



HOWARD COUNTY HEALTH DEPARTMENT

70961

DATE 2/14/22

Received From

Fogles Seplic

PHONE #

410 995-5670

For

Perc Repair - 1201

Roundgate ch.

CASH

CHECK

NO.

14851

Three hundred thirty

Dollars

\$

330.00

Received By

O'Keefe



**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: 2/14/22 **ONSITE SEWAGE DISPOSAL SYSTEM** P 570961

APPROVAL DATE: 02/24/2022 **PERMIT:** **REPAIR** A 570961

PROPERTY ADDRESS: 1201 Round Gate Ct

SUBDIVISION: N LOT: 23 TAX ID: 04-336232

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

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

PROPERTY OWNER: Amy Doody EMAIL: _____

OWNER ADDRESS: 1201 Round Gate Ct, Woodbine MD 21797 PHONE: 443-812-2216

SEPTIC TANK SIZE (GALLONS): Existing PUMP CHAMBER CAPACITY (GALLONS): N/A PUMP SIZE: —

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

DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>84'</u>	INLET DEPTH: <u>3'</u>
	TRENCH WIDTH: <u>3'</u>	MAXIMUM BOTTOM DEPTH: <u>6'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>10'</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>3'</u>
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	Install new 84' center-feed trench. Install risers on septic tank.	

ISSUED BY: Susan Thomas ISSUE DATE: 2/22/22 EXPIRATION DATE: 2/22/23

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 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.

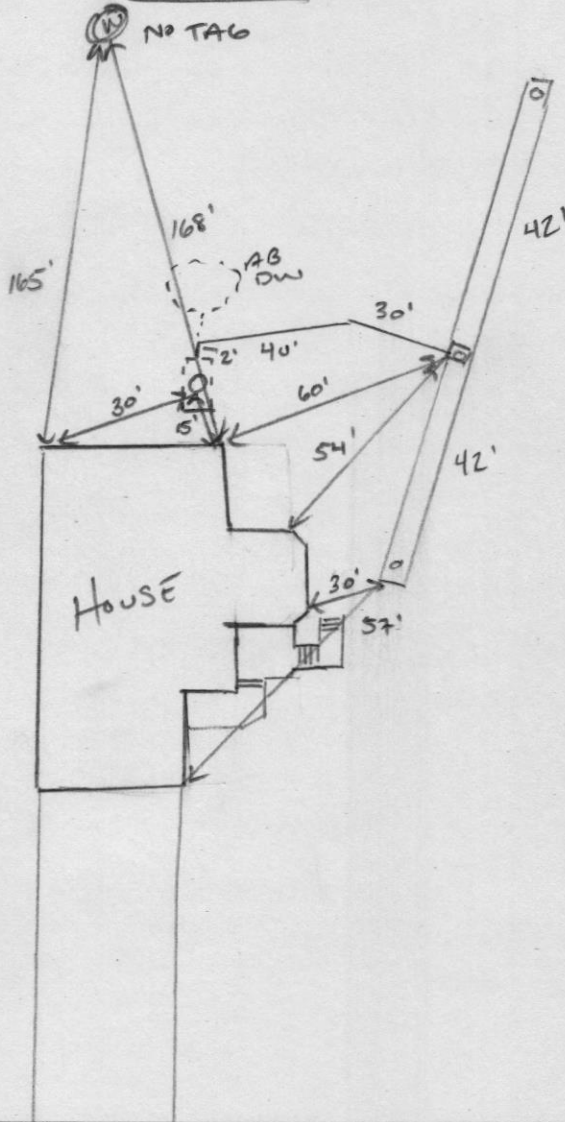
NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA

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



ROAD NAME

ROUND GATE COURT

TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
3'	3'	6'

NUMBER OF TRENCHES 1

TOTAL LENGTH 85'

ABSORPTION AREA 255 sq ft 3' SIDE WALL

DISTRIBUTION BOX LEVEL SPEED

DISTRIBUTION BOX BAFFLE CONC.

DISTRIBUTION BOX PORT YES

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____

MANUFACTURER _____

CAPACITY ~1250 GAL

SEAM LOC ~ MID

TANK LID DEPTH ~ 1'

BAFFLES OUTLET (NEW)

BAFFLE FILTER _____

MANHOLE LOC _____

6" PORT LOC _____

WATERTIGHT TEST _____

SLOTTED SINGLE COMP.

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

PRE-CONSTRUCTION:

2/22/22 Laid out 1x84' trench on contour. Will be center fed. Tank has no access - risers must be added. (SP)

INSTALLATION: 02/24/2022 INSTALLED OUTLET BAFFLE, EFFLUENT LINE; INSTALLED

D BOX - LEVELED WITH SPEED LEVELS - D BOX SET IN MIDDLE OF TRENCH.

EXISTING SEPTIC TANK AND DW PUMPED; DW COLLAPSED AND FILLED.

FINAL INSPECTOR

DATE OF APPROVAL

2/24/2022



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: dug up outlet & snaked
 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: Fogle's Septic Clean Contractor's Phone: 410-795-5670
 Contractor's Address: 580 Obrecht Rd Elktonville 21784
 Property Address: 1201 Roundgate Ct County File: _____
 Subdivision: _____ Lot: 23 Year Built: 1978
 Owner's Name: Amy Doady Existing bedrooms: 4
 Name of previous owners: Robert Long 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.