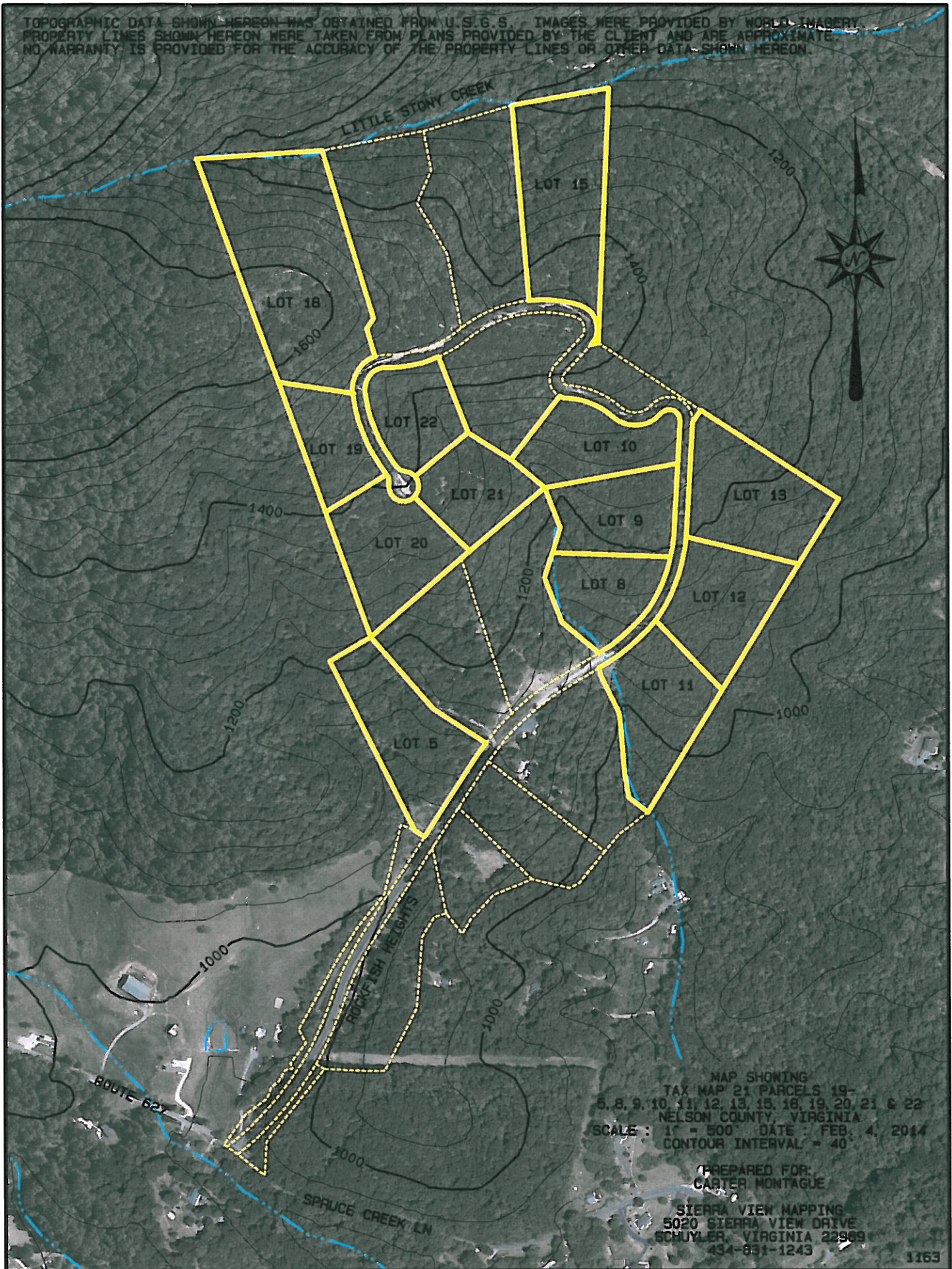


TOPOGRAPHIC DATA SHOWN HEREON WAS OBTAINED FROM U.S.G.S. IMAGES WERE PROVIDED BY WORLD IMAGERY.
PROPERTY LINES SHOWN HEREON WERE TAKEN FROM PLANS PROVIDED BY THE CLIENT AND ARE APPROXIMATE.
NO WARRANTY IS PROVIDED FOR THE ACCURACY OF THE PROPERTY LINES OR OTHER DATA SHOWN HEREON.



MAP SHOWING
TAX MAP 21 PARCELS 19-
5, 8, 9, 10, 11, 12, 13, 15, 18, 19, 20, 21 & 22
NELSON COUNTY, VIRGINIA
SCALE : 1" = 500' DATE : FEB. 4, 2014
CONTOUR INTERVAL = 40'

PREPARED FOR:
CARTER MONTAGUE

SIERRA VIEW MAPPING
5020 SIERRA VIEW DRIVE
SCHUYLER, VIRGINIA 22969
434-831-1243

Commonwealth of Virginia				VDH Use Only	
Application for: <input checked="" type="checkbox"/> Sewage System <input checked="" type="checkbox"/> Water Supply				Health Department ID# _____	
				Due Date: _____	
Owner:	Winter Wren Partnership LLC			Phone:	() -
Mailing Address:	1870 Virginia Avenue McLean, Virginia 22103			Phone:	() -
				Fax:	() -
Agent:	Jace Goodling			Phone:	(434) 531-6166
Mailing Address:	172 Englands Rock Road Afton, Virginia 22920			Phone:	() -
				Fax:	() -
Site Address:				Email:	
Directions to Property:		North of Rt. 627, 1.2 miles West of Rt. 151			
Subdivision:	Rockfish Heights	Section:	2	Block:	
Tax Map:	21-24	Other Property Identification:		Dimension/Acreage of Property:	9.876

Sewage System

Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) only when ready to build.

For New Construction: ☐ Certification Letter ☐ Construction Permit ☒ Subdivision Review
 For Existing Construction: ☐ Repair ☐ Modification ☐ Expansion ☐ Replacement

Proposed Use:

☒ Single Family Home (Number of Bedrooms 4) ☐ Multi-Family Dwelling (Total Number of Bedrooms)
☐ Other (describe)

Will there be a basement: ☒ Yes ☐ No If yes, will there be fixtures in the Basement? ☒ Yes ☐ No

Are any conditions proposed on this construction permit? ☐ Yes ☒ No If yes, please check or describe all proposed

Conditions that apply: ☐ Reduced Water Flow ☐ Limited Occupancy ☐ Intermittent or seasonal use
☐ Temporary use not to exceed 1 year ☐ Other (describe)

Water Supply

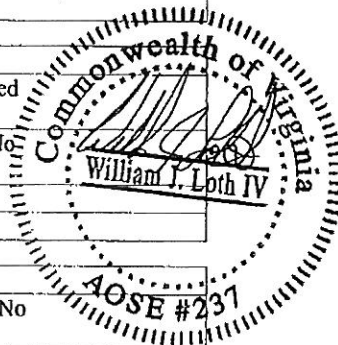
Will the water supply be ☐ Public or ☒ Private Is the Water supply ☐ Existing or ☒ Proposed

If proposed, is this a replacement well? ☐ Yes ☒ No Will the old well be abandoned ☐ Yes ☐ No

Have any buildings within 100' of the proposed well been termite treated? ☐ Yes ☒ No

All Applicants

Is this an AOSE/PE application? ☒ Yes ☐ No If yes, is the AOSE/PE package attached? ☒ Yes ☐ No



In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted 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 Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

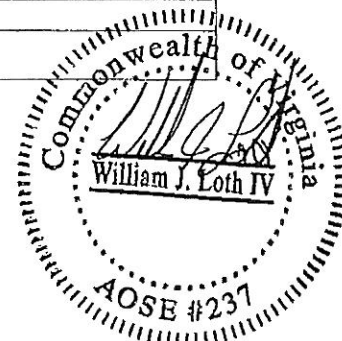
Signature of Owner/Agent _____ Date _____

Soil Summary Report

General Information	
Date: 5/25/07	Submitted to Nelson County Health Department
Applicant: Jace Goodling	Telephone: (434) 531-6166
Address: 172 Engle Rock Road, Afton, Virginia 22920	
Owner: Winter Wren Partnership LLC	Address: 1870 Virginia Avenue, McLean, Virginia 22103
Location: North of Rt. 627, 1.2 miles West of Rt. 151	
Tax Map: 21-24	Subdivision: Rockfish Heights
Block/Section: 2	Lot: 18

Soil Information Summary	
1. Position in landscape satisfactory? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Describe: shoulder	
2. Slope 22 (max) %	
3. Depth to Rock or impervious strata:	Max. 48 in. Min. 45 in.
4. Depth to seasonal water table (gray mottling or gray color):	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Inches
5. Free water present: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> range in inches -	
6. Soil percolation rate estimated?	Yes <input checked="" type="checkbox"/> Texture Group I <input type="checkbox"/> II <input type="checkbox"/> III <input checked="" type="checkbox"/> IV <input type="checkbox"/>
	No <input type="checkbox"/> Estimated rate 60 min/inch
7. Permeability test performed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<input checked="" type="checkbox"/> Site Approved	Drainfield to be placed at 12" depth at site designated on plat and utilizing a pretreatment unit with current general approval from VDH capable of providing Secondary Effluent to the drainfield in accordance with 12 VAC 5-610-594 and 12 VAC 5-610-596, and drip dispersal. Drip dispersal design and installation shall adhere to the requirements of GMP #107.
<input type="checkbox"/> Site Disapproved	
Reason for Rejection	
1. <input type="checkbox"/>	Position in landscape subject to flooding or periodic saturation
2. <input type="checkbox"/>	Insufficient depth of suitable soil over hard rock
3. <input type="checkbox"/>	Insufficient depth of suitable soil to seasonal water table
4. <input type="checkbox"/>	Rates of absorption too slow.
5. <input type="checkbox"/>	Insufficient area of acceptable soil for required drainfield, and or reserve area
6. <input type="checkbox"/>	Proposed system too close to well
7. <input type="checkbox"/>	Other Specify
If yes, note type of test performed and attach	



Rockfish Heights, Lot 18
Nelson County

Soil Profile

Pits	Horizon	Depth (in)	Material Description	Soil Texture Group
1	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	BC	2-48	10yr5/6 yellowish brown Clay Loam and weathered granodiorite fragments	3
2	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	BwC	2-45	7.5yr4/6 strong brown Clay Loam and weathered granodiorite fragments	3
3	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	BA	3-14	7.5yr4/4 brown Clay Loam and common weathered granodiorite fragments	3
	BtC	14-48	10yr5/8 yellowish brown Clay Loam and common weathered granodiorite fragments	3

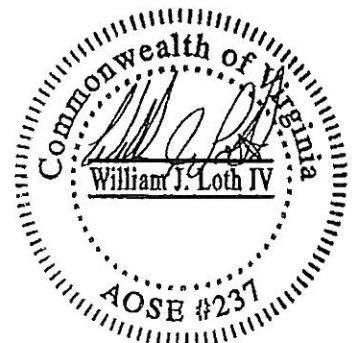
Note: Low chroma colors listed above are mineral in nature and not indicative of redoximorphic conditions.

Design Basis

- A. Estimated Percolation Rate 60 @ 12 in.
- B. Area in square feet Required per bedroom 325 (LPD)
- C. Number of bedrooms 4

Area Calculations for Drip Dispersal

- A. Length of run (ft.) 70
- B. Length of available area (ft.) 75
- C. Width of available area (ft.) 105+
- H. Total footprint required for drip dispersal 3900
(325ft² x 4 bedrooms x 3, as per GMP 107)
- I. Square footage provided 7875
- J. Is a reserve area required? Yes, 100% reserve provided



Certification Statement

County: Nelson

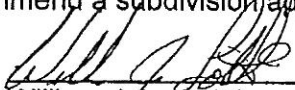
Date: July 19, 2007

Property Identification: Rockfish Heights
Lot 18

Submitted by: William J. Loth, IV, AOSE #237
Afton Soil Consulting, LLC
222 Sycamore Lane
Afton, Virginia 22920
(540) 456-6087

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 subdivision approval¹ be approved².

AOSE

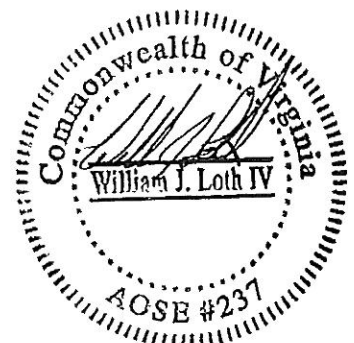


William J. Loth, IV

Date: July 19, 2007

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		VDH Use Only Health Department ID# _____ Due Date: _____	
Application for: <input checked="" type="checkbox"/> Sewage System <input checked="" type="checkbox"/> Water Supply			
Owner:	Winter Wren Partnership LLC	Phone:	() -
Mailing Address:	1870 Virginia Avenue McLean, Virginia 22103	Phone:	() -
Agent:	Jace Goodling	Fax:	() -
Mailing Address:	172 Englands Rock Road Afton, Virginia 22920	Phone:	(434) 531-6166
Site Address:		Phone:	() -
		Fax:	() -
		Email:	
Directions to Property: North of Rt. 627, 1.2 miles West of Rt. 151			
Subdivision:	Rockfish Heights	Section:	2
Tax Map:	21-24	Block:	
Other Property Identification:		Lot:	19
Dimension/Acreage of Property:		2.702	

Sewage System			
Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) only when ready to build.			
For New Construction:	<input type="checkbox"/> Certification Letter	<input type="checkbox"/> Construction Permit	<input checked="" type="checkbox"/> Subdivision Review
For Existing Construction:	<input type="checkbox"/> Repair	<input type="checkbox"/> Modification	<input type="checkbox"/> Expansion
<input type="checkbox"/> Replacement			
Proposed Use:			
<input checked="" type="checkbox"/> Single Family Home (Number of Bedrooms 4)		<input type="checkbox"/> Multi-Family Dwelling (Total Number of Bedrooms)	
<input type="checkbox"/> Other (describe)			
Will there be a basement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, will there be fixtures in the Basement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Are any conditions proposed on this construction permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please check or describe all proposed			
Conditions that apply: <input type="checkbox"/> Reduced Water Flow <input type="checkbox"/> Limited Occupancy <input type="checkbox"/> Intermittent or seasonal use			
<input type="checkbox"/> Temporary use not to exceed 1 year <input type="checkbox"/> Other (describe)			

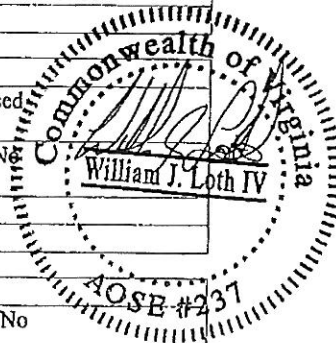
Water Supply	
Will the water supply be <input type="checkbox"/> Public or <input checked="" type="checkbox"/> Private	Is the Water supply <input type="checkbox"/> Existing or <input checked="" type="checkbox"/> Proposed
If proposed, is this a replacement well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Will the old well be abandoned <input type="checkbox"/> Yes <input type="checkbox"/> No
Have any buildings within 100' of the proposed well been termite treated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

All Applicants	
Is this an AOSE/PE application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is the AOSE/PE package attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted 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 Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

Signature of Owner/Agent _____ Date _____

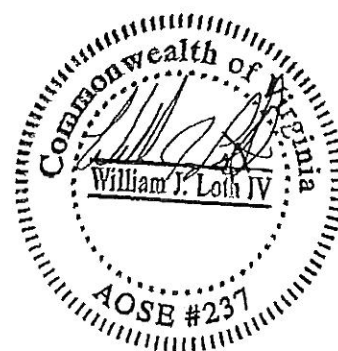


Soil Summary Report

General Information	
Date: 5/25/07	Submitted to Nelson County Health Department
Applicant: Jace Goodling	Telephone: (434) 531-6166
Address: 172 Englands Rock Road, Afton, Virginia 22920	
Owner: Winter Wren Partnership LLC	Address: 1870 Virginia Avenue, McLean, Virginia 22103
Location: North of Rt. 627, 1.2 miles West of Rt. 151	
Tax Map: 21-24	Subdivision: Rockfish Heights
Block/Section: 2	Lot: 19

Soil Information Summary	
1. Position in landscape satisfactory? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Describe: sideslope	
2. Slope 24 %	
3. Depth to Rock or impervious strata:	Max. 48+ in. Min. 46 in.
4. Depth to seasonal water table (gray mottling or gray color):	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Inches
5. Free water present: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> range in inches -	
6. Soil percolation rate estimated?	Yes <input checked="" type="checkbox"/> Texture Group I <input type="checkbox"/> II <input type="checkbox"/> III <input checked="" type="checkbox"/> IV <input type="checkbox"/>
	No <input type="checkbox"/> Estimated rate 59 min/inch
7. Permeability test performed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<input checked="" type="checkbox"/> Site Approved	Drainfield to be placed at 28" depth at site designated on plat
<input type="checkbox"/> Site Disapproved	
Reason for Rejection	
1. <input type="checkbox"/>	Position in landscape subject to flooding or periodic saturation
2. <input type="checkbox"/>	Insufficient depth of suitable soil over hard rock
3. <input type="checkbox"/>	Insufficient depth of suitable soil to seasonal water table
4. <input type="checkbox"/>	Rates of absorption too slow.
5. <input type="checkbox"/>	Insufficient area of acceptable soil for required drainfield, and or reserve area
6. <input type="checkbox"/>	Proposed system too close to well
7. <input type="checkbox"/>	Other Specify
If yes, note type of test performed and attach	



Soil Profile

Pits	Horizon	Depth (in)	Material Description	Soil Texture Group
1	Ap	0-1	10yr3/2 very dark grayish brown Loam	2
	E	1-10	10yr6/4 light yellowish brown Silt Loam	3
	BtC	10-46	5yr5/8 yellowish red Clay Loam with common very highly weathered granodiorite fragments	3
	R	46	Became firm	
2	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	E	2-15	10yr6/3 pale brown Silt Loam	3
	BtC	15-48	7.5yr5/8 strong brown Clay Loam with common very highly weathered granodiorite fragments	3
3	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	E	3-20	10yr6/3 pale brown Silt Loam with common weathered granodiorite fragments	3
	BC	20-48	5yr5/8 yellowish red Clay Loam with common very highly weathered granodiorite fragments and common soft granodiorite saprolite (10yr2/1 black, 10yr8/1 white Sandy Loam)	3

Note: Low chroma colors listed above are mineral in nature and not indicative of redoximorphic conditions.

Design Basis

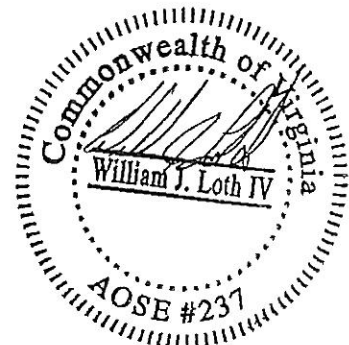
- A. Estimated Percolation Rate 59 @ 28 in.
- B. Trench bottom square feet 450 (Traditional) and 325 (LPD)
Required per bedroom
- C. Number of bedrooms 4

Area Calculations for Primary Drainfield (Traditional Septic Tank and Trenches)

- A. Length of trench (ft.) 100
- B. Length of available area (ft.) 100
- C. Width of trench (ft.) 3
- D. Number of trenches 6
- E. Center-to-center spacing (ft.) 11
- F. Width required (ft.) 58
- G. Width of available area (ft.) 105 minimum (includes 100% Reserve Area)
- H. Total square footage required 1800
- I. Square footage in design 1800
- J. Is a reserve area required? Yes, 100% Reserve Area provided

Area Calculations for Reserve Area (Drip Dispersal)

- A. Length of run (ft.) 100
- B. Length of available area (ft.) 100
- C. Width of available area (ft.) 47 (minimum)
- D. Total footprint required for drip dispersal 3900
(325ft² x 4 bedrooms x 3, as per GMP 107)
- E. Square footage provided 4700



Certification Statement

County: Nelson

Date: July 19, 2007

Property Identification: Rockfish Heights
Lot 19

Submitted by: William J. Loth, IV, AOSE #237
Afton Soil Consulting, LLC
222 Sycamore Lane
Afton, Virginia 22920
(540) 456-6087

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 subdivision approval¹ be approved².

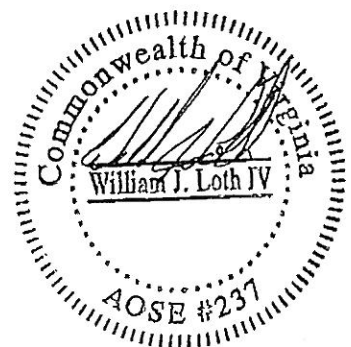
AOSE


William J. Loth, IV

Date: July 19, 2007

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

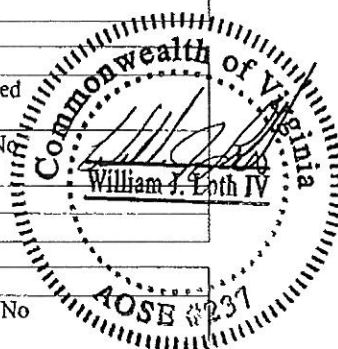


Commonwealth of Virginia		VDH Use Only Health Department ID# _____ Due Date: _____	
Application for: <input checked="" type="checkbox"/> Sewage System <input checked="" type="checkbox"/> Water Supply			
Owner:	Winter Wren Partnership LLC	Phone:	() -
Mailing Address:	1870 Virginia Avenue McLean, Virginia 22103	Phone:	() -
Agent:	Jace Goodling	Fax:	() -
Mailing Address:	172 Englands Rock Road Afton, Virginia 22920	Phone:	(434) 531-6166
Site Address:		Phone:	() -
		Fax:	() -
		Email:	
Directions to Property:		North of Rt. 627, 1.2 miles West of Rt. 151	
Subdivision:	Rockfish Heights	Section:	2
Tax Map:	21-24	Block:	
Other Property Identification:		Lot:	20
Dimension/Acreage of Property:		4.340	

Sewage System			
Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) only when ready to build.			
For New Construction:	<input type="checkbox"/> Certification Letter	<input type="checkbox"/> Construction Permit	<input checked="" type="checkbox"/> Subdivision Review
For Existing Construction:	<input type="checkbox"/> Repair	<input type="checkbox"/> Modification	<input type="checkbox"/> Expansion
<input type="checkbox"/> Replacement			
Proposed Use:			
<input checked="" type="checkbox"/> Single Family Home (Number of Bedrooms 3)		<input type="checkbox"/> Multi-Family Dwelling (Total Number of Bedrooms)	
<input type="checkbox"/> Other (describe)			
Will there be a basement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, will there be fixtures in the Basement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Are any conditions proposed on this construction permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please check or describe all proposed			
Conditions that apply: <input type="checkbox"/> Reduced Water Flow <input type="checkbox"/> Limited Occupancy <input type="checkbox"/> Intermittent or seasonal use			
<input type="checkbox"/> Temporary use not to exceed 1 year <input type="checkbox"/> Other (describe)			

Water Supply	
Will the water supply be <input type="checkbox"/> Public or <input checked="" type="checkbox"/> Private	Is the Water supply <input type="checkbox"/> Existing or <input checked="" type="checkbox"/> Proposed
If proposed, is this a replacement well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Will the old well be abandoned <input type="checkbox"/> Yes <input type="checkbox"/> No
Have any buildings within 100' of the proposed well been termite treated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

All Applicants	
Is this an AOSE/PE application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is the AOSE/PE package attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted 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 Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

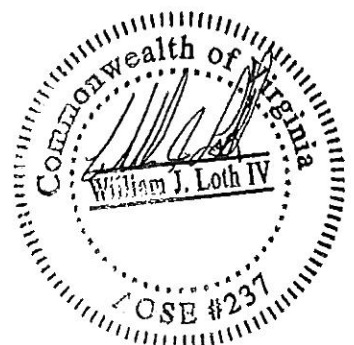
Signature of Owner/Agent _____ Date _____

Soil Summary Report

General Information	
Date: 5/29/07	Submitted to Nelson County Health Department
Applicant: Jace Goodling	Telephone: (434) 531-6166
Address: 172 Englande Rock Road, Afton, Virginia 22920	
Owner: Winter Wren Partnership LLC	Address: 1870 Virginia Avenue, McLean, Virginia 22103
Location: North of Rt. 627, 1.2 miles West of Rt. 151	
Tax Map: 21-24	Subdivision: Rockfish Heights
Block/Section: 2	Lot: 20

Soil Information Summary	
1. Position in landscape satisfactory? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Describe: sideslope	
2. Slope 19 %	
3. Depth to Rock or impervious strata:	Max. 60 in. Min. 48 in.
4. Depth to seasonal water table (gray mottling or gray color):	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Inches
5. Free water present: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> range in inches -	
6. Soil percolation rate estimated?	Yes <input checked="" type="checkbox"/> Texture Group I <input type="checkbox"/> II <input type="checkbox"/> III <input checked="" type="checkbox"/> IV <input type="checkbox"/>
	No <input type="checkbox"/> Estimated rate 65 min/inch
7. Permeability test performed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<input checked="" type="checkbox"/> Site Approved	Drainfield to be placed at 24" depth at site designated on plat
<input type="checkbox"/> Site Disapproved	
Reason for Rejection	
1. <input type="checkbox"/>	Position in landscape subject to flooding or periodic saturation
2. <input type="checkbox"/>	Insufficient depth of suitable soil over hard rock
3. <input type="checkbox"/>	Insufficient depth of suitable soil to seasonal water table
4. <input type="checkbox"/>	Rates of absorption too slow.
5. <input type="checkbox"/>	Insufficient area of acceptable soil for required drainfield, and or reserve area
6. <input type="checkbox"/>	Proposed system too close to well
7. <input type="checkbox"/>	Other Specify
If yes, note type of test performed and attach	



Rockfish Heights, Lot 20
Nelson County

Soil Profile

Pits	Horizon	Depth (in)	Material Description	Soil Texture Group
1	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	E	3-13	10yr6/3 pale brown Silt Loam	3
	BtC	13-48	2.5yr4/8 red Clay Loam with common soft granodiorite saprolite (10yr2/1 black, 10yr5/4 brown Fine Sandy Loam)	3
2	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	E	3-24	10yr6/4 light yellowish brown Silt Loam	3
	BtC	24-60	5yr5/8 yellowish red Clay Loam with common soft granodiorite saprolite (10yr6/8 brownish yellow, 10yr3/2 light gray Sandy Loam)	3
3	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	E	2-17	10yr7/3 very pale brown Silt Loam	3
	BtC	17-54	7.5yr5/6 strong brown Clay Loam and many weathered granodiorite fragments	3

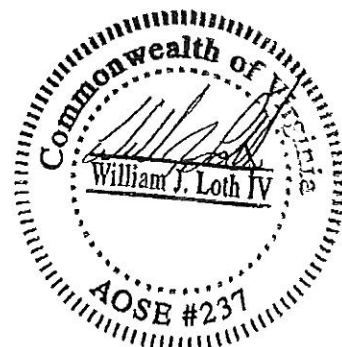
Note: Low chroma colors listed above are mineral in nature and not indicative of redoximorphic conditions.

Design Basis

- A. Estimated Percolation Rate 65 @ 24 in.
- B. Trench bottom square feet 496
Required per bedroom
- C. Number of bedrooms 3

Area Calculations for Primary Drainfield (Traditional Septic Tank and Trenches)

- A. Length of trench (ft.) 100
- B. Length of available area (ft.) 100
- C. Width of trench (ft.) 3
- D. Number of trenches 5
- E. Center-to-center spacing (ft.) 10
- F. Width required (ft.) 43
- G. Width of available area (ft.) 103 minimum (includes 100% Reserve Area)
- H. Total square footage required 1488
- I. Square footage in design 1500
- J. Is a reserve area required? Yes, 100% Reserve Area provided



Certification Statement

County: Nelson

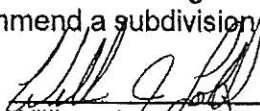
Date: July 19, 2007

Property Identification: Rockfish Heights
Lot 20

Submitted by: William J. Loth, IV, AOSE #237
Afton Soil Consulting, LLC
222 Sycamore Lane
Afton, Virginia 22920
(540) 456-6087

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 subdivision approval¹ be approved².

AOSE

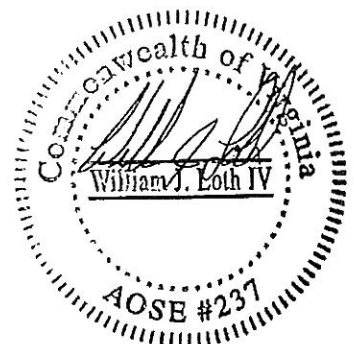


William J. Loth, IV

Date: July 19, 2007

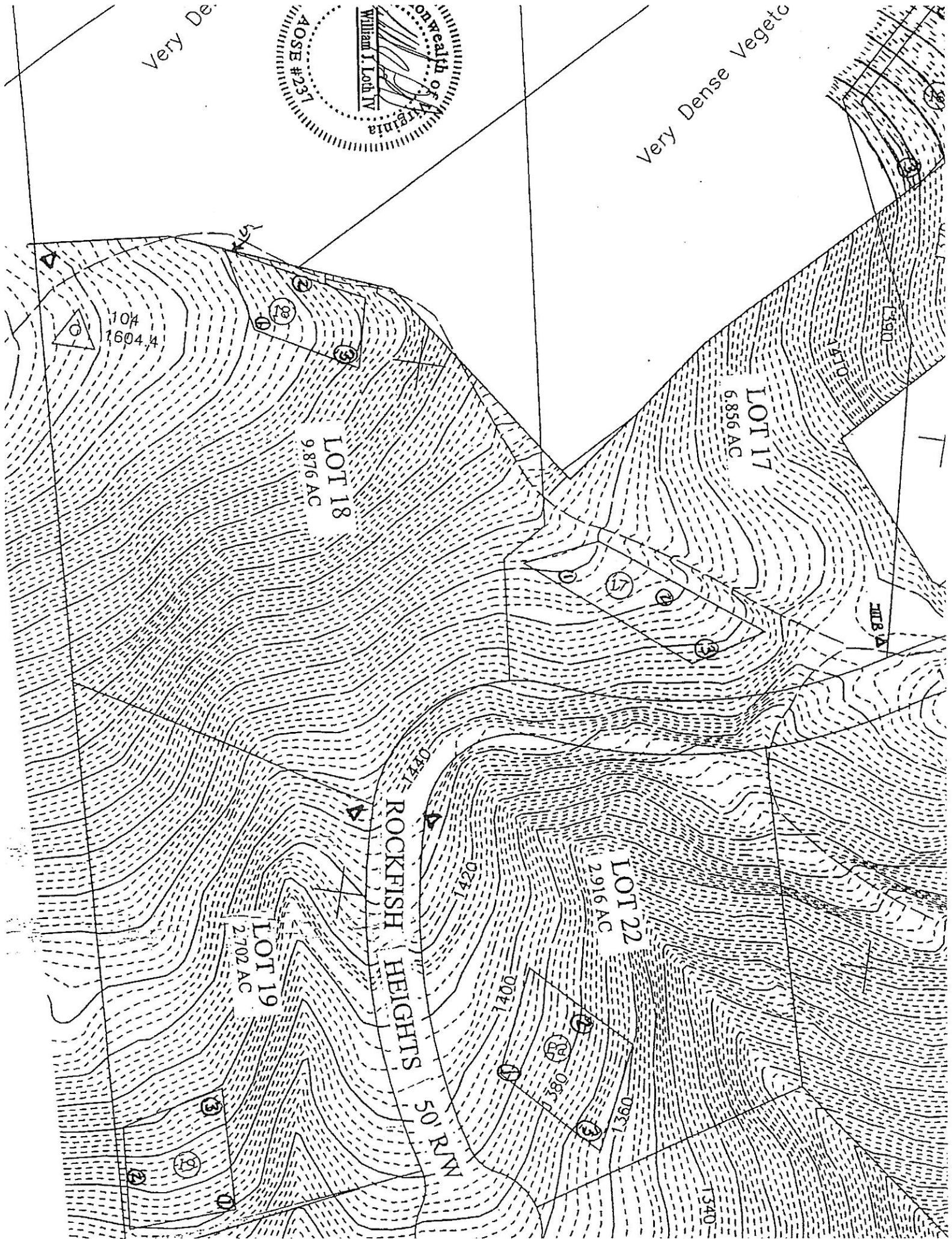
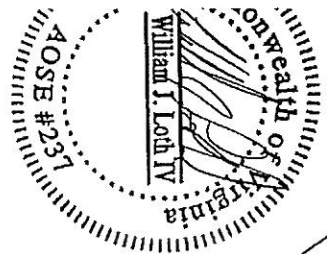
¹ This blank must be filled in with one of the following terms: 'permit', 'certification letter', or 'subdivision approval'.

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



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104
1604.4

LOT 18
9.876 AC

LOT 17
6.856 AC

LOT 19
2.702 AC

LOT 22
2.916 AC

ROCKFISH HEIGHTS

50' R/W

LOT 17
0.856 AC

LOT 18
9.876 AC

LOT 19
2.702 AC

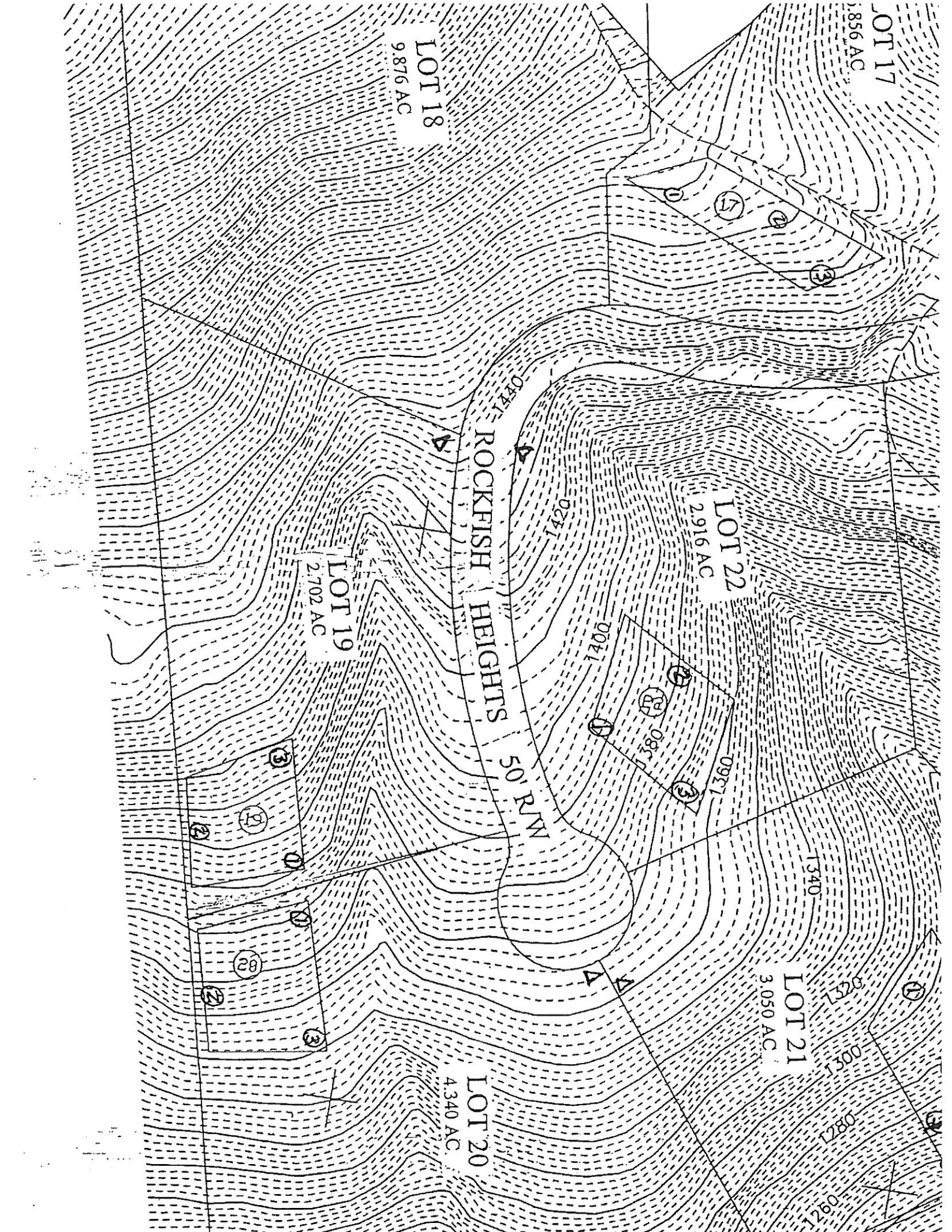
LOT 22
2.916 AC

LOT 21
3.050 AC

LOT 20
4.340 AC

ROCKFISH HEIGHTS

50' R/W



Commonwealth of Virginia

 Application for: ☒ Sewage System ☒ Water Supply

VDH Use Only

Health Department ID# _____

Due Date: _____

Owner:	Winter Wren Partnership LLC	Phone:	() -
Mailing Address:	1870 Virginia Avenue McLean, Virginia 22103	Phone:	() -
Agent:	Jace Goodling	Fax:	() -
Mailing Address:	172 Englands Rock Road Afton, Virginia 22920	Phone:	(434) 531-6166
Site Address:		Fax:	() -
		Email:	
Directions to Property:		North of Rt. 627, 1.2 miles West of Rt. 151	
Subdivision:	Rockfish Heights	Section:	2
Tax Map:	21-24	Block:	
Other Property Identification:		Lot:	21
		Dimension/Acreage of Property:	3.050

Sewage System

Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) only when ready to build.

 For New Construction: ☐ Certification Letter ☐ Construction Permit ☒ Subdivision Review
 For Existing Construction: ☐ Repair ☐ Modification ☐ Expansion ☐ Replacement

Proposed Use:

☒ Single Family Home (Number of Bedrooms 4) ☐ Multi-Family Dwelling (Total Number of Bedrooms)
☐ Other (describe)

 Will there be a basement: ☒ Yes ☐ No If yes, will there be fixtures in the Basement? ☒ Yes ☐ No

 Are any conditions proposed on this construction permit? ☐ Yes ☒ No If yes, please check or describe all proposed
 Conditions that apply: ☐ Reduced Water Flow ☐ Limited Occupancy ☐ Intermittent or seasonal use
☐ Temporary use not to exceed 1 year ☐ Other (describe)

Water Supply

 Will the water supply be ☐ Public or ☒ Private Is the Water supply ☐ Existing or ☒ Proposed
 If proposed, is this a replacement well? ☐ Yes ☒ No Will the old well be abandoned ☐ Yes ☐ No
 Have any buildings within 100' of the proposed well been termite treated? ☐ Yes ☒ No

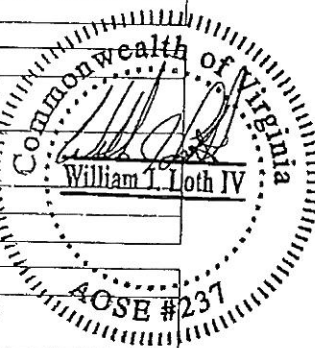
All Applicants

 Is this an AOSE/PE application? ☒ Yes ☐ No If yes, is the AOSE/PE package attached? ☒ Yes ☐ No

In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted 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 Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

Signature of Owner/Agent _____ Date _____

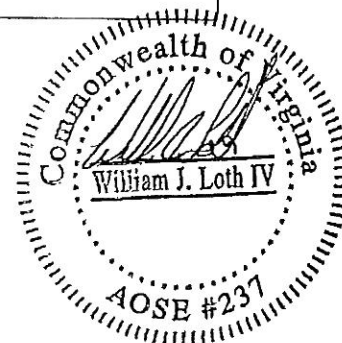


Soil Summary Report for Primary Drainfield

General Information	
Date: 5/29/07	Submitted to Nelson County Health Department
Applicant: Jace Goodling	Telephone: (434) 531-6166
Address: 172 Englands Rock Road, Afton, Virginia 22920	
Owner: Winter Wren Partnership LLC	Address: 1870 Virginia Avenue, McLean, Virginia 22103
Location: North of Rt. 627, 1.2 miles West of Rt. 151	
Tax Map: 21-24	Subdivision: Rockfish Heights
Block/Section: 2	Lot: 21

Soil Information Summary	
1. Position in landscape satisfactory? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Describe: sideslope	
2. Slope 33 %	
3. Depth to Rock or impervious strata:	Max. in. Min. 54+ in.
4. Depth to seasonal water table (gray mottling or gray color):	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Inches
5. Free water present: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> range in inches -	
6. Soil percolation rate estimated?	Yes <input checked="" type="checkbox"/> Texture Group I <input type="checkbox"/> II <input type="checkbox"/> III <input checked="" type="checkbox"/> IV <input type="checkbox"/>
	No <input type="checkbox"/> Estimated rate 59 min/inch
7. Permeability test performed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<input checked="" type="checkbox"/> Site Approved	Drainfield to be placed at 30" depth at site designated on plat
<input type="checkbox"/> Site Disapproved	
Reason for Rejection	
1. <input type="checkbox"/>	Position in landscape subject to flooding or periodic saturation
2. <input type="checkbox"/>	Insufficient depth of suitable soil over hard rock
3. <input type="checkbox"/>	Insufficient depth of suitable soil to seasonal water table
4. <input type="checkbox"/>	Rates of absorption too slow.
5. <input type="checkbox"/>	Insufficient area of acceptable soil for required drainfield, and or reserve area
6. <input type="checkbox"/>	Proposed system too close to well
7. <input type="checkbox"/>	Other Specify
If yes, note type of test performed and attach	

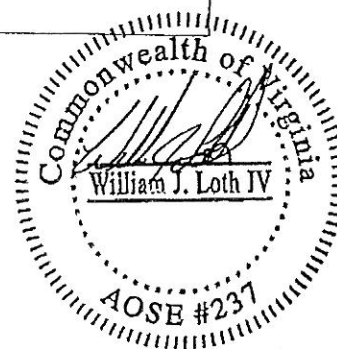


Soil Summary Report for Reserve Drainfield

General Information	
Date: 5/29/07	Submitted to Nelson County Health Department
Applicant: Jace Goodling	Telephone: (434) 531-6166
Address: 172 Englande Rock Road, Afton, Virginia 22920	
Owner: Winter Wren Partnership LLC	Address: 1870 Virginia Avenue, McLean, Virginia 22103
Location: North of Rt. 627, 1.2 miles West of Rt. 151	
Tax Map: 21-24	Subdivision: Rockfish Heights
Block/Section: 2	Lot: 21

Soil Information Summary	
1. Position in landscape satisfactory? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Describe: sideslope	
2. Slope 33 %	
3. Depth to Rock or impervious strata:	Max. 54+ in. Min. 32 in.
4. Depth to seasonal water table (gray mottling or gray color):	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Inches
5. Free water present: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> range in inches -	
6. Soil percolation rate estimated?	Yes <input checked="" type="checkbox"/> Texture Group I <input type="checkbox"/> II <input type="checkbox"/> III <input checked="" type="checkbox"/> IV <input type="checkbox"/>
	No <input type="checkbox"/> Estimated rate 59 min/inch
7. Permeability test performed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<input checked="" type="checkbox"/> Site Approved	Drainfield to be placed at 12" depth at site designated on plat and utilizing a pretreatment unit with current general approval from VDH capable of providing Secondary Effluent to the drainfield in accordance with 12 VAC 5-610-594 and 12 VAC 5-610-596, and drip dispersal. Drip dispersal design and installation shall adhere to the requirements of GMP #107.
<input type="checkbox"/> Site Disapproved	
Reason for Rejection	
1. <input type="checkbox"/>	Position in landscape subject to flooding or periodic saturation
2. <input type="checkbox"/>	Insufficient depth of suitable soil over hard rock
3. <input type="checkbox"/>	Insufficient depth of suitable soil to seasonal water table
4. <input type="checkbox"/>	Rates of absorption too slow.
5. <input type="checkbox"/>	Insufficient area of acceptable soil for required drainfield, and or reserve area
6. <input type="checkbox"/>	Proposed system too close to well
7. <input type="checkbox"/>	Other Specify
If yes, note type of test performed and attach	

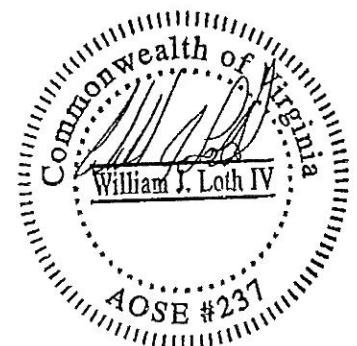


Rockfish Heights, Lot 21
Nelson County

Soil Profile

Pits	Horizon	Depth (in)	Material Description	Soil Texture Group
1	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	E	2-10	10yr6/3 pale brown Silt Loam	3
	BtC	10-42	5yr4/6 yellowish red Clay Loam with common weathered granodiorite fragments and common soft granodiorite saprolite (10yr2/1 black, 10yr8/1 white Sandy Loam)	3
2	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	E	3-12	10yr6/3 pale brown Silt Loam	3
	BtC	12-32	7.5yr5/8 strong brown Clay Loam with common weathered granodiorite fragments	3
3	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	E	2-18	10yr6/4 light yellowish brown Silt Loam	3
	BtC	18-54	2.5yr5/8 yellowish red Clay Loam with common soft granodiorite saprolite (10yr6/6 brownish yellow Sandy Loam and coarse quartz sand)	3
4	Ap	0-4	10yr3/2 very dark grayish brown Loam	2
	E	4-14	10yr6/3 pale brown Silt Loam	3
	BtC	14-54	2.5yr4/8 red Clay Loam with very few very highly weathered granodiorite fragments	3
5	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	E	2-21	10yr6/3 pale brown Silt Loam	3
	BtC	21-54	5ry5/8 yellowish red Clay Loam with common highly weathered granodiorite fragments	3

Note: Low chroma colors listed above are mineral in nature and not indicative of redoximorphic conditions.



Rockfish Heights, Lot 21
Nelson County

Design Basis for Primary Drainfield (includes pits 3 – 5)

A. Estimated Percolation Rate	59 @ 30 in.
B. Trench bottom square feet Required per bedroom	450
C. Number of bedrooms	4

Area Calculations for Primary Drainfield

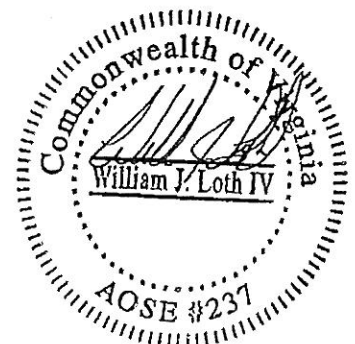
A. Length of trench (ft.)	100
B. Length of available area (ft.)	100
C. Width of trench (ft.)	3
D. Number of trenches	6
E. Center-to-center spacing (ft.)	11
F. Width required (ft.)	58
G. Width of available area (ft.)	70 (minimum)
H. Total square footage required	1800
I. Square footage in design	1800
J. Is a reserve area required?	Yes, 100% Reserve Area provided, see below

Design Basis for Reserve Drainfield (includes pits 1 – 3)

A. Estimated Percolation Rate	59 @ 12 in.
B. Area in square feet Required per bedroom	325 (LPD)
C. Number of bedrooms	4

Drip Dispersal Area Calculations for Reserve Drainfield

A. Length of run (ft.)	100
B. Length of available area (ft.)	100
C. Width of available area (ft.)	108
H. Total footprint required for drip dispersal (325 ft ² x 4 bedrooms x 3, as per GMP 107)	3900
I. Square footage provided	10800
J. Is a reserve area required?	Yes, this is a 100% reserve area



Certification Statement

County: Nelson

Date: July 19, 2007

Property Identification: Rockfish Heights
Lot 21

Submitted by: William J. Loth, IV, AOSE #237
Afton Soil Consulting, LLC
222 Sycamore Lane
Afton, Virginia 22920
(540) 456-6087

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 subdivision approval¹ be approved².

AOSE

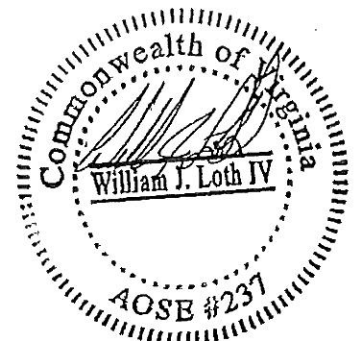


William J. Loth, IV

Date: July 19, 2007

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		VDH Use Only Health Department ID# _____ Due Date: _____	
Application for: <input checked="" type="checkbox"/> Sewage System <input checked="" type="checkbox"/> Water Supply			
Owner:	Winter Wren Partnership LLC	Phone:	() -
Mailing Address:	1870 Virginia Avenue McLean, Virginia 22103	Phone:	() -
Agent:	Jace Goodling	Fax:	() -
Mailing Address:	172 Englande Rock Road Afton, Virginia 22920	Phone:	(434) 531-6166
		Fax:	() -
Site Address:		Email:	
Directions to Property: North of Rt. 627, 1.2 miles West of Rt. 151			
Subdivision:	Rockfish Heights	Section:	2
Tax Map:	21-24	Block:	
Other Property Identification:		Lot:	22
		Dimension/Acreage of Property:	2.916

Sewage System			
Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) only when ready to build.			
For New Construction:	<input type="checkbox"/> Certification Letter	<input type="checkbox"/> Construction Permit	<input checked="" type="checkbox"/> Subdivision Review
For Existing Construction:	<input type="checkbox"/> Repair	<input type="checkbox"/> Modification	<input type="checkbox"/> Expansion
<input type="checkbox"/> Replacement			
Proposed Use:			
<input checked="" type="checkbox"/> Single Family Home (Number of Bedrooms 4)		<input type="checkbox"/> Multi-Family Dwelling (Total Number of Bedrooms)	
<input type="checkbox"/> Other (describe)			
Will there be a basement: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, will there be fixtures in the Basement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Are any conditions proposed on this construction permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please check or describe all proposed			
Conditions that apply: <input type="checkbox"/> Reduced Water Flow <input type="checkbox"/> Limited Occupancy <input type="checkbox"/> Intermittent or seasonal use			
<input type="checkbox"/> Temporary use not to exceed 1 year <input type="checkbox"/> Other (describe)			

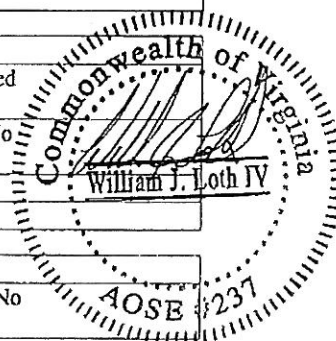
Water Supply	
Will the water supply be <input type="checkbox"/> Public or <input checked="" type="checkbox"/> Private	Is the Water supply <input type="checkbox"/> Existing or <input checked="" type="checkbox"/> Proposed
If proposed, is this a replacement well? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Will the old well be abandoned <input type="checkbox"/> Yes <input type="checkbox"/> No
Have any buildings within 100' of the proposed well been termite treated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

All Applicants	
Is this an AOSE/PE application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, is the AOSE/PE package attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted 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 Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.

Signature of Owner/Agent _____ Date _____

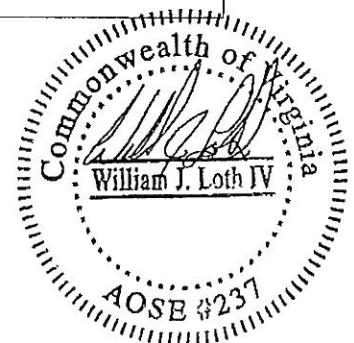


Soil Summary Report

General Information	
Date: 5/29/07	Submitted to Nelson County Health Department
Applicant: Jace Goodling	Telephone: (434) 531-6166
Address: 172 Englands Rock Road, Afton, Virginia 22920	
Owner: Winter Wren Partnership LLC	Address: 1870 Virginia Avenue, McLean, Virginia 22103
Location: North of Rt. 627, 1.2 miles West of Rt. 151	
Tax Map: 21-24	Subdivision: Rockfish Heights
Block/Section: 2	Lot: 22

Soil Information Summary	
1. Position in landscape satisfactory? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Describe: sideslope	
2. Slope 22 %	
3. Depth to Rock or impervious strata:	Max. in. Min. 54 in.
4. Depth to seasonal water table (gray mottling or gray color):	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Inches
5. Free water present: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> range in inches -	
6. Soil percolation rate estimated?	Yes <input checked="" type="checkbox"/> Texture Group I <input type="checkbox"/> II <input type="checkbox"/> III <input checked="" type="checkbox"/> IV <input type="checkbox"/>
	No <input type="checkbox"/> Estimated rate 65 min/inch
7. Permeability test performed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

<input checked="" type="checkbox"/> Site Approved	Drainfield to be placed at 30" depth at site designated on plat
<input type="checkbox"/> Site Disapproved	
Reason for Rejection	
1. <input type="checkbox"/>	Position in landscape subject to flooding or periodic saturation
2. <input type="checkbox"/>	Insufficient depth of suitable soil over hard rock
3. <input type="checkbox"/>	Insufficient depth of suitable soil to seasonal water table
4. <input type="checkbox"/>	Rates of absorption too slow.
5. <input type="checkbox"/>	Insufficient area of acceptable soil for required drainfield, and or reserve area
6. <input type="checkbox"/>	Proposed system too close to well
7. <input type="checkbox"/>	Other Specify
If yes, note type of test performed and attach	



Rockfish Heights, Lot 22
Nelson County

Soil Profile

Pits	Horizon	Depth (in)	Material Description	Soil Texture Group
1	Ap	0-2	10yr3/2 very dark grayish brown Loam	2
	E	2-18	10yr6/4 light yellowish brown Fine Sandy Loam	3
	BC	18-35	7.5yr5/4 brown Clay Loam with common very highly weathered granodiorite fragments	3
	C/B	35-55	Soft granodiorite saprolite (10yr8/1 white, 5y5/4 olive, 10yr2/1 black Fine Sandy Loam) with common thin 5yr5/8 yellowish red Clay Loam tongues	3
2	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	E	3-14	10yr7/3 very pale brown Silt Loam	3
	BtC	14-37	7.5yr4/4 brown Clay Loam with common weathered granodiorite fragments	3
	C/B	37-54	Weathered granodiorite fragments and soft granodiorite saprolite (10yr2/1 black, 10yr8/1 white Sandy Loam) with many 5yr4/6 yellowish red Clay Loam tongues	3
3	Ap	0-3	10yr3/2 very dark grayish brown Loam	2
	E	3-20	10yr6/4 light yellowish brown Silt Loam	3
	BtC	20-54	5yr5/4 reddish brown Clay Loam with common soft granodiorite saprolite (10yr8/1 white, 10yr2/1 black Sandy Loam)	3

Note: Low chroma colors listed above are mineral in nature and not indicative of redoximorphic conditions.

Design Basis

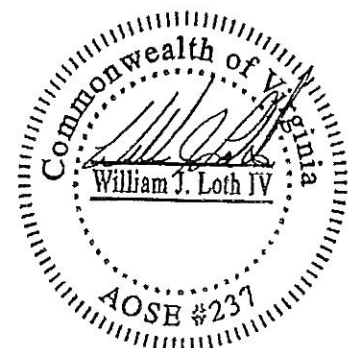
- A. Estimated Percolation Rate 65 @ 30 in.
 B. Trench bottom square feet 496 (Traditional) and 342 (LPD)
 Required per bedroom
 C. Number of bedrooms 4

Area Calculations for Primary Drainfield (Traditional Septic Tank and Trenches)

- A. Length of trench (ft.) 100
 B. Length of available area (ft.) 100
 C. Width of trench (ft.) 3
 D. Number of trenches 7
 E. Center-to-center spacing (ft.) 10
 F. Width required (ft.) 63
 G. Width of available area (ft.) 120 minimum (includes 100+% Reserve Area)
 H. Total square footage required 1984
 I. Square footage in design 2100
 J. Is a reserve area required? Yes, 100% Reserve Area provided

Area Calculations for Reserve Area (Drip Dispersal)

- A. Length of run (ft.) 100
 B. Length of available area (ft.) 100
 C. Width of available area (ft.) 57 (minimum)
 D. Total footprint required for drip dispersal 4104
 (342ft² x 4 bedrooms x 3, as per GMP 107)
 E. Square footage provided 5700



Certification Statement

County: Nelson

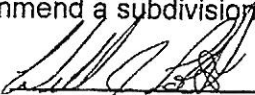
Date: July 19, 2007

Property Identification: Rockfish Heights
Lot 22

Submitted by: William J. Loth, IV, AOSE #237
Afton Soil Consulting, LLC
222 Sycamore Lane
Afton, Virginia 22920
(540) 456-6087

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 subdivision approval¹ be approved².

AOSE



William J. Loth, IV

Date: July 19, 2007

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