

Commonwealth of Virginia

Application for Subdivision Review

(page 1 of 2 to be filled out by the Owner or Agent)

VDH Use Only

Health Department ID# _____

Due Date _____

Owner _____

Mailing Address _____

Developer/Agent _____

Mailing Address _____

AOSE _____

Mailing Address _____

Phone _____

Phone _____

Fax _____

Phone _____

Phone _____

Fax _____

Phone _____

Phone _____

Fax _____

Directions to Property: _____

Name of Proposed Subdivision _____

Tax Map _____ Other Property Identification _____ Dimension/Acreage of Property _____

Number of lots proposed _____ Proposed water source (note: new or existing, public or individual) _____

General size of lots _____ (give range if appropriate)

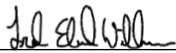
Additional description of subdivision _____

Overview of soils and geology (optional but encouraged) _____

In order for VDH to process a subdivision application you **must** attach a plat of the property showing the location of the proposed onsite sewage disposal systems and the reserve absorption areas (if required) and the location of the water supply system on each lot, if applicable. Each plat or subsection of a subdivision plat shall be accompanied by specific soil information for each lot (absorption area and reserve area). If not provided by the local subdivision ordinance, the district or local health department may require the plat to show streets, utilities, storm drainage, water supplies, easements, lot lines and original topographic contour lines by detail survey or other information as required.

When the OSE site evaluations are reviewed, the property lines, building location and the proposed well and sewage system sites **must** be clearly marked and the property sufficiently visible to see the topography, otherwise this application will be denied.

I give permission to the Virginia Department of Health (VDH) 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 an Onsite Soil Evaluator (OSE) or a Professional Engineer (PE) as necessary until the sewage disposal system has been constructed and approved.



Signature of Owner/Agent

Date

Application for Subdivision Review

VDH Use Only Health Department ID# _____ Due Date _____	
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Revised 9/25/2014

OSE/PE Report Form:

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

Property Location:

911 Address 243 Huff Creek Trail City Amherst
 Lot _____ Section _____ Subdivision _____
 GPIN or Tax Map 81-A-40 Health Dept ID # ~
 Latitude LAT:37°36'25.1689"N Longitude LON:79°04'02.0385"W

Applicant or Client Mailing Address:

Name: Amanda Decoligny
 Street: 23 Franklin Road
 City: Roanoke State VA Zip Code 24521

Prepared by:

OSE/PE Name Fred Edward Willman License # 1940001448
 Street: 106 Vista Centre Dr
 City: Forest State VA Zip Code 24551

Date of Report 10/1/2025 Date of Revision #1 _____
 OSE/PE Job # 25-624 Date of Revision #2 _____

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

<u>Page 1: OSE/PE Report</u>	_____
<u>Page 2-21 : Site & Soil Evaluation Report, and</u>	_____
<u>Abbreviated Design Form for each Lot</u>	_____
<u>And Drainfield Location Map</u>	_____

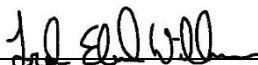
Certification Statement

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 & 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 10/1/2025

Site and Soil Evaluation Report

VDH Use Only

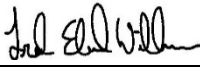
HDIN: _____

General Information

Date 10/1/2025 Amherst County Health Department
 Owner: Amanda DeColigny Phone 540-588-3277
 Owner Address 23 Franklin Road City Roanoke
 Property Address 243 Huff Creek Trail City Amherst
 Tax Map: Part Of 81-A-40 GPIN# _____
 Subdivision _____ Section _____ Block _____ Lot 1

Soil Information Summary

1. Position in landscape satisfactory: ☒ Yes ☐ No Describe landscape position: sideslope
 2. Slope: 6 %
 3. Depth to rock/impervious strata: Max 65+ in. Min 48 in. ☐ not observed
 4. Free Water Present: ☐ Yes ☒ No Range in inches: N/A
 5. Depth to seasonal water table (gray mottling or gray color): N/A inches ☒ Not observed
 6. Soil percolation rate estimated: ☒ Yes ☐ No Estimated rate: 70 min/in at 24 in. depth
 7. Texture Group: ☐ I ☐ II ☒ III ☐ IV
 8. Percolation test performed: ☒ Yes ☐ No If yes, provide additional data on percolation test results.
- Name and title of evaluator: Fred Edward Willman, MAOSE

Signature: 

☒ Site approved: absorption trenches (describe dispersal area, e.g. absorption trenches) dispersing primary (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 2550 square feet of absorption area for primary and reserve (if applicable).

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

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 absorption area, and/or reserve area.
6. ☐ Proposed system too close to well.
7. ☐ Other (specify) _____

Date of Evaluation: 9-23-25 Profile Description

SOIL EVALUATION REPORT

Tax Map / GPIN: 81-A-40

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 Onsite Soil Evaluator or Professional Engineer, 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 the site 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

[illegible]

REMARKS: _____ NIDF = NOT IN DRAINFIELD

ABBREVIATED DESIGN FORM

(SUBDIVISION APPROVAL)

Lot#: 1

Number of Bedrooms: 3

Gallons per day per Bedroom: 150

Design Basis: Table 5.4 Gravity Gravelless EZ Flow

Treatment Level: Primary

Conveyance Method: Gravity

Length of Available Area: 85

Width of Available Area: 93

Reserve Required (%): 100

Number of Trenches: 5

Length of Trenches: 85

Width of Trenches: 3'

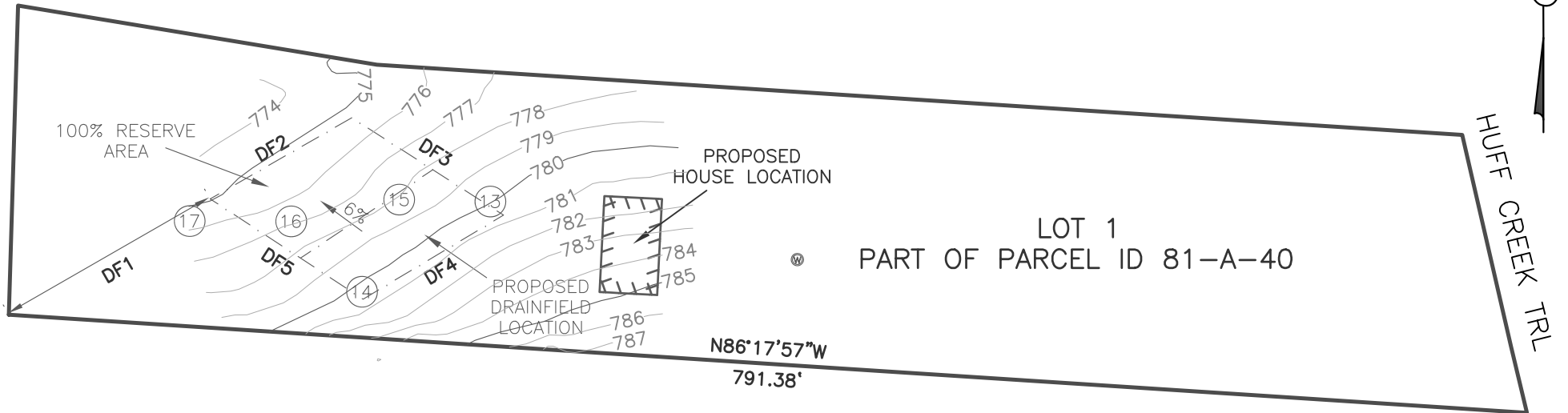
Center to Center Spacing: 9

Width Required: 93

Pump Required: no

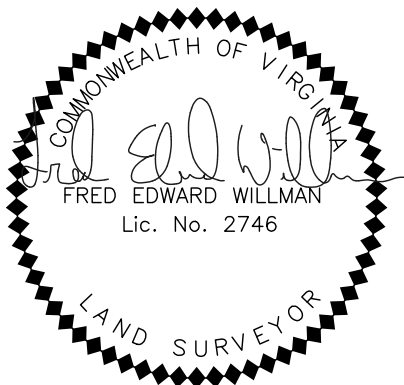
Notes: *TL3 & Drip Required for 100% Reserve installed at 6" deep*

LINE	BEARING	DISTANCE
DF1	N60°04'30"E	120.83'
DF2	N60°10'09"E	84.96'
DF3	S57°16'14"E	93.76'
DF4	S59°04'38"W	85.13'
DF5	N56°44'25"W	95.14'



⊙ = PROPOSED WELL LOCATION

⊕ = AUGER HOLES



DRAINFIELD LOCATION MAP FOR SOILS FOR SUBDIVISION

AMHERST COUNTY, VIRGINIA

SCALE: 1" = 80'

ASD JOB #: 25-624 LOT 1

DATE: OCTOBER 1, 2025



Site and Soil Evaluation Report

VDH Use Only

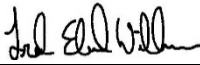
HDIN: _____

General Information

Date 10/1/2025 Amherst County Health Department
 Owner: Amanda DeColigny Phone 540-588-3277
 Owner Address 23 Franklin Road City Roanoke
 Property Address 243 Huff Creek Trail City Amherst
 Tax Map: Part Of 81-A-40 GPIN# _____
 Subdivision _____ Section _____ Block _____ Lot 2

Soil Information Summary

1. Position in landscape satisfactory: ☒ Yes ☐ No Describe landscape position: sideslope
 2. Slope: 18 %
 3. Depth to rock/imperious strata: Max 72+ in. Min 60 in. ☐ not observed
 4. Free Water Present: ☐ Yes ☒ No Range in inches: N/A
 5. Depth to seasonal water table (gray mottling or gray color): N/A inches ☒ Not observed
 6. Soil percolation rate estimated: ☒ Yes ☐ No Estimated rate: 65 min/in at 26 in. depth
 7. Texture Group: ☐ I ☐ II ☒ III ☐ IV Reserve Rate: 65 min/in at 6 in. depth
 8. Percolation test performed: ☒ Yes ☐ No If yes, provide additional data on percolation test results.
- Name and title of evaluator: Fred Edward Willman, MAOSE

Signature: 

☒ Site approved: absorption trenches (describe dispersal area, e.g. absorption trenches) dispersing primary (proposed level of treatment at time of evaluation) to be placed at 26 (inches) depth at site designated on permit. Site provides a total of 1125 Primary 3750 SQFT Reserve square feet of absorption area for primary and reserve (if applicable).

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

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 absorption area, and/or reserve area.
6. ☐ Proposed system too close to well.
7. ☐ Other (specify) _____

Date of Evaluation: 9-23-25 Profile Description**SOIL EVALUATION REPORT**Tax Map / GPIN: 81-A-40

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 Onsite Soil Evaluator or Professional Engineer, 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 the site 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	Depth	Horizon	Description	Texture
1				
	0-6	A	2.5YR 3/4 dark reddish brown loam	
	6-26	Bc1	2.5YR 3/6 dark red light clay loam with fragments of weathered rock	III
	26-28	Cr	Weathered Rock Friable	
2				
	0-8	A	2.5YR 3/3 dark reddish brown loam	IIb
	8-20	Bt	2.5YR 4/6 red clay loam	III
	20-40	Bc1	2.5YR 4/6 red light clay loam with few fragments of weathered rock	III
	40-60	C	2.5YR 4/6 red loam with plugs of light clay loam	IIb
	60	Cr	Weathered Rock Friable	
3				
	0-6	A	2.5YR 3/3 dark reddish brown loam	IIb
	6-15	Bt	2.5YR 4/6 red clay loam	III
	15-26	Bc1	2.5YR 5/6 red light clay loam with few fragments of weathered rock	III
	26-40	BC2	2.5YR 4/6 red light clay loam with few fragments of weathered rock	III
	40-72	C	5YR 5/6 yellowish red loam	IIb
4				
	0-5	A	2.5YR 3/3 dark reddish brown loam	IIb
	5-16	Bt	2.5YR 3/6 dark red clay loam	III
	16-26	Bc1	2.5YR 4/6 red light clay loam	III
	26-48	C	2.5YR 4/8 red loam with few fragments of weathered rock and few plugs of light clay loam	IIb
	48-72	C2	2.5YR 5/4 reddish brown loam with few fragments of weathered rock soil tight	IIb
5				
	0-6	A	2.5YR 3/4 dark reddish brown loam	IIb
	6-19	Bt	2.5YR 3/4 dark reddish brown clay loam	III
	19-30	Bc1	2.5YR 4/6 red light clay loam with few small to medium sized quartz rocks and few frags of weatherd rock	III
	30-45	BC2	2.5YR 3/6 dark red light clay loam with few fragments of weathered rock soil tight	III
	45-68	C	2.5YR 4/6 red loam with fragments of weathered rock plugs of light clay loam	IIb
	68-70	Cr	Weathered Rock Friable	

REMARKS: NIDF = NOT IN DRAINFIELD

ABBREVIATED DESIGN FORM

(SUBDIVISION APPROVAL)

Lot#: 2

Number of Bedrooms: 3

Gallons per day per Bedroom: 150

Design Basis: Table 5.4 Gravity Gravelless EZ Flow

Treatment Level: Primary

Conveyance Method: Gravity

Length of Available Area: 75

Width of Available Area: 93

Reserve Required (%): 100

Number of Trenches: 5

Length of Trenches: 75

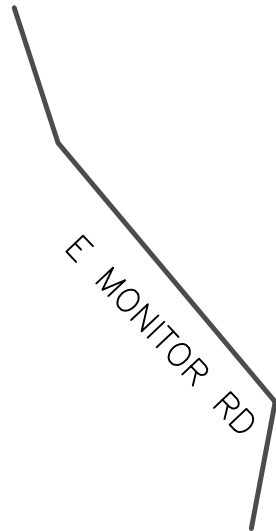
Width of Trenches: 3'

Center to Center Spacing: 10

Width Required: 43 Primary

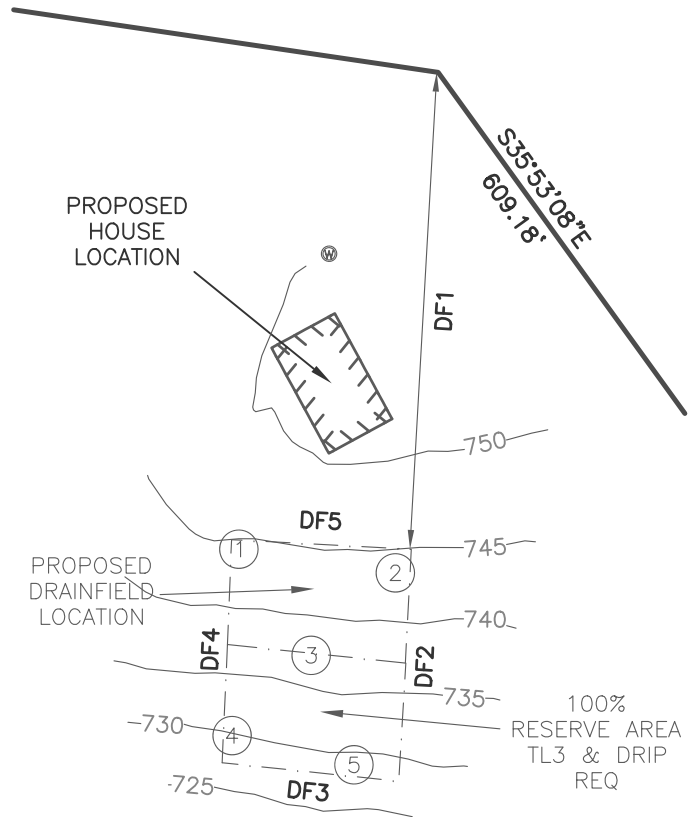
Pump Required: no

Notes: TL3 & Drip Required for 100% Reserve installed at 6" deep $450/0.22 = 2045$ REQ
3750 Provided



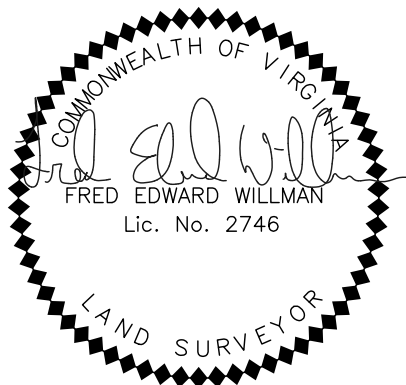
LOT 2
PART OF PARCEL ID 81-A-40

LINE	BEARING	DISTANCE
DF1	S03°13'04"W	198.98'
DF2	S03°05'57"W	96.78'
DF3	N84°01'38"W	73.98'
DF4	N02°24'56"E	93.01'
DF5	S86°57'29"E	75.00'



⊙ = PROPOSED WELL LOCATION

⊕ = AUGER HOLES



DRAINFIELD LOCATION MAP FOR
SOILS FOR SUBDIVISION

AMHERST COUNTY, VIRGINIA

SCALE: 1" = 80'

ASD JOB #: 25-624 LOT 2

DATE: OCTOBER 1, 2025



Site and Soil Evaluation Report

VDH Use Only

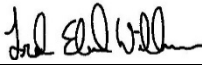
HDIN: _____

General Information

Date 10/1/2025 Amherst County Health Department
 Owner: Amanda DeColigny Phone 540-588-3277
 Owner Address 23 Franklin Road City Roanoke
 Property Address 243 Huff Creek Trail City Amherst
 Tax Map: Part Of 81-A-40 GPIN# _____
 Subdivision _____ Section _____ Block _____ Lot 3

Soil Information Summary

1. Position in landscape satisfactory: ☒ Yes ☐ No Describe landscape position: sideslope
 2. Slope: 6 %
 3. Depth to rock/impervious strata: Max 72+ in. Min 66 in. ☐ not observed
 4. Free Water Present: ☐ Yes ☒ No Range in inches: N/A
 5. Depth to seasonal water table (gray mottling or gray color): N/A inches ☒ Not observed
 6. Soil percolation rate estimated: ☒ Yes ☐ No Estimated rate: 65 min/in at 30 in. depth
 7. Texture Group: ☐ I ☐ II ☒ III ☐ IV
 8. Percolation test performed: ☒ Yes ☐ No If yes, provide additional data on percolation test results.
- Name and title of evaluator: Fred Edward Willman, MAOSE

Signature: 

☒ Site approved: absorption trenches (describe dispersal area, e.g. absorption trenches) dispersing primary (proposed level of treatment at time of evaluation) to be placed at 30 (inches) depth at site designated on permit. Site provides a total of 2250 square feet of absorption area for primary and reserve (if applicable).

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

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 absorption area, and/or reserve area.
6. ☐ Proposed system too close to well.
7. ☐ Other (specify) _____

Date of Evaluation: 9-23-25 Profile Description

SOIL EVALUATION REPORT

Tax Map / GPIN: 81-A-40

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 Onsite Soil Evaluator or Professional Engineer, 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 the site 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

[illegible]

REMARKS: _____ NIDF = NOT IN DRAINFIELD

ABBREVIATED DESIGN FORM

(SUBDIVISION APPROVAL)

Lot#: 3

Number of Bedrooms: 3

Gallons per day per Bedroom: 150

Design Basis: Table 5.4 Gravity Gravelless EZ Flow

Treatment Level: Primary

Conveyance Method: Gravity

Length of Available Area: 75

Width of Available Area: 84

Reserve Required (%): 100

Number of Trenches: 5

Length of Trenches: 75

Width of Trenches: 3'

Center to Center Spacing: 9

Width Required: 83

Pump Required: no

Notes:

LINE	BEARING	DISTANCE
DF1	S49°18'07"W	61.90'
DF2	S16°11'55"W	75.00'
DF3	S58°54'45"E	84.00'
DF4	N31°05'15"E	75.00'
DF5	N60°18'34"W	103.30'

LOT 3
PART OF PARCEL ID 81-A-40

E MONITOR RD

S81°36'23"E
731.31'

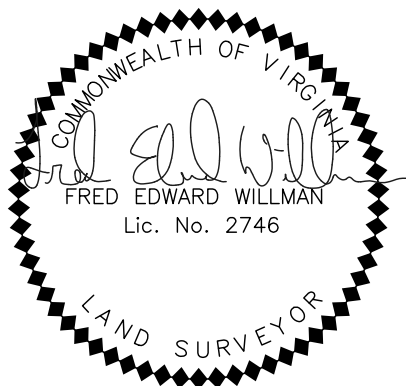
100% RESERVE
AREA

PROPOSED
DRAINFIELD
LOCATION

PROPOSED
HOUSE
LOCATION

⊗ = PROPOSED WELL LOCATION

⊕ = AUGER HOLES



PAGE: 13 OF 21

DRAINFIELD LOCATION MAP FOR
SOILS FOR SUBDIVISION

AMHERST COUNTY, VIRGINIA

SCALE: 1" = 80'

ASD JOB #: 25-624 LOT 3

DATE: OCTOBER 1, 2025



Site and Soil Evaluation Report

VDH Use Only

HDIN: _____

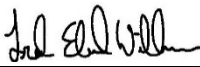
General Information

Date 10/1/2025 Amherst County Health Department
 Owner: Amanda DeColigny Phone 540-588-3277
 Owner Address 23 Franklin Road City Roanoke
 Property Address 243 Huff Creek Trail City Amherst
 Tax Map: Part Of 81-A-40 GPIN# _____
 Subdivision _____ Section _____ Block _____ Lot 4

Soil Information Summary

1. Position in landscape satisfactory: ☒ Yes ☐ No Describe landscape position: sideslope
2. Slope: 5 %
3. Depth to rock/impervious strata: Max 72+ in. Min 46 in. ☐ not observed
4. Free Water Present: ☐ Yes ☒ No Range in inches: N/A
5. Depth to seasonal water table (gray mottling or gray color): inches ☒ Not observed
6. Soil percolation rate estimated: ☒ Yes ☐ No Estimated rate: 70 min/in at 24 in. depth
7. Texture Group: ☐ I ☐ II ☒ III ☐ IV Reserve Area Rate: 70 min/in at 6 in. depth
8. Percolation test performed: ☒ Yes ☐ No If yes, provide additional data on percolation test results.

Name and title of evaluator: Fred Edward Willman, MAOSE

Signature: 

☒ Site approved: absorption trenches (describe dispersal area, e.g. absorption trenches) dispersing primary (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 1125 Primary 3315 Reserve square feet of absorption area for primary and reserve (if applicable).

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

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 absorption area, and/or reserve area.
6. ☐ Proposed system too close to well.
7. ☐ Other (specify) _____

Date of Evaluation: 9-23-25 Profile Description**SOIL EVALUATION REPORT**Tax Map / GPIN: 81-A-40

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 Onsite Soil Evaluator or Professional Engineer, 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 the site 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	Depth	Horizon	Description	Texture
1				
NIDF	0-9	Ap	2.5YR 5/4 reddish brown loam	IIb
	9-15	Bt	2.5YR 3/6 dark red clay loam	III
	15-26	BC1	2.5YR 4/6 red light clay loam with fragments of weathered rock	III
	26-43	BC2	5YR 4/6 yellowish red light clay loam with many fragments of weathered rock	III
	43-46	Cr	Weathered Rock friable	
2				
	0-5	Ap	5YR 4/4 reddish brown loam	IIb
	5-12	Bt	2.5YR 4/6 red clay loam	III
	12-24	BC1	2.5YR 4/6 red light clay loam with many fragments of weathered rock	III
	24-26	Cr	Weathered Rock friable	
3				
	0-6	Ap	2.5YR 5/6 red loam	IIb
	6-17	Bt	2.5YR 4/6 red clay loam	III
	17-39	BC1	2.5YR 3/6 dark red light clay loam with fragments of weathered rock	III
	39-52	BC2	2.5YR 3/4 dark reddish brown light clay loam with many fragments of weathered rock	III
	52-58	Cr	Weathered Rock friable	
4				
NIDF	0-5	Ap	2.5YR 5/4 reddish brown loam	IIb
	5-13	Bt	5YR 4/4 reddish brown clay loam	III
	13-23	BC1	2.5YR 4/6 red light clay loam with many fragments of weathered rock	III
	23-32	Cr	Weathered Rock friable	
5				
	0-10	Ap	2.5YR 5/4 reddish brown loam	IIb
	10-20	Bt	2.5YR 4/6 red clay loam	III
	20-46	Bc1	2.5YR 4/6 red light clay loam with many fragments of weathered rock	III
	46-53	Cr	Weathered Rock friable	
6				
	0-8	Ap	2.5YR 5/4 reddish brown loam	IIb
	8-24	Bt	2.5YR 4/6 red clay loam	III
	24-56	BC1	2.5YR 4/6 red light clay loam with many fragments of weathered rock	III
	56-72	C	2.5YR 4/4 reddish brown loam with fragments of weathered rock and few plugs of light clay loam	IIb
7				
	0-4	Ap	2.5YR 5/4 reddish brown loam	IIb
	4-22	Bt	2.5YR 5/6 red clay loam	III
	22-42	BC1	5YR 4/6 yellowish red light clay loam with fragments of weathered rock	III
	42-60	BC2	2.5YR 4/4 reddish brown light clay loam with few fragments of weathered rock	III
	60-72	C	7.5YR 4/6 strong brown loam with few fragments of weathered rock and few plugs of light clay loam	IIb

REMARKS: NIDF = NOT IN DRAINFIELD

ABBREVIATED DESIGN FORM

(SUBDIVISION APPROVAL)

Lot#: 4

Number of Bedrooms: 3

Gallons per day per Bedroom: 150

Design Basis: Table 5.4 Gravity Gravelless EZ Flow

Treatment Level: Primary

Conveyance Method: Gravity

Length of Available Area: 85

Width of Available Area: 75

Reserve Required (%): 100

Number of Trenches: 5

Length of Trenches: 85

Width of Trenches: 3'

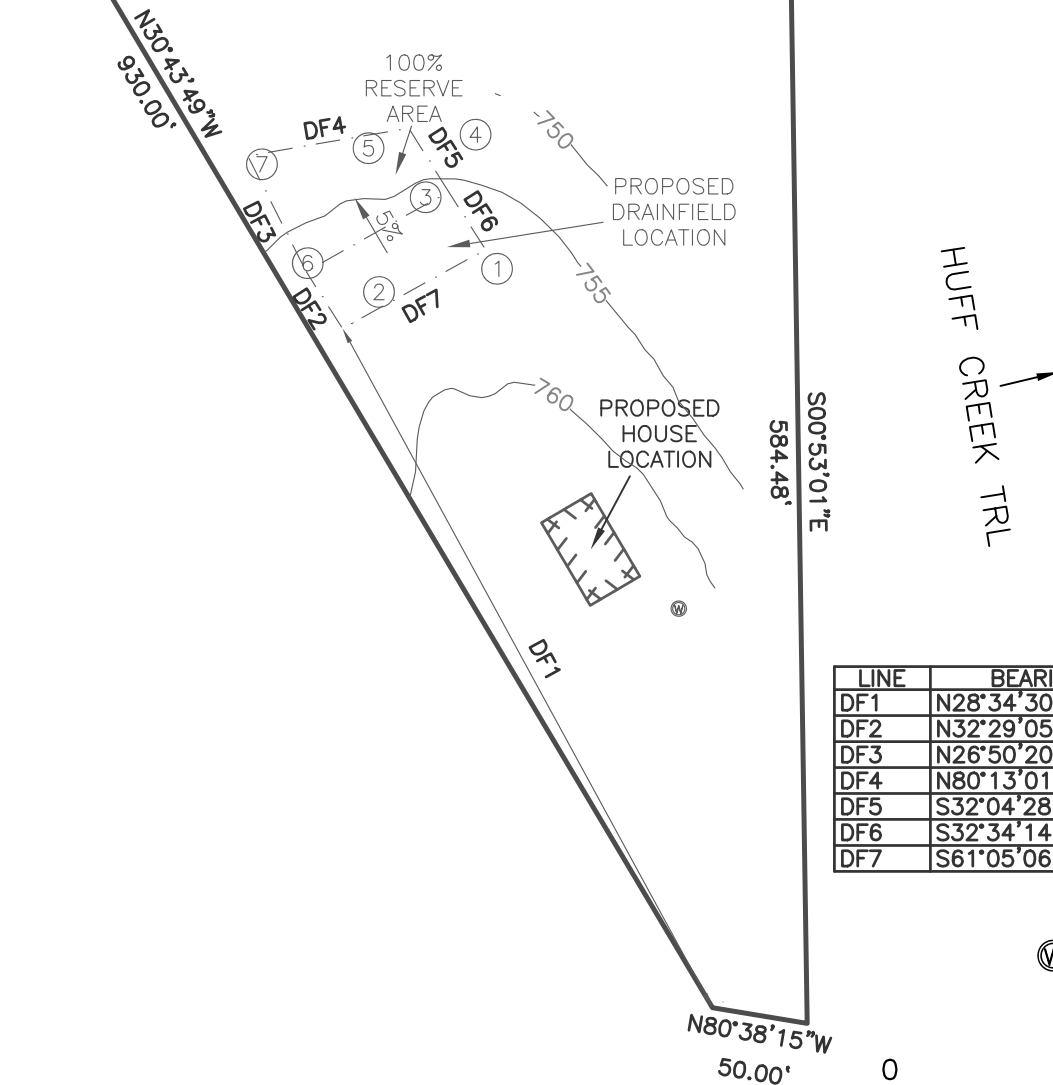
Center to Center Spacing: 9

Width Required: 39 Primary

Pump Required: no

Notes: TL3 & Drip Required for 100% Reserve installed at 6" deep
 $450/0.21 = 2142$ SQFT Req 3315 SQFT Provided

LOT 4
PART OF PARCEL ID 81-A-40



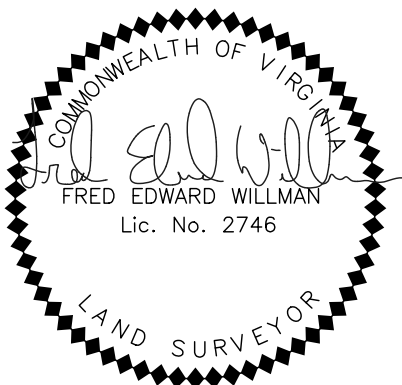
LINE	BEARING	DISTANCE
DF1	N28°34'30\"W	402.81'
DF2	N32°29'05\"W	35.20'
DF3	N26°50'20\"W	67.48'
DF4	N80°13'01\"E	85.11'
DF5	S32°04'28\"E	39.06'
DF6	S32°34'14\"E	35.74'
DF7	S61°05'06\"W	85.10'

⊙ = PROPOSED WELL LOCATION

⊕ = AUGER HOLES



PAGE: 17 OF 21



DRAINFIELD LOCATION MAP FOR
SOILS FOR SUBDIVISION

AMHERST COUNTY, VIRGINIA

SCALE: 1" = 80'

ASD JOB #: 25-624 LOT 4

DATE: OCTOBER 1, 2025



ACCUPOINT
SURVEYING & DESIGN

SURVEYORS ♦ ENGINEERS ♦ SOIL EVALUATORS
106 VISTA CENTRE DRIVE, FOREST, VA 24551
PH: 434-610-4334 WWW.ACCUPOINTSURVEYING.COM

Site and Soil Evaluation Report

VDH Use Only

HDIN: _____

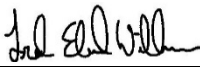
General Information

Date 10/1/2025 Amherst County Health Department
 Owner: Amanda DeColigny Phone 540-588-3277
 Owner Address 23 Franklin Road City Roanoke
 Property Address 243 Huff Creek Trail City Amherst
 Tax Map: Part Of 81-A-40 GPIN# _____
 Subdivision _____ Section _____ Block _____ Lot 6

Soil Information Summary

1. Position in landscape satisfactory: ☒ Yes ☐ No Describe landscape position: sideslope
2. Slope: 15 %
3. Depth to rock/impervious strata: Max 56+ in. Min 46 in. ☐ not observed
4. Free Water Present: ☐ Yes ☒ No Range in inches: N/A
5. Depth to seasonal water table (gray mottling or gray color): inches ☒ Not observed
6. Soil percolation rate estimated: ☒ Yes ☐ No Estimated rate: 65 min/in at 24 in. depth
7. Texture Group: ☐ I ☐ II ☒ III ☐ IV Reserve Area Rate: 65 min/in at 6 in. depth
8. Percolation test performed: ☒ Yes ☐ No If yes, provide additional data on percolation test results.

Name and title of evaluator: Fred Edward Willman, MAOSE

Signature: 

☒ Site approved: absorption trenches (describe dispersal area, e.g. absorption trenches) dispersing primary (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 1140 Primary Reserve 3990 square feet of absorption area for primary and reserve (if applicable).

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

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 absorption area, and/or reserve area.
6. ☐ Proposed system too close to well.
7. ☐ Other (specify) _____

Date of Evaluation: 9-23-25 Profile Description

SOIL EVALUATION REPORT

Tax Map / GPIN: 81-A-40

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 Onsite Soil Evaluator or Professional Engineer, 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 the site 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

[illegible]

REMARKS: _____ NIDF = NOT IN DRAINFIELD

ABBREVIATED DESIGN FORM

(SUBDIVISION APPROVAL)

Lot#: 6

Number of Bedrooms: 3

Gallons per day per Bedroom: 150

Design Basis: Table 5.4 Gravity Gravelless EZ Flow

Treatment Level: Primary

Conveyance Method: Gravity

Length of Available Area: 95

Width of Available Area: 72

Reserve Required (%): 100

Number of Trenches: 4

Length of Trenches: 95

Width of Trenches: 3'

Center to Center Spacing: 10

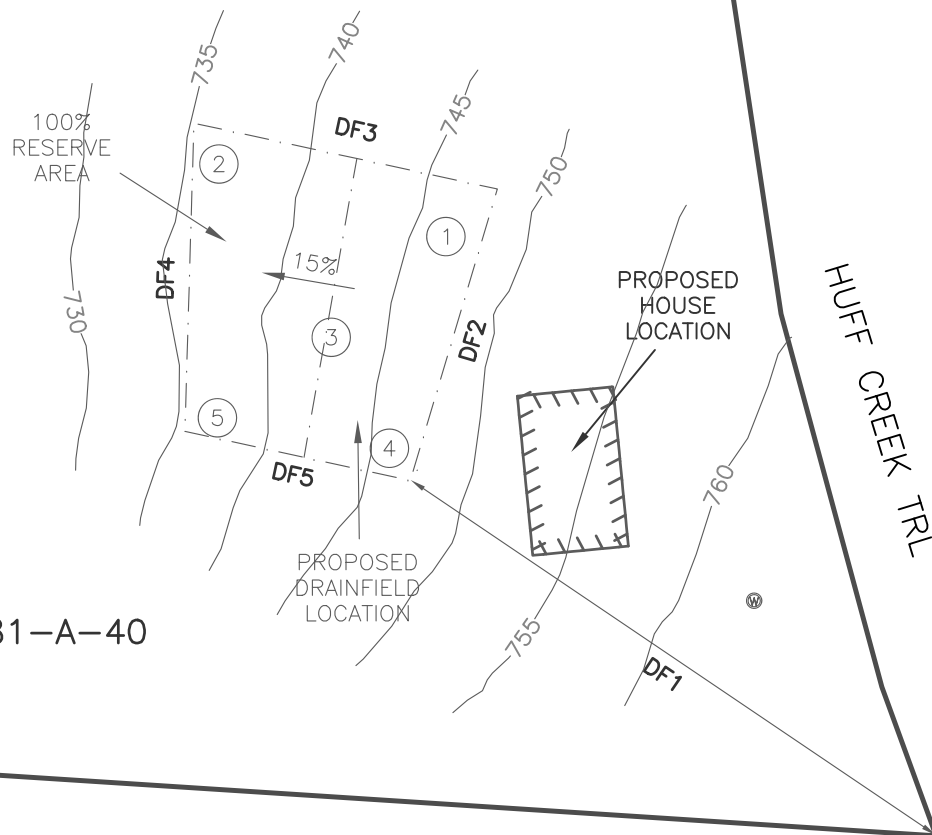
Width Required: 30 Primary

Pump Required: no

Notes: TL3 & Drip Required for 100% Reserve installed at 6" deep
 $450 / 0.22 = 2045$ SQFT Req 3990 Provided

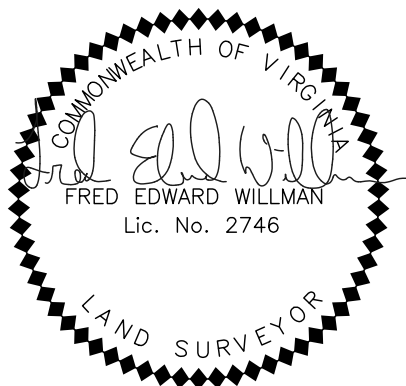
LINE	BEARING	DISTANCE
DF1	N55°56'31"W	198.25'
DF2	N16°37'02"E	95.05'
DF3	N77°45'51"W	97.01'
DF4	S01°40'55"W	96.32'
DF5	S77°42'09"E	72.10'

LOT 6
PART OF PARCEL ID 81-A-40



Ⓜ = PROPOSED WELL LOCATION

Ⓢ = AUGER HOLES



PAGE: 21 OF 21

DRAINFIELD LOCATION MAP FOR
SOILS FOR SUBDIVISION

AMHERST COUNTY, VIRGINIA

SCALE: 1" = 60'

ASD JOB #: 25-624 LOT 6

DATE: OCTOBER 1, 2025

