

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

ISSUE DATE: 3/29/07

PERMIT

P 526607

APPROVAL DATE: _____

A 526607

TAX ID # 05-364337

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

David Kenyon IS PERMITTED TO INSTALL ALTER

ADDRESS: 5093 Ten Oaks Road PHONE NUMBER: 443-535-9111

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 5093 Ten Oaks Road PROPERTY OWNER: David Kenyon

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

PUMP CHAMBER CAPACITY (GALLONS): N/A COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: _____

Trenches 2' Wide

SQUARE FEET PER BEDROOM: _____

Inlet 4'

LINEAR FEET OF TRENCH REQUIRED: 90

Bottom 10'

90' of Trench

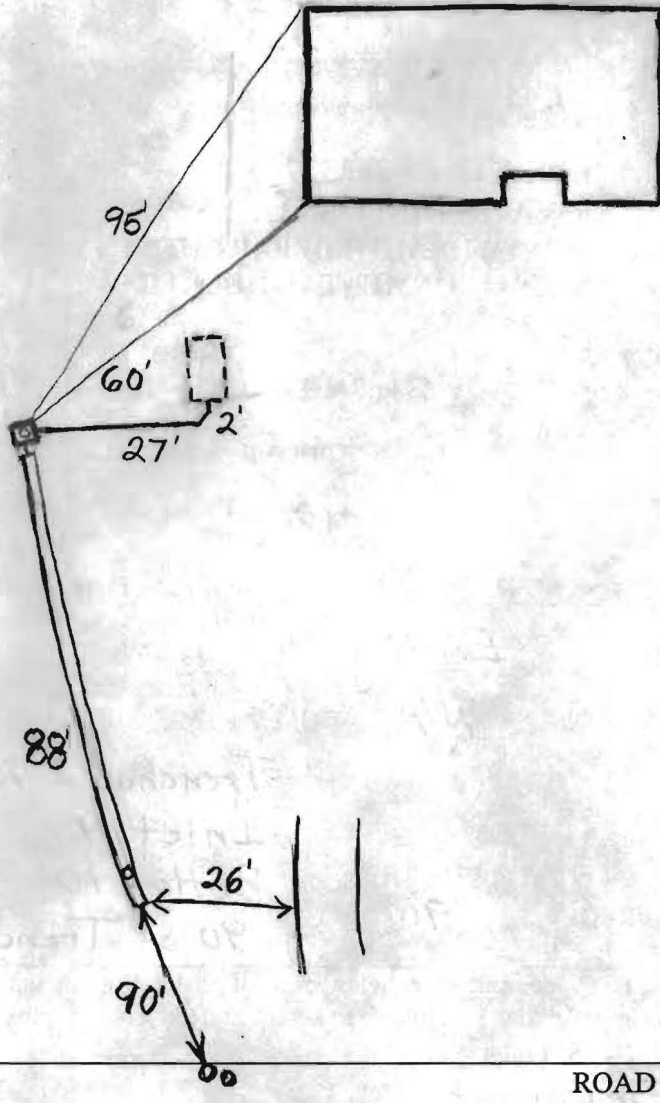
TRENCHES:	Trench to be feet wide. Inlet feet below original grade. Bottom maximum depth feet below original grade. Effective area begins at feet below original grade. feet of stone below distribution pipe.
LOCATION:	<u>Call For Layout</u>
NOTES:	Septic system has failed. Call for inspection when ground is opened so sanitarian can recommend repair.

PLANS APPROVED: B. Baker DATE: 4/12/07

- 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 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
<u>2</u>	<u>3.5'</u>	<u>10</u>
NUMBER OF TRENCHES <u>1</u>		
TOTAL LENGTH <u>88'</u>		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL <u>Yes</u>		
DISTRIBUTION BOX BAFFLE <u>Yes</u>		
DISTRIBUTION BOX PORT <u>Yes</u>		

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<u>Yes</u>
CAPACITY	<u>Existing</u> GAL
SEAM LOC	<u>Midseam</u>
TANK LID DEPTH	<u>2'-3'</u>
BAFFLES	<u>Yes</u>
BAFFLE FILTER	<u>No</u>
MANHOLE LOC	<u>Rear</u>
6" PORT LOC	<u>Front</u>
WATERTIGHT TEST	<u>No</u>
SEPTIC TANK 2 LEVEL	<u>N/A</u>
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

PRE-CONSTRUCTION 5/8/07

INSTALLATION _____

B. Baker

FINAL INSPECTOR _____

DATE OF APPROVAL _____