



Northumberland County Health Department
P.O. Box 69
Heathsville, Virginia 22473
(804) 580-8827 Voice
(804) 580-2913 Fax

Sewage Disposal System Operation Permit

Property Owner

Kennedy, James
7505 Midas Touch
Columbia, Maryland 21046
Phone:

Health Dept. ID: **166-03-751**

Tax Map: **19C(1)16**

Locality: Northumberland

Property Location

Property Address: Cubbitt Cr.
Heathsville, Virginia 22473

Subdivision: Chesa Cove

Directions:

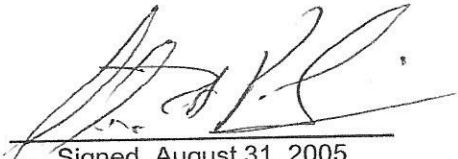
=====

Kennedy, James is hereby granted permission to operate a septic tank effluent and drainfield Sewage System at the above referenced location, having a design capacity of **600** gallons per day, or **4** bedrooms maximum.

This permit is issued in accordance with the provisions of Title 32.1, Chapter 6 of the Code of Virginia as Amended, and Section 12VAC 5-610-340 of the Sewage Handling and Disposal Regulations of the Virginia Department of Health. The issuance of an operation permit does not denote or imply any guarantee by the department that the sewage disposal system will function for any specified period of time. It shall be the responsibility of the owner or any subsequent owner to maintain, repair, or replace any sewage disposal system that ceases to operate in accordance with the regulations.

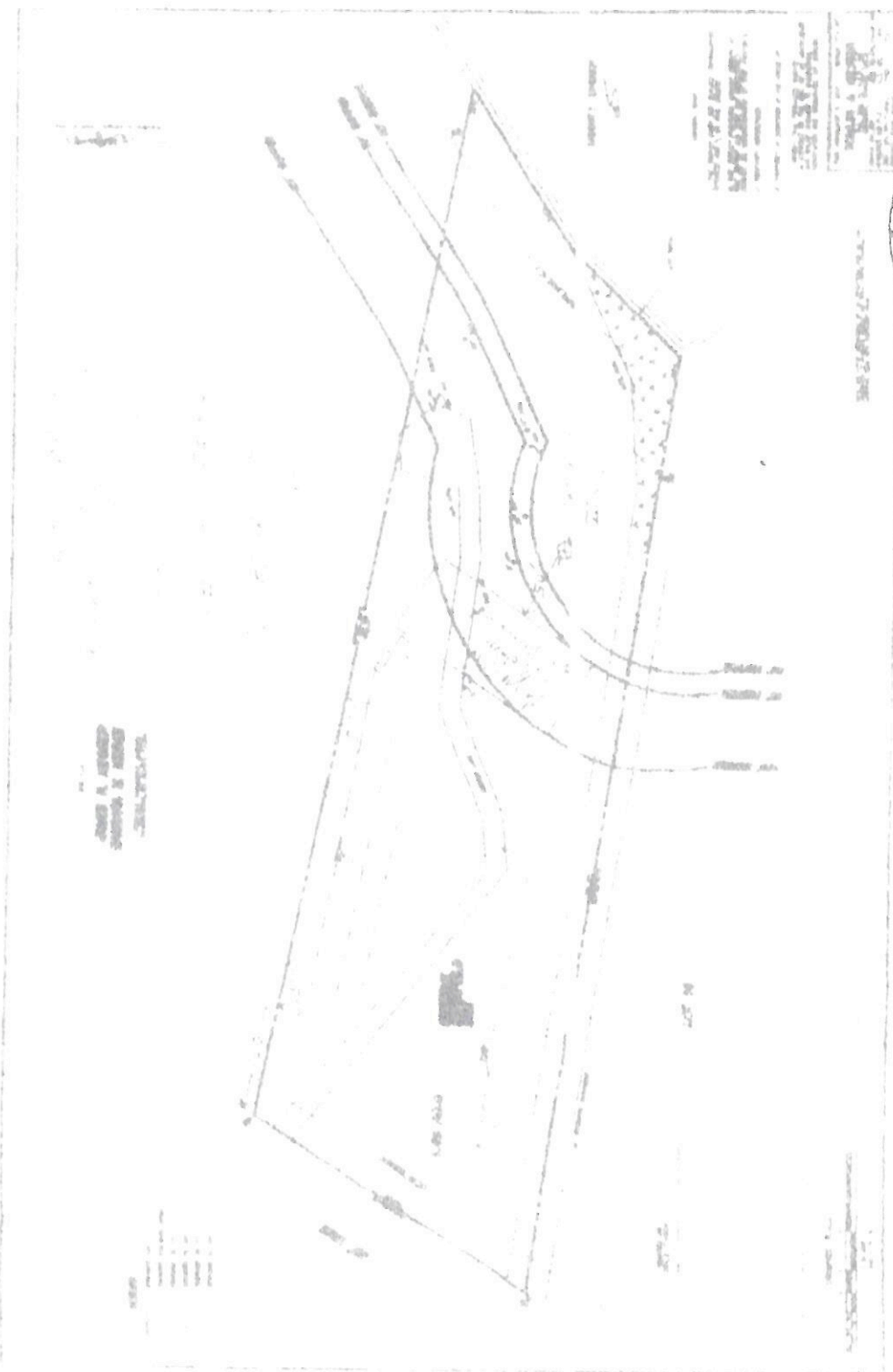
August 31, 2005
Effective Date

John H. Pittman
EHS



Signed August 31, 2005

faxed 8/24/05 @
10:28 am

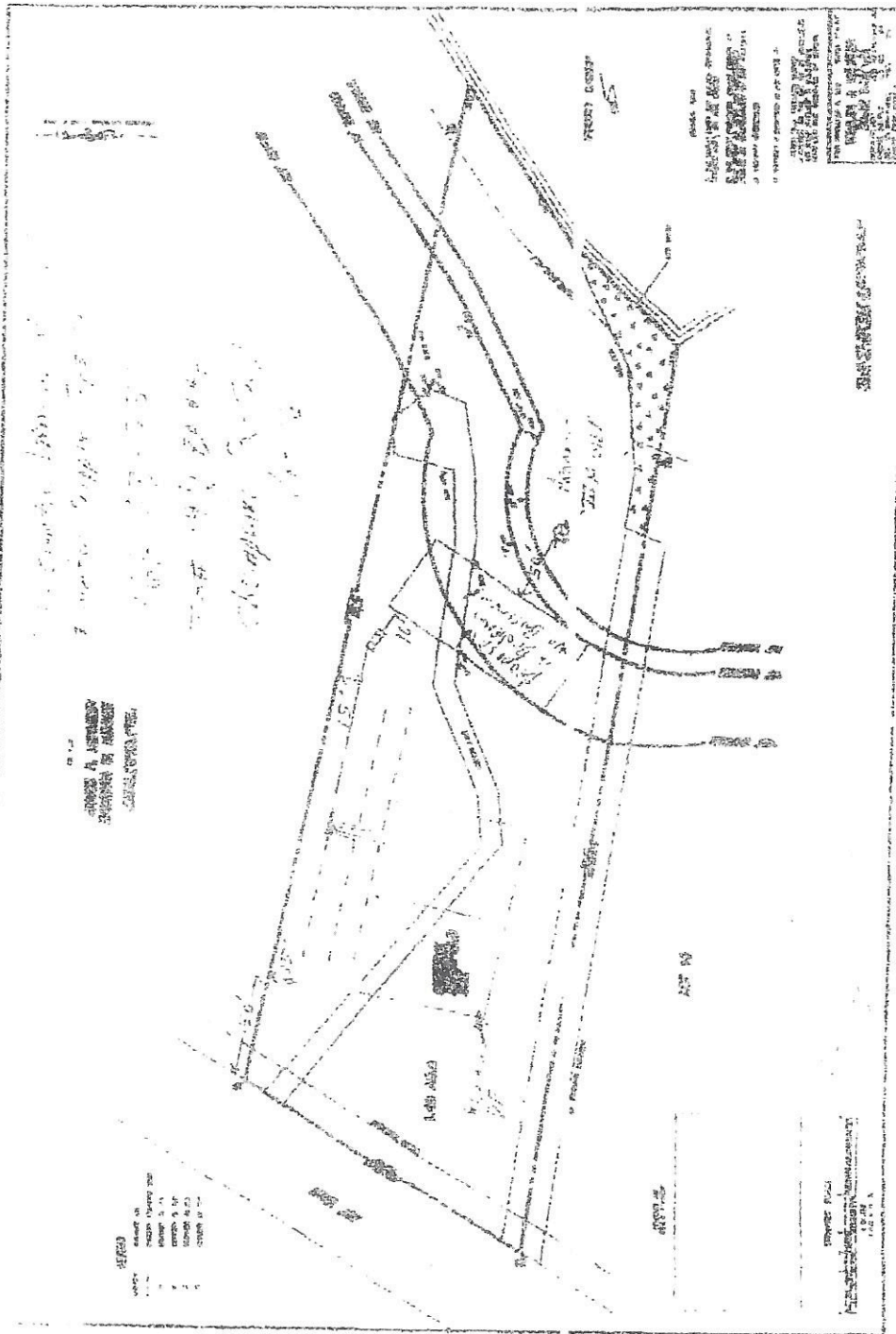


As built
5-60' EZFlow
lines

Owner: James + Barbara Kennedy
HDID: 166-03-751
Tax map: 19(i) 8A + 42

2888

19C(1) 14



As built
5-60' EZFlow
lines

Owner: James & Barbara Kennedy
 HDID: 166-03-751
 Tax map: 19(1) 8A & 42



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Sewage System Construction Inspection Report

Property Owner

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Columbia, Maryland 21046
 Phone:

Health Dept. ID: **166-03-751**
 Tax Map: **19C(1)16**

Locality: Northumberland

Property Location

Property Address: Cubbitt Cr.
 Subdivision: Chesa Cove
 Directions:

Sewer Line

Diameter: 4", Material: Sch 40 Plastic, Grade: 1 1/4"/10' minimum
 Inspected on April 22, 2005 by Rosalie Coultrip
 Satisfactory: **Yes**

Septic Tank(s)

Tank Identifier	Tank Size (gallons)	Tank Material
1		Concrete (pre-cast)

Total # Tanks: 1
 Gallons Total Septic Tank Volume
 Inspected on April 22, 2005 by Rosalie Coultrip
 Satisfactory: **Yes**

Treatment Device

Make and Model:
 Capacity:
 Inspected on April 22, 2005 by Rosalie Coultrip
 Satisfactory:

Effluent Conveyance System

Method: Gravity
 Make and Model:
 Dosing Volume: Drawdown:
 1/4 Day Storage: Yes Storage Volume: High Water Alarm: Yes
 Chamber Total Size:
 Inspected on April 22, 2005 by Rosalie Coultrip
 Satisfactory:

Conveyance Line

Diameter: 4" Material: Sch 40 Plastic
 Grade: 6"/100' minimum
 Inspected on April 22, 2005 by Rosalie Coultrip
 Satisfactory: **Yes** 80 ft with clean-out

Distribution System

Method: Gravity Distribution Box
Material: Concrete Box
Inspected on April 22, 2005 by Rosalie Coultrip
Satisfactory: **Yes**

Header Lines

Diameter: 4", Material: Smooth-bore plastic
Inspected on April 22, 2005 by Rosalie Coultrip
Satisfactory: **Yes**

Dispersal Area

Dispersal Method: Substituted System
Make and Model: Ring Industrial Group, EZflow, EZ1203H
Number of Trenches: 6, Trench Length: 60', Trench Width: 3'
Number of Units Installed per Trench: 18
Trench Bottom Depth: 36", Center to Center Spacing: 9'
Was the installed system a reduction from the original permitted design? Yes
Inspected on April 22, 2005 by Rosalie Coultrip
Satisfactory: **Yes**

Constructed by: J & J- Danny Franklin

Documentation Received:

Completion Statement Received By: Rosalie Coultrip on

As-Built Sketch Received By: Rosalie Coultrip on April 22, 2005

Notice of Substitution Received By: Rosalie Coultrip on

Overall Result

Satisfactory Construction: Yes

Approved for Operation Permit: No on need completion statement and water test results

I hereby certify that this system was installed substantially in accordance with the Sewage Handling and Disposal Regulations, relevant VDH policies, and manufacturer recommendations. All deviations from these standards of practice were determined to be minor variations, are noted above, and in my opinion will not materially affect the safe and sanitary operation of the system.

Rosalie Coultrip, Environmental Health Specialist Senior

May 6, 2005

Sewage System Design

Facility Information	
Facility Name:	North 19C(1)16 - Kennedy, James & Barbara
EHSS:	John Pittman
Completed By:	EHS
Date:	17-Dec-2003

Design Information	
Usage Type:	Residential
Number of Bedrooms:	4
Design (Peak) Flow:	600 Gallons Per Day
Average Daily Flow:	390
Comments:	

Sewer Line	
Sewer Line:	3" or 4" Sch. 40 PVC or equivalent
Comments:	

Septic Tank	
Capacity:	1200 Gallons
Number of Septic Tanks:	1
Comments:	

Conveyance and Distribution Details	
Method of distribution:	Gravity Distribution Box
Conveyance Line diameter:	4 Inches
Number of boxes required:	1
Number of ports per box:	8
Comments:	

Absorption Field		
Design Type:	Standard	Designed: 1440 sq. feet
Number of Trenches:	6	
Length:	80 Feet	
Width:	3 Feet	
Center to Center Spacing:	9 Feet	
Aggregate Depth:	13 Inches	
Installation Depth:	36 Inches	
Reserve Area Required:	0%	
Comments:		

John changed to 8-600's 1 month ago

THIS PERMIT IS
NOT TRANSFERABLE

PAGE 1 OF 3

Water Supply and/or Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health

NORTHVALE Health Department

Health Department
Identification Number 166-03-751
Map Reference 19 (1) 8A742

General Information

19C(1)16

Water Supply System: New Repair _____ Public _____ FHA _____ VA _____ Case No. _____
 Sewage Disposal System: New Repair _____ Expanded _____ Conditional _____ Public _____
 Based on the application for a sewage disposal system construction permit filed in accordance with Section 2.13 E, of the Sewage Handling and Disposal Regulations and/or Section 2.13 of the Private Well Regulations a construction permit is hereby issued to:
 Owner JAMES KENNEDY Telephone 410/381-8838
 Address 7505 MILDAS TOUCH, Columbia, MD 21046 For a Type I Sewage Disposal System or Well to be constructed on/at 360E, L 640, R into SUB 7 toward C&D Lot 16
 Subdivision CHS. COVE Section/Block _____ Lot 16 Actual or estimated water use 600 GPD

DESIGN	NOTE: SEWAGE DISPOSAL SYSTEM INSPECTION RESULTS
Water supply, existing: (describe) <u>NONE</u>	Water supply location: Satisfactory yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Completion Report _____ G. W. 2 Received: yes <input type="checkbox"/> no <input type="checkbox"/> not applicable <input type="checkbox"/>
To be installed: class <u>III A</u> cased <u>100' in. in. air vent grouted 204</u>	Building sewer: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Building sewer: <u>4" I.D. PVC Schedule 40, or equivalent.</u> Slope 1.25" per 10' (minimum). <input type="checkbox"/> Other _____	Pretreatment unit: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Septic tank: Capacity <u>1700</u> gals. (minimum). <input checked="" type="checkbox"/> Other <u>ACCESS RISER</u>	Inlet-outlet structure: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Inlet-outlet structure: PVC Schedule 40, 4" tees or equivalent. <input checked="" type="checkbox"/> Other <u>ZABE FILTER</u>	Pump & pump station: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Pump and pump station: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> describe and show design. if yes: _____	Conveyance method: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent. <input type="checkbox"/> Other _____	Distribution box: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Distribution box: Precast concrete with <u>8</u> ports. <input type="checkbox"/> Other _____	Header lines: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Header lines: Material: 4" I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2' into absorption trench. Slope 2" minimum. <input type="checkbox"/> Other _____	Percolation lines: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Percolation lines: Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'. <input type="checkbox"/> Other _____	Absorption trenches: yes <input type="checkbox"/> no <input type="checkbox"/> comments _____ Satisfactory
Absorption trenches: Square ft. required <u>1440</u> ; depth from ground surface to bottom of trench <u>36"</u> ; aggregate size <u>1/2" to 1/2"</u> Trench bottom slope <u>2" to 4" / 100"</u> center to center spacing <u>9'</u> ; trench width <u>3'</u> Depth of aggregate <u>13"</u> Trench length <u>80'</u> ; Number of trenches <u>6</u>	Date _____ Inspected and approved by: _____ _____ Sanitarian

5/45 7 sec. / LINE (6'6")

THIS PERMIT IS NOT TRANSFERABLE

Health Department Identification Number

YAGC 201-3
166-03-751

Schematic drawing of sewage disposal and/or water supply system and topographic features.

Show the lot lines of the building site, sketch of property showing any topographic features which may impact on the design of the well or sewage disposal system, including existing and/or proposed structures and sewage disposal systems and wells within 200 feet. The schematic drawing of the well site or area and/or sewage disposal system shall show sewer lines, pretreatment unit, pump station, conveyance system, and subsurface soil absorption system, reserve area, etc. When a nonpublic drinking water supply is to be permitted, show all sources of pollution within 200 feet.

The information required above has been drawn on the attached copy of the sketch submitted with the application. Attach additional sheets as necessary to illustrate the design.

- 1) PERMIT FOR 4 BEDROOM S.D.S., NO BASEMENT & NEW III A WELL,
- 2) INSTALL 1200 GAL. SEPTIC TANK WITH ACCESS RISER AND LABEL FILTER.
- 3) INSTALL 6-80' LINES ON 9' CENTERS, 3' WIDE TRENCHES 36" DEEP.
- 4) New III A well shall be a minimum of 50' from any source of contamination, including septic systems, termite treated foundations, and other wells.
- 5) Upon completion of well, owner shall submit to Health Department a copy of the well drillers log, and results of a satisfactory well analysis.

This sewage disposal system and/or water supply is to be constructed as specified by the permit or attached plans and specifications _____.

This sewage disposal system and/or well construction permit is null and void if (a) conditions are changed from those shown on the application (b) conditions are changed from those shown on the construction permit.

No part of any installation shall be covered or used until inspected, corrections made if necessary, and approved, by the local health department or unless expressly authorized by the local health dept. Any part of any installation which has been covered prior to approval shall be uncovered, if necessary, upon the direction of the Department.

Date: 12/17/03 Issued by: John A. Pittman
Sanitarian

Date: _____ Reviewed by: _____
Supervisory Sanitarian

This Construction Permit Valid/until
6/17/05

If FHA or VA financing

Reviewed by Date _____ Date _____
Supervisory Sanitarian Regional Sanitarian

Completion Statement

Commonwealth of Virginia
State Department of Health

19261516
Health Department Identification Number 166-03-751

Northumberland Health Department

Name of Company/Corporation/Individual: J & J, Inc.

Address: PO Box 145 Lively VA Telephone: 804-435-2888

Owner's Name James & Barbara Kennedy

Owner's Address 7505 Niden Ranch Columbus MD

Location of Installation: Lot 16 Block _____

Section: _____ Subdivision: Chesapeake Cove

Other: Tax Map 19 (1) 8A + 4A

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.

5/2/05
Date

J. B. Franklin, Pres.
Signature and Title



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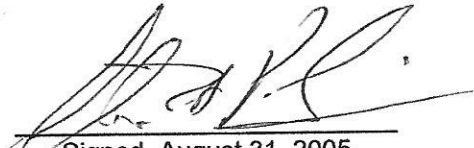
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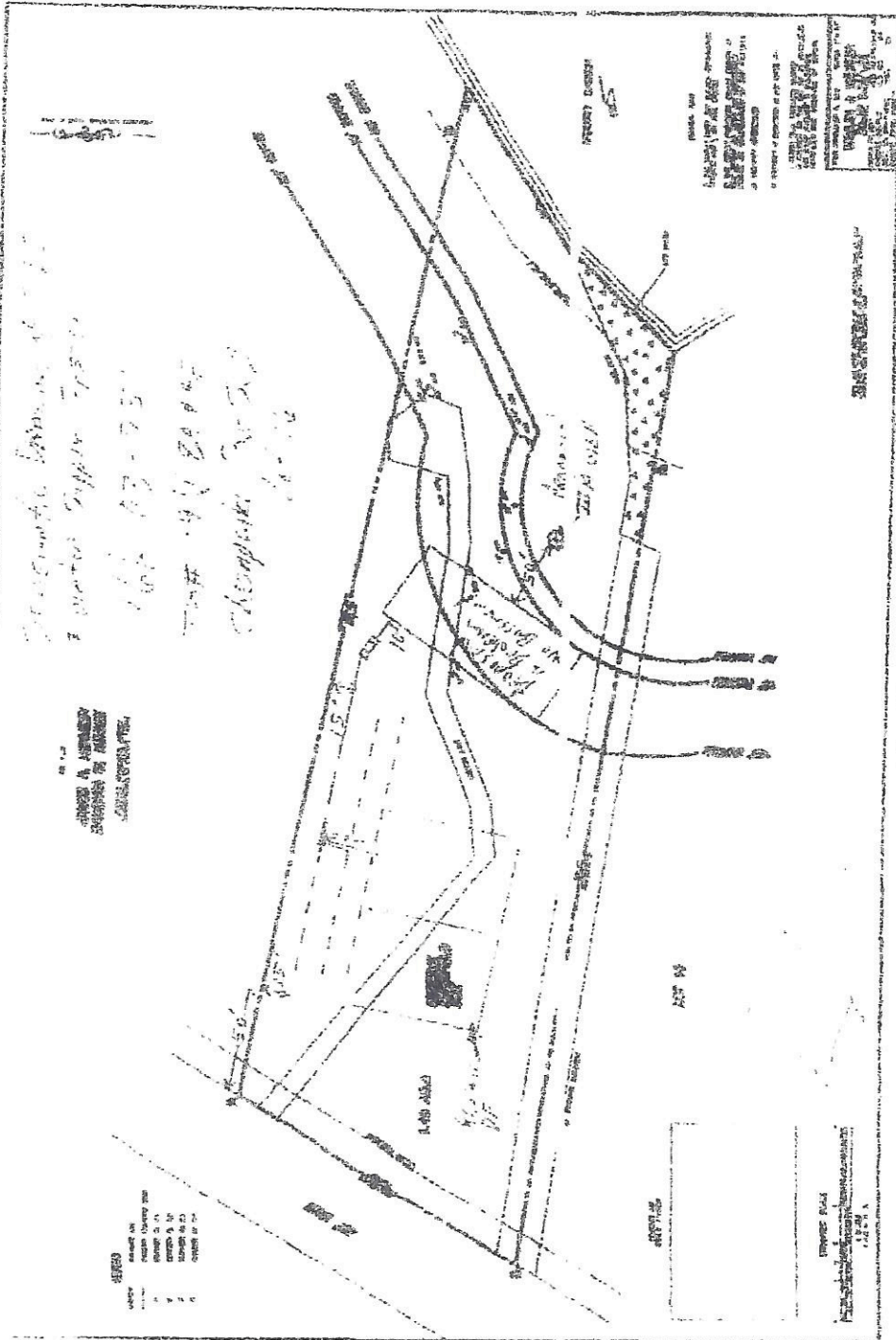
August 31, 2005
Effective Date

John H. Pittman
EHS


Signed August 31, 2005

2888

19C(1) 14



Line 700-2

Precinct 6, Township of 10
 7 water supply 7500
 166-03-751
 19C(1) 8A & 42
 Chempinski, J & S
 1970

As built
 5-60' EZ Flow
 lines

Owner: James & Barbara Kennedy
 HDID: 166-03-751
 Tax map: 19(1) 8A & 42



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Septic Tank(s)

Tank Identifier	Tank Size (gallons)	Tank Material
1		Concrete (pre-cast)

Total # Tanks: 1 Gallons Total Septic Tank Volume
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 Satisfactory: **Yes**

Treatment Device

Make and Model:
 Capacity:
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 Satisfactory:

Effluent Conveyance System

Method: Gravity
 Make and Model:
 Dosing Volume: Drawdown:
 1/4 Day Storage: Yes Storage Volume: High Water Alarm: Yes
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Diameter: 4", Material: Smooth-bore plastic
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Dispersal Area

Dispersal Method: Substituted System
Make and Model: Ring Industrial Group, EZflow, EZ1203H
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Number of Units Installed per Trench: 18
Trench Bottom Depth: 36", Center to Center Spacing: 9'
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May 6, 2005

Sewage System Design

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EHSS:	John Pittman
Completed By:	EHS
Date:	17-Dec-2003

Design Information

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Number of Bedrooms:	4
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Average Daily Flow:	390
Comments:	

Sewer Line

Sewer Line:	3" or 4" Sch. 40 PVC or equivalent
Comments:	

Septic Tank

Capacity:	1200 Gallons
Number of Septic Tanks:	1
Comments:	

Conveyance and Distribution Details

Method of distribution:	Gravity Distribution Box
Conveyance Line diameter:	4 Inches
Number of boxes required:	1
Number of ports per box:	8
Comments:	

Absorption Field

Design Type:	Standard	
Number of Trenches:	6	
Length:	80 Feet	Designed: 1440 sq. feet
Width:	3 Feet	
Center to Center Spacing:	9 Feet	
Aggregate Depth:	13 Inches	
Installation Depth:	36 Inches	
Reserve Area Required:	0%	
Comments:		

John changed to 8-60's 1 month ago