



County of Fairfax, Virginia

To protect and enrich the quality of life for the people, neighborhoods and diverse communities of Fairfax County

ONSITE SEWAGE DISPOSAL SYSTEM AND/OR WELL CONSTRUCTION/PERMIT APPLICATION

CHECK APPLICABLE FROM OPTIONS LISTED BELOW:

() NEW CONSTRUCTION (X) SEWAGE DISPOSAL SYSTEM PERMIT () INDIVIDUAL WELL WATER SUPPLY PERMIT
(X) ADDITION/REMODELING () SEWAGE SYSTEM EXPANSION () DEMO PERMIT () WELL ABANDONMENT
() BETTERMENT LOAN ELIGIBILITY (\$50.00 FEE)

TO BE COMPLETED BY THE APPLICANT (PLEASE PRINT CLEARLY)

PERMIT TO BE MAILED TO: OWNER (X) AGENT ()

OWNER Jean Reimers PHONE 703-943-8637 EMAIL jean.reimers1@verizon.net

ADDRESS 214 Donmore Drive CITY Great Falls ZIP 22066

AGENT Soil Tech, Inc. PHONE 703-631-9647 EMAIL bill@soiltechinc.com

ADDRESS 14630-F Flint Lee Road CITY Chantilly ZIP 20151

PROPERTY ADDRESS 214 Donmore Drive TAX MAP 2-2-002-18

SUBDIVISION Seneca Farms SECTION 3 BLOCK LOT 18

(X) RESIDENTIAL

Sewage: (X) Septic Tank () Public () Other () Basement - Plumbing in Basement () Yes (X) No

Proposed Septic usage $\geq$ 1000 GPD () Yes (X) No

Number of Potential Bedrooms 5 Number of Kitchens 1 Number of Laundry Rooms 1

Water: (X) Well () Public () Other Number of Geothermal Wells: 0

Will foundation be chemically treated for termites () Yes (X) No

() COMMERCIAL

Sewage: () Septic Tank () Public () Other Estimated Number of Patrons using sanitary facilities;

Number of Employees using sanitary facilities; Total Estimated Daily Water Usage Gallons

Water: () Well () Public () Non-Community () Other

Will foundation be chemically treated for termites () Yes () No

DESCRIBE CONSTRUCTION:

I GIVE PERMISSION TO THE HEALTH DEPARTMENT TO ENTER ONTO THE PROPERTY DESCRIBED FOR THE PURPOSE OF PROCESSING THIS APPLICATION. I UNDERSTAND A SUBSTANTIAL PHYSICAL CHANGE TO THE PROPERTY MAY VOID APPROVAL OF THE LOT FOR AN ONSITE SEWAGE DISPOSAL SYSTEM.

SIGNATURE [Signature] PRINT NAME William Sledjeski

DATE 12/20/17 () OWNER (X) AGENT ?

For Department Use Only

() Plan submitted for review under VA Code 163.6 with waiver to Chapter 610/613 (HWELL: HSEPTIC)

Date Lot Approved: 12.1.2017 Type System I Design for 5 Bedrooms or 750 Gallons per Day

Perc Rate 12 Depth 50 Septic Tank Gallons 1500 Absorption Field 620 (Lin. Ft.) Reserve Area 100% (Lin. Ft.)

Building Permit No. Receipt Number(s)

Remarks Approved \$0 due fees paid 8.7.17

REVIEWED BY EH TITLE EHST DATE 12.20.17

Commonwealth of Virginia

Application for: ☒ Sewage System ☐ Water Supply

VDH Use only

Health Department ID# _____

Due Date _____

Owner Jean Reimers

Phone 703-943-8637

Mailing Address 214 Donmore Drive

Phone _____

Great Falls, VA 22066

Fax _____

Agent Soil Tech Inc.

Phone 703-631-9647

Mailing Address 14630-F Flint Lee Rd.

Phone _____

Chantilly VA, 20151

Fax _____

Site Address 214 Donmore Drive

Email _____

Great Falls VA 22066

Directions to Property: Georgetown Pike to Senca Rd. To Donmore Dr on left.

Subdivision _____ Section _____ Block _____ Lot _____

Tax Map 2-2-002-8 Other Property Identification _____ Dimension/Acreage of Property 3+/-

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

Proposed Use:

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

Other (describe) existing 4 bedroom home with 1 new bedroom upgrade

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

Conditional permit desired? ☐ 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

All Applicants

Is this a private sector OSE/PE application? ☒ Yes ☐ No If yes, is the OSE/PE package attached? ☒ Yes ☐ No

Is this property indeed to serve as your (owners) principal place of residence? ☒ 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 [Signature]

12/10/2017

Date

System Specifications

APPROVED FAIRFAX COUNTY HEALTH DEPARTMENT	
<u>12-20-17</u> Date	<u>[Signature]</u> Health Official

Page 1 of 4

HDIN: _____

VDH Use Only

Application InformationName: Jean ReimersAddress: 214 Donmore Drive, Great Falls, VA

Phone: _____

Location InformationTax Map/GPIN #: 2-2-002-8Property Address: 214 Donmore Drive, Great Falls VA

Subdivision: _____ Section: _____ Block: _____ Lot: _____

Directions: _____

General InformationProperty Type (e.g. residential): residentialNumber of Bedrooms: 5Daily Flow: 750 gpd

Conditions: _____

Notes: Existing 4 bedroom system being upgraded to 5 bedrooms using part of the existing approved reserve area. A new reserve area has been identified**Sewer Line**Diameter: 4 in. Material: sch 40 PVC (or equivalent) Notes: _____**Pretreatment Unit(s)**Treatment Level: septic tank effluentSeptic Tank Capacity: 1000 gallonsNumber of Septic Tanks 1Size of Septic Tank(s) 1000 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: _____

Conveyance LineConveyance Method: gravity

If pumping, include pump specifications sheet.

Material: _____ Diameter: _____

Notes: _____

Distribution Method and Header LinesDistribution Method: gravityNo. of boxes: 2 No. of outlets: 10Surge or splitter box required: ☒ Yes ☐ NoHeader Line Material: 4 in. -1500 lb. crush strength**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: 2 Length of lateral(s)/pad(s): 61 ft. Width of lateral(s)/pad(s): 24 in.Center to center spacing: 6 ft. Installation depth: 44 in. Aggregate depth: 31 in.Size/Type of Aggregate: 1/2" to 1 1/2" crushed stone: VDOT #56 Lateral/pad slope: 2-4 in. per 100 ft.Reserve Area Provided: 100 % Notes: This is an upgrade to the existing system: 1 bedroom garage/apt. addedNew septic tank for the garage/apt. Tie in for the new septic tank near the FDV

Please Note: _____

This design is for a 5 bedroom upgrade to an existing 4-bedroom conventional onsite wastewater treatment system. A 1- bedroom apartment has been added to the garage. The upgrade will consist of the installation of a septic tank for the apartment with sewage flow to tie-into the existing sewer line. The construction permit design (12/10/80) is based on 200 gpd per bedroom . A 100 percent reserve area is provided. There is an existing undocumented septic tank adjacent to the 1-bedroom apartment that does not satisfy the regulatory offset requirements.

Site Information (existing records)

Percolation Rate	10 minutes per inch
Sewage Flow (200 gpd/bdr)	800 gallons per day
Treatment Area	976 square feet
Slope	12 percent
Septic Tank	1875 gallons

Treatment Area Information

	<u>Existing</u>	<u>Upgrade(added)</u>
Trench Width	2.0 ft.	2.0 ft.
Trench Length	61 ft.	61 ft.
Trench Depth	44 in.	44 in.
Number of Trenches	8	2

Invert Information (garage)

Sewer line (ex garage)	<u>inv.</u>	<u>381.7+/-</u>
Septic Tank	<u>s.e.</u>	<u>382.5</u>
	<u>inv. in</u>	<u>379.5+/-</u>
	<u>inv. out</u>	<u>379.4+/-</u>
Tie In	<u>s.e.</u>	<u>279.0+/-</u>
	<u>inv in</u>	<u>277.0+/-</u>

Specifications

All construction materials and methods must conform to applicable Local and State Sewage Handling and Disposal Regulations and Codes.

Prior to installation the designer shall approve any deviation from this design.

The contractor shall contact the Fairfax County Health Department for a pre-construction conference.

Contractor is to install concrete tanks on uniformly firm and stable compacted ground, crushed stone is recommended to provide uniform support to tank bottom

Site Preparation Work

Stakeout components prior to installation and request field review.
Check all elevations for proper grade requirements for all components.
Contractor must provide adequate access for correct installation
This system must be installed during dry conditions.
Confirm location of the components of the existing system.

Treatment Area

Either use the existing d-boxes or install new 10 hole d-boxes, dig 2 new trenches 44" deep x 24" wide x 61" long (1 trench in each $\frac{1}{2}$ of the existing system). Add 24" of VDOT 56 stone, percolation pipe, cover pipe with 2 inches of stone, fabric and backfill to the surface.

Site Restoration

Backfill with suitable onsite loam and sandy loam soil free of damaging objects, gravel and organic matter. Seed or sod backfilled areas and cut slopes
Provide erosion protection for backfill material in accordance with Local and County standards and maintain until permanent protection is established
Backfill should be graded to prevent the infiltration of surface water and divert storm water run-off away from the system

Sewer Line

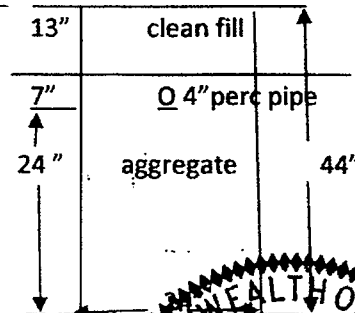
Four (4) inch schedule 40 pvc is required. Six (6) inch cast iron or schedule 80 PVC sleeve is required under all driveway and parking areas. There is an existing undocumented sewer line at this location that may satisfy the requirements.

Septic Tank

Hanover precast concrete 1000 gallon M.J. to be installed in the general area shown on the plan adjacent to the garage. There is an existing septic tank located in the general vicinity that does not satisfy the regulatory offsets.

Trench Installation Information

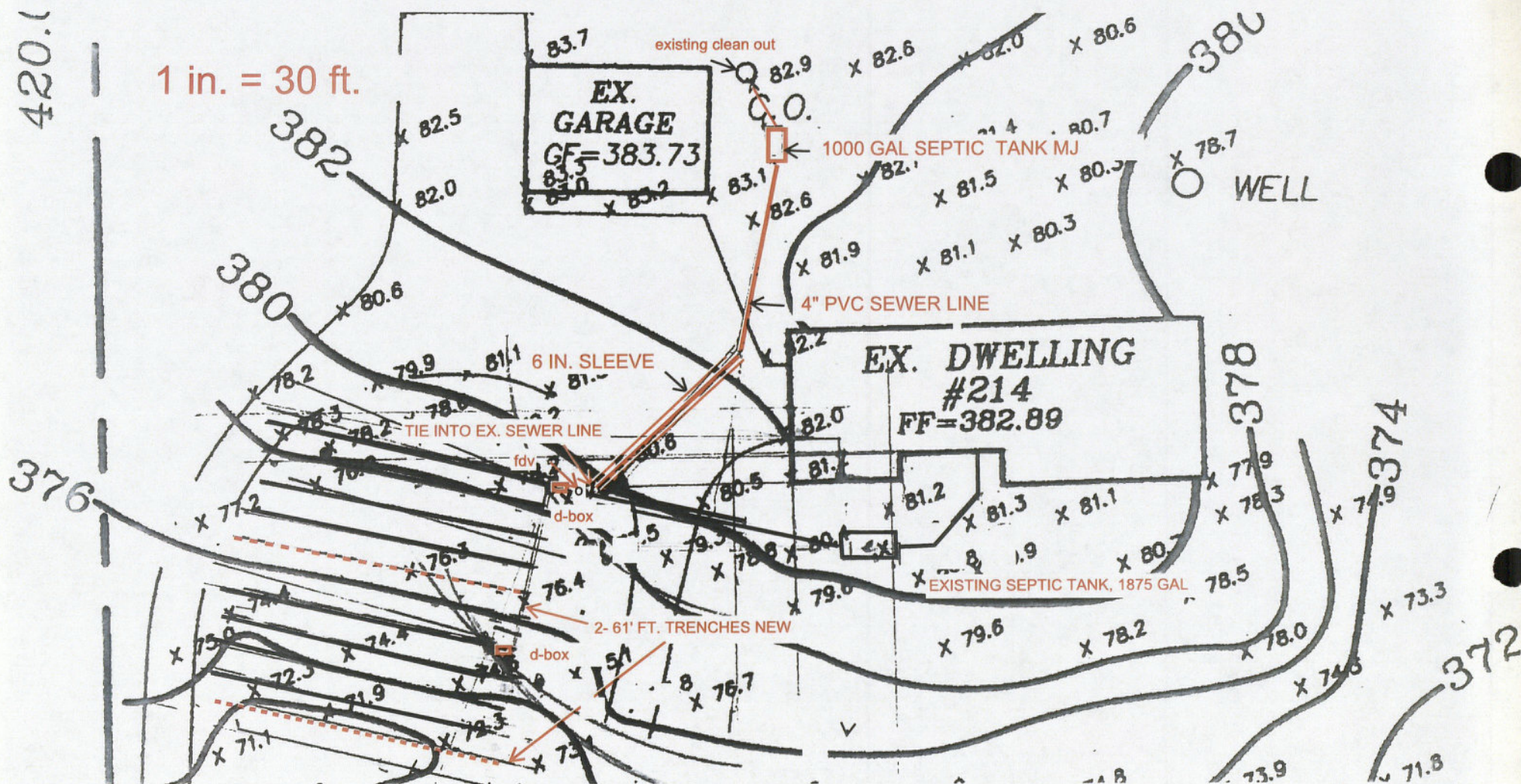
Square Feet Required	488 sf.
Depth from Ground Surface to Bottom of Trench	44 in.
Aggregate size	0.5"-1.5"
Trench Bottom Slope	2-4"/100'
Center to Center Spacing	6.0 ft.
Trench Width	2 ft.
Depth of Aggregate, total	31 in.
Trench Length	61 ft.
No. of trenches	2



COMMONWEALTH OF VIRGINIA
Professional Engineer
William F. S. Sleski MAOSE
10001012

COMMONWEALTH OF VIRGINIA
Reviewed by,
DANIEL S. ROM
Lic. No. 12511
Professional Engineer
Daniel S. Rom, P.E.
12-14-17

420.1



Fairfax County Soil Evaluation Form

Fairfax County Health Department, Division of Environmental Health

General Information

Date 8-17-17 Project # 201700440
Applicant Soil Tech, Inc. Telephone No. 703-631-9647
Address 14630-F Flint Lee Road, Chantilly, VA 20151
Owner Jean Reimers Address 214 Donmore Drive, Great Falls, VA 22066
Location 214 Donmore Drive, Great Falls, VA 22066
Subdivision Seneca Farms Block/Section _____ Lot 18 Site -Reserve

Site Assessment

1. Purpose of Soil Evaluation: New SDS ☐ 100% Reserve X, Relocation ☐ Other _____
2. Position in Landscape Satisfactory: Yes X No ☐ Describe South facing convex backslope
3. Site Slope 10 %
4. Is Site Impacted by Private Water Wells? Yes ☐ No X Describe _____
5. Topographic Limitations to Site: Yes No X Describe _____

Soil Evaluation Information Summary

6. Depth to H.E.S.W.T. (Redoximorphic Soil Features): Yes No X Describe _____
7. Depth to Impervious Soil Materials and/or Bedrock: Yes No X Describe _____
8.. Free Water Present: Yes ☐ No X Describe: _____

Soil Evaluation Conclusion

Site Approved For Testing: Yes X No ☐ Describe _____ (If No, Complete this Section)

9. Percolation Test Required: Yes X No ☐ Depth (Inches) 42"
a) How many Test Holes: 5
10. If Test Rate is Estimated: Estimated Rate (mpi): 20 Depth (inches): 42"

Name and title of evaluator Kurt Douglas Aspelin, R.E.H.S. A.O.S.E. E.H. Specialist

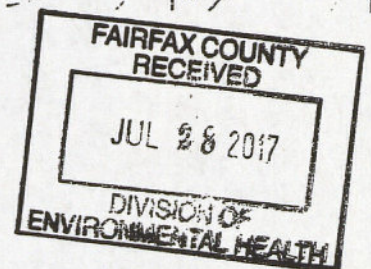
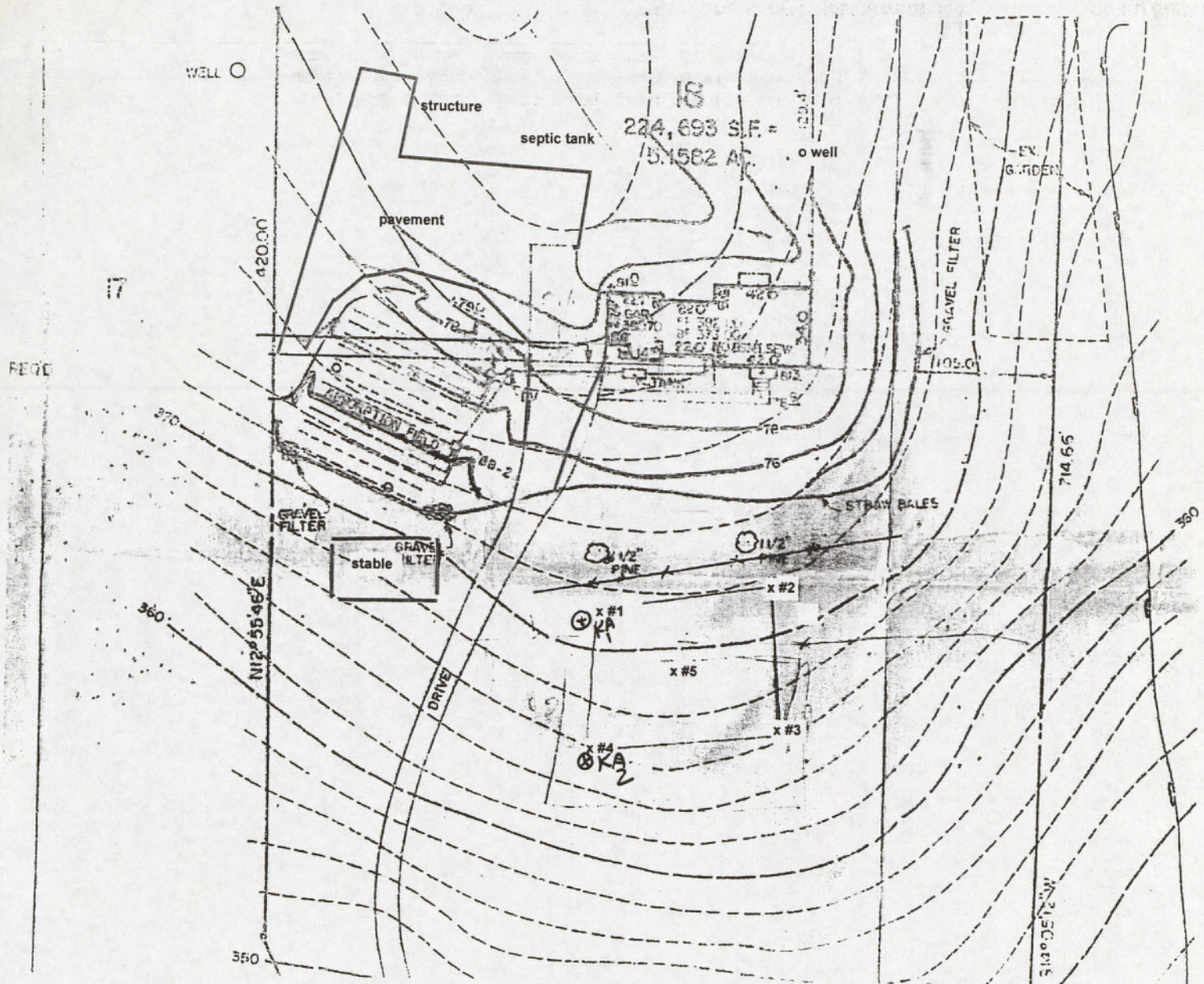
Signature Kurt Douglas Aspelin

SOIL EVALUATION REPORT

Date of Evaluation 8-17-17

Health Department Identification No. 201700440

Page 2 of 3[illegible]



SOIL TECH, INC.
14630-F Flint Lee Road
Chantilly, Virginia 20151
(703) 631-9647

SOIL EVALUATION FORM

for Commonwealth of Virginia Department of Health

TM: 20-3-002-2

General Information

Date: July 18, 2017 Fairfax County Health Dept.

Applicant: Jean Reimers

Address: 214 ~~Donmore~~ Drive, Great Falls, VA 22066

Owner: Same Tel. No.

Address: Same

Location: 214 ~~Donmore~~ Drive, Great Falls, VA

Subdivision: Lot 2

Soil Information Summary

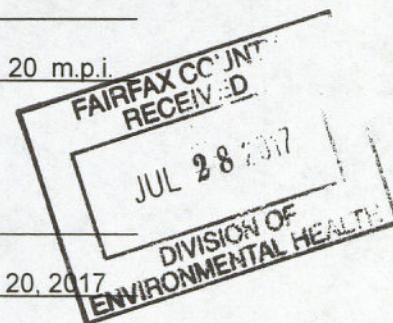
1. Landscape Position convex backslope
2. Slope 10 % 3. Depth to Cr (range) >72 inches.
4. Depth to (seasonal) water table (range) > 72 inches
5. Proposed installation depth 42 inches
6. Soil moisture conditions moist
7. Texture group at installation depth I (IIa) (IIb) III IV
8. Consistence Very friable
9. Structure massive
10. Test required: (Y) N 11. Estimated Rate 20 m.p.i.

Remarks:

reserve for existing 6 bedroom dwelling

Name and Title of Evaluator William F. Sledjeski, OSE

Signature Date July 20, 2017



Project: 214 Donmore Drive**Job no. 17-12765**

Horizon Depth (in.)	Description	Texture Group
----------------------------	--------------------	----------------------

Profile no. 1

Ap	0-4	Brown (10YR 5/3) loam, loose, moderate fine granular, dry	IIb
Bt	4-30	Yellowish red (5YR 5/6) light clay loam, weak medium subangular blocky friable, moist.	IIb
BC	30-44	Yellowish red (5YR 5/6), yellow (10YR 7/6) silt loam, very friable, weak medium subangular blocky, moist.	III
C	44-72	Yellow (10YR 7/6) loam, very friable, massive, moist.	IIb

Profile no. 2

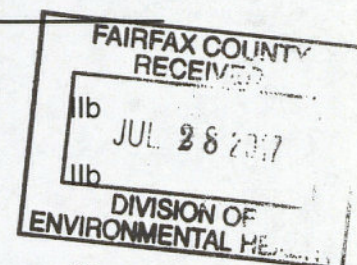
Ap	0-4	Brown (7.5YR 5/3), loam, loose, moderate fine granular, dry.	IIb
Bt	4-20	Yellowish red (5YR 5/6), heavy silt loam, friable, moist.	IIb
C	20-72	Yellow (10YR 7/6), loam, very friable, massive, moist.	IIb

Profile no. 3

Ap	0-2	Pale brown (10YR 6/3), loam, loose, dry.	IIb
Bw	2-22	Reddish yellow (7.5YR 6/6), heavy loam, friable, moist.	IIb
C	22-72	Reddish yellow (5YR 7/6), yellow (10YR 7/6), fine sandy loam, very friable, moist.	IIa

Profile no. 4

Ap	0-2	Brown (10YR 5/3) loam, loose, moderate fine granular, dry	IIb
E	2-8	Very pale brown (10YR 7/3), loam, friable, moist.	IIb
Bt	8-38	Yellowish red (5YR 5/6), yellow (10YR 7/6), heavy loam, weak medium subangular blocky friable, moist.	IIb
C	38-72	Yellow (10YR 7/6), reddish yellow (7.5YR 6/6), loam, very friable, massive, moist.	IIb



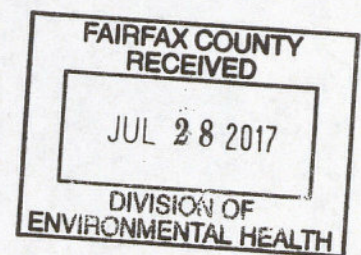
Project: 214 Dunmore Drive

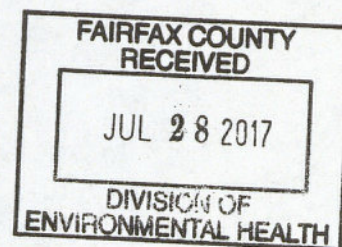
Job no. 17-12765

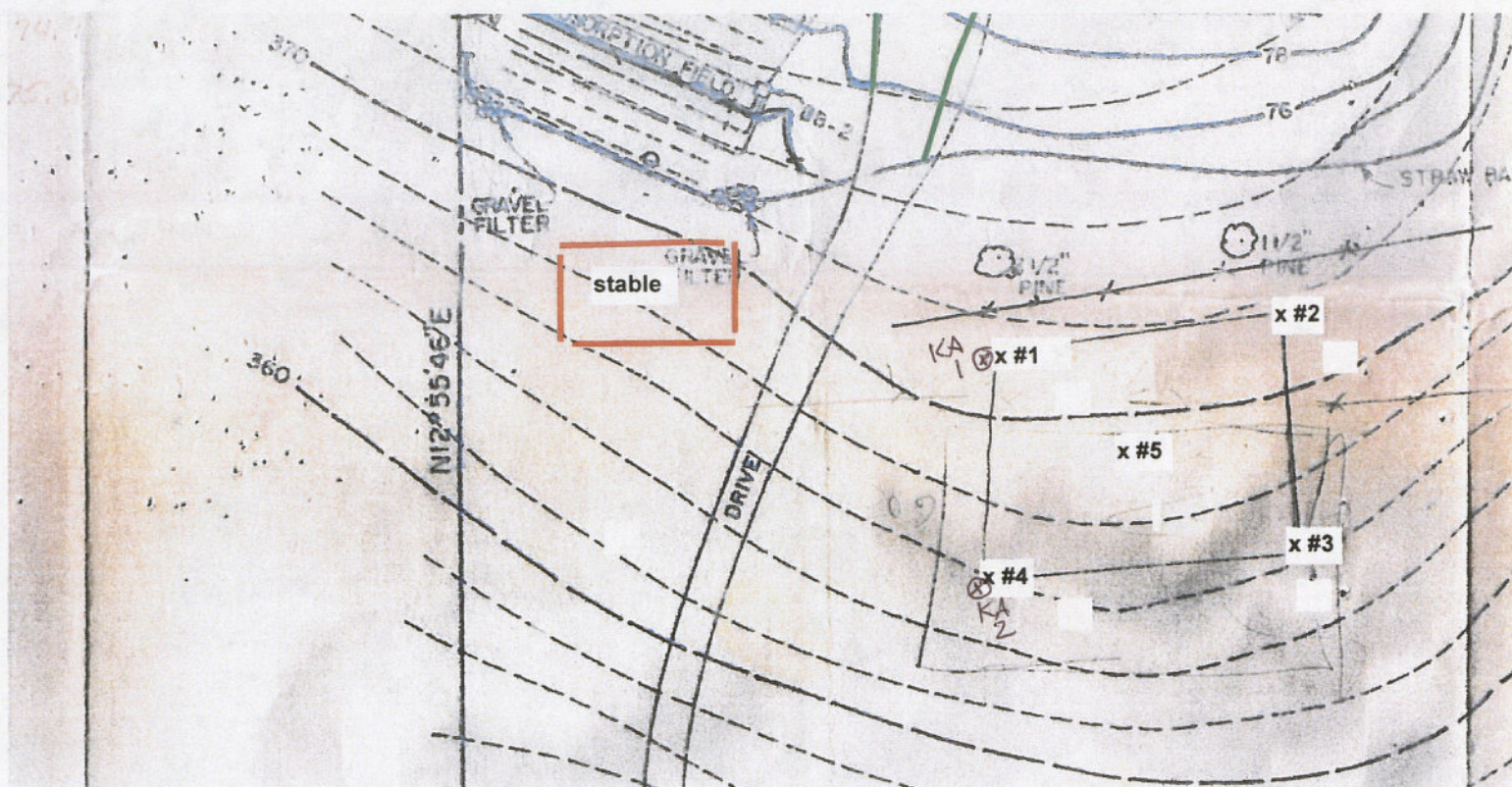
Horizon Depth (in.)	Description	Texture Group
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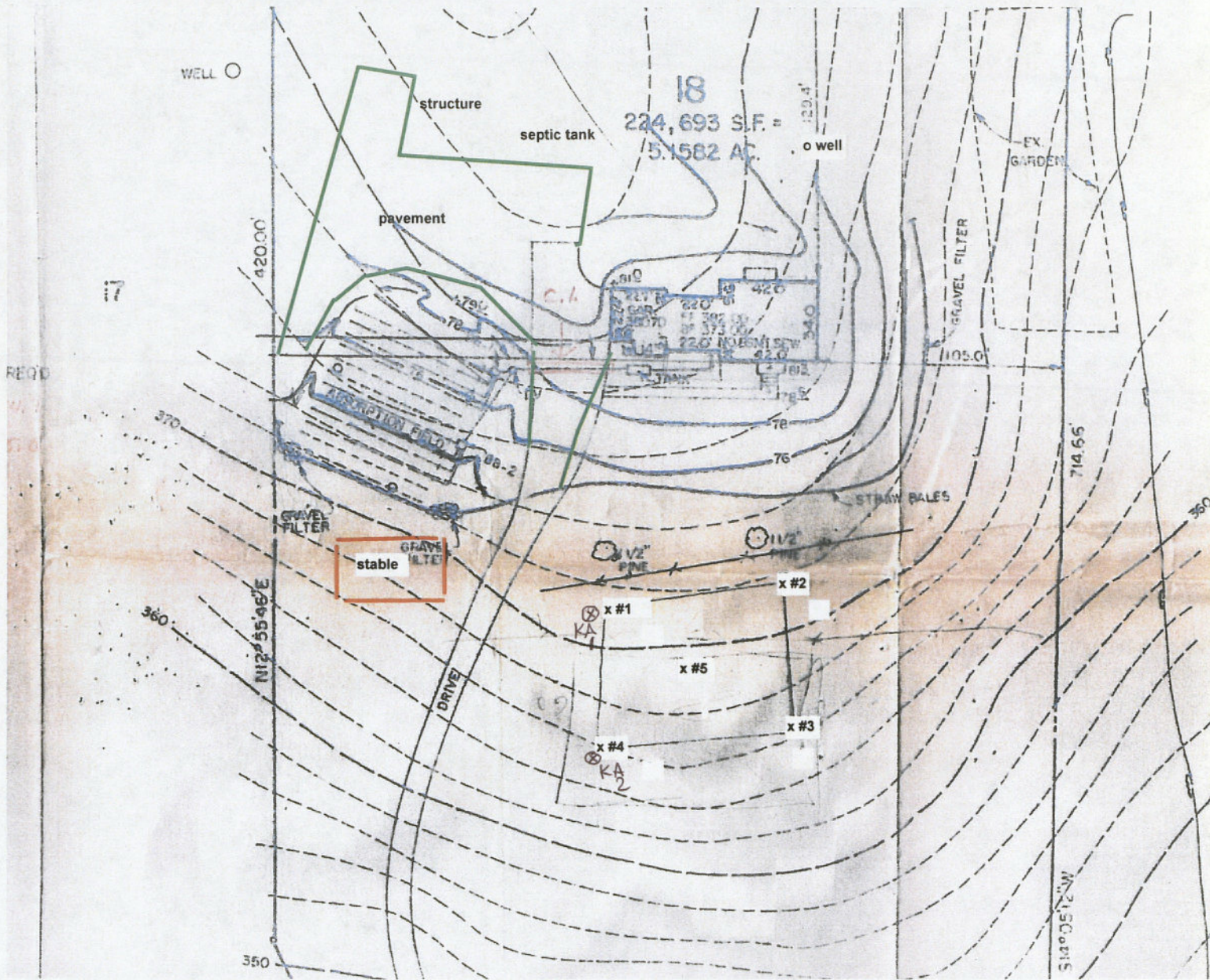
Profile no. 5

Ap	0 - 2	Pale brown (10YR 6/3), loam, loose, dry.	IIb
Bw	2- 36	Reddish yellow (7.5YR 6/6), heavy loam, friable, moist.	IIb
C	36-72	Reddish yellow (5YR 7/6), yellow (10YR 7/6), fine sandy loam, very friable, moist.	IIa





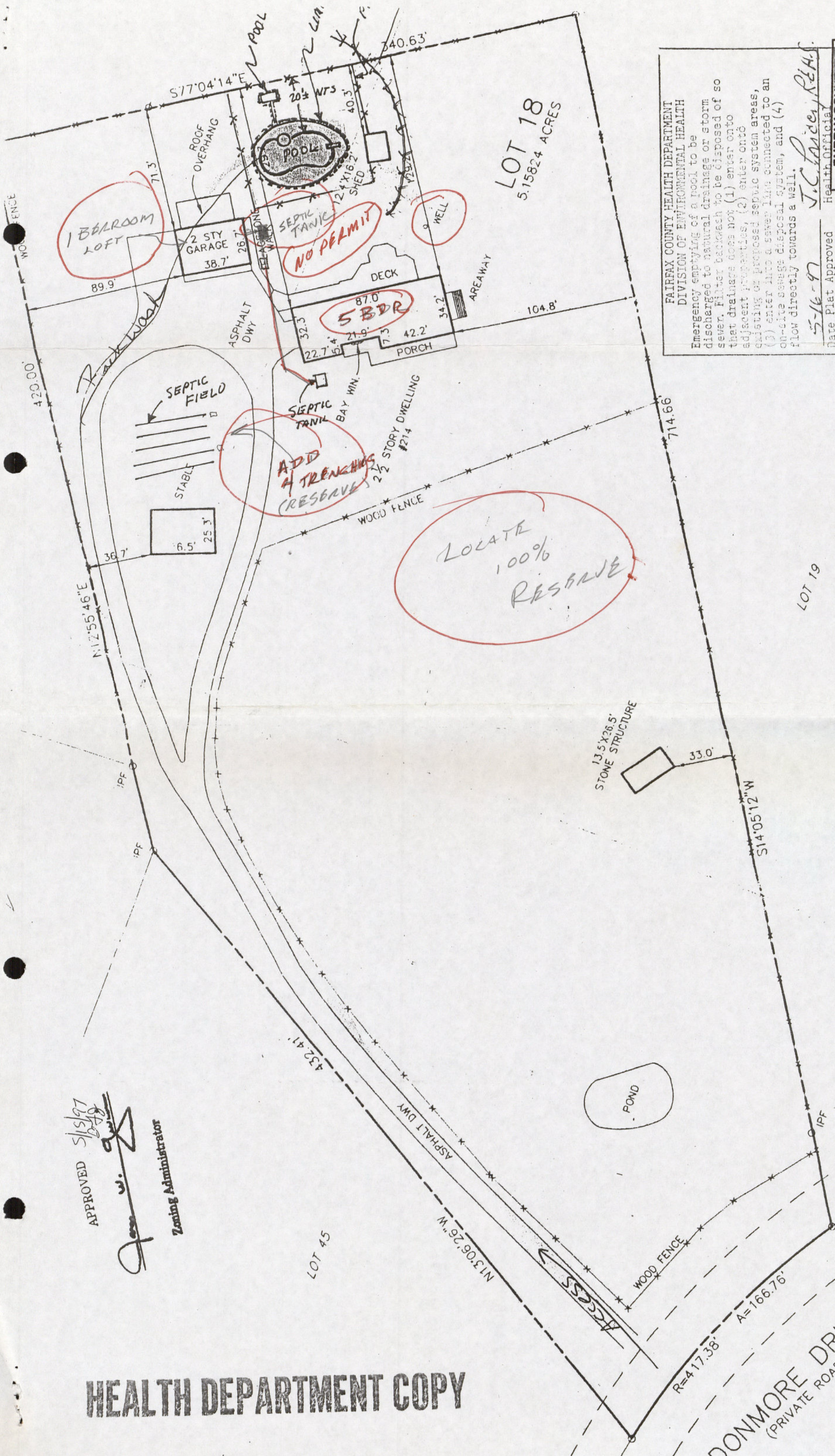




FAIRFAX COUNTY
RECEIVED
JUL 26 2017
DIVISION OF
ENVIRONMENTAL HEALTH

HEALTH DEPARTMENT COPY

APPROVED 5/15/97
[Signature]
Zoning Administrator



FAIRFAX COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
Emergency emptying of a pool to be discharged to natural drainage or storm sewer. Filter backwash to be disposed of so that drainage does not (1) enter onto adjacent properties, (2) enter onto existing or proposed septic system areas, (3) enter into a sewer line connected to an on-site sewage disposal system, and (4) flow directly towards a well.

5-16-97 J.C. Linder, R.E.H.
Date Plat Approved Health Official

FAIRFAX COUNTY RECEIVED
APR 28 2017

PROPOSED POOL FOR:
BARLOW RESERVE
214

FHC 1391

TO: DIVISION OF INSPECTIONS

DATE: - 6-26-80

FROM: HEALTH DEPARTMENT

RE: NOTIFICATION OF ISSUANCE OF SEPTIC TANK PERMIT AND/OR WELL PERMIT

OWNER'S NAME: Harold S. Barlow

BUILDING APPLICATION NUMBER: 8006B0661

SUBDIVISION: Seneca Farms SEC: 3 BLOCK LOT: 18

TAX MAP IDENTIFICATION AND ADDRESS: 2-2-002-18

214 Donmore Dr. Great Falls, VA 22066

HEALTH DEPARTMENT PERMIT # 80-316

SEWAGE DISPOSAL PERMIT ISSUED FOR: Dwelling

WELL PERMIT ISSUED FOR: Dwelling

SEWAGE DISPOSAL SYSTEM DESIGNED FOR Four BEDROOMS
(ALL PERMITS FOR DWELLINGS ARE DESIGNED TO INCLUDE AUTOMATIC WASHER AND GARBAGE DISPOSAL)

REMARKS: _____

THE ABOVE TO BE COMPLETED IN QUADRUPLICATE EACH TIME A PERMIT IS ISSUED. ONE COPY TO PLUMBING INSPECTION BRANCH. ONE COPY TO ELECTRICAL INSPECTION BRANCH. RETAIN TWO COPIES WITH PERMIT.

NOTIFICATION OF FINAL APPROVAL:

SEWAGE DISPOSAL SYSTEM

APPROVED: 5/27/81 F.D.V.

WATER SUPPLY SYSTEM

APPROVED: 6-1-81

W. H. Beyer by D. Hill
(SIGNATURE)

ENTERED MAY 28 1981

UPON FINAL APPROVAL, ONE COPY TO BE FORWARDED TO PLUMBING INSPECTION BRANCH. ORIGINAL TO BE ATTACHED TO PERMIT.

W49/3-8-80

FHD-EH-3

ENTERED
ECB CEC

ENTERED
CB DCA

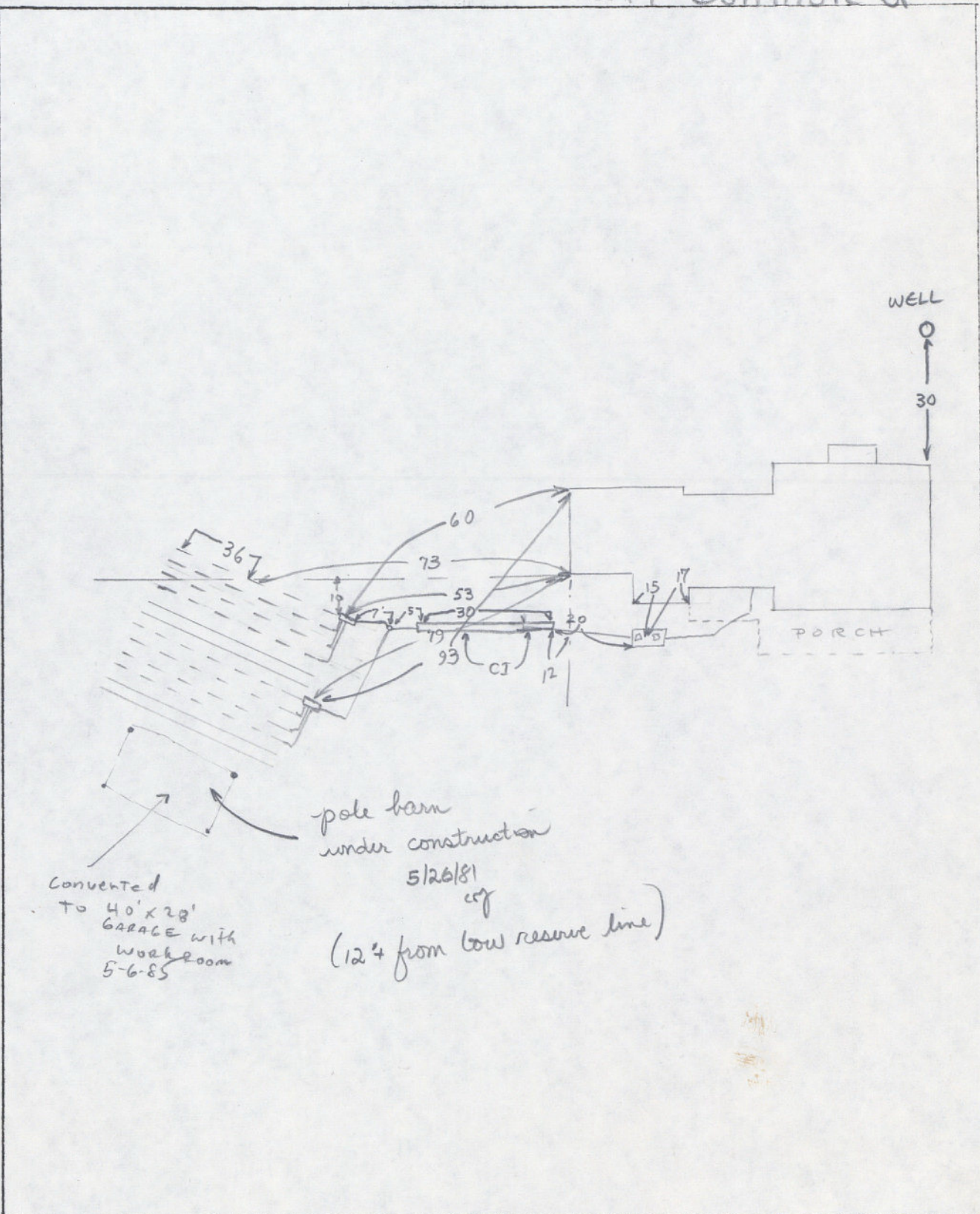
3-12 AJ

PERMIT # 80-316

LOCATION SENECA FARMS TM: 2-2-002-18
(Subdivision or Tax Map Ref.)

WATER SUPPLY AND/OR SEWAGE DISPOSAL SYSTEMS AS INSTALLED

214 Donmore Dr



Sketch to show location of septic tank flow diversion valve distribution boxes and well.

NORTHERN VIRGINIA
REGIONAL PARK AUTHORITY

APPROVED SUBJECT TO NOTATIONS SHOWN

FAIRFAX COUNTY HEALTH DEPARTMENT

Addition footers must come
no closer than five feet (5')
to sewer line

8/22/89
Date

Health Official

18
5.1582 AC.

SEE DETAIL

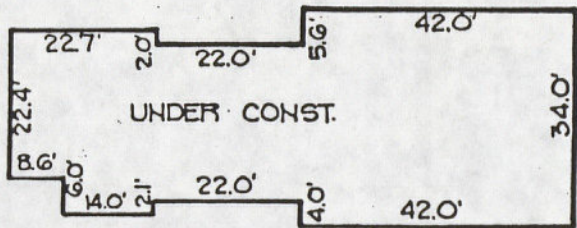
APPROVED
FAIRFAX COUNTY HEALTH DEPARTMENT
1/23/13
Date
Health Official

APPROVED

DIVISION OF
INSPECTION SERVICES

BY [Signature]
Date 8-22-89

50' INGRESS-EGRESS
EASEMENT



DETAIL
SCALE 1"=30'

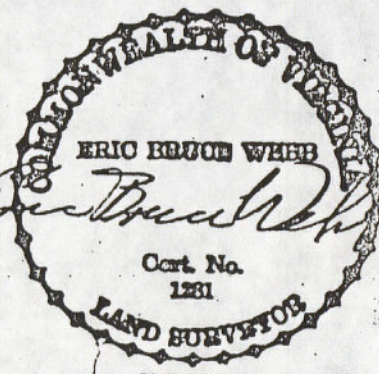
HOUSE LOCATION SURVEY
LOT 18 - SECTION 3
SENECA FARMS
DRANESVILLE DISTRICT
FAIRFAX COUNTY, VIRGINIA
SCALE 1"=100' DATE 10-1-80

APPROVED

[Signature]
Zoning Administrator

I hereby certify that the locations of all the existing improvements on this property have been carefully established by a transit-tape survey and unless otherwise shown, there are no encroachments.
This survey has been prepared without the benefit of a title report and does not therefore necessarily indicate all encumbrances on the property.

RUNYON ASSOCIATES, INC.
ENGINEERING, SURVEYING & PLANNING
152 HILLWOOD AVENUE
FALLS CHURCH, VIRGINIA 22046 (536-2266)



Record of Inspection - Private Water Supply System

Commonwealth of Virginia
Department of Health

Health Department

I.D. Number ApH 50880251

Fairfax County
F.H.A. or V.A. Case Number
If Applicable

Date 6-22-09 Local Health Department Fairfax County H.D.
Owner Chamberlain Address 214 Dornmore Dr. Phone 703-444-2942
Great Falls VA. 22066

Exact Location of Premises same

Subdivision Sevela Farms Section/Block 3 Lot 15

Class of nonpublic drinking water well. 1) Class III A
2) Class III B x
3) Class III C
Date of installation 3-81 4) Other

WSS
REPAIR

CONSTRUCTION INFORMATION

If information in any item below is secured from other sources (i.e. well log, etc.), so note.

1. Water well completion report filed as required by Sec. 2.18 Yes ☒ No ☐
2. Well Location: Distances from sources of pollution (See Table 3.1, Minimum Separation Distances) and Section 3.4 of the Private Well Regulations.
Building Sewer 50' Pretreatment Unit 50'
Conveyance System 50' Subsurface Soil Absorption System 100'
(nearest point). Property Line 100' Other
Site graded where necessary to divert water away from well? Yes ☐ No ☐ N/A ☐
3. Construction, General: (see Section 3.6 and 3.7 Private Well Regulations).
Total depth of well 400 feet. Type of casing steel
Depth of casing 93 feet. Diameter of casing 6 inches.
Casing extends inches above ground 12". Exterior space sealed with neat cement grout to a depth of 50 feet. Screens constructed of NA
free of rough edges and irregularities, with positive watertight seal between screen and casing?
Yes ☐ No ☐ N/A ☒ Well head and opening to the interior protected? Yes ☒ No ☐
Type of well seal water tight Pitless adapter used? Yes ☒ No ☐ N/A ☐
Properly installed? Yes ☒ No ☐ N/A ☐ Proper venting? Yes ☒ No ☐ N/A ☐
4. Quantity: Yield and drawdown determined by continuous pumping of 5 hours. Drawdown 10 feet. Yield 5 GPM. Type of storage pressure storage tank
5. Quality: Sample tap provided at entry into system? Yes ☒ No ☐ Samples(s) collected? Yes ☒
No ☐ Results of samples. Satisfactory ☒ Unsatisfactory ☐ (attach copy of results of this form)

Based on the inspection of this water supply system and the information contained on the water well completion report attached, this water supply meets ☒ does not meet ☐ the requirements of the Private Well Regulations.

Remarks:

Date 6-22-09 Signed J. L. Cooper Sanitarian

Date 6-23-2009 Signed Mark A. [Signature] Supervisory Sanitarian

Date Signed Regional Sanitarian (If V.A. or F.H.A.)



Fairfax County Health Department
Division of Environmental Health
PERMIT TO REPAIR WELL WATER SUPPLY

Health Department # 80880251 Tax Map # 2-2-002-18 Date 5/28/09

Owner John Chamberlain Phone 703.444.2942

Address 214 Donmore Drive Great Falls, VA 22066

Occupant See above Phone _____

Address of Premises 214 Donmore Dr Great Falls, VA 22066

Subdivision Seneca Farms Sec./Block 3 Lot 18

For: ☒ Dwelling ☐ Commercial ☐ Other, describe: _____

Existing Water Supply Class IIIB Type of Well: ☒ Drilled ☐ Buried ☐ Bored ☐ Dug

☐ Other, describe _____

IF PUBLIC WATER IS AVAILABLE, CONNECTION THERETO IS RECOMMENDED.

Rough sketch and/or description of necessary repairs to well water supply.

See Page 2 of 2 for Method of Pitless Adapter Repair

Two water samples collected by the Health Department at least a week apart are required prior to approval of repair.

NOTE: Owner or his agent must notify Fairfax County Health Department, Phone (703)246-2201, when repairs are complete. Bacteriological analysis of water is required after repairs.

Based on the above information, the undersigned recommends that this permit be issued.

Date 5/28/09 Approved [Signature]

Environmental Health Specialist

Date 5-29-2009 Approved [Signature]

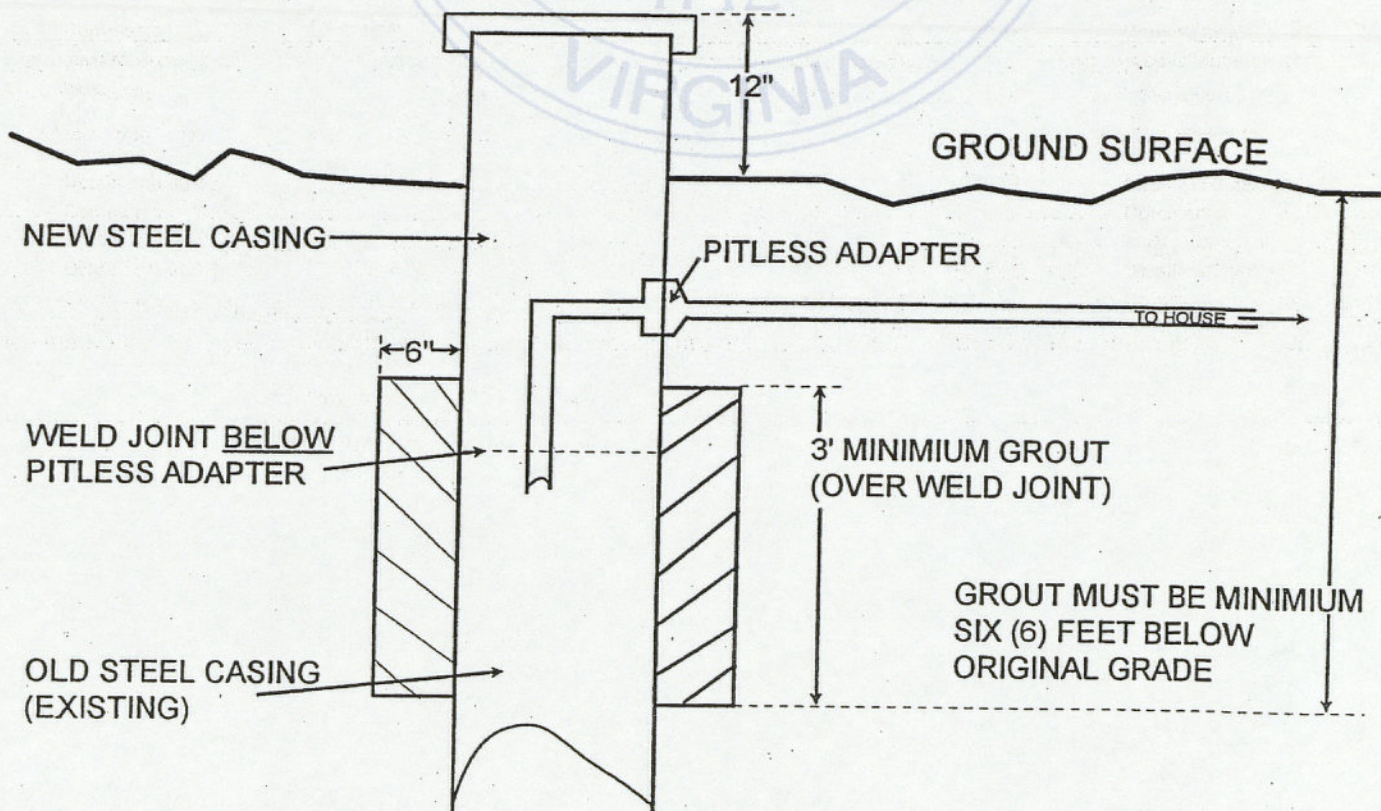
Reviewing Authority

FAIRFAX COUNTY HEALTH DEPARTMENT DIVISION OF ENVIRONMENTAL HEALTH

PROCEDURE FOR INSTALLATION OF PITLESS ADAPTER ON EXISTING BURIED DRILLED WELL

IF AVAILABLE, CONNECTION TO PUBLIC WATER IS RECOMMENDED.

1. If you prefer to attempt to repair the well, see sketch below. Grout excavation must be inspected by Health Department before pouring concrete. Grout with 1-2-3 concrete mix.
2. To install weld joint below pitless adapter, it may be necessary to remove a section of original steel casing and increase length of new steel casing.
3. Well must be disinfected after completion of repairs in accordance with enclosed instruction sheet.
4. Final approval of well water supply is also subject to satisfactory bacteriological analysis.



214 Donmore Drive
Great Falls, VA
22066

FHD-EH-

2-2-002-18

Page 2 of 2
80880251



FAIRFAX COUNTY

DEPARTMENT OF HEALTH

Division of Environmental Health
Onsite Sewage and Water Section
10777 Main Street, Suite 102
Fairfax, Virginia 22030-6903

Telephone: (703) 246-2201 Fax: (703) 278-8157

TDD: (703) 591-6435

May 1, 2003

CERTIFIED MAIL:
7099 3400 0007 5499 3733

John Chamberlain
Jean Reimers
214 Donmore Drive
Great Falls, VA 22066

RE: Notice of Noncompliance for the Sewage Disposal System located at 214
Donmore Drive, Great Falls, Virginia 22066. Tax Map # 2-2-002-18,
Subdivision: Seneca Farms, Section 3, Lot 18

Dear Mr. Chamberlain & Ms. Reimers:

An inspection of the property on March 10, 2003 revealed that the sewage disposal system is in noncompliance with the *Commonwealth of Virginia State Board of Health Sewage Handling and Disposal Regulations* and *Fairfax County Code Chapter 68*. The installation of the septic tank serving the garage/living area was done without the required Health Department permit, inspections or approval. This septic tank does not meet the required 10' setback to the garage foundation.

The potential loading of the sewage disposal system is in excess of the design due to the addition of the living area above the garage. A building permit for the garage/ living area was not reviewed or approved by this office as required. If an application had been filed with the Health Department, it would not have been approved.

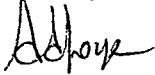
Expansion of the sewage disposal system to accommodate five bedrooms will require an application to be submitted to the Health Department. A private soils consultant must conduct soils studies and percolation tests to determine the feasibility of the expansion of the existing system or installation of a new system. These results are required to be submitted to this office prior to issuance of a permit. If the soils and site requirements are satisfactory, a construction permit will be issued for a new sewage disposal system or expansion of the existing system.

John Chamberlain
Jean Reimers
Page 2
May 1, 2003

The other alternative is to disconnect all water service to the garage/ living area. The sewer line from this structure must be properly capped and the septic tank properly abandoned. The upstairs living area must be designated for non-use as a bedroom.

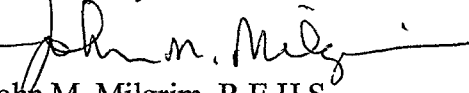
Should you have any questions or require further information concerning this matter, I can be reached at (703) 246-3570 between 8:00 to 8:30 a.m. and 2:00 to 3:30 p.m., Monday through Friday.

Sincerely,



Adrian Joye
Environmental Health Specialist II

Reviewed by:



John M. Milgrim, R.E.H.S.,
Environmental Health Supervisor

JMM:AJ:cd



FAIRFAX COUNTY

DEPARTMENT OF HEALTH

Division of Environmental Health
Onsite Sewage and Water Section
10777 Main Street, Suite 102
Fairfax, Virginia 22030-6903

Telephone: (703) 246-2201 Fax: (703) 278-8157

TDD: (703) 591-6435

April 1, 2003

CERTIFIED MAIL:
7099 3400 0007 5499 4563

Harold Barlow
214 Donmore Drive
Great Falls, VA 22066

RE: Notice of Noncompliance for the Sewage Disposal System located at 214 Donmore Drive, Great Falls, Virginia 22066. Tax Map # 2-2-002-18, Subdivision: Seneca Farms, Section 3, Lot 18

Dear Mr. Barlow:

An inspection of the property on March 10, 2003 revealed that the sewage disposal system is in noncompliance with the *Commonwealth of Virginia State Board of Health Sewage Handling and Disposal Regulations* and *Fairfax County Code Chapter 68*. The installation of the septic tank serving the garage/living area was done without the required Health Department permit, inspections or approval. This septic tank does not meet the required 10' setback to the garage foundation.

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Harold Barlow

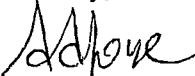
Page 2

April 1, 2003

The other alternative is to disconnect all water service to the garage/ living area. The sewer line from this structure must be properly capped and the septic tank properly abandoned. The upstairs living area must be designated for non-use as a bedroom.

Should you have any questions or require further information concerning this matter, I can be reached at (703) 246-3570 between 8:00 to 8:30 a.m. and 2:00 to 3:30 p.m., Monday through Friday.

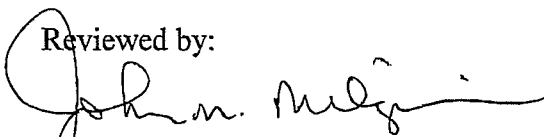
Sincerely,



Adrian Joye

Environmental Health Specialist II

Reviewed by:



John M. Milgrim, R.E.H.S.,

Environmental Health Supervisor

JMM:AJ:cd

FILE 1391

Subdivision Seneca Farms, Sec. 3

Street Address 214 Donmore Dr.

City, State, Zip Great Falls, VA 22066

Phone # 703-444-2942, 703-444-2948
703-442-8353

[illegible]

August
28

ENVIRONMENTAL SERVICES SECTION

FOLLOW-UP REPORT

File 1391

Owner's Name

John ChamberlainTax Map: 2-2 10021 1 18
Map Grid Sub Block Lot

Street Address

214 Donmore Dr

Subdivision

Seneca Farms sec.
3

City, State, Zip

Great Falls VA. 22066

Phone #

703-444-2942, 703-444-2948

DATE	COMMENTS	RESCH DATE	INITIALS
4-5-07	Five Star Septic called and I discussed case of unauthorized SDS repairs. See letter 5-1-03.		
	• Ex: SDS needs expansion to 5BR: 100% Reserve Req'd. Soil Consultant Req'd.		
	• What do living quarters in garage look like. Is it an apartment w/ Kitchen & laundry?		
	• If it is an apartment, does owner have Zoning approval.		
	• SDS expansion done w/ out Permit.		
	Recommend scheduling meeting Five Star, owner, and Health Dept. Hanna Willmott to follow up	5-1-07	WMS
05/23/07	Left message for owner to call me to discuss this case.	10/13/07	HW
06/13/07	Left message w/ someone for Mr. Chamberlain to call me back. Left message on 2 nd phone number.	07/16/07	HW
07/23/07	Left messages on both phone #'s. For owner to call me at to discuss case.	08/20/07	HW
08/13/07	Left messages on both #'s to call me back. FIU	10/02/07	HW
12/20/07	Left messages on both #'s. FIU	01/18/08	HW

File 1391ENVIRONMENTAL SERVICES SECTION
FOLLOW-UP REPORTJohn Chamberlain
Jean ReimersOwner's Name John ChamberlainStreet Address 214 Donmore DrCity, State, Zip Great Falls VA 22066Phone # 703-444-2942, 703-444-2940Tax Map: 2 - 2 10021 / 1 18
Map Grid Sub Block LotSubdivision Seneca Farms
Sec. 3

DATE	COMMENTS	RESCH DATE	INITIALS
Cont 3/10/03	was inspected or permitted by the Health Dept.		AJ
3/12/03	Drafted NOV to be sent to owner. This property is scheduled for closing on Friday. Five Five Star Septic was notified on 3/11/03 that buyers & sellers should be made aware of all issues before closing. I told him that I would be available to answer any questions from the involved parties since the NOV would probably not be received prior to closing.	4/25/03	AJ
4/29/03	I will send ^{copy} of NOV to new owners, since the property has already been transferred. Follow up in 30 days if no contact from new owner.	5/30/03	AJ
2-5-07	Called new owner (John Chamberlain + Jean Reimers) left detailed message, told for call back.		JS +
2-7-07	Spoke (w) Mr. Chamberlain, he was unaware of the details of the earlier Viol. Cited, requested copy of earlier letter, I read options to him he will respond within 30 days as to his actions.	3-19-07	JS
4-3-07	Spoke with Mrs. Chamberlain, she requested application & soil consultant list, they will be properly expanding SDS in near future - will call back.	5-1-07	JS

ENVIRONMENTAL SERVICES SECTION COMPLAINT REPORT

Area: 1

Subdivision: Seneca Farms, S3

Tax Map # ~~2-2-2~~ 2-2-002-18

Location of Complaint 214 Donmore Dr. Great Falls VA 22066
Street City Zip

Received By PNP ☐ Letter ☒ Telephone ☐ In Person

Person Responsible for Premises Harold S Barlow
(Name) (Address) Phone Number

Complainant Ed McHale, 5 Star Septic
(Name) (Address) Phone Number

Specific Details of Complaint While conducting private 4 sale eval, contractor discovered SL, ST, + conveyance line has been installed w/out permit or insp. to serve garage plumbing. ST may be too close to garage + 3" SL installed. Other details unknown - please + recommend

To Be Investigated By AJ Date Assigned 3-12-03

RESULTS OF INVESTIGATION

Was Complaint Justified? ☐ Yes ☐ No
 (Show Dates and Results of Investigation and Re-investigation Below)

REGISTERED

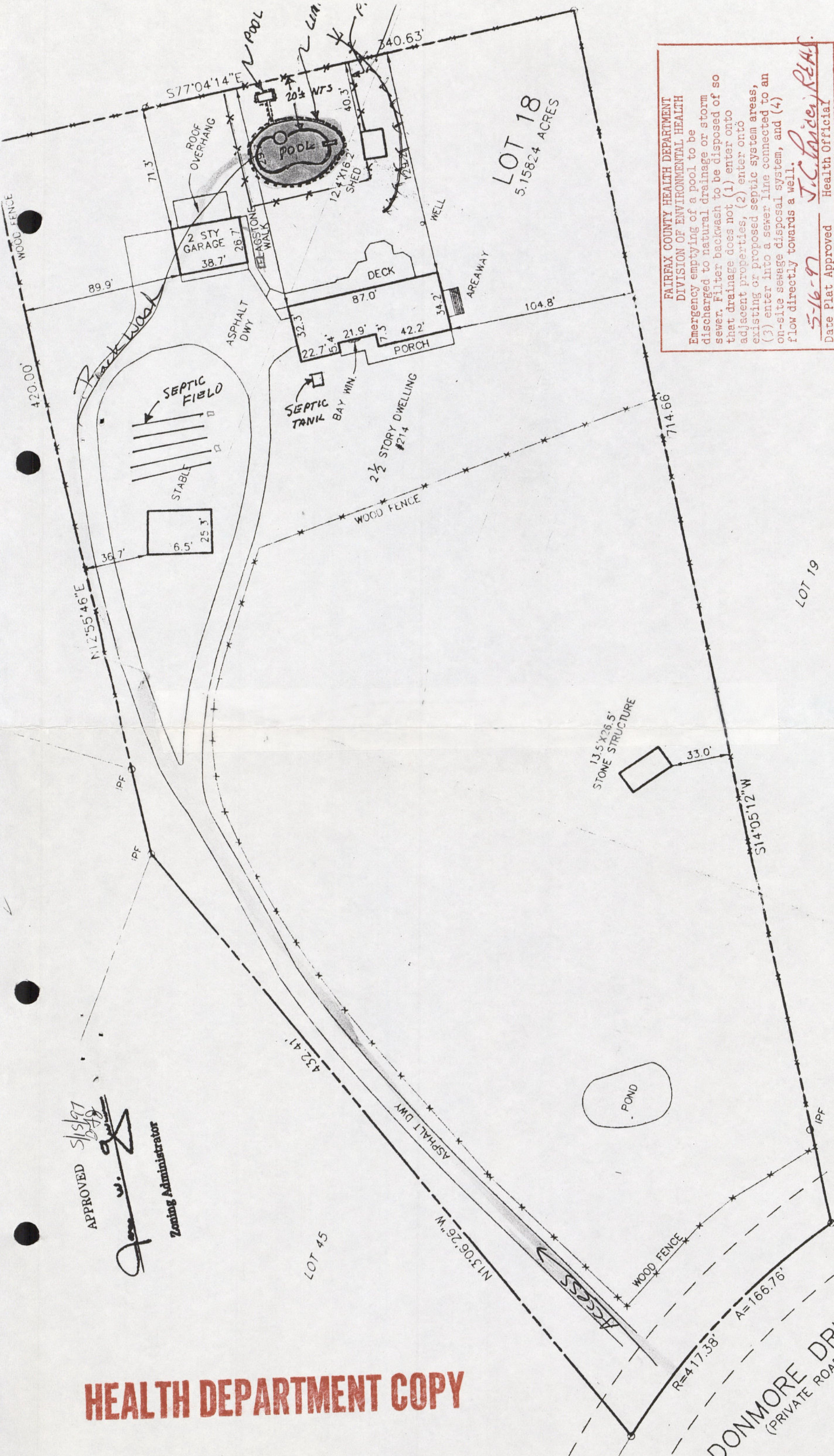
DATE	COMMENTS	FOLLOW-UP DATE	INITIALS
3/10/03	Inspected site w/ Five Star Septic.		
	The following problems were noted:		
	① The "garage" has an apartment above it w/ bathroom & washing machine ② the		
	ST is only 5' from garage, ③ there is a 1 1/2" pvc line connected into a sewer line		
	4" cleanout. (The 1 1/2" line is from an unknown source.) ④ there is no info on		
	tank Mfg or size and none of the work	cont.	AJ

Final Disposal: ☐ Abatement Signature of EHS Date

☐ Other Reviewed By: Date

HEALTH DEPARTMENT COPY

APPROVED 5/15/97
[Signature]
 Zoning Administrator



FAIRFAX COUNTY HEALTH DEPARTMENT
 DIVISION OF ENVIRONMENTAL HEALTH
 Emergency emptying of a pool to be discharged to natural drainage or storm sewer. Filter backwash to be disposed of so that drainage does not (1) enter onto adjacent properties, (2) enter onto existing or proposed septic system areas, (3) enter into a sewer line connected to an on-site sewage disposal system, and (4) flow directly towards a well.
 5-16-97 J.C. Linder, R.E.H.S.
 Date Plat Approved Health Official

PROPOSED POOL FOR:
 BARLOW RESIDENCE
 214



PERMIT TO INSTALL ☒ REPAIR, ☐ REASONS FOR REJECTION ☐ 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 12/10/80 Case No. _____

Owner Harold Barlow Address 8940 Jeffery Rd., Great Falls, VA Phone 534-4800
 (Mailing Address) 22066

Occupant _____ Address _____ (Mailing Address) _____ Phone _____

Exact Location of premises 214 Donmore Dr., Great Falls, VA 22066 SENECA FARMS TM: 2-2-002-18
 (Subdivision, Street or Road Name, Section or Lot No.)

FOR: ☐ Dwelling ☐ Other _____ Automatic Washing Machine ☒ Yes ☐ No Consumption 800 gal. per day
 Actual ☒ Potential ☐ Bedrooms 4 Garbage Disposal Unit ☒ Yes ☐ No (☐ Actual ☐ estimated Water)

Additional wastes _____

(1) WATER SUPPLY (Existing) Class _____ Approved ☐ Yes ☐ No Other _____ Va. Plane Coordinates
 (To be installed) Class _____ Cased ** ft. to be grouted ** ft. 504,000 N
2,331,000 E

****Per County Codes** (Unless supported by positive evidence Class III is to be considered as to be installed.)

SOIL STUDY Naturally drained, suitable by sight ☒ Yes ☐ No Technical Classification _____ (If Known)

(2) Estimated Percolation Rate 1-10 ☒ 11-25 ☐ 26-50 ☐ > 51 ☐ Percolation Test Required ☐ Yes ☐ No Rate 10054"
 (Minutes per inch) (Minutes per inch to nearest 10 minutes)
 Depth to Grey Mottles _____ inches (estimate over 4 ft.) OTHER _____
 Surface drainage required ☐ Yes ☐ No OTHER DRAINAGE _____

(3) HOUSE SEWER LINE Size _____ inches. Type of material required _____. Distance from Water Supply _____ feet.
Must be inspected and approved by Plumbing Insp. Br.

(4) DETAILS OF CONSTRUCTION Watertight Septic Tank of Pre-cast concrete Material Liquid Capacity 1480 gallons.
 Inside Dimensions Length _____ feet. Width _____ feet. Liquid Depth _____ feet. Depth of Air Space _____ feet.

SUBSURFACE ABSORPTION FIELD Number of square feet required 976+488R Type aggregate required blue stone

(5) Depth of aggregate from base of tile to bottom of ditches 16 inches. Allowable fall 2 to 4 inches.
 Total aggregate minimum depth 24 inches or more. Depth of drainfield to be 44 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.)

1. DO ALL GRADING AS SHOWN ON APPROVED PLAT DATED 12-9-80 (UP TO TWELVE (12) INCHES OVER ENTIRE LENGTH OF PROPOSED FIELD) PRIOR TO INSTALLATION OF SYSTEM AND CALL FOR A GRADE INSPECTION PRIOR TO INSTALLATION OF SYSTEM.

2. Install 8 lines, 61' long, 2' wide, 44" deep AFTER cut on 6' centers as shown below.

3. Leave 16' edge to edge between line #4 and #5 for two reserve lines. Install a flow diversion valve. Install dist. boxes large enough for use of reserve lines at a later date.

4. Maximum cover is to be 20"

5. Install a cast iron section (or sleeve) for that portion of tight line from tank to FDV that is under the driveway

6. Install well in area shown, 30' from house ON wall line.

7. Install both systems in accordance with Fairfax Co. Codes.

8. Top line #1 is to start 14' BELOW wall line shown, 65' from house corner shown and 67' from garage corner shown, and end 35' from side prop. line shown.

9. Call for water sample at least thirty (30) days ~~XXXX~~ prior to RUP request. Call for final grade inspection when ready for approval of septic system/

Note: Owner or his agent must notify _____ Health Department, Phone _____ 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 12/10/80 Approved [Signature] (Reviewing Authority)

Date 12/10/80 Signed [Signature] (Sanitarian or Health Director)

PERMIT # 80-316

LOCATION 2-2-002-18 Seneca Farms
Subdivision or Tax Map Ref.

PART I WATER SUPPLY INSPECTION REPORT (To Supplement LHS-143)

Well Installed By TROUT Pump Installed By TROUT

I. GROUT INSPECTED.....4/3/81 cof
Date Sanitarian

II. PIPE & ELECTRIC WIRE FROM WELL TO STORAGE TANK APPROVED 4/10/81 cof
Date Sanitarian

III. TYPE OF INSTALLATION: X/PITLESS ADAPTOR II PIT II SURFACE
(4" Drain) (Drain) 4/10/81 cof
Date Sanitarian

IV. STORAGE TANK.....4/10/81 cof
Date Sanitarian

Gate Valve ✓
Check Valve ✓Sample Tap and
Backflow Preventer ✓Elec. Dis. Switch ✓
Press. Relief Valve ✓

V. INITIAL WATER SAMPLE COLLECTED.....5-26-81 cof
Date Sanitarian

DATE	RECORD OF ADDITIONAL REMARKS OR VISITS	DISPOSITION	SANITARIAN
5-26-81	LOGS ARE IN	HOLD	cof

PART II SEWAGE DISPOSAL SYSTEM INSPECTION REPORT (To Supplement LHS-141)

DATE	RECORDS OF REMARKS AND VISITS	DISPOSITION	SANITARIAN
11-12-80	HOUSE SHOWN ON APPD PIAT 6-26-80 IS NOT THE HOUSE BUILT ON THE LOT. BUILT HOUSE IS LONGER WITH W.D. ON RT. SIDE, ADDN. OFF GARAGE + ADDN. BETWEEN HOUSE & GARAGE + NO OFF SET AT REAR AS SHOWN. DUE TO: 1) NO ONE AT PROPERTY 2) GROSS CHANGES IN HOUSE SIZE-DESIGN; I feel this PIAT WITH CORRECT HOUSE DESIGN, TOPO, SDS MUST BE RE-SUBMITTED. I SHALL NOTIFY BLDG. (pm BLDG TOLD.)	HOLD for RE-SUBMISSION	cof
1-8-81	Porch addn. should be no problem according to GORHAM. (DH & cof)	HOLD	cof
2-5-81	NOTHING CUT YET.	HOLD	cof
2-20-81	ENTIRE SDS OK TO BF - needs 14" cut	HOLD	cof
4-3-81	FG LOOKS GOOD BUT FDU extension needs cutting + cap	HOLD	cof
5-26-81	FG OK.	appd	cof

WATER SUPPLY

County/City Fairfax Date _____ Case No. _____

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

Owner Harold Barlow Address 8940 Jeffery Rd., Great Falls Phone 534-4800
 (Mailing Address) 22066

Occupant _____ Address _____ (Mailing Address) _____ Phone _____

Exact Location of Premises 214 Donmore Dr., Great Falls, VA 22066 SENECA FARMS TM: 2-2-002-18
 (Subdivision, Street or Road Name, Section or Lot No.)

TYPE CUSTOMERS: ☐ Community ☐ Industrial ☐ Recreational ☐ Other:

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 LOG IS PUBLIC WATER SUPPLY AVAILABLE ☐ Yes ☒ No

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

INSPECTION FINDINGS

TROUT/ TROUT
 (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 _____ Septic Tank _____ feet.
 (Describe)

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 _____
 (Describe)

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

(4) CONSTRUCTION DETAILS Total depth 400 feet.
 Diameter 6 inches. Type of casing steel
 (Describe)
 Depth of casing 83 feet. Exterior space around casing sealed with ☒ Concrete grout to depth of 50 feet.
☐ Poured in place ☒ Pumped in under pressure ☐ Other type backfill _____ to depth of _____ feet.
 (Describe)
 casing extends 12 inches above ground.

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

☐ Yes ☐ No. If no, explain puller adapter

(6) PUMP ☐ Shallow Well ☒ Deep Well. Length of Drop Pipe _____ feet. Well capacity 5 gallons per minute.
 Size of Feeder Pipe 1.0 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 82 gallons. If gravity, is overflow pipe screened ☐ Yes ☐ No.

THIS WATER SUPPLY SYSTEM ☒ Is ☐ Recommended by FAIRFAX CO ☐ Div. Engineering
☐ Is not ☒ Approved ☒ Health Department

REMARKS: 0-61 dirt & shale
61" - 4" blue stone

Date 5/29/81 Signed EO Jones Date 6/1/81 Approved W. B. Beyer (Health Director)

Date _____ Approved _____ Date _____ Approved _____
 (Reviewing Authority—Other Agency or Engineer)

RECORD OF INSPECTION-SEWAGE DISPOSAL SYSTEM

Date _____ Case No. _____

Owner Harold Barlow Address 8940 Jeffery Rd., Great Falls Phone 534-4800

(Mailing Address)

22066

Occupant _____ Address _____ Phone _____

(Mailing Address)

Exact Location of Premises 214 Donmore Dr., Great Falls, VA 22066 SENECA FARMS TM: 2-2-002-18

(Subdivision, Street or Road Name, Section or Lot No.)

WATER SUPPLY INSPECTION

Installed according to Permit Design ☐ Yes ☐ No. Distance to nearest House Sewer _____ feet. Distance to nearest Sewage Disposal System _____ 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 _____ feet. Buildings 20+ 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 _____ (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 ABS SCH 40 Size 4 Inches.

(5) SEPTIC TANK

Constructed of TAPP 1500 (Kind of Material) Inside Dimensions Length _____ feet. Width _____ feet. Liquid Depth _____ feet. Depth of Air Space _____ 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)(2) (Number) extra outlets for future use.

(7) SUBSURFACE ABSORPTION FIELD

Total Area in bottom of ditches 976 square feet. Number of ditches 8 Length of ditches 61 feet. Grade of ditches Minimum 2 Inches per 100 feet. Maximum 4 inches per 100 feet. Has system been checked by instruments (Level) ☒ Yes ☐ No. Type aggregate used blue stone Depth of aggregate under Tile 16 inches Total depth of aggregate 24 inches Depth of backfill over aggregate 2 inches (32)

(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.

BULL RUN FDR P/C #1

Septic Tank Contractor: BARLOW CONST. Address _____ Phone _____

This Sewage Disposal System (Is) (Is Not) Approved by FAIRFAX CO Health Department

Date 5/26/81 Signed GO Jones (Sanitarian)
Date 5/27/81 Approved AK Berg (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: _____

COMMONWEALTH OF VIRGINIA

MAY - 8 1981

WATER WELL COMPLETION REPORT

•BWCM No. _____

State Water Control Board
P. O. Box 11143
2111 North Hamilton St.
Richmond, Va. 23230

(Certification of Completion/County Permit)

County/City Fairfax

County/City Stamp

• Virginia Plane Coordinates

504,000 N
2,331,000 E
Latitude & Longitude
N
W

• Owner Harold Barlow

• Well Designation or Number _____

Address 214 DONMORE DRIVE

BRAT P2115, VA. 22066

Phone _____

• Drilling Contractor William H. Trout

Address RT. 2 BOX 315A-2

STERLING, VA. 22170

Phone 450-4450

WELL LOCATION: _____ (feet/miles _____ direction) of _____

and _____ feet/miles _____ (direction) of _____

(If possible please include map showing location marked)

Date started 3-81 • Date completed 3-81

Type rig DH4H

SWCB Permit _____

County Permit _____

Certification of inspecting official:

This well does _____ does not _____

meet code/low requirements.

S. _____

Date _____

For Office Use

Tax Map I.D. No. 2-2-002-18

Subdivision SOMER FARM S

Section _____

Block _____

Lot 18

Class Well: I _____, IIA _____

IIIB _____, IIIA _____, IIIB _____

IIIC _____, IIID _____, IIIE _____

1. WELL DATA: New X Reworked _____ Deepened _____

• Total depth 400 ft.

• Depth to bedrock 61 ft.

• Hole size (Also include reamed zones)

• 10 inches from 0 to 50 ft.

• 6 inches from 83 to 400 ft.

• _____ inches from _____ to _____ ft.

• Casing size (I.D.) and material

• 6 inches from 0 to 83 ft.

Material Steel

Wt. per foot 13 or wall thickness _____ in.

• _____ inches from _____ to _____ ft.

Material _____

Wt. per foot _____ or wall thickness _____ in.

• _____ inches from _____ to _____ ft.

Material _____

Wt. per foot _____ or wall thickness _____ in.

• Screen size and mesh for each zone (where applicable)

• _____ inches from _____ to _____ ft.

• Mesh size _____ Type _____

• _____ inches from _____ to _____ ft.

• Mesh size _____ Type _____

• _____ inches from _____ to _____ ft.

• Mesh size _____ Type _____

• _____ inches from _____ to _____ ft.

• Mesh size _____ Type _____

• Gravel pack

• From _____ to _____ ft.

• From _____ to _____ ft.

• Grout

• From 0 to 50 ft., Type CONCRETE

• From _____ to _____ ft., Type _____

2. WATER DATA • Water temperature _____ OF

• Static water level (unpumped level-measured) 42 ft.

• Stabilized measured pumping water level 100 ft.

• Stabilized yield 5 gpm after 1 hours

Natural Flow: Yes _____ No X, flow rate: _____ gpm

Comment on quality OKAY

3. WATER ZONES: From 261 To 262

From 380 To 390 From _____ To _____

From _____ To _____ From _____ To _____

4. USE DATA:

Type of use: Drinking X, Livestock Watering _____

Irrigation _____ Food processing _____, Household X

Manufacturing _____, Fire safety _____, Cleaning _____

Recreation _____, Aesthetic _____, Cooling or heating _____

Injection _____, Other _____

• Type of facility: Domestic X, Public water supply _____

Public institution _____, Farm _____, Industry _____

Commercial _____, Other _____

5. PUMP DATA: Type Sub. • Rated H.P. .6

• Intake depth 300 • Capacity 5 at 60 PSI head

6. WELLHEAD: Type well seal pitless adapter

Pressure tank 1/2 203 gal., Loc. basement

Sample tap ✓, Measurement port _____

Well vent ✓, Pressure relief valve ✓

Gate valve ✓, Check valve (when required) _____

Electrical disconnect switch on power supply ✓

7. DISINFECTION: Well disinfected _____ yes X no _____

Date _____, Disinfectant used _____

Amount _____, Hours used _____

8. ABANDONMENT (where applicable) • yes _____ no _____

Casing pulled yes _____ no _____ not applicable _____

Plugging grout From _____ to _____ material _____

Barlow

6.

10. DRILLERS LOG (use additional Sheets if necessary)

11.

12. DIAGRAM OF WELL CONSTRUCTION
(with dimensions)

DEPTH (feet)		TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, caving, cavities, broken, core, shot, (etc.))	Drilling Time (Min.)
From	To			
0	61	dirt + shale		
61	400	blue stone		

13. Well lot dedicated? _____; Size _____ ft. X _____ ft.; Well house? _____
Distance to nearest pollutant source _____ ft., Type _____
Distance to nearest property line _____ ft., Building _____ ft.

Valley Reg. Off.
116 North Main Street
P. O. Box 268
Bridgewater, Va. 22812
703-828-2595

Piedmont Reg. Off.
4010 West Broad Street
P. O. Box 6616
Richmond, Va. 23230
804-257-1006

Southwest Reg. Off.
408 East Main Street
P. O. Box 476
Abingdon, Va. 24210
703-628-5183

Tidewater Reg. Off.
287 Pembroke Office Park
Suite 310 Pembroke No. 2
Va. Beach, Va. 23462
804-499-8742

West Central Reg. Off.
Executive Park
5312 Peters Creek Road
Roanoke, Va. 24019
703 - 982 - 7432

Northern Virginia Reg. Off.
5515 Cherokee Avenue
Suite 404
Alexandria, Va. 22312
703-750-9111

14. WATER SERVICE PIPE: Checked under 60 p.s.i. for 60
minutes. Pipe size 1 inches. Material PVC-200psi
Installer William H. Trout
Date 3-21

15. I certify that the information contained herein is true and correct and that this well and/or system has been installed and constructed in accordance with the requirements for well construction as specified in compliance with appropriate county or independent city ordinances and the laws and rules of the Commonwealth of Virginia.

Signature [Signature] (Seal), Date 5-2-81
(Well driller or authorized person)

License No. _____

FAIRFAX COUNTY HEALTH DEPARTMENT - DIVISION OF ENVIRONMENTAL HEALTH

APPLICATION

☐ FOR PERMIT TO:

☒ Install or Repair Sewage Disposal System

☒ Install or Repair Water Supply System

☐ APPROVAL OF BUILDING APPLICATION FOR (Specify): SFH

MAP REFERENCE

Plat Subd. Blk. Lot
2-2 602 Seneca Farm 18

POST OFFICE AND
 STREET ADDRESS:

214 Great Falls Va
Donmore Dr
Seneca Farms 3 18
 SUBDIVISION SEC. LOT

OWNER'S NAME Harold S Barlow Phone (H) 7593518 (O) 5344800

OWNER'S ADDRESS 8940 Jeffery Rd Great Falls
 Street City & State Zip Code

CONTRACTOR'S NAME Owner Phone

CONTRACTOR'S ADDRESS
 Street City & State Zip Code

RELEASE PERMIT TO: OWNER ☒ BUILDER

NEW DWELLING: No. of Bedrooms 4 Den Bath in Basement No
11 bedroom yes/no yes/no

Method of Sewage Disposal: Public Sewer Septic Tank ☒ Other
 (describe)

Water Supply: Public Private Well ☒ Other
 (describe)

ADDITIONS TO EXISTING DWELLINGS: No. of bedrooms presently in house
 No. of bedrooms to be added:
 Describe other rooms in addition:

Method of Sewage Disposal: Public Sewer Septic Tank Other
 (Describe)

Water Supply: Public Private Well Other
 (Describe)

COMMERCIAL USE: No. of Employees Estimated daily water use gal/day

APPLICANT SIGNATURE: Harold S Barlow DATE 6/18/80

TO BE FILLED IN BY HEALTH DEPARTMENT

Building Permit Appl. No. 800680661
 Well R. No. 06184A-5500 12-1-80 dm
 S.T.P.R. No. 02678 PL-475-02743 PL-

Perc Rate 10 Depth 54
 Septic Tank 1480 Gallons Absorption Field 488 linear feet.
 Replacement area required 244 linear feet.

REMARKS: To much cert. land back to Perryman & Co. Mr. Barlow notified 6-20-80

APPROVED: Appears good may be reduced by 12" for trench by the 42" gms REVIEWED BY: JMS DATE 6-26-80
 REVIEWED BY: DATE

80-316

Application for a Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health

For Department Use Only

Health Department

Identification Number _____

Map Reference 2-2-002-18

Fx Co

Health Department

Date Received 5-6-85

To Be Completed By The Applicant

Type sewage system: ☐ New ☐ Repair ☐ Expanded ☐ Conditional
FHA/VA yes ☐ no ☐

Owner Harold Barlow Address 214 Donmore Dr. Great Falls Phone 534-4800

Agent James McLaughlin Address 1947 Wilson Blvd. #356 Phone 527-2243
Arlington Va. 22201

Directions to Property _____

Subdivision _____ Section _____ Block _____ Lot _____

Other Property Identification _____

Dimensions/size of Lot/Property _____

Other Application Information

I. Building/facility ☐ New ☐ Existing
Intermittent Use ☐ Yes ☐ No If yes, describe: _____

II. Residential Use ☐ Yes ☐ No
Termite Treatment ☐ Yes ☐ No
☐ Single Family ☐ Multifamily Number of Units _____ Number of Bedrooms _____
Basement ☐ Yes ☐ No
Fixtures in Basement ☐ Yes ☐ No

III. Commercial Use ☐ Yes ☐ No Describe: _____

Commercial/Wastewater ☐ Yes ☐ No Number of Patrons _____ Number of Employees _____
If yes, give volumes and describe _____

IV. Water Supply: ☐ Public ☐ New Describe: _____
☐ Private ☐ Existing _____

V. Proposed Installation: ☐ Septic tank and drainfield ☐ Other
If other, describe Garage

SITE PLAN Attach a site plan (rough sketch) showing dimensions of property, proposed and/or existing structures and driveways, underground utilities, adjacent soil absorption systems, bodies of water, drainage ways, and wells and springs within 200 feet radius of the center of the proposed building or drainfield. Distances may be paced or estimated.

The property lines and building location are clearly marked and the property is sufficiently visible to see the topography. I give permission to the Department to enter onto the property described for the purpose of processing this application.

James E. McLaughlin
Signature of owner/agent

5-6-85
Date

System Specifications

APPROVED
FAIRFAX COUNTY HEALTH DEPARTMENT

Page 1 of 4

VDH Use Only

HDIN: _____

Application Information

Name: Jean Reimers

12-20-17

Date

Address: 214 Donmore Drive, Great Falls, VA

Phone: _____

Location Information

Tax Map/GPIN #: 2-2-002-8

Property Address: 214 Donmore Drive, Great Falls VA

Subdivision: _____ Section: _____ Block: _____ Lot: _____

Directions: _____

General Information

Property Type (e.g. residential): residential

Number of Bedrooms: 5

Daily Flow: 750 gpd

Conditions: _____

Notes: Existing 4 bedroom system being upgraded to 5 bedrooms using part of the existing approved reserve area. A new reserve area has been identified

Sewer Line

Diameter: 4 in. Material: sch 40 PVC (or equivalent) Notes: _____

Pretreatment Unit(s)

Treatment Level: septic tank effluent

Septic Tank Capacity: 1000 gallons

Number of Septic Tanks 1

Size of Septic Tank(s) 1000 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: _____

Conveyance Line

Conveyance Method: gravity

If pumping, include pump specifications sheet.

Material: _____ Diameter: _____

Notes: _____

Distribution Method and Header Lines

Distribution Method: gravity

No. of boxes: 2 No. of outlets: 10

Surge or splitter box required: ☒ Yes ☐ No

Header Line Material: 4 in. -1500 lb. crush strength

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: 2 Length of lateral(s)/pad(s): 61 ft. Width of lateral(s)/pad(s): 24 in.

Center to center spacing: 6 ft. Installation depth: 44 in. Aggregate depth: 31 in.

Size/Type of Aggregate: 1/2" to 1 1/2" crushed stone: VDOT #56 Lateral/pad slope: 2-4 in. per 100 ft.

Reserve Area Provided: 100 % Notes: This is an upgrade to the existing system: 1 bedroom garage/apt. added

New septic tank for the garage/apt. Tie in for the new septic tank near the FDV

Please Note: _____

This design is for a 5 bedroom upgrade to an existing 4-bedroom conventional onsite wastewater treatment system. A 1- bedroom apartment has been added to the garage. The upgrade will consist of the installation of a septic tank for the apartment with sewage flow to tie-into the existing sewer line. The construction permit design (12/10/80) is based on 200 gpd per bedroom . A 100 percent reserve area is provided. There is an existing undocumented septic tank adjacent to the 1-bedroom apartment that does not satisfy the regulatory offset requirements.

Site Information (existing records)

Percolation Rate	10 minutes per inch
Sewage Flow (200 gpd/bdr)	800 gallons per day
Treatment Area	976 square feet
Slope	12 percent
Septic Tank	1875 gallons

Treatment Area Information

	<u>Existing</u>	<u>Upgrade(added)</u>
Trench Width	2.0 ft.	2.0 ft.
Trench Length	61 ft.	61 ft.
Trench Depth	44 in.	44 in.
Number of Trenches	8	2

Invert Information (garage)

Sewer line (ex garage)	<u>inv.</u>	<u>381.7+/-</u>
Septic Tank	<u>s.e.</u>	<u>382.5</u>
	<u>inv. in</u>	<u>379.5+/-</u>
	<u>inv. out</u>	<u>379.4+/-</u>
Tie In	<u>s.e.</u>	<u>279.0+/-</u>
	<u>inv in</u>	<u>277.0+/-</u>

Specifications

All construction materials and methods must conform to applicable Local and State Sewage Handling and Disposal Regulations and Codes.

Prior to installation the designer shall approve any deviation from this design.

The contractor shall contact the Fairfax County Health Department for a pre-construction conference.

Contractor is to install concrete tanks on uniformly firm and stable compacted ground, crushed stone is recommended to provide uniform support to tank bottom

Site Preparation Work

Stakeout components prior to installation and request field review.
Check all elevations for proper grade requirements for all components.
Contractor must provide adequate access for correct installation
This system must be installed during dry conditions.
Confirm location of the components of the existing system.

Treatment Area

Either use the existing d-boxes or install new 10 hole d-boxes, dig 2 new trenches 44" deep x 24" wide x 61" long (1 trench in each ½ of the existing system). Add 24" of VDOT 56 stone, percolation pipe, cover pipe with 2 inches of stone, fabric and backfill to the surface.

Site Restoration

Backfill with suitable onsite loam and sandy loam soil free of damaging objects, gravel and organic matter. Seed or sod backfilled areas and cut slopes
Provide erosion protection for backfill material in accordance with Local and County standards and maintain until permanent protection is established
Backfill should be graded to prevent the infiltration of surface water and divert storm water run-off away from the system

Sewer Line

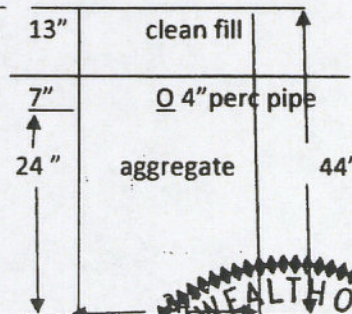
Four (4) inch schedule 40 pvc is required. Six (6) inch cast iron or schedule 80 PVC sleeve is required under all driveway and parking areas. There is an existing undocumented sewer line at this location that may satisfy the requirements.

Septic Tank

Hanover precast concrete 1000 gallon MJ. to be installed in the general area shown on the plan adjacent to the garage. There is an existing septic tank located in the general vicinity that does not satisfy the regulatory offsets.

Trench Installation Information

Square Feet Required	488 sf.
Depth from Ground Surface to Bottom of Trench	44 in.
Aggregate size	0.5"-1.5"
Trench Bottom Slope	2-4"/100'
Center to Center Spacing	6.0 ft.
Trench Width	2 ft.
Depth of Aggregate, total	31 in.
Trench Length	61 ft.
No. of trenches	2



COMMONWEALTH OF VIRGINIA
WILLIAM F. SIBIJSKI
EVALUATOR
12-14-17
William F. Sibijski, MAOSE

COMMONWEALTH OF VIRGINIA
Reviewed by,
DANIEL S. ROM
Lic. No. 12511
PROFESSIONAL ENGINEER
Daniel S. Rom, P.E.
12-14-17

420.6

1 in. = 30 ft.

EX. GARAGE
GF=383.73

existing clean out

1000 GAL SEPTIC TANK MJ

4" PVC SEWER LINE

EX. DWELLING
#214
FF=382.89

6 IN. SLEEVE

TIE INTO EX. SEWER LINE

EXISTING SEPTIC TANK, 1875 GAL

WELL

2- 61' FT. TRENCHES NEW

376

372

NORTHERN VIRGINIA
REGIONAL PARK AUTHORITY

APPROVED SUBJECT TO NOTATIONS SHOWN

FAIRFAX COUNTY HEALTH DEPARTMENT

Addition footed must come
no closer than five feet (5')
to sewer line

8/22/89
Date

Health Official

18
5.1582 AC.

S 77° 04' 14" E

340.63'

129.4'

105.0'

S 14° 05' 12" W

714.66'

559.0'

N 12° 55' 46" E

420.00'

SEE DETAIL

17

APPROVED

DIVISION OF
INSPECTION SERVICES

BY [Signature]
Date 8-22-89

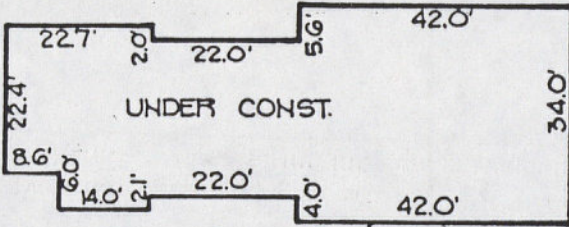
50' INGRESS-EGRESS
EASEMENT

N 13° 06' 26" W

432.41'

R 417.38' A 166.76'

DONMORE DRIVE



DETAIL
SCALE 1"=30'

HOUSE LOCATION SURVEY
LOT 18 - SECTION 3
SENECA FARMS
DRANESVILLE DISTRICT
FAIRFAX COUNTY, VIRGINIA
SCALE 1"=100' DATE 10-1-80

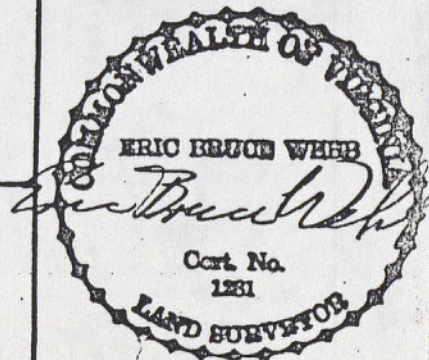
APPROVED

[Signature]
Zoning Administrator

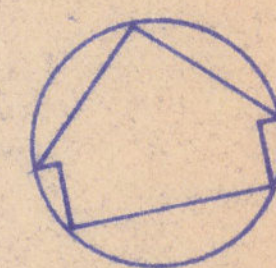
I hereby certify that the locations of all the existing improvements on this property have been carefully established by a transit-tape survey and unless otherwise shown, there are no encroachments.

This survey has been prepared without the benefit of a title report and does not therefore necessarily indicate all encumbrances on the property.

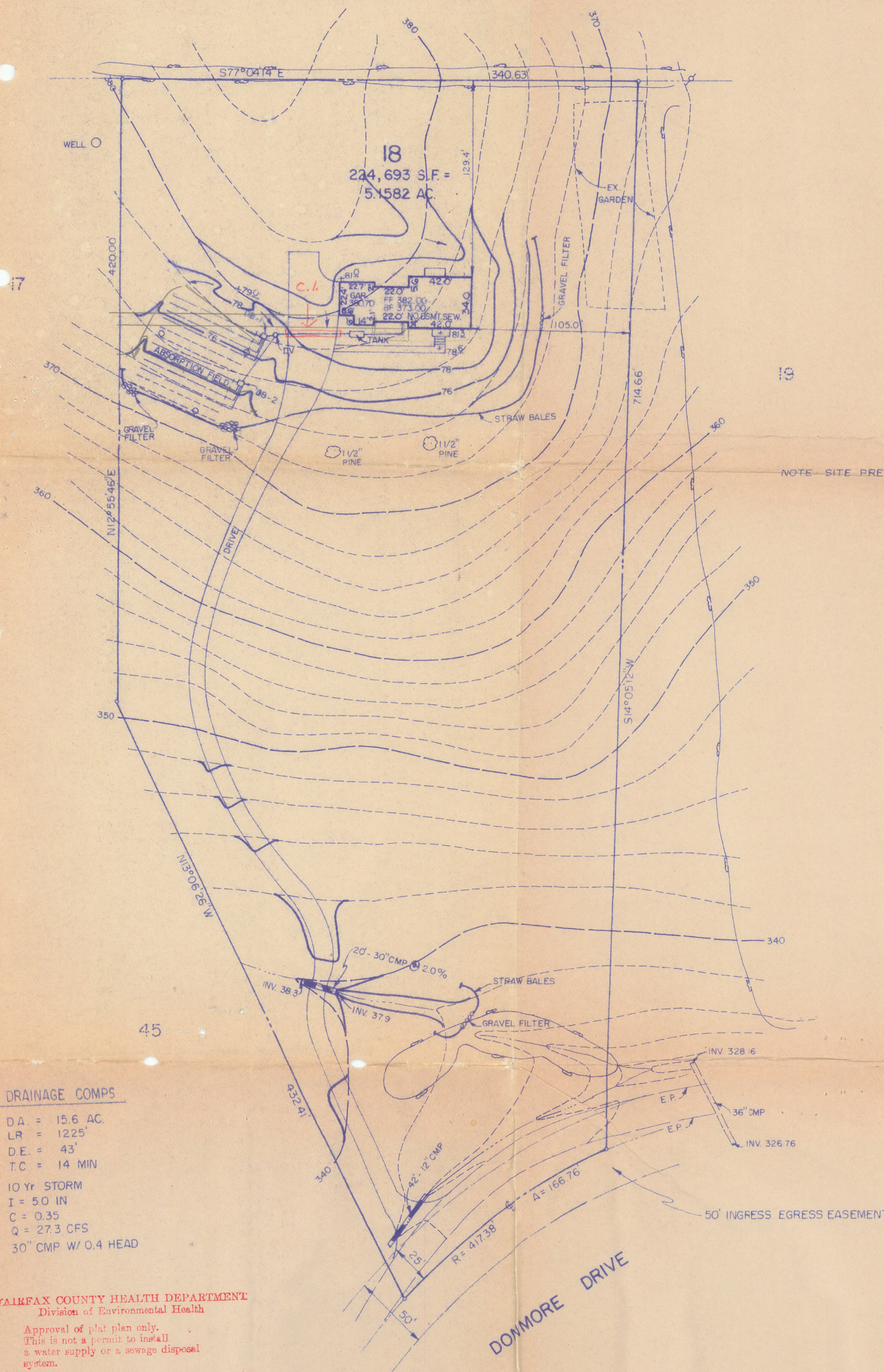
RUNYON ASSOCIATES, INC.
ENGINEERING, SURVEYING & PLANNING
152 HILLWOOD AVENUE
FALLS CHURCH, VIRGINIA 22046 (536-2266)



NORTHERN VIRGINIA REGIONAL PARK AUTHORITY



PERC. DATA
 10 RATE @ 54'
 4 BDR - 488 LF REQ'D
 8 LINES @ 61'
 DB-1 373.50 374.7
 DB-2 371.00
 DV 373.70 375.0
 TANK 376.00



NOTE: SITE PREDOMINATELY OPEN

DRAINAGE COMPS

D.A. = 15.6 AC.
 L.R. = 1225'
 D.E. = 43'
 T.C. = 14 MIN
 10 Yr. STORM
 I = 5.0 IN
 C = 0.35
 Q = 27.3 CFS
 30" CMP W/ 0.4 HEAD

FAIRFAX COUNTY HEALTH DEPARTMENT
 Division of Environmental Health
 Approval of plat plan only.
 This is not a permit to install
 a water supply or a sewage disposal
 system.
 All underground utility lines and utility easements
 must be located a minimum of 4 feet from all
 subsurface disposal systems.
 All water service lines must be located a minimum
 of 10 feet from all subsurface disposal systems.
 M.S. 12-9-80

THE PROPERTY DELINEATED ON THIS PLAT IS LOCATED
 ON ASSESSMENT MAP NO. 2-2 ((2)) 18.



SCALE: 1" = 50'
 BY: AG
 DATE: 6-24-80
 REVISIONS:
 11-25-80 HOUSE &
 GRADING

GRADING PLAN <i>H. Barlow-Owner</i>	
LOT 18 SENECA FARMS SECTION THREE	
ORANESVILLE DISTRICT FAIRFAX COUNTY, VIRGINIA	
RUNYON ASSOCIATES, INC. ENGINEERING, SURVEYING & PLANNING 7649 LEESBURG PIKE FALLS CHURCH, VIRGINIA 22043	SHEET 1 of 1
827-8227	F-864

