

LAYOUT \_\_\_\_\_

INSP 1 \_\_\_\_\_ INSP 3 \_\_\_\_\_

INSP 2 \_\_\_\_\_ INSP 5 \_\_\_\_\_

ISSUE DATE: 03/05/07

P 526264-A

APPROVAL DATE: 3/27/07

# PERMIT COMMUNITY SEPTIC SYSTEM

A \_\_\_\_\_

TaxID# 03-349152  
**HOUSE SEWER LINE CONNECTION**

## HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

NV Homes \_\_\_\_\_ IS PERMITTED TO INSTALL  ALTER

ADDRESS: 6085 Marshalee Drive, Elkridge, MD 21075 PHONE NUMBER: 410-379-5956

SUBDIVISION Homeland - Ellicott Meadows LOT NUMBER: 94

ADDRESS: 11945 Hampstead Green PROPERTY OWNER: NV Homes

NUMBER OF BEDROOMS: 2

### HOUSE SERVED BY PUBLIC WATER

LOCATION:	Install 4" house sewer line connection per the approved site plan. Final acceptance of the sewer system will be subject to the approval of the Maryland Department of the Environment.
NOTES:	This permit is limited to the installation of the individual house sewer line connection.

PLANS APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

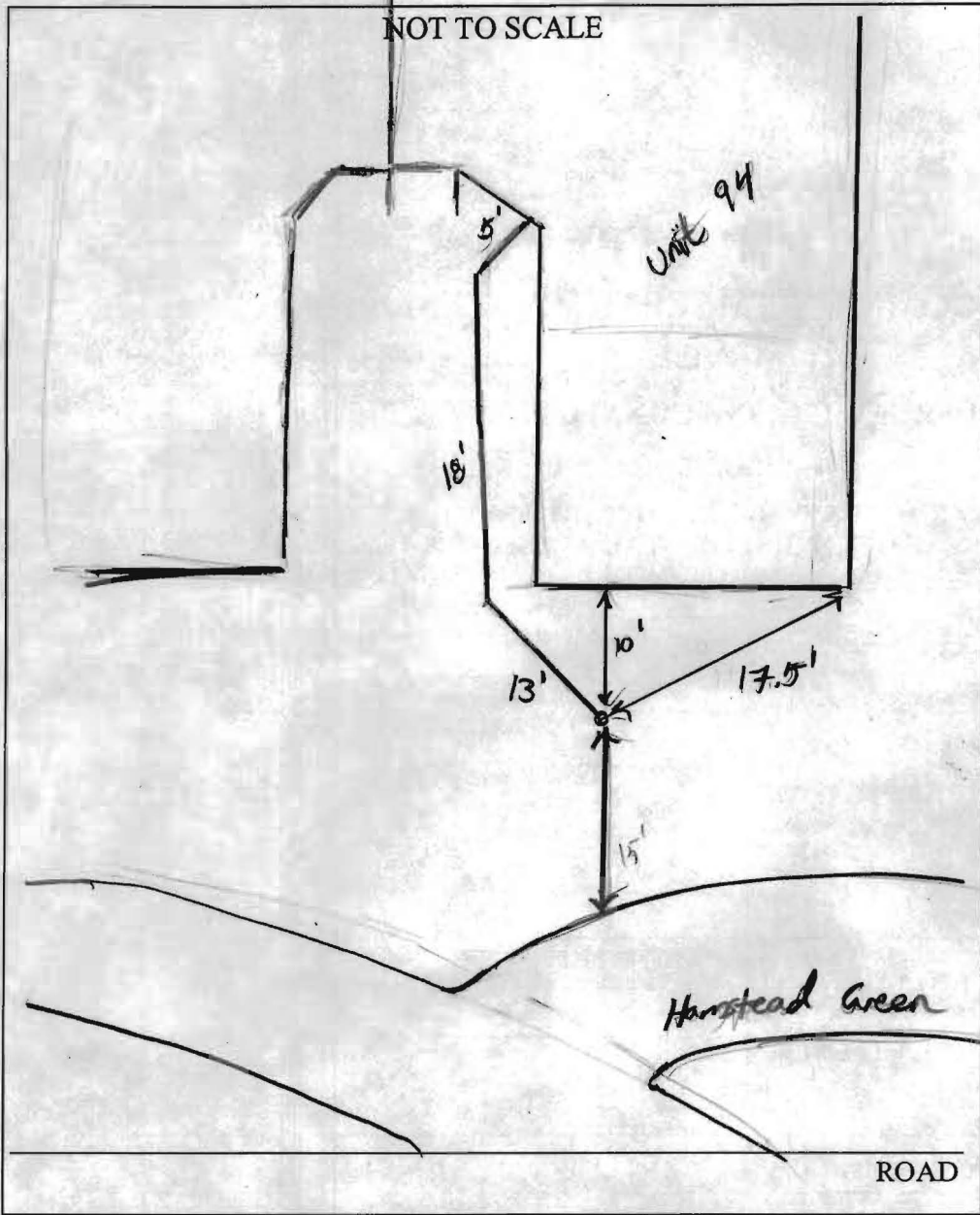
### PERMIT VOID AFTER 2 YEARS

1. CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS.
2. ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED.
3. CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT.
4. NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
5. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

**CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM  
BUILDING PERMIT SIGNED  
AND RETURNED**

4/5/07 B07001161 DECK 14X10

526264-A



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 3/27/07 OK. to cover (Kw)

BUILDING PERMIT SIGNED AND RETURNED

FINAL INSPECTOR K. Waff DATE OF APPROVAL 3/27/07

**BEDROOM RESTRICTION ACKNOWLEDGMENT**  
Ellicott Meadows

The undersigned Purchaser has entered into a Purchase Agreement for the Property known as 1194 S Hempstead Green and located in the Ellicott Meadows Community (the "Property").

By signing below, Purchaser acknowledges they have been informed of and understand the following information relating to the Property:

The Ellicott Meadows is served by a community private sewage disposal system which can only accommodate a maximum of two bedrooms per Unit. The Declaration of Covenants, Conditions and Restrictions recorded against the Units at Ellicott Meadows, as amended, states that "...no Condominium Unit shall be constructed or modified to contain more than two (2) bedrooms." The Condominium Association is the entity which enforces the terms of the Declaration.

ACKNOWLEDGED BY PURCHASER:

Purchaser: John K. Biffard

Purchaser: \_\_\_\_\_

Date: 2/8/07



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

Peter L. Beilenson, M.D., M.P.H., Health Officer

May 17, 2007

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

**SENT BY FACSIMILE 301-854-9632**

RE: Homeland—Ellicott Meadows, Lot 94  
11945 Hampstead Green  
Ellicott City, MD 21042  
BP# B06008143  
**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 03/27/2007.**

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,

Stuart Oster, R. S.  
Well & Septic Program

mlb  
cc: Building Inspector's Office  
File