

LAYOUT _____ INSP 4 _____

INSP 2 _____ INSP 5 _____

INSP 3 _____ INSP 6 _____

ISSUE DATE: ^{12/29/06 is correct} 12/29/06

APPROVAL DATE: 1/26/07

P 526164

A _____

PERMIT INDEXED

Tax ID# 03-348040

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

NVR IS PERMITTED TO INSTALL ALTER

ADDRESS: 6055 Marshalee Drive PHONE NUMBER: 410-796-0980

SUBDIVISION: Ellicott Meadows (Homeland) LOT NUMBER: 49

ADDRESS: 3035 Auburn View PROPERTY OWNER: NVR Inc./Ryan- David F King

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:	_____
NOTES:	Permit for installation of house connection to a multi-use septic system

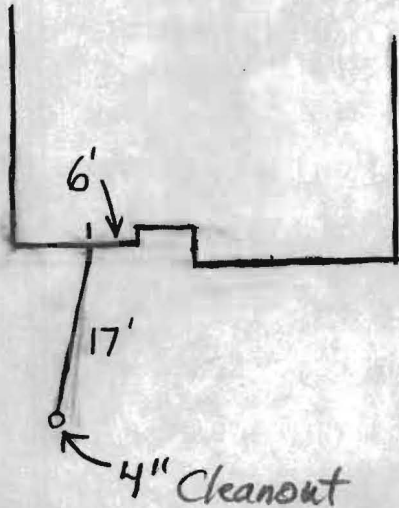
PLANS APPROVED: Gabriel A. Creighton DATE: 12/18/06

- 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

2006-1

NOT TO SCALE



ROAD

TRENCH/DRAINFIELD DATA

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

SEPTIC TANK DATA

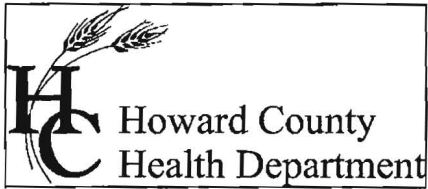
SEPTIC TANK 1 LEVEL _____	
CAPACITY _____	GAL
SEAM LOC _____	
TANK LID DEPTH _____	
BAFFLES _____	
BAFFLE FILTER _____	
MANHOLE LOC _____	
6" PORT LOC _____	
WATERTIGHT TEST _____	
SEPTIC TANK 2 LEVEL _____	
CAPACITY _____	GAL
SEAM LOC _____	
TANK LID DEPTH _____	
BAFFLES _____	
BAFFLE FILTER _____	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

PRE-CONSTRUCTION _____

INSTALLATION 1/26/07 Septic house connection made. Connection is 7'-7.5' below the brick ledge where it enters house. Water line not connected. O.K. to backfill. (BB)

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 1/26/07



Bureau of Environmental Health
7178 Columbia Gateway Drive Columbia, Maryland 21046-2132
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

January 26, 2007

NVR, Inc./Ryan Homes
6085 Marshalee Drive, Suite 130
Elkridge, MD 21075

RE: Homeland, Lot 49
Ellicott Meadows
3035 Auburn View
Ellicott City, MD 21042
BP# B06007850
PUBLIC WATER

Dear Sir/Madam:

This is to advise you that the septic system for the above referenced property has been installed and inspected. **Final approval of the septic system was granted on 01/26/2007.**

The property is served by public water and is therefore exempt from the Health Department water sampling requirements.

By issuance of this letter, this office recommends release of the Use and Occupancy permit for the referenced property.

Approving Authority,

Brian Baker, R. S.
Well & Septic Program

mlb
cc: Building Inspector's Office
File