



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: 4-11-22 ONSITE SEWAGE DISPOSAL SYSTEM P 571492

APPROVAL DATE: 4/26/22 (S) PERMIT: CONSTRUCTION Upgrade A

PROPERTY ADDRESS: 8425 MURPHY ROAD, LAUREL, MD 20723

SUBDIVISION: SARAH E PAYNE LOT: 7 TAX ID: 05-341795

CONTRACTOR: EMAIL:

CONTRACTOR ADDRESS: PHONE:

PROPERTY OWNER: PRESTON TAUKULIS EMAIL:

OWNER ADDRESS: 8425 MURPHY ROAD PHONE: (240)498-6059

SEPTIC TANK SIZE (GALLONS): 1500 TANK MANUFACTURER: TBD

PUMP MODEL: N.A. PUMP SIZE N.A. PUMP TANK CAPACITY: N.A.

DISTRIBUTION SYSTEM: [X] GRAVITY [] PRESSURE DOSED BEDROOMS: 5 APPLICATION RATE: 0.8

Table with 2 columns: Field Name (TRENCHES, LOCATION, NOTES) and Field Value (Linear feet required: 48, Inlet depth: 3.0, etc.)

ISSUED BY: R BRICKER ISSUE DATE: 4-11-22 EXPIRATION DATE: 4-11-23

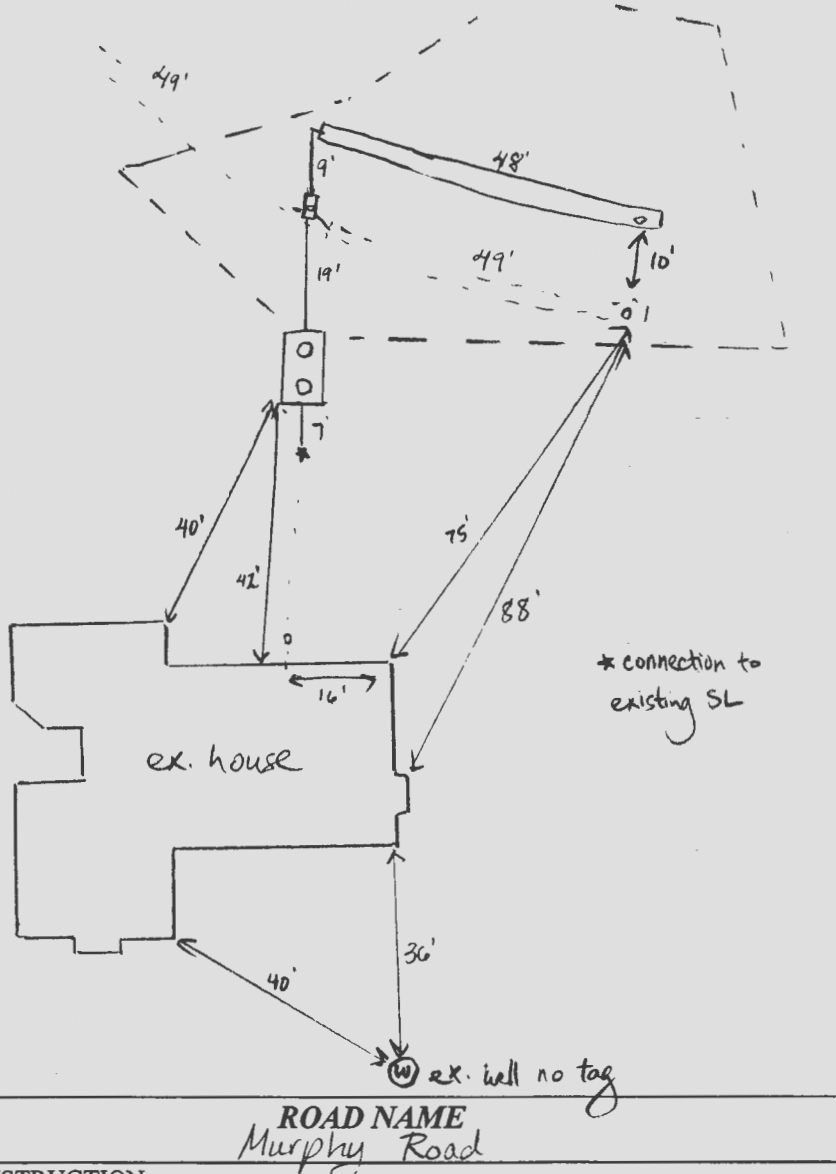
- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
NOTE: WATERTIGHT 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: 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.

8425 Murphy Rd

NOT TO SCALE 1" ≈ 30'



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	3'	8'
NUMBER OF TRENCHES		3
TOTAL LENGTH		146'
ABSORPTION AREA		292 sq ft + sidewall
DISTRIBUTION BOX LEVEL		SPEEDY
DISTRIBUTION BOX BAFFLE		CEMENT
DISTRIBUTION BOX PORT		PVC

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	yes
MANUFACTURER	Babylon
CAPACITY	1500 GAL
SEAM LOC	top
TANK LID DEPTH	4' - 3.5'
BAFFLES	inlet + outlet
BAFFLE FILTER	outlet
MANHOLE LOC	inlet + outlet
6" PORT LOC	-
WATERTIGHT TEST	-
SLOTTED	yes
DATE ON LID	3-16-22
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	

PRE-CONSTRUCTION:

4/25/22 New trench will be placed 12' down from old trench when old trench is dug up and located.

INSTALLATION:

4/26/22 old tank collapsed and abandoned. New tank set and connected to existing SL. D-box set in middle of old trench. D-box leveled. New 48' trench installed and connected to d-box.

FINAL INSPECTOR Susan Thomas

DATE OF APPROVAL 4/26/22

4/22/88
10:14 AM
11/30/88 12:00-1:00
12/27/88

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT _____

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

05-341795
INDEXED

P 41858
A Repair

DATE 6/03/88

DATE SYSTEM APPROVED 12/27/88

INSPECTOR R14

DAVE HOFFAS 831-7257

Vision Builders IS PERMITTED TO INSTALL _____ ALTER

ADDRESS 9110 Q Red Branch Road, Columbia, Maryland 21045 PHONE 730-4653

SUBDIVISION _____ ROAD 8425 Murphy Road LOT _____

PROPERTY OWNER Vision Builders/Mr. Joseph Gonzales
8425 Murphy Road

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

6-22-88 Inlet 3' Bottom 8' Require 300 # of sidewall if existing syst. All

TRENCHES IF Daywell + Day well is dry 200 # Required, Replace PIPE FROM

HOUSE TO TANK. SAC

11/30/88 NO SYSTEM CURRENTLY ON SITE. INSTALL 474 # SYSTEM. CW.

PLANS APPROVED BY C. Williams DATE 6/03/88

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES).

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER TWO YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

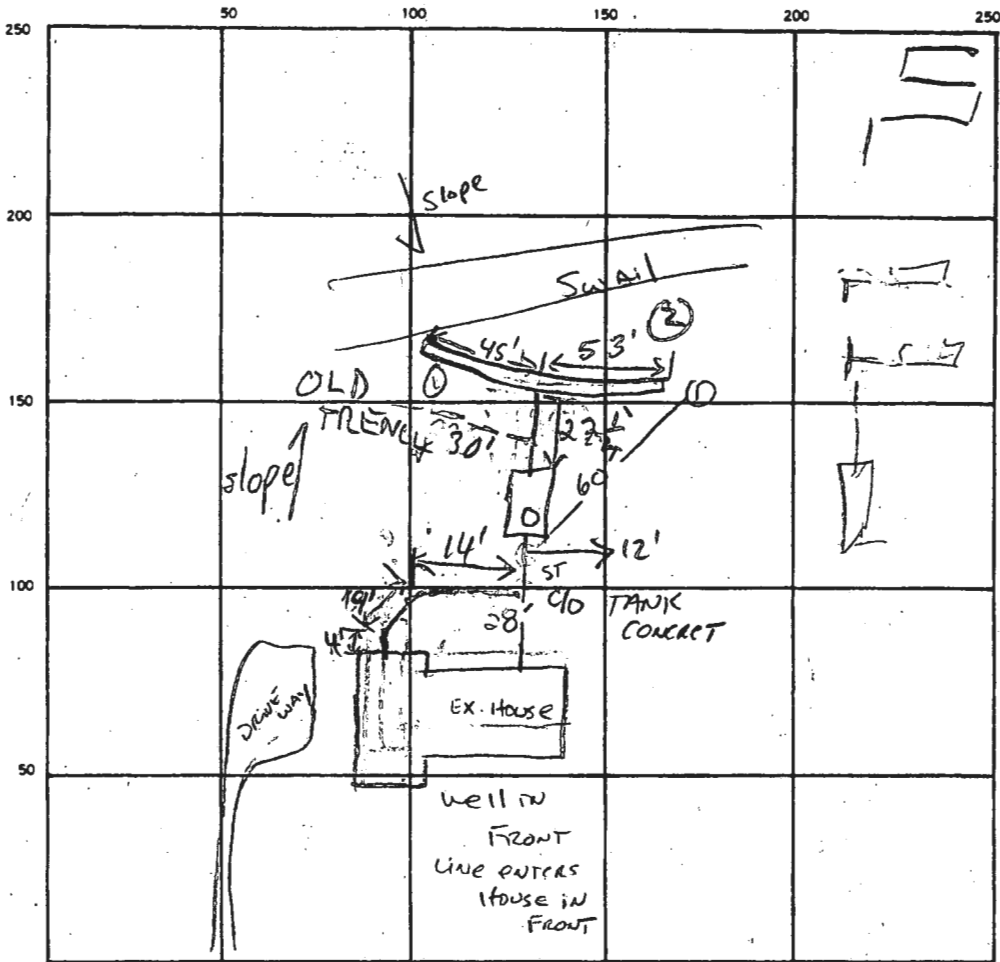
BLDG. PERMIT SIGNED
AND RETURNED 6-16-88

BP 18418
SAC

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

BP 18418



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

MURPHY Rd.

①
 0
 3.5'
 150
 100
 13'
 X Perc 8-10 min
 158
 4 x 3
 474

Yellow Br. SAND
 CLAY LAM
 MICACEOUS
 15-20% FRAGS

Yellow Br.
 MICACEOUS
 SAND LOAM
 15-20%
 FRAGS

SEPTIC TANK LEVEL OK CLEANOUTS CLEANOUT INSTALLED RIT
NEED CLEANOUT
 DISTRIBUTION BOX LEVEL NO BOX - A "T" EXISTS AT JUNCTION OF TRENCHES
 DRAIN FIELD/TILE FIELD. DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.
 EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH ① 45' ② 98' FT.
② 53'
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 490 SQ. FT.
 DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET 5 FT.
 ABSORBENT AREA 490 SQ. FT.

REMARKS TRENCHES STONED & PAPERED - OK TO COVER
TRENCHES; CLEANOUT COMPOSED OF 6" PIPE IN 9" HOLE;
PIPE SUPPORTED AT HOLE W/ BRICKS + MORTAR; HOUSE
CONNECTION NOT COMPLETE; TRENCH DEPTH +
EFFECTIVE STONE DEPTH PER CONTRACTOR; CALL
FOR FINAL STICKER LEFT REAR DOOR; 11/30/88 MR
HOUSE HOOR UP OK 12/27/88 RIT
 DATE SYSTEM APPROVED 12/27/88 INSPECTOR Raymond Dodge

APPLICATION

Approved
June 9 1988
10:30 AM

PERCOLATION TESTING

Repair

41859

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

05-346185

DISTRICT

5TH

DATE

5/27/88

INDEXED

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Alda Cisse

ADDRESS 6765 Milk Hollow Rd Highland PHONE 854-0282

PROSPECTIVE BUYER none (per test for installation of swimming pool)

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Cisse Farm LOT NO. _____

ROAD AND DESCRIPTION Milk Hollow Rd - near Deer Valley Rd

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. Single family
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE

FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY

WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Bernda Wright
(SIGNATURE OF APPLICANT) Ind Sea Bldg & Supply

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6-9-88 Per. satisfactory as repair area - pool

may be built as planned. Saw BLDG. PERMIT SIGNED AND RETURNED 6/9/88

Serial # 18493-Per

P 41859

HD-216

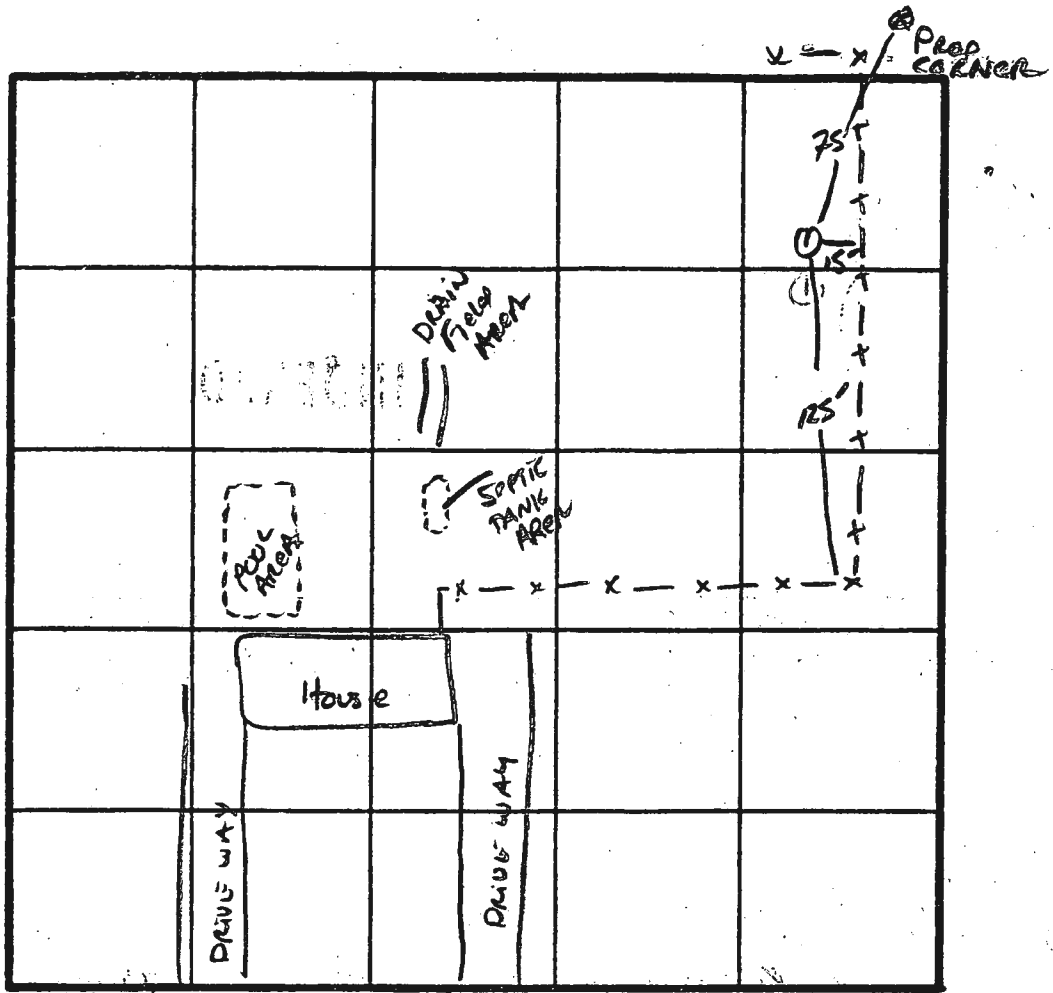
THIS IS NOT A PERMIT

SOIL PROFILE

0
4' OM A1-3
Yell. BR
Silty clay
210%
FRAGS

30"
Yell. BR
Silt loam
Highly
micaceous
15-20%
FRAGS

13'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

MINK HOLLOW Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/9/88	1V	13"	Dry - Glendy Ln.		UNIFORM below 3'		
			see profile		x Perc 3	SMIN ESTIMATE	

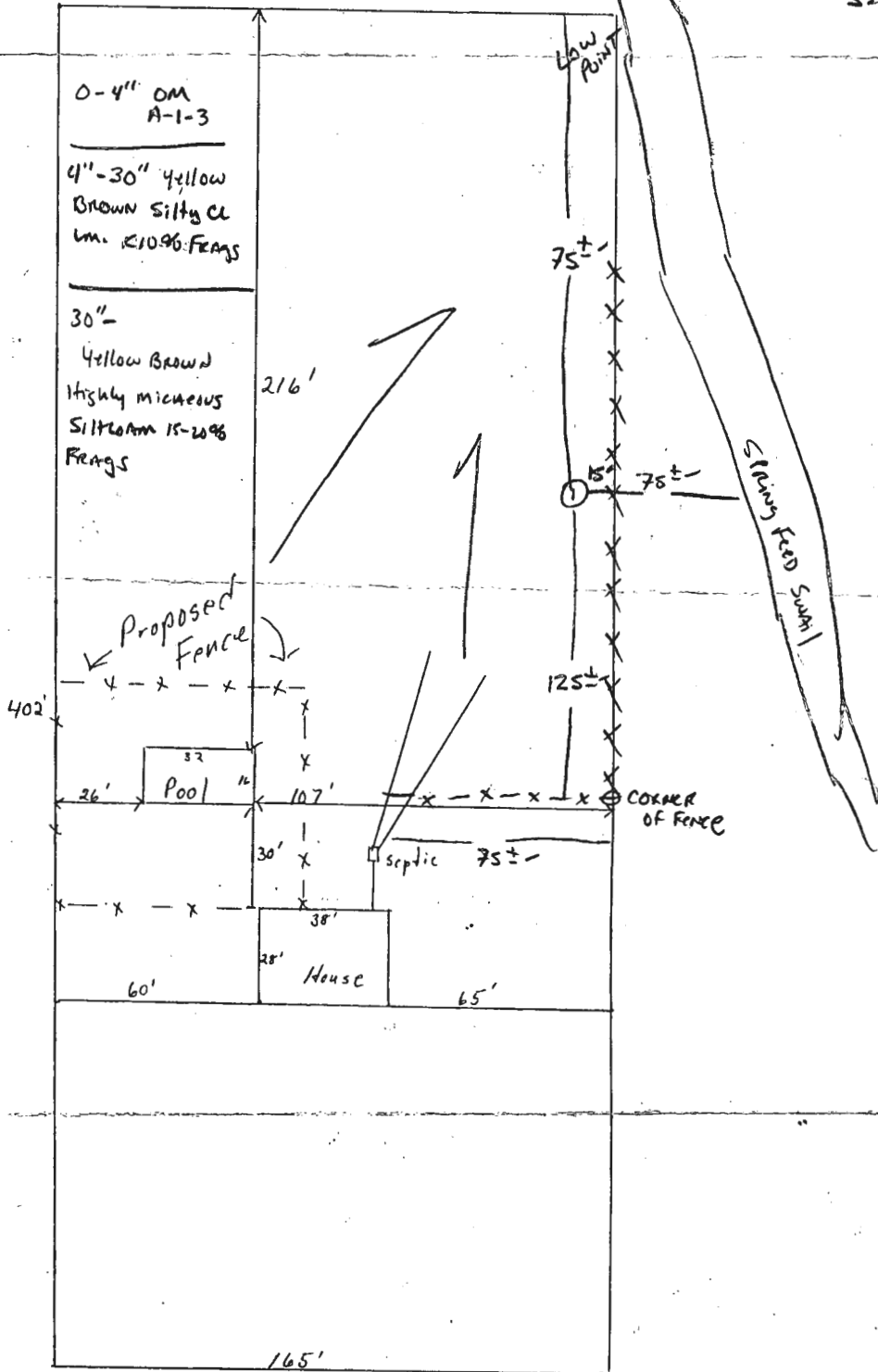
REMARKS _____

TYPE OF SOIL Glendy Ln.

TESTED BY _____ ALSO PRESENT _____

RECEIVED
HOWARD COUNTY
HEALTH DEPT. MO.
ELICOTT CITY, MD.
JUN 2 9 17 AM '88

6-9-88
 NO EVIDENCE OF SEPTIC
 FAILURE. RENE OIL
 AT. X RENE 3-SM IN
 >10000 \$ TO REPAIR IN
 S-06



Alda Cissell
6765 Mint Hollow Rd
Highland, Md 20777

THURSDAY
10:30AM

REPAIR TEST NEEDED
OWNER AWAY.

5/19/88 CW

BLDG. PERMIT SIGNED
AND RETURNED

