**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: 11/19/15**ONSITE SEWAGE DISPOSAL SYSTEM**P 557464

APPROVAL DATE: _____

PERMIT:**REPAIR**

A _____

PROPERTY ADDRESS: 2814 Shadow Roll CourtSUBDIVISION: Glenwood SpringsLOT: 36TAX ID: 04-346815CONTRACTOR: Fogle's Septic Clean Inc.EMAIL: kevin@foglesinc.comCONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784PHONE: 410-795-5670PROPERTY OWNER: Robert and Diane Altieri

EMAIL: _____

OWNER ADDRESS: 2814 Shadow Roll CourtPHONE: 410-707-5733

SEPTIC TANK SIZE (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

PUMP SIZE: _____

NUMBER OF BEDROOMS: _____

HOUSE SQ. FT. _____

APPLICATION RATE: _____

DISTRIBUTION SYSTEM: GRAVITY FED ☐LOW PRESSURE DOSED ☐

TRENCHES:	LINEAR FEET REQUIRED: _____	INLET DEPTH: _____
	TRENCH WIDTH: _____	MAXIMUM BOTTOM DEPTH: _____
	MINIMUM SPACE BETWEEN TRENCHES: _____	EFFECTIVE AREA BEGINNING DEPTH: _____
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:		

ISSUED BY: _____

ISSUE DATE: _____

EXPIRATION DATE: _____

NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION**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 _____

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: 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.**

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 _____

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 _____

ROAD NAME

PRE-CONSTRUCTION:

12/3/2015 Talked to homeowner at residence.
She said that basement water was caused by
malfunctioning sump pump and not septic system.
Perc. testing cancelled. Fogles didn't call or show
up. (BB)

INSTALLATION: _____

FINAL INSPECTOR _____ DATE OF APPROVAL _____

Family Owned Business Since 1978

580 Obrecht Rd.
Sykesville, MD 21784



410-795-5670
Fax: 410-795-3432
www.foglesinc.com

Howard County Health Department
8930 Stanford Boulevard,
Columbia, Md 21045

ref: 2814 Shadow Roll Ct

September 21, 2009

To whom it may concern,

Fogle's Septic is requesting a refund for a septic permit, for a repair, in the amount of \$330.00. The homeowner cancelled because she thinks it is a sump pump problem and not a septic issue, so I would like to cancel this permit, receipt #57464. There was another permit that was paid on that receipt for Homewood Crossing lot #46 that is still good. If you have any other question please call me at 410-795-5670

Sincerely,

A handwritten signature in black ink, appearing to read "Kim Fogle", is written over the word "Sincerely," and the printed name "Kim Fogle".

Kim Fogle

Call Us For All Your Septic Needs



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Twitter: HowardCoHealthDep

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

MEMORANDUM

TO: Marian Curry

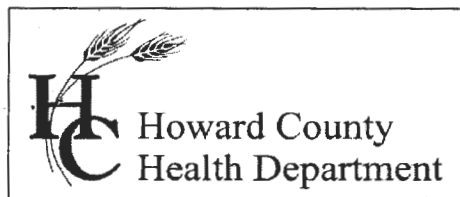
FROM: Jeff Williams *[Signature]*

RE: Refund, receipt # 57464, refunding \$330 for a repair perc test application and repair septic permit application at 2814 Shadow Roll Court

DATE: December 14, 2015

Please submit the paperwork for a refund of \$330 to Fogles Septic Clean, who paid \$330 for a repair perc test application and repair septic permit at 2814 Shadow Roll Court as part of receipt #57464.

Fogles paid for the applications, but it was subsequently discovered by the homeowner that the septic system was not malfunctioning and did not require a repair. The Health Department did not conduct any perc tests and no work requiring a septic permit was performed.



Bureau of Environmental Health
7178 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

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

December 15 , 2015

To Whom It May Concern:

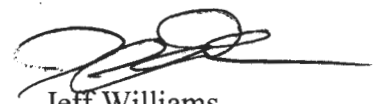
Fogles Septic Clean paid for a repair perc application , in the Amount of \$330.00 (check #51637); Fogles Septic Clean later discovered that the system was not malfunctioning and did not require a repair. Fogles Septic Clean is requesting \$330.000 refund – (receipt #57464). If you have any other questions please call Jeff Williams at 410-313-4261.

Mail Check To
Fogles Septic Clean
580 Obrecht Rd.
Sykesville , MD 21784

#57464 11/19//2015 written by: Sharhonda Martin
#88497 11/25/2015 written by: Willie Sims

Thanks in advance,

Juanita King ext: 4251



Jeff Williams
Well & Septic Supervisor



Howard County
Health Department

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SUBDIVISION: Glenwood Springs

LOT: 36

TAX ID: 04-346815

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BAFFLE FILTER _____

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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 _____

ROAD NAME

PRE-CONSTRUCTION:

INSTALLATION:

FINAL INSPECTOR _____ DATE OF APPROVAL _____

Howard County Health Department

Bureau of Environmental Health, Ellicott City, Maryland 410-313-2640

SEWAGE DISPOSAL PERMIT NO. A-_____ P- 557464

PERMITTEE

Fogles Septic Clean Inc

LOCATION

2814 Shadow Roll Court Glenwood Springs Lot 36
Robert and Diane Altieri

Do Not Cover Work Until Health Department Approval Appears On This Card

POST THIS CARD WHERE IT CAN BE SEEN FROM ROAD

☐

STOP ALL CONSTRUCTION ON SEWAGE
DISPOSAL SYSTEM AND CONTACT HEALTH
DEPARTMENT BEFORE CONTINUING

☐

WORK IS SATISFACTORY,
CONTINUE

Inspector

Date

Inspector

Date

☐

FINAL INSPECTION MADE,
COVER ALL WORK

Inspector

Date