

FRANKLIN COUNTY  
SPECIAL USE PERMIT APPLICATION

(Type or Print)

I/We, RACHEL LOVE & KYLE WALTER as Owner(s), Contract Purchasers, or Owner's Authorized Agent of the property described below, hereby apply to the Franklin County Board of Supervisors for a special use permit on the property as described below:

Petitioner's Name: RACHEL LOVE & KYLE WALTER

Petitioner's Address: 1037 Shadow Peak Rd., FOREST, VA 24551

Petitioner's Phone Number: 434-851-0223 (RACHEL) , 434-851-1987 (KYLE)

Petitioner's E-mail: RACHELSWALTER @GMAIL.COM

Property Owner's Name: SAME AS ABOVE

Property Owner's Address: "

Property Owner's Phone Number: "

Property Owner's E-mail: "

Directions to Property from Rocky Mount: TAKE 40 to 122 then left on Morewood Rd.

Tax Map and Parcel Number: 0150600300

Magisterial District: \_\_\_\_\_

Property Information:

A. Size 0.72 Acres of Property:

B. Existing Zoning: A1

C. Existing Residential Land Use:

D. Is property located within any of the following overlay zoning districts:

Corridor District  Westlake Overlay District  Smith Mountain Lake Surface District

E. Is any land submerged under water or part of a lake? Yes No If yes, explain.

Proposed Special Use Permit Information:

A. Proposed short-term rental Land Use:

B. Size of Proposed Use: 0.72 Acres /current size

C. Other Details of Proposed Use: Request is to utilize the current property as-is as a short-term rental to include use of the dock.

**Checklist for completed items:**

- Application Form
- Letter of Application
- Concept Plan
- Application Fee

**\*\*I certify that this application for a special use permit and the information submitted herein is correct and accurate.**

Petitioner's Name (Print): RACHEL LORE

Signature of Petitioner: 

Date: 12/13/2022

Mailing Address: 1037 Shadac Peak, Rd.

Forest, VA 24551

Telephone: 434-881-0223

Email Address: RachelSwalter@gmail.com

Owner's consent, if petitioner is not property owner:

Signature of Owner: \_\_\_\_\_

Date: \_\_\_\_\_

ning Staff \_\_\_\_\_

**Date Received by Planning Staff** \_\_\_\_\_

**Clerk's Initials:** \_\_\_\_\_

**CHECK#:** \_\_\_\_\_

**AMOUNT:** \_\_\_\_\_

MISSOURI

December 20, 2022

Rachel Love  
Special Use Permit Applicant  
1037 Shadow Peak Rd.  
Forest, VA 24551

Lisa Cooper  
Director of Planning  
Development Services  
1255 Franklin Street, Suite 103  
Rocky Mount, VA 24151

**Subject: Letter of Application for Special Use Permit for Short Term Rental**

Dear Ms. Cooper,

This letter serves as our letter of application for a Special Use Permit in order to utilize our property located at **1970 Morewood Rd., Hardy, VA, 24101** as a short-term rental. We purchased the home in May of this year and the home was in poor condition. We are currently investing in repairs to the home to ensure it will be in great condition in early 2023. We have replaced the roof, installed new gutters, installed new flooring, and replaced a heat pump and will be working from January through March to update all the bathrooms and other areas of the home.

The home is approximately 3900 sqft and has four (4) bedrooms and three and a half (3.5) bathrooms. The home septic tank holds 1000 gallons and is rated for three (3) bedrooms (i.e. six (6) person capacity limit). We have had the septic and pump-back system inspected and pumped in September 2022. We have attached the inspection report with the application. The home is located on approximately three (3) quarters of an acre with a private driveway. The home has private off-street parking for three (3) to four (4) vehicles and is located off of a public road.

My husband and I have owned and operated two short-term rental properties through Airbnb. One home located in Moneta, VA on Smith Mountain Lake and a second in Lynchburg, VA. We recently sold the home in Lynchburg, VA to purchase this home in Hardy, VA. We operated the home in Lynchburg from 2018 till early 2022 and have been operating the home in Moneta, VA since mid-2020. All of our rentals have been registered and followed local ordinances and rules.

We will provide specific guidance to our renters on where parking is allowed and not allowed. We will also mark key areas designating where our well head and drain field is location to ensure the property is protected. We also clearly define local laws, noise ordinances, and particular rules for our neighborhood in our home rules that must be accepted and agreed to before bookings are allowed. We clearly stipulate that any breaking of the rules will result in immediate termination of their stay.

The home is located directly on the lake with a private dock. The dock has a boat lift, upper deck, and a large floating dock. The Renters will have access to the dock, upper deck, and floater for personal use. At this time, we do not intend to allow renters the use of the boat lift but may in the future. We replaced the existing boat lift with a brand new one in June of this year as the old one had significant wear. Our dock is located in a wider cove with large distance between docks, as can be seen on the concept plan.

Renters will have access to the entire home with the exception of the garage, utility areas, and locked owner areas. We use smart locks/keypads for access to these areas if there is any emergent issue that would require them access. We will provide the renters access to the home through a smart lock as we found this to be the most convenient and ensures that we fully control access to the home. Each renter receives a unique access code that is only valid during their rental period.

We provide each renter a home user-guide a few days before their check-in day. We have attached examples of our guides for our other homes. We will create a similar guide for this home showing where local sites are such as grocery stores, restaurants, and any other places of interest. The home guide includes instructions on how to operate features of the home, the rules of the home and check-out instructions. We also provide additional guidance to the area if requested by the renter. We provide information based on their interests, such as hiking, shopping, wineries, or art.

We pride ourselves on our rentals being of the highest quality and focus on the homes upkeep and cleanliness. We have always been super-hosts with over 143 reviews with an average of a 4.96 rating out of 5.0. It is important to us that our guests are treated with respect as well as our neighbors. We have included in our application a letter from our next-door neighbor for our Moneta rental home. We have a wonderful relationship with all of our neighbors and ensure that our guests do not have a negative impact on their homes or properties. We provide our contact information to all our neighbors, and they can contact us day or night if there are any issues.

We live in Forest, VA which is about 50 minutes from both homes. When issues arise, we deal with them in person and come to the properties. We also have a neighbor who will assist if an issue is emergent, and needs addressed immediately: Greg Nester – 540-797-6499 (Moneta, VA).

My husband and I love the Smith Mountain Lake area and spending time on the lake. We plan to move there when we retire. We have an invested interest in the area, and it is very important to us to invest in the community and improvements for the residents and businesses.

Sincerely,



Rachel S. Love

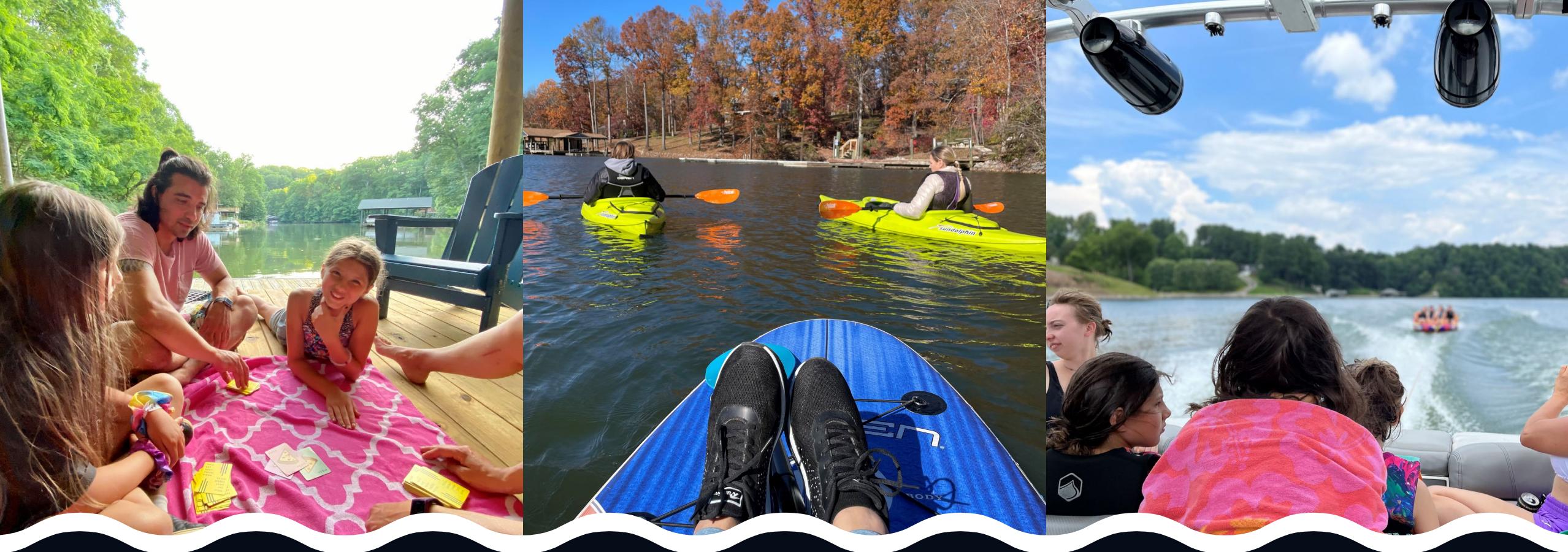
ATTACHMENTS:

1. 1970\_Morewood\_Special\_Use\_Permit\_application.pdf - (includes Special Use Application Form, Project Plan, Evacuation Plans, Septic Permit, Septic Inspection Report, Concept Plan, and Land Plat)
2. 131 Charmwood Vacation Home Guide
3. 101 Vermont Vacation Home Guide
4. Character Letter (Kerrie Sarvey)



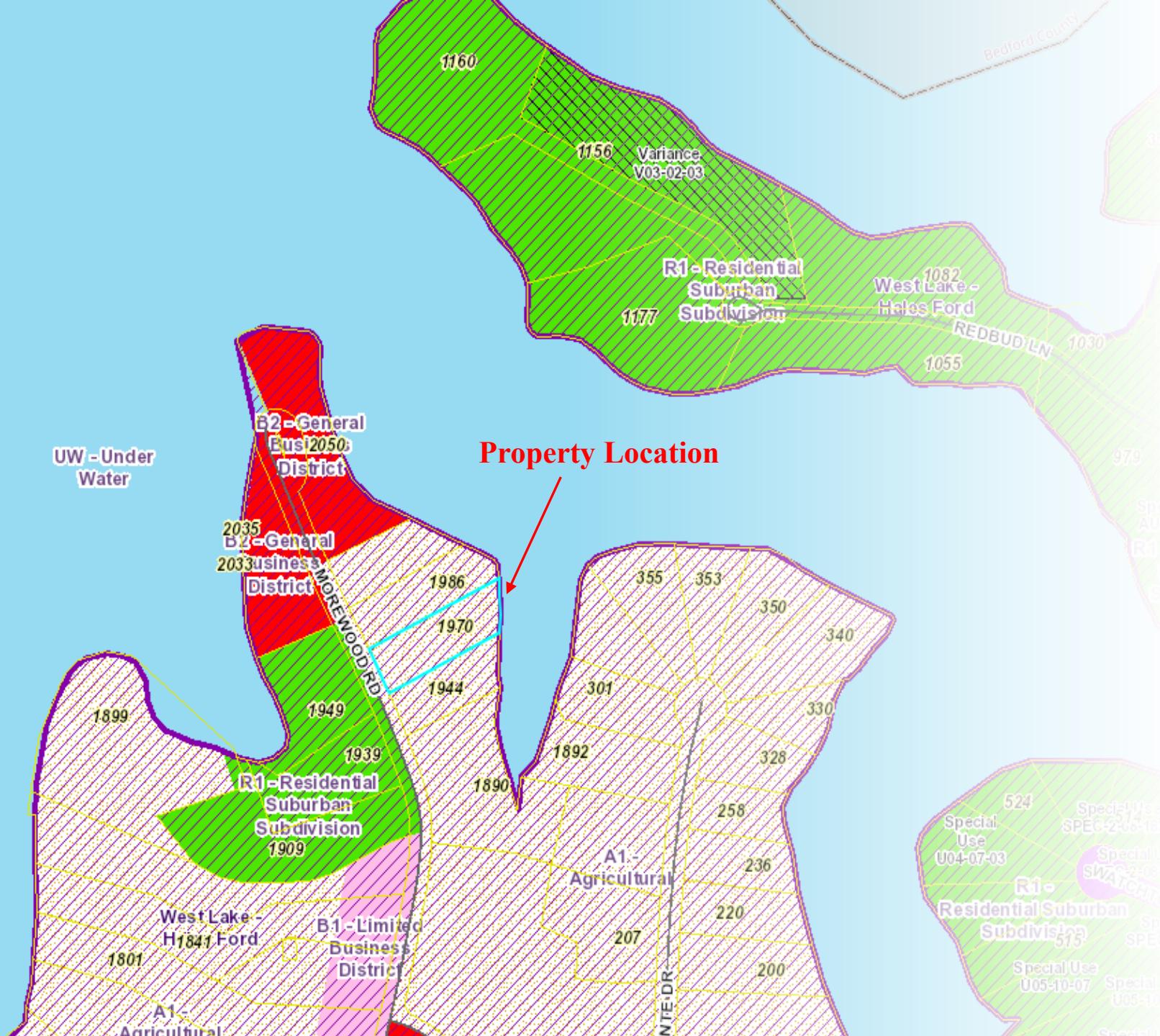
1970 Morewood Rd.

Hardy, VA 24101



# Proposed Use of the Property

The home will be used as an investment property for short term vacation rental. We live in Forest, VA within less than an hour drive to the home. We visit our current rental property in Moneta, which is a similar distance, whenever the home needs fixes or other matters need addressed, whether during the week or on the weekend. Our rentals will be week-long rentals in the primary season. We set restrictions on who can book to home to ensure they have good rental history. Rentals are not to extend beyond one week unless requested and may be longer or shorter in the off-season. Maintaining the home in the best condition is our main priority. We will forgo renting at times for this reason.

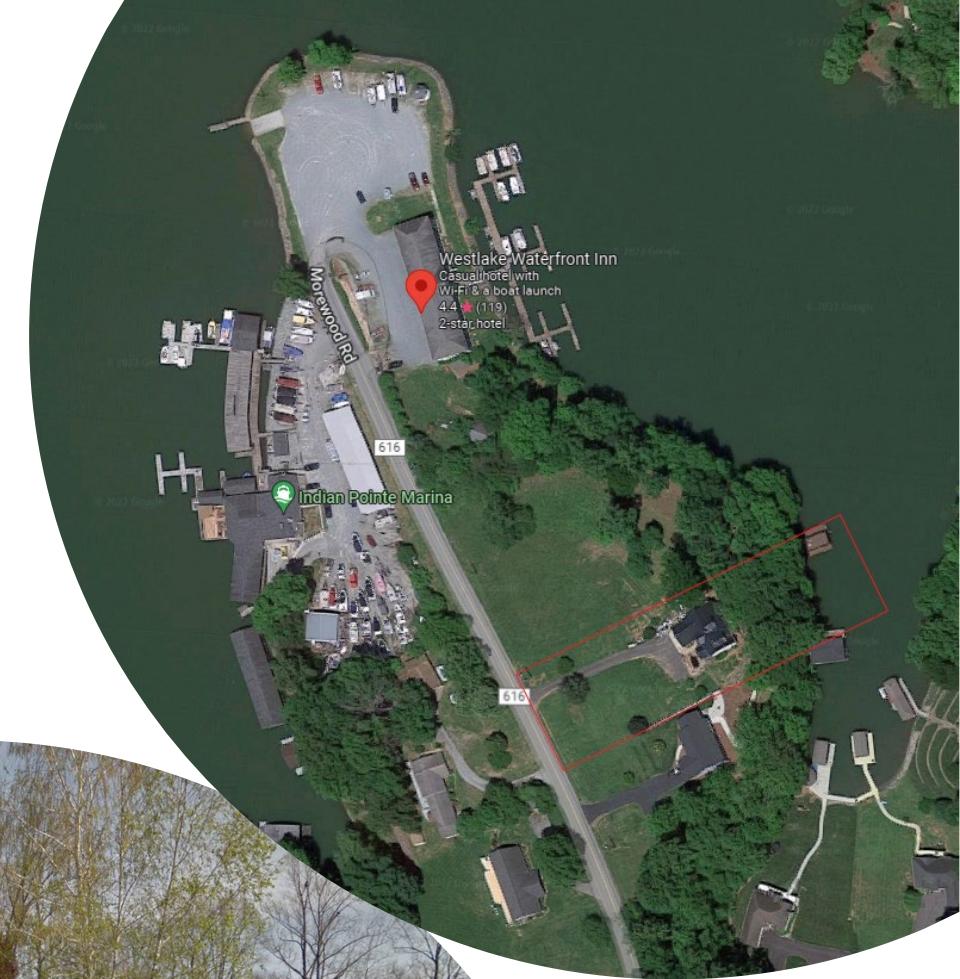


# Reason for Request

The home is located in an Agriculture (A1) zone in which use of short-term rental requires a special use permit.

# Effect of Change to Surrounding Area

The home is located on the Indian Point peninsula which includes the Indian Point Marina and the Westlake Waterfront Inn. The home can accommodate six (6) people based on septic limitations limiting the impact to the neighborhood traffic. The home is located over the hill away from the public road which allows for privacy for both the renters and the neighbors.

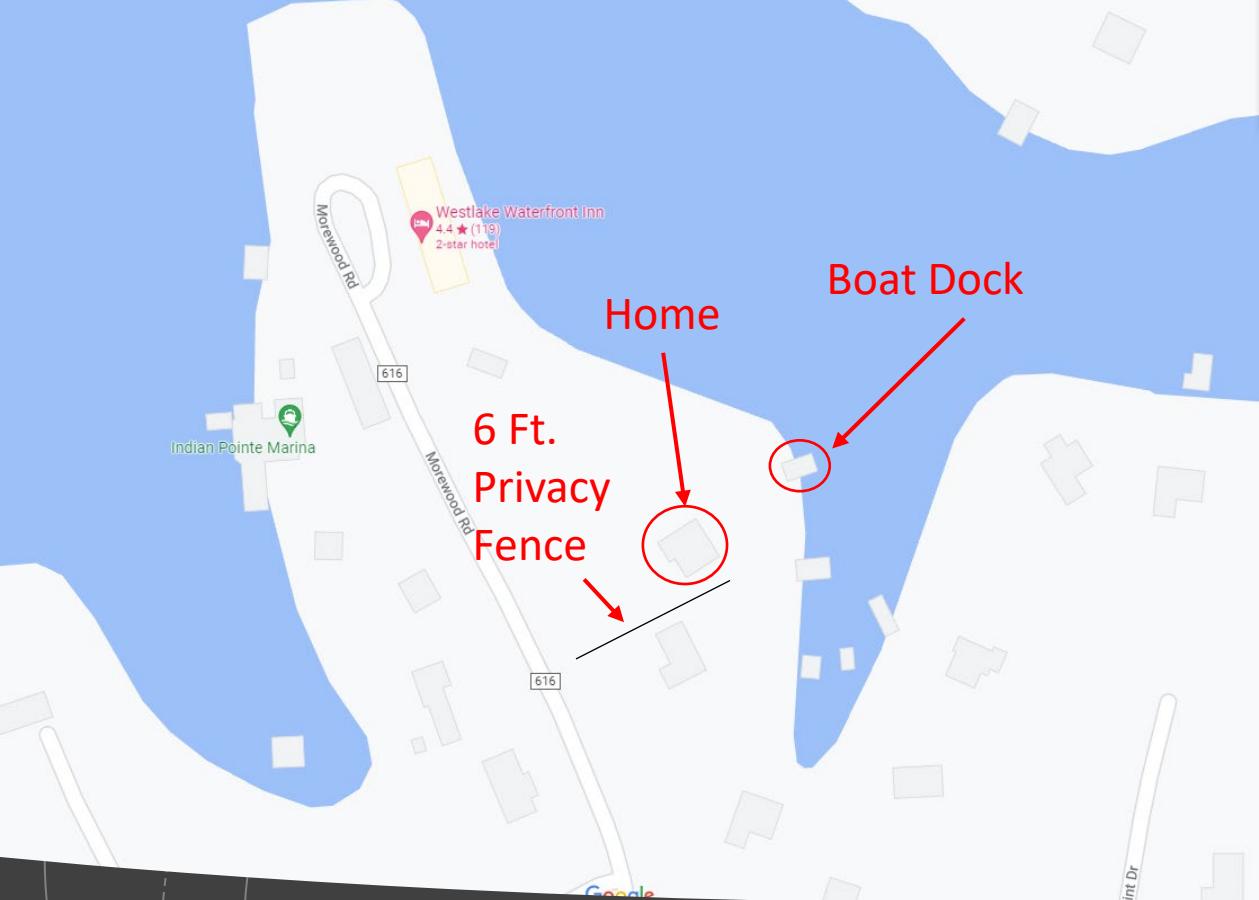




## PARKING

- There is adequate off-street parking that is very private to the home.
- Parking is more than adequate for occupancy limits.
- Home rules will specify parking requirement such as “no parking on the street and no parking in grass”





# Property Layout



# About us...

Kyle and I have lived in the Forest area for almost 18 years. Kyle is a Mechanical Engineer and Rachel is a Nuclear Engineer at Framatome Inc. We have two daughters, Emma (12) and Charlie (8). We purchased a boat back in 2013 and spent every summer since then at Smith Mountain Lake.

We absolutely love the area and love being on the lake as a family. We purchased our first lake house in August of 2019 and began renting in July of 2020. We have had a wonderful experience being able to share our home with other families who also love the lake. We get lake-goers from all over the country.

We have built amazing friendships with our community at the lake and have the most wonderful relationships with our neighbors. Many of our neighbors at the lake are permanent residents and it is our top priority to respect them and ensure we are bringing value to our community.

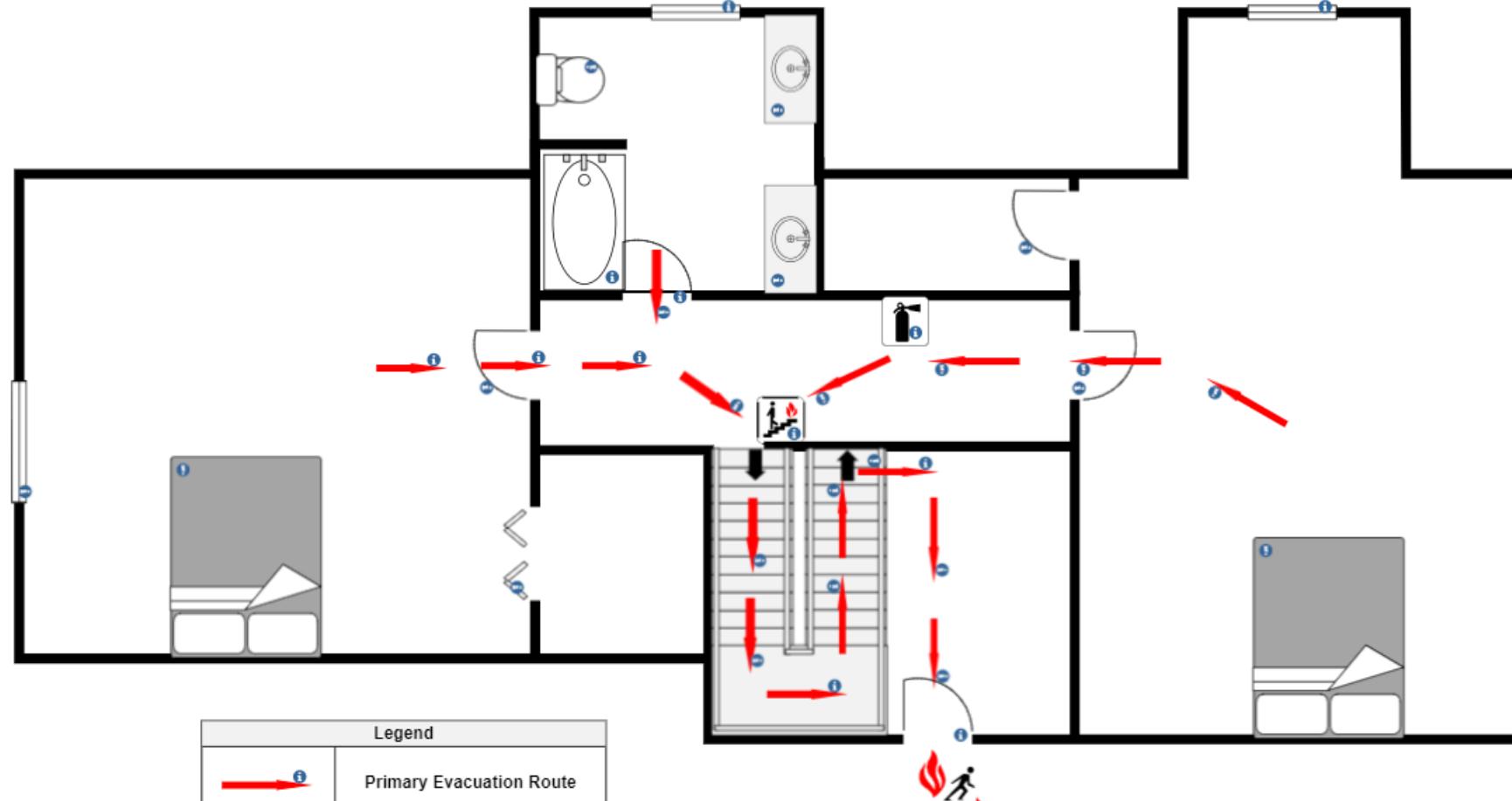
We would like to eventually be permanent residents on Smith Mountain Lake and for that reason we try to emulate the qualities we would desire from our neighbors.

# Emergency Evacuation Plans



Top Floor - 1970 Morewood Rd.

|          |         |            |       |           |
|----------|---------|------------|-------|-----------|
| DRAWN BY | CHECKED | DATE       | SCALE | SHEET NO. |
| R. Love  | N/A     | 11/11/2022 | 1     | N/A       |



1970 Morewood Rd - Main Floor

DRAWN BY

R. Love

DATE

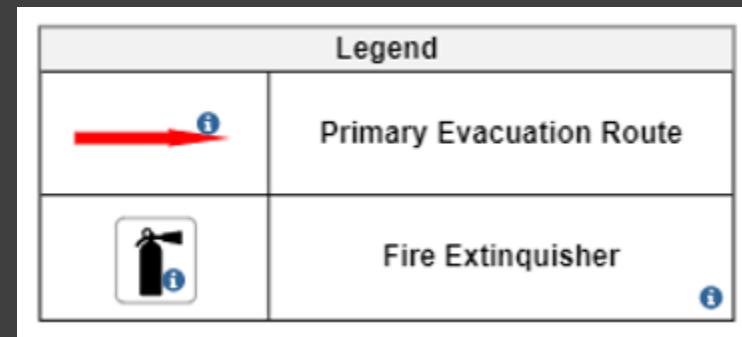
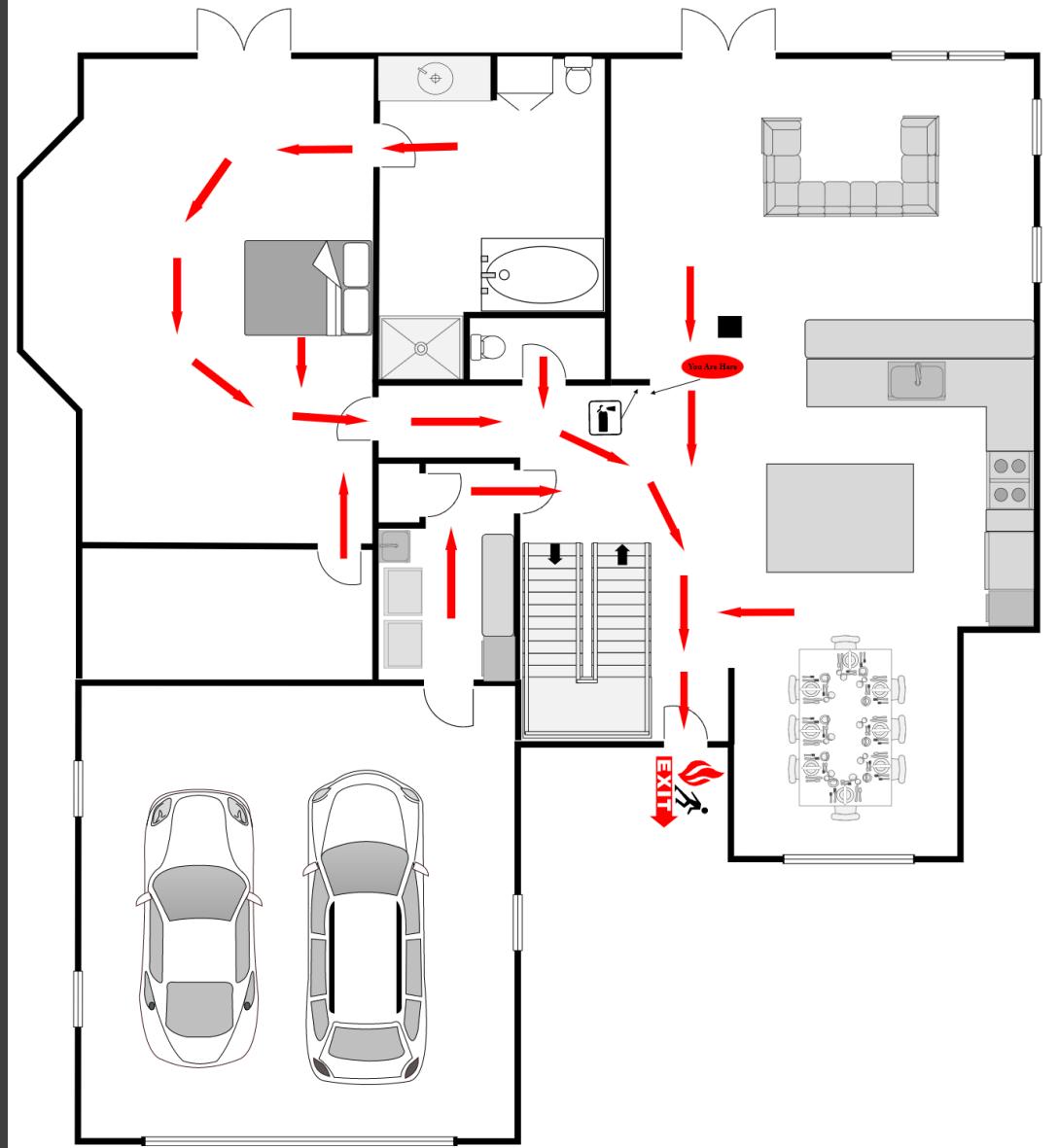
11/18/22

CHECKED

SCALE

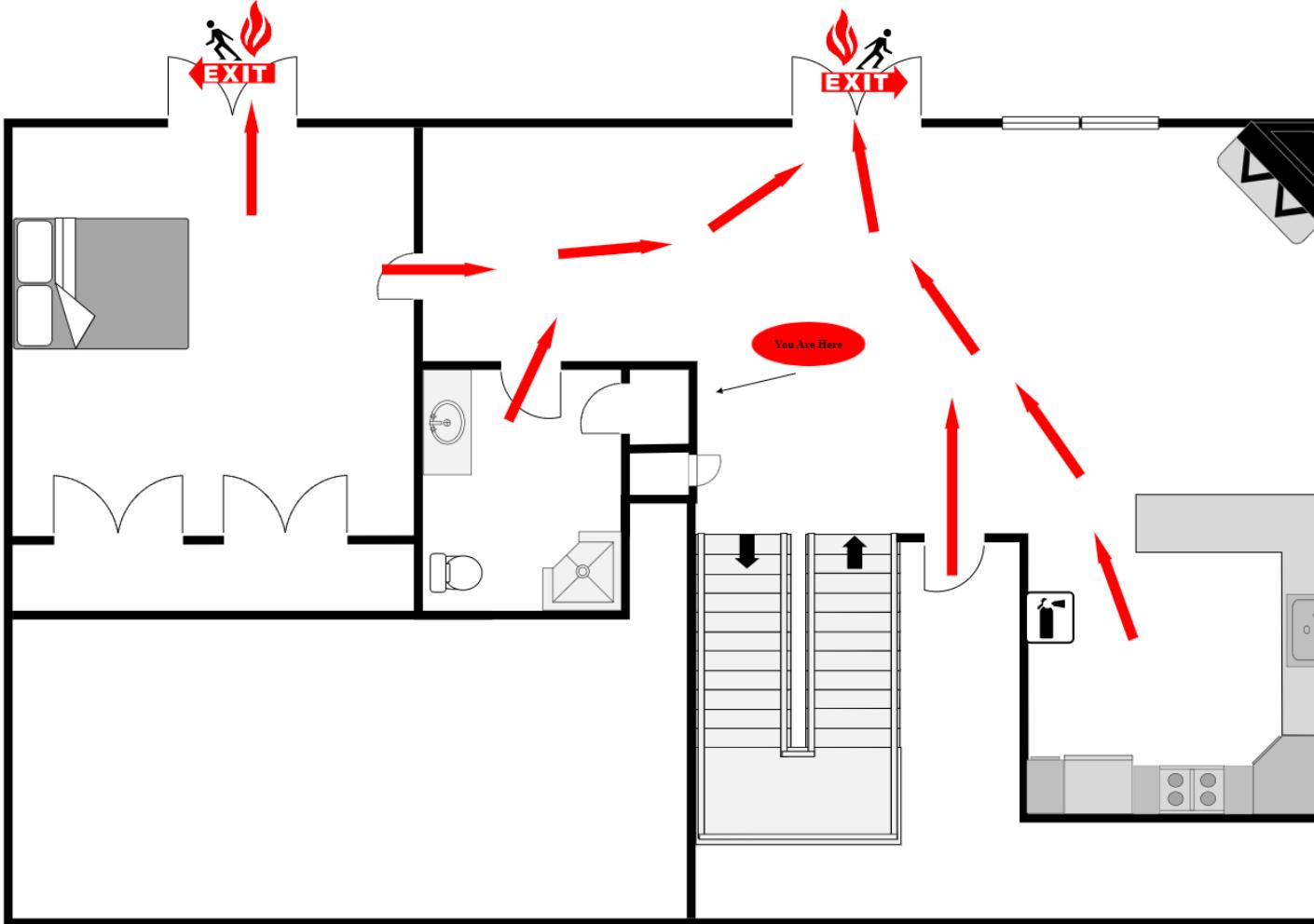
SHEET NO.

N/A



1970 Morewood Road - Basement

|          |         |          |          |
|----------|---------|----------|----------|
| DRAWN BY | R. Love | DATE     | 11/18/22 |
| CHECKED  | N/A     | SCALE    | -        |
| N/A      |         | SHEET NO |          |
| N/A      |         | N/A      |          |



| Legend |                          |
|--------|--------------------------|
|        | Primary Evacuation Route |
|        | Fire Extinguisher        |

No. 133-97-1044  
Tax Map No. 15.6, par 3

# PERMIT

THIS PERMIT  
EXPIRES ON  
N/A

COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF HEALTH

## SEWAGE DISPOSAL SYSTEM OPERATION PERMIT

DATE OF ISSUE  
MARCH 1, 1999



This Permit is Issued in Accordance with the Provisions of  
32.1, Chapter 6 of the Code of Virginia. Issuance of an  
Operating permit does not imply or Guarantee that the Sewage  
Disposal System will Function for any Specified Period of Time.

OPERATOR: SUNSHINE PARTNERSHIP  
ADDRESS: 750 NOVEMBER LN  
WIRTZ, VA. 24184

Property location: CHESTNUT POINT SUB  
LOT 4

*The above operator has made application and in accordance with the regulations of the Board of Health of the Commonwealth of Virginia is authorized by the FRANKLIN COUNTY Health Department to operate a Type II Sewage Disposal System*

Having a Design Capacity of 450 Gallons per Day, 3 Bedrooms Maximum.

  
\_\_\_\_\_  
HEALTH OFFICIAL

Variances Granted  XXX None  See Attached

# Completion Statement

Commonwealth of Virginia  
State Department of Health

Health Department  
Identification Number

133971044

Fn Co

Health Department

Name of Company/Corporation/Individual:

M Pr, Inc

Address:

R mt VA

Telephone:

Owner's Name

Sunshine Partnership

Owner's Address

Wirt VA

Location of Installation: Lot

4

Block

Section:

Subdivision:

Chestnut Pt

Other:

I hereby certify that the onsite sewage disposal system has been installed and completed in accordance with the construction permit issued (date) 11/20/97 and is in compliance with Part D of the Sewage Handling and Disposal Regulations and when appropriate the plans and specifications for the project.

7/8/98

Date

Marty Peller

Signature and Title

## Water Supply and/or Sewage Disposal System Construction Permit

## Commonwealth of Virginia

## **Department of Health**

Franklin Co.

## Health Department

## Health Department

**Health Department  
Identification Number**

Map Reference M15.6 P3

## General Information

**Water Supply System:**  New  Repair.  Public  FHA  VA  Case No. \_\_\_\_\_

**Sewage Disposal System:** New  Repair  Expanded  Conditional  Public Case No. \_\_\_\_\_

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:

construction permit is hereby issued to:  
Owner SUNSHINE PARTNERSHIP

Telephone 721-8362

Address: 750 NOVEMBER LN WIRZ For a Type II Telephone 542-1234  
Sewage Disposal System or Well to

be constructed on/at 122N 666 TO and on 125

Subdivision Ches PT Section/Block 1 Lot 4 Actual or estimated water use 450 gal

| DESIGN   |  | NOTE: SEWAGE DISPOSAL SYSTEM INSPECTION RESULTS   |  |  |
|--|--|---|--|--|
| Water supply, existing: (describe)   |  | Water supply location: Satisfactory yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments                        |  |  |
| To be installed: class <u>3B WELL</u> cased <u>150</u> to rock grouted <u>150</u> (pressure)   |  | Completion Report<br>G. W. 2 Received: yes <input type="checkbox"/> no <input type="checkbox"/> not applicable <input type="checkbox"/> |  |  |
| Building sewer: <u>3-4"</u> I.D. PVC Schedule 40, or equivalent.<br>Slope 1.25" per 10' (minimum).<br><input type="checkbox"/> Other   |  | Building sewer: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                            |  |  |
| Septic tank: Capacity <u>1000</u> gals. (minimum).<br><input type="checkbox"/> Other   |  | Pretreatment unit: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                         |  |  |
| Inlet-outlet structure:<br>PVC Schedule 40, <u>4</u> tees or equivalent.<br><input type="checkbox"/> Other   |  | Inlet-outlet structure: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                    |  |  |
| Pump and pump station:<br>No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> describe and show design.<br>if yes: <u>see engine plans</u>   |  | Pump & pump station: yes <input type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory<br><i>see eng. lets</i>          |  |  |
| Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent.<br><input type="checkbox"/> Other   |  | Conveyance method: yes <input type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory<br><i>see eng. lets</i>            |  |  |
| Distribution box:<br>Precast concrete with <u>10</u> ports.<br><input type="checkbox"/> Other  |  | Distribution box: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                          |  |  |
| Header lines:<br>Material: 4" I.D., 1500 lb. crush strength plastic or equivalent from distribution box to 2' into absorption trench. Slope 2" minimum.<br><input type="checkbox"/> Other  |  | Header lines: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                              |  |  |
| Percolation lines:<br>Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'.<br><input type="checkbox"/> Other   |  | Percolation lines: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                         |  |  |
| Absorption trenches:<br>Square ft. required <u>1050</u> depth from ground surface to bottom of trench <u>48"</u> aggregate size <u>5-15"</u><br>Trench bottom slope <u>2-4" PER 100'</u><br>center to center spacing <u>9'</u> ; trench width <u>3'</u><br>Depth of aggregate <u>13"</u><br>Trench length <u>50'</u> ; Number of trenches <u>7</u> |  | Absorption trenches: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments<br>Satisfactory                       |  |  |
|  |  | Date <u>7/20/98</u> Inspected and approved by:<br><u>John Hyda</u><br>Sanitarian  |  |  |

~ LAKE ~

AD - RA

## Health Department

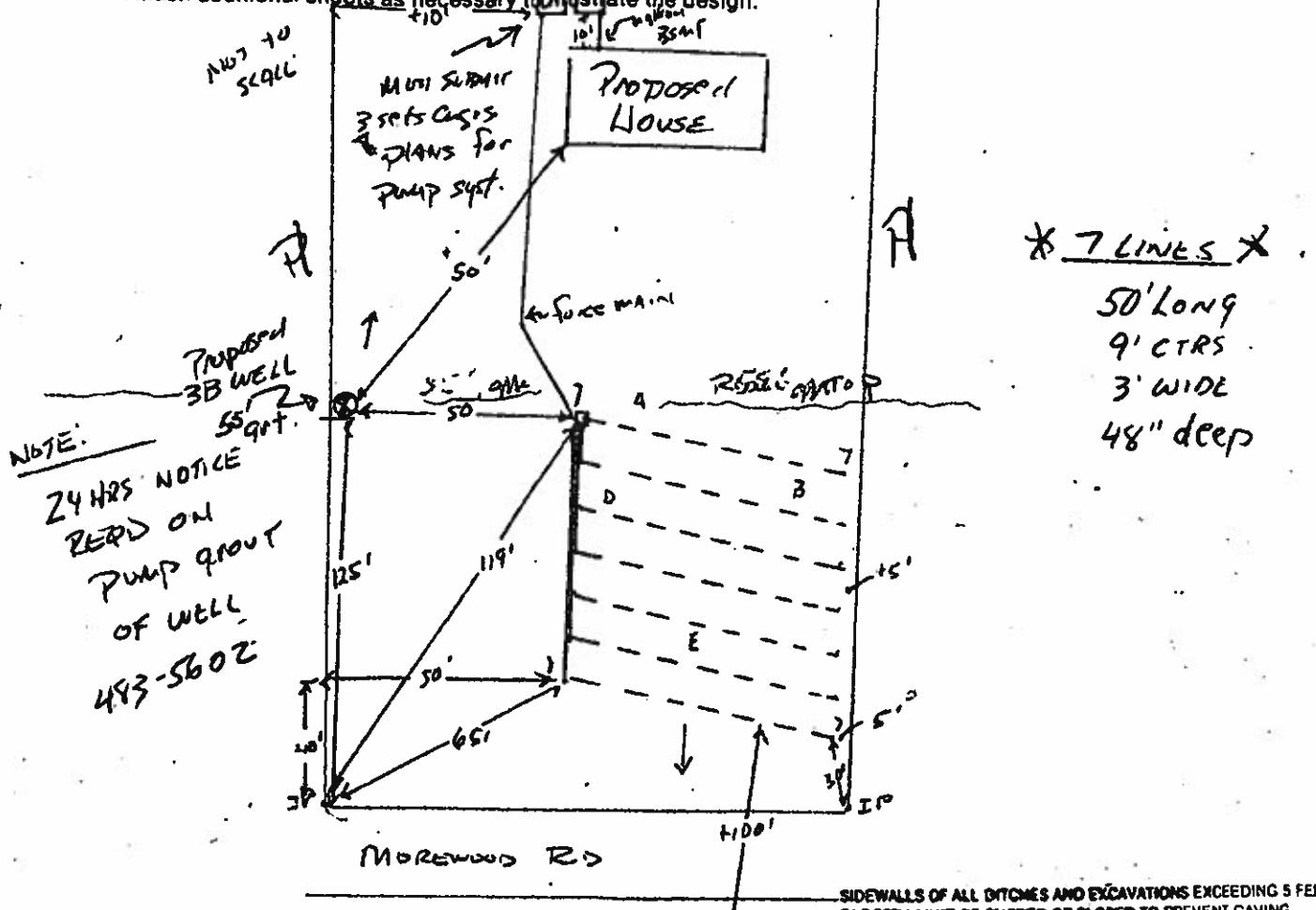
Health Department  
Identification Number 133-97-1044

PAGE 2 OF 2

### **Schematic drawing of sewage disposal system and topographic features.**

Show the lot lines of the building lot and building site, sketch of property showing any topographic features which may impact on the design of the system; all existing and/or proposed structures including sewage disposal systems and wells within 100 feet of sewage disposal system and reserve area. The schematic drawing of the 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 located on the same lot show all sources of pollution within 100 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.



The sewage disposal system is to be constructed as specified by the permit, or attached plans and specifications.

This sewage disposal system 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.

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 dept. Any part of any installation which has been covered prior to approval shall be uncovered, if necessary, upon the direction of the Department.

Date: 4/30/97 Issued by:

Jolitzhyde

### Sanitarium

Date: 11/19/97

Reviewed by:

This Construction  
Permit Valid until  
3/20/99

#### If FHA or VA financing

**Reviewed by Date**

## Data-

GHS 2022 Revised 6/24

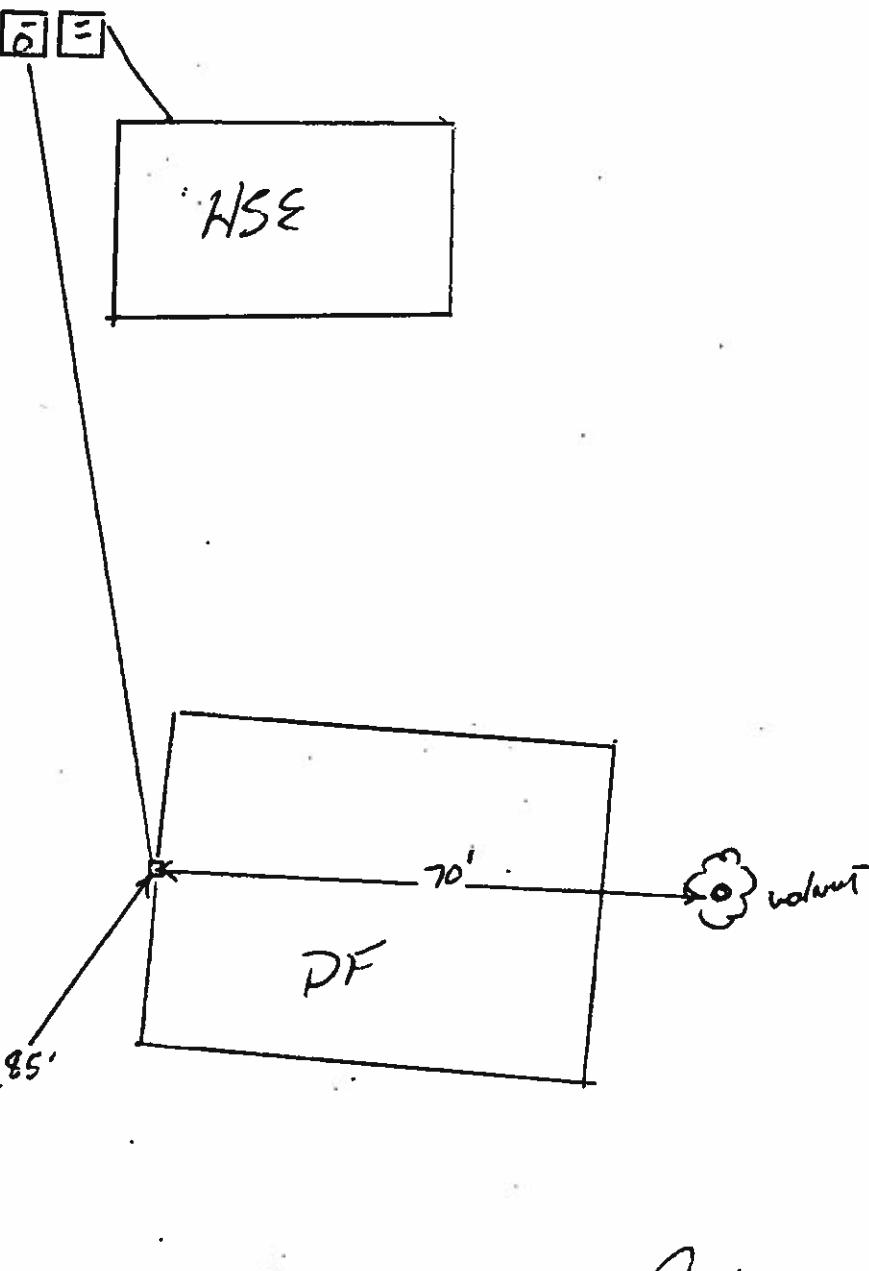
### Supervisory Sanitarian

11-2A

## Regional Sanitarian

Health Department  
Identification Number 133-97-1044  
Supplement to Page 2 OF 2

Schematic drawing of Sewage Disposal System to reflect actual installation. This does not change conditions as noted on original permit. The purpose is to provide a more factual representation of the system, as installed, for future reference.



~ NOT TO SCALE ~

7/20/98  
DATE

*John C. Myler*  
ENVIRONMENTAL HEALTH SPECIALIST

# Soil Evaluation Form

Date February 26, 1996

133971044

Page 1 of 1

Health Department

Applicant SUNSHINE PARTNERSHIP

Franklin Co

Telephone No.

721-8362

Address 750 NOVEMBER LN NW12, VA 24154

Location 122N L 616 to end on RT

Subdivision Chestnut Pointe Section \_\_\_\_\_ Lot 4

Slope 15 % Depth to rock/impervious strata Max. \_\_\_\_\_ Min. 66" None \_\_\_\_\_

Depth to seasonal water table (gray mottling or gray color) No  Yes  \_\_\_\_\_ inches

Free water present No  Yes  \_\_\_\_\_ range in inches

Soil percolation rate estimated Yes  Texture group I ① III IV  
No  Estimated rate 45 min/inch

Name and title of evaluator: C. M. Allison, Jr.

VA Certified Professional Soil Scientist

C. M. C. / J. D. C. M. A.

| Hole # | Horizon        | Depth (Inches) | Description of color, texture, etc.                | Texture Group |
|--------|----------------|----------------|--|---------------|
| A      | A              | 0-4            | Brown Loam   | II            |
|        | B              | 4-12           | Yellow Red Clay                                    | IV            |
|        | B/C            | 12-36          | Yellow Red Clay Loam - Light                       | III           |
|        | C <sub>1</sub> | 36-66          | Yellow Red Loam                                    | II            |
|        | C <sub>2</sub> | 66-72          | Strong Brown Loam                                  | II            |
| B      | A              | 0-4            | Brown Loam   | II            |
|        | B              | 4-24           | Yellow Red Clay Loam                               | III           |
|        | C              | 24-66          | Strong Brown to Olive Brown Loam                   | II            |
|        |                | 66             | Rock   |               |
|        |                |                |  |               |
| C      | A              | 0-4            | Brown Loam   | II            |
|        | B              | 4-10           | Yellow Red Clay                                    | IV            |
|        | B/C            | 10-24          | Yellow Red Sandy Clay Loam                         | II            |
|        | C <sub>1</sub> | 24-54          | Yellow Red & Strong Brown Loam Mottled Black*      | II            |
|        | C <sub>2</sub> | 54-66          | Strong Brown to Dark Olive & Black* Loam w/Few     | II & III      |
|        |                |                | Yellow Red Clay Loam                               |               |
|        |                | 66             | Rock   |               |
| D      | A              | 0-4            | Brown Loam   | II            |
|        | B              | 4-24           | Yellow Red Clay Loam w/Basic Parent Rock Fragments | III           |
|        | B/C            | 24-36          | Yellow Red Clay Loam - Light                       | III           |
|        | C              | 36-72          | Brown Loam   | II            |
|        |                |                |  |               |
| E      | A              | 0-4            | Brown Loam   | II            |
|        | B              | 4-36           | Red Clay Loam                                      | III           |
|        | C              | 36-72          | Brown to Dark Brown Loam                           | II            |

Remarks:

- NO CHEMICAL TERMITE TREATMENT.

- (E) DUG w/ BACKHOE. *Witnessed* *Backhoe*

*concrete QM*

Proposed Drainfield: 7 50'x 3' Lines 48" Deep

N/A Lines for Reserve

\*Colors derived from parent material.

# Record of Inspection - Private Water Supply System

Commonwealth of Virginia  
Department of Health

Health Department  
I.D. Number 133-97-1044

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

Date 3-1-99

Local Health Department Fairfax Co

Owner SUNSHINE Partnership Address 750 NOVEMBER LN  
WILLISTON, VA 24181 Phone 721-8362

Exact Location of Premises 122 W 16th to end RT

Subdivision Chest Pt

Section/Block

Lot 7

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

Date of installation 7/30/98

## 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 750 Pretreatment Unit 150

Conveyance System 750 Subsurface Soil Absorption System 50  
(nearest point). Property Line AT 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 160 feet. Type of casing PPR

Depth of casing 60 feet. Diameter of casing 6" inches.

Casing extends inches above ground 12'. Exterior space sealed with neat cement grout to a depth of 60 feet. Screens constructed of

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 LP6 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 12 hours. Drawdown 10' feet. Yield 50 GPM. Type of storage PRESSURE

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 3-1-99

Signed \_\_\_\_\_

*J. Goldwasser*  
Sanitarian

Date \_\_\_\_\_

Signed \_\_\_\_\_

Supervisory Sanitarian

Date \_\_\_\_\_

Signed \_\_\_\_\_

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

THIS FORM MUST BE RETURNED IN ORDER TO RECEIVE OPERATIONS PERMIT  
(THE CORRECT I.D. NUMBER CORRESPONDS WITH PERMIT!)

Commonwealth of Virginia  
Uniform Water Well Completion Report

133-97-1044

Owner \_\_\_\_\_

Sunshine Partnership

Address \_\_\_\_\_

Phone \_\_\_\_\_

Location \_\_\_\_\_

Tax Map ID 15.6

VCH Permit \_\_\_\_\_

WWC3 Permit \_\_\_\_\_

WWC3 ID \_\_\_\_\_

County \_\_\_\_\_

\* Well Data \*

General Information

Drilling Method

Air

Depth to Bedrock

600ft.

Static Water Level

210 ft from top

Well Disinfected (Y or N)

Date Completed

7/30/98

Yield

50 (GPM)

Stabilized Water Level

Total Depth of Well

160ft.

Length of Test 30 minutes

Natural Flow (Rate)

Amount Used

Casing

From top to 60ft.  
Size 5/8" Material Plastic  
Weight/Schedule 1 1/2

From \_\_\_\_\_ to \_\_\_\_\_  
Size \_\_\_\_\_ Material \_\_\_\_\_  
Weight/Schedule \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_  
Size \_\_\_\_\_ Material \_\_\_\_\_  
Weight/Schedule \_\_\_\_\_

Gravel Pack

From No. to \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_

Grout

From top to 60ft.  
Ecc. Hole Size 1 1/2"  
Type Boreal  
Method Pumpea

From \_\_\_\_\_ to \_\_\_\_\_  
Ecc. Hole Size \_\_\_\_\_  
Type \_\_\_\_\_  
Method \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_  
Ecc. Hole Size \_\_\_\_\_  
Type \_\_\_\_\_  
Method \_\_\_\_\_

Water Zones or Screened Intervals

From 130ft. to Diam.  
Mesh Size \_\_\_\_\_  
From \_\_\_\_\_ to Diam.  
Mesh Size \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_  
Mesh Size \_\_\_\_\_ Diam. \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
Mesh Size \_\_\_\_\_ Diam. \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_  
Mesh Size \_\_\_\_\_ Diam. \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
Mesh Size \_\_\_\_\_ Diam. \_\_\_\_\_

\* Use Data \*

Private Well:  
Public Well:

Domestic  
Community

Agricultural  
Non Community

Industrial \_\_\_\_\_

Monitoring \_\_\_\_\_

**Drillers Log**  
(Use additional sheet if necessary)

Depth

#### Description of Formation or Sediment

### Remarks

Top to bottom

## Clay and Sandstone

60 ft. to 160 ft. Limestone and Granite

I certify that the information contained here is true and that this well was installed and constructed in accordance with the permit and further that the well complies with all applicable state and local regulations, ordinances and laws.

Drilling  
Contractor Howard E. Huff

Address 856 Greenway Rd

Glade Hill Va. 24092

Phone 483-7593

Drillers Signature Howard E Huff

Representing Southern Well Drilling  
Virginia Company, License Number 1000

Virginia Contractors License Number 09405

Page

2/4/99

GARY L. ROBERTSON P. E.  
721 STRAWBERRY BANKS DR.  
MONETA, VA. 24121  
540-721-3853

Mr. John Hyder  
Franklin County Health Department  
P. O. Box 249  
Rocky Mount , Va. 24151

February 27, 1999

Dear Mr. Hyder:

I have inspected the sewer pump system for Lot 4, Chestnut Pointe Subdivision (permit # 133-97-1044) and found it to be in substantial compliance with the approved plans.

If you have any questions, please call.

Sincerely,  
  
Gary L. Robertson P. E.

FRANKLIN CO HD-ROCKY MOUNT

PO BOX 249

ROCKY MOUNT VA 24151

OFFICE PHONE: (540)484-0292

FIN: 546001775

FOR: FRANKLIN COUNTY EH NEW ONE HEALTH  
DEPARTMENT

CLIENT'S ACCOUNT #: 136703734

# CLIENT STATEMENT/RECEIPT

STATEMENT DATE: 04/13/2022

SHOW AMOUNT

PAID HERE \$ \_\_\_\_\_

BALANCE DUE \$0.00

FRANKLIN COUNTY EH NEW ONE HEALTH  
DEPARTMENT  
365 PELL AVE  
ROCKY MOUNT VA 24151

RETURN THIS PORTION WITH PAYMENT

| DATE       | SITE | EXPLANATION OF ACTIVITY    | District                                   | Prev.Balance     |
|------------|------|----------------------------|--|------------------|
|            |      |                            | CHARGE                                     | PAY/ADJ AMT.     |
| 04/13/2022 | 067A | PAYMENT                    |  | \$0.00           |
|            |      | PAYOR: FRANKLIN HEALTH DEP | TRNX TYPE: CHARGE                          | REC No: 06745651 |
| 04/13/2022 | 067A | PAGE                       | COPYING CHARGE - PER PAGE - UP TO 50 PAGES | \$5.00           |
|            |      |                            | NEW BALANCE                                | \$0.00           |

CHARGES AND PAYMENTS ARE INCLUDED THROUGH 04/13/2022. IF YOU HAVE SUBMITTED A PAYMENT AFTER 04/13/2022, IT IS NOT REFLECTED ON THIS BILL.

FRANKLIN COUNTY HEALTH D  
365 PELL AVE  
ROCKY MOUNT, VA 24151  
276-638-2311

SALE

Batch #: 017  
04/13/22 16:15:09  
APPR CODE: 094931  
Trace: 3  
VISA \*\*\*\*3040  
AMOUNT \$5.00

REF #: 00000033  
CVV2: M  
Manual CNP  
\*/\*\*

APPROVED

THANK YOU

CUSTOMER COPY

SHOULD YOUR ACCOUNTS BECOME OVERDUE THE HEALTH DEPARTMENT MAY ASSESS INTEREST, A LATE PENALTY, ADMINISTRATIVE COSTS AND COLLECTION FEES, WHERE APPLICABLE, FOR WHICH THE CLIENT OR THE RESPONSIBLE PARTY WILL BE HELD LIABLE. COLLECTION EFFORTS MAY INCLUDE, BUT ARE NOT LIMITED TO REPORTING THE ACCOUNT TO THE CREDIT BUREAU, SUBMISSION TO A PRIVATE COLLECTION AGENCY, THE DEPARTMENT OF TAXATION'S SET-OFF-DEBT PROGRAM AND/OR SUBMISSION TO THE ATTORNEY GENERAL'S OFFICE. RETURN CHECK CHARGES MAY BE ADDED. PAYMENTS MAY BE MADE AT ANY LOCAL HEALTH DEPARTMENT IN THE STATE.



(540) 483-1457 aaasepticva.com

# LIFT STATION INSPECTION REPORT\*

Inspection Completed by: \_\_\_\_\_

Inspection Date: \_\_\_\_\_

Report Prepared for: \_\_\_\_\_

Location: \_\_\_\_\_

Reason Requested: \_\_\_\_\_

**System Type:**  Pump Back System  Other: \_\_\_\_\_

(This report contains information specific to the pump tank only. Additional inspections are available, if requested.)

**Conditions at the Tank:** Presence of odor within 10ft perimeter of system:  None  Mild  Strong

Source of odor, if present: \_\_\_\_\_

**Tank Description:** Material:  Concrete  Fiberglass  Plastic Capacity: \_\_\_\_\_ gal

Surface area: \_\_\_\_\_ sq. ft. Operational depth: \_\_\_\_\_ inches Gallons per inch: \_\_\_\_\_ GPI

**Tank Information:** Tank Located:  Yes  No Location Description: \_\_\_\_\_

Access Type and Point of Entry: Evidence of infiltration in access?  Yes  No  N/A

Riser at tank  Inlet  Outlet  Center Located at grade:  Yes  No If no, how deep? \_\_\_\_\_

Concrete lid at tank  Inlet  Outlet  Center Located at grade:  Yes  No If no, how deep? \_\_\_\_\_

Inspection Port at tank  Inlet  Outlet  Center

Lid securely fastened?  Yes  No Lid in operable condition?  Yes  No

Notes: \_\_\_\_\_

**Alarm (s):** Alarms activated? Yes No Audio alarm operational? Yes No N/A

Visual alarm operational? Yes No N/A Remote telemetry operational? Yes No N/A

Electronic monitoring operational? Yes No N/A

**Current Tank Operating Conditions:** Liquid level relative to bottom of tank: \_\_\_\_\_ inches

Maximum liquid level of tank: \_\_\_\_\_ inches Height at which alarm is activated: \_\_\_\_\_ inches

Evidence that liquid level has been higher than alarm activation level?  Yes  No

Evidence liquid has leaked from tank?  Yes  No Evidence of continuous flow?  Yes  No

**Pump:** Pump under access?  Yes  No Pull chain or rope present?  Yes  No  N/A

**Conveyance Assembly:** Filters present?  Yes  No Location: \_\_\_\_\_

Backflow prevention (check valve) present?  Yes  No Location: \_\_\_\_\_

Air release located below check valve?  Yes  No Location: \_\_\_\_\_

Quick disconnect present?  Yes  No Location: \_\_\_\_\_

Shut-off valve present?  Yes  No Location: \_\_\_\_\_

Notes: \_\_\_\_\_

\*This report is being submitted based on a visual inspection of the septic system for informational purposes only. This report does not warranty or guarantee that the septic system is in operating condition. In accepting this report the above named party and all parties involved specifically agree to exonerate AAA Septic from all claims, demands, damages, actions, and causes of action in law or in equity, of whatsoever kind or nature.



(540-483-1457 aaasepticva.com

## LIFT STATION INSPECTION REPORT\*

Location:

(continued)

**Electrical Components:** Located in tank?  Yes  No Located in watertight junction box?  Yes  No  
Watertight splice?  Yes  No Rust/Corrosion on wiring?  Yes  No  
Direct bury wire?  Yes  No Appear to be in conduit?  Yes  No

Notes: \_\_\_\_\_

**Solids Accumulation:** Present in Tank?  Yes  No Tank Pumping Recommended?  Yes  No

**Tank Structural condition:** Root Intrusion?  Yes  No  
Appears to be watertight (no visual leaks)?  Yes  No Cracks present?  Yes  No  
Corrosion present?  Yes  No Spauling present?  Yes  No Rebar exposed?  Yes  No

**Screen (s):** N/A Type of screen:  Vault with basket  Vault with filter  In-line screen

### PUMP OPERATIONAL CHECKLIST:

**Controls:** Type:  Piggy back  Control panel Controls operating properly?  Yes  No  
Is enclosure watertight?  Yes  No Alarm test switch working properly?  Yes  No  
At time of inspection, control switch (HAND-OFF-AUTO) was set at:  Hand/Manual  Auto  Off

**Pump:** Pump Operating Properly?  Yes  No Type of Pump:  Multi-stage  Single-stage  
Amp measured: \_\_\_\_\_ amps Volts measured: \_\_\_\_\_ volts Pump turns on/turns off?  Yes  No  
Pump HP: \_\_\_\_\_ Pump head: PSI \_\_\_\_\_  High head  Head

**Water Level Sensors:** Type of sensor:  Floats  Other \_\_\_\_\_ Number of floats/sensors: \_\_\_\_\_  
Pump ON float switch functioning properly?  Yes  No  
Pump OFF float switch functioning properly?  Yes  No  N/A  
Alarm float switch operating both audible and visible?  Yes  No  
Additional floats/sensors: \_\_\_\_\_

### Inspection Comments/Recommendations:

\*This report is being submitted based on a visual inspection of the septic system for informational purposes only. This report does not warranty or guarantee that the septic system is in operating condition. In accepting this report the above named party and all parties involved specifically agree to exonerate AAA Septic from all claims, demands, damages, actions, and causes of action in law or in equity, of whatsoever kind or nature.

# Concept Plan

Page 1 of 2



# Concept Plan

Page 2 of 2



SE 0581 #81014

## KNOW ALL MEN BY THESE PRESENTS, TO WIT:

THAT SUNSHINE PARTNERSHIP, INC., A VIRGINIA CORPORATION, HEREIN TO BE REFERRED TO AS THE "LAND OWNER", WHICH OWNES PART OF THE LAND CONVEYED TO SMITH LAKE BY DEED DATED FARTH JAN 1976 & RECORDED IN DEEDS 517 PAGE 6222.

THE LAND OWNER CERTIFIES THAT IT HAS SUBDIVIDED THIS LAND AS SHOWN ON EXHIBIT ENTIRELY WITH ITS OWN FREE WILL AND CONSENT AND PURSUANT TO THE LAWS OF THE STATE OF VIRGINIA & OF THE COUNTY OF FRANKLIN, AND IN COMPLIANCE WITH ORDINANCES 16-1 THROUGH 16-4 OF THE VIRGINIA PLAT OF SUBDIVISIONS, AND FURTHER PURSUANT TO AND IN COMPLIANCE WITH THE FRANKLIN COUNTY LAND SUBDIVISION ORDINANCES, THE SAME OWNER DOES, AT VIRTUE OF THE EXECUTION OF THIS PLAT, INCURS IN NO LIABILITY TO THE COUNTY OF FRANKLIN, ALL OF THE LAND ENDEMBLED WITHIN THE BOUNDS OF THIS SUBDIVISION AND ALL OF THE EASEMENTS HERINBY DECLARED FOR PUBLIC USE.

SUNSHINE PARTNERSHIP, INC.

E. David Pyle, Pres.

TRUSTEE

## APPROVALS:

State of West Virginia  
By the Agent of the Board of Appeals  
Department and the Secretary of Franklin County  
Commissioners has the subdivision approved at Franklin  
County, West Virginia

Subdivision  
Approved  
Date 1/22/76  
By [Signature]

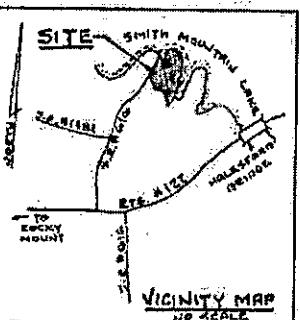
PROPOSED SURVEY OF THE SUBDIVISION  
SUBMISSION OF SURVEY DATA AND CHORD  
FIGURES SHALL BE SUBMITTED TO THE FRANKLIN COUNTY  
COMMISSIONERS AS A PROOF OF CONSTRUCTION  
DEMONSTRATING ACCURACY OF THE SURVEY  
AND THE EXISTENCE OF THE SUBDIVISION  
AND THE EXISTENCE OF THE SUBDIVISION

## NOTES:

1. TIE PIN SET AT ALL CORNERS UNLESS OTHERWISE NOTED.
2. THE 100 YEAR FLOOD PLAIN FOR SMITH MOUNTAIN LAKE IS ELEVATION 802', AND IS DESIGNATED APPROXIMATELY ON THIS PLAT BY A HATCHED LINE ALONG THE EDGE OF THE LAKE.
3. FOR DEBRANDING LOCATIONS, WELL SITES AND OTHER SPECIFIC INFORMATION, SEE PLAT AND FILE AT THE FRANKLIN CO. HEALTH DEPT.
4. THE OWNER OF THIS SUBDIVISION DOES NOT REQUIRE CONSENT EITHER A PUBLIC WATER OR A PUBLIC SEWER SYSTEM BEFORE THE CONSTRUCTION OF ANY PLAT IN THIS SUBDIVISION. THE FRANKLIN COUNTY HEALTH DEPARTMENT SHALL BE CONSULTED TO ENSURE THE PROPER LOCATION OF WELL AND SEPTICFIELD IN RELATION TO THE LOCATION OF THE PROPOSED SUBDIVISION.
5. THIS PLAT WAS PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT AND THEREFORE DOES NOT NECESSARILY INDICATE ALL ENCUMBRANCES UPON THE TITLE.
6. THIS LOT OWNED HEREIN ARE SUBJECT TO A DECLARATION OF PROTECTIVE COVENANT WHICH MAY BE AMENDED FROM TIME TO TIME.
7. REPS: TAX L. & S. 10. 21.



IN THE CIRCUIT COURT OF FRANKLIN COUNTY, VIRGINIA, THIS PLAT WITH THE CERTIFICATE OF ACKNOWLEDGEMENT THEREON ATTACHED IS SUBMITTED TO RECORD ON 1/22/76 15TH REGISTRATION  
A. M. JOHN S. HALL, ALONE A CHECK FOR \$3.00 WAS PAID  
TRUSTEE: WILLIAM H. WILCOX, CLERK



I, Fred G. Howell, certify that this plat was drawn under my supervision from my notes and observations under my supervision, that the lines are closure as calculated to at least 5 in. and that this plat was prepared in accordance with Chapter 19 of the Franklin County Code of Franklin, this 11th day of Feb. 1976.

Fred G. Howell

BERKLEY-HOWELL & ASSOCIATES, P.C.  
ENGINEERS • SURVEYORS • PLANNERS  
Lynchburg, VA

SCALE AS SHOWN DATE 2-11-76

JNO. 10 351762

PLAT OF SURVEY OF  
CHESTNUT POINTE

GILLE CREEK MINISTERIAL DIST. FRANKLIN CO., VIRGINIA

JNO. 10 351762

SHEET 1 OF 2

| CURVE | ANGLE      | RADIUS  | ARC    | TANGENT | CURVE DATA         |        | CHORD |
|-------|------------|---------|--------|---------|--------------------|--------|-------|
|       |            |         |        |         | BEARING            | DIST.  |       |
| C-1   | 15°49'35"  | 50.00   | 49.46  | 41.18   | 6.27° 59' 04" E.   | 64.18  |       |
| C-2   | 51°58'35"  | 176.00  | 160.76 | 65.51   | 3.46° 53' 22" E.   | 189.37 |       |
| C-3   | 101°44'35" | 176.00  | 237.08 | 239.74  | 5.46° 53' 22" E.   | 282.49 |       |
| C-4   | 56°10'35"  | 350.00  | 283.50 | 186.51  | 11.23° 08' 11" E.  | 329.14 |       |
| C-5   | 141°04'45" | 3016.00 | 63.10  | 51.71   | 21.13° 53' 01" W.  | 23.45  |       |
| C-6   | 21°19'31"  | 3015.00 | 122.77 | 61.53   | 6.10° 26' 14" W.   | 122.74 |       |
| C-7   | 61°10'31"  | 3028.00 | 9.26   | 4.66    | 3.11° 40' 15" W.   | 9.26   |       |
| C-8   | 44°16'45"  | 50.00   | 40.37  | 21.32   | 5.11° 24' 17" E.   | 30.18  |       |
| C-9   | 51°53'43"  | 50.00   | 47.04  | 31.07   | 5. 1° 18' 25" E.   | 35.10  |       |
| C-10  | 26°28'45"  | 50.00   | 36.00  | 16.32   | 6.34° 28' 05" W.   | 22.01  |       |
| C-11  | 31°59'18"  | 50.00   | 33.68  | 15.26   | 11.66° 48' 07" E.  | 35.06  |       |
| C-12  | 18°58'42"  | 50.00   | 16.33  | 8.80    | 5.89° 52' 45" E.   | 21.67  |       |
| C-13  | 78°58'32"  | 50.00   | 16.31  | 8.78    | 5.86° 14' 05" E.   | 29.49  |       |
| C-14  | 35°11'27"  | 50.00   | 33.74  | 17.38   | 8.26° 10' 51" E.   | 34.21  |       |
| C-15  | 30°15'08"  | 50.00   | 31.64  | 16.70   | 4.46° 25' 20" W.   | 31.08  |       |
| C-16  | 38°57'51"  | 50.00   | 37.87  | 20.57   | 11.80° 30' 18" E.  | 39.08  |       |
| C-17  | 87°47'33"  | 50.00   | 41.11  | 22.16   | 11.35° 57' 06" E.  | 40.91  |       |
| C-18  | 01°17'38"  | 2976.00 | 67.17  | 35.65   | 11.11° 24' 04" E.  | 67.18  |       |
| C-19  | 11°08'34"  | 2976.00 | 106.70 | 54.34   | 11. 4° 21' 46" E.  | 106.49 |       |
| C-20  | 12°00'24"  | 2976.00 | 108.47 | 54.44   | 11. T. 23' 18" E.  | 108.14 |       |
| C-21  | 11°08'47"  | 2976.00 | 111.39 | 56.70   | 11. 5° 10' 11" E.  | 111.38 |       |
| C-22  | 27°56'56"  | 2976.00 | 125.84 | 63.68   | 11. 5° 22' 08" E.  | 125.77 |       |
| C-23  | 55°28'27"  | 2976.00 | 111.73 | 46.17   | 11. 7° 21' 49" E.  | 111.33 |       |
| C-24  | 97°00'01"  | 400.00  | 45.23  | 34.70   | 11. G. 00' 07" E.  | 402.15 |       |
| C-25  | 14°51'41"  | 400.00  | 140.26 | 50.50   | 11. 18° 08' 07" E. | 400.00 |       |
| C-26  | 14°51'41"  | 400.00  | 140.26 | 50.49   | 11. 18° 08' 07" E. | 400.00 |       |
| C-27  | 11°54'00"  | 400.00  | 122.04 | 41.80   | 5. 58° 28' 13" W.  | 121.16 |       |
| C-28  | 101°46'35" | 226.00  | 423.17 | 306.73  | 6.00° 52' 20" W.   | 303.16 |       |
| C-29  | 31°26'57"  | 198.00  | 68.93  | 39.07   | 11. 20' 40' 17" W. | 21.92  |       |
| C-30  | 17°26'02"  | 50.00   | 101.18 | 81.15   | 6.75° 06' 57" W.   | 80.50  |       |
| C-31  | 10°53'07"  | 419.45  | 98.45  | 49.42   | 11. 4° 30' 27" E.  | 98.26  |       |
| C-32  | 10°53'38"  | 419.45  | 121.58 | 61.67   | 11. 7° 36' 47" W.  | 108.10 |       |
| C-33  | 61°12'20"  | 447.66  | 66.00  | 29.05   | 11. 18° 34' 07" W. | 66.10  |       |
| C-34  | 21°08'01"  | 1200.00 | 47.70  | 23.85   | 11. 22° 56' 08" W. | 47.62  |       |
| C-35  | 3°48'07"   | 1200.00 | 100.00 | 56.94   | 11. 22° 00' 20" W. | 100.00 |       |
| C-36  | 4°36'06"   | 2073.33 | 21.19  | 10.68   | 11. 28' 06' 07" W. | 21.11  |       |
| C-37  | 3°40'44"   | 2073.33 | 109.00 | 58.01   | 11. 36' 17' 03" W. | 108.99 |       |
| C-38  | 10°48'00"  |         |        |         |                    |        |       |
| C-39  | 10°46'56"  | 65.95   | 161.70 | 61.44   | 11. 22' 01' 07" E. | 161.73 |       |
| C-40  | 3°41'51"   | 62.10   | 42.50  | 21.18   | 11. 16' 40' 22" E. | 42.50  |       |
| C-41  | 1°12'12"   | 3079.00 | 170.00 | 80.02   | 11. 3° 51' 33" W.  | 169.70 |       |
| C-42  | 5°47'13"   | 3076.00 | 197.76 | 100.00  | 11. 7° 21' 51" W.  | 197.70 |       |

PLAT OF SURVEY OF  
CHESTNUT POINTE

GILLE CREEK MINISTERIAL DIST. FRANKLIN CO., VIRGINIA

JNO. 10 351762

SHEET 1 OF 2

