

WEST VIRGINIA  
APPLICATION FOR A PERMIT TO INSTALL, CONSTRUCT, OR MODIFY  
A SEPTIC TANK SEWAGE DISPOSAL SYSTEM

COUNTY HEALTH DEPARTMENT

A. GENERAL

1. Application is hereby made to  INSTALL ( ) CONSTRUCT ( ) MODIFY  
a septic tank sewage disposal system.
2. Owner Harry A. Bosley Address Box Ft. Ashby, W.Va.  
Contractor David K. Spencer Address Box 317 Ft. Ashby, W.Va. 26719
3. Installation or Construction Site:
  - a. Location Sunrise Hqts. - First left after entering development
  - b. Lot Size: Width \_\_\_\_\_ ft. x depth \_\_\_\_\_ ft. = 2 acres ~~sq ft.~~
  - c. Total area suitable for Septic Tank Absorption Field 1 acre ~~sq ft.~~
  - d. Distance to public sewer N/A - too low for existing sewer
  - e. Lot is ( ) Level (  ) Sloping ( ) Steep
4. Describe type and size of dwelling or establishment to be served:
  - a. (  ) Home No. of Bedrooms 3 c. ( ) Food Service Establishment
  - b. ( ) School d. ( ) Other (Specify) \_\_\_\_\_
5. Multiple Units:

No. Water Closets <u>2</u>	No. Showers or Tubs <u>2</u>
No. Garbage Grinders <u>1</u>	No. Automatic Washers <u>2</u>
6. Type Water Supply Serving This Property:
  - a. (  ) Public c. ( ) Dug Well 3. ( ) Other (Specify) \_\_\_\_\_
  - b. ( ) Drilled Well d. ( ) Cistern \_\_\_\_\_

B. SEPTIC TANK

- a. Capacity in Gallons: 1000 Liquid Depth 5'2" ft. Total Depth 6' ft.
- b. Tank Construction: ( ) Metal (  ) Concrete ( ) Block ( ) Fiber Glass  
Metal tank identified by Listing Mark (ULI) \_\_\_\_\_ Yes \_\_\_\_\_ No
- c. Distance of Tank From: House Foundation 15 ft. Nearest Property  
Line 150 ft. Neighboring Water Supply 800 ft.



C. SOIL ABSORPTION FIELD

- a. Number of sq. ft. of absorption field to be installed 444 sq. ft.
- b. Number of Lines 3 Length of each Line 85, 75, 62, ft. Total 222 ft.
- c. Lines are sloped not more than 0 inches per 100 ft.
- d. Distribution Lines: ( ) Clay Tile () Plastic ( ) Other \_\_\_\_\_
- e. Trench Width 24 inches Depth 24 inches Distance between trenches 8 ft.
- f. Distance from Water Supply 100 ft. Neighboring Water Supply ~~22~~ <sup>600</sup> ft.  
House Foundation 22 ft. Nearest Property Line 100 ft.
- g. Type Filter Media: () Gravel ( ) Slag ( ) Other (Specify) \_\_\_\_\_  
( $\frac{1}{2}$ " -  $2\frac{1}{2}$ " diameter graded materials required).
- h. Depth of Filter Media Under Lines 6 Inches; Over Lines 2 Inches
- i. Distribution Box: ( ) Yes () No Number of Outlets \_\_\_\_\_
- j. Type Soil: ( ) Clay ( ) Sandy Clay ( ) Loam ( ) Fill ( ) Other Shale
- k. Depth to: Water 200 ft. Rock 300 ft. Hardpan — ft. Other \_\_\_\_\_
- l. Method and point of discharge of gutter drains, foundation drains and basement drains () Surface ( ) Other (Specify) \_\_\_\_\_

D. PERCOLATION TESTS

- a. Depth of Test Holes Checked 24, 24, 25, 24, \_\_\_\_\_, \_\_\_\_\_ Inches
- b. Percolation Test Results:

Test Hole #1	Time required for Water to fall 6 inches	<u>24</u>	Minutes
Test Hole #2	Time required for Water to fall 6 inches	<u>63</u>	Minutes
Test Hole #3	Time required for Water to fall 6 inches	<u>34</u>	Minutes
Test Hole #4	Time required for Water to fall 6 inches	<u>45</u>	Minutes
Test Hole #5	Time required for Water to fall 6 inches	_____	Minutes
Test Hole #6	Time required for Water to fall 6 inches	_____	Minutes

TOTAL 186 MINUTES

Total minutes 186 divided by 6 equals 31 total minutes per inch of fall. The total minutes per inch of fall divided by 4 the number of test holes equals 7.75 the average time of fall per one inch. Obtain the number of square feet of absorption field from Chart on page 7, Bulletin ES-52. This figure 74 multiplied by 3 number of bedrooms equals 222 the total ~~square feet~~ required.  
length (2' width)



WEST VIRGINIA  
SEPTIC TANK INSPECTION FORM

Marion Co. Health Department Installation Permit No. 99-76-000  
Name of Owner Harry A. Basley  
Address Fair Ashby  
Property Address Leisure Heights

DESCRIPTION & NUMBER OF UNITS SERVED

Type Facility Served Home No. Water Closets 2  
Lot Size 10000 sq. ft. Area suitable for sewage disposal installation 10000 sq. ft.  
Source of Water Supply public No. Lavatories 1  
No. Bedrooms 3 No. Showers or Tubs 2 No. Baths 2  
No. Garbage Grinders 1 No. Automatic Washers 2

SEPTIC TANK

Material Concrete Length \_\_\_\_\_ x Width \_\_\_\_\_ x Depth \_\_\_\_\_ = \_\_\_\_\_ cubic feet  
Liquid Depth \_\_\_\_\_ ft. Liquid Capacity 1000 gal.  
Distance to: Dwelling 24 Water Supply \_\_\_\_\_ Nearest Property Line 150

SOIL ABSORPTION SYSTEM

Type Drain Line Material plastic Trench Width 24 Inches  
Trench Depth 24 Inches Total Absorption area in Trench Bottom 444 sq. ft.  
Diameter of Drain Line 4 Inches Type Filter Media gravel  
No. of Drain Lines 3 Depth Filter Media Under Drain Line 6 Inches  
Length of Each Line 85, 81, 56, ft. Depth Filter Media Over Drain Line 2 in.  
Distance of Disposal Field to: (a) Dwelling 34  
(b) Water Supply \_\_\_\_\_ (c) Nearest Property Line 100

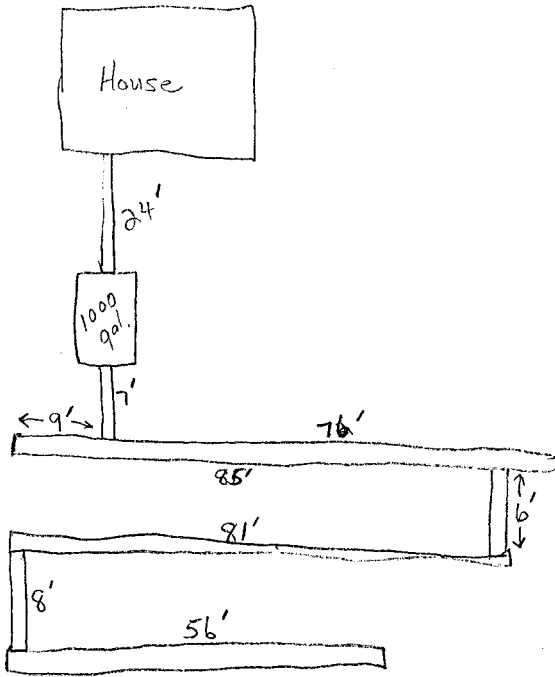
An inspection of the septic tank system described herein disclosed that said system (MEETS, ~~DOES NOT MEET~~) the minimum standards established by the West Virginia State Department of Health.

6-16-76  
Date

[Signature]  
Sanitarian

SKETCH OF SYSTEM TO BE DRAWN ON BACK

Note: Copy of this inspection report must be given to owner and the original filed in the Health Department files. PERMANENT RECORD - DO NOT DESTROY.



E. CERTIFICATION

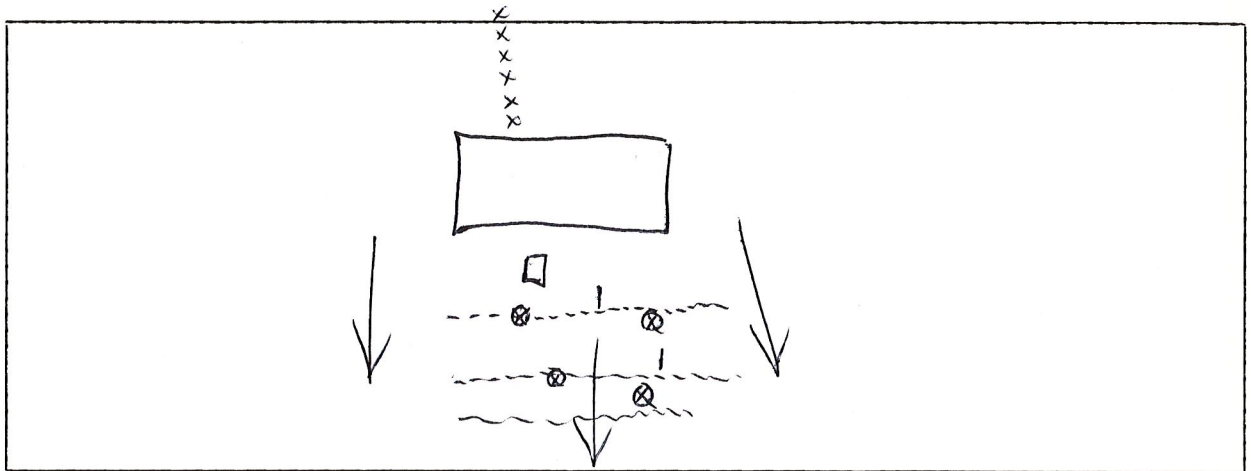
I, David K. Spencer certify that the procedure outlined in Bulletin ES-52, "Design Standards for Small Septic Tank Systems", Pages 5, 6 and 7, were followed in conducting these percolation tests and that the information furnished herein is true and accurate. Further, I understand that this SEPTIC TANK SYSTEM MUST BE INSPECTED AND APPROVED BY HEALTH DEPARTMENT SANITARIAN PRIOR TO BEING COVERED WITH EARTH.

6/9/76  
DATE

David K. Spencer  
SIGNATURE

Contractor  
TITLE

PLOT LAYOUT - SKETCH



\* Symbols:

□ House  
X Water Supply  
⊙ Swamp Area

||||| Trees  
□ Septic Tank

- - - - Soil Absorption Field  
→ Slope Ground  
⊙ Percolation Test Hole Sites

\* Within 200 feet radius of soil absorption field.

FOR HEALTH DEPARTMENT USE ONLY

Permit Issued (  ) Permit No. 29-76-040  
Permit Denied ( ) Suspended ( ) Revoked ( )

6-9-76  
DATE

P. L. Joubert  
SANITARIAN





REQUEST FOR INDIVIDUAL ON-SITE WATER SUPPLY  
AND/OR SEWAGE DISPOSAL SYSTEM EVALUATION

TO BE COMPLETED BY LENDING AGENCY

Lending Agency		Case No.	
WesBanco Mortgage Co.			
Purchaser		Property Owner	
Susan J. McLeod		Richard & Patricia Chaplain	
Address		Address	
P.O. Box 271		HC 86, Box 441	
Houston, PA 15342		Fort Ashby, WV 26719	
Phone No.		Phone No.	
		304-298-3361	

Detailed Directions for Locating Property: (Be Specific)

Sunrise Heights - First left after entering development.

Multi-Living Units	Number Bedrooms	Number Baths	Dishwasher	Garbage Disposal	Basement	Dwelling
( ) Yes (X) No	3	2	(X) Yes ( ) No	( ) Yes ( ) No	(X) Yes ( ) No	( ) New (X) Existing

TO BE COMPLETED BY HEALTH DEPARTMENT SANITARIAN

WATER SUPPLY

Type: ( ) Drilled Well ( ) Dug Well ( ) Cistern ( ) Spring ( ) Other \_\_\_\_\_  
 ( ) Yes ( ) No Meets minimum design standards (physical). Date Inspected \_\_\_\_\_  
 ( ) Yes ( ) No Bacteriological water sample collected. Date \_\_\_\_\_  
 Results: ( ) Satisfactory ( ) Unsatisfactory Laboratory Sample No. \_\_\_\_\_

SEWAGE DISPOSAL SYSTEM

Sewage system installed under permit? (X) Yes ( ) No Permit No. 29-76-040  
 Date of original inspection 6/16/76 Date dye test conducted 5/5/97 ( ) Positive  
 5/6/97 (X) Negative

If sewage disposal system was not installed under permit, complete the following:

System meets minimum design standards \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Are you aware of any sewage disposal system problems in the neighborhood? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Is lot size adequate for the system to be modified or a new system installed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Was house vacant at the time of inspection? \_\_\_\_\_ Yes \_\_\_\_\_ No

WATER SUPPLY IS:

( ) Satisfactory as a water supply for the subject property.  
 ( ) Not satisfactory as a water supply for the subject property.

SEWAGE DISPOSAL SYSTEM:

(X) Functioning satisfactorily at the time of evaluation.  
 ( ) Not functioning satisfactorily at the time of evaluation.

REMARKS:

Septic tank cleaned by Wagoner Septic Service on 5/7/97.

May 7, 1997  
DATE

*William R. Miller RS*  
SANITARIAN, REGISTERED

Mineral County  
HEALTH DEPARTMENT

