

Bureau of Environmental Health
 7178 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

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 4/24/2013 **ONSITE SEWAGE DISPOSAL SYSTEM** P 545013

INSTALLATION APPROVAL DATE: 8/20/13 **PERMIT** A Repair
 REPAIR W/ BAT

PROPERTY ADDRESS: 12537 Folly Quarter Road

SUBDIVISION: Glenelg Manor LOT: 4B TAX ID: 5358353

CONTRACTOR: Fogle's Septic Clean EMAIL: kurt@foglesinc.com

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

PROPERTY OWNER: Debbie Quadri EMAIL: _____

OWNER ADDRESS: 12537 Folly Quarter Road PHONE: 240-373-7030

BAT UNIT MODEL: Advantex AX20 → sized for 5 br

PUMP CHAMBER CAPACITY (GALLONS): _____ PUMP SIZE: _____

NUMBER OF BEDROOMS: 4 (size 5 for) HOUSE SQ. FT. >3,500 APPLICATION RATE: 0.8

DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

| | | |
|-----------|---|--|
| TRENCHES: | LINEAR FEET REQUIRED: <u>165</u> <u>2 x 82'</u> | INLET DEPTH: <u>4'</u> |
| | TRENCH WIDTH: <u>2'</u> | MAXIMUM BOTTOM DEPTH: <u>9' 10' 0" OK kw</u> |
| | MINIMUM SPACE BETWEEN TRENCHES: <u>10'</u> | EFFECTIVE AREA BEGINNING DEPTH: <u>6'</u> |
| LOCATION: | TRENCHES STAKED OUT IN FIELD AT TIME OF PERC TESTING. BAT UNIT LOCATION to be set below where existing septic tank is located. | |
| NOTES: | A test of the sensors, pump, alarm and unit itself is required. Install Advantex unit per manufacturer's specifications. *Homeowner requested to size system for 6 bedrooms. For 6 bedrooms: Linear feet of trench required for 6br will be <u>202.5'</u> . Trench inlet at <u>4'</u> , trench bottom at <u>10'</u> . Install 2x100' trenches as laid out in field. Pump and collapse ex. septic tank and drywell. | |

ISSUED BY: Kevin M Wolf, REHS ISSUE DATE: 5/16/2013 EXPIRATION DATE: 5/16/2014

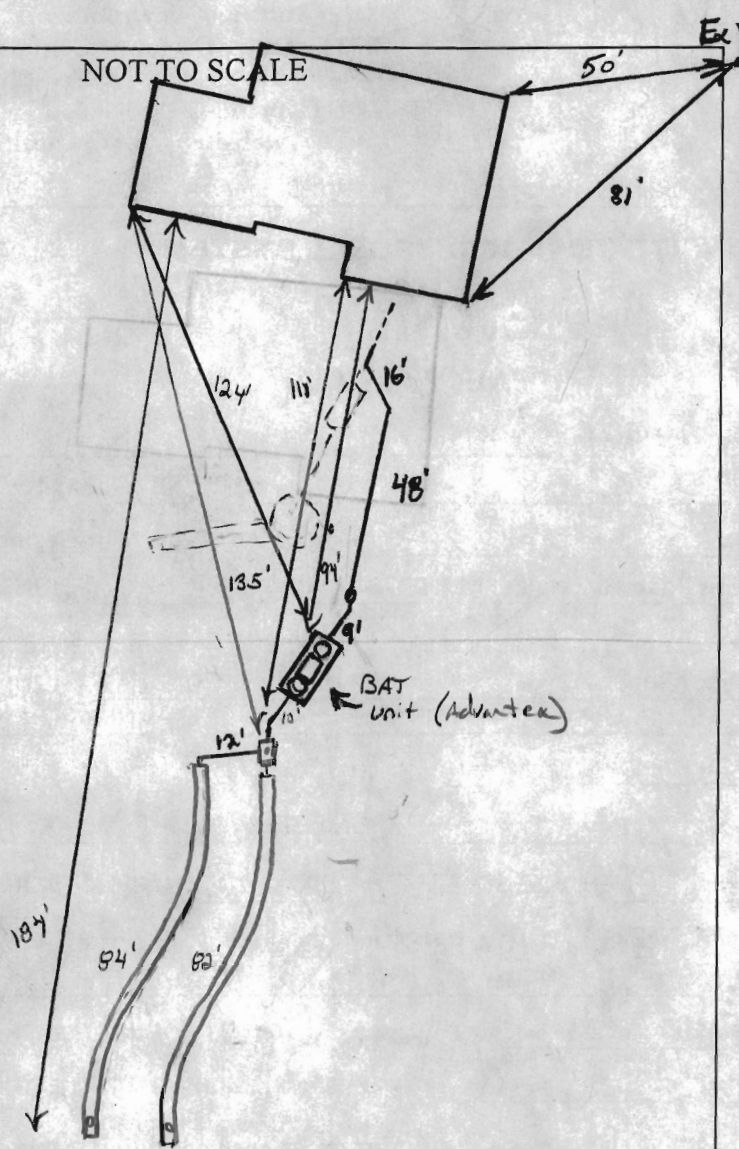
- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADE FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

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 TO SCHEDULE INSPECTIONS.

NOT TO SCALE



| TRENCH/DRAINFIELD DATA | | |
|-------------------------|-------|-----------|
| WIDTH | INLET | BOTTOM |
| 2' | 4' | 10' |
| NUMBER OF TRENCHES | | 2 |
| TOTAL LENGTH | | 166' |
| ABSORPTION AREA | | 332 sq SW |
| DISTRIBUTION BOX LEVEL | | Levelers |
| DISTRIBUTION BOX BAFFLE | | 90° bend |
| DISTRIBUTION BOX PORT | | Yes |

Advantex model A220

| SEPTIC TANK DATA | |
|----------------------------|-----------------|
| SEPTIC TANK I LEVEL | Yes |
| MANUFACTURER | Superior |
| CAPACITY | ~2000 GAL |
| SEAM LOC | Top |
| TANK LID DEPTH | 3'-3.3' |
| BAFFLES | Yes per design |
| BAFFLE FILTER | orange standard |
| MANHOLE LOC | Front/Rear |
| 6" PORT LOC | none |
| WATERTIGHT TEST | |
| SLOTTED | Yes |
| DATE ON LID | |
| PUMP/SEPTIC TANK LEVEL N/A | |
| MANUFACTURER | |
| CAPACITY | |
| SEAM LOC | |
| TANK LID DEPTH | |
| BAFFLES | |
| BAFFLE FILTER | |
| MANHOLE LOC | |
| 6" PORT LOC | |
| WATERTIGHT TEST | |
| SLOTTED | |
| DATE ON LID | |

ROAD NAME

PRE-CONSTRUCTION:

6/5/13 Set Advantex tank on other side of swale. Will need to pick up fall from existing house sewer before ex tank. Sewer line very deep @ house (under footer). Owner wants to keep w/ 5 bedroom system design. Install ex 82' trenches as laid out during perc test. Grade around tank may need to be cut down. (KW)

INSTALLATION: 6/6/13 New line run 1% fall to new tank. Tank hole dug. Waiting of unit. Rain coming in. OK to backfill tank after install. Advantex rep to be onsite during install (KW)

6/11/13 Tank and pod set per manufacturer's specs. Tank set last week (KW)

6/17/13 Trenches complete. No electrical/pumps installed. New system not tied in yet. (KW) 7/1/13 New system tied. Ex S.T and Drywell piped and collapsed. Need start-up report/verification from Oranco/Atlantic Solutions (KW)

FINAL INSPECTOR [Signature] DATE OF APPROVAL 8/20/13

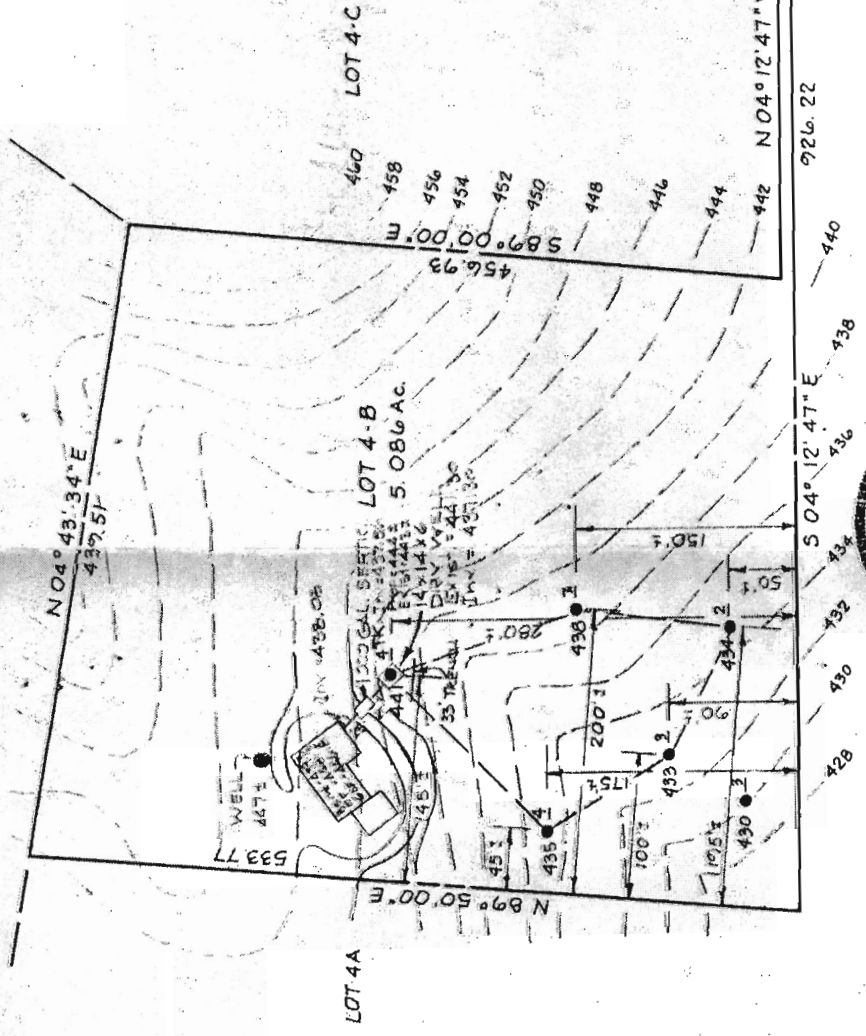
*See Permit
p. 31372*

The lot shown hereon complies with the minimum ownership and lot areas as required by Maryland State Dept. of Health and Mental Hygiene.

APPROVED: Private Water and Private Sewer
Joyce B. ... 3-9-77
Ho. of Health Officer, Date

OWNER:
Donald R. Reuwer
9945 Frederick Rd.
Ellicott City, Md. 21043
DR
25 Mar 77

• PERC HOLES FIELD LOCATED
A manhole size cleantout to the surface is required.
FOLLY QUARTER ROAD
S 42° 34' 34" E - 16.11



MAP OF PROPERTY OF
DONALD R. REUWER
SITUATED IN
GLENELG MANOR - SECTION I
5th Election District Howard County, Md.
SCALE: 1" = 100'
DATE: 3-22-77

MERIDIAN
REFERENCE
RICHARD P. BROWNE ASSOCIATES
CONSULTING ENGINEERS, PLANNERS
COLUMBIA, MD.
WAYNE, N.J.



J. Carl Hudgins
J. Carl Hudgins

PROJECT No. _____ W. O. No. _____
DRAWN AMK CHECKED _____



AdvanTex® Field Maintenance Report

Start-Up Summary Report

Atlantic Solutions, MD
(877) 814-8426

| | | | | | |
|---|----------|---------------------------------|---------------------------------------|-----------------------------|-------------------------|
| Property Owner/Tracking # Debbie Quadri | | Operator <i>OWEN TOWNLEY</i> | | Installed Date | |
| Site Address 12537 Folly Quarter, Ellicott City MD 21042 | | | | Start-Up Date 06/28/2013 | |
| Phone Number | Permit # | Mode Mode 3A | Bedrooms | 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 (1500 gal.) Recirc Volume (500 gal.)

Construction Concrete Fiberglass Other

Manufacturer: SUPERIOR TANK

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: PF800S11

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

Secondary Treatment

RSV setting: 14 -in.

Residual head measurement:

Pod #1 4'0" -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)

Control Panel

| | | |
|------------------------|----------------------------------|------------------------------------|
| Panel ID (RTU or UL #) | "On" Timer Setting <u>0.3</u> | "Off" Timer Setting <u>19.7</u> |
|------------------------|----------------------------------|------------------------------------|

Filter Pods

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

Other System Components

Disinfection equipment (manufacturer): _____

Dispersal system (type of):
GRAVITY

Declarations (Initial)

OT Orenco's Start-Up Procedure was followed.

OT All lids are secured.

OT Circuit breakers are on and control panel is latched.

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

OT Homeowner Package was reviewed with:

Builder on (date) 6-28-2013

Resident on (date) _____

The system is ready for use Yes No (explain)

Comments _____

Signature *[Signature]* Date 6-28-2013

Fax completed form to 1-866-384-7404



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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)
- B. System relocation for proposed addition for setback compliance *
- C. To replace a collapsed septic tank
- D. To replace a collapsed drywell

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

****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:

Fogle's Septic Clean Inc
580 Obrecht Rd
Sykesville, MO 21784
410 795-5670

Contactor's Phone #:
Property Address:
Property (Subdivision) & Lot #:
County file #, if known:

12537 Folly Quarter Rd
Ellicott City, Md. 21042

Owner's Name and Phone #:
Is public sewer available/nearby:

Debbie Quadri

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

Names of any previous owners:

Howard W Baker

Year House Built:

1978

of Existing Bedrooms:

3

of Bedrooms after completion of addition:

4

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

Approved for
Bat - "BRF"

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.

44

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89° 50' 00" E

533.77

477



Well

6/1/82

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

000155

THIS AGREEMENT is made this 13 day of may, among Deborah Orad, 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 12537 Folly Quarter Rd, in the 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 HSK No 133 Folio 235.

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:

- 40
20
W
- 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.

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

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20
W
- 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.

- C. 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 Canaan Valley Institute agrees to grant \$ 13,000 toward the cost of installation of the BAT system, and financial responsibility is limited to this amount. Operating costs will be at the Owners 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 six (6) months 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.

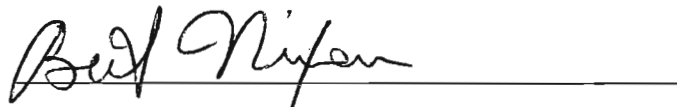
IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated

above.

DATE: 13 May 2013


Owner Deborah Quadri

DATE: 5/14/2013


Howard County Health Department

| | |
|------------------------------|--------|
| LR - Agreement Recording Fee | 20.00 |
| Grantor/Grantee Name: Quadri | |
| Reference/Control #: 155 | |
| LR - Agreement Surcharge | 40.00 |
| ===== | |
| SubTotal: | 60.00 |
| ===== | |
| Total: | 120.00 |
| #1566048-1 | |
| 05/14/2013 12:44 CC13-NN | |
| #1566048 CC0503 - Howard Co | |
| Columbia/CC05.03.02 - | |
| Register 02 494 | |



000156

Bureau of Environmental Health
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 www.hchealth.org
 Facebook: www.facebook.com/hocohealth
 Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

**OPERATION AND MAINTENANCE AGREEMENT
 FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM
 HAVING AN ADVANCED PRE-TREATMENT SYSTEM**

THIS AGREEMENT is made this 13 day of MAY, among Deborah Quark, hereinafter collectively referred to as "Owner", and the Howard County Health Department hereinafter referred to as the "County".

WHEREAS, Owner is the owner or contract owner of a parcel of land located at 12537 Holly Quark Rd, in the 4B Election District of Howard County, Maryland, and the deed to same is recorded or shall be recorded among the Land Records of Howard County, Maryland in Liber 135 Folio 235

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WHEREAS, The Lot is suitable for the installation of a conventional on-site sewage disposal system, but an advanced pre-treatment system, utilizing best available technology to perform nitrogen reduction, must be installed as part of the sewage disposal system for a 6 bedroom home with 3000 square feet of finished living space and 200 square feet of unfinished living space. Advanced pre-treatment has been required (pick one):

- To minimize the potential impact of the on-site sewage disposal system on down grade wells.
- For an existing lot of record that does not have enough area available for an initial and two replacement onsite sewage disposal systems.
- For the purpose of repairing a failing onsite sewage disposal system on an existing lot of record.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the County the right to enter upon the Lot at any reasonable time for access to the system to make periodic inspections and the Owner agrees to provide any information and data in Owner's possession reasonably requested and needed by the County to develop accurate and thorough test results.
- B. Owner acknowledges and agrees that neither the County nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.
- C. The Owner will devote reasonable care and effort to the operation and maintenance of the system in perpetuity or until a public sewer connection is made so that a system malfunction is not the result of poor maintenance, faulty operation, or neglect.

D. The Owner agrees to enter into a contract reasonably acceptable to the Owner and the County with a private entity to operate and maintain on a regularly scheduled basis an approved advanced pre-treatment system. The owner shall supply a copy of the contract to the County when it is renewed or altered.

E. This agreement shall run with the land and upon Owner's taking title to the Lot shall bind the Owner, their heirs, successors, and assigns to the provisions of the agreement as long as the property is in existence and after installation of the system. Owner further agrees that they shall inform in writing any subsequent purchaser or lessee of the Lot that the system shall require maintenance or other attention. Upon taking title to the Lot, the Owner agrees to cause this agreement to be recorded in the Land Records of Howard County and assure that it becomes part of the Deed for the subject property in order that prospective buyers may be aware of the special conditions affecting this property.

F. This agreement shall not be construed to limit any authority of the County to protect the public health, safety or comfort or to issue any other orders to take any other action which is now or may hereafter be within its authority.

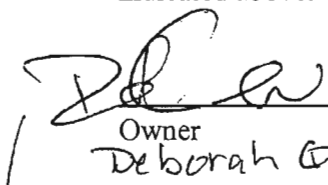
G. This agreement may be voided at any time at the discretion of the County.

H. This agreement contains the entire agreement and understanding between the County and the Owner. 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.

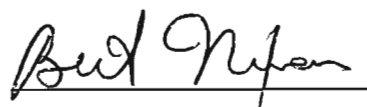
I. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

J. Owner acknowledges and agrees that interior renovations to increase the number of bedrooms or an increase in living space shall not be permitted without approval from the County.

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


Owner
Deborah Guadri

5/13/13
Date


Howard County Health Department

| Owner | Date |
|---------------------------------|---------|
| LR - Agreement Recording Fee | 20.00 |
| Grantor/Grantee Name: Guadri | |
| Reference/Control #: 156 | |
| LR - Agreement Surcharge 40.00 | |
| SubTotal: | 60.00 |
| Total: | 120.00 |
| #1566048-5 | CC13-MN |
| 05/14/2013 | 12:44 |
| #1566048 CC0503 - Howard Co | |
| Columbia/CD05.03.02 - Registrar | |
| 02 494 | |

Clerk of the Circuit Court for
Howard County
Land Records/Licensing

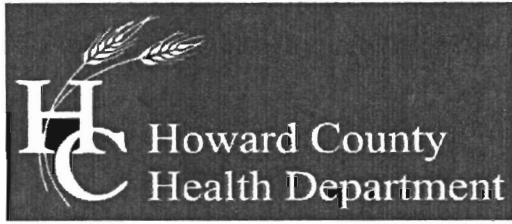
The Thomas Dorsey Building
9250 Bendix Road
Columbia, MD 21045
410-313-5850

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LR - Agreement Recording Fee
      1x 20.00 20.00
Grantor/Grantee Name: Guardi
Reference/Control #: 155

LR - Agreement Surcharge
      1x 40.00 40.00
LR - Agreement Recording Fee
      1x 20.00 20.00
Grantor/Grantee Name: Guardi
Reference/Control #: 156

LR - Agreement Surcharge
      1x 40.00 40.00
=====
SubTotal.                120.00
Total:                    120.00
=====
REV-Check-BOA                120.00
Number : 5716
```

05/14/2013 12:42 CC13-NN
#1566048 /494/109
Thank you for visiting us today~



Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

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www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

**OPERATION AND MAINTENANCE AGREEMENT
FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM
HAVING AN ADVANCED PRE-TREATMENT SYSTEM**

THIS AGREEMENT is made this 13 day of MAY, among Deborah Ewald, hereinafter collectively referred to as "Owner", and the Howard County Health Department hereinafter referred to as the "County".

WHEREAS, Owner is the owner or contract owner of a parcel of land located at 12537 Folly Garden Rd, in the 146 Election District of Howard County, Maryland, and the deed to same is recorded or shall be recorded among the Land Records of Howard County, Maryland in Liber 133 Folio 235

WHEREAS, The Lot is suitable for the installation of a conventional on-site sewage disposal system, but an advanced pre-treatment system, utilizing best available technology to perform nitrogen reduction, must be installed as part of the sewage disposal system for a 12 bedroom home with 3000 square feet of finished living space and 200 square feet of unfinished living space. Advanced pre-treatment has been required (pick one):

To minimize the potential impact of the on-site sewage disposal system on down grade wells.

For an existing lot of record that does not have enough area available for an initial and two replacement onsite sewage disposal systems.

For the purpose of repairing a failing onsite sewage disposal system on an existing lot of record.

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B. Owner acknowledges and agrees that neither the County nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.

C. The Owner will devote reasonable care and effort to the operation and maintenance of the system in perpetuity or until a public sewer connection is made so that a system malfunction is not the result of poor maintenance, faulty operation, or neglect.

