

# RECORD OF INSPECTION-SEWAGE DISPOSAL SYSTEM

Subd.

Date 11/19/79 Case No. 359/78

Owner Fred W. Sharp, Jr. Trustee Address Markham, Va. Phone \_\_\_\_\_  
 Applicant Robert F. Robinson (Mailing Address) Address 11405 Raven Dr., Potomac, Md. Phone 299-5011  
 Occupant \_\_\_\_\_ (Mailing Address) 20854  
 Exact Location Highlands Lot 6  
 of Premises \_\_\_\_\_  
 (Subdivision, Street or Road Name, Section or Lot No.)

## WATER SUPPLY INSPECTION

Installed according to Permit Design ☒ Yes ☐ No. Distance to nearest House Sewer 70 feet. Distance to nearest Sewage Disposal System 100 feet. (Use Form LHS-143 for Detailed inspection of Water Supply Reference Materials.)

## SEWAGE DISPOSAL SYSTEM INSPECTION

- (1) LOCATION  
 Allotted Area adequate ☒ Yes ☐ No. Distance from nearest lot lines 10 feet. Trees 10 feet. Water Supplies 100 feet. Buildings 70 feet.
- (2) INSTALLATION AND DESIGN  
 Installed according to Permit Design ☒ Yes ☐ No.  
 Have additional Household Appliances been added NOT on Permit:  
☐ Automatic Washer ☐ Garbage Disposal  
☒ Other NONE (Describe)
- (3) SOIL CONDITION  
 Are there soil conditions now evident which indicate system may be unsatisfactory as designed: ☐ Yes ☒ No. If Yes, show adjustments required under "Remarks" below.
- (4) HOUSE SEWER LINE  
 Installed ☐ Yes ☒ No. Type of material 5" PVC Size 4 Inches.
- (5) SEPTIC TANK  
 Constructed of Concrete (Kind of Material)  
 Inside Dimensions Length 8 feet. Width 4 feet. Liquid Depth 4.3 feet. Depth of Air Space 17 inches.  
 Inside Fittings comply with requirements ☒ Yes ☐ No.
- (6) DISTRIBUTION BOX  
 Watertight and equal surcharge to each line by Water Test ☒ Yes ☐ No. Distribution Box provided with 2 extra outlets for future use. (Number)
- (7) SUBSURFACE ABSORPTION FIELD  
 Total Area in bottom of ditches 2400 square feet. Number of ditches 10 Length of ditches 100 feet. Grade of ditches Minimum 2 1/2 Inches per 100 feet. Maximum 4 inches per 100 feet. Has system been checked by instruments (Level) ☒ Yes ☐ No. Type aggregate used Broken Rock Depth of aggregate under Tile 6 inches Total depth of aggregate 13 inches Depth of backfill over aggregate 26 inches
- (8) SURFACE DRAINAGE  
 Storm Drains from House and Basement flowing away from Subsurface Drainage Field: ☒ Yes ☐ No. Was Surface Drainage required ☐ Yes ☒ No. If Yes, has this been provided ☐ Yes ☐ No. Has area been drained by lowering Ground Water Table: ☐ Yes ☐ No. ☒ Not required.
- (9) Are follow-up inspections necessary ☐ Yes ☒ No.

Septic Tank Contractor: Triple R Const. Address Norfolk, VA Phone \_\_\_\_\_  
 This Sewage Disposal System (Is) (Is Not) Approved by F. Quinn Health Department  
 Date 11/19/79 Signed Ronald P. Cone (Sanitarian)  
 Date \_\_\_\_\_ Approved OK (Reviewing Authority)

With proper maintenance, approved Sewage Disposal systems may be expected to function satisfactorily, provided no overloading or physical damage occurs to the system. Remarks: Clean Septic Tank every 3 to 5 yrs.

PERMIT TO INSTALL ☒ REPAIR, ☐ REASONS FOR REJECTION ☐ Subdiv.  
WATER SUPPLY ☒ SEWAGE DISPOSAL SYSTEM ☒

- (1) Void after (12) twelve months. (2) Automatically cancelled when site conditions are changed from those shown on permit.  
(3) Automatically cancelled should facts later become known that a potential hazard would be created by continuing installation.

FHA/VA ☐ Yes ☒ No Date 9/8/78 Case No. 859/78

Owner Fred W. Sharp, Jr. Trustee Address Markham, Va. Phone \_\_\_\_\_

Applicant Robert F. Robinson Address 11405 Roven Dr., Potomac, Md. Phone 299-5011  
Occupant \_\_\_\_\_ (Mailing Address) 20854

Exact Location Highlands Lot 6  
of premises \_\_\_\_\_ (Subdivision, Street or Road Name, Section or Lot No.)

FOR: ☒ Dwelling ☐ Other Single Automatic Washing Machine ☐ Yes ☐ No Consumption 1000 gal. per day  
Actual ☐ Potential ☒ Bedrooms 15 Garbage Disposal Unit ☐ Yes ☒ No (☐ Actual ☒ estimated Water)  
Additional wastes 3 1/2 Bath

(1) WATER SUPPLY (Existing) Class \_\_\_\_\_ Approved Yes ☐ No ☐ Other terminate (no) 12' above ground  
(To be installed) Class III Cased- \_\_\_\_\_ ft. to be grouted \_\_\_\_\_ ft.  
(Unless supported by positive evidence Class III is to be considered as to be installed.) Should be 6' to 8' to 10' min. of 20' (as in) + 6' net

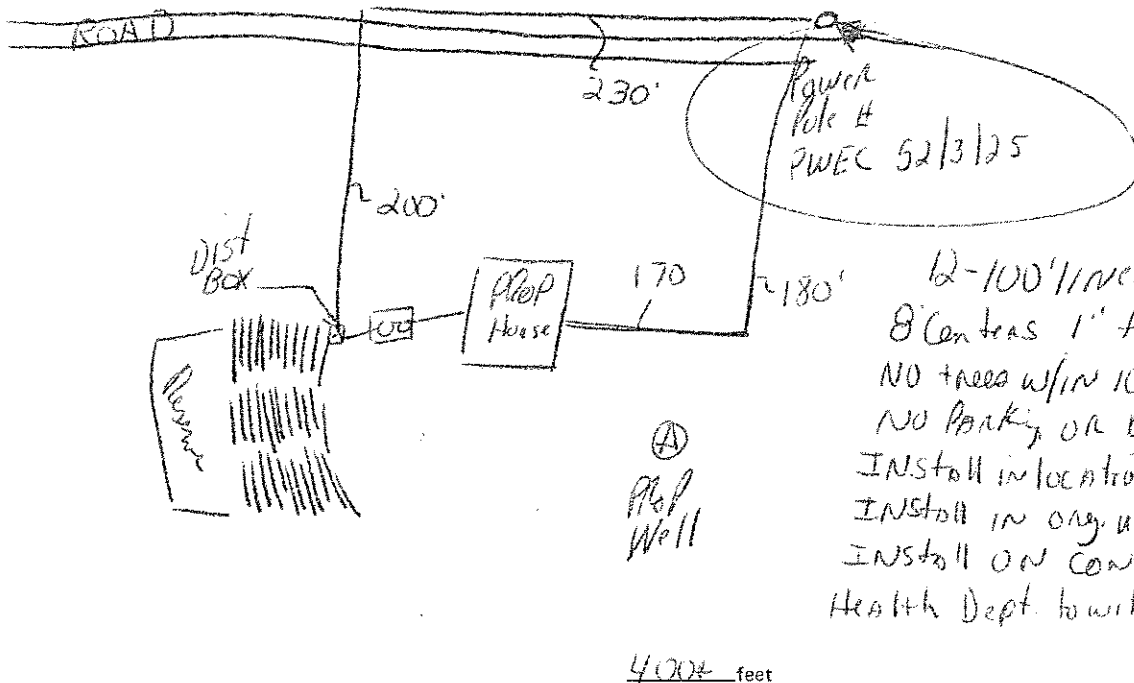
(2) SOIL STUDY Naturally drained, suitable by sight ☒ Yes ☐ No Technical Classification \_\_\_\_\_ (If Known)  
Estimated Percolation Rate 1-10 ☐ 11-25 ☐ 26-50 ☐ > 51 ☐ Percolation Test Required ☐ Yes ☐ No ☒ Rate \_\_\_\_\_  
(Minutes per inch) (Minutes per inch to nearest 10 minutes)  
Depth to Grey Mottles about 4 1/2 inches (estimate over 4 ft.) OTHER \_\_\_\_\_  
Surface drainage required ☐ Yes ☒ No OTHER DRAINAGE Drain off

(3) HOUSE SEWER LINE Size 4 inches. Type of material required sch 40 Distance from Water Supply 20 feet.

(4) DETAILS OF CONSTRUCTION Watertight Septic Tank of concrete Material Liquid Capacity 1500 gallons.  
Inside Dimensions Length 8'6" feet. Width 4'6" feet. Liquid Depth 4'1" feet. Depth of Air Space 1'3" feet.

SUBSURFACE ABSORPTION FIELD Number of square feet required 2400 Type aggregate required blended sand 1/2 to 2 1/2"  
(5) Depth of aggregate from base of tile to bottom of ditches 6 inches. Allowable fall 2 to 4 inches.  
Total aggregate minimum depth 13 inches or more. Depth of drainfield to be 38 inches from surface of original ground.  
Distance from well to septic tank 50 feet; distance from well to drainfield 100 feet.

Rough Sketch of Premises (including adjacent properties if pertinent, Showing Location of Lot Line, Buildings, Water Supplies, Sewage Disposal Systems, Trees, and Other Possible Sources of Contamination of Water Supplies, by Indicating Distances and Slope with regard to one another.



12-100' lines 2' wide  
8' centers 1' fall/25'  
NO trees w/in 10' of system  
NO PARKING OR DRIVE ON SYSTEM  
INSTALL IN LOCATION SHOWN  
INSTALL IN ORG. UNDIST. EARTH  
INSTALL ON CONTOUR  
Health Dept. to witness will grant.

Signature \_\_\_\_\_ Note: Owner or his agent must notify F. A. ... County Health Department, Phone 347-4510 when installation is ready for inspection. If any Sewage Disposal System, or part thereof, is covered before being inspected by the Health Department, it shall be uncovered at the direction of the Health Director or his agent. CONDITIONS DISCOVERED DURING INSTALLATION MAY REQUIRE ADJUSTMENTS OF SYSTEM DESIGN. Changes from above specifications require Health Department approval before being made.

Based on the above information, the undersigned recommends that this permit be issued.  
Date \_\_\_\_\_ Approved \_\_\_\_\_ (Reviewing Authority) Date 9/8/78 Signed Ronald P. Cone (Sanitarian or Health Director)

# WATER SUPPLY

County/City Fauquier Date 2/20/78 Case No. 859/78

☐ Proposed ☐ Public ☐ Non-Public Drinking  
☐ Record of Inspection ☐ Quasi - Public

Owner Fred W. Sharp, Trustee Address Markham, Va. Phone \_\_\_\_\_  
 (Mailing Address)

Applicant Robert F. Robinson Address 11405 Roven Dr., Potomac, Md. Phone 299-5011  
 Occupant (Mailing Address)

Exact Location of Premises \_\_\_\_\_  
 (Subdivision, Street or Road Name, Section or Lot No.)

TYPE CUSTOMERS: ☐ Community ☐ Industrial ☐ Recreational ☒ Other: Private Home

TYPE SOURCE PROPOSED: \_\_\_\_\_

TOTAL PROPOSED ULTIMATE CONNECTIONS: \_\_\_\_\_

TOTAL PROPOSED ULTIMATE PERSONS (EMPLOYEES) SERVED: \_\_\_\_\_

TOTAL PROPOSED PRESENT CONNECTIONS: \_\_\_\_\_

TOTAL PROPOSED PRESENT POPULATION SERVED: \_\_\_\_\_

\* Notify Division of Engineering (Regional Engineer) of impending development of a Public Water Supply.

AN INDIVIDUAL WATER SUPPLY ☒ New ☐ Existing FROM ☒ Drilled Well ☐ Driven Well ☐ Bored Well  
☐ Dug Well ☐ Other \_\_\_\_\_ FOR ☒ Home ☐ Restaurant ☐ Trailer Court ☐ Motel  
☐ Service Station ☐ Other \_\_\_\_\_

If a new supply, inspect for compliance with standards. If an existing supply, furnish as much information as may be available.

SOURCE OF INFORMATION Domestic Well Co. IS PUBLIC WATER SUPPLY AVAILABLE ☐ Yes ☒ No

SEWAGE DISPOSAL BY ☐ PUBLIC SEWER Well ☒ COMMUNITY SYSTEM ☒ INDIVIDUAL SYSTEM ON SITE.

## INSPECTION FINDINGS

(1) WATERSHED Surface Drainage away from source in all directions  
☐ Yes ☐ No. Distance Source from possible causes of contamination Sewer Line \_\_\_\_\_ feet. Type of material used in Sewer Line \_\_\_\_\_ (Describe) Septic Tank \_\_\_\_\_ feet.

Seepage Pit \_\_\_\_\_ feet. Subsurface Absorption Field (nearest point) \_\_\_\_\_ feet. Other \_\_\_\_\_ feet.

Note any serious obstacles in watershed on back of form.

(2) TYPE OF SOIL FORMATION ☐ Tight Clay ☐ Limestone  
☐ Sandstone ☒ Other Gravelly Sandstone (Describe)

(3) CLASSIFICATION OF WELL ☐ Type - 1 ☐ Type - 2A  
☐ Type - 2B ☒ Type - 3 ☐ Other

(4) CONSTRUCTION DETAILS Total depth 570 feet.  
 Diameter 6 1/4 inches. Type of casing Steel #13 (Describe)  
 Depth of casing 541 feet. Exterior space around casing sealed with ☒ Concrete grout to depth of 541 feet.  
☐ Poured in place ☒ Pumped in under pressure ☐ Other type backfill \_\_\_\_\_ (Describe) to depth of \_\_\_\_\_ feet.  
 casing extends 121 inches above ground.

(5) WATER SOURCE COVER ☐ Concrete ☒ Metal ☐ Other  
 (Kind of Material) Opening in Cover watertight

☐ Yes ☐ No. If no, explain \_\_\_\_\_

(6) PUMP ☐ Shallow Well ☐ Deep Well. Length of Drop Pipe \_\_\_\_\_ feet. Well capacity \_\_\_\_\_ gallons per minute.  
 Size of Feeder Pipe \_\_\_\_\_ inches.

(7) PUMP LOCATION ☐ In Well ☐ Over Well ☐ Offset.  
 If offset, does watertight casing extend to Pump ☐ Yes ☐ No  
 Pump room located \_\_\_\_\_ feet from Well.

Pump room drained by gravity through 4 - inch or larger pipe to surface to ground ☐ Yes ☐ No. Pump platform of concrete or other impervious material, at least 4 inches thick at casing, extending at least 24 inches in all directions, sloped to drain;  
☐ Yes ☐ No. Pump mounting watertight ☐ Yes ☐ No.  
 Sanitary Well Seal in casing and properly vented ☐ Yes ☐ No.

(8) TYPE OF STORAGE ☐ Pressure ☐ Gravity. Capacity \_\_\_\_\_ gallons. If gravity, is overflow pipe screened ☐ Yes ☐ No.

THIS WATER SUPPLY SYSTEM ☒ Is ☐ Recommended by Fauquier Co. ☐ Div. Engineering  
Construction Only ☐ Is not ☒ Approved ☒ Health Department

REMARKS: This well was installed Tuesday Oct. 10th before equipment failure. (Spending finished today)  
Hydrus (H) bags of Portland Type II cement used

Date 2/23/78 Signed Richard Matheson Date \_\_\_\_\_ Approved \_\_\_\_\_ (Health Director)

Date \_\_\_\_\_ Approved \_\_\_\_\_ Date \_\_\_\_\_ Approved \_\_\_\_\_ (Reviewing Authority—Other Agency or Engineer)