## CENTRAL SHENANDOAH HEALTH DISTRICT

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

Health Dept. I.D.108-13-0001

WELL FOR HOND

Tax Map #: 77-3-5

Subdivision: Date: 1/23/2013

To: Elkhorn, Inc. c/o Everett LaFrance \* Ag. Well Permit Only

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 X 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:

- The location of water supplies must be a minimum of 50 ft. from septic tanks, 100 ft. from drainfields and buried oil tanks A. 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.

Augusta - Staunton Health Department Environmental Health Services 1426 North Augusta Street, Staunton, Va. 24401 (540) 332 - 7830(8 to 9 am or 4 to 4:30 pm) Fax (540)332-9501

C.S.H.D. # 4,37B, Rev. 12/2000

Environmental Health Specialist



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

## **Private Well Construction Permit**

Health Department ID Number: 108-13-0001

Owner Information	n					
ELKHORN, INC.		Phone:	(786) 897-2405			
c/o Everett LaFrance	ce					
P.O. Box 281						
Millboro, VA 24460						
Location Informat	tion					
Directions:	Rt. 39 West this is Mountain Valley Road turn on to Ridge Road					
Property Address:	2880 Ridge Road	Tax Map:	7	7-3-5		
County:	Bath	GPIN:				
Subdivision Name:						
S	section - Block - Lot -					
General Informati	ion					
Well Class:	Minimum Casing	Minimum Casing Depth:		Minimum Grout Depth:		
Class IV	20		20			

Comments: Driller is to submit a well log upon completion of the well.

Notice: The Virginia Department of Health may revoke or modify this permit if, at a later date, it finds the conditions that formed the basis for issuing the permit do not substantially comply with the *Private Well Regulations*, 12 VAC 5-630-10 et seq., or if the well would threaten public health or the environment.

## Owner Information ELKHORN, INC. c/o Everett LaFrance

P.O. Box 281 Millboro, VA 24460 Phone: (786) 897-2405 HDID #: 108-13-0001

Construction Drawing Scale drawing of the well site and related features. 60° min. Tom trmit traitd pundaton wit well.
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keep D.F. and Pec. 10 minimum offall utilises. 2880 Ridge Rd. Millboro TM#77-3-5 HDID#108-13-0001 Ridge Rd Pond Driller is to submit well log upon completion of the well. Driveway to House Drawing Hot To Scale

Show the property lines, all existing and proposed structures, existing and proposed sewage systems and water supplies, slope, and any topographic features which may impact the design of the well.

Issued by: Lacy Stevens
Environmental Health Specialist, Sr.

January 23, 2013 Issue Date July 24, 2017 Expiration Date

Commonwealth of Virginia Uniform Water Well Completion Report Owner 77-3-5 Tax Map ID VDH Permit 708 Address 13-0001 VWC8 Perina VWCB ID Location County Augus " Well Date " General Informatica Orlling Method Total Depth of Well Depth to Bedrock Lumpth of Test Static Water Lovel Stabilized Water Level Natural Flow (Rate) Well Disinfected (Y or N) Disinfectors Used Amount Used well Inner Casing 0 To 200 From From To Size 4"IP Material Weight/Schedule 5/4. Size (5) 1806 Meteria Size Material Weight/Schedule 1884 Weight/Schedule Gravel Pack From To Grout From TOTAL Promi Born Hole Size Bore Hote Stre 10 Bore Hole Size Type -Type Mathod Method Water Zones or Suremed Intervals From 1.00 From To To From Mesh Size Mesh Size \_ Diam Diam Mash Siza Diam From To From Ta Fran Mosh Size Mach Size Diam " Use Date " Amicultural Inclustral Private Well: Domestic Public Wall: . Community Non Community Abandomment information \* Bored or Dug Wells Wells other than Bored Walls Casing Rentowell, Y or N7: Casing removed, Y or N? Depth to which casing was namewed; If Y, Depth to which casing was removed: Depth and Type of Fit Applicable, depth(s), and type of grav-Source of Fill Source of gravel or sand: Cameric From \_\_\_ Bentonko Plum: From \_

Method of permenently marking locations,

## Driller's Log (Use additional sheets if mecounty)

Depth	Description of Formation or Sediment	Remarks
0-5	Red Clay	
5-15'	Brown State	
15-100'	Black Slate Isolid	
100-105		
105-180°	Black slate / solid	
180-190	Black slate Isoth water	
	Black State/sold	N.S. Action of the Contract of
190-205'		- 4
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certify that the	information contained here is true and that this well was installed as permit and further that the well complicate with all applicable state an	mai constructed d local regulatio
edinances and law	Lacker Lell Dollaring.	
Address: 811	Arradia Pld.	
Buch	Lanar UA 24066	
bone: 540	-254-234	
Drillers Signature:	R DY 6/6/	13
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Virginia Contractora License Number: 2705 02048