



Howard County
Health Department

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: 6/7/2013

ONSITE SEWAGE DISPOSAL SYSTEM

P 545061

INSTALLATION
APPROVAL DATE: 6/28/13

PERMIT
REPAIR W/ BAT

A Repair

PROPERTY ADDRESS: 16555 Blooms Lane
SUBDIVISION: _____ LOT: _____ TAX ID: 4335104
CONTRACTOR: Linsenmeyer EMAIL: _____
CONTRACTOR ADDRESS: 9304 Migan Road PHONE: 443-570-6973
PROPERTY OWNER: Steven Croston EMAIL: stevejensteve@aol.com
OWNER ADDRESS: 16555 Blooms Ln, Mt. Airy, MD 21771 PHONE: 410-984-0269

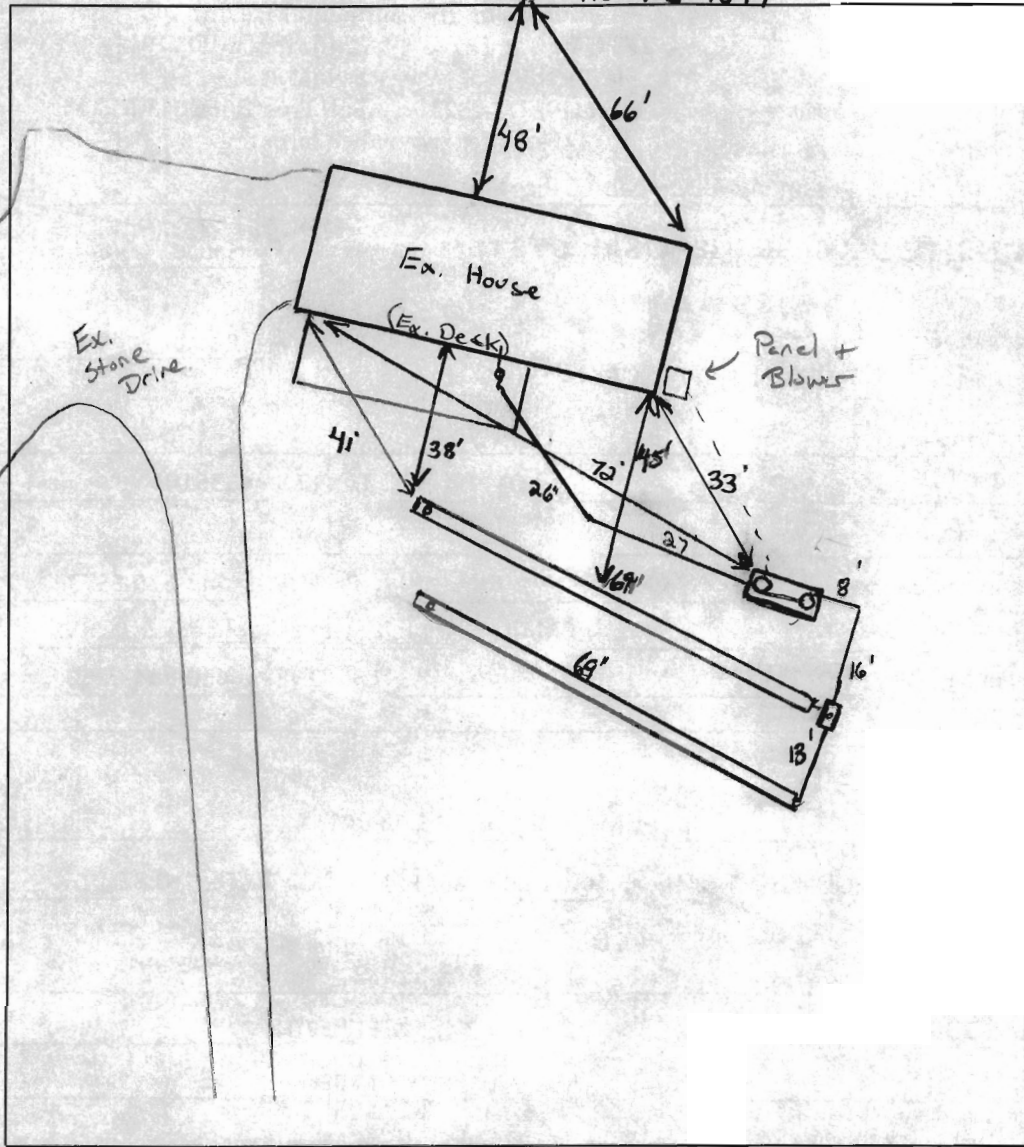
BAT UNIT MODEL: Hoot BNR H600
PUMP CHAMBER CAPACITY (GALLONS): _____ PUMP SIZE: Goulds EP0411A
NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. >3,500 APPLICATION RATE: 0.8
DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

| | | |
|-----------|---|---------------------------------------|
| TRENCHES: | LINEAR FEET REQUIRED: <u>130</u> | INLET DEPTH: <u>3</u> |
| | TRENCH WIDTH: <u>3</u> | MAXIMUM BOTTOM DEPTH: <u>5.5</u> |
| | MINIMUM SPACE BETWEEN TRENCHES: _____ | EFFECTIVE AREA BEGINNING DEPTH: _____ |
| LOCATION: | TRENCHES and BAT unit to be STAKED OUT IN FIELD AT TIME of LAYOUT inspection. | |
| NOTES: | <u>A test of the sensors, pump, alarm and unit itself is required. Install HOOT unit per manufacturer's specifications.</u> *Homeowner requested to size system for 4 bedrooms. Pump and collapse ex. septic tank and drywell. Observation pipes required at trench ends. | |

ISSUED BY: Kevin M Wolf, REHS ISSUE DATE: 6/7/2013 EXPIRATION DATE: 6/7/2014

- 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 DOWNGRADIENT 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.



TRENCH/DRAINFIELD DATA
(If Installed/Needed)

| WIDTH | INLET | BOTTOM |
|----------------------------------|----------|-------------|
| <u>3</u> | <u>3</u> | <u>5.5'</u> |
| NUMBER OF TRENCHES <u>2</u> | | |
| TOTAL LENGTH <u>138'</u> | | |
| ABSORPTION AREA <u>414' x SW</u> | | |
| DIST. BOX LEVEL <u>Yes</u> | | |
| DIST. BOX BAFFLE <u>Yes</u> | | |
| DIST. BOX PORT <u>Yes</u> | | |

HOOT 600 GPD BNR SYSTEM
BAY RESTORATION FUND

| | |
|---------------------|---------------------------------|
| MANUFACTURER | <u>Mayer Bros</u> |
| CAPACITY | <u>H600 GAL</u> |
| SEAM LOCATION | <u>Top</u> |
| TANK LID DEPTH | <u>2.5'-3'</u> |
| FRONT BAFFLE | <u>Yes</u> |
| MANHOLE LOC | <u>Front/Rear</u> |
| 6" PORT LOC | <u>none</u> |
| WATERTIGHT TEST | <u>-</u> |
| AERATOR FUNCTIONING | <u>_____</u> |
| ALARM FUNCTIONING | <u>_____</u> |
| DATE ON LID | <u>_____</u> |
| PUMP MODEL | <u>Goulds</u> <u>EP0H11A</u> |

PRE-CONSTRUCTION:

6/25/13 Trench locations given. Contour shot in field. Run 2x6.5' trenches on contour parallel w/ house. Homeowner spoke of an addition where location of existing deck is. Location of BNR unit to be set above existing S.T. set. Blower and panel to be located @ house corner. (KW)

INSTALLATION: 6/27/13 BNR unit in place. Pump set. Just starting electrical. Top trench dug and started. D box set. Contractor transitioned from 1 1/4" discharge to 4" to D box. Should be OK. ~~OK~~ Ex. S.T. and dry well pumped and collapsed. OK to continue. (KW)
6/28/13 Trenches complete. Blower wiring. Electrical installed. System startup OK. startup confirmation letter received. OK to close all work. (KW)

FINAL INSPECTOR J. Hall DATE OF APPROVAL 6/28/13



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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: JOE Linsenmeyer
 Contractor's Address: 7304 Migan Rd
RANDALLSTOWN, MD 21133
 Contactor's Phone #: 443-570-6973
 Property Address: 1655 Blooms Lane
 Property (Subdivision) & Lot #: Mt. Airy, MD 21771
 County file #, if known: Steven Croston
 Owner's Name and Phone #: 410-984-0269
 Is public sewer available/nearby: No
If public sewer may be close, mention further research will be performed to verify availability
 Names of any previous owners: _____
 Year House Built: 1976
 # of Existing Bedrooms: 3
 # of Bedrooms after completion of addition: 4
 Has this request been discussed previously with another Sanitarian: Yes Name: Kevin Wolf

Hoot System to be installed

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.**

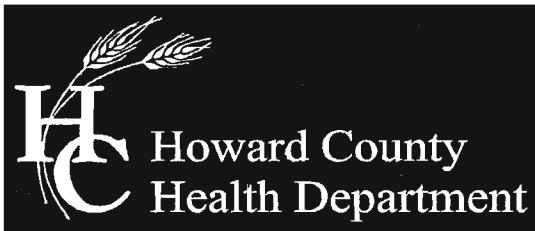
If public sewer may be nearby, verify whether the sewer is technically "available" (defined as abutting or within the property), through the Bureau of Engineering (x2414).

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.



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www.hchealth.org
Facebook: www.facebook.com/hocohealth
Twitter: HowardCoHealthDep

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

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

THIS AGREEMENT is made this 17th day of April, among Steve Croston, 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 11555 Blooms Lane, in the 4th 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 2846 Folio 347.

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 bedroom home with square feet of finished living space and 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.

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

THIS AGREEMENT is made this 17th day of April, among Steve Croston, 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 16555 Blooms Lane, in the 4th Election District of Howard County, Maryland, and the deed to same is recorded among the Land Records of Howard County, Maryland, in Columbia and in Liber 2846 Folio 347.

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 MDE certified and manufacturer-approved installer will install the BAT system.
- C. Owner acknowledges and agrees the manufacturer or manufacturer's authorized service provider 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 initial 5 year period an Operation and Maintenance contract with a certified service provider must be maintained in perpetuity by the property owner.
- 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 manufacturer's authorized service provider 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 \$ 13000 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. 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: 4/17/13

Steven C. Coster
Owner

DATE: 4/17/13

Bea Nifan
Howard County Health Department



MAYER BROS., INC.

Precast Concrete Products

6264 Race Rd. Elkridge, MD 21075

Letter of Satisfaction Hoot System Installation

Address of Property: 16555 Blooms Ln
MT Airy, MD 21771

Date of Final Inspection: 6-28-2013

Installer: Lusenmeyer

Hoot Technician/Inspector: E. McHullen

I hereby certify that the Hoot system installed at the property listed above has been installed according to proper Hoot installation practices. I have also verified the startup of the system and it is in proper working order.

Sincerely,

Name of Inspector
Mayer Bros., Inc.

PH: 410-796-1434

FX: 410-796-1438

WBE
NPCA Certified Plant

mayerbro@connext.net
www.mayerbrosprecast.com

Grease Interceptors, Grease Solutions, Aerobic Treatment Units, Septic Tanks, Holding Tanks, Storm Water Structures, Hydroceptors,
Bench Barrier, Water Meter Vaults, Sectional Valve Vaults, Top Slabs, Curb Heads, Curb Bumpers, PermEntry Basement Entries,
Scopewal Window Wells, Custom Precast Products

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

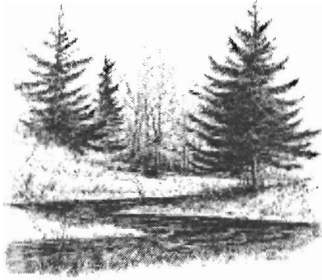
The Thomas Dorsey Building
9250 Bendix Road
Columbia, MD 21045
410-313-5850

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=====
LR - Agreement Recording Fee
      1x 20.00 20.00
Grantor/Grantee Name: croston
Reference/Control #: 242

LR - Agreement Surcharge
      1x 40.00 40.00
LR - Additional Recording Fee - linked
      1x 0.00 0.00
LR - Agreement Recording Fee
      1x 20.00 20.00
Grantor/Grantee Name: crosten
Reference/Control #: 243

LR - Agreement Surcharge
      1x 40.00 40.00
LR - Additional Recording Fee - linked
      1x 20.00 20.00
LR - Additional Recording Fee - linked
** VOID **
      1x -20.00
=====
SubTotal: 120.00
Total: 120.00
=====
REV-Check-BOA 120.00
Number : 6609
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05/09/2013 15:36
#1556697 /496/109
Thank you for visiting us today~



Canaan Valley Institute

WORKING FOR THE SUSTAINABILITY OF THE MID-ATLANTIC HIGHLANDS SINCE 1995

April 10, 2013

Mr. Steven Croston
16555 Blooms Lane
Mt. Airy, MD 21771

RE: FY 2013 Howard County Bay Restoration Fund OSDS Upgrade Program

Dear Mr. Croston:

Thank you for your application to participate in the Howard County Bay Restoration Fund OSDS Upgrade Program. The Howard County Health Department has verified that your existing septic system is failing and in need of repair. Based on your 2010 income tax return form, you are eligible to receive funding to cover **100%** of the cost to upgrade your system to one of the MDE approved BAT units up to \$13,000. The approved price includes the cost of the unit, installation of the unit, and 5 years of operation and maintenance. The price does not include the cost of permits.

In order to receive your OSDS upgrade, **you MUST follow these steps:**

1. **Sign this letter** on the bottom of page 2 **and return it** in the envelope provided within **2 weeks of the date of this letter**.
2. File a septic repair permit application with the Howard County Health Department **within 2 weeks of the date of this letter**. The permit application fee is \$396.00 (\$165 for tank approval only).
3. Obtain the Agreement and Easement for Installation of Best Available Technology Systems with Bay Restoration Funds from the Howard County Health Department. Have it signed by a Howard County Health Department Bureau Director or Designee. Then take it to the Circuit Court and have it recorded in Land Records **within 2 weeks of the date of this letter**.
4. Prepare your property and schedule installation of the system. The system must be installed **within 6 weeks of the date the Agreement and Easement is recorded**.

If assistance is needed in completing any of the steps listed above, you may contact me at 304-940-3443 or kristin.mielcarek@canaanvi.org.

494 RiverStone Road | Davis, WV 26260
Phone: (304) 259.4739 or (800) 922.3601 | Fax: (304) 259.4759
www.canaanvi.org

The system vendor may provide a contractor to install your BAT unit. CVI will provide payment directly to the vendor. The vendor may also require proof of insurance from your contractor.

If your system is not installed within the 8 week timeframe listed in the steps on page 1, the funds may be released and used elsewhere. If you cannot complete installation in within this timeframe, please contact me to request an extension.

For more information on septic repair permitting, contact:

Jeff Williams
Program Supervisor, Well and Septic
410-313-1771

Please sign and return this original letter and keep a copy for your records. If you have any questions, please contact me at 304-940-3443 or by email at kristin.mielcarek@canaanvi.org.

Sincerely,

Kristin Mielcarek, Watershed Circuit Rider

Accepted by: Steven Croston, Property Owner

I have read and agree to the conditions of this Agreement Letter.

Signature

Date

494 RiverStone Road | Davis, WV 26260
Phone: (304) 259.4739 or (800) 922.3601|Fax: (304) 259.4759
www.canaanvi.org