



HOWARD COUNTY HEALTH DEPARTMENT

PO 27229

DATE
6 / 26 / 07

Received
From

J M Contracting LLC

PHONE # 443-277-7526

309 Saddleback Tr., Mt Airy MD 21771

☐ CASH

☒ CHECK

NO.

3340

For

Repair — Replace septic tank with
larger tank

2023 Watkins Way

One hundred sixty-five and 00/100 ————— Dollars

\$

165 00

Received By

Mary L Buggs

INFORMATION FORM - SEPTIC SYSTEM REPAIR / UPGRADE / EVALUATION

For internal office use only

Reason for Request:

Failing System (includes surface discharge or inadequate treatment zone) _____

Has the contractor verified through excavation/pumping evaluation, that there are no pipe blockages? _____

*System relocation for proposed addition for setback compliance _____

*Verification of adequate system capacity per COMAR 26.04.02.02D (4) _____

To replace collapsed septic tank _____

To replace collapsed drywell _____

Change 1000 GAL to 1500 Top Seem 2 compartment

Septic Contractor: _____

Contractor's Address: _____

Contractor's Phone #: _____

Property Address: _____

Property (Subdivision) & Lot # _____

County file number if known: _____

Owner's Name: _____

Is public sewer available/nearby: _____

If public sewer may be close, mention further research will be performed to verify availability

Names of Any Previous Owners: _____

Year House Built: _____

of Existing Bedrooms: _____

of Bedrooms after completion of addition: _____

Has this request been discussed previously with another Sanitarian: _____

If yes, then with whom and when: _____

Renaire Heaps / JM Contracting LLC

425 O Brecht Rd

Sykesville Md. 21784

443-277-7526

2023 Wilkens Way

Mt Airy Md. 21771

Allison Twitt

NO

1993

4

4

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling of the repair / upgrade / evaluation. No inspection will be performed without fee collection at the office.

Print out copy of Real Property Data via Dept. of Taxation website _____ Indexed file found _____

*Prior to scheduling inspections, scaled plans should be submitted to clarify the nature of the addition.

If public sewer may be nearby, verify whether the sewer is technically "available" (defined as abutting or within the property), through the Bureau of Engineering (Diane Nason x 3372 or Jean Reed x 3362).

If sewer is available, verify whether the property is within the Metropolitan District (Finance x 2061).

If sewer is available, and property is within the Metropolitan District, connection to sewer is required. If owner believes reasons for exemptions exist, owner should justify request in writing.

If soil/site conditions are limiting and sewer and/or Metro District status not conducive to connection, sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion.

Owner should contact Charlotte Dryden at x 4419 for further detail.

Environmental Sanitarian tentatively assigned per rotating index card box: _____

Date of request: _____ (Clerical staff to update scheduling card with date of request/property address)

Septic permit to be typed by clerical staff after instruction from scheduling sanitarian.

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: 6/26/07

P 527229

APPROVAL DATE: 6/29/07

PERMIT

Logged Into Permit Manager
Tax ID # 04-330749

A REPAIR

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

J M Contracting LLC

IS PERMITTED TO INSTALL ☐ ALTER ☒

ADDRESS: 425 Obrecht Road, Sykesville

PHONE NUMBER: 443-277-7526

SUBDIVISION: Pleasant Hills

LOT NUMBER: 1

ADDRESS: ²⁰²³
~~2022~~ Watkins Way

PROPERTY OWNER: Allison Twigg

SEPTIC TANK CAPACITY (GALLONS):

1500 T.S.

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	
PURPOSE:	To install larger septic tank in compliance with proposed building permit. Call for inspection when ground is opened so sanitarian can recommend repair.

PLANS APPROVED: _____

DATE: _____

NOTE: PERMIT VOID AFTER 2 YEARS

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

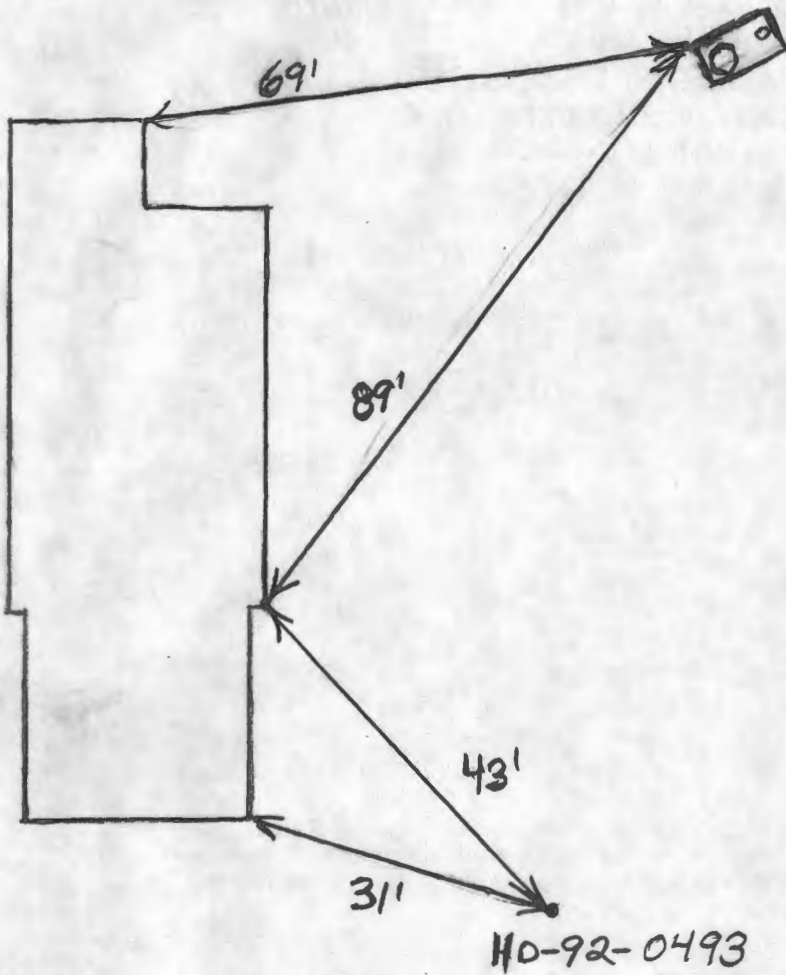
NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

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 410-313-2640 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		

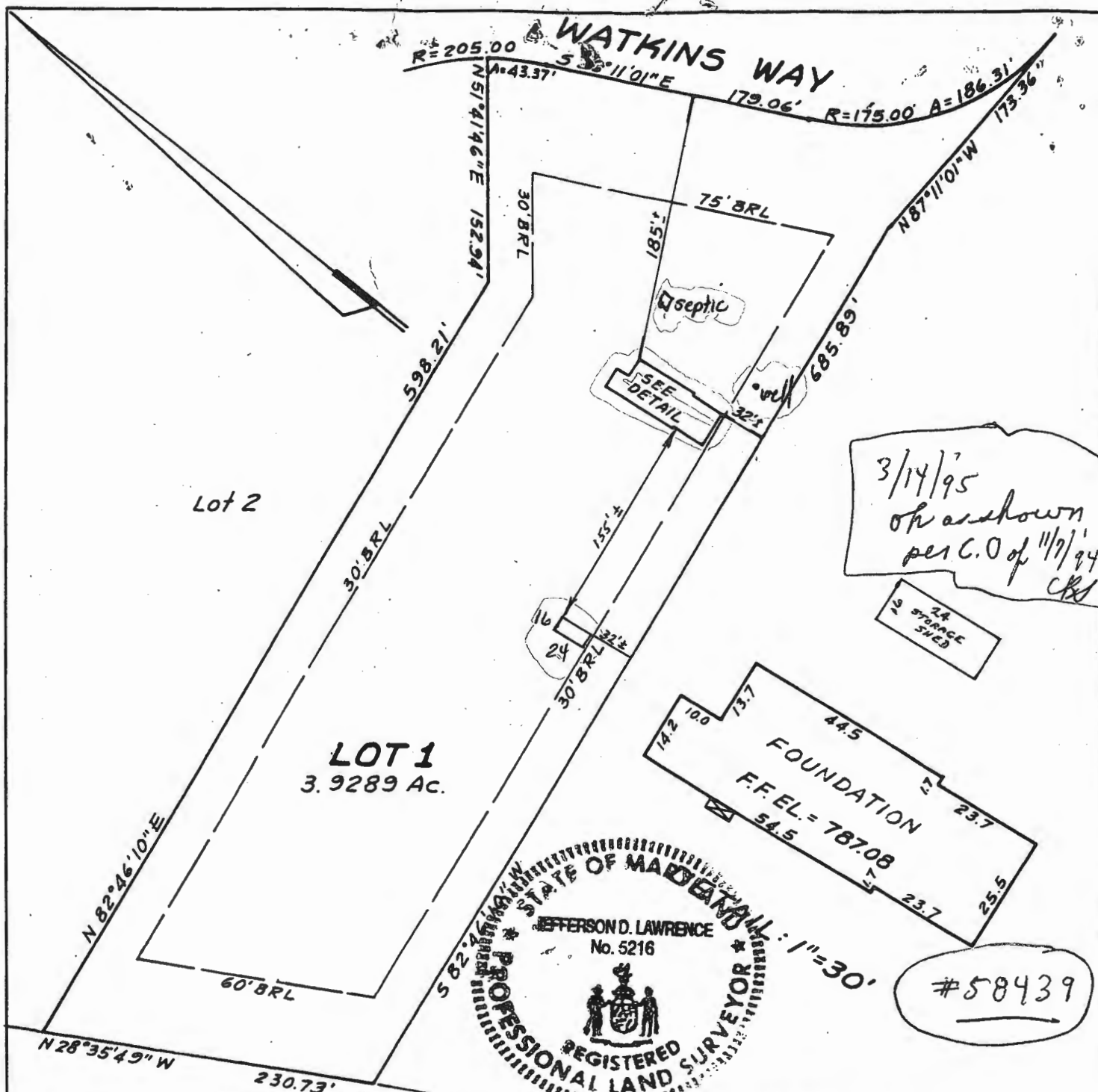
SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
CAPACITY	1500 GAL
SEAM LOC	Top
TANK LID DEPTH	2'-3'
BAFFLES	Yes
BAFFLE FILTER	None
MANHOLE LOC	Front
6" PORT LOC	Rear
WATERTIGHT TEST	No
SEPTIC TANK 2 LEVEL	
CAPACITY	GAL
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	

PRE-CONSTRUCTION 6/29/07 1500 gallon 2-comp. tank
installed to replace existing tank. (BB)

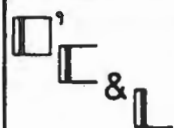
INSTALLATION

FINAL INSPECTOR B. Baker

DATE OF APPROVAL 6/29/07



Property shown hereon is not in a flood plain per existing records unless otherwise noted.



O'CONNELL & LAWRENCE, INC.

SURVEYORS, ENGINEERS & LAND PLANNERS

17904 Georgia Avenue, Suite 302
Olney Maryland 20832

(310) 924-4570 Fax (301) 924-5872

HOUSE LOCATION

LOT 1

PLEASANT HILLS
HOWARD COUNTY, MARYLAND
TAX MAP: 6412 - PLAT # 10511

SURVEYOR'S CERTIFICATION

I hereby certify to the best of my knowledge and belief that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structure and encroachments, if any. This Plat is not for determining property lines, but prepared for the exclusive use of present owners of property and also those who purchase, mortgage, or guarantee the title thereto, within six months from the date hereof, and as to them I warrant the accuracy of this Plat. No title report furnished.

NOTE: EXISTENCE OF PROPERTY CORNERS NOT GUARANTEED BY THIS PLAT. DO NOT ATTEMPT TO ERECT FENCES FROM INFORMATION CONTAINED ON THIS DRAWING.

Jefferson D. Lawrence
Md. Reg. Professional Land Surveyor - Jefferson D. Lawrence

Job No **22-16**

Scale **1" = 100'**

DATES

Wall Ck **9-14-94**

Final Loc

Recert

CONSUMER INFORMATION NOTES:

1. This plan is a benefit to a consumer insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
2. This plan is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
3. This plan does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing.
4. Building line and/or Flood Zone information is taken from available sources and is subject to interpretation of originator.

Notes:

- 1) Flood zone "C" per H.U.D. panel No. 240044-0008 B
- 2) Setback distances as shown to the principal structure from property lines are approximate. The level of accuracy for this drawing should be taken to be no greater than plus or minus 5 Feet.

