Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

CB141052

Date Received: 10/1/14

Permit No.: B14003579

Building Address: 620 Sideling Court
City: Sykesville State: MD Zip Code: 21784
Suite/Apt. #: SDP/WP/BA #:
Census Tract: Subdivision:
Section: Area: Lot:
Tax Map: Parcel: Grid:
Zoning: Map Coordinates: Lot Size:

Existing Use: single family
Proposed Use: entrance steps 4'x4'x6' long
Estimated Construction Cost: $ 950
Description of Work: side entrance steps 4'x4'x6' landing + steps

Occupant or Tenant: both at some point
Was tenant space previously occupied? ☐ Yes ☒ No
Contact Name: Irena Sujeta
Address: 620 Sideling court
City: Sykesville State: MD Zip Code: 21784
Phone: 410 552-9478 Fax:
Email: isujeta@aol.com

Property Owner's Name: Juozas Sujeta
Address: 620 Sideling Ct.
City: Sykesville State: MD Zip Code: 21784
Phone: 410 552-9478 Fax:
Email: isujeta@aol.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Juozas Sujeta
Address: 620 Sideling Ct.
City: Sykesville State: MD Zip Code: 21784
Phone: 410 552-9478 Fax:
Email: isujeta@aol.com

Contractor Company: Homeowner
Contact Person:
Address:
City: State: Zip Code:
License No.:
Phone: Fax:
Email:

Engineer/Architect Company:
Responsible Design Prof.:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Commercial Building Characteristics	Residential Building Characteristics
Height:	☒ SF Dwelling ☐ SF Townhouse
No. of stories:	Depth / Width
Gross area, sq. ft./floor:	1st floor:
	2nd floor:
Area of construction (sq. ft.):	Basement:
	☐ Finished Basement
Use group:	☐ Unfinished Basement
	☐ Crawl Space
Construction type:	☐ Slab on Grade
☐ Reinforced Concrete	No. of Bedrooms:
☐ Structural Steel	**Multi-family Dwelling**
☐ Masonry	No. of efficiency units:
☐ Wood Frame	No. of 1 BR units:
☐ State Certified Modular	No. of 2 BR units:
	No. of 3 BR units: (landing &
	Other Structure: side steps)
	Dimensions:
➢ Roadside Tree Project Permit	Footings:
☐ Yes ☒ No	Roof:
Roadside Tree Project Permit #	☐ State Certified Modular
	☐ Manufactured Home

Utilities	
Water Supply	
☐ Public	
☒ Private	
Sewage Disposal	
☐ Public	
☒ Private	
Electric: ☒ Yes ☐ No	
Gas: ☒ Yes ☐ No	
Heating System	
☒ Electric ☐ Oil	
☐ Natural Gas ☐ Propane Gas	
☐ Other:	
Sprinkler System:	
☐ Yes ☒ No	
Grading Permit Number:	
Building Shell Permit Number:	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREOTO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Juozas Sujeta
Applicant's Signature

Juozas Sujeta
Print Name

isujeta@aol.com
Email Address

9/29/14
Date

Juozas Sujeta
Title/Company

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	11/3/14	H. Oswald

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	☐ Yes ☐ No
Is Entrance Permit Required?	☐ Yes ☐ No
Historic District?	☐ Yes ☐ No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	$
Permit Fee	$
Tech Fee	$
Excise Tax	$
PSFS	$
Guaranty Fund	$
Add'l per Fee	$
Total Fees	$
Sub-Total Paid	$
Balance Due	$100
Check	# 2037

Distribution of Copies: White: Building Officials Green: PSZA, Zoning Yellow: PSZA, Engineering Pink: Health Gold: SHA

~ V. MAIL TO OWNER

BPR INC

SURVEYORS - LAND PLANNERS
150 Airport Drive
Suite 4
Westminster, Maryland 21157

Phone: (410)-857-9030
(410)-876-0333
Fax: (410)-876-1532
Web: bprsurveying.com

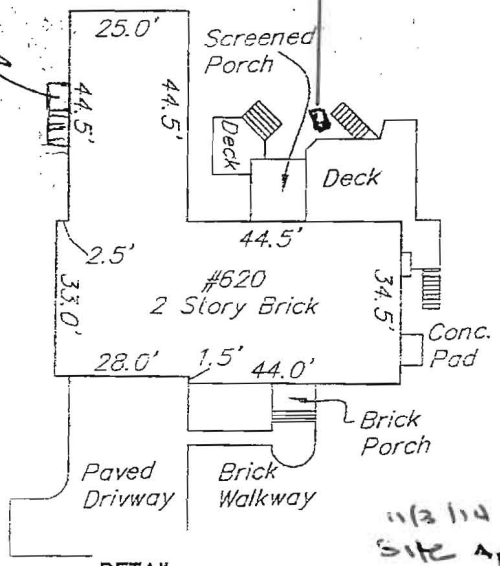
LOCATION DRAWING
LOT 14, SECTION FOUR

GAITHERS SIDELING

RECORDED IN PLAT C.M.P. 7800
Tax Map 4, Grid 19, Parcel 110
4th ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

NOTES

1. All fencelines must be verified by a boundary survey.
2. A statement of minimum advice is an integral part of the plat and is detailed on the attached general notes.
3. The property shown hereon is affected by the Flood Hazard Zone as shown on Flood Insurance Rate Map for Howard County, Maryland Panel No. 4 of 45, Community Panel No. 240044 0004B as prepared by the National Flood Insurance Program, revision date December 4, 1986.



DETAIL
Scale: 1 inch = 40 feet

11/3/14
Site plan approved for B1400357 (side entrance steps)
H.O.

STATE OF MARYLAND
STEPHEN C. BARNHART

To: Hank Oswald

From: Irena Sujeta

Re.: Requested bedroom plans

To: Hank Oswald
fax 410-313-2648

FOGLE'S SEPTIC CLEAN, INC.

580 Obrecht Road
Sykesville, Maryland 21784
(410) 795-5679

FOGLE'S SEPTIC EVALUATION

Irena Sujeta — 620 Sidehing Ct
CLIENT — INSPECTION ADDRESS

Sykesville — MD — 21784
CITY — STATE — ZIP — PHONE

INSPECTION

Tuesday — 11/20/12 — 10:00 AM — Pat Rumbaugh - Agent
DAY — DATE — TIME — ORDERED BY

410 259-6435

WEATHER — GENERAL GROUND CONDITIONS

System Age ____ ? Last Pumped 6/2008 Fogles Problems ____ ?(note below) Repair Date ____ ?
Home Age 1970s ? Occupied Vacant ? Number ____ ? House Locked ____ ?(re-entry)

- This is a subjective and visual inspection only, based upon many unknown and unseen factors.
- The condition of the Sewage Disposal System is reported as of the above date.
- This report does not WARRANT nor GUARANTEE continued functional Sewage Disposal System operations.
- If home has been unoccupied this report may not be accurate. Little or no use of the septic system could have allowed the problems to temporarily clear themselves.
- If a larger family is moving in than is presently occupying the house, the septic system may be subject to failure.
- If the general ground condition is wet, this report may not be accurate, as ground moisture may cover or hide actual septic effluent on the surface.
- In the above cases, it is strongly suggested that the septic system be recertified in 3 to 6 months.
- If system is rated below as marginal or unsatisfactory, it is suggested that the local health department be contacted to inspect and confirm the findings.

PAYMENT FOR THIS INSPECTION SIGNIFIES UNDERSTANDING AND ACCEPTANCE OF ABOVE CLAUSES.

The outside area showed no signs of septic system failure or as noted below:
Concrete septic tank [illegible]. Tank does not have [illegible] system. Also good flow [illegible] the house [illegible] the [illegible]. Tank should be cleaned at this time due to limited area and cleaned regularly.

System Appears: FUNCTIONAL (circled) MARGINAL UNSATISFACTORY

Cos
$225.00 — DISC — 11/20/12 KOE — K [signature]
Amount — Check No. — Date Paid — Inspector Signature

Oswald, Hank

From: isujeta@aol.com
Sent: Friday, October 31, 2014 2:31 PM
To: Oswald, Hank
Subject: Re: List of Licensed Septic Contractors
Attachments: 034.JPG

Mr. Oswald,

Attached is apicture of the undug area around the septic and deck. The deck legs are not on the septic.

Thank you,

Irena

-----Original Message-----
From: Oswald, Hank <hoswald@howardcountymd.gov>
To: isujeta <isujeta@aol.com>
Sent: Tue, Oct 21, 2014 2:32 pm
Subject: List of Licensed Septic Contractors

Mr. Sujeta:

As discussed, please find a list of septic contractors to assist you with the septic tank inspection. Should you have any additional questions, please don't hesitate to ask.

Thanks,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Well and Septic Program
(410) 313 - 1786

A 37895

SUBDIVISION: Gaither Sideling
Sideling Court

LOT NUMBER: 14

DRY WELL OR DRY WELL AND TRENCH

_____ sq. ft./bedroom

	Septic Tank	Minimum Total Square Feet
3 bedroom	1000 gallon	
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

180 sq. ft./bedroom

Trench to be 3.0 ft wide.

Inlet 3.0 feet below original grade.

Bottom maximum depth 5.0 feet below original grade.

Effective area begins at 3.0 feet below original grade.

2.0 feet of stone below distribution pipe.

NOTE:
(1) No trench to exceed 100 feet in length.
(2) If more than one trench used, a distribution box is required.
(3) Trenches to be installed on level ground.
(4) Call for inspection of trench before gravel is installed.
(5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
(6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION: Beginning at the intersection of the 170.0' and 519.56' lot lines, place the first trench 55 ft down the left lot line (519.56') and 90 ft off the same lot line. Run trenches on contour toward the left lot line, Maintain a minimum of 100 ft from the well. DEN 6-28-89

7-19-89 ok DEN

HD-191

4/30/90 ASAP

PERMIT

P 45381

SEWAGE DISPOSAL SYSTEM

A 37895

MARYLAND STATE DEPARTMENT OF HEALTH*

DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-347250

DATE 04/25/90

DATE SYSTEM APPROVED 4/30/90

INDEXED

INSPECTOR M.R. Fiscus

Fogle's Septic Service, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Gaither Sideling ROAD 620 Sideling Court LOT 14, Sec.4

PROPERTY OWNER Feaga Contracting & Building Company, Inc.

ADDRESS

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

~~GARBAGE GRINDER YES NO~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning at the intersection of the 170.0' and 519.56' lot lines, place the first trench 55 feet down the left lot line (519.56') and 90 feet off the same lot line. Run trenches on contour toward the left lot line. Maintain a minimum of 100 feet from the well.

NOTE - No trench to exceed 100 feet in elngth. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY Jane Nadeau DATE 6/28/89

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

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

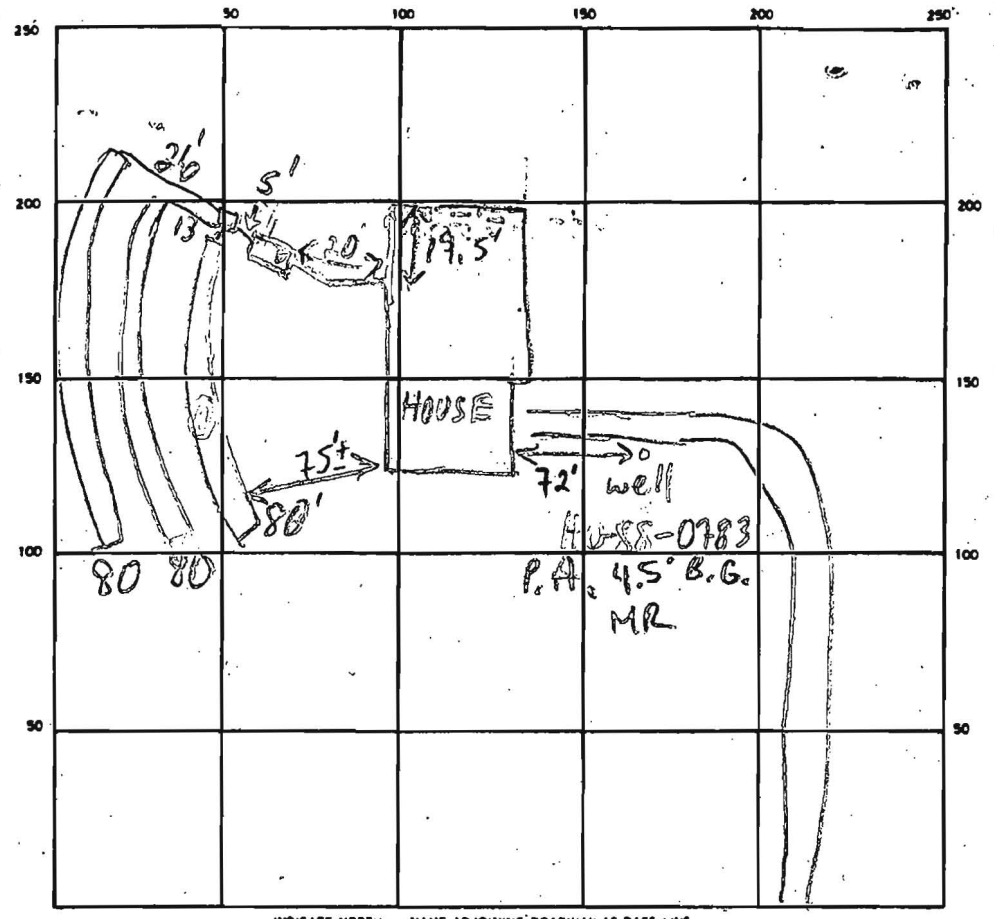
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

A 37895

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

HD-260



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

SIDELING CT.

SEPTIC TANK. LEVEL 1250 GAL-OK CLEANOUTS OK

DISTRIBUTION BOX. LEVEL OK-BAFFLE IN

DRAIN FIELD/TILE FIELD. DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3@80 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 3@240 SQ FT.

DRYWELL INSIDE DIAMETER — FT EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS 4/30/90 OK TO COVER ALL HR

DATE SYSTEM APPROVED 4/30/90 INSPECTOR M. Rifkin

APPLICATION

A 37895

PERCOLATION TESTING

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Feagan Contracting & Building Co., Inc.

ADDRESS _____ PHONE 461-5763

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Gaither Sideling LOT NO. 14 repere, See 4

ROAD AND DESCRIPTION 620 Sideling Court

TAX MAP 4 PARCEL # 31

SIZE OF LOT _____ TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

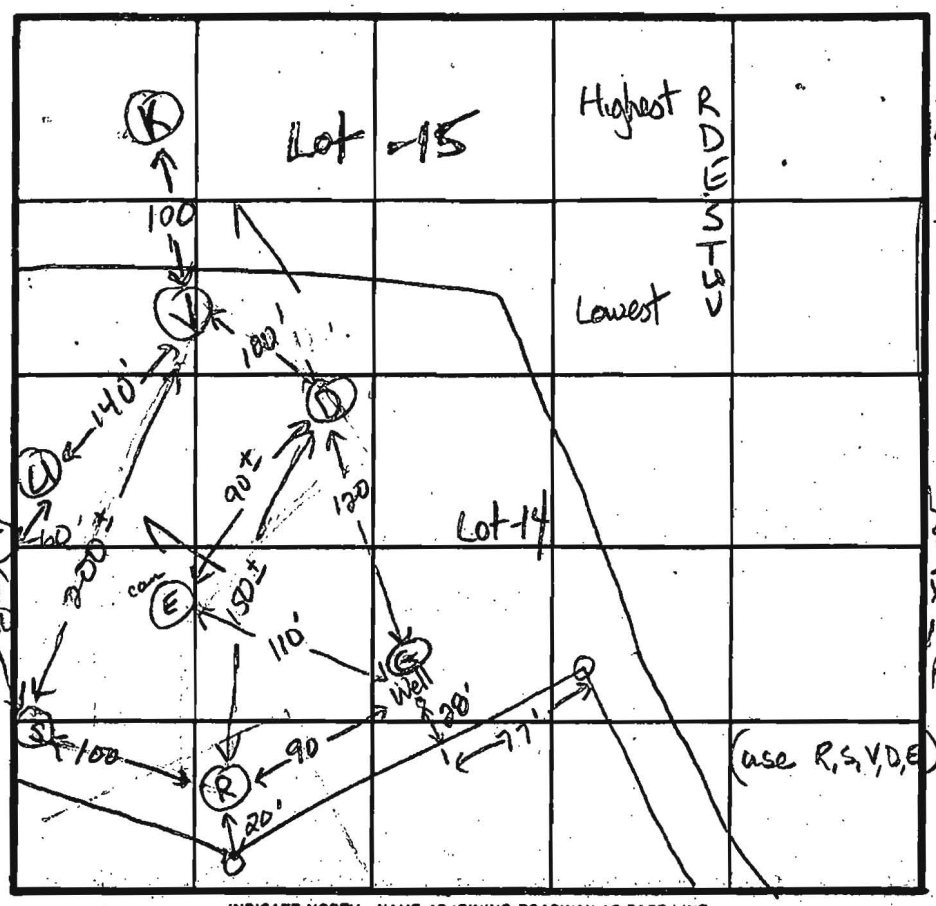
REASONS FOR REJECTION OR (HOLDING) Repere holding pending certified plat approval and well site availability JEN 6-6-89

BLDG. PERMIT SIGNED AND RETURNED 10/4/89
Issued # 29347 - SFD - 4 Bdrms

HD-216

THIS IS NOT A PERMIT

A 37895



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

(R) SOIL PROFILE

0 - 4.0 Br sa cl lm
4 - 12.0 Tan mica sa si lm little decomp rx < 5%
12.0' Bottom

(S)

0 - 5.5 Rd sa si cl lm
5.5 - 9 Rd sa si lm
9 - 13.0 Gray sa si lm some broken rock < 30%
13.0 Bottom

(T) (U)

0 - 5.5 Rd-br sa si lm < 88% broken rx
5.5 Refusal

(V)

0 - 5.0 Br si cl lm
5.0 - 12.0 Rd-br sa si lm some decomp rx frags < 10%
12.0 Bottom

SHALLOW SYSTEM
$\bar{x}$ = 5 min
Inlet = 3.0 ft
Bottom = 5.0 ft
180 sqft/bdrm

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
6-6-89	R	5.0 S 8.0 M	2:25 2:24	2:27 2:27	2:27 2:27	2:29 2:32	2 min 5 min
		12.0 D	Bottom				ok
	S	6.5 S 13.0 D	2:37 Bottom	2:40	2:40	2:42	2 min ok
	T	5.5 V	Refusal at	5.5 ft			No
	U	7.0 V	Refusal at	7.0 ft			No
	V	12.0 V	Bottom	(See profile)			ok
NOTE:	D is old #	2 (11-12-86)					
	E is old #	4 (11-12-86)					
	G is old #	3 (11-12-86)					

REMARKS Use new holes # R, S, V, old holes # D, E, Stay 10 ft downhill from # R and about 20 ft uphill from # D

TYPE OF SOIL

TESTED BY Jane E. Nadeau ALSO PRESENT Phil Mangelitz, Claude Cissel

APPLICATION

Barry Feaga
461-5163 - Bldr

PERCOLATION TESTING

A 3795

P

DISTRICT 4

DATE 7/17/86

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

11/12/86 perc ord pending approved plat

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Arthur Dadian

ADDRESS 1846 16th St. NW Wash DC 20009 PHONE 202-332-5364

PROSPECTIVE BUYER Gaither Road Joint Venture

ADDRESS 9 Carissa Ct. Owings Mills, MD 21117 PHONE 301-356-9351

PROPERTY LOCATION: Jenal 14 Seat 9

SUBDIVISION Gaither Sidling LOT NO. 18

ROAD AND DESCRIPTION Gaither Road + Patapsco River

TAX MAP 4 PARCEL # 31

SIZE OF LOT 3-5 ac TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Barry M. Emmel
(SIGNATURE OF APPLICANT)

APPROVED BY B Nixon FOR shallows only DATE 7/2/87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

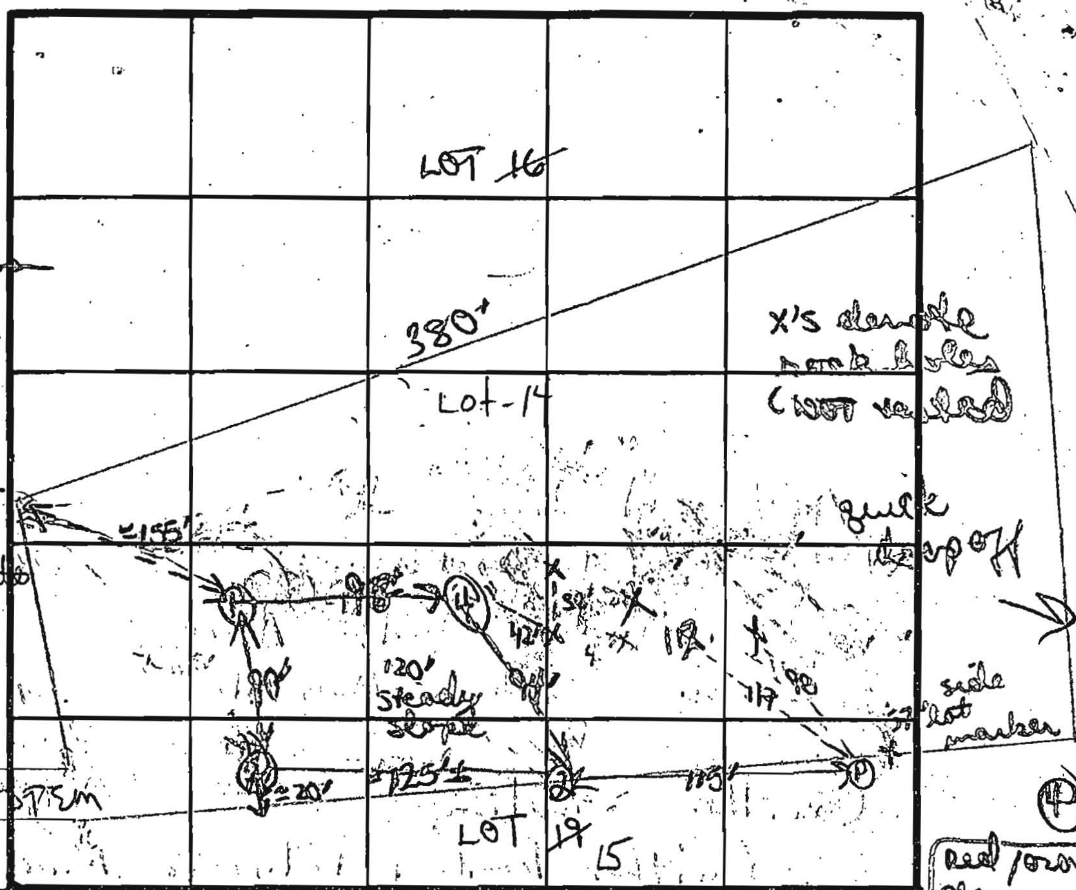
REASONS FOR REJECTION OR HOLDING for field located & certified holes - good & all rock holes

THIS IS NOT A PERMIT

SHALLOW SYSTEM
INLET 3'
MAX D 5'
180 Ø / BDRM
X̄ 2+ min

SOIL PROFILE

0
red/orange clay/clay loam
3½'D
changing to orange brown silty loam
~3' ↓ small med granite ↑ to 15-20%
~9' ↓ ~10%
10½'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

② common hole
red/brown gritty shaley clay > clay loam 3' changing to tan/brown + darker brown silty loam from 5-9' ↓ small frags mica schist rocks (10%)
11½'D

③
Brown/silty clay 2½' to tan brown rocks to dark brown silty loam med & small frags 4-8'

④
red/orange clay 3' brown/tan brown silty mica loam w/ 5-15% small-med mica schist granite [illegible]
10½-11'D

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/12/86	①	3½	11^{40}	11^{42}	11^{42}	11^{42}	2 min
		7½	11^{32}	11^{33+}	11^{33+}	11^{36}	3 min
		10½'D	bottom (see profile)				
common hole	②	4½'S	12^{04}	12^{06}	12^{06}	12^{08}	2 min
		8'M	12^{07}	12^{09}	12^{09}	12^{12}	3 min
		11½'D	bottom (see profile)				
	③	4'S	2^{26}	2^{28}	2^{28}	2^{30}	2 min
		12'D	bottom (see profile)				
	④	3½'S	2^{02}	2^{04}	2^{04}	2^{06}	2 min
		10½+'D	bottom (see profile)				

tricky orientation of lots relative to perc sites
REMARKS perc fields adj (include 1 common hole)
4 or 5 dead rock holes
TYPE OF SOIL clays + silty mica loams; 5-15% mica schist

TESTED BY B Nixon ALSO PRESENT Gary, John

APPLICATION

A 37895

PERCOLATION TESTING

P

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 4

DATE 7/17/86

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Arthur Dadian

ADDRESS 1846 16th St. NW - Wash DC 20009 PHONE 202-332-5364

PROSPECTIVE BUYER Gaither Road Joint Venture

ADDRESS 9 Carissa Ct. Owings Mills, MD 21117 PHONE 301-356-7351

PROPERTY LOCATION:

SUBDIVISION Gaither Sibling LOT NO. 14 final

ROAD AND DESCRIPTION Gaither Road + Patapsco River

TAX MAP 4 PARCEL # 31

SIZE OF LOT 3-5 ac TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

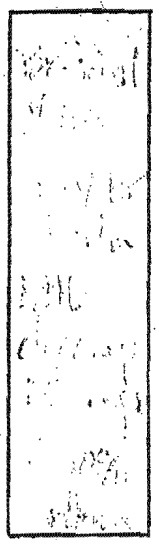
REJECTED BY _____ FOR _____ DATE _____

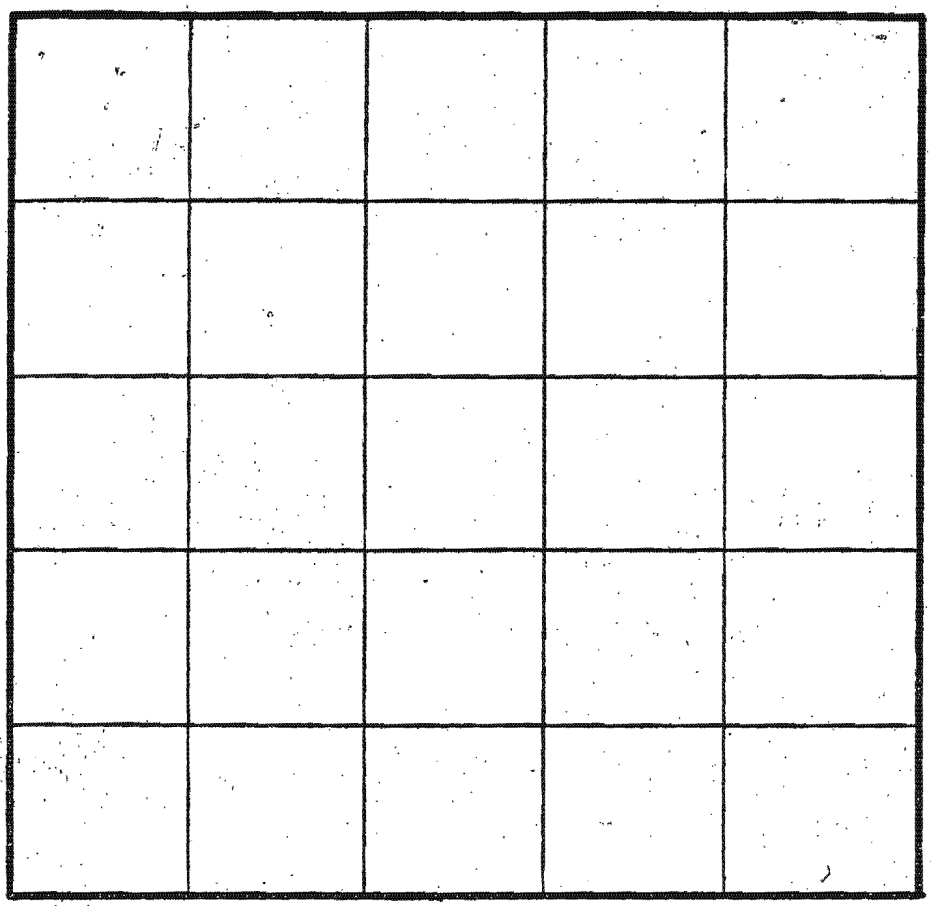
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SOIL PROFILE





INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME

REMARKS _____

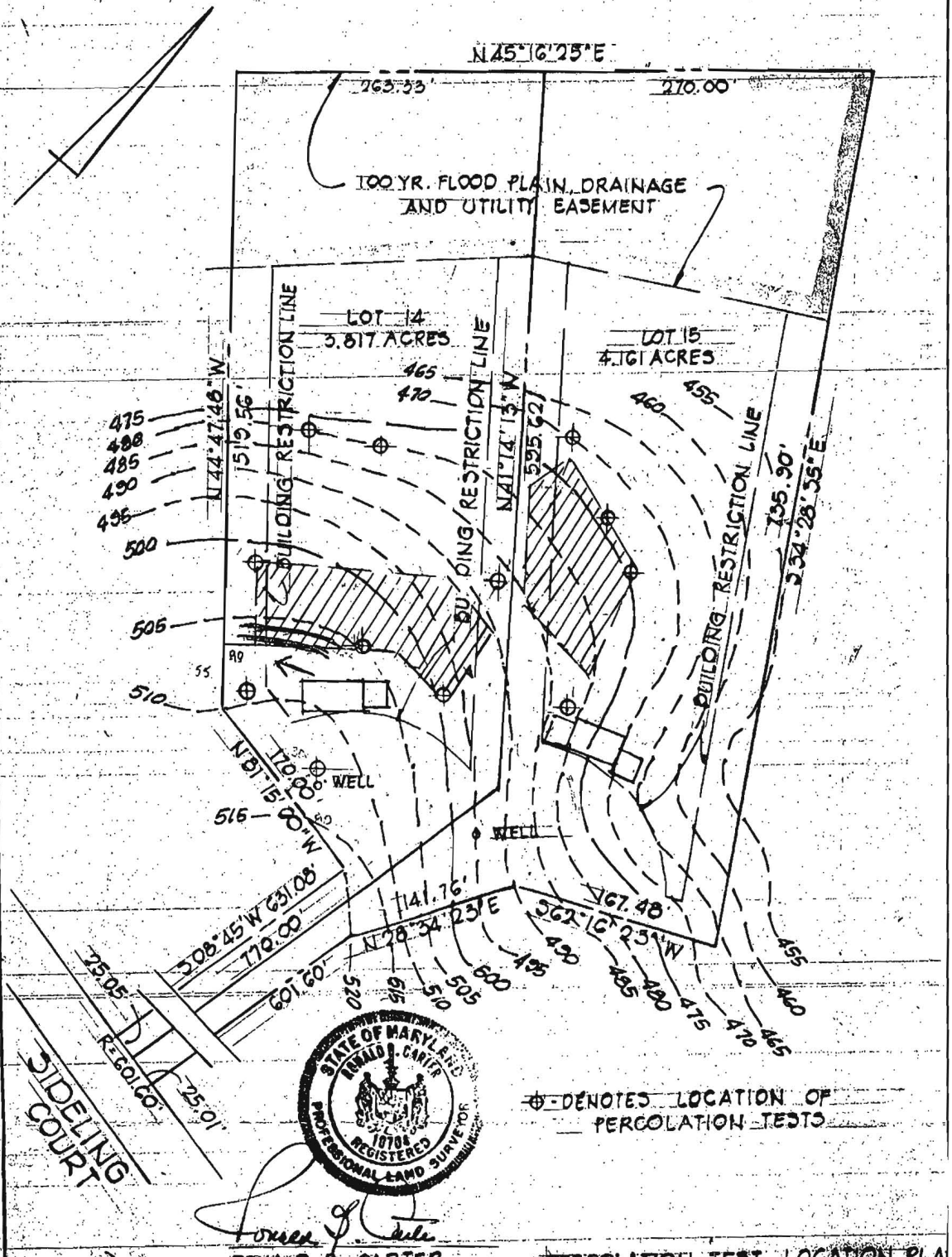
TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

EH-12-1079

APPROVED: HOWARD CO. HEALTH DEPT.

HOWARD COUNTY HEALTH OFFICER DATE

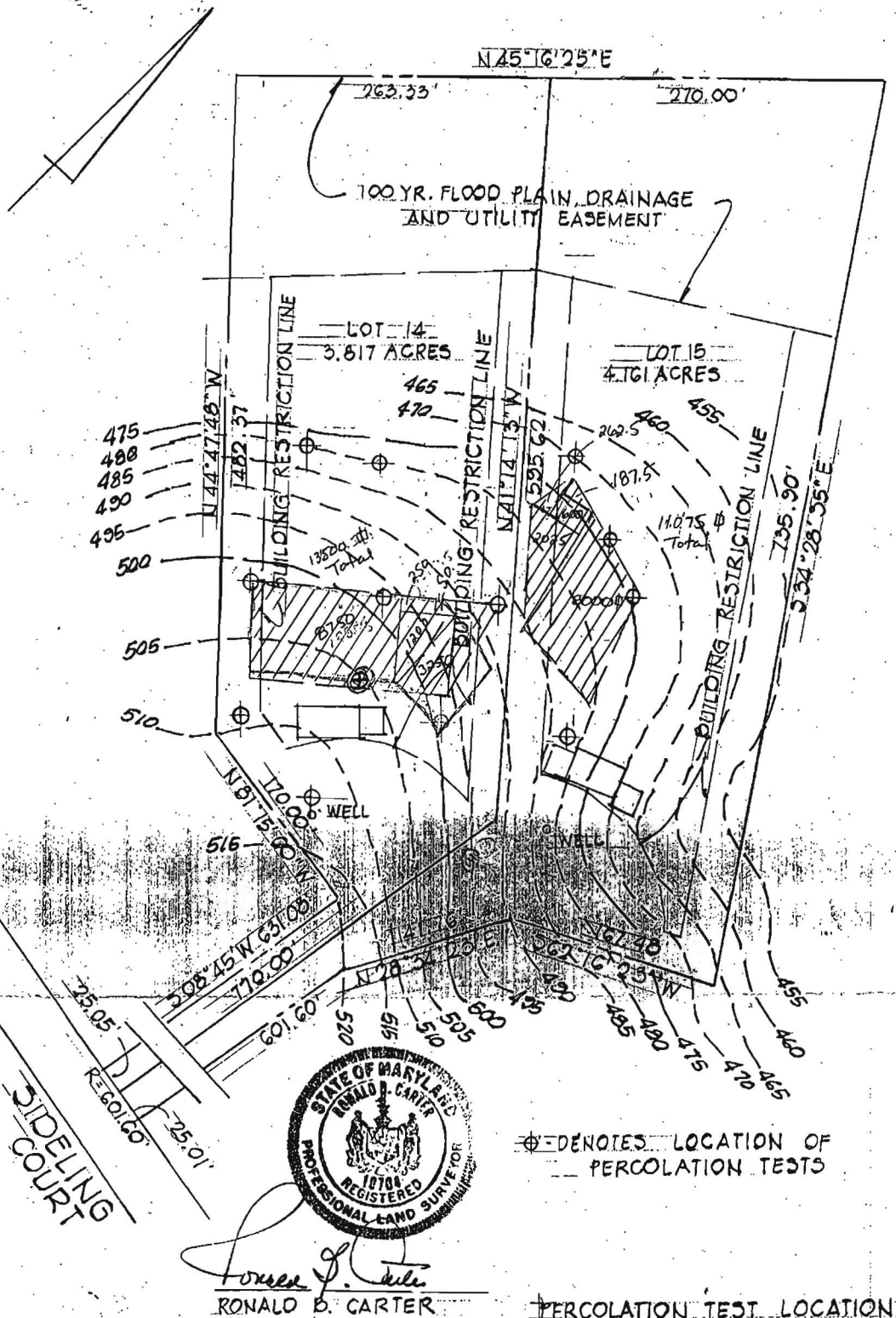


RONALD D. CARTER

PERCOLATION TEST LOCATION PLA
LOTS 14 AND 15
GAITHER'S SIDELING
4TH. ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' JUNE 16, 1989

APPROVED: HOWARD CO. HEALTH DEPT.

HOWARD COUNTY HEALTH OFFICER DATE



STATE OF MARYLAND
RONALD B. CARTER
10704
REGISTERED
PROFESSIONAL LAND SURVEYOR

RONALD B. CARTER

PERCOLATION TEST LOCATION PLAN
LOTS 14 AND 15
GAITHERS SIDELING
4TH. ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' JUNE 16, 1989

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ✓ Receipt # 45802
Replacement ____ Date 4/20/90

Name of Installer J.A. Smith + Co Inc Telephone 796-7532

License Number 5581
Certified Well Pump Installer ____ Well Driller ____ Registered Plumber ✓

Name of Property Owner Fegga Contracting + Building Co Telephone ~~465~~ 461-5163
Subdivision Gaither Sideling Lot # 14 Well Tag # HO-88-0783
Site Address 6020 Sideling Ct Sykesville MD 21784

Pump
1. Type
   a. Deep well jet ____
   b. Shallow well jet ____
   c. Submersible ✓
2. Make Goulds
3. Model # 7EH05
4. Capacity 7 GPM
5. Pump exceeds well capacity Yes ____ No ✓
6. If Yes, is low pressure cutoff switch installed? Yes ____ No ____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ✓ Cable guards ✓ Other ____

Motor
1. Horsepower ½ HP
2. RPM 3450
3. Voltage 230
   a. 110 ____
   b. 220 ✓

Pitless Adapter
1. Make ~~Martinson~~ HOWARD
2. Model # ~~B40X~~ PT800
3. Depth 42"

Tank
1. Capacity 20Gal
2. Pressure relief valve? ✓

Piping
1. Type NPT 160
2. Size 1"
3. NSF and/or BOCA Code approved ✓
4. Depth of supply line 42"

Well data
1. Depth 165 ft.
2. Yield 12 GPM
3. Static water level 40 ft.
4. Will water supply be disinfected by installer? NO

OK 4/30/90 M. Rifkin
See Septic Insp Sheet.

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: J. Allen Smith Jr.

Date: 4/10/90

Note: A sticker indicating approval/status of the installation will be placed on the well-casing at the time of the inspection.

HD-215

C 1 | 9957 | SEQUENCE NO. (DENV USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A 37895

ST/GO USE ONLY
DATE Received

DATE WELL COMPLETED 09/13/89

Depth of Well 165 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-88-0783

OWNER KINSEL, GARY
last name first name

STREET OR RFD SIDELL COURT TOWN SYKESVILLE

SUBDIVISION CARROLL SIDELL SECTION LOT 14

WELL LOG
Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET FROM	FEET TO	Check if water bearing
SAND	0	33	
CONGLOMERATE ROCK	33	165	V

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y no N
TYPE OF GROUTING MATERIAL
CEMENT CM BENTONITE CLAY BC
NO. OF BAGS 9 NO. OF POUNDS 846
GALLONS OF WATER 45
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. TOP to 32 ft. BOTTOM (enter 0 if from surface)

CASING RECORD
casing types insert appropriate code below
ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE	Nominal diameter top (main) casing (nearest inch)	Total depth of main casing (nearest foot)
ST	6	40

EACH CASING — OTHER CASING (if used)

diameter inch	depth (feet) from	to

SCREEN RECORD
screen type or open hole — insert appropriate code below
ST STEEL BR BRASS BRONZE HO OPEN HOLE PL PLASTIC OT OTHER

C 2

EACH SCREEN		DEPTH (nearest ft.)	
1	40	27	165
2			
3			

SLOT SIZE 1 ____ 2 ____ 3 ____
DIAMETER OF SCREEN ____ (NEAREST INCH)
from ____ to ____
GRAVEL PACK ____
IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

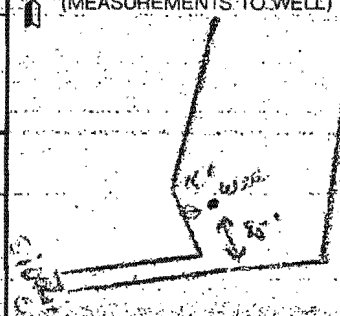
C 3

PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min. to nearest gal.) 12
METHOD USED TO MEASURE PUMPING RATE bucket
WATER LEVEL (distance from land surface)
BEFORE PUMPING 54
WHEN PUMPING 59

TYPE OF PUMP USED (for test)
A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
CAPACITY: GALLONS PER MINUTE (to nearest gallon)
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)
CASING HEIGHT (circle appropriate box and enter casing height)
+ above / − below LAND SURFACE 2 (nearest foot)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 938

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
T (E.R.O.S.) W Q
TELESCOPE CASING LOG INDICATOR OTHER DATA

COUNTY

Page 1 of
Date 7/15/89

Review OK 4/30/90 CW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0783
Location of property (road) ~~Sideling~~ SIDELING COURT
Subdivision GAITHER SIDELING Lot 14 Block ____ Plat ____ Sec. ____
Well Driller J. MAYNE Owner G. KIMMEL

Depth of well 165'
Distance of measuring point (M.P.) above ground 3½'
Static water level (S.W.L.) below M.P. 54'

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 20 gpm.
Total time 15 MIN. to reach pumping water level 57 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	57'	3 Sec.		20
8:00	57	5"		12
8:15	57	5"		12
8:30	57	5"		12
8:45	57	5"		12
9:00	57	5"		12
9:15	57	5"		12
9:30	57	5"		12
9:45	57	5"		12
10:00	57	5"		12
10:15	57	5"		12
10:30	57	5"		12
10:45	57	5"		12

HD-224

EMERGENCY/TEMP NO. IF ANY

B 1 2234 SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

STATE PERMIT NUMBER: HO-88-0783
fill in this form completely

Date Received (APA): 042189

OWNER INFORMATION

Last Name: KIMMEL First Name: GARY
Street or RFD: 17201 TROYEN ROAD
Town: MONROVIA State: MD Zip: 21111

DRILLER INFORMATION

Driller's Name: Joseph L. Mayne License No.: 238
Firm Name: Joseph L. Mayne WELL DRILLING
Address: 5512 Ridge Rd. Mt. Airy, Md. 21771
Signature: Joseph L. Mayne Date: 4/13/89

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.): 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- [H] HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) — circled
- [F] FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- [I] INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- [P] PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- [T] TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL: 200 FEET

APPROXIMATE DIAMETER OF WELL: 6 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) | JETTED | Jetted & DRIVEN
AIR-ROTary (circled) | AIR-PERcussion | ROTARY (Hydraulic Rotary)
CABLE | REVerse-ROTary | DRive-POINT
other ______

REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)

- [N] THIS WELL WILL NOT REPLACE AN EXISTING WELL — circled
- [Y] THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- [S] THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- [D] THIS WELL WILL DEEPEN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENDED (IF AVAILABLE): ______

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER: GAP

FORCE: CW (WRITE INITIALS IN BOX) PERMIT No. HO-88-0783

B 3 LOCATION OF WELL

COUNTY: HOWARD
SUBDIVISION: GAITHER SIDELING
SECTION: ___ LOT: 14
NEAREST TOWN: ~~GAITHER~~ SYKESVILLE
MILES FROM TOWN (enter 0 if in town): 1/2 MI

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX): N, NE, E, SE, S, SW (marked), W, NW — TOWN

NEAR WHAT ROAD: Sideling Court

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH, WEST, EAST, SOUTH — 32

DISTANCE FROM ROAD: 600
ENTER FT or MI: FT

NOT TO BE FILLED IN BY DRILLER
HEALTH DEPARTMENT APPROVAL

COUNTY NAME: Howard COUNTY NO.: A37895
STATE SIGNATURE ______ INSERT S
DATE ISSUED: 062689 CO SIGNATURE: Craig Williams EXP. DATE: 12/26/89
NORTH GRID: 554000 EAST GRID: 0801000

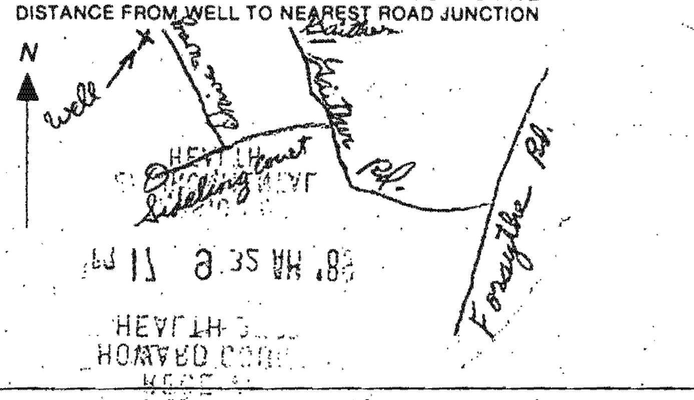
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

~~7/13/89~~ 9 1/2' CASING
7/14/89 3 1/2' CASING A.G.
40' CASING
32' OPEN
9 x BAGS
GROUT NOT OBS'D
000 000 ✓TAG OK MR 7/14/89

SOURCES OF DRILLING WATER
1. WELL
2.
3.

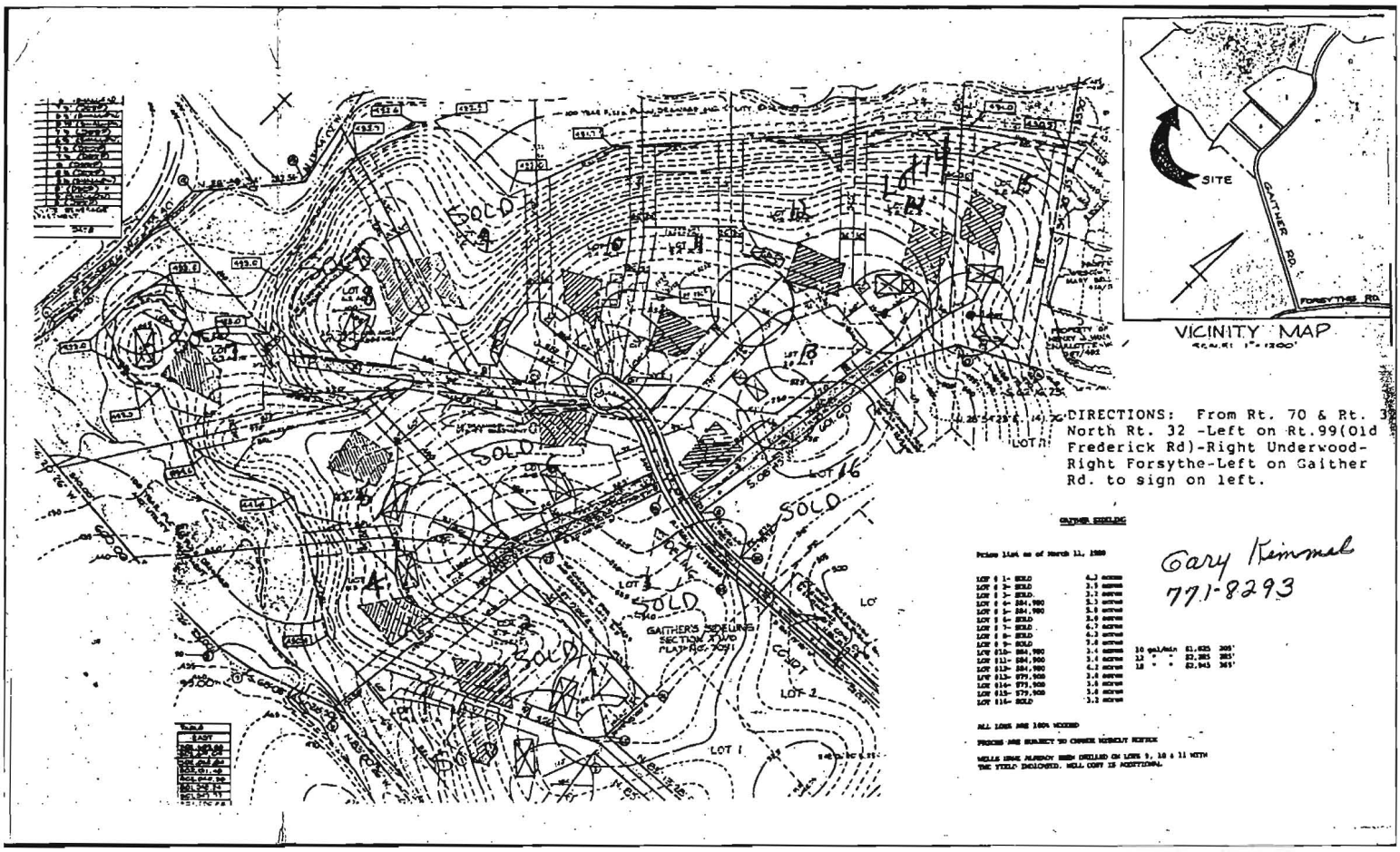
WRITE THE BOX NUMBER FROM THE MAP HERE
E 800
N 550

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

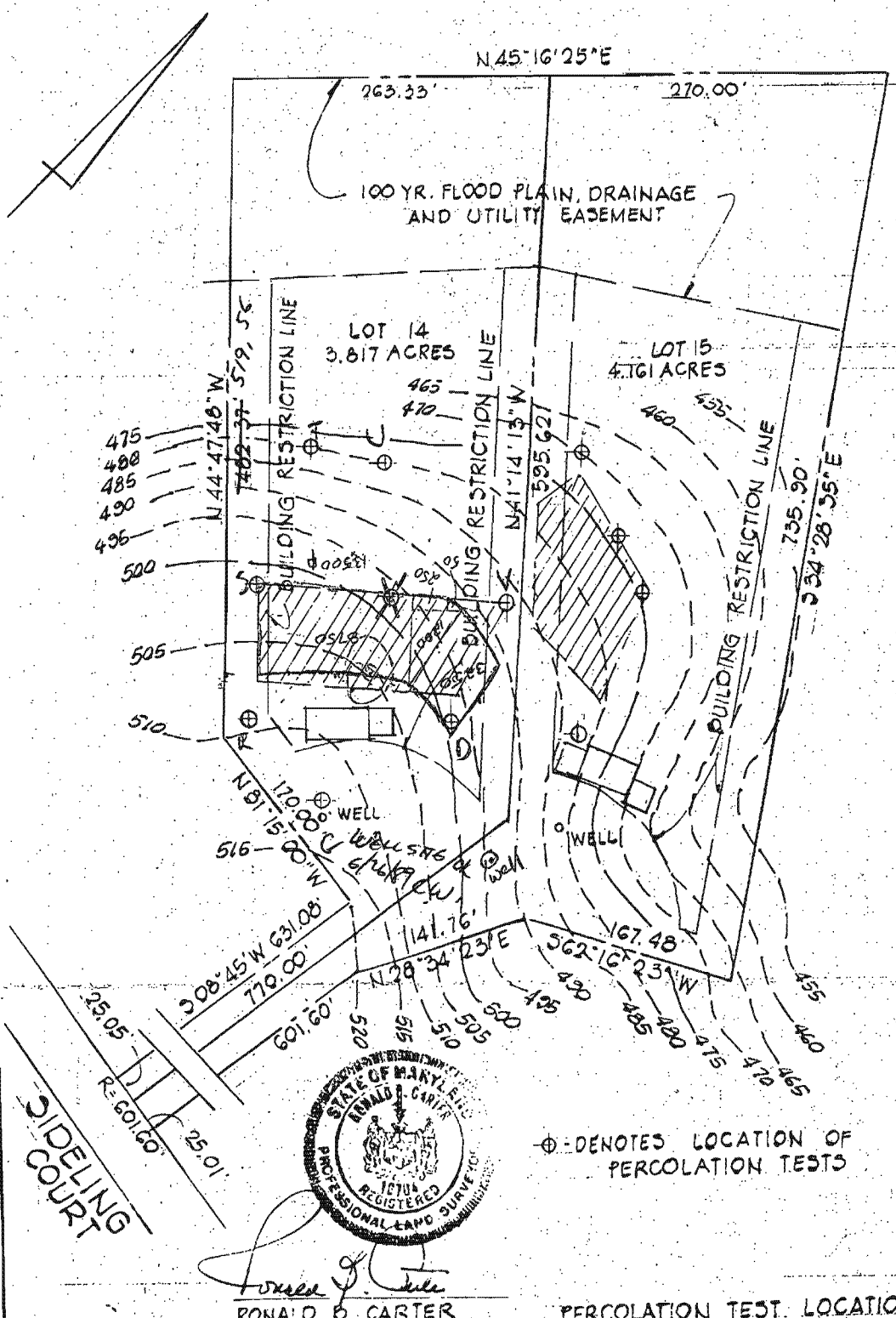
COUNTY


SOLD
SOLD
SOLD
SOLD
SOLD
SOLD
LOT 1
LOT 2
LOT 16
GAITHER'S SPRINGS
SECTION TWO
PLAT No. 7491
SITE
GAITHER RD.
FORSYTHE RD.
VICINITY MAP
DIRECTIONS: From Rt. 70 & Rt. 3
North Rt. 32 -Left on Rt.99(Old
Frederick Rd)-Right Underwood-
Right Forsythe-Left on Gaither
Rd. to sign on left.
Gary Kemmel
771-8293

APPROVED: HOWARD CO. HEALTH DEPT.

SENT FOR SIGNATURE NO PGR RGD LINE REVISION 6/26/89 CTW

HOWARD COUNTY HEALTH OFFICER DATE

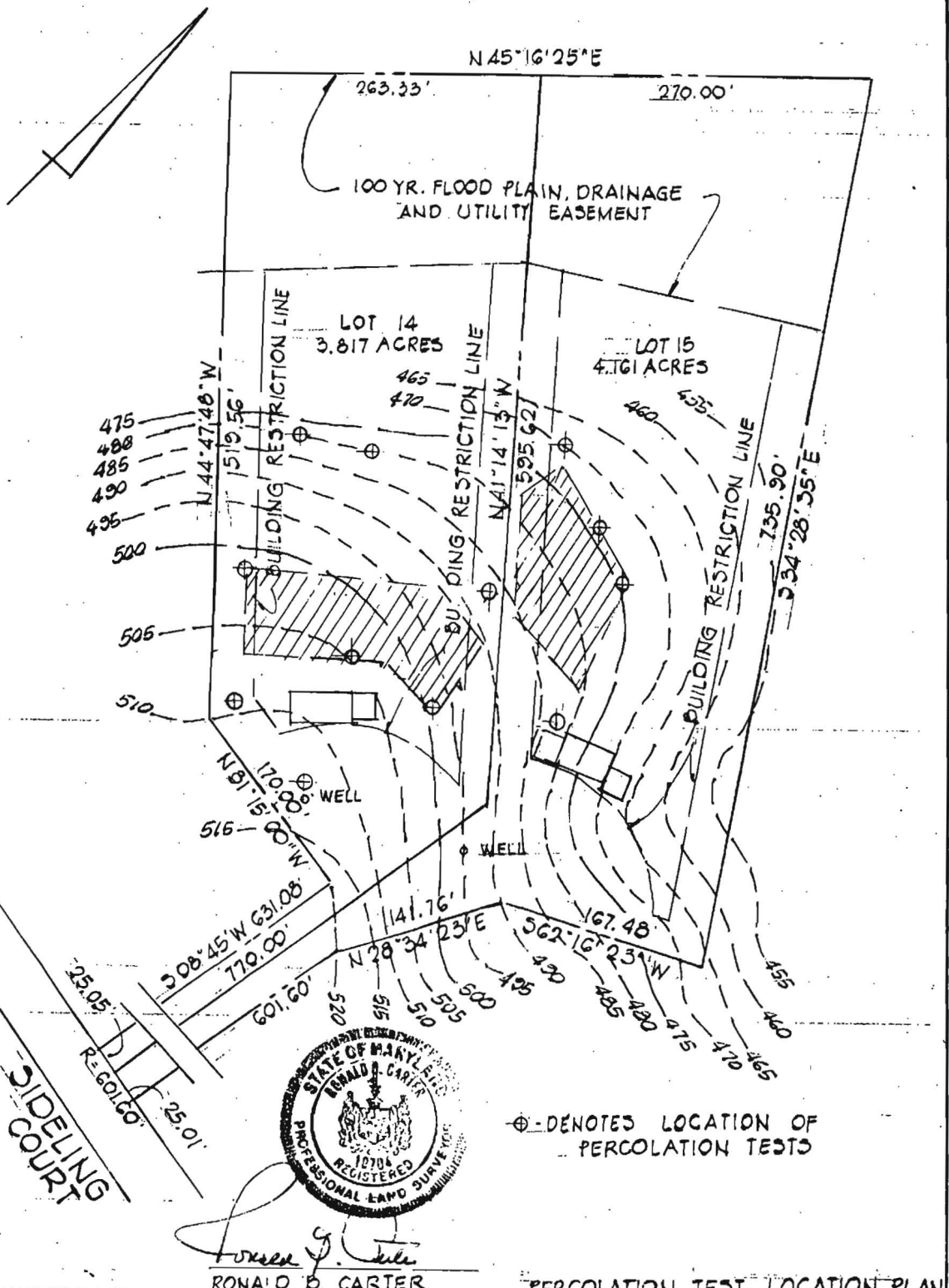


RONALD B. CARTER

PERCOLATION TEST LOCATION PLAN
LOTS 14 AND 15
GAITHER'S SIDELING
4TH. ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1" = 100' JUNE 16, 1989

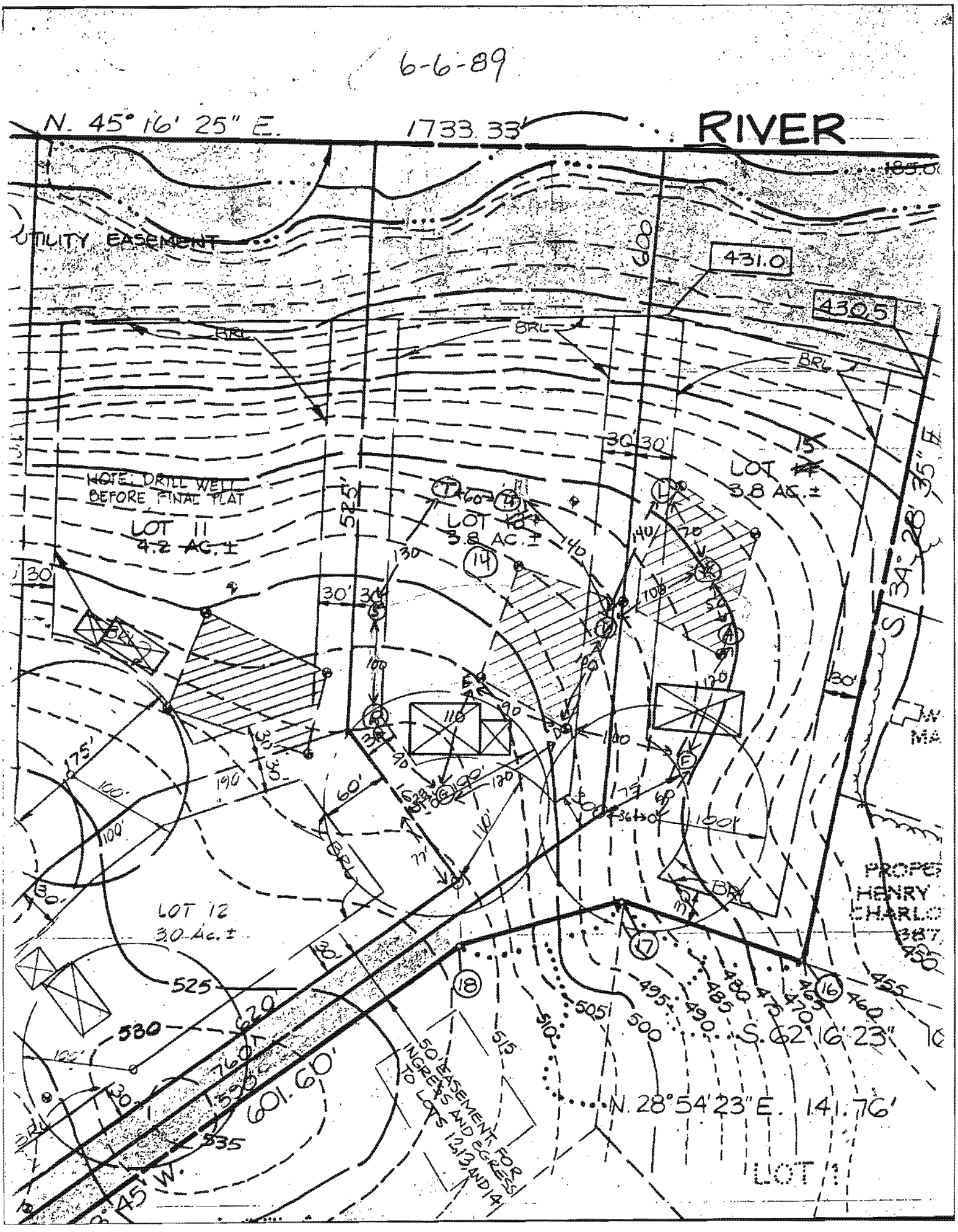
APPROVED: HOWARD CO. HEALTH DEPT.

HOWARD COUNTY HEALTH OFFICER — DATE 6-29-89



RONALD B. CARTER

PERCOLATION TEST LOCATION PLAN
LOTS 14 AND 15
GAITHER'S SIDELING
4TH. ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' JUNE 16, 1989


6-6-89
N. 45° 16' 25" E.
1733.33'
RIVER
UTILITY EASEMENT
431.0
430.5
BRL
NOTE: DRILL WELL BEFORE FINAL PLAT
LOT 11
4.2 AC. ±
LOT 13
3.8 AC. ±
LOT 14
3.8 AC. ±
LOT 12
3.0 Ac. ±
LOT 1
525
530
535
601.60'
S. 62° 16' 23"
N. 28° 54' 23" E. 141.76'
50' EASEMENT FOR INGRESS AND EGRESS TO LOTS 12, 13, AND 14
PROPE
HENRY
CHARLO
387.
480

6-21-89

Gaither Sideling Lots- 14 & 15

Reperc (6-6-89) Review

Lot- 15 A 37894 Old Lot- 14

— Well site is lower in elev. than high end of septic easement

Septic easement > 10,000 sq. ft.

— House is at a lower elevation than the high end of septic easement

Lot- 14 A 37895 Old Lot- 13

Well site is OK

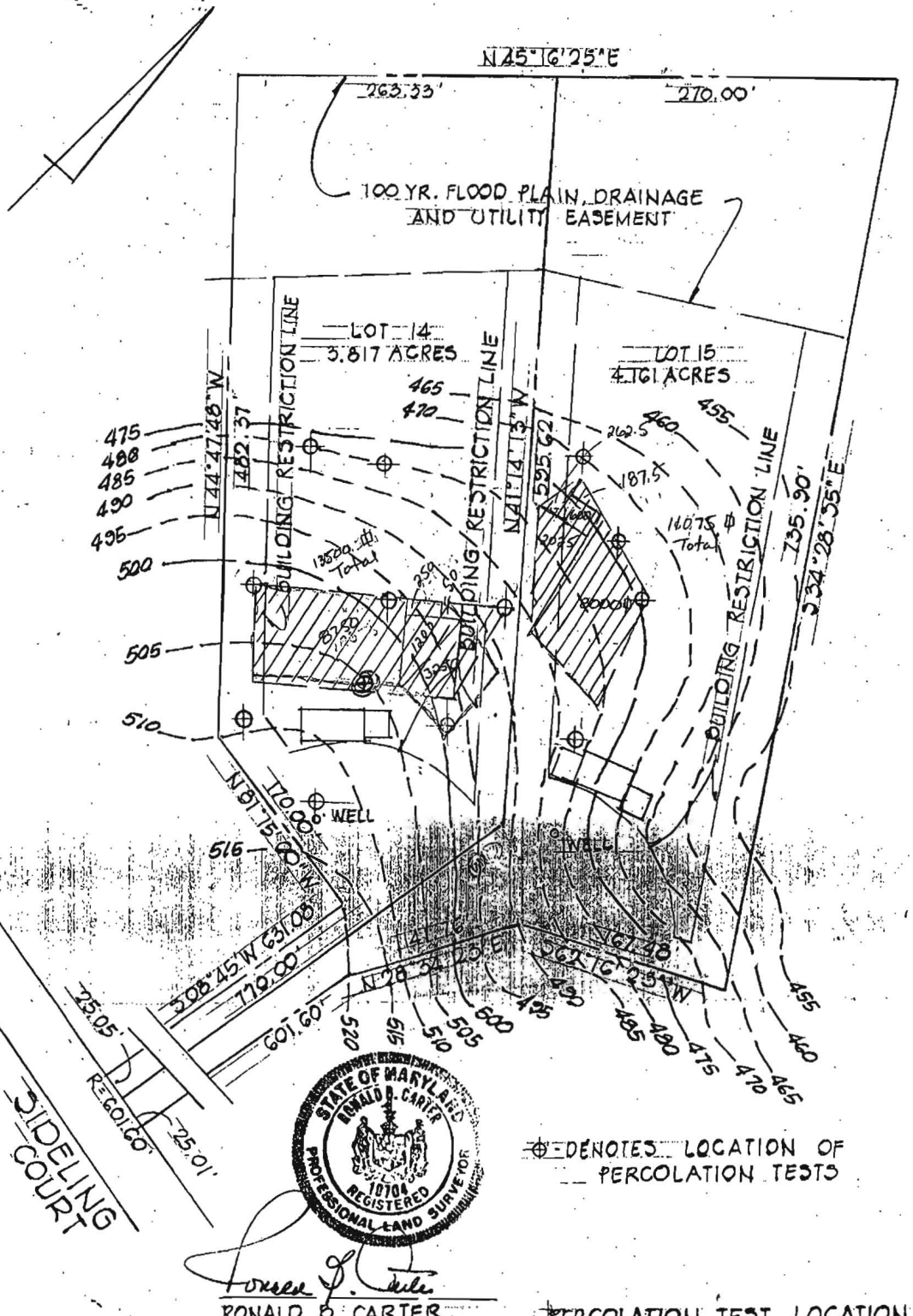
— House is less than 20 ft from septic easement. slightly higher in el than septic easement.
Septic easement is ≥ 10,000 sq. ft.

— Hole # E not located. Other hole not known to Health Dept. is shown

— Septic easement could be wrapped around contours to better facilitate installation during construction.

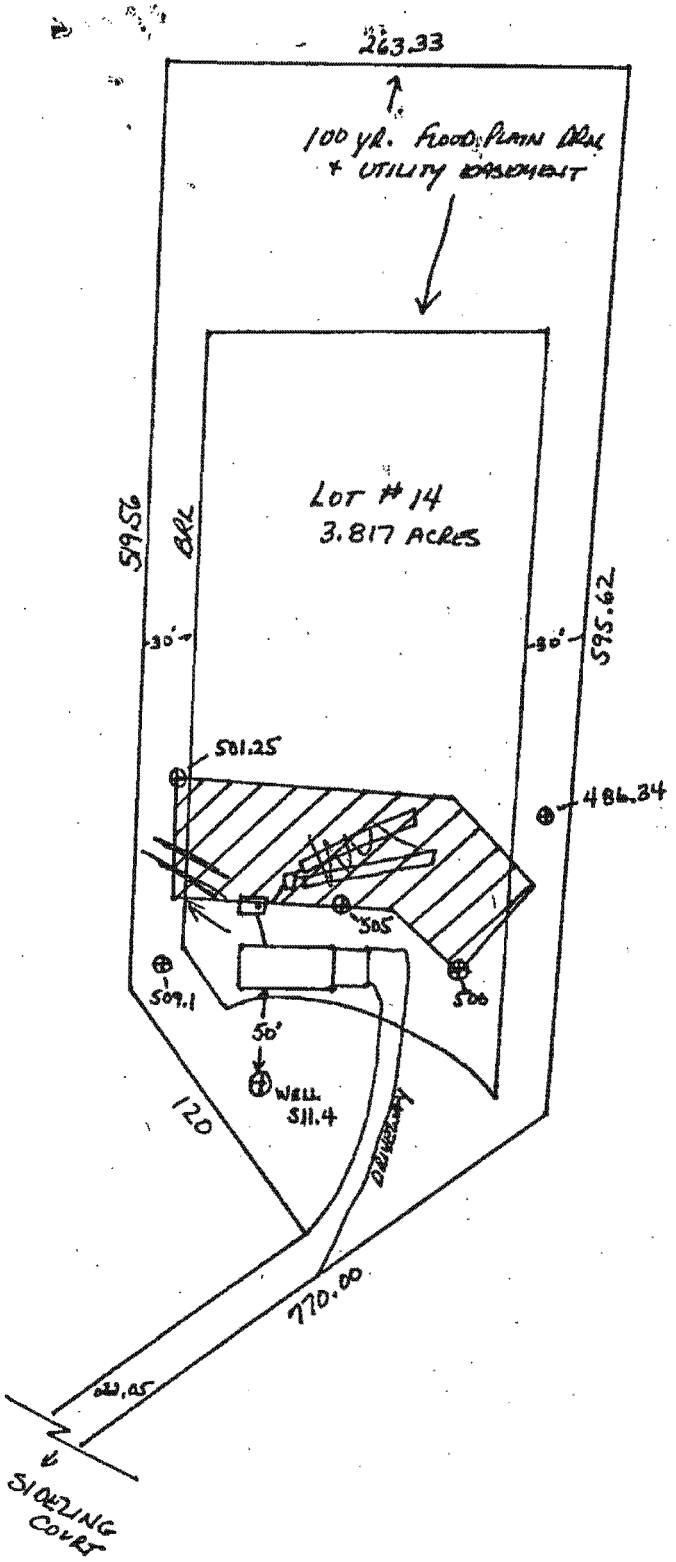
APPROVED: HOWARD CO. HEALTH DEPT.

HOWARD COUNTY HEALTH OFFICER DATE



RONALD D. CARTER

PERCOLATION TEST LOCATION PLAN
LOTS 14 AND 15
GAITHERS SIDELING
4TH. ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
SCALE: 1"=100' JUNE 16, 1989



SCALE 1" = 91'

EXISTING ELEV. @ HOUSE	=	
FIRST FLOOR ELEVATION	=	512.00
BASEMENT ELEVATION	=	502.86
INVERT ELEVATION OUT OF HOUSE	=	508.36
EXISTING ELEVATION AT SEPTIC	=	507.36
INVERT ELEVATION INTO. SEPTIC	=	504.5
INVERT ELEVATION OUT OF SEPTIC	=	503.24
INVERT ELEVATION INTO DIST. BOX	=	502.1
EXISTING ELEVATION AT DIST. BOX	=	505
EXISTING ELEVATION AT TRENCH	=	504.9
INVERT ELEVATION INTO TRENCH	=	503.1
HIGH HOLE ELEVATION	=	505

9/14/89
PLANS OK RH

LOT #14, GAITHER SIZELING

FEAGA CONTRACTING + BLDG CO
BARRY FEAGA
461-5163

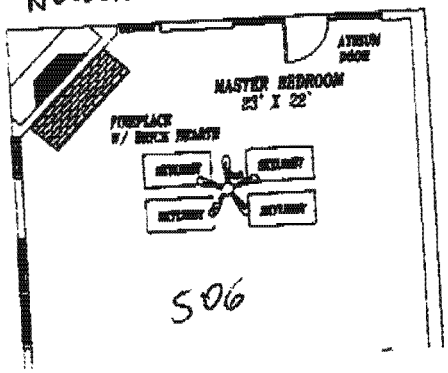
I CERTIFY THAT THE ABOVE MEASUREMENTS ARE ACTUAL AND CORRECT FOR THIS PROPERTY

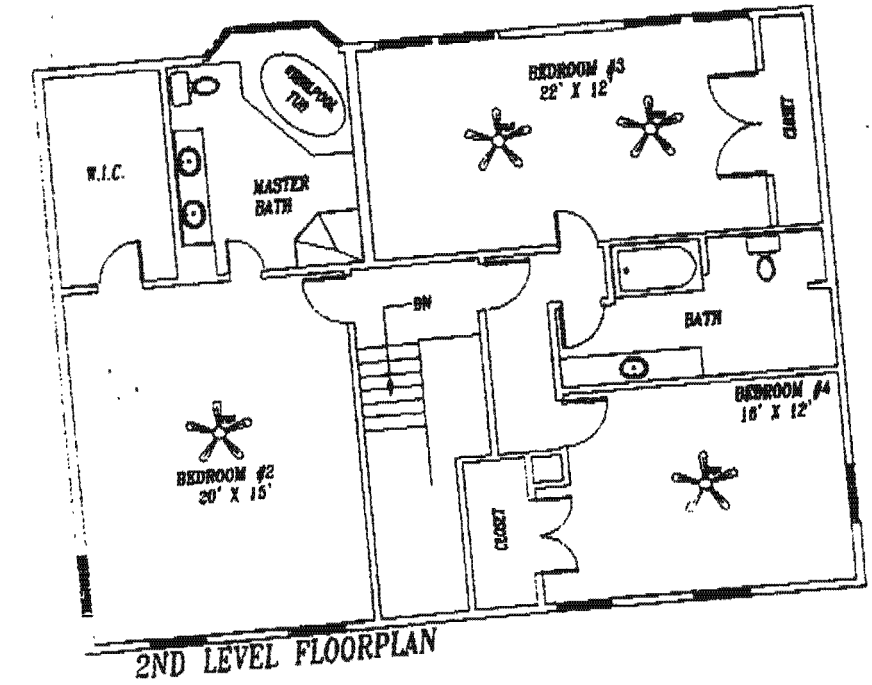
SIGNED: David L Evans

620 Sideling Court

Bedroom Plan

Addition Bedroom





2ND LEVEL FLOORPLAN

Oswald, Hank

From: Williams, Jeffrey
Sent: Friday, October 31, 2014 3:22 PM
To: Oswald, Hank
Subject: RE: List of Licensed Septic Contractors

I think based on that we can approve the stairs. We should print out the picture and put it in the file. We should notify them that any future building permit or rental housing permit will require the house to be however many bedrooms the system can handle (5 I think) or the system upgraded. We should send Dick Crawford a copy of that letter so he can let us know if there is a rental license change that we can piggy back to get our changes. Thanks

---

From: Oswald, Hank
Sent: Friday, October 31, 2014 2:37 PM
To: Williams, Jeffrey
Subject: FW: List of Licensed Septic Contractors

Additional information regarding the septic location for Sideling Court.

From: isujeta@aol.com [mailto:isujeta@aol.com]
Sent: Friday, October 31, 2014 2:31 PM
To: Oswald, Hank
Subject: Re: List of Licensed Septic Contractors

Mr. Oswald,

Attached is apicture of the undug area around the septic and deck. The deck legs are not on the septic.

Thank you,

Irena

-----Original Message-----
From: Oswald, Hank <hoswald@howardcountymd.gov>
To: isujeta <isujeta@aol.com>
Sent: Tue, Oct 21, 2014 2:32 pm
Subject: List of Licensed Septic Contractors

Mr. Sujeta:

As discussed, please find a list of septic contractors to assist you with the septic tank inspection. Should you have any additional questions, please don't hesitate to ask.

Thanks,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Well and Septic Program
(410) 313 - 1786

Oswald, Hank

From: Oswald, Hank
Sent: Monday, November 03, 2014 9:52 AM
To: 'isujeta@aol.com'
Cc: Crawford, Richard
Subject: 620 Sideling Court_Building Permit Approval

Dear Mrs. Sujeta:

Thank you for providing the septic tank invoice and the picture of the deck footer relative to the tank. Based this documentation, the Health Department will approve the building permit for the set of steps on the side of the addition. Please note that any future building permit or rental housing permit will require the house to be 4 bedrooms (Currently, this is the number of bedrooms that your septic system is sized for). Otherwise, the septic system will need to be upgraded.

Should you have any questions, please feel free to contact me.

Respectfully,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well and Septic Program
(410) 313 - 1786

4/30/90 ASAP

PERMIT

P 45381

SEWAGE DISPOSAL SYSTEM

A 37895

MARYLAND STATE DEPARTMENT OF HEALTH*

DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-347250

DATE 04/25/90

DATE SYSTEM APPROVED 4/30/90

INDEXED

INSPECTOR M.A. Fiscus

Fogle's Septic Service, Inc. IS PERMITTED TO INSTALL X ALTER ____

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Gaither Sideling ROAD 620 Sideling Court LOT 14, Sec.4

PROPERTY OWNER Feaga Contracting & Building Company, Inc.

ADDRESS ____

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 12%~~

~~GARBAGE GRINDER: YES NO~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning at the intersection of the 170.0' and 519.56' lot lines, place the first trench 55 feet down the left lot line (519.56') and 90 feet off the same lot line. Run trenches on contour toward the left lot line. Maintain a minimum of 100 feet from the well.

NOTE - No trench to exceed 100 feet in elngth. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY Jane Nadeau DATE 6/28/89

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

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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

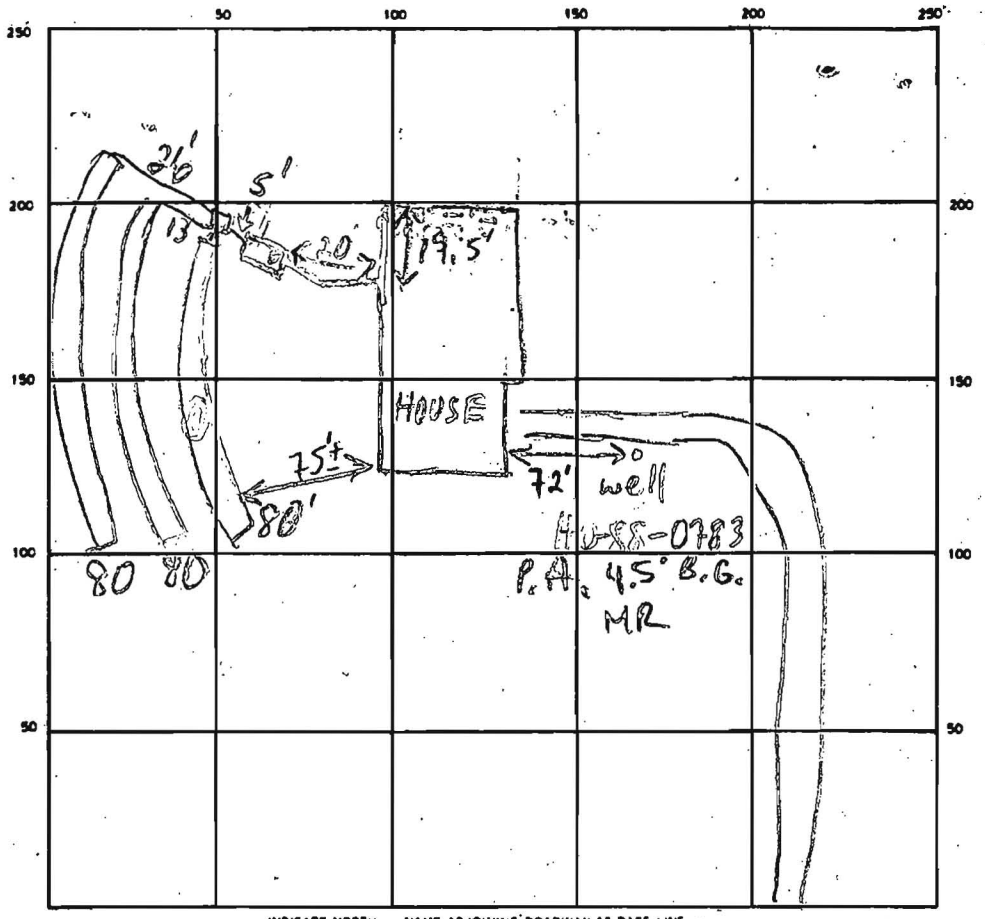
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

A 37895

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

HD-260



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

SIDELING CT.

SEPTIC TANK. LEVEL 1250 GAL-OK CLEANOUTS OK

DISTRIBUTION BOX. LEVEL OK-BAFFLE IN

DRAIN FIELD/TILE FIELD. DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3@80 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 3@240 SQ FT.

DRYWELL INSIDE DIAMETER — FT EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS 4/30/90 OK TO COVER ALL HR

DATE SYSTEM APPROVED 4/30/90 INSPECTOR M. Rifkin