



**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](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)

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

RECEIPT DATE: 8/5/2024      **ONSITE SEWAGE DISPOSAL SYSTEM**      P 586770

APPROVAL DATE: \_\_\_\_\_      **PERMIT: REPAIR**      A Repair

PROPERTY ADDRESS: 1945 Mount View Road

SUBDIVISION: Wheeler-Phelps TR      LOT: 1      TAX ID: 03-304035

CONTRACTOR: Hatfield's Equipment      EMAIL: Ken@harfieldsequipment.com

CONTRACTOR ADDRESS: PO Box 519 Annapolis Junction      PHONE: 410-984-4880

PROPERTY OWNER: Lyle Rescott      EMAIL: n/a

OWNER ADDRESS: Same as above      PHONE: n/a

SEPTIC TANK SIZE: Existing      PUMP SIZE: n/a      PUMP TANK CAPACITY: n/a

DISTRIBUTION SYSTEM:     GRAVITY     LPD      BEDROOMS: 4      APPLICATION RATE: 1.2

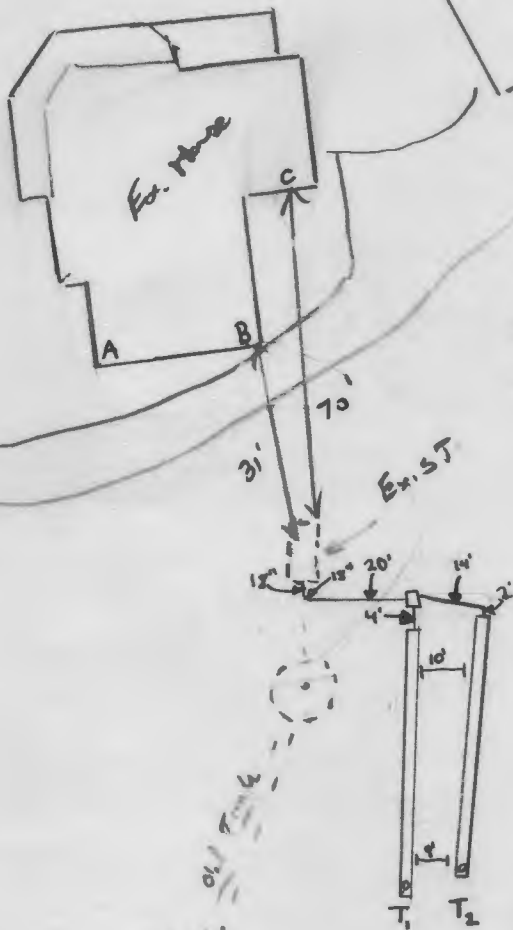
TRENCHES:	LINEAR FEET REQUIRED: <u>110</u>	INLET DEPTH: <u>4.5</u>
	TRENCH WIDTH: <u>2</u>	MAXIMUM BOTTOM DEPTH: <u>8</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>9</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>5 (.44)</u>
LOCATION:	SYSTEM STAKED BY INSTALLER AND VERIFIED BY APPROVING AUTHORITY DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	Install system per approved design plans. Pump and collapse ex. drywell. Property connected to public water	

ISSUED BY: Kevin M. Wolf, L.E.H.S.      ISSUE DATE: 8/13/2024      EXPIRATION DATE: 8/13/2025

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR REGISTERED WITH THE STATE OF MD ON-SITE WASTEWATER PROFESSIONALS BOARD: CONFIRMED
- 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 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.
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- 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



Distances  
 D-box-A: 75'  
 D-box-B: 69'  
 T<sub>end</sub>-B: 123'  
 T<sub>end</sub>-C: 150'

**TRENCH/DRAINFIELD DATA**

WIDTH	INLET	BOTTOM
<u>3</u>	<u>2.5</u>	<u>8</u>
NUMBER OF TRENCHES	<u>2</u>	
TOTAL LENGTH	<u>109</u>	
ABSORPTION AREA	<u>327 sq ft</u>	
DISTRIBUTION BOX LEVEL	<u>Yes</u>	
DISTRIBUTION BOX BAFFLE	<u>Yes</u>	
DISTRIBUTION BOX PORT	<u>Yes</u>	

**SEPTIC TANK DATA**

**SEPTIC TANK 1 LEVEL**

MANUFACTURER N/A

CAPACITY 1250 GAL

SEAM LOC mid

TANK LID DEPTH \_\_\_\_\_

BAFFLES \_\_\_\_\_

BAFFLE FILTER \_\_\_\_\_

MANHOLE LOC \_\_\_\_\_

6" PORT LOC \_\_\_\_\_

WATERTIGHT TEST OK

SLOTTED No

DATE ON LID N/A

**PUMP/SEPTIC TANK LEVEL** N/A

MANUFACTURER \_\_\_\_\_

CAPACITY \_\_\_\_\_ GAL

SEAM LOC \_\_\_\_\_

TANK LID DEPTH \_\_\_\_\_

BAFFLES \_\_\_\_\_

BAFFLE FILTER \_\_\_\_\_

MANHOLE LOC \_\_\_\_\_

6" PORT LOC \_\_\_\_\_

WATERTIGHT TEST \_\_\_\_\_

SLOTTED \_\_\_\_\_

DATE ON LID \_\_\_\_\_

SEPTIC CONTRACTOR ONSITE INSTALLING SYSTEM: Nate Heath  
 SEPTIC CONTRACTOR ONSITE LICENSED WITH THE STATE OF MD: YES/NO

**PRE-CONSTRUCTION NOTES:**

8/12/2024 Design plan approved (RM)

**CONTROL PANEL DATA**

CONTROL PANEL HEIGHT \_\_\_\_\_  
 (MIN 30")  
 INSPECTION DATE \_\_\_\_\_  
 INSPECTION: PASS/FAIL (CIRCLE ONE)

**INSTALLATION NOTES:**

8/22/2024 - Installer on site. located d-box. Trenches were 55' and 54' long. Invert inlets at 3 1/2'. Contractor in process of collapsing dry well while on site. OK to backfill. (RM)

FINAL INSPECTOR

Matthew Bern

DATE OF APPROVAL

8/23/2024

Septic Repair Design Plan

Lyle Rescott  
1945 Mount View RD  
Mattiottsville MD 21104 (4BR)

Installer/Hatfields Equipment  
Plan Preparer

2 Trench's 55' Long  
2 foot wide  
8' Bottom  
4.5 Inlets  
11"  $\phi$  of Trench's

Distribution Box  
A 81' C 59'  
B 78' D 114'

Trench #1 Beginning  
A 83' C 57'  
D 80' D 111'

Trench #1 End  
A 130' C 70'  
D 138' D 65'

Trench #2 Beginning  
A 91' C 46'  
B 80' D 107'

Trench #2 End  
A 134' C 62'  
B 142' D 59'



Approved Septic System Plan  
Howard County Health Department

[Signature]  
Signature

9/13/2014  
Date



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Real Property Data Search ( )  
 Search Result for HOWARD COUNTY

[View Map](#)      [View GroundRent Redemption](#)      [View GroundRent Registration](#)

Special Tax Recapture: None

Account Identifier: District - 03 Account Number - 304124

**Owner Information**

Owner Name: WOLF DAVID EDWARD      Use: RESIDENTIAL  
 WOLF LYNN WHEELER      Principal Residence: YES  
 Mailing Address: 1965 MOUNT VIEW RD      Deed Reference: /01359/ 00739  
 MARIOTTSVILLE MD 21104-1638

**Location & Structure Information**

Premises Address: 1965 NE MOUNT VIEW RD      Legal Description: LOT 3 1.008 AR  
 MARIOTTSVILLE 21104-0000      1965 MOUNT VIEW RD  
 WHEELER-PHELPS TR

Map: Grid: Parcel: Neighborhood: Subdivision: Section: Block: Lot: Assessment Year: Plat No:  
 0009 0024 0297 3010104.14 0004 3 2022 Plat Ref:

Town: None

Primary Structure Built Above Grade Living Area Finished Basement Area Property Land Area County Use  
 1986 2,698 SF 1.0000 AC

StoriesBasementType ExteriorQualityFull/Half BathGarage Last Notice of Major Improvements  
 2 YES STANDARD UNITFRAME/4 2 full/ 1 half 1 Attached

**Value Information**

	Base Value	Value		
		As of 01/01/2022	As of 07/01/2023	As of 07/01/2024
Land:	205,000	221,200		
Improvements	307,300	321,400		
Total:	512,300	542,600	532,500	542,600
Preferential Land:	0	0		

**Transfer Information**

Seller: WHEELER ESTHER T      Date: 06/27/1985      Price: \$0  
 Type: NON-ARMS LENGTH OTHER      Deed1: /01359/ 00739      Deed2:  
 Seller:      Date:      Price:  
 Type:      Deed1:      Deed2:  
 Seller:      Date:      Price:  
 Type:      Deed1:      Deed2:

**Exemption Information**

Partial Exempt Assessments: Class      07/01/2023      07/01/2024  
 County: 000      0.00  
 State: 000      0.00  
 Municipal: 000      0.00|0.00      0.00|0.00

Special Tax Recapture: None

**Homestead Application Information**

Homestead Application Status: No Application

**Homeowners' Tax Credit Application Information**

Homeowners' Tax Credit Application Status: No Application      Date:



# HOWARD COUNTY HEALTH DEPARTMENT

86770

CODES

DATE

8/5/24

05

CASH

CHECK

Received From

For

Waldfield's Equipment  
Public Health 1945 Max V. Washburn

NO.

4701

Two hundred sixty five

Dollars

\$

265.00

Received By

HEALTH