

PUB. SEWER STATUS VERIFIED BY SRU

ISSUE DATE: 4/08/2002

P 516912

APPROVAL DATE: 4/9/02

A Repair

4/9/02-10Am

PERMIT INDEXED

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

04-339088

Jorge Acevedo IS PERMITTED TO INSTALL ALTER

ADDRESS: 2491 Mullinix Mill Rd PHONE NUMBER: 301-831-7567

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 2491 Mullinix Mill Rd PROPERTY OWNER: 301-831-7567

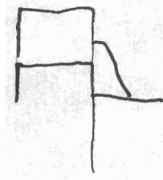
SEPTIC TANK CAPACITY (GALLONS): ex 1000?

PUMP CHAMBER CAPACITY (GALLONS): NA

NUMBER OF BEDROOMS: ex 4 Bedrooms

SQUARE FEET PER BEDROOM: NA

LINEAR FEET OF TRENCH REQUIRED: NA



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:	In support of building permit. Call for inspection when ground is opened so sanitarian can recommend repair. [Tie new bathroom plumbing into ex-plumbing outside of house] No Septic System expansion required at this time.

PLANS APPROVED: Steven R. Krieg DATE: 4/5/02

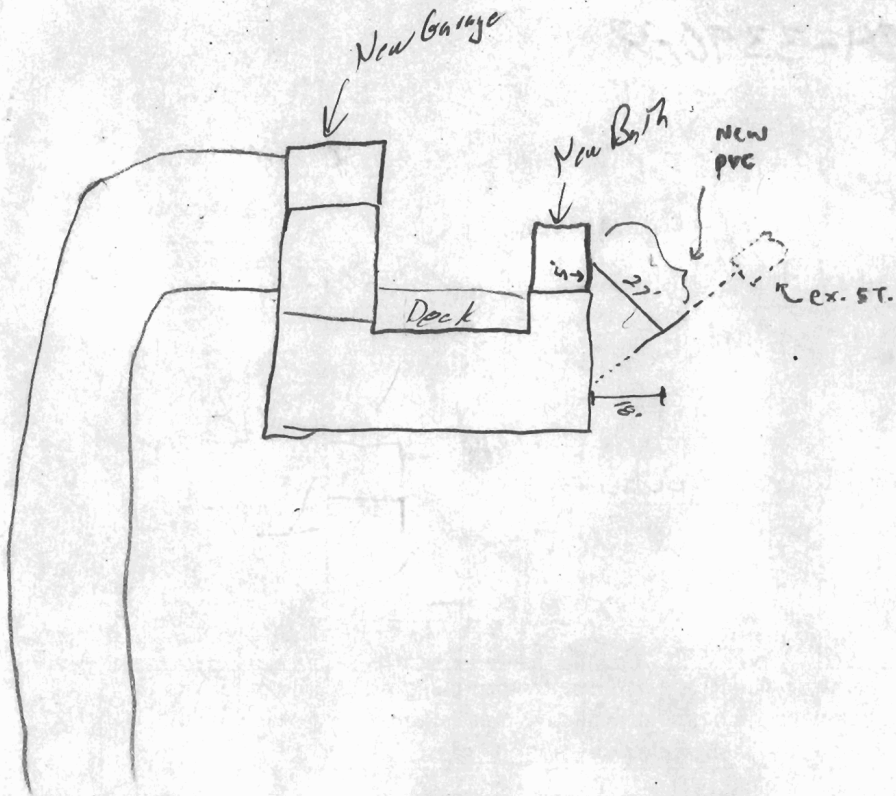
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL 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

P516912

NOT TO SCALE

INDEXED



Mullins Mill Rd ROAD

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 Existing

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SEPTIC TANK 2 LEVEL NA

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

PRE-CONSTRUCTION _____

INSTALLATION 4/9/02 Plumbing completed, pipe 6' below grade
OK to cover (SC)

FINAL INSPECTOR Steve [Signature] DATE OF APPROVAL 4/9/02