

RECORD OF INSPECTION SEWAGE DISPOSAL SYSTEM

30A6 (C10) 2

Date 10/10/77 Case No. 5729

Owner Harford Riegler Address 1835 Howard Ave Phone _____
(Mailing Address)

Occupant _____ Address _____ Phone _____
(Mailing Address)

Exact Location of Premises Lot 2 Broadwater Court - Chincoteague
(Subdivision, Street or Road Name, Section or Lot No.)

WATER SUPPLY INSPECTION

Installed according to Permit Design ☐ Yes ☐ No. Distance to nearest House Sewer Down 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 _____ feet. Trees _____ feet. Water Supplies _____ feet. Buildings _____ 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 sch 40 Size 40 Inches.

(5) SEPTIC TANK

Constructed of Concrete (Kind of Material) Inside Dimensions Length 7 feet. Width 3 1/2 feet. Liquid Depth 4 feet. Depth of Air Space 12 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 3 (Number) extra outlets for future use.

(7) SUBSURFACE ABSORPTION FIELD

Total Area in bottom of ditches 400 square feet. Number of ditches 4 Length of ditches 50 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 lag Depth of aggregate under Tile 6 inches Total depth of aggregate 13 inches Depth of backfill over aggregate 12 inches

(8) SURFACE DRAINAGE

Storm Drains from House and Basement flowing away from Subsurface Drainage Field: ☒ Yes ☐ No. Was Surface Drainage required ☐ Yes ☒ No. If Yes, has this been provided ☐ Yes ☐ No. Has area been drained by lowering Ground Water Table: ☐ Yes ☐ No. ☒ Not required.

(9) Are follow-up inspections necessary ☐ Yes ☒ No.

Septic Tank Contractor: Blake & Co Address Greenbush Rd Phone 787-4075

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

Date 10/10/77 Signed Don Turner (Sanitarian)

Date _____ Approved _____ (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: _____

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 7/22/77 Case No. _____

Owner Harford Ringler Address 1835 Howard Ave Phone _____
 (Mailing Address)

Occupant Same Address Hagerstown Md Phone _____
 (Mailing Address)

Exact Location of premises Lot 2 Cerule Creek Broadwater tract Chincoteague
 (Subdivision, Street or Road Name, Section or Lot No.)

FOR: ☐ Dwelling ☐ Other Trailer Automatic Washing Machine ☒ Yes ☐ No Consumption 400 gal. per day
 Actual ☐ Potential ☐ Bedrooms 2 Garbage Disposal Unit ☐ Yes ☒ No (☐ Actual ☒ estimated Water)
 Additional wastes _____

(1) WATER SUPPLY (Existing) Class _____ Approved ☐ Yes ☐ No Other Town
 (To be installed) Class _____ Cased _____ ft. to be grouted _____ ft.

(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 _____
 (Minutes per inch) (Minutes per inch to nearest 10 minutes)
 Depth to Grey Mottles 48" inches (estimate over 4 ft.) OTHER _____
 Surface drainage required ☐ Yes ☒ No OTHER DRAINAGE _____

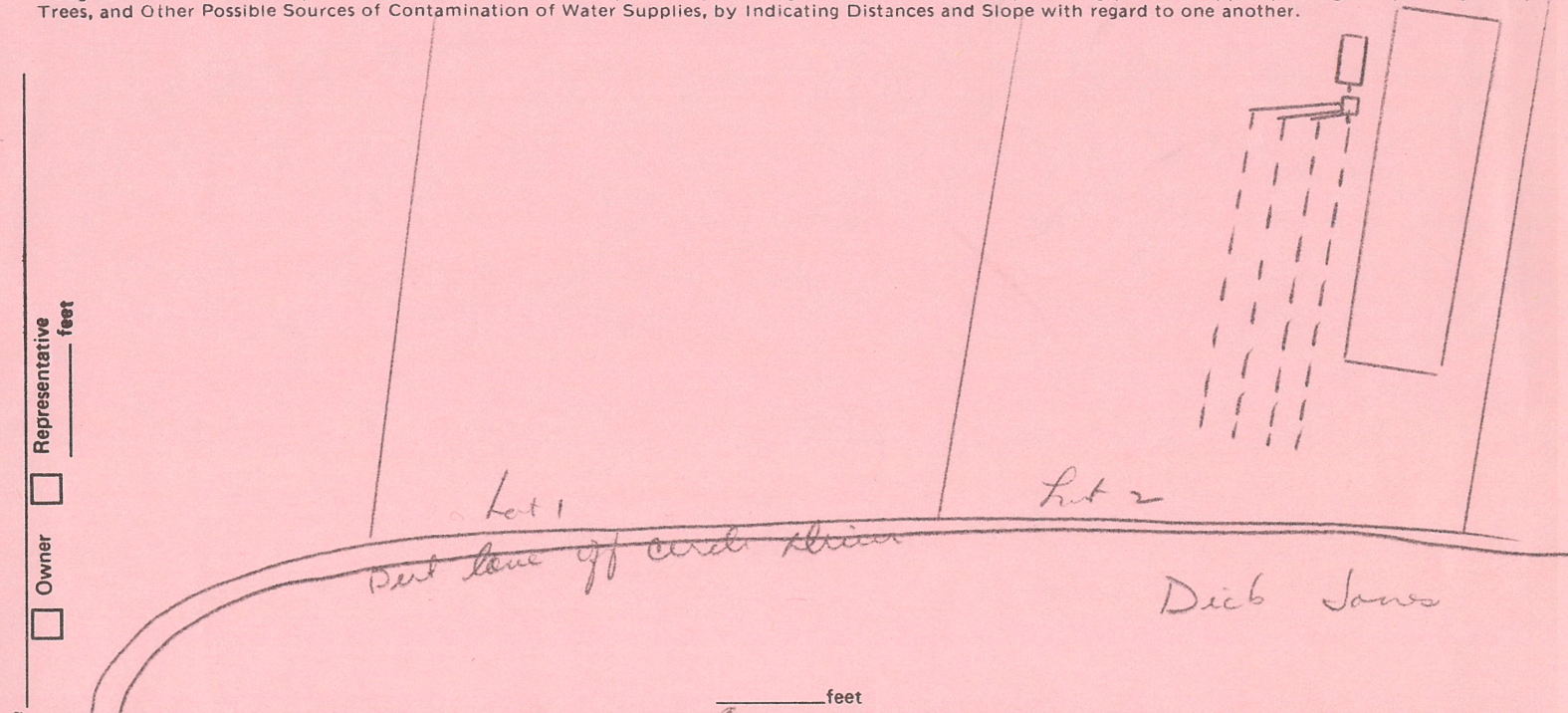
(3) HOUSE SEWER LINE Size 4 inches. Type of material required 4" 40 Distance from Water Supply _____ feet.

(4) DETAILS OF CONSTRUCTION Watertight Septic Tank of Concrete Material Liquid Capacity 750 gallons.
 Inside Dimensions Length 7 feet. Width 3 1/2 feet. Liquid Depth 4 feet. Depth of Air Space 1 feet.

SUBSURFACE ABSORPTION FIELD Number of square feet required 400 Type aggregate required Flag

(5) Depth of aggregate from base of tile to bottom of ditches 6 inches. Allowable fall 2 to 4 inches.
 Total aggregate minimum depth 18 inches or more. Depth of drainfield to be 18 inches from surface of original ground.
 Distance from well to septic tank _____ feet; distance from well to drainfield _____ 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.



Signature _____ Representative _____ Owner _____
 Note: Owner or his agent must notify Accomack Health Department, Phone 824-5022 when Installation is ready for inspection. If any Sewage Disposal System, or part thereof, is covered before being inspected by the Health Department, it shall be uncovered at the direction of the Health Director or his agent. CONDITIONS DISCOVERED DURING INSTALLATION MAY REQUIRE ADJUSTMENTS OF SYSTEM DESIGN. Changes from above specifications require Health Department approval before being made.

Based on the above information, the undersigned recommends that this permit be issued.
 Date _____ Approved _____ (Reviewing Authority) Date 7/22/77 Signed Don Garner (Sanitarian or Health Director)