

4/5/82 Appl F.S.

PERMIT

P 31798

A Repair

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

DATE 2/3/82

4/5/82
3

Frall Developers IS PERMITTED TO INSTALL ALTER X

ADDRESS P. O. Box 220, Woodbine, Md. 21797 PHONE 795-1866

SUBDIVISION ROAD 640 West Watersville Road LOT

PROPERTY OWNER Margaret Chance

ADDRESS 640 West Watersville Road, Mt. Airy, Maryland 21771

SPECIFICATIONS

SEPTIC TANK CAPACITY _____ GALLONS

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

DEEP TRENCH _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.

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

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

REPAIR - Call for an appointment when ground is opened up and Sanitarian will recommend the repair system.

2/5/82 Call for inspection of house sewer (between house and septic tank) before covering the connection F.S.

PLANS APPROVED BY Palmer F. Wine DATE 2/3/82

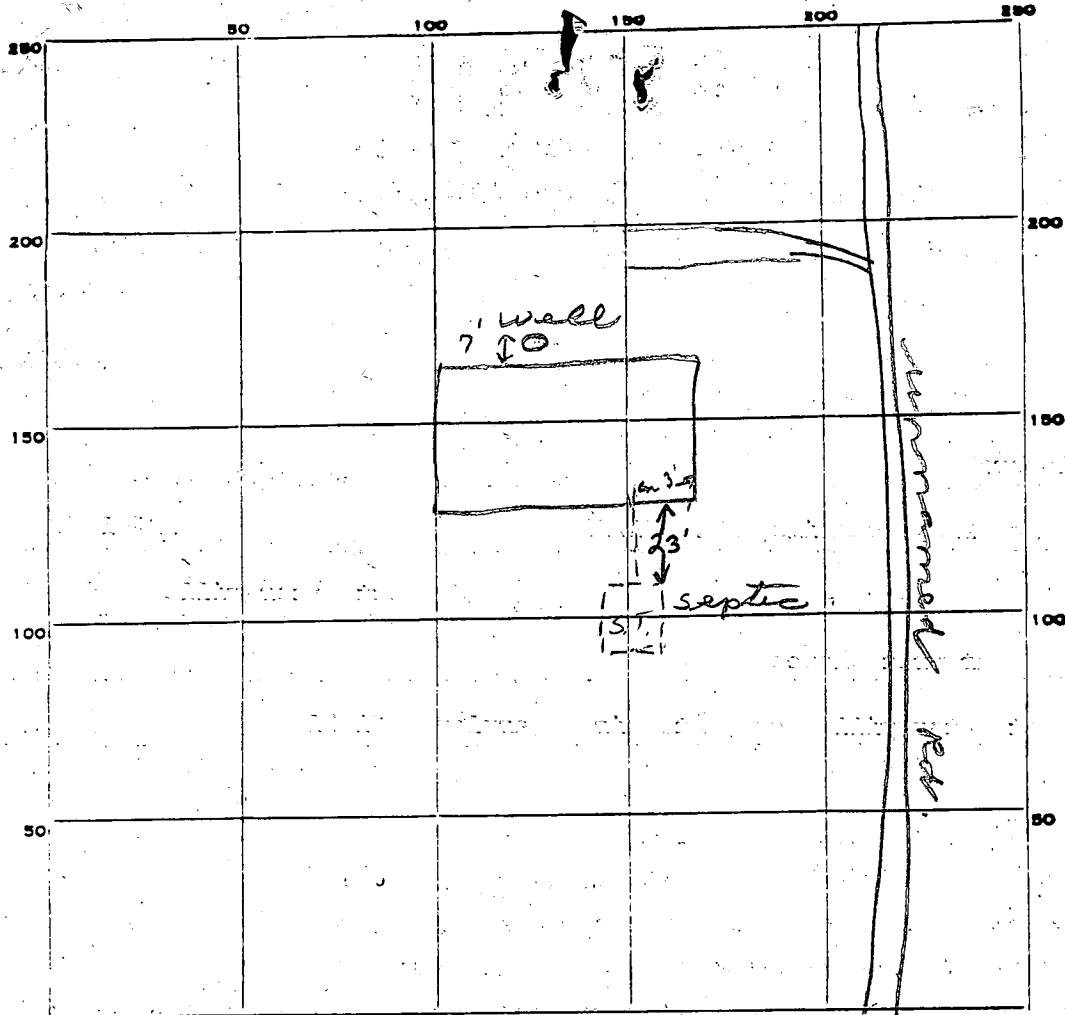
COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

- NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.
- NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.
- NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.
- PERMIT VOID AFTER THREE YEARS.
- NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRAZO ACCEPTED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

A 31798



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

W. Waterville Rd

PERMIT CARD _____

SEPTIC TANK, LEVEL existing

CLEANOUTS S.T. / O.K.

DISTRIBUTION BOX, LEVEL na

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS

2/18/82 Must see house connection to septic tank. JS

3/30/82 Pipes to tank covered, unable to make inspection JS

4/5/82 Water test of house connection O.K, see attached letter re type of pipe installed F.S.

DATE SYSTEM APPROVED

4/5/82

INSPECTOR

F. Skinner

Repair Permit
2/2/82
9:30 A.M.

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A _____
P Repair

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th
DATE 2/1/82

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Margaret Chance

ADDRESS 640 West Watersville Road PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 640 West Watersville Road - White Dodge Pick at road to property

SIZE OF LOT (?) TYPE BLDG. Existing House *par. 36 map 2*
(NUMBER OF BEDROOMS)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

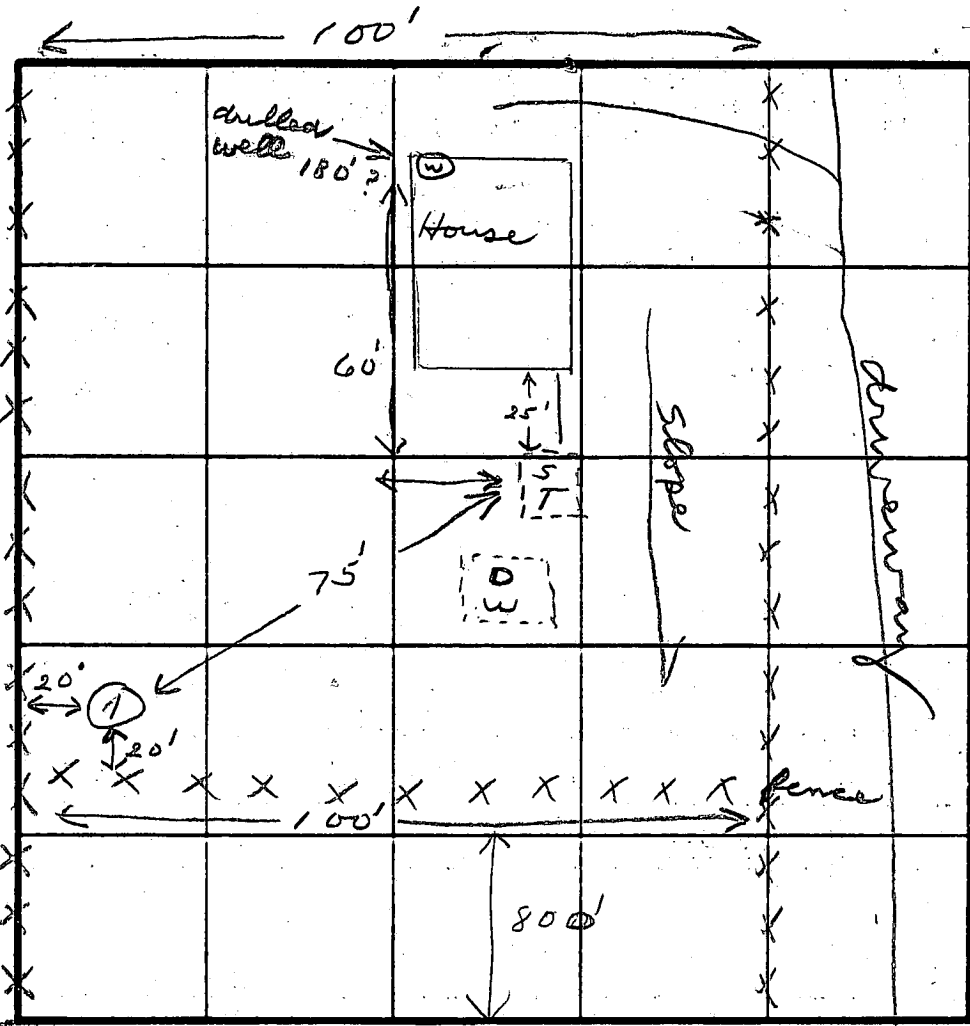
APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



SOIL PROFILE

10'	clay
11'	sand, clay, mixed stone
	all stone (Shaly)

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

W. Waterville Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/2/82	1	11					
		Hard digging at 11 ft					

REMARKS House to be build same location, 2 bedroom.
 No clean outs on system. Cast iron to septic tank, 2 ft deep

TYPE OF SOIL _____

TESTED BY *JG* _____ ALSO PRESENT _____

February 5, 1982

Mrs. Margaret R. Chance
Gillis Falls Road
Mt. Airy, Maryland 21771

RE: Building permit serial #48691
640 West Watersville Road

Dear Mrs. Chance:

This office has signed the above referenced building permit application subject to the following conditions:

1. That the existing drilled well be upgraded to meet current construction standards prior to the footing inspection. The well casing must be extended to at least 8 inches above final grade and the well must be at least 10 feet from the proposed foundation.
2. That the new structure is placed so as to utilize the existing house sewer and septic tank (new foundation must be at least 10 feet removed from any part of septic tank).
3. That the Bureau of Environmental Health (phone 992-2330) be notified prior to the footing inspection.

Very truly yours,

F. A. S.

Frank A. Skinner, Director
Water and Sewerage Program

FAS:hs

cc: Bureau of Licenses, Inspections and Permits
Ms. Harrison, Frall Developers, Inc.

