

LAYOUT \_\_\_\_\_ INSP 4 \_\_\_\_\_  
INSP 2 \_\_\_\_\_ INSP 5 \_\_\_\_\_  
INSP 3 \_\_\_\_\_ INSP 6 \_\_\_\_\_

ISSUE DATE: 10/7/05

APPROVAL DATE: 11/16/05

# PERMIT

P 523450

A 58584B

**TAX ID #05-358078**

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

Craft Plumbing Inc. IS PERMITTED TO INSTALL  ALTER

ADDRESS: 6346 Loudon Ave., Elkridge 21075 PHONE NUMBER: 410-796-1864

SUBDIVISION: \_\_\_\_\_ LOT NUMBER: \_\_\_\_\_

ADDRESS: 7266 Guilford Road (Pool House) PROPERTY OWNER: Perry Thorsvik

SEPTIC TANK CAPACITY (GALLONS): 1000 OUTLET BAFFLE FILTER REQUIRED

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

NUMBER OF BEDROOMS: none

SQUARE FEET PER BEDROOM: \_\_\_\_\_

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

TRENCHES:	Septic tank for Pool House is to be tied into existing trenches.
LOCATION:	Drop tank for Pool House and tie into existing septic tank.
NOTES:	Addition is permitted for an office/pool house without any bedrooms.

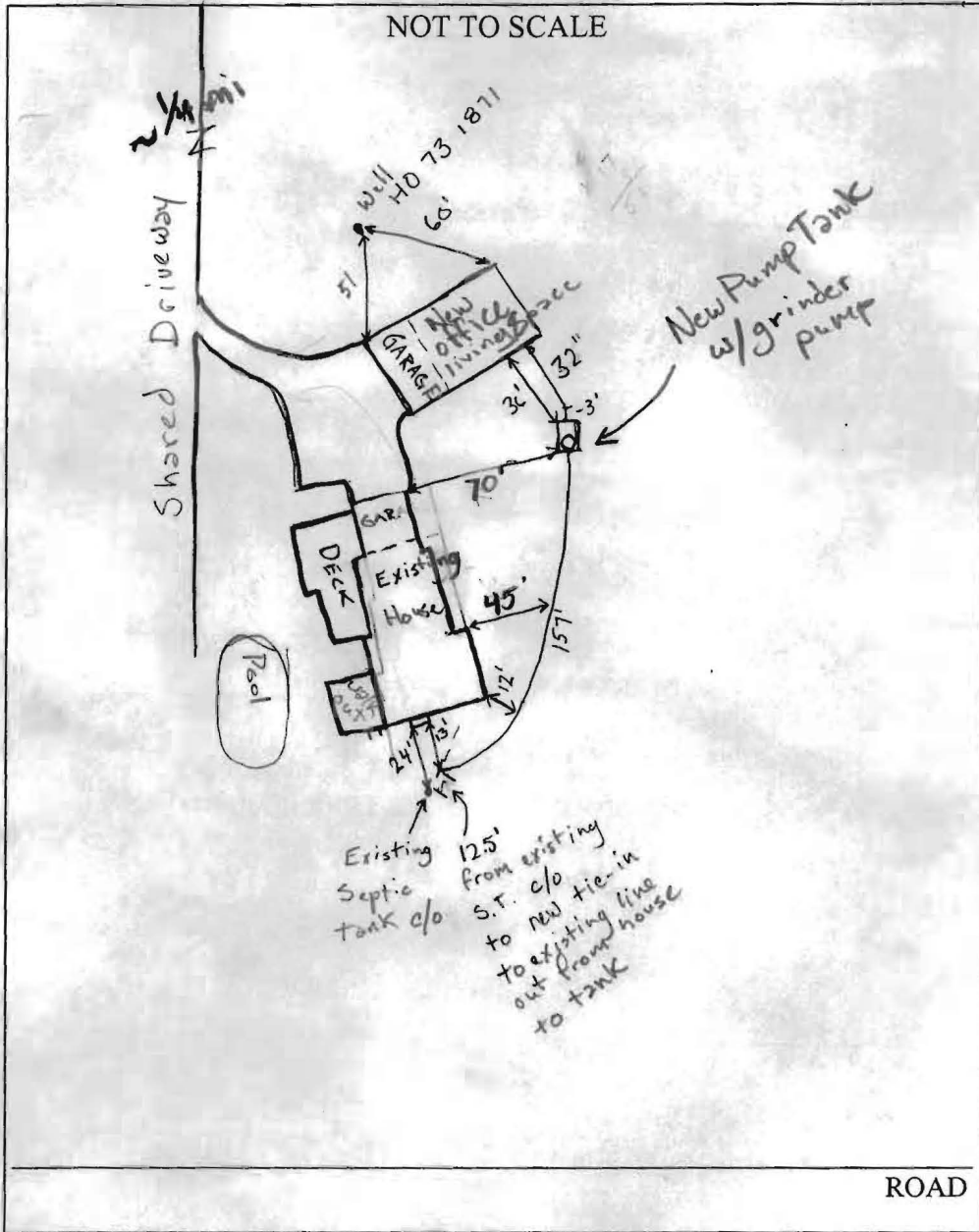
PLANS APPROVED: Peter Yencsik Reviewed by: GAC DATE: 10/7/05

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**

# Guilford Rd

NOT TO SCALE



**TRENCH/DRAINFIELD DATA**

WIDTH	INLET	BOTTOM
	Existing	
NUMBER OF TRENCHES _____		
TOTAL LENGTH _____		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL _____		
DISTRIBUTION BOX BAFFLE _____		
DISTRIBUTION BOX PORT _____		

**SEPTIC TANK DATA**

SEPTIC TANK 1 LEVEL yes

w/ grinder pump

CAPACITY 1000 GAL

SEAM LOC Top

TANK LID DEPTH 2-2 1/2'

BAFFLES Inlet

BAFFLE FILTER No

MANHOLE LOC Outlet

6" PORT LOC to be added inlet

WATERTIGHT TEST No

~~SEPTIC TANK 2 LEVEL~~

~~CAPACITY \_\_\_\_\_ GAL~~

~~SEAM LOC \_\_\_\_\_~~

~~TANK LID DEPTH \_\_\_\_\_~~

~~BAFFLES \_\_\_\_\_~~

~~BAFFLE FILTER \_\_\_\_\_~~

~~MANHOLE LOC \_\_\_\_\_~~

~~6" PORT LOC \_\_\_\_\_~~

~~WATERTIGHT TEST \_\_\_\_\_~~

PRE-CONSTRUCTION Install tank w/ grinder pumps to eject to existing system.

INSTALLATION 11/16/05 tank and pump lines all connections done needs electric to pump yet (GAC) Will need pump test for final approval (GAC)

FINAL INSPECTOR \_\_\_\_\_ DATE OF APPROVAL \_\_\_\_\_