



**Howard County
Health Department**

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: 8-19-21 **ONSITE SEWAGE DISPOSAL SYSTEM**

P 570112

APPROVAL DATE: 8/19/22 **PERMIT: CONSTRUCTION**

A _____

PROPERTY ADDRESS: 13429 Highland Road

SUBDIVISION: _____ LOT: _____ TAX ID: _____

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

CONTRACTOR ADDRESS: 380 Obrecht Rd, Sykesville, MD 21784 PHONE: 410-395-5670

PROPERTY OWNER: Cairn Custom Homes LLC EMAIL: _____

OWNER ADDRESS: 10548 Forman Road, Laurel, MD 20723 PHONE: _____

SEPTIC TANK SIZE (GALLONS): 2000 TANK MANUFACTURER: _____

PUMP MODEL: Zoeller 151 PUMP SIZE: 1/3 hp PUMP TANK CAPACITY: 2000

DISTRIBUTION SYSTEM: GRAVITY PRESSURE DOSED BEDROOMS: 6 APPLICATION RATE: 0.8

TRENCHES:	LINEAR FEET REQUIRED: <u>168.75</u>	INLET DEPTH: <u>4</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>8</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>11</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>4.5</u>
LOCATION:	PER APPROVED SITE PLAN. SEWAGE DISPOSAL AREA AND TANK LOCATIONS MUST BE STAKED BY LICENSED SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.	
NOTES:		

ISSUED BY: Dana Bernard ISSUE DATE: 8/19/21 EXPIRATION DATE: 8/19/22

- 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 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 NA
- 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

* see attached
diagram

ROAD NAME

TRENCH/DRAINFIELD DATA

WIDTH INLET BOTTOM
3' 4' 8'

NUMBER OF TRENCHES _____

TOTAL LENGTH _____

ABSORPTION AREA _____

DISTRIBUTION BOX LEVEL pump

DISTRIBUTION BOX BAFFLE cement

DISTRIBUTION BOX PORT PVC

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL yes

MANUFACTURER Babylon

CAPACITY 2000 GAL

SEAM LOC top

TANK LID DEPTH 3'

BAFFLES inlet + outlet

BAFFLE FILTER -

MANHOLE LOC inlet + outlet

6" PORT LOC -

WATERTIGHT TEST -

SLOTTED yes

DATE ON LID 3-1-22

PUMP/SEPTIC TANK LEVEL yes

MANUFACTURER Babylon

CAPACITY 2000 GAL

SEAM LOC top

TANK LID DEPTH 3'

BAFFLES -

BAFFLE FILTER -

MANHOLE LOC inlet + outlet

6" PORT LOC -

WATERTIGHT TEST -

SLOTTED no

DATE ON LID 3-21-22

PRE-CONSTRUCTION:

03/15/2022 LAID OUT 2x84' TRS; STRAIGHTENED TRENCHES ACROSS SDA, SHIFTED UPPER TR ALONG TOP BORDER, PULLED 13' TO LAY OUT LOWER TRENCH. CONFIRMED SPECS w/ 11" TR SPACING. SP

INSTALLATION:

4/25/22 Two tanks set and ST constructed. SP 4/26/22 FM installed. SP 4/27/22 1x84' trench installed. 40' of 2nd trench installed before running into a 12' x 26' x 9'(deep) trash pit. Edges of trash pit closest to house defined - did not pursue trash to edge of property. Trash also found near FM; may be in other parts of SDA. SP 5/25/22 After several obs holes, it was determined to install an 84' trench below center pore SW2. Trench adjusted same for center and to maintain ~10' from fill/trash. CM 5/26/22 Lower 84' trench installed per layout. OK to cover work. Need p/A test for final approval CM
8/19/2022 Pump/Alarm test working properly. Had to label in electrical panel - gate alarm.

FINAL INSPECTOR

K. Kelly

DATE OF APPROVAL

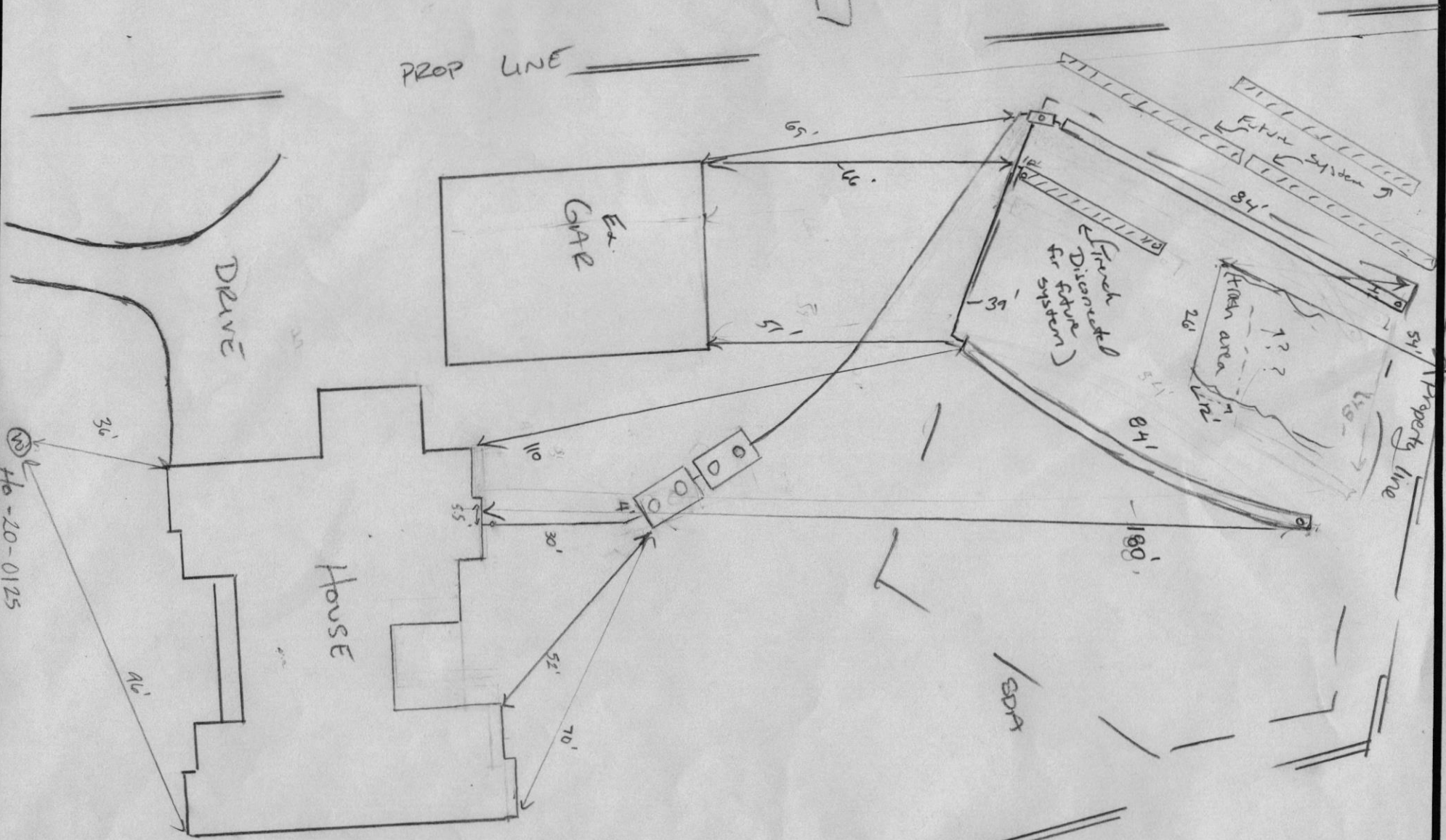
8/19/2022

NOT TO SCALE

1:30

PROP LINE

13429 HIGHLAND ROAD



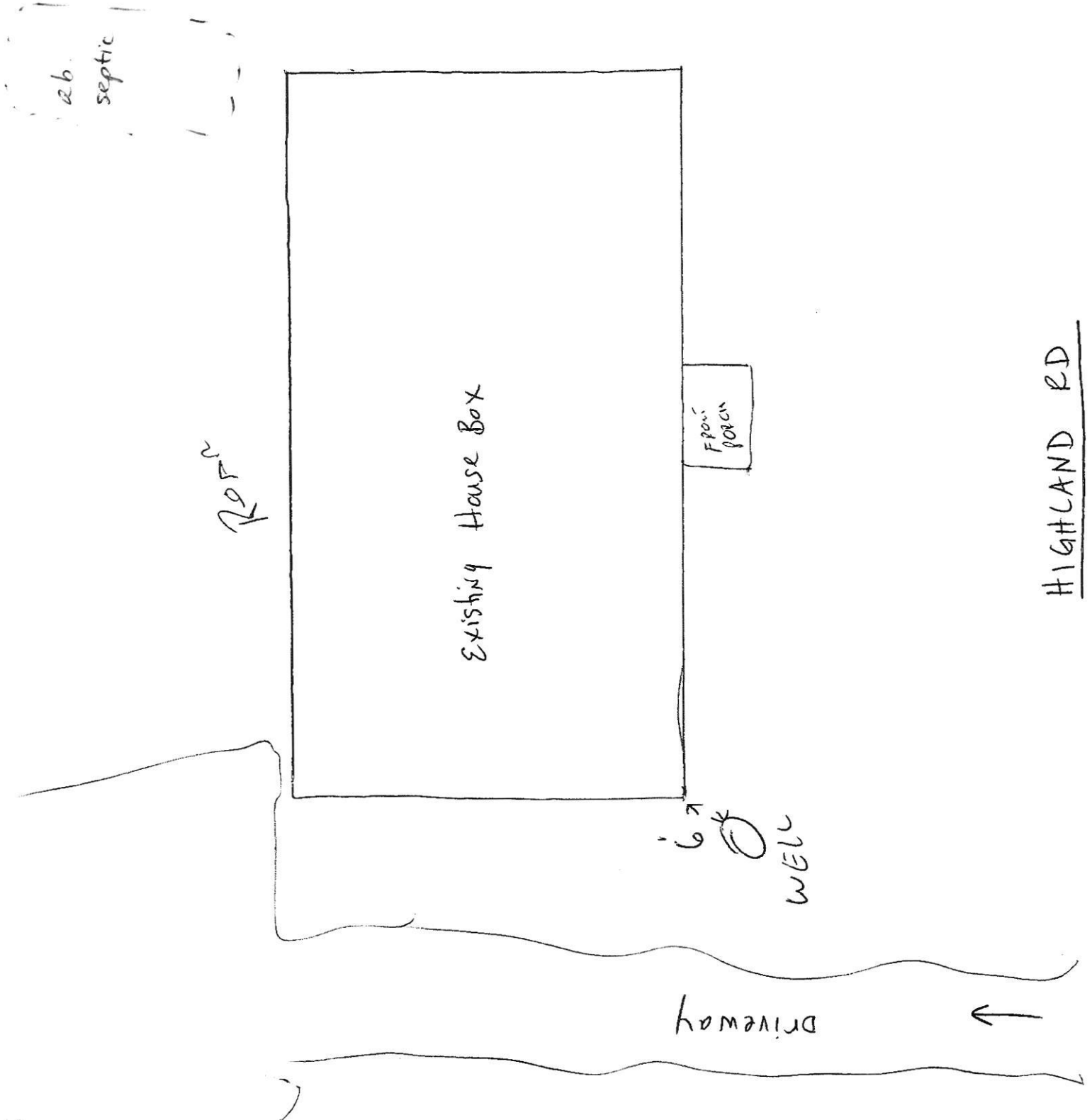
PROP LINE

Property line



Cairn Custom Homes
10548 Gorman Road
Laurel, MD 20723
(301) 490-5317

Job Name: 13429 Highland Rd
Date: June 14 2021



Freedom Septic Services, Inc.

Phone: 410-795-2947
 Fax: 410-549-1163
 2809 Liberty Road
 Sykesville, MD 21784

Invoice

DATE	INVOICE #
5/25/2021	121758

BILL TO
Cairn Custom Homes, LLC 10548 Gorman Rd. Laurel, MD 20723

P.O. NO.	TERMS	PROJECT
	Net 30	

SERVICED	QUANTITY	DESCRIPTION	RATE	AMOUNT
	1	SEPTIC CLEAN OUT IN HOWARD COUNTY - UP TO 1500 GALLONS	265.00	265.00
	1	Collapsed tank Location: 13429 Highland Rd Highland, MD 20777	1,800.00	1,800.00
Total				\$2,065.00
Balance Due				\$2,065.00

Web Site
www.poophappens.com



Fogle's Well Pump & Water Treatment, LLC
 580 Obrecht Rd
 Sykesville, Maryland 21784
 (410) 795-5670
 www.fogleswellpump.com

Invoice 8998607
 Invoice Date 5/28/2021
 Completed Date 5/28/2021
 Customer PO

Billing Address
 Cairn Custom Homes
 10548 Gorman Rd
 Laurel, MD 20723

Job Address
 Cairn Custom Homes
 13429 Highland Road
 Highland, MD 20777 USA

Description of Work

Install new 2 piece bug proof well cap and cap off old well line- \$195

Will need to bring mini out to dig out collapsed hole. Cap off well line. Do not backfill. County needs to come out to inspect- \$575 for mini.

Task #	Description	Quantity	Your Price	Your Total
Mini Excavator	Dug up and capped off old well line per HCHD. Installed new 2 piece bug proof PVC cap.	1.00	\$770.00	\$770.00

Potential Savings \$0.00
 Sub-Total \$770.00
 Tax \$0.00
 Total Due \$770.00
 Balance Due \$770.00

Thank you for choosing Fogle's Well Pump & Water Treatment, LLC

This invoice is agreed and acknowledged. Payment is due upon receipt. A service fee will be charged for any returned checks, and a financing charge of 1% per month shall be applied for overdue amounts.

5/28/2021

I find and agree that all work performed by Fogle's Well Pump & Water Treatment, LLC has been completed in a satisfactory and workmanlike manner. I have been given the opportunity to address concerns and/or discrepancies in the work provided, and I either have no such concerns or have found no discrepancies or they have been addressed to my satisfaction. My signature here signifies my full and final acceptance of all work performed by the contractor.

5/28/2021



HOWARD COUNTY HEALTH DEPARTMENT

70945

PS

DATE 2/17/21

Received From

Freedom Septic PHONE # 410-95-2947

For

~~13429~~ Septic Permit / 13429 Highlane Rd.

CASH

CHECK

NO.

5012

Three thousand ninety six Dollars

\$ 3961.00

Received By

J. Keno



HOWARD COUNTY HEALTH DEPARTMENT

70945

PS

DATE
2/4/21

Received From

Freedom Septic PHONE # 410-95-2947

For

~~Septic~~ Septic Permit
13429 Highland Rd.

CASH

CHECK

NO.

5012

Three thousand ninety six Dollars

\$ 3960.00

Received By

A Kemp