

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 11/4/04

PERMIT

P 521564-A

APPROVAL DATE: 12/17/04

TAXID# 05-371848

A 514262-A

*RPS#
371848*

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

Fyock Septic Service IS PERMITTED TO INSTALL ALTER

ADDRESS: P. O. Box 89, Glen Elg 21737 PHONE NUMBER: 410-988-9270

SUBDIVISION: Beaufort Park LOT NUMBER: 9

ADDRESS: 8526 Clarkson Drive PROPERTY OWNER: George Cooper

SEPTIC TANK CAPACITY (GALLONS): 1000 + 750 GAL EXISTING TANK = 1750

PUMP CHAMBER CAPACITY (GALLONS): _____

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:	
PURPOSE:	Adding 1000 Gallon tank to existing 750 gallon septic tank in support of building permit B00150603 to add bedrooms to a total of 6.

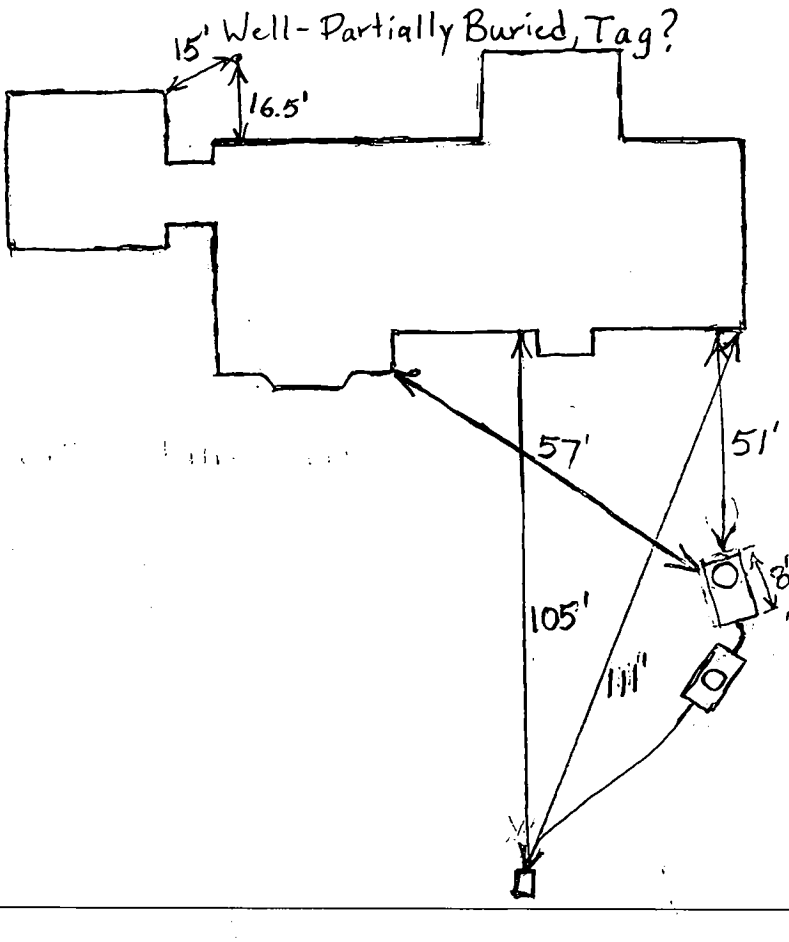
PLANS APPROVED: Kacie Noonan DATE: _____

- 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

NEITHER THE HOWARD COUNTY COUNCIL OR 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

AS14262-A

NOT TO SCALE



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
_____	_____	_____
NUMBER OF TRENCHES _____		
TOTAL LENGTH _____		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL _____		
DISTRIBUTION BOX BAFFLE _____		
DISTRIBUTION BOX PORT _____		

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL

CAPACITY 1000 GAL

SEAM LOC Top

TANK LID DEPTH 4.5'

BAFFLES Yes

BAFFLE FILTER No

MANHOLE LOC Middle

6" PORT LOC None

WATERTIGHT TEST No

SEPTIC TANK 2 LEVEL N/A

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

PRE-CONSTRUCTION _____

INSTALLATION 12/17/04 New 1000 gallon septic tank installed after existing tank. Told Fyorks that tank was too deep. They said they would guarantee tank integrity. Existing midseam tank almost same depth. Too late in day to get Babylon back out before start of weekend. Will let cover so that it is not open all weekend. (BB)

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 12/17/04

9/19/00
9/20/00

PERMIT

SEWAGE DISPOSAL SYSTEM

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

P 514262-A

A REPAIR

ISSUE DATE 9/19/2000

INDEXED

APPROVAL DATE 9/20/00

Jack Fyock Septic Service TAPED A 05-371848 IS PERMITTED TO INSTALL ALTER X

ADDRESS P.O. Box 89 Glenelg, MD 21737 PHONE 410-988-9270

SUBDIVISION Beaufort Park LOT NUMBER 8 BL. H ADDRESS 8526 Clarkson Drive

PROPERTY OWNER Dan Whalen PROPERTY OWNER'S ADDRESS Same

SEPTIC TANK CAPACITY _____ GALLONS

PUMP CHAMBER CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

SQUARE FEET PER BEDROOM _____

NEAR FEET OF TRENCH REQUIRED _____

NEIGHBORING WELL
DIRECTLY DOWNSLOPE TO LEFT
SIDE OF PROPERTY

DRY WELL IN RIGHT FRONT LOT CORNER
RECOMMENDED; CONTRACTOR REPORTS
DRY WELL LIDS NO LONGER
AVAILABLE EXCEPT BY CUSTOM ORDER.

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

LOCATION: _____

REPAIR - PURPOSE - Existing system has failed.

Call for inspection when ground is opened so sanitarian can recommend repair. 9/18/00

SOILS GOOD 3-14' INSTALL 3 TRENCHES @ 40' EACH IN
CORNER OF PROPERTY FARTHEST FROM NEIGHBORING WELL

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

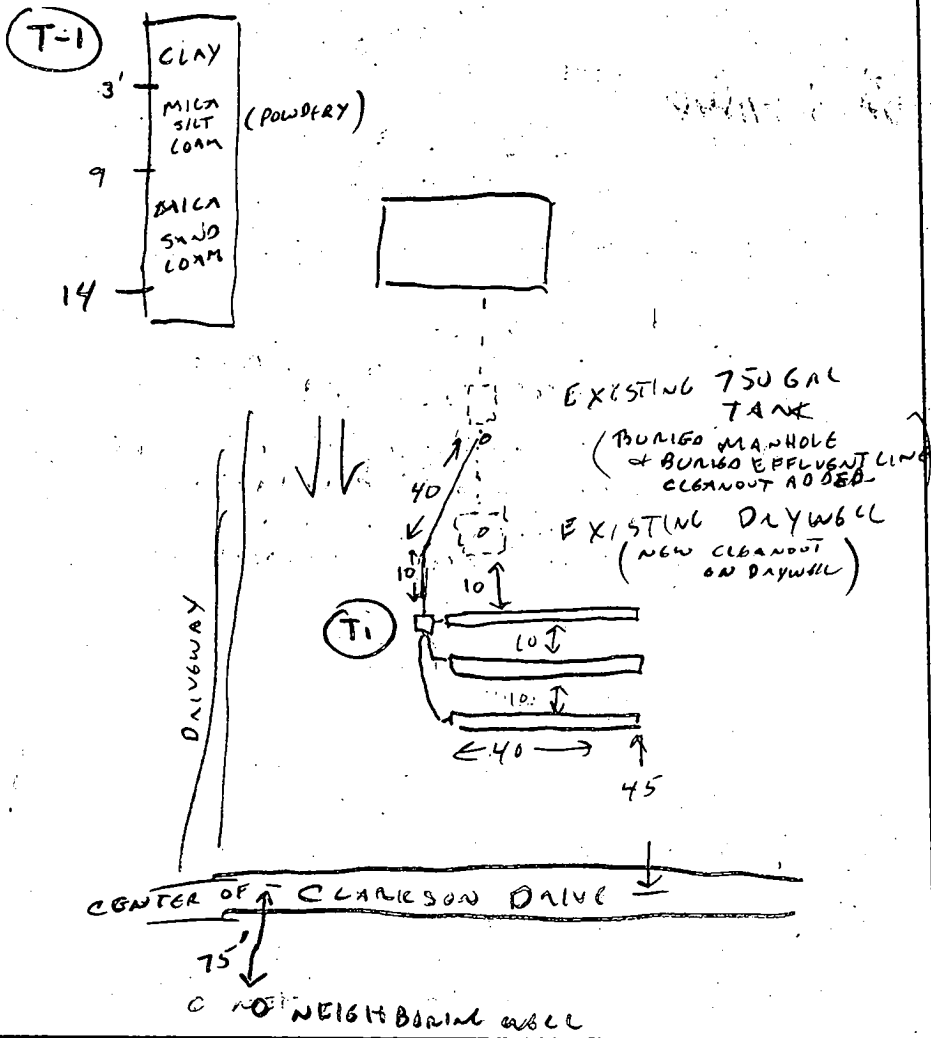
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

P 514262A

NOT TO SCALE



TRENCH DATA	
TRENCH WIDTH	<u>2</u>
TRENCH INLET DEPTH	<u>3'</u>
TRENCH BOTTOM DEPTH	<u>9 1/2</u>
DEPTH OF STONE	<u>6 1/2</u>
NUMBER OF TRENCHES	<u>3</u>
TOTAL TRENCH LENGTH	<u>120</u>
ABSORBENT AREA	<u>740</u>
DISTRIBUTION BOX LEVEL	<u> </u>
BAFFLE IN DISTRIBUTION BOX	<input checked="" type="checkbox"/>

SEPTIC TANK DATA	
EXISTING SEPTIC TANK	<u>750</u> GALLONS
MANHOLE RISER	<input checked="" type="checkbox"/>
6 INCH INSPECTION PORT	<input checked="" type="checkbox"/>
PUMP CHAMBER DATA	
PUMP CHAMBER GALLONS	<u>N/A</u>
MANHOLE RISER	<u> </u>
ALARM	<u> </u>
PUMP PERFORMANCE TEST	<u> </u>

PRE-CONSTRUCTION INSPECTION: NEW LINE TO BE INSTALLED BY-PASSING DRYWELL

→ SET DISTRIBUTION BOX ON END OF UPPERMOST TRENCH FOR MAXIMUM EFFICIENCY OF AVAILABLE AREA. 9/19/00 (CW)

INSPECTION COMMENTS: 9/20/00 1ST-2 TRENCHES COMPLETE, 3RD. TRENCH IN PROGRESS.

OK TO COMPLETE & COVER. (CW)

DRYWELL BYPASSED - TO BE RECONNECTED WHEN CURRENT SYSTEM IS EXHAUSTED.

INSPECTOR Crymiller DATE SYSTEM APPROVED 9/20/00

3/11/70

PERMIT

SEWAGE DISPOSAL SYSTEM

P. 15051
A. 09288

MARYLAND STATE DEPARTMENT OF HEALTH
HOWARD COUNTY

ELICOTT CITY
DISTRICT 5
DATE 1/8/70

INDEXED

Robert Della Co. IS PERMITTED TO INSTALL 1 ALTER
ADDRESS RR. 2, Clarksdale, Maryland PHONE XXX-XXX

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Baselitz Park ROAD CLARKSON DR. LOT 1, 112

PROPERTY OWNER James J. Whelan

ADDRESS _____

SPECIFICATIONS = 3 Bedrooms

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

SEEPAGE PITS _____ ABSORBENT SIDEWALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%.

OTHER Dry well - 120 sq. ft. smooth sidewall with gas vent. Minimum
depth 100 sq. ft. locate dry well 60 ft. from front lot line and 50 ft.
from right side, as lot is seen when facing it from Clarkson Dr. Inlet to
start 4 ft. below original grade.

**NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS.**

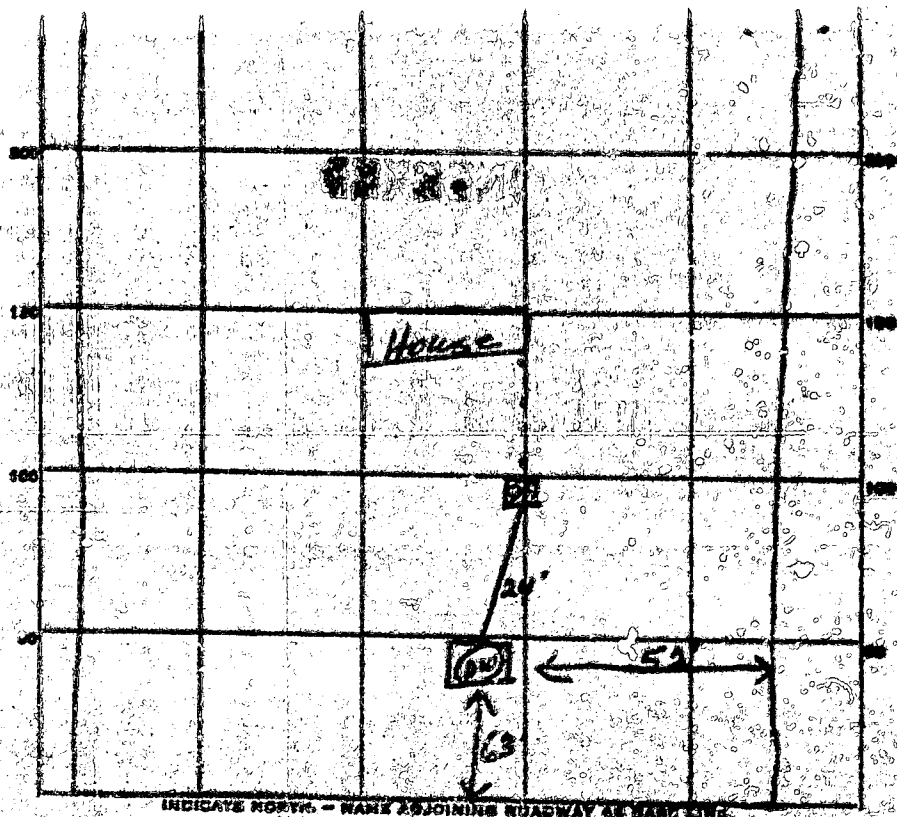
PLANS APPROVED BY E. D. Fischer DATE 1/8/70

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.

NOTIFY THE HEALTH DEPARTMENT 48 HOURS BEFORE EXCAVATIONS ARE TO BE BACK FILLED.

5/24/70
406



INDICATE NORTH - NAME ADJOINING ROADWAY AT BASE LINE.

Clarkson Drive

PERMIT CARD OK

SEPTIC TANK LEVEL CONCRETE 1000

CLEANOUTS OK

DISTRIBUTION BOX LEVEL _____

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

13x13
SEEPAGE PITS, INSIDE DIAMETER 10 FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA 416 SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 3/17/70

INSPECTOR JW

WITHIN 30 DAYS AFTER COMPLETION
 OF THE WELL
 FILL IN THIS FORM COMPLETELY

WELL NO. 3657
 DATE: March 11, 1970
 DEPTH OF WELL: 165
 PERMIT NO. FROM PERMIT TO DRILL WELL: 40-70-2224

OWNER: W. HALPH JAMES J
 FIRST NAME: A09288
 PROJECT OR ROAD: C JACKSON EULIN MD

WELL DESCRIPTION
 TYPE OF WELL: DRILL
 USE: WATER

ROUTING RECORD
 WELLS HAS BEEN SURVEYED
 (CIRCLE APPROPRIATE BOX)
 DEPTH OF SANDY SEAL (TO NEAREST FOOT): 0

PUMPING TEST
 HOURS PUMPED TO NEAREST HOUR: 6
 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON): 6

Handwritten notes:
 0
 0
 0

CASING RECORD
 MAIN CASING TYPE: 37
 ORIGINAL DIAMETER TOP OF MAIN CASING (NEAREST INCH): 6
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT): 17

WATER LEVEL DISTANCE FROM LAND SURFACE TO NEAREST PUMPING POINT: 50
 WHEN PUMPING: 260
 TYPE OF PUMP USED (CIRCLE APPROPRIATE): A

Handwritten notes:
 Gray
 Gravel
 0
 265

OTHER CASING (IF USED)
 DIAMETER (INCH) DEPTH (FOOT)

TYPE OF PUMP INSTALLED (CIRCLE APPROPRIATE LETTER IN BOX)
 CAPACITY (GALLONS PER MINUTE TO NEAREST GALLON): 1

Handwritten notes:
 casing 2 1/2
 grade 20'
 5' slippage
 depth 3-11-70

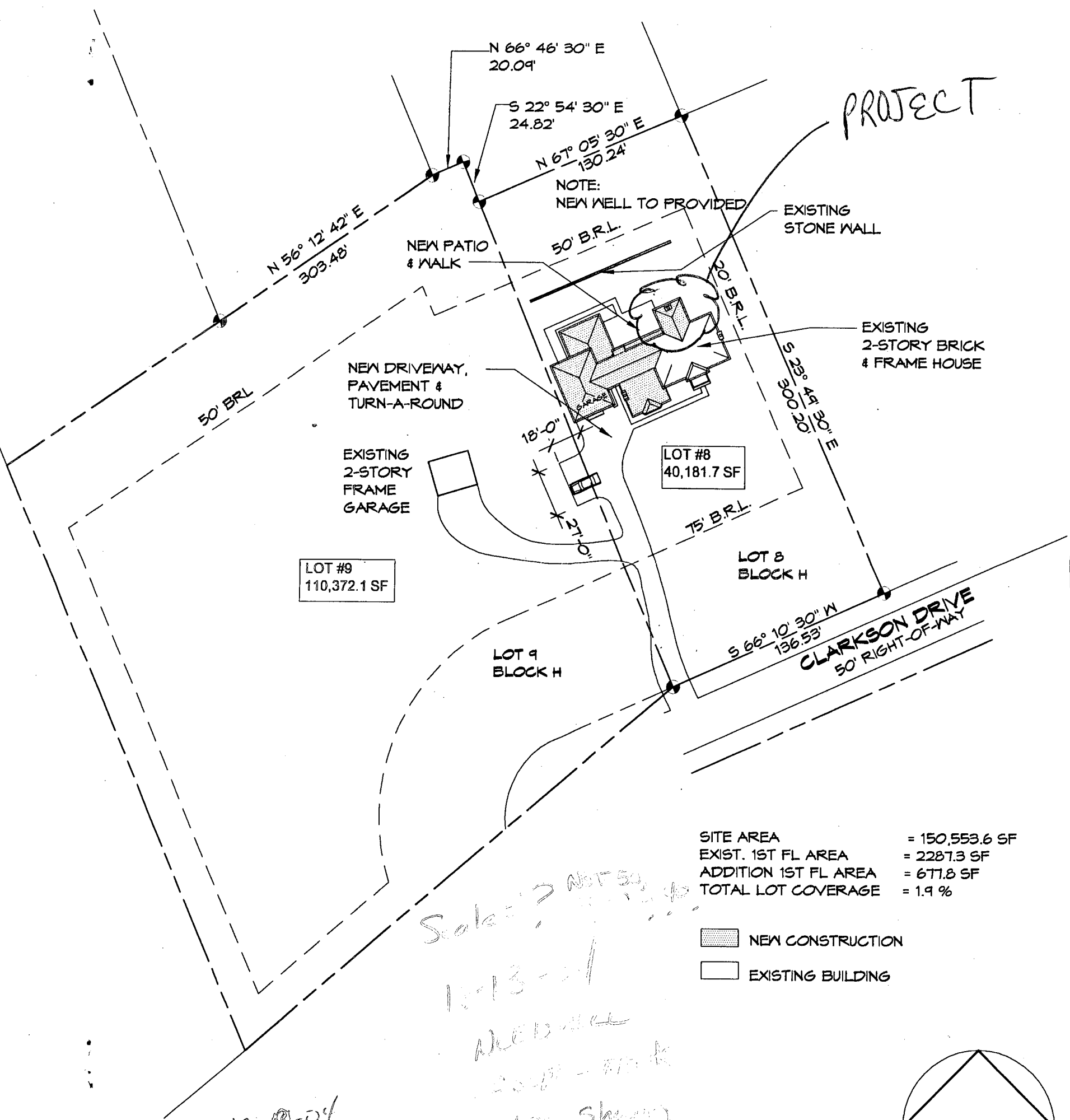
SCREEN RECORD
 INSERT APPROPRIATE CODE BELOW
 STEEL: ST GRASS OR BRASS: BR PLASTIC: PL

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND FILL IN CASING HEIGHT)
 LOCATION OF WELL ON LOT (CIRCLE APPROPRIATE LETTER IN BOX)
 15' to well
 20'
 No. 26

CIRCLE APPROPRIATE BOXES
 A WELL HAS BEEN SURVEYED AND CLEARED WHEN THE WELL WAS COMPLETED
 B ELECTRIC LOG OBTAINED
 C COPY OF ELECTRIC LOG ATTACHED
 I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL REGULATIONS AND THAT THE INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.
 SIGNATURE: Harry Green
 ADDRESS: Flange Green

DEPTH (NEAREST WHOLE FOOT)
 10 15 20 25 30 35 40 45 50 55 60 65 70 75 80 85 90 95 100 105 110 115 120 125 130 135 140 145 150 155 160 165 170 175 180 185 190 195 200

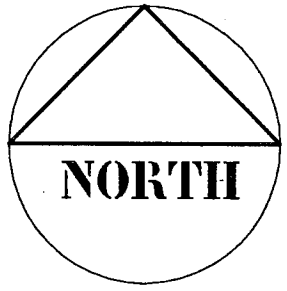
ROAD



SITE AREA	= 150,553.6 SF
EXIST. 1ST FL AREA	= 2287.3 SF
ADDITION 1ST FL AREA	= 671.8 SF
TOTAL LOT COVERAGE	= 1.9 %

Scale: 1" = 50'
10-13-04
MEB:ace
2004-0000
Lot shown

10-18-04
Called owner
about
new
plan
his major issues



SITE PLAN