

LAYOUT _____

INSP 1 _____ INSP 3 _____

INSP 2 _____ INSP 4 _____

ISSUE DATE: _____

P 524074-A

APPROVAL DATE: 3/15/06

A _____

PERMIT
INDEXED

**COMMUNITY SEPTIC SYSTEM
HOUSE SEWER LINE CONNECTION**

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH**

NV Homes/NVR Building Products IS PERMITTED TO INSTALL ALTER

ADDRESS: 6085 Marshalee Drive, Elkridge PHONE NUMBER: 301-252-3302

SUBDIVISION Homeland/Ellicott Meadows Unit # 101

ADDRESS: 12020 Windsor Moss PROPERTY OWNER: NV Homes

NUMBER OF BEDROOMS: 2

HOUSE SERVED BY PUBLIC WATER

LOCATION:	Install 4" house sewer line connection per the approved site plan. Final acceptance of the sewer system will be subject to the approval of the Maryland Dept. of the Environment.
NOTES:	This permit is limited to the installation of the individual house sewer line connection.

PLANS APPROVED: Kevin Bell DATE: 2/23/06

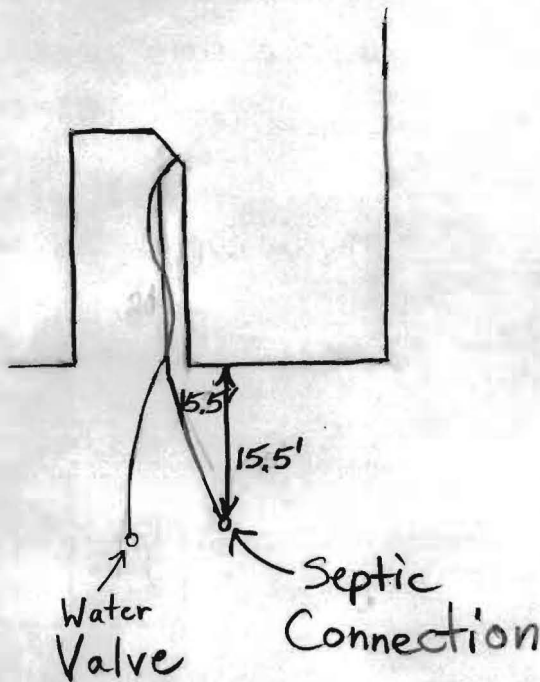
PERMIT VOID AFTER 2 YEARS

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. CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT.
4. NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
5. PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

CALL 410-313-1771 FOR INSPECTION OF SEPTIC CONNECTION

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NOT TO SCALE



Windsor Moss

ROAD

TRENCH/DRAINFIELD DATA

WIDTH _____ INLET _____ BOTTOM _____

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 _____

INSTALLATION 3/15/06 Connections start about 8' below brick ledge.
 Connections look O.K. (BB)

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 3/15/06



Approved Septic System Plan
 Howard County Health Department

**WINDSOR
 MOSS**

Signature _____ Date _____

**ROBERT H. VOGEL
 ENGINEERING, INC.**
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET TEL: 410.461.7666
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961

SCALE 1"=30'
 DRAWN BY LJT
 CHECKED BY RHV
 DATE JAN, 2006
 W. O. # 04-87.00
 SHEET# 1 OF 1

**NV HOMES
 ELLICOTT MEADOWS
 UNITS 101-104**

HOMELAND SDP-03-30
 TAX MAP 16
 3RD ELECTION DISTRICT

PARCEL 53,96,165&204
 HOWARD COUNTY, MARYLAND



HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 FAX (410) 313-2648
TDD (410) 313-2323 Toll Free 1-877-4MD-DHMH

Penny E. Borenstein, M.D., M.P.H., County Health Officer

March 16, 2006

NVR Inc.
6085 Marshalee Drive, Suite 140
Elkridge, Maryland 21075

SENT VIA FACSIMILE 410-379-2430

RE: Homeland, Lot 101
12020 Windsor Moss
Ellicott City, MD 21042
BP # B00157878
PUBLIC WATER

Dear Sirs or Madam:

This is to advise that the connection from the house to the street has been installed and inspected for the referenced property. A Community Septic System serves this dwelling. **Final approval was granted on 03/15/2006 by HCHD for the house connection.**

The property is served by public water and is therefore exempt from the Health Department water sampling requirements.

By issuance of this letter, this office recommends release of the Use and Occupancy permit for the referenced property.

RECOMMENDATION FOR USE AND OCCUPANCY

Respectfully,

Brian Baker, R.S.
Well and Septic Program

cc: DILP, Building Inspectors Office
File