



HOWARD COUNTY HEALTH DEPARTMENT

70240

DATE 11/18/21

Received From

Ken Griffin Pumping Services, Inc. PHONE # 992-5875

For

sewer House Connection
11762 Chapel Estates Dr.

- CASH
- CHECK

NO.

319177

One hundred sixty five Dollars

\$

165.00

Received By

AKemp



Bureau of Environmental Health
 8930 Stanford Blvd | Columbia, MD 21045
 410.313.2640 - Voice/Relay
 410.313.2648 - Fax
 1.866.313.6300 - Toll Free

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 observation: _____
 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:

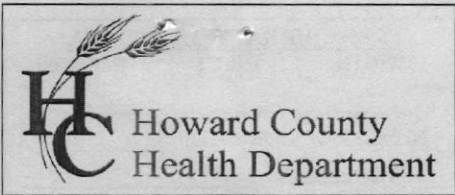
ADD SINK to Septic Drain

*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: *Ken Griffin Plumbing Services* Contractor's Phone: *410-992-5875*
 Contractor's Address: *14570 Inadelphin Mill Rd, Dayton, MD 21036*
 Property Address: *11702 Maple Estates Dr* County File: _____
 Subdivision: *3108* Lot: *38* Year Built: *2009*
 Owner's Name: *Tara Easley* Existing bedrooms: *5*
 Name of previous owners: *ERIC Mkolasko* Existing bedrooms: _____
 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



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: 11/8/21 **ONSITE SEWAGE DISPOSAL SYSTEM** P 570240
 INSTALLATION
 APPROVAL DATE: _____ **PERMIT** A _____
SEWER HOUSE CONNECTION

PROPERTY ADDRESS: 11762 Chapel Estates Drive
 SUBDIVISION: Chapel Woods III LOT: 38 TAX ID: _____
 CONTRACTOR: KENN GRIFFIN PLUMBING SERVICES EMAIL: _____
 CONTRACTOR ADDRESS: 14570 TRIADELPHIA MILL ROAD PHONE: 410-992-5875
 PROPERTY OWNER: TARA EASLEY EMAIL: _____
 OWNER ADDRESS: 11762 CHAPEL ESTATES DRIVE, CLARKSVILLE, MD 21029 PHONE: _____

NUMBER OF BEDROOMS: _____ CONNECTED TO PUBLIC WATER: YES NO

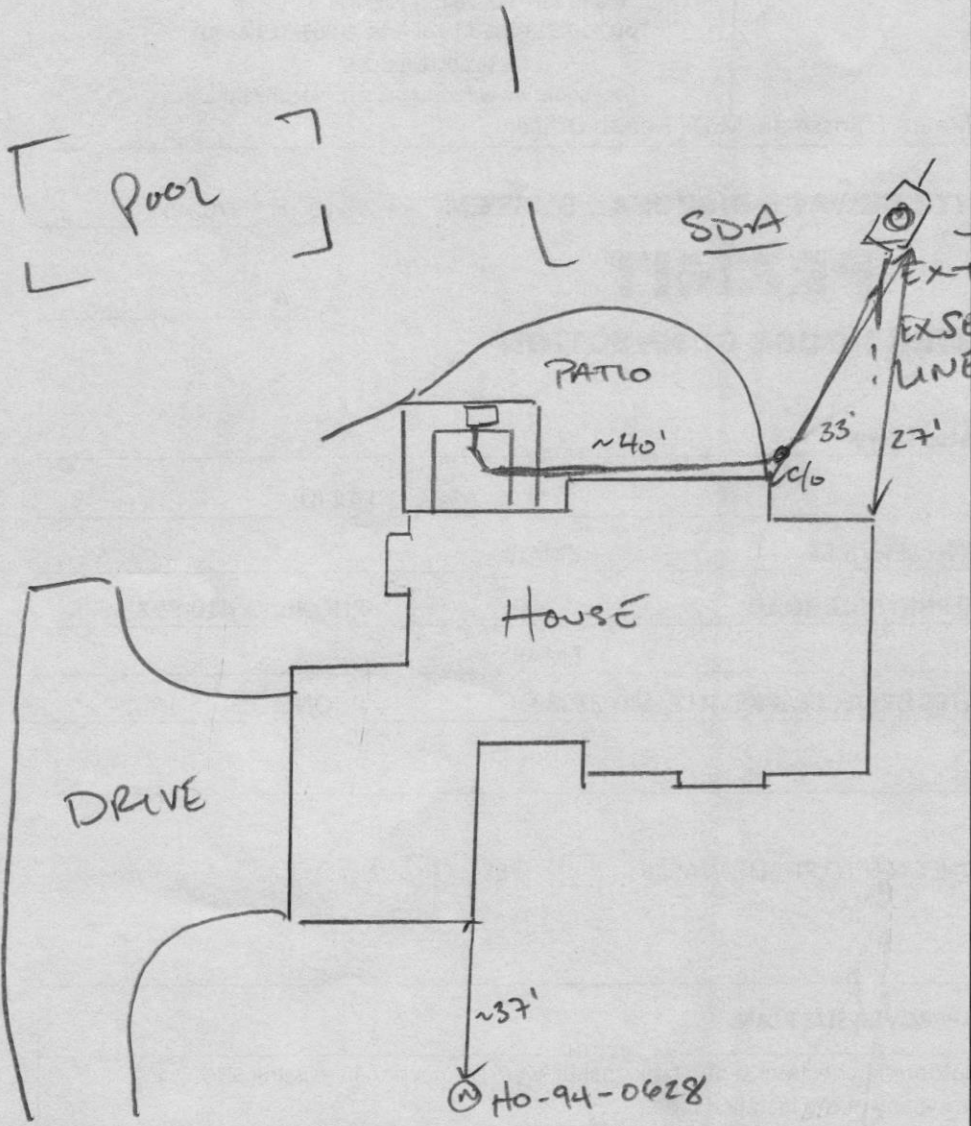
LOCATION:	INSTALL 4" SEWER LINE PER APPROVED SITE PLAN.
NOTES:	Drainpipe installed between outdoor kitchen and septic tank. Install 'wye' connection in existing SHC. Call for inspection before covering any of the installed pipe.

ISSUED BY: R Bricker ISSUE DATE: 11/8/2021 EXPIRATION DATE: 11/8/2022

- NOTE: HOWARD COUNTY BUREAU OF UTILITIES APPROVAL OF GRINDER PUMP INSTALLATION IS REQUIRED PRIOR TO SEPTIC PERMIT APPROVAL
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

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 FOR INSPECTION OF SEPTIC SYSTEM.

NOT TO SCALE



ROAD NAME
CHAPEL ESTATES DRIVE

TRENCH/DRAINFIELD DATA

WIDTH _____ INLET _____ BOTTOM _____

NUMBER OF TRENCHES _____

TOTAL LENGTH _____

ABSORPTION AREA _____

DISTRIBUTION BOX LEVEL _____

DISTRIBUTION BOX BAFFLE _____

DISTRIBUTION BOX PORT _____

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____

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:

INSTALLATION: 11/10/2021 INSTALLED 4" COEX CELL CORE SCH 40 PVC, SOLVENT WELD. C/O BY FENCE. TIE IN TO EXISTING LINE OK.

FINAL INSPECTOR

DATE OF APPROVAL

11/10/2021