

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: 2/21/20 **ONSITE SEWAGE DISPOSAL SYSTEM** P 567319

APPROVAL DATE: 03/05/2020 **PERMIT:** Repair A _____

PROPERTY ADDRESS: 14765 Carriage Mill Road

SUBDIVISION: Carriage Mill Farms LOT: 53 TAX ID: 04-362128

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

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

PROPERTY OWNER: Danielle Carney EMAIL: _____

OWNER ADDRESS: 14765 Carriage Mill Road, Woodbine, MD 21797 PHONE: 410-~~200-0000~~ 49-5835

SEPTIC TANK SIZE (GALLONS): _____ PUMP CHAMBER CAPACITY (GALLONS): — PUMP SIZE: —

NUMBER OF BEDROOMS: 4 BR HOUSE SQ. FT. — APPLICATION RATE: 0.6

DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>200'</u>	INLET DEPTH: <u>2.5'</u>
	TRENCH WIDTH: <u>2'</u>	MAXIMUM BOTTOM DEPTH: <u>8'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>10'</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>4.5'</u>
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	INSTALL 2x 100' TRENCH BULL RUN VALVE DISTAL OBS PORT @ EK TRENCH ENDS	

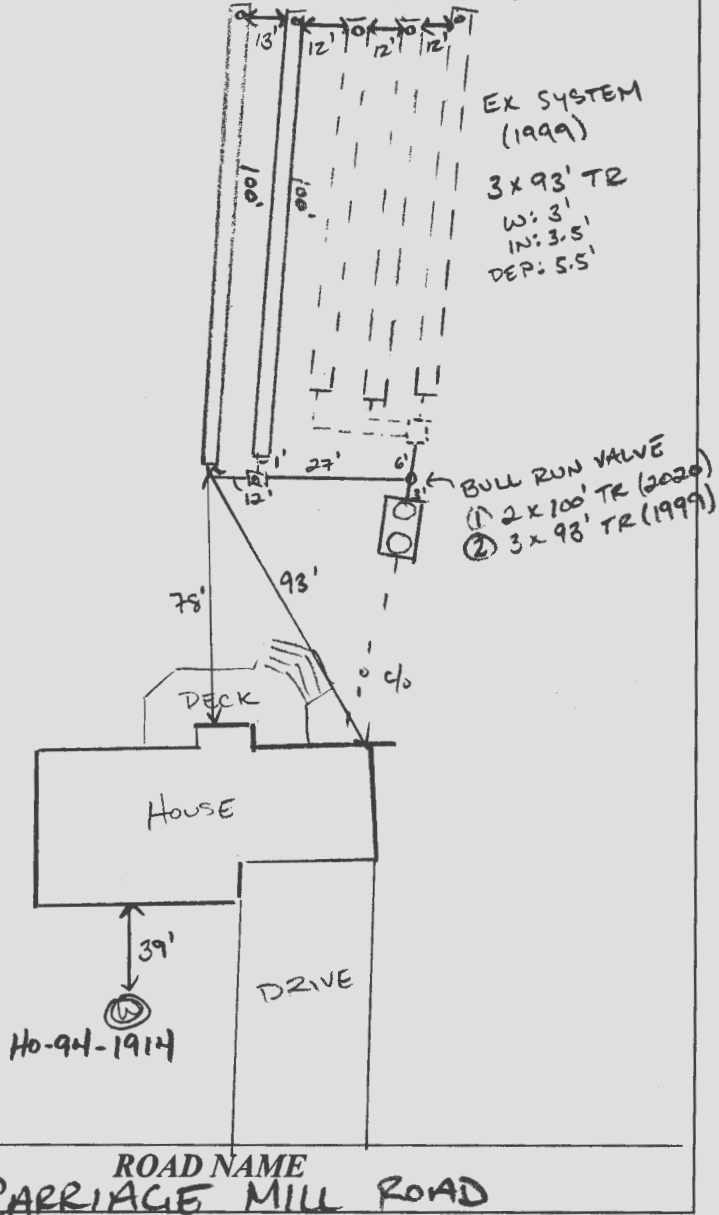
ISSUED BY: JOSEPH CABANUG ISSUE DATE: 03/02/2020 EXPIRATION DATE: 03/02/2021

- 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.**

279489279189

* NOT TO SCALE *



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
2'	2.5'	8'
NUMBER OF TRENCHES		2
TOTAL LENGTH		200'
ABSORPTION AREA		400 SF + SIDE WALL
DISTRIBUTION BOX LEVEL		SPEED
DISTRIBUTION BOX BAFFLE		YES
DISTRIBUTION BOX PORT		YES

PRE-CONSTRUCTION:

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL	SEPTIC TANK 2 LEVEL
MANUFACTURER	MANUFACTURER
CAPACITY 1500 GAL	CAPACITY _____ GAL
SEAM LOC _____	SEAM LOC _____
TANK LID DEPTH _____	TANK LID DEPTH _____
BAFFLES _____	BAFFLES _____
BAFFLE FILTER _____	BAFFLE FILTER _____
MANHOLE LOC (NEW)	MANHOLE LOC _____
6" PORT LOC _____	6" PORT LOC _____
WATERTIGHT TEST _____	WATERTIGHT TEST _____
SLOTTED _____	SLOTTED _____
DATE ON LID _____	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 (1999)

03/02/2020 LOCATE WELL. UNCOVER EX D BOX/TRENCHES. STONE CLEAN. FIXED
 CLEAN OUT IN SEWER LINE. OWNER REPORTS RAIN PONDING @ THAT SPOT.
 POSSIBLE HYDRAULIC OVERLOAD. INSTALL 2x 100' TR 2' WIDE. INSTALL DIST. OBS
 PORT IN EX TR + NEW TR. INSTALL BULL RUN VALVE FOR FUTURE USE.

INSTALLATION:

03/04/2020 TO RESCHEDULE (+). 05/05/2020 2x 100' TR INSTALLED. D BOX
 INSTALLED, BAFFLE CEMENTED IN. BULL RUN VALVE INSTALLED;
 2020 SYSTEM ON "1", 1999 SYSTEM ON "2." (+) (PM) TRENCHES
 COMPLETE. DISTAL OBS INSTALLED ON NEW AND EXISTING TRENCHES.
 BULL RUN VALVE SET TO "1" FOR USE OF NEW SYSTEM. (+)
 (PM) CALLED CONTRACTOR TO CONFIRM D BOX WAS LEVELED
 AFTER BAFFLE CURED (+)

FINAL INSPECTOR

DATE OF APPROVAL

03/05/2020



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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

Existing system design

- Drywell
- Trench
- Mound
- Unknown
- Other: _____

Is discharge surfacing on the ground?

- Yes
- No

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: dig up dist box
- No

Was a visual inspection of the sewage line conducted?

- Yes
 - Blockage leading to the tank
 - Yes Explain: _____
 - No
 - Blockage leading to the field
 - Yes Explain: _____
 - 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: Eagle's Septic Clean Contractor's Phone: 410-795-5670
Contractor's Address: 550 Chocoma Rd Sykesville 21784
Property Address: 14765 Carnage Mill DR County file: _____
Subdivision: Carnage Mill Farms Lot: 53 Year Built: 1999
Owner's Name: Danielle Carney Owner's Phone: 410-489-5855
Name of previous owners: _____ Existing bedrooms: 4
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.