

Tax ID - 06-948380  
**PERMIT**

**SEWAGE DISPOSAL SYSTEM**

**DEPARTMENT OF HEALTH AND MENTAL HYGIENE**

P 46504  
A REPAIR

DISTRICT \_\_\_\_\_

DATE 10/22/90

DATE SYSTEM APPROVED 10/11/90

INSPECTOR C. Williams

**HOWARD COUNTY HEALTH DEPARTMENT**  
**BUREAU OF ENVIRONMENTAL HEALTH**  
461-9933

**INDEXED**

Jack Fyock \_\_\_\_\_ IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION \_\_\_\_\_ LOT \_\_\_\_\_ ROAD 9272 Old Scaggsville Road

PROPERTY OWNER \_\_\_\_\_ Pyles  
ADDRESS \_\_\_\_\_ 9272 Old Scaggsville Road

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS

RTE 29, RIGHT ON HANDING,  
2 LEFT AT

NUMBER OF BEDROOMS \_\_\_\_\_

\_\_\_\_\_ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED \_\_\_\_\_

REPAIR - PURPOSE - REPLACEMENT OF EXISTING METAL COLLAPSE SEPTIC TANK.  
CALL FOR INSPECTION WHEN GROUND IS OPENED SO SANITARIAN CAN RECOMMEND REPAIR.

PLANS APPROVED BY \_\_\_\_\_ C. Williams \_\_\_\_\_ DATE 10/04/90

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

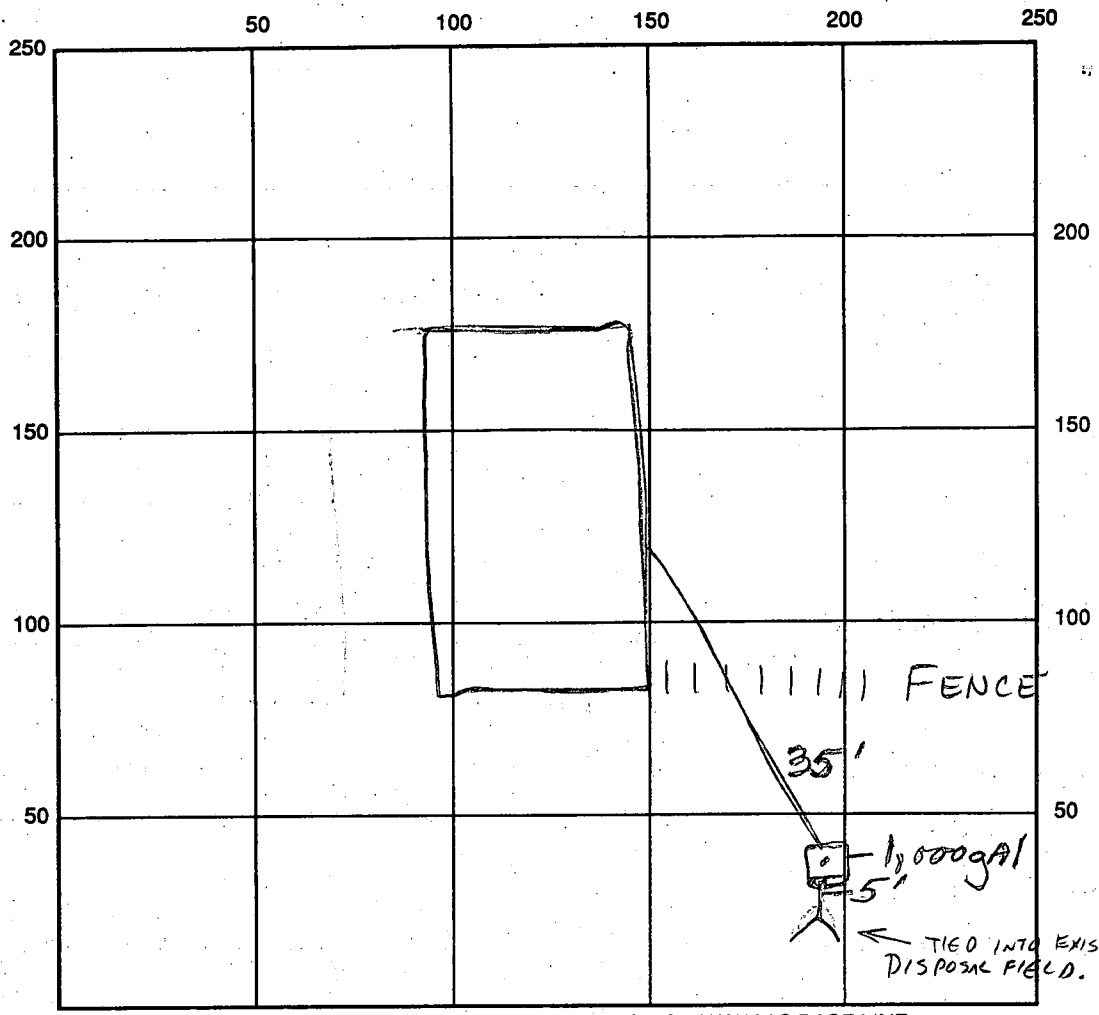
PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**  
**\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

P  
46506



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL ✓ 100 GAL CLEANOUTS ✓

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TITLE DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT. INLET DEPTH \_\_\_\_\_ FT.

EFFECTIVE GRAVEL DEPTH \_\_\_\_\_ FT. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ ONE SIDEWALL/BOTTOM AREA \_\_\_\_\_ SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: LOCATION SUPPLIED BY CONTRACTOR, UNABLE TO INSPECT THIS DATE,  
10/11/90 C.W.

DATE SYSTEM APPROVED 10/11/90 INSPECTOR C. Wilho