

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: 11/12/19 ONSITE SEWAGE DISPOSAL SYSTEM P 566453

APPROVAL DATE: PERMIT: REPAIR A Repair

PROPERTY ADDRESS: 11345 Old Hopkins Road

SUBDIVISION: Flamewood LOT: 9 TAX ID: 05-377293

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

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

PROPERTY OWNER: Greg Husted EMAIL:

OWNER ADDRESS: 11345 Old Hopkins Road PHONE: 443-506-7208

SEPTIC TANK SIZE: Existing PUMP TANK CAPACITY: n/a PUMP SIZE: n/a

DISTRIBUTION SYSTEM: [X] GRAVITY [ ] PRESSURE DOSED BEDROOMS: 3 APPLICATION RATE: 1.2

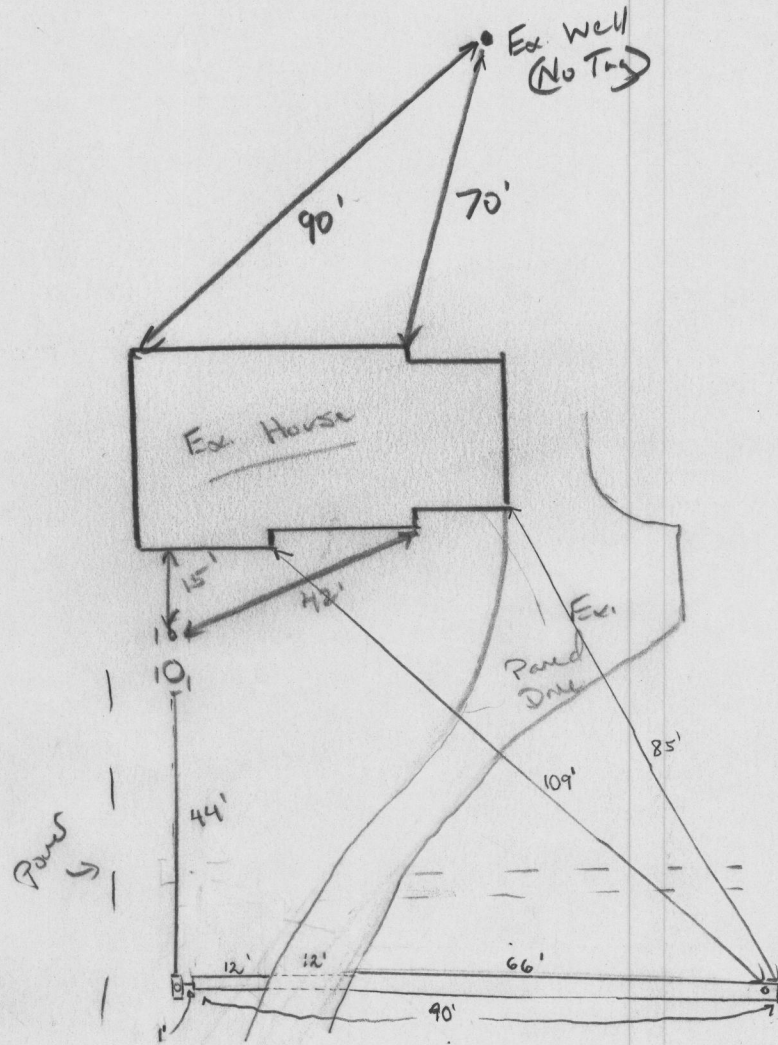
Table with 2 columns: Field Name (TRENCHES, LOCATION, NOTES) and Field Value (Linear feet required: 75, Inlet depth: 4-4.5, etc.)

ISSUED BY: K. Wolf ISSUE DATE: 11/22/19 EXPIRATION DATE: 11/22/20

- 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: 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: 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



ROAD NAME

**TRENCH/DRAINFIELD DATA**

WIDTH	INLET	BOTTOM
2'	4'	9'
NUMBER OF TRENCHES		1
TOTAL LENGTH		90'
ABSORPTION AREA		180 sq ft + sidewalk
DISTRIBUTION BOX LEVEL		-
DISTRIBUTION BOX BAFFLE		yes
DISTRIBUTION BOX PORT		

**SEPTIC TANK DATA**

SEPTIC TANK 1 LEVEL	N/A
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	

**PRE-CONSTRUCTION:**

11/22/19 Elevation's shot in field @ time of perc testing. Install 1x75' trench above perc A extending across ex drive way. Inlet depth may be 4.5'. Call for inspection (Kaw)

INSTALLATION: 12/5/19 Connected line into tank, set d-box and began constructing trench. Were able to get inlet depth to 4 feet. 12/6/19 Finished constructing trench. (ST)

FINAL INSPECTOR

*Jason Thomas*

DATE OF APPROVAL

12/6/19



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 Twitter: HowardCoHealthDep

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: \_\_\_\_\_
- No

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

- Yes Explain observations: Failing trenches
- No

Was a visual inspection of the sewage line conducted?

- Yes Augur  
Blockage leading to the tank
- Yes Explain: \_\_\_\_\_
- No

Blockage leading to the field

- Yes Explain: \_\_\_\_\_
- No

Existing system design

- Drywell
- Trench
- Mound
- Unknown
- Other: \_\_\_\_\_

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: Foglo's Septic Clean Contractor's Phone: 410-795-5670  
 Contractor's Address: 580 Obrecht Rd Sykesville 21784

Property Address: 11345 Old Hopskins Rd County file: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot \_\_\_\_\_ Year Built: \_\_\_\_\_

Owner's Name: Greg Hustead Owner's Phone: 743-506-7298

Name of previous owners: \_\_\_\_\_ Existing bedrooms: 3  
 Proposed bedrooms: \_\_\_\_\_

Has this request been previously discussed with a Sanitarian? (Name): \_\_\_\_\_  
 Public Sewer available/nearby: \_\_\_\_\_

\*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 \_\_\_\_\_

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.