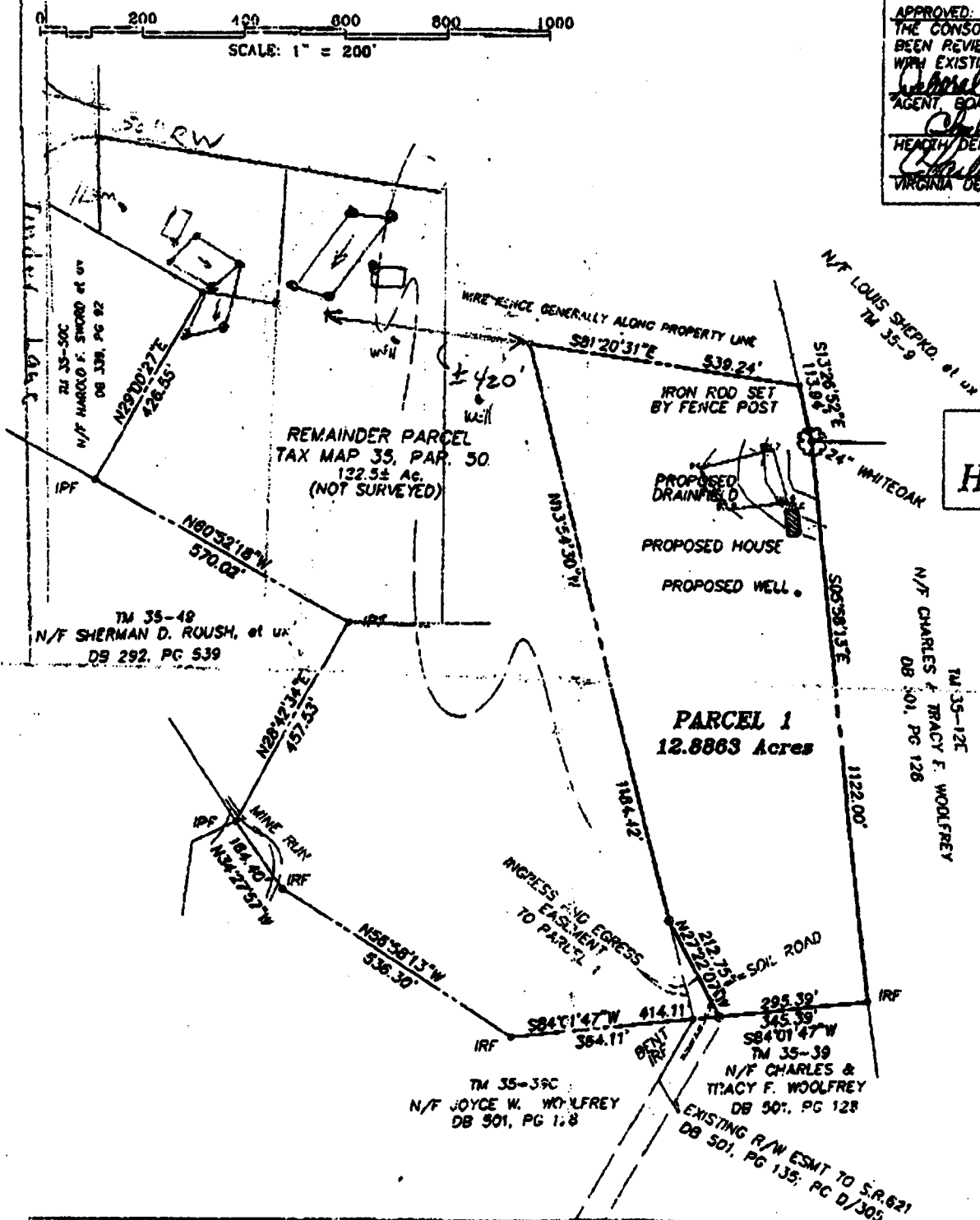
SUBJ: Certification of Proposed Subdivision

Upon review of preliminary plans presented to me, I certify that the proposed subdivision, known as 35-50 James Hopkins, meets the requirements of Chapter 54 (Subdivisions) of the Orange County Code of Ordinances and may be reviewed by the Orange County Health Department for compliance with environmental health regulations.

2. 5 to 6 acres parcels
1. Residue

* 3 only

Wilderness Surveys 31435 Indiantown Road Locust Grove, Virginia 22506 540.654.6101



APPROVED:
THE CONSOLIDATION OF PROPOSED
BEEN REVIEWED AND APPROVED
WITH EXISTING REGULATIONS.
Charles S. Lindell
AGENT, BOARD OF SUPERVISORS
Charles A. Edwards
HEADQUARTERS DEPARTMENT
Charles A. Edwards
VIRGINIA DEPARTMENT OF TRA.

Health

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Health Department purposes only.*

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5. IRON ROD SET AT ALL CORNERS UNLESS NOTED OTHERWISE!

Commonwealth of Virginia

Application for Subdivision Review

(page 1 of 2 to be filled out by the Owner or Agent)

VDH Use Only

Health Dept. ID # _____

Due Date _____

Owner James A. & Shirley E. Hopkins

Phone (540) 854-5739

Mailing Address 10050 Tinder Lane
Unionville, VA 22567-3537

Phone _____

Fax _____

Developer/Agent _____

Phone _____

Mailing Address _____

Phone _____

Fax _____

AOSE Dennis J. Brown, #171, Culpeper Engineering, P.C.

Phone (540) 423-9706

Mailing Address 3251 Germanna Hwy, P.O. Box 733
Locust Grove, VA 22508

Fax (540) 423-1534

Directions to Property: East of Tinder Lane, approx. 0.3 miles North of it's Intersection w/Rte 621

Name of Proposed Subdivision Portion of James A. & Shirley E. Hopkins Property

Tax Map TM 35-50 (Div. of) Other Property Identification _____ Dimension/Acreage of Property 10.551 Ac.

Number of lots proposed 2 Proposed water source (note: new or existing, public or individual) Individual Wells

General size of lots Lot A - 5.215 Ac.; Lot B - 5.336 Ac. (give range if appropriate)

Additional description of subdivision _____

Overview of soils and geology (optional but encouraged) _____

In order for VDH to process a subdivision application you must attach a plat of the property showing the location of the proposed onsite sewage disposal systems and the reserve absorption areas (if required) and the location of the water supply system on each lot, if applicable. Each plat or subsection of a subdivision plat shall be accompanied by specific soil information for each lot (absorption area and reserve area). If not provided by the local subdivision ordinance, the district or local health department may require the plat to show streets, utilities, storm drainage, water supplies, easements, lot lines and original topographic contour lines by detail survey or other information as required.

When the AOSE site evaluations are reviewed, 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.

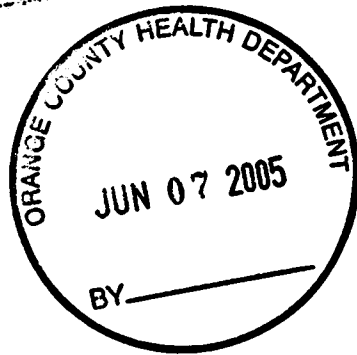
I give permission to the Virginia Department of Health (VDH) to enter onto the property described during normal business hours for the purpose of processing this application and to perform quality assurance checks of evaluations and designs certified by an Authorized Onsite Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

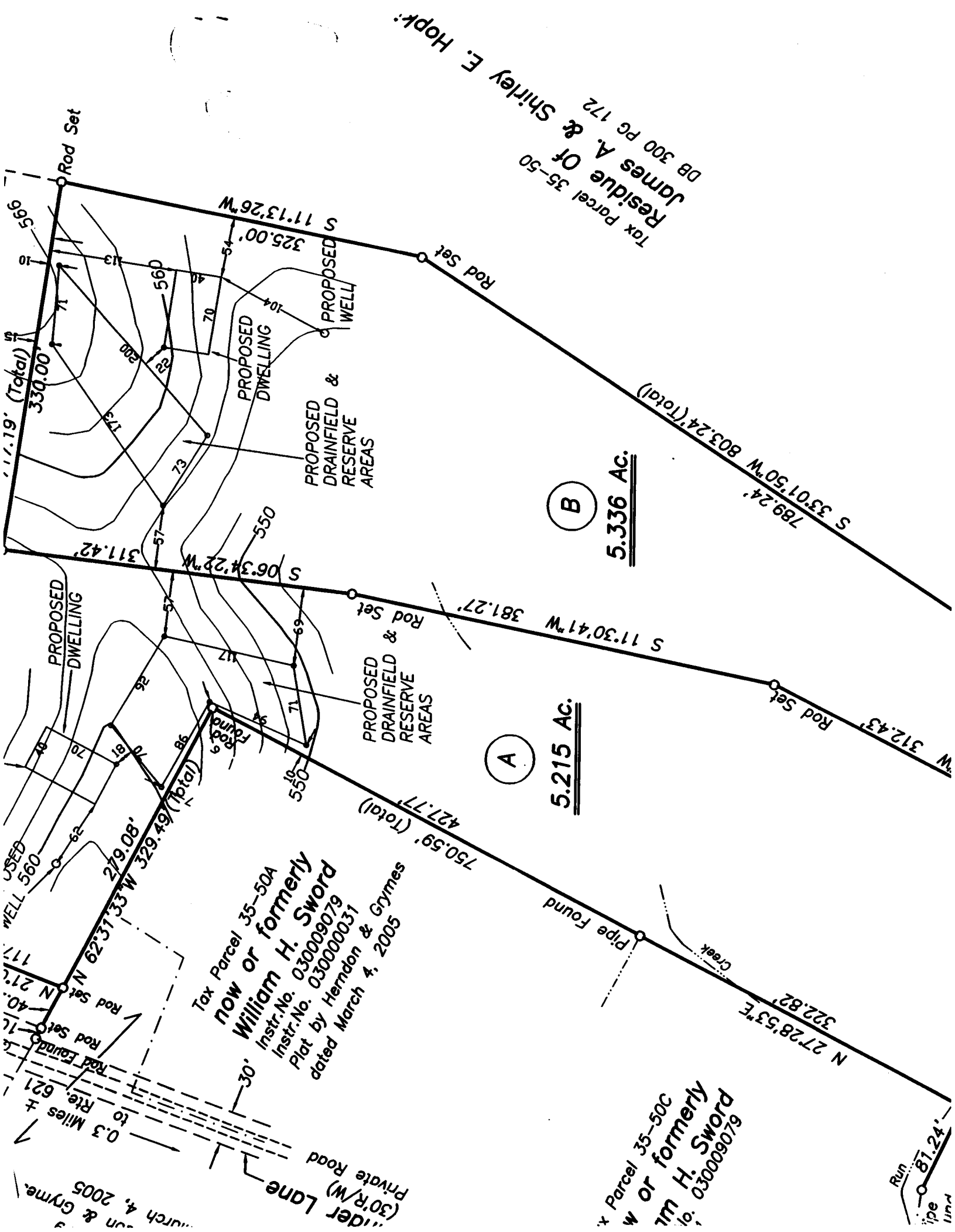
James Hopkins
Signature of Owner/Agent

6/7/05
Date

Application for Subdivision Review

VDH Use Only Health Dept. ID # _____ Due Date _____	
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Prepared by:

CULPEPER ENGINEERING, P.C.

Phone 540-423-9706

Page 1 of 8CEPC# 2157-A**Subdivision Information Form****ORANGE County**

Health Department

Health Department ID# _____

Date June 2, 2005

Date Received _____

Owner James A. & Shirley E. HopkinsAddress 10050 Tinder LanePhone (540) 854-5739Unionville, VA 22567-3537

Agent _____

Address _____

Phone _____

Directions to Property: East of Tinder Lane, approx. 0.3 miles North of it's intersection w/Rte 621Subdivision Portion of James A. & Shirley E. Hopkins PropertySection N/ABlock N/ALot AOther Property Identification N/AMap Reference TM 35-50 (Div. of)Dimension/size of Lot/Property 5.215 Ac. - See Subdivision Plan for dimensions**Residential Use**X

Yes

____ No

Termite Treatment

X

Yes

____ No

X

Single Family

____ Multi-family

Number of bedrooms 3

Number of Units _____

Basement

N/A

Yes

____ No

N/A - Preliminary

Fixtures in Basement

N/A

Yes

____ No

Design-Subdivision**Commercial Use**

____ Yes

X

____ No

Describe: N/AActual or estimated water use: N/A**Proposed Sewage Disposal Method:**Onsite Sewage Disposal System: X Septic Tank Drainfield _____ LPD _____ Mound _____ Other _____Describe: Main Drainfield - Septic Tank & conventional laterals (Gravity)Reserve Drainfield - Septic Tank & conventional laterals (Gravity)**Water Supply:**

____ Public

____ New

____ Existing

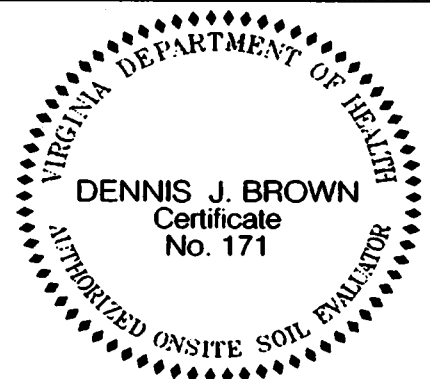
X

____ Private

X

____ New

____ Existing

Describe: Proposed Well Class IIIC

This "Subdivision Approval Package" is based on "A Health Department Copy" of the Boundary Survey, Portion of James A. & Shirley E. Hopkins Property, TM #35-50, dated April 26, 2005 (Plat shows Drainfield, House and Well Locations, topographic information, utility easements, and boundary). Plat provided by and prepared by Herndon and Grymes, Land Surveyors, Orange, VA (540-672-4282).

This Land Division Package assumes that no changes will be made to the proposed house, well and drainfield locations, property boundaries or utility easements shown on the referenced Plat.

Tax Parcel 35-50
Residue Of
James A. & Shirley E. Hopkins
DB 300 PG 172

1: N 21°03'17"E 103.88'

50' R/W Easement
Hereby Reserved
See Note 6.

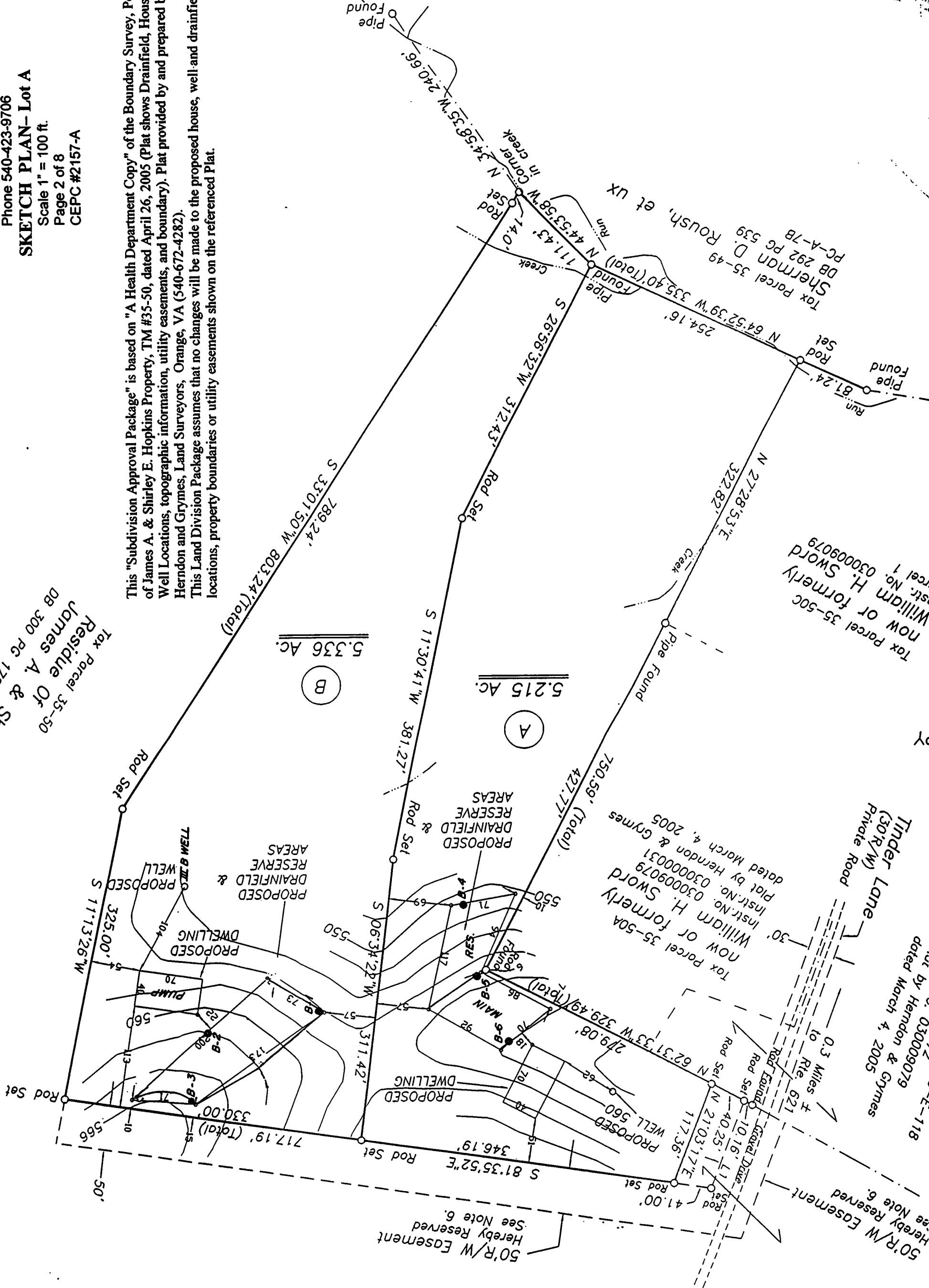
50' R/W Easement
Hereby Reserved
See Note 6.

dated March 4, 2005
Inst. No. 030009079
Plat by Herndon & Grymes

Tinder Lane
(30' R/W)
Private Road

Tax Parcel 35-50C
now or formerly
William H. Sword
Inst. No. 030009079

Tax Parcel 35-50A
now or formerly
William H. Sword
Inst. No. 030009079
dated March 4, 2005
Plat by Herndon & Grymes



Soil Summary Report

GENERAL INFORMATION

Date June 2, 2005 Submitted to ORANGE County Health Department
 Applicant James A. & Shirley E. Hopkins Telephone No. (540) 854-5739
 Address 10050 Tinder Lane Unionville, VA 22567-3537
 Owner James A. & Shirley E. Hopkins Address 10050 Tinder Lane Unionville, VA 22567-3537
 Location East of Tinder Lane, approx. 0.3 miles North of it's intersection w/Rte 621

Tax Map TM 35-50 (Div. of) Subdivision: Portion of James A. & Shirley E. Hopkins Property
 Block/Section N/A Lot A

SOIL INFORMATION SUMMARY

1. Position in landscape satisfactory? Yes ☒ No ☐
 Describe: Ridgetop - Sideslope
2. Slope 3 - 10 % Main Area 3 - 4%; Reserve Area 7 - 10%
3. Depth to rock or impervious strata: Max. _____ Min. none encountered to 60"
4. Depth to seasonal water table (gray mottling or gray color) No ☒ Yes ☐ N/A inches
5. Free water present No ☒ Yes ☐ _____ range in inches
6. Soil percolation rate estimated Yes ☒ No ☐ Texture group I II III IV
 Estimated rate 60 min/inch
7. Permeability test performed Yes ☐ No ☒
- If yes, note type of test performed and attach

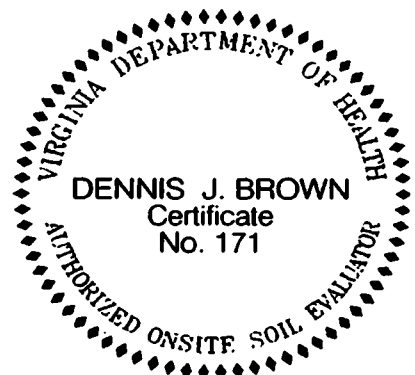
☒ Site Approved: Drainfield to be placed at Main-40/Reserve-38 inches depth at site designated on permit.

☐ Site Disapproved:

Reasons for rejection:

1. ☐ Position in landscape subject to flooding or periodic saturation.
 2. ☐ Insufficient depth of suitable soil over hard rock.
 3. ☐ Insufficient depth of suitable soil to seasonal water table.
 4. ☐ Rates of absorption too slow.
 5. ☐ Insufficient area of acceptable soil for required drainfield, and/or Reverse Area.
 6. ☐ Proposed system too close to well.
 7. ☐ Other Specify _____

(attach additional pages if necessary)



Subdivision: *Portion of James A. & Shirley E. Hopkins Property*

Lot A

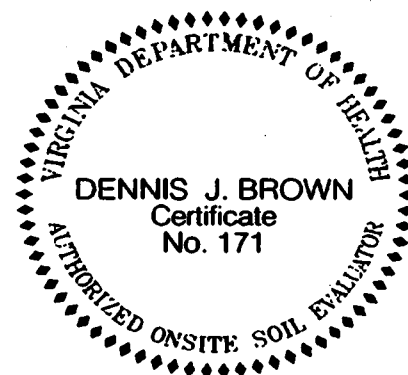
Map Reference: ***TM 35-50 (Div. of)***

Section: *N/A*

SOIL PROFILE DESCRIPTION REPORT

[illegible]

Remarks:



P = Backhoe Test Pit B = Hand Auger Boring

CULPEPER ENGINEERING, P.C.

Phone 540-423-9706

Page 5 of 8C.E.P.C.# 2157-ASubd.: Portion of James A. & Shirley E. 1 Lot # ATax Map: TM 35-50 (Div. of)**ABBREVIATED DESIGN FORM-SEE ATTACHED PLANS****DESIGN BASIS-Main Drainfield Area:**

A. a. Estimated Percolation Rate (mpi)	60
b. Recommended trench bottom depth (inches).....	40
c. Depth to restrictive feature or limit of evaluation if none encountered(in.).....	60
d. Minimum Separation distance required (inches).....	18
e. Separation distance in inches provided in design (Ac-Ab).....	20
f. Slope of drainfield- Maximum (%).....	4
g. Minimum trench bottom due to slope $[(\% \text{slope}-8)/2] + 18$ (inches).....	18
h. Is slope greater than 10% ?.....	No
i. If Ah is yes, does greater than 24 inches to rock exist below Ab?.....	N/A
j. If yes to Ai, add 1 ft. to the minimum center to center spacing beginning at 20% slope and continue for each 10% slope increase above 20%. If no to Ai, add 1 ft. to the minimum center to center spacing beginning at 10% slope and continue for each 10% slope increase above 10%. (Report the value, in feet, of the increase in center to center spacing above the minimum)	N/A

B. Trench bottom square feet required per Bedroom from Table 5.4 based on

☒ gravity ☐ LPD

452

C. Design Flow Based on 150 gal./Bedroom- Number of Bedrooms.....

3

AREA CALCULATIONS - Main Drainfield:

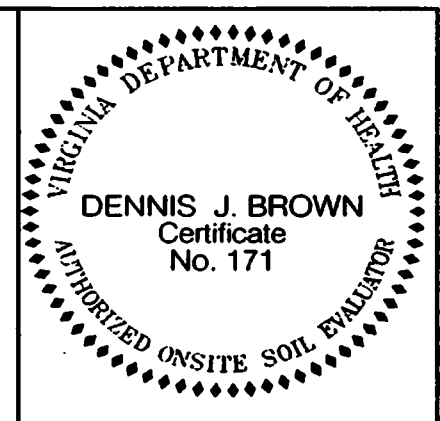
D. Length of trench proposed (feet).....	70
Length of available area (feet).....	70
E. Width of trench proposed (feet).....	3
F. Number of trenches.....	7
G. Center to center spacing (feet).....	9
H. a. Width required $(G*(F-1) + E)$ (feet).....	57
b. Width of available area (feet).....	74
I. Total square footage required $(B*C)$ (sq.ft.).....	1356
J. Square footage in Design $(D*E*F)$ (sq.ft.).....	1470

AREA CALCULATIONS - Reserve Drainfield: (w/Septic Tank Pretreatment)

K. Is RESERVE AREA required?

☒ YES ☐ NOPercent Required = 100%**SEE RESERVE DESIGN - conventional drainfield trenches w/Septic Tank Pretreatment****Additional Notes:** Main Area -utilize conventional drainfield trenches with Septic Tank Pretreatment.

Reserve Area - conventional drainfield trenches w/Septic Tank Pretreatment



CULPEPER ENGINEERING, P.C.

Phone 540-423-9706

Page 6 of 8C.E.P.C.# 2157-ASubd.: Portion of James A. & Shirley E. I Lot # ATax Map: TM 35-50 (Div. of)**ABBREVIATED DESIGN FORM-SEE ATTACHED PLANS****DESIGN BASIS-Reserve Drainfield Area:**

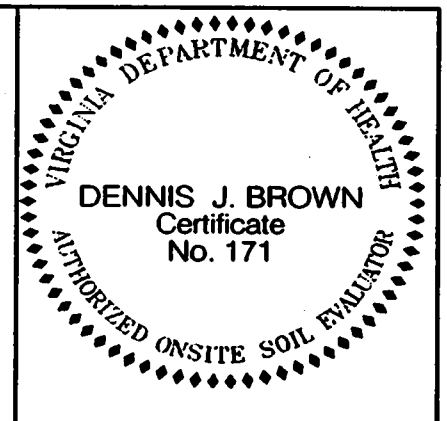
A.	a.	Estimated Percolation Rate (mpi)	60
	b.	Recommended trench bottom depth (inches).....	38
	c.	Depth to restrictive feature or limit of evaluation if none encountered(in.).....	60
	d.	Minimum Separation distance required (inches).....	18
	e.	Separation distance in inches provided in design (Ac-Ab).....	22
	f.	Slope of drainfield- Maximum (%).....	10
	g.	Minimum trench bottom due to slope $[(\% \text{slope}-8)/2] + 18$ (inches).....	19
	h.	Is slope greater than 10% ?.....	Yes
	i.	If Ah is yes, does greater than 24 inches to rock exist below Ab?.....	No
	j.	If yes to Ai, add 1 ft. to the minimum center to center spacing beginning at 20% slope and continue for each 10% slope increase above 20%. If no to Ai, add 1 ft. to the minimum center to center spacing beginning at 10% slope and continue for each 10% slope increase above 10%. (Report the value, in feet, of the increase in center to center spacing above the minimum)	1
B.	Trench bottom square feet required per Bedroom from Table 5.4 based on ☒ gravity ☐ LPD		452
C.	Design Flow Based on 150 gal./Bedroom- Number of Bedrooms.....		3

AREA CALCULATIONS - Reserve Drainfield:

D.	Length of trench proposed (feet).....	70
	Length of available area (feet).....	70
E.	Width of trench proposed (feet).....	3
F.	Number of trenches.....	7
G.	Center to center spacing (feet).....	10
H.	a. Width required $(G*(F-1) + E)$ (feet).....	63
	b. Width of available area (feet).....	70
I.	Total square footage required $(B*C)$ (sq.ft.).....	1356
J.	Square footage in Design $(D*E*F)$ (sq.ft.).....	1470
K.	Reserve Area Provided- Percentage of Required for System Type & Design Flow $(J/I)*100$	108.4%

Additional Notes: Main Area -utilize conventional drainfield trenches with Septic Tank Pretreatment.

Reserve Area - conventional drainfield trenches w/Septic Tank Pretreatment

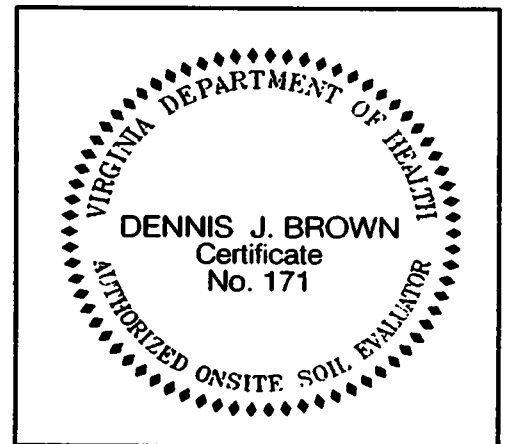


SURVEY PLAT INFORMATION

County: ORANGE County Date: June 2, 2005
Subdivision Identification: Portion of James A. & Shirley Section: N/A Lot: A
Map Reference: TM 35-50 (Div. of)

This "Subdivision Approval Package" is based on "A Health Department Copy" of the Boundary Survey, Portion of James A. & Shirley E. Hopkins Property, TM #35-50, dated April 26, 2005 (Plat shows Drainfield, House and Well Locations, topographic information, utility easements, and boundary). Plat provided by and prepared by Herndon and Grymes, Land Surveyors, Orange, VA (540-672-4282). This Land Division Package assumes that no changes will be made to the proposed house, well and drainfield locations, property boundaries or utility easements shown on the referenced Plat.

Plat is included with this submittal.

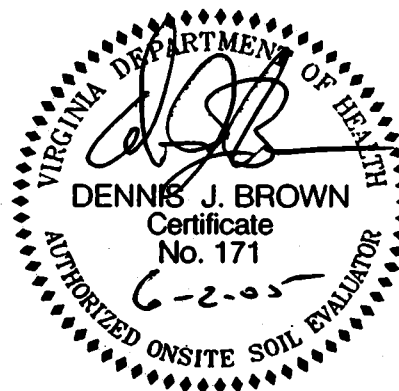


Certification StatementCounty: ORANGE CountyDate: June 2, 2005Property Identification: TM 35-50 (Div. of)Owner: James A. & Shirley E. HopkinsSubdivision: Portion of James A. & Shirley E. Hopkins Property

Agent: _____

Section: N/A Lot: ASubmitted by: Culpeper Engineering, P.C.
3251 Germanna Highway
Locust Grove, VA 22508Phone: 540-423-9706Fax: 540-423-1534

This is to certify according to 32.1-163.5 of the Code of Virginia that work submitted for the referenced property is in accordance to and complies with the Sewage Handling and Disposal Regulations of the Virginia Department of Health.

I recommend a Subdivision Approval be approved.

AOSE

Dennis J. Brown, A.O.S.E. No. 171Date: June 2, 2005

If the submission contains a certification by a professional engineer in consultation with an AOSE, the following statement must be signed and sealed.

I hereby certify that the evaluations and designs contained herein (refer to subdivision, lot, etc...) were conducted in accordance with the Sewage Handling and Disposal Regulations (12 VAC 5-610-10 et seq., the Regulations) and the policies of the Virginia Department of Health for implementation of those Regulations. Furthermore, I certify that the evaluations and designs comply with the minimum requirements of the Regulations.

I recommend a _____ be _____.

Licensed PE: _____

Date: _____

Subdivision Information Form**ORANGE County**

Health Department

Health Department ID# _____

Date June 2, 2005

Date Received _____

Owner James A. & Shirley E. HopkinsAddress 10050 Tinder LanePhone (540) 854-5739Unionville, VA 22567-3537

Agent _____

Address _____

Phone _____

Directions to Property: East of Tinder Lane, approx. 0.3 miles North of it's intersection w/Rte 621Subdivision Portion of James A. & Shirley E. Hopkins PropertySection N/ABlock N/ALot BOther Property Identification N/AMap Reference TM 35-50 (Div. of)Dimension/size of Lot/Property 5.336 Ac. - See Subdivision Plan for dimensions**Residential Use**X

Yes

____ No

Termite Treatment

X

Yes

____ No

X

Single Family

____ Multi-family

Number of bedrooms 3

Number of Units _____

Basement

N/A

Yes

____ No

N/A - Preliminary

Fixtures in Basement

N/A

Yes

____ No

Design-Subdivision**Commercial Use**

____ Yes

X

____ No

Describe: N/AActual or estimated water use: N/A**Proposed Sewage Disposal Method:**Onsite Sewage Disposal System: X Septic Tank Drainfield _____ LPD _____ Mound X Other _____Describe: Main Drainfield - Septic Tank & conventional laterals (Pump Required)Reserve Drainfield - Septic Tank & conventional laterals (Pump required)**Water Supply:**

____ Public

____ New

____ Existing

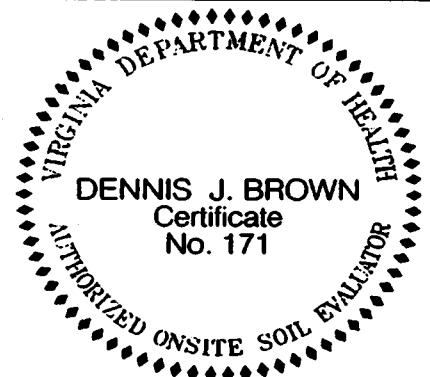
X

____ Private

X

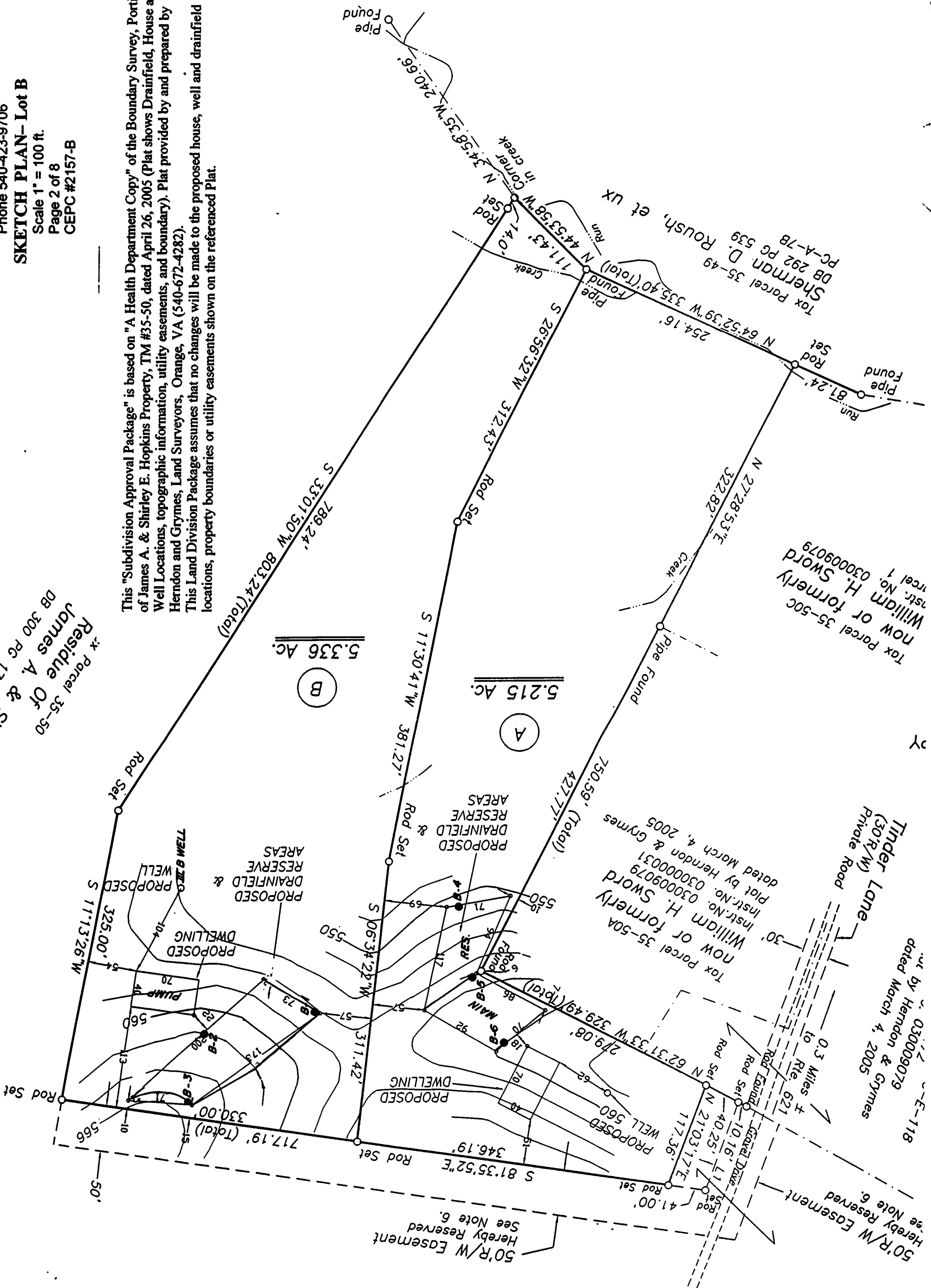
____ New

____ Existing

Describe: Proposed Well Class IIIB

This "Subdivision Approval Package" is based on "A Health Department Copy" of the Boundary Survey, Portion of James A. & Shirley E. Hopkins Property, TM #35-50, dated April 26, 2005 (Plat shows Drainfield, House and Well Locations, topographic information, utility easements, and boundary). Plat provided by and prepared by Herndon and Grymes, Land Surveyors, Orange, VA (540-672-4282).
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Residue Of
 James A. & Shirley E.
 DB 300 PG 172



Residue Of
 James A. & Shirley E. Hopkins
 DB 300 PG 172

N 21°03'17"E 103.88'

dated March 4, 2005
 by Herndon & Grymes
 030009079

50' R/W Easement
 Hereby Reserved
 See Note 6.

William H. Sword
 now or formerly
 Tax Parcel 35-50A
 Instr. No. 030009079
 dated March 4, 2005
 Plot by Herndon & Grymes

William H. Sword
 now or formerly
 Tax Parcel 35-50C
 Instr. No. 030009079

Sherman D. Roush, et ux
 DB 292 PG 539
 PC-A-78
 Tax Parcel 35-49

Soil Summary Report

GENERAL INFORMATION

Date June 2, 2005 Submitted to ORANGE County Health Department
 Applicant James A. & Shirley E. Hopkins Telephone No. (540) 854-5739
 Address 10050 Tinder Lane Unionville, VA 22567-3537
 Owner James A. & Shirley E. Hopkins Address 10050 Tinder Lane Unionville, VA 22567-3537
 Location East of Tinder Lane, approx. 0.3 miles North of it's intersection w/Rte 621

Tax Map TM 35-50 (Div. of) Subdivision: Portion of James A. & Shirley E. Hopkins Property
 Block/Section N/A Lot B

SOIL INFORMATION SUMMARY

1. Position in landscape satisfactory? Yes ☒ No ☐
 Describe: Ridgetop - Sideslope
2. Slope 4 - 8 %
3. Depth to rock or impervious strata: Max. _____ Min. none encountered to 60"
4. Depth to seasonal water table (gray mottling or gray color) No ☒ Yes ☐ N/A inches
5. Free water present No ☒ Yes ☐ _____ range in inches
6. Soil percolation rate estimated Yes ☒ No ☐ Texture group I ☐ II ☒ III ☐ IV
 Estimated rate 60 min/inch
7. Permeability test performed Yes ☐ No ☒
- If yes, note type of test performed and attach

☒ Site Approved: Drainfield to be placed at 39 inches depth at site designated on permit.

☐ Site Disapproved:

Reasons for rejection:

1. ☐ Position in landscape subject to flooding or periodic saturation.
 2. ☐ Insufficient depth of suitable soil over hard rock.
 3. ☐ Insufficient depth of suitable soil to seasonal water table.
 4. ☐ Rates of absorption too slow.
 5. ☐ Insufficient area of acceptable soil for required drainfield, and/or Reverse Area.
 6. ☐ Proposed system too close to well.
 7. ☐ Other Specify _____

(attach additional pages if necessary)



Subdivision: *Portion of James A. & Shirley E. Hopkins Property*

Lot: **B**

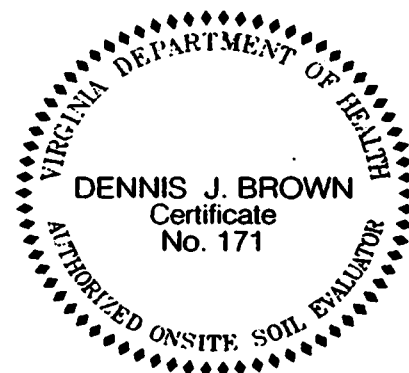
Map Reference: *TM 35-50 (Div. of)*

Section: *N/A*

SOIL PROFILE DESCRIPTION REPORT

[illegible]

Remarks:



P = Backhoe Test Pit B = Hand Auger Boring

CULPEPER ENGINEERING, P.C.

Phone 540-423-9706

Page 5 of 8C.E.P.C.# 2157-BSubd.: Portion of James A. & Shirley E. I Lot # BTax Map: TM 35-50 (Div. of)**ABBREVIATED DESIGN FORM-SEE ATTACHED PLANS****DESIGN BASIS-Main Drainfield Area:**

A. a. Estimated Percolation Rate (mpi)	60
b. Recommended trench bottom depth (inches).....	39
c. Depth to restrictive feature or limit of evaluation if none encountered(in.).....	60
d. Minimum Separation distance required (inches).....	18
e. Separation distance in inches provided in design (Ac-Ab).....	21
f. Slope of drainfield- Maximum (%).....	8
g. Minimum trench bottom due to slope $[(\%slope-8)/2] + 18$ (inches).....	18
h. Is slope greater than 10% ?.....	No
i. If Ah is yes, does greater than 24 inches to rock exist below Ab?.....	N/A
j. If yes to Ai, add 1 ft. to the minimum center to center spacing beginning at 20% slope and continue for each 10% slope increase above 20%. If no to Ai, add 1 ft. to the minimum center to center spacing beginning at 10% slope and continue for each 10% slope increase above 10%. (Report the value, in feet, of the increase in center to center spacing above the minimum)	N/A

B. Trench bottom square feet required per Bedroom from Table 5.4 based on

☒ gravity ☐ LPD

452

C. Design Flow Based on 150 gal./Bedroom- Number of Bedrooms.....

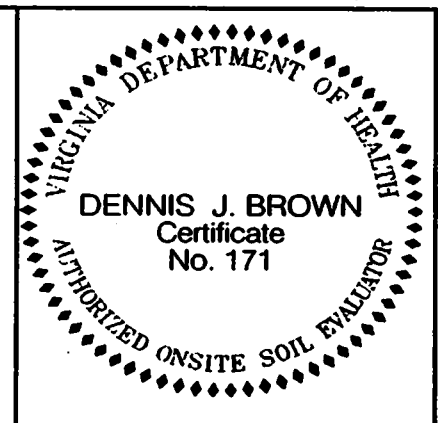
3

AREA CALCULATIONS - Main Drainfield:

D. Length of trench proposed (feet).....	70
Length of available area (feet).....	70
E. Width of trench proposed (feet).....	3
F. Number of trenches.....	7
G. Center to center spacing (feet).....	9
H. a. Width required $(G*(F-1) + E)$ (feet).....	57
b. Width of available area (feet).....	57
I. Total square footage required $(B*C)$ (sq.ft.).....	1356
J. Square footage in Design $(D*E*F)$ (sq.ft.).....	1470

AREA CALCULATIONS - Reserve Drainfield: (w/Septic Tank Pretreatment)

K. Is RESERVE AREA required?

☒ YES ☐ NOPercent Required = 100%***SEE RESERVE DESIGN - conventional drainfield trenches w/Septic Tank Pretreatment******Additional Notes: Main Area -utilize conventional drainfield trenches with Septic Tank Pretreatment. PUMP SYSTEM REQUIRED******Reserve Area - conventional drainfield trenches w/Septic Tank Pretreatment PUMP SYSTEM REQUIRED***

CULPEPER ENGINEERING, P.C.

Phone 540-423-9706

Page 6 of 8C.E.P.C.# 2157-BSubd.: Portion of James A. & Shirley E. I Lot # BTax Map: TM 35-50 (Div. of)**ABBREVIATED DESIGN FORM-SEE ATTACHED PLANS****DESIGN BASIS-Reserve Drainfield Area:**

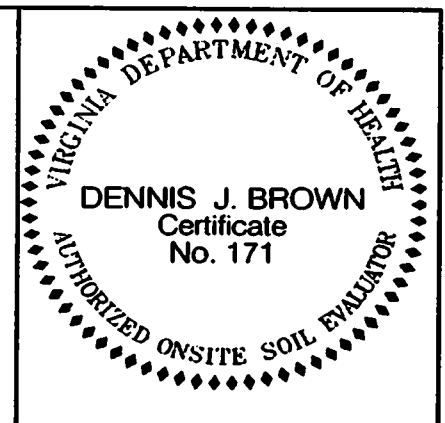
A.	a.	Estimated Percolation Rate (mpi)	60
	b.	Recommended trench bottom depth (inches).....	39
	c.	Depth to restrictive feature or limit of evaluation if none encountered(in.).....	60
	d.	Minimum Separation distance required (inches).....	18
	e.	Separation distance in inches provided in design (Ac-Ab).....	21
	f.	Slope of drainfield- Maximum (%).....	8
	g.	Minimum trench bottom due to slope $[(\% \text{slope} - 8)/2] + 18$ (inches).....	18
	h.	Is slope greater than 10% ?.....	No
	i.	If Ah is yes, does greater than 24 inches to rock exist below Ab?.....	N/A
	j.	If yes to Ai, add 1 ft. to the minimum center to center spacing beginning at 20% slope and continue for each 10% slope increase above 20%. If no to Ai, add 1 ft. to the minimum center to center spacing beginning at 10% slope and continue for each 10% slope increase above 10%. (Report the value, in feet, of the increase in center to center spacing above the minimum).....	N/A

B.	Trench bottom square feet required per Bedroom from Table 5.4 based on	☒ gravity ☐ LPD	452
C.	Design Flow Based on 150 gal./Bedroom- Number of Bedrooms.....		3

AREA CALCULATIONS - Reserve Drainfield:

D.	Length of trench proposed (feet).....	70
	Length of available area (feet).....	70
E.	Width of trench proposed (feet).....	3
F.	Number of trenches.....	9
G.	Center to center spacing (feet).....	9
H.	a. Width required $(G*(F-1) + E)$ (feet).....	75
	b. Width of available area (feet).....	75
I.	Total square footage required $(B*C)$ (sq.ft.).....	1356
J.	Square footage in Design $(D*E*F)$ (sq.ft.).....	1890
K.	Reserve Area Provided- Percentage of Required for System Type & Design Flow $(J/I)*100$	139.4%

Additional Notes: Main Area -utilize conventional drainfield trenches
with Septic Tank Pretreatment. PUMP SYSTEM REQUIRED
Reserve Area - conventional drainfield trenches w/Septic Tank Pretreatment
PUMP SYSTEM REQUIRED

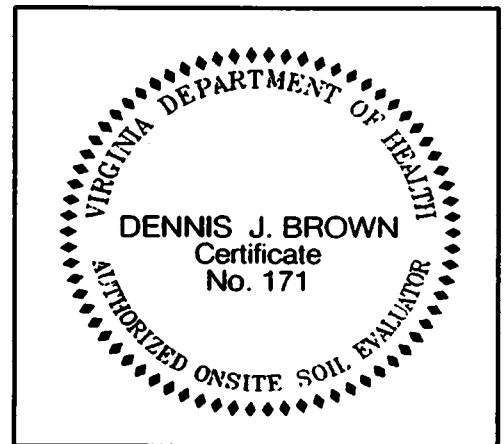


SURVEY PLAT INFORMATION

County: ORANGE County Date: June 2, 2005
Subdivision Identification: Portion of James A. & Shirley Section: N/A Lot: B
Map Reference: TM 35-50 (Div. of)

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Plat is included with this submittal.

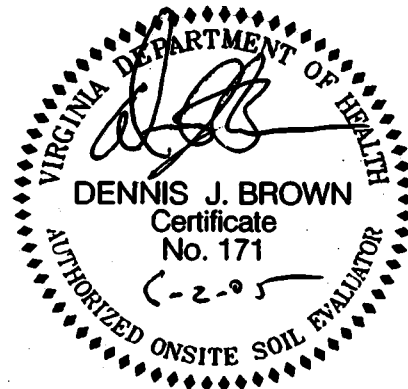


Certification StatementCounty: ORANGE CountyDate: June 2, 2005Property Identification: TM 35-50 (Div. of)Owner: James A. & Shirley E. HopkinsSubdivision: Portion of James A. & Shirley E. Hopkins Property

Agent: _____

Section: N/A Lot: BSubmitted by: Culpeper Engineering, P.C.
3251 Germanna Highway
Locust Grove, VA 22508Phone: 540-423-9706Fax: 540-423-1534

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I recommend a Subdivision Approval be approved.

AOSE

Dennis J. Brown, A.O.S.E. No. 171Date: June 2, 2005

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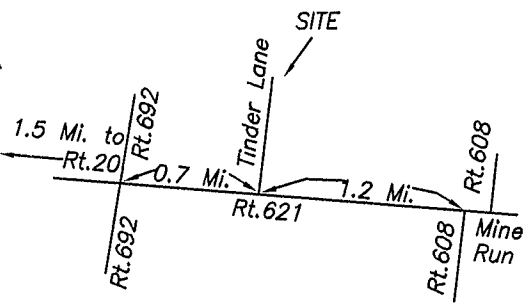
I recommend a _____ be _____.

Licensed PE: _____

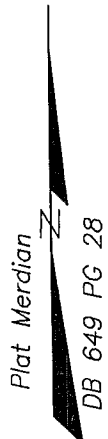
Date: _____



VICINITY MAP
(Not to Scale)



This plat represents a current field survey.



L1:
N 21°03'17"E 103.88'

Tax Parcel 35-50
Residue Of
James A. & Shirley E. Hopkins
DB 300 PG 172

Owner's Consent and Dedication

The platting and subdivision of James A. & Shirley E. Hopkins Property, being a portion of Tax Parcel 35-50, acquired from Claude W. Tyler, et ux in DB 300 PG 172, containing 10.551 acres, is with the free consent and is in accordance with the desire of the undersigned owners, proprietors, and trustees, if any

Owner _____ Date _____

Owner _____ Date _____

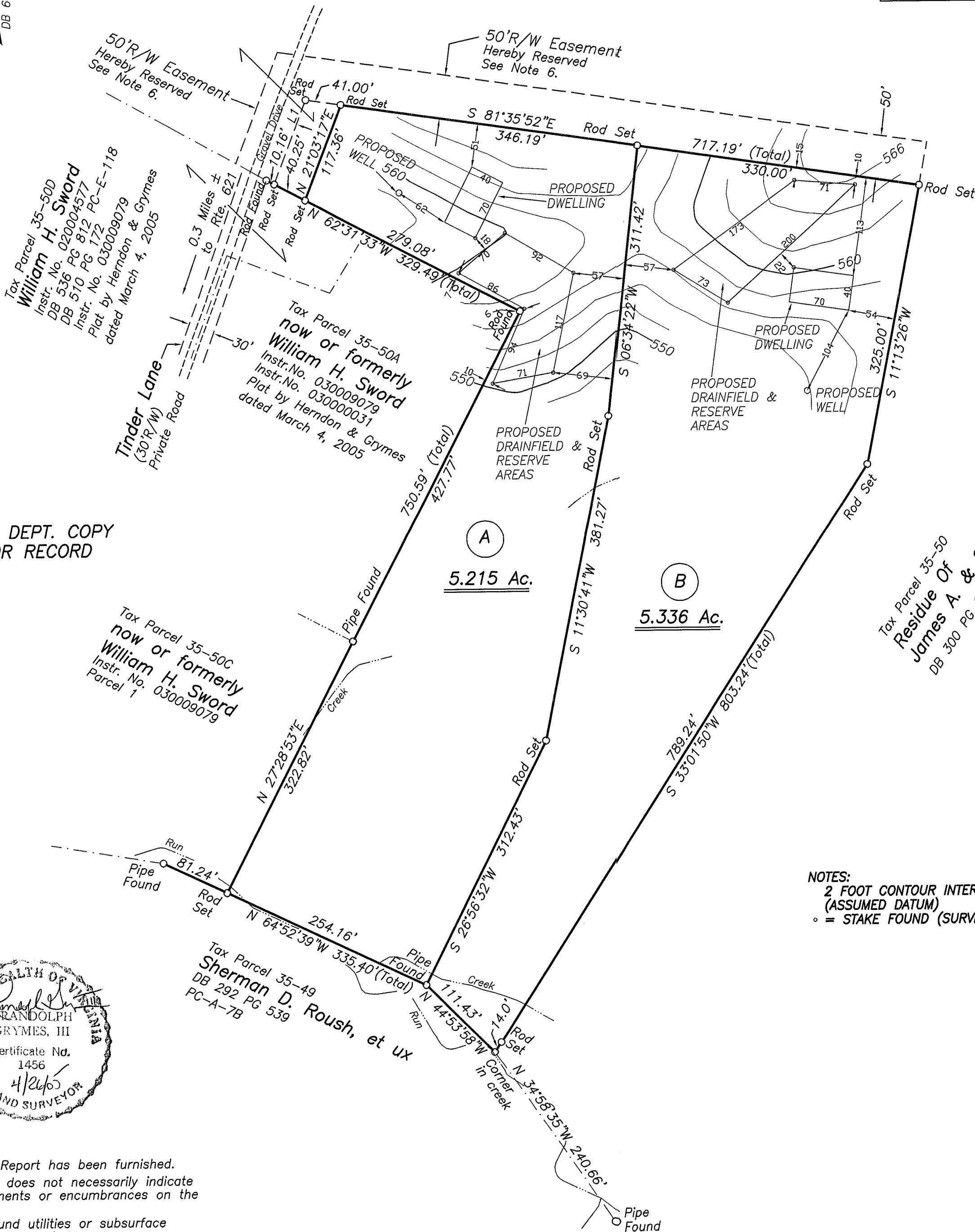
Certificate Of Approval

The subdivision shown hereon has been reviewed and approved by the undersigned in accordance with existing regulations, and may be committed to record.

Health Department _____ Date _____

Highway Department _____ Date _____

Agent, County of Orange _____ Date _____

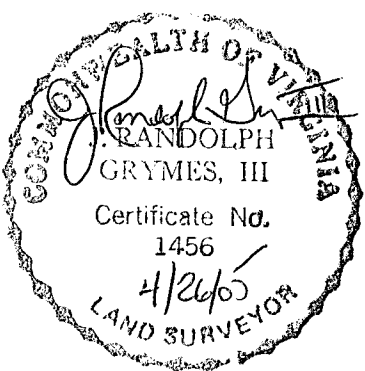


HEALTH DEPT. COPY
NOT FOR RECORD

HEALTH DEPT. COPY
NOT FOR RECORD

Tax Parcel 35-50
Residue Of
James A. & Shirley E. Hopkins
DB 300 PG 172

NOTES:
2 FOOT CONTOUR INTERVAL
(ASSUMED DATUM)
• = STAKE FOUND (SURVEYED POINT)



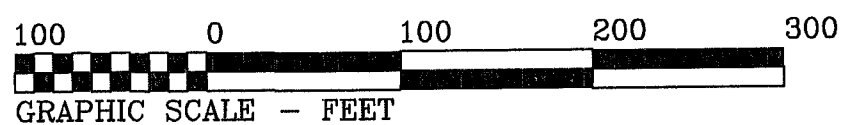
- NOTES:
1. No Title Report has been furnished.
 2. This plat does not necessarily indicate all easements or encumbrances on the property.
 3. Underground utilities or subsurface facilities not located.
 4. House site, well, and drainfield locations are on file at the Health Department. Deviations from same require approval.
 5. The parcel hereon divided is presently zoned A.
 6. The 50' R/W Easement hereon reserved is a private road and neither the county or the state is responsible for it's maintenance.

Surveyor's Certificate
I hereby certify that, to the best of my knowledge and belief, all requirements of the Board of Supervisors and ordinances of Orange County, Virginia, regarding the platting of subdivisions within the County, have been complied with.

Surveyor _____ Date 4/26/05

147 Caroline St., Orange, VA. 22960 540-672-4282

HEALTH DEPT. COPY
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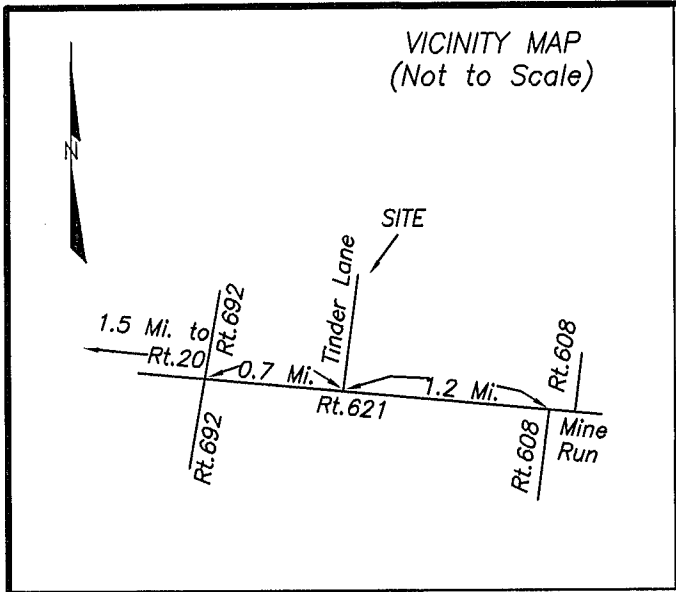


Boundary Survey
Portion of
JAMES A. & SHIRLEY E. HOPKINS PROPERTY
Gordon District
Orange County, Virginia

Prepared By
HERNDON and GRYMES
LAND SURVEYORS
ORANGE, VIRGINIA
Ph: 540-672-4282

Scale: 1" = 100' Job: 0538
Date: April 26, 2005

James Hopkins
Tinder Lane



This plat represents a current field survey.

Owner's Consent and Dedication

The platting and subdivision of James A. & Shirley E. Hopkins Property, being a portion of Tax Parcel 35-50, acquired from Claude W. Tyler, et ux in DB 300 PG 172, containing 10.551 acres, is with the free consent and is in accordance with the desire of the undersigned owners, proprietors, and trustees, if any

Owner _____ Date _____

Owner _____ Date _____

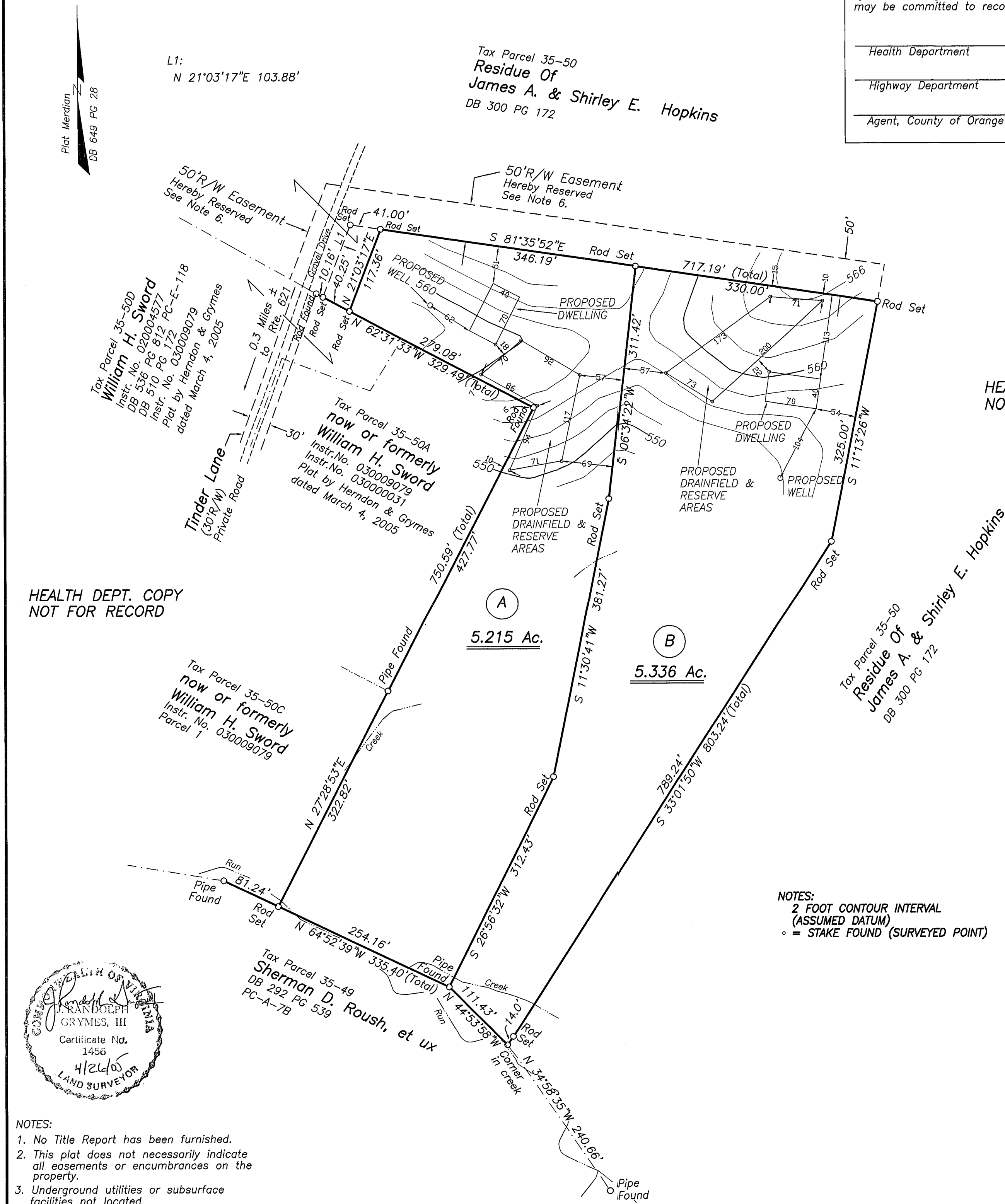
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Health Department _____ Date _____

Highway Department _____ Date _____

Agent, County of Orange _____ Date _____

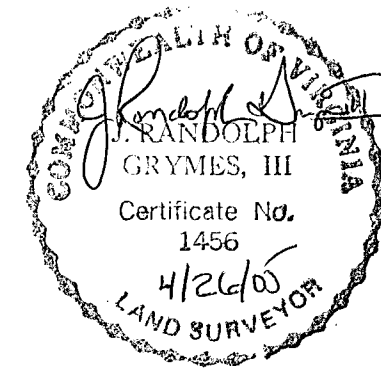


HEALTH DEPT. COPY
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HEALTH DEPT. COPY
NOT FOR RECORD

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2 FOOT CONTOUR INTERVAL
(ASSUMED DATUM)
o = STAKE FOUND (SURVEYED POINT)

HEALTH DEPT. COPY
NOT FOR RECORD



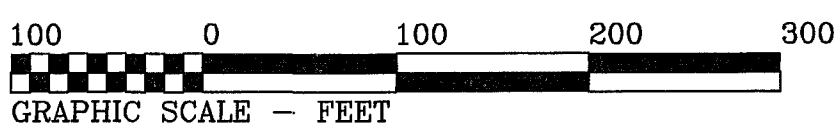
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Surveyor _____ Date 4/26/05

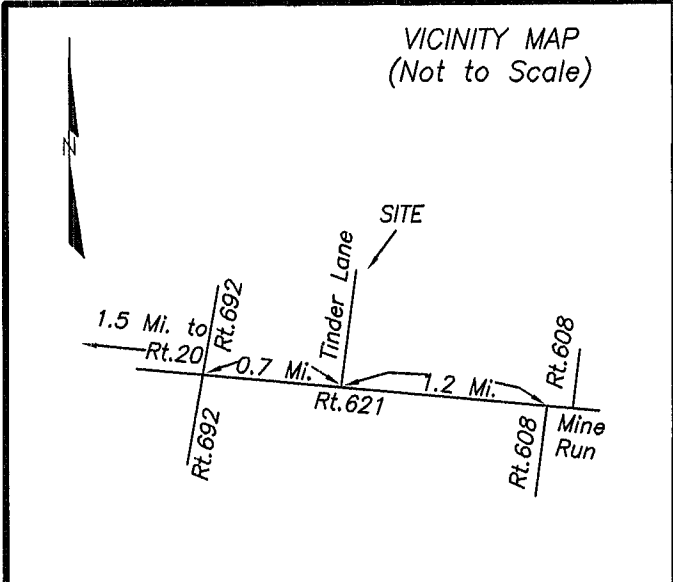
147 Caroline St., Orange, VA. 22960 540-672-4282



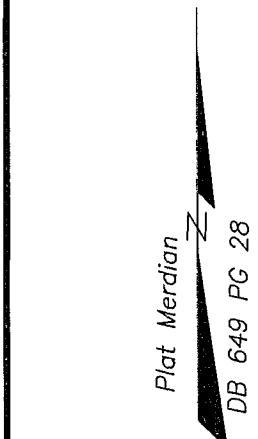
Boundary Survey
Portion of
JAMES A. & SHIRLEY E. HOPKINS PROPERTY
Gordon District
Orange County, Virginia

Prepared By
HERNDON and GRYMES
LAND SURVEYORS
ORANGE, VIRGINIA
Ph: 540-672-4282

Scale: 1" = 100' Job: 0538
Date: April 26, 2005



This plat represents a current field survey.



L1:
N 21°03'17"E 103.88'

Tax Parcel 35-50
Residue Of
James A. & Shirley E. Hopkins
DB 300 PG 172

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Owner _____ Date _____

Owner _____ Date _____

Certificate Of Approval

The subdivision shown hereon has been reviewed and approved by the undersigned in accordance with existing regulations, and may be committed to record.

Health Department _____ Date _____

Highway Department _____ Date _____

Randolph J. Kendall
Agent, County of Orange

8/23/05
Date

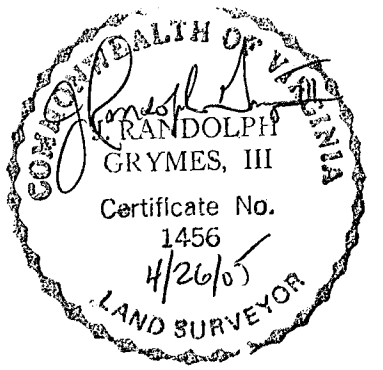
HEALTH DEPT. COPY
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NOT FOR RECORD

Tax Parcel 35-50
Residue Of
James A. & Shirley E. Hopkins
DB 300 PG 172

Tax Parcel 35-50C
now or formerly
William H. Sword
Instr. No. 030009079
Parcel 1

Tax Parcel 35-50A
now or formerly
William H. Sword
Instr. No. 030009079
Plat by Herndon & Grymes
dated March 4, 2005



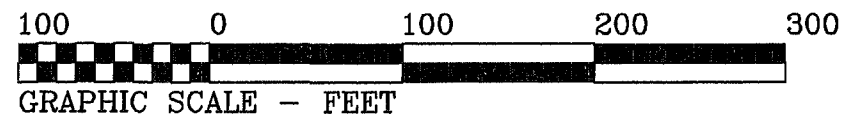
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 4. House site, well, and drainfield locations are on file at the Health Department. Deviations from same require approval.
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 6. The 50' R/W Easement hereon reserved is a private road and neither the county or the state is responsible for it's maintenance.

Surveyor's Certificate
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Randolph J. Kendall
Surveyor
4/26/05
Date

147 Caroline St., Orange, VA. 22960 540-672-4282

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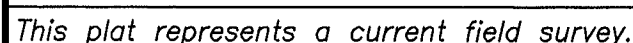


Boundary Survey
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Prepared By
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Ph: 540-672-4282

Scale: 1"= 100' Job: 0538
Date: April 26, 2005

Tinder Lane
James Hopkins



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Certificate Of Approval
The subdivision shown hereon has been reviewed and approved
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 Health Department

 Date

 Highway Department

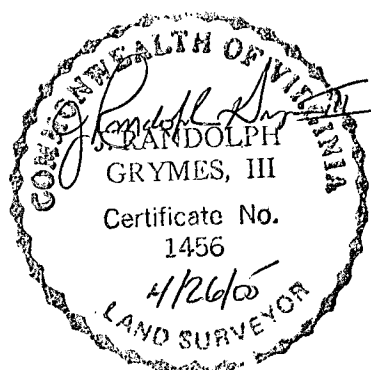
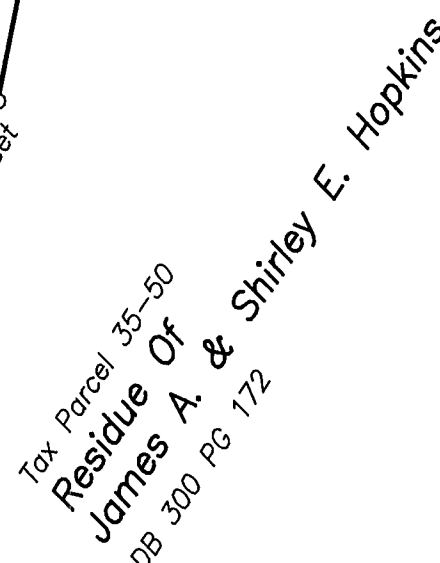
 Date

 Agent, County of Orange

 Date

Set

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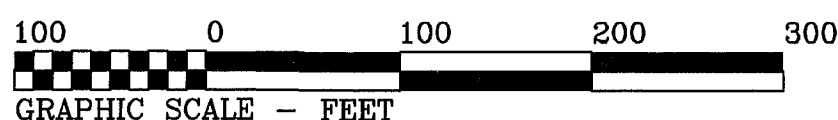
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4. House site, well, and drainfield locations are on file at the Health Department. Deviations from same require approval.
5. The parcel hereon divided is presently zoned A.
6. The 50' R/W Easement hereon reserved is a private road and neither the county or the state is responsible for it's maintenance.

Surveyor's Certificate
I hereby certify that, to the best of my knowledge and belief,
all requirements of the Board of Supervisors and ordinances of
Orange County, Virginia, regarding the platting of subdivisions
within the County, have been complied with.


 Surveyor

Date 4/26/05

147 Caroline St., Orange, VA. 22960 540-672-4282

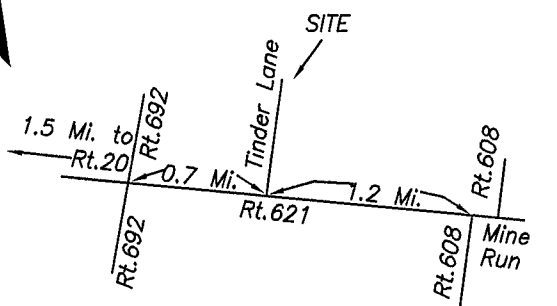


Boundary Survey
Portion of
JAMES A. & SHIRLEY E. HOPKINS PROPERTY
Gordon District
Orange County, Virginia

Prepared By
HERNDON and GRIMES
LAND SURVEYORS
ORANGE, VIRGINIA
Ph: 540-672-4282

Scale: 1" = 100' Job: 0538
Date: April 26, 2005

VICINITY MAP
(Not to Scale)



This plat represents a current field survey.

Plat Meridian
DB 649 PG 28

L1:
N 21°03'17"E 103.88'

Tax Parcel 35-50
Residue Of
James A. & Shirley E. Hopkins
DB 300 PG 172

Owner's Consent and Dedication

The platting and subdivision of James A. & Shirley E. Hopkins Property, being a portion of Tax Parcel 35-50, acquired from Claude W. Tyler, et ux in DB 300 PG 172, containing 10.551 acres, is with the free consent and is in accordance with the desire of the undersigned owners, proprietors, and trustees, if any

James A. Hopkins 8/9/05
Owner Date

Shirley E. Hopkins 8/9/05
Owner Date

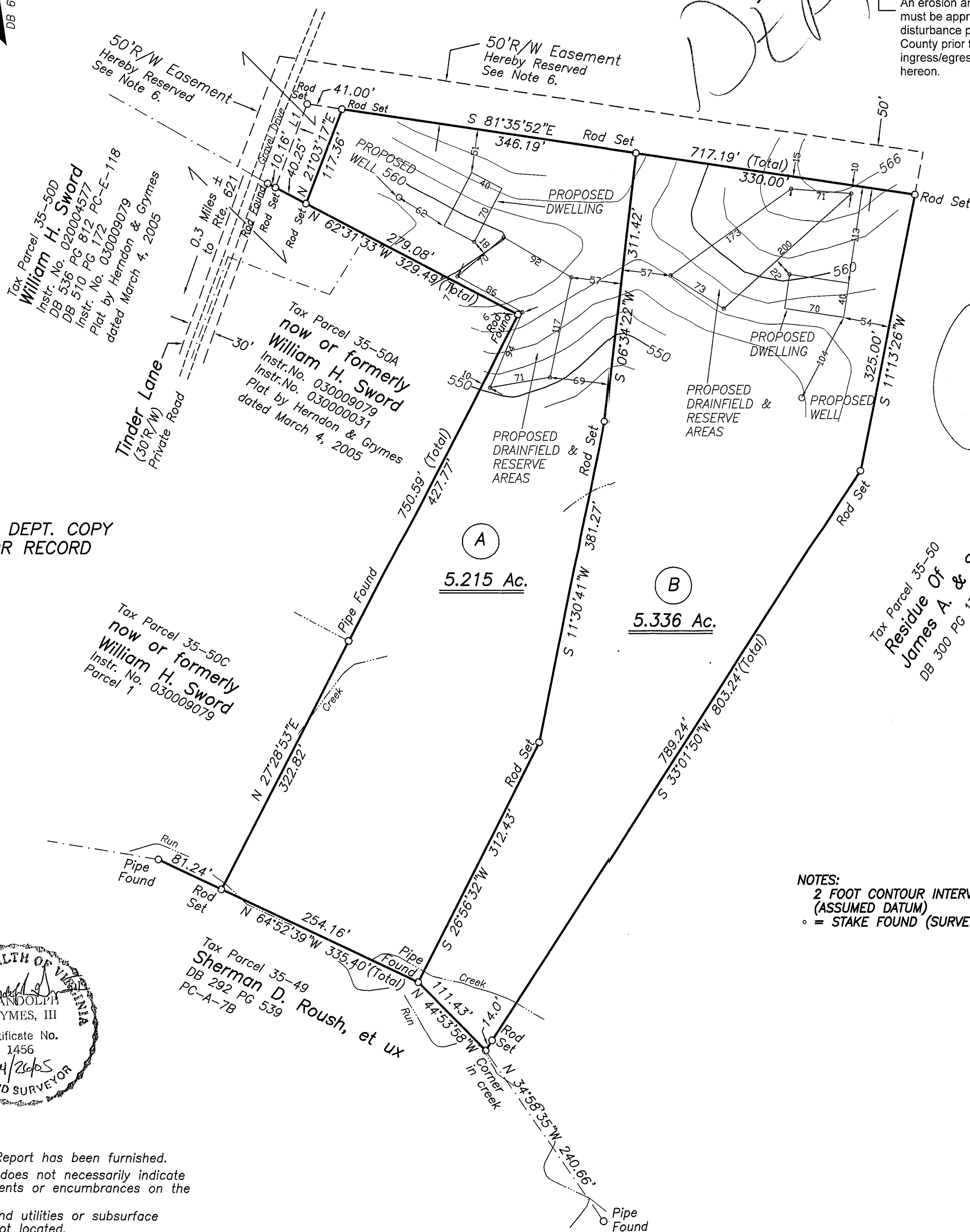
Certificate Of Approval

The subdivision shown hereon has been reviewed and approved by the undersigned in accordance with existing regulations, and may be committed to record.

Julia F. Kerrigan 8/9/05
Health Department Date

Deborah S. Kendall 8/23/05
Highway Department Date
Agent, County of Orange

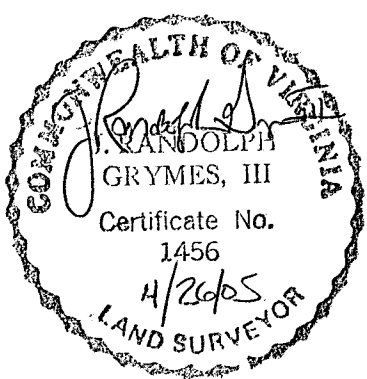
An erosion and sediment control plan must be approved and a land disturbance permit issued by Orange County prior to the construction of the ingress/egress easement as shown hereon.



HEALTH DEPT. COPY
NOT FOR RECORD

HEALTH DEPT. COPY
NOT FOR RECORD

NOTES:
2 FOOT CONTOUR INTERVAL
(ASSUMED DATUM)
• = STAKE FOUND (SURVEYED POINT)



NOTES:

1. No Title Report has been furnished.
2. This plat does not necessarily indicate all easements or encumbrances on the property.
3. Underground utilities or subsurface facilities not located.
4. House site, well, and drainfield locations are on file at the Health Department. Deviations from same require approval.
5. The parcel hereon divided is presently zoned A.
6. The 50' R/W Easement hereon reserved is a private road and neither the county or the state is responsible for its maintenance.

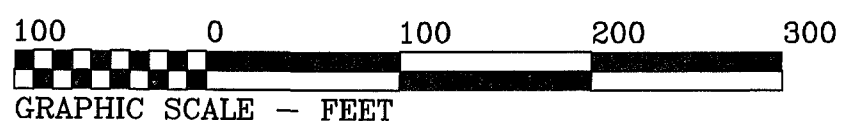
Surveyor's Certificate

I hereby certify that, to the best of my knowledge and belief, all requirements of the Board of Supervisors and ordinances of Orange County, Virginia, regarding the platting of subdivisions within the County, have been complied with.

Surveyor Date
4/26/05

147 Caroline St., Orange, VA. 22960 540-672-4282

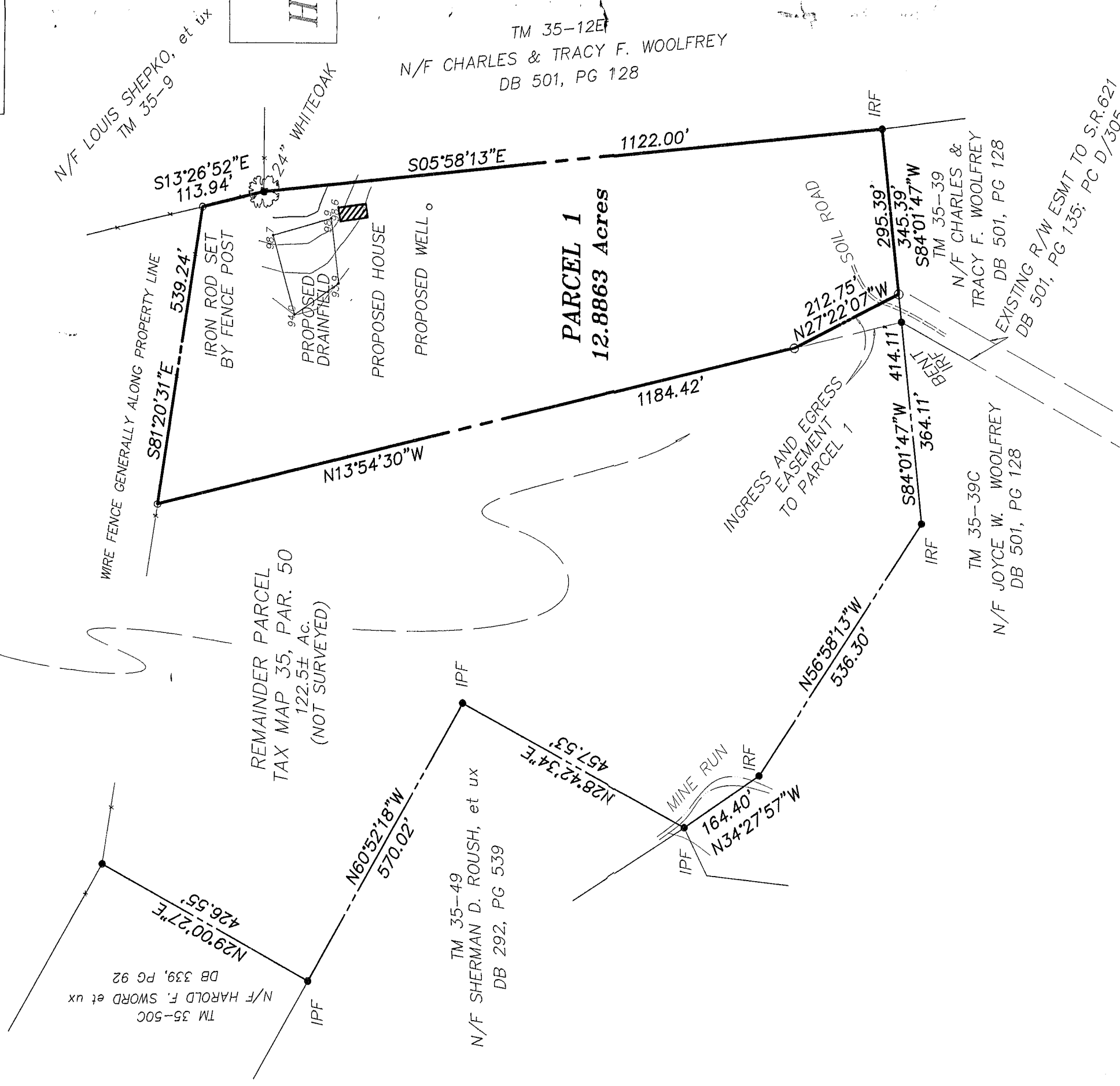
HEALTH DEPT. COPY
NOT FOR RECORD



Boundary Survey
Portion of
JAMES A. & SHIRLEY E. HOPKINS PROPERTY
Gordon District
Orange County, Virginia

Prepared By
HERNDON and GRYMES
LAND SURVEYORS
ORANGE, VIRGINIA
Ph: 540-672-4282

Scale: 1"= 100'
Date: April 26, 2005 Job: 0538



N/F LOUIS SHEPKO, et ux
TM 35-9

N/F CHARLES & TRACY F. WOOLFREY
DB 501, PG 128

N/F JOYCE W. WOOLFREY
DB 501, PG 128

EXISTING R/W ESMT TO S.R. 621
DB 501, PG 135; PC D/305

N/F SHERMAN D. ROUSH, et ux
DB 292, PG 539

APPROVED: _____
THE CONSOLIDATION OF PROPERTIES AS SHOWN ON THIS PLAT HAS BEEN REVIEWED AND APPROVED BY THE UNDERSIGNED IN ACCORDANCE WITH EXISTING REGULATIONS AND MAY BE COMMITTED TO RECORD.

Carol S. Landall
AGENT, BOARD OF SUPERVISORS
DATE: 2/14/02

Charles A. Roush
HEALTH DEPARTMENT
DATE: 2/14/02

Charles A. Roush
VIRGINIA DEPARTMENT OF TRANSPORTATION
DATE: 2/13/02

HEALTH DEPARTMENT NOTE
A COPY OF THIS PLAT SHOWING APPROVED LOCATIONS FOR HOUSE, WELL, AND DRAINFIELD TO BE FILED AT THE COUNTY HEALTH DEPARTMENT.

This copy intended for Health Department purposes only.

OWNERS CONSENT

THE PLATTING AND SUBDIVISION OF TAX MAP 35, PARCEL 50 IS CURRENTLY IN THE NAME OF JAMES A. HOPKINS, AS RECORDED IN DEED BOOK 300, PAGE 170, CONTAINING 13.0000 ACRES AND DESIGNATED AS TAX MAP 35, PARCEL 50, IS WITH THE FREE CONSENT AND IN ACCORDANCE WITH THE DESIRE OF THE UNDERSIGNED OWNER(S), PROPRIETOR(S), OR TRUSTEE(S), IF ANY.

COMMONWEALTH OF VIRGINIA,
COUNTY OF _____

TO WIT:

I, _____, A NOTARY PUBLIC IN AND FOR THE COMMONWEALTH OF VIRGINIA, IN THE COUNTY OF _____, DO HEREBY CERTIFY THAT THE ABOVE SIGNED OWNER(S) HAS ACKNOWLEDGED THE SAME BEFORE ME IN MY COUNTY AND STATE AFORESAID.

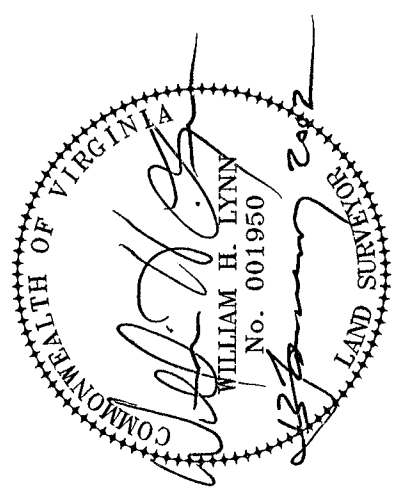
GIVEN UNDER MY HAND THIS _____ DAY OF _____, 2002.

MY COMMISSION EXPIRES _____

NOTARY PUBLIC

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL REQUIREMENTS OF THE BOARD OF SUPERVISORS AND ORDINANCES OF THE COUNTY, REGARDING THE PLATTING OF SUBDIVISIONS WITHIN THE COUNTY, HAVE BEEN COMPLIED WITH.



This copy intended for Health Department purposes only.

- NOTES:
- THIS SURVEY PREPARED WITHOUT BENEFIT OF TITLE REPORT.
 - OTHER EASEMENTS AND/OR RIGHTS OF WAY MAY EXIST IN ADDITION TO THOSE SHOWN.
 - THE PROPERTY AS SHOWN HEREON IS CURRENTLY IN THE NAME OF JAMES A. HOPKINS, et ux, AS RECORDED IN DEED BOOK 300, PAGE 172
 - THIS SURVEY ADDRESSES NEITHER THE EXISTENCE NOR THE LOCATION OF UNDERGROUND UTILITIES OTHER THAN AS SHOWN.
 - FIELD TRAVERSE CLOSURE = 1 : 31,435
 - IRON ROD SET AT ALL CORNERS UNLESS NOTED OTHERWISE.
 - IRF = IRON ROD FOUND, IPF = IRON PIPE FOUND

PLAT OF DIVISION

JAMES A. HOPKINS PROPERTY

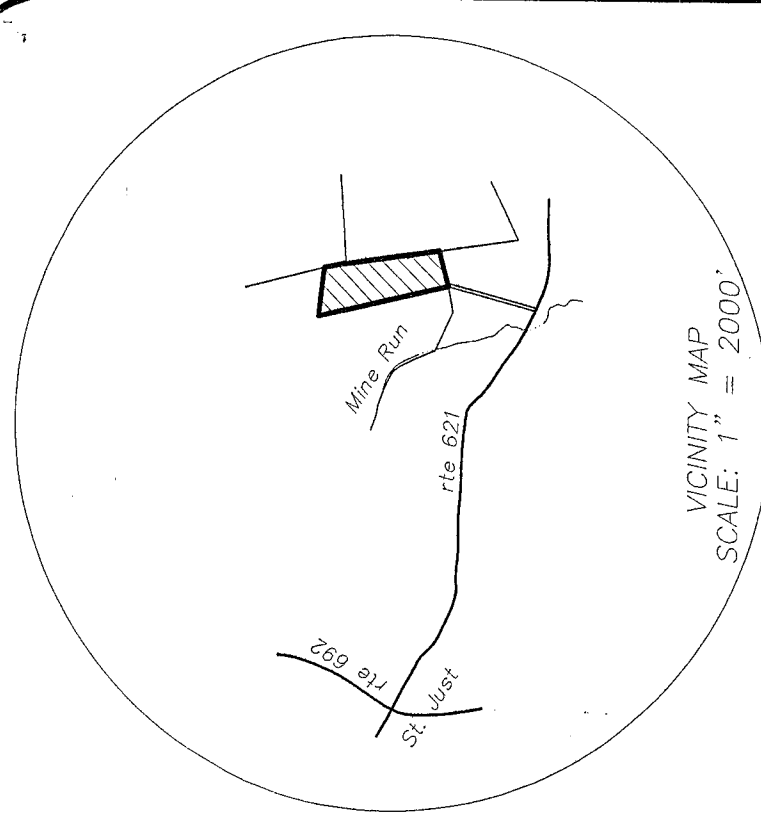
TAX MAP 35, PARCEL 50

GORDON DISTRICT

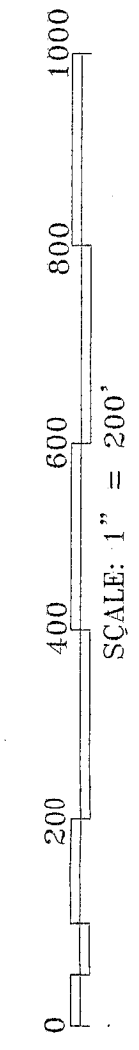
ORANGE COUNTY, VIRGINIA

DATE : December 12, 2001 Surveyed for Jim Hopkins

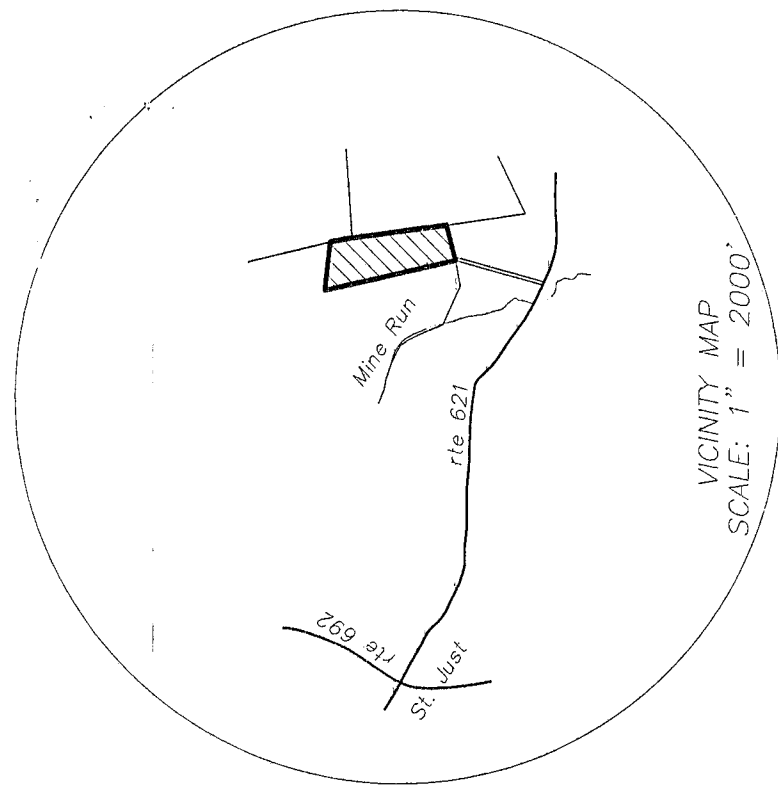
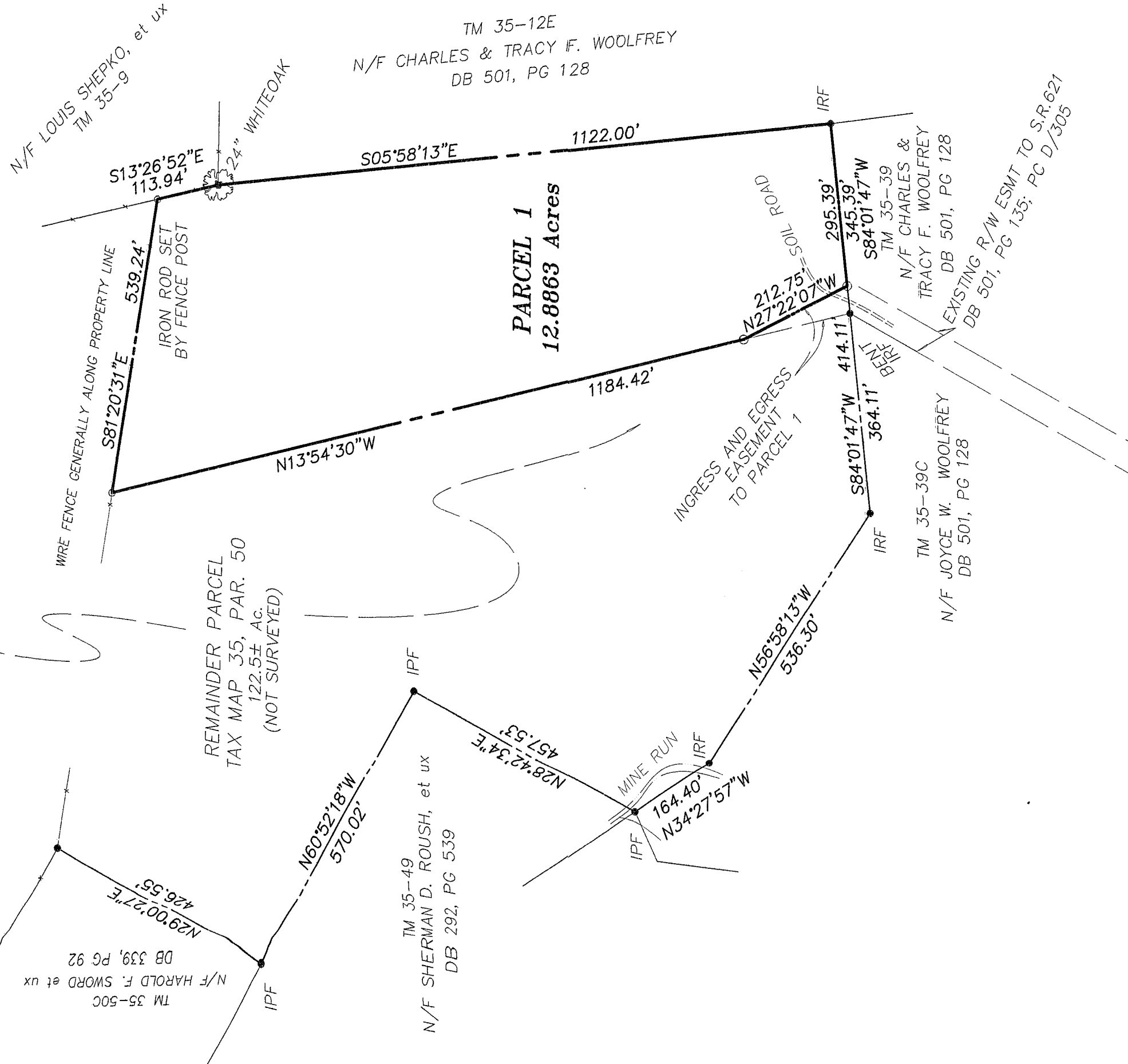
SCALE : 1" = 200' JOB No : or35-50



✓
JAMES
HARRIS
Pl. 221
"Ginn" 12



APPROVED:
THE CONSOLIDATION OF PROPERTIES AS SHOWN ON THIS PLAT HAS
BEEN REVIEWED AND APPROVED BY THE UNDERSIGNED IN ACCORDANCE
WITH EXISTING REGULATIONS AND MAY BE COMMITTED TO RECORD.
Carol S. Kendall 2/14/02 DATE
AGENT, BOARD OF SUPERVISORS
Charles A. Richmond 2/13/02 DATE
HEALTH DEPARTMENT
VIRGINIA DEPARTMENT OF TRANSPORTATION



HEALTH DEPARTMENT NOTE
A COPY OF THIS PLAT SHOWING APPROVED LOCATIONS
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13.0000 ACRES AND DESIGNATED AS TAX MAP 35, PARCEL 50, IS WITH THE FREE
CONSENT AND IN ACCORDANCE WITH THE DESIRE OF THE UNDERSIGNED OWNER(S),
PROPRIETOR(S), OR TRUSTEE(S), IF ANY.

COMMONWEALTH OF VIRGINIA,
COUNTY OF _____

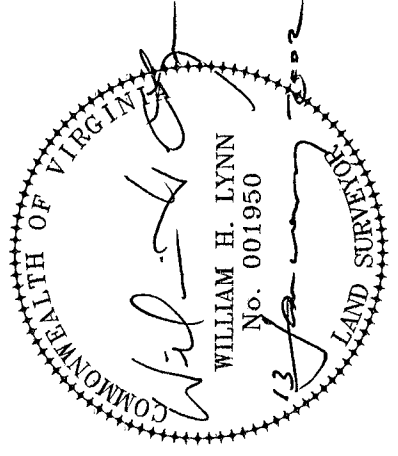
TO WIT:
I, _____ A NOTARY PUBLIC IN AND FOR THE COMMONWEALTH OF
VIRGINIA, IN THE COUNTY OF _____, DO HEREBY CERTIFY THAT THE
ABOVE SIGNED OWNER(S) HAS ACKNOWLEDGED THE SAME BEFORE ME IN MY COUNTY AND
STATE AFORESAID.

GIVEN UNDER MY HAND THIS _____ DAY OF _____, 2002.
MY COMMISSION EXPIRES _____

NOTARY PUBLIC

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL REQUIREMENTS
OF THE BOARD OF SUPERVISORS AND ORDINANCES OF THE COUNTY, REGARDING THE
PLATTING OF SUBDIVISIONS WITHIN THE COUNTY, HAVE BEEN COMPLIED WITH.



- NOTES:
1. THIS SURVEY PREPARED WITHOUT BENEFIT OF TITLE REPORT.
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THE PROPERTY AS SHOWN HEREON IS CURRENTLY IN THE NAME OF
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 4. FIELD TRAVERSE CLOSURE = 1 : 31,435
 5. IRON ROD SET AT ALL CORNERS UNLESS NOTED OTHERWISE.
IRF = IRON ROD FOUND; IPF = IRON PIPE FOUND

PLAT OF DIVISION

JAMES A. HOPKINS PROPERTY

TAX MAP 35, PARCEL 50

GORDON DISTRICT

ORANGE COUNTY, VIRGINIA

DATE : December 12, 2001 Surveyed for Jim Hopkins

SCALE : 1" = 200' JOB No : or35-50

Certification Statement

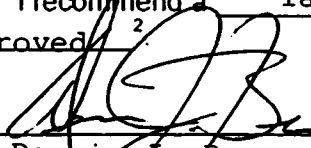
County: Orange Date: 8-13-01

Property Identification: Portion of TM 35-50

Submitted by: Culpeper Engineering, P.C.

This is to certify according to §32.1-163.5 of the *Code of Virginia* that work submitted for the referred property is in accordance to and complies with the *Sewage Handling and Disposal Regulations* of the Virginia Department of Health. I recommend a land division ¹be

approved ²

AOSE  Date: 8-13-01

Dennis J. Brown, A.O.S.E. No. 171
(540) 423 - 9706

Soil Consultant _____ Date: _____

¹ This blank must be filled in with one of the following terms: 'permit', 'certification letter', or 'subdivision approval'.

² This blank must be filled in either the term 'approved' or 'denied'.

If the submission contains a certification by a professional engineer in consultation with an AOSE, the following statement shall be signed and sealed:

I hereby certify that the evaluations and designs contained herein (refer to subdivision, lot, etc.) were conducted in accordance with the *Sewage Handling and Disposal Regulations* (12 VAC 5-610-10 et seq., the "*Regulations*") and the policies of the Virginia Department of Health for implementation of those *Regulations*. Furthermore, I certify that the evaluations and designs comply with the minimum requirements of the *Regulations*.

I recommend a _____ ¹be _____ ².

Licensed PE: _____ Date: _____

Seal

¹ This blank must be filled in with one of the following terms: 'permit', 'certification letter', or 'subdivision approval'.

² This blank must be filled in either the term 'approved' or 'denied'.





COMMONWEALTH of VIRGINIA

ORANGE COUNTY HEALTH DEPARTMENT

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

450 N. ~~666~~ MADISON ROAD
ORANGE, VIRGINIA 22960
540 - 672-1291

OWNER: James Hopkins

ADDRESS: 10030 Tinder Lane PHONE: 540-854-5739
Unionville, Va 22567

AGENT: _____

ADDRESS: _____ PHONE: _____

EXACT LOCATION: RT 20 To Rcn 621 To Lat
Tinder Lane To end of Lane

TAX MAP AND PARCEL NUMBER: 35-50

TOTAL EXISTING ACREAGE: 35

NUMBER OF PROPOSED LOTS: 1

A PLAT OF THE PROPERTY AND A SKETCH OF THE PROPOSED LOT(S) SHOWING IS
REQUIRED. THE PROPERTY MUST BE SUFFICIENTLY CLEARED AND MARKED FOR
EVALUATION. I James Hopkins (OWNER/AGENT), GRANT
REPRESENTATIVES(S) OF THE ORANGE COUNTY HEALTH DEPARTMENT RIGHT TO
ACCESS TO THIS PROPERTY FOR THE PURPOSE OF PROCESSING THIS APPLICATION.

PD 70.00
21330294

DEPARTMENT USE ONLY:

DATE RECEIVED: 7/30/01

DATE OF EVALUATION: 9-7-01

DATE PLAT SIGNED: 2/12/02

FINAL PLAT RECEIVED: _____





COMMONWEALTH OF VIRGINIA

ORANGE COUNTY HEALTH DEPARTMENT

350 MADISON ROAD

ORANGE, VIRGINIA 22960

703-672-1291

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

OWNER: James A Hopkins

ADDRESS: 10050 Tindley Lane
Unionville, VA 22567

PHONE: 854-5739

AGENT: _____

ADDRESS: _____

PHONE: _____

EXACT LOCATION: _____

Rt 20 To Right on 621, 2.5 mi

To Left on Tindley Lane. To end of Private road

TAX MAP AND PARCEL NUMBER: _____

35-50

TOTAL EXISTING ACREAGE: _____

150

NUMBER OF PROPOSED LOTS: _____

3

A PLAT OF THE PROPERTY AND A SKETCH OF THE PROPOSED LOT (S) SHOWING IS REQUIRED. THE PROPERTY MUST BE SUFFICIENTLY CLEARED AND MARKED FOR EVALUATION. I James A Hopkins (OWNER/AGENT), GRANT REPRESENTATIVE(S) OF THE ORANGE COUNTY HEALTH DEPARTMENT RIGHT OF ACCESS TO THIS PROPERTY FOR THE PURPOSE OF PROCESSING THIS APPLICATION.

VOID NO Follow UP
by Applicant

Department Use Only:

DATE RECEIVED: _____

DATE OF EVALUATION: _____

DATE PLAT SIGNED: _____

FINAL PLAT RECEIVED: _____

No sites located -
Bad Soil.

Mr. Hopkins is trying
to locate something better.

VDH VIRGINIA
DEPARTMENT
OF HEALTH

RECORD OF INSPECTION-SEWAGE DISPOSAL SYSTEM

81-0057

HOPKINS, JAMES A.

RT. 1 Box 440

Date 6-5-81 Case No. Section: 35
Parcel 50

Owner HOPKINS, JAMES A. Address RT. 1 Box 440 Phone
(Mailing Address)

Occupant Son Address Phone
(Mailing Address)

Exact Location of Premises North side of Rt. 621 Approx. 7/10 mi. east of Rt. 692/621 Int. (Approx. 6/10 mi. off Rt. 621)
(Subdivision, Street or Road Name, Section or Lot No.)

EXISTING 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 line 100 feet. Trees 20 feet. Buildings 10 feet. Water Supplies 100 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 NO (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 ABS 4" x 40' Size 4" x 40' inches.

(5) SEPTIC TANK
Constructed of Concrete (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 2 (Number) extra outlets for future use.

(7) SUBSURFACE ABSORPTION FIELD
Total Area in bottom of ditches 1000 square feet. Number of ditches 5 Length of ditches 100 feet. Grade of ditches Minimum 2 inches per 100 feet. Maximum 4 inches per 100 feet. Has system been checked by instruments (Level) ☒ Yes ☐ No. Type aggregate used broken stone Depth of aggregate under tile 15 inches. Total depth of aggregate 15 inches. Depth of backfill over aggregate 15-20 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: Garfield Towles Address Orange, VA Phone

This Sewage Disposal System (Is) (Not) Approved by Orange Co Health Department

Date 6-5-81 Signed W.T. Graham (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: Trailer not @ site; H₂O supply from existing source

SEWAGE DISPOSAL SYSTEM

FHA/VA ☐ Yes ☒ No

Date 4-24-81 Case No. Sect - 35
11 Incell 50

Address RT 1 Box 445 Lumberton Phone _____
(Mailing Address)

Address _____ Phone _____
(Mailing Address)

Exact Location
of premises NORTH SIDE OF + 621 APPROX 7 1/2 MI. EAST OF RT 692/621 TWT
(Subdivision, Street or Road Name, Section or Lot No.)

FOR: ☒ Dwelling ☐ Other _____ Automatic Washing Machine ☐ Yes ☒ No Consumption 500 gal. per day
Actual ☐ Potential ☐ Bedrooms 2 Garbage Disposal Unit ☐ Yes ☒ No (☐ Actual ☐ estimated Water)

Additional wastes None

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

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

SOIL STUDY Naturally drained, suitable by sight ☒ Yes ☐ No Technical Classification 15/1

(2) Estimated Percolation Rate 1-10 ☒ 11-25 ☐ 26-50 ☐ > 51 ☐ Percolation Test Required ☐ Yes No ☒ Rate 11
(Minutes per inch) (Minutes per inch to nearest 10 minutes)

Depth to Gray Mottles 4 ft. and inches (estimate over 4 ft.) OTHER N/A
Surface drainage required ☐ Yes ☒ No OTHER DRAINAGE N/A

3 HOUSE SEWER LINE Size 4 inches. Type of material required SCN 40 TF Distance from Water Supply 50 feet.

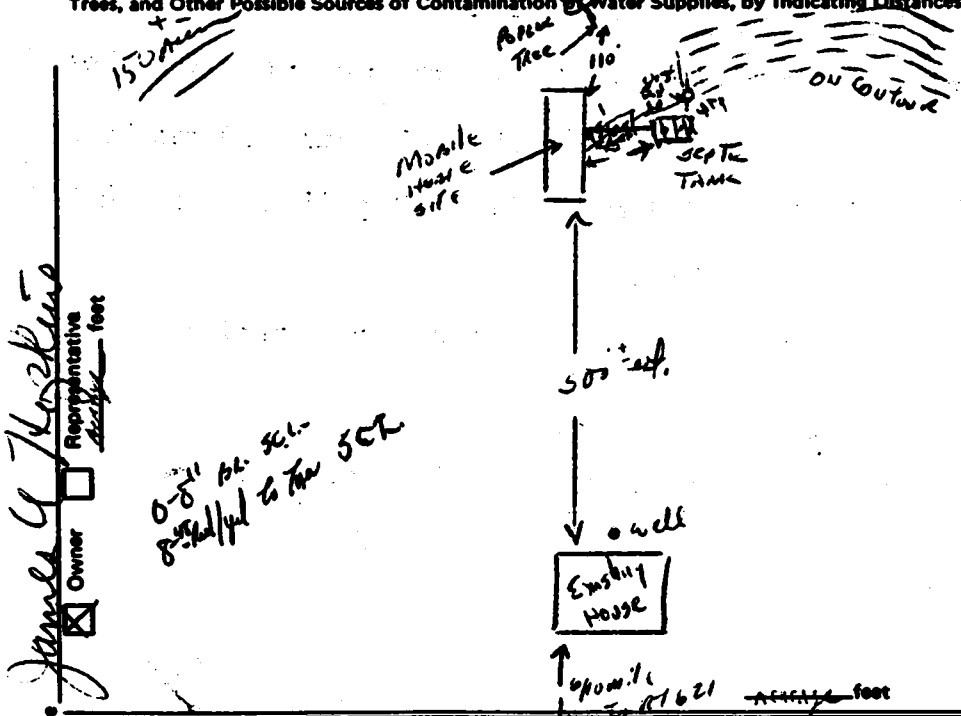
(4) **DETAILS OF CONSTRUCTION** Watertight Septic Tank of Concrete Material Liquid Capacity 1000 gallons.
Inside Dimensions Length 8 feet Width 4 feet Liquid Depth 9 1/2 feet Depth of Air Space 1 feet.

SUBSURFACE ABSORPTION FIELD Number of square feet required 1000 Type aggregate required Gravel

(5) Depth of aggregate from base of tile to bottom of ditches 6 inches. Allowable fall 2 to 4 inches.
Total aggregate minimum depth 13 inches or more. Depth of drainfield to be 40-42 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.



FIVE LINES 100 LONG
TWO FEET WIDE
SEVEN FOOT CENTERS

* KEEP DRAINFIELD
100' + FROM ALL
LATERAL SUPPLIES.

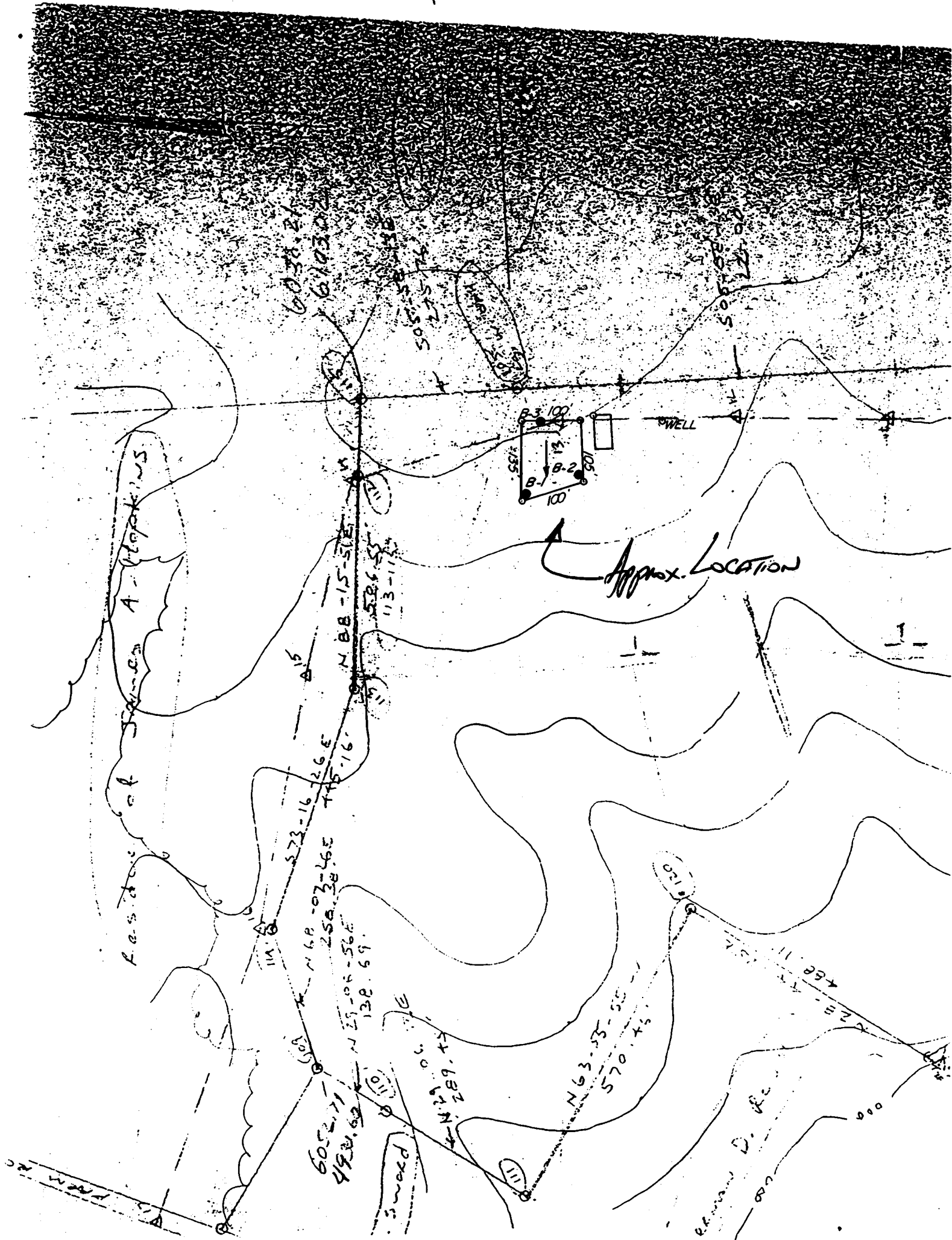
Note: Owner or his agent must notify City of Chicago Health Department, Phone 727-1241 when installation is ready for inspection. If any Sewage Disposal System, or part thereof, is covered before being inspected by the Health Department, it shall be uncovered at the direction of the Health Director or his agent. **CONDITIONS DISCOVERED DURING INSTALLATION MAY REQUIRE ADJUSTMENTS OF SYSTEM DESIGN.** Changes from above specifications require Health Department approval before being made.

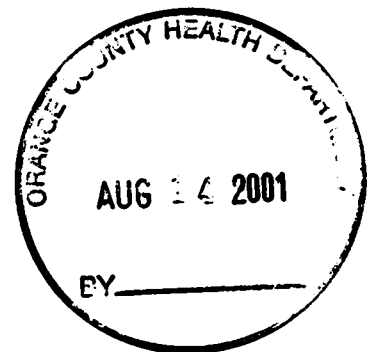
Based on the above information, the undersigned recommends that this permit be issued.

Date _____ Approved _____ Date 6/24/81 Signed [Signature]
(Reviewing Authority) (Sanitarian or Health Director)

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

DUPLICATE





Soil Summary Report

GENERAL INFORMATION	
Date <u>8-13-01</u>	Submitted to <u>Orange County</u> Health Department
Applicant <u>Mr. Jim Hopkins</u>	Telephone No. <u>854 - 5739</u>
Address <u>10050 Tinder Lane, Unionville, Virginia 22567</u>	
Owner <u>James Hopkins, et u</u>	Address _____
Location <u>north of Rt. 621, approx. 1.0 miles east of its intx. w/Rt. 608</u>	
Tax Map <u>Portion of</u>	Subdivision _____
<u>TM 35-50</u>	
Block/Section _____	Lot _____
SOIL INFORMATION SUMMARY	
1. Position in landscape satisfactory Yes ☒ No ☐ Describe <u>sideslope</u>	
2. Slope <u>5-6</u> %	
3. Depth to rock or impervious strata: Max. _____ Min. _____ None <u>none</u> encountered	
4. Depth to seasonal water table (gray mottling or gray color) No ☒ Yes ☐ <u>N/A</u> inches	
5. Free water present No ☒ Yes ☐ <u>N/A</u> range in inches	
6. Soil percolation rate estimated Yes ☒ No ☐ Texture group I II ☒ IV Estimated rate <u>55-60</u> min/inch	
7. Permeability test performed Yes ☐ No ☒	
If yes, note type of test performed and attach <u>N/A</u>	
☐ Site Approved: Drainfield to be placed at _____ depth at site designated on permit. ☐ Site Disapproved: Reasons for rejection: 1. ☐ Position in landscape subject to flooding or periodic saturation. 2. ☐ Insufficient depth of suitable soil over hard rock. 3. ☐ Insufficient depth of suitable soil to seasonal water table. 4. ☐ Rates of absorption too slow. 5. ☐ Insufficient area of acceptable soil for required drainfield, and/or Reverse Area. 6. ☐ Proposed system too close to well. 7. ☐ Other Specify _____	
(attach additional pages if necessary)	



DATE OF EVALUATION 10-24-00TEST BORING B-1:

Depth (inches)	Horizon	Description	Texture Group
0 - 4	A1	pale brown (10YR 6/3) loam; w/quartz	II
4 - 12	A2	light yellowish brown (10YR 6/4) loam; w/quartz	II
12 - 25	A3	reddish yellow (7.5YR 6/6) silt loam	III
25 - 48	B1	red (2.5YR 5/6) yellowish red (5YR 5/6) brownish yellow (10YR 6/8) clay loam	III
48 - 54	B2	red (2.5YR 5/6) brownish yellow (10YR 6/8) silt clay loam; friable; few distinct weathered seams	III
54 - 76	C1	red (2.5YR 5/6) reddish yellow (7.5YR 6/6) silt loam saprolite; friable; w/mica	III
76 - 90	C2	red (2.5YR 5/8) reddish yellow (7.5YR 6/6) sandy loam saprolite; loose; w/mica	II

TEST BORING B-2:

Depth (inches)	Horizon	Description	Texture Group
0 - 8	A	pale brown (10YR 6/3) silt loam; w/quartz	III
8 - 24	B1	yellowish red (5YR 5/6) clay loam	III
24 - 47	B2	red (2.5YR 5/6) clay to clay loam	IV-III
47 - 90	B3	red (2.5YR 5/6) yellowish red (5YR 5/8) silt loam; friable to loose; few faint weathered seams; w/mica	III

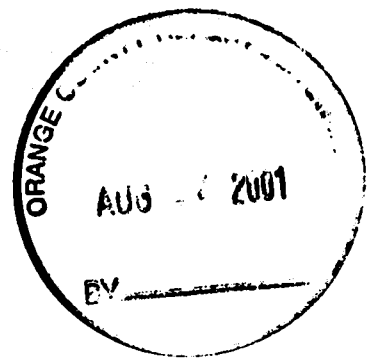
REMARKS:



TEST BORING B-3:

Depth (inches)	Horizon	Description	Texture Group
0 - 8	A	pale brown (10YR 6/3) silt loam; w/quartz	III
8 - 32	B1	yellowish red (5YR 5/6) brownish yellow (10YR 6/8) clay loam to clay	III-IV
32 - 54	B2	yellowish red (5YR 5/6) yellow (10YR 7/8) clay loam; few fine white seams	III
54 - 90	B3	red (2.5YR 5/6) yellowish red (5YR 5/8) silt loam; friable; few faint white streaks	III

REMARKS:



ABBREVIATED DESIGN FORM**DESIGN BASIS:**

- A. a. Estimated Percolation Rate (minutes per inch).....
- b. Recommended trench bottom depth (inches).....
- c. Depth to restrictive feature or limit of evaluation if none encountered (inches).....
- d. Minimum Separation distance required (inches).....
- e. Separation distance in inches provided in design (Ac-Ab).....
- f. Slope of drainfield- Maximum (%).....
- g. Minimum trench bottom due to slope $[((\% \text{slope} - 8)/2) + 18]$ (inches).....
- h. Is slope greater than 10% ?.....
- i. If Ah is yes, does greater than 24 inches to rock exist below Ab?.....
- j. If yes to Ah, add 1 ft. to the minimum center to center spacing beginning at 20% slope and continue for each 10% slope increase above 20%. If no, add 1 ft. to the minimum center to center spacing beginning at 10% slope and continue for each 10% slope increase above 10%. (Report value, in ft., of the increase in center to center spacing above minimum).

55-60 mp'
66 in.
90 in.
18
24
6%
18
No
—
—

- B. Trench bottom square feet required per bedroom from Table 4.6 based on ☒ gravity ☐ LPD
- C. Number of bedrooms.....

412-452
4

AREA CALCULATIONS:

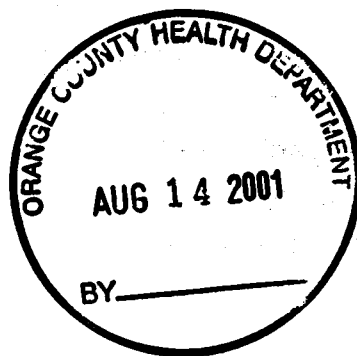
- D. Length of trench proposed (feet).....
- Length of available area (feet).....
- E. Width of trench proposed (feet).....
- F. Number of trenches.....
- G. Center to center spacing (feet).....
- H. a. Width required $(G*(F-1) + E)$ (feet).....
- b. Width of available area (feet).....
- I. Total square footage required $(B*C)$ (sq.ft.).....
- J. Square footage in Design $(D*E*F)$ (sq.ft.).....
- K. Is RESERVE AREA required? ☒ Yes ☐ NO

100 FT.
100 FT.
3 FT.
6
9 FT.
48 FT.
105 FT. MIN.
1648 - 1808
1800 SQ FT.

RESERVE AREA:
TD 66 in.

Percent Required.....	100
Percent Available.....	100
Number of trenches.....	6
Length of trenches (ft.).....	100 FT.
Width of trenches (ft.).....	3 FT.
Reserve Design square footage.....	1800
Cost to Costa	9 FT.

Additional Notes:



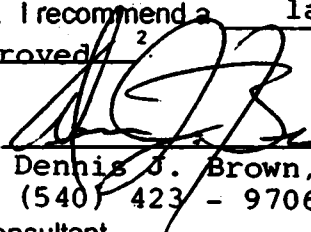
Certification Statement

County: Orange Date: 8-13-01

Property Identification: Portion of TM 35-50

Submitted by: Culpeper Engineering, P.C.

This is to certify according to §32.1-163.5 of the *Code of Virginia* that work submitted for the referred property is in accordance to and complies with the *Sewage Handling and Disposal Regulations* of the Virginia Department of Health. I recommend a _____ land division _____¹ be

approved²
 AOSE  Date: 8-13-01
 Dennis J. Brown, A.O.S.E. No. 171
 (540) 423 - 9706

Soil Consultant _____ Date: _____

¹ This blank must be filled in with one of the following terms: 'permit', 'certification letter', or 'subdivision approval'.

² This blank must be filled in either the term 'approved' or 'denied'.

If the submission contains a certification by a professional engineer in consultation with an AOSE, the following statement shall be signed and sealed:

I hereby certify that the evaluations and designs contained herein (refer to subdivision, lot, etc.) were conducted in accordance with the *Sewage Handling and Disposal Regulations* (12 VAC 5-610-10 et seq., the "*Regulations*") and the policies of the Virginia Department of Health for implementation of those *Regulations*. Furthermore, I certify that the evaluations and designs comply with the minimum requirements of the *Regulations*.

I recommend a _____¹ be _____².

Licensed PE: _____ Date: _____

Seal

¹ This blank must be filled in with one of the following terms: 'permit', 'certification letter', or 'subdivision approval'.

² This blank must be filled in either the term 'approved' or 'denied'.



ABBREVIATED DESIGN FORM**DESIGN BASIS:**

- A. a. Estimated Percolation Rate (minutes per inch).....
- b. Recommended trench bottom depth (inches).....
- c. Depth to restrictive feature or limit of evaluation if none encountered(inches).....
- d. Minimum Separation distance required (inches).....
- e. Separation distance in inches provided in design (Ac-Ab).....
- f. Slope of drainfield- Maximum (%).....
- g. Minimum trench bottom due to slope $[(\% \text{slope} - 8)/2] + 18$ (inches).....
- h. Is slope greater than 10% ?.....
- i. If Ah is yes, does greater than 24 inches to rock exist below Ab?.....
- j. If yes to Ah, add 1 ft. to the minimum center to center spacing beginning at 20% slope and continue for each 10% slope increase above 20%. If no, add 1 ft. to the minimum center to center spacing beginning at 10% slope and continue for each 10% slope increase above 10%. (Report value, in ft., of the increase in center to center spacing above minimum).

55-60 min
66 in.
90 in.
18
24
6%
18
No
—
—

- B. Trench bottom square feet required per bedroom from Table 4.6 based on



gravity



LPD

- C. Number of bedrooms.....

412-452
4

AREA CALCULATIONS:

- D. Length of trench proposed (feet).....
- Length of available area (feet).....
- E. Width of trench proposed (feet).....
- F. Number of trenches.....
- G. Center to center spacing (feet).....
- H. a. Width required $(G*(F-1) + E)$ (feet).....
- b. Width of available area (feet).....
- I. Total square footage required $(B*C)$ (sq.ft.).....
- J. Square footage in Design $(D*E*F)$ (sq.ft.).....
- K. Is RESERVE AREA required?

100 FT.
100 FT.
3 FT.
6
9 FT.
48 FT.
105 FT. MIN.
1648 - 1808
1800 SQ FT.



Yes



NO

Percent Required.....

Percent Available.....

Number of trenches.....

Length of trenches (ft.).....

Width of trenches (ft.).....

Reserve Design square footage.....

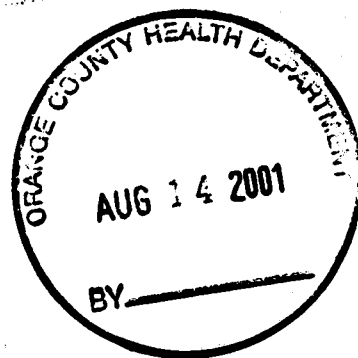
100
100
6
100 FT
3 FT.
1800
9 FT.

RESERVE AREA:

TD 66 in.

COST TO COST

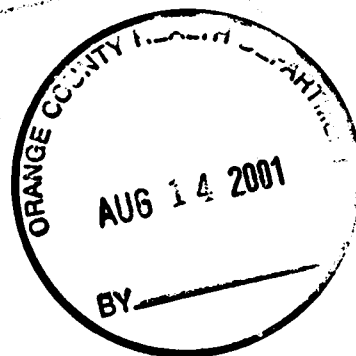
Additional Notes:



TEST BORING B-3:

Depth (inches)	Horizon	Description	Texture Group
0 - 8	A	pale brown (10YR 6/3) silt loam; w/quartz	III
8 - 32	B1	yellowish red (5YR 5/6) brownish yellow (10YR 6/8) clay loam to clay	III-IV
32 - 54	B2	yellowish red (5YR 5/6) yellow (10YR 7/8) clay loam; few fine white seams	III
54 - 90	B3	red (2.5YR 5/6) yellowish red (5YR 5/8) silt loam; friable; few faint white streaks	III

REMARKS:



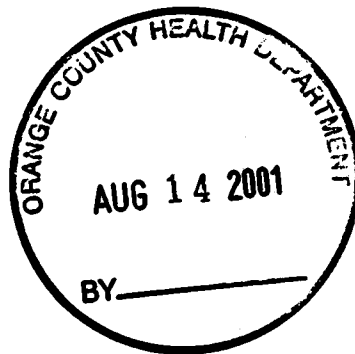
DATE OF EVALUATION 10-24-00TEST BORING B-1:

Depth (inches)	Horizon	Description	Texture Group
0 - 4	A1	pale brown (10YR 6/3) loam; w/quartz	II
4 - 12	A2	light yellowish brown (10YR 6/4) loam; w/quartz	II
12 - 25	A3	reddish yellow (7.5YR 6/6) silt loam	III
25 - 48	B1	red (2.5YR 5/6) yellowish red (5YR 5/6) brownish yellow (10YR 6/8) clay loam	III
48 - 54	B2	red (2.5YR 5/6) brownish yellow (10YR 6/8) silt clay loam; friable; few distinct weathered seams	III
54 - 76	C1	red (2.5YR 5/6) reddish yellow (7.5YR 6/6) silt loam saprolite; friable; w/mica	III
76 - 90	C2	red (2.5YR 5/8) reddish yellow (7.5YR 6/6) sandy loam saprolite; loose; w/mica	II

TEST BORING B-2:

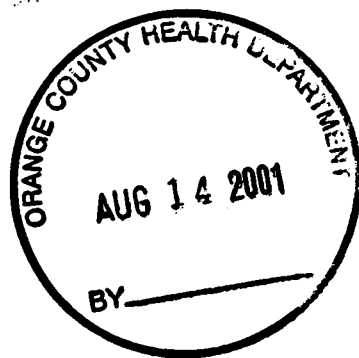
Depth (inches)	Horizon	Description	Texture Group
0 - 8	A	pale brown (10YR 6/3) silt loam; w/quartz	III
8 - 24	B1	yellowish red (5YR 5/6) clay loam	III
24 - 47	B2	red (2.5YR 5/6) clay to clay loam	IV-III
47 - 90	B3	red (2.5YR 5/6) yellowish red (5YR 5/8) silt loam; friable to loose; few faint weathered seams; w/mica	III

REMARKS:



Soil Summary Report

GENERAL INFORMATION	
Date <u>8-13-01</u>	Submitted to <u>Orange County</u> Health Department
Applicant <u>Mr. Jim Hopkins</u>	Telephone No. <u>854 - 5739</u>
Address <u>10050 Tinder Lane, Unionville, Virginia 22567</u>	
Owner <u>James Hopkins, et ux</u>	Address _____
Location <u>north of Rt. 621, approx. 1.0 miles east of its intx. w/Rt. 608</u>	
Tax Map <u>Portion of</u>	Subdivision _____
<u>TM 35-50</u>	
Block/Section _____	Lot _____
SOIL INFORMATION SUMMARY	
1. Position in landscape satisfactory Yes ☒ No ☐ Describe <u>sideslope</u>	
2. Slope <u>5-6</u> %	
3. Depth to rock or impervious strata: Max. _____ Min. _____ None <u>none</u> encountered	
4. Depth to seasonal water table (gray mottling or gray color) No ☒ Yes ☐ <u>N/A</u> inches	
5. Free water present No ☒ Yes ☐ <u>N/A</u> range in inches	
6. Soil percolation rate estimated Yes ☒ No ☐ Texture group I II ☒ IV Estimated rate <u>55-60</u> min/inch	
7. Permeability test performed Yes ☐ No ☒	
If yes, note type of test performed and attach <u>N/A</u>	
☐ Site Approved: Drainfield to be placed at _____ depth at site designated on permit. ☐ Site Disapproved: Reasons for rejection: 1. ☐ Position in landscape subject to flooding or periodic saturation. 2. ☐ Insufficient depth of suitable soil over hard rock. 3. ☐ Insufficient depth of suitable soil to seasonal water table. 4. ☐ Rates of absorption too slow. 5. ☐ Insufficient area of acceptable soil for required drainfield, and/or Reverse Area. 6. ☐ Proposed system too close to well. 7. ☐ Other Specify _____	
(attach additional pages if necessary)	



Approx. Location

