

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: _____

APPROVAL DATE: _____

PERMIT INDEXED

P 519049-A

A Re-indexed

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

_____ IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: _____

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 10⁴75 Route 108 PROPERTY OWNER: Arthur

SEPTIC TANK CAPACITY (GALLONS): _____

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:	No records found, site inspection was done to determine where Well & Septic is located.

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

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

**BUILDING PERMIT SIGNED
AND RETURNED**

9-18-03-800144049-Permit
10-1-03 800144300-2nd FLOOR ADDITION

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SITE INSPECTION SHEET

OWNER: Donna PHONE #: (cell) 410-707-5227

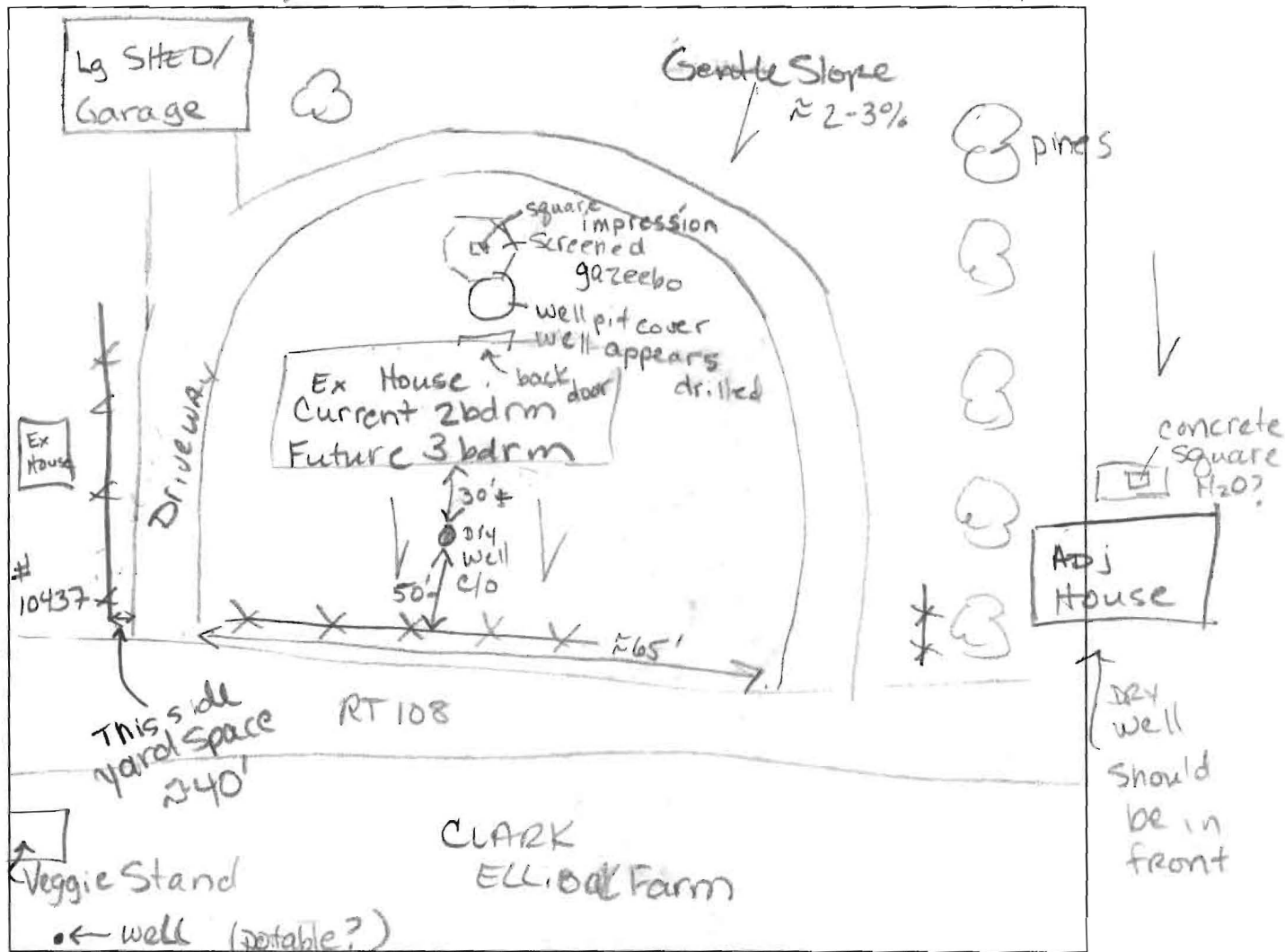
ADDRESS: 10475 Rt 108 CONTRACTOR: _____

WELL TAG #: _____

SUBDIVISION: None LOT: _____ COUNTY #: _____

PROPOSAL: Not in metro district, public sewer or water not avail. House build 1955. Need to estab records.

LOCATION DIAGRAM



Well pump samples plus

COMMENTS: 6/25/03 Approx 3,500 # of septic area from dry well c/o to road and from driveway across (parallel to 108). Effluent level in dry well low ≈ 6-8'. Where is septic tank? Owner said well water has been tested

DATE: _____ INSPECTOR: _____