

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: 12/10/2024 **ONSITE SEWAGE DISPOSAL SYSTEM** P 587874

APPROVAL DATE: 4/30/2025 **PERMIT: REPAIR** A _____

PROPERTY ADDRESS: 2225 Daisy Road Woodbine, MD. 21797

SUBDIVISION: _____ LOT: 3 TAX ID: 05-337778

CONTRACTOR: Colson's Septic Service EMAIL: colsonsseptic@gmail.com

CONTRACTOR ADDRESS: 1834 West Liberty Rd, Westminster, MD. 21157 PHONE: 443-536-9382

PROPERTY OWNER: Chris Authn EMAIL: Chris_auth@hotmail.com

OWNER ADDRESS: 2225 Daisy Road, Woodbine, MD. 21797 PHONE: 301-219-7978

SEPTIC TANK SIZE: Existing (1250g) PUMP SIZE: n/a PUMP TANK CAPACITY: n/a

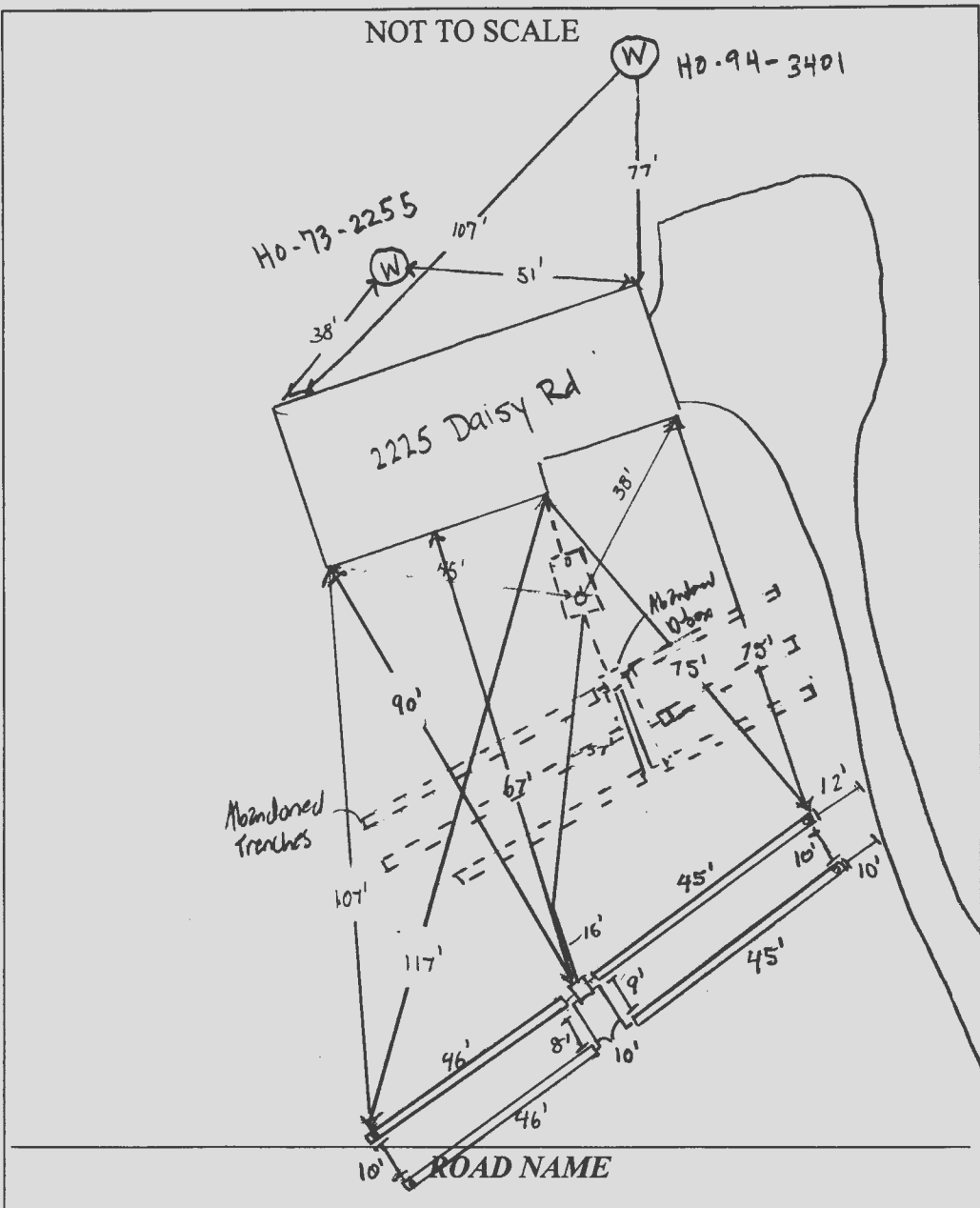
DISTRIBUTION SYSTEM: GRAVITY LPD BEDROOMS: 4 ex APPLICATION RATE: 0.6

TRENCHES:	LINEAR FEET REQUIRED: <u>180'</u>	INLET DEPTH: <u>2.5'</u>
	TRENCH WIDTH: <u>2'</u>	MAXIMUM BOTTOM DEPTH: <u>9'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>11'</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>5'</u>
LOCATION:	SYSTEM STAKED BY INSTALLER AND VERIFIED BY APPROVING AUTHORITY DURING PRE-CONSTRUCTION INSPECTION. TRENCHES MUST BE INSTALLED ON CONTOUR.	
NOTES:	Install system per approved design plans. Observation ports to be added to the end of the trenches, install new dbx, abandon old dbx and trenches in place. 7' of stone to be used.	

ISSUED BY: R. Rappaport ISSUE DATE: 12/10/2024 EXPIRATION DATE: 12/10/2025

- 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.
- NOTE: AN INDIVIDUAL CERTIFIED BY MDE AND THE MANUFACTURER FOR BAT INSTALLATION MUST BE PRESENT AT ALL TIMES DURING BAT INSTALLATION.
- 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.**



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	2.5'	9'
NUMBER OF TRENCHES		4
TOTAL LENGTH		182'
ABSORPTION AREA		364' x SW
DISTRIBUTION BOX LEVEL		yes
DISTRIBUTION BOX BAFFLE		yes
DISTRIBUTION BOX PORT		yes

Existing 1250 gallon

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	_____

SEPTIC CONTRACTOR ONSITE INSTALLING SYTEM: Ricky Colson/Steve Reichert
 SEPTIC CONTRACTOR ONSITE LICENSED WITH THE STATE OF MD: YES/NO

PRE-CONSTRUCTION NOTES:
12/10/2024 - Design Plan Approved. (RN)

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

INSTALLATION NOTES:
4/30/2025 - installers onsite for inspection. 3 trenches finished. 1 trench waiting on stone. 2x2x4 orbit for stone to be delivered. Adequate fill from tank to dbox. dbox levelal while onsite. trench lengths @ 46'-45'. 5/4 obs ports @ end of trenches. inlet @ 2.5', width @ 2'. stone & fabric on. stone delivered, 2x2x4 orbit for rest of 1 trench to be stoned, perforated pipe to be installed, & fabric on to Backfill all work. (SP)

FINAL INSPECTOR S. Page DATE OF APPROVAL 4/30/2025

Property: Chris Auth
 2225 DAISY RD
 WOODBINE MD 21797
 301-214-7878
 4-1300pm

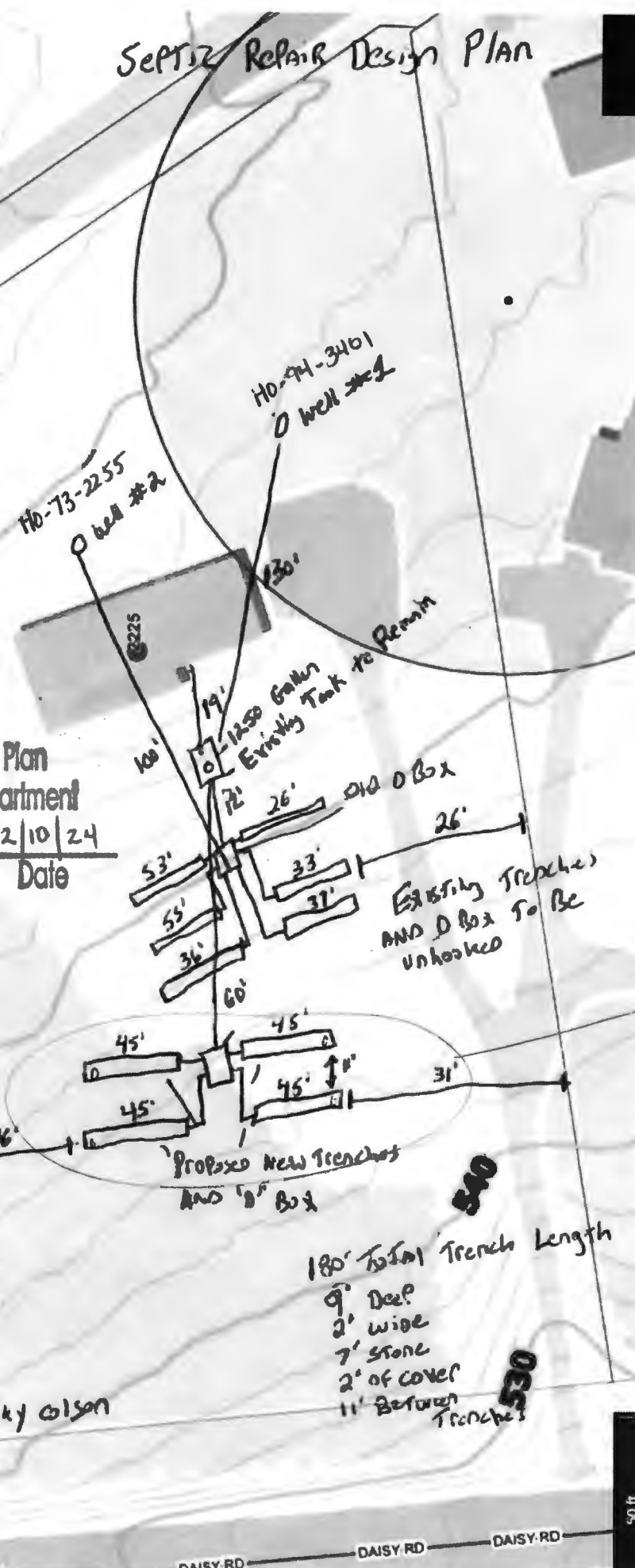
SEPTIC Repair Design Plan

- (P) (*) Install trenches on contour
- (P) (*) Latet @ 2.5'
- (E) (*) dbox w/ riser to be installed per contractor
- (P) (*) observation ports installed at the end of all 4 trenches

Approved Septic System Plan
 Howard County Health Department

[Signature]
 Signature

12/10/24
 Date



Installer: Ricky Colson
 Colson's septic service
 1834 W. Liberty RD
 Westminster MD 21157
 410-536-9382

Plan submitted by: Ricky Colson

180' Total Trench Length
 9' Deep
 2' wide
 7' stone
 2' of cover
 11' Between Trenches

PS87874

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: trenches saturated
 No

Existing system design

- Drywell
- Trench *(6)*
- 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:

(4 bedrooms/ 2.5 Baths)

*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: Colson's Septic Contractor's Phone: 443-536-9382

Contractor's Address: 1834 W. Liberty Rd Westminster, MD 21157

Property Address: 2225 Daisy Rd Woodbine, MD 21797 County File: _____

Subdivision: _____ Lot: _____ Year Built: _____

Owner's Name: Christopher Auth Existing bedrooms: 4

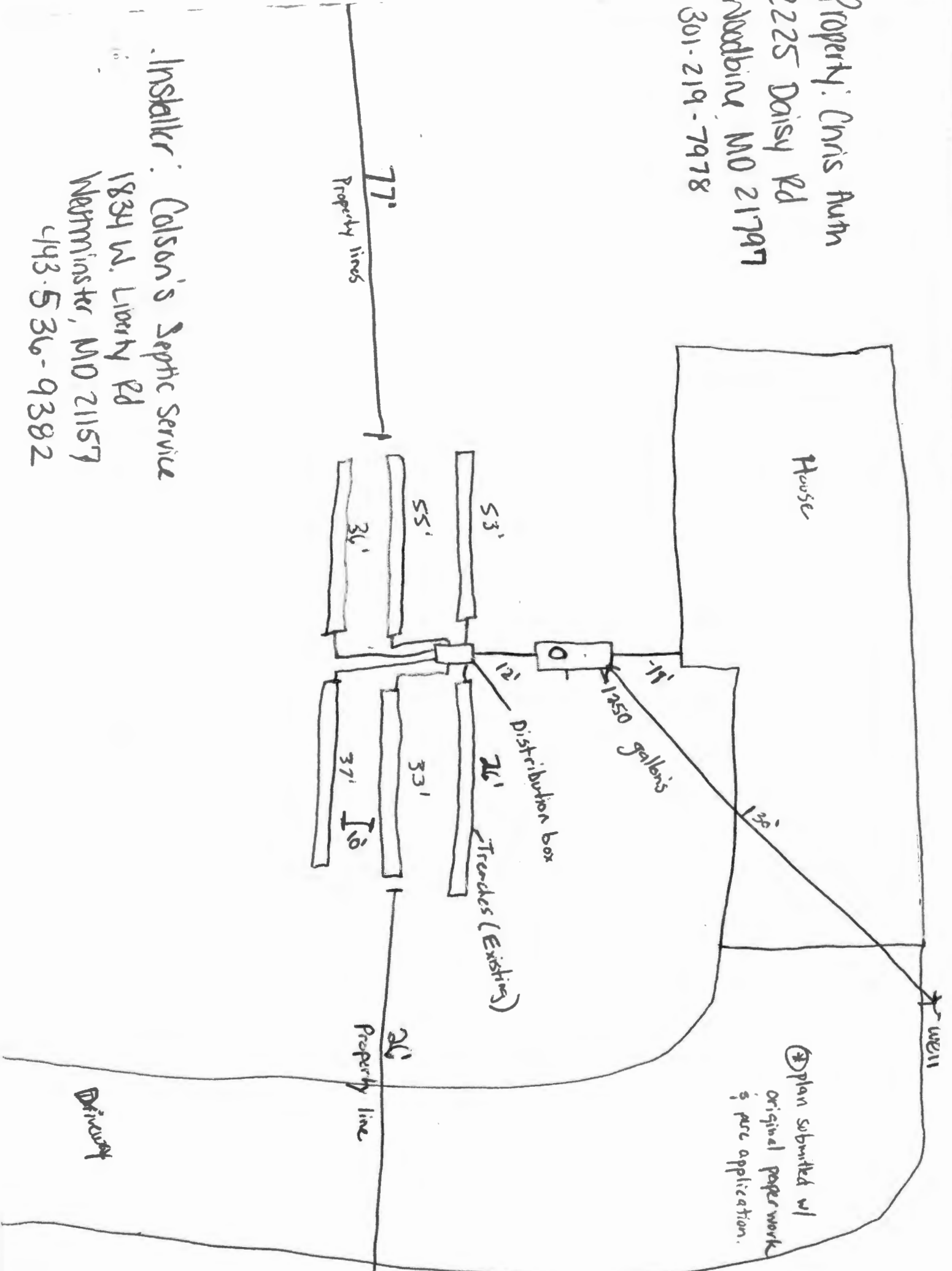
Name of previous owners: _____ Existing bedrooms: _____

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.

Property: Chris Auth
2225 Daisy Rd
Woodbine, MD 21797
301-219-7978



Installer: Colson's Septic Service
1834 W. Liberty Rd
Wesminster, MD 21157
413-536-9382



HOWARD COUNTY HEALTH DEPARTMENT

87874

CODES

DATE
11 / 20 / 24

CASH

CHECK

NO. 1354

Received From

Colson Septic Service

For

Repair - Pump + Meter - 2225 Dollars

Five hundred and thirty

00/100 Dollars

\$ 530 | 00

Received By

[Signature]