**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.orgFacebook: www.facebook.com/hocohealth

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

RECEIPT DATE: 9/7/17**ONSITE SEWAGE DISPOSAL SYSTEM**P 561517

INSTALLATION

APPROVAL DATE: 9/12/17 (SEC)**PERMIT**

A _____

MINOR REPAIRPROPERTY ADDRESS: 3157 Emerald Valley Road

SUBDIVISION: _____

LOT: 2TAX ID: 03-287777CONTRACTOR: Pickles Services

EMAIL: _____

CONTRACTOR ADDRESS: 721 Hopes Mill Road, Taneytown, MD 21787PHONE: 301-514-7938PROPERTY OWNER: Matthew Gallagher

EMAIL: _____

OWNER ADDRESS: 3157 Emerald Valley Road, Ellicott City, MD 21042PHONE: 301-928-0998

NUMBER OF BEDROOMS: _____

SEPTIC TANK SIZE: _____

DRAINFIELD SIZE/TYPE: _____

LOCATION:	
NOTES:	

ISSUED BY: _____

Sarah Collins

ISSUE DATE: _____

9/11/17

EXPIRATION DATE: _____

9/11/18

NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING

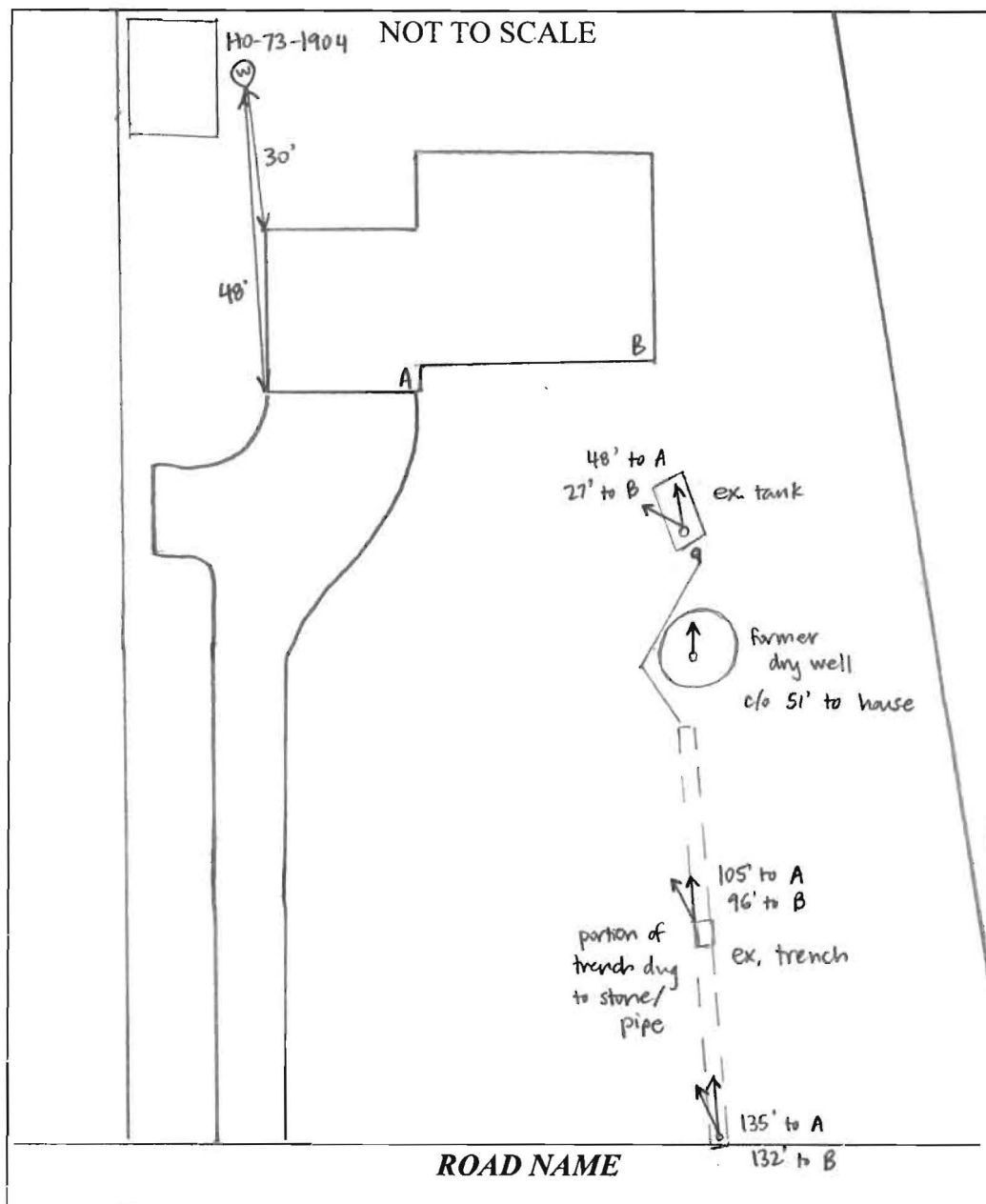
NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

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 FOR INSPECTION OF SEPTIC SYSTEM.



TRENCH/DRAINFIELD DATA

WIDTH	INLET	BOTTOM
2'	6'	13'

NUMBER OF TRENCHES 1

TOTAL LENGTH 72'

ABSORPTION AREA 144' + SIDEWALL

DISTRIBUTION BOX LEVEL ---

DISTRIBUTION BOX BAFFLE ---

DISTRIBUTION BOX PORT ---

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL EXISTING

MANUFACTURER ?

CAPACITY 1250 GAL

SEAM LOC MID?

TANK LID DEPTH 2.5'

BAFFLES YES

BAFFLE FILTER NO

MANHOLE LOC NONE

6" PORT LOC REAR

WATERTIGHT TEST ?

SLOTTED NO

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~~

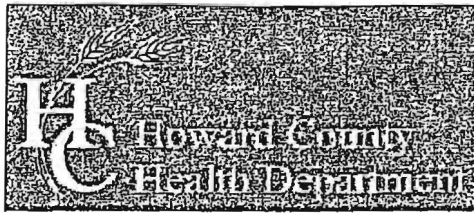
~~SLOTTED~~

~~DATE ON LID~~

PRE-CONSTRUCTION:

INSTALLATION: 9/11/17 Drywell uncovered, lid ~ 5' deep + liquid to top. Dug up area midway down trench. Found top of pipe @ 7', clean stone to 3' below that with probe. Dug up end of trench to 12' below stone completely dry. Contractor will pipe from tank to trench - checked elevations + fall from tank to trench is good. Install observation pipe @ end of trench. (SC) 9/12/17 Trench connected to tank. Observation port installed @ end of trench. New stone + filter cloth added to end of trench. filter cloth added to area where middle of trench uncovered. Drywell pumped. Contractor crushing lid while on site. (SC)

FINAL INSPECTOR Sarah Collins DATE OF APPROVAL 9/12/17



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Dr. 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 observations: _____
- ☒ No

Existing system design

- ☒ Drywell
- ☒ Trench
- ☐ Mound
- ☐ Unknown
- ☐ Other: _____

Was a visual inspection of the sewage line conducted?

- ☐ Yes
- ☐ Blockage leading to the tank
 - ☐ Yes. Explain: _____
 - ☐ No
- ☐ Blockage leading to the field
 - ☐ Yes Explain: _____
 - ☐ No

Is discharge surfacing on the ground?

- ☐ Yes
- ☒ No

Additional Comments: Filling drywell and
checking trench

*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 Regulation.

Septic Contractor: Pickles Services Inc. Contractor's Phone: 301.514.7938

Contractor's Address: 721 Hopes Mill Rd Taneytown MD 21787

Property Address: 3157 Emerald Valley Rd, Ellicott City County file: _____

Subdivision: _____ Lot: _____ Year Built: _____

Owner's Name: Matthew Gallagher Owner's Phone: 301-928-0998

Name of previous owners: _____ Existing bedrooms: _____

Proposed bedrooms: _____

Has this request been previously discussed with a Sanitarian? (Name): Jeff Williams

Public Sewer available/nearby: ?

*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 public sewer may be nearby, verify whether sewer is technically "available" through the Bureau of Engineering.

If sewer is available and the property is within the Metropolitan District, connection to sewer is required. If the owner believes reason for exemption exists, the owner should justify the request in writing.

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 situation exists. The contractor is to notify office of the emergency situation as soon as possible.