

LAYOUT 1/5/04 12:30 INSP 4 _____

INSP 2 _____ INSP 5 _____

INSP 3 _____ INSP 6 _____

ISSUE DATE: 12/11/03P 519695

APPROVAL DATE: _____

A 517436

PERMIT

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

Southern Kraft Builders IS PERMITTED TO INSTALL ☒ ALTER ☐ADDRESS: 8899 Frederick Road PHONE NUMBER: 410-203-1717

SUBDIVISION: _____

ADDRESS: 1720 Saint Michaels Road PROPERTY OWNER: Chris TiedeSEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED ☐PUMP CHAMBER CAPACITY (GALLONS): 1250 COMPARTMENTED TANK REQUIRED ☐NUMBER OF BEDROOMS: 4

LOCATION:	Sand mound to be installed. Install as per plan. Mound site should be staked.
NOTES:	Both sand mound sites are to be staked. Mound is to be installed from both ends. Limit traffic on upslope and down slope mound areas. Stay off of reserve mound site.

PLANS APPROVED: John Boris DATE: 12/24/03

NOTES: PERMIT VOID AFTER 2 YEARS

CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

WATERTIGHT SEPTIC TANKS REQUIRED

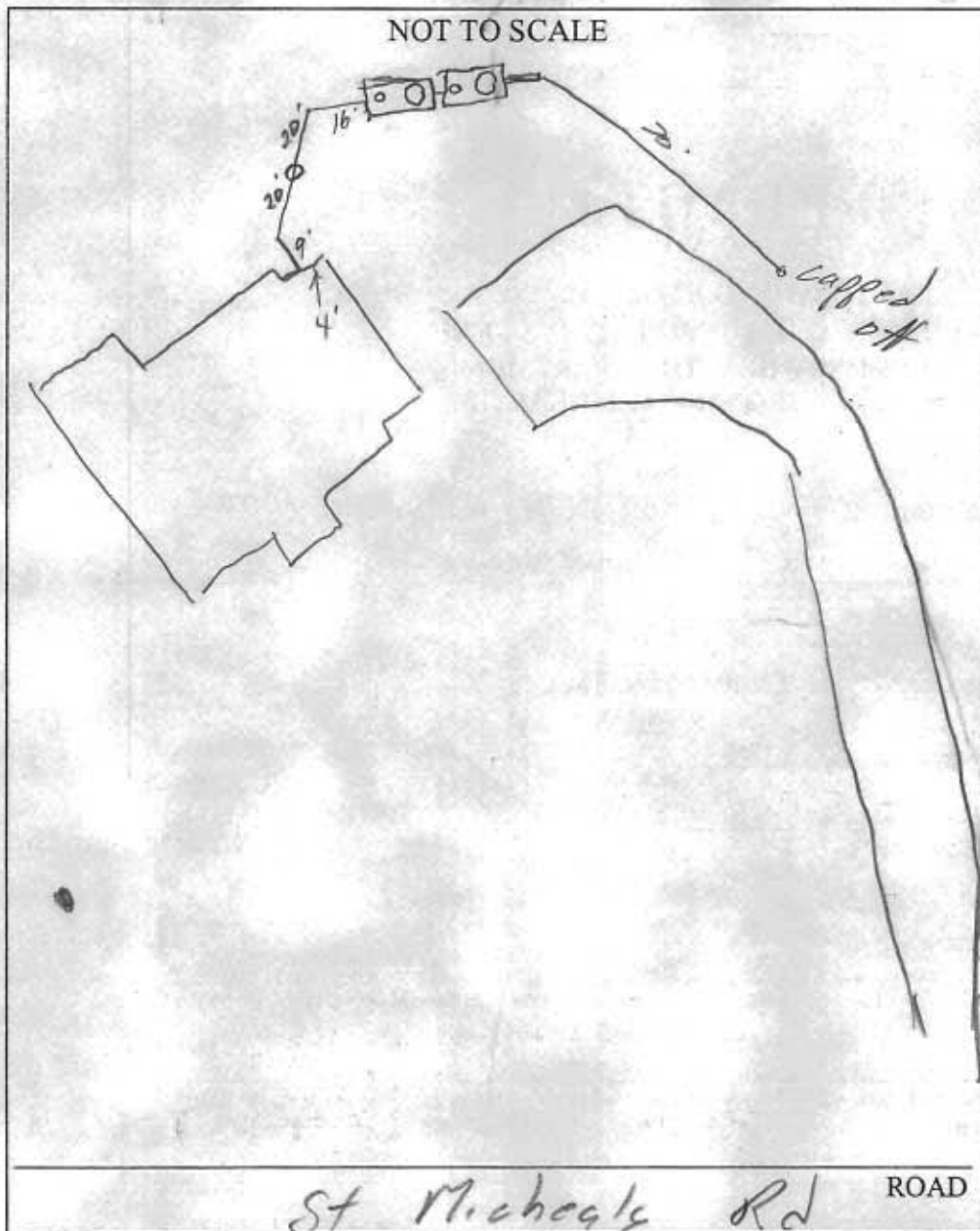
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED

MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**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
ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

Separate lot for S-27th



SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL ☒

CAPACITY 1500 GAL

SEAM LOC Top

TANK LID DEPTH 1'

BAFFLES ☒

BAFFLE FILTER —

MANHOLE LOC Back

6" PORT LOC Center

WATERTIGHT TEST —

SEPTIC TANK 2 LEVEL ☒

CAPACITY 1500 GAL

SEAM LOC Top

TANK LID DEPTH 1'

BAFFLES ☒

BAFFLE FILTER —

MANHOLE LOC Back

6" PORT LOC Front

WATERTIGHT TEST —

PRE-CONSTRUCTION 1/5/03 - Tanks set OK to cover. w/1/ need alarm test before ICOP (50)

INSTALLATION _____

FINAL INSPECTOR _____ DATE OF APPROVAL _____

LAYOUT 11/15/04 INSP 4 _____
INSP 2 10/15/07 - 1:30 INSP 5 _____
INSP 3 3/8/06 INSP 6 _____

ISSUE DATE: 12/11/03

PERMIT

P 519695

APPROVAL DATE: 3/8/06

A 517436

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MD 21043**

Southern Kraft Builders IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS: 8899 Frederick Road PHONE NUMBER: 410-203-1717

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 1720 Saint Michaels Road PROPERTY OWNER: Chris Tiede

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED ☐

PUMP CHAMBER CAPACITY (GALLONS): 1250 COMPARTMENTED TANK REQUIRED ☐

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 240

LINEAR FEET OF TRENCH REQUIRED: 198 HOUSE SERVED BY PUBLIC WATER ☐

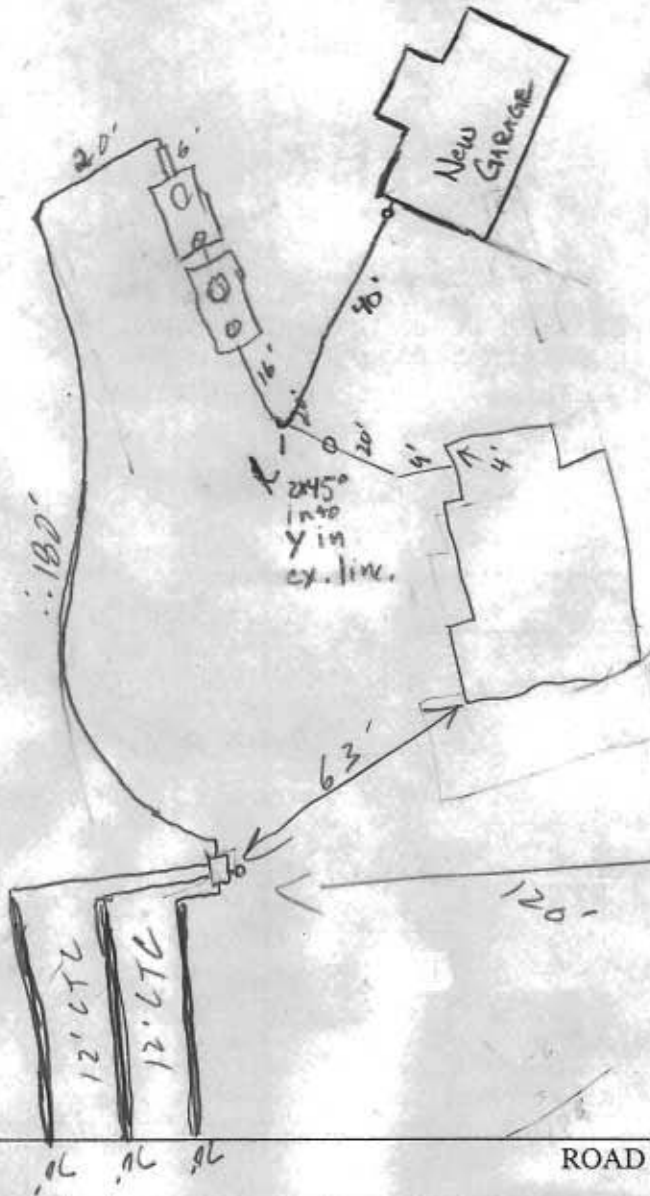
TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 6.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	See the plan for location.
NOTES:	System to be placed on the S.W. side of the lot. Use existing tank and pump pit.

PLANS APPROVED: John A. Boris DATE: 6/14/04

NOTES: PERMIT VOID AFTER 2 YEARS
CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
WATERTIGHT SEPTIC TANKS REQUIRED
ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**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
DO NOT LEAVE ANY REQUEST FOR INSPECTION ON VOICEMAIL**

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3'	3'	8'
NUMBER OF TRENCHES		3
TOTAL LENGTH		210'
ABSORPTION AREA		840 ^{sq} ft
DISTRIBUTION BOX LEVEL		✓
DISTRIBUTION BOX BAFFLE		✓
DISTRIBUTION BOX PORT		✓

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	
CAPACITY	1500 [?] GAL
SEAM LOC	Top [?]
TANK LID DEPTH	1-2'
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	
SEPTIC TANK 2 LEVEL	
CAPACITY	1500 [?] GAL
SEAM LOC	Top [?]
TANK LID DEPTH	1-2'
BAFFLES	YES
BAFFLE FILTER	
MANHOLE LOC	Out
6" PORT LOC	In
WATERTIGHT TEST	N/A

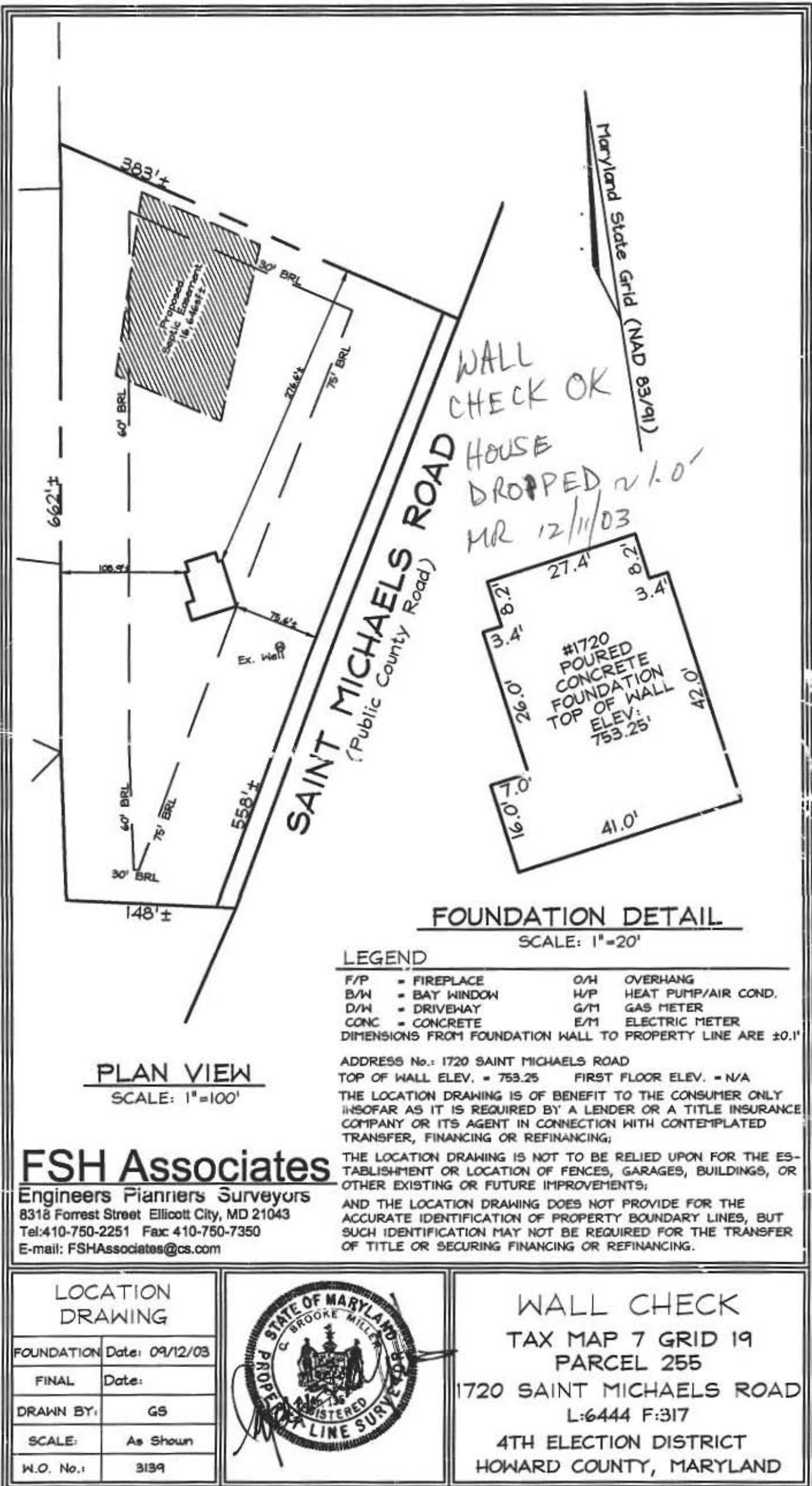
PRE-CONSTRUCTION 1/5/03 - Initial tank install, See attached sheet. (SC) Repave for conv. system

INSTALLATION 10/19/04 - Trenches installed per specs. OK to cover all work. Pump & Alarm tests needed (SC)

3/8/06 GARAGE CONNECTED AND Pump & Alarm test done. (GAC)

Old well (pit?) brought up to specs. (Inspection?) casing raised pitless installed...

FINAL INSPECTOR Richard A. Wright DATE OF APPROVAL 3/8/06



CONSENT AGREEMENT FOR USE OF A TEMPORARY HOLDING TANKS
FOR THE CONSTRUCTION OF A SAND MOUND SEWAGE DISPOSAL SYSTEM

THIS AGREEMENT made this 29th day of December, 2003,
by and between Chris Tiede HEREINAFTER REFERRED TO
AS Owner, and the Howard County Bureau of Environmental Health, HEREINAFTER
REFERRED TO AS the Bureau.

WHEREAS, Owner is seized and possessed of a tract of land at
1720 St. Michaels Rd, known as Tax Map
2, Parcel 255, Block 19, the deed to same being recorded
among the land records of Howard County, Maryland in Liber 6444, Folio 317

WHEREAS, the Howard County Bureau of Environmental Health and the owner
agree to permit the Use & Occupancy of the house to be serviced by the Sand
Mound System, whose plans are approved by this office;

WHEREAS, when the Owner's land meets requirements of COMAR 26.04.02 for
installation of a holding tank. NOW THEREFORE, the parties hereto agree as
follows:

- A. Weather permits it's installation, and at such time requiring the
Health Department's inspection
- B. The Owner will install a holding tank(s) consistent with the design
approved and permitted by the Bureau and follow the relevant provisions
of COMAR 26.04. in regards to holding tank operation.
- C. Owner agrees to insure reasonable access to the property and system
by the Bureau as well as to provide any information requested by the
Bureau to assure proper operation and maintenance of the holding tank(s).
- D. Owner agrees that there shall be no liability on the part of the
County or Bureau to the Owner if the holding tank(s) is not properly
maintained during the temporary use.
- E. Owner acknowledges and agrees that neither the Bureau nor any of its
agents or employees, either officially or individually, underwrites the
operation of the holding tank(s) and it is understood that the holding
tank(s) is a last resort method to correct existing sewage disposal
problems on the property.
- F. The Owner will devote such care and effort to the maintenance of the
holding tank(s) so that it shall not malfunction and cause pollution
at the ground surface, the waters of the state, or create a nuisance.
- G. The Owner agrees that he shall not alter or tamper with the holding
tank(s) in any way that would cause it to malfunction or change it from
its intended purpose of sewage storage with the sewage disposal being
accomplished by a scavenger.

20
20
K

H. The Owner agrees that, should the holding tank(s) be determined to pose a threat to the public health, safety or comfort, the Bureau may order any necessary changes or corrections for which the Owner agrees to pay. System modification may include requirements for additional tanks and/or more frequent pumping of the holding tank(s).

I. The Owner understands that if violations occur from failure to maintain the holding tank(s) properly; the Bureau may take legal action to insure compliance.

J. The Owner shall contact the Howard County Bureau of Environmental Health at least 24 hours prior to system completion so that the Bureau may inspect the system in the field with the installer. The Owner further agrees that this system will be installed according to the plans and specifications approved by the Bureau and any changes determined to be necessary by the Bureau as a result of reviewing the field conditions.

K. This agreement shall run until the approved Sand Mound System is installed, this agreement will become void once the Sand Mound System has been installed and then approved by HCHD.

L. Owner agrees to record this agreement in the land records of Howard County and assure that it becomes part of the Deed for the subject property in order that prospective buyers may be made aware of the special conditions affecting this property. This agreement shall not be construed to limit any authority of the Bureau to protect the public health, safety or comfort or to issue any other orders or take any other action, which is now or may hereinafter be within its authority.

M. Owner certifies that he has obtained a cost estimate and is financially capable of having the sewage removed from the holding tank(s) by a permitted sewage waste hauler on a regular basis so that the holding tank(s) never overflows. The Owner further agrees to enter into and maintain a written service contract which will be renewed annually with any permitted scavenger and will forward a copy to the Bureau prior to the approval of the permit for the holding tank(s) installation and annually thereafter.

N. The approval of a holding tank system provided for in this agreement is only for an interim period weather conditions permit the installation of a sand mound type septic system.

O. The Owner shall provide notice of continuous pumping of the tank(s) by a licensed scavenger as evidenced by submitting copies of pumping receipts to the Bureau on a quarterly basis.

WITNESS, the hand and seal of the parties hereto.

DATE: _____
OWNER: _____

DATE: _____
OWNER: _____

DATE: 12/28/03
OWNER: [Signature]
Christian P. Tiede

DATE: 12/24/03
OWNER: [Signature]
John Boris Environmental Health

Sanitarian, Howard County
Bureau of Environmental Health

DATE: 01-06-04
OWNER: [Signature]

Director, Howard County
Bureau of Environmental Health

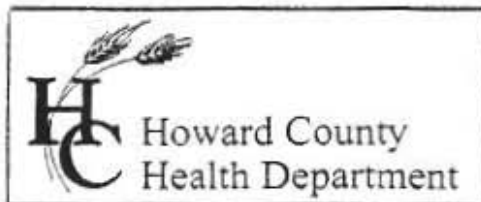
Circuit Court for
HOWARD COUNTY
Clerk of the Court,
MARGARET D. RAPPAPORT
8360 COURT AVENUE
ELLCOTT CITY, MD 21043-
(410) 313-2111

Transaction Block:	8819
Ref: 390	
AGREEMENT	AMOUNT
IMP FD SURE \$5	20.00
RECORDING FEE \$20.00	20.00
SUBTOTAL:	40.00
TOTAL CHARGES:	40.00
PAYMENTS	
CASH	50.00
TOTAL TENDERED:	50.00
CHANGE:	10.00

Cashier: SF Reg # H082
Rcpt # 53998
Date: Dec 29, 2003 Time: 12:03 pm

L18ER 07948 FOLIO 607

IMP FD SURE \$	28.00
RECORDING FEE	20.00
TOTAL	48.00
Reg# HD02	Rcpt # 53998
MDR BF	Blk # 8819
Dec 29, 2003	12:03 PM



3525 H Ellicott Mills Drive, Ellicott City, MD 21043
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

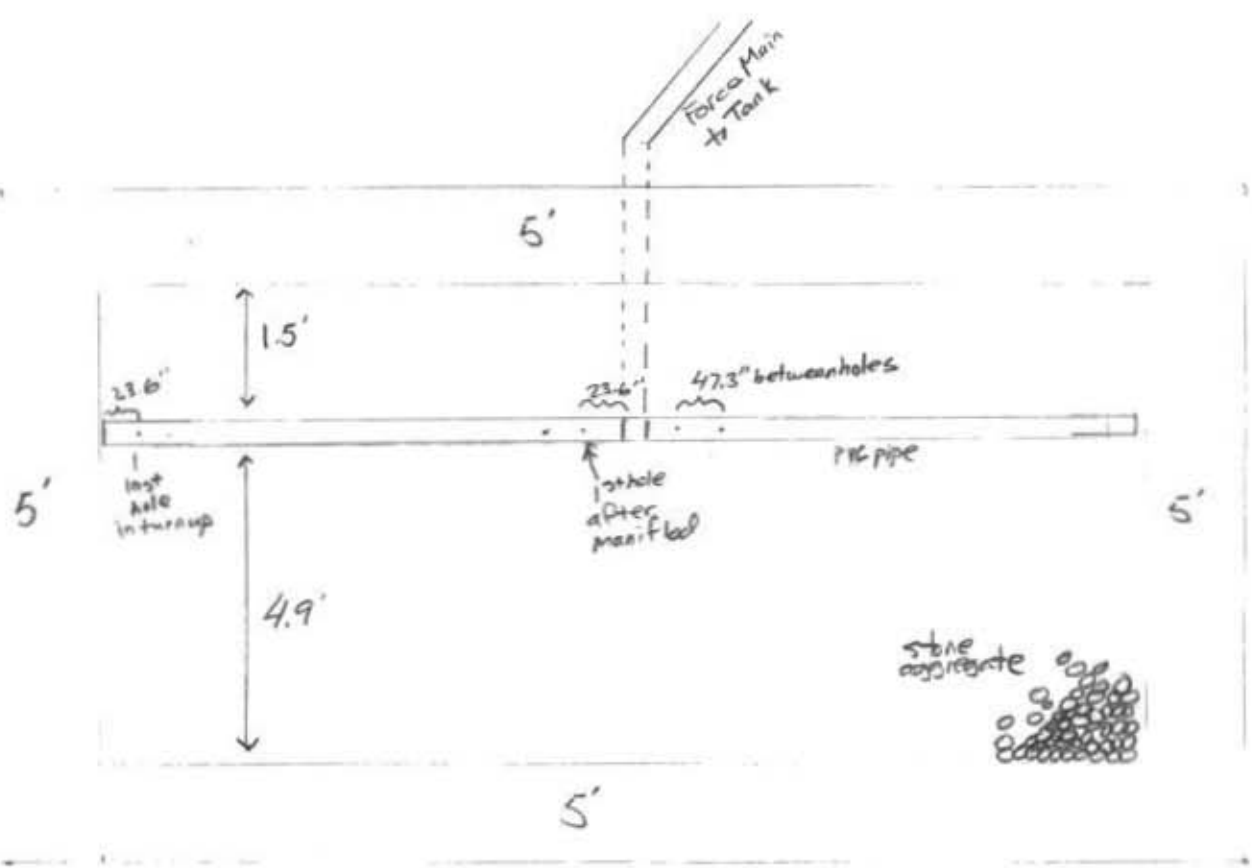
Piping Distribution Design

The following pipe distribution design must be represented in a plan view format to assist the contractor during the installation. The applicants engineer must also show all associated pipe runs, inverts, and an accurate pump curve on the plan as well. The piping network should be displayed as follows:

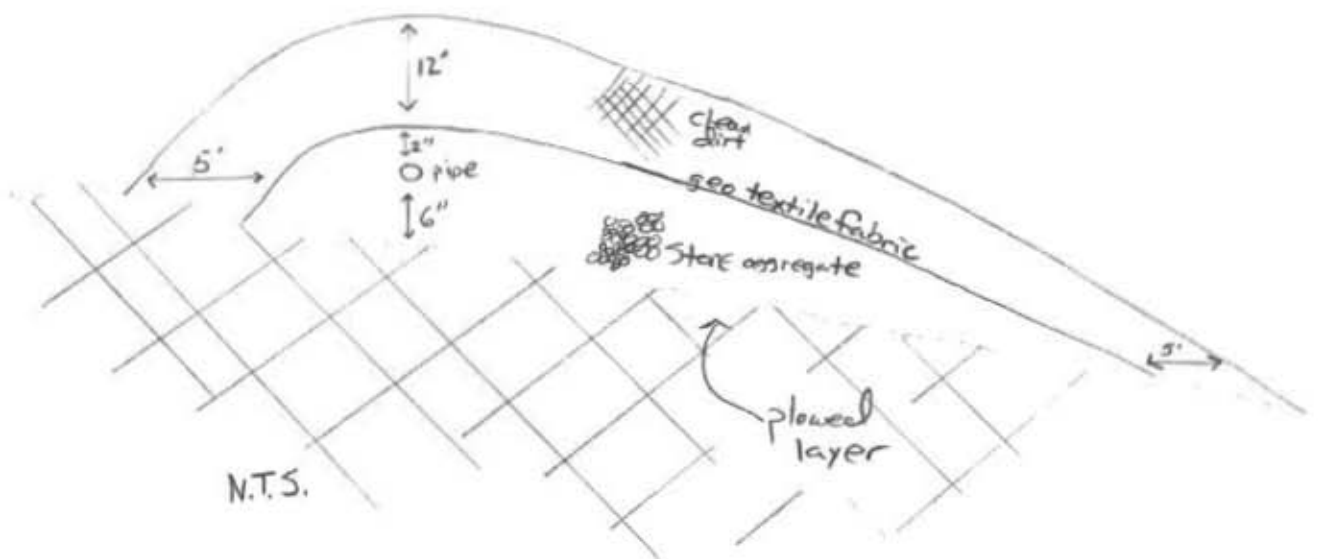
DIAMETER OF FORCE MAIN:	DETERMINE AT PLAN DESIGN STAGE
MOUND BASAL AREA	16.6' X 170'
BED LENGTH AND WIDTH:	6.6' X 150'
DEPTH OF GRAVEL BED:	6" AT THE SURFACE
DEPTH OF PIPING NETWORK:	6" ABOVE GRADE
TYPE OF LATERAL FEED:	CENTER
TOTAL NUMBER OF LATERALS:	2
LATERAL DIAMETER:	2"
LENGTH OF LATERALS:	75'
1 ST HOLE FROM MANIFOLD:	2.36' or 28.3"
NUMBER OF HOLES PER LATERAL:	16
DIAMETER OF HOLES PER LATERAL:	5/16"
SEPERATION BETWEEN HOLES:	3.94' or 47.3"
DISTAL END TURN UP:	2.36' or 28.3" from the end of bed

Pump chosen must be able to pump at least 2' of head at distal end.

If additional clarification is required please consult an engineer with experience designing sand mounds. Although this is an at-grade system, the design specifications are similar to a conventional mound without the sand. Please review the supplied rough diagram to assist you in the plan design and refer to the MDE sand mound design manual for minimum dosing volume and pump float elevation settings.



N.T.S.



N.T.S.



HOWARD COUNTY HEALTH DEPARTMENT

PS 19695

DATE
12/11/03

Received From Christian P. Teeda

443277-2170

6760 Danner Rd., Clarksdale MD 21029

☐ CASH
☒ CHECK

For SEPTIC PERMIT - NEW HOUSE

1720 St Michaels

NO.

J63

One Hundred Eighty and 00 Dollars

\$

180 | 00

Received By Mary L. Biggs

**MARYLAND DEPT. OF THE ENVIRONMENT
ONSITE SEWAGE DISPOSAL SYSTEM**

SITE EVALUATION REPORT	Soil Survey Map Unit
SOIL PROFILE DESCRIPTION	Symbol; Name;

SOIL PROFILE DESCRIPTION

FILE NO.

MD. GRID:

TAX MAP/IB/P:

MOBENS

DATE:

BY:

DEPTH	TEXTURE
-------	---------

inches

HOLE	DATE	TP /
1	10/10/10	10
2	10/10/10	10
3	10/10/10	10
4	10/10/10	10
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6	10/10/10	10
7	10/10/10	10
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100	10/10/10	10

			.	dork
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0-5	15	brown
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11	14	11	11
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5-8	511	brown	2m 50K	mutr
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[illegible]

8-16	5/1	600V	2MSK	mvtr
------	-----	------	------	------

D-3

Comparison to map unit -
Recommended LLR of 3.6 for 2nd grade system
to 4.0

**ASSOCIATED EXCAVATORS CONTRACTORS
16657 FREDERICK ROAD
MT. AIRY, MD 21771
(410) 442-1886 FAX (410) 442-0100**

September 10, 2002

Howard County Health Department
3525-H Ellicott Mills Drive
Ellicott City, MD 21043

To Whom It May Concern:

This letter is to inform you that my company performed the abandonment of a septic tank located at 1720 St. Michael's Road on September 10, 2002.

If you have any questions please call me at (410) 977.2216.

Thank you,



Mike Johnson

Cc: John Boris, Howard County Health Department



HOWARD COUNTY HEALTH DEPARTMENT

Bureau of Environmental Health
3525-H Ellicott Mills Drive, Ellicott City, Maryland 21043-4544
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-877-4MD-DHMH

Penny E. Borenstein, M.D., M.P.H., Howard County Health Officer

FAX TRANSMISSION

DATE: 9/17/02 Pages Sent (Including cover) 2
TO: Nicole Tiddy
Fax Number: (410) 750 8637 Phone Number: _____

FROM: John Bercz
Fax Number: _____ Phone Number: _____

COMMENTS:

Nicole,
Here is your memo for the razing of
the house at 1720 St. Michaels Rd.

FILE INQUIRY FORM

Property Address: 1720 St. Michaels Rd

Owner signed + recorded a temporary holding tank w/ the intent that when the ground is dry that the at-grade manhole can be installed. O.K. to issue U+O under the condition that the at-grade system will be installed at a later date.

2/25/04 *js*

SEPTIC SPECIFICATIONS WORKSHEET

SUBDIVISION: _____
 STREET NAME: St. Michaels Rd LOT NUMBER: _____
 AVERAGE PERCOLATION RATE: 18 SQUARE FEET PER BEDROOM: 240
 NUMBER OF BEDROOMS: 4 LINEAR FEET OF TRENCH PER BEDROOM: 49.5
 TOTAL LINEAR FEET OF TRENCH: 198 SEPTIC TANK CAPACITY: 1250
 TOP SEAMED TANK REQUIRED? YES OR NO COMPARTMENTED TANK REQUIRED? YES OR NO

TRENCH DIMENSIONS: Trench to be 3 feet wide. Inlet 4 feet below original grade.
 Bottom maximum depth 8 feet below original grade. Effective area begins at 6 feet
 below original grade. 4 feet of stone below distribution pipe.

PUMPED SYSTEM PROPOSED: YES OR NO

Pumped Septic System Detail: 1250 gallon(s) pump chamber.

Top Seamed Pump Chamber Required? YES OR NO

Note 1: Septic pump detail to be provided by installer prior to issuance of septic permit.

Note 2: Pump performance test is necessary prior to Health Department approval of pump septic system.

LOCATION: See plan for location. ~~XX~~

ADDITIONAL NOTES: System to be placed on the SW side
of the lot. Use existing tank and pump pit

Reviewer: JH

Date: 6/14/04