

**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: 11/4/22      **ONSITE SEWAGE DISPOSAL SYSTEM**      P 572658

INSTALLATION APPROVAL DATE: 11/9/22 *rv/se*      **PERMIT**      A \_\_\_\_\_  
**SEWER HOUSE CONNECTION**

PROPERTY ADDRESS: 835 Day Road

SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ TAX ID: \_\_\_\_\_

CONTRACTOR: The PlumberMan LLC      EMAIL: theplumbermanllc@gmail.com

CONTRACTOR ADDRESS: 5239 Old Hanover Road, Westminster, MD 21158      PHONE: 443-925-4028

PROPERTY OWNER: Ali Kazam      EMAIL: \_\_\_\_\_

OWNER ADDRESS: 835 Day Road, Sykesville, MD 21784      PHONE: \_\_\_\_\_

NUMBER OF BEDROOMS: \_\_\_\_\_ CONNECTED TO PUBLIC WATER:  YES  NO

LOCATION:	INSTALL 4" SEWER LINE PER APPROVED SITE PLAN.
NOTES:	

ISSUED BY: \_\_\_\_\_ ISSUE DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

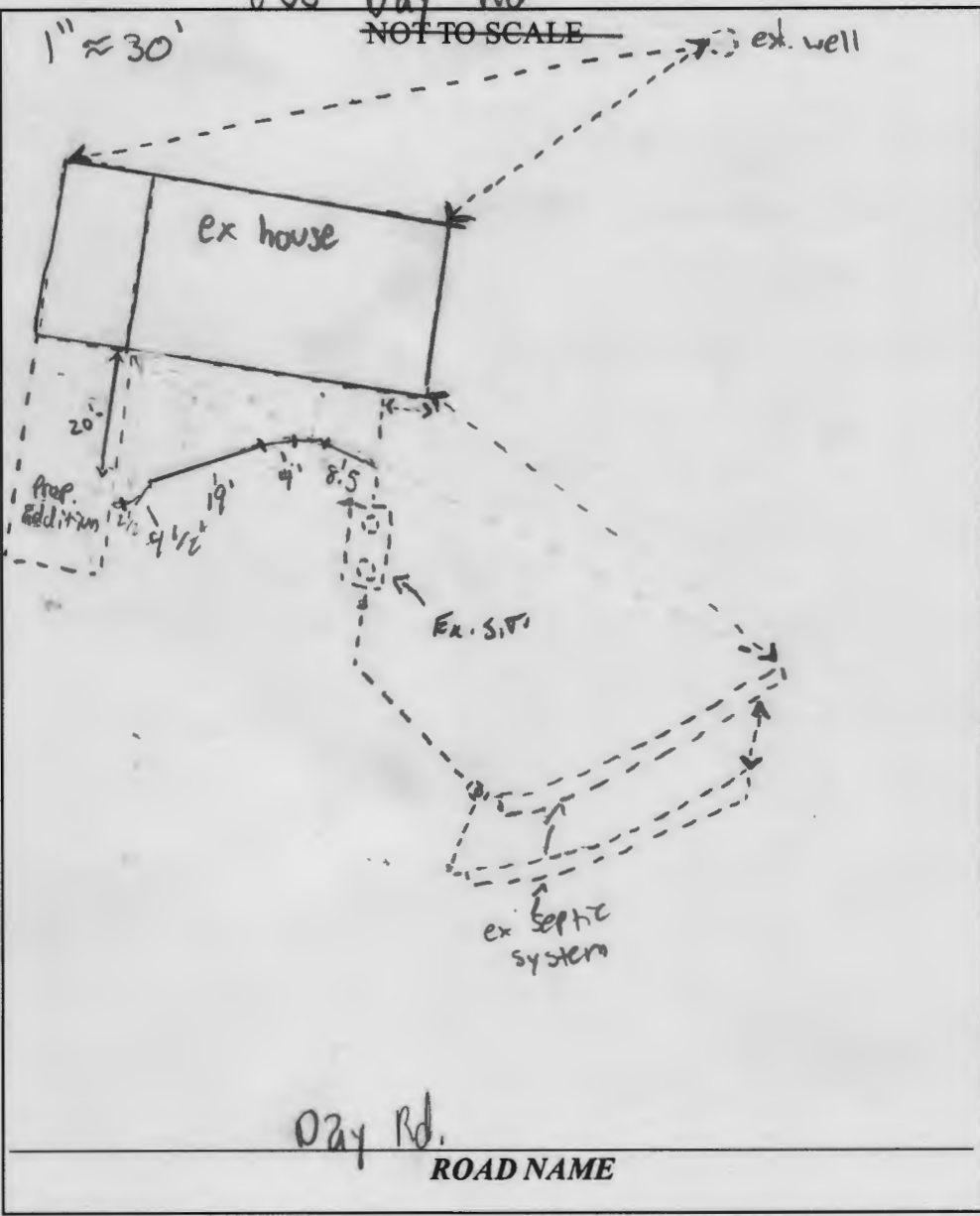
- NOTE: HOWARD COUNTY BUREAU OF UTILITIES APPROVAL OF GRINDER PUMP INSTALLATION IS REQUIRED PRIOR TO SEPTIC PERMIT APPROVAL**
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING**
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL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

835 Day Rd

1" ≈ 30'

NOT TO SCALE



**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:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

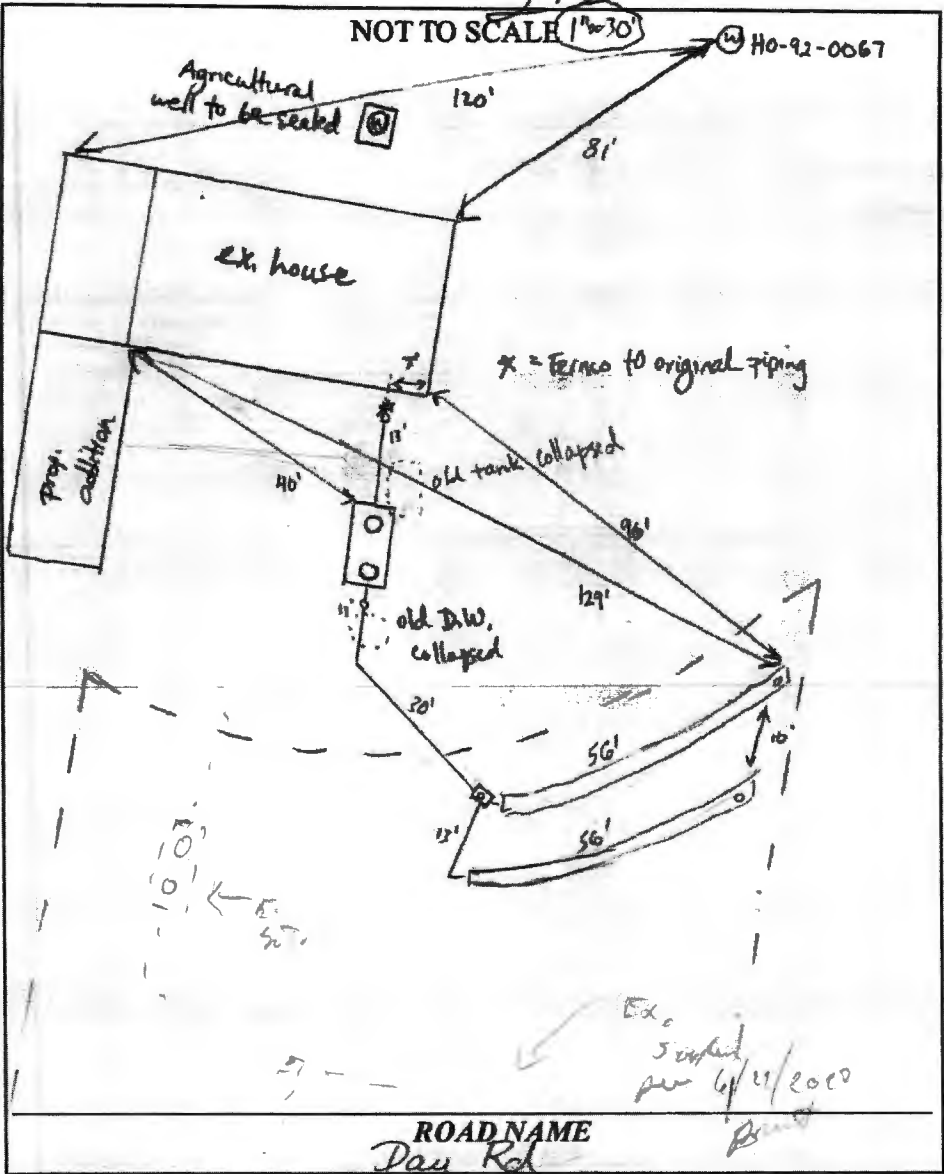
INSTALLATION: 11/4/22 Onsite for S.H.C. plumber not onsite. Inspection of piping from tank up to addition. Min 12" fall achieved. Need to see connection from tank to addition. Plumber notified of call in reinspection for 11/7/22. KW/SP

11/9/2022 Onsite for final inspection. Plumber men onsite septic successfully connected to prop addition KW/SP

FINAL INSPECTOR \_\_\_\_\_ DATE OF APPROVAL 11/9/2022 KW/SP

835 Day Rd

NOT TO SCALE 1"=30'



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	2'	7'
NUMBER OF TRENCHES 2		
TOTAL LENGTH 112'		
ABSORPTION AREA 336 sq ft + sidewall		
DISTRIBUTION BOX LEVEL Speed		
DISTRIBUTION BOX BAFFLE cement		
DISTRIBUTION BOX PORT PVC		

SEPTIC TANK DATA	
SEPTIC TANK I LEVEL	yes
MANUFACTURER	Babylon
CAPACITY	2000 GAL
SEAM LOC	top
TANK LID DEPTH	2'
BAFFLES	inlet + outlet
BAFFLE FILTER	-
MANHOLE LOC	inlet + outlet
6" PORT LOC	-
WATERTIGHT TEST	✓
SLOTTED	yes
DATE ON LID	5-23-22
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	

ROAD NAME  
Day Rd

PRE-CONSTRUCTION:

6/28/22 Laid out 2x56' trenches on contour and staked d-box location (S)

INSTALLATION:

6/29/22 SL connected to existing ST via Ferno. Old tank and old drywell pumped and collapsed. Tank set and d-box set and leveled. 2x56' trenches installed. (S)

FINAL INSPECTOR Susan Thomas DATE OF APPROVAL 6/29/22





**RECEIPT**

Howard County, MD  
HOWARD COUNTY HEALTH DEPARTMENT  
ASCEND ONE BUILDING  
Columbia, MD 21045  
8930 STANFORD BLVD

**Application:** WS-SP-APP-22-00261  
**Application Type:** EnvHealth/Well and Septic/Sewage Disposal System/Application  
**Address:** 835 DAY RD, Sykesville, 21784

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<b>Receipt No.</b>	<b>5243</b>					
<b>Payment Method</b>	<b>Ref Number</b>	<b>Amount Paid</b>	<b>Payment Date</b>	<b>Cashier ID</b>	<b>Received</b>	<b>Comments</b>
Credit Card		\$165.00	11/04/2022	VDEKRONEY		

**Owner Info.:** ALI KAZAM  
835 DAY RD  
SYKESVILLE, MD 21784

**Work Description:**

## Credit Card Payment Review

Authorization Code: 111111

Reference ID: 2293692

Transaction ID: BE1P4EF635A2

Transaction Type: Charge

Result Code: 0

Result Message: Success

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Amount: \$165.00

Processing Fee: \$0.00

Convenience Fee: \$0.00

Total Fee: \$165.00

Card Type: MasterCard

Account Number: xxxxxxxxxxxx1959

**Close**



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

RECEIPT DATE: 6-27-22 **ONSITE SEWAGE DISPOSAL SYSTEM** P 572062

APPROVAL DATE: 6-29-22 **PERMIT: Upgrade** A \_\_\_\_\_

PROPERTY ADDRESS: 835 Day Rd. Sykesville, MD 21784

SUBDIVISION: Talley Property LOT: 3 TAX ID: 1403297268

CONTRACTOR: Jeff Allen Backhoe EMAIL: jeffallensbackhoeservice@verizon.com

CONTRACTOR ADDRESS: 15100 Frederick Rd, Woodbine, MD 21797 PHONE: 410-489-7520

PROPERTY OWNER: Kazam & Farah Ali EMAIL: kazamali70@hotmail.com

OWNER ADDRESS: 835 Day Rd. Sykesville, MD 21784 PHONE: \_\_\_\_\_

SEPTIC TANK SIZE (GALLONS): 2000 PUMP CHAMBER CAPACITY (GALLONS): n/a PUMP SIZE: n/a

NUMBER OF BEDROOMS: 5 HOUSE SQ. FT. n/a APPLICATION RATE: 0.8

DISTRIBUTION SYSTEM: GRAVITY FED  LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>110</u>	INLET DEPTH: <u>2</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>7</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>13</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>2</u>
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	Existing OSDS must be pumped out and abandoned. The existing pit well must be abandoned with the original well abandonment report sent to the Health Dept. The pit itself may remain to serve as a holding place for the equipment serving existing well HO-92-0067.	

ISSUED BY: Robert Freemon ISSUE DATE: 6-27-22 EXPIRATION DATE: 6-27-23

- 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 N/A
- 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.**

OK MB 9/10/24

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 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

**SUBMIT COPIES OF COMPLETED FORM TO:**

- \* COUNTY ENVIRONMENTAL AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: 6-30-22 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) \_\_\_\_\_

No tag

\* PERMIT NUMBER OF REPLACEMENT WELL: \_\_\_\_\_

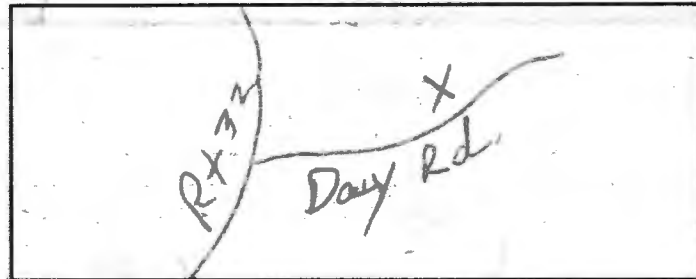
\* PERSON ABANDONING WELL: Andrew Hovsen WELL DRILLER'S LICENSE NUMBER: 224

CIRCLE: MWD / MSD / MGD

\* OWNER'S NAME: Ali Kazam

**SITE LOCATION MAP**

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: Suresville  
 TAX MAP 9 BLOCK 4 PARCEL 316  
 SUBDIVISION: Talley Property  
 SECTION: \_\_\_\_\_ LOT: 3  
 STREET ADDRESS: 835 Day Rd



LATITUDE 3 9.347459 ✓

LONGITUDE 7 6.964292

**LOG OF SEALING MATERIAL**

MATERIAL	FEET	
	FROM	TO
<u>Bentonite</u>	<u>90</u>	<u>0</u>

**VOLUME OF MATERIAL USED**

Bentonite 1200 lbs

\* TYPE OF WELL BEING ABANDONED:  
 DRILLED                       JETTED  
 BORED                               HAND DUG  
 OTHER (specify) \_\_\_\_\_

\* USE CODE:  
 DOMESTIC                       MUNICIPAL/PUBLIC  
 IRRIGATION                       INDUSTRIAL  
 TEST/OBSERVATION               GEOTHERMAL

\* TYPE OF CASING:  
 STEEL                               PLASTIC  
 CONCRETE                       OTHER (specify) \_\_\_\_\_

SIZE OF CASING: 6 INCHES IN DIAMETER

DEPTH OF WELL: 90 FEET DEEP

WAS ANY CASING REMOVED? YES  NO   
 If yes, length removed, in feet: \_\_\_\_\_

WAS CASING RIPPED OR PERFORATED? YES  NO

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN LICENSE#  
Andrew Hovsen 224

CIRCLE ONE MWD / MSD / MGS

DATE 6-30-22

COUNTY

Pursuant to § 10-624 of the State Govt. Article of the Maryland Code, personal info requested on this form is used in processing this form pursuant to COMAR 26.04.04. Failure to provide the info may result in this form not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment is subject to the Maryland Public Information Act. This form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State Law.