

FRANKLIN COUNTY
SPECIAL USE PERMIT APPLICATION

I/We Michael & Elizabeth Fair 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 described below:

Petitioner's Name: Michael & Elizabeth Fair

Petitioner's Address: 10 SEVILLA DR CLIFTON PARK NY 12065

Petitioner's Phone Number: 518-452-1111

Petitioner's Email Address: [REDACTED]

Property Owner's Name: Same as above

Property Owner's Address: "

Property Owner's Phone Number: "

Property Owner's Email Address: "

Property Information:

A. Proposed Property Address: 234 Waterwood Dr. Moneta VA 24111

B. Tax Map and Parcel Number: 0320309800

C. Election District: Congressional district 09

D. Size of Property: 0.68 acre

E. Existing Zoning: A1

F. Existing Land Use: Single Family home

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

Corridor District Westlake Overlay District Smith Mountain Lake Surface District

H. Is any land submerged under water or part of Smith Mountain Lake? YES NO

I. If yes, please explain: [REDACTED]

[REDACTED]

[REDACTED]

Proposed Special Use Permit Information:

J. Proposed Land Use: Short - term rental

[REDACTED]

[REDACTED]

K. Size of Proposed Use: full property 0.68

L. Other Details of Proposed Use: _____

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 is herein complete and accurate.

Petitioner's Name (Printed): Michael & Elizabeth Fair

Petitioner's Signature: MF

Date: 10/22/2025

Mailing Address: 10 Sevilla Dr Clifton Park NY 12065

Phone Number: [REDACTED]

Email Address: [REDACTED]

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

Owner's Name: [REDACTED]

Owner's Signature: [REDACTED]

Date: [REDACTED]

Date Received by Planning Staff: _____

To whom it may concern,

We purchased 234 Waterwood Drive in Moneta, in September of 2021. We have been coming to SML since Lisa's sister and her husband built their vacation lake home in 2012. We quickly grew to love it here and began our journey to find our own place, which took several years to find. The Franklin County side was certainly our preferred area because it is much more convenient to shopping, restaurants and close to family. Our plan is to eventually retire to our lake home but we are not currently in the position to do that with one son still in college and our other son expecting a baby (our first grandchild!) in December. The house has been long-term rented since we have owned it and we have had to rent our own Airbnb to visit when we can. At this point, we would very much like to be able to spend some real time down here at the lake. The short-term rental would provide us with the ability to do that and give us the chance to truly make it really feel like our home with our own furnishings. Our property is situated on the point and as such has good separation from other boat houses and backyards. We would have local property management handling the rental process and occupancy limits and noise restrictions will be posted and adhered to. We believe bringing additional tourists to the Franklin County side of the lake will be a benefit to local restaurants and businesses. We very much look forward to being able to increase the amount of time that we are able to spend at the lake and would greatly appreciate the approval of our permit request.

Sincerely,

Mike & Lisa (Elizabeth) Fair

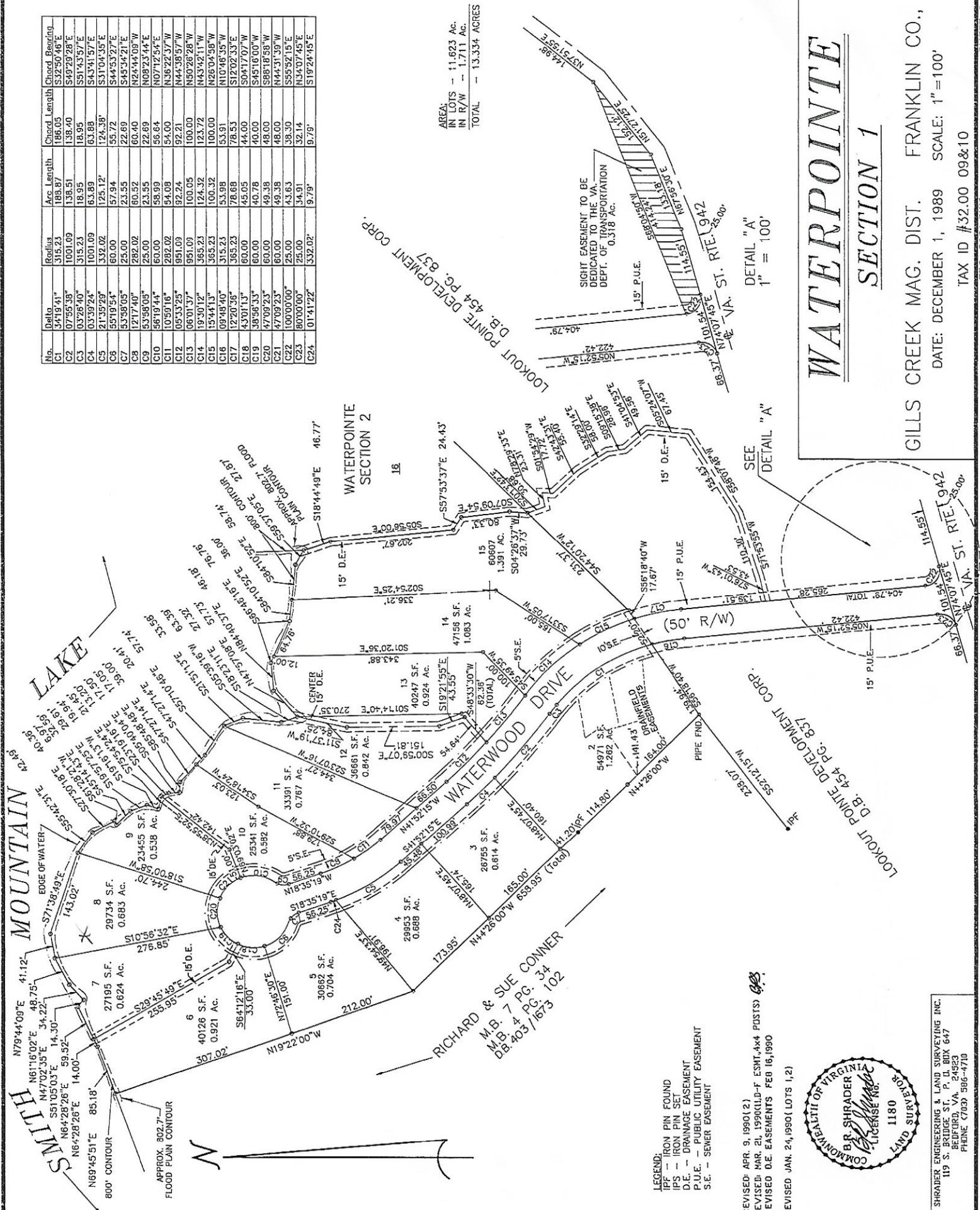
Concept Plan for 234 Waterwood Dr. Moneta

Applicants: Michael and Elizabeth Fair

Tax Parcel: 0320309800

County Parcel Data Are Once Again Being
Updated.

Parcel ID	0320309800
Map Number	032.03
PID	8465
Parcel Number	098.00
Owner	FAIR MICHAEL T & ELIZABETH A
Owner Address	234 WATERWOOD DR
City	MONETA
State	VA
Zip Code	24121
Physical Address	234 WATERWOOD DR 24121
Unit (If Any)	
Legal Description 1	WATERPOINTE LOT 8 SEC 1
Legal Description 2	N/A
Zoning	A1
District	GILLS CREEK
Legal Acreage	0.68
Land Value	\$280,000.00
Building Value	\$608,300.00
Assessed Total	\$888,300.00
Grantor	CARPENTER JAMES D & JEAN H
Sale Price	\$625,000.00
Sale Date	9/22/2021
Instrument Yr	2021
Instrument No	1170
Subdivision	WATERPOINTE - SEC.1
Deed Book	1170
Deed Page	2514
Plat Book	465
Plat Page	499
Property Card	View Card



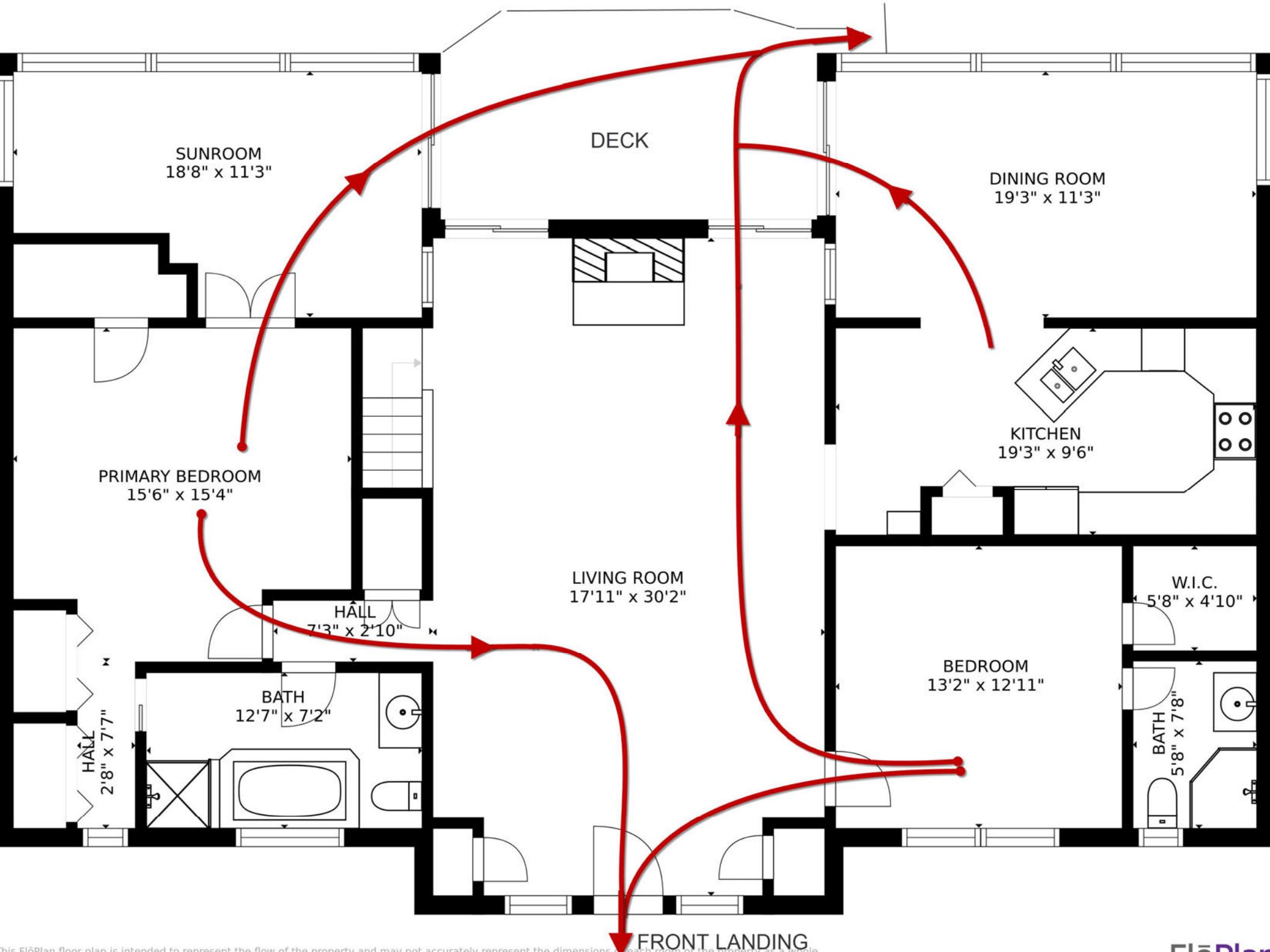
REVISED: APR. 9, 1990 (2)
REVISED: MAR. 21, 1990 (1D-F ESMI, 4x4 POSTS)
REVISED: D.E. EASEMENTS EEA 16, 1990

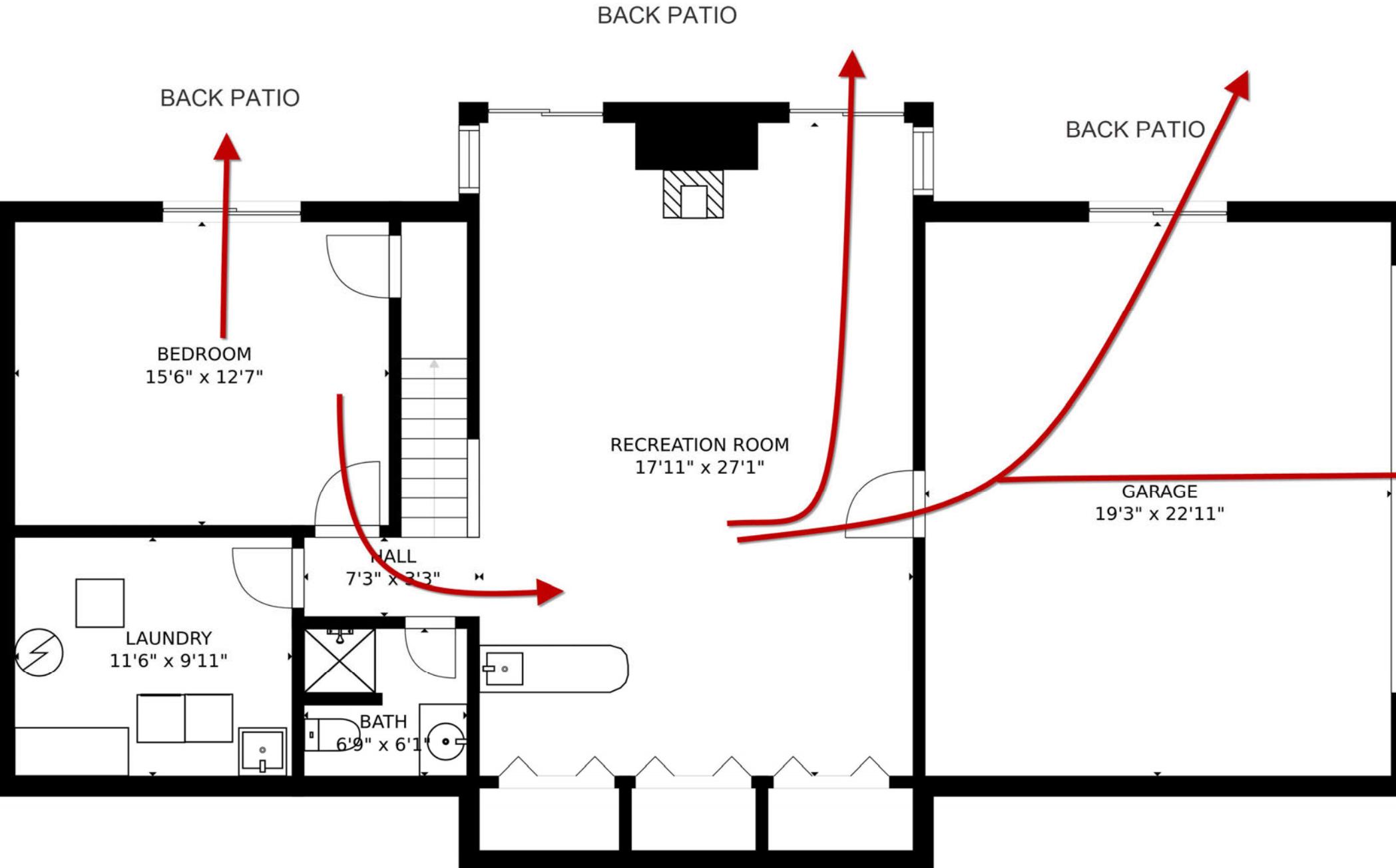


SHRADER ENGINEERING & LAND SURVEYING INC.
119 S. BRIDGE ST., P. O. BOX 647
BEDFORD, VA. 24523
PHONE C7032 5186-4710









Sewage Disposal System Operation Permit

Commonwealth of Virginia
Department of Health

Tax Map No. 32

Health Department
Identification No. 133-91-0700
FRANKLIN COUNTY Health Department



DOUG and GAY CARPENTER is Herby Granted Permission
to Operate a (Type) 2 Sewage Disposal System Having a Design Capacity of 450 gpd, at

SUBDIVISION	SECTION/BLOCK	LOT
<u>WATER POINTE</u>	<u>1/</u>	<u>8</u>

This permit is Issued in Accordance with the Provisions of 32.1, Chapter 6 of the Code of Virginia as Amended and Section(s) 3.22 of the Sewage Handling and Disposal Regulations of the Virginia Department of Health and

with Previously Issued permits CHS-202a, CHS-202b Dated 9-20-91

with the understanding that the Owner and/or any Subsequent Owner will operate the Sewage Disposal System in Accordance with the Sewage Handling and Disposal Regulations of the Virginia Department of Health and any Variances or Conditions Granted. Issuance of an Operating Permit does not imply or Guarantee that the Sewage Disposal System will Function for any Specified Period of Time.

VARIANCES GRANTED

NONE SEE ATTACHED

June 2, 1992

Effective Date

SPECIAL CONDITIONS

NONE SEE ATTACHED

D. Hall
Recommended (Sanitarian)

S. Muller
Approved (State Health Commissioner)

timeG : offsetG : state : reward : 2

19. *Leucosia* (Leucosia) *leucostoma* (Fabricius) *leucostoma* (Fabricius)

THE PRACTICAL USE OF THE COMPUTER IN THE FIELD OF MEDICAL RECORDS

• [View Details](#) • [Edit Details](#) • [Delete](#)

to help greater participation in the program.

TO: 82016 AC 0012 FROM: 100-18512

1990s and 2000s. (2013) 45.1. Available at: <http://www.jstor.org/stable/10.4329/jas.2013.45101> (Accessed 10 January 2014).

1. *Chlorophytum comosum* (L.) Willd. (Liliaceae)

For more information on the use of the *gut* and *gut* command, see the *gut* and *gut* command sections of the *gut* manual page.

新嘉坡總理司理事會

1. \mathbf{v}^T and $\mathbf{B}(\mathbf{v})$

Completion Statement

Commonwealth of Virginia
State Department of Health

Health Department

Identification Number 133-91-0700

FRANKLIN CO Health Department

Name of Company/Corporation/Individual: SMITH FARR'S

Address: RT 4 Box 6 BEDFORD Telephone: 703 586 1257

Owner's Name DOUG CARPENTER

Owner's Address 118 SMALL AVE W. CAROLINA NC 28036

Location of Installation: Lot 8 Block

Section: 1 Subdivision: WATER POINT

Other:

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

R. Smith Farr's

Date

Signature and Title

Sewage Disposal System Construction Permit

PAGE 1 OF 2

Commonwealth of Virginia
Department of Health

FRANKLIN CO. Health Department

Health Department
Identification Number 133-91-0700
Map Reference 32-SEE FILE

General Information

New Repair Expanded Conditional FHA VA Case No. _____
 Based on the application for a sewage disposal system construction permit filed in accordance with Section 3.13.01, a construction permit is hereby issued to:
 Owner DOUG & GAY CARPENTER Telephone 387-1753 (AGENT)
 Address 118 SMALL AVE. W. CALDWELL, N.J. 07006
 For a Type II Sewage disposal system which is to be constructed on/at 122 N. Rte 16, 1942,
 116-0 - Follow C-1-02-505
 Subdivision WATER POWER Section/Block 1 Lot 8
 Actual or estimated water use 450 GPD (3 BFD onmons)

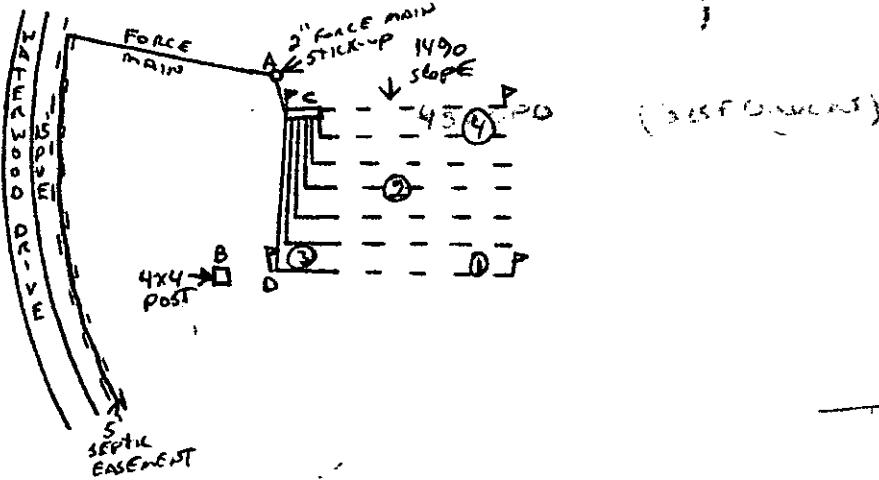
DESIGN	NOTE: INSPECTION RESULTS
Water supply, existing: (describe) PUBLIC	Water supply location: Satisfactory yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments
To be installed: class _____ cased _____ grouted _____	G. W. 2 Received: yes <input type="checkbox"/> no <input type="checkbox"/> not applicable <input checked="" type="checkbox"/>
Building sewer: I.D. PVC 40, or equivalent. Slope 25" per 10' (minimum). <input type="checkbox"/> Other _____	Building sewer: yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory <i>covered 4"</i>
Septic tank: Capacity 1000 gals. (minimum). <input type="checkbox"/> Other _____	Pretreatment unit: 1000 yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments Satisfactory <i>Caused waste to be backed up DSA</i>
Inlet-outlet structure: PVC 40, 4" tees or equivalent. <input type="checkbox"/> Other _____	Inlet-outlet structure: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Pump and pump station: Yes <input checked="" type="checkbox"/> describe and show design. if yes: SEE ENGINEER'S PLANS	Pump & pump station: yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory <i>need eng letter</i>
Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent. <input checked="" type="checkbox"/> Other FORCE MAIN	Conveyance method: yes <input type="checkbox"/> no <input type="checkbox"/> comments Satisfactory <i>need eng letter</i>
Distribution box: Precast concrete with 10+ ports. <input type="checkbox"/> Other _____	Distribution box: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments Satisfactory <i>5.10-9.92 apart 5.13/92 leak needs vng</i>
Header lines: Material: 4" I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2' into absorption trench. Slope 2" minimum. <input type="checkbox"/> Other _____	Header lines: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Percolation lines: Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'. <input type="checkbox"/> Other _____	Percolation lines: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments Satisfactory
Absorption trenches: Square ft. required 1050: depth from ground surface to bottom of trench 49"; aggregate size 1 1/2"; Trench bottom slope 2" - 4" / 100'; center to center spacing 9'; trench width 3'; Depth of aggregate 13"; Trench length 56'; Number of trenches 7	Absorption trenches: yes <input checked="" type="checkbox"/> no <input type="checkbox"/> comments Satisfactory <i>left uncovered in rain 1wk</i> Date 5/13/92 / 5-10-92 Inspected and approved by: <i>DEPARTMENT OF HEALTH</i> <i>SMITH FARRISS</i> Sanitarian

Schematic drawing of sewage disposal system and topographic features.

PAGE 2 OF 2

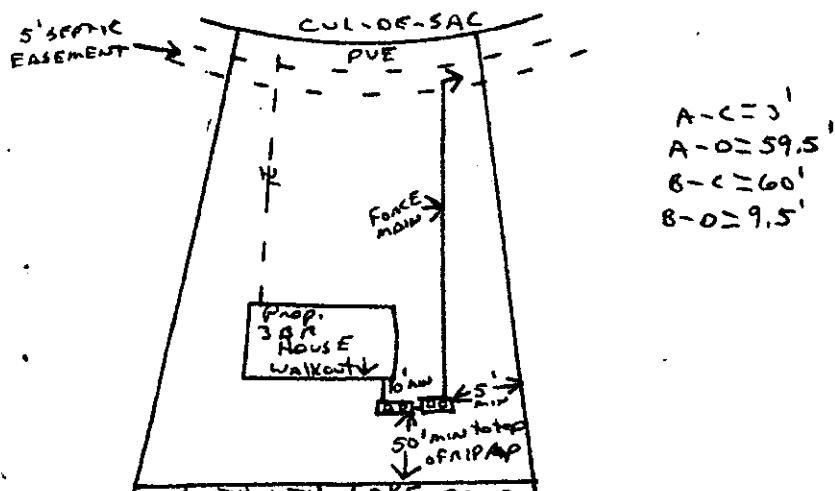
Show the lot lines of the building lot and building site, sketch of property showing any topographic features which may impact on the design of the system, all existing and/or proposed structures including sewage disposal systems and wells within 100 feet of sewage disposal system and reserve area. The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



WATERPOINTE SUBDIVISION
SECTION 1 - LOT 8

- 1) 1050 FT. 2 - 48" DEEP
- 2) 7 LINES X 50' LONG X 3' WIDE
9' CENTERS
- 3) INSTALL LINES ON Contours
- 4) 3 SETS OF Pump plans must
BE SUBMITTED BY A PROFESSIONAL
ENGINEER AND APPROVED PRIOR
TO INSTALLATION
- 5) WHERE LINES CROSS
Forces must provide 18" VENTILAL
SEPARATION



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: 9/20/91 Issued by: Rodney Douglas

This Construction
Permit Valid until
3/20/96

Date: 9/20/91 Reviewed by: Jean Brink

If FHA or VA financing

Reviewed by Date _____

Date

Regional Sanitarian

0000-111-001

5 10

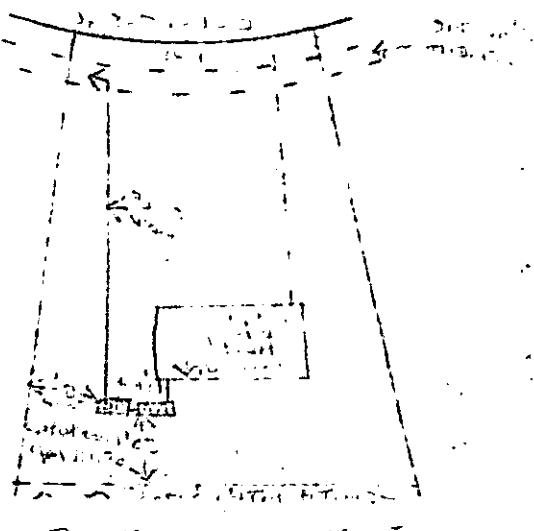
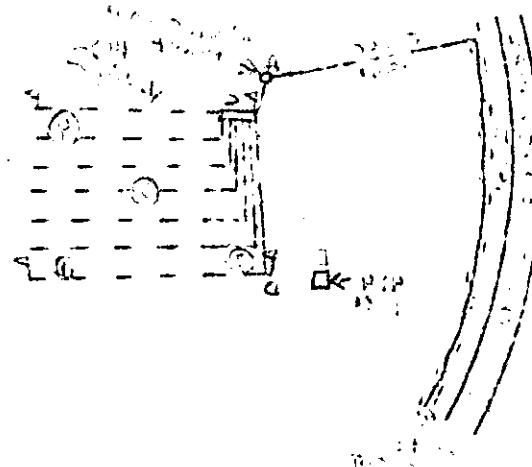
CONFIDENTIAL INFORMATION

3 TUD - 10001700

CONFIDENTIAL INFORMATION

2000-111-001

CONFIDENTIAL INFORMATION



CONFIDENTIAL INFORMATION

CONFIDENTIAL INFORMATION

CONFIDENTIAL INFORMATION

Soil Evaluation Form

PAGE 1 OF 2

Commonwealth of Virginia
Department of Health

Health Department
Identification Number 133-91-0700
Tax Map Number 32-SEE FILE

General Information

Date 12/27/89 & 2/02/90

Franklin County Health Department

Applicant James Petrine

Telephone No. (703) 387-1753

Address 1865 Laurel Mountain Drive, Salem, Virginia 24153

~~PO BOX 6464 CARPENTER I.P. KEE~~ 118 SMALL AVE,
~~Waterpointe Developments~~ Same as above W. CALDWELL, N.J. 07006

Location North on Rt. 122; Right on Rt. 616 to Scruggs; left on Rt. 942;

property is on left near end of Rt. 942

Subdivision WATERPOINTE Block/Section 1 Lot (2) ESMT "D"

LNT 8

Soil Information Summary

1. Position in landscape satisfactory Yes No Describe _____

2. Slope 14 %

3. Depth to rock/impervious strata Max. _____ Min. _____ None

4. Depth to seasonal water table (gray mottling or gray color) No Yes _____ inches

5. Free water present No Yes _____ range in inches

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

7. Percolation test performed Yes Number of percolation test holes _____
No Depth of percolation test holes _____
Average percolation rate _____

Name and title of evaluator: B. R. Shrader, P. E.

Signature: B. R. Shrader

Department Use

Site Approved: Drainfield to be placed at 48" depth at site designated on permit
48"

Site Disapproved:

Reasons for rejection:

- Position in landscape subject to flooding or periodic saturation.
- Insufficient depth of suitable soil over hard rock.
- Insufficient depth of suitable soil to seasonal water table.
- Rates of absorption too slow.
- Insufficient area of acceptable soil for required drainfield, and/or Reserve Area.
- Proposed system too close to well.
- Other Specify _____

Profile Description
EVALUATION REPORTDate of Evaluation 1-05
2-02-90Health Department
Identification No. 133-91-0700Page 2 of 2

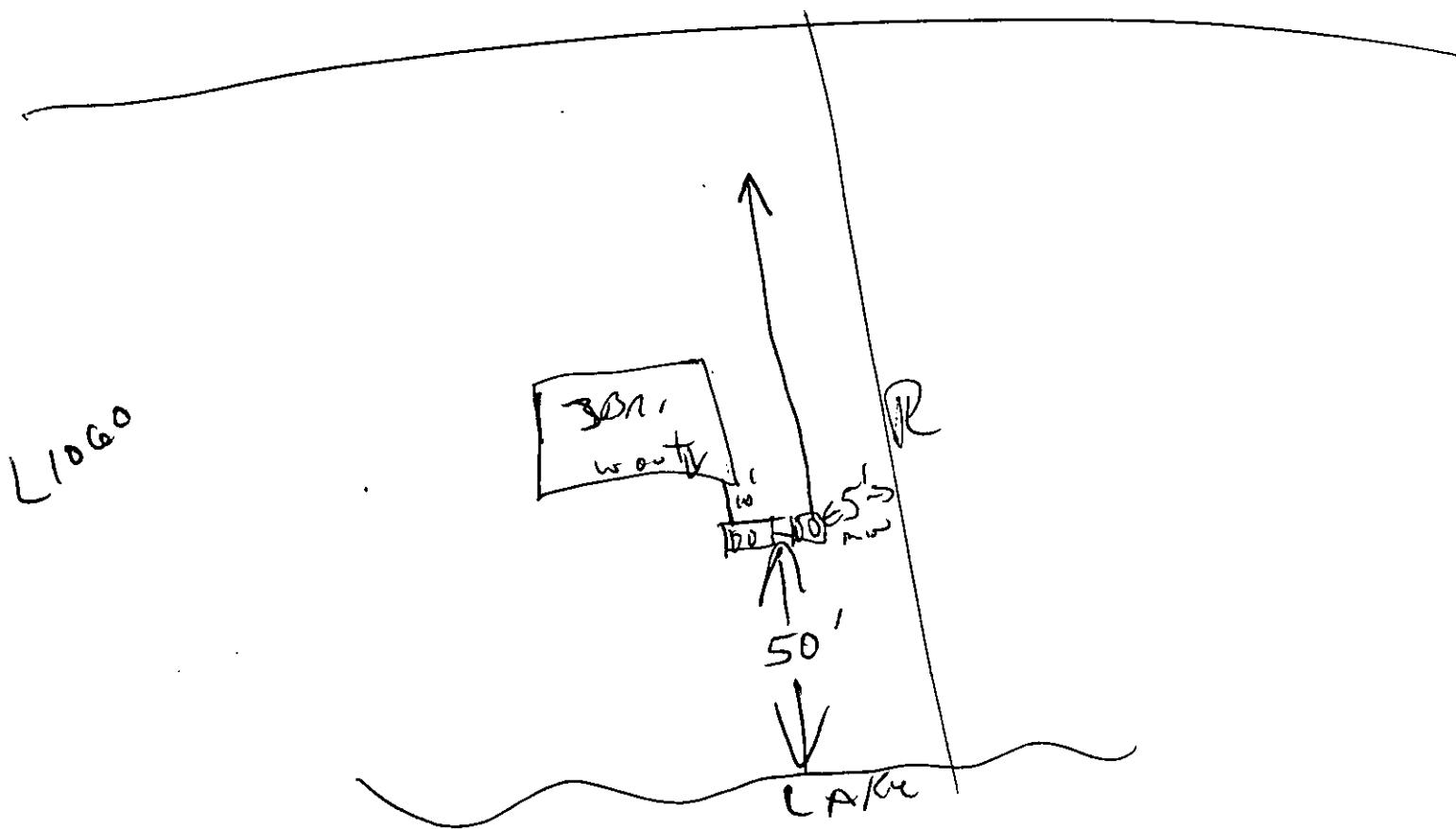
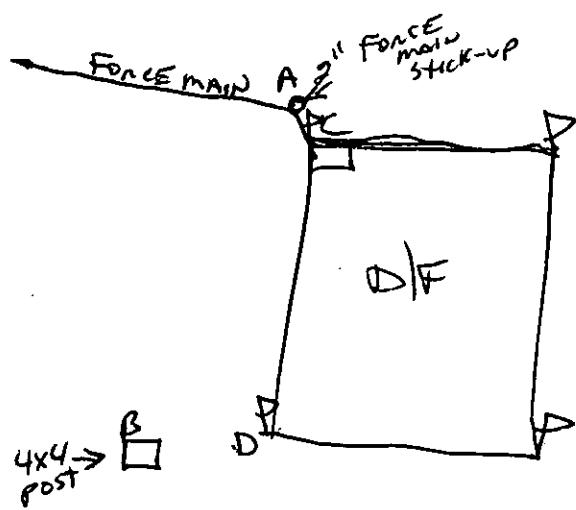
Where the local health department conducts the soil evaluation the location of profile holes may be shown on the schematic drawing on the construction permit or the sketch submitted with the application. If soil evaluations are conducted by a private soil scientist, location of profile holes and sketch of the area investigated including all structural features i.e., sewage disposal systems, wells, etc., within 100 feet of site (See section 4) and reserve site shall be shown on the reverse side of this page or prepared on a separate page and attached to this form.

See application sketch See construction permit See sketch on reverse side or page attached

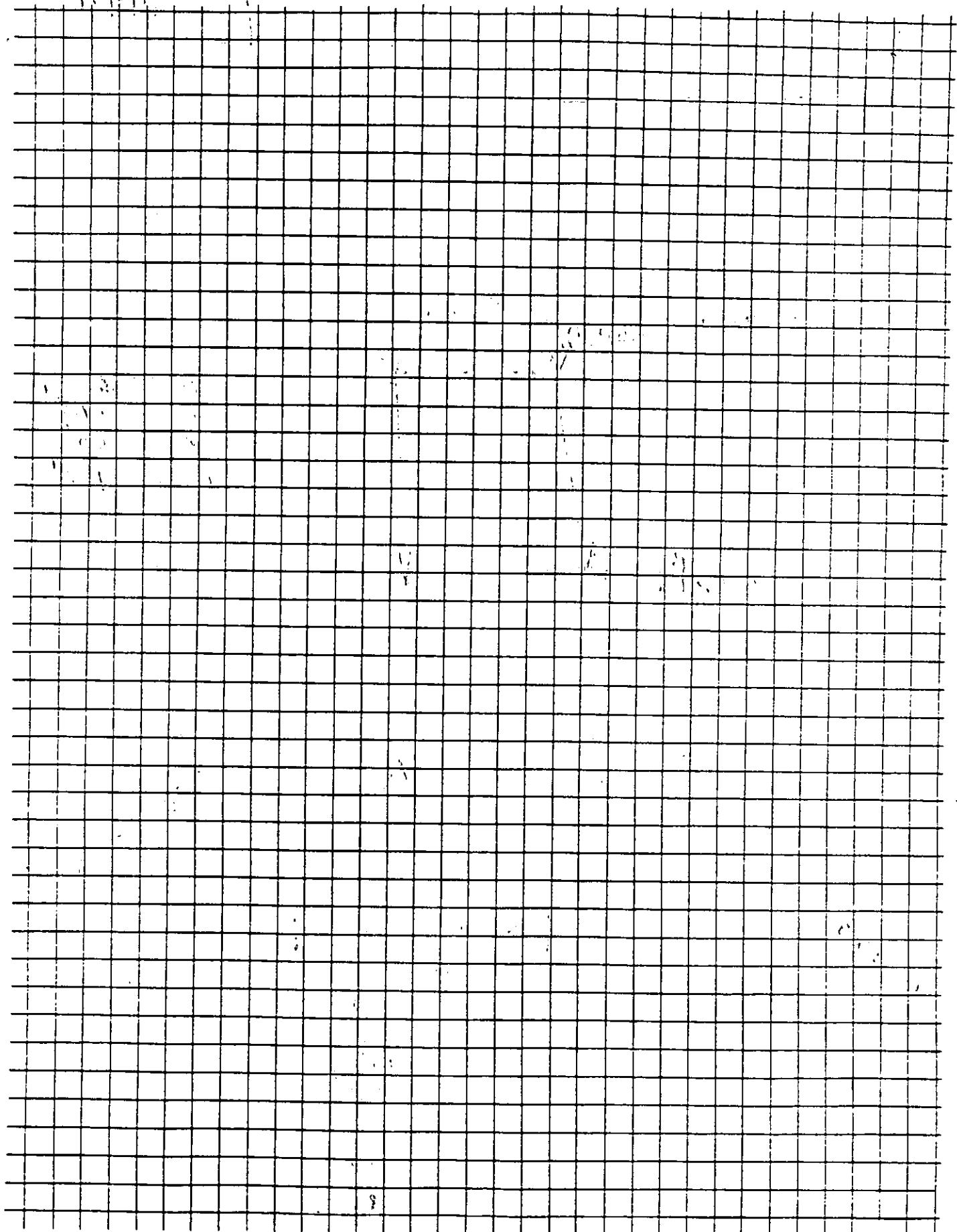
Lot EASEMENT D LOT 2 WATERPOINTE

Hole #	Horizon	Depth (Inches)	Description of color, texture, etc.	Texture Group
1	A	0-8	GRAYISH Brown Sandy Clay Loam	II
	B	8-28	Red/Brown Clay Loam	III
	B	28-60	Red/Brown Sandy Clay Loam	II
	C	60-72	Brown Loam	II
2	A	0-5	Brown Sandy Clay Loam	II
	B	5-30	Red Clay Loam	III
	C	30-60	Red/Brown Loam	II
	C	60-72	OLIVE LOAM FINE	II
3	A	0-8	GRAYISH Brown Sandy Clay Loam	II
	B	8-34	Yellow/Brown Clay Loam	III
	B	34-46	Red/Brown Sandy Clay Loam W/ MICA	II
	C	46-72	Brown Loam TIGHT 60-72	II
4	A	0-4	Brown Clay Loam	III
	B	4-24	Red Clay Loam	III
	B	24-36	Red Loam w/Red Clay Loam Flows	III
	C	36-65	Red Loam	II

DOUG CARPENTER
 3-91-0700
 WATER PONTE
 Sect. 1 - Lot B
 9/19/91



1965-1966
1966-1967
1967-1968
1968-1969



Application for a Sewage Disposal System Construction Permit

Commonwealth of Virginia
Department of Health

For Department Use Only

Health Department
Identification Number 133-91-0700
Map Reference _____

Franklin County

Health Department

Date Received 9/18/91

To Be Completed By The Applicant

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

Owner Doug & Gay Carpenter Address 118 Small Ave. Phone _____
W. Caldwell, NJ. 07006

Agent ENIRTEP INC. Address 1865 Laurel Mtn Dr Phone 387-1753
(Jim Petrine) Salem Va. 24153

Directions to Property 122 North to Right on 616, Left on 942 into Sect 1
Waterpointe, End of Cut-De-Sac.

Subdivision Waterpointe Section 1 Block - Lot 8

Other Property Identification _____

Dimensions/size of Lot/Property 60 x 245 & 143 x 277

Other Application Information

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

II. Residential Use
Termite Treatment Yes No
 Yes No
 Single Family Number of Units _____ Number of Bedrooms 3
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 _____

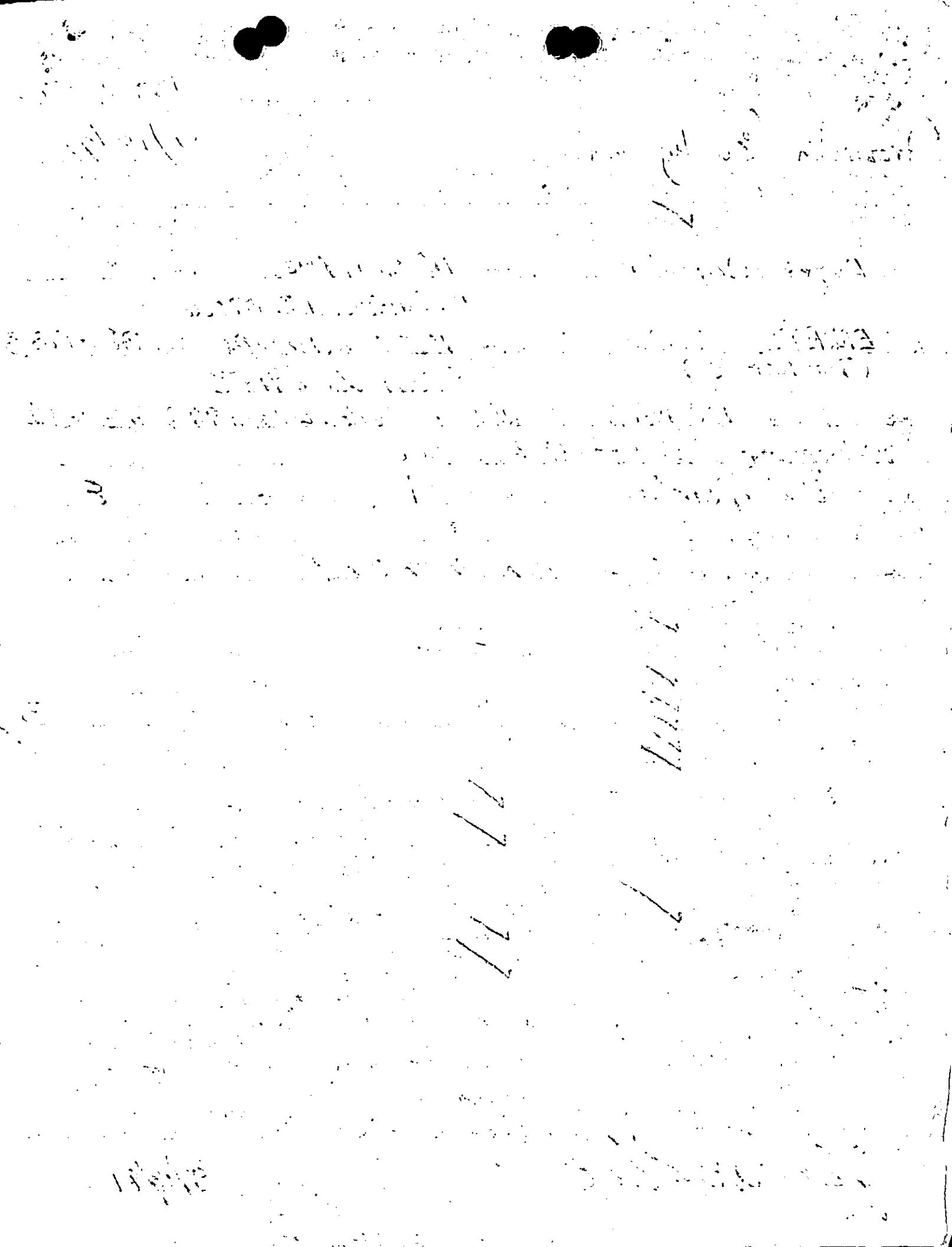
V. Proposed Installation:
If other, describe _____ Septic tank and drainfield Other

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 B. Petrine
Signature of owner/agent

9/18/91
Date



MOUNTAIN

LAKE

~~3:00~~ 3:00

WELL/SEWAGE APPLICATION

OWNER Carpenter, Doug GRID 32 - SEE FILE
AGENT: PERMIT I.D. NO 133-91-0700

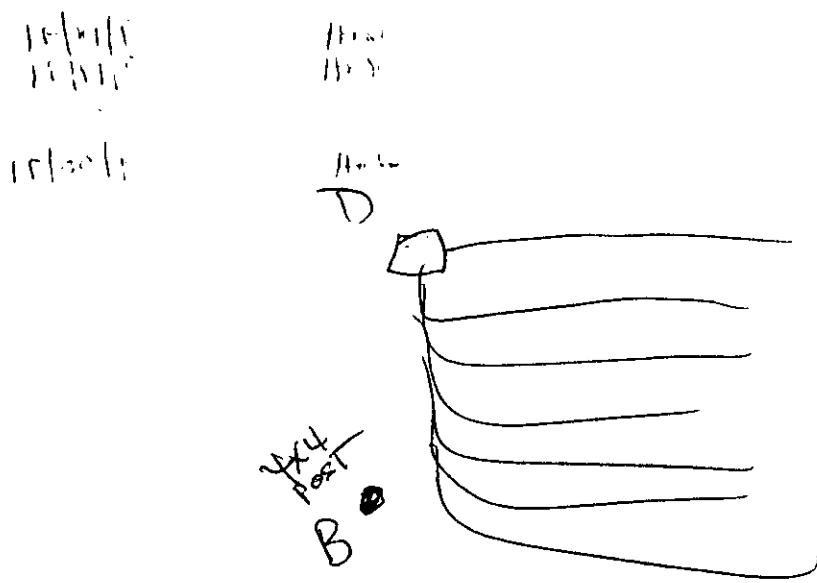
TAG SHEET

	INITIALS	DATE
APPLICATION RECEIVED:	<u>dm</u>	<u>9/18/91</u>
APPLICATION REVIEWED:	<u>TB</u>	<u>9/20/91</u>
FEES DETERMINATION	<u>dm</u>	<u>9/18/91</u>
ASSIGNED TO:		
SITE VISIT SCHEDULED:	<u>Katt</u>	<u>9/18/91</u>
SITE VISIT MADE:	<u>Katt</u>	<u>9/19/91</u>
FOLLOW-UP VISIT:		
FOLLOW-UP VISIT:		
ISSUE/DENY DRAFTED:	<u>Katt</u>	<u>9/20/91</u>
ISSUE/DENY REVIEWED:	<u>TB</u>	<u>9/20/91</u>
ISSUE/DENY COUNTERSIGNED:	<u>TB</u>	<u>9/20/91</u>
ISSUE/DENY MAILED:		

INCOMPLETE STATUS

SECOND NOTICE SENT
THIRD/FINAL NOTICE SENT
FILE CLOSED AS INCOMPLETE

★ corner of D/F lot



$$AD = 89$$

$$BD = 59 \frac{1}{2}$$

DATE 09-03-91

FRANKLIN COUNTY
REQUEST FOR SEPTIC TANK PERMIT
301 VIRGIL GOODE BUILDING
ROCKY MOUNT, VA. 24151
TELEPHONE (703) 483-3047 OR 483-3027

PERMIT # 4330

MAP NUMBER	DISTRICT	ZONING CODE	BOCA CODE	TYPE CODE
32 3 98	GC	RPD	R3	101

** PROPERTY LOCATION **
122N R616 L942 L INTO SECTION 1 WATERPOINT LOT WILL BE AT THE END OF CUL-DE-SAC

*** REMARKS ***

APPROVED SUBDIVISION

** DESCRIPTION OF USE **

** SUBDIVISION **
WATERPOINTE, LOT 8, SEC 1

** ACREAGE **
.6830

N	N	EEEE	W	W
NN	N	E	W	W
N	N	EEE	W	W
N	NN	E	W	W
N	N	EEEE	W	W

NEW PERMIT

DATE: 09/03/91

AMOUNT:

SIGNATURE OF APPROVING AUTHORITY

Luc/BB

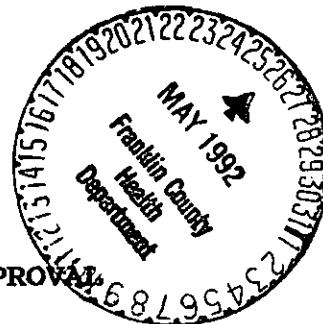
SIGNATURE OF APPLICANT

June 30
James S. Petrie

DATE

9-3-91

SETBACK REGULATIONS ARE THE RESPONSIBILITY OF THE APPLICANT.



ENGINEER'S CERTIFICATE OF INSPECTION/APPROVAL

TO: Franklin County Health Department
P. O. Box 249
Rocky Mount, Virginia 24151

This is to report that, to the best of my knowledge and belief, that the sewerage disposal system or parts thereof have been inspected and found to be in accordance with the plans and specifications prepared by this firm for the following project, with the exception that the electrical junction in the wet well is taped and the Nema 4 junction box specified was not installed:

Sewerage System Layout For Lot 8 Section 1

Waterpointe, dated March 25, 1992, prepared by

B. R. Shrader, P. E.

Health Department I. D. # 133-91-0700

SIGNED: John Doe

DATE: May 21, 1992

FIRM NAME: Shrader Engineering & Land Surveying, Inc.

FIRM ADDRESS: 119 South Bridge Street - P. O. Box 647
Bedford, Virginia 24523
(703) 586-4710

cc: Mr. Jim Petrine
1865 Laurel Mountain Drive
Salem, Virginia 24153

