

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 03/24/08

P 528855

APPROVAL DATE: 4/30/08

PERMIT

A REPAIR

Logged Into Permit Manager
Tax ID # 02-339986

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road PHONE NUMBER: 410-795-5670

SUBDIVISION: Burleigh Manor II LOT NUMBER: 708

ADDRESS: 10320 Castlefield Street PROPERTY OWNER: Ram Sriram

SEPTIC TANK CAPACITY (GALLONS):	<u>2000</u>	<i>Trenches 2' Wide Inlet 4' } Including Bottom 11' } Fill Dirt 115' + 125' Trenches</i>
PUMP CHAMBER CAPACITY (GALLONS):	<u>N/A</u>	
NUMBER OF BEDROOMS:	<u>6</u>	
SQUARE FEET PER BEDROOM:	_____	
LINEAR FEET OF TRENCH REQUIRED:	<u>240'</u>	

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at <u>6-7'</u> feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	<i>Install New Tank Farther Downhill With 4' or Less of Cover. Collapse Old Tank.</i>
PURPOSE:	Existing septic system has failed. Call for inspection when ground is opened so sanitarian can recommend repair.

PLANS APPROVED: B. Baker DATE: 4/1/08

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

NOT TO SCALE

See As-Built
Drawing on Separate
Sheet

TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
2'	3.5'-4'	10.5'-11'
NUMBER OF TRENCHES		2
TOTAL LENGTH		243'
ABSORPTION AREA		1033 x 2
DISTRIBUTION BOX LEVEL		Levelers
DISTRIBUTION BOX BAFFLE		Yes
DISTRIBUTION BOX PORT		Yes

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL	Yes
CAPACITY	2000 GAL
SEAM LOC	Top
TANK LID DEPTH	3'-4.5'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front + Rear
6" PORT LOC	None
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	N/A
CAPACITY	GAL
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	

2-Comp
Babylon
Traffic
Lid

4/24/08 No work done. (BB)

4/25/08 Half of bottom trench done. Gave O.K. to backfill trench when finished.

Heavy rain expected (BB) 4/30/08 System finished. (BB)

PRE-CONSTRUCTION 4/1/08 Lowest existing 100' trench looks dry.

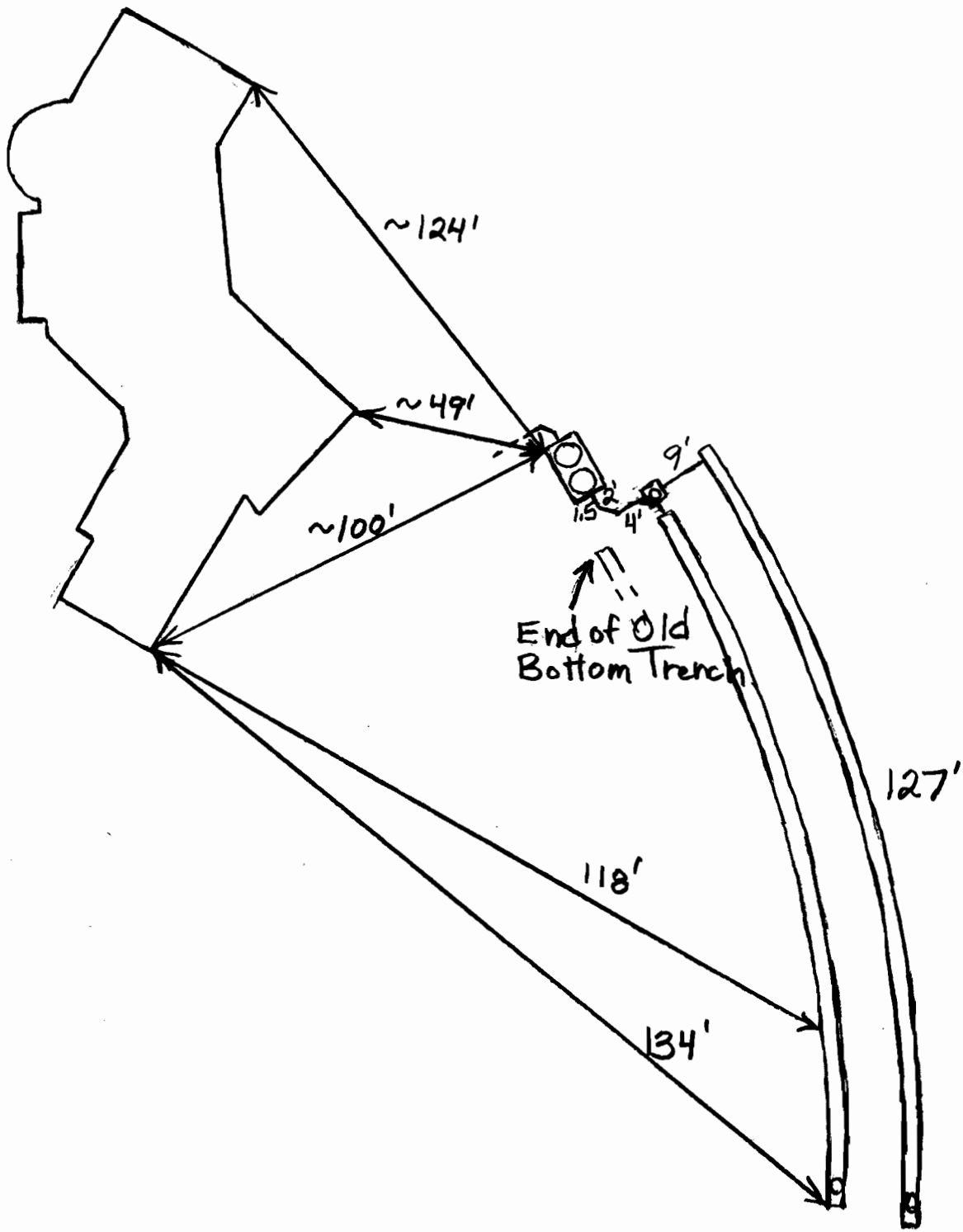
INSTALLATION Place distribution box in front of lowest trench and reconnect to it. Install a 115' trench below the existing bottom trench and a 125' trench below that. Keep trenches on contour as best possible.

(There is fill covering most of hill.) Run trenches towards the pine trees. Pump out and collapse existing tank and install new 2000 gallon tank. (BB)

4/22/08 Decided on approximate location of new tank. Tank should have traffic bearing lid. Tank depth will probably be 4'-5' deep. (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 4/30/08
4/23/08 Tank set and house connection made. Start of bottom trench is saturated. Unable to use. (BB)

NOT TO SCALE



SEPTIC SYSTEM REPAIR / UPGRADE / EVALUATION REQUEST

Please fill out this form completely and check off the reason for the request:

Date requested: _____

Reason for Request

Failing System (includes surface discharge or inadequate treatment zone)

Has the contractor verified through excavation/pumping evaluation, that there are no pipe blockages?

ex. tank is 11' deep

In support of a building permit. Type of building addition: _____

*System relocation for proposed addition for setback compliance _____

*Verification of adequate system capacity per COMAR 26.04.02.02D (4) _____

To replace collapsed septic tank or upgrade tank capacity _____

To replace collapsed drywell _____

Septic Contractor: Fogle's Septic Clean, Inc.

Contractor's Address: 580 Obrecht Rd

Sykesville, MD

Contractor's Phone #: 410 795-5670

Property Address: 10320 Castlefield St

Property (Subdivision) & Lot # _____

Owner's Name: Ram Sriram

Is public sewer available/nearby: _____

Names of Any Previous Owners: _____

Year House Built: 1996

of Existing Bedrooms: 6

of Bedrooms after completion of addition: _____

Has this request been discussed previously with a Sanitarian, who? _____

If public sewer is close, further research will be performed to verify availability and possible hook up to public sewer.

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling of the repair /upgrade/evaluation. No inspection will be performed without fee collection at the office.

Environmental Sanitarian tentatively assigned _____

4/30/90
7/23/90
anytime
8/9/90
11 AM

02-339986

PERMIT

P 45827
A 38537

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT _____
DATE 4/25/90

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE SYSTEM APPROVED 8-9-90
INSPECTOR JEN

INDEXED

Frall Septic Service IS PERMITTED TO INSTALL ALTER _____

ADDRESS P. O. Box 659, Mt. Airy, Maryland 21771 PHONE 795-5674

SUBDIVISION Burleigh Manor, Sec. II ROAD 10320 Castlefield St. LOT 708

PROPERTY OWNER Drs. Khatibi & Hubbard

ADDRESS _____

***** THIS IS A PERMIT TO INSTALL SEWAGE DISPOSAL SYSTEMS *****