

LAYOUT _____ INSP 4 _____
 INSP 2 _____ INSP 5 _____
 INSP 3 _____ INSP 6 _____

ISSUE DATE: _____
 APPROVAL DATE: _____

PERMIT INDEXED

P _____
 A 518622-A

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

04-330994

_____ IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: _____

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 2132 Woodbine Road PROPERTY OWNER: Felix Westwood

SEPTIC TANK CAPACITY (GALLONS): _____ OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
NOTES:	_____

PLANS APPROVED: _____ DATE: _____

- 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 PERMITTED RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT BUILDING PERMIT SIGNED 313-2640 FOR INSPECTION OF SEPTIC SYSTEM AND RETURNED

4/9/03 B00141137 ADD CLOSET/STORAGE

A518622-A

10/11/72

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 9

DATE 9/15/72

_____ IS PERMITTED TO INSTALL ALTER

ADDRESS 220 S. 2nd St., Ellicott City, Md. PHONE 278-9720

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD State St - 220 LOT 13

PROPERTY OWNER Paul E. Winters application for better direction

ADDRESS _____

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 2,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%.

OTHER dry well - 200 sq. ft. absorbent sidewall area to begin below the first 20 ft.

Maximum depth permitted is 12 ft. Locate dry well 200 sq. ft. from front property line and

20 ft. from right side line as seen from right of r.v. (If top of septic tank is deeper than

4 ft. a manhole will be required).

NOTE: ALL PIPES FROM HOUSE TO DRY WELL MUST BE ONE INCH.

PERMIT VOID AFTER THREE YEARS.

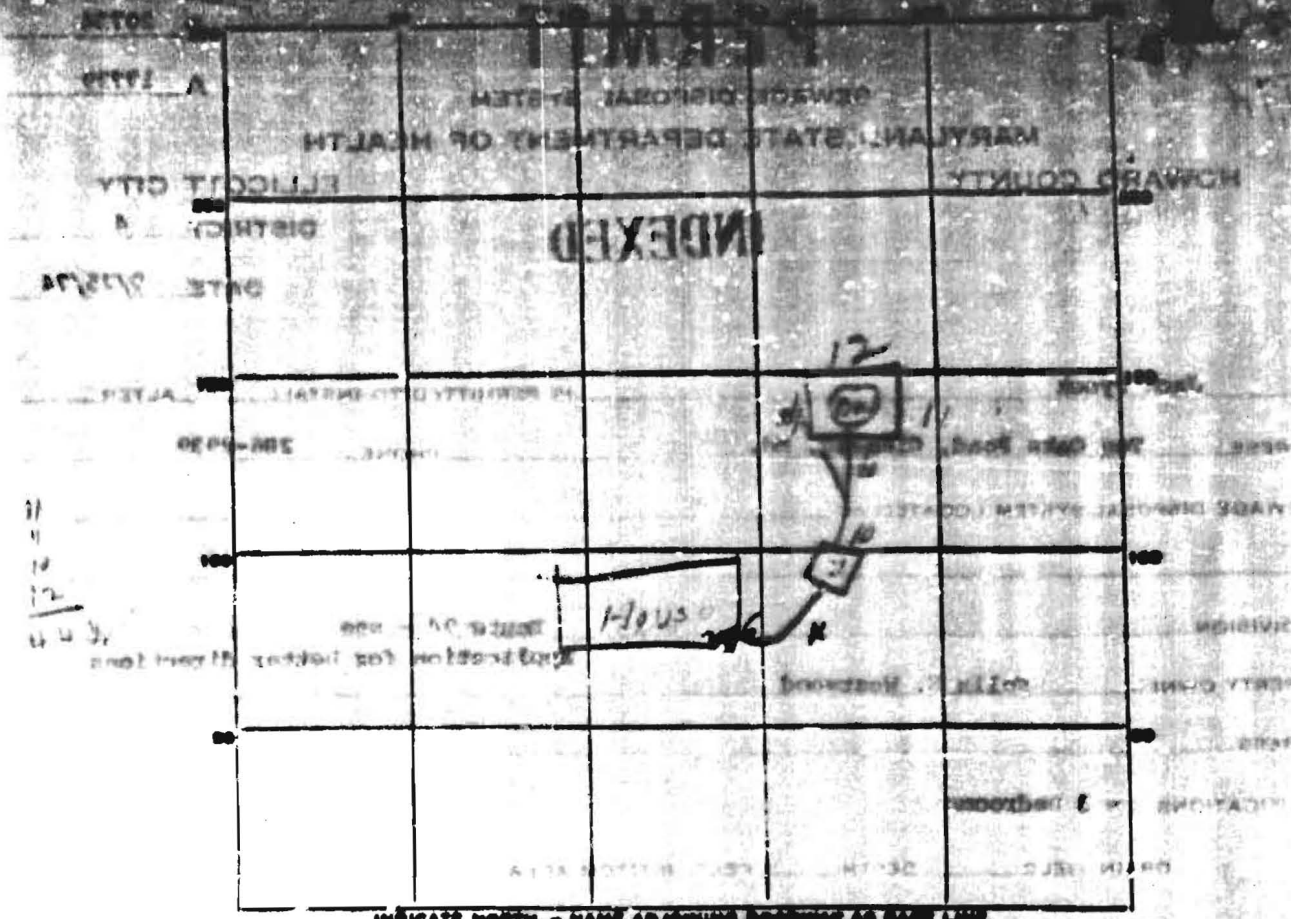
NOTE: INSTALL STRONG PIPES ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY Robert V. Tamm DATE 12/14/72

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

HLDC PERMIT SIGNED
AND RETURNED 12/14/72
Robert V. Tamm
addition



INDICATE NORTH - NAME ADJOINING ROADS AS SAGS LINE.

PERMIT CARD 014

SEPTIC TANK, LEVEL CLEMENTS

DISTRIBUTION BOX, LEVEL 014

TILE FIELD, DEPTH FT. TRENCH WIDTH FT.

GRAVEL DEPTH IN. TOTAL LENGTH FT.

NUMBER OF TRENCHES TOTAL SURFACE AREA

SEEPAGE PITS, INSIDE DIAMETER 14 FT. DEPTH BELOW INLET 7 FT.

ABSORBENT AREA 30 SQ. FT.

REMARKS

DATE SYSTEM APPROVED 10 24