



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
 Facebook: www.facebook.com/hocohealth

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

RECEIPT DATE: 4/26/17 **ONSITE SEWAGE DISPOSAL SYSTEM** P 560620
 APPROVAL DATE: 2/28/18 (SC) **PERMIT:** **REPAIR** A _____
 PROPERTY ADDRESS: 14095 Barbara Circle
 SUBDIVISION: Villa Monticello LOT: 14 TAX ID: 04-329066
 CONTRACTOR: Fogles Septic Clean Inc. EMAIL: kim@foglesinc.com
 CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784 PHONE: 410-795-5670
 PROPERTY OWNER: Mark and Carol Turvin EMAIL: _____
 OWNER ADDRESS: 14095 Barbara Circle, Cooksville, MD 21723 PHONE: 410-428-1781

SEPTIC TANK SIZE (GALLONS): Existing PUMP CHAMBER CAPACITY (GALLONS): N/A. PUMP SIZE: —
 NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. _____ APPLICATION RATE: 1.2
 DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

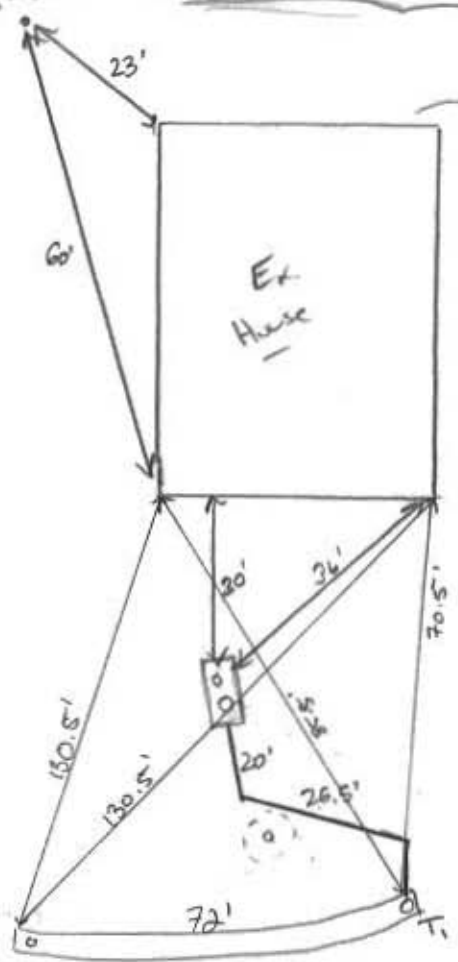
TRENCHES:	LINEAR FEET REQUIRED: <u>70'</u>	INLET DEPTH: <u>4'</u>
	TRENCH WIDTH: <u>3'</u>	MAXIMUM BOTTOM DEPTH: <u>9'</u>
	MINIMUM SPACE BETWEEN TRENCHES: _____	EFFECTIVE AREA BEGINNING DEPTH: <u>5'</u>
	LOCATION: TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	<u>Install 1x 70' trench below ex. Drywell. Drywell to be pumped and collapsed onsite.</u>	

ISSUED BY: K. Wolf ISSUE DATE: 5-22-17 EXPIRATION DATE: 5-22-18

- 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. BY ACCEPTING THIS PERMIT, THE OWNER AND/OR APPLICANT ACKNOWLEDGE THAT THE SPECIFICATIONS DETAILED IN THIS DESIGN ARE ONE POSSIBLE OPTION AND THAT THE HCHD WILL REVIEW OTHER PROPOSALS. YOU HAVE THE OPTION TO SEEK THE ADVICE OF A QUALIFIED DESIGN CONSULTANT OR PROFESSIONAL ENGINEER FOR FURTHER GUIDANCE.
- 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.

Ex Well No-73-0768 NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'	9'
NUMBER OF TRENCHES <u>1</u>		
TOTAL LENGTH <u>72'</u>		
ABSORPTION AREA <u>216 sqft + side</u>		
DISTRIBUTION BOX LEVEL <u>---</u>		
DISTRIBUTION BOX BAFFLE <u>---</u>		
DISTRIBUTION BOX PORT <u>---</u>		

SEPTIC TANK DATA	
SEPTIC TANK I LEVEL	
MANUFACTURER	<u>n/a</u>
CAPACITY	<u>1250?</u> GAL
SEAM LOC	<u>mid</u>
TANK LID DEPTH	<u>1.5'</u>
BAFFLES	<u>YES</u>
BAFFLE FILTER	<u>NO</u>
MANHOLE LOC	<u>center</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	_____
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____
SLOTTED	_____
DATE ON LID	_____

ROAD NAME _____

PRE-CONSTRUCTION:

5/21/17 OK to install 1x70' trench directly below ex. Drywell thru perc test hole A. Dist. box not required but c/o/obs pipe needed. Pump collapse ex. D.W. left for inspection (pnu)

INSTALLATION: 6/9/17 Fogle's just started digging trench. 3' wide, 9' bottom. Tank pumped drywell part way pumped + Fogle's waiting for pump truck to arrive will fill in drywell with dirt from trenches. New outlet baffle installed and cemented into tank. T installed at start of trench as a marker (pipe does not extend to bottom of trench). 4' inlet measured. (SC) 06/09/2017 On Site for completion of T. Dry Well to be collapsed + Abandoned. Contractors to send pictures. (SC) 2/28/18 Paperwork received from Fogle's for drywell pumping + abandonment. (SC)

FINAL INSPECTOR Sarah Collins DATE OF APPROVAL 2/28/18

Fogle's Septic Clean, Inc.
 580 Obrecht Road
 Sykesville, MD 21784

Invoice Date 6/12/2017 Invoice # 285277

INVOICE

PAID 06/13/2017
 PLEASE PAY THIS AMOUNT \$0.00
 Make checks payable to: Fogle's Septic Clean, Inc.

Bill To:
 MARK TURVIN
 14095 BARBARA CIRCLE
 COOKSVILLE, MD 21723

Service Address
 MARK TURVIN
 14095 BARBARA CIRCLE
 COOKSVILLE, MD 21723

Phone # 410-795-5670

Fogle's Septic Clean, Inc.
 580 Obrecht Road
 Sykesville, MD 21784

PLEASE DETACH AND RETURN TOP PORTION WITH PAYMENT

P.O. No.	Due Date	Rep	Ship Date
	6/12/2017	JBS	6/9/2017

Description	Qty	Rate	Amount
SEPTIC REPAIR HOWARD CO PERMIT #P560620 55 FT OF 4" SCH 40 AND FITTINGS 5 HOLE DIST BOX 70 FT OF TRENCH 9 FT DEEP WITH 5.5 FT OF STONE PUMPED, CRUSHED AND FILLED IN OLD DRYWELL		7,585.00	7,585.00

Thank you for your business. 1.5% interest will be charged monthly on all unpaid balances after 30 days. \$30 CHARGE FOR RETURNED CHECK. RECEIPT DATE STAMPS ARE STRICTLY ENFORCED FOR ALL DISCOUNTS. Billing Questions - call 410-795-5670	Total	\$7,585.00
	Payments/Credits	-\$7,585.00
	Customer Total Balance	\$0.00