

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: 7-5-17 **ONSITE SEWAGE DISPOSAL SYSTEM** P 501449

APPROVAL DATE: _____ **PERMIT:** **REPAIR** A _____

PROPERTY ADDRESS: 5185 Sheppard Lane

SUBDIVISION: _____ LOT: _____ TAX ID: 05-357276

CONTRACTOR: Freedom Septic EMAIL: _____

CONTRACTOR ADDRESS: 2809 Liberty Road, Sykesville, MD 21784 PHONE: 410-984-6863

PROPERTY OWNER: Virajdev Naik and Priti Raman Desai EMAIL: _____

OWNER ADDRESS: 5185 Sheppard Lane, Ellicott City, MD 21042 PHONE: 301-213-6529

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: _____	INLET DEPTH: _____
	TRENCH WIDTH: _____	MAXIMUM BOTTOM DEPTH: _____
	MINIMUM SPACE BETWEEN TRENCHES: _____	EFFECTIVE AREA BEGINNING DEPTH: _____
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:		

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**
 ELECTRICAL PERMIT ISSUED E _____
- 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.**

NOT TO SCALE

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 _____

MANUFACTURER _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SLOTTED _____

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 _____

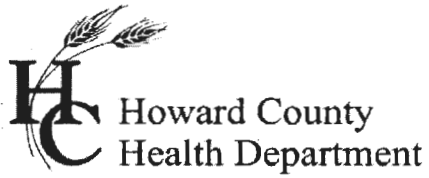
DATE ON LID _____

ROAD NAME

PRE-CONSTRUCTION:

INSTALLATION:

FINAL INSPECTOR _____ DATE OF APPROVAL _____



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DISTRIBUTION BOX BAFFLE _____

DISTRIBUTION BOX PORT _____

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____

MANUFACTURER _____

CAPACITY _____ GAL

SEAM LOC _____

TANK LID DEPTH _____

BAFFLES _____

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SLOTTED _____

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 _____

ROAD NAME

PRE-CONSTRUCTION:

INSTALLATION:

FINAL INSPECTOR _____, DATE OF APPROVAL _____

Howard County Health Department

Bureau of Environmental Health, Ellicott City, Maryland 410-313-2640

SEWAGE DISPOSAL PERMIT NO. A-36449 P-56449

PERMITTEE Freedom Septic

LOCATION 5185 Sheppard Lane

Viraydev Naik and Priti Roman Desai

Do Not Cover Work Until Health Department Approval Appears On This Card

POST THIS CARD WHERE IT CAN BE SEEN FROM ROAD

STOP ALL CONSTRUCTION ON SEWAGE DISPOSAL SYSTEM AND CONTACT HEALTH DEPARTMENT BEFORE CONTINUING

WORK IS SATISFACTORY, CONTINUE

Inspector Date

Inspector Date

FINAL INSPECTION MADE, COVER ALL WORK

Inspector Date

Wolf, Kevin

From: Wolf, Kevin
Sent: Wednesday, July 19, 2017 10:33 AM
To: 'prnaik@aol.com'; 'priti397@gmail.com'
Cc: Wolf, Kevin
Subject: webiste info FAQ's www.howardcountymd.gov

Raj,

Please see the attached link which is from our website above:

<https://www.howardcountymd.gov/LinkClick.aspx?fileticket=h4iWC-BKkME%3d&portalid=0>

Please refer to the attached link for our county code in particular see section 3.805 percolation certification requirements.

<https://www.howardcountymd.gov/LinkClick.aspx?fileticket=50y6w4ho5sM%3d&portalid=0>

Again, like I explained to you wife, it may be or may have been easier if you came into our office sat down to discuss the requirements indicated above. But we will need a site plan and floor plans indicating your proposal.

Kevin

From: Wolf, Kevin
Sent: Wednesday, June 14, 2017 10:28 AM
To: 'prnaik@aol.com'
Subject: RE: Septic contractors list

From: prnaik@aol.com [<mailto:prnaik@aol.com>]
Sent: Tuesday, June 13, 2017 11:57 AM
To: Wolf, Kevin; priti397@gmail.com
Subject: Re: Septic contractors list

Kevin.
Thank you.

But the attached is a septic tank construction policy for Frederick County.

I was looking for installer and perk test contractors list in Howard County.

Raj

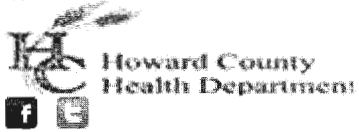
-----Original Message-----

From: Wolf, Kevin <KWolf@howardcountymd.gov>
To: prnaik <prnaik@aol.com>
Sent: Wed, Jun 7, 2017 4:04 pm
Subject: Septic contractors list

See attached...

Thanks,

Kevin M. Wolf, LEHS, REHS/RS
Groundwater Mgmt. Sec. Supervisor
Well & Septic Program
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, MD 21045
(o) 410-313-2645
(f) 410-313-2648



kwolf@howardcountymd.gov

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Oswald, Hank

From: Oswald, Hank
Sent: Monday, April 24, 2017 9:19 AM
To: 'mikadadesigngroup@yahoo.com'
Subject: 5185 Sheppard Lane_Septic Record & Perc Test Info
Attachments: A05778_P06055.pdf; Engineer & Surveyor List Rev 6-28-02.pdf; Septic Contractors.pdf; Building Permit Application Process.pdf; Percolation Test Application.pdf; Percolation & Plan Requirements For Developed Lots.pdf

Hi Ike:

Thank you for your call about adding bedrooms to 5185 Sheppard Lane. According to our database, this is the record for this address (See attachment). The record doesn't show the septic tank or drywell on the "As Built" drawing but it states that it's a 750 gallon tank and the drywell is located 55 – 75 feet behind the house. The current minimum tank requirement for a 3 bedroom house is 1000 gallons (Add 250 gallons for each additional bedroom). Also, there is no information about the well. If the well is a hand dug well, it will need to be abandoned and replaced prior to building permit approval.

Also attached, you find a list of Engineers & Septic Contractors, the Perc Test and Plan requirements for developed lots along with the building permit application process.

Should you have any questions about this information, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
410.313.2648 (Fax)