

LAYOUT 3/15/2011 INSP 4 3/28/2011
 INSP 2 3/17/2011 INSP 5 _____
 INSP 3 3/25/2011 INSP 6 _____

ISSUE DATE: 11-3-10

PERMIT

P 34086

APPROVAL DATE: 3/29/2011

A _____

Tax ID # 04-371445

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

Trinity Quality Homes IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: 443-324-9806

SUBDIVISION: The Chase at Stoney Brook LOT NUMBER: 20

ADDRESS: 16358 Cattail River Drive PROPERTY OWNER: Trinity Quality Homes

SEPTIC TANK CAPACITY (GALLONS): 2000 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4 APPLICATION RATE: 0.6

SQUARE FOOTAGE OF HOUSE: 5105

LINEAR FEET OF TRENCH REQUIRED: 207, 5'-7', 95', 3' Wide + 112' Trenches

TRENCHES:	Trenches to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 6.0 feet below original grade. Effective area begins at <u>4.5</u> feet below original grade with 2.0 feet of stone below distribution pipe. <u>5'</u>
LOCATION:	Set septic tank per layout inspection. Set distribution box at the highest point of the easement per layout inspection. Install 6 40' trenches on contour in portion of septic reserve nearest to house
NOTES:	Do not order the septic tank until after layout inspection and Sanitarian approval. Stake easement corners. Call for layout inspection. Mark utilities. Gravel tickets must be available for Environmental Sanitarians. Stone must be approved by the Howard County Health Department. A written variance request is required for tanks deeper than 3 feet. A traffic bearing lid is required for tanks deeper than 4 feet.

PLANS APPROVED: Robert Bricker DATE: 08/31/10

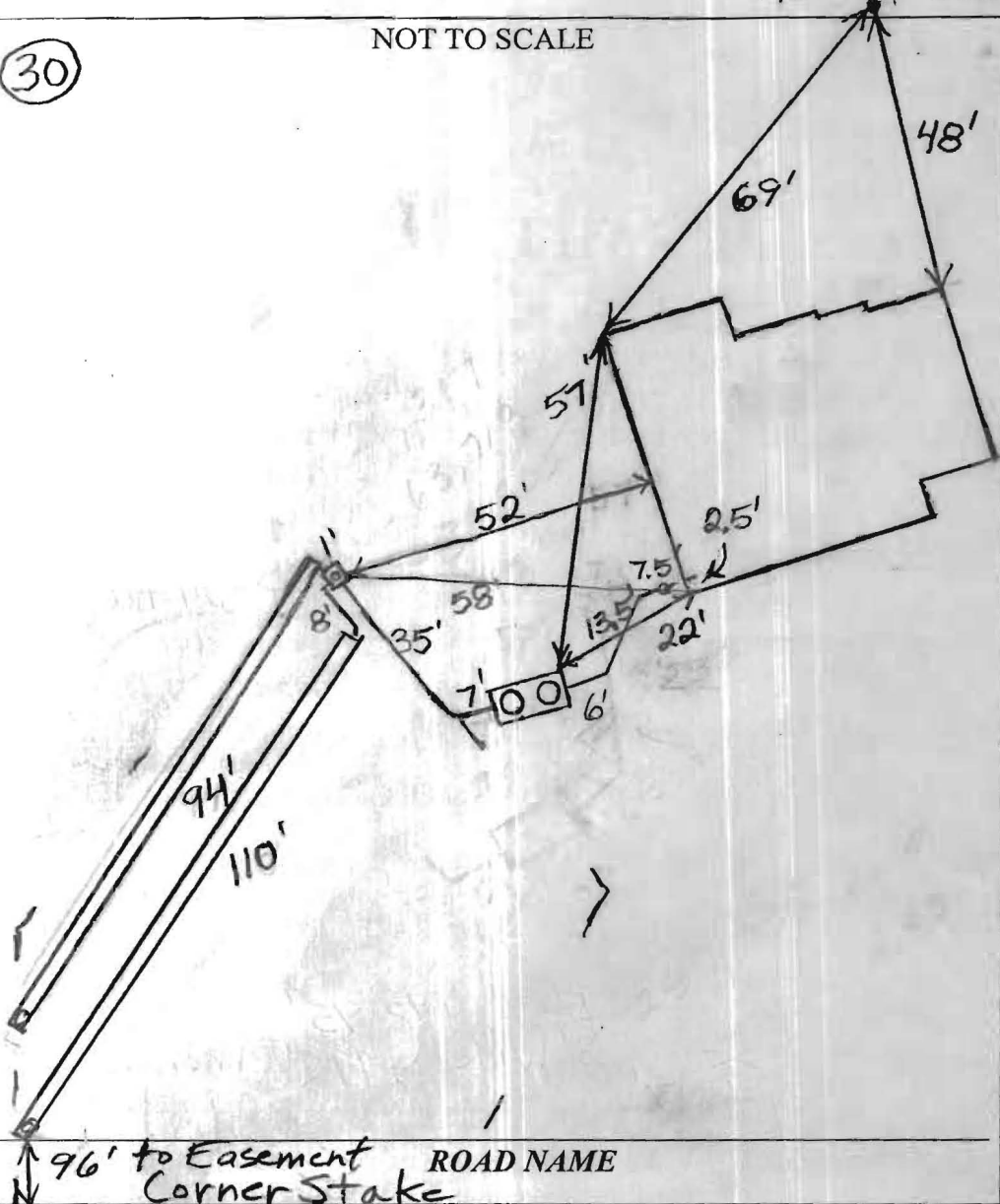
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND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

HO-95-0163

NOT TO SCALE

30



TRENCH/DRAINFIELD DATA

WIDTH 3' INLET 5'-5.5' BOTTOM 7.5'-8'

NUMBER OF TRENCHES 2
 TOTAL LENGTH 204'
 ABSORPTION AREA 612 + Sidewall
 DISTRIBUTION BOX LEVEL Yes
 DISTRIBUTION BOX BAFFLE Yes
 DISTRIBUTION BOX PORT Yes

SEPTIC TANK DATA

SEPTIC TANK I LEVEL Yes
 MANUFACTURER Babylon
 CAPACITY 2,000 GAL
 SEAM LOC Top
 TANK LID DEPTH 1.5'
 BAFFLES Yes
 BAFFLE FILTER No
 MANHOLE LOC Front + Rear
 6" PORT LOC None
 WATERTIGHT TEST No
 SLOTTED Yes
 DATE ON LID 1/14/11

Traffic Bearing

~~RUMP/SEPTIC TANK LEVEL
 MANUFACTURER
 CAPACITY GAL
 SEAM LOC
 TANK LID DEPTH
 BAFFLES
 BAFFLE FILTER
 MANHOLE LOC
 6" PORT LOC
 WATERTIGHT TEST
 SLOTTED
 DATE ON LID~~

PRE-CONSTRUCTION:

3/15/2011 Met installer at site. The majority of the easement has been partially cut away. Had to make an estimation using the data I had at the contour was originally. Set the septic tank near the easement close to where shown on the plan. I install a 95' and 112' trench across the top of the easement. (BB) 3/17/2011 Need house connection. Traffic bearing tank installed by builder due to proximity to driveway. (BB) 3/25/2011 System finished except for part of bottom trench and house connection. Installer waiting on gravel. (BB) 3/28/2011 Bottom trench finished. Still need house connection. (BB)

INSTALLATION:

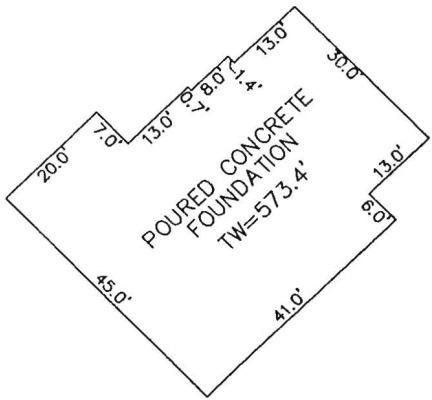
FINAL INSPECTOR

B. Baker

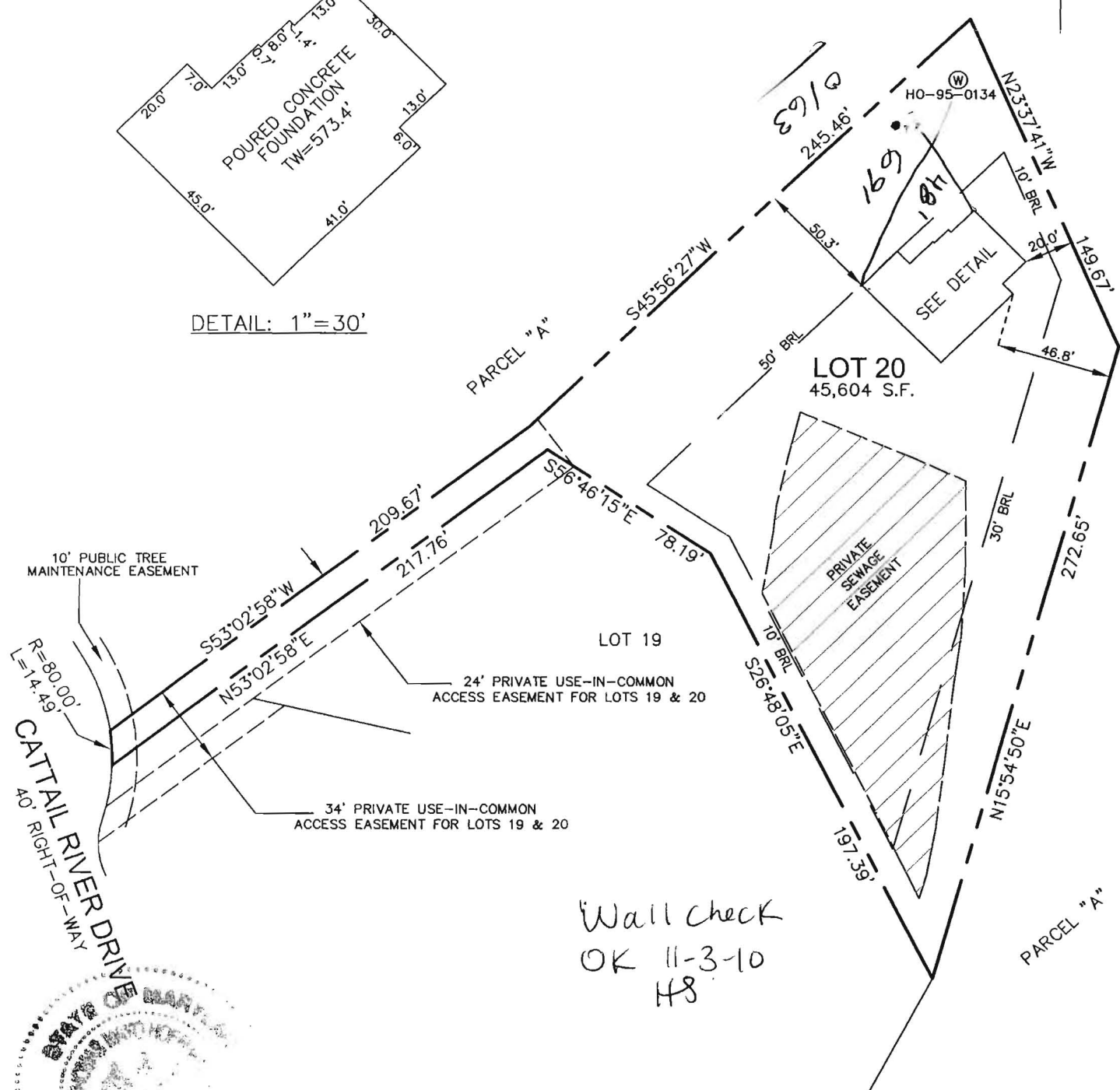
DATE OF APPROVAL

3/29/2011

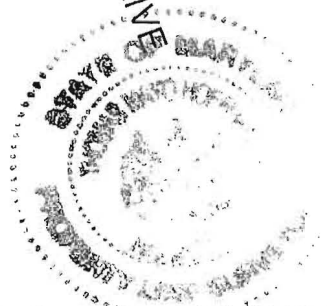
MARYLAND STATE GRID MERIDIAN (NAD83/91)



DETAIL: 1"=30'



Wall check
OK 11-3-10
HS



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.
Thomas M. Hoffman
THOMAS M. HOFFMAN JR., PROPERTY LINE SURVEYOR #267 DATE 10-28-10

B.P.# B10002693
16358 CATTAIL RIVER DRIVE

THIS WALL CHECK DRAWING CONTAINS A HORIZONTAL TOLERANCE IN ACCURACY OF 0.1' AND A VERTICAL TOLERANCE IN ACCURACY OF 0.2'

SCALE 1"=60'	DATE 10/25/10	ROBERT H. VOGEL ENGINEERING, INC. ENGINEERS - SURVEYORS - PLANNERS 8407 MAIN STREET ELLCOTT CITY, MARYLAND 21043 TEL:410-461-7666 FAX:410-461-8961	WALL CHECK DRAWING LOT 20 THE CHASE AT STONEY BROOK PLAT No. 18645 FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND
DRAWN BY A.M.S.	CHECKED BY T.M.H.		
PLAT NUMBERS 18644-18649	JOB NUMBER 06-34.00		

Fee Paid \$ 330
Receipt # P 534601

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 _____

Septic Contractor: J.M. Contracting LLC.

Contractor's Address: 425 Obrecht Rd

Sykesville Md. 21784

Contractor's Phone #: 443-277-7526

Property Address: 12632 Scrogguille Rd.

Property (Subdivision) & Lot # Fulton, MD 20759

Owner's Name: John + Martha Blaisdell

Is public sewer available/nearby: NO

Names of Any Previous Owners: Don't know

Year House Built: 1960

of Existing Bedrooms: 4 Bedrooms

of Bedrooms after completion of addition: NO

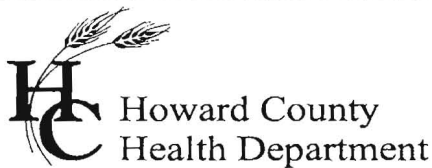
Has this request been discussed previously with a Sanitarian, who? _____

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 Ron S. [Signature]

FAX TO 410-313-2643



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:

J.M. Contracting LLC
425 OBrecht Rd
Sykesville Md 21784
443-277-7526
13032 Scaggsville Rd.
Fulton, MD 20759
NONE
John + Martha Blaisdell
NB

Contractor's Phone #:
Property Address:
Property (Subdivision) & Lot #:
County file #, if known:
Owner's Name and Phone #:
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:

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.