

5/25/00 10:30 AM
5/26/00 12-1 AND LATER
5/30/00 10:00 C.O.

04-327713

PERMIT

SEWAGE DISPOSAL SYSTEM

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 513584-B
A REPAIR
ISSUE DATE 5-9-2000
APPROVAL DATE 5/30/00

INDEXED

Arnolds Backhoe & Septic Service IS PERMITTED TO INSTALL ALTER x
ADDRESS P.O. Box 15, Woodbine, MD 21797 PHONE 410-795-7873
SUBDIVISION _____ LOT NUMBER _____ ADDRESS 16215 Carrs Mill Road
PROPERTY OWNER Phillip Abel PROPERTY OWNER'S ADDRESS Same
SEPTIC TANK CAPACITY _____ GALLONS
PUMP CHAMBER CAPACITY _____ GALLONS
NUMBER OF BEDROOMS 3
SQUARE FEET PER BEDROOM _____
LINEAR FEET OF TRENCH REQUIRED _____

TRENCHES: Trenches to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____
feet below original grade. feet of stone below distribution box.

LOCATION: _____

REPAIR - PURPOSE- Existing septic system has failed.
Call for inspection when ground is opened so sanitarian can recommend repair. 4-9-00
5/25/00 To connect distribution box to drywell. Run 2-100' trenches
towards right lot line. Invert 6.5', depth 10', 3.5' of stone
below invert (BPA)

PLANS APPROVED _____ DATE _____

PERMIT VOID AFTER 2 YEARS

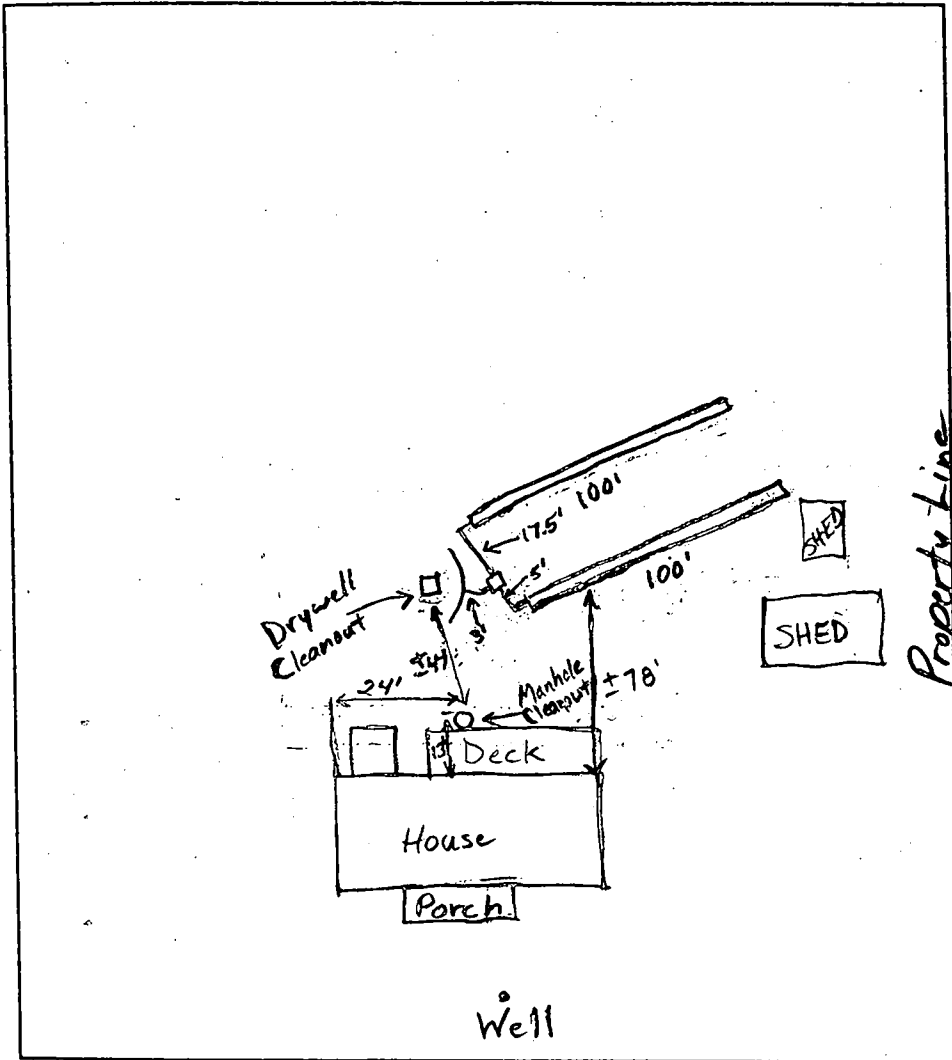
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE
- NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED
- NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED
- NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

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

513584 B

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 2.0'
 TRENCH INLET DEPTH 6.5'
 TRENCH BOTTOM DEPTH 10'
 DEPTH OF STONE 3.5'
 NUMBER OF TRENCHES 2
 TOTAL TRENCH LENGTH 200'
 ABSORBENT AREA 700 sq. ft.
 DISTRIBUTION BOX LEVEL OK
 BAFFLE IN DISTRIBUTION BOX Yes

SEPTIC TANK DATA

SEPTIC TANK ? GALLONS
 MANHOLE RISER Yes
 6 INCH INSPECTION PORT No
 4" House
PUMP CHAMBER DATA N/A
 PUMP CHAMBER GALLONS ✓
 MANHOLE RISER ✓
 ALARM ✓
 PUMP PERFORMANCE TEST ✓

Carr's Mill Road
 PRE-CONSTRUCTION INSPECTION: 5/25/00 To connect distribution box to drywell
and run 2-100' trenches towards right lot line. Trenches 10' deep, inlet at 6.5' (BB)
 INSPECTION COMMENTS: 5/26/00 First trench dug, second started. Gave per-
mission to stone and leave trench ends open. (BB) 5/30/00
Everything O.K. Can cover. (BB)

INSPECTOR B. Baker DATE SYSTEM APPROVED 5/30/00

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Phillip Abel

ADDRESS 16215 Carrs Mill Road PHONE 301-854-6287
Woodbine, MD 21297

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. #12

ROAD AND DESCRIPTION _____

TAX MAP 8 PARCEL # 213 Grid 13

Built 1967

SIZE OF LOT _____ TYPE BLDG. Single Family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE

FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO

COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____ James V. Harrison A.M.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0' (1)
 Or-Brown
 Or-Red
 Clay
 Loam

5'
 Transition
 Layer

7'
 Brown-Red
 Sa. Clay
 Loam

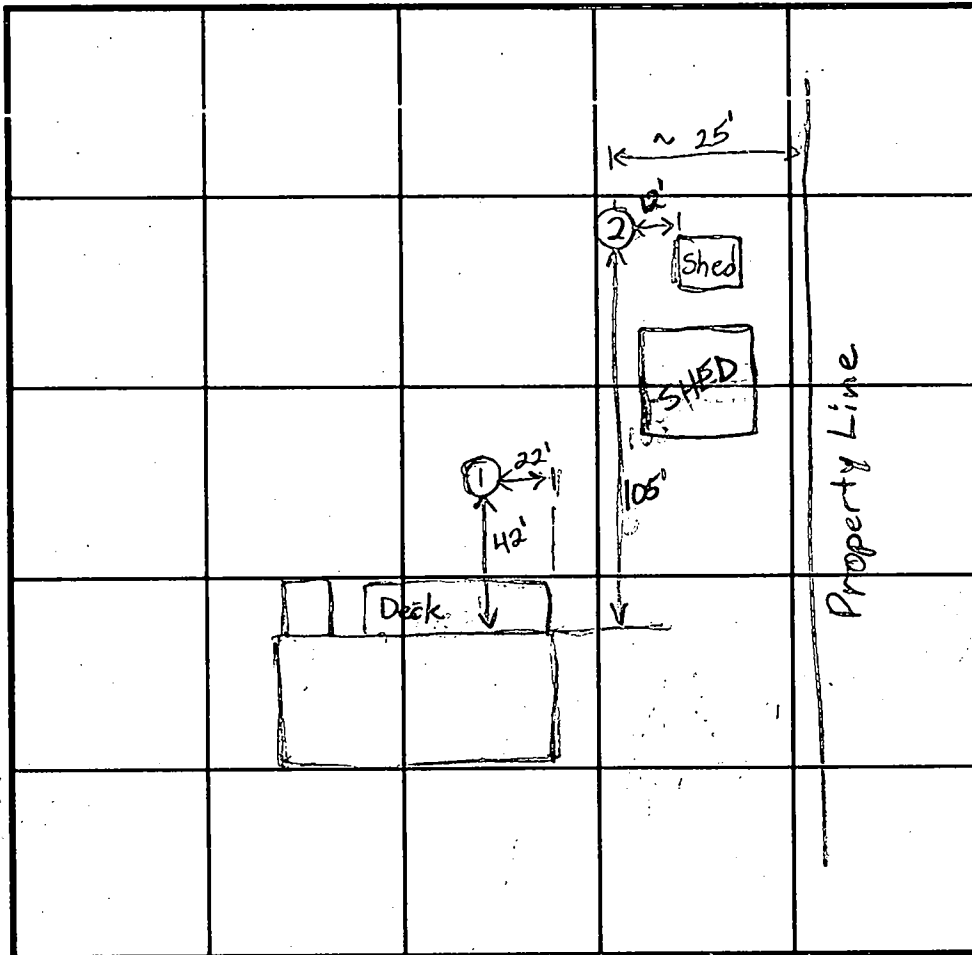
14.5'
 10%
 Rock

(2)

Or-Brown
Clay Loam

8'
 Brown-Red
 Sandy Clay
 Loam

10'
 5% Rock



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Carr's Mill Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/25/00	1A	7' / 14.5'	11:55		Pulled 12:20 - Slow		Slow
	2	10' / 14.5'					
	1B	9.5'	1:32	1:39	1:39	1:55	16min

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

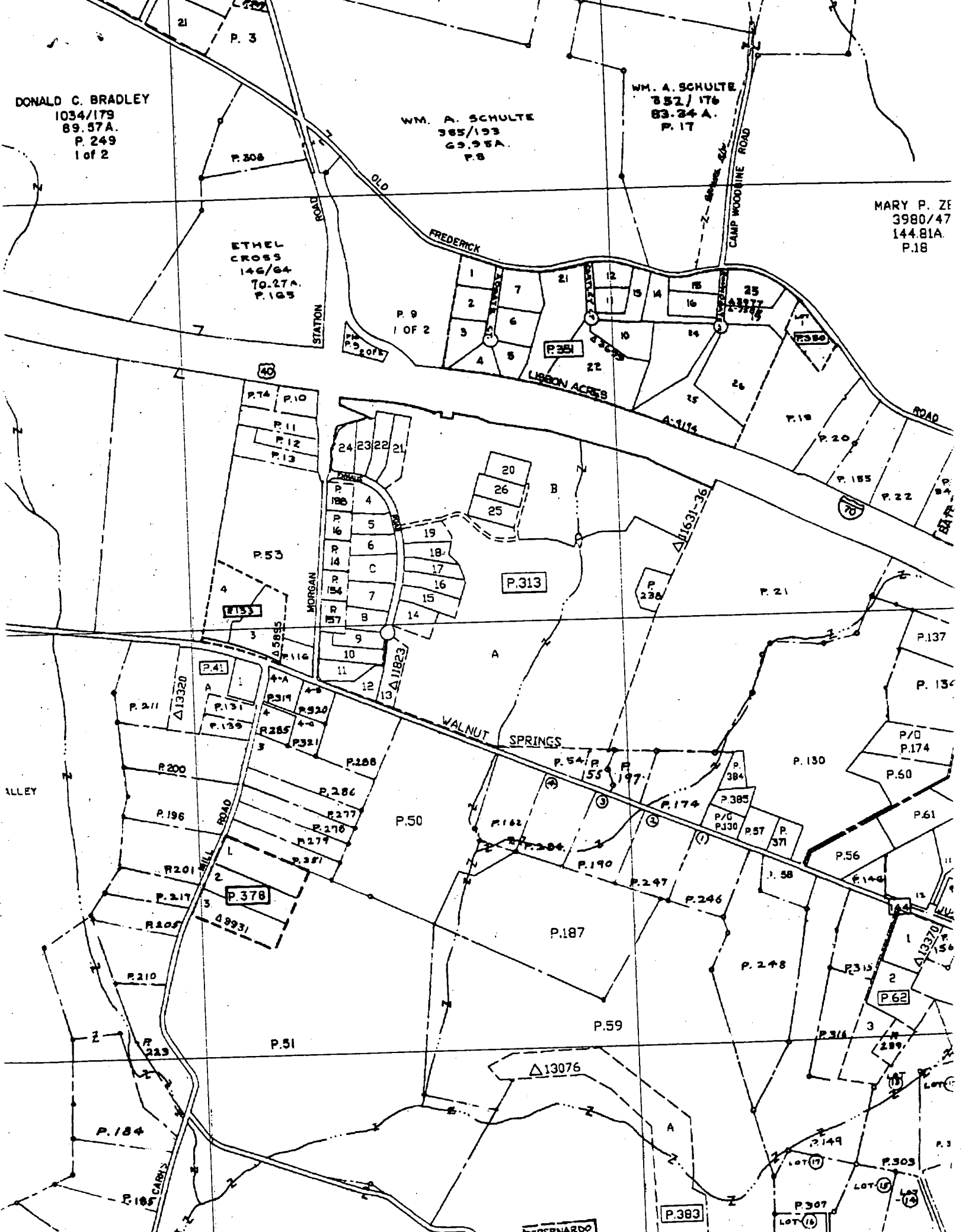
DONALD C. BRADLEY
1034/179
89.57A.
P. 249
1 of 2

WM. A. SCHULTE
385/193
69.95A.
P. 8

WM. A. SCHULTE
352/176
83.24 A.
P. 17

MARY P. ZE
3980/47
144.81A.
P. 18

ETHEL
CROSS
146/64
70.27A.
P. 105



DAVID DeBERNARDO

DeBERNARDO

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