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Parcel ID: 034513

FORE LLC
1581 TURNBERRY LN

CURRENT RECORD

1 of 1

[Return to Search Results](#)**Owners**

Owner1	FORE LLC
Owner2	
Mailing Address	P O BOX 187
Mailing Address2	
City, State, Zip	CHRISTIANSBURG VA 24068

REPORTS[Property Record Card](#)**Parcel**

Tax Map Number	119- 5 A
Property Address	1581 TURNBERRY LN
City, State, Zip	RINER VA 24149
Neighborhood Code	MC330000
Class Code/Description	4000/Commercial/Industrial
Use Code/Description	462/GOLF DRIV RANGE & MINI GOLF COURSES
Primary Zoning Code/Desc	PUDRES/PLANNED UNIT DEV. - RESIDENTIA
Restriction Code/Description 1	/
Restriction Code/Description 2	/
Restriction Code/Description 3	/
Land Use Program	NO
Notes:	PB 2013008735
Notes:	
Notes:	
Notes:	
Notes:	
Notes:	

[Printable Summary](#)[Printable Version](#)**Legal Description**

Legal Description 1	AUBURN HILLS GOLF CLUB
Legal Description 2	REMAINING ACRES
Tax District Code/Description	MR/RINER
Deeded Acres	156.664
Deed Book	2013
Page	008735

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1581 Turnberry

Parcel ID	034513
Tax Map ID	119- 5 A
Owner	FORE LLC
Site Address	1581 TURNBERRY LN
Community	RINER
Mailing Address	P O BOX 187
Postal Community	CHRISTIANSBURG VA 24068
Deeded Acres	156.664
Legal Description	AUBURN HILLS GOLF CLUB
Legal Description	REMAINING ACRES
Subdivision Name	AUBURN HILLS GOLF CLUB
Subdivision Lot	A
Plat Book/page	0018-0178
Deed Book	2013
Deed Page	8735
2015 Land Value	\$783,300
2015 Building Value	\$642,700
2015 Total Value	\$1,426,000
2015 Land Use Value	\$0
Assessment District	MR
Zoning	PUDRES
Assessment Neighborhood	MC330000
Recent Sale Date	05-SEP-13
Commercial Year Built	1999
Business Name	AUBURN HILLS GOLF CLUB LLC



M 1:26312



Sewage Disposal System Operation Permit

Commonwealth of Virginia
Department of Health

Health Department
Identification No. 83-160-0294
Montgomery County Health Department

Tax Map No. Grid 119

Freddie Altizer

to Operate a (Type) I Sewage Disposal System Having a Design Capacity of 450 is Hereby Granted Per
Riner, Rt. 8, First left hand turn after R.&J. Market.

SUBDIVISION	SECTION/BLOCK	LOT
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

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

with Previously Issued permits N/A Dated N/A

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 of
Issuance of an Operating Permit does not imply or Guarantee that the Sewage Disposal System will Function for any Specific
Period of Time.

VARIANCES GRANTED

☒ NONE ☐ SEE ATTACHED

SPECIAL CONDITIONS

☒ NONE ☐ SEE ATTACHED

October 18, 1983

Effective Date

Donald C. Hester
Recommended (Sanitarian)

[Signature]
Approved (State Health Commissioner)

Completion Statement

Commonwealth of Virginia
State Department of Health

Health Department
Identification Number 83-160-0294

Montgomery County Health Department

Name of Company/Corporation/Individual: B.C. Byrd

Address: Telephone: 1

Owner's Name Freddie Altizer

Owner's Address Rt. 2 Box 11, Riner, Virginia 24149

Location of Installation: Lot N/A Block N/A

Section: N/A Subdivision: N/A

Other: Riner, Rt. 8, First left hand turn after R.S. J. Market.

I hereby certify that the onsite sewage disposal system has been installed and completed in accordance with the construction permit issued (date) September 13, 1983 and is in compliance with Part D of the Sewage Handling and Disposal Regulations and when appropriate the plans and specifications for the project.

16-18-88 B.C. Byrd

Date

Signature and Title

Sewage Disposal System Construction Permit

PAGE 1 OF 2

Commonwealth of Virginia
Department of Health



Health Department
Identification Number
Map Reference

83-160-0294

Health Department

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 Freddie Altizer Telephone 382-8919
Address Route 2 River Va
For a Type I Sewage disposal system which is to be constructed on/at Route 8 first left
land near Altizer R+J marked
Subdivision N/A Section/Block N/A Lot N/A
Actual or estimated water use _____

DESIGN

Water supply, existing: (describe) Existing

To be installed: class _____
cased _____ grouted _____

Building sewer:
6" I.D. PVC 40, or equivalent.
Slope 1.25" per 10' (minimum).
☐ Other _____

Septic tank: Capacity 1000 gals. (minimum).
☐ Other _____

Inlet-outlet structure:
PVC 40, 4" tees or equivalent.
☐ Other _____

Pump and pump station:
No ☐ Yes ☐ describe and shown design.
if yes: _____

Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent.
☐ Other _____

Distribution box:
Precast concrete with 10 ports.
☐ Other _____

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 _____

Percolation lines:
Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'.
☐ Other _____

Absorption trenches:
Square ft. required 1275; depth from ground surface to bottom of trench 34"; aggregate size 1/2-3/4"; Trench bottom slope 7-8" in length of line; center to center spacing 10'; trench width 5'

NOTE: INSPECTION RESULTS

Water supply location: yes ☐ no ☐ comments
Satisfactory

Building sewer: yes ☐ no ☐ comments
Satisfactory

Pretreatment unit: yes ☐ no ☐ comments
Satisfactory

Inlet-outlet structure: yes ☐ no ☐ comments
Satisfactory

Pump & pump station: yes ☐ no ☐ comments
Satisfactory

Conveyance method: yes ☐ no ☐ comments
Satisfactory

Distribution box: yes ☐ no ☐ comments
Satisfactory

Header lines: yes ☐ no ☐ comments
Satisfactory

Percolation lines: yes ☐ no ☐ comments
Satisfactory

Absorption trenches: yes ☐ no ☐ comments
Satisfactory

Date _____ Inspected and approved by: _____

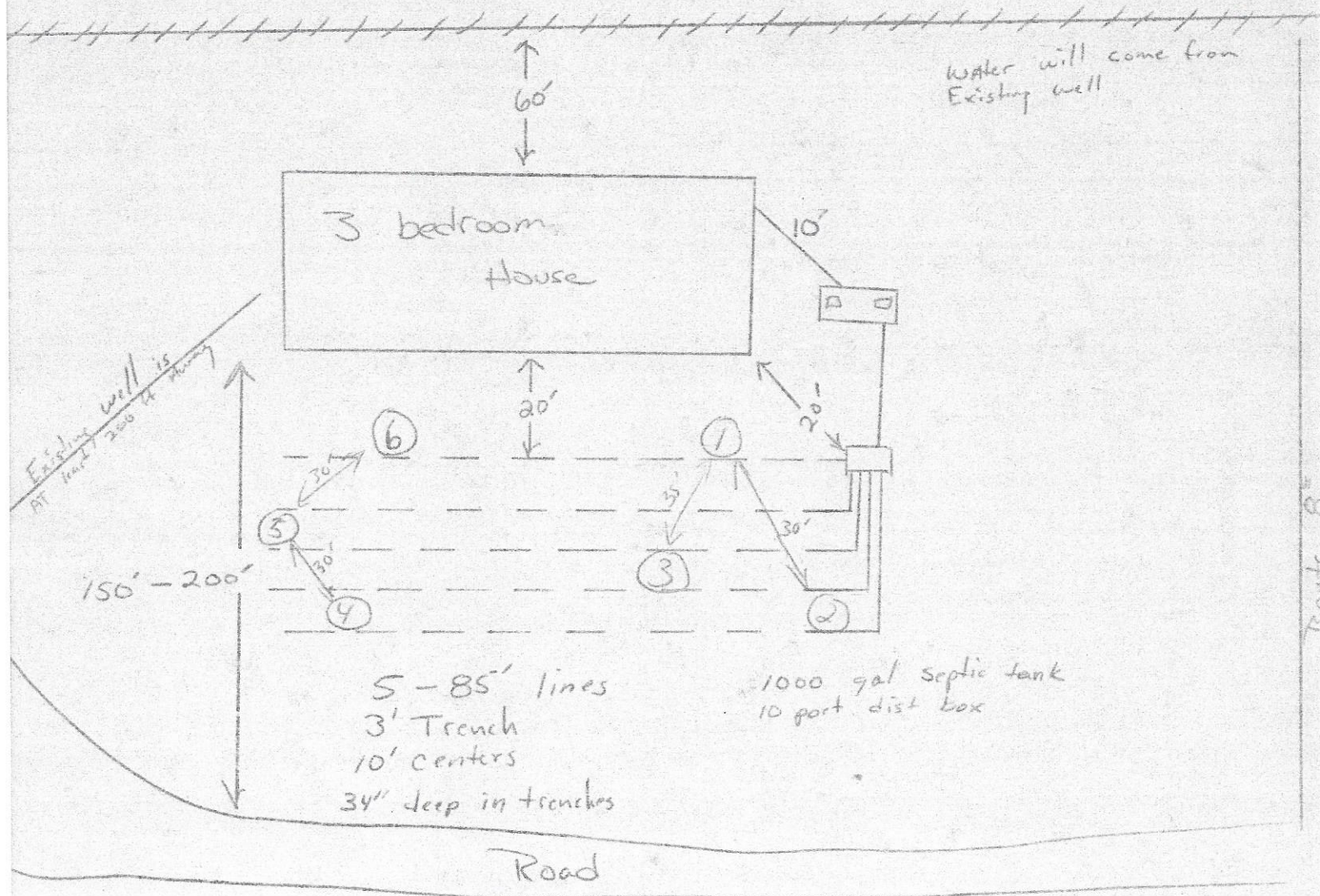
Sanitarian

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.



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. If construction has not commenced within 12 months of date of issuance, the construction permit must be revalidated.

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: 9/12/83 Issued by: Donald J. [Signature]

Sanitarian

Date: 9-13-83 Reviewed by: [Signature]

Supervisory Sanitarian

If FHA or VA financing

Reviewed by Date _____ Date _____

Supervisory Sanitarian

Regional Sanitarian

Soil Evaluation Form

PAGE 1 OF 2Commonwealth of Virginia
Department of HealthHealth Department
Identification Number 83-160-0294
Tax Map Number _____

General Information

Date 9/12 _____ Health Department _____
Applicant Fred Altizer Telephone No. 382-8919
Address Route 2 Box 11 Riner Va
Owner N/A Address N/A
Location Route 8 right past R+S market on left
Subdivision N/A Block/Section N/A Lot N/A

Soil Information Summary

1. Position in landscape satisfactory Yes ☒ No ☐ Describe _____
2. Slope 5 %
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 ☒ No ☐ Texture group I II III IV
Estimated rate _____ min/ inch
7. Percolation test performed Yes ☐ No ☐ Number of percolation test holes _____
Depth of percolation test holes _____
Average percolation rate _____

Name and title of evaluator: Don Moss Sanitarian
Signature: Donald J. Moss

Department Use

- ☒ Site Approved: Drainfield to be placed at 34" depth at site designated on permit.
☐ Site Disapproved:

Reasons for rejection:

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

Date of Evaluation 9/9

Profile Description SOIL EVALUATION REPORT

 Health Department
 Identification No. 85-160-0294
Page 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 to this form.

Hole #	Horizon	Depth (inches)	Description of color, texture, etc.	Texture Group
1	A	0-3"	Top Soil light Brown	II
	B	3"-11"	light Brown w/ shale frag	II
	C	11"-48"	Silty clay loam / w/ shale frag	III
2	A	0-11"	Top Soil light Brown	II
	B	11"-18"	Pale yellow compacted silt loam	III
	C	18"-27"	compacted silt loam	III
	D	27"-48"	Silty clay loam w/ weathered shale	III
3	A	0-8"	Top Soil light Brown	II
	B	8"-15"	Pale grey compacted silt loam	III
	C	15"-48"	yellow brown / shale weathered / compacted	III
4	A B C	Same	As Pit 3 in depth + structure	
5	A B	0-5"	Top Soil	II
		5"-9"	Restrictive Pan	IV
		9"-60"	clay loam yellow Brown w/ sub angular Black structure	III
6	A	0-5"	Top Soil light Brown	II
	B	5"-22"	yellow soil compaction w/ blocky structure	III
	C	22"-60"	yellow Brown w/ weathered shale from Silty clay loam	III

Remarks:

Line Fence

Rt 8

Proposed
Home

Approximately
2 acres
in lot

← Approx-500 ft →
Drive way

← Approx-200 ft. →

Driveway
to
road

Water Supply and/or Sewage Disposal System Construction Permit

Commonwealth of Virginia

Department of Health

Montgomery Co. Health Department

Health Department

Identification Number 160-99-0320

Map Reference 119-63-#52

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 Auburn Hills Golf Club

Telephone 381-4995

Address 1581 Turnberry Ln, River, VA 24140 For a Type ☐

Sewage Disposal System or Well to

be constructed on/at

Subdivision ☐ Section/Block ☐ Lot ☐ Actual or estimated water use ☐

DESIGN

NOTE: SEWAGE DISPOSAL SYSTEM INSPECTION RESULTS

Water supply, existing: (describe) ☐

Water supply location: Satisfactory yes ☐ no ☐ comments

To be installed: class IV
cased 20' Below pond grouted 20' Below pond

Completion Report

G. W. 2 Received: yes ☐ no ☐ not applicable ☐

Building sewer:

Building sewer: yes ☐ no ☐ comments
Satisfactory

☐ I.D. PVC Schedule 40, or equivalent.

Slope 1.25" per 10' (minimum).

☐ Other ☐

Septic tank: Capacity ☐ gals. (minimum).

☐ Other ☐

Pretreatment unit: yes ☐ no ☐ comments
Satisfactory

Inlet-outlet structure:

Inlet-outlet structure: yes ☐ no ☐ comments
Satisfactory

PVC Schedule 40, 4" tees or equivalent.

☐ Other ☐

Pump and pump station:

Pump & pump station: yes ☐ no ☐ comments
Satisfactory

No ☐ Yes ☐ describe and show design.

if yes: ☐

Gravity mains: 3" or larger I.D., minimum 6" fall per 100', 1500 lb. crush strength or equivalent.

☐ Other ☐

Conveyance method: yes ☐ no ☐ comments
Satisfactory

Distribution box:

Distribution box: yes ☐ no ☐ comments
Satisfactory

Precast concrete with ☐ ports.

☐ Other ☐

Header lines:

Header lines: yes ☐ no ☐ comments
Satisfactory

Material: 4" I.D. 1500 lb. crush strength plastic or equivalent from distribution box to 2' into absorption trench. Slope 2" minimum.

☐ Other ☐

Percolation lines:

Percolation lines: yes ☐ no ☐ comments
Satisfactory

Gravity 4" plastic 1000 lb. per foot bearing load or equivalent, slope 2" 4" (min. max.) per 100'.

☐ Other ☐

Absorption trenches:

Absorption trenches: yes ☐ no ☐ comments
Satisfactory

Square ft. required ☐: depth from ground surface to bottom of trench ☐; aggregate size ☐:

Trench bottom slope ☐;

center to center spacing ☐; trench width ☐

Depth of aggregate ☐;

Trench length ☐; Number of trenches ☐

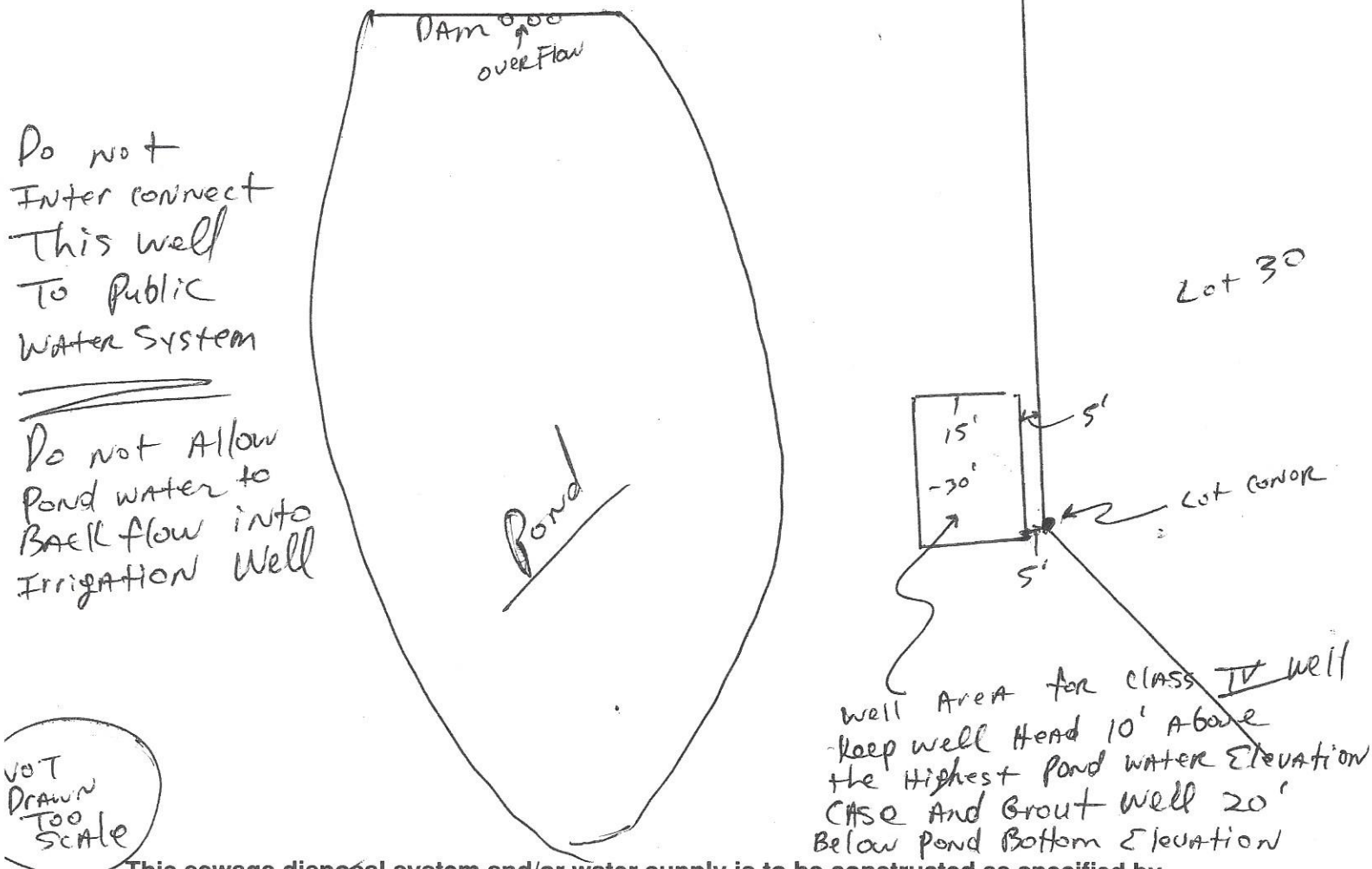
Date ☐ Inspected and approved by:

Sanitarian

Schematic drawing of sewage disposal and/or water supply 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.



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.

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: 6/8/99 Issued by: [Signature]
Sanitarian

Date: _____ Reviewed by: _____
Supervisory Sanitarian

This Construction
Permit Valid until
12/8/2003

If FHA or VA financing

Reviewed by Date _____ Date _____
Supervisory Sanitarian Regional Sanitarian

Commonwealth of Virginia Water Well Completion Report

Owner Auburn Hills Golf Club
Address 1581 Turnberry Lane
Riner VA
Phone 381-4995 Wk. Phone _____
Location Riner

Gen. Contractor

Tax Map ID _____
VDH Permit 160-99-0320
VWCB Permit _____
VWCB ID _____
County MONTGOMER

Well Data

General Information

Drilling Method Air Rotary Date Completed 06/23/1999 Well Class IV
Total Well Depth 300 Well Disinfected Yes
Static Level _____ Disinfectant HTH 70%
Well Yield (GPM) 100+ Amount Used 4oz./100ft. water

Hole Size:

12 inches from 0 ft. to 35 ft.
10 inches from 35 ft. to 147 ft.
5.990 inches from 147 ft. to 300 ft.

Casing Size:

8 in. 0 ft. to 35 ft. Mat. Steel Wall 188
6 1/8 in. 0 ft. to 147 ft. Mat. PVC Wall SDR-21
_____ in. _____ ft. to _____ ft. Mat. _____ Wall _____

Grouting:

Grout Type Benseal Bentonite
Grout Depth 20 to 90 feet

Fracture/Water Zones:

Zone 1: 225
Zone 2: 230
Zone 3: 265

Driller's Log

0-50 BRN SHL/DRT
70-72 STK / BN SHL
72-98 BS BN SHL
130 20+ GPM
135 SHK
110-147 SLOTS
180-190 BN
192 RD GY
225 LRG FR /SM CVING
230-240 BN FR INC FLW CVG
240 CHK 60 GPM DK GY
265 RGH FRS
285 INC FLW
300 100+ GPM

Use Data

Private Well: ☐ Domestic ☐ Agricultural ☒ Industrial
Public Well: ☐ Community ☐ Non Community

Abandonment Information

Permit No.: _____
Casing Removed? ☐ Yes ☐ No If Yes, Depth to which casing was removed: _____ ft.
Depth & Type of Fill: _____ Source of Fill: _____
Bentonite Plugs: from _____ ft. to _____ ft. from _____ ft. to _____ ft.
Method of Permanently Marking Location _____

Driller Certification

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

Haynes Drilling Company
Christiansburg, VA 24073
(540) 382-8251

Driller's Signature P.A. Haynes, MGWC

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Contractor's No. VA - 2705 - 004290 Date 07/19/1999