

LAYOUT _____

INSP 1 _____ INSP 3 _____

INSP 2 _____ INSP 5 _____

ISSUE DATE: 9/8/2005

APPROVAL
DATE:

11/14/2005

PERMIT
SHARED SEPTIC SYSTEM
INDEXED

P 523287

A 515236

HOUSE SEWER LINE CONNECTION

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

NVR Inc. _____ IS PERMITTED TO INSTALL ☐ ALTER ☐

ADDRESS: 6085 Marshalee Drive, Suite 130 PHONE NUMBER: 410-379-5956

SUBDIVISION Homeland LOT NUMBER: 9

ADDRESS: 12035 Windsor Moss PROPERTY OWNER: NVR Inc.

NUMBER OF BEDROOMS: 2 Was approved for only 2 bedrooms

HOUSE SERVED BY PUBLIC WATER? YES

LOCATION:	Install 4" house sewer line connection per the approved site plan.
NOTES:	This permit is limited to the installation of the individual house sewer line connection and installation of the grinder pump, if applicable. The Howard County Bureau of Utilities must be contacted for scheduling of inspection of these items, as well at 410-313-4900.

PLANS APPROVED: _____ DATE: _____

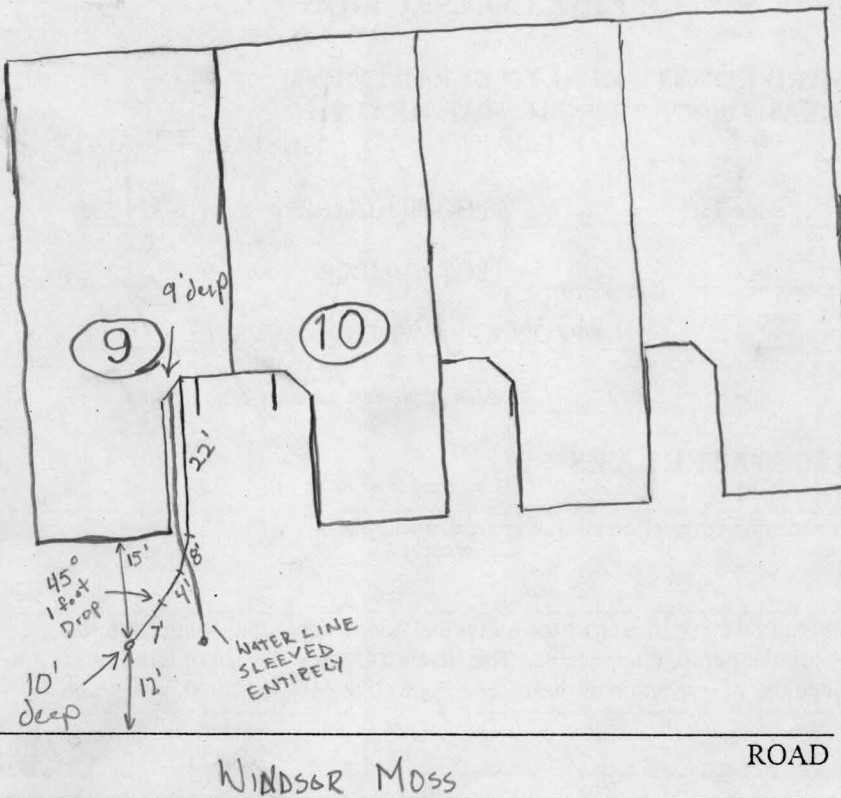
PERMIT VOID AFTER 2 YEARS

1. CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS.
2. ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED.
3. MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED.
4. CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT.
5. NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
6. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

CALL 410-313-1771 FOR INSPECTION HOUSE CONNECTION

A515236-C

NOT TO SCALE



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
10	10	10
20	20	20
30	30	30
40	40	40
50	50	50
60	60	60
70	70	70
80	80	80
90	90	90
100	100	100

NUMBER OF TRENCHES _____

TOTAL LENGTH _____

ABSORPTION AREA _____

DISTRIBUTION BOX LEVEL

DISTRIBUTION BOX BAFFLE

DISTRIBUTION BOX PORT

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES

BAFFLE FILTER

MANHOLE LOC

6" PORT LOC _____

WATERTIGHT TEST

SEPTIC TANK 2 LEVEL _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

PRE-CONSTRUCTION _____

11/14/05
INSTALLATION Water line comes out above sewer and is entirely sleeved. OK
to Back fill Dig. (GAC)

FINAL INSPECTOR *Robert A. Cuyler* DATE OF APPROVAL *11/19/05*

DATE OF APPROVAL 11/19/05