



Hampshire County Health Department
HC 71, Box 9
Augusta, WV 26704
(304) 496-9640 Fax: (304) 496-9650

November 04, 2004

Hampshire County Planning Commission
P. O. Box 883
Romney, WV 26757

Dear Sirs;

This office has reviewed a plat of survey for Latonja Bartley to create lot 15 located at Cacapon View Subdivision, and further referenced as Tax Map 25, Parcel 37, Deed book 308, Page 686. This lot consists of 14.01 acres. All lots require a percolation test and a sewage disposal area of 10,000 square feet where no development or structures other than the septic system shall be permitted. This lot is to be developed with an individual well and septic to serve a single family dwelling.

Percolation test results are within limits as set forth by West Virginia CSR 16-1. Six foot soil observation holes indicate no restrictions due to water table or shallow bedrock within the designated sewage disposal area **except as noted on the Health Department subdivision application.**

The plat of survey dated November 04, 2004 is hereby approved by the Hampshire County Health Department. Any changes or revisions to the Health Department stamped and signed plat, or subsequent final plats approved based upon the approved plat, will make this approval null and void.

This approval is not a permit for individual water systems or individual sewer systems. Applications for permits must be made separately to the Hampshire County Health Department.

Sincerely,

Jim Kinder R.S.

cc: Latonja Bartley

FOR

PERCOLATION AND SIX FOOT HOLE TESTING

Lot #15-

Subdivision Name Caspar View County Hampshire

Total Number of Lots 1 Name of Applicant LATONIA BARTLEY

Name of Certified Installer Responsible for Testing Jeffrey G. Miller

Installer Certification No. 05489-222 Installer Signature [Signature]

[illegible]

(Attach additional pages if needed)

WEST VIRGINIA
SUBDIVISION APPROVAL APPLICATION FORM
Hampshire Co. HEALTH DEPARTMENT

Cacapon View
Lot # 15

I. GENERAL INFORMATION		
Name of Applicant <u>LATONJA BARTLEY</u>	County <u>Hampshire</u>	
Mailing Address <u>302 E. BRUNSWICK ST. Sterling VA 20164</u>	Phone <u>703-450-1815</u>	
Property Owner <u>SAME</u>	Address _____	
Deed Recorded in Book <u>308</u> Page <u>686</u>	County of <u>Hampshire</u>	
Location of Property (be specific - map may be attached) <u>Rt 50 E to 29 N to SLANESVILLE left on Springfield Grade Rd. 2 mile rt on Spring Gap Mtn Rd. 4 miles left on Ed Kidwell Rd. 1 mile sub Entrance on rt follow to last lot on rt before Cul-de-Sac.</u>		
<u>Tax MAP # 25 Parcel No. 37</u>		
Total Acreage of Tract <u>14.01</u>	Total Acreage to be Developed <u>14.01</u>	
Number of Lots to be Developed <u>1</u>	Drinking Water Source <u>Well</u>	
Type of Structures to be Constructed <u>Residential</u>		
Have any previous subdivision approvals or declaratory rulings been issued on this tract or adjacent tracts? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
(If yes, give details) _____		
Signature of Applicant <u>[Signature]</u> Date <u>10-14-04</u>		
II. CHECK LIST		
Four (4) copies each of the following must accompany this application form.		
<input type="checkbox"/> Plat plan of property (show lot layout, lot dimensions, lot numbers, streets, location of percolation test holes and six foot test holes, location of wells and public water lines, location of 10,000 square foot reserve area).		
<input checked="" type="checkbox"/> Percolation tests and six foot hole tests report sheet.		
<input type="checkbox"/> Soil Conservation Service report (contact your local SCS office).		
*In addition, a site visit of the proposed subdivision must be made by the appropriate Health Department representative prior to permit issuance.		
III. FOR HEALTH DEPARTMENT USE ONLY		
Approval Issued <input checked="" type="checkbox"/>	Denied <input type="checkbox"/>	Date <u>11-18-04</u>
By <u>J. Kunder</u>		Approval Number _____

MAP 25 parcel 37

Rec. 10-29-04
Receipt # 8923 Rec. 2 not time
11-15-04

Application is for a permit to:

SEWAGE DISPOSAL SYSTEM INFORMATION

Check all that apply:

- ☒ Install ☐ Modify
☒ Septic tank ☒ Absorption Field ☐ Holding tank ☐ Pit Privy ☐ Vault Privy
☐ Alternate System (attach detailed plans) ☐ Chemical/Composting toilet ☐ Other:

Septic Tank: Capacity (gallons) 1000 Material Plastic Manufacturer Inf. H. Vator
Absorption Field: Equivalent to 1200 sq. ft. of conventional gravel trench system.

Trench System: No. of lines 3 Lengths 80, 80, 80 ft. Pipe ASTM No. _____
Gravel Trench Width _____ inches; or Gravelless pipe Diameter _____ inches.

Chamber System: Manufacturer Inf. H. Vator No. of Chambers 60
Soil Absorption Bed (Requires oversizing of bottom surface area by 30%.)

If soil absorption bed: Length _____ feet by Width _____ feet Pipe ASTM No. _____
If Chamber system: Manufacturer _____ No. of Chambers _____

Distances in feet (to nearest) Septic tank to: Bldg. Foundation 20+ Property Line 20+ Water Supply 50+
Absorption field to: Bldg. Foundation 20+ Property Line 20+ Water Supply 100+

I hereby certify that the installer or modification of all parts of the sewage disposal system, including required material standards, will be done in compliance with applicable design standards issued by the Public Health Sanitation Division, Office of Environmental Health Services, and appropriate manufacturer's recommended procedures and practices.

Installer (Please print) Gary's Excavating Inc.
Business Address HC- 61 Box 221 Capon Bridge, WV 26711
Installer's Certification Number 54-A-99-0214
Dept. of Labor Contractor's License Number WV035678

Telephone 304-856-2124

Expiration Date 6/14/14
Expiration Date 6/19/13

Date: 4-30-13

Signature of Installer

SKETCH

Draw a sketch of the property showing existing or proposed well locations that would be within 200 feet of the proposed on-site sewage system, location of structures, and property line locations. Show all structures or facilities to be served by on-site sewage system on the lot or tract.

- ☐ House ☒ Water supply line ☐ Water Supply ☐ Trees (P) Percolation Test Site ☒ Septic Tank
----- Soil absorption line -> Direction of ground slope _____ Property line [MH] Mobile Home

Draw all existing and proposed Well locations within 200 feet Of proposed sewage location

