

7/29 NOON

PUB. SEWER STATUS VERIFIED BY SRK NA

05-391512

ISSUE DATE: 7/28/03

P 519 069

APPROVAL DATE: 7/29/03

PERMIT

A REPAIR

SEPTIC LINE CONN.

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

Mark Brew Plumbing & Heating IS PERMITTED TO INSTALL ALTER

ADDRESS: PO Box 88, Highland, MD 20777 PHONE NUMBER: 301-854-0609

SUBDIVISION: Broadwater LOT NUMBER: 1

ADDRESS: 5401 Broadwater Lane PROPERTY OWNER: Doreen Hines

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

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:	
PURPOSE:	In support of building permit, B00140230. Call for inspection when the ground is opened so sanitarian can recommend repair.

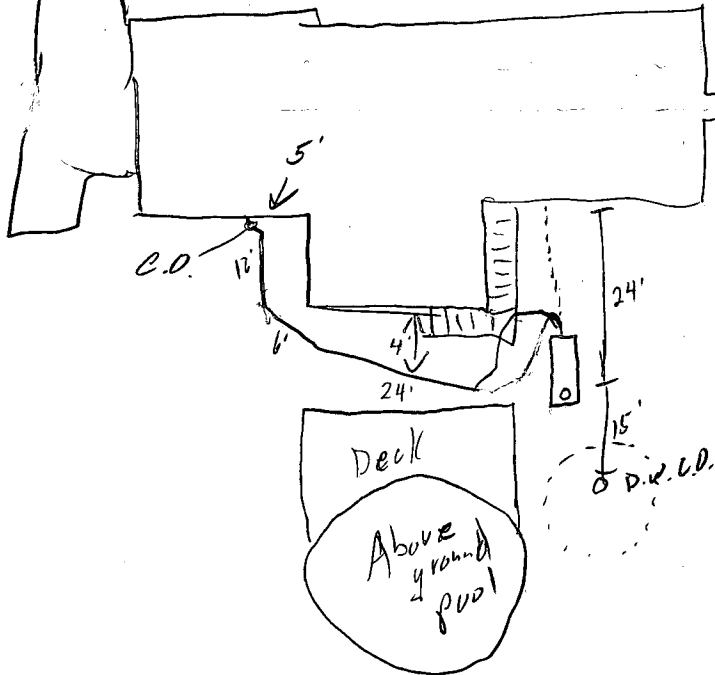
PLANS APPROVED: _____ DATE: _____

- 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 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

Broadwater Lane

NOT TO SCALE



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	<u>ex.</u>
CAPACITY	<u>Ex 1000</u> GAL
SEAM LOC	<u>Mid</u>
TANK LID DEPTH	<u>1'</u>
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	<u>Back</u>
WATERTIGHT TEST	_____
SEPTIC TANK 2 LEVEL	<u>NA</u>
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

PRE-CONSTRUCTION _____

INSTALLATION 7/29/03 OK to cover all work (SC)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 7/29/03