| LAYOUT                           | INSP 4          |  |
|----------------------------------|-----------------|--|
| INSP 2                           | INSP 5          | . 76   |
| INSP 3                           | INSP 6          | 25/6   |
| ISSUE DATE:                      | DE              | DMIT (5) P   |
| APPROVAL DATE:                   | N               | RMIT 05 35 P  A 516967-A   |
|                                  | HOWARD COUNTY   | E DISPOSAL SYSTEM HEALTH DEPARTMENT RONMENTAL HEALTH   |
|                                  |                 | IS PERMITTED TO INSTALL   ALTER  |
| ADDRESS:                         |                 | PHONE NUMBER:  |
| SUBDIVISION: Ho                  | liday Hills     | LOT NUMBER: 82   |
| ADDRESS: 10826                   | Vista Road      | PROPERTY OWNER: Thomas Gardner   |
| SEPTIC TANK CAPA                 | CITY (GALLONS): | OUTLET BAFFLE FILTER REQUIRED  |
| PUMP CHAMBER CAPACITY (GALLONS): |                 | COMPARTMENTED TANK REQUIRED  |
| NUMBER OF BEDRO                  | OMS:            |  |
| SQUARE FEET PER F                | BEDROOM:        |  |
| LINEAR FEET OF TR                | ENCH REQUIRED:  |  |
| TRENCHES:                        |                 | ellet feet below original grade. Bottom maximum depth Effective area begins at feet below original grade. feet of e.   |
| LOCATION:                        | 1.1             | Processor Contract Co |
|                                  |                 |  |

PLANS APPROVED:

NOTES:

NOTE: PERMIT VOID AFTER 2 YEARS NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION 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

DATE:

0/27/10

## PERMIT

SEWAGE DISPOSAL SYSTEM

2.0300 2.0356

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

DISTRICT

9/28/65

NEEXED

| Frenk W. Robbins  |                            |  |
|---|----------------------------|--|
| DDRESS 112 Heating Land, Simpson 1114,  | Rasyland 19                | 64339  |
| SEWAGE DISPOSAL-SYSTEM LOCATED AT   |                            |  |
| Uncivision Eoliday Eilis  | Vista M.                   | 82, 200,   |
| ROPERTY DWNER   |                            |  |
| DORESS  |                            |  |
| = 3 bedreens  |                            |  |
|   | ET, BOTTOM AREA SQ         | PIC .  |
| SEPTIC TANK CAPAC   | 740                        |  |
| FOR GARBAGE GRISDER, INCREASE<br>Dry well - 12 ft. in die. by<br>1501-170. From the rose lot line and | 8 ft. deep below the inlet | The state of the s |
| when feeing the let from Vista Ri.  |                            |  |
|   |                            |  |
|   |                            |  |
| PLANS APPROVED BY   | 5/28/65<br>DATE            |  |
| THE CEPTIC TANK AND DISTORBITION DOV WITH MA  |                            |  |

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION, COVER TO WATER BEFORE CALLING FOR TOWN FOR THE WATER BEFORE CALLING FOR THE WATER BEF

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

Marchael Control



