

PERMIT  
ON-SITE SEWAGE DISPOSAL SYSTEM

Coordinates: N 39 15 56 W 78 28 10

Owner: John & Deborah Poole Installer: Gary Carpenter  
Address: 22311 Mt Ephraim Rd Address: 181 Northwestern Pike  
Dickerson, MD 20842 Capon Bridge, WV 26711

You are hereby issued a permit to: ☒ install ☐ modify an on-site sewage disposal system located:  
Ritters Hidden Valley Lot 14

Facility: Residence Design Flow: 2 Lot Size (ft²/acres): 3.169 acres Water Source: cistern

Based upon review of the information on your submitted application, dated 3/30/2020, and the proper installation of the herein 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:

- ☒ Septic tank - Capacity: 1000 gallons or more. Constructed of: Concrete or Plastic.
- ☒ Soil disposal system with a minimum equivalency of 900 square feet of conventional gravel trench area.

Depth to the bottom of the trench or bed installation shall be 24 inches from original ground surface.

☐ Gravel system: Lengths of lines: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ feet. Width: \_\_\_\_\_ inches.

☒ Chamber system: Number of lines: 3. Lengths of lines: 60's, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

Manufacturer of chamber: infiltrator.

☐ Bed system: ☐ Gravel ☐ Chamber Length: \_\_\_\_\_ feet. Width \_\_\_\_\_ feet.

☐ Other: \_\_\_\_\_

This permit is non-transferable and automatically expires 12 months after issue date.

This permit is NULL and VOID 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.

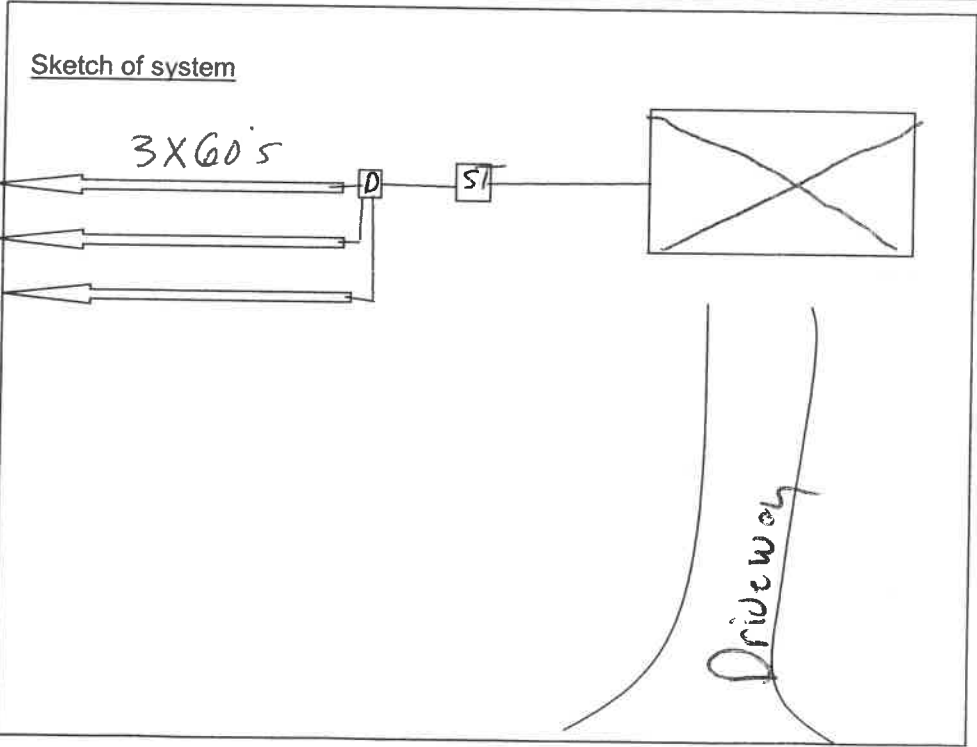
All systems must be inspected and approved prior to being covered with earth or placed into use.

The applicant or his agent must notify this department 72 hours or more prior to planned inspection time. Health Department Phone Number: 304-496-9641

Additional Specifications  
on Reverse.

Issue Date: 3/31/2020

Sanitarian: 



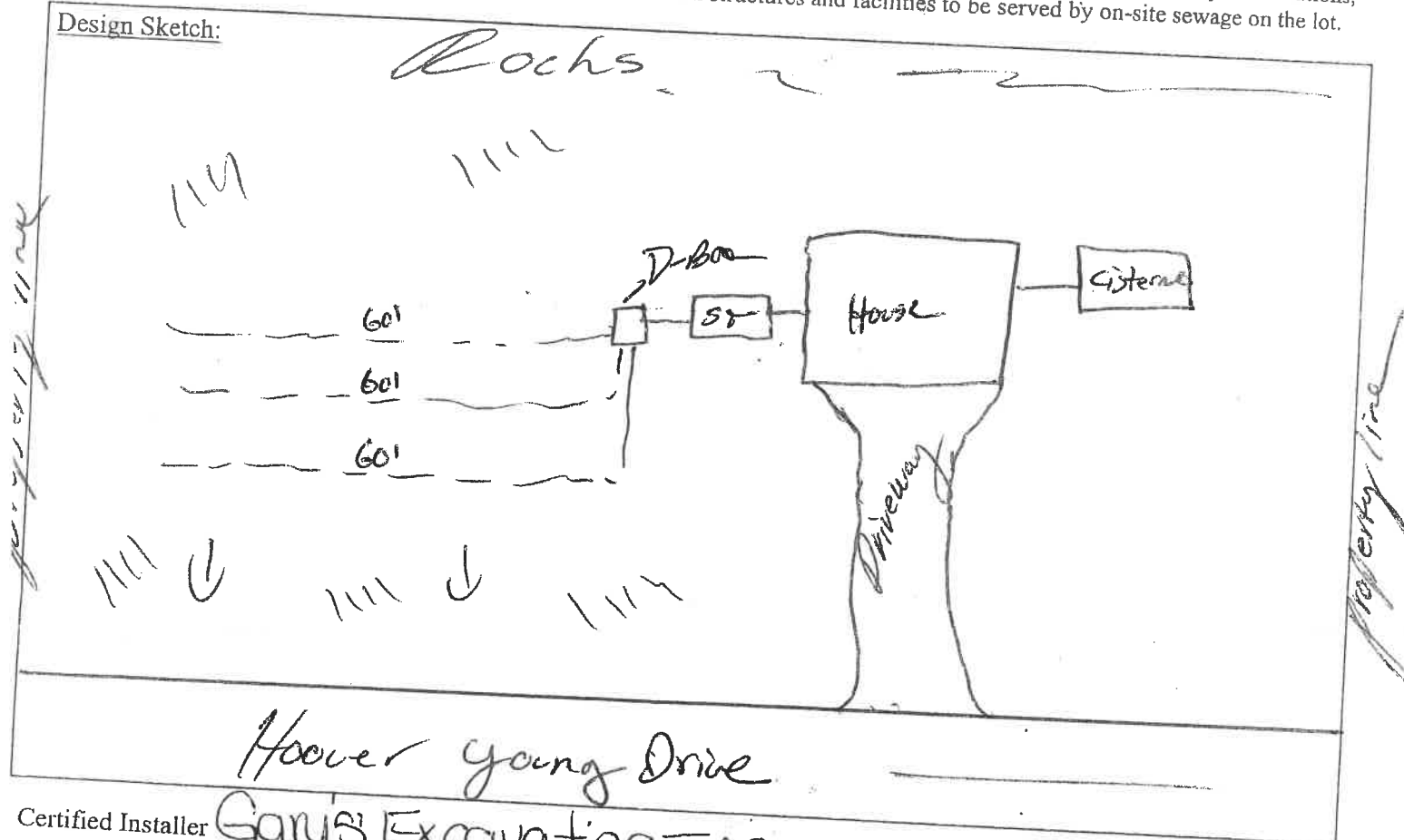
Septic Tank: Capacity (gallons) 1000 Material plastic Top Seam ☐ or ☒  
Manufacturer Infiltrator Outlet Filter Used? Yes ☐ No ☒ Manufacturer \_\_\_\_\_

Drain Field: Materials: Gravel ☐ Gravelless Pipe ☐ Chambers ☒ Other \_\_\_\_\_ Brand \_\_\_\_\_  
300 ft<sup>2</sup>/BR ☒ 400 ft<sup>2</sup>/BR ☐ Other \_\_\_\_\_ No. Bedrooms 3 X 150 ft<sup>2</sup>/BR = 450 total  
No. Lines 3 Length of Lines (ft) 60, 60, 60 ; \_\_\_\_\_  
Trench Width (ft) 3 Average Depth 20" Max Depth 24" Pipe ASTM No. \_\_\_\_\_  
Effluent distribution (check all that apply): Distribution Box ☒ Serial ☐ Pump dosed ☐ Siphon dosed ☐  
If Absorption Bed: Length (ft) \_\_\_\_\_ Width \_\_\_\_\_ If chambers: # Used \_\_\_\_\_ Brand \_\_\_\_\_

Separation Distances (ft) Septic tank to: Bldg Foundation 10' Property Line 70' Water Supply 50'  
Absorption field to: Bldg Foundation 10' Property Line 10' Water Supply 10'

Draw a sketch of the property showing any existing or proposed well locations, the location of all structures, property line locations, and the proposed sewage system as it is to be installed. Show all structures and facilities to be served by on-site sewage on the lot.

Design Sketch:



Certified Installer Gary's Excavating Inc. Telephone 304 856-2124  
Business Address 181 Northwestern Pike Capon Bridge WV 26011  
Certification No. 54-A-99-0214 Exp. Date 6/19/19  
Contractor's License No. WV035678 Exp. Date 6/19/19 Issued to Gary Carpenter

I hereby certify that the installation or modification of all parts of the sewage disposal system, including required material standards, will be done in compliance with the Sewage Treatment and Collection System Design Standards Rule, 64CSR47, and appropriate manufacturer's recommended procedures and practices.

Date: 3/26/2020

Signature of Certified Installer: \_\_\_\_\_



Application for a Permit to Install or Modify an Onsite Sewage Disposal System

Property Owner John & Deborah Poole Phone (H) \_\_\_\_\_ (W) 301-602-32  
Address 22311 Mt Ephraim Rd City Dickerson State Md Zip Code 20842  
Property Location Section 1 Lot 14 (Hoover Young Dr)  
Capon Bridge, W.V 26711

Has this property ever been previously denied for a permit? Yes ☐ No ☒ Date \_\_\_\_\_

Facility is New ☒ Existing ☐ Lot Size 3.169 Acres ☐/Sq. Ft. ☐ Water Source \_\_\_\_\_

Type Facility Residence ☒ Other ☐ \_\_\_\_\_

Number of Bedrooms 2 Number Individuals Served \_\_\_\_\_ Design Daily Flow 300 gpd

Deed Recorded in Deed Book 356 Page 251 County Tax Map 19 Parcel No. 164

Subdivision Name Riters Hidden Valley Approval No. \_\_\_\_\_ Section 1 Lot 14

The minimum lot size or area reserved for a sewage disposal system in a subdivision may vary based on the date the subdivision was created. On lots created after July 1, 1970, permits for individual sewage disposal systems shall be withheld until a subdivision approval has been granted which indicates that such systems may be expected to comply with applicable design standards on all proposed building lots contained within the original tract.

To the best of my knowledge, the information provided on this application is true and I understand that I am responsible for informing the sewage system installer of the existing or proposed locations of sewage systems and water sources including wells. I further understand that it is my responsibility to consult the sanitarian for assistance as necessary and to determine the location of any existing or proposed sewage systems or wells if presently unknown to me.

Date: 3-12-2020 Signature of Owner: John Poole, Deborah Poole

Sewage Disposal System Information

Application is for a permit to: Install ☒ Modify ☐

Check all that apply: Septic Tank ☒ Absorption Field ☒ Holding Tank ☐ Pit Privy ☐ Vault Privy ☐

Alternative System (attach detailed plans) ☐ Chemical/Composting Toilet ☐ Other ☐ \_\_\_\_\_

Percolation Test: Test Holes #1 105 mins. #2 120 mins. #3 110 mins. #4 100 mins.

Total Minutes = 435 Divided by 24 = 18.12 Average time for water to fall one inch.

Six-foot hole is free of water or solid rock? Yes ☒ No ☐ Test conducted on (date) 3/26/2020

I hereby certify that the percolation test was conducted in accordance with the procedures outlined in the Sewage Treatment and Collection System Design Standards, 64CSR47. Notice: all homeowner installers must pass a certification examination administered by the Local Health Department prior to conducting perc testing.

Date: 3/26/2020 Signature of Certified Installer: [Signature]

For Health Department Use: Coordinates N \_\_\_\_\_ W \_\_\_\_\_ Date Rec'd 3/30/2020

Site Eval \_\_\_\_\_ By \_\_\_\_\_ Date Fee Pd \_\_\_\_\_ Rec'd From \_\_\_\_\_

Permit Issued ☐ Denied ☐ Permit # \_\_\_\_\_ Comments Receipt # 92164