

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

RECEIPT DATE: 3/16/2021 **ONSITE SEWAGE DISPOSAL SYSTEM** P 568796

APPROVAL DATE: 4/6/2021 **PERMIT: REPAIR** A Repair

PROPERTY ADDRESS: 15501 Bushy Tail Run

SUBDIVISION: _____ LOT: 1 TAX ID: _____

CONTRACTOR: Freedom Septic EMAIL: susan@freedomseptic.com

CONTRACTOR ADDRESS: 2809 Liberty Rd, Sykesville, MD 21784 PHONE: 410-795-2947

PROPERTY OWNER: Timothy and Lisa Smith EMAIL: _____

OWNER ADDRESS: Same PHONE: n/a

SEPTIC TANK SIZE: Existing PUMP TANK CAPACITY: Existing PUMP SIZE: _____

DISTRIBUTION SYSTEM: GRAVITY PRESSURE DOSED BEDROOMS: 5 APPLICATION RATE: 0.8

TRENCHES:	LINEAR FEET REQUIRED: <u>216</u>	INLET DEPTH: <u>4'</u>
	TRENCH WIDTH: <u>2'</u>	MAXIMUM BOTTOM DEPTH: <u>11</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>9</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>4'</u>

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

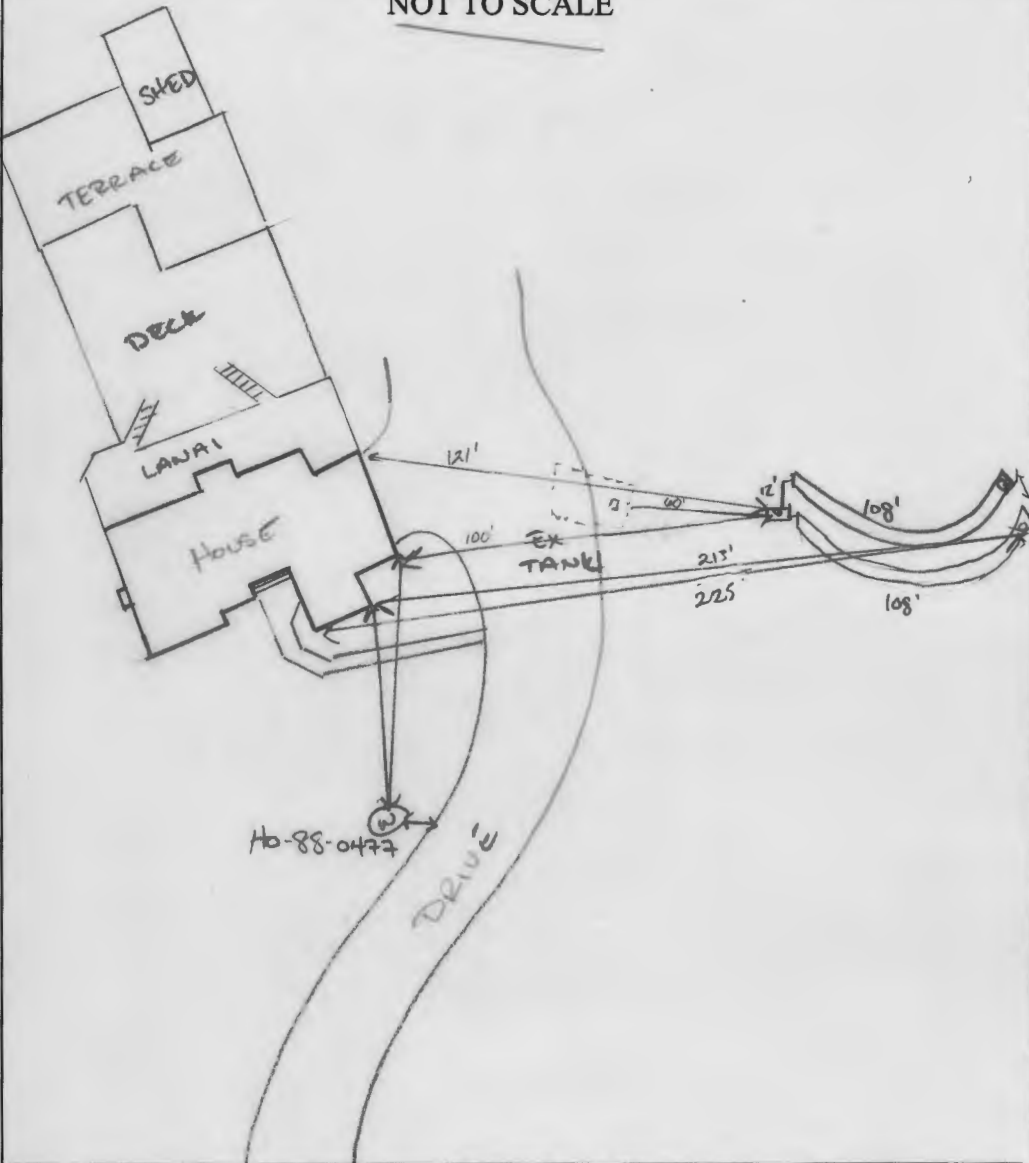
NOTES: Install 2x108ft trenches running on contour above perc test B. Both trenches staked out in field. Existing system to be abandoned.

ISSUED BY: K. Wolf ISSUE DATE: 3/2/2021 EXPIRATION DATE: 3/2/2022

- 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: 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
BUSHY TAIL ROAD

TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
2'	4'	11'

NUMBER OF TRENCHES 2
 TOTAL LENGTH 216'
 ABSORPTION AREA 648 sq ft + sidewalk
 DISTRIBUTION BOX LEVEL yes
 DISTRIBUTION BOX BAFFLE yes
 DISTRIBUTION BOX PORT yes

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____
 MANUFACTURER _____
 CAPACITY _____ GAL
 SEAM LOC _____
 TANK LID DEPTH _____
 BAFFLES NEW OUTLET
 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 _____

EXISTING

PRE-CONSTRUCTION:

INSTALLATION: 04/05/21 REPLACED OUTLET BAFFLE; INSTALLED NEW BACKLINE TO NEW D BOX 4/6/21 D-box leveled and second 108' trench completed. (SP)

FINAL INSPECTOR

Susan Thomas

DATE OF APPROVAL

4/6/21



HOWARD COUNTY HEALTH DEPARTMENT

68796

DATE 3/16/21

Received From

Freedom Septic PHONE # 410-995-2947

For

Septic Repair
15501 Bushy Field
Reur

CASH

CHECK

NO

4427

One hundred sixty five Dollars

\$ 165.00

Received By

[Signature]