

Robert Danze



Bath County Health Department
P. O. Box 120
Warm Springs, Virginia 24484
(540) 839-7246 Voice
(540) 839-2964 Fax

Sewage Disposal System Operation Permit

Property Owner

Phantom Eagle, LLC.
9530 Sam Snead Highway
Hot Springs, VA 24445
Phone: (540) 839-5999

Health Dept. ID: **108-14-0005**
Tax Map: **71-4**
Locality: **Bath**

Property Location

Property Address: 2991 Jackson River Turnpike
Hot Springs, VA 24445

Directions: Rt. 6877 just past JC Snead house before bridge at top of old golf course, new entrance on right.

Phantom Eagle, LLC. is hereby granted permission to operate a **Residential Conventional Onsite Sewage System** at the above referenced location, under the following parameters:

Daily Flow: 300 gallons
Number of Bedrooms: 2

This permit is issued in accordance with the provisions of Title 32.1, Chapter 6 of the Code of Virginia as Amended, and Section 12VAC 5-610-340 of the Sewage Handling and Disposal Regulations of the Virginia Department of Health. The issuance of an operation permit does not denote or imply any guarantee by the department that the sewage disposal system will function for any specified period of time. It shall be the responsibility of the owner or any subsequent owner to maintain, repair, or replace any sewage disposal system that ceases to operate in accordance with the regulations.

May 07, 2014
Effective Date

Lacy Stevens
Environmental Health Specialist, Sr.


Signature

Completion Statement

Commonwealth of Virginia
State Department of Health

Health Department
Identification Number 108-14-0005 Health Department

Name of Company/Corporation/Individual: Trimble Const

Address: 344 Briant Hill Drive Wrensburg Telephone: 540-839-5116

Owner's Name Robert Donze

Owner's Address 9530 Sun Street Highway Wrensburg Va

Location of Installation: Lot _____ Block _____

Section: _____ Subdivision: _____

Other: TX map # 71-4

I hereby certify that the onsite sewage disposal system has been installed and completed in accordance with the construction permit issued (date) ~~August 2013~~ 2/24/14 and is in compliance with Part D of the Sewage Handling and Disposal Regulations and when appropriate the plans and specifications for the project.

April 20 2014
Date

Michael Trimble
Signature and Title

CENTRAL SHENANDOAH HEALTH DISTRICT

Augusta-Bath-Buena Vista-Harrisonburg-Highland-Lexington-Rockbridge-Rockingham-Staunton-Waynesboro

Health Dept. I.D. 108-14-0005

Tax Map #: 71-4

Subdivision:

Date: 2/24/2014

29776

Mick Trimble
(540) 969-8126

To: Phantom Eagle, LLC.
c/o Robert Donze

Attached to this notice is a Sewage Disposal and/or Water Supply System Construction Permit issued by the local health department to you. The **owner or agent must submit the following documents**, as required in the Sewage Handling and Disposal Regulations and/or Private Well Regulations, to the local health department so that a Sewage Disposal Operation Permit or Water Inspection Statement can be issued to **verify final approval**.

The **Health Department I.D. # and Tax Map # as shown above must appear on all documents** in order to match information with the sewage disposal and/or water supply permit. Without these numbers, your file cannot be completed. If the property is sold prior to installation, a new application and associated fees are required at your local health department for a permit name change because sewage disposal **permits are non-transferable**.

The owner/agent is responsible for submittal of the following documents:

Sewage

Completion Statement (Form CHS-203) is submitted from the installation **contractor** certifying the sewage disposal system has been installed and completed in accordance with the construction permit and in compliance with the above Regulations.

Water


Water Well Completion Report from the well drilling contractor containing construction and well yield data upon completion of the well.

Water sample results from the well that has been collected and analyzed for bacteriological quality. The water sample should be taken after operating the well to remove any remaining disinfectant and submitted to a **private certified laboratory** for analysis.

Note:

- A. The location of water supplies must be a minimum of 50 ft. from septic tanks, 100 ft. from drainfields and buried oil tanks and 50 ft. from house foundation where soils have been chemically treated for termites. Separation distances from any other sources of contamination, structures, topographic features, or as specified on the permit must be maintained.
- B. No well shall be placed in operation, except for the purposes of testing the mechanical soundness of the system, until inspected by the district or local health department, corrections made, if necessary, and the owner has been issued an inspection statement. Please notify the local health department when the well is completed.
- C. All Class III private wells shall be disinfected before placing the well(s) in service.
- D. Any excavation or modification of your proposed drainfield and reserve areas may void your sewage disposal permit.

Bath County Health Department
Environmental Health Services
51 Courthouse Hill Rd.
(540) 839-7246 (8 to 9 am or 4 to 4:30 pm)
Fax (540) 839-2964
C.S.H.D. # 4.37B, Rev.12/2000

Thank you,

Lacy M. Stevens
Environmental Health Specialist



Bath County Health Department
P. O. Box 120
Warm Springs, Virginia 24484
(540) 839-7246 Voice
(540) 839-2964 Fax

Sewage Disposal System Construction Permit

Health Department ID Number: **108-14-0005**

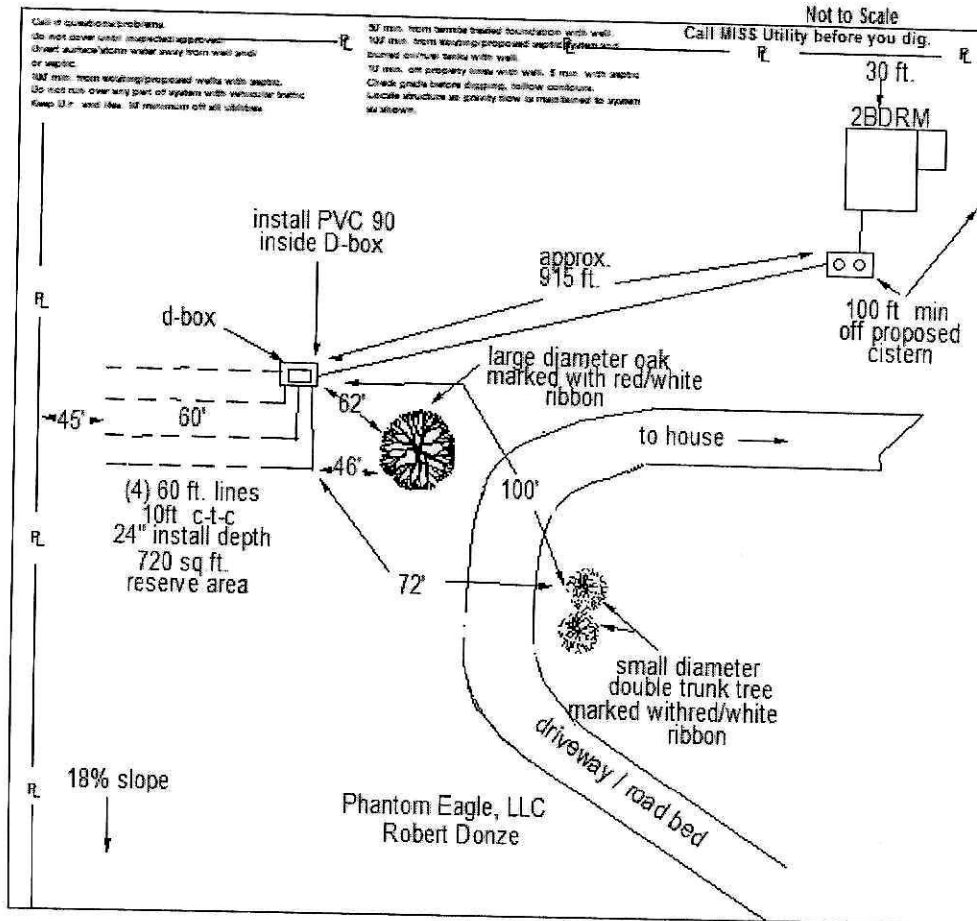
Owner Information	
Phantom Eagle, LLC. Phone: (540) 839-5999 c/o Robert Donze 9530 Sam Snead Highway Hot Springs, VA 24445	
Owner /Agent Information	
Property Address: 2991 Jackson River Turnpike Locality: Bath County	Tax Map Number: 71-4
Directions: Rt. 6877 just past JC Snead house before bridge at top of old golf course new entrance on right.	
General Information	
Approval Type: Sewage Construction Permit Type of Property: Residential	Daily Flow: 300 gallons Number of Bedrooms: 2
Sewer Line	Distribution Box
Material: 3" or 4" SCH 40 PVC or equivalent (cleanouts required at 50' to 60' intervals)	No. of Boxes: 1 No. of Outlets: 10 Install a 90° fitting on the inlet pipe inside of the d-box to prevent short circuiting of the effluent.
Conveyance Line / Force Main	Header Lines
Method: Gravity Material: Minimum crush strength 3000# Pipe Diameter: 3" or 4" Minimum Slope: 6" per 100' for non-pump * 4" Sch 40 must be ran 2'+ outside of the septic tank. If you so choose you can then switch to 3" Sch 40 or SDR 35 since there is such a long run from the septic tank to the distribution box.	Material: 4" 3000 # crush or greater Minimum Slope: 2" per 100'
Septic Tank - Inlet Outlet Structure	Percolation Lines and Absorption Area
Capacity: 1000 gal 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	Slope: 2-4" per 100' Percolation Lines: 4" diameter Center to Center Spacing: 10' Installation Depth: 24 " Depth of Aggregate: 13" Size of Aggregate: 0.5-1.5" Total Number of Laterals: 4 Laterals to be 60' long, 3' wide Install 720 sq feet square feet total 0% Reserve area provided for future repair
Please Note:	
*Maintain 100' minimum from the septic tank to the cistern. *4" Sch 40 conveyance line must be ran 2'+ outside of the septic tank. If you so choose you can then switch to 3" Sch 40 or SDR 35 since there is such a long run from the septic tank to the distribution box. >>Gravelless material may be used, in lieu of gravel and pipe, within the approved absorption area in accordance with Table 5.4 of 12VAC5-610. If gravelless material is used, the distribution box location remains the same. Install the amount shown above OR 3 trenches 60 feet long, 24" depth, 10 foot center-to-center spacing. Contact Bath County Health Department at (540) 839-7246 to address installation questions.	

HDID #: 108-14-0005

Construction Drawing

Owner Information	
PHANTOM EAGLE, LLC c/o Robert Donze 9530 Sam Snead Highway Hot Springs, VA 24445	Phone: (540) 839-5999

Construction Drawing

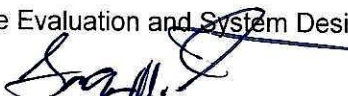


This sewage disposal system construction permit is null & void if conditions are changed from those shown on the application or construction permit. No part of any installation may be covered or used until inspected, corrections made if necessary & the system is approved. The inspection will normally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

This permit approval has been issued in accordance with applicable regulations based on the information and materials provided at the time of application. There may be other local, state, or federal laws or regulations that apply to the proposed construction of this onsite sewage system. The owner is responsible at all times for complying with all applicable local, state, and federal laws and regulations.

Please contact the Bath County Health Department at (540) 839-7246 for system inspection.

Site Evaluation and System Design By: Lacy Stevens, Environmental Health Specialist, Sr.


 Lacy Stevens, Environmental
 Health Specialist, Sr.

February 24, 2014
 Issue Date

August 26, 2015
 Expiration Date