

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

ISSUE DATE: _____
 APPROVAL DATE: _____

P _____
 A 525259

PERMIT
INDEXED

TAX ID # 05-363209

**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: 12701 Clarksville Pike PROPERTY OWNER: Hardy Pickett

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

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

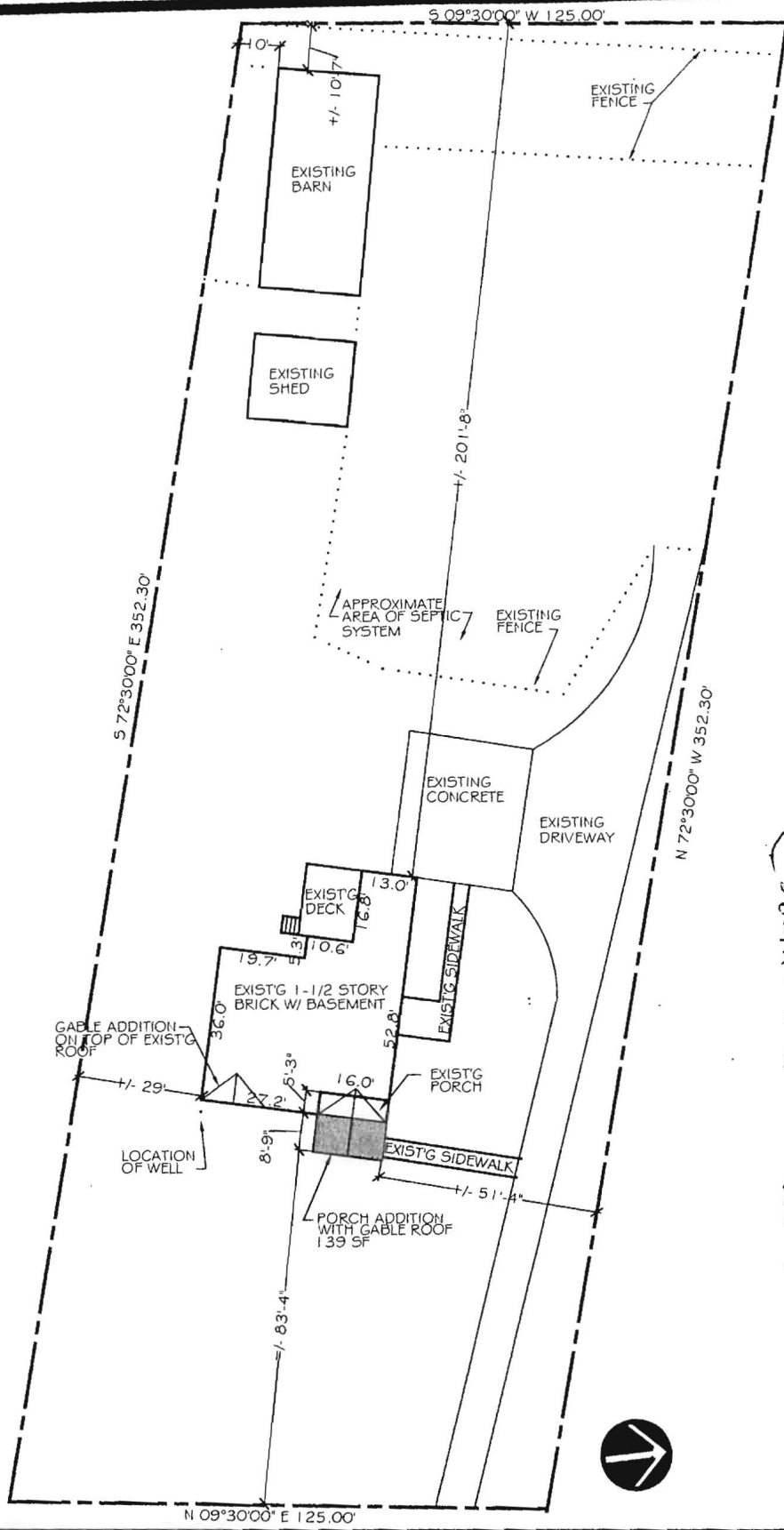
| | |
|-----------|---|
| TRENCHES: | Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe. |
| LOCATION: | BUILDING PERMIT SIGNED AND RETURNED |
| NOTES: | <i>5/11/06 B00159692 EXTEND PORCH. ADD GABLE ROOF.</i> |

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 UNLESS SPECIFICALLY AUTHORIZED

**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**

A525259



APPROVED

WALK-THRU BUILDING PERMIT

BP# BDD 0591692 A#

APP. SAN GAC PREP. DATE: 5/11/06

DESC. OF WORK: Extend porch and add Gable roof above small gable roof @ south end of front facade



SITE PLAN

12701 CLARKSVILLE PIKE
PICKETT RESIDENCE

DATE: 5/8/06

SCALE: 1" = 40'-0"

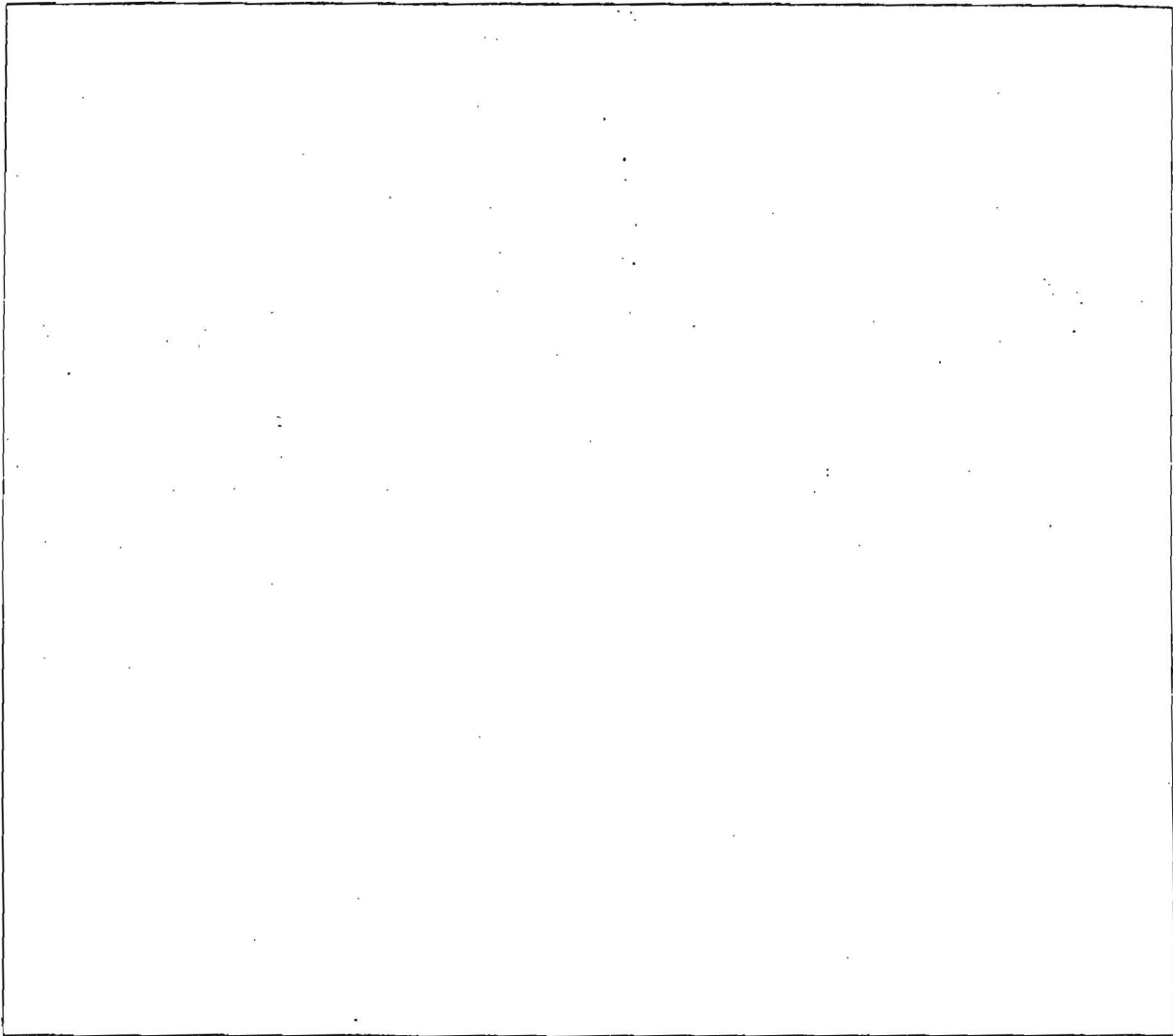
DRAWN BY: JJ

05-363209

SITE INSPECTION SHEET

OWNER: HARDY PICKETT PHONE #: 301-854-2373
ADDRESS: 12701 Clarksville Pike CONTRACTOR: J. Squared Design
WELL TAG #: _____
SUBDIVISION: _____ LOT: _____ COUNTY #: _____
PROPOSAL: WALK Thru BP for Gable Roof over small porch

LOCATION DIAGRAM



COMMENTS: 5/11/06 Went to site. I am unable to
visually locate either well or septic. (GAC)
OK per M. Davis for front porch / Gable roof addition.

DATE: 5/11/06 INSPECTOR: G. Creighton