

PERMIT
SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 516435-A

A 08266

ISSUE DATE _____

APPROVAL DATE 7/08/1964

RE-INDEXED

05-344980

_____ IS PERMITTED TO INSTALL _____ ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION Braeburn LOT NUMBER 19 ADDRESS 6449 Lochridge Road

PROPERTY OWNER Jason Burns PROPERTY OWNER'S ADDRESS 6449 Lochridge Road

SEPTIC TANK CAPACITY _____ GALLONS

PUMP CHAMBER CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

SQUARE FEET PER BEDROOM _____

LINEAR FEET OF TRENCH REQUIRED _____

TRENCHES: Trenches to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. _____ feet of stone below distribution box.

LOCATION: _____

PLANS APPROVED _____ DATE _____

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

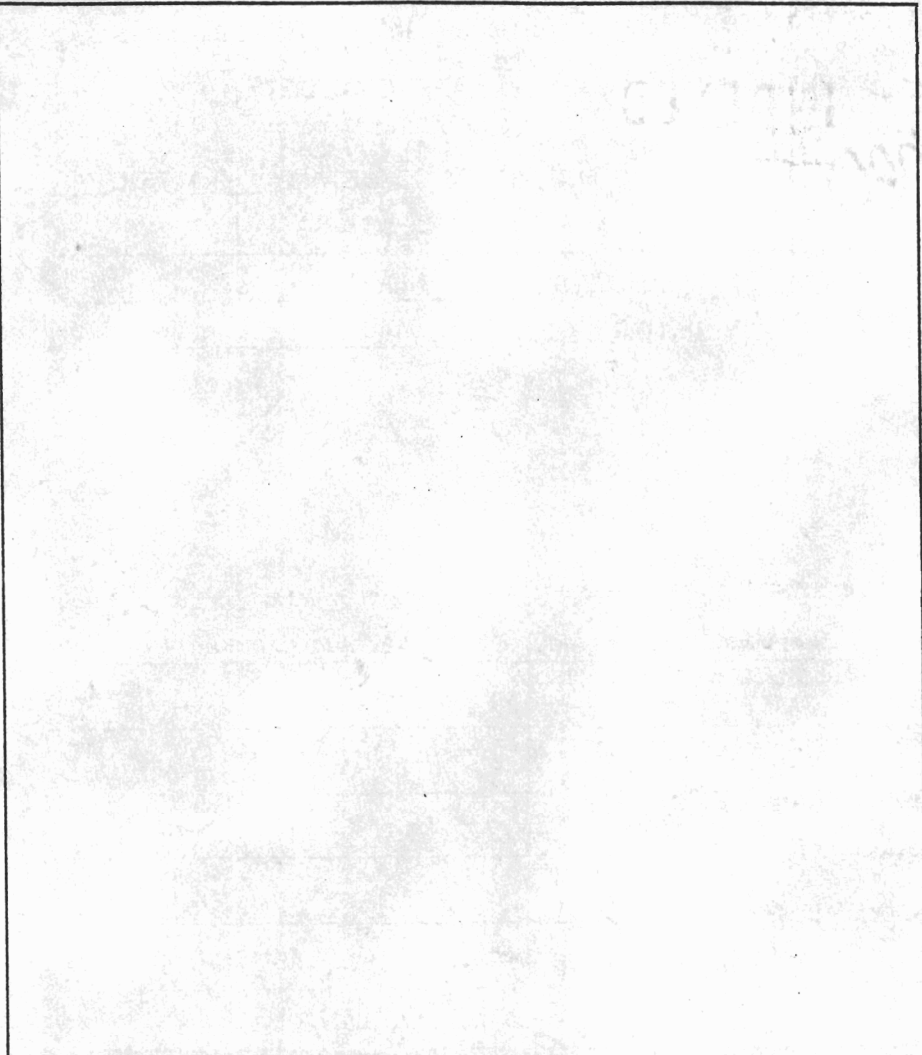
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

ALL PERMITS SIGNED
RETURNED 12/05/01
BOO 133273
EXCL CARPENTER + ADDITION W/DECK

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE
SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

P 16435-A

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH _____
TRENCH INLET DEPTH _____
TRENCH BOTTOM DEPTH _____
DEPTH OF STONE _____
NUMBER OF TRENCHES _____
TOTAL TRENCH LENGTH _____
ABSORBENT AREA _____
DISTRIBUTION BOX LEVEL _____
BAFFLE IN DISTRIBUTION BOX _____

SEPTIC TANK DATA

SEPTIC TANK _____ GALLONS
MANHOLE RISER _____
6 INCH INSPECTION PORT _____

PUMP CHAMBER DATA

PUMP CHAMBER
GALLONS _____
MANHOLE RISER _____
ALARM _____
PUMP PERFORMANCE TEST _____

PRE-CONSTRUCTION INSPECTION: _____

INSPECTION COMMENTS: _____

INSPECTOR _____ DATE SYSTEM APPROVED _____

10/24/75
10 6 AM
1:30 PM

22363

PERMIT

P. 22363
A.

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 5

DATE 10/24/75

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS 128 Oaks Road, Dayton, Maryland PHONE 286-2939

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Brimburn ROAD Brimburn ? LOT _____

(Look for Fyock's equipment)

PROPERTY OWNER FOR. TYNOR DAVIS

ADDRESS _____

SPECIFICATIONS

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

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

SEPTIC TANK CAPACITY _____ GALLONS

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

OTHER REPAIRS - Call for inspection when ground is opened up so sanitation can

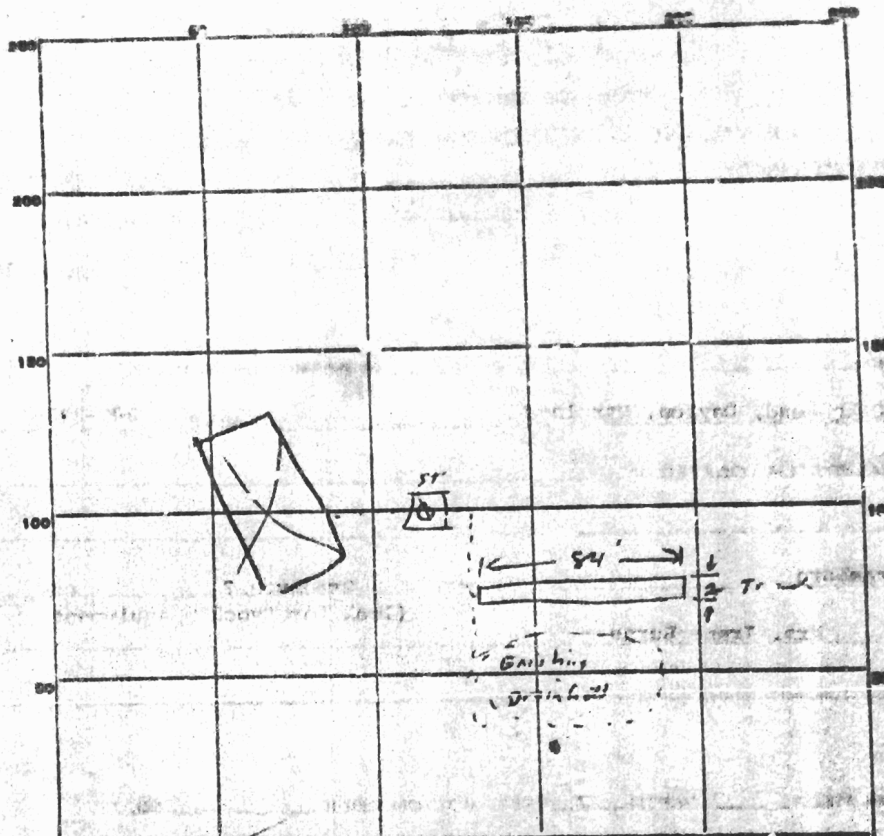
RECOMMEND REPAIR SYSTEM _____

PLANS APPROVED BY Prince F. Kiss DATE 10/24/75

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER HO WORK UNTIL INSPECTED AND APPROVED.

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

22363



INDICATE NORTH - NAME ADJOINING ROADWAY OR BASE LINE

PERMIT CARD

~~ENGINE NUMBER~~

~~CLEARANCE~~

~~DIAMETER OF PIPE~~

TILE FIELD, DEPTH 11 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 5 1/2 FT. TOTAL LENGTH 84 FT.

NUMBER OF TRENCHES 1 TOTAL SURFACE AREA 462

~~STORAGE OF MATERIALS~~

ABSORBENT AREA 462 SQ. FT.

REMARKS

DATE SYSTEM APPROVED

10/24/75

INSPECTOR

R. M. ...

7/18/64

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLCOTT CITY

INDEXED

DISTRICT 3

DATE 4/15/64

Excavating Contractors, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 8 Maple Drive, Ellicott City, Maryland PHONE HO 5-1000

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Brashear ROAD Brashear Rd. LOT 13

PROPERTY OWNER A. J. Young

ADDRESS _____

SPECIFICATIONS 3 bedrooms

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

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

SEPTIC TANK CAPACITY 750 GALLONS

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

OTHER Dry well - 300 sq. ft. side wall area below the inlet

OR
leaching bed - 300 sq. ft. bottom area installed at a depth
of 6 to 9 ft.

To locate the area that passed the percolation test measure along
the back lot line 100 to 150 ft. from the lot corner next to
lot 20. Then measure 80 to 130 ft. from the back lot line

PLANS APPROVED BY Raymond Hedges DATE 4/15/64

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.

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