

# Completion Statement

Commonwealth of Virginia  
State Department of Health

Tax Map - 36-11B

Health Department  
Identification Number

Health Department

Name of Company/Corporation/Individual:

Earth Resources Inc.

Lancaster

Address:

P.O. Box 520 Lancaster VA 22503

Telephone:

804-435-1085

Owner's Name

Betty Piland

Owner's Address

2738 Duckwood Ct., Suffolk, VA 23435

Location of Installation: Lot

Block

Section:

Subdivision:

Other: 199 Foxwells Lane

I hereby certify that the onsite sewage disposal system has been installed and completed in accordance with the construction permit issued (date) \_\_\_\_\_ and is in compliance with Part D of the Sewage Handling and Disposal Regulations and when appropriate the plans and specifications for the project.

7-18-11

Date

Dean Alton Bruns Pres.

Signature and Title

**Commonwealth of Virginia  
Uniform Water Well Completion Report**

Owner Betty Pilsud Tax Map ID 151-11-0083  
 Address 2738 DUCK WOOD CT VDH Permit \_\_\_\_\_  
Suffolk, VA 23435 VWCB Permit \_\_\_\_\_  
 Phone 757-484-7994 VWCB ID \_\_\_\_\_  
 Location 199 Foxwells Lane County LANCASTER

**Well Data**

**General Information**

Drilling Method \_\_\_\_\_ Date Completed \_\_\_\_\_ Total Depth of Well \_\_\_\_\_  
 Depth to Bedrock \_\_\_\_\_ Yield \_\_\_\_\_ (GPM) Length of Test \_\_\_\_\_  
 Static Water Level \_\_\_\_\_ Stabilized Water Level \_\_\_\_\_ Natural Flow (Rate) \_\_\_\_\_  
 Well Disinfected (Yes or No) \_\_\_\_\_ Disinfectant Used \_\_\_\_\_ Amount Used \_\_\_\_\_

**Casing**

From _____ To _____	From _____ To _____	From _____ To _____
Size _____ Material _____	Size _____ Material _____	Size _____ Material _____
Weight/Schedule _____	Weight/Schedule _____	Weight/Schedule _____

**Gravel Pack**

From _____ To _____	From _____ To _____	From _____ To _____
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**Grout**

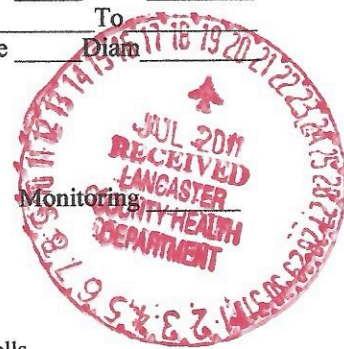
From _____ To _____	From _____ To _____	From _____ To _____
Bore Hole Size _____	Borehole Size _____	Borehole Size _____
Type _____	Type _____	Type _____
Method _____	Method _____	Method _____

**Water Zones or Screened Intervals**

From _____ To _____	From _____ To _____	From _____ To _____
Mesh Size _____ Diam _____	Mesh Size _____ Diam _____	Mesh Size _____ Diam _____
From _____ To _____	From _____ To _____	From _____ To _____
Mesh Size _____ Diam _____	Mesh Size _____ Diam _____	Mesh Size _____ Diam _____

**Use Data**

Private Well: : Domestic \_\_\_\_\_ Agricultural \_\_\_\_\_ Industrial \_\_\_\_\_ Monitoring \_\_\_\_\_  
 Public Well: Community \_\_\_\_\_ Non-Community \_\_\_\_\_



**Abandonment Information**

**Bored or Dug Wells**

Casing Removed, Y or N? Yes  
 If Y, Depth to which casing was removed 4 Feet  
 Depth and Type of Fill Clean Sand  
 Source of Fill \_\_\_\_\_  
 Bentonite plugs: From 4 To 6 From 12 To 14

**Wells other than Bored Wells**

Casing Removed, Y or N? \_\_\_\_\_  
 If Y, Depth to which Casing was removed \_\_\_\_\_  
 Applicable, Depth(s) and type of gravel/sand fill \_\_\_\_\_  
 Source of Gravel or Sand \_\_\_\_\_  
 Cement: From \_\_\_\_\_ To \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

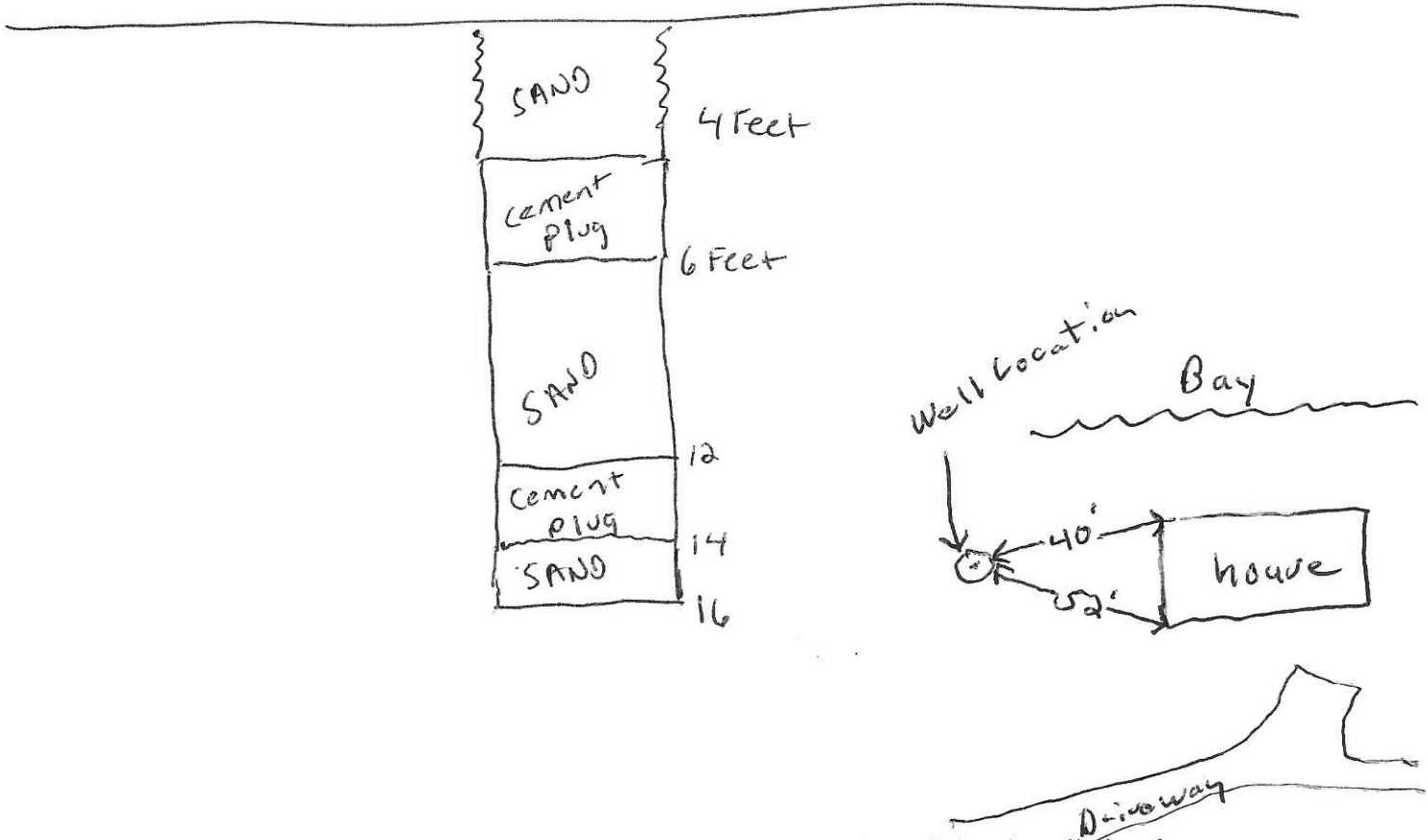
Method of permanently marking location \_\_\_\_\_

Drillers Log

Depth

Description of Formation or Sediment

Remarks



I certify that the information contained here is true and that this well was installed and constructed in accordance with the permit and further that the well complies with all applicable state and local regulations, ordinances and laws.

Name: ABSOLUTELY WATER

Address 17 Pond Park Rd., Lancaster, VA 22503-0476

Phone: 804 435-2222

Drillers Signature: Gary L. Throck Date: July 7 2011

Representing: Absolutely Water LLC

Virginia Contractors License Number: 2705-102531



**COMMONWEALTH OF VIRGINIA  
VIRGINIA DEPARTMENT OF HEALTH**

Lancaster County Health Department  
P.O. Box 158  
Lancaster, Virginia 22503  
(804) 462-9919

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***OSE Construction Permit Approval Letter – Level 2 Review  
This Permit is NOT TRANSFERABLE***

May 18, 2011

Betty Piland  
2738 Duckwood Ct.  
Suffolk, Virginia 23435

Subject: Tax Map # 36-11B  
HDID # 151-11-0066

Dear Ms.Piland:

**This letter, in conjunction with the approved plans (15 pages) dated 05/16/2011, which are attached, constitutes your permit** to install a sewage disposal system. The application for a permit was submitted pursuant to §32.1-163.5 of the Code of Virginia which requires the Health Department to accept private soil evaluations and designs from an Onsite Soil Evaluator (OSE) for residential development. The permitted site was certified as being in compliance with the Board of Health's *Sewage Handling and Disposal Regulations 12 VAC 5-610-20 et seq* (and *Emergency Regulations for Alternative Onsite Sewage Systems 12 VAC 5-613-20 et seq* ) (and local ordinances if the locality has authorized the local health department to accept private evaluations for compliance with local ordinances) by: ( David R Miles, AOSE # 106 ). This letter is issued in reliance upon that certification.

The Board of Health hereby recognizes that the soil and site conditions acknowledged by this correspondence, and documented by additional records on file at the local health department, are suitable for the installation of onsite sewage disposal systems. The attached plat (or plats) shows the approved areas for the sewage disposal systems. This letter is void if there is any substantial physical change in the soil or site conditions where a sewage disposal system is to be located.

If modifications or revisions are necessary between now and when you construct your dwelling, please contact the Onsite Soil Evaluator (OSE) who performed the evaluation and design on which this permit is based. The name, address, and phone number of the OSE appears on the certification form attached to this permit. Should revisions be necessary during construction, your contractor should consult with the OSE that submitted the site evaluation or site evaluation and design. The OSE is authorized to make minor adjustments in the location or design of the system at the time of construction provided adequate documentation is provided to the Lancaster County Health Department.

This authorization is null and void if conditions are changed from those shown on the application or conditions are changed from those shown on the attached construction drawings, plans and specifications. No part of any installation shall be covered or used until inspected, corrections made if necessary, and approved by the Lancaster County Health Department or unless expressly authorized by the Lancaster County Health Department. Any part of any installation which has been covered prior to approval shall be uncovered if necessary, upon the direction of the Department.

This authorization to construct a sewage disposal system **expires: November 18, 2012.**  
**This Permit is NOT TRANSFERABLE.**

Sincerely,



Timothy Childs

EHS, Sr. / IOSE #58

Lancaster County Health Department

cc: Miles, David R.  
Post Office Box 140  
Topping, Virginia 23169

# Soil Evaluation Services, Inc. -----

PO Box 140  
29 Industrial Way  
Topping, VA 23169-0140

804-758-3511  
Fax: 804-758-0042

## FINAL INSPECTION

Customer Name: Betty Piland

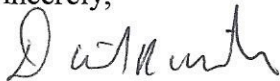
Site Location: T.M. #36-11B

County: Lancaster

Date: July 7, 2011

This system was installed in accordance with the approved Health Department sewage disposal construction permit. See as built drawing!

Sincerely,



David R. Miles, CPSS, OSE



INSTALL SYSTEM DURING  
DRY CONDITIONS ONLY!

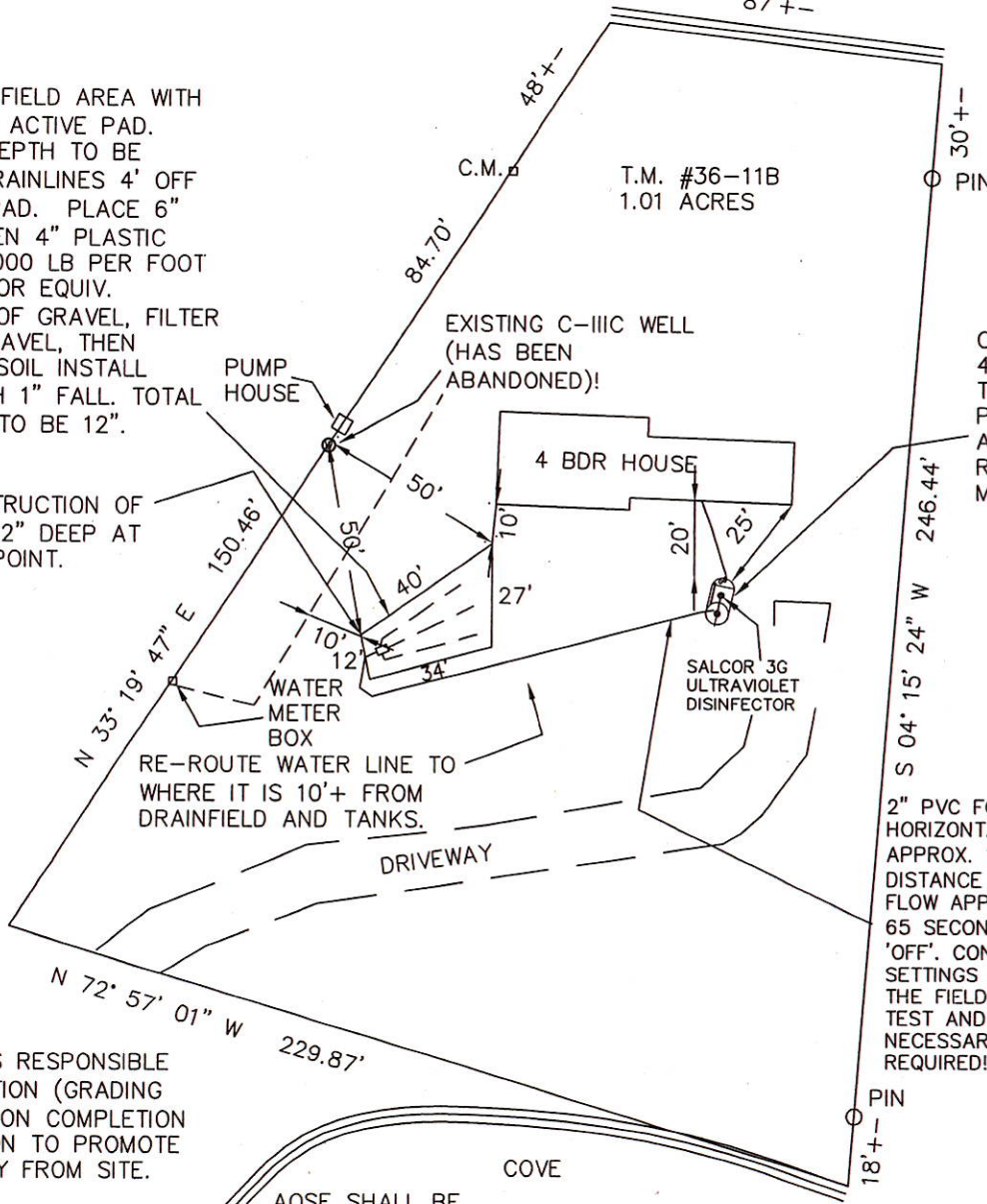


DO NOT DRIVE OVER THE  
DRAINFIELD OR  
CLEARSTREAM UNIT.

LITTLE BAY  
87'+--

SUITABLE DRAINFIELD AREA WITH  
12'X34'X27'X40' ACTIVE PAD.  
INSTALLATION DEPTH TO BE  
6-12". KEEP DRAINLINES 4" OFF  
ALL SIDES OF PAD. PLACE 6"  
OF GRAVEL, THEN 4" PLASTIC  
PERFORATED, 1000 LB PER FOOT  
BEARING LOAD OR EQUIV.  
ADDITIONAL 6" OF GRAVEL, FILTER  
CLOTH OVER GRAVEL, THEN  
BACKFILL WITH SOIL. INSTALL  
DRAINLINES WITH 1" FALL. TOTAL  
GRAVEL DEPTH TO BE 12".

BEGIN  
CONSTRUCTION OF  
PAD 12" DEEP AT  
THIS POINT.



CLEARSTREAM 600NC3T.  
428 GALLON TRASH  
TANK, 724 GALLON  
PUMP TANK. NOTE:  
ANTISIPHON HOLE  
REQUIRED IN FORCE  
MAIN IN PUMP TANK.

2" PVC FORCE MAIN SCH. 40.  
HORIZONTAL PUMP DISTANCE  
APPROX. 130'. VERTICAL PUMP  
DISTANCE APPROX. 6'. ANTICIPATED  
FLOW APPROX. 46 GPM. SET TIMER:  
65 SECONDS 'ON' AND 2 HOURS  
'OFF'. CONTROL PANEL/TIMER  
SETTINGS MUST BE VERIFIED IN  
THE FIELD WITH A DRAW DOWN  
TEST AND ADJUSTED AS  
NECESSARY. TIME DOSING IS  
REQUIRED!

CONTRACTOR IS RESPONSIBLE  
FOR STABILIZATION (GRADING  
& SEEDING) UPON COMPLETION  
OF INSTALLATION TO PROMOTE  
DRAINAGE AWAY FROM SITE.

PLANS DRAWN IN ACCORDANCE  
WITH BOUNDARY SURVEY  
PREPARED BY TOMLIN & KEYSER  
DATED AUGUST 25, 1992.

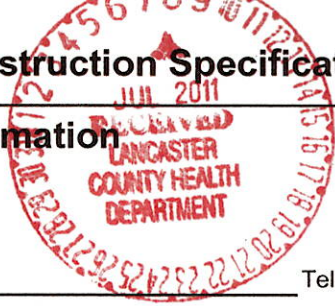
AOSE SHALL BE  
CONTACTED FOR A  
PRE-CONSTRUCTION  
MEETING ONSITE IF  
CONTRACTOR HAS  
ANY QUESTIONS.

DISTURBANCE OR REMOVAL OF  
SOIL FROM THE DRAINFIELD AREA  
MAY RENDER THE SITE INVALID.

CONTRACTOR MUST VERIFY  
DIMENSIONS AND ELEVATIONS  
PRIOR TO INSTALLATION. IF  
DISCREPANCIES ARE FOUND  
AOSE MUST BE NOTIFIED.

Title	As Built!		
Reference Subtitle	Betty Piland, TM 36-11B, Lancaster County Specific Site Layout		
Drawn By	DRM	Approved By	DRM
Date	7/7/2011	Scale	1" = 50'
Revision	0	Drawing No.	

# Sewage Disposal System Construction Specifications



## General Information

New  Repair  Expanded

Owner Betty Piland Telephone 757/484-7994

Address 2738 Duckwood Ct. Suffolk, VA 23435

For a Type II Sewage disposal system which is to be construction on/at 3E to White Stone, L/T 695, L/T Foxwells Lane to end.

Subdivision \_\_\_\_\_ Section \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Actual or estimated water use 600 gpd

DESIGN	NOTES
<b>Water Supply:</b> Existing (describe) <u>C-IIIC (To be properly abandoned), Public water</u> To be installed: Class _____ cased _____ grouted _____ <u>Water line re-located to 10'+ off drainfield!</u>	7/1/2011  DRM
<b>Building sewer:</b> <u>4</u> inch I.D. PVC 40, or equivalent Slope 1.25" per 10' (minimum) <input type="checkbox"/> Other: _____	7/5/2011  DRM
<b>Septic tank:</b> Capacity <u>1250</u> gals. (minimum) <input checked="" type="checkbox"/> Other: <u>Existing. Tank removed. Bottomless, cinderblock. No good.</u>	7/5/2011  DRM
<b>Inlet-Outlet structure:</b> PVC 40, 4" tees or equivalent. <input type="checkbox"/> Other: _____	7/5/2011  DRM
<b>Pump and pump station</b> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> If yes, describe and show design. <u>See Design Specs.</u> <u>Salcor UV light installed in Clearstream tank!</u>	7/5/2011  DRM
<b>Gravity mains:</b> <u>3"</u> or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent. <input checked="" type="checkbox"/> Other: <u>2" SCH 40 PVC Force Main</u>	7/1/2011  DRM
<b>Distribution box:</b> Precast concrete with <u>6+</u> ports. <input checked="" type="checkbox"/> Other: <u>7 hole, tuff-tite d-box</u>	7/1/2011  DRM
<b>Header lines:</b> <u>4"</u> I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2' into absorption trench. Slope 2" per 100' minimum <input type="checkbox"/> Other: _____	7/1/2011  DRM
<b>Percolation Lines:</b> Gravity <u>4"</u> plastic 1000 lb. per foot bearing load or equivalent, slope 2"-4" (min.max) per 100" <input type="checkbox"/> Other: _____	7/1/2011  DRM
<b>Absorption trenches:</b> Square ft. required <u>686</u> Depth from ground surface to bottom of trench <u>6-12"</u> Depth of aggregate <u>12</u> in. Number of trenches _____ Trench length _____ ft. Trench width _____ ft.	7/1/2011  DRM

# LANEVIEW ENVIRONMENTAL

569 Montague Rd  
Laneview, Virginia  
804-238-8910

Date: August 28, 2025

## **SEPTIC INSPECTION**

Brian Brooks

### ***LOCATION:***

199 Foxwell Dr  
White Stone, VA

### ***DESCRIPTION OF JOB:***

Septic Inspection

### ***COMMENTS:***

At the time of visual inspection, the septic tank was at the proper level. The septic tank is a 3 compartment tank and both the septic tank and distribution box are concrete. There is a riser on the tank. The pump, pump tank, floats and control panel were all checked. The drainfield was tested. The UV light system will need to be replaced, the cost is approximately \$1,789.00. The system is operating as it should. This report serves as a pre-inspection prior to the property going on the market. Please note; this inspection comes with no guarantees, warranties, or liabilities beyond the observations made above.



James Boone  
Owner  
Laneview Environmental

# INVOICE

Laneview Environmental  
569 Montague Rd  
Laneview, VA 22504

LaneviewEnvironmental@Gmail.com  
+1 (724) 880-6702



**Bill to**  
Kelly Antonio

**Ship to**  
Kelly Antonio

## Invoice details

Invoice no.: 2972  
Terms: Net 30  
Invoice date: 11/01/2025  
Due date: 12/01/2025

#	Date	Product or service	Description	Qty	Rate	Amount
1.	10/30/2025	<b>Location</b>	199 Foxwell White Stone, Va	1	\$0.00	\$0.00
2.		<b>Services</b>	Installed UV Light	1	\$1,636.67	\$1,636.67

## Ways to pay



Thank you for your business!

**\*\*PLEASE NOTE: IF YOU PAY BY CHECK, THE TOTAL AMOUNT  
DUE IS \$1,589.00\*\***

## Note to customer

**\*\*PLEASE NOTE: IF YOU PAY BY CHECK, THE TOTAL AMOUNT  
DUE IS \$1,589.00\*\***

**Total** **\$1,636.67**

Payment -\$1,636.67

**Balance due** **\$0.00**

**Paid in Full**