

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: 4/16/13 **ONSITE SEWAGE DISPOSAL SYSTEM** P 545002

INSTALLATION **PERMIT**
 APPROVAL DATE: 5/3/2013 **REPAIR** A Repair

PROPERTY ADDRESS: 1406 Driver Road
 SUBDIVISION: Isiah Giles Property LOT: 5 TAX ID: 03-302105
 CONTRACTOR: Fogles Septic Clean Inc. EMAIL: kurt@foglesinc.com
 CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784 PHONE: 410-984-5211
 PROPERTY OWNER: Shirley Dorsey EMAIL: _____
 OWNER ADDRESS: 1406 Driver Road PHONE: 410-442-1556

SEPTIC TANK SIZE (GALLONS): _____
 PUMP CHAMBER CAPACITY (GALLONS): _____ PUMP SIZE: _____
 NUMBER OF BEDROOMS: _____ HOUSE SQ. FT. _____ APPLICATION RATE: _____
 DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

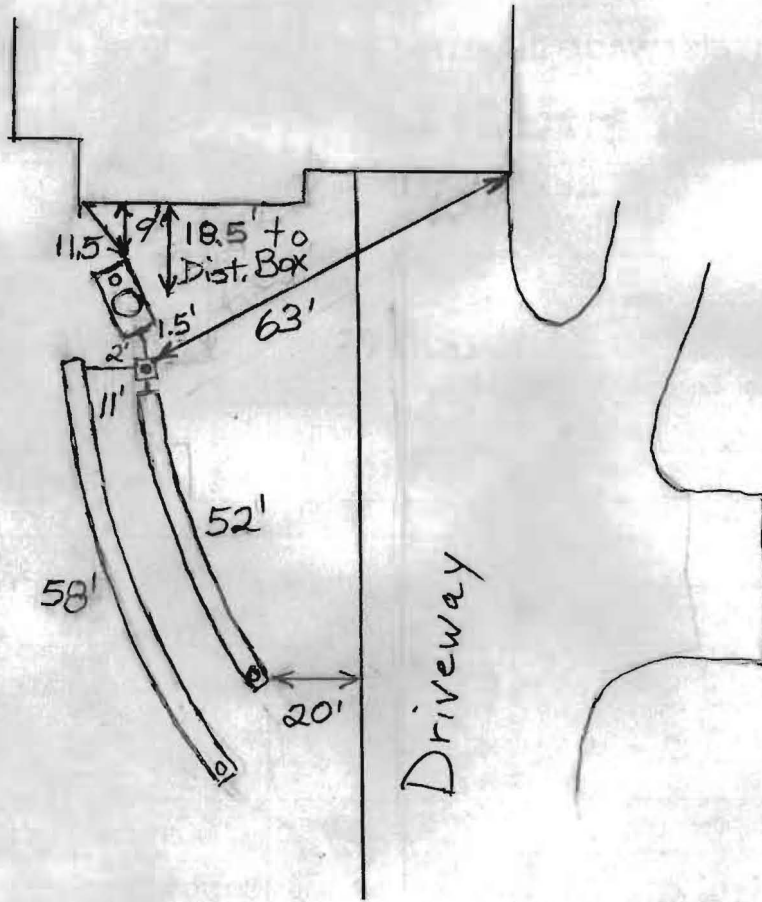
TRENCHES:	LINEAR FEET REQUIRED: <u>109'</u>	INLET DEPTH: <u>4'</u>
	TRENCH WIDTH: <u>2'</u>	MAXIMUM BOTTOM DEPTH: <u>9.5'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>10'</u>	EFFECTIVE AREA BEGINNING DEPTH: _____
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	<u>50' + 59'</u> <u>Pump Out and Fill in Drywell</u>	

ISSUED BY: _____ ISSUE DATE: _____ EXPIRATION DATE: _____

- 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.**

NOT TO SCALE



ROAD NAME

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2	4'	9.5'
NUMBER OF TRENCHES		2
TOTAL LENGTH		110'
ABSORPTION AREA		605
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		Yes

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
MANUFACTURER	?
CAPACITY	?
SEAM LOC	Midscam
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	No
MANHOLE LOC	Middle
6" PORT LOC	Front
WATERTIGHT TEST	No
SLOTTED	No
DATE ON LID	N/A

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	

PRE-CONSTRUCTION:

5/1/2013 Install 2 trenches on contour from tank towards driveway. (BB)

INSTALLATION: 5/3/2013 (AM) Top trench done. Dist. box installed. (BB)
5/3/2013 (PM) System finished. O.K. to backfill. (BB)

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 5/3/2013