

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 9/23/05

P 523373

APPROVAL DATE: 10/5/05

A 41920 UPGR

PERMIT INDEXED

Tax ID# 05-370477

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

Orbit Construction IS PERMITTED TO INSTALL ALTER

ADDRESS: Beltsville, MD PHONE NUMBER: 301-440-3435

SUBDIVISION: Hopkins Meade LOT NUMBER: 18

ADDRESS: 7402 Cherry Tree Drive PROPERTY OWNER: David Roarty

SEPTIC TANK CAPACITY (GALLONS): 1500 *COMPARTMENTED TANK REQUIRED*

PUMP CHAMBER CAPACITY (GALLONS): N/A

NUMBER OF BEDROOMS: 4

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:	Purpose of permit is to support a future building permit addition. Call for inspection when ground is opened so sanitarian can recommend repair.

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

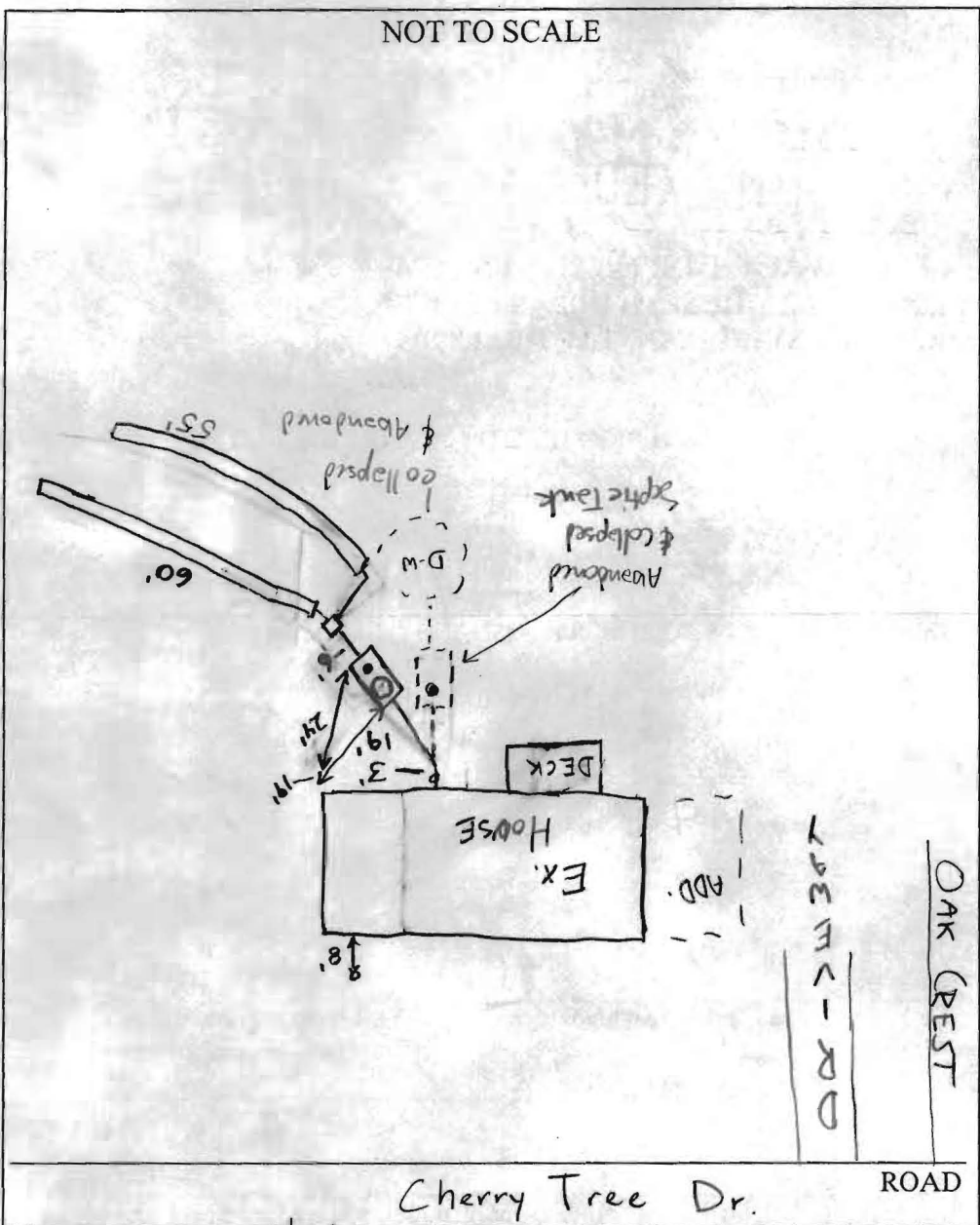
NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

**BUILDING PERMIT SIGNED
AND RETURNED**

523373

7/26 9/28 9/30 10/4

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3	5 1/2'	11'
NUMBER OF TRENCHES		2
TOTAL LENGTH _____		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL		Yes
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		No

SEPTIC TANK DATA		
SEPTIC TANK 1 LEVEL		Yes
CAPACITY	1500	GAL
SEAM LOC	Top	
TANK LID DEPTH	4'	
BAFFLES	yes	4
BAFFLE FILTER	No	
MANHOLE LOC	Inlet	
6" PORT LOC	Outlet	
WATERTIGHT TEST	N/A	
SEPTIC TANK 2 LEVEL		
CAPACITY		_____ GAL
SEAM LOC		_____
TANK LID DEPTH		_____
BAFFLES		_____
BAFFLE FILTER		_____
MANHOLE LOC		_____
6" PORT LOC		_____
WATERTIGHT TEST		_____

PRE-CONSTRUCTION ^{9/26/05} 2x60' trenches on Contour running away from house and toward fence. Septic Tank/trenches to be no closer than existing. (GAC)

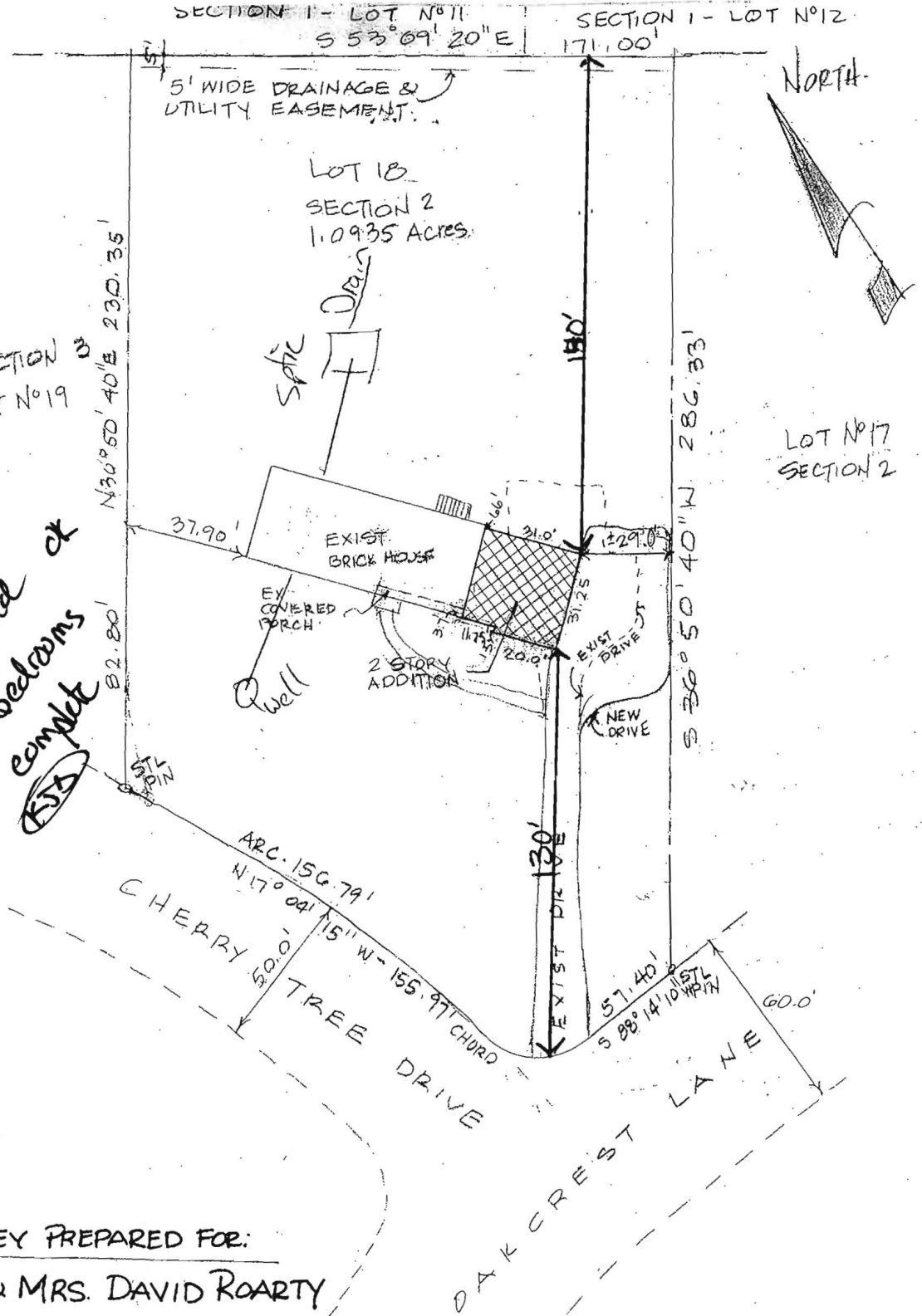
INSTALLATION ^{9/28/05} Tank installed. Needs Manhole and 6" risers. ^{9/30/05} D-box and 1st trench run - Not started yet, needs stone, pipe, filter paper.

^{10/3/05} ok to back fill 1st trench, run second. ^{10/4/05} OK to Back fill trench #2. (GAC) ^{10/5/05} Old Septic Tank & Drywell collapsed & filled. (GAC)

BUILDING PERMIT SIGNED AND RETURNED

FINAL INSPECTOR Daniel A. Creighton DATE OF APPROVAL 10/5/05

10/6/05
 Proposed add of
 10 New Bedrooms
 Upgrade complete
 (FSS)



SURVEY PREPARED FOR:
 MR. & MRS. DAVID ROARTY
 4-2005

2 SITE PLAN 1" = 50'

INFORMATION TAKEN FROM SURVEY PREPARED BY
 J. H. RIFE - 213 WEST AVE. HANOVER, PA.
 LOT No 18 SECTION 2 HOPKINS MEAD
 NOV. 25, 1960 WALTER C. HUBERT
 FILE No. A-165 CLARKSVILLE, MD
 5TH ELECTION DISTRICT-HOWARD COUNTY



HOWARD COUNTY HEALTH DEPARTMENT

23373

DATE 9/23/05

RS

Received From

Katrina Brady

PHONE #

301 440-0201

For

Septic Permit

- CASH
- CHECK

NO.

294571

7402 Cherry Tree Dr.
Lot. 18

Three Hundred ninety six and 10/100

Dollars

\$

396.00

Received By

[Signature]



HOWARD COUNTY HEALTH DEPARTMENT

23116

DATE 8/17/05

Received from Rock Solid Service Inc PHONE # 410 531-2959

20. Box 89 1/2 Clergys, MD 21729

For Spice Remit

CASH
 CHECK

NO.

7402 Cherry Tree Dr
Hopkin Brook Lot 18
Three hundred twenty six

Dollars

Received By

[Signature]

\$ 316.00

LAYOUT _____ INSP 4 _____
INSP 2 _____ INSP 5 _____
INSP 3 _____ INSP 6 _____

ISSUE DATE: 8/11/05

APPROVAL DATE: _____

PERMIT

P 523116
P ~~BARBADO~~
UPGRADE
A 41920

TAX ID #05-370477

**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, Glenelg MD 21029 PHONE NUMBER: 410-988-9270

SUBDIVISION: Hopkins Meade LOT NUMBER: 18

ADDRESS: 7402 Cherry Tree Drive PROPERTY OWNER: David Roarty

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS) n/a COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____ HOUSE SERVED BY PUBLIC WATER

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:	
NOTES:	Purpose of permit is to support a future building permit addition.

PLANS APPROVED: _____ Reviewed by: _____ DATE: _____

NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS 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
ALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**