LAYOUT 3/16/2	0/0 INSP 4		
	3 10 INSP 5		
INSP 3	INSP 6		
ISSUE DATE:	DEL		P 532544
APPROVAL DATE: 3/18/2010 PERMIT APPROVAL DATE: 3/18/2010 Tax, 5360307			A Repair
ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH			
Ronnie H	eaps	IS PERMITTED TO	INSTALL ⊠ ALTER ⊠
ADDRESS:	u v	PHONE NUM	BER:
SUBDIVISION: H	avilland Hills	LOT NUMBE	R: 20
ADDRESS: 13905 Wayside Dr. PROPERTY OWNER: Lloyd Stowe			
SEPTIC TANK CAPACITY (GALLONS): OUTLET BAFFLE FILTER REQUIRED			
PUMP CHAMBER CAPACITY (GALLONS): COMPARTMENTED TANK REQUIRED			
NUMBER OF BEDROOMS: 2 Wide			ide
SQUARE FEET PER BEDROOM: In le-			+4'
LINEAR FEET OF TRENCH REQUIRED: 76 Bottom 10			
TRENCHES:	Trench to be feet wide. Inlet feet below original grade. Effe stone below distribution pipe.		de. Bottom maximum depth t below original grade. feet of
LOCATION:	32' and 44' Tr	tenches on Co	intour
NOTES:			
PLANS APPROVED:			DATE:
NOTE: PERMIT VOID AFTER NOTE: CONTRACTOR RESPO	2 YEARS DISIBLE FOR SCHEDULING A PRE-CON	ISTRUCTION INSPECTION FOR	ALL INSTALLATIONS

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

