

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50241

A REPAIR

DISTRICT 2nd

DATE 8/26/94

DATE SYSTEM APPROVED 9/13/94

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

INDEXE

02-226561

9/6/94
AS 2:00 PM
9/13/94 1:00 PM

J & D Enterprises, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS RD #, Box 151-D, Delta, PA 17314 PHONE (717) 456-5909

SUBDIVISION _____ LOT 2 ROAD 4605 New Cut Road

PROPERTY OWNER Mr. and Mrs. Curtis B. Sykes

ADDRESS 4605 New Cut Road
Ellicott City, Maryland 21043 (410) 465-6630

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 63'

125
3
375 63
63
inlet 3'
bottom 9'
stone 6'
73
51375

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 08/26/94

Install one 63' trench off existing drywell parallel to road.

Trench to be 2' wide, inlet 3', bottom 8.5'.

PLANS APPROVED BY Donna K. Sae DATE 9/13/94

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

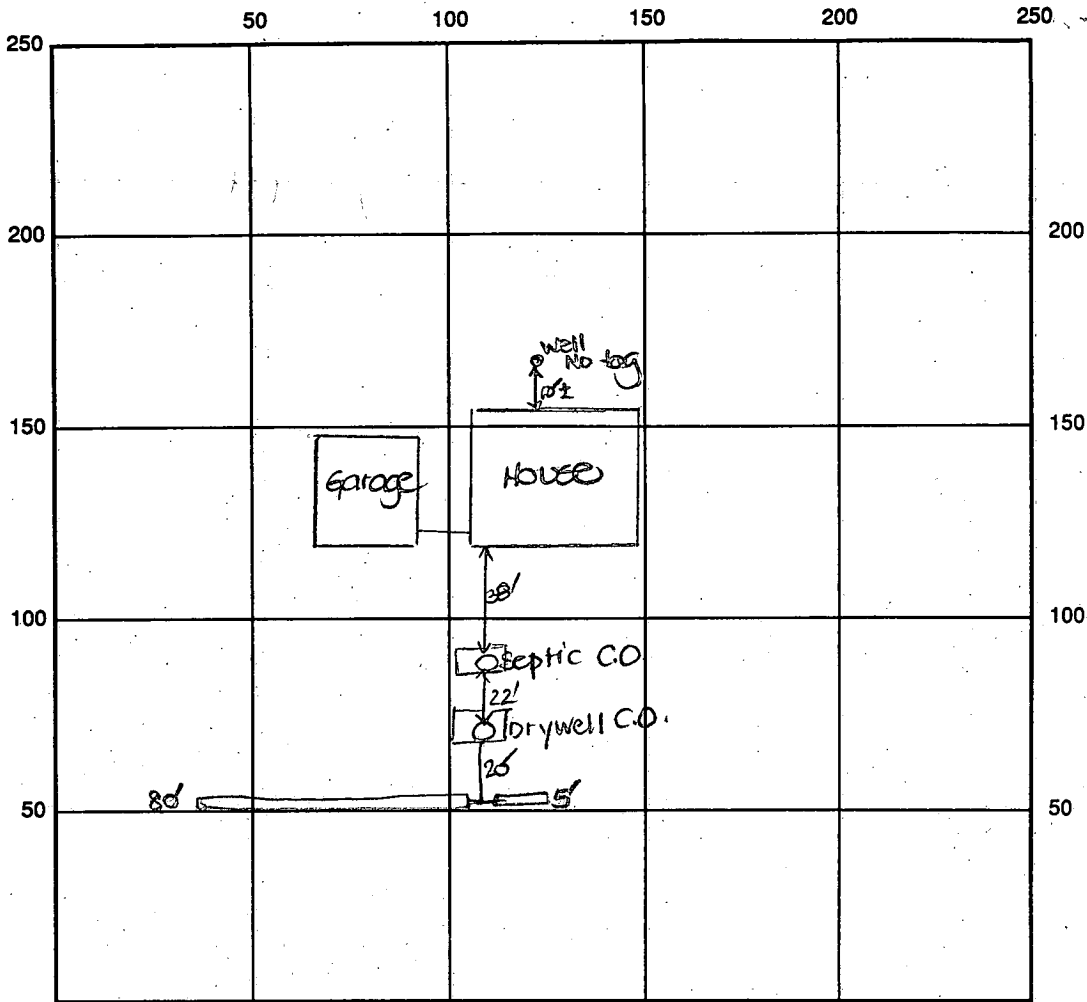
PERMIT VOID AFTER TWO YEARS

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**

P 50241



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

New Cut Road

SEPTIC TANK LEVEL Existing CLEANOUTS one on s.t., one on drywell

DISTRIBUTION BOX LEVEL N/A

DRAIN FIELD/TITLE DEPTH 8.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5.5 FT. TOTAL LENGTH 85 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/~~BOTTOM~~ AREA 467.5 SQ. FT.

DRYWALL INSIDE DIAMETER Existing FT. EFFECTIVE DEPTH BELOW INLET 3 FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: 9/9/94 OK to continue work. DKS

9/13/94 Final - OK to cover all work. DKS

DATE SYSTEM APPROVED 9/13/94 INSPECTOR Donna K. Joe

PERMIT

P 22436

SEWAGE DISPOSAL SYSTEM

A _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 2

DATE 11/3/75

*12/17/75
after 12 noon*

Donald H. Angle IS PERMITTED TO INSTALL ALTER X

ADDRESS 6621 Hunter Road, Elkridge, Maryland 21227 PHONE 796-2034

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD 4605 New Cut Road LOT _____

PROPERTY OWNER C. SYKES (S/92) (Ellicott City)
Charles A. Lutz off Montgomery Road - 1st brick house on right
(sits on high hill)

ADDRESS _____

SPECIFICATIONS

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

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

SEPTIC TANK CAPACITY _____ GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

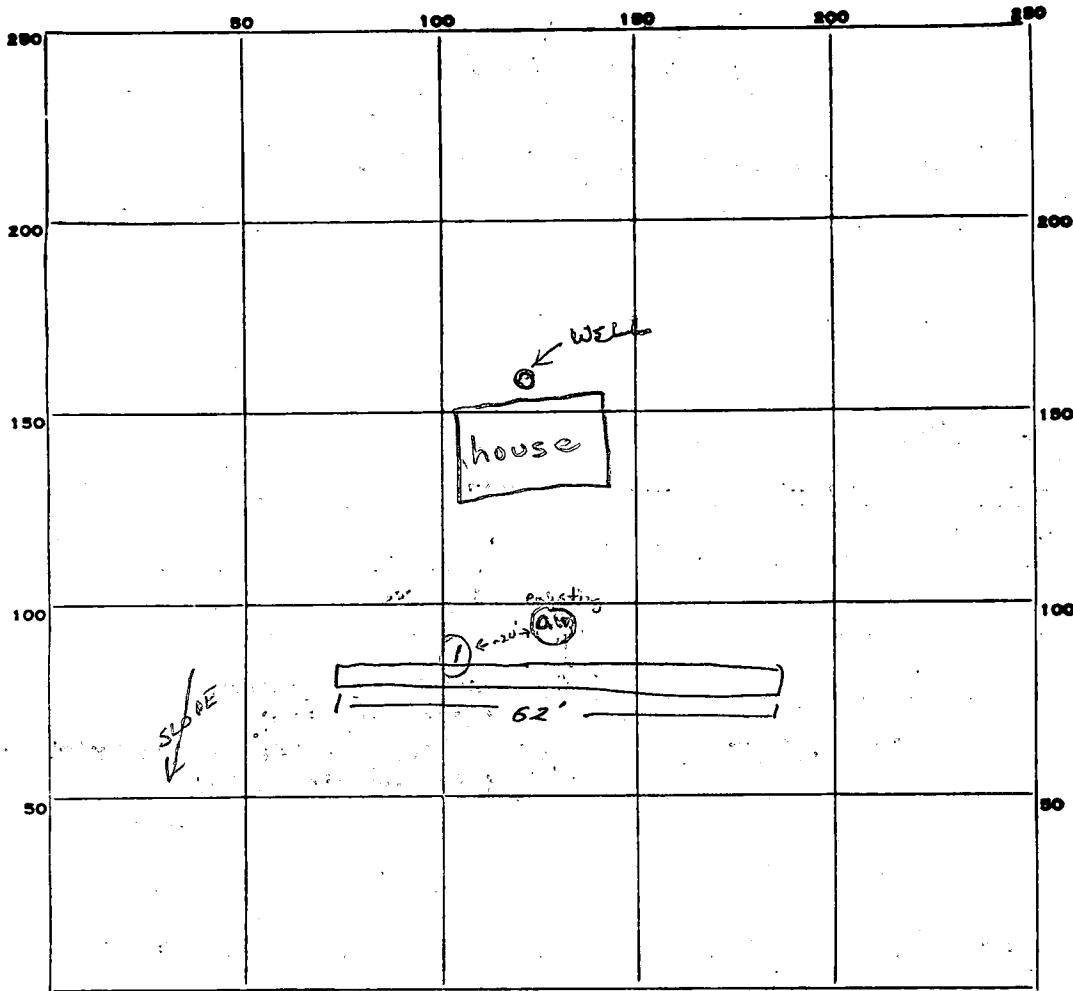
OTHER REPAIR - Call for inspection when ground is opened up so Sanitarian can
recommend repair system.

PLANS APPROVED BY Palmer F. Wine DATE 11/3/75

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

22436



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

New Cut Road

→ to Montgomery Rd. →

PERMIT CARD

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 8 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 5 FT. TOTAL LENGTH 62 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 310

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 11/17/75 Holdings in area of dry well water for sewage at 10 1/2' lot slopes to Road,
suggested another hole near road. this day work being to check for underground water, otherwise
keep max. depth 7-8 ft on repair trench. F.S.

DATE SYSTEM APPROVED 11/19/75

INSPECTOR R. Mansfield

File installed - not approved. 03463

PERMIT

P ~~03159~~

A 03159

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 2

DATE 13/20/61

Robert D. Shilling

IS PERMITTED TO INSTALL ALTER

ADDRESS Elkridge PHONE Elk. 1927

A SEWAGE DISPOSAL SYSTEM LOCATED AT New Cut Rd., 1st entrance on the left going toward Montgomery Rd., from E. C. after passing under powerline.

SUBDIVISION ROAD LOT

PROPERTY OWNER Lotz, Charles A.

ADDRESS Ellicott City

SPECIFICATIONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 300 SQ. FT. below the inlet.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Place the dry well about 125 ft. to 145 ft. from New Cut Road and about 90 ft. to 110 ft. from the side of the lot nearest to Montgomery Rd.

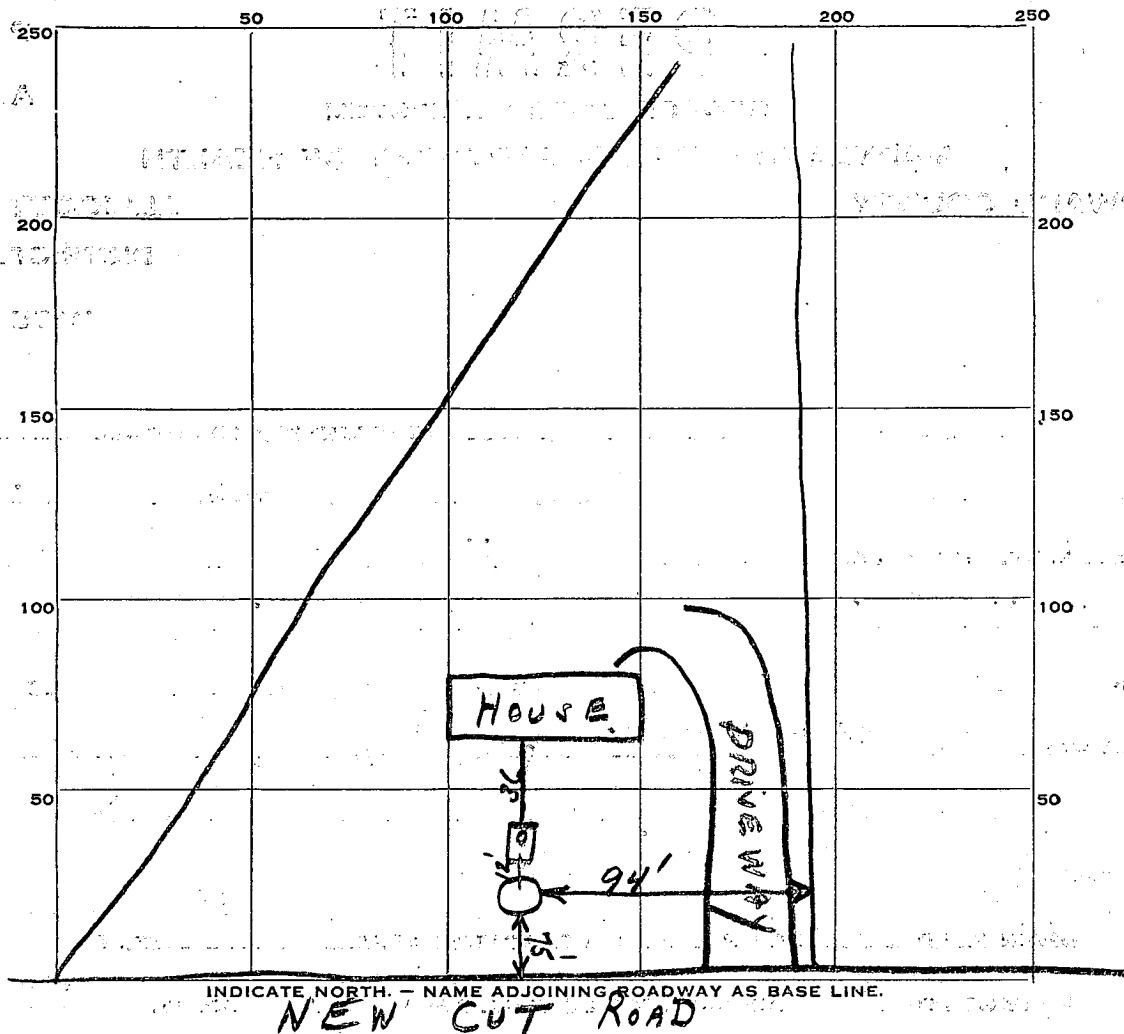
Septic tank cannot be installed more than 3 feet below original grade.

PLANS APPROVED BY Raymond Hodges DATE 11/15/60

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

A03159



PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS STAND PIPE

DISTRIBUTION BOX, LEVEL None

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 12 FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 4-6-61 Two foot of water in bottom of dry well H.
Dry well too close to New cut road 75 ft
Should be 125 to 145 ft. House where dry well
test run. Also too much slope (1-2 ft.) on house
sewer. Probably wouldn't hit water if installed per permit.

DATE SYSTEM APPROVED _____ installed - not approved INSPECTOR _____

APPLICATION

SEWAGE DISPOSAL TESTING

A 03159
P 03463

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

750 Gallon Tank

ELLICOTT CITY

Dry Well - 300 sq ft sidewalk area below the inlet

DISTRICT 2

DATE 11-7-60

Place the dry well about 125 ft to 145 ft from New Cut Road and about 90 ft to 110 ft from the side of the lot nearest to Montgomery Road

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Charles A. Lotz

ADDRESS Ellicott City

PHONE E. C. 1546

PROPERTY LOCATION:

SUBDIVISION

LOT NO.

ROAD AND DESCRIPTION

New Cut Road, entrance on the left going toward Montgomery Rd from E. C. after passing under powerline

OCCUPANT

PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE

SIZE OF LOT

1 3/4

TYPE BLDG.

3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT

Lawrence M. Choyce

APPROVED BY

Raymond Hodges

FOR

Dry Well

(KIND OF SYSTEM)

DATE

11/15/60

REJECTED BY

FOR

(KIND OF SYSTEM)

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

REGION _____

AREA _____ RATING _____

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health
BUREAU OF ENVIRONMENTAL HEALTH

DISPOSITION	DATE

RECORD OF INVESTIGATION

LOCATION 4605 New Cut Road ZIP _____
 OWNER Curtis Sykes ADDRESS same PHONE _____
 OCCUPANT _____ ADDRESS _____ PHONE _____
 COMPLAINANT Anonymous ADDRESS _____ PHONE _____
 REASON FOR INVESTIGATION Overflowing sewage in front yard

RECEIVED BY M.R. DATE 8/19/94 ASSIGNED TO M.R. DATE 8/25
 CODES _____

DATE OF INVESTIGATION 8/25 TIME 4:00 WEATHER mild, sunny
 REPORT 8/25/94 overflow in front yard located, owner informed of need to repair and need to pump; owner cooperative, intends to fix next week
 MR

DATE SUBMITTED _____ SANITARIAN _____