AOSE/PE Report for Construction Permit Lot _ Section _, Subdivision Lewis Ford Estates _, Campbell, County Location of property: GPIN or Tax Map # ______Latitude/Longitude LOT 3 Applicant or Client and address: Prepared by AOSE/PE (name and address): David B. Beahm 12719-D East Lynchburg-Salem Tnpk Forest, VA 24502 Date of Report: 2/19/2010 AOSE/PE Job Number: Revision Date: _____, Health Dept. ID. No.: Contents/Index of this report:² Please refer to Table of Contents on Page 2 Certification Statement(s)³ I hereby certify that the evaluations and/or designs contained herein were conducted in accordance with the Sewage Handling and Disposal Regulations (12 VAC5-610), the Private Well Regulations (12 VAC5-615), and other applicable policies of the Virginia Department of Health. Furthermore, I certify that my evaluation and/or design contained herein complies with all applicable laws, regulations, and policies implemented by the Virginia Department of Health. I recommend a Subdivision Approval

¹ Insert appropriate title: "Construction Permit", "Subdivision Approval", "Certification Letter"

² Examples include: "Soil Information Summary", "Soil Profile Descriptions", "Water Supply Design Specifications",

[&]quot;Primary/Reserve Design Specifications", "Construction Drawings", "Site Sketch", "Product Specification Sheet"

³ PE work is regulated by the Department of Professional and Occupational Regulation. This section is considered optional for PEs. ⁴ Fill in this blank with the appropriate term: "certification letter", "construction permit", or "subdivision approval"

⁵ Fill in this blank with the appropriate term: "approved", or "denied"

TABLE OF CONTENTS

- AOSE Report Cover Page
 Table of Contents
- 3. Site and Soil Evaluation Report
- Abbreviated Design Form
 Soil Profile Description
 Certification Statement

Refer to attached Subdivision Drainfield Map (one map)

Health	Department	ID=	
Due Date	·		

Site and Soil Evaluation Report

(For certification letters and subdivisions)

Consul I formation				
General Information				
Date: 2/19/2010 Campbell County Health Department				
Applicant: Watt Foster				
Telephone Number: 434-376-2322				
Address: P. O. Box 190; Brookneal, Virginia 24528				
Owner : Watt Foster Address : Same				
Location: Campbell County				
Subdivision <u>Lewis Ford Estates</u> Block/Section Lot				
Soil Information Summary				
1. Position in landscape satisfactory Yes ⊠ No □ Describe: Side Slope				
2. Slope				
3. Depth to rock/impervious strata (inches):Max. Min. None X				
4. Free water present No ⊠ Yes □ Range in inches				
5. Depth to seasonal water table (gray mottling or gray color) none				
6. Soil percolation rate estimated Yes ⊠ Texture group □ I ☒ II □ III □ IV No □ Estimated rate ### Texture group □ I ☒ II □ III □ IV				
7. Percolation test performed Yes ☐ (constant head permeameter) No ☒				
Name and title of evalgator. David B. Bealyn, AOSE 000182				
1/1 /// // //				
Signature: //www.b./b./be/m				
d / D la				
Department Use				
Site approved: Drainfield trench bottoms to be placed at(inches) depth at site designated on permit.				
Site disapproved:				
Reasons for rejection: (check all that apply)				
 Position in landscape subject to flooding or periodic saturation. 				
Insufficient depth of suitable soil over hard rock.				
3 Insufficient depth of suitable soil to seasonal water table.				
4. Rates of absorption too slow.				
5 Insufficient area of acceptable soil for required drainfield, and/or Reserve Area.				
6. Proposed system too close to well. 7. Other (Specify)				
/Outer (Specify)				

Abbreviated Design Form

This form is 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.

This abbreviated design covers the ⊠ primary and reserve area, □ only the primary area, □ only the reserve area (check one) for <u>Lewis Ford Estates Lot</u> (property ID).
Design Basis
Total length of available area (feet): 100 Total width of available area (feet): 55
Estimated Perc. Rate (min./inch): 45 at 53 in. (depth) Number of bedrooms (or GPD): 4
Conveyance Method ¹ : gravity Distribution method ² (specify): gravity (conventional)
Dispersal system basis ³ Table 5.4 LGMI required? No (Yes/No)
Effluent quality required: Primary (Primary, Secondary, Advanced Secondary)
Square feet per bedroom: 344 Total trench bottom area required (sq.ft.) 4,376
Gravity, pump, siphon Enhanced flow, LPD, or Drip Dispersal Table 5.4 of SHDR or identify the GMP used
Area Calculations
Number of trenches (Note if a pad is used) Length of pad or trenches (ft.): (DO
Width of pad or trenches (ft.):
Reserve required? <u>no</u> Percent reserve area required: <u>na</u>
Total width of absorption area required (ft.) 39 Total trench bottom area provided (sq.ft.): 1,500
The required width is calculated by multiplying the center-to-center spacing by one less than the number of trenches and adding I 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.

Lot 3 Soil Profile Descriptions (Refer to Drainfield Map for locations)

SB-3

Horizon	Depth (inches)	Description	Texture Group
A	0-6	yellowish-brown 10YR5/4; heavy loam	II
Bt	6-39	Strong brown 7.5YR5/6 with brownish-yellow 10YR6/6 weathered sericite schist coarse fragments; clay loam	III
С	39-72+	Reddish-yellow 7.5YR6/6 with very pale brown 10YR7/4 weathered channers; sericite schist saprolite; very soft; loam to light loam	П

SB-4

More limited permeability throughout profile with possible redox features at less than 60inches below grade surface.

SB-17

Horizon	Depth (inches)	Description	Texture Group
A	0-5	Yellowish-brown 10YR5/4; heavy loam	II
Bt1	5-31	Red 2.5YR4/8; heavy clay loam	III
BC	31-38	Yellowish-red 5YR5/8; light clay loam	III
С	38-72+	Reddish-yellow 7.5YR6/6; loam to light loam; very soft	· II

SB-18

Horizon	Depth (inches)	Description	Texture
			Group
A	0-5	Yellowish-brown 10YR5/4; heavy loam	\mathbf{II}
Bt	5-28	Yellowish-red 5YR5/6; few white 5YR8/1 plagioclase (lithochromic) mottles; clay loam	III
C 1	28-41	Yellowish-red 5YR5/6; common white 5YR8/1 plagioclase (lithochromic) mottles; heavy loam to loam; common very fine mica	II
C2	41-72+	Reddish-yellow 7.5YR6/6, yellowish-red 5YR5/6 and brownish-yellow 10YR6/6; common white 5YR8/1 plagioclase (lithochromic) mottles; micaceous light loam; very soft	П

SB-19

Horizon	Depth (inches)	Description	Texture Group
<u>A</u>	0-5	Yellowish-brown 10YR5/4; heavy loam	II
Bt	5-41	Red 2.5YR5/6; clay loam	Ш
С	41-72+	Yellowish-red 5YR5/6 with reddish-brown 5YR5/3 (lithochromic); heavy loam that grades to loam; very soft	II

CERTIFICATION STATEMENT

Property Identification: Lewis Ford Estates Coff	3
This is to certify according to § 32.1 – 163.5 of the Code of Vireferred property is in accordance to and complies with the Se Regulations of the Virginia Department of Health.	rginia that work submitted for the ewage Handling and Disposal
I recommend subdivision approval	
AOSE: San DB Balm 5	Date:
Soil Consultant:	Date:
¹ This blank must be filled in with one of the following terms: 'permit', 'certi ² This blank must be filled in with the term 'approved' or 'denied'.	fication letter', or 'subdivision approval'.
If the submission contains a certification by a professional eng AOSE, the following statement shall be signed and sealed:	gineer in consultation with an
I hereby certify that the evaluations and designs contained he were conducted in accordance with the Sewage Handling and 610-10 et seq., the "Regulations") and the policies of the Virgi implementation of those Regulations. Furthermore, I certify the comply with the minimum requirements of the Regulations.	Disposal Regulations (12 VAC 5- nia Department of Health for
I recommend a	¹ be ² .
Licensed PE:	Date:
¹ This blank must be filled in with one of the following terms: 'permit', 'certi' This blank must be filled in with the term 'approved' or 'denied'.	fication letter', or 'subdivision approval'.
	Page $\overline{2}$ of $\overline{2}$