

Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

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

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

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

RECEIPT DATE: 4/1/16 ONSITE SEWAGE DISPOSAL SYSTEM P 558064

APPROVAL DATE: 4/15/16 Kevin PERMIT: REPAIR A

PROPERTY ADDRESS: 7367 Mink Hollow Road

SUBDIVISION: LOT: TAX ID: 05-365139

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

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

PROPERTY OWNER: Charles Verkert EMAIL:

OWNER ADDRESS: 7367 Mink Hollow Road, Highland, MD 20777 PHONE: 301-461-4197

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

NUMBER OF BEDROOMS: 3 HOUSE SQ. FT. APPLICATION RATE: 1.2

DISTRIBUTION SYSTEM: GRAVITY FED [checked] LOW PRESSURE DOSED [] ~ 36 stone

Table with trench specifications: LINEAR FEET REQUIRED: 45' 45', TRENCH WIDTH: 3' 3', MINIMUM SPACE BETWEEN TRENCHES: -, INLET DEPTH: 4' 4', MAXIMUM BOTTOM DEPTH: 9' 9', EFFECTIVE AREA BEGINNING DEPTH: 4' 4'

LOCATION: TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.

NOTES: Existing dry well must be pumped + abandoned. Manhole riser to be added to existing tank. No distribution box required for single trench - put observation pipe or cleanout at trench beginning.

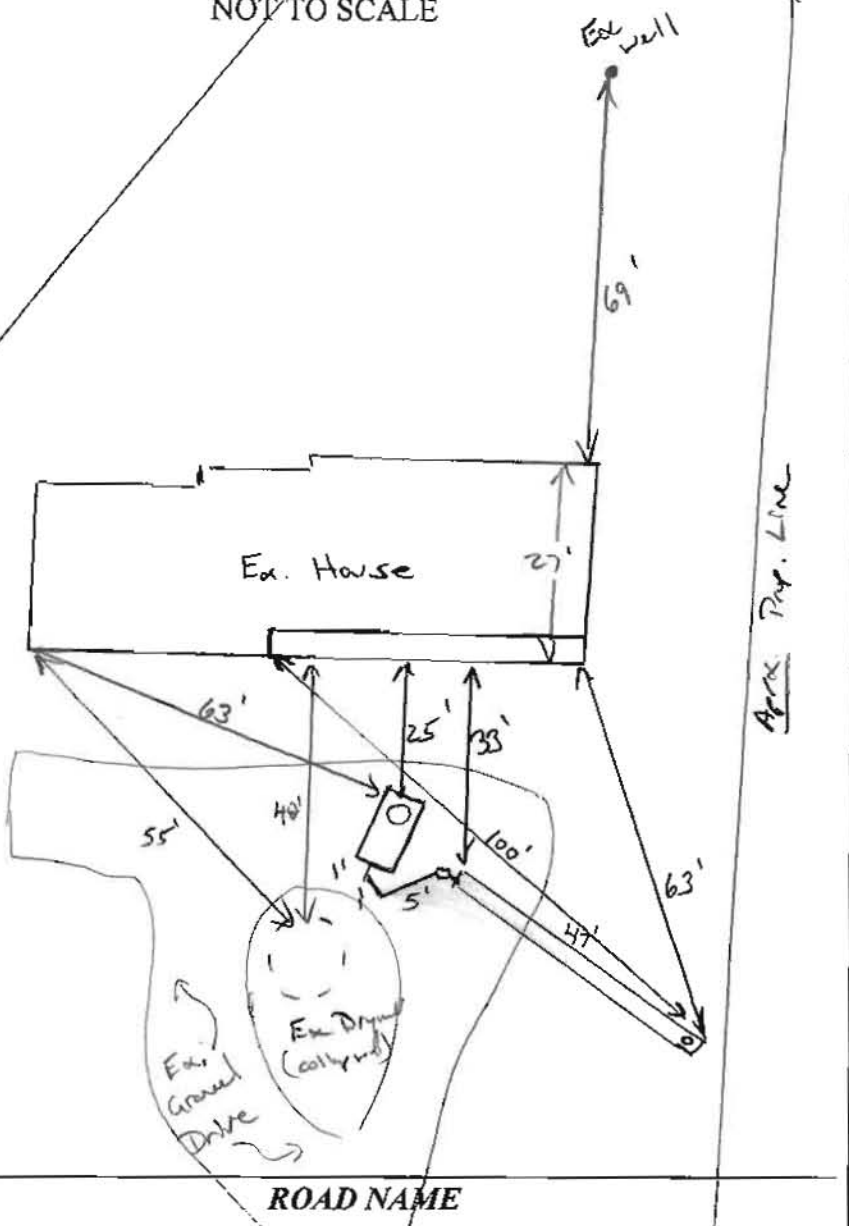
ISSUED BY: Kevin Wolf ISSUE DATE: 4/13/16 EXPIRATION DATE: 4/13/17

- 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
ELECTRICAL PERMIT ISSUED E N/A
NOTE: THE HCHD DOES NOT WARRANTY ANY SYSTEM AND CANNOT GUARANTEE THE PERFORMANCE OF THIS SYSTEM AS DESIGNED.
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

* See attached memo

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
3	4'	9'
NUMBER OF TRENCHES		1
TOTAL LENGTH		47'
ABSORPTION AREA		141 + 5W
DISTRIBUTION BOX LEVEL		N/A
DISTRIBUTION BOX BAFFLE		N/A
DISTRIBUTION BOX PORT		N/A

SEPTIC TANK DATA

SEPTIC TANK LEVEL	Yes
MANUFACTURER	N/A
CAPACITY	1250 GAL
SEAM LOC	mid
TANK LID DEPTH	2'
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	Front
6" PORT LOC	none
WATERTIGHT TEST	'OK'
SLOTTED	NO
DATE ON LID	

PUMP/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:

4/13/16 Install 1 x 45' trench as staked in field. Do not need Dbox (one trench) but it would be preferred. Call for insp (Kam)

INSTALLATION:

4/15/16 Trench installed per plan/permit. Ex. D.w. pumped/collapsed. OK to cover all work (Kam)

FINAL INSPECTOR

[Signature]

DATE OF APPROVAL

4/15/16



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

INFORMATION FORM – SEPTIC SYSTEM REPAIR/UPGRADE

Reason for Request:

- Failing System
- System relocation for proposed addition
- System upgrade for proposed addition
- Inadequate treatment zone
- Collapsed septic tank
- Collapsed drywell

Has the septic tank been pumped within the last month?

- Yes Date pumped: 3/25/16
- No

Was a visual inspection of the septic tank and/or drain fields conducted?

- Yes Explain observations: Dug up drywell, it is full.
- No

Existing system design

- Drywell
- Trench
- Mound
- Unknown
- Other: _____

Was a visual inspection of the sewage line conducted?

- Yes
 - Blockage leading to the tank
 - Yes Explain: _____
 - No
 - Blockage leading to the field
 - Yes Explain: _____
 - No
- No

Is discharge surfacing on the ground?

- Yes
- No

Additional Comments: _____

*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, testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulation.

Septic Contractor: Fogles Septic Contractor's Phone: 410 795-5670
 Contractor's Address: 580 Obrecht Rd
 Property Address: 7367 Mink Hollow Rd County file: _____
 Subdivision: _____ Lot: _____ Year Built: _____
 Owner's Name: Charles VeKert Owner's Phone: 301 461-4197
 Name of previous owners: Harriet Rosenberg Existing bedrooms: 2
 Proposed bedrooms: _____

Has this request been previously discussed with a Sanitarian? (Name): _____
 Public Sewer available/nearby: No

*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.

Prior to scheduling inspections, scaled plans should be submitted to clarify the nature of the addition.

Print out a copy of Real Property Data via Dept. of Taxation website _____ Indexed file found 365139

If public sewer may be nearby, verify whether sewer is technically "available" through the Bureau of Engineering.

If sewer is available and the property is within the Metropolitan District, connection to sewer is required. If the owner believes reason for exemption exists, the owner should justify the request in writing.

If soil/site conditions are limited and sewer and/or Metro District status is not conducive to connection, the Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. The Owner should contact the Bureau of Utilities for details.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. The contractor is to notify office of the emergency situation as soon as possible.