

LAYOUT \_\_\_\_\_

INSP 1 \_\_\_\_\_ INSP 3 \_\_\_\_\_

INSP 2 \_\_\_\_\_ INSP 5 \_\_\_\_\_

ISSUE DATE: 12/9/05

APPROVAL DATE: 12/9/05

P 523785

A \_\_\_\_\_

# PERMIT SHARED SEPTIC SYSTEM INDEXED

## HOUSE SEWER LINE CONNECTION

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH

NVR - NV HOMES IS PERMITTED TO INSTALL  ALTER

ADDRESS: \_\_\_\_\_ PHONE NUMBER: 301-298-0002

SUBDIVISION Homeland LOT NUMBER: 1

ADDRESS: 12015 Windsor Moss PROPERTY OWNER: NVR Inc. t/a Ryan Homes

NUMBER OF BEDROOMS: 2

### 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: Kevin J. Bell DATE: 9/8/2005

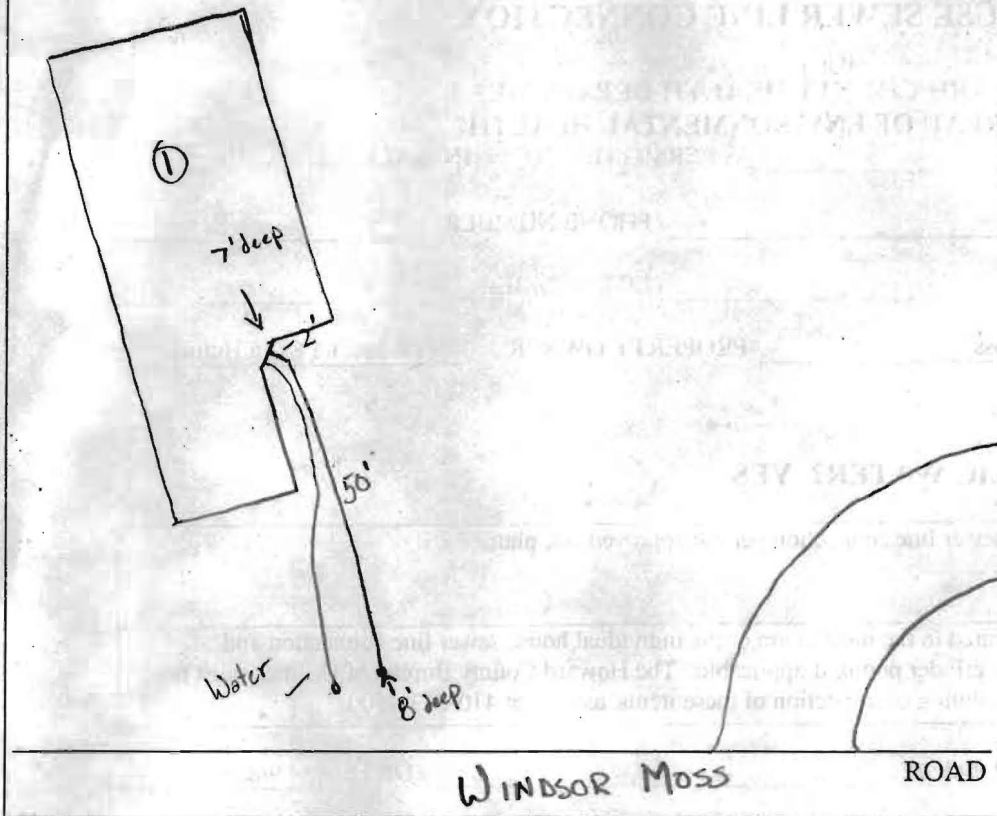
### PERMIT VOID AFTER 2 YEARS

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**

P523785

NOT TO SCALE



**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 \_\_\_\_\_

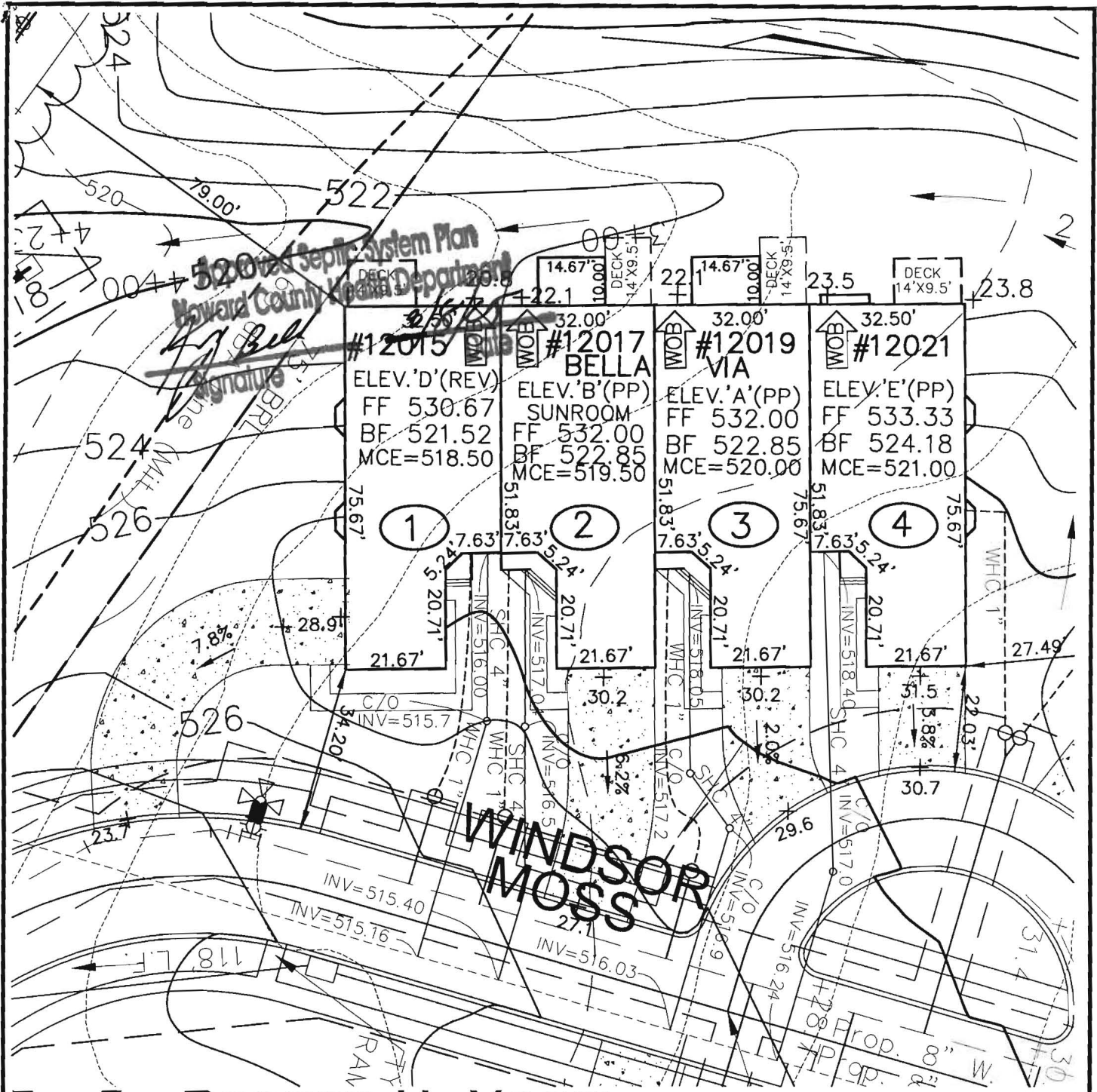
6" PORT LOC \_\_\_\_\_

WATERTIGHT TEST \_\_\_\_\_

PRE-CONSTRUCTION 11/28/05 OK to backfill House Connection GAC

INSTALLATION \_\_\_\_\_

FINAL INSPECTOR Hold V&O for payment DATE OF APPROVAL \_\_\_\_\_



**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 JCO  
CHECKED BY RHV  
DATE SEPT., 2005  
W. O. # 04-139.00  
SHEET# 1 OF 1

**NV HOMES  
ELLICOTT MEADOWS  
UNITS 1-4**

REV. 9/13/05  
HOMELAND SDP-03-30  
TAX MAP 16  
3RD ELECTION DISTRICT

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

**Operator's Operation and Maintenance Manuals**

provide operations and maintenance

and at least 60 days prior to the date set for to the Owner five (5) Operation and maintenance manuals and equipment include all installation, operation, start-up and testing in the manuals shall consist of catalogs, parts lists, parts, lists, assembly drawings, wiring diagrams, and approved working drawings for the Owner to establish an effective

and in 3-ring loose-leaf binders and indexed. The manuals shall be of standard dimensions and placed in envelopes

Operator and/or Owner in understanding the operation and maintenance of the equipment as well as to the electrical components shall be included but not limited to, Operation Responsibilities, Design Criteria, Operational Modifications, Component Equipment O&M, System Equipment and As-Builts.

Approval of the facilities will not be undertaken until all documents have been submitted. Partial approvals

NH <sub>3</sub> -N	35	mg/L	
Alkalinity (as CaCO <sub>3</sub> )	100	mg/L	
pH	6.0 - 9.0	S.U.	
Water Temperature Min.	15	°C	
Water Temperature Max	28	°C	
Air Temperature Min.	0	°F	SBR R
Air Temperature Max	100	°F	
Site Elevation	442	ft	
<b>Effluent Characteristics</b>			
BOD <sub>5</sub> (20°C)	30	mg/L	M
Total Suspended Solids	30	mg/L	T
NH <sub>3</sub> -N	1.0	mg/L	
Total Nitrogen (N)	10.0	mg/l	D
<b>Influent Pumping</b>			
Average design rate in	15.3	gpm	Dosing
Peak rate in	61.2	gpm @ 4 x Avg.	
Pump rate provided	70	gpm 1 pump (28' TDH)	

PUBLIC WATER +  
PRIVATE SHARED SEPTIC SYSTEM

SDP-03-030

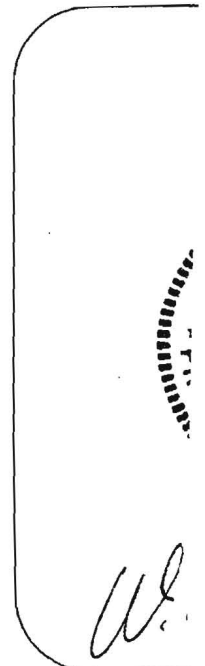
HOME LAND SENIOR CENTER  
147 UNITS TOTAL  
EACH UNIT CAN ONLY  
BE A TOTAL OF 2 BEDROOMS

Approved Septic System Plan MDE  
~~Howard County Health Department~~

Approved Septic System Plan  
Howard County Health Department

*[Signature]*  
Signature 9-2-03  
Date

*[Signature]*  
Signature 9/2/03  
Date





## 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

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

12/30/2005

NVR Inc. t/a Ryan Homes  
6085 Marshalee Drive, Suite 140  
Elkridge, Maryland 21075

**SENT VIA FACSIMILE 410-796-7094 & 410-379-2430 & 410-531-9681**

RE: Homeland, Lot 1  
12015 Windsor Moss  
Ellicott City, MD 21043  
BP # B00155820  
**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 11/28/2005 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,

  
Kevin J. Bell, Sanitarian  
Well and Septic Program

cc: DILP, Building Inspectors Office  
File