

06-16-2016 14:53 FROM-

T-343 P0002

F-351

Tax Map: 2-1

Parcel #: 42

County: Washington **ON-SITE SEWAGE DISPOSAL SYSTEM** **INSPECTION FORM**

County Road: _____

Name of Owner: ALLEN C BAKER Installer: SUSAN SARETS
Address: 5221 Richardson Drive FAIR FAX, VA 22031
Property Location: RV 127 to GASTON RD
Type of Facility: As is Facility is: New (X) Existing () Lot Size: 23.6 SUPP (A)
Design Loading in gpd/No. Bedrooms: 3BR Source of Water Supply: Well

SEWAGE TANK COMPONENT

Capacity in Gallons: 1000 Material: Concrete Manufacturer: John
Distances (in feet) of Tank to: Dwelling: 10' Private (X) Public () Water Source: 130 Property Line: 10

to be

ON-SITE DISPOSAL SYSTEM

Class I Systems: Standard Soil Absorption Trenches (X) or Bed () Gravelless Pipe (), Diameter: _____ Inches
Chamber Soil Absorption Trenches () or Bed ()
Class II Systems: Pumped/Dosed Soil Absorption Trenches () or Bed () Evapotranspiration Trenches () or Bed ()
Shallow Soil Absorption Trenches () or Bed () Other: _____

No. of Lines: 3 Length (in feet) of Each: 80, 80, 60
Width of Trenches: 7.6 inches/feet Depth to Bottom of Field: 24-36 inches
If Bed, Dimensions (in Feet): _____ If Chamber System, Name: _____ No. of Units: _____
Approved and Adequate Materials Used? Yes (X) No () Size Equals to: 220 Square Feet of Standard Gravel
Distances (in feet) of System to: Dwelling: 10' Private (X) Public () Water Source: 140 Property Line: 10
Remarks: to be

An inspection indicates that the sewage disposal system described above
DOES MEET (X),
DOES NOT MEET (),
CANNOT BE DETERMINED TO MEET () the minimum standards established by the West Virginia Bureau of Public Health.

To correct a health hazard, modifications to existing systems may be done to improve part of a system. Such modifications may not be able to be designated as a does meet system since inadequate information is known.

Although many factors contribute to the successful functioning of a sewage disposal system, this office recommends water conservation and maintaining an even usage of water throughout the week.

Sketch of Installation with Triangulation or Distance to Specific Landmarks:

• well

Draw As
toward A

NOT TO SCALE

Visit Date(s): 6-12-02

Final Inspection Date: 6-14-02

Sanitarian: J. K. Koster

06-16-16 14:53 FROM-

T-343 P0003

F-351

SEPTIC TANK INSPECTION FORM

Wayside County Health Department Installation Permit No. 55-14-10-1343
 Name of Owner Mr. W. D. Dorman
 Address P.O. Box 825, Beechey Springs, WV
 Property Address East Oak - Cotton River Rd.

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served colony No. Water Closets 1
 Lot Size 207 sq. ft. Area suitable for sewage disposal installation 1 sq. ft.
 Source of Water Supply drilled well No. Lavatories 1
 No. Bedrooms 2 No. Showers or Tubs 1 No. Baths 1
 No. Garbage Grinders 1 No. Automatic Washers 1

SEPTIC TANK

Material pvc & concrete Length 100 x Width 36 x Depth 22 = 792 cubic feet
 Liquid Depth 10 ft. Liquid Capacity 1000 gal.
 Distance to: Dwelling 120' Water Supply 150' Nearest Property Line 300'

SOIL ABSORPTION SYSTEM

Type Drain Line Material 2722 Trench Width 36 Inches
 Trench Depth 22 Inches Total Absorption area in Trench Bottom 720 sq. ft.
 Diameter of Drain Line 4 Inches Type Filter Media 1 1/2" #6 stone 40 lbs
 No. of Drain Lines 3 Depth Filter Media Under Drain Line 10 Inches
 Length of Pack Line 80. 80. 80. ft. Depth Filter Media Over Drain Line 2
 Distance of Disposal Field to: (a) Dwelling 120'
 (b) Water Supply 150' (c) Nearest Property Line 300'

An inspection of the septic tank system described herein disclosed that said system (MEETS, DOES NOT MEET) the minimum standards established by the West Virginia State Department of Health.

6-15-82
 Date

[Signature]
 Sanitarian

SKETCH OF SYSTEM TO BE DRAWN ON BACK

Note: Copy of this inspection report must be given to owner and the original filed in the Health Department files. PERMANENT RECORD - DO NOT DESTROY.

06-16-16 14:53 FROM-

T-343 P0004

F-351

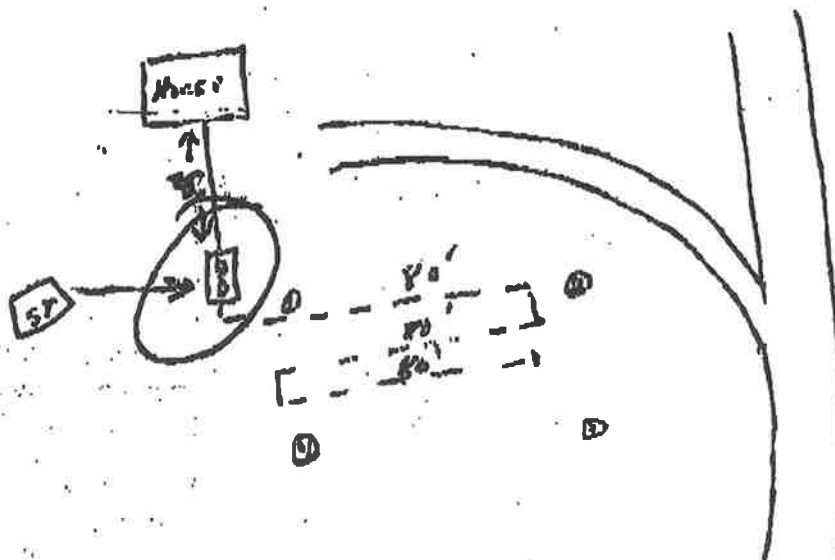
Type of Water Supply WELL TO H.A. Sq. Ft. 20.6 Acres
 Size of Lot: 20.6 Sq. Ft.
 Area Suitable for Absorption Field RECEDES
 Six Foot Hole Free of Water or Solid Rock: ☒ YES ☐ NO
 Percolation Test Result
 Test Hole Number One 60 Minutes
 Test Hole Number Two 370 Minutes
 Test Hole Number Three 340 Minutes
 Test Hole Number Four 60 Minutes
 TOTAL 600 Minutes

Total divided by 24 (6 inches X 4 holes) = 25 average
 time for water to fall (soak) one inch. Percolation test done on 5-7-90
 using approved procedures outlined in the design standards. DATE

Signed: Donald W. [Signature]

PLOT LAYOUT - SKETCH

Draw sketch of proposed system - show property lines, water supply and other pertinent factors.



Symbols



House



Water Supply



Time



Septic Tank

Soil Absorption Line

Direction of Ground Slope



Property Line

Percolation Test S



Mobile Home

HEALTH DEPARTMENT USE

Date Application Received 5-9-90
 Date Site Evaluated 5-14-90
 Permit Number 5-14-90-243
 Permit Denied Denial
 Sanitarian Denial

(See Attached Letter)