

PERMIT

SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 516404-A

A 19273

ISSUE DATE 9/07/1976

APPROVAL DATE _____

INDEXED

05-378036

IS PERMITTED TO INSTALL ALTER

ADDRESS 7049 Mink Hollow Road PHONE 301-854-2385

SUBDIVISION _____ LOT NUMBER _____ ADDRESS 7049 Mink Hollow Road

PROPERTY OWNER Michael & Deborah Lynch PROPERTY OWNER'S ADDRESS 7049 Mink Hollow Road

SEPTIC TANK CAPACITY _____ GALLONS

PUMP CHAMBER CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

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: _____

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

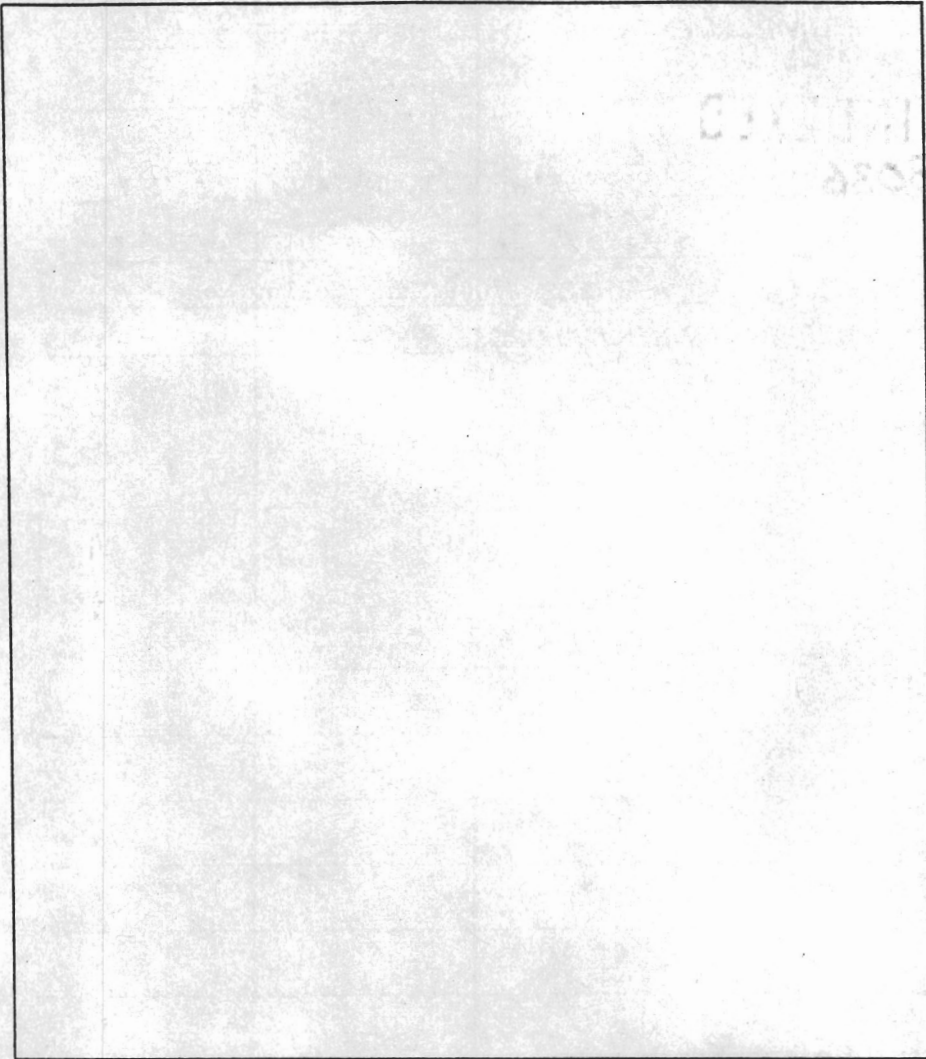
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

~~VOID PERMIT~~
~~AND RETURN~~ 11/01/2001
B00133054
Construct 12x12 DECK

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

516404-A

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH _____

TRENCH INLET DEPTH _____

TRENCH BOTTOM DEPTH _____

DEPTH OF STONE _____

NUMBER OF TRENCHES _____

TOTAL TRENCH LENGTH _____

ABSORBENT AREA _____

DISTRIBUTION BOX LEVEL _____

BAFFLE IN DISTRIBUTION BOX _____

SEPTIC TANK DATA

SEPTIC TANK _____ GALLONS

MANHOLE RISER _____

6 INCH INSPECTION PORT _____

PUMP CHAMBER DATA

PUMP CHAMBER
GALLONS _____

MANHOLE RISER _____

ALARM _____

PUMP PERFORMANCE TEST _____

PRE-CONSTRUCTION INSPECTION: _____

INSPECTION COMMENTS: _____

INSPECTOR _____ DATE SYSTEM APPROVED _____

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLCOTT CITY

DISTRICT 5th

DATE 9/3/76

*9/9/76
after 12 min*

Jack Pyock

IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Tridolphia Rd., Glenolg, Md.

PHONE 988-9270

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____

7049 Mink Hollow Rd.

LOT Parcel 6

PROPERTY OWNER Kenneth Burrhus

Tel: 774-4844 (See original Application)

ADDRESS 1204 Tucker Lane, Silver Spring, Maryland 20904

SPECIFICATIONS 4 Bedrooms

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

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

SEPTIC TANK CAPACITY 1250 GALLONS

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

OTHER DRY WELL- to have 115 sq. ft. effective absorbent sidewall area per bedroom below inlet
Inlet to be 3 ft. below original grade and MAXIMUM depth 31 4 for location 115 ft. from left
property line & 28 ft. in from left property line when facing lot from right of way.
(See plat if necessary)

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAKEPIPE ON DRYWELL AND SEPTIC TANK. STAKEPIPES MUST 6 INCHES IN DIAMETER.
CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

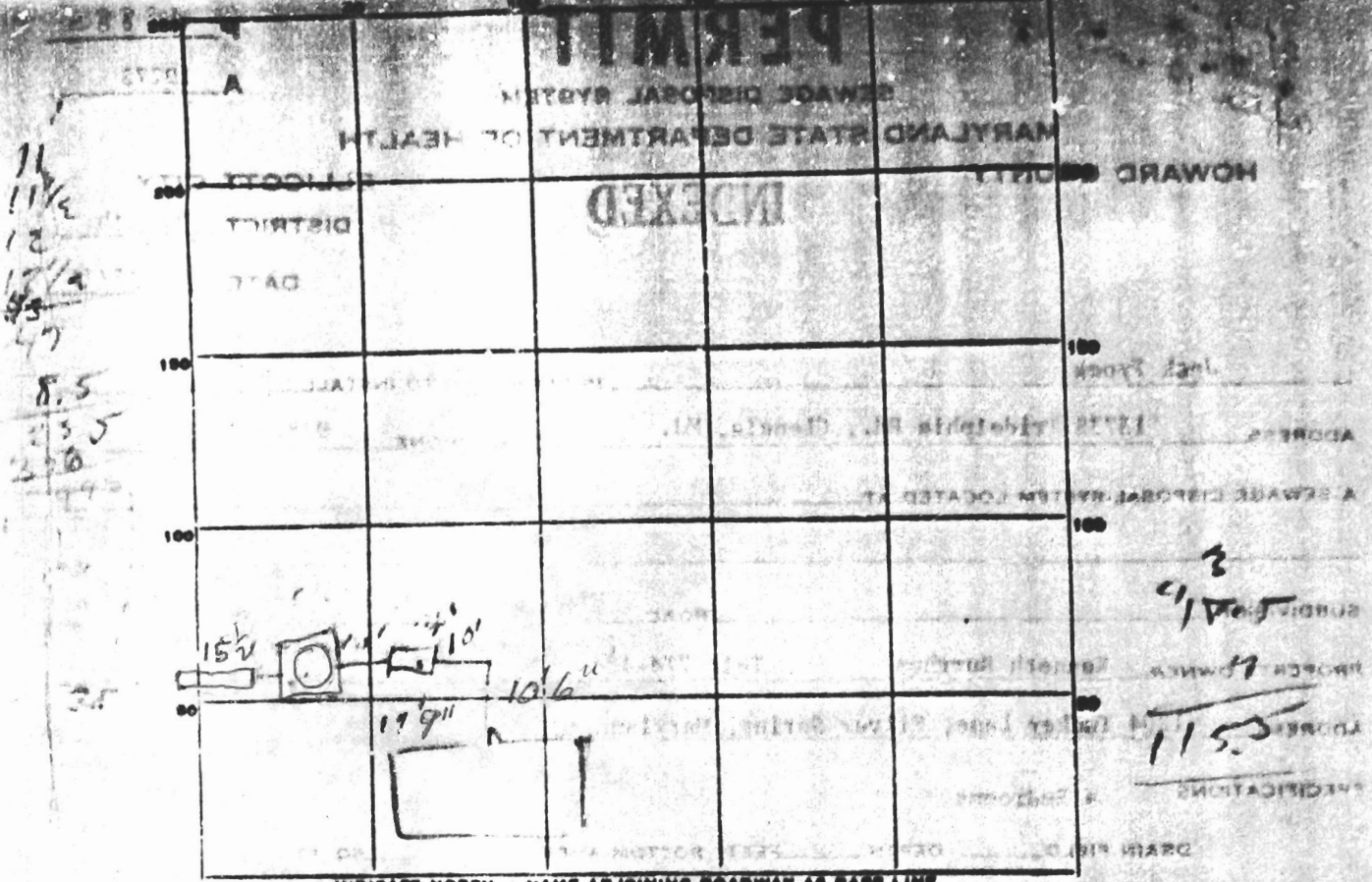
PLANS APPROVED BY Charles B. Streaker

DATE 1/21/74

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.

19273



PERMIT CARD _____
 SEPTIC TANK, LEVEL _____ CLEANOUTS _____
 DISTRIBUTION BOX, LEVEL _____
 TILE FIELD, DEPTH 1' FT. TRENCH WIDTH 2' FT.
 GRAVEL DEPTH 7" IN. TOTAL LENGTH 18.5 FT.
 NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 175
 SEEPAGE PITS, INSIDE DIAMETER 4 1/2 FT. DEPTH BELOW INLET 8 1/2 FT. 10 1/2 Total
 ABSORBENT AREA 390 SQ. FT.

REMARKS Total [515]
Due to local soil test hole but to [unclear]
location on [unclear]

DATE SYSTEM APPROVED 9/9/4 INSPECTOR DDO New