

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

01-173421
INDEX

ELLICOTT CITY

DISTRICT _____

DATE 9/19/84

A REPAIR

Herman Sirk

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 2555 Jennings Chapel Road, Woodbine, MD 21797 PHONE 489-4724

SUBDIVISION _____ ROAD 4826 Wharff Lane LOT _____

PROPERTY OWNER Leon McPherson

4826 Wharff Lane

ADDRESS Ellicott City, Maryland 21043

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS _____

REPAIR - Trench to be 65-70 feet long, 11 feet deep with 9 feet of stone.

Call for inspections before and after gravel is installed.

PLANS APPROVED BY Frank Skinner / J. Stayer

DATE 9/19/84

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.

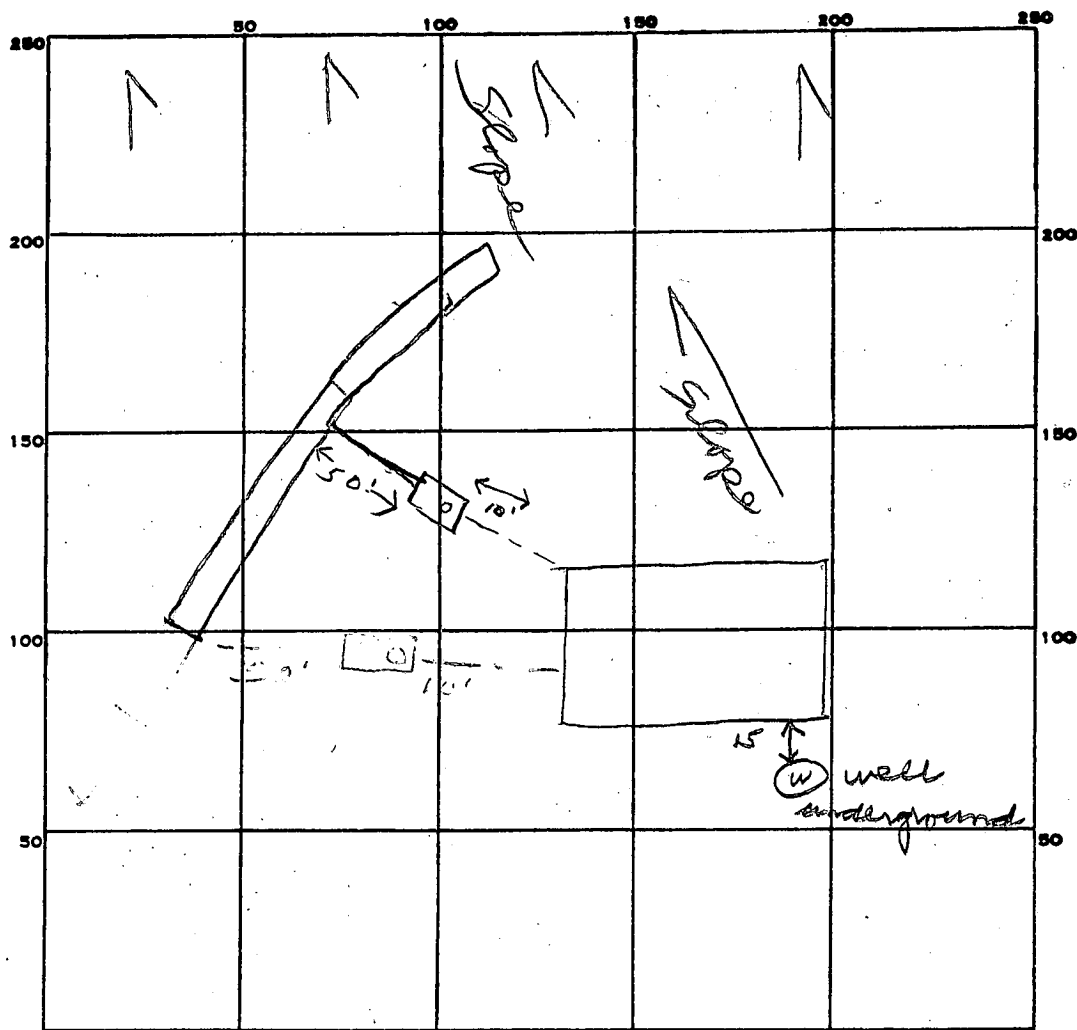
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

P 34383



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Wharff Rd.

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1250 gal CLEANOUTS ST

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 10 IN. TOTAL LENGTH 65 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 650

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

ABSORBENT AREA 650 SQ. FT.

REMARKS 9/20/84 OK to add stone in trench
9/20/84 OK to cover all work

DATE SYSTEM APPROVED 9/20/84 INSPECTOR Stayer

9/19/84
AM. please
no record of septen

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A REPAIR

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 3rd

DATE 9/17/84

1250 gal septic tank
Trench, 65-70 ft long, 11 ft deep
with 9 ft of stone

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 Leo McPherson
4826 Wharff Lane
ADDRESS Ellicott City, Maryland 21043 PHONE _____

PROPERTY LOCATION:
SUBDIVISION _____ LOT NO. _____
ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. _____
(NUMBER OF BEDROOMS)

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. /s/ Herman Sirk
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

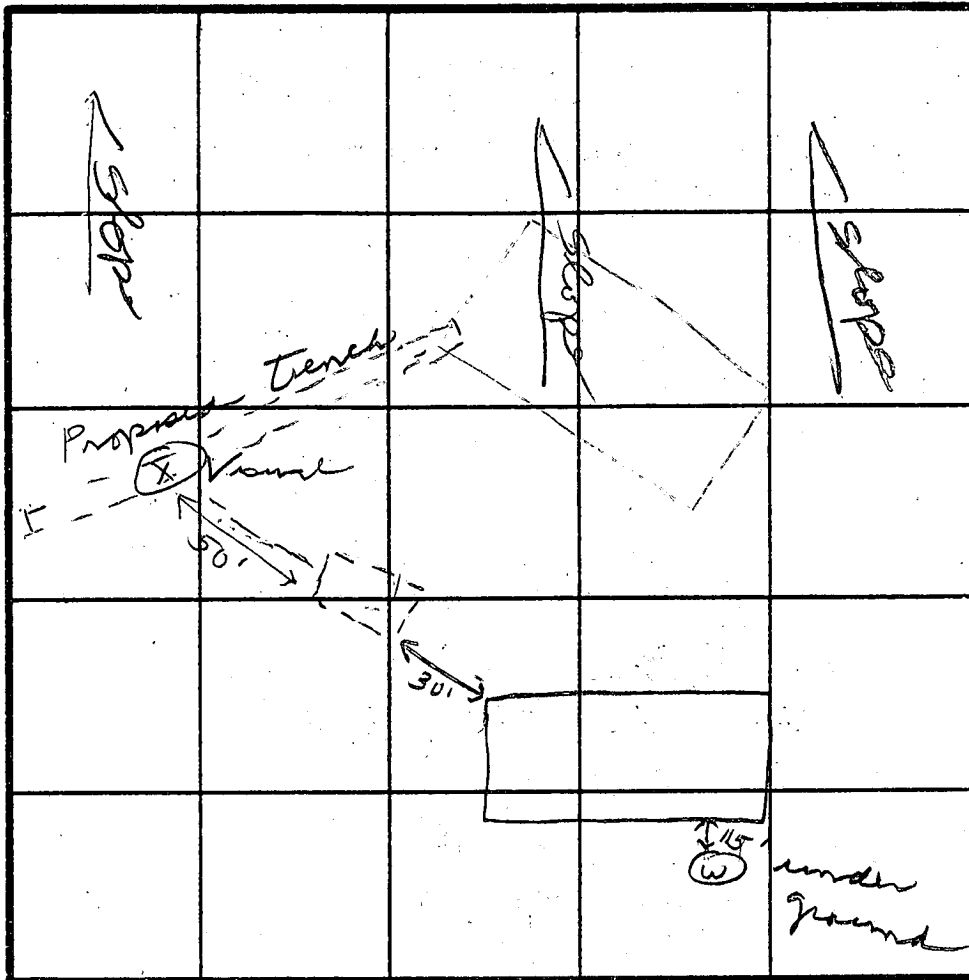
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Skene

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Wharf Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
9/19/84	1V	13	Sandy soil all the way to 13 ft					

REMARKS _____

TYPE OF SOIL _____

TESTED BY JS ALSO PRESENT Skene