

10-15

10-21-85
approved
S. Abel

PERMIT

P 36054

SEWAGE DISPOSAL SYSTEM

A REPAIR

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

ELLICOTT CITY

INDEXED

DISTRICT 4th

DATE 10/03/85

Philip J. McCarl IS PERMITTED TO INSTALL _____ ALTER

ADDRESS 2615 Florence Road, Woodibne, MD 21797 PHONE 489-4016

SUBDIVISION _____ ROAD 2615 Florence Road LOT _____

PROPERTY OWNER Philip J. McCarl

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND

REPAIR.

PLANS APPROVED BY C. Williams DATE 10/03/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

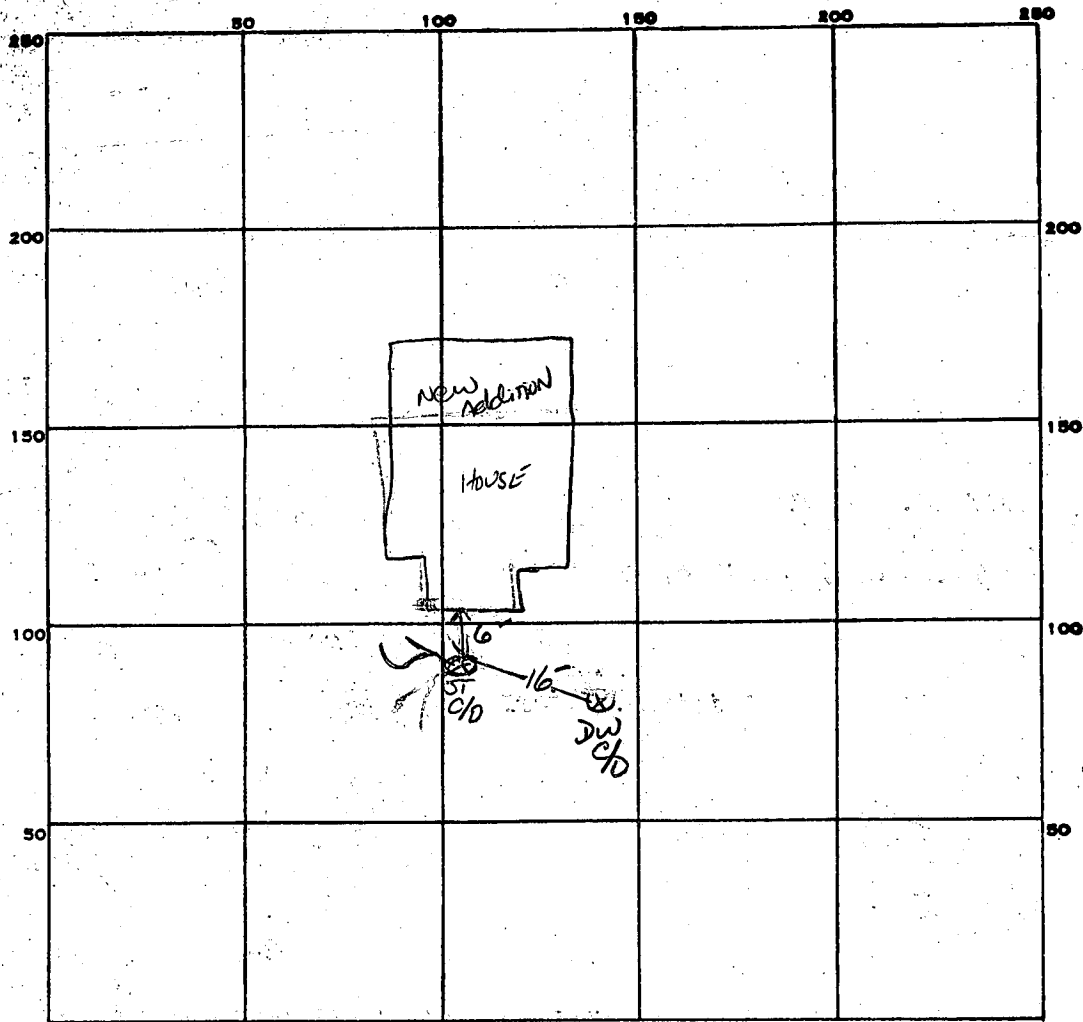
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

P 36054
Repair



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

FLORENCE Rd.

PERMIT CARD _____

SEPTIC TANK, LEVEL EXISTING

CLEANOUTS ST + DW

DISTRIBUTION BOX, LEVEL N/A

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 10-21-85 "Y" CONNECTION FROM NEW HOUSE ADDITION TO ST IN PLACE WITH
CERT IRON PIPING; NO EVIDENCE OF SS FAILURE; C/O FOR ST AND DW. SEEN

DATE SYSTEM APPROVED 10-21-85

INSPECTOR S. ABW