

LAYOUT 11/2/12 INSP 4
INSP 2 12/11/12 INSP 5
INSP 3 INSP 6

ISSUE DATE:

11/11/2012

PERMIT

P 536664

APPROVAL DATE:

12/12/12 (KW)

A 531931

Tax ID # 03-316378

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

Brian Isaac

IS PERMITTED TO

INSTALL ☒ ALTER ☐

ADDRESS:

13940 Rover Mill Road

PHONE NUMBER:

410-925-4888

SUBDIVISION:

Rover Meadows

LOT NUMBER:

12

ADDRESS:

13940 ~~Old~~ Rover Mill Road

PROPERTY OWNER:

Brian Isaac

SEPTIC TANK CAPACITY (GALLONS):

1500

OUTLET BAFFLE FILTER REQUIRED ☐

PUMP CHAMBER CAPACITY (GALLONS):

COMPARTMENTED TANK REQUIRED ☒

NUMBER OF BEDROOMS:

4

APPLICATION RATE: 1.2

SQUARE FOOTAGE OF HOUSE:

3334

LINEAR FEET OF TRENCH REQUIRED:

140
120?

3' wide. 3'-5' → ~
~ 50 for

TRENCHES:	Trenches to be 2.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade with 2.0 feet of stone below distribution pipe. <u>~ 40 for stone</u>
LOCATION:	Set septic tank per layout, angle toward down slope direction. Set distribution box 50 feet west of the southeast septic reserve corner, about 32 feet from back corner of house. Install 2 x 70' trenches on contour toward west boundary.
NOTES:	Do not order the septic tank until after layout inspection and Sanitarian approval. Stake easement corners. Call for layout inspection. Mark utilities. Gravel tickets must be available for Environmental Sanitarians. Stone must be approved by the Howard County Health Department. A written variance request is required for tanks deeper than 3 feet. A traffic bearing lid is required for tanks deeper than 4 feet. *Old septic tank must be pumped, crushed and filled for final approval of installation permit.

PLANS APPROVED:

Robert Bricker rb

DATE: 08/10/11

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

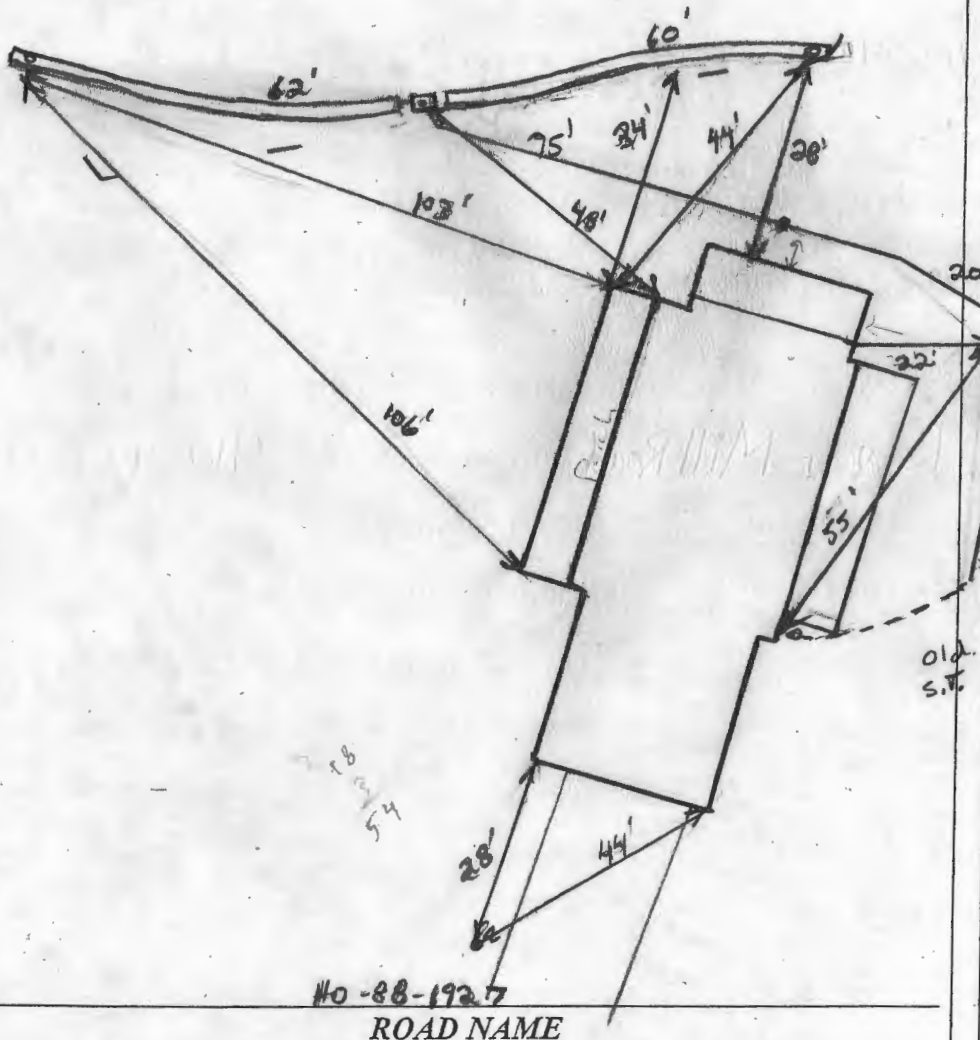
NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

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 3' INLET 3' BOTTOM 5'
 NUMBER OF TRENCHES 2
 TOTAL LENGTH 120
 ABSORPTION AREA 360' x 54'
 DISTRIBUTION BOX LEVEL Leveler's
 DISTRIBUTION BOX BAFFLE Yes
 DISTRIBUTION BOX PORT Yes

SEPTIC TANK DATA
 SEPTIC TANK 1 LEVEL Yes
 MANUFACTURER Babco
 CAPACITY 1500 GAL
 SEAM LOC Top
 TANK LID DEPTH 1-2'
 BAFFLES Yes
 BAFFLE FILTER —
 MANHOLE LOC Front
 6" PORT LOC Rear
 WATERTIGHT TEST —
 SLOTTED Yes
 DATE ON LID 10-20-12

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:

11/2/12 met w/ homeowner and contractor on site. Gave Tank layout but did not have later or front on site. Will give trench layout @ next inspection. May go w/ 3' wide trench. (K)
 12/6/12 met w/ different contractor. Went over same tank locations shot contours. out to run 2x 60' trenches in both directions. Trenches to be 3' wide (K)

INSTALLATION: 12/11/12 S.T. set. level. looks good. Cutting ready to tie into new tank and abandon old tank (K)
 12/12/12 Trenches installed. System complete. Ex. S.T. pumped and collapsed. OK to cover all work

FINAL INSPECTOR

K. Way

DATE OF APPROVAL

12/12/12



Howard County
Health Department

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

INFORMATION FORM - SEPTIC SYSTEM REPAIR / UPGRADE

Reason for Request:

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

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

- B. System relocation for proposed addition for setback compliance * _____
C. To replace a collapsed septic tank _____
D. To replace a collapsed drywell _____

****For REPAIRS, are the owners proposing, or do they plan to add in the future, any additions or modifications to the property, i.e. pools, living space additions, garages etc? This information must be disclosed at the time of this application. The Health Department will not be able to accommodate requests in the field for property modifications unrelated to the repair request. Such requests may require an additional fee, additional testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulation.**

Septic Contractor:

Contractor's Address:

Contractor's Phone #:

Property Address:

Property (Subdivision) & Lot #:

County file #, if known:

Owner's Name and Phone #:

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: _____ Name: Robert Bickler

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling/review of the repair or upgrade.

Print out a copy of the 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 (x2414).

If sewer is available, verify whether the property is within the Metropolitan District (Finance x2061).

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, x4419, for further detail.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. Contractor is to notify office of the emergency situation as soon as possible.

Any question I can be reached (410) 925-4888



HOWARD COUNTY HEALTH DEPARTMENT

A5

31931

DATE
9 / 24 / 09

Received
From

Gloria F. Isaac

PHONE # 410 - 265 - 2100

3502 Steensons Lane, Baltimore MD 21227

For

Paid Application

☐ CASH

☒ CHECK

NO.

208

13940 ~~Old~~ Rover Mill Rd, Rover Meadow, Lot 10

Seven hundred six and 00/100

Dollars

\$

506

00

Received By

Mary L. Briggs