

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 10/17/06

P 525602

APPROVAL DATE: 11/8/2006

A REPAIR

PERMIT

Tax ID # 04-338502

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

Patrice Lease IS PERMITTED TO INSTALL ALTER

ADDRESS: 6070 Claire Drive, Elkridge PHONE NUMBER: 410-796-8749

SUBDIVISION: Ritz Estates LOT NUMBER: 6-B

ADDRESS: 16997 Moss Meadow Way PROPERTY OWNER: Patrice Lease

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: 3 Total

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

*Need to Relocate
Tank For Addition -
Need 2-Compartment
Tank or Move Existing
Tank and Add 500 Gallon*

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:	
PURPOSE:	Existing septic system to be moved--in support of building permit. Call for inspection when ground is opened so sanitarian can recommend repair.

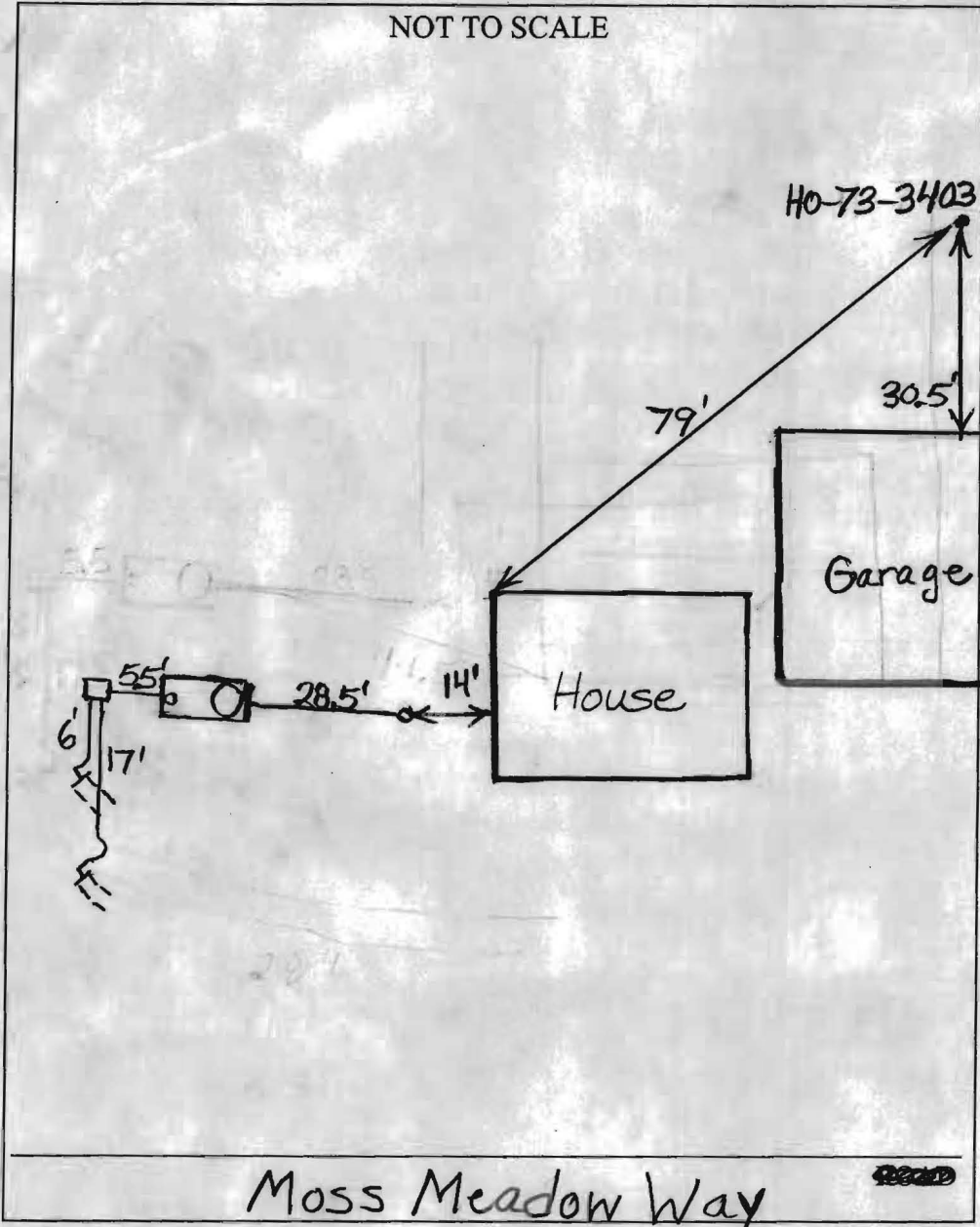
Tank

PLANS APPROVED: _____ DATE: _____

- 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

NEITHER THE HOWARD COUNTY COUNCIL OR 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

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
_____	_____	_____
NUMBER OF TRENCHES _____		
TOTAL LENGTH _____		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL		Yes
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		No

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	1'-1.5'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	N/A
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

Moss Meadow Way

PRE-CONSTRUCTION _____

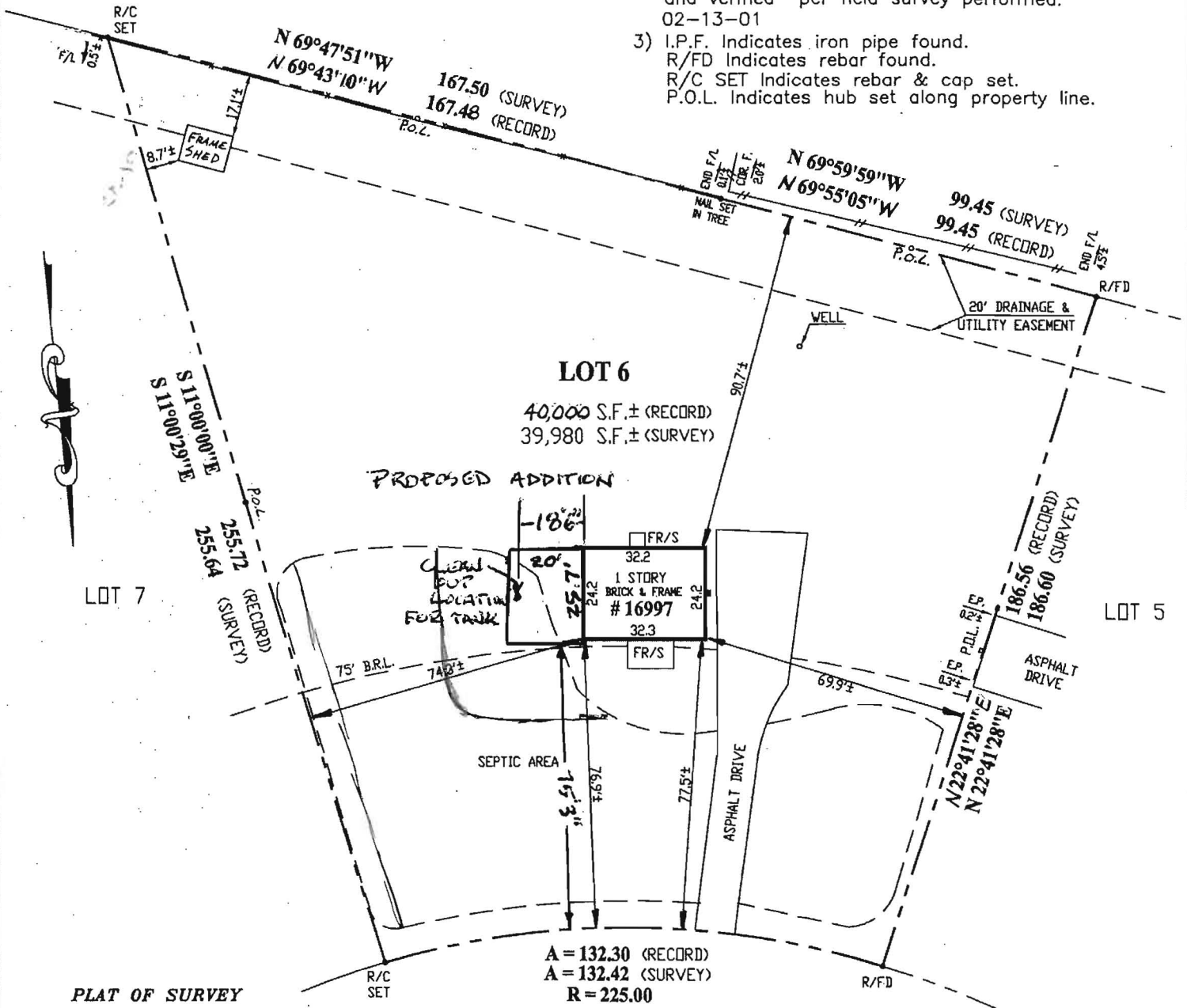
INSTALLATION 11/8/06 Replacement tank installed. New distribution box installed. New pipe installed from 4" cleanout to trenches. Old tank pumped out and filled in. (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 11/8/06

The information shown hereon has been prepared without benefit of a Title Report, therefore, may not reflect all easements or encumbrances which may affect subject property.

Notes:

- 1) Flood zone "C" per H.U.D. panel No. 240044-0007B.
- 2) All property corners have been recovered or set and verified per field survey performed: 02-13-01
- 3) I.P.F. Indicates iron pipe found.
R/FD Indicates rebar found.
R/C SET Indicates rebar & cap set.
P.O.L. Indicates hub set along property line.



**PLAT OF SURVEY
LOT 6, BLOCK B
RITZ ESTATES**

**MOSS MEADOW WAY
(50' R/W)**

HOWARD COUNTY, MARYLAND

Building Line and/or Flood Zone Information is taken from Available Sources and is Subject to Interpretation of Originator.

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE INFORMATION SHOWN HEREON HAS BEEN BASED UPON THE RESULTS OF A FIELD SURVEY PURSUANT TO THE DEED OR PLAT OF RECORD. PROPERTY MARKERS HAVE BEEN RECOVERED OR PLACED IN ACCORDANCE WITH THE INFORMATION SHOWN.

REFERENCES

PLAT BK.
PLAT NO. 3879

LIBER 3025
FOLIO 690



SNIDER & ASSOCIATES
SURVEYORS - ENGINEERS
LAND PLANNING CONSULTANTS
2 Professional Drive, Suite 216
Gaithersburg, Maryland 20879
301/948-5100, Fax 301/948-1286

DATE OF LOCATIONS

SCALE: 1" = 40'

WALL CHECK:

DRAWN BY: E.M.G.

HSE. LOC.: 02-13-2001

JOB NO.: 2001-459

PROP. CORS.: 02-13-2001

Jeffrey A. Foster 587
MARYLAND PROPERTY LINE SURVEYOR REG. NO.