Rec. 50.00

Application for a Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health

For Department Use Only

Health Department Identification Number 393-111-0039
Map Reference #48

Botetourt Co Health Department

Date Received 50.00 02/08/93 Pd

To Be Completed By The Applicant

Type sewage system: ☒ New ☐ Repair ☐ Expanded ☐ Conditional
FHA/VA yes ☐ no ☐

Owner Pierce Chapel United Methodist Church Address _____ Phone _____

Agent Gilbert J Perkey Jr. Address Rt 2 Box 156 E Phone 473-3199
Buchanan VA 24066

Directions to Property N 220 to Right on Rt 635 property 100 yds. off 220 N. on Right

Subdivision _____ Section _____ Block _____ Lot _____

Other Property Identification Church

Dimensions/size of Lot/Property _____

Other Application Information

I. **Building/facility** ☐ New ☑ Existing
Intermittent Use ☑ Yes ☐ No If yes, describe: _____

II. **Residential Use** ☐ Yes ☐ No
Termite Treatment ☐ Yes ☐ No
☐ Single Family ☐ Multifamily Number of Units ___ Number of Bedrooms ___
Basement ☐ Yes ☐ No
Fixtures in Basement ☐ Yes ☐ No

III. **Commercial Use** ☒ Yes ☐ No Describe: Pierce Chapel United Methodist Church (49 members)
Commercial/Wastewater ☐ Yes ☑ No Number of Patrons 49 Number of Employees ___
If yes, give volumes and describe _____

IV. **Water Supply:** ☐ Public ☐ New Describe: Well
☒ Private ☒ Existing

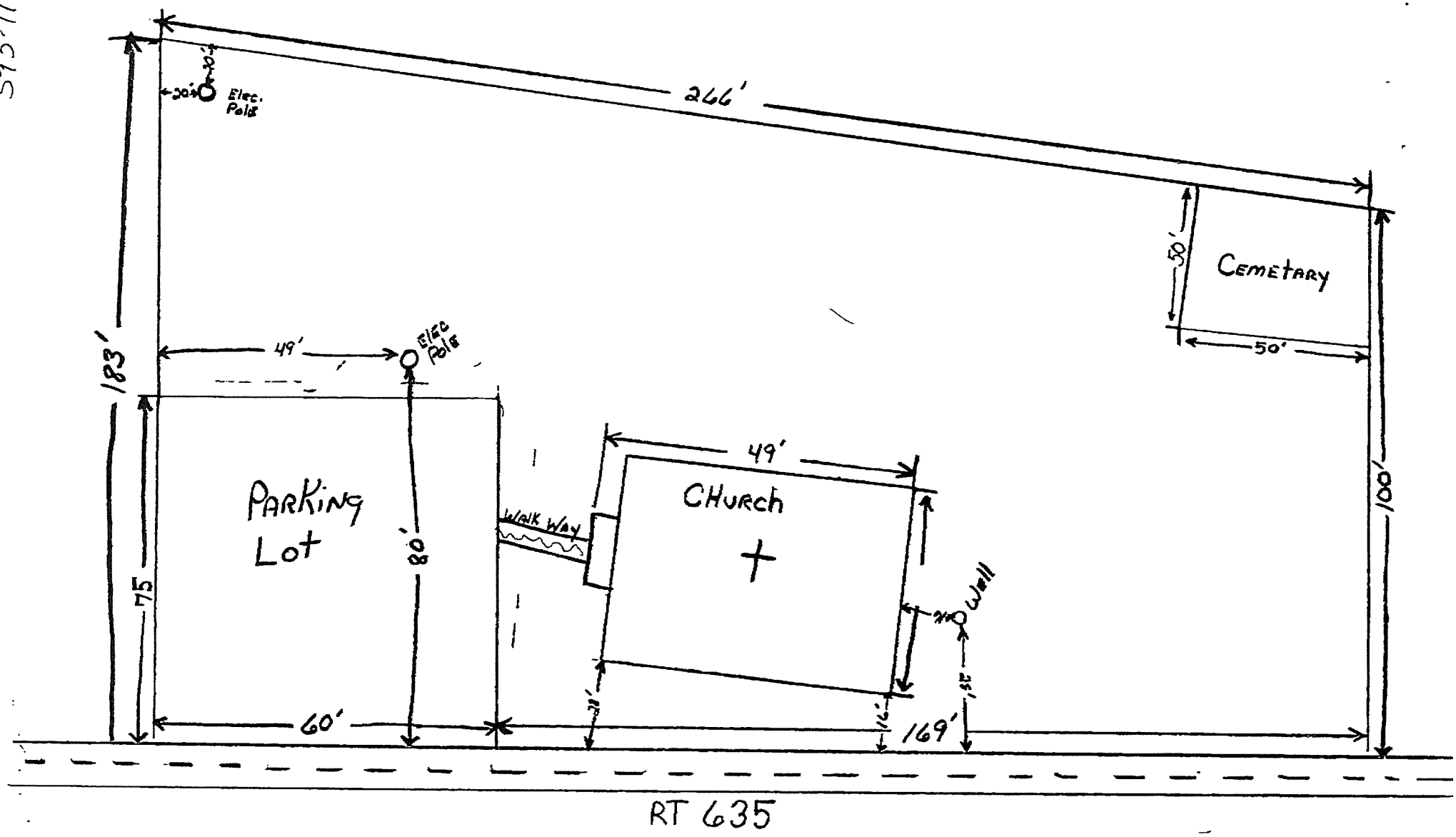
V. **Proposed Installation:** ☒ Septic tank and drainfield ☐ Other
If other, describe _____

SITE PLAN Attach a site plan (rough sketch) showing dimensions of property, proposed and/or existing structures and driveways, underground utilities, adjacent soil absorption systems, bodies of water, drainage ways, and wells and springs within 200 feet radius of the center of the proposed building or drainfield. Distances may be paced or estimated.

The property lines and building location are clearly marked and the property is sufficiently visible to see the topography. I give permission to the Department to enter onto the property described for the purpose of processing this application.

Signature of owner/agent _____ Date 2/5/93

S93-111-0039


266'
Elec. Pole
183'
49'
Elec Pole
50'
CEMETARY
50'
100'
PARKING Lot
80'
75'
WALK WAY
49'
CHURCH
+
WELL
60'
169'
RT 635

Soil Evaluation Form

PAGE 1 OF 2

Commonwealth of Virginia
Department of Health

Health Department
Identification Number 593-111-0039
Tax Map Number #48

General Information

Date 2/24/93 Botetourt co. Health Department

Applicant _____ Telephone No. _____

Address _____

Owner Pierce Chapel Address Rt 635

Location _____

Subdivision — Block/Section — Lot —

Soil Information Summary

1. Position in landscape satisfactory Yes ☑ No ☐ Describe _____

2. Slope 2 %

3. Depth to rock/impervious strata Max. _____ Min. _____ None ✓

4. Depth to seasonal water table (gray mottling or gray color) No ☑ Yes ☐ _____ inches

5. Free water present No ☑ Yes ☐ _____ range in inches

6. Soil percolation rate estimated Yes ☐ Texture group I II (III) IV
No ☑ Estimated rate 90 min/inch

7. Percolation test performed Yes ☐ Number of percolation test holes _____
No ☑ Depth of percolation test holes _____
Average percolation rate _____

Name and title of evaluator: _____

Signature: Richard A Sealy

Department Use

☑ Site Approved: Drainfield to be placed at 20" depth at site designated on permit.

☐ Site Disapproved:

Reasons for rejection:

1. ☐ Position in landscape subject to flooding or periodic saturation.
2. ☐ 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 _____

Date of Evaluation 2/24/93

Profile Description
SOIL EVALUATION REPORT

Health Department Identification No. S 93-111-0039

Page 2 of 2

Where the local health department conducts the soil evaluation the location of profile holes may be shown on the schematic drawing on the construction permit or the sketch submitted with the application. If soil evaluations are conducted by a private soil scientist, location of profile holes and sketch of the area investigated including all structural features i.e., sewage disposal systems, wells, etc., within 100 feet of site (See section 4) and reserve site shall be shown on the reverse side of this page or prepared on a separate page and attached to this form.

☐ See application sketch ☐ See construction permit ☐ See sketch on reverse side or page attached to this form.

Hole #	Horizon	Depth (Inches)	Description of, color, texture, etc.	Texture Group
1	A	0 - 3	Brown Silty Loam	II
	B'	3 - 30	Yellow, Brown Silty Loam with Shale fragments	III
	B2	30 - 48	Yellow, Red, Brown Silty Clay Loam with Shale fragments.	III

Remarks

Appendix 6

Permit I.D. No. S93-111-0039

Tag Sheet

	Initials	Date
Application Received:	[signature]	2-8-93
Application Reviewed:	[signature]	"
Fee Determination	[signature]	"
Assigned to:	[signature]	2-9-93
Site Visit Scheduled:	R.S.	2/12/93
Site Visit Made:	R.S.	2/23/93
Follow-up Visit:		
Follow-up Visit:		
Issue/Deny Drafted :	R.S.	2/24/93
Issue/Deny Reviewed:	3-2-93	AMC
Issue/Deny Countersigned:	3-2-93	AMC
Issue/Deny Mailed:	[signature]	3-3-93

COMMONWEALTH of VIRGINIA

Botetourt County Health Department

FINCASTLE, VIRGINIA 24090

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

Mar 3, 1993

Pierce Chapel United Methodist Church
Attn: Gilbert J. Perkey, Jr.
Rt 2, Box 156E
Buchanan, Va. 24066

Dear Mr. Perkey,

Enclosed is a copy of your construction permit and other pertinent data in reference to your application for a sewage disposal system, ID # S93-111-0039 .

Your septic system contractor must have a copy of this permit before installation.

At this time you may begin construction of this sewage disposal system, which must comply with all requirements of the enclosed permit.

If you feel any changes are necessary, please contact the Botetourt County Health Department at 992/473-8243.

Sincerely,

Richard J. Sealey

Richard J. Sealey
Sanitarian

cc: Building Inspector

Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health
Botetourt Co. Health Department

Health Department Identification Number 523-111-0039
Map Reference 7#48

General Information

New ☑ Repair ☐ Expanded ☐ Conditional ☐ FHA ☐ VA ☐ Case No. _____

Based on the application for a sewage disposal system construction permit filed in accordance with Section 3.13.01, a construction permit is hereby issued to:

Owner Pierce Chapel United Methodist Church Telephone _____

Address c/o Gilbert J. Parker Rt 2 Box 156E Buchanan, VA 24066

For a Type I Sewage disposal system which is to be constructed on/at Rt. 635

Subdivision — Section/Block — Lot —

Actual or estimated water use 150 G.P.D.

DESIGN	NOTE: INSPECTION RESULTS
Water supply, existing: (describe) Existing Well **To be installed:** class III Drilled cased 20' grouted 20'	**Water supply location:** Satisfactory yes ☐ no ☐ comments G. W. 2 Received: yes ☐ no ☐ not applicable ☒
Building sewer: 4" I.D. PVC 40, or equivalent. Slope 1.25" per 10' (minimum). ☐ Other	**Building sewer:** yes ☐ no ☐ comments Satisfactory Not Hooked to Church.
Septic tank: Capacity 1000 gals. (minimum). ☐ Other	**Pretreatment unit:** yes ☑ no ☐ comments - Satisfactory
Inlet-outlet structure: PVC 40, 4" tees or equivalent. ☐ Other	**Inlet-outlet structure:** yes ☑ no ☐ comments Satisfactory
Pump and pump station: No ☑ Yes ☐ describe and show design. if yes:	**Pump & pump station:** yes ☐ no ☐ comments Satisfactory
Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent. ☐ Other	**Conveyance method:** yes ☑ no ☐ comments Satisfactory
Distribution box: Precast concrete with 8 ports. ☐ Other	**Distribution box:** yes ☑ no ☐ 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. ☐ Other	**Header lines:** yes ☑ no ☐ comments Satisfactory
Percolation lines: Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'. ☐ Other	**Percolation lines:** yes ☑ no ☐ comments Satisfactory
Absorption trenches: 600 Square ft. required ~~750~~: depth from ground surface to bottom of trench 20"; aggregate size 57; Trench bottom slope 2" - 4" per 100'; center to center spacing 9'; trench width 36" Depth of aggregate 12"; Trench length 50'; Number of trenches ~~54~~	**Absorption trenches:** yes ☑ no ☐ comments Satisfactory 4 lines 50 ft long gravelless pipe Date 3-16-94 Inspected and approved by: PH Leginski Jr / JJ Sanitarian

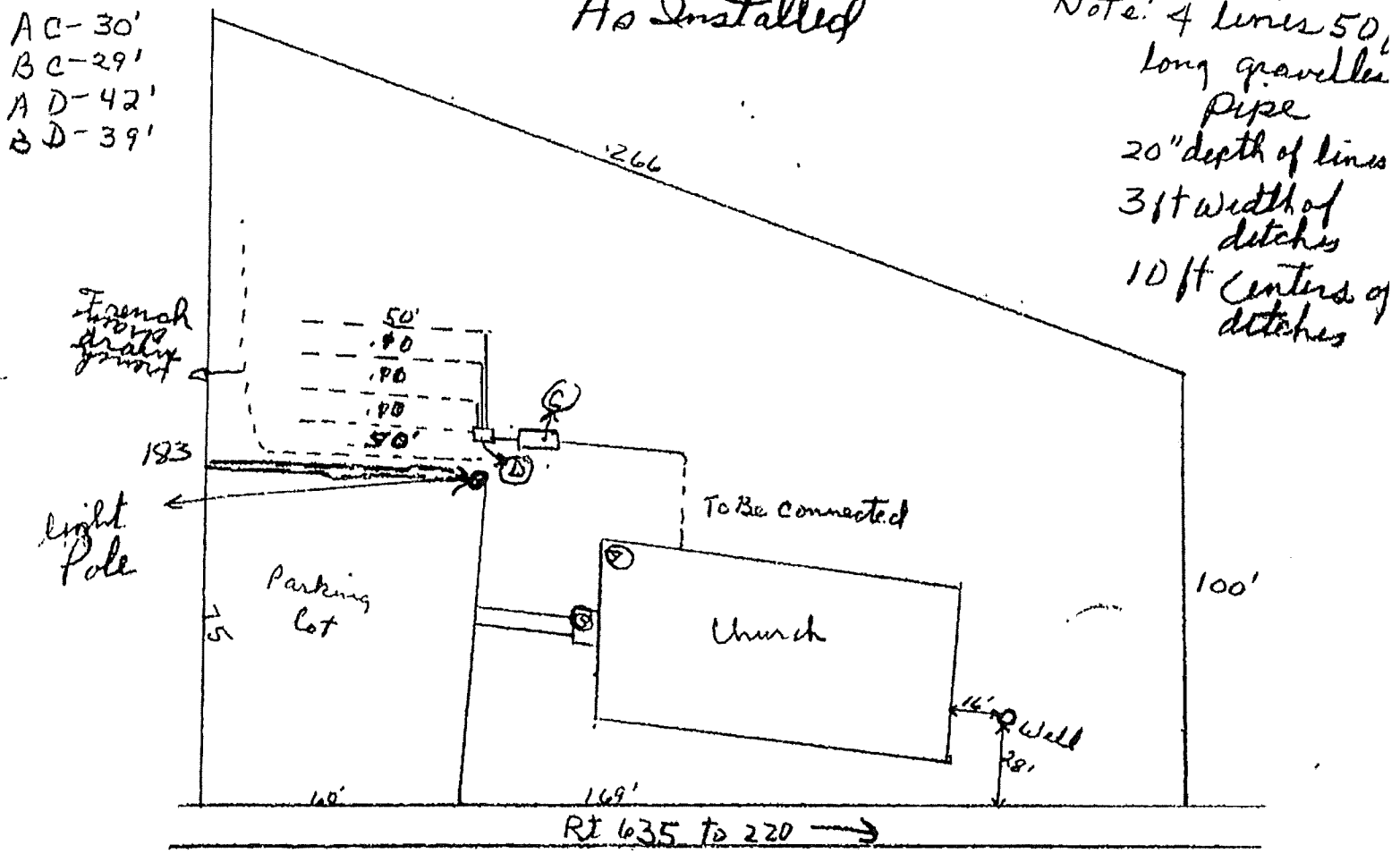
Health Department
Identification Number _____

Schematic drawing of sewage disposal system and topographic features. PAGE ____ OF ____

Show the lot lines of the building lot and building site, sketch of property showing any topographic features which may impact on the design of the system, all existing and/or proposed structures including sewage disposal systems and wells within 100 feet of sewage disposal system and reserve area. The schematic drawing of the 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 located on the same lot show all sources of pollution within 100 feet.

Not To Scale

☐ 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.



The sewage disposal system is to be constructed as specified by the permit ☐ or attached plans and specifications ☐.

This sewage disposal system 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: 3-16-94 Issued by: P G Loginis Jr
Sanitarian

This Construction Permit Valid until _____

Date: _____ Reviewed by: _____
Supervisory Sanitarian

If FHA or VA financing

Reviewed by Date _____ _____ Date _____ _____
Supervisory Sanitarian Regional Sanitarian

Health Department Identification Number S 93-111-0039

Schematic drawing of sewage disposal system and topographic features.

Show the lot lines of the building lot and building site, sketch of property showing any topographic features which may impact on the design of the system, all existing and/or proposed structures including sewage disposal systems and wells within 100 feet of sewage disposal system and reserve area. The schematic drawing of the 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 located on the same lot show all sources of pollution within 100 feet.

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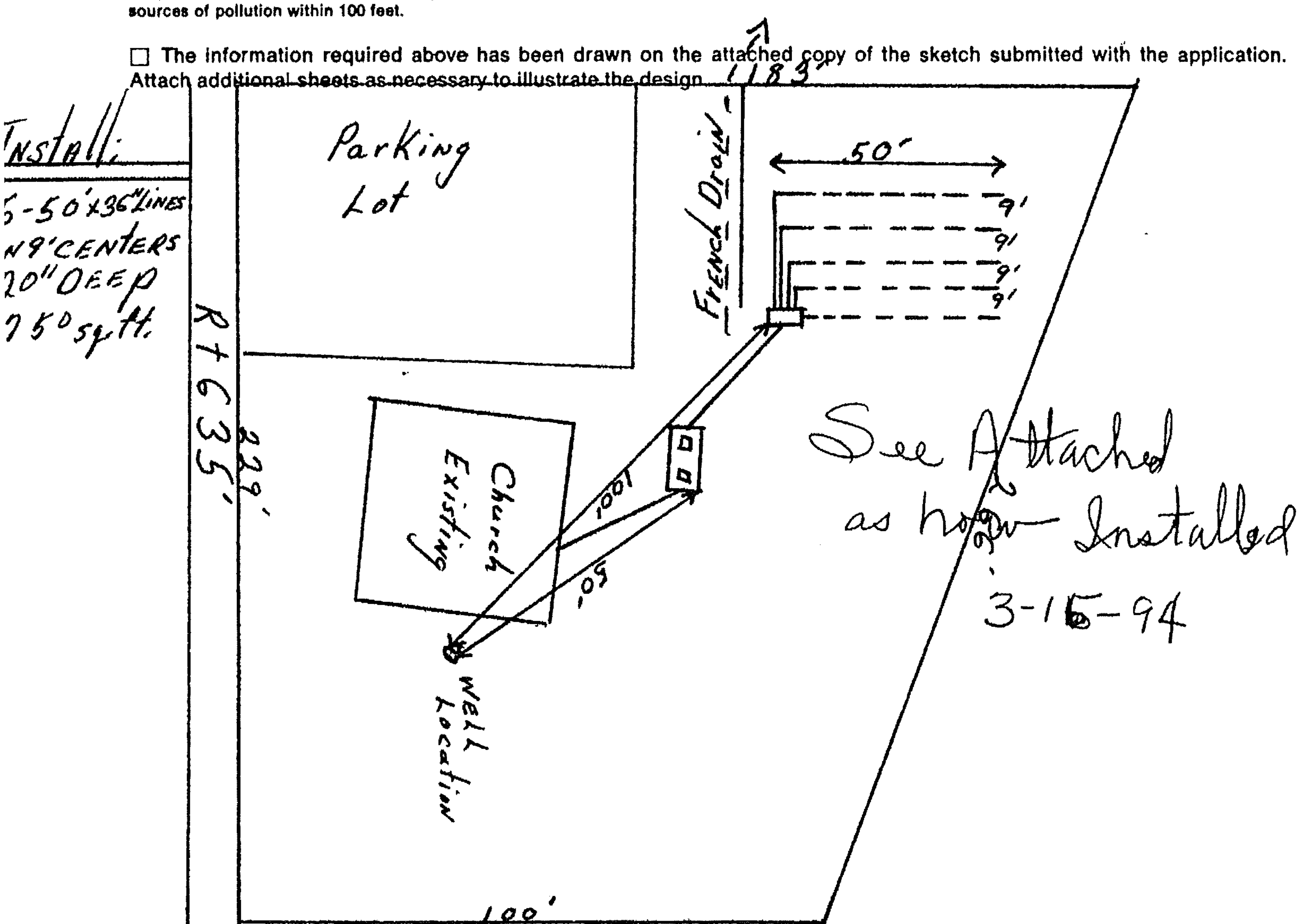

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Date: 2/24/93 Issued by: Richard [signature] Sanitarian

Date: 3-2-93 Reviewed by: [signature] Supervisory Sanitarian

This Construction Permit Valid ~~until~~ 54 Months

If FHA or VA financing — 76 LEGINR 2 [illegible]

Reviewed by Date ________ ________ Supervisory Sanitarian Date ________ ________ Regional Sanitarian

C.H.S. 202B Revised 6/84

II-2A

FILE COPY

Completion Statement

Commonwealth of Virginia
State Department of Health

Health Department
Identification Number S93-111-0039

Botetourt Co. Health Department

Name of Company/Corporation/Individual: James A. Firebaugh, Jr.

Address: 3960 Blacksburg Rd, Troutville, Va. Telephone: 992-2068

Owner's Name Pierce Chapel, United Methodist Church

Owner's Address C/O Gilbert J. Perkey, Rt 2, Box 156E, Buchanan, Va. 24066

Location of Installation: Lot _____ Block _____

Section: _____ Subdivision: _____

Other: 220N T/R 635, immediately on right.

I hereby certify that the onsite sewage disposal system has been installed and completed in accordance with construction permit issued (date) 2/24/93 and is in compliance with Sewage Handling and Disposal Regulations and when appropriate the plans and specifications for

3-16-94
Date

C.H.S. 203 Rev. 4/83

Sewage Disposal System Operation Permit

Commonwealth of Virginia
Department of Health

Health Department Identification No. 595-111-0035

Tax Map No. C-46

Bedford Co. Health Department

Pierce Chapel, United Methodist Church is Hereby Granted Permission to Operate a (Type) I Sewage Disposal System Having a Design Capacity of 150 gpd, at 2201 Rt. 635, immediately on right.

SUBDIVISION	SECTION/BLOCK	LOT

This permit is Issued in Accordance with the Provisions of 32.1, Chapter 6 of the Code of Virginia as Amended and Section(s) 2.13 of the Sewage Handling and Disposal Regulations of the Virginia Department of Health and with Previously Issued permits N/A Dated

with the understanding that the Owner and/or any Subsequent Owner will operate the Sewage Disposal System in Accordance with the Sewage Handling and Disposal Regulations of the Virginia Department of Health and any Variances or Conditions Granted. Issuance of an Operating Permit does not imply or Guarantee that the Sewage Disposal System will Function for any Specified Period of Time.

VARIANCES GRANTED
☑ NONE ☐ SEE ATTACHED

SPECIAL CONDITIONS
☒ NONE ☐ SEE ATTACHED

3-11-94
Effective Date

P G Leavens
Recommended (Sanitarian)

Approved (State Health Commissioner)

C.H.S. 205 Rev. 4/83

COMMONWEALTH of VIRGINIA

Botetourt County Health Department

FINCASTLE, VIRGINIA 24090

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

Mar 17, 1994

Pierce Chapel, United Methodist Church
C/O Gilbert J. Perkey
Rt 2, Box 156E
Buchanan, Va. 24066

Dear Mr. Perkey,

Enclosed you will find the Operations Permit for your Sewage Disposal System and/or Water Well with other data relating to your application, I.D. #S93-111-0039 .

For future reference, if necessary, we strongly recommend you put these copies with the deed and other valuable records pertaining to this property.

If this office can be of any further assistance to you, please don't hesitate to call.

Sincerely,

P.G. Leginus, Jr.
Environmental Health
Specialist

jp
Encls

COMMONWEALTH of VIRGINIA

Botetourt County Health Department

FINCASTLE, VIRGINIA 24090

IN COOPERATION WITH THE
STATE DEPARTMENT OF HEALTH

Apr 30, 1996

Pierce Chapel United Methodist Church
Gilbert J. Perkey, Jr.
Route 2, Box 156-E
Buchanan, Va. 24066

Dear Mr. Perkey,

You have the approval of this office to connect the new Sunday School building to the existing septic system servicing the church.

If I can be of any further assistance, please don't hesitate to call.

Sincerely,

Gary N. Thomas
Environmental Health Spec. Sr.