

PUB. SEWER STATUS VERIFIED BY \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

APPROVAL DATE: \_\_\_\_\_

# PERMIT

## INDEXED

P 519049-C

A Re-indexed

### ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

**01-287850**

IS PERMITTED TO    INSTALL     ALTER

ADDRESS: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

SUBDIVISION: Harwood Park                      LOT NUMBER: 1101-A

ADDRESS: 6408 Ivy Spring Road                      PROPERTY OWNER: Springland LLC

SEPTIC TANK CAPACITY (GALLONS): \_\_\_\_\_

PUMP CHAMBER CAPACITY (GALLONS): \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_

SQUARE FEET PER BEDROOM: \_\_\_\_\_

LINEAR FEET OF TRENCH REQUIRED: \_\_\_\_\_

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
PURPOSE:	No records found. Now on Public Water & Sewerage. Letter sent to abandon the Well & Septic 11/04/02. Septic abandoned & sealed 6/30/03.

PLANS APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**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**

P519049-C

Aug. 02 1998 05:24AM P1

FROM :

FAX NO. :

# Invoice

**COLE VENTURES, INC.**  
1650 PLEASANT PLAINS ROAD  
ANNAPOLIS, MD 21401  
(410) 974-0149

DATE	INVOICE #
6/30/2003	03-399

BILL TO

**William Douglas Homes**  
10830 Guilford Road, Suite 301  
Annapolis Junction, MD 20701

**Re: Ivy Terrace, Existing House**

P.O. NUMBER	TERMS	PROJECT

QUANTITY	DESCRIPTION	RATE	AMOUNT
1	Hour with hoe and operator to abandon existing septic tank, dig out, and fill in hole.	100.00	100.00
<b>TOTAL</b>			<b>\$100.00</b>

ROBERT F. BEALL & SONS, INC. T/A

**INVOICE**

Page: 1

410-987-0970 FAX=410-987-4763

INV# 29514

DATE= 06/25/03

ROBERT F. BEALL & SONS, INC. T/A

SITE# 6997 CUST #

ANNE ARUNDEL SEPTIC, INC.

PO# HP49

8795 VETERANS HIGHWAY

TAX%= 0.00

TAX#

MILLERSVILLE, MD 21108

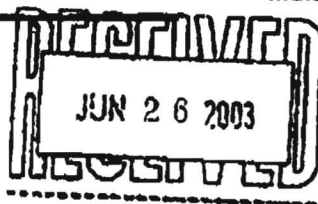
TERMS= NET10

MRKT= C

**BILLING ADDRESS**

Multi-site invoice See individual address(s) below

WILLIAM DOUGLASS CONSTRUCTION  
 ATTN: ACCOUNTS PAYABLE  
 10830 GUILFORD ROAD SUITE 301  
 ANNAPOLIS JUNCTION, MD 20701



Phone: 310-362-2500

Fax:

DESCRIPTION ITEM	QTY	RATE	%TAX	AMOUNT
06/25/03 CONTRACT PUMP RATE	2500.000	235.000		235.00
PO#=HP49 Type work order= 283420: IVY TERRACE LANE ELKRIDGE, MD 21076 PUMPED 2500 GALLONS				
Site#=6997 WILLIAM DOUGLASS CONSTRUCTION IVY TERRACE LANE ELKRIDGE, MD 21076			TOTAL:	235.00
			TOTAL THIS INVOICE TAX=0.00 +AMOUNT=235.00 =	235.00

ALL INVOICES OVER 30 DAYS LATE INCUR A FINANCE CHARGE OF 18.0%/YR OR A MINIMUM CHARGE OF 5.00 PER INVOICE

\$30.00 RETURN CHECK CHARGE

WILLIAM DOUGLASS CONSTRUCTION

Invoice# 29514 Site# 6997 Cust #

Statement Date 06/25/03

Current	235.00
30+	0.00
60+	0.00
90+	0.00

Statement Total 235.00

**DETACH AND RETURN WITH PAYMENT**

Sub total this invoice	235.00
Tax	0.00
Paid amount:	0.00
Current invoice balance:	235.00
Paid amount:	