

LAYOUT _____

INSP 1 _____ INSP 3 _____

INSP 2 _____ INSP 5 _____

ISSUE DATE: 9/8/2005

APPROVAL DATE: 12/19/2005

PERMIT

SHARED SEPTIC SYSTEM

Tax ID # 03-341739

INDEXED

HOUSE SEWER LINE CONNECTION ON-SITE SEWAGE DISPOSAL SYSTEM

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Hatfields Equipment IS PERMITTED TO INSTALL ALTER

ADDRESS: PO Box 519, Annapolis Junction PHONE NUMBER: 410-531-6773

SUBDIVISION Paddocks East UNIT NUMBER: 1

ADDRESS: 13595 Julia Manor Way PROPERTY OWNER: Pulte Homes

NUMBER OF BEDROOMS: 4

HOUSE SERVED BY A PRIVATE WELL #HO-94-3900

LOCATION:	Install 4" house sewer line connection as 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. The house water connection shall be witnessed at the same time.

PLANS APPROVED: Peter Yencsik DATE: 6/21/05

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.

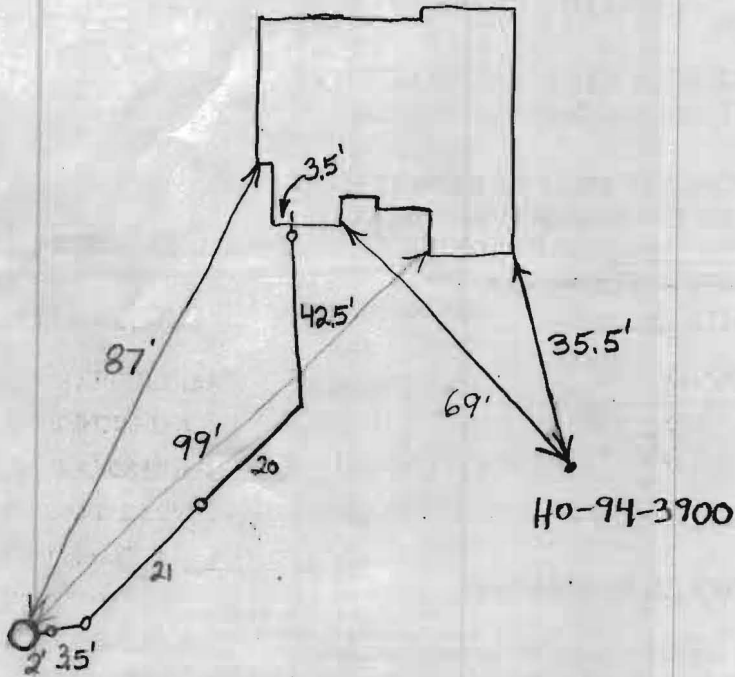
CALL 410-313-1771 FOR INSPECTION OF SEPTIC CONNECTION

277
P 5232767

A 515228-A

A515228-A

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 _____

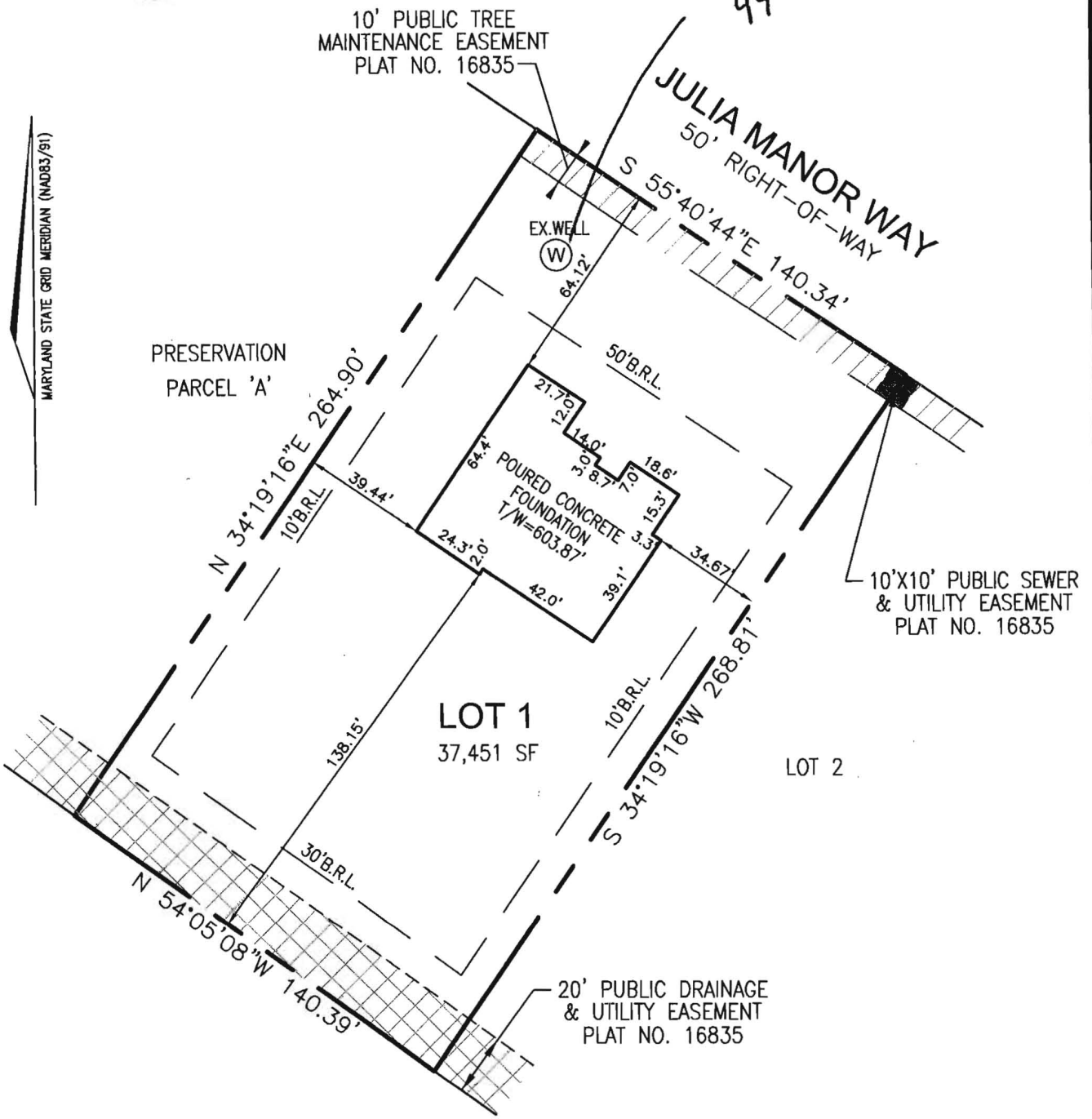
INSTALLATION _____

FINAL INSPECTOR Daniel A. Creighton

DATE OF APPROVAL 12/19/05

9/8/05
wall check ok
KSB

Well #
94-3900



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.



Mark C. Martin 8/10/05
MARK C. MARTIN, PROFESSIONAL LAND SURVEYOR #10884 DATE

SCALE 1"=50'	DATE 8/08/05	ROBERT H. VOGEL ENGINEERING, INC. ENGINEERS - SURVEYORS - PLANNERS 8407 MAIN STREET ELLICOTT CITY, MARYLAND 21043 TEL:410-461-7666 FAX:410-461-8961	WALL CHECK DRAWING
DRAWN BY B.ABBOTT	CHECKED BY M.C.M.		LOT 1 PADDOCKS EAST PLAT NO. 16835
PLAT NUMBER 16835	JOB NUMBER 04-98.00		TAX MAP 22 PARCEL 7 3rd ELECTION DISTRICT HOWARD COUNTY, MARYLAND