

5/19/00
10:00
5/25/00 ASAP

PERMIT

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

P 5/24/00

A REPAIR

ISSUE DATE 6

APPROVAL DATE 5/25/00
INSPECTION

RPS# 304051

INDEXED

Jenkins Brothers IS PERMITTED TO INSTALL ALTER X

ADDRESS 7670 Smith's Private Road, Sykesville, MD 21784 PHONE 410-461-9282

SUBDIVISION Sand Hill Acres II LOT NUMBER 1 ADDRESS 12049 Lamplighter Way

PROPERTY OWNER Holtz PROPERTY OWNER'S ADDRESS Same

SEPTIC TANK CAPACITY EX. 1250 GALLONS

PUMP CHAMBER CAPACITY 5 GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 125

LINEAR FEET OF TRENCH REQUIRED 60

TRENCHES: Trenches to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth
12 1/2 feet below original grade. 8 feet of stone below distribution box.

LOCATION:

REPAIR - PURPOSE - Existing septic system has failed. (Dry well is saturated.)
Call for inspection when ground is opened so sanitarian can recommend repair. 5-18-00

PLANS APPROVED _____ DATE _____

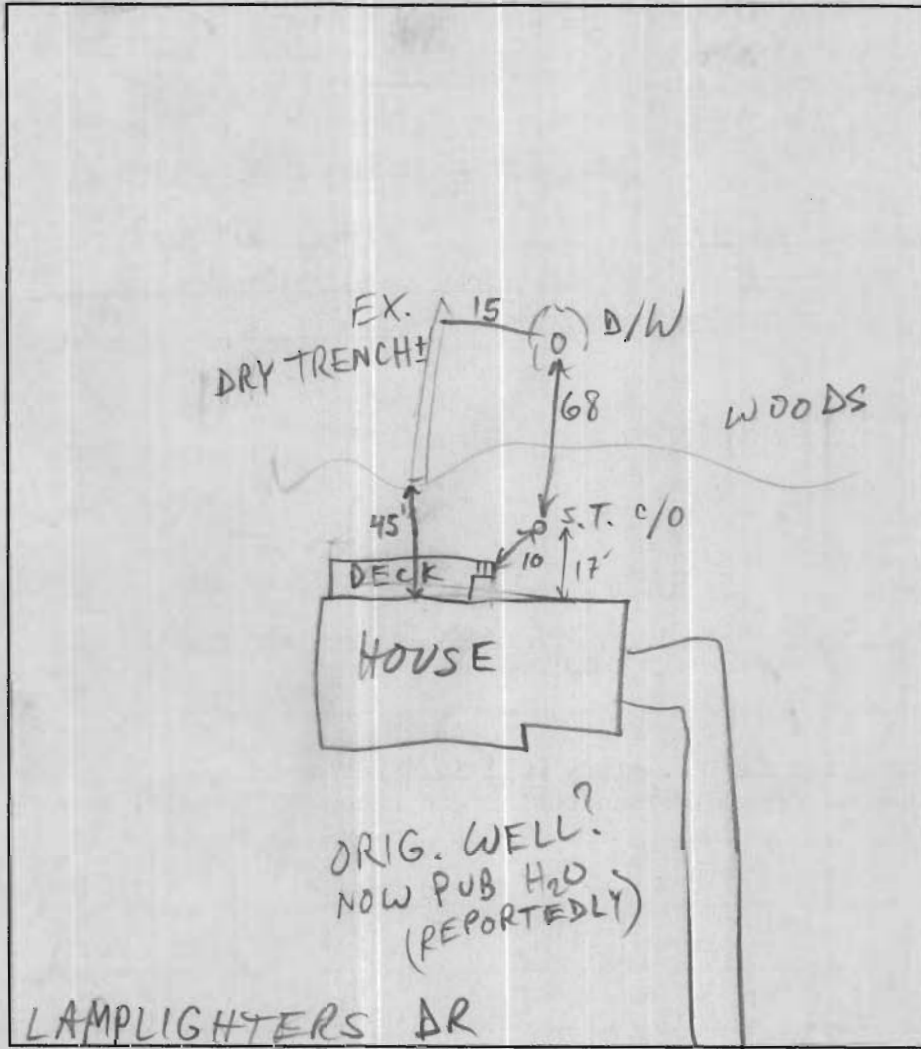
PERMIT VOID AFTER 2 YEARS

- 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

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

5/24/00

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: 5/19/00 Cancelled (BB)

5/25/00 #1 OK TO START (MR)

INSPECTION COMMENTS: 5/25/00 EX. TRENCH FOUND, DRY; PIPE BETWEEN D/W + TRENCH BROKEN; PIPE REPLACED, COVERED PRIOR TO INSP.; (MR)
 NO REPAIR INSTALLED TODAY (MR)

INSPECTOR McRifkin

DATE 5/25/00 OF INSPECTION SYSTEM APPROVED