

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 2

INDEXED

DATE 10/20/72

INDEXED

Salient Trenching Company

IS PERMITTED TO INS-ALL

ALTER X

ADDRESS 6001 West Club Road, Ellicott City, Maryland 21227 PHONE 736-2300

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD 4225 New Club Road LOT _____

PROPERTY OWNER Ed Langford

ADDRESS _____

SPECIFICATIONS REPAIR

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 225 & TANK CAPACITY 500.

OTHER REPAIR - 300 sq. ft. of drain fields.

BLDG. PERMIT SIGNED
AND RETURNED 6/11/81
46699 for Kitchen Fall Wind B.R.

PLANS APPROVED BY P. P. Prosser DATE 10/20/72

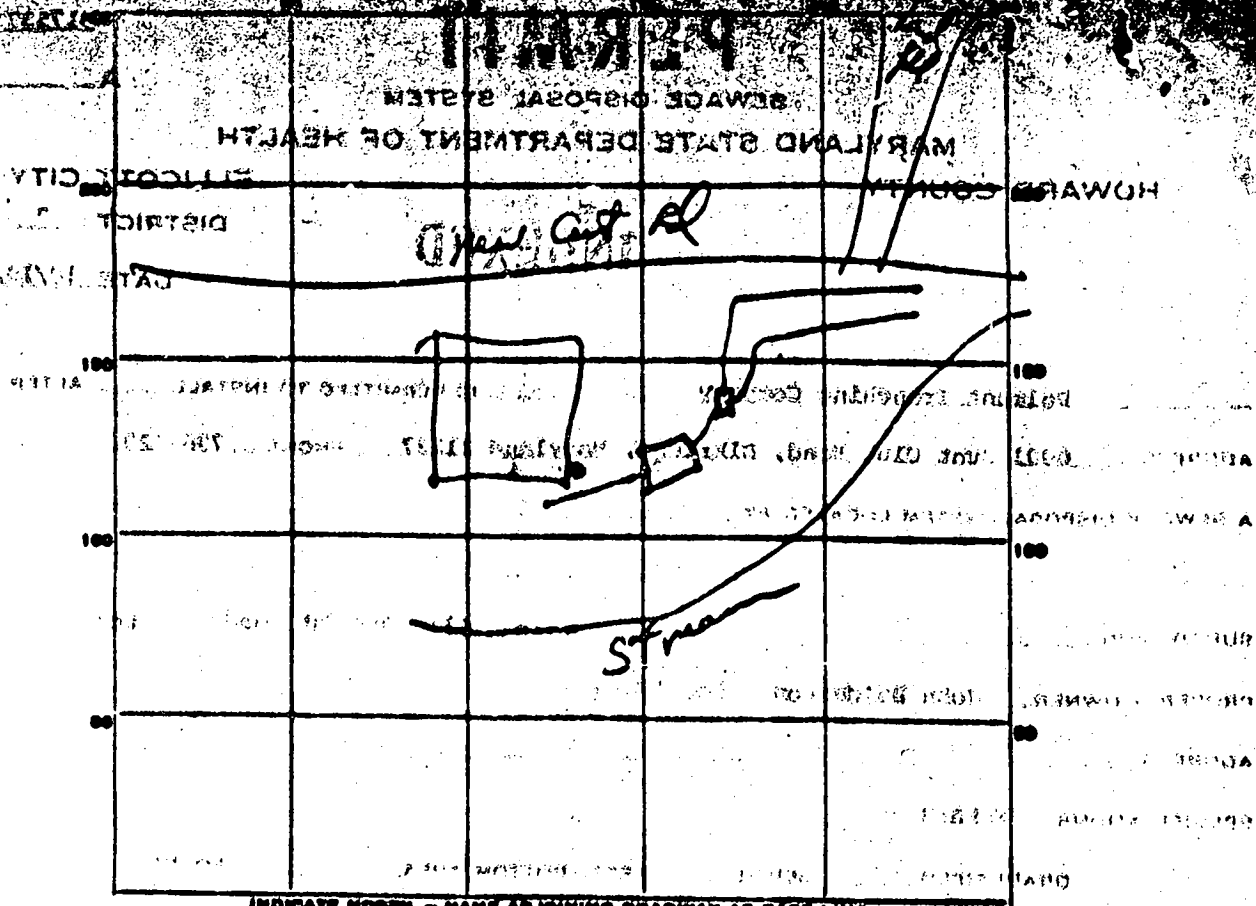
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

Add'l ca. Shed
BLDG. PERMIT SIGNED
AND RETURNED 5-13-96
Serial # 64818

17535

56605D



PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

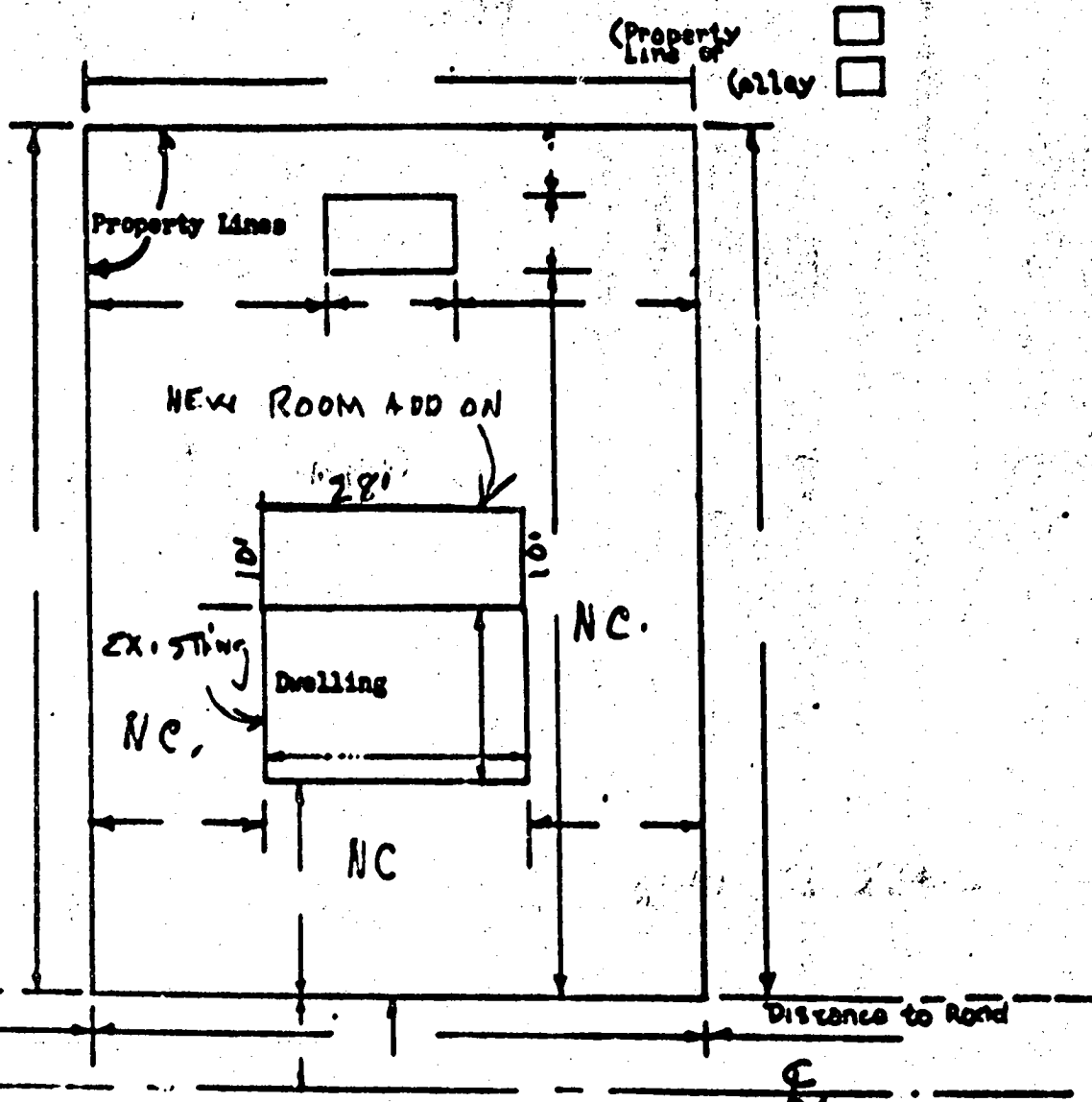
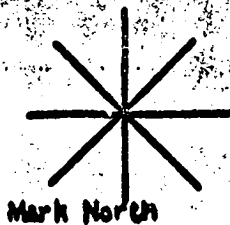
SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS *initial imp. several trenches deeper than permitted, trenches back filled sufficiently, gravel in and system accepted.*

DATE SYSTEM APPROVED 1972 INSPECTOR J.F.

PLOT PLAN



Road Name: 4336 NEW CUT ROAD

Show all right of ways, easements, storm drains, sanitary sewers and footways

Additional Information

Interior Lot _____ Corner Lot _____

ALTERATIONS & ADDITIONS: Show property dimensions, abutting roads, locations of house of septic system and/or water well and all existing and proposed buildings and additions.

DOG RUNS, BARNs, STABLES, ETC: Same as alterations & additions. Also show drawings, sewage system and wells on adjacent properties in close proximity.

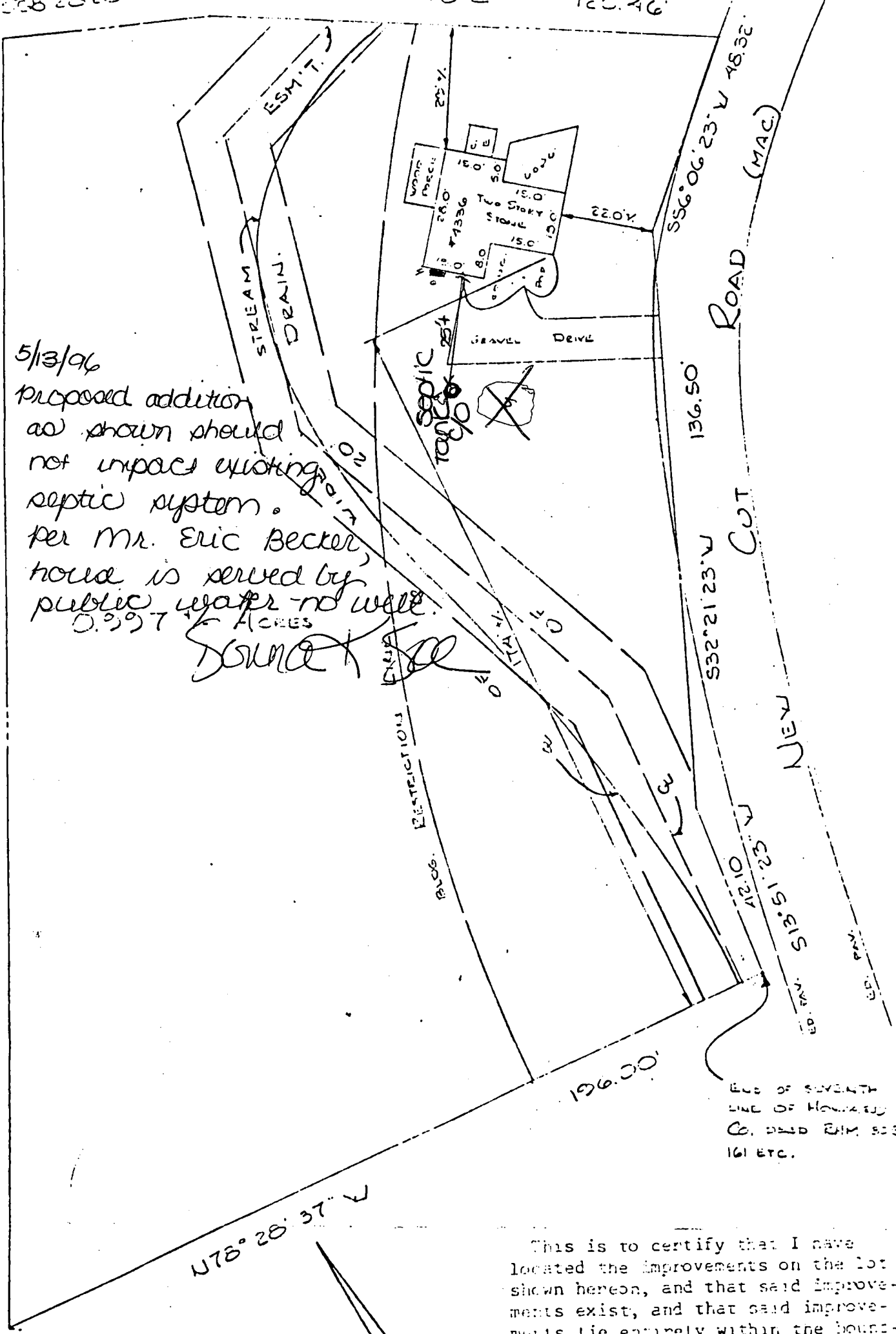
128° 28' 20" E 122.43' 50° 05' 18" E 120.46'

306.05'

N 36° 11' 03" E

5/13/96
 proposed addition
 as shown should
 not impact existing
 septic system.
 per Mr. Eric Becker,
 town is served by
 public water - no well.
 0.997 ACRES

SOUND



This is to certify that I have located the improvements on the lot shown hereon, and that said improvements exist, and that said improvements lie entirely within the boundaries.



J. S. T. ENGINEERS CO., INC.
 4631 1/2 BELAIR ROAD
 BALTIMORE, MARYLAND 21206

SCALE: 1" = 30' DATE: 7-10-81

NOT INTENDED TO BE USED AS EVIDENCE IN COURT

LAYOUT _____ INSP 4 _____

INSP 2 _____ INSP 5 _____

INSP 3 _____ INSP 6 _____

ISSUE DATE: 5/22/68

APPROVAL DATE: _____

P _____

A 56605-H

**PERMIT
INDEXED**

TAX ID #03-294188

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH**

_____ IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: _____

SUBDIVISION: Allenford LOT NUMBER: 18-C, Sec 2

ADDRESS: 10224 Cabery Drive PROPERTY OWNER: Richard Dohler

SEPTIC TANK CAPACITY (GALLONS): _____ OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	
NOTES:	

PLANS APPROVED: _____ DATE: _____

NOTE: PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS
RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

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