



Richmond County Health Department
PO BOX 700
Warsaw, Virginia 22572
(804) 333-0171 Voice
(804) 333-3447 Fax

Private Well Construction Permit

September 08, 2017

Tax Map/ GPIN #: 18A(1)34

HDID #: 179-17-0039

Property Address: E Sunrise Warsaw, VA
22572

Owner Name: Ronald E. Smith

Mailing Address: 37 Eagle Nest Dr.
Montross, Virginia 22520

Directions: Lot #34 lot is marked - notrespassing & Land Distrubing Permit.

Subdivision: Garland's Mill Pond

The attached drawings and below specifications constitute your permit to install a private well on the property referenced above. This permit is null and void if conditions are changed from those shown on your application or if conditions are changed from those shown on the attached construction drawings and specifications. VDH may revoke or modify any permit if, at a later date, it finds that the site conditions, well location, and/or design do not substantially comply with the Private Well Regulations, *12 VAC 5-630-10 et seq*, or if the well would threaten public health or the environment. There may be other local, state, or federal laws or regulations that apply to the proposed construction of this private well. The landowner is responsible at all times for complying with all applicable local, state, and federal laws and regulations, and for ensuring that the water well is properly located on the landowner's property and in the approved area indicated on the attached schematic.

Your private well must be inspected by a representative of the local health department. Your private well may not be placed into operation until you have obtained a Record of this Inspection (ROI) from the Richmond County Health Department.

Before you can obtain your ROI, you must provide the Health Department with a complete Water Well Completion Statement /GW-2 from your well driller and a record of a satisfactory bacteriological sample result.

Well Purpose: Domestic Drinking Water

Well Class: Class IIIA

Minimum Casing Depth: 115 '
Minimum Grout Depth: 35 '

Minimum distance from any current or future soil-poisoned termite treated foundation: 50'

Other Comments:

- Class IIIA or IIIB well must be located a minimum of 50 feet from any potential contamination source.
- Proposed Class IIIA or IIIB well must maintain 50 ft. setback from termite treated foundations.
- ****Building Foundations within 50 ft of any existing or proposed wells may NOT be termite treated using chemical soil poisons. Termiticide application must follow GMP # 132 and #150 (See attached Termiticide Agreement).****
- A Satisfactory bacterial sample result must be submitted to the local health department prior to issuance of well approval.
- A Uniform Water Well Completion Statement or GW-2 form is required prior to issuance of well approval.
- It shall be the landowner's responsibility to ensure that the water well is properly located on the landowner's property
- Downslope siting of wells from potential sources of pollution. Special precaution shall be taken when locating a well within a 60 degree arc directly downslope from any part of any existing or intended onsite sewage disposal system or other known source of pollution, including, but not limited to, buildings subject to termite or vermin treatment, or used to store polluting substances or storage tanks or storage areas for petroleum products or other deleterious substances. The minimum separation distance shall be: (i) increased by 25 feet for every 5.0% of slope; or (ii) *an increase shall be made to the minimum depth of grout and casing in the amount of five feet for every 5.0% of slope.*

THIS PERMIT EXPIRES: March 09, 2022 and is not transferable to another owner or location.

Issued by: 
Mark Brann, Environmental Health Specialist, Sr.
Attachments: Well Permit Drawing

Date: 09/08/17

0.7

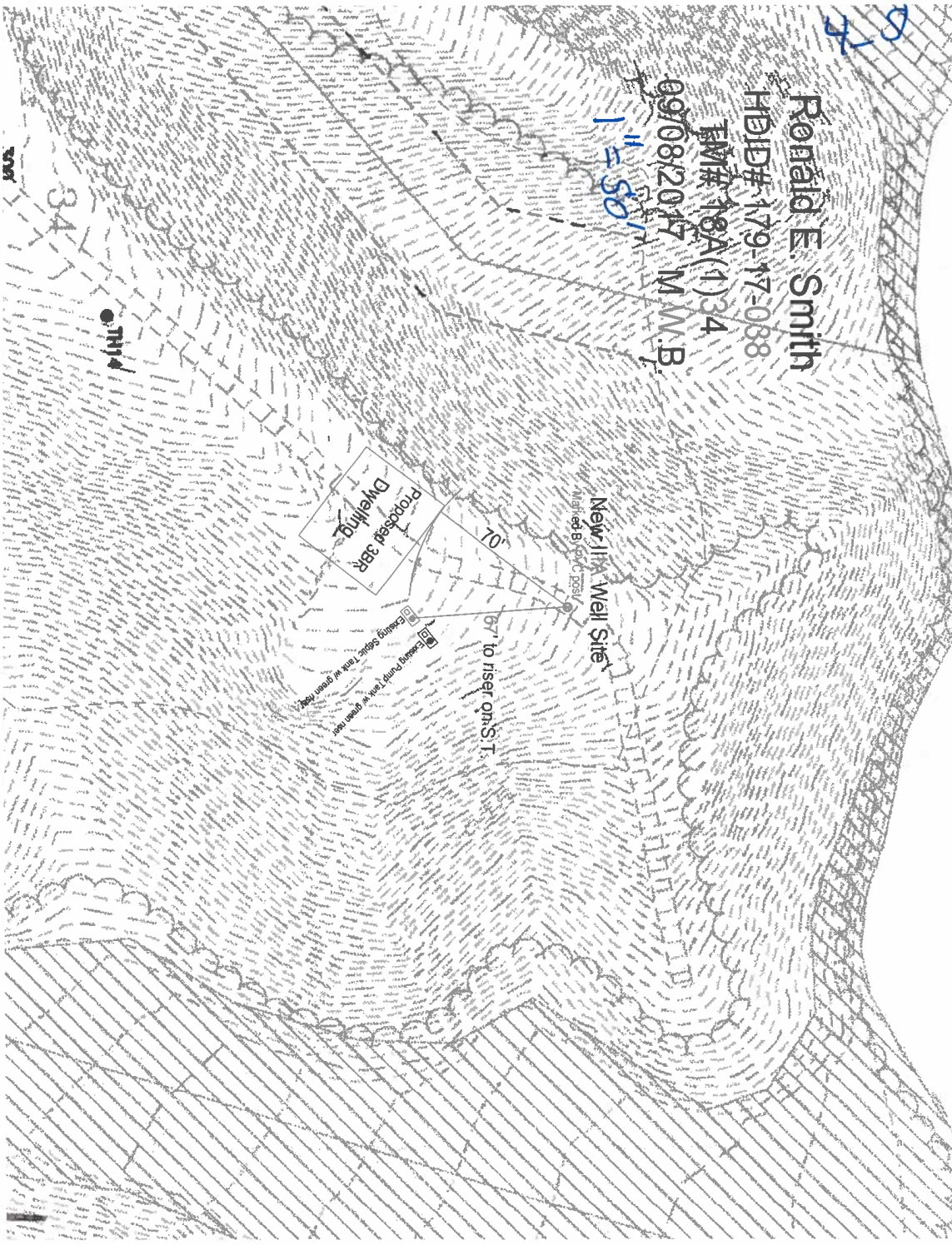
Ronald E. Smith

HDID# 179-17-088

TM# 18A(1)34

09/08/2017 M.W.B.

1" = 50'



34

TH14

34

Proposed 3BR Dwelling

New 11th Well Site

67' to riser on S.T.

Matched to 67' riser

1

S-S

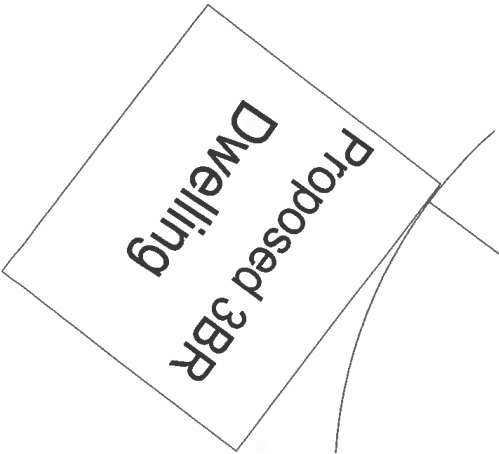
New IIIA Well Site

Marked By PVC post

1" = 20'

70'

67' to riser on S.T.



Existing Septic Tank w/ green riser

Existing Pump Tank w/ green riser

Commonwealth of Virginia

Application for: Sewage System Water Supply

VDH Use only
Health Department ID# 179-17-0039
Due Date _____

Owner Ronald Edward Smith, Sr.

Phone 804 445-5803

Mailing Address 37 Eagle Nest Drive, Manassas, VA, 22520

Phone _____

Agent _____

Fax _____

Mailing Address _____

Phone _____

Phone _____

Fax _____

Site Address Lot 34 Garland Lake Properties
Warsaw, VA, 22520

Email _____

Directions to Property: From Warsaw 360 East to left on Rt. 620, then Right on Lakota
then East Sunrise + Right
Subdivision Garland Lake Properties Section _____ Block _____ Lot 34

Tax Map 18A 1334 Other Property Identification _____ Dimension/Acreage of Property 5.5 Acres

Sewage System

Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) **only when ready to build.**

Certification Letter Construction Permit Voluntary Upgrade Repair Permit

Proposed Use:

Single Family Home (Number of Bedrooms _____) Multi-Family Dwelling (Total Number of Bedrooms _____)

Other (describe) _____

Basement? Yes No Walk-out Basement? Yes No Fixtures in Basement Yes No

Conditional permit desired? Yes No If yes, which conditions do you want? _____

Reduced water flow Limited Occupancy Intermittent or seasonal use Temporary use not to exceed 1 year

Do you wish to apply for a betterment loan eligibility letter? Yes No *There is a \$50 fee for determination of eligibility.

Water Supply

Will the water supply be Public or Private? Is the water supply Existing or Proposed?

If proposed, is this a replacement well? Yes No If yes, will the old well be abandoned? Yes No

Will any buildings within 50' of the proposed well be termite treated? Yes No

All Applicants

Is this a private sector OSE/PE application? Yes No If yes, is the OSE/PE package attached? Yes No

Is this property indeed to serve as your (owners) principal place of residence? Yes No

In order for VDH to process your application for a sewage system you must attached a plat of the property and a site sketch. For water supplies, a plat of the property is recommended and a site sketch is required. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted the property lines, building location and the proposed well and sewage sites must be clearly marked and the property sufficiently visible to see the topography.

I give permission to the Virginia Department of Health to enter onto the property described during normal business hours for the purpose of processing this application and to perform quality assurance checks of evaluations and designs certified by a private sector Onsite Soil Evaluator or Professional Engineer as necessary until the sewage disposal system and/or private water supply has been constructed and approved.

Ronald E. Smith, Sr.
Signature of Owner/ Agent

5.15.017
Date


This form contains personal information subject to disclosure under the Freedom of Information Act. Revised 12/1/04



SITE PLAN SKETCH
or attach scaled site plan (if available)

See attached

When there is a question on the location and/or the depth of a neighbor's well it will be necessary for you to get the well owner's verification in writing, with signature and date, as to the depth and/or location as stated on the submitted site plan.



Submitted by (please sign)

5.22.017

Date

Mail To: Richmond County Health Department
P.O. Box 700
Warsaw, VA 22572

INSTRUCTIONS FOR WELL AND SEPTIC PERMIT APPLICATIONS

Our goal is to process your application as quickly and accurately as possible. In order for us to achieve our goal, applicants must provide a **complete application (including an accurate site sketch), accurate directions to the property, and property lines and house site clearly and accurately marked on the property.** We cannot accept an incomplete application.

*The following **MUST** be attached to your application:*

1. Surveyed plat of your property
2. Tax Map Number or GPIN
3. Zoning/Chesapeake Bay approval, if required by your locality.
4. Proper fee: See attached fee chart
For septic repair there is no fee.

The following checklist is provided to assist you with the application process. The items below must be completed by the applicant before the application is submitted to the health department. If you have questions, or need assistance with your application, please ask any of the environmental health staff. We will be happy to assist you. **Please check each item on checklist when completed and return this form with application.** For all items that do not apply, please mark it with N/A or No

A. The Application

- Are all items properly filled in?
- Have you included a telephone number where you can be reached during the day?
- Are directions to the property clear?
- Have you included the tax map number (or GPIN)?
- Have you signed and dated the application?
- Do you have the proper fee?



B. Site sketch (These items may be drawn on a copy of the plat)

- Is the shape of property correct?
- Is the length of each property line indicated?
- Are the shape and dimensions of house (including any porches & decks) shown?
- Is the house location shown by measurements to at least two property corners or property lines?
- Is the location of driveway correct?
- Are all proposed or existing location of any utilities shown?
- Does the plat or site sketch show all legal easements located on property?
- Is the location of any septic systems, wells or buried fuel tanks within 200 feet of property shown?
- Have you shown the location and dimensions of planned accessory items (sheds, pools, etc.)?
- Have you indicated your preferred location for the well and septic system?

C. The building site for which the application is made

- Are the property lines clearly and accurately marked?
- Has the house site been clearly and accurately marked?
- Is the location of the property easily identified from the road?
- Have existing underground utilities been marked?
- Is the site sufficiently cleared of vegetation so that surface contours can be clearly seen?

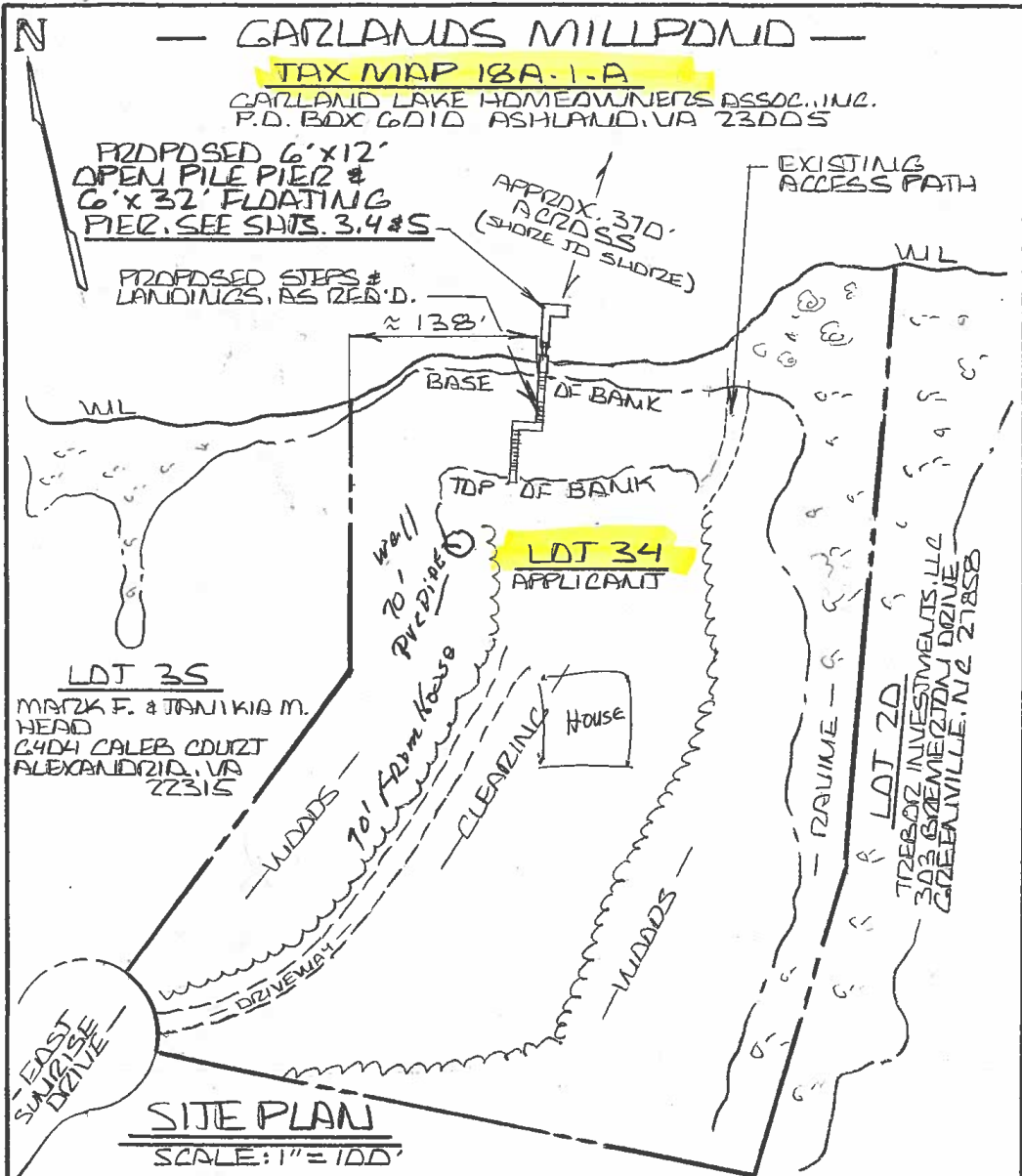


I understand that the health department cannot accept incomplete applications and that if the property is not clearly marked and property lines staked, my application will be DENIED.

I intend to begin construction on this property within 18 months. Yes No

Ronnie Smith
Signature

5-15-017
Date



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PROPOSED PRIVATE PIER
 RONALD E. SMITH
 37 EAGLES NEST DRIVE
 MOUNTROSS, VIRGINIA 22520

LOCATION: LOT 34 - GARLAND LAKE S'DIV., MARSHALL DIST.
 TAX MAP 18A-1, RICHMOND CO., VA
 SH: 1 OF 5 DATE: 4-4-17 BAYSHORE DESIGN



Richmond County Health Department
P.O. Box 700
Warsaw, VA 22572
(804) 333-4043 Voice
(804) 333-3447 Fax

Septic Tank - Soil Absorption System Construction Permit
Health Department ID Number: **179-12-0012**

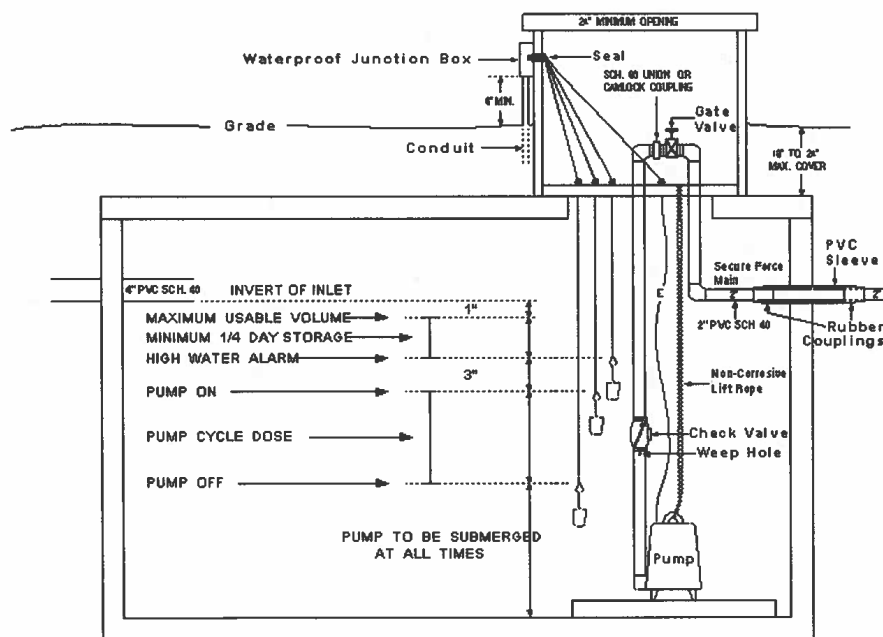
Owner / Agent Information	
Owner: Ronald E Smith 37 Eagle Nest Drive Montross, Virginia 22520 Owner Phone: (804) 493-7045	
Location Information	
Property Address: East Sunrise	Tax Map: 18A-1-34
Locality: Richmond	
Directions: Lot #34 lot is marked - notrespassing & Land Distrubing Permit.	
General Information	
System Type: Septic Tank Only and Aggregate Trench	Daily Flow: 450 gallons
Type of Property: Residential	Number of Bedrooms: 3 maximum
Sewer Line	Distribution Box Information
3" or 4" Sch. 40 PVC or equivalent (cleanouts required at 50' to 60' intervals)	No. of Boxes: 2 No. of Outlets: 10
Conveyance Line / Force Main Information	Header Line Information
Method: Pump to Distribution Box	ASTM F405 pipe or better (1500 # crush or equivalent)
Material: Pressure type with pressure-type joints	Minimum slope 2" per 100'
Pipe Diameter: 2"	
Minimum Slope: 6" per 100' (only for non-pump)	
Septic Tank - Inlet Outlet Structure	Percolation Lines and Absorption Area
Capacity: 1000 gallons	Slope: 2-4" per 100'
The inlet structure shall be 1-2 inches higher than the outlet structure and shall extend 6-8 inches below and 8-10 inches above the normal liquid level. The outlet structure shall extend 35-40% below the normal liquid level and 8-10 inches above the normal liquid level. To comply with the maintenance requirements of 12 VAC 5-610-817 the septic tank must be provided with one of the following three options: 1) Inspection port, 2) Effluent filter, 3) Reduced maintenance tank	Percolation Lines: 4" diameter Center to Center Spacing: 10' Installation Depth: 26" Depth of Aggregate: 13", Size of Aggregate: 0.5-1.5" Total Number of Laterals: 6 Laterals to be 55' long, x 3' wide Install 990 Square Feet Total 100% Reserve Area Required for Future Repairs

Pump Specifications

HD ID #: 179-12-0012

Pump Specifications	
Pump Chamber Size:	1000 gallons
Drawdown (Each Pump Cycle):	130 gallons
	6.5 inches
1/4 Day Storage:	113 gallons
Maximum Pump Cycle Time	3 mins., 37 secs.
Minimum Pump Capacity:	36 GPM
Minimum Pump Cycle Time	1 mins., 33 secs.
Maximum Pump Capacity:	84 GPM

Surge box will be placed ahead of distribution box.
 Force Main Shall be SCH. 40 PVC Pressure Pipe with Pressure Fittings.
 Pump Must Provide 36 Gallons per Minute at System Head.



Construction Drawing HD ID #: 179-12-0012

Owner Information	
Ronald E Smith 37 Eagle Nest Drive Montross, Virginia 22520	Phone: (804) 493-7045

Construction Drawing
Schematic drawing of sewage disposal system and topographic features attached.

Call Health Department (804-333-4043) 24hours prior to installation for final site location and design.

This sewage disposal system construction permit is null and void if conditions are changed from those shown on the application or construction permit. No part of any installation may be covered or used until inspected, corrections made if necessary and the system is approved. The inspection will normally be made by the system designer, who may be an A/SE, PE, or EHS. Any part of any installation which has been covered prior to approval shall be uncovered, if necessary, upon direction of the Department or the system designer.

System Design By: Mark Brann; Site Evaluation By: Mark Brann

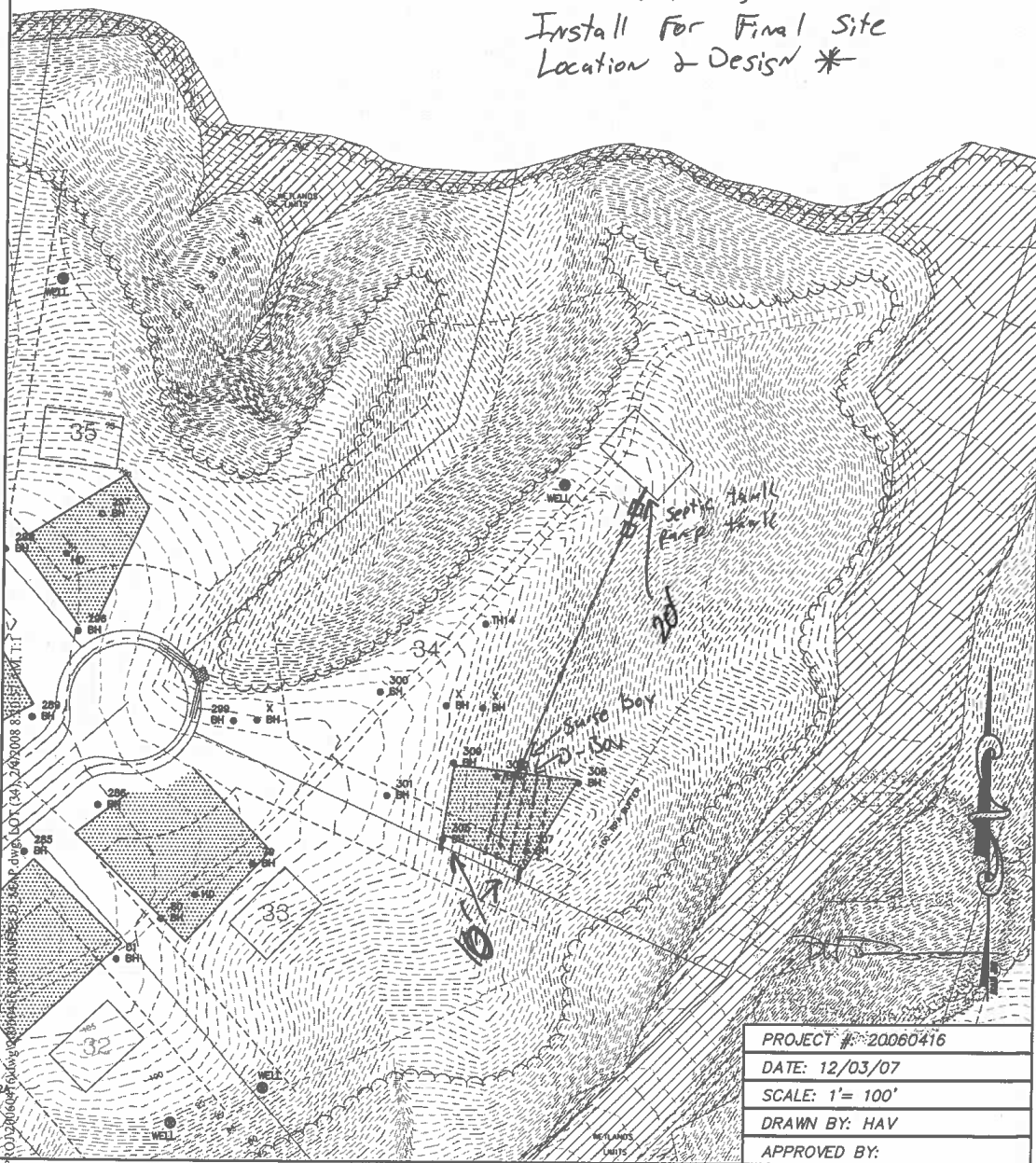


Mark Brann,
EHS

May 8, 2012
Issue Date

November 8, 2013
Expiration Date

*Call 24 Hours Prior To
Install for Final Site
Location & Design *



PROJECT #:	20060416
DATE:	12/03/07
SCALE:	1" = 100'
DRAWN BY:	HAV
APPROVED BY:	

TOWNES
SITE ENGINEERING
9850 Lori Road, Suite 201
Chesterfield, Virginia 23832
Phone: (804) 748-9011 Fax: (804) 748-2590
Email: townes@octownes.com

ASK US HOW

DRAINFIELD LOCATION
LOT #34
GARLAND MILL POND
MARSHALL DISTRICT
RICHMOND COUNTY, VIRGINIA

Please Note:

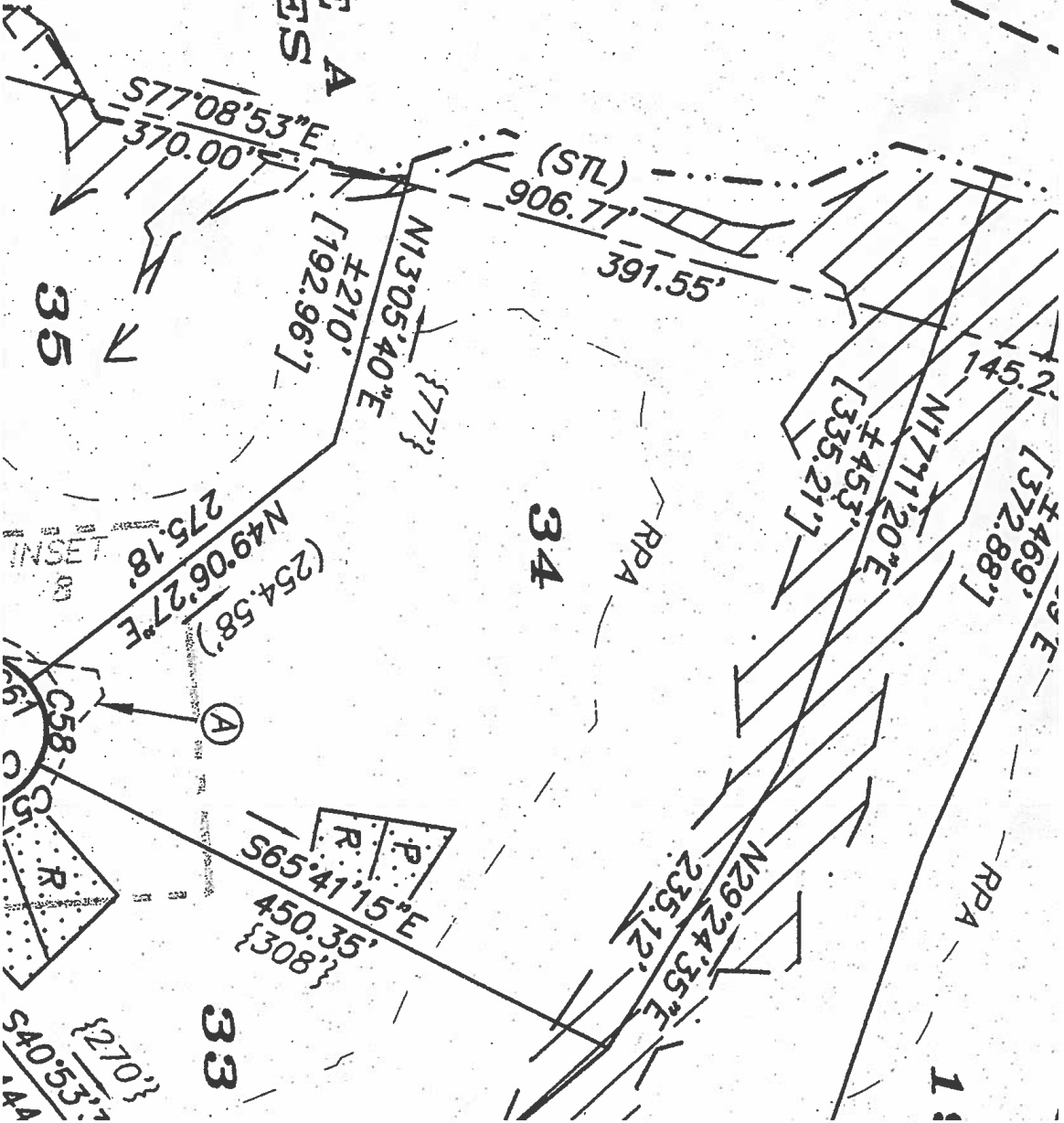
Call Health Department (804-333-4043) 24hours prior to installation for final site location and design.

- Divert roof drains and surface water from drainfield area.
- Drainfield shall be 5' minimum from property boundaries, 10' minimum from building foundations, and 20' minimum from below grade basements.
- Driveways and parking areas shall not be constructed over the drainfield unless the top of the gravel is deeper than 30 inches and the driveway is paved with Portland cement or bituminous concrete.
- Remove all maple trees and other hydrophyllic (water loving) plants from within 10' of drainfield area.
- This permit is null and void if the house location is changed and interferes with the approved sewage disposal system area.

SPACE A
1 ACRES

S68°16'41"E
2029.81'
(STL)

EDG



1/25/00



S40°53'1" (270')
44

33

34

35

1

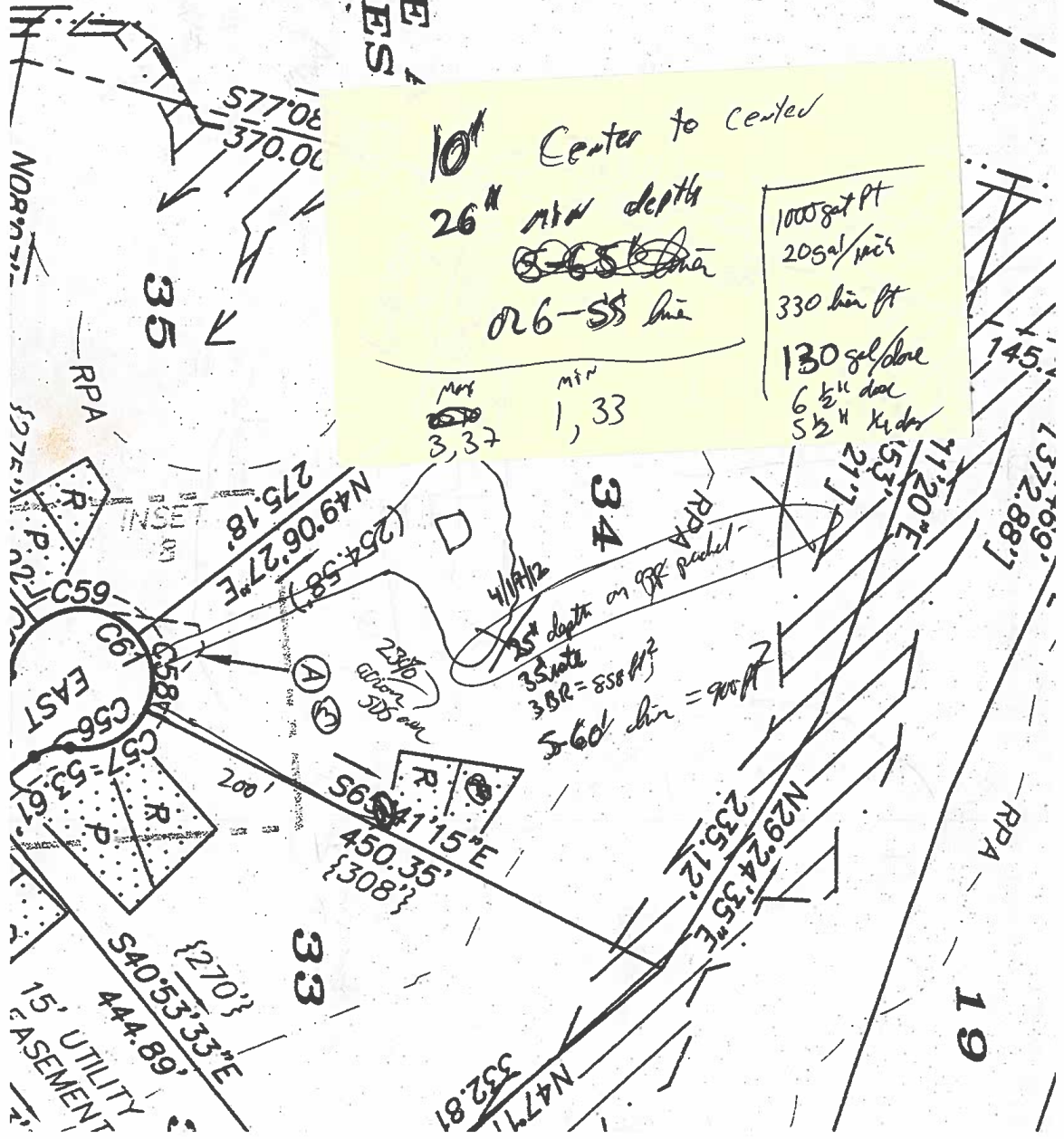
7 SPACES
1.1 ACRES

S68°16'41"E
2029.81'
(STL)

10' Center to Center
 26" min depth
~~3-65' line~~
 0.6-SS line

1000 gal Pt
20 gal/min
330 min ft
130 gal/done
6 1/2" dia
5 1/2" x dia

min 1, 33
 min 3, 37



S77°08'
370.00'
35

RPA

R
P
659

C584
C56
C57
C58
C59

190
EAST

R
P
R
P

S40°53'33"E
444.89'

15' UTILITY
EASEMENT

N49°06'27"E
275.18'

N49°06'27"E
(254.58')

2316
0.000
SS

R
P
659

S69°41'15"E
450.35'
{308}

33

34

35' depth on PRR product
3 BR = 858 ft
5-60' dia = 900 ft

R
P
659

N29°24'35"E
235.12'

N47°1'

352.81'

RPA

153

71°20'E
217.7'

1372.09'

RPA

19

145

153

153

153

153

153

9/17/12

Ten Burys

- ① 0 10yr 4/3 SL
- 2 10yr 5/4 SL
- 16 10yr 5/6 SCL LT
- 21 SAME SCL/CL (firm) ✓ 7/2, 5yr 5/6
- 42 7.5yr 5/6 SL/SCL ✓ 5yr 4/6 + few c pecks
- X60

- ② 0 - 10yr 4/3 SL
- 2 - 10yr 5/4 SL
- 10 - 10yr 5/6 SCL (LT)
- 16 - 10yr 5/6 SCL
- 30 - 10yr 5/6 SL ✓ (peck)
- 36 → submission Fc frags 7.5yr 5/6, 5/6 ✓ 5yr 5/6, 4/6 +
- 40 → 60 feet 10yr 7/3 (in pecks)

- ③ 0 - Han
- 44 FiP ✓ red 2 Cov

* Rem face main as close to edge of slope off as possible

S - 60' lin = 900 ft.²
 35-40 rate
 40 = 942 ft.²
 25 858

* 23% slope
 on 50' across SDS area
 from Tree in DW

INSTRUCTIONS FOR WELL AND SEPTIC PERMIT APPLICATIONS

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The following MUST be attached to your application:

1. Surveyed plat of your property
2. Tax Map Number or GPIN
3. Zoning/Chesapeake Bay approval, if required by your locality.
4. Proper fee: See attached fee chart

For septic repair and well replacement (if old well is abandoned) there is no fee.

The following checklist is provided to assist you with the application process. The items below must be completed by the applicant before the application is submitted to the health department. If you have questions, or need assistance with your application, please ask any of the environmental health staff. We will be happy to assist you. Please check each item on checklist when completed and return this form with application.

A. The Application

- Are all items properly filled in?
- Have you included a telephone number where you can be reached during the day?
- Are directions to the property clear?
- Have you included the tax map number (or GPIN)?
- Have you signed and dated the application?
- Do you have the proper fee?

B. Site sketch (These items may be drawn on a copy of the plat)

- Is the shape of property correct?
- Is the length of each property line indicated?
- Are the shape and dimensions of house (including any porches & decks) shown?
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- Is the location of driveway correct?
- Are all proposed or existing location of any utilities shown?
- Does the plat or site sketch show all legal easements located on property?
- Is the location of any septic systems, wells or buried fuel tanks within 200 feet of property shown?
- Have you shown the location and dimensions planned accessory items (sheds, pools, etc.)?
- Have you indicate your preferred location for the well and septic system?

C. The building site for which the application is made

- Are the property lines clearly and accurately marked?
- Has the house site been clearly and accurately marked?
- Is the location of property easily identified from the road?
- Have existing underground utilities been marked?
- Is the site sufficiently cleared of vegetation that surface contours can be clearly seen?

I understand that the health department cannot accept incomplete applications and that if the property is not clearly marked and property lines staked, my application will be DENIED.

I intend to begin construction on this property within 18 months. Yes No

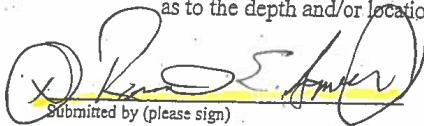
Robert E. Amos
Signature

3-6-12
Date

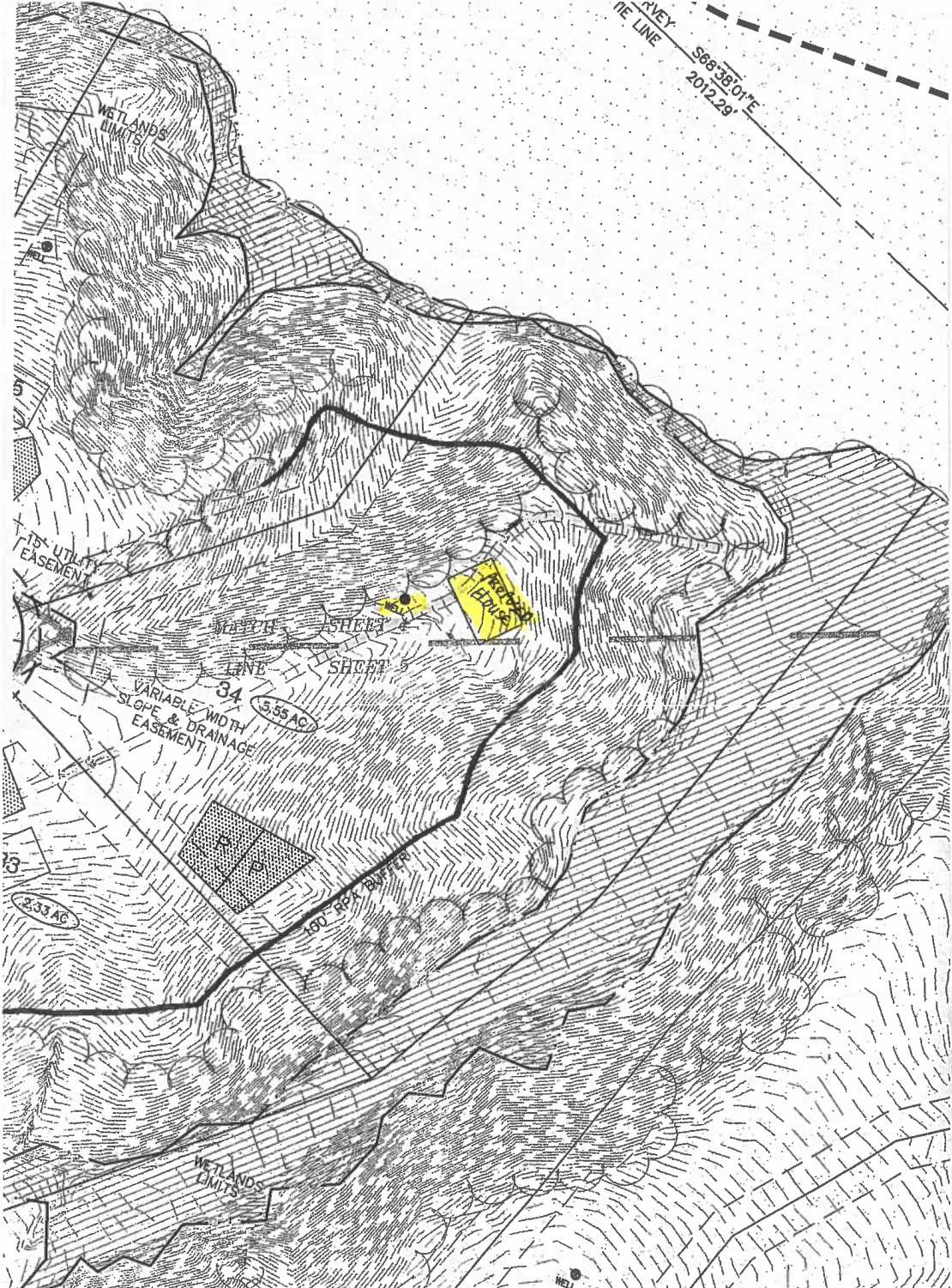
SITE PLAN SKETCH
or attach scaled site plan (if available)

See attached

When there is a question on the location and/or the depth of a neighbors well it will be necessary for you to get the well owners verification in writing, with signature and date, as to the depth and/or location as stated on the submitted site plan.


Submitted by (please sign)

03/26/12
Date



KEY TO LINE
S88°38'01"E
2012.28'

WETLANDS LIMITS

15' UTILITY EASEMENT

MAP SHEET

LINE SHEET 5

VARIABLE WIDTH SLOPE & DRAINAGE EASEMENT

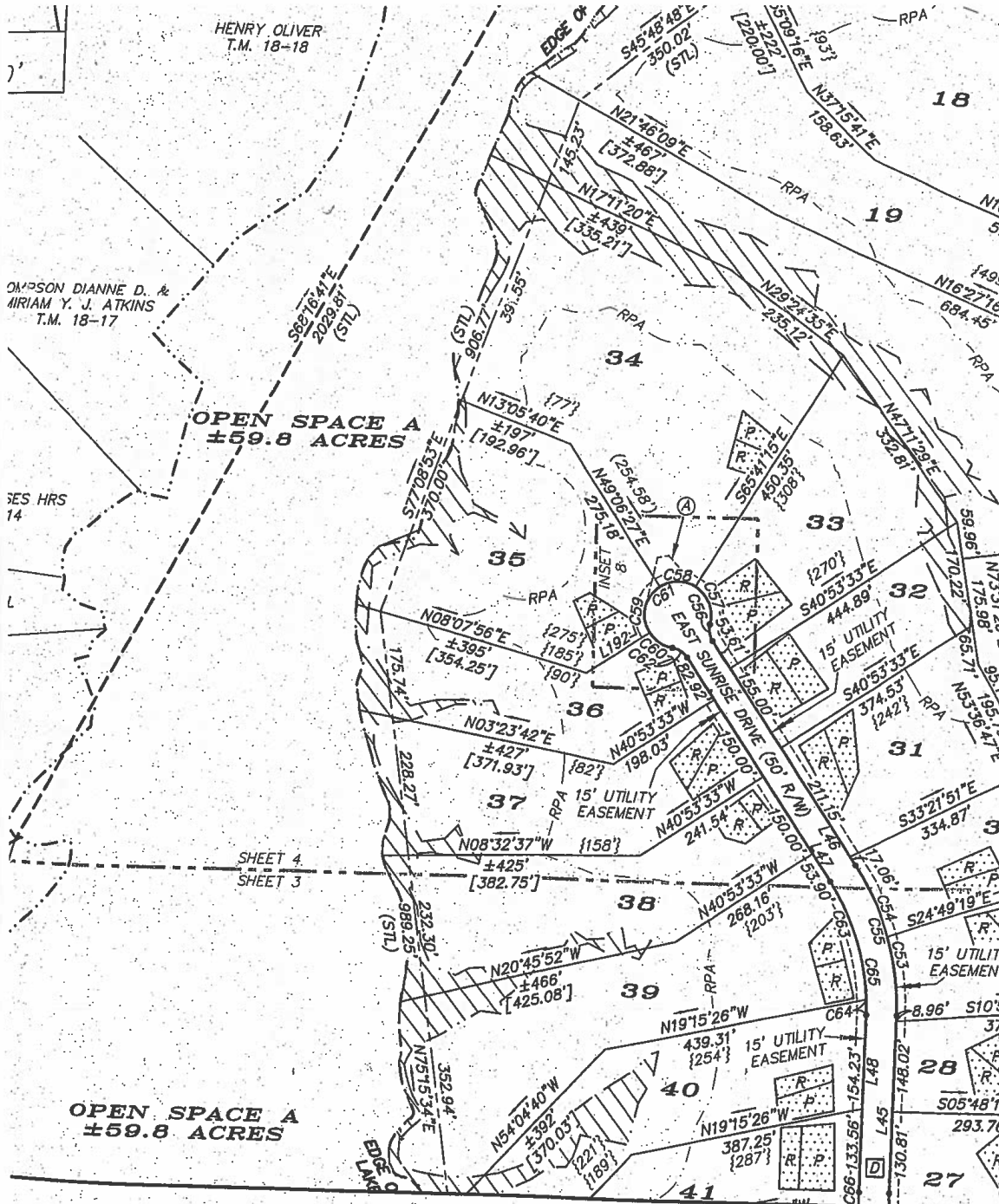
34 9.55 AC

2.33 AC

160' ROCK PILE

WETLANDS LIMITS





HENRY OLIVER
T.M. 18-18

OMPSON DIANNE D. &
MIRIAM Y. J. ATKINS
T.M. 18-17

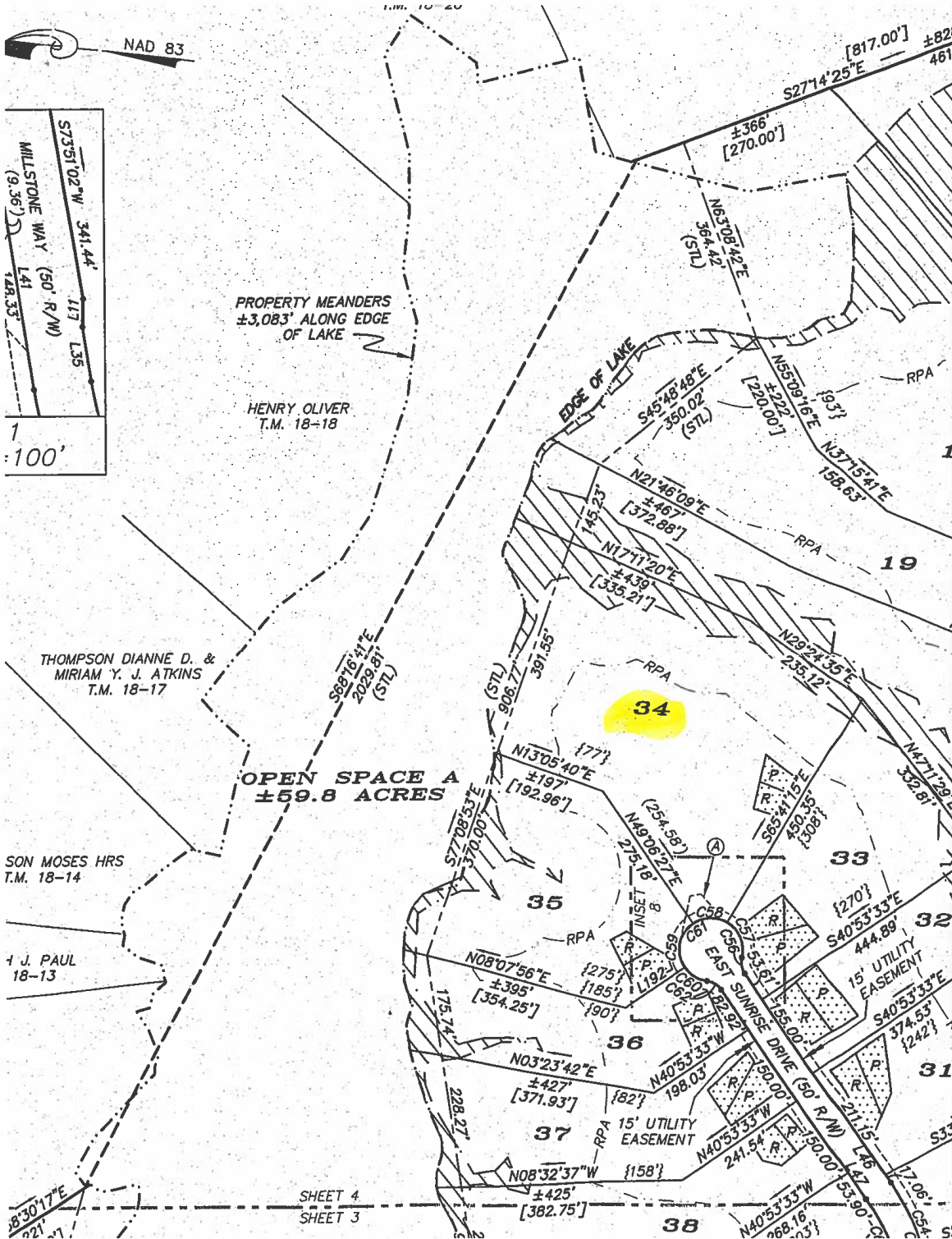
OPEN SPACE A
±59.8 ACRES

SES HRS
14

SHEET 4
SHEET 3

OPEN SPACE A
±59.8 ACRES

CHECKED BY EN



Commonwealth of Virginia

Application for: Sewage System Water Supply

Townes Project # 20060416

VDH Use Only	
Health Department ID#	_____
Duc Date	_____

Owner David Girouard
Mailing Address 8044 Goodlife Court
Mechanicsville, Va. 23111
Agent Robert D. Bowers AOSE, Townes Site Engineering
Mailing Address 9850 Lori Road Suite 201
Cheserfield, Va. 23832
Site Address _____
Directions to Property: _____

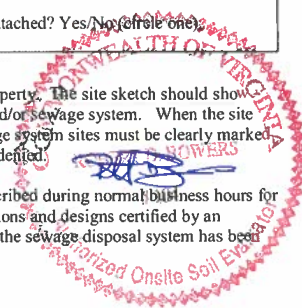
Phone 804-539-6734
Phone _____
Fax _____
Phone 804-748-9011
Phone _____
Fax 804-748-2590
Email _____

Subdivision Garlands Mill Pond Section _____ Block _____ Lot 34
Tax Map _____ Other Property Identification _____ Dimension/Acreage of Property _____

Sewage System	
Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) only when ready to build.	
For New Construction: <input checked="" type="checkbox"/> Certification Letter	Construction Permit
For Existing Construction: <input type="checkbox"/> Repair <input type="checkbox"/> Modification	Expansion <input type="checkbox"/> Replacement
Proposed Use:	
<input checked="" type="checkbox"/> Single Family Home (Number of Bedrooms <u>4</u>)	Multi-Family Dwelling (Total Number of Bedrooms _____)
Other (describe) _____	
Will there be a basement: Yes/No (circle one). If yes, will there be fixtures in Basement? Yes/No (circle one).	
Are any conditions proposed on this construction permit? Yes/No (circle one). If yes, please check or describe all proposed conditions that apply: <input type="checkbox"/> Reduced water flow <input type="checkbox"/> Limited occupancy <input type="checkbox"/> Intermittent of seasonal use <input type="checkbox"/> Temporary use not to exceed 1 year <input type="checkbox"/> Other (describe _____)	
Water Supply	
Will the water supply be Public or Private (circle one). Is the water supply Existing or Proposed (circle one).	
If proposed, is this a replacement well? Yes/No (circle one). Will the old well be abandoned? Yes/No (circle one).	
Have any buildings within 100' of the proposed well been termite treated? Yes /No (circle one).	
All Applicants	
Is this an AOSE/PE application? Yes/No (circle one) If yes, is the AOSE package attached? Yes/No (circle one)	

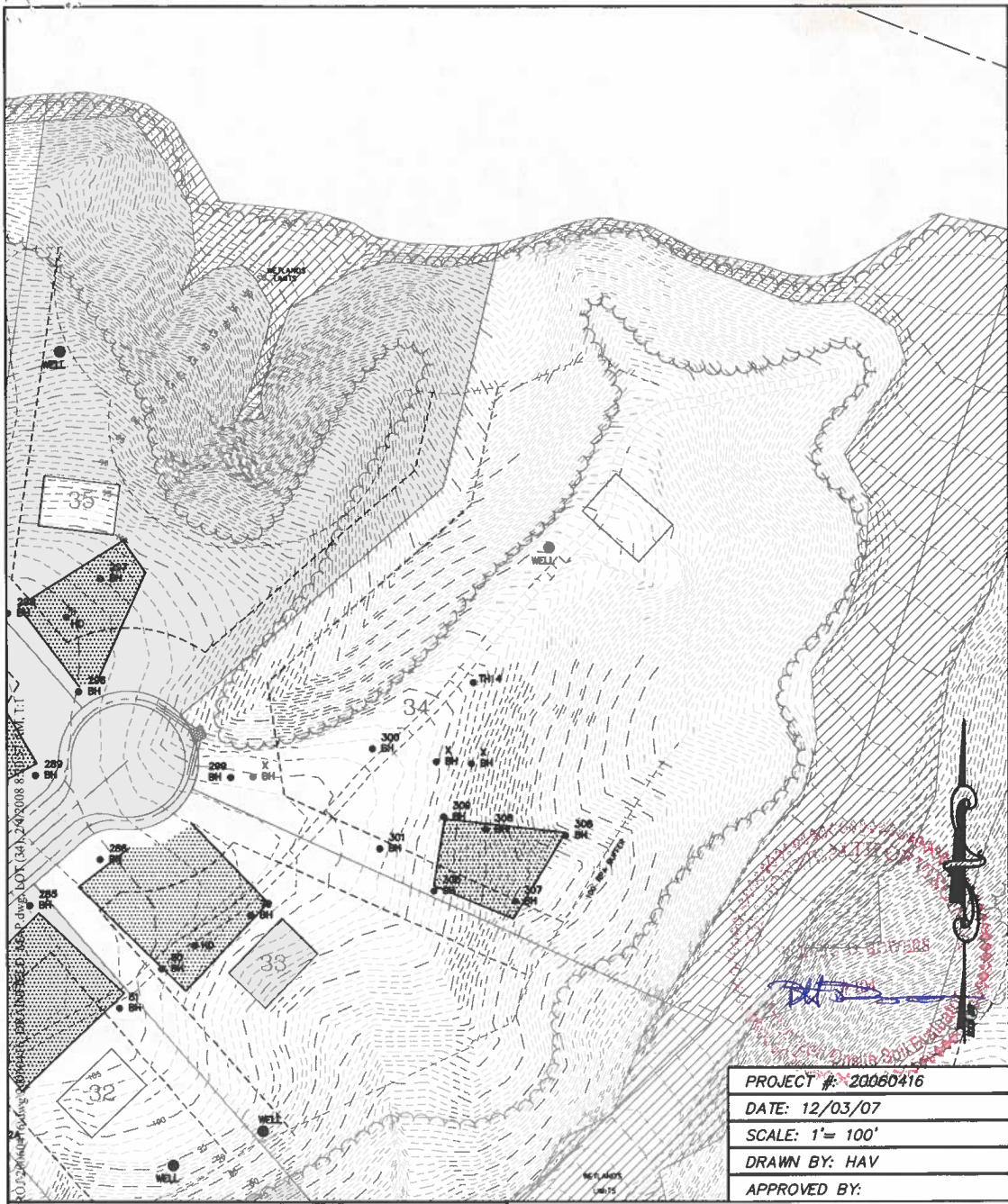
In order for VDH to process your application you must attach a site sketch and plat of the property. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted the property lines, building location and the proposed well and sewage system sites must be clearly marked and the property sufficiently visible to see the topography, otherwise this application will be denied.

I give permission to the Virginia Department of Health (VDH) to enter onto the property described during normal business hours for the purpose of processing this application and to perform quality assurance checks of evaluations and designs certified by an Authorized Onsite Soil Evaluator (AOSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.



Signature of Owner/Agent _____

Date _____



PROJECT #:	20060416
DATE:	12/03/07
SCALE:	1" = 100'
DRAWN BY:	HAV
APPROVED BY:	



TOWNES
 SITE ENGINEERING
 9950 Lori Road, Suite 201
 Chesterfield, Virginia 23832
 Phone: (804) 748-9011 Fax: (804) 748-2590
 Email: townes@ctownes.com

DRAINFIELD LOCATION
 LOT #34
 GARLAND MILL POND
 MARSHALL DISTRICT
 RICHMOND COUNTY, VIRGINIA

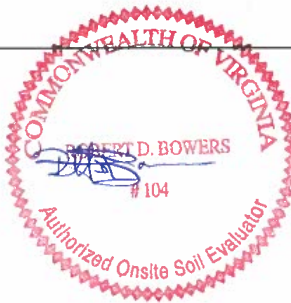
Abbreviated Design Form

For use with gravity, pump to gravity, enhanced flow, and low pressure distribution (LPD) sewage system designs and when applying for a certification letter or subdivision approval.

Property ID: Garlands Mill Pond Lot 34

Design Basis	
Estimated percolation rate: <u>35</u>	Number of bedrooms: <u>4</u>
Proposed distribution method (select one):	
Gravity, Pump to Gravity, or Enhanced Flow: _____	LPD or drip dispersal: <u>Alt.</u>
Square feet of trench bottom required per bedroom (from Table 5.4 of SHDR) based on the distribution method selected above:	
Square feet per bedroom: <u>119</u>	Total square feet required: <u>476</u>

Area Calculations	
Number of trenches: <u>3</u>	Length of trenches: <u>55'</u>
Width of trenches: <u>3'</u>	Center to center spacing: <u>10'</u>
Reserve required? <u>Yes</u>	Percent reserve area required: <u>100</u>
Total width of required absorption area: <u>48'</u>	
<p>The required width is calculated by multiplying the center-to-center spacing by the number of trenches and adding 1 trench width plus any required reserve area. If the topography is not uniform across the length of the site the trenches will need to flare apart on one end to maintain contour. When this occurs it is necessary to use a center-to-center spacing that accounts for the flair or the installer will not be able to fit the system within the approved area. It is perfectly acceptable to have more area available, especially up and down the slope, than is required.</p>	
Length of available area: <u>55'</u>	Total width of available area: <u>100'</u>




Certification Statement

Property ID: Garlands Mill Pond Lot 34

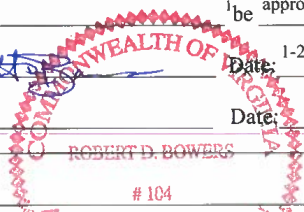
AOSE or Consultant Certification

This is to certify according to §32.1-163.5 of the *Code of Virginia* that work submitted for the referred property is in accordance to and complies with the *Sewage Handling and Disposal Regulations* of the Virginia Department of Health.

I recommend a subdivision approval ¹ be approved ²

AOSE Robert D. Bowers  ³ Date: 1-22-08

Soil Consultant _____ Date: _____



Professional Engineer Certification

If the submission contains a certification by a professional engineer in consultation with an AOSE, the following statement shall be signed and sealed:

I hereby certify that the evaluations and designs contained herein (refer to subdivision, lot, etc.) were conducted in accordance with the *Sewage Handling and Disposal Regulations* (12 VAC 5-610-10 et seq., the '*Regulations*') and the policies of the Virginia Department of Health for implementation of those *Regulations*. Furthermore, I certify that the evaluations and designs comply with the minimum requirements of the *Regulations*.

I recommend a _____ ¹ be _____ ²

Licensed PE _____ ³ Date: _____

(Sign and Seal)

¹ This blank must be filled in with one of the following terms: "permit", "certification letter", or "subdivision approval".

² This blank must be filled in with either the term "approved" or "denied".

³ Note: use of these forms for certification is optional for Professional Engineers. VDH understands that the PE stamp on the evaluation and design is sufficient to certify that he/she is submitting the materials in compliance with all applicable regulations.

LIMITATIONS

This report has been prepared for the exclusive use of the referenced client for specific application to the subject site. The report was prepared in accordance with generally accepted standards of practice for geotechnical services. No other warranty, either expressed or implied, is made. This report is not to be reproduced, either in whole or in part, without written consent from **TOWNES SITE ENGINEERING**. The contents of this report should not be construed as **TOWNES SITE ENGINEERING** recommendation to either purchase, sell or develop the subject site. However, this report may be relied upon by review and/or enforcement agencies with regard to enforcement of policies and codes as they may pertain to the development of this project.

Our conclusions and recommendations are based upon information provided to us by others, our site observations, and professional judgment. To the best of our knowledge, information provided by others is true and correct, unless otherwise noted; however, **TOWNES SITE ENGINEERING** is not responsible for the accuracy of information provided by others.

Our on-site observations pertain only to specific locations at specific times on specific dates. Our observations and conclusions do not reflect variations in subsurface conditions that may exist between sampling locations, in unexplored areas of the site, or at times other than those represented by our observations. Townes will not assume any liability for errors or omissions that result from failure to follow recommendations in this report by any party; direct or indirect.

