

LAYOUT 8/4/09 INSP 4 8/7/09
INSP 2 8/5/09 INSP 5 _____
INSP 3 8/6/09 INSP 6 _____

ISSUE DATE: 7/31/09

APPROVAL DATE: 8/20/09

PERMIT

In Pat Trac
Tax ID # 05358264

P 531862

A _____

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

Garland L. Bricker IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: _____ PHONE NUMBER: _____

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 8214 Reservoir Road (Barn) PROPERTY OWNER: Francisco Ward

SEPTIC TANK CAPACITY (GALLONS): 1000 OUTLET BAFFLE FILTER REQUIRED ☒

PUMP CHAMBER CAPACITY (GALLONS): _____ COMPARTMENTED TANK REQUIRED ☒

NUMBER OF BEDROOMS: N/A APPLICATION RATE: 1.2

SQUARE FOOTAGE OF HOUSE: N/A 2' Wide
Inlet 5', Bottom 7'

LINEAR FEET OF TRENCH REQUIRED: 92' 85'

TRENCHES:	Trenches to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 5.0 feet below grade. Effective area begins at 4.0 feet below original grade. 1.0 feet of stone below distribution pipe.
LOCATION:	At west side of barn locate septic tank per layout inspection. Install 2x 46' trenches with Distribution box in lowest portion of septic easement (defined by perc locations 3 and 4).
NOTES:	1.) Call for layout inspection. 2.) Gravel tickets must be available for Environmental Sanitarians. 3.) Existing plastic (unapproved) tank must be removed prior to Environmental Sanitarian approval of this installation. 4.) Attending Environmental Sanitarian must approve this installation prior to signature approval of installation of Hoot 600 or other such pre treatment unit at residence.

PLANS APPROVED: Robert Bricker DATE: 5/14/09

NOTE: PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

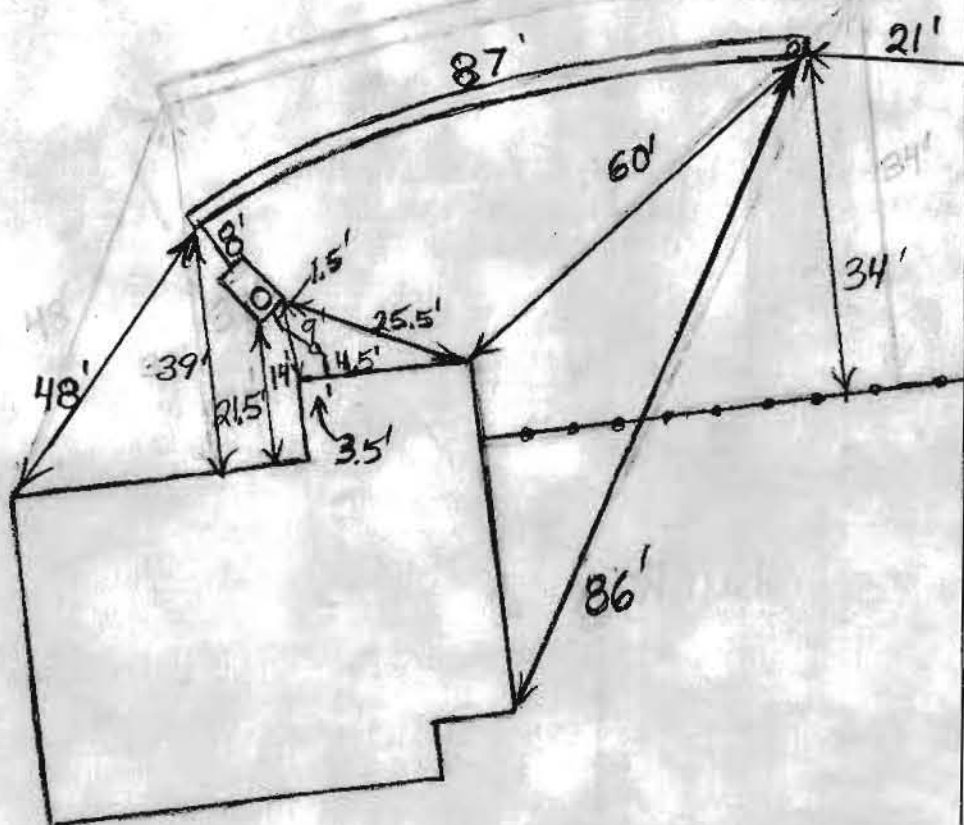
NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

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 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	5'	7'
NUMBER OF TRENCHES 1		
TOTAL LENGTH 87'		
ABSORPTION AREA 261		
DISTRIBUTION BOX LEVEL N/A		
DISTRIBUTION BOX BAFFLE N/A		
DISTRIBUTION BOX PORT N/A		

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
CAPACITY	1000 GAL
SEAM LOC	Top
TANK LID DEPTH	0.5'-1.5'
BAFFLES	Yes
BAFFLE FILTER	No
MANHOLE LOC	Front
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	

PRE-CONSTRUCTION 8/4/09 Trench specs changed because perc.
 test hole ① had clay down to 6'. New trench sized to
 INSTALLATION use same amount of gravel as original trench
 specs. Install an 85' trench on contour as close to
 the top of the easement as possible (BB) 8/5/09
 Trench installed (BB) 8/6/09 Trench installed (BB)
 8/7/09 Tank installed and connection made to barn.
 O.K. to backfill. Need manhole riser on tank (BB)
 8/20/09 Manhole riser installed (BB)

FINAL INSPECTOR B. Baker DATE OF APPROVAL 8/20/09

LAYOUT 8/4/09 INSP 4 _____
INSP 2 8/4/09 INSP 5 _____
INSP 3 8/6/09 INSP 6 _____

ISSUE DATE: 7/31/09 **PERMIT- HOOT H-600 BNR** P 531861
APPROVAL DATE: 8/18/09 **SEPTIC SYSTEM** A BRF
In Pat Trac
Tax ID # _____
ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

Garland L. Brian Sr. LLC. IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 12871 Highland Road PHONE NUMBER: 301-854-2161

SUBDIVISION: Tax Map 45, Parcel 44 LOT NUMBER: _____

ADDRESS: 8214 Reservoir Road (House) PROPERTY OWNER: Francisco Ward

HOOT SYSTEM BNR H-600 CAPACITY (GALLONS): 600gpd **Top Seamed Three Compartment Tank including Pump Tank**

PUMP CHAMBER CAPACITY (GALLONS): 750g

LOCATION:	Existing tank must be pumped and collapsed. Installation of new 'Hoot' System tank should be kept 100' from existing well or no closer than existing tanks.
NOTES:	A test of the blower, alarm, sensors in pump chamber, and the unit itself is required. Install Hoot system unit per manufacturer's instructions. A variance was approved to allow the tank depth to be a maximum of 5' deep.

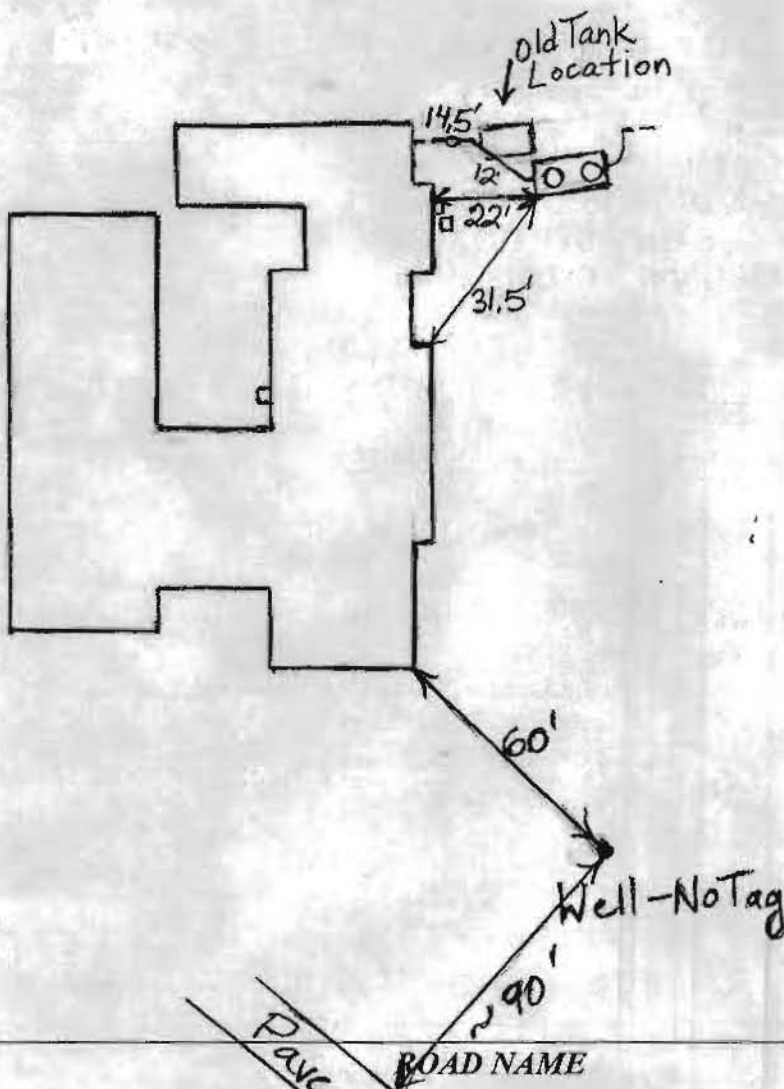
Note: * Certification start - up letter from manufacturer needs to be sent into Health Depart. Prior to septic system approval. *****

PLANS APPROVED: K. Wolf DATE: 7/31/09

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 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**

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 Yes
MANUFACTURER Mayer Bros
CAPACITY 2000+ GAL
SEAM LOC Top
TANK LID DEPTH 0.5-2'
BAFFLES Yes
BAFFLE FILTER No
MANHOLE LOC Front & Rear
6" PORT LOC None
WATERTIGHT TEST No
SLOTTED No
DATE ON LID 8/3/09

PUMP/SEPTIC TANK LEVEL N/A

MANUFACTURER _____
CAPACITY _____ GAL
SEAM LOC _____
TANK LID DEPTH _____
BAFFLES _____
BAFFLE FILTER _____
MANHOLE LOC _____
6" PORT LOC _____
WATERTIGHT TEST _____
SLOTTED _____
DATE ON LID _____

PRE-CONSTRUCTION:

8/4/09
No layout done.
HOOT tank set. (BB)

INSTALLATION: 8/6/09 Connections made between HOOT tank and house and from tank to existing pipe. Need start up certification from Mayer Bros. (BB)

8/18/09 Received certification from Mayer Brothers (BB)

FINAL INSPECTOR

B. Baker

DATE OF APPROVAL

8/18/09



Howard County
Health Department

Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson M.D., M.P.H., Health Officer

Bay Restoration Fund (BRF) Installation Questionnaire

Provide a scaled site plan with the following information. A house location survey is acceptable.

- The house footprint and any accessory structures
- Well location on the property and any neighboring wells within 100 foot of the property lines and any wells within 200 foot down grade from the septic system
- All septic systems on neighboring properties that are within 100 foot of the property lines or within 200 feet up grade from the well serving the property (records may be available from the Health Department; however, if records are not available the systems must be field located)
- Contour at two foot intervals is recommended and may be required for some installations

Will any components of the existing septic system be utilized with the proposed treatment unit? If so, are any of these components showing signs of failure? (Yes, No or N/A if the component is not part of the system)

- Septic tank No
- Pump chamber No
- Distribution box Yes
- Drainfields Yes Are there any signs of failure? No
- Drywell No Are there any signs of failure? No
- Mound system No Are there any signs of failure? No
- Other (Describe) No Are there any signs of failure? No
- If the existing system is showing signs of failure (i.e., it is backing up into the house, there is sewage surfacing in the yard, there is a unusual wet spongy area in the yard, etc.) then a complete septic system repair and percolation testing may be required.

If the existing septic tank or pump chamber is being utilized the tanks will need to be water tightness tested by the contractor/manufacturer or the pretreatment unit under supervision by the Health Department. Mid seam tanks must be replaced. Confirm that the tank baffles are functional. The pump chamber pumps and high water alarm will need to be tested after the installation.

If a new tank is required, are there site access restrictions? No

The contractor shall provide the following information in order to assure that the proposed installation will function properly. If an entire system is being installed, provide the waste line elevation at the point where the new system will be connected to the existing waste line. This information will be used to demonstrate that the installation will not be too deep.

- The manufacturer's recommended maximum depth of the proposed unit 3'
- Elevation of the connection to the existing waste line 2.5
- If a new waste line from the house to the system is to be installed, include the invert elevation at the house N/A

Invert elevations of the following:

(may be provided as depth below ground surface if contour is not provided)

- Septic tank inlet 2.5
- Septic tank outlet 3
- Distribution box 2
- Beginning of trench or drywell if there is not a distribution box N/A
- Depth to top of tank

- ❖ The existing distribution box or dry well must be exposed at the time of the pretreatment system installation in order to verify the existing system is functioning with the new unit.
- ❖ A system start-up certification from the manufacturer must be sent to the Health Department.
- ❖ All system installations are site specific and additional information may be required.

Form completed by Garland Brian Date 7/31/09

Phone # 301-854-2161 Print Name

RECEIVED

MAR 26 2008

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH

Sale

2 Permits
- this one
- one for
Foot
Unit

Please
Note

These
requirements
↓