the dive	Bureau of Environmental Health			
TT	8930 Stanford Boulevard, Columbia, MD 21045 Main: 410-313-2640 Fax: 410-313-2648			
Howard County	TDD 410-313-2323 Toll Free 1-866-313-6300 www.hchealth.org			
Health Department		acebook.com/hocohe	ealth	
	Maura J. Rossman, M.D., Health Officer			
	NSITE SEWAGE DISPOSAL SYSTE	M P	557464	
APPROVAL DATE:	PERMIT: REPAIR	А		
PROPERTY ADDRESS: 2814 Shadow	Roll Court			
SUBDIVISION: Glenwood Springs	LOT:	36 TAX ID:	04-346815	
CONTRACTOR: Fogle's Septic Clea	n Inc. EMAIL:	kevin@foglesinc	.com	
CONTRACTOR ADDRESS: 580 Obre	ht Road, Sykesville, MD 21784	PHONE:	410-795-5670	
PROPERTY OWNER: Robert and Dia	ne Altieri EMAIL:			
OWNER ADDRESS: 2814 Shadow R	oll Court	PHONE:	410-707-5733	
SEPTIC TANK SIZE (GALLONS):	PUMP CHAMBER CAPACITY (GALLONS):	F		
	HOUSE SQ. FT.		ATE:	
DISTRIBUTION SYSTEM: GRAVITY	ED LOW PRESSURE DOSED]		
LINEAR FEET REQUIRED:		INLET DEPTH:		
TRENCHES: TRENCH WIDTH:	MAXIMUM	BOTTOM DEPTH:		
MINIMUM SPACE	EFFECTIVE AREA BI			
	RIAN DURING PRE-CONSTRUCTION INSPECTION.			
LOCATION: TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.				
NOTES:				
ISSUED BY:	ISSUE DATE:	EXPIRATION D	ATE:	
	A PRE-CONSTRUCTION INSPECTION PRIOR TO BE	_		
NOTE: CONTRACTOR MUST SCHEDULE	AN INSPECTION AND GAIN APPROVAL OF ALL COM	PONENTS PRIOR T	O COVERING	
	HEALTH DEPARTMENT AND GRAVEL TICKET MUST	BE AVAILABLE FOR	REVIEW.	
NOTE: WATERTIGHT SEPTIC TANKS RE	QUIRED IALL BE AT LEAST 100 FEET DOWNGRADIENT FRON	ANY WATER WEL	L	
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				
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 ACKOWLEDGE 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				
GUIADNCE. NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE				
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NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE				
	SUCCESSFUL OPERATION OF ANY SYSTEM		417	
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT. CALL 410-313-1771 TO SCHEDULE INSPECTIONS.				
CA	EL 410-313-1771 LO SCHEDOLE INSPECTIO			

NOT TO SCALE	TRENCH/DRAINFIELD DATA WIDTH INLET BOTTOM
	NUMBER OF TRENCHES
	TOTAL LENGTH
	ABSORPTION AREA
	DISTRIBUTION BOX LEVEL
	DISTRIBUTION BOX BAFFLE
	DISTRIBUTION BOX DATTLE
	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
	CAPACITYGAL SEAM LOC
	TANK LID DEPTH
	BAFFLES
	BAFFLE FILTER
	MANHOLE LOC
	6" PORT LOC
	WATERTIGHT TEST
	SLOTTED
ROAD NAME	DATE ON LID
PRE-CONSTRUCTION: 12/3/2015 Valked to homeowner She said that basement water, malfunctioning sump pump and	at residence. was caused by
Part toting wing pring winn	't all as a have
And BR	r can oc grow
INSTALLATION:	
INSTALLATION:	
INSTALLATION:	
INSTALLATION:	
INSTALLATION:	

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,

Call Us For All Your Septic Needs



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.org Facebook: www.facebook.com/hocohealth Twitter: HowardCoHealthDep

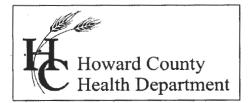
Maura J. Rossman, M.D., Health Officer

MEMORANDUM

TO:	Marian Curry
FROM:	Jeff Williams
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.



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 C Health De	epartment	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.org Facebook: www.facebook.com/hocohealth Maura J. Rossman, M.D., Health Officer			
RECEIPT DATE: 11/		GE DISPOSAL SYSTI	EM P	557464	
APPROVAL DATE:	PERMIT:	REPAIR	А		
	2814 Shadow Roll Court				
SUBDIVISION: Glenw	ood Springs	LOT:	36 TAX ID:	04-346815	
	's Septic Clean Inc.				
	: 580 Obrecht Road, Sykesvil				
PROPERTY OWNER:	obert and Diane Altieri	EMAIL:			
OWNER ADDRESS: 28	14 Shadow Roll Court		PHONE:	410-707-5733	
SEPTIC TANK SIZE (GALLON	NS): PUMP CHA			PUMP SIZE:	
NUMBER OF BEDROOM	S: HOUSE	SQ. FT.	APPLICATION R	ATE:	
DISTRIBUTION SYSTEM:	_	OW PRESSURE DOSED			
LINEAR FE	EET REQUIRED:		INLET DEPTH:		
TRENCHES: TF	RENCH WIDTH:	MAXIMU	M BOTTOM DEPTH:		
MI	NIMUM SPACE EN TRENCHES:				
	KED BY SANITARIAN DURING PRE-				
LOCATION: TO BE STA			•		
NOTES:					
ISSUED BY:	IS	SUE DATE:	EXPIRATION D	ATE:	
NOTE: CONTRACTOR M	UST SCHEDULE A PRE-CONSTRUCT	ION INSPECTION PRIOR TO B	EGINNING ANY INST	TALLATION	
	UST SCHEDULE AN INSPECTION AN				
	APPROVED BY HEALTH DEPARTME	NT AND GRAVEL TICKET MUS	T BE AVAILABLE FOR	REVIEW.	
	PTIC TANKS REQUIRED PTIC SYSTEM SHALL BE AT LEAST 10	0 FEET DOWNGRADIENT FRO		L	
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					
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CALL 410-313-1771 TO SCHEDULE INSPECTIONS.					

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	MANHOLE LOC	
	6" PORT LOC	
	WATERTIGHT TEST	
	SLOTTED	
ROAD NAME	DATE ON LID	

PRE-CONSTRUCTION:

INSTALLATION:

FINAL INSPECTOR ______. DATE OF APPROVAL ______.

HD-230 (3/97)	CONTINUE	STOP ALL CONSTRUCTION ON SEWAGE DISPOSAL SYSTEM AND CONTACT HEALTH DEPARTMENT BEFORE CONTINUING WORK IS SATISFACTORY,	Do Not Cover Work Until Health Department Approval Appears On This Card POST THIS CARD WHERE IT CAN BE SEEN FROM ROAD	LOCATION 1840 Shadaw 1	Howard County Health Departmen Bureau of Environmental Health, Ellicott City, Maryland 410-313-2640 SEWAGE DISPOSAL PERMIT NO. A- P-5574
Inspector	Inspector Date	FH Inspector Date	artment Approval Appears On This Card T CAN BE SEEN FROM ROAD	Clean Inc Pll Court Clanwood Sprine	ealth Department icott City, Maryland 410-313-2640 NO. A- P- 557464
Date	ſĕ	ē		shotsu	F