

05-341566

PERMIT

P 31935

A Repair

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 5/18/82

NO RECORD INSPECTION 7/28/95 INDEX FOR FUTURE REFERENCE (CW)

Melvin E. Anders IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 10885 Harmel Drive, Columbia, Md. 21044 PHONE _____

SUBDIVISION Cedar Acres ROAD 10885 Harmel Drive LOT 7

PROPERTY OWNER Melvin E. Anders

ADDRESS same as above

SPECIFICATIONS

SEPTIC TANK CAPACITY _____ GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

REPAIR - *Call for an appointment when ground is opened up and Sanitarian will recommend the repair system.*

PLANS APPROVED BY Palmer F. Wine DATE 5/18/82

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

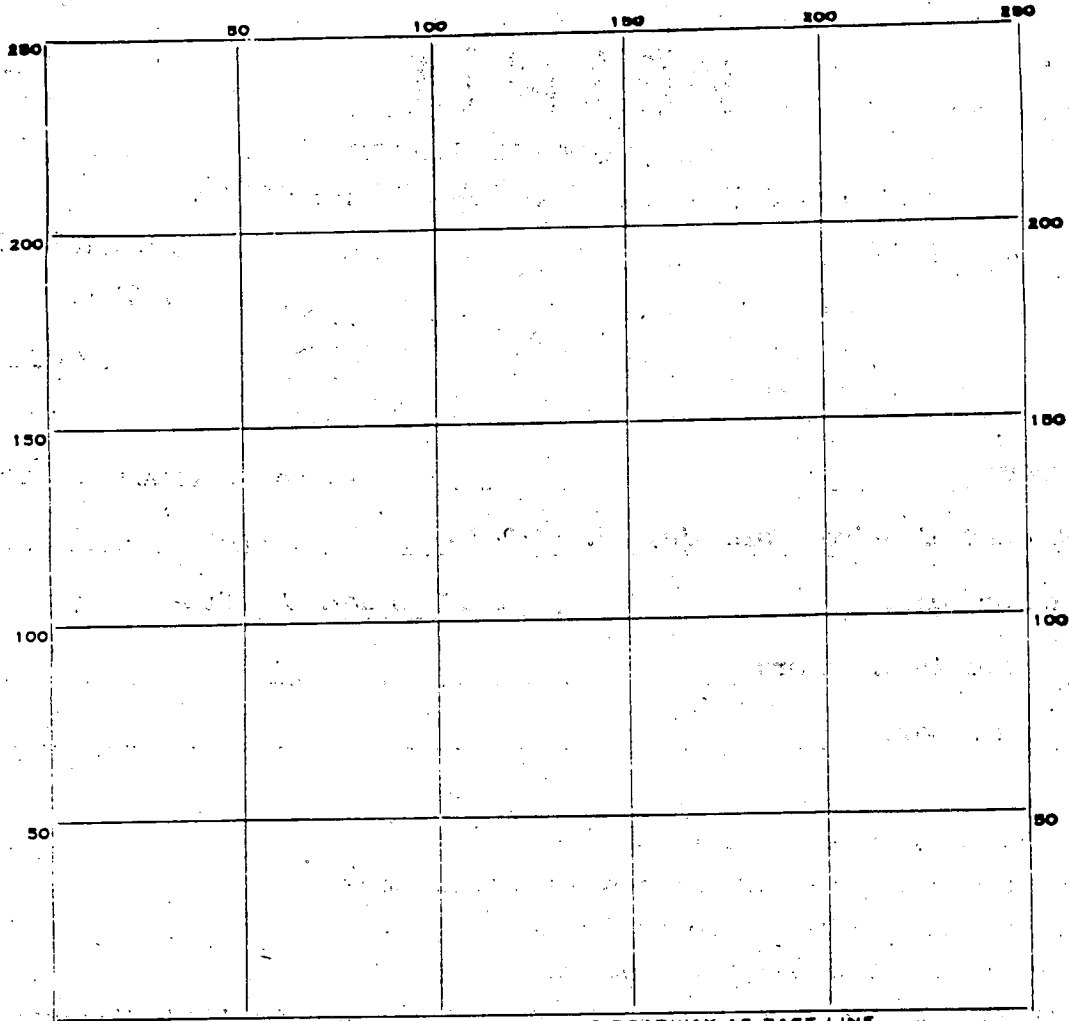
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 TERRAZZO ACCEPTED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.**

AP 31935



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

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 _____

DATE SYSTEM APPROVED _____ INSPECTOR _____

HOWARD COUNTY

PERMIT APPLICATION

DEPARTMENT OF PUBLIC WORKS
BUREAU OF INSPECTIONS & PERMITS

COUNTY OFFICE BUILDING, ELLICOTT CITY, MARYLAND 21043

SERIAL NUMBER

49629

PERMIT NUMBER

DATE ISSUED

APPLICATION

*Swill in stall
a Vacuum breaker
M. A.*

EXISTING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

*1000 Rindors
999 National Rd.
Lombard Md*

LOT NO. (OR TAX MAP & PARCEL NO.)

BLOCK NO.

LIBER

FOLIO

ADD DIVISION

ZONE

ZONE MAP

ELEC. DIST.

CENSUS TR.

OWNER'S NAME AND ADDRESS

PHONE NO.

1000 Rindors

OCCUPANT'S NAME AND ADDRESS

PHONE NO.

1000 National Rd. Columbia

ARCHITECT OR ENGINEER'S NAME AND ADDRESS

PHONE NO.

CONTRACTOR'S NAME AND ADDRESS

PHONE NO.

*1000 National Rd. S.W. 300 855-8055
1000 National Rd. 2-754*

INTENDED USE OF STRUCTURE (BE SPECIFIC)

a Ground Swimming Pool

TOT. CONSTRUCTION COST

LICENSE NUMBER

PERMIT FEE

1000

2000

100.00

QUALIFIED INSPECTOR OF CONSTRUCTION SEAL

Application is hereby made for a permit to (INDICATE ONE) ERECT USE ALTER EXTEND RAZE MOVE the (INDICATE ONE) PERMANENT TEMPORARY structure described.

DESCRIPTION OF WORK

*100 Ground Swimming Pool
Pool 16x30 M.S. - 11111*

SIZE OF BLDG.	FRONT	DEPTH	HEIGHT
	<i>26</i>	<i>9-8</i>	<i>34</i>

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS
<i>Steel - 11111</i>		

UTILITIES			
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY

TYPE OF HEAT	AC

I have carefully examined and read this application and know the same is true and correct, and that in doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Bureau of Inspections, and Permit twenty-four hours in advance when I am ready for the inspections called for elsewhere in this application; and that no work will be covered up until such inspections have been complied with.

Steph M. Wood
SIGNATURE

Water
TITLE

5/11/82
DATE

FOR OFFICE USE ONLY

DISTANCE IN FEET FROM R/W LINE TO FRONT BUILDING LINE

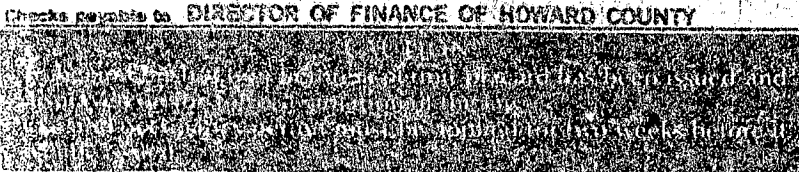
SIDE YARD (DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

DISTANCE IN FEET FROM SIDE STREET R/W LINE TO SIDE BUILDING LINE

DISTANCE IN FEET, REAR YD. REQUIRING SET

BACK CONDITIONS (IF ANY) (CORNER LOT ONLY)

Check payable to DIRECTOR OF FINANCE OF HOWARD COUNTY



IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED.

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
ROADS & STREETS		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	<i>7/5/1982</i>	<i>Frank Skinner</i>
FIRE PROTECTION		
STORM WATER MGMT.		

APPROVED

DATE

Distribution of Copies:
White - Building Official
Green - Planning & Zoning

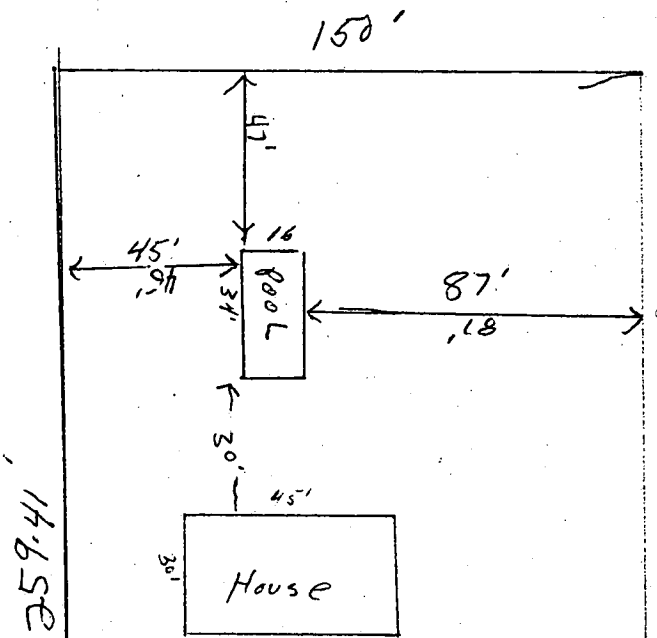
Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

MELVIN ANDERS

10885 HARMAL Rd.

Lot 7

CEGAR ACRES



SCALE
50'-1

HARMAL Rd.