

Bureau of Environmental Health
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Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 2/28/22 **ONSITE SEWAGE DISPOSAL SYSTEM** P 570973
 APPROVAL DATE: 03/17/2022 **PERMIT:** **REPAIR** A 570973
 PROPERTY ADDRESS: 14787 Addison Way
 SUBDIVISION: WOODBINE (1003) LOT: - TAX ID: 04-317203
 CONTRACTOR: Fogles Septic Clean Inc EMAIL: kim@foglesinc.com
 CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784 PHONE: 410-795-5670
 PROPERTY OWNER: Kenneth and Julia Polk EMAIL: -
 OWNER ADDRESS: 14787 Addison Way, Woodbine, MD 21797 PHONE: ✓

SEPTIC TANK SIZE (GALLONS): EXISTING PUMP CHAMBER CAPACITY (GALLONS): - PUMP SIZE: -
 NUMBER OF BEDROOMS: 4 HOUSE SQ. FT. - APPLICATION RATE: 0.8
 DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>90'</u>	INLET DEPTH: <u>4'</u>
	TRENCH WIDTH: <u>3'</u>	MAXIMUM BOTTOM DEPTH: <u>10'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>8' or</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>5'</u>

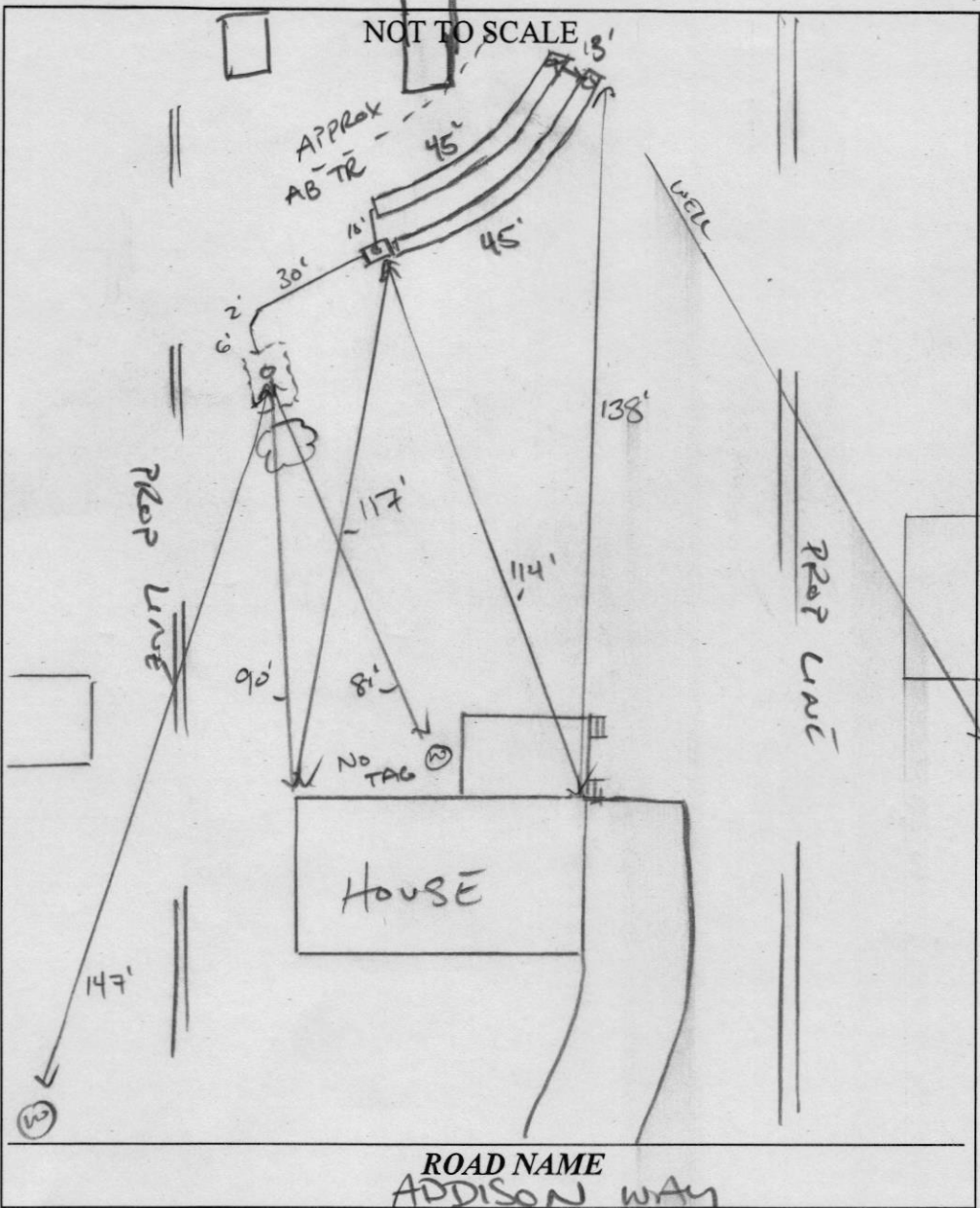
LOCATION: **TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.**

NOTES: CONSTRICTED AREA BTWN EX TR, 100' WELL ARC, EX SHEDS AND TREES. OK TO REDUCE MIN DIST FOR REPAIR PURPOSES. NEXT REPAIR MOVE SHED + CUT TREES. INSTALL 2x 45' TRS; TANK RISER

ISSUED BY: CASAHUG 001997 ISSUE DATE: 03/11/2022 EXPIRATION DATE: 03/11/2023

- 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 WARRANT 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.**



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	4'	10'
NUMBER OF TRENCHES		2
TOTAL LENGTH		90'
ABSORPTION AREA		270 SF + 5' SIDE WALL
DISTRIBUTION BOX LEVEL		SPEED
DISTRIBUTION BOX BAFFLE		CONC
DISTRIBUTION BOX PORT		YES

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	_____
MANUFACTURER	_____
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	~1.5'
BAFFLES	OUTLET (NEW)
BAFFLE FILTER	_____
MANHOLE LOC	OUTLET (NEW)
6" PORT LOC	INLET (NEW)
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: 03/11/2022 LAID OUT 2x 45' TRS ON CONTOUR Φ

INSTALLATION: 03/16/2022 INSTALLED EFFLUENT LINE, D BOX - LEVELLED W/ SPEED LEVELS, AND 2x 45' TRS Φ

FINAL INSPECTOR [Signature] DATE OF APPROVAL 03/17/2022

P570973

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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 observation: Probed wet
 No

Existing system design

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

Was a visual inspection of the sewage line conducted?

Yes
 No

Blockage Leading to the field

Yes Explain _____
 No

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 Regulations.

Septic Contractor: Fogles Septic Contractor's Phone: 410-795-5670

Contractor's Address: 580 Obrecht Rd - Sykesville, Md - 21784

Property Address: 14787 Addison Way County File: 317203

Subdivision: _____ Lot: _____ Year Built: 1985

Owner's Name: Kenneth/Julia Pdk Existing bedrooms: 4

Name of previous owners: Rosetta Harrison Existing bedrooms: 4

Proposed bedrooms: _____

*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 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 exists.

The contractor is to notify the office of the emergency as soon as possible.

2/2020