

LAYOUT 8/12/09 INSP 4 \_\_\_\_\_  
 INSP 2 8/13/09 INSP 5 \_\_\_\_\_  
 INSP 3 8/14/09 INSP 6 \_\_\_\_\_

ISSUE DATE: 8/10/2009 **PERMIT- ADVANTEX AX20** P 531854

APPROVAL DATE: 8/28/09 - **BRF SYSTEM** A BRF  
**SEPTIC TANK UPGRADE**

**TAX ID # 5373387**  
**ON-SITE SEWAGE DISPOSAL SYSTEM**  
**HOWARD COUNTY HEALTH DEPARTMENT**  
**BUREAU OF ENVIRONMENTAL HEALTH**

*In Part Trac*

Fogles Septic Clean IS PERMITTED TO INSTALL  ALTER

ADDRESS: 580 Obrecht Road, Sykesville, MD 21784 PHONE NUMBER: 410-795-5670

SUBDIVISION \_\_\_\_\_ LOT \_\_\_\_\_

ADDRESS: 7433 Oakcrest Lane PROPERTY OWNER: Deanna Mahanand

Advantex AX20 Model 3A (GALLONS): 1500 Top Seamed Two Compartment Tank w/  
 Aerobic Pretreatment

PUMP CHAMBER CAPACITY (GALLONS): N/A

**\*\*\*\*THE REST OF THE SEPTIC SYSTEM IS SUBJECT TO INSPECTION FOR PROPER OPERATION. A SUITABLE REPAIR MUST BE PERFORMED IF THE SYSTEM IS NOT FUNCTIONING PROPERLY OR AT THE POINT OF FAILURE. PERCOLATION TESTING AND ADDITIONAL FEES MAY APPLY IF ADDITIONAL WORK IS REQUIRED FOR THE SEPTIC SYSTEM TO FUNTION PROPERLY.\*\*\*\***

*(~ 76 ton store)*

LOCATION:	Install New pretreatment tank as specified on approved site plan. <i>Trenches: Inlet 3', bottom 6' Install 2x60' trenches on contour ~ 15' below ca. D.W. 3' wide w/ 9' E.T.F separation</i>
NOTES:	A test of the pump, alarm and unit itself is required. Install advantex unit per manufacturer's specifications. System is designed for a maximum of three to four bedrooms. A clean out/observation port should be installed on the dist. Box/drywell for functionality of the pretreatment system.

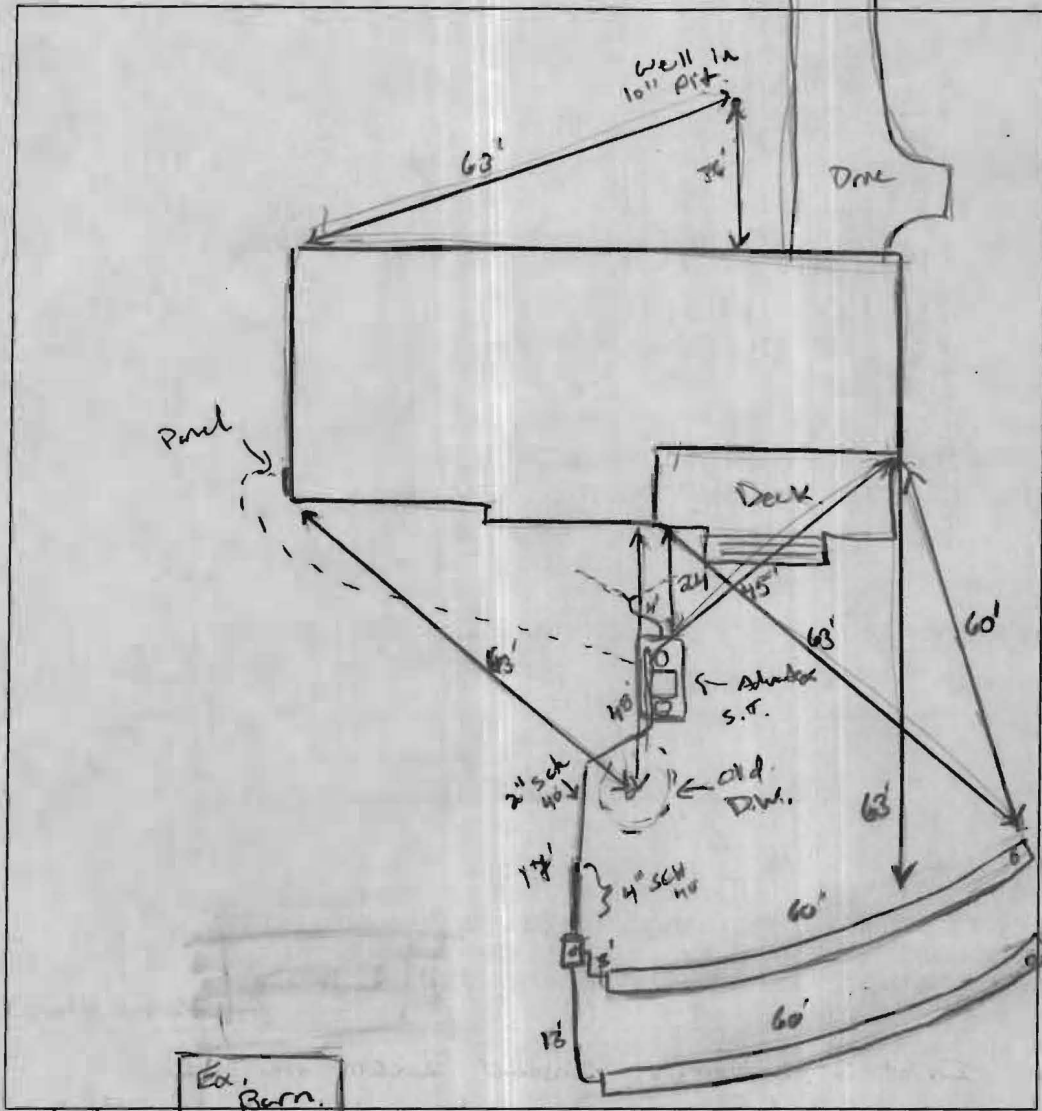
*(KW)*

**Note: \* Certification start-up letter from the manufacturer needs to be submitted to the Health Dept. before the Advantex system can be approved for funding \***

PLANS APPROVED: Kevin Wolf DATE: 8/10/2009

NOTES: PERMIT VOID AFTER 2 YEARS  
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS  
 WATERTIGHT SEPTIC TANKS REQUIRED  
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED  
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED  
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS 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 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**



TRENCH/DRAINFIELD DATA (If Installed/Needed)		
WIDTH	INLET	BOTTOM
<u>3'</u>	<u>3'</u>	<u>6'</u>
NUMBER OF TRENCHES	<u>2</u>	
TOTAL LENGTH	<u>120'</u>	
ABSORPTION AREA	<u>360'±sw</u>	
DIST. BOX LEVEL	<u>Levelers</u>	
DIST. BOX BAFFLE	<u>Yes</u>	
DIST. BOX PORT	<u>Yes</u>	

AdvanTex AX 20 Model 3a. BAY RESTORATION FUND	
MANUFACTURER	<u>Baystar</u>
CAPACITY	<u>1500</u> GAL
SEAM LOC	<u>Top</u>
TANK LID DEPTH	<u>21.5-3'</u>
BAFFLES	<u>6" Front</u>
BAFFLE FILTER	<u>Beer (overco)</u>
MANHOLE LOC	<u>Front/Rear</u>
6" PORT LOC	<u>none</u>
WATERTIGHT TEST	<u>N/A</u>
AERATOR TEST	<u>N/A</u>
DATE ON LID	<u>yes</u>

8/12/09 Advantex tank being installed. Old tank pumped, collapsed. Dry well 100% full. Need repair. Explained to homeowner that system is failing and a repair pipe needs to be administered. (15W) 8/13/09 Repair pipe completed. 2 holes dug.

8/14/09 System installed per plan. OK to cover. DW pumped and collapsed. Still need start-up test of pre-treatment unit. Certification of the Advantex needs to be submitted to the Health Dept by manufacturer prior to releasing permit. (15W)

8/28/09 System start-up O.K. System not connected to phone line because of extra expense due to Verizon

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 8/28/09

Tris. Recommended to homeowner to pay small additional fee for automated phone maintenance. (BB)

SEPTIC SYSTEM REPAIR / UPGRADE / EVALUATION REQUEST

Please fill out this form completely and check off the reason for the request:

Date requested: \_\_\_\_\_

Reason for Request

Failing System (includes surface discharge or inadequate treatment zone) \_\_\_\_\_

Has the contractor verified through excavation/pumping evaluation, that there are no pipe blockages? \_\_\_\_\_

In support of a building permit. Type of building addition: \_\_\_\_\_

\*System relocation for proposed addition for setback compliance \_\_\_\_\_

\*Verification of adequate system capacity per COMAR 26.04.02.02D (4) \_\_\_\_\_

To replace collapsed septic tank or upgrade tank capacity \_\_\_\_\_

To replace collapsed drywell \_\_\_\_\_

BRF  AdvanTex

\*\*\*\*\*  
Septic Contractor: Fogle's Septic Clean Inc.

Contractor's Address: 580 Obrecht Rd  
Sykesville, MD 21784  
410 795-5670

Contractor's Phone #: \_\_\_\_\_

Property Address: 7433 Oakcrest Ln

Property (Subdivision) & Lot #: Lt 32 Hopkins Meadow

Owner's Name: Deanna Mahan and 240 264 1302

Is public sewer available/nearby: N/A

Names of Any Previous Owners: Zello

Year House Built: \_\_\_\_\_

# of Existing Bedrooms: 4

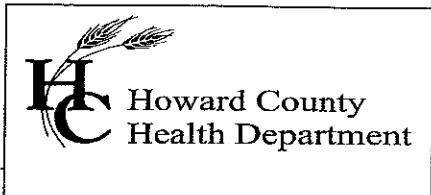
# of Bedrooms after completion of addition: \_\_\_\_\_

Has this request been discussed previously with a Sanitarian, who? \_\_\_\_\_

*If public sewer is close, further research will be performed to verify availability and possible hook up to public sewer.*

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling of the repair /upgrade/evaluation. No inspection will be performed without fee collection at the office.

Environmental Sanitarian tentatively assigned \_\_\_\_\_



Peter L. Beilenson M.D., M.P.H., Health Officer

### Bay Restoration Fund (BRF) Installation Questionnaire

Provide a scaled site plan with the following information. A house location survey is acceptable.

- The house footprint and any accessory structures
- Well location on the property and any neighboring wells within 100 foot of the property lines and any wells within 200 foot down grade from the septic system
- All septic systems on neighboring properties that are within 100 foot of the property lines or within 200 feet up grade from the well serving the property (records may be available from the Health Department; however, if records are not available the systems must be field located)
- Contour at two foot intervals is recommended and may be required for some installations

Will any components of the existing septic system be utilized with the proposed treatment unit? If so, are any of these components showing signs of failure? (Yes, No or N/A if the component is not part of the system)

- Septic tank No
- Pump chamber N/A
- Distribution box Yes, No Signs of failure
- Drainfields Yes Are there any signs of failure? No
- Drywell N/A Are there any signs of failure? \_\_\_\_\_
- Mound system \_\_\_\_\_ Are there any signs of failure? \_\_\_\_\_
- Other (Describe) \_\_\_\_\_ Are there any signs of failure? \_\_\_\_\_
- If the existing system is showing signs of failure (i.e., it is backing up into the house, there is sewage surfacing in the yard, there is unusual wet spongy area in the yard, etc.) then a complete septic system repair and percolation testing may be required.

If the existing septic tank or pump chamber is being utilized the tanks will need to be water tightness tested by the contractor/manufacturer the pretreatment unit under supervision by the Health Department. Mid seam tanks must be replaced. Confirm that the tank baffles are functional. The pump chamber pumps and high water alarm will need to be tested after the installation.

If a new tank is required, are there site access restrictions? No

The contractor shall provide the following information in order to assure that the proposed installation will function properly. If an entire system is being installed, provide the waste line elevation at the point where the new system will be connected to the existing waste line. This information will be used to demonstrate that the installation will not be too deep.

- The manufacturer's recommended maximum depth of the proposed unit 3'
- Elevation of the connection to the existing waste line 18"
- If a new waste line from the house to the system is to be installed, include the invert elevation at the house \_\_\_\_\_

Invert elevations of the following:

(may be provided as depth below ground surface if contour is not provided)

- Septic tank inlet 18"
- Septic tank outlet 12"
- Distribution box 24"
- Beginning of trench or drywell if there is not a distribution box \_\_\_\_\_
- Depth to top of tank \_\_\_\_\_

A system start-up certification from the manufacturer must be sent to the Health Department. All system installations are site specific and additional information may be required.

Form completed by Kurt Cassel Date 7/28/09  
 Print Name

Phone # 410.984.5211



# MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard • Baltimore MD 21230

410-537-3000 • 1-800-633-6101

Martin O'Malley  
Governor

Shari T. Wilson  
Secretary

Anthony G. Brown  
Lieutenant Governor

Robert M. Summers, Ph.D.  
Deputy Secretary

February 10, 2009

*No file ?*

Deanna Mahanand  
7433 Oakcrest Ln,  
Clarksville, Maryland 21029

RE: Tax Map 41, Parcel 260

Dear Deanna Mahanand:

Thank you for completing an application for the Bay Restoration Fund (BRF) Onsite Sewage Disposal System (OSDS) Program. The pre-application submitted is for your property located at 7433 Oakcrest Ln, Clarksville, Maryland 21029 and shown on Map 41, Parcel 260. A review of the application indicates a high priority for funding. This letter is to notify you of preliminary approval for funding from the BRF for the installation of best available technology (BAT) for removing nitrogen as part of your on-site sewage disposal system.

This notification letter is intended to assist you through the process of obtaining proper BAT installation bids and invoicing procedures to obtain funding from the BRF. The following sections outline the requirements necessary for proceeding with the project.

### Submission of Bids

The applicant must acquire bids from at least three separate manufacturers and at least 2 different installers for a minimum total of 3 bids to MDE for review. The installer can act as agent on behalf of the applicant but still must also supply a separate installer bid. A list of manufacturers is included in this letter. If you need additional participating installer information please contact your designated Project Manager or go to [http://www.mde.state.md.us/Water/CBWRF/osds/bat\\_installers.asp](http://www.mde.state.md.us/Water/CBWRF/osds/bat_installers.asp) for a list of installers. Bids must include the following:

- The installer, whether they are a manufacturer representative or one chosen by the property owner, must submit a separate installation quote with each manufacturer bid on a separate piece of paper from the manufacturer quote or the bid will be considered incomplete.
- Bids must be itemized. The manufacturer bid is to include the purchase cost of the unit and all other MDE requirements while the installation cost of the unit is to include the unit installation, components, and labor (including electrical connections) directly related to upgrading an onsite sewage disposal system to the best available technology for removing nitrogen are eligible for funding.

### Conditions of Financial Assistance

By reading and signing this form, you agree to the limitations and conditions set forth in this document. This form must be returned with your submission of bids. Your bid submission will be not be processed if this form does not accompany the bids when you submit them.

### Award of Grant

- MDE will review the bids. The grant award will be obligated based on the lowest acceptable bid, however the applicant may pay the cost difference of a more expensive bid.
- The applicant will be notified by MDE as to the amount of the grant obligation and with further instructions as to how to pursue reimbursement of obligated funds.
- For awards greater than \$25,000 MDE must present a proposal to the Board Public Works for approval.
- No change orders will be accepted by MDE.
- The award amount is available for reimbursement within 6 months of Department signature on the Agreement and Easement document. Upon request of the applicant, the original 6-month period may be extended at the discretion of the Department.

### Agreement and Easement

An Agreement and Easement must be completed, signed by all parties and recorded in the Land Records of Howard County Maryland. A draft copy of the Agreement and Easement is provided to you in this letter for your review. A completed Agreement will be provided to you after bids are submitted to MDE when you are notified of the grant approval amount. The purpose of this Agreement is to accomplish the following:

- To establish your voluntary participation in this program.
- To ensure that a minimum of five years operation and maintenance is performed by an approved provider (included in the upfront cost of the system).
- Allows access for State, County and the Manufacturer designee's to inspect and collect samples from the system.
- Establishes the amount of the grant award.

### Local Permitting Requirements

- All required local permits must be obtained.
- Permit fees are not eligible for BRF funding.
- Contact Howard County Health Department for more information.

Issuance of Funds from the BRF

After review of the submitted invoice and associated documents, the Office of the Comptroller of the State of Maryland will issue a check to the property owner.

Once again the Department thanks you for participating in this important program. If you have any questions, please feel free to contact me at 410-537-3678 or by email at [jboris@mde.state.md.us](mailto:jboris@mde.state.md.us).

Sincerely,

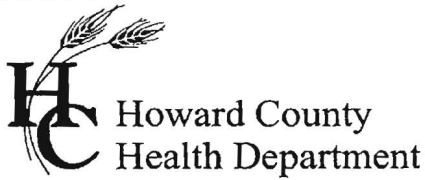


John Boris  
Bay Restoration Fund Project Manager

Enclosure

cc: Jay Prager, Deputy Program Manager  
Steven Krieg, Regional Consultant  
Howard County Health Department

2018 19 11 9:17



7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
Website: [www.hchealth.org](http://www.hchealth.org)

Peter L. Beilenson, M.D., M.P.H., Health Officer

March 5, 2009

Deanna Mahanand  
7433 Oakcrest Lane  
Clarksville, Maryland 21029

RE: Bay Restoration Fund On-site Sewage Disposal System Program

Dear Deanna Mahanand,

The Health Department received your preliminary approval letter from the Maryland Department of the Environment for funding from the Bay Restoration Fund. This funding is for the installation of best available technology (BAT) for removing nitrogen as part of your on-site sewage disposal system.

Once the specific technology has been determined and approved by the Maryland Department of the Environment, you or your consultant will be responsible for providing a detailed cross-sectional/spec sheet of what is proposed to be installed at your property, i.e. new tank, BAT to be used with existing tank, etc. If a new tank is to be used, a drawing showing the new, detailed tank along with a profile showing the depth and amount of earth cover shall be submitted to this office. These details should be available from the manufacturer. If the existing tank is to be used, a structural analysis of the tank, i.e. water tightness, mid or top seam, cosmetic or physical damage, slotted, etc., needs to take place and approved by the manufacturer.

In addition, a scaled site plan showing the exact locations of the well and septic components, i.e. septic tank and dry well, must be submitted to this department for review. Neighboring septic systems and wells may need to be included on the site plan. Elevations of system components may be required based on site characteristics. Also submit contact information of the contractor that is to install the system, including a phone number. BAT systems may be subject to Howard County Health Department Code and the Annotated Code of Maryland Regulations (COMAR), i.e. setback to dwelling, existing drive, existing well, slopes, etc.

Once these comments have been addressed and allocated by the Health Department for completion in its entirety, the septic permit can then be released. A fee of \$396.00 is required to receive this septic permit for the above referenced property.

If you have further questions regarding this matter, please contact me at (410) 313-1771.

Sincerely,

Sara Sappington, R.S.  
Well and Septic Program



# MARYLAND DEPARTMENT OF THE ENVIRONMENT

1800 Washington Boulevard • Baltimore MD 21230

410-537-3000 • 1-800-633-6101

Martin O'Malley  
Governor

Shari T. Wilson  
Secretary

Anthony G. Brown  
Lieutenant Governor

Robert M. Summers, Ph.D.  
Deputy Secretary

June 8, 2009

Deanna Mahanand  
7433 Oakcrest Lane  
Clarksville, MD 21029

RE: Tax Map 41, Grid 14, Parcel 260, Lot 32

Dear Mrs. Mahanand:

Your bid package for the Bay Restoration Fund (BRF) Onsite Sewage Disposal System (OSDS) Program has been approved for the use of funds totaling not more than \$12,950.40. The accepted bid amount is for the installation of an Orenco Advantex for your property located at 7433 Oakcrest Lane. **You have 45 days from the date of this letter to install the chosen system and submit to the Maryland Department of the Environment (MDE) the items below for disbursement.** An extension may be granted due to site conditions if you supply MDE a request in written letter form. You may choose to deviate from the selected unit, however the grant award for acceptable reimbursable expenses may not exceed \$12,950.40. All grants awarded through the MDE are reimbursable. This means that all work done prior to this letter cannot be considered for reimbursement. In order to be eligible for reimbursement you must sign and record a copy in the land records of Howard County the Agreement and Easement for Installation of Best Available Technology Systems with Bay Restoration Funds. You must provide MDE with the following:

- The contractor's and manufacturer's invoice. These invoices should include everything quoted in the bid. All expenditures greater than the bid amount will not be covered.
- A copy of the installation inspection performed by the Howard County Environmental Health program.
- A completed State Grant or Loan Payment Disbursement Request Form
- A copy of the Agreement and Easement for Installation of Best Available Technology Systems with Bay Restoration that shows that it has been recorded in the land records of Howard County.

All submitted documentation would be reviewed for compliance. Once all documentation is submitted, you will receive a payment directly from the State Comptroller's office.

The Maryland Department of the Environment thanks you for participating in this important program. If you have any further questions, please feel free to contact me at 410-537-3678 or 800-633-6101 ext 3678 or email at [jboris@mde.state.md.us](mailto:jboris@mde.state.md.us).

Sincerely,



John A. Boris, Jr., R.S.  
Bay Restoration Fund Project Manager

Enclosure

cc: Jay Prager  
Steve Krieg, Regional Consultant  
Howard County Health Department

3/1/03 11:02



# AdvanTex® Field Maintenance Report

## Start-Up Summary Report

Atlantic Solutions, MD  
(401) 293-0176

Property Owner/Tracking # Deanna Mahanand		Operator		Installed Date	
Site Address 7433 Oak Crest Lane, Clarksville MD 21029					Start-Up Date 07/17/2009
Phone Number (301) 617-2665	Permit #	Mode Mode 3A	Bedrooms 3	Occupants	Occupancy Date
Designer/Engineer Atlantic Solutions		Phone (401) 293-0176	Authorized Installer Fogles Septic		Phone (410) 795-5670
AdvanTex Dealer Atlantic Solutions, LTD		Phone (401) 293-0176	Electrician		Phone

### Primary Treatment

If using a single Processing Tank, complete the following:

Processing Tank

Septic Volume ( 1000 gal.) Recirc Volume ( 500 gal.)

Construction  Concrete  Fiberglass  Other

Manufacturer: Monarch

If using a separate Septic Tank and Recirc Tank, complete the following:

Septic Tank ( \_\_\_\_\_ gal.)

Construction  Concrete  Fiberglass  Other

Manufacturer: \_\_\_\_\_

Recirc Tank ( \_\_\_\_\_ gal.)

Construction  Concrete  Fiberglass  Other

Manufacturer: \_\_\_\_\_

Pump Model: PF30071

Floats set properly at 11 -in. 13 -in. 24 -in.

### Secondary Treatment

RSV setting: 16 -in.

Residual head measurement:

Pod #1 61 -in. Pod #2 \_\_\_\_\_ -in. Pod #3 \_\_\_\_\_ -in.

Discharge Tank/Basin ( \_\_\_\_\_ gal.)

Construction  Concrete  Fiberglass  PVC (Basin)

Manufacturer: \_\_\_\_\_

Pump Model: \_\_\_\_\_

Floats set properly at \_\_\_\_\_ -in. \_\_\_\_\_ -in. \_\_\_\_\_ -in.

Discharge pump flow rate (drawdown test): ( \_\_\_\_\_ gpm)

Discharge pump dose volume: ( \_\_\_\_\_ gal./dose)

Comments \_\_\_\_\_

Signature 

Date 8/13/09

Fax completed form to 1-866-384-7404

### Control Panel

Panel ID (RTU or UL #) RTU117000	"On" Timer Setting	"Off" Timer Setting
-------------------------------------	--------------------	---------------------

### Filter Pods

Pod #1 Serial No. 408740	Pod #2 Serial No.	Pod #3 Serial No.
-----------------------------	-------------------	-------------------

### Other System Components

Disinfection equipment (manufacturer): \_\_\_\_\_

Dispersal system (type of): Gravity

### Declarations (Initial)

\_\_\_\_\_ Orenco's Start-Up Procedure was followed.

\_\_\_\_\_ All lids are secured.

\_\_\_\_\_ Circuit breakers are on and control panel is latched.

\_\_\_\_\_ "For Service Call" label with phone # was affixed to panel.

\_\_\_\_\_ Homeowner Package was reviewed with:

Builder on (date) \_\_\_\_\_

Resident on (date) \_\_\_\_\_

The system is ready for use  Yes  No (explain)

AGREEMENT AND EASEMENT FOR INSTALLATION OF BEST AVAILABLE TECHNOLOGY SYSTEMS WITH BAY RESTORATION FUNDS.

000211

THIS AGREEMENT is made this 8th day of June, among Deanna Mahanand, hereinafter referred to as "Owner," the Howard County Health Department hereinafter collectively referred to as the "County," and the Department of the Environment, hereinafter referred to as the "Department."

WHEREAS, Owner owns a tract of land located on 7433 Oakcrest Lane, in the 5th Election District of Howard County, Maryland, and the deed to same is recorded among the Land Records of Howard County, Maryland, in Ellicott City and in Liber 5639 Folio 535.

20  
20  
E

WHEREAS, the Bay Restoration Fund (BRF) may provide a grant for the cost attributable to upgrading an onsite sewage disposal system to the Best Available Technology (BAT) for the removal of nitrogen.

WHEREAS, the BRF may also provide a grant for the cost difference between a traditional onsite sewage disposal system and a system that utilizes the BAT for the removal of nitrogen.

WHEREAS, Owner understands that participation in the Bay Restoration Fund is voluntary.

NOW, THEREFORE, the parties hereto agree as follows:

A. Owner hereby grants to the Department and the County the right to enter upon the property at any reasonable time for access to the system to make periodic inspections and the Owner agrees to provide any information and data requested and needed by the Department to develop accurate and thorough test results.

B. Owner acknowledges and agrees that a manufacturer-approved installer will install the BAT system.

IMP FD SURE \$ 20.00  
RECORDING FEE 20.00  
TOTAL 40.00  
Res# H093 Ref# 72767  
MDR 3LC Bk# 1725  
Jun 30, 2009 09:57 am

C. LIBER 11865 MDR 0312  
11865 MDR 0312  
Owner acknowledges and agrees the manufacturer will provide for Operation and Maintenance

of the BAT for a period of 5 years as a condition of sale of the BAT. After the 5 year period the Operation and Maintenance contract can be further extended at the behest of the property owner. The Department and County encourage the property owner to continuously maintain an Operation and Maintenance contract during the lifetime of the system.

- D. Owner acknowledges and agrees that the manufacturer appointed Operation and Maintenance provider will have access to the BAT system at all times.
- E. Owner acknowledges and agrees that the manufacturer or manufacturers designee will have access to sample the effluent of the BAT system. Owner acknowledges and agrees that the proposed installation of a BAT system funded by the BRF is voluntary. Owner agrees that there shall be no liability on the part of the County or Department to Owner if this BAT system fails, and that the County and the Department do not warrant or guarantee that the BAT system will adequately or properly function.
- F. Owner acknowledges and agrees that neither the County nor the Department nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.
- G. The Owner will devote such care and effort to the maintenance of the BAT system so that any malfunction is not the result of poor maintenance, faulty operation, or neglect.
- H. The Department agrees to grant \$ 12,950.40 toward the cost of installation of the BAT System, and financial responsibility is limited to this amount. Owner will present to the Department a signed contract from the demonstrating the total cost of installation. Operating costs will be at the Owner's expense.

- I. The Owner acknowledges that the BRF grant can only be used for that portion of the OSDS attributable to (BAT) for the removal of nitrogen.
- J. Owner acknowledges in the event the total project cost is greater than \$25,000 the proposal will have to be approved by the Maryland State Board of Public Works.
- K. The Owner agrees to contact both the Water Management Administration, On-Site Systems Division of the Wastewater Permits Program and the County at least forty-eight (48) hours prior to system installation, so that the Department has the opportunity to be present at the time of installation or thereafter for inspection.
- L. The Owner must install BAT system according to the manufacturer recommended plans and specifications approved by the Department.
- M. The Owner agrees and acknowledges that if installation deviates substantially from the approved plans or changes such that performance of the system is compromised or reduced, BRF funding will not be provided.
- N. This agreement shall run with the land and binds the Owner, his heirs, successors, assigns except that the provisions of paragraph A, C, D and E shall be binding for a period of 5 years only after installation of the system and occupation of the home. Owner further agrees that he shall inform in writing any purchaser or lessee of the property that the system may require maintenance or other attention. The Owner agrees to record this agreement in the land records of Howard County.
- O. This agreement shall not be construed to limit any authority of the Department to protect the public health, safety or comfort or to issue any other orders to take any other action that is now or may hereafter be within its authority.
- P. This agreement may be voided at the discretion of the Department if the system construction is not completed within forty-five (45) days of the effective date of this agreement.

- Q. This agreement contains the entire agreement and understanding between the County and the Owner and the Department. There are no additional terms other than as contained in this agreement. This agreement may not be modified except in writing signed by each of the parties or by their authorized representatives.
- R. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated

above.

DATE: 4/26/09

DATE: 6/12/09

DATE: 6/29/2009

Deanna Mahanand  
Ram Mahanand  
 Owner Deanna Mahanand  
Ram Mahanand

Jay Prager  
 Jay Prager, Deputy Program Manager  
 Wastewater Permits Program  
 Maryland Department of the Environment

Michael J. Davis  
 Howard County Health Department



**Atlantic Solutions, Ltd**  
**9324 Pardoe Rd**  
**Lusby, MD 20657**

**Phone: (877)214-9283**

**Fax: (401)293-0178**

**Email: sales@septicssystems.net**

## Bay Restoration Fund Septic System Upgrade

CONTRACT FOR MATERIALS AND SERVICES

Name: Deanna Mahanand  
 Address: 7433 Oakcrest Ln  
 City: Fulton State: MD Zip: \_\_\_\_\_  
 Mailing: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home: (301) 617 - 2665  
 Work: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Cell: (240) 264 - 1302  
 Email: \_\_\_\_\_  
 County: \_\_\_\_\_

**Work Proposed:**

- Supply AdvanTex® Treatment System for a 3-4 bedroom single Family Home, with 5-year warranty
- Installation of system per manufacturer and county specifications, by county approved installer
- Pump, abandon and fill existing septic tank, as applicable
- Final grade and finish with seed and straw
- Electrical and phone connection of control panel, to be located outside
- Startup of system and review of Homeowner's package with property owner
- 5-years of operation & maintenance
- All work to be done using current construction practices and conform to all state and local requirements

The above work will be completed for a total of (Central Region).....**\$12,950.40**

**Customer Responsibilities:**

- Complete MDE's Conditions of Financial Assistance form and return with this proposal
- Complete MDE's Agreement & Easement... form and record with the County
- Forward copy of filed Agreement & Easement... and the permit number to Atlantic Solutions  
**NO WORK TO BE SCHEDULED OR COMPLETED UNTIL ATLATNIC HAS RECEIVED THIS INFORMATION**
- Complete the State BRF Septic Grant Payment Disbursement Request Form and return to MDE (original required)

Customer understands that Atlantic Solutions and the installing contractor will do everything reasonably possible to protect the existing landscaping, including, but not limited to, pavement, concrete, etc., but cannot be held responsible for any damage to such. MISS Utility will be contacted to mark all known utilities. Neither Atlantic Solutions, nor the installing contractor shall be held responsible for any utilities not identified by the marking company. Upon completion of the installation, signified by the date of acceptance by the county and startup by an authorized service provider, customer shall immediately complete and return the Disbursement Request Form to their MDE Project Manager. Customer also agrees to immediately complete any required paperwork as to not slow to progress of any stage of the project.

**\*\*\*Payment shall be made in the amount of this agreement within 4 business days of release of payment by the State of Maryland\*\*\***

By signing below the customer agrees to the terms and conditions as outlined above.

**Customer**  
 BY: Deanna Mahanand  
 Print: Deanna Mahanand  
 Dated: \_\_\_\_\_

**Customer**  
 BY: \_\_\_\_\_  
 Print: \_\_\_\_\_  
 Date: \_\_\_\_\_

**Atlantic Solutions, Ltd.**  
 BY: \_\_\_\_\_  
 Print: \_\_\_\_\_  
 Dated: \_\_\_\_\_

Installer: \_\_\_\_\_  
 BY: \_\_\_\_\_  
 Print: \_\_\_\_\_  
 Date: \_\_\_\_\_

The following BAT Technologies have undergone MDE review and are eligible for BRF grants:

Model Name

**AdvanTex AX**

Manufacturer: **Orengo Systems, Inc.** www.orengo.com  
 Distributor: Robert Johnson 1-877-214-92837 bjohanson@septicssystems.net

**Amphidrome**

Manufacturer: **F.R. Mahony & Associates, Inc.** www.frmahony.com  
 Distributor: David Kershner (610) 351-0963 d.kershner@ketllc.com

**Bioclere**

Manufacturer: **Aquapoint, Inc.** www.aquapoint.com  
 Robbie Tippet (240) 298-7572 rtipp4@aol.com  
 Sam Seymour (585) 473-3300 sseymour@aquapoint.com

**Ecoflex**

Manufacturer: **Premier Tech Environment**  
 Allison Blodig (785) 250-3215 bloa@premiertech.com

**Hoot H-Series, BNR & ANR**

Manufacturer: **Hoot Aerobic Systems, Inc.** www.hootsystems.com  
 Distributor: Nancy Mayer (410) 796-1434 mayerbro@connext.net

**MicroFAST & RetroFAST**

Manufacturer: **Bio-Microbics, Inc.** www.biomicrobics.com  
 Distributor: Freemire & Associates (410) 768-8500 www.freemire.com  
 rsf@freemire.com

**Nitrex**

Manufacturer: **Lombardo Associates, Inc** www.lombardoassociates.com  
 Pio Lombardo (617) 964-2924 pio@lombardoassociates.com

**ReCip RTS**

Manufacturer: **Bio-Concepts, Inc.** www.bioconceptsinc.com  
 Al Privette (252) 249-7040 alprivette@coastal.net

**SeptiTech**

Manufacturer: **SeptiTech, Inc.** www.septitech.com  
 Distributor: Bruce Melton (410) 878-2952 rbmelton@progressiveseptic.com  
 Western MD, Scott Everhart (304) 676-3823 www.cseenterprises.net

**Singulair Model TNT**

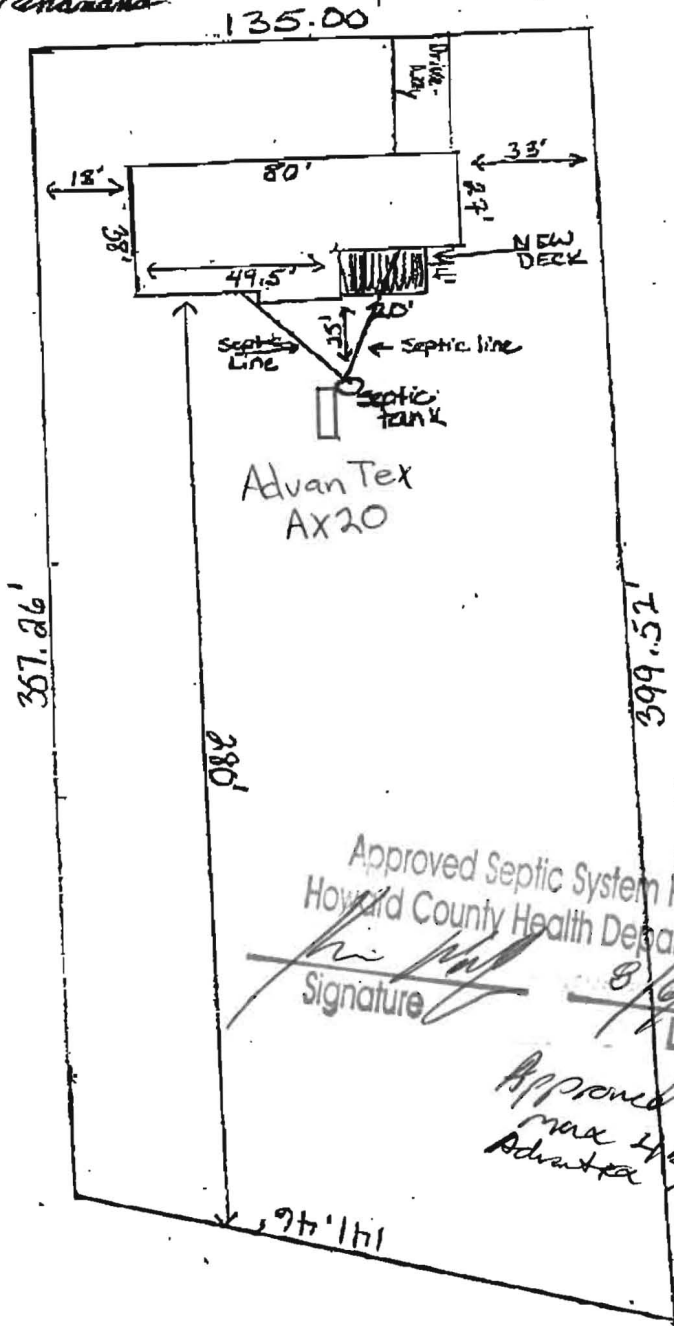
Manufacturer: **Norweco, Inc.** www.norweco.com  
 Distributor: Eastern Shore - Randy Clark (800) 773-9128 ranjodan@yahoo.com  
 Western Shore - Jeff Earnshaw (301) 274-3772 superiortank@olg.com

**Waterloo Biofilter**

Manufacturer: **Waterloo BioFilter Systems, Inc.** www.waterloo-biofilter.com  
 Distributor: Jones Pump Service (410) 836-9206 manager@jonespumpservice.com

7433 Oakcrest Lane  
Clarksville, Md 21029

TN: Desanna Mahanand



Subdivision:  
Hopkins Mead

Lot: 32  
Map: 41  
Grid: 14  
Parcel: 260  
Land area: 1.17 AC

**APPROVED**  
**WALK-THRU BUILDING PERMIT**  
 BP# 600153164 A# 518640-A  
 APP. SAN KTB DATE: 4/14/09  
 DESC. OF WORK: Deck

Approved Septic System Plan  
Howard County Health Department

Signature: *[Signature]* Date: 8/6/09

Approved RBF  
max 4 br.  
Advanta model 3a  
base.

Plot Plan  
1" = 50'