

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 7/27/05

P 523019

APPROVAL DATE: 8/10/05

A REPAIR

PERMIT
INDEXED
05362334

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

Hatfield's Equipment IS PERMITTED TO INSTALL ALTER

ADDRESS: PO Box 519, Annapolis Junction 20701 PHONE NUMBER: 301-854-6172

SUBDIVISION: Haviland Hills LOT NUMBER: 30, Sec 2

ADDRESS: 13953 Brighton Dam Road PROPERTY OWNER: William Osterhout

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 210

LINEAR FEET OF TRENCH REQUIRED: 122'

Inlet 4.5'
Bottom 10'
2' Wide
5.5' Stone Below Pipe
2- 61" Trenches

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:	Existing septic system has failed. Call for inspection when ground is opened so sanitarian can recommend repair.

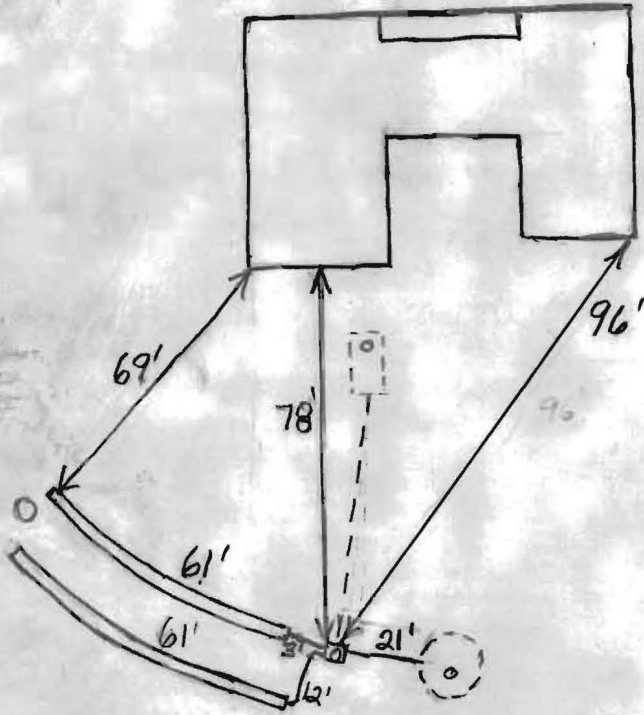
PLANS APPROVED: _____ DATE: _____

- 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

P523019

NOT TO SCALE
Brighton Dam Road



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	4.5'	10'
NUMBER OF TRENCHES		2
TOTAL LENGTH		122'
ABSORPTION AREA		6715 sq ft
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		Yes

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____
SEPTIC TANK 2 LEVEL	
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

PRE-CONSTRUCTION _____

INSTALLATION 8/9/05 Distribution box installed. Drywells are being filled with gravel. Put new rear baffle in septic tank. Far drywell connected to dist. box. (BB)
8/10/05 System finished. Leveler turned up for drywell. O.K. to cover everything. (BB)

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 8/10/05



HOWARD COUNTY HEALTH DEPARTMENT

PS 23019

DATE
7/27/05

Received From

Hartfield's Equipment & Dedication Service PHONE #

P.O. Box 519 Annapolis Junction MD 20701

For

Septic Repair

CASH

CHECK

William Osterhout

NO.

13953 Brighton Dam Rd

2037

one thousand sixty five Dollars

\$ 165 | 00

Received By

[Signature]