

LAYOUT _____

INSP 1 2/11/10 INSP 3 _____

INSP 2 _____ INSP 5 _____

ISSUE DATE: _____

APPROVAL DATE: _____

2/24/10

P 531975

A

PERMIT SHARED SEPTIC SYSTEM

Tax ID # 04-371860

HOUSE SEWER LINE CONNECTION

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

NVR, INC./RYAN HOMES _____ IS PERMITTED TO INSTALL ALTER

ADDRESS: 6085 Marshalee Dr., Elkridge, MD 21075 PHONE NUMBER: 410-796-0980

SUBDIVISION Musgrove Farm LOT NUMBER: 15

ADDRESS: 14358 Musgrove Farm Court PROPERTY OWNER: Ryan Homes Inc.

NUMBER OF BEDROOMS: 4

HOUSE SERVED BY PUBLIC WATER? **NO**

LOCATION:	Install 4" house sewer line connection per the approved site plan.
NOTES:	This permit is limited to the installation of the individual house sewer line connection and installation of the grinder pump, if applicable. The Howard County Bureau of Utilities must be contacted for scheduling of inspection of these items as well, at 410-313-4900.

PLANS APPROVED: Heidi Scott DATE: 10/30/09

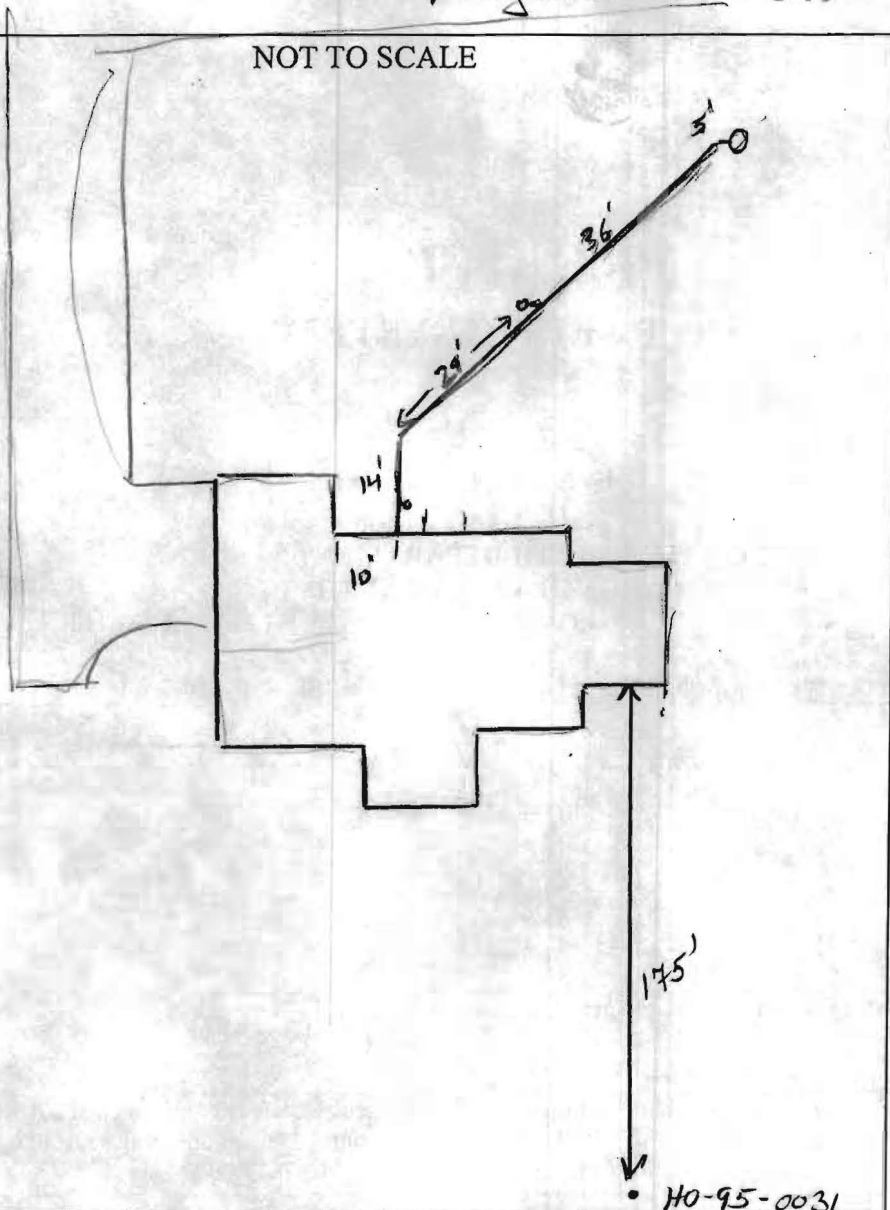
PERMIT VOID AFTER 2 YEARS

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. MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED.
4. CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT.
5. NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
6. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

CALL 410-313-1771 FOR INSPECTION HOUSE CONNECTION

Musgrove Farm Ct.

NOT TO SCALE



ROAD NAME

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 I LEVEL _____
 MANUFACTURER _____
 CAPACITY _____ GAL
 SEAM LOC _____
 TANK LID DEPTH _____
 BAFFLES _____
 BAFFLE FILTER _____
 MANHOLE LOC _____
 6" PORT LOC _____
 WATERTIGHT TEST _____
 SLOTTED _____
 DATE ON LID _____

PUMP/SEPTIC TANK LEVEL _____
 MANUFACTURER _____
 CAPACITY _____ GAL
 SEAM LOC _____
 TANK LID DEPTH _____
 BAFFLES _____
 BAFFLE FILTER _____
 MANHOLE LOC _____
 6" PORT LOC _____
 WATERTIGHT TEST _____
 SLOTTED _____
 DATE ON LID _____

PRE-CONSTRUCTION:

INSTALLATION: 12/11/09 ~~is~~ 4" gravity s/c installed per
 Approved BP plan. Need P/A test for
 final approval (SW)
 2/24/10 P/A test OK.

FINAL INSPECTOR

[Signature]

DATE OF APPROVAL

2/24/10

