TO DEPT. OF PUBLIC WORKS ENVIRONMENTAL SERVICES - (DPWES
RESIDENTIAL INSPECTIONS BRANCH - (OBCS)

FILE UNDER

FROM: HEALTH DEPARTMENT/ENVIRONMENTAL SERVICES SECTION

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

DATE: 07/01/2005

OWNER'S NAME: SUMEET CHIBBER

BUILDING APPLICATION NUMBER:

SUBDIVISION: SENECA FARMS SEC: 3 BLOCK: LOT: 45

TAX MAP IDENTIFICATION: 2-2-002-45

PROPERTY ADDRESS: 218 DONMORE DRIVE, GREAT FALLS VA 22066

HEALTH DEPARTMENT PERMIT#: 129 - 05 - 0377

PERMIT ISSUED FOR: ◉ SEWAGE DISPOSAL ◉ WELL ○ OTHER

TO SERVE: ◉ RESIDENTIAL ○ COMMERCIAL

○ OTHER - DESCRIBE:

SEWAGE DISPOSAL SYSTEM DESIGNED FOR: FIVE BEDROOMS OR 750 GPD
(ALL PERMITS FOR DWELLING ARE DESIGNED TO INCLUDE AUTOMATIC WASHER AND GARBAGE DISPOSAL)

REMARKS:
THE ABOVE TO BE FAXED TO PERMITS DIVISION (OBCS) AND ORIGINAL TO BE ATTACHED WITH PERMIT.

NOTIFICATION OF FINAL APPROVAL

SEWAGE DISPOSAL SYSTEM
APPROVED: 5-9-2006

WATER SUPPLY SYSTEM
APPROVED: 5-22-2006

SIGNATURE:

ENTERED

UPON FINAL APPROVAL, ONE COPY TO BE FAXED TO RESIDENTIAL INSPECTIONS BRANCH, ORIGINAL TO BE ATTACHED ON TOP OF FILE

NUMBER OF BEDROOMS AT FINAL INSPECTION: 4

STICKER PLACED: MA INITIALS: AK

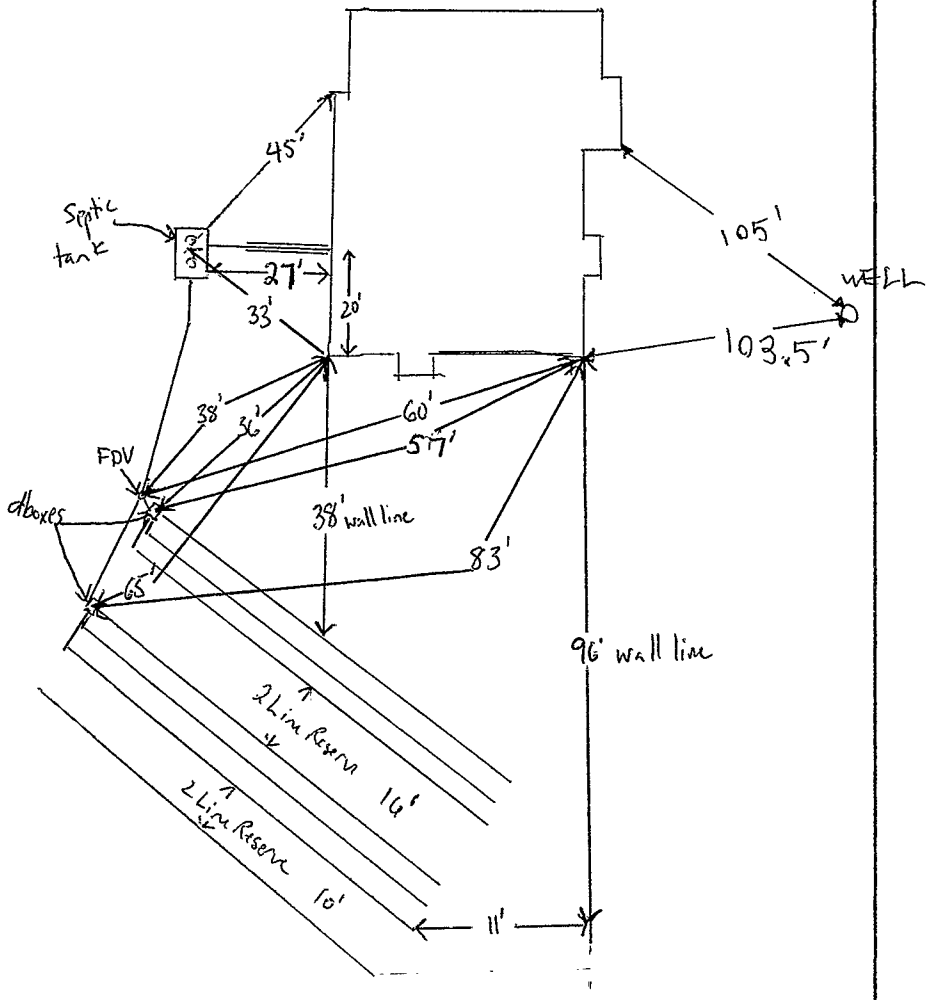
**FDV (CHECK ONE) ☑ YES ☐ NO

FAIRFAX COUNTY HEALTH DEPARTMENT
SEWAGE DISPOSAL SYSTEM/WELL WATER SUPPLY AS-BUILT

Tax Map ID: 2-2-902-45 Street Address: 218 Donmore Dr

Subdivision: Seneca Farms S.3 City, State, Zip: Great Falls, VA 22066

Not to Scale



SDS SM 3/2/06

FHD-EH-7 REV. 12/92

WSS only RK 1/20/06

FAIRFAX COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH

HD Number:
129-05-0377

Date of Issue: 5/22/06

Sewage Disposal System Operation Permit

SUMEET CHIBBER
218 DONMORE DR
GREAT FALLS VA 22066
002-2/0002/0000/0045

The above operator has made an application and in accordance with the regulations of the Board of Health of the Commonwealth of Virginia is authorized by the Fairfax County Health Department to operate an Individual Onsite Sewage Disposal System with an actual or estimated water use of 750 GPD for a 5 bedroom dwelling.

Environmental Health Specialist

Environmental Health Supervisor

Gloria Addo Ayensu, M.D., MPH
Health Director

Water Supply and/or Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health
FAIRFAX COUNTY Health Department

Page 1 of 2

Health Department Identification Number 129-05-0377
Map Reference 002-2/0002/0000/0045

General Information

Water Supply System: New ✓ Repair ___ Public ___ FHA ___ VA ___ Case No. ___
Sewage Disposal System: New ✓ Repair ___ Expanded ___ Conditional ___ Public ___

Based on the application for a sewage disposal system construction permit filed in accordance with Section 2.13 E, of the Sewage Handling and Disposal Regulations and/or Section 2.13 of the Private Well Regulations a construction permit is hereby issued to:

Owner SUMEET CHIBBER Telephone (202) 320-8193
Address 1694 SIERRA WOODS CT RESTON VA 20194 For a Type I Sewage Disposal System or Well to be constructed on/at 218 DONMORE DRIVE GREAT FALLS VA 22066
Subdivision SENECA FARMS Section/Block 3 Lot 45 Actual or estimated water use SBR/150 gpd

DESIGN	NOTE: SEWAGE DISPOSAL SYSTEM INSPECTION RESULTS
Water supply, existing: (describe) NONE **To be installed:** class III B cased 50' min grouted 50' min	**Water supply location:** Satisfactory yes ☑ no ☐ comments Completion Report G. W. 2 Received: yes ☑ no ☐ not applicable ☐
Building sewer: 4" I.D. PVC Schedule 40, or equivalent. Slope 1.25" per 10' (minimum). ☐ Other	**Building sewer:** yes ☒ no ☐ comments Satisfactory
Septic tank: Capacity 1500 gals. (minimum). ☐ Other	**Pretreatment unit:** yes ☒ no ☐ comments Satisfactory Manf. ME MJ Size 1500
Inlet-outlet structure: PVC Schedule 40, 4" tees or equivalent. ☐ Other	**Inlet-outlet structure:** yes ☒ no ☐ comments Satisfactory Filter: Zoeller Size: 5000
Pump and pump station: No ☐ Yes ☐ describe and show design. if yes:	**Pump & pump station:** yes ☐ no ☐ comments Satisfactory
Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent. ☐ Other Flow Diversion Valve	**Conveyance method:** yes ☒ no ☐ comments Satisfactory Type: Bull Run Setting: 2
Distribution box: Precast concrete with 6+ ports. ☐ Other 2 d boxes	**Distribution box:** yes ☒ no ☐ comments Satisfactory Type: plastic Dems: daf
Header lines: Material: 4" I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2' into absorption trench. Slope 2" minimum. ☐ Other	**Header lines:** yes ☒ no ☐ comments Satisfactory
Percolation lines: Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'. ☐ Other	**Percolation lines:** yes ☒ no ☐ comments Satisfactory
Absorption trenches: Square ft. required 900 : depth from ground surface to bottom of trench 36" ; aggregate size 0.5-1.5" : Trench bottom slope 2-4 per 100' ; center to center spacing 6' ; trench width 2' Depth of aggregate 30" ; under pipe 22" Trench length 75' ; Number of trenches 6	**Absorption trenches:** yes ☒ no ☐ comments Satisfactory 10 mpe 50" P.G. 17-21" Date 5/9/06 Inspected and approved by: 5/9/2006 Sanitarian

C.H.S 202A

SDS Contractor: Triple R Construction

TAX MAP # 2-2-002-45

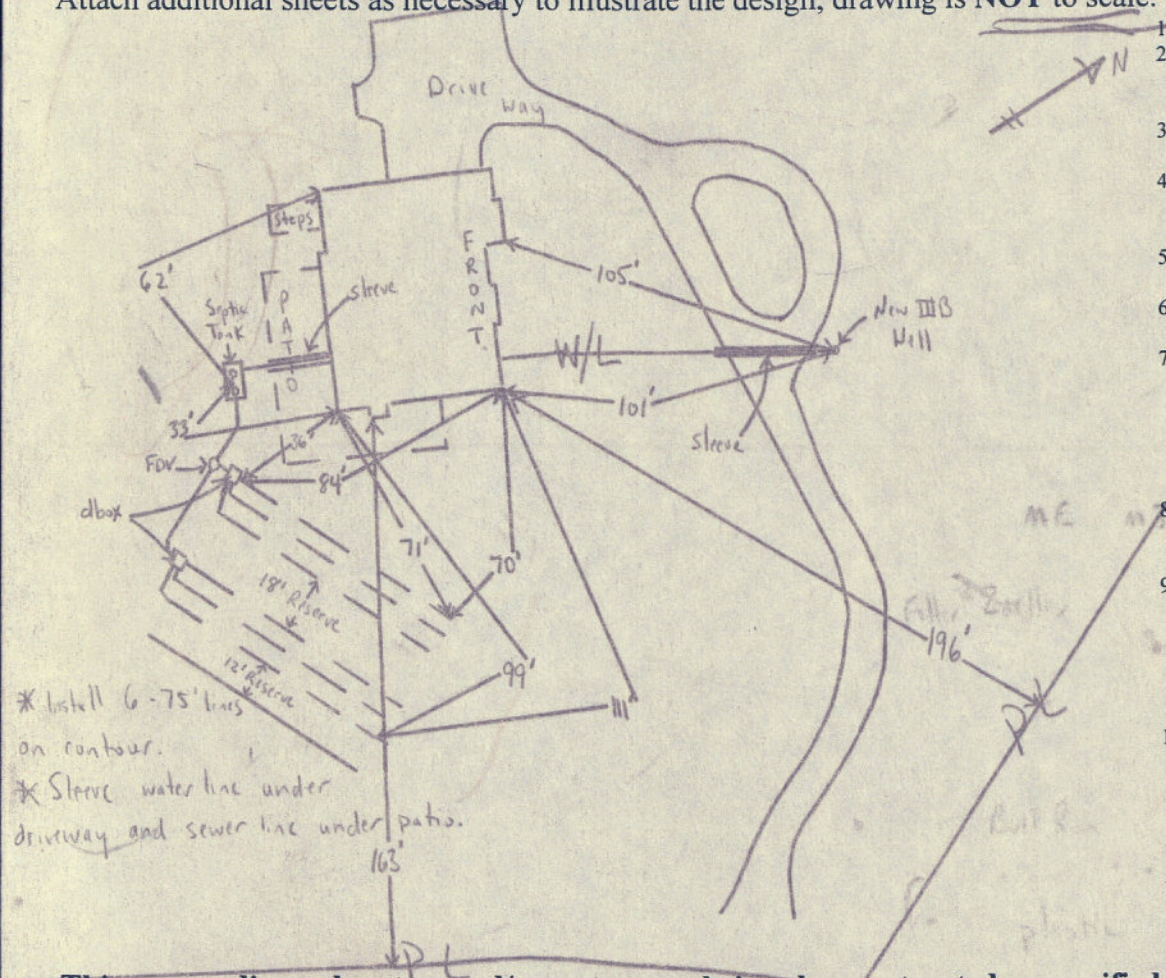
Page 2 of 2

Health Department Identification Number 129-05-0377

Schematic drawing of sewage disposal and/or water system and topographic features.

Show the lot lines of the building site, sketch of property showing any topographic features which may impact on the design of the well or sewage disposal system. Including existing and/or proposed structures and sewage disposal systems and wells within 200 feet. The schematic drawing of the well site or area and/or sewage disposal system shall show sewer lines, pretreatment unit, pump station, conveyance system, and subsurface soil absorption system, reserve area, etc. When a nonpublic drinking water supply is to be permitted, show all sources of pollution within 200 feet.

☐ The information required above has been drawn on the attached copy of the sketch submitted with the application. Attach additional sheets as necessary to illustrate the design, drawing is **NOT** to scale.



1. Grade per site approved by this office.
2. Install system as shown; a minimum of 10' from trees, property lines and utility lines.
3. Maximum backfill over system is not to exceed 20".
4. It is the contractors responsibility to meet all OSHA regulations relating to deep excavations.
5. House sewer line must be inspected by this Department to a point 3' from the dwelling.
6. Flow Diversion Valve (FDV) key must be provided to owner prior to occupancy.
7. *UPON COMPLETION OF FINAL GRADING AND WELL (if applicable), CALL THIS OFFICE (246-2201) FOR FINAL INSPECTION(S) A MINIMUM OF 30 DAYS PRIOR TO REQUEST FOR RESIDENTIAL USE PERMIT.*
8. Install system in accordance with all applicable State Regulations and County code.
9. Install an access manhole on the outlet port of the septic tank for inspection and sludge removal. The manhole must have a removable water tight and air tight cover installed flush with or above the ground surface and marked sewer.
10. Section 68-1-29 of the Fairfax County Code *requires* pumping of the septic tank once every five years. The owner of the property is *required* to provide written notification and proof to this Department each time the tank is pumped.
11. Do not install system during periods of wet weather and/or rain events.

This sewage disposal system and/or water supply is to be constructed as specified by the permit ✓ or attached plans and specifications ____.

This sewage disposal system and/or well construction permit is null and void if (a) conditions are changed from those shown on the application (b) conditions are changed from those shown on the construction permit (c) conditions are changed on the drainfield site.

No part of any installation shall be covered or used until inspected, corrections made if necessary, and approved, by the local health department or unless expressly authorized by the local health department. Any part of any installation which has been covered prior to approval shall be uncovered, if necessary upon the direction of the Department.

Date: 11/21/05 **Issued by:** _____
Environmental Health Specialist

Date: Nov. 21, 2005 **Reviewed by:** _____
Environmental Health Supervisor

This Construction Permit Valid until 5/21/07

Record of Inspection - Private Water Supply System

Commonwealth of Virginia
Department of Health

Health Department
I.D. Number 129-06-0377

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

Date 7/1/2005 Local Health Department FAIRFAX COUNTY

Owner SUMEET CHIBBER Address 1694 SIERRA WOODS CT RESTON VA 20194 Phone (202) 320-6193

Exact Location of Premises 218 DONMORE DRIVE GREAT FALLS VA 22066

Subdivision SENECA FARMS Section/Block 3 Lot 46

Class of nonpublic drinking water well.
1) Class III A ____
2) Class III B ✓
3) Class III C ____
4) Other ____

Date of installation 12/15/05

Runyan Well D. Inc

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 10' 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 300 feet. Type of casing Steel
   Depth of casing 82 feet. Diameter of casing 6 inches.
   Casing extends inches above ground 12". Exterior space sealed with neat cement grout to a depth of 70 feet. Screens constructed of N/A
   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 watertight 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 2 hours. Drawdown N/A feet. Yield 15 GPM. Type of storage equal V100.
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: O-65 OBSERVED
@ 300 GALLONS CHECK

Date 5/22/06 Signed ____ Sanitarian

Date 5/22/2006 Signed John M. Mc Supervisory Sanitarian

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

C.H.S. 204 Revised 9/90

File 1391

ENVIRONMENTAL SERVICES SECTION
FOLLOW-UP REPORT

Tax Map: 2 - 2 / 10021 / — / 145
(Map / Grid / Sub / Block / Lot)

Subdivision: Seneca Farms Sec. 3

Owner's Name: Sumeet Chibber

Street Address: 2118 Donmore Dr.

City, State, Zip: Great Falls VA 22066

Phone #:

DATE	COMMENTS	RESCH DATE	INITIALS
04/13/06	cont... WSS FG, Bedroom count, GWZ, WS and		
	letter (see notes 03/02/06).	Hold	SM/HP
5/9/06	WSS satis. WS [illegible] FG satisfactory.		
	BR letter not needed for ornamental doorway		[illegible]
	(w) [illegible] of line. 4 BR's verified. OK	Hold	
	to approve SDS. Hold for WS results.		[illegible]
5/22/06	WS satis. OK to approve WSS.	File-C	[illegible]

REV. 10-90
FHD-EH-6

PERMIT NUMBER **129-05-0377** TAX MAP NUMBER # **2-2-002-45**

WATER SUPPLY INSPECTION REPORT

WELL INSTALLED BY Runyon **PUMP INSTALLED BY** Runyon

GROUT INSPECTED 1/11/06 DATE ____ EHS

PIPE & ELECTRIC WIRE FROM WELL TO STORAGE TANK APPROVED 04/13/06 DATE NP EHS

TYPE OF INSTALLATION:

✓ PITLESS ADAPTER ____ PIT (4"DRAIN) ____ SURFACE (DRAIN) 04/13/06 DATE HP EHS

STORAGE TANK: Goulds V100 04/13/06 DATE NP EHS

Gate Valve ✓ Check Valve ____ Sample Tap & Backflow Preventer ✓ Elec. Dis. Switch ✓ Pressure Relief Valve ____

WATER SAMPLE COLLECTED pressure check ✓ 5/9/06 DATE ✓ EHS

DATE	RECORD OF ADDITIONAL REMARKS OR VISITS	STATUS	EHS INITIAL

SEWAGE DISPOSAL SYSTEM INSPECTION REPORT

DATE	RECORD OF ADDITIONAL REMARKS OR VISITS	STATUS	EHS INITIAL
11/2/05	Met Eric Pilka onsite. Proposed drainfield area appears		
	satisfactory. OK to issue permit. Requested well ✓.	Hold	SM
11/21/05	Permit issued. Well ✓ received.	Hold	SM
3/2/06	Met Trip RRR onsite. SDS ok to BF. Hold for		
	FG, BR count, etc Requested letter from owner		
	to keep dogwood @ distal end of lines (8½').	Hold	SM
4/12/06	FG somewhat rough, but OK		
	to approve. Still need letter (see 3/2/06)		
	note prior to approval	HOLD	CE
04/13/06	Pitless inspected-ok. Hold for (cont.)		

FHD-EH-13

Form GW-2
1978-10,000

COMMONWEALTH OF VIRGINIA

WATER WELL COMPLETION REPORT

• BWCM No. _____

(Certification of Completion/County Permit)

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

SWCB Permit _____
County Permit _____
Certification of inspecting official.
This well does ____ does not ____ meet code/low requirements.
S: _____
Date _____
For Office Use

County/City Fairfax 218 Donmore Dr.
County/City Stamp

• Virginia Plane Coordinates
_____ N
_____ E
Latitude & Longitude
_____ N
_____ W
• Topo. Map No. _____
• Elevation _____ ft.
• Formation _____
• Lithology _____
• River Basin _____
• Province _____
• Type Logs Driller
• Cuttings _____
• Water Analysis _____
• Aquifer Test _____

• Owner Sumeet Chibber
• Well Designation or Number 129- 05-0377
Address 1894 Sierra Wood Ct. Reston, Va.
Phone _____

• Drilling Contractor Runyon Well Drilling & Pump Corp.
Address P.O.Box 1726 Leesburg, Va. 20177
Phone 777-2270

Tax Map I.D. No. 2-2-002-45
Subdivision _____
Section _____
Block _____
Lot 45
Class Well: I ____ IIA ____ IIB ____ IIIA ____ IIIB X IIIC ____ IIID ____ IIIE ____

WELL LOCATION: _____ (feet/miles _____ direction) of _____ and _____ feet/miles _____ (direction) of 218 Donmore Dr. Great Falls, Va.
(If possible please include map showing location marked)

Date started 12/11/05 • Date completed 12/28/05 Type rig Air Rotary

1. WELL DATA. New X Reworked ____ Deepened ____
• Total depth 300 ft
• Depth to bedrock 65 ft.
• Hole size (Also include reamed zones)
• 10 inches from 0 to 82 ft.
• 6 1/8 inches from 82 to 300 ft.
• ____ inches from ____ to ____ ft.
• Casing size (I.D.) and material
• 6 5/8 inches from +2 to 82 ft.
Material Steel
Wt. per foot #13 or wall thickness .188 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 70 ft., Type Grout
• From ____ to ____ ft., Type ____

2. WATER DATA • Water temperature ____ °F
• Static water level (unpumped level measured) 30 ft.
• Stabilized measured pumping water level ____ ft.
• Stabilized yield 15 gpm after 2 hours
Natural Flow: Yes ____ No X, flow rate ____ gpm
Comment on quality Clear

3. WATER ZONES: From 128 To 129
From 223 To 224, 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 SubGoulds • Rated H.P 1½ 10GS15412
• Intake depth 280 • Capacity 14GPM at 418.6 head

6. WELLHEAD: Type well seal Pitless Adaptor
Pressure tank V100 gal., Loc. Basement
Sample tap X, Measurement port ____
Well vent X, Pressure relief valve X
Gate valve X, Check valve (when required) X
Electrical disconnect switch on power supply X

7. DISINFECTION: Well disinfected X yes ____ no
Date 4/10/06, Disinfectant used HTH
Amount 01 oz., Hours used ____

8. ABANDONMENT (where applicable) • yes ____ no ____
Casing pulled yes ____ no ____ not applicable ____
Plugging grout From ____ to ____ material ____

5/9/06

OVER

Owner Chibber,S

BWCM No. 1

9. State law requires submitting to the Virginia State Water Control Board information about groundwater and wells for every well made in the State intended for water, or any other non-exempt well. This information must be submitted whether the well is completed, on standby, or abandoned. Information required includes: an accurately and completely prepared water well completion report, full data from any aquifer pumping tests, drill cuttings taken at ten foot intervals (unless exemption is secured), the results of any chemical analyses, and copies of any geophysical logs. Quarterly pumpage and use reports are required from owners of public supply and industrial wells. County or State permits to drill may be required in some parts of the state. Some counties require submission of a water well completion report. The Virginia State Health Department requires a water well completion report for public supply wells.

718 DONMORE DRIVE

10 DRILLERS LOG (use additional Sheets if necessary)

DEPTH (feet) From	To	TYPE OF ROCK OR SOIL (color, material, fossils, hardness, etc.)	REMARKS (water, caving, cavities, broken, core, shot, (etc.)	11. Drilling Time (Min.)	12. DIAGRAM OF WELL CONSTRUCTION (with dimensions)
	65	Overburden			
65	300	Bluestone & Quartz	Backfilled 82' to 70'		

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.

14. WATER SERVICE PIPE: Checked under _____ P.S.I. for _____ minutes. Pipe size 1 inches, Material 160 lb. Poly Pipe
Installer Runyon Well Drilling & Pump Corp.
Date 4/10/06 P.E. is continuous no splices elec wire 10-3w/g uf cable is continuous without underground splices.

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 _____ (Well driller or authorized person) (Stamp) Date 5/3/06

License No. 1733

State Water Control Board Regional Offices

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
3312 Peters Creek Road
Roanoke, Va. 24019
982-7432

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

RECEIVED JUN 13 2005

FAIRFAX COUNTY HEALTH DEPARTMENT

PERMIT APPLICATION

MARK ALL APPLICABLE BOXES:

(✓) NEW CONSTRUCTION ( ) SEWAGE DISPOSAL SYSTEM PERMIT ( ) INDIVIDUAL WELL WATER SUPPLY PERMIT
( ) ADDITION/REMODELING ( ) WELL ABANDONMENT ( ) SEWAGE DISPOSAL SYSTEM EXPANSION

TO BE COMPLETED BY THE APPLICANT PLEASE PRINT CLEARLY

OWNER Sumeet Chibber ADDRESS 1694 Sierra Woods Court PHONE 202-320-6193
Reston, VA 20194 ZIP VA 20194

AGENT _____ ADDRESS _____ PHONE _____
_____ ZIP _____

SUBDIVISION Seneca Farms SECTION 3 BLOCK _____ LOT 45

PROPERTY ADDRESS 218 Donmore Drive TAX MAP 2-2-002-45
Great Falls, VA 22066

( ) RESIDENTIAL
Sewage: (✓) Septic Tank ( ) Public ( ) Other _____ ( ) Basement - Plumbing in Basement ( ) Yes ( ) No
Number of Potential Bedrooms _____

Water: (✓) Well ( ) Public ( ) Other _____

( ) COMMERCIAL
Sewage: ( ) Septic Tank ( ) Public ( ) Other _____ Estimated Number of Patrons _____ Number of Employees _____
Estimated Daily Water Usage _____ Gallons

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

SEP

DESCRIBE ADDITION/REMODELING: Revised location of septic, which has now been moved to the approved area. Resubmitting for permit.

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 Sona Sharma-Chibber PRINT NAME Sona Sharma-Chibber

DATE 6/15/05 (✓) OWNER ( ) AGENT

REGISTERED

For Department Use Only HD:ID:NO: 189-05-0377

Date Lot Approved: 1/9/76 Type System I Design for 5 Bedrooms or 250 Gallons per Day

Perc Rate 10 Depth 50 Septic Tank Gallons 1500 Absorption Field 450 (Lin. Ft.) Reserve Area 225 (Lin. Ft.)

Building Permit Number 05199B0350 Receipt Number _____

Remarks Approved SEP

REVIEWED BY Jones TITLE EHS III DATE 7/1/05

FHD-EH-2 REV. 9/96

Resubmission

THE FOLLOWING INFORMATION IS REQUIRED FOR A COMPLETE SUBMISSION PACKAGE:

Grading Only Plans:

___ 9 copies of the site/grading plan
___ Special "Grading Only" Notice on each copy

First Submission of Site/Grading Plans for Building Permit

___ 9 copies of site/grading plan
___ 1 copy of site/grading plan on 11" x 17" sheet
___ 2 copies of pump plans or hydraulic designs (if required for design)

Revisions To Site/Grading Plans

Resubmission

V 9 copies of site/grading plan
✓ 1 copy of site/grading plan on 11" x 17" sheet
Ø 2 copies of pump plans or hydraulic designs (if changes to design are made)

Building Additions and Pool Reviews (with less than 2500 ft^2 site disturbance)

___ Fairfax County Building Permit Application
___ 2 copies of site plan (1:50 scale minimum)
___ 1 copy of architectural plans

Building Additions and Pool Reviews (with 2500 ft^2 or greater site disturbance)

___ Fairfax County Building Permit Application
___ 9 copies of site/grading plans
___ 1 copy of architectural plans

The information required for the complete submission package has been provided to the Health Department for review

Shara Shama-Chibber
(signature of owner or agent)

10/15/05
(date)

13

14 SENECA FARMS 15

16

18

44A

S 46°14'41" E 640.00'

LOT 45
219,126 SF
5.0304 AC

131.3'

278.3'

S 27°15'07" W 384.36'

N 13°06'26" W 432.41'

195.8'

162.9'

52.3'
18.4'
2.0'
47.8'
2.3'
9.1'
7.1'
9.0'
4.9'
19.7'
1.6'
13.4'
12.4'
1.6'
13.6'
9.3'
12.6'
11.2'

BUILDING
UNDER
CONSTRUCTION

TRUE NORTH

25' INGRESS-
EGRESS EASEMENT
DB.4382 PG. 727

A=298.43'
R=1191.59'

A=117.27'
R=417.38'

N 40°48'36" W 115.00'

DONMORE DRIVE
(50' WIDE)

+/- 2,750' TO C/L OF
SENECA ROAD
PER AVAILABLE
INFORMATION

NOTES:

1) THIS PROPERTY IS LOCATED IN FLOOD ZONE "X" (AREAS OF MINIMAL FLOODING). THIS STATEMENT IS FOR INFORMATION ONLY AND THE SURVEYOR ASSUMES NO LIABILITY FOR THE CORRECTNESS OF THE CITED ZONE. IN ADDITION, IT DOES NOT REPRESENT THE SURVEYOR'S OPINION OF THE PROBABILITY OF FLOODING.
2) CORNER MONUMENTATION NOT SET AS PART OF THIS SURVEY IN ACCORDANCE WITH 54.1-407(i) OF THE CODE OF VIRGINIA.
3) THE LAND BOUNDARIES AND EASEMENTS SHOWN HEREON, UNLESS OTHERWISE NOTED, ARE BASED ON THE RECORDED SUBDIVISION PLAT; THEREFORE, ALL ENCUMBRANCES ARE NOT NECESSARILY SHOWN HEREON.

GRAPHIC SCALE

50 0 25 50 100 200

(IN FEET)
1 inch = 50 ft.

COMMONWEALTH OF VIRGINIA
H. CHRISTOPHER HUGHES
No. 002414
11-06-05
LAND SURVEYOR

Huntley, Nyce & Associates, Ltd.
SURVEYING • CIVIL ENGINEERING • LAND PLANNING
Chantilly • (703) 750-3490*
14428 ALBEMARLE POINT PLACE
SUITE 120
CHANTILLY, VIRGINIA 20151
FAX:703-378-5899
Arlington • (703) 532-4924
Leesburg • (703) 779-4905
Warrenton • (540) 347-2100

NO TITLE REPORT FURNISHED
PHYSICAL IMPROVEMENTS SURVEY
LOT 45 SEC. 3

SENECA FARMS

DRANESVILLE DISTRICT
FAIRFAX COUNTY, VIRGINIA

SCALE: 1" = 50'
DATE: 11-06-05
REVISIONS

SHEET 1 OF 1
FILE NO. F-3674

BUILDING PERMIT APPLICATION

FAIRFAX COUNTY OFFICE OF BUILDING CODE SERVICES
PERMIT APPLICATION CENTER
12055 Government Center Parkway, 2nd Floor
Fairfax, Virginia 22035-5504
Telephone: 703-222-0801
Web site: www.fairfaxcounty.gov/dpwes

PERMIT # 5199B0350

FOR INSPECTIONS CALL 703-222-0455 (see back for more information)

DO NOT WRITE IN GRAY SPACES - COUNTY USE ONLY
PLAN # R-05-01129
TAX MAP # 002-2-((2))-0045

ROUTING	DATE	APPROVED BY
LICENSING	9-13-05	
ZONING		
SITE PERMITS		
HEALTH DEPT.	9/6/05	
BUILDING REVIEW		
SANITATION		
FIRE MARSHAL		
ASBESTOS		
PROFFERS		

FILL IN ALL APPROPRIATE INFORMATION IN THIS COLUMN
(PLEASE PRINT OR TYPE)

JOB LOCATION
ADDRESS 218 DONMORE DRIVE
LOT # 45 BUILDING
FLOOR SUITE
SUBDIVISION SENECA FARMS, SEC 3
TENANT'S NAME

OWNER INFORMATION OWNER ☐ TENANT ☐
NAME CHHIBBER, SUMEET
ADDRESS 1694 SIERRA WOODS COURT
CITY RESTON STATE VA ZIP 20194
TELEPHONE

CONTRACTOR INFORMATION SAME AS OWNER ☐
CONTRACTORS MUST PROVIDE THE FOLLOWING:
COMPANY NAME OAKMONT HOMES
ADDRESS 178 RIVER PARK DRIVE
CITY GREAT FALLS STATE VA ZIP 22066
TELEPHONE 703-759-6737
STATE CONTRACTORS LICENSE # 03 7900A
COUNTY BPOL # 24-6741

APPLICANT KIM HARRIS

DESCRIPTION OF WORK
unfinish basement
CUSTOM W/WET BAR

HOUSE TYPE SFD
ESTIMATED COST OF CONSTRUCTION 350,000
BLDG AREA (SQ FT OF FOOTPRINT)
USE GROUP OF BUILDING R5
TYPE OF CONSTRUCTION VB
SEWER SERVICE PUBLIC ☐ SEPTIC ☒ OTHER ☐
WATER SERVICE PUBLIC ☐ WELL ☒ OTHER ☐
OTHER PLEASE SPECIFY

DESIGNATED MECHANICS' LIEN AGENT
(Residential Construction Only) TBS
NAME
ADDRESS
NONE DESIGNATED ☐ PHONE

CHARACTERISTICS FOR NEW SFD, TH, APT & CONDOS

# KITCHENS	1	EXTER. WALLS	AB
# BATHS	4	INTER. WALLS	DW
# HALF BATHS	1	ROOF MATERIAL	AS
# BEDROOMS	5	FLOOR MATERIAL	CP
# OF ROOMS	12	FIN. BASEMENT	0%
# STORIES	2	HEATING FUEL	EE
BUILDING HEIGHT	32'	HEATING SYSTEM	HP
BUILDING AREA		# FIREPLACES	1
BASEMENT	BF		

FEE $ 620.28
FILING FEE - $ 310.14 PAID IN FULL
AMOUNT DUE = $

BUILDING PLAN REVIEW
REVIEWER # OF HOURS
REVISION FEES $
FIRE MARSHAL FEES $
FIXTURE UNITS PLAN LOC: J ☐ R ☐

APPROVED FOR ISSUANCE OF BUILDING PERMIT
(LOG OUT)
BY DATE

ZONING REVIEW
USE SFD
ZONING DISTRICT RE HISTORICAL DISTRICT
ZONING CASE #
GROSS FLOOR AREA OF TENANT SPACE

YARDS:	
FRONT	
FRONT	
L SIDE	
R SIDE	
REAR	

GARAGE 1 ☐ 2 ☐ 3 ☒
OPTIONS YES ☐ NO ☐
REMARKS

GRADING AND DRAINAGE REVIEW
SOILS # A ☐ B ☐ C ☐
AREA TO BE DISTURBED (TOTAL SQ FT THIS PERMIT)
IMPERVIOUS AREA (TOTAL SQ FT THIS PERMIT)
PLAN # INF APPR. DATE

STAMPS
(See reverse side of application)

REMARKS
10,338 SF

Any and all information and/or stamps on the reverse side of this form are a part of this application and must be complied with. I hereby certify that I have authority of the owner to make this application, that the information is complete and correct, and that the construction and/or use will conform to the building code, the zoning ordinance and other applicable laws and regulations which relate to the property.

Signature of Owner or Agent — Date 7/18/05

S. MILLER, AA
Printed Name and Title

(Notarization of signature is required if owner is listed as the contractor and is not present at time of application)

NOTARIZATION (if required)
State (or territory or district) of _____,
County (or city) of _____, to wit: I, _____, a
Notary Public in the State and County aforesaid, do certify that _____
whose name is signed to this application, appeared before me in the State and County aforesaid and executed this affidavit.
Given under my hand this _____ day of _____, 20_____. My commission expires the _____ day of _____, 20_____.

(Notary Signature)

SENECA FARMS

13
AREY PETER W, AREY LORETTA K
PARCEL ID 0022 02 0013
USE: SINGLE FAMILY
ZONE: R-E

14
MAHMOOD RAJA TARIQ
PARCEL ID 0022 02 0014
USE: SINGLE FAMILY
ZONE: R-E

15
BAKSHI RAMESH K, AND REETA
PARCEL ID 0022 02 0015
USE: SINGLE FAMILY
ZONE: R-E

16
DICE JACK W, AND MARGA T
PARCEL ID 0022 02 0016
USE: SINGLE FAMILY
ZONE: R-E

N 46°14'41" E 640.00'

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 existing or proposed underground utility lines and easements must be located a minimum of 10 feet from all subsurface disposal systems. No subsurface disposal systems may be in an underground utility easement. All water service lines must be located a minimum of 10 feet from all subsurface disposal systems.

7/1/05 — Date
Health Official

See all notes on approved SGP

44A
CROSSLAND STANLEY G TR
PARCEL ID 0022 02 0044A
USE: VACANT
ZONE: R-E

N 27°15'07" W 384.36'

LOT 45
219,126 SF
5.0304 AC

131.2'

LIMITS OF CLEARING AND GRADING

3 CAR GAR.
357.80

FF 359.92
B 349.90
#218

SAVE TREE

1500 GAL. TANK
INV. IN= 354.30
INV. OUT= 354.40

INV.OUT 355.23

PATIO

F.D.

DOMESTIC SERVICE LINE

SLEEVE

PROP. WATER WELL

FDV INV 353.50

IE 53.40
IE 52.90
IE 52.00
IE 51.40
IE 53.17
IE 52.57
IE 51.77
IE 51.17

RESERVE

186.0'

18
REIMERS JEAN D, CHAMBERLAIN JOHN
PARCEL ID 0022 02 0018
USE: SINGLE FAMILY
ZONE: R-E

N 13°06'26" W 432.41'

50' INGRESS-EGRESS EASEMENT
DB. 4382 - PG. 727

INV.=341.00

INV.=341.70

PROVIDE STD. DE-5 ENTRANCE WITH 1-35"-17"x14" CMP @ 2.0% SLOPE

S 40°48'36" W 115.00

DONMORE DR

50' INGRESS-EGRESS EASEMENT
DB. 4382 - PG. 727

GRAPHIC SCALE

SEPTIC FIELD DATA
10 RATE @ 50"-5 BR.
5 BR. x 90=450'
6 LINES @ 75'=450'
4 LINES RESERVE @ 75'=300'

COMMONWEALTH OF VIRGINIA
CHARLES J. HUNTLEY
CERTIFICATE NO.
968B
6-13-05
LAND SURVEYOR

HEALTH DEPARTMENT COPY

SENECA FARMS

13
AREY PETER W, AREY LORETTA K
PARCEL ID 0022 02 0013
USE: SINGLE FAMILY
ZONE: R-E

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MAHMOOD RAJA TARIQ
PARCEL ID 0022 02 0014
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PARCEL ID 0022 02 0015
USE: SINGLE FAMILY
ZONE: R-E

16
DICE JACK W, AND MARGA T
PARCEL ID 0022 02 0016
USE: SINGLE FAMILY
ZONE: R-E

N 46°14'41" E 640.00'

44A
CROSSLAND STANLEY G TR
PARCEL ID 0022 02 0044A
USE: VACANT
ZONE: R-E

N 23°50'07" W 384.36'

LOT 45
219,126 SF
5.0304 AC

131.2'

LIMITS OF CLEARING AND GRADING

3 CAR GAR
357.80

FF 359.92
B 349.90
#218

INV.OUT 355.23

1500 GAL. TANK
INV. IN= 354.50
INV. OUT= 354.40

SAVE TREE

DOMESTIC SERVICE LINE

SLEEVE

PROP. WATER WELL

PATIO

FDV INV. 353.50

IE 53.40
IE 52.80
IE 52.00
IE 51.40
IE 53.17
IE 52.97
IE 51.77
IE 51.17
RESERVE
162.5'

N 13°06'26" W 432.41'

INV.=341.00

INV.=341.70

PROVIDE STD. DE-5 ENTRANCE WITH 1-35"-17"x14" CMP @ 2.0% SLOPE

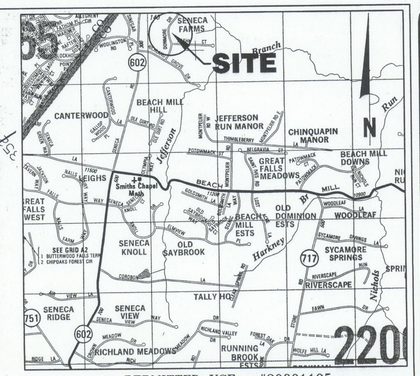
50' INGRESS-EGRESS EASEMENT DB. 4382 - PG. 727

S 40°48'36" W 115.00'

50' INGRESS-EGRESS EASEMENT DB. 4382 - PG. 727

DONMORE DR

18
REIMERS JEAN D, CHAMBERLAIN JOHN
PARCEL ID 0022 02 0018
USE: SINGLE FAMILY
ZONE: R-E



VICINITY MAP
(SCALE: 1"=2000')

PERMITTED USE: #20801195

GENERAL NOTES:

1. THE PROPERTY DELINEATED ON THIS PLAN IS LOCATED ON ASSESSMENT MAP 2-2-002-45 AND IS PRESENTLY ZONED R-E.
2. BOUNDARY AND TOPOGRAPHIC SURVEY PREPARED BY HUNTLEY, NYCE & ASSOC.LTD.
3. TOPO IS CORRELATED TO U.S.G.S. DATUM.
4. THIS LOT IS SUBJECT TO PRO-RATA SHARE PAYMENT.
5. TO THE BEST OF OUR KNOWLEDGE AND FROM INFORMATION TAKEN FROM FAIRFAX COUNTY SOILS MAP, THIS LOT IS NOT LOCATED IN AN AREA OF ASBESTOS SOILS.
6. THIS PROPERTY IS SERVED BY PRIVATE WATER AND PRIVATE SEWAGE SYSTEM.
7. THIS SITE IS NOT LOCATED WITHIN ANY R.P.A. AS PER THE "CHESAPEAKE BAY PRESERVATION AREA MAPS" PREPARED BY THE OFFICE OF COMPREHENSIVE PLANNING
8. ALL CONSTRUCTION TO CONFORM TO FAIRFAX COUNTY AND V.D.O.T. CURRENT STANDARDS AND SPECIFICATIONS.
9. EXISTING UTILITIES POLES AND OVERHEAD UTILITIES ON SITE OR IN CONSTRUCTION AREAS AFFECTING THIS DEVELOPMENT WILL BE REMOVED OR RELOCATED AT THE DEVELOPER'S EXPENSE.
10. ALL UTILITIES INSTALLED AS A PART OF THIS PROJECT SHALL BE PLACED UNDERGROUND.
11. TEST PIT REQUIRED TO DETERMINE EXACT HORIZONTAL AND VERTICAL LOCATION OF EXISTING UTILITIES CONTACT "MISS UTILITY" 1-800-257-7777, FORTY EIGHT(48) HOURS PRIOR TO EXCAVATION OR CONSTRUCTION.

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 existing or proposed underground utilities and easements must be located a minimum of 20 feet from all subsurface disposal systems. No subsurface disposal systems may be in an underground utility easement. All water service lines must be located a minimum of 10 feet from all subsurface disposal systems.
3/1/05 Date
Jones Health Official

SEPTIC FIELD DATA
10 RATE @ 50"-5 BR.
5 BR. x 90=450'
6 LINES @ 75'=450'
4 LINES RESERVE @ 75'=300'

WATERSHED: NICHOL RUN
PROPOSED DISTURBED AREA: 41,649 S.F. OR 0.9561 AC.

RESPONSE TO THE CHESAPEAKE BAY ORDINANCE
R.M.A. REQUIREMENTS (118-3-2(f)(1)

IMPERVIOUS AREA TABULATION
TOTAL LOT AREA= 219,126 S.F. OR 5.03 AC.
PROPOSED IMPERVIOUS AREA= 11,384 S.F. OR 0.2613 AC.
% IMPERVIOUS= 11,384 / 219,126 = 0.0520 (5.20 %)

CONCLUSION: DEVELOPMENT OF THIS PROJECT WILL NOT RESULT IN AN IMPERVIOUS AREA OF 18 % OR GREATER ON THE LOT.

"I HEREBY CERTIFY THAT ALL APPROPRIATE COUNTY APPROVALS WERE OBTAINED IN ACCORDANCE WITH THE PROCESS REQUIRED BY THE SUBDIVISION ORDINANCE IN EFFECT AT THE TIME OF THE CREATION OF 28 LOT(S). THE LOT(S) WAS (WERE) CREATED AS PART OF THE SENECA FARMS-SECTION 3 SUBDIVISION APPROVED BY FAIRFAX COUNTY ON 04-07-1976 AND RECORDED IN DEED BOOK 4382 AT PAGE 727 IN FAIRFAX COUNTY LAND RECORDS".

SIGNATURE Charles J. Huntley 3-15-05

WETLANDS CERTIFICATION

I HEREBY CERTIFY THAT ALL WETLANDS PERMITS REQUIRED BY LAW WILL BE OBTAINED PRIOR TO COMMENCING LAND DISTURBING ACTIVITIES.

SIGNATURE Sumeet Chhibber

OWNER/DEVELOPER SUMEET CHHIBBER OWNER
NAME TITLE

OWNER / DEVELOPER SUMEET CHHIBBER
PHONE (202) 320-6193
(703) 709-7425
FAX (703) 995-4480
1694 SIERRA WOODS COURT, RESTON, VIRGINIA 20194
ADDRESS AND ZIP CODE
CONTACT PERSON SUMEET CHHIBBER

ENGINEER OR SURVEYOR HUNTLEY, NYCE & ASSOCIATES, LTD.
PHONE (703) 750-3490
CONTACT PERSON MIGUEL MORA FAX (703) 378-5899

HEALTH DEPARTMENT COPY

GRAPHIC SCALE
30 0 15 30 60 120
(IN FEET)
1 inch = 30 ft.

LEGEND

TITLE	SYMBOL
FLOW PATH	
EX.SPOT ELEV.	318.00
PROP.SPOT ELEV.	180
LIMITS OF CLEARING AND GRADING	
PROPERTY LINE	
FOUNDATION DRAIN	
TREE LINE	

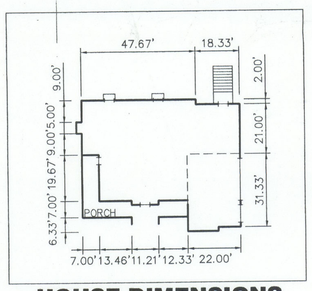
ZONED: R-E
MIN. YARD REQ'D.

FRONT	40 FT.
SIDE	20 FT
REAR	25 FT.

NOTE:
CONTRACTOR SHALL BE RESPONSIBLE FOR ADHERING TO ALL APPLICABLE STATE MINIMUM CRITERIA, STANDARDS AND SPECIFICATIONS AS OUTLINED IN CHAPTER 3, VIRGINIA EROSION AND SEDIMENT CONTROL HANDBOOK, 1992, 3RD EDITION, AND FAIRFAX COUNTY SILTATION EROSION CHECK LIST.

✳ RETAINING WALLS 2' (TWO FEET) OR HIGHER SEPARATE BUILDING PERMIT REQUIRED

C-BAY PRESERVATION-NOTE
THIS PLAN FULLY COMPLIES WITH THE AMENDED ORDINANCE TO THE CHESAPEAKE BAY PRESERVATION.
DATED: NOVEMBER/18/2003.



HOUSE DIMENSIONS
(SCALE: 1"=30')

BUILDING LEVELS	SQUARE FEET OF LIVING SPACE
BASEMENT	2,074 S.F.
FIRST FLOOR	2,080 S.F.
SECOND FLOOR	1,866 S.F.
OTHER	
TOTAL =	6,020 S.F.

UNIFORM PRO RATA SHARE ASSESSMENT ANALYSIS

SENECA FARMS
SITE NAME DATE

SITE LOCATION IS WITHIN THE NICHOL RUN DRAINAGE SHED (S)
PRO RATA SHARE ASSESSMENT IS REQUIRED FOR INCREASED IMPERVIOUS AREA FROM THE SITE DUE TO DEVELOPMENT.
IMPERVIOUS ACREAGE ASSESSMENT RATE ($) PER IMPERVIOUS ACRE INCREASE.

APPLICABLE PRO RATA SHARE ASSESSMENT IS COMPUTED FORM SPECIFIC INCREASE IN IMPERVIOUS ACRES OF THE DEVELOPED SITE.
IMPERVIOUS ACREAGE ASSESSMENT AMOUNT $ (RATE X INCREASE IN IMPERVIOUS ACRES)
INCREASE IN IMPERVIOUS ACRES ACRES
TOTAL ASSESSMENT AMOUNT $ DUE

PRO RATA SHARE REVIEWER DATE

NOTE:
PRO RATA SHARE ASSESSMENT RATES ARE SUBJECT TO ADJUSTMENT IN ACCORDANCE WITH ARTICLE 2, SECTION 2-604, FAIRFAX COUNTY ZONING ORDINANCE.
NEXT ADJUSTMENT DATE
COMMENTS:

IMPERVIOUS ACREAGE ANALYSIS

	DEVELOPMENT LEVEL		IMPERVIOUS ACREAGE COMPUTATIONS	
	PRE	POST	PRE	POST
SITE AREA IN ACRES	A	A	5.03	5.03
COMPOSITE RATIONAL C FACTOR	C1	C2	0.30	0.41
FRACTIONAL IMPERVIOUSNESS	I1	I2	0.103	0.224
TOTAL IMPERVIOUSNESS ACRES	A x I1	A x I2	0.5181	1.1267
INCREASE IN IMPERVIOUS ACRES	(A x I2) - (A x I1)		0.6086	

Huntley, Nyce & Associates, Ltd.
LAND PLANNING
SURVEYING • CIVIL ENGINEERING
Chantilly * (703) 750-3490
SUITE 120 13135 LEE JACKSON MEMORIAL HIGHWAY
CHANTILLY, VIRGINIA 20151
FAX 703-378-5899
Arlington * (703) 532-4924
Leesburg * (703) 779-4905
Warrenton * (540) 347-2100

COMMONWEALTH OF VIRGINIA
CHARLES J. HUNTLEY
CERTIFICATE NO. 0808
3-15-05

SENECA FARMS
LOT 45, SECTION 3
DRANESVILLE DISTRICT
FAIRFAX COUNTY, VIRGINIA
GRADING PLAN

SCALE: 1"=30'
DATE: 03/14/05
REVISIONS:

SHEET 1 OF 4
FILE NO. GP-3674