## SE 183 7/96

## STATE OF WEST VIRGINIA

Permit No. :	ST -	16 - 0	00 - 0	62
Тах Мар			Parcel	#

PERMIT TO BE	Hardy Coun	ty HEALTH DEP			
PRINTED OR TYPED	ON-SITE SEW/	AGE DISPOSAL SYSTE	M PERMIT Tax Map	Parcel #	
				oad No.:	
Owner: Richar	d C. Smith	Certified	Installer: Ralph Thorne, Jr		
Address: HC 66, Box 2			Address: 14 Jenkins Run Rd		
Mooref	ield, WV 26836		Moorefield, WV		
You are hereby	vissued a permit to:	x] install, or [ ] modify a	n on-site sewage disposal syste	em located:	
	Webb Subdivision,		•		
· · · · · · · · · · · · · · · · · · ·					
Facility: home	Design Flow:	3 Bdrm Lot Size: 2.57	SKXXXX./Acres Water Source:	public planne	
BASED UPON REVIEW O	F THE INFORMATION OF YO	OUR SUBMITTED APPLICATION	DATED 5-17-00 , A	ND THE PROPER	
			MPLIANCE WITH APPLICABLE WEST		
SYSTEM RULES AND DE	sign Standards.				
The sewage syst	em shall consist of	a:			
[x] Septic tank - C	apacity:1000	gallons or more, Constru	ucted of: concrete		
			square feet of conventional grav		
Depth to the bo	ttom of the trench or be	ed installation shall be:	inches from original gre	ound surface.	
			,,feet, Widt		
			s:,,,		
and the second s	turer of chamber:				
			feet, Width: feet.	•	
[xx] Other:	10 " Gravelless pip	oe consisting of 300 1	inear feet		
			11 11 11 11 11 11 11 11		
This permit is non-t	ranferable and Skatch	of system:			
automatically expire		or system.		( )	
after issue date.					
				Draw Arrow	
This permit is NU		•		Toward North	
when official inspe					
conditions different stipulated on the p					
are later found that					
non-compliance wi					
rules.					
All systems must					
and approved pri covered with earth	or to being				
use.	or process and				
The applicant of	r his agent				
must notify this	department:				

May 19, 2000

24 hours or more prior to ned inspection time.

Issue Date

538-6355 County Office / Phone Number **Additional specifications** on reverse:

Lemoine K. Thompson, R.S.

STATE OF WEST VIRGINIA		
EPRINT: HEALTH DEPARTME	NT D. 1 Deg. 2579	
APPLICATION FOR A PERMIT TO INSTALL OR N	IODIFY Para Para	
A SMALL ON-SITE SEWAGE DISPOSAL SYST	THOCKE A SOO	
rty Juner: Tichard Comilly Certified Installer: Ralph	Thorne Dr. Class: X 1 11	
iss: HC- 66 Box2 Address: 14 Senting		
MooreField WU 26836 WNA. 26834		
3: (home) <u>538 - 2297</u> (business) <u>538 - 77//</u> Installer No.: <u>54 - 23 - 0025</u>	WV Contractor's No.: WU012307	
tions to property: R+ 220 north, Old Fields Sta	oll furn Ceft	
sed facility to be served: (Please provide specific and detailed directions)	S From Chicken Houses	
	Unless the division of a tract,	
Residence, No. of bedrooms: 3 No. of individuals served: 2	lot or parcel results in lots in	
Other,	excess of two acres and in which those lots have an	
ty served is: New Existing Water Source:   Rublic in	average frontage of 150 feet or	
rty deed recorded in Book No.: Page(s):	more, permits for individual sewage disposal systems shall	
the property deed was recorded:	be withheld until a completed	
or tract created after July 1, 1970, please refer to Subdivision box.	application for the subdivision is	
ninimum lot size or area reserved for a sewage disposal system in a		
vision may vary based on the date the subdivision was created.	such systems may be expected to comply with applicable	
ty tax map: Parcel No.: 10+ #4	design standards on all	
of 2.57 square feet acres	proposed building lots contained within the original tract.	
nsible for employing a properly certified and licensed sewage system installer xisting or proposed locations of any water sources and property lines. I nsibility to consult the sanitarian for assistance as necessary and to determine es or water supply lines.  (Signature of the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and to determine the sanitarian for assistance as necessary and the sanitarian for assistance as necessary as nec	further anderstand that it is my the location of any existing water	
cation is herein made to:  Install  Modify a/an:		
Septic Tank Absorption Field Alternate System Other:	79 7 11	
percolation tests were conducted on $\frac{5/19/00}{}$ , at a depth of	inches.	
ime, in minutes, for the final 6 inch drop in each test hole is as follows:	O fresh halo drap of	
Test Hole: #1 #2 #3 #4	6 feet hole free of Water and solid rock	
Time: $265$ , $272$ , $5$ $278$ $297$	Yes No	
s given for each percolation test hole are to be added together to give a total no	umber of minutes: <u>///2,5</u> ,	
the total shall be divided by 24 in order to give the average time for a one inch	drop: 44.5 (minutes per inch).	
undersigned certifies that the percolation test was conducted by the owner procedures as outlined in the Design Standards. In the event that the outlines of the percolation test results for purposes of system design.  Signed: Rayh Share for our conducted by the owner conduct	owner's signature shall certify	
rse of form must be completed.		

SS-182 Rev. 12/83

## State of West Virginia

· -	Har	dy Co.	HEALTH DEPARTMENT	
FOR HEALTH DEPARTMENT USE ONLY			COL	YTY:
Date Recv'd.	'ermit #: WW	ST	Coordinates: N	
Date Site Evaluated: 10-20-97			Reviewed By:	
		PART I		
APPLICATIO	N FOR PERMIT TO		FY OR ABANDON A W	ATER WELL
		or FY A SMALL SEWAGE		
		•	wner. State and coun	tv health department
	ire that water we	lls and sewage dispo	sal systems be locate	d, designed and con-
Property Owner:				
Address: Old Fi	dos WO			
Date:	Telephone: (ho	оте)	(busine	ss)
/ Water Well	/	Disposal System		
LOCATION OF PROPERTY (be specific)				-
	-			
Name of Subdivision: Beck	y Webb		Section:	Lot: 4
Size of Lot: 2.528 sq.ft./acre	/			
roperty Deed Recorded in Book No.				
ole for informing the well driller and well. I further understand th co determine the location of the e	at it is my respo	nsibility to consult	the sanitarian for a	assistance as necessary ar
			(signatu	re of owner)
****	* * * * * * * * *	* * * * * * * * * * *	* * * * * * * * *	* * * * * * * * * * * *
PLEASE	PROCEED TO CO	MPLETE PARTS II A	ND III, IF NECESSA	ARY
******	* * * * * * * * * * * * * * * WATE	PART II ER WELL INFORMA	* * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * *
ater well will beconstructed				r,water exploration
abandoned or other purposes:_				
ell Driller:			Phone No.:	
usiness Address:				
pe of Casing:				
istance of Well from Potential Sou				
Streams, Rivers & Impoundments	Sew	ers & Drains (non-wa	tertight)	Privies (vault)
Sewage Absorption Fields Septic Tank	_	ers & Drains (hydros age Holding Tank	tat.tested	Barnyard/Feeding Water Areas
Other:				
			-	
SIGNATURE of DRILLER		CERT	IFICATION #	DATE

S 177, 7/96	STATE OF WEST VIRGINIA	Permit No.: ST-16-00-062
NSPECTION TO BE	ROY CO HEALTH DEPARTMENT	Permit No.: 01-76-00-06 2
1/		Tax Map: Parcel #:
county: HARD-1	N-SITE SEWAGE DISPOSAL SYSTEM	County Road:
	INSPECTION FORM	
Jame of Owner: RICHARA	C Sn (TH Installar RA	10H THANE IN
Address HC 16 Box	2 MOGREPHELD, WV 2683	<u>C</u>
Property Location: CIT 4	BETKY WEBB, OLD FIELDS	In V
'ype of Facility: /tomE	Facility is: New (X Existing ( )	Lot Size: 2-57 Set /Acres
	oms: 3 Born Source of Water Supply	
yough bottom granton bottom		
(0 - )	SEWAGE TANK COMPONENT	
apacity in Gallons: 1000	Material: CONCRETE Manufact	urer:
istances (in feet) of Tank to: Di	welling: 121 Private ( )/Public ( ) Water Sou	rce: >25' Property Line: >/0'
	ON-SITE DISPOSAL SYSTEM	
lass   Systems: Standard Soil /	Absorption Trenches ( ) or Bed ( ) Gravelless	Pine (M. Diameter: / O. Inches
	Soil Absorption Trenches ( ) or Bed ( )	ripe V % Diameter. 20 miches
	Soil Absorption Trenches ( ) or Bed ( ) Evapote	ranspiration Trenches ( ) or Bed ( )
	Soil Absorption Trenches ( ) or Bed ( ) Other:	
o of Lines: 3 Length (in	feet) of Each: 100 , 100 , 100 ,	
	inches/feet Depth to Bottom of Field: 24-30	
	If Chamber System, Name:	
	Used? Yes $(X)$ No ( ) Size Equates to: $900$ S	
istances (in feet) of System to:	Dwelling: 21 Private ( )/Public Water Son	rce: >25' Property Line: >6'
en .s:	-	
An incorpolar indicates that	Sketch of Installation with Triangulation or Dist	ence to Specific Leadmarks
An inspection indicates that	Sketch of instantation with Thangulation of Dist	ance to opecinic Landinarks.
ie sewage disposal system escribed above		( )
OES MEET (>1.		$\bigcup$
OES NOT MEET ( ),		Draw Arrow
ANNOT BE DETERMINED TO		toward North
EET ( ) the minimum standards		
stablished by the West Virginia		Ŷ.
ureau of Public Health.		1
To correct a health hazard,		
odifications to existing systems		
ay be done to improve part of a		1
rstem. Such modifications may		•
of the able to be designated as a		<b>k</b>
Des meet system since		l l
adequate information is known.		l l
Although many factors		
ontribute to the successful		■-
		- 1
nctioning of a sewage disposal stem, this office recommends		

ater conservation and

ater throughout the week.

ling an even usage of

Sanitarian: Lamoure K. Thompson R.S.