

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 08/22/07

P 527311

APPROVAL DATE: 9/14/07 *Logged Into Permit Manager*
Tax ID # 04-364856

A ~~REPAIR~~ *Upgrade*

PERMIT
ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

Fogles Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road PHONE NUMBER: 410-795-5670

SUBDIVISION: Sollers Property LOT NUMBER: 4

ADDRESS: 17280 Old Frederick Road PROPERTY OWNER: Rob Pence

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

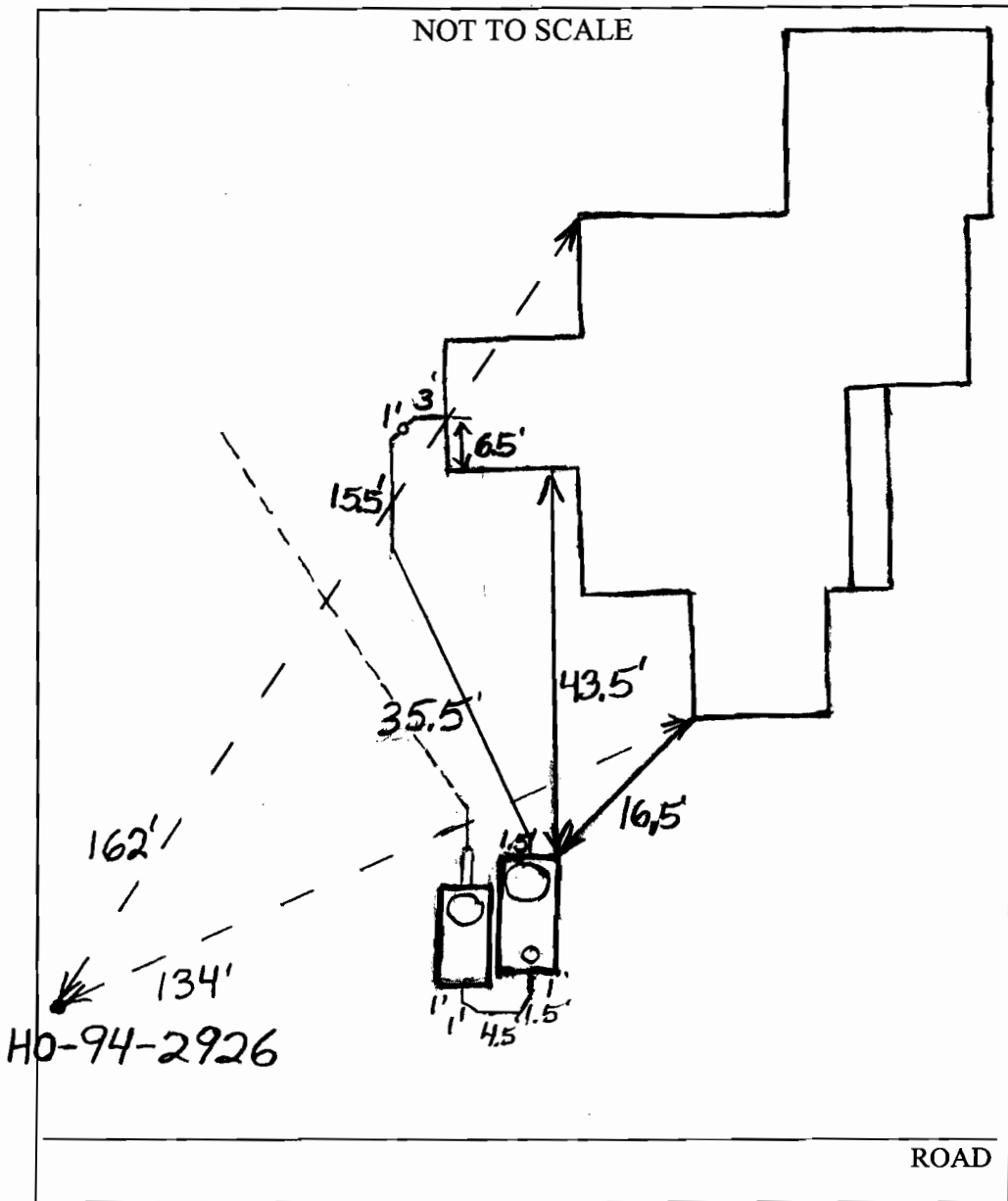
TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
PURPOSE:	In support of building permit septic and pump tanks are to be moved. Call for inspection when ground is opened so sanitarian can recommend repair.

PLANS APPROVED: _____ DATE: _____

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

NOT TO SCALE



HO-94-2926

TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
_____	_____	_____
NUMBER OF TRENCHES _____		
TOTAL LENGTH _____		
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL _____		
DISTRIBUTION BOX BAFFLE _____		
DISTRIBUTION BOX PORT _____		

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	1.5'-2.5'
BAFFLES	Front
BAFFLE FILTER	No
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	Yes
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	3'-3.5'
BAFFLES	Front
BAFFLE FILTER	No
MANHOLE LOC	Rear
6" PORT LOC	None
WATERTIGHT TEST	No

PRE-CONSTRUCTION 9/5/07 Homeowner wants to put a deck where existing tanks are and a pool and an additional
 INSTALLATION bedroom some time in the future. I install a new 2000 gallon tank and a 1500 gallon pump chamber in low area near air conditioning units. Keep tanks 20' from foundation and 100' from well. Existing tanks are 3'-3.5' below grade. New tanks must have less than 4' of cover. (BB) 9/12/07 Tanks set and house connection made. (BB) 9/14/07 Pump and alarm working. (BB)

FINAL INSPECTOR B. Baber DATE OF APPROVAL 9/14/2007

SEPTIC SYSTEM REPAIR / UPGRADE / EVALUATION REQUEST

Please fill out this form completely and check off the reason for the request:

Date requested: _____

Reason for Request

Failing System (includes surface discharge or inadequate treatment zone) _____

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

In support of a building permit. Type of building addition: _____

*System relocation for proposed addition for setback compliance

*Verification of adequate system capacity per COMAR 26.04.02.02D (4) _____

To replace collapsed septic tank or upgrade tank capacity _____

To replace collapsed drywell _____

Septic Contractor: Fogles Septic Clean Inc

Contractor's Address: 580 Obrecht Rd.

Sykesville

Contractor's Phone #: 410 795-5670

Property Address: 17280 Old Frederick Rd

Property (Subdivision) & Lot # 4 Stinn Sub.

Owner's Name: Rob Pence *June 02*

Is public sewer available/nearby: _____

Names of Any Previous Owners: _____

Year House Built: 2002

of Existing Bedrooms: 4

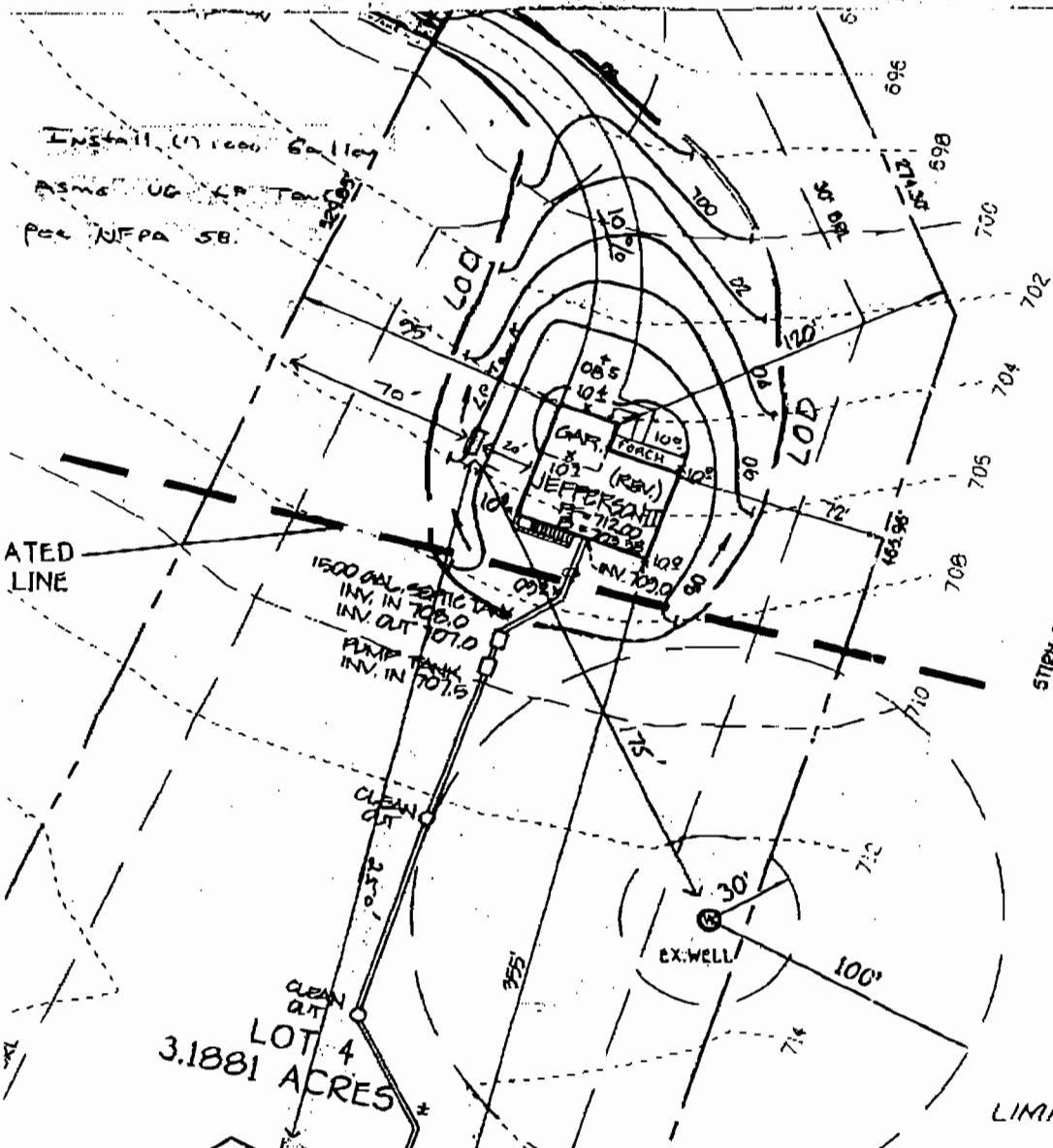
of Bedrooms after completion of addition: 4

Has this request been discussed previously with a Sanitarian, who? _____

If public sewer is close, further research will be performed to verify availability and possible hook up to public sewer.

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling of the repair /upgrade/evaluation. No inspection will be performed without fee collection at the office.

Environmental Sanitarian tentatively assigned _____

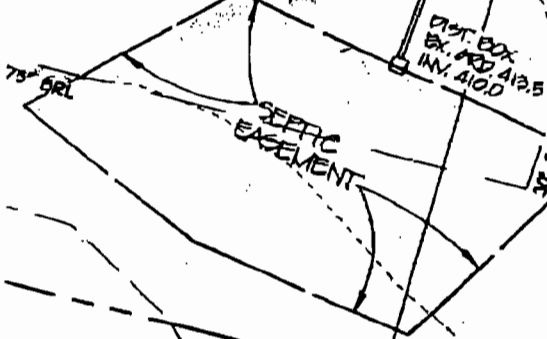


Install (1) rear Galley
 ASME UG LP Tank
 Per NEPA SB.

ATED LINE

STICK PROPERTY
 F-00-19

LIMITS OF DIS



REVIEWED FOR
CODE COMPLIANCE,
 DEPARTMENT OF INSPECTIONS,
 LICENSES AND PERMITS,
 HOWARD COUNTY

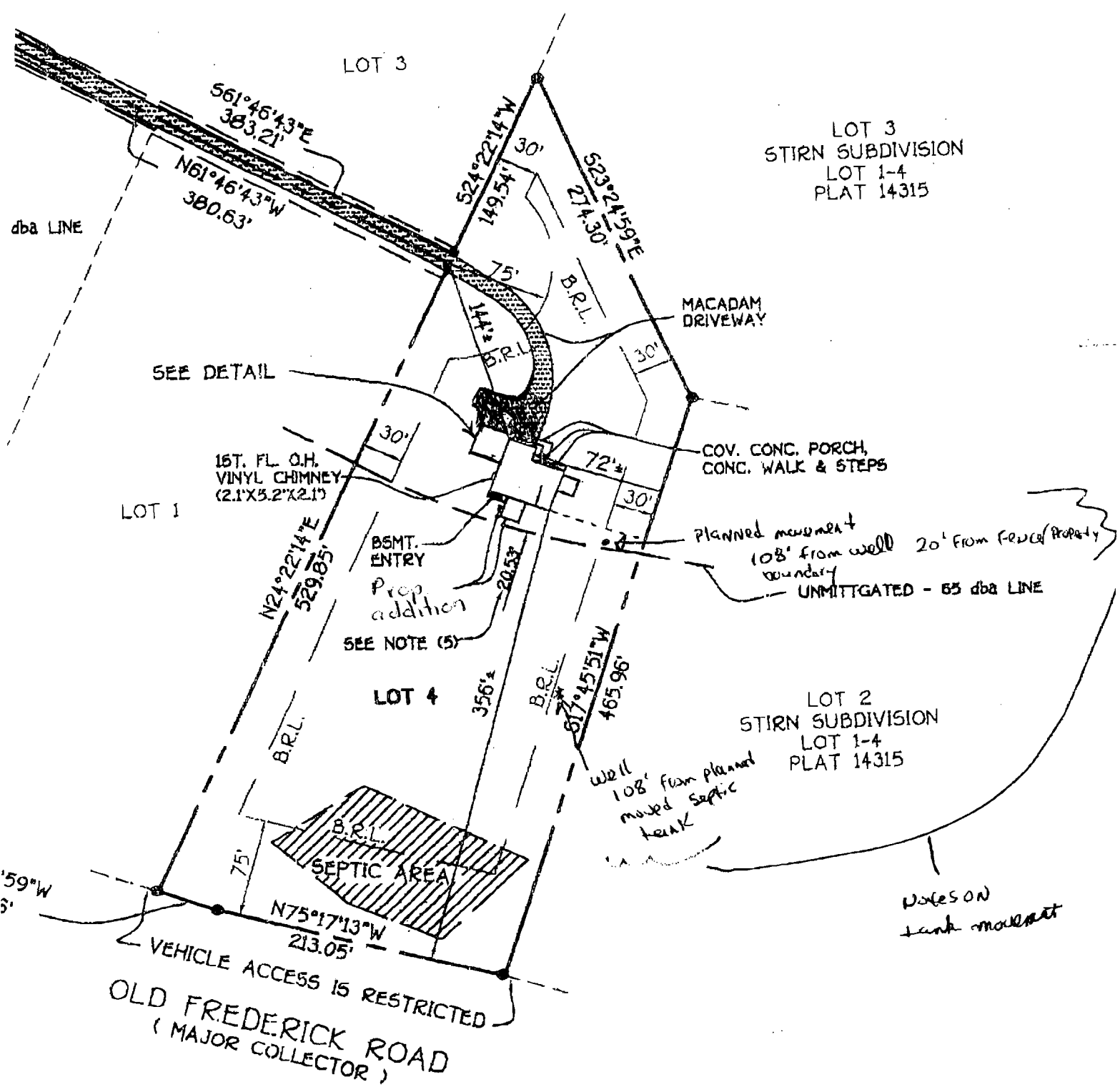
DATE: 2/15/02
 BY: [Signature]

AMENDMENT
 SUBJECT TO COMMENTS OF PLANS
 SUBJECT TO FIELD INSPECTION
 SUBJECT TO COMMENTS OF LETTERS

SITE DEVE
SOLLERS

PLAT
 TAX MAP
 FOURTH 1E
 HOWARD CO

FILE COPY



LOT 3
STIRN SUBDIVISION
LOT 1-4
PLAT 14315

LOT 2
STIRN SUBDIVISION
LOT 1-4
PLAT 14315

VEHICLE ACCESS IS RESTRICTED
OLD FREDERICK ROAD
(MAJOR COLLECTOR)

Planned movement
108' from well 20' from fence/property
boundary
UNMITTIGATED - 55 dba LINE

Notes on
tank movement