

Howard County Health Department

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

Bureau of Environmental Health
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www.hchealth.org
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RECEIPT DATE: 6/9/21 ONSITE SEWAGE DISPOSAL SYSTEM P 569554

APPROVAL DATE: 07/01/2021 PERMIT: REPAIR A

PROPERTY ADDRESS: 10869 Braeburn Road

SUBDIVISION: LOT: TAX ID:

CONTRACTOR: Fogles Septic Clean Inc EMAIL: kim@foglesinc.com

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

PROPERTY OWNER: Chris Nelson EMAIL:

OWNER ADDRESS: 10869 Braeburn Road, Columbia, MD 21044 PHONE: 703-371-4501

SEPTIC TANK SIZE (GALLONS): Ex. PUMP CHAMBER CAPACITY (GALLONS): PUMP SIZE:

NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. APPLICATION RATE: 1.2

DISTRIBUTION SYSTEM: GRAVITY FED [checked] LOW PRESSURE DOSED []

Table with trench specifications: LINEAR FEET REQUIRED: 103, TRENCH WIDTH: 3', MINIMUM SPACE BETWEEN TRENCHES: 9', INLET DEPTH: 3', MAXIMUM BOTTOM DEPTH: 8', EFFECTIVE AREA BEGINNING DEPTH: 6'

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

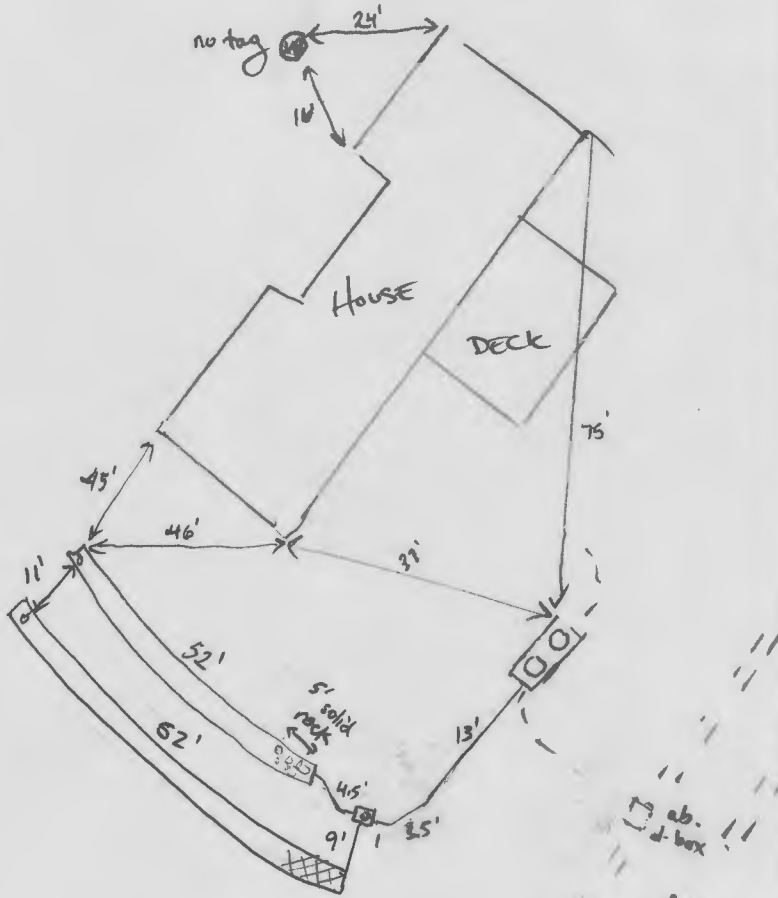
NOTES: Install 2 x 52' trenches on contour above perc test A. Trenches flagged out in field. Ex. system to be abandoned

ISSUED BY: K. Wolf ISSUE DATE: 6/10/21 EXPIRATION DATE: 6/10/2022

- 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
[checked] 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.

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	3'	8'
NUMBER OF TRENCHES	2	
TOTAL LENGTH	104 F	
ABSORPTION AREA	312 SF + 2' S. DE	
DISTRIBUTION BOX LEVEL	SPEED WALL	
DISTRIBUTION BOX BAFFLE	YES	
DISTRIBUTION BOX PORT	YES	

Existing SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	
MANUFACTURER	unknown
CAPACITY	~1000 GAL
SEAM LOC	mid span
TANK LID DEPTH	1.5
BAFFLES	inlet + new outlet
BAFFLE FILTER	
MANHOLE LOC	inlet + outlet (new)
6" PORT LOC	
WATERTIGHT TEST	
SLOTTED	no
DATE ON LID	N/A
PUMP/SEPTIC TANK LEVEL	
MANUFACTURER	
CAPACITY	
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	
SLOTTED	
DATE ON LID	

ROAD NAME

PRE-CONSTRUCTION:

6/21/21 Set new Dbox. Run 2 x 50' trenches on water above per A. Call for inspection (sent)

INSTALLATION:

6/30/21 First 5' of first trench had solid rock about 5' down, then it fell off. First trench complete and d-box set. (SI) 07/01/2021 LOWER TRENCH COMPLETE. D Box Level w/ SPEED LEVEL. Backfill.

FINAL INSPECTOR

[Handwritten Signature]

DATE OF APPROVAL

07/01/2021



HOWARD COUNTY HEALTH DEPARTMENT

69554

DATE 6/19/11

Received From

Togles Septic Clean PHONE # 410 795-5070

For

Septic Repair / 10869 Braeburn Rd.

CASH

CHECK

NO 12233

One hundred sixty five Dollars

\$ 165.00

Received By

Stamp