***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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## *AOSE **Construction Permit** Approval Letter – Level 1 Review*

February 22, 2007

Re: AOSE Provisional System Permit
Tax Map #26B(1)12&15
HDID # 151-07-0064

Dear William Turns,

This letter, in conjunction with the approved plans (27 pages) dated 2/13/2007, which are attached, constitutes your permit to install a sewage disposal system. The application for a permit was submitted pursuant to Sec. 32.1-163.5 of the *Code of Virginia* which requires the Health Department to accept private soil evaluations and designs from an Authorized Onsite Soil Evaluator (AOSE) or a Professional Engineer working in consultation with an AOSE for residential development. The permitted site was certified as being in compliance with the Board of Health's regulations (and local ordinances if the locality has authorized the local health department to accept private evaluations for compliance with local ordinances) by John Hollowell. 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 soil 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 Authorized Onsite Soil Evaluator (AOSE) or Professional Engineer (PE) who performed the evaluation and design on which this permit is based. The name, address and phone number of the AOSE/PE appears on the certification form attached to this permit. Should revisions be necessary during construction, your contractor should consult with the AOSE/PE that submitted the site evaluation or site evaluation and design. The AOSE or PE 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 direction of the Department.

Tax Map # #26B(1)12&15
HDID # 151-07-0064

Please note that this permit is based upon a sewage disposal system that is under **provisional approval** and that this permit **cannot be converted to a certification letter** until the provisional approval protocol is successfully completed. In the event that the system fails to meet the provisional approval protocol, the Department is not obligated to reissue a construction permit.

Your permit is issued in accordance with the **Code of Virginia, Title 32.1 and 32.1-164.1. Article I, Board of Health, Commonwealth of Virginia, *Sewage Handling and Disposal Regulations,*** and current agency policy. This letter shall become and is a part of the sewage disposal system permit issued for the above referenced location. Due to the provisional nature of this system, this permit shall not become valid until the following items are completed.

1. The permit shall be **recorded** in the Grantor Index of the land records of the Circuit Court of the County of Lancaster.
2. The owner or his agent shall furnish to the certification by the Clerk of the Circuit Court of the **Deed Book Number** and **Page Number** upon which the permit and all provisions have been recorded. The Deed Book Number and Page Number must be placed on all copies of the permit prior to giving validation to the building officials for issuance of a building permit.

In accordance with the *Sewage Handling and Disposal Regulations*, you have the right of appeal to obtain a modification or elimination of the conditions set herein. A written request to review the conditions must be submitted to Dr. Reuben K. Varghese, M.D., M.P.H., Director, Three Rivers Health District, PO Box 415, Saluda, VA 23149.

This authorization to construct a sewage disposal system **expires: August 22, 2008.**

If you have any questions, please contact me.

Issued by: _____
Environmental Health Spec.

Reviewed by: _____
Environmental Health Manager

As owner/ representative of the property included in this permit, I have reviewed and accept all provisions in the provisional sewage disposal system permit.

_____ _____
Date

STATE OF VIRGINIA, COUNTY/CITY OF_____, to wit:

Subscribed and acknowledged before me this ____ day of _____, 2007 for
James Broyhill

_____
NOTARY PUBLIC for the
STATE OF VIRGINIA AT LARGE

My Commission expires_____

Tax Map # - 26B(1)12-15

## Sewage Disposal System Construction Specifications

### General Information

New ☐ Repair ☑ Expanded ☐

Owner William Turns Telephone 438-5118

Address 127 Tilden Lane Weems, VA 22567

For a Type II Sewage disposal system which is to be constructed on/at 127 Tilden Lane

Subdivision Berkley Forest Section 1 Block 1 Lot 12-15

Actual or estimated water use 450gpd

| DESIGN | NOTES |
|---|---|
| Water supply, existing: (describe) 3-A Well<br>To be installed: class cased grouted | |
| Building sewer: existing I.D. PVC 40, or equivalent.<br>Slope 1.25" per 10' (minimum).<br>☐ Other | |
| Septic tank: Existing, capacity 2 x 1000 gals. (minimum.<br>☐ Other | |
| Inlet-outlet structure:<br>PVC 40, 4" tees or equivalent.<br>☐ Other | |
| Pump and pump station:<br>No ☐ Yes ☑ describe and show design.<br>If yes: Premier Tech PSA 240 Pump Station | |
| Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. Crush strength or equivalent.<br>☑ Other 1½" Sch40 PVC force main | |
| **Ecoflo Model**<br>ST-650 ✓<br>STB-650 ____<br>Number of Units 1 | |
| **Absorption Bed**<br>Square Footage in Bed 600 Length of Bed 30'<br>Width of Bed 20' Thickness of Gravel 78"<br>Maximum Depth of Bed 132" at highest corner | |

Contractor(s) or individual(s) responsible for construction of the sewage disposal system and well is(are) responsible for scheduling a construction inspection with AOSE. Contact John Hollowell at 435-1982 to schedule an inspection. No part of the construction shall be covered prior to inspection. Recommend calling a week prior to construction to insure that AOSE will be available.

# Construction Notes

Lancaster County Map Reference 26B(1)12-15

Pump out and inspect existing septic tanks. Replace components as needed.

Excavate a 20' x 30' absorption bed. Bed is to be 120" deep at the corner closest to the house.

Bed will be 132" deep at the corner furthest from the house.

Bottom of disposal bed shall be level.

Back fill with clean gravel to within 52" of finished grade.

Center an *Ecoflo ST-650 Peat Biofilter* in the absorption bed.
Assemble in accordance with the following pages.

Cover exposed gravel with filter fabric.

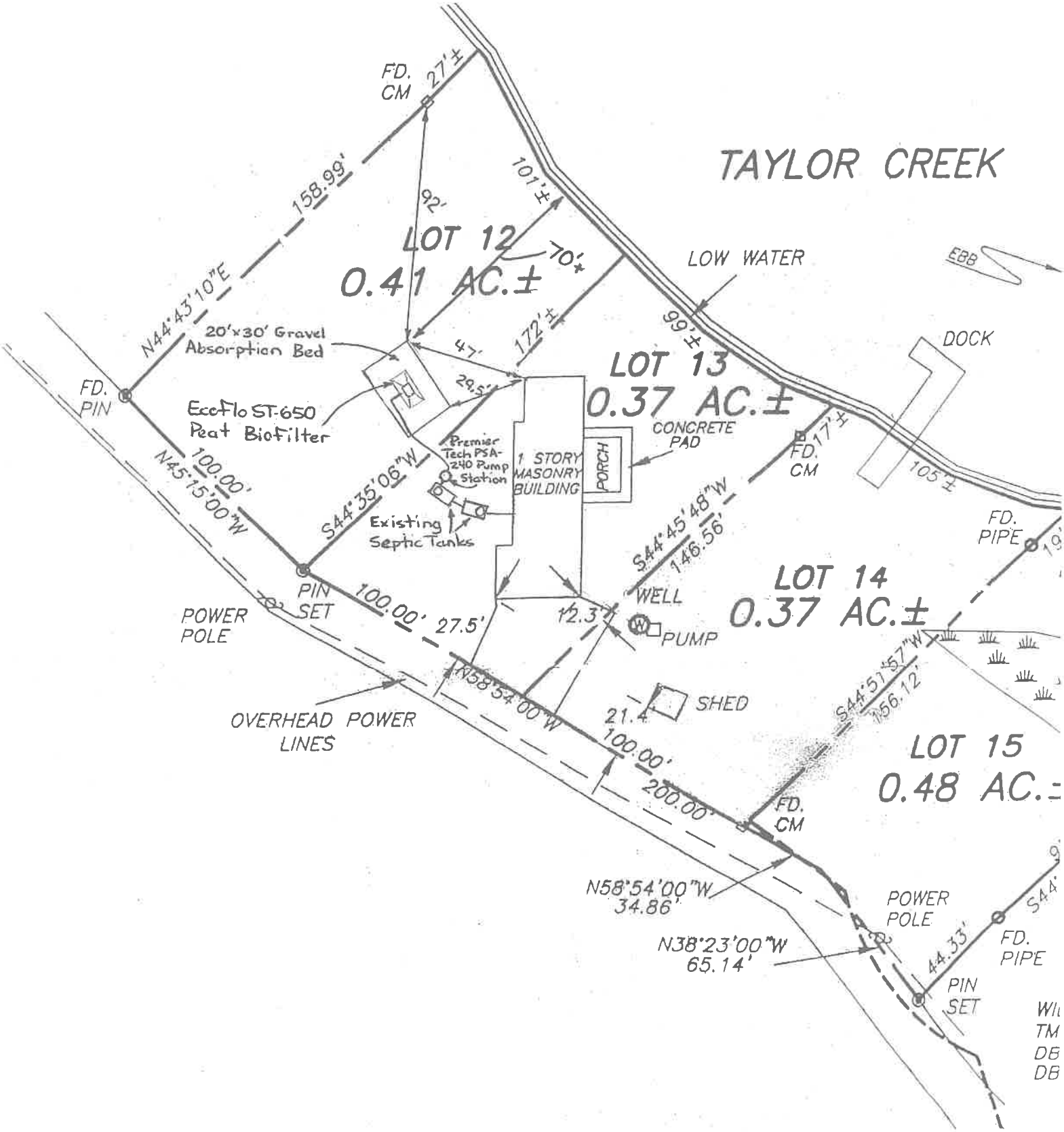
Set a *Premier Tech PSA-240 Pump Station* downstream from the second septic tank.
Run 1.5" Schedule 40 PVC force main from the pump station to the biofilter.

There must be an electrical disconnect in close proximity to the pump station.

Pump and alarm must be wired to separate circuits.

After inspection, cover biofilter with clean sandy soil. Cap and crown installation.

Contractor will be billed for each construction inspection required.
Contact John Hollowell at 435-1982 to schedule construction inspections.
If AOSE is given more than 48 hours notification, inspection fee will be $100.00.
If AOSE is given 24-48 hours notification, inspection fee will be $150.00.
If AOSE is given less than 24 hours notification, inspection fee will be $250.00.
No part of the sewage disposal system shall be covered prior to inspection.
Final paperwork for Health Department will not be released until inspection fees are paid.

# Construction Diagram

Lancaster County Map Reference 26B(1)12-15