

OSE/PE Report For:

☐ Construction Permit
 ☐ Repair Permit
 ☐ Voluntary Upgrade Permit
 ☐ Certification Letter
 ☒ Subdivision Approval

Property Location:

911 Address: TBD Lost Dr State/City: Roanoke, VA
 Lot B Section _____ Subdivision 084.04-01-20.00-0000
 GPIN or Tax Map # Portion of 084.04-01-20.00-0000 Health Dept ID # Roanoke
 Latitude _____ Longitude _____

Applicant or Client Mailing Address:

Name: Horace Fralin, LLC Phone: _____ Email: _____
 Street: **
 City: ** State ** Zip Code **

Prepared by:

OSE Name Stephen D. Dalton License # 1940001068
 Address 305 Oak Street
 City Hillsville State VA Zip Code 24343
 PE Name _____ License # _____
 Address _____
 City _____ State _____ Zip Code _____

Date of Report 7/29/22 Date of Revision #1 _____
 OSE/PE Job # _____ Date of Revision #2 _____

Contents/Index of this report (e.g., Site Evaluation Summary, Soil Profile Descriptions, Site Sketch, Abbreviated Design, etc.)

<input checked="" type="checkbox"/> OSE Report	<input checked="" type="checkbox"/> System Specs	<input type="checkbox"/> Abbreviated Design
<input checked="" type="checkbox"/> Application	<input type="checkbox"/> Construction Drawing	<input type="checkbox"/> Site Sketch
<input checked="" type="checkbox"/> Site Report	<input type="checkbox"/> Well Specs	<input checked="" type="checkbox"/> Map
<input checked="" type="checkbox"/> Soil Report	<input type="checkbox"/> Pump Specs	<input type="checkbox"/> Reserve

Certification Statement

I hereby certify that the evaluations and/or designs contained herein were conducted in accordance with the *applicable provisions of the Sewage Handling and Disposal Regulations (12 VAC5-610), the Private Well Regulations (12 VAC5-630), the Regulations for Alternative Onsite Sewage Systems (12VAC5-613)* and all other applicable laws, regulations and policies implemented by the Virginia Department of Health. I further certify that I currently possess any professional license required by the laws and regulations of the Commonwealth that have been duly issued by the applicable agency charged with licensure to perform the work contained herein. The potential for both conventional and alternative onsite sewage systems has been discussed with the owner/applicant.

☒ The work attached to this cover page has been conducted under an exemption to the practice of engineering, specifically the exemption in Code of Virginia Section 54.1-402.A.11

I recommend that a (select one): construction permit ☐ certification letter ☐ subdivision approval ☐ be (select one) Issued ☒
 repair permit ☐ voluntary upgrade ☐ Denied ☐

OSE/PE Signature _____

Date 7/29/22

Commonwealth of Virginia

Application for: ☒ Sewage System ☒ Water Supply

Owner Horace Fralin, LLC

Mailing Address **

Agent Southwest Soils, Inc.

Mailing Address 305 Oak St.
Hillsville VA 24343

Site Address TBD Lost Dr
Roanoke, VA

Directions to Property: South of 5633 Ridgelea Rd

Subdivision 084.04-01-20.00-0000 Section _____ Block _____ Lot B

Tax Map Portion of 084.04-01-20.00-0000 Other Property Identification _____ Dimension/Acreage of Property 25.061

Sewage System

Type of Approval: Applicants for new construction are advised to apply for a certification letter to determine if land is suitable for a sewage system and to apply for a construction permit (valid for 18 months) **only when ready to build.**

☐ Certification Letter ☒ Construction Permit ☐ Voluntary Upgrade ☐ Repair Permit ☐ Minor Modification

Proposed Use:

Single Family Home (Number of Bedrooms 4) Multi-Family Dwelling (Total Number of Bedrooms _____)

Other (describe) _____

Basement Yes ☐ No ☒ Walk-out Basement Yes ☐ No ☒ Fixtures in Basement Yes ☐ No ☒

Conditional permit Yes ☐ No ☒

If yes, which conditions do you want?

☐ Reduced water flow ☐ Limited Occupancy ☐ Intermittent or seasonal use ☐ Temporary use not to exceed 1 year

Do you wish to apply for a betterment loan eligibility letter? Yes ☐ No ☒ *There is a \$50 fee for determination of eligibility.

Water Supply

Will the water supply be ☐ Public or ☒ Private?

Is the water supply ☐ Existing or ☒ Proposed?

If proposed, is this a replacement well? ☐ Yes ☒ No

If yes, will the old well be abandoned? ☐ Yes ☒ No

Will any buildings within 50' of the proposed well be termite treated? Yes ☒ No ☐

Well Type (e.g. domestic use, agricultural, irrigation, etc.) Domestic Use

All Applicants

Is this property indeed to serve as your (owners) principal place of residence? ☒ Yes ☐ No

All applications must be accompanied by private sector evaluations and designs, unless a petition for VDH services is approved. Is a Petition for Service form attached? ☐ Yes ☒ No

In order for VDH to process your application for a sewage system you must attach a plat of the property and a site sketch. For water supplies, a plat of the property is recommended and a site sketch is required. The site sketch should show your property lines, actual and/or proposed buildings and the desired location of your well and/or sewage system. When the site evaluation is conducted the property lines, building location and the proposed well and sewage sites must be clearly marked and the property sufficiently visible to see the topography. I give permission to the Virginia Department of Health to enter onto the property described during normal business hours for the purpose of processing this application and to perform quality assurance checks of evaluations and designs certified by a private sector Onsite Soil Evaluator or Professional Engineer as necessary until the sewage disposal system and/or private water supply has been constructed and approved.

Signature of Owner/ Agent

7/29/22

Date

This form contains personal information subject to disclosure under the Freedom of Information Act.

Revised 7/1/2019

Site and Soil Evaluation Report

VDH Use Only
HDIN: _____

General Information

Date: 7/29/22
 Owner: Horace Fralin, LLC
 Owner Address: **
 Property Address: TBD Lost Dr
 Tax Map/GPIN #: Portion of 084.04-01-20.00-0000
 Subdivision: 084.04-01-20.00-0000
 Roanoke
 Phone: **
 County Health Department
 Roanoke, VA
 Section: Block: Lot: B

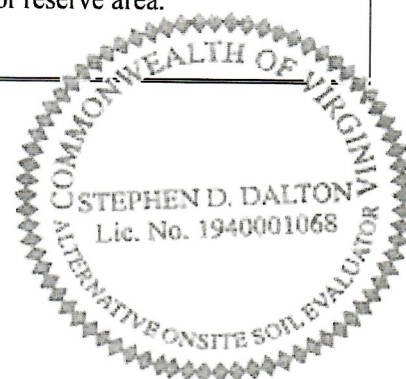
Soil Information Summary

- Position in landscape satisfactory: ☒ Yes ☐ No Describe landscape position: sideslope
 - Slope: 14 %
 - Depth to rock/impervious strata: Max. 63 in. Min. 48 in. ☐ Not observed
 - Free Water Present: ☐ Yes ☒ No Range in inches: _____
 - Depth to seasonal water table (gray mottling or gray color): 53 inches ☐ Not observed
 - Soil percolation rate estimated: ☒ Yes ☐ No Estimated rate: 45 min/in at 24 inches depth
 Texture Group: ☐ I ☒ II ☐ III ☐ IV
 - Percolation test performed: ☐ Yes ☒ No If yes, provide additional data on percolation test results.
- Name and title of evaluator: Stephen Dalton OSE
 Signature: [Signature]

☒ Site approved: Absorption Trenches (describe dispersal area, e.g. absorption trenches) dispersing Septic Tank Effluent (proposed level of treatment at time of evaluation) to be placed at 24 (inches) depth at site designated on permit. Site provides a total of 1080 square feet of absorption area for primary and reserve (if applicable).

☐ Site disapproved: Reasons for rejection (check all that apply)

- ☐ Position in landscape subject to flooding or periodic saturation.
- ☐ Insufficient depth of suitable soil over hard rock.
- ☐ Insufficient depth of suitable soil to seasonal water table.
- ☐ Rates of absorption too slow.
- ☐ Insufficient area of acceptable soil for required absorption area, and/or reserve area.
- ☐ Proposed system too close to well.
- ☐ Other (specify) _____



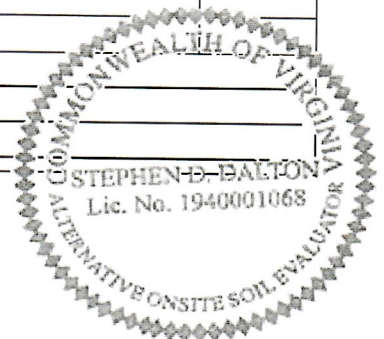
SOIL EVALUATION REPORT

Property ID: Portion of 084.04-01-20.00-0000

☐ See application sketch ☒ See Construction Permit ☐ See sketch on reverse side or page attached to this form.

[illegible]

REMARKS:



System Specifications

VDH Use Only
HDIN: _____

Application Information

Name: Horace Fralin, LLCAddress: **

Phone: _____

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**

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Location Information

Tax Map/GPIN #: Portion of 084.04-01-20.00-0000Property Address: TBD Lost DrRoanoke, VASubdivision: 084.04-01-20.00-0000

Section: _____

Block: _____

Lot: BDirections: South of 5633 Ridgelea Rd

General Information

Property Type (e.g. residential): ResidentialNumber of Bedrooms: 4Daily Flow: 600 gpd

Conditions: _____

Notes: _____

Sewer Line

Diameter: 4 in. Material: SCH 40 PVC (or equivalent) Notes: cleanouts every 50'

Pretreatment Unit(s)

Treatment Level: _____ Septic Tank Capacity: 1,500 gallonsNumber of Septic Tanks 1 Size of Septic Tank(s) 1,500 gallons

Per the Sewage Handling and Disposal Regulations, check which option(s) chosen:

☒ Septic tank with inspection port ☐ Septic tank with effluent filter ☐ Reduced maintenance septic tank

Secondary treatment device(s), if applicable: _____

Notes: PVC 40 4" Tees

Conveyance Line

Conveyance Method: Gravity

If pumping, include pump specifications sheet.

Material: SCH 40 PVC Diameter: 4"Notes: 6" fall per 100'

Distribution Method and Header Lines

Distribution Method: 4" SCH 40 PVCNo. of boxes: 1 No. of outlets: 6+Surge or splitter box required: ☐ Yes ☒ NoHeader Line Material: SCH 40 PVC

Percolation Lines/Absorption Area

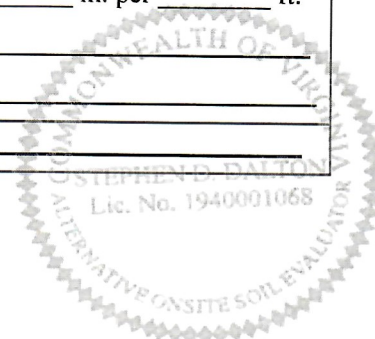
Dispersal Method (e.g. laterals, pad, mound): laterals

If using pressure dispersal (e.g. drip), include pressure dispersal specifications sheet.

No. of laterals/pads: 4 Length of lateral(s)/pad(s): 90 ft. Width of lateral(s)/pad(s): 36 in.Center to center spacing: 10 ft. Installation depth: 24 in. Aggregate depth: n/a in.Size/Type of Aggregate: Infiltrator Chambers Lateral/pad slope: 2'-4" in. per 100 ft.

Reserve Area Provided: _____ % Notes: _____

Please Note: _____



Well Specifications

VDH Use Only

Applicant Information	
Name: <u>Horace Fralin, LLC</u>	Address: <u>**</u>
Phone: _____	<u>**</u> <u>**</u> <u>**</u>
Location Information	
Tax Map/GPIN #: <u>Portion of 084.04-01-20.00-0000</u>	Property Address: <u>TBD Lost Dr</u> Roanoke, VA
Subdivision: <u>084.04-01-20.00-0000</u>	Section: _____ Block: _____ Lot: <u>B</u>
Directions: <u>South of 5633 Ridgelea Rd</u>	
General Information	
Well Purpose (select all that apply): <input checked="" type="checkbox"/> Domestic Drinking Water <input type="checkbox"/> Agricultural	
<input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial/Commercial <input type="checkbox"/> Geothermal	
Well Class: <u>III-C</u>	Minimum Casing Depth: <u>20</u> ft.
Estimated Water Usage: <u>600</u>	Minimum Grout Depth: <u>20</u> ft.
Horizontal Setbacks	
Distance from Building Sewer: <u>100</u> ft.	Distance from Pretreatment Unit(s): <u>100</u> ft.
Distance from Conveyance System: <u>100</u> ft.	Distance from Absorption Area: <u>100</u> ft.
Distance from Property Line: <u>50+</u> ft.	Distance from foundations: <u>50+</u> ft.
Distance from other source(s) of contamination: <u>100</u> ft.	
List other source(s): _____	
Note: _____	
<u>50'+ off property lines bordering agricultural property</u> <u>50'+ off foundations if building is termite treated</u>	

