# Hampshire County Health Department On-Site Sewage Disposal System Inspection Form

Permit # ST-14-12-49

Name of Owner: Kevin & Amanda Blank Installer: Benjamin Smith

Address: PO Box 536, Springfield, WV 26763

Property Location: Bazzle Lots 1,2,3 Lot Size: 30,000 sq ft Acres

Type of Facility: Existing Facility is: □ New x Existing Design Loading in gpd/# Bedrooms: 2 Source of Water: Well

#### SEWAGE TANK COMPONENT

Capacity in Gallons: 1000 Material:precast concrete

Distances (in feet) of Tank to: Dwelling 35'

Private x Public [ Water Source: 100' Property Line: 80'

#### ON-SITE DISPOSAL SYSTEM

Class I Systems: Standard Soil Trenches() or Bed() Gravelless Pipe(), Diameter \_\_ In. Chamber Soil Absorption Trenches() or Bed()

Class II Systems: Pumped/Dosed Soil Absorption Trenches (x) or Bed ( ) LPP ( ) Evapotranspiration Trenches ( ) or Bed ( )

Shallow Soil Absorption Trenches ( ) or Bed ( ) Other:

No. of Lines: 3 Length (in feet): 60's

Width of Trenches: 36 inches/feet Depth to Bottom of Field: 24 inches

If Bed, Dimensions (in feet): Size Equates to 900 sq ft of SGF

Distance (in feet) of System to: Dwelling 75'

Private (x) Public () Water Source: >100 Property Line: 35"

Remarks:

GPS: N39 11 16.0 w78 41 55.4

An inspection indicates that The sewage disposal system Described above

DOES MEET x

DOES NOT MEET - or

CANNOT BE DETERMINED TO MEET □ the minimum standards

 $\textbf{MEET} \ \Box$  the minimum standards Established by the West Virginia Bureau of Public Health.

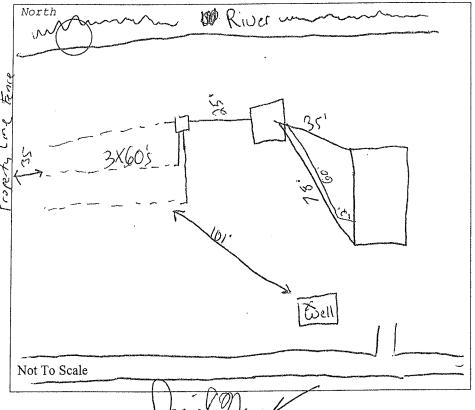
To correct a health hazard,
Modifications to existing systems
May be done to improve part of a
System. Such modifications may
Not be able to be designated as
a <u>Does meet</u> system since
Inadequate information is known.

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.

Visit Date(s): 12/22/2011

FINAL INSPECTION DATE:

12/22/2011



SANITARIAN:

## STATE OF WEST VIRGINIA HAMPSHIRE COUNTY HEALTH DEPARTMENT ON-SITE SEWAGE DISPOSAL SYSTEM PERMIT

Owner: Kevin & Amanda Blank

Address: PO Box 536, Springfield, WV 26763

Installer: Benjamin Smith

Address: Rt. 1 Box 164, Keyser, WV 26726

You are hereby issued a permit to: install an on-site sewage disposal system located at:

Bazzle Lots 1,2,3

Tax District Tax Map 0 Parcel # 8,9,10

Facility: Existing Design Flow: 2 Lot Size: 30,000 sq ft Acres Water Source: Well BASED UPON REVIEW OF THE INFORMATION OF YOUR SUBMITTED APPLICATION, DATED 12/7/2011, AND THE PROPER INSTALLATION OF THE HERIN DESCRIBED SYSTEM, THE SYSTEM SHALL BE IN COMPLIANCE WITH APPLICABLE WEST VIRGINIA SEWAGE SYSTEM RULES AND DESIGN STANDARDS.

### The sewage system shall consist of a:

X Septic tank—Capacity: 1000 gallons or more, Constructed of precast concrete.

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X	Soil disp	osal system	with	a minimum equiva	lency	of <i>90</i>	$\theta$ sq fi	t of conventional g	ravel trench at	ea.
	Depth to the bottom of the trench installation shall be: 24 inches from original ground surface. Width 36 inches.									
				Number of Lines:		ength of				
	X	Chamber syste	em:	Number of Lines: 3		Length o	of lines:	60's		
		Class II Systen	1:							

GPS Coordinates: North 39 11 16.0 West 78 41 55.4

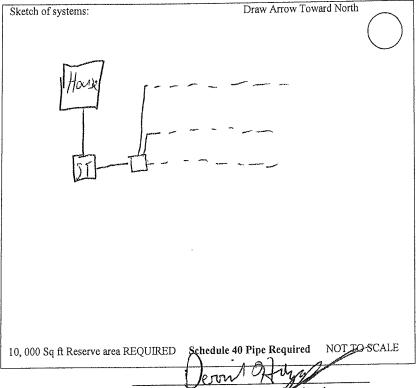
This permit is non-transferable and Automatically expires 12 months After issue date.

This permit is <u>NULL and VOID</u>
When official inspection reveals
Conditions different than those
Stipulated on the permit or facts
Are later found that would indicate
non-compliance with applicable
rules.

All systems must be inspected And approved prior to being Covered with earth or placed into use.

The applicant or his agent must Notify this department 72 hours Or more prior to planned Inspection time.

Issue date 12/20/2011 (304) 496-9641 County Office Phone Number



Health Officer or Sanitarian