

**Bureau of Environmental Health**  
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[www.hchealth.org](http://www.hchealth.org)  
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Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 1/28/2015 **ONSITE SEWAGE DISPOSAL SYSTEM** P 555724

INSTALLATION APPROVAL DATE: 4/23/2015 **PERMIT** A \_\_\_\_\_  
**REPAIR**

PROPERTY ADDRESS: 7073 Mink Hollow Road

SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ TAX ID: 5372372

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

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

PROPERTY OWNER: Lisa Farone EMAIL: \_\_\_\_\_

OWNER ADDRESS: 7073 Mink Hollow Road, Highland, MD 20777 PHONE: 240-243-2691

SEPTIC TANK SIZE (GALLONS): N/a PUMP CHAMBER CAPACITY (GALLONS): N/a PUMP SIZE: N/a

NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. N/a APPLICATION RATE: 1.2

DISTRIBUTION SYSTEM: GRAVITY FED  LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>91'</u>	INLET DEPTH: <u>4.5'</u>
	TRENCH WIDTH: <u>3'</u>	MAXIMUM BOTTOM DEPTH: <u>8'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>n/a</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>5.5'</u>
LOCATION:	<b>TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.</b>	
NOTES:	Install 1x91' trench just below 100' well radius. Existing drywell is to be pumped out and collapsed, backfilled with clean fill or stone. New outlet baffle and manhole riser to be installed on existing septic tank. New Dist. Box to be installed w/ clean-out. Obs pipe req'd at end of trench.	

ISSUED BY: Kevin M. Wolf ISSUE DATE: 2/6/15 EXPIRATION DATE: 2/6/16

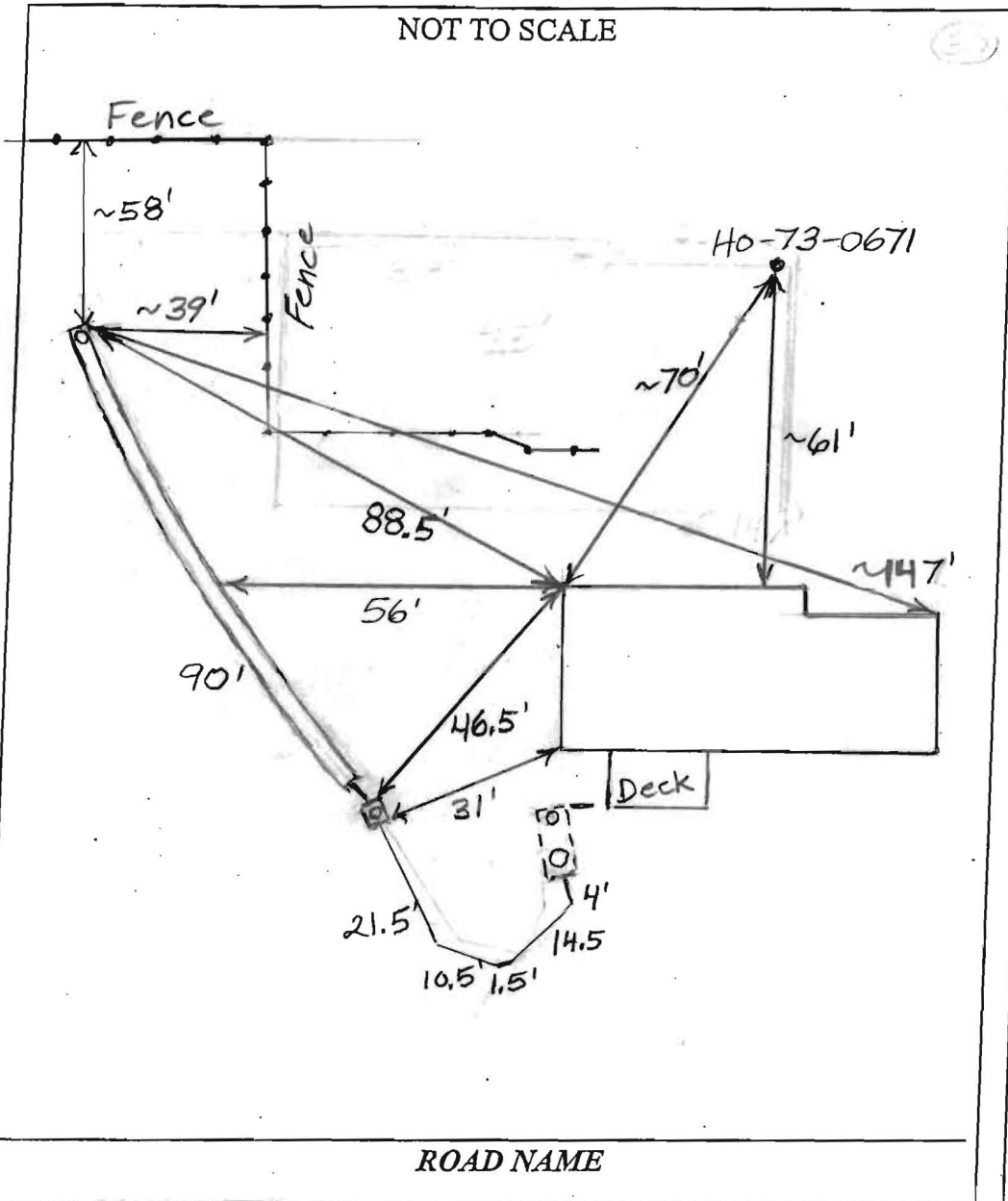
- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION**
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING**
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.**
- 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**
- NOTE: AN INDIVIDUAL CERTIFIED BY MDE AND THE MANUFACTURER FOR BAT INSTALLATION MUST BE PRESENT AT ALL TIMES DURING BAT INSTALLATION.**
- NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA**

**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/DRAIN/FIELD DATA		
WIDTH	INLET	BOTTOM
3'	4.5'	8'
NUMBER OF TRENCHES <u>1</u>		
TOTAL LENGTH <u>90'</u>		
ABSORPTION AREA <u>270+Sidewall</u>		
DISTRIBUTION BOX LEVEL <u>N/A</u>		
DISTRIBUTION BOX BAFFLE <u>Yes</u>		
DISTRIBUTION BOX PORT <u>Yes</u>		

SEPTIC TANK DATA	
SEPTIC TANK I LEVEL	<u>Yes</u>
MANUFACTURER	<u>N/A</u>
CAPACITY	<u>1250</u> GAL
SEAM LOC	<u>mid</u>
TANK LID DEPTH	<u>30"</u>
BAFFLES	<u>Yes</u>
BAFFLE FILTER	<u>N/A</u>
MANHOLE LOC	<u>Rear</u>
6" PORT LOC	<u>Front</u>
WATERTIGHT TEST	<u>OK</u>
SLOTTED	<u>no</u>
DATE ON LID	<u>N/A</u>
PUMP/SEPTIC TANK LEVEL <u>N/A</u>	
MANUFACTURER	<u>N/A</u>
CAPACITY	<u>          </u> GAL
SEAM LOC	<u>          </u>
TANK LID DEPTH	<u>          </u>
BAFFLES	<u>          </u>
BAFFLE FILTER	<u>          </u>
MANHOLE LOC	<u>          </u>
6" PORT LOC	<u>          </u>
WATERTIGHT TEST	<u>          </u>
SLOTTED	<u>          </u>
DATE ON LID	<u>          </u>

PRE-CONSTRUCTION:

2/6/14 Shot elevations in field @ time of perc test.  
 Install 1x 90' trench on contour just outside 100' well radius  
 Existing Drywell to be pumped/collected. Call for imp. (KW)

INSTALLATION: 4/23/2015 System finished. O.K. to backfill. (BB)

FINAL INSPECTOR Brian DATE OF APPROVAL 4/23/2015