

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 3-25-10

P 532556

PERMIT

APPROVAL DATE: 3-26-10

A REPAIR

Minor Septic Repair ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

J.M. Contracting LLC.

IS PERMITTED TO INSTALL ALTER

ADDRESS: 425 Obrecht Rd, Sykesville MD 21784

PHONE NUMBER: 443-277-7526

SUBDIVISION: Mauck Property

LOT NUMBER: 1

ADDRESS: 11241 Old Hopkins Road

PROPERTY OWNER: Molly and John Nilon

SEPTIC TANK CAPACITY (GALLONS): N/A

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: 4

SQUARE FEET OF HOUSE: _____

LINEAR FEET OF TRENCH REQUIRED: 135 LF

Trenches 2' wide

Inlet @ 5'

Bottom @ 11'

~ 97.5' for stone

TRENCHES:	
LOCATION:	<i>Set new D box just below ex. failing system. Install 1 trench 135 LF in total length.</i>
PURPOSE:	

PLANS APPROVED: Kevin Wolf

DATE: 3-25-10

NOTE: PERMIT VOID AFTER 2 YEARS

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

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

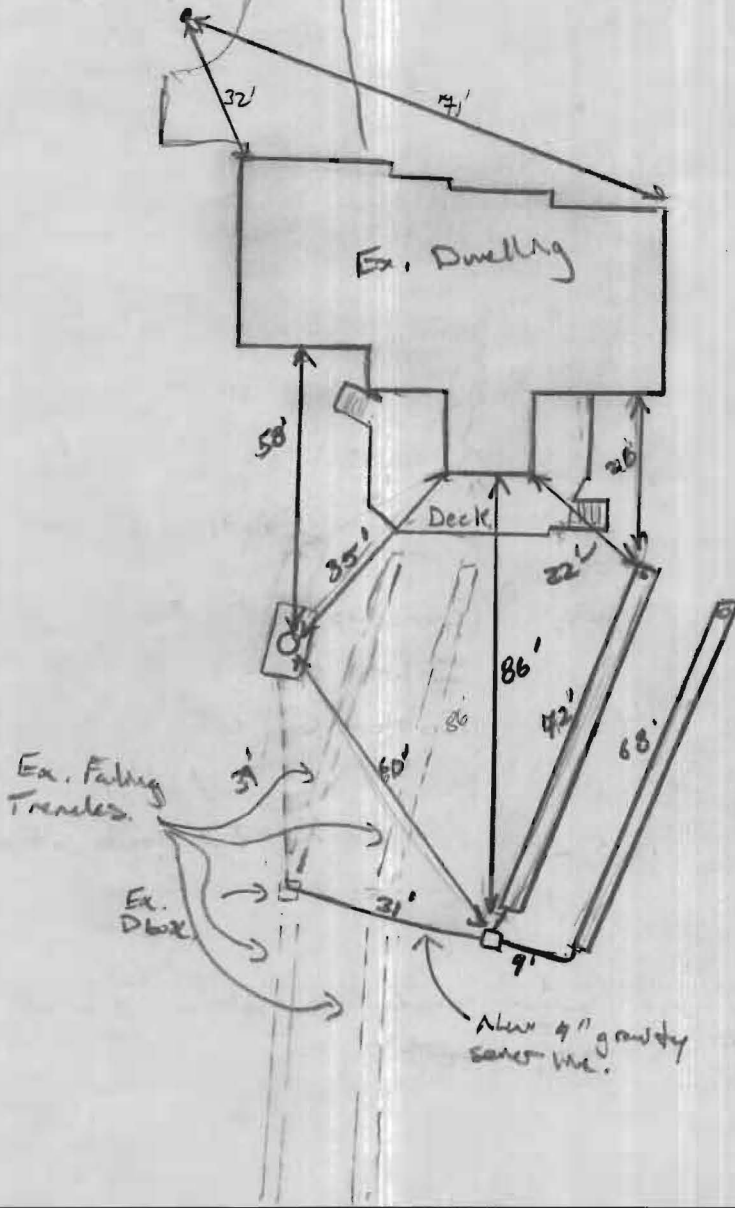
NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL

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

NEITHER THE HOWARD COUNTY COUNCIL OR 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

NOT TO SCALE

HO-94-1612



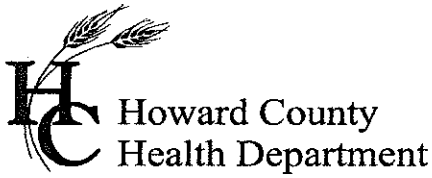
TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	5'	11'
NUMBER OF TRENCHES		2
TOTAL LENGTH		140'
ABSORPTION AREA		280'±SW
DISTRIBUTION BOX LEVEL		Level
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		NO

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
MANUFACTURER	?
CAPACITY	1500 GAL
SEAM LOC	?
TANK LID DEPTH	2.5'
BAFFLES	Yes
BAFFLE FILTER	—
MANHOLE LOC	center
6" PORT LOC	Front
WATERTIGHT TEST	—
SLOTTED	no
PUMP/SEPTIC TANK LEVEL	
MANUFACTURER	_____
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____
SLOTTED	_____

PRE-CONSTRUCTION
 3/25/10 Install
 system as shown
 on Permit. Tranches
 laid out in fields

INSTALLATION: 3/26/10 contractor branched off near old Dbox for new 4" sewer line past ex. system to install new trenches running towards house. Had to adjust branches to make constant work. Ex system installed with windows. Contractor using very dirty stone from Forksburg stone quarry.

FINAL INSPECTOR K. Vally DATE OF APPROVAL 3/26/10



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

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

INFORMATION FORM – SEPTIC SYSTEM REPAIR / UPGRADE

Reason for Request:

A. Failing System (includes surface discharge or inadequate treatment zone)

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

B. System relocation for proposed addition for setback compliance *

C. To replace a collapsed septic tank

D. To replace a collapsed drywell

****For REPAIRS, are the owners proposing, or do they plan to add in the future, any additions or modifications to the property, i.e. pools, living space additions, garages etc? This information must be disclosed at the time of this application. The Health Department will not be able to accommodate requests in the field for property modifications unrelated to the repair request. Such requests may require an additional fee, additional testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulation.**

Septic Contractor:

Contractor's Address:

S.M. CONTRACTING LLC
 425 OBERLIN RD
 SYKESVILLE MD 21784
 CELL# 443-377-7526

Contractor's Phone #:

Property Address:

Property (Subdivision) & Lot #:

County file #, if known:

Owner's Name and Phone #:

MOLLY & JOHN WELICZ
 1241 OLD HOPKINS RD
 301-217-1265

Is public sewer available/nearby:

If public sewer may be close, mention further research will be performed to verify availability

Names of any previous owners:

Year House Built:

of Existing Bedrooms:

of Bedrooms after completion of addition:

N/A

Has this request been discussed previously with another Sanitarian: _____ Name: _____

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling/review of the repair or upgrade.

Print out a copy of the Real Property Data via Dept. of Taxation website _____ Indexed file found _____

***Prior to scheduling inspections, scaled plans should be submitted to clarify the nature of the addition.**

If public sewer may be nearby, verify whether the sewer is technically "available" (defined as abutting or within the property), through the Bureau of Engineering (x2414).

If sewer is available, verify whether the property is within the Metropolitan District (Finance x2061).

If sewer is available, and property is within the Metropolitan District, connection to sewer is required. If owner believes reasons for exemptions exist, owner should justify request in writing.

If soil/site conditions are limiting and sewer and/or Metro District status not conducive to connection, Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. Owner should contact Charlotte Dryden, x4419, for further detail.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. Contractor is to notify office of the emergency situation as soon as possible.