



Howard County
Health Department

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

Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

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TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

RECEIPT DATE: 4/25/22

ONSITE SEWAGE DISPOSAL SYSTEM

P 571511

APPROVAL DATE: 5/16/22

PERMIT:

**Tank
Replacement**

A

PROPERTY ADDRESS: 1044 Saint Michaels Road

SUBDIVISION: _____ LOT: _____ TAX ID: _____

CONTRACTOR: Oak Hill Construction EMAIL: _____

CONTRACTOR ADDRESS: 16910 Oak Hill Road, Silver Spring, MD 20905 PHONE: 301-421-4155

PROPERTY OWNER: Maria Correa EMAIL: _____

OWNER ADDRESS: 1044 Saint Michaels Road, Mount Airy, MD 21771 PHONE: _____

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: 4/25/22 EXPIRATION DATE: 4/25/23

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 DOWNGRADE 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.

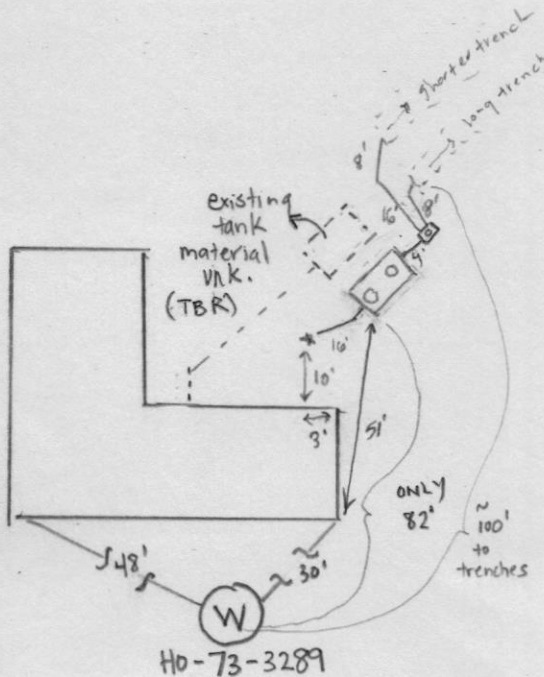
NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA

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



ROAD NAME

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

MANUFACTURER Babylon

CAPACITY 2000 GAL

SEAM LOC top

TANK LID DEPTH 2'

BAFFLES inlet + outlet

BAFFLE FILTER -

MANHOLE LOC inlet + outlet

6" PORT LOC -

WATERTIGHT TEST PASS

SLOTTED yes

DATE ON LID 3-25-22

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

PRE-CONSTRUCTION:

5/12/22 - met w/ contractor. well only 82' away from existing septic tank, proposed location for new tank will have the same setback due to construction/design constraints. Contractor will pump, crush & fill the old septic tank made of either metal or concrete. New tank to be 2000 gal with the addition of a d box for dispersal to existing trenches. K. Wolf consulted and a water tight test will be required for the new tank, well was qps'd. (P)

INSTALLATION:

5/13/22 Tank set. Watertight presoak begun @ 1:20pm. Water level up into manhole, 7.5" from top lip of inlet manhole. (S) 5/16/22 Water level 10" from top lip of inlet manhole @ 11:00AM (S) 5/16/22 Water level 10" from top lip of inlet manhole @ 12:00PM. 5/16/22 D box set and leveled connected into existing trenches. Stone clean at beginning of trenches. Tank connected to existing SL. Seam of tank patched with additional watertight cement. Old tank to be abandoned (S)

FINAL INSPECTOR

DATE OF APPROVAL

5/16/22

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

DATE 7/17/80

INDEXED

04-310357

P 30750

A Repair

Orville R. Blanton

IS PERMITTED TO INSTALL ALTER 8

ADDRESS 1044 St. Michael's Road, Mt. Airy, Md. 21771

PHONE 831-7910

SUBDIVISION ROAD 1044 St. Michaels Road LOT

PROPERTY OWNER Mr. Orville R. Blanton

ADDRESS same as above

SPECIFICATIONS

SEPTIC TANK CAPACITY GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

INLET PIPE FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA FT. FROM LOT LINE AND FT. FROM LOT LINE AS SEEN WHEN FACING LOT FROM

REPAIR - Call for an appointment when ground is opened up and Sanitarian will

recommend the repair system.

7/3/80

Due to previous tests of 9/13/74 of R.M.

Recommend (1) Trench (A) 50' long; 9' deep with 5' of gravel under pipe; minimum (B) parallel to existing one trench not installed in 1975.

between trenches; 2 inspections of trench before and after stone installed. (2) Place = a SCARY in line off existing tank 5' from

PLANS APPROVED BY Palmer F. Wine

DATE 7/17/80

COVER NO WORK UNTIL INSPECTED AND APPROVED.

Cast iron 4" or approved plastic to new trench where approved perforated pipe is to be installed.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

(*) NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH. C.B.D.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

(*) NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

BLDG. PERMIT SIGNED AND RETURNED 9/5/80

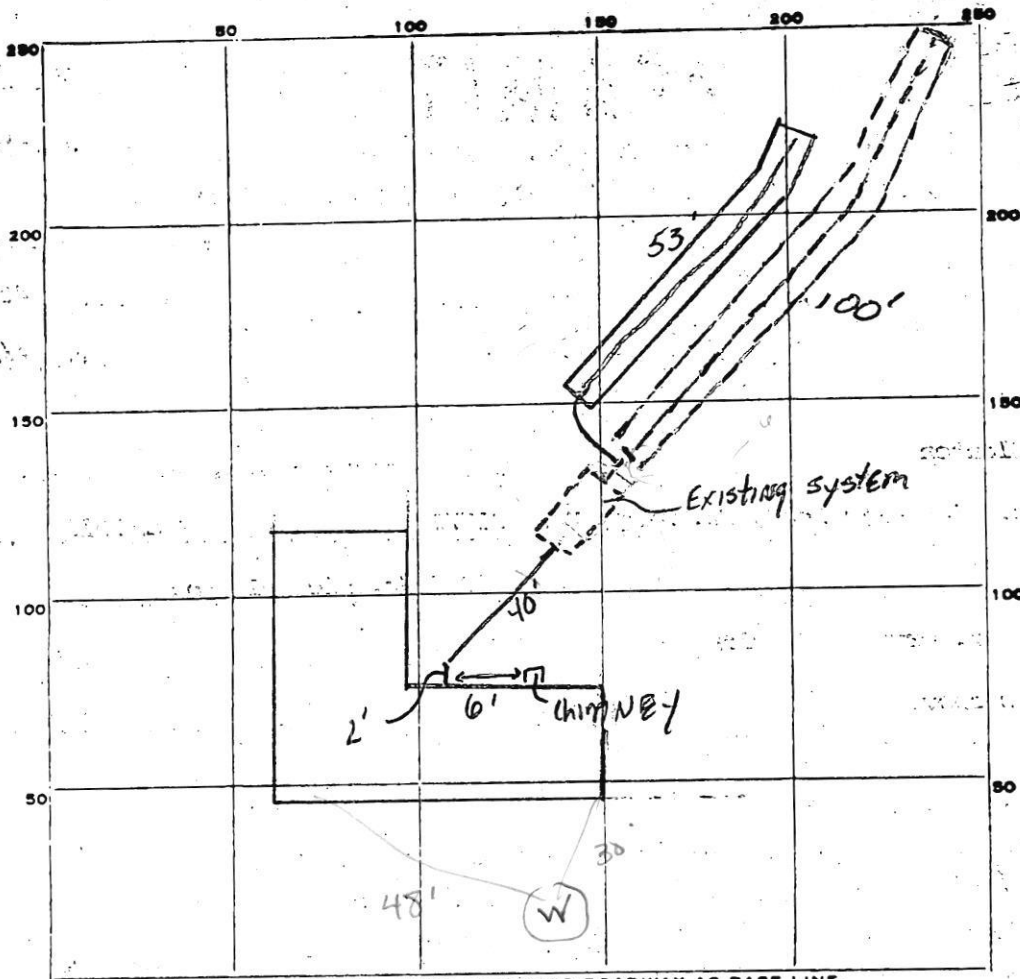
Serial # 43567
Addition to Bedroom

P-30950



1044 Saint Michaels Rd.
 5/12/22 - well gps'd and in
 poor condition. (RB)





PERMIT CARD ☒

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9' FT. TRENCH WIDTH 2 1/2' FT.

GRAVEL DEPTH 5 IN. TOTAL LENGTH 53 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 265

EPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

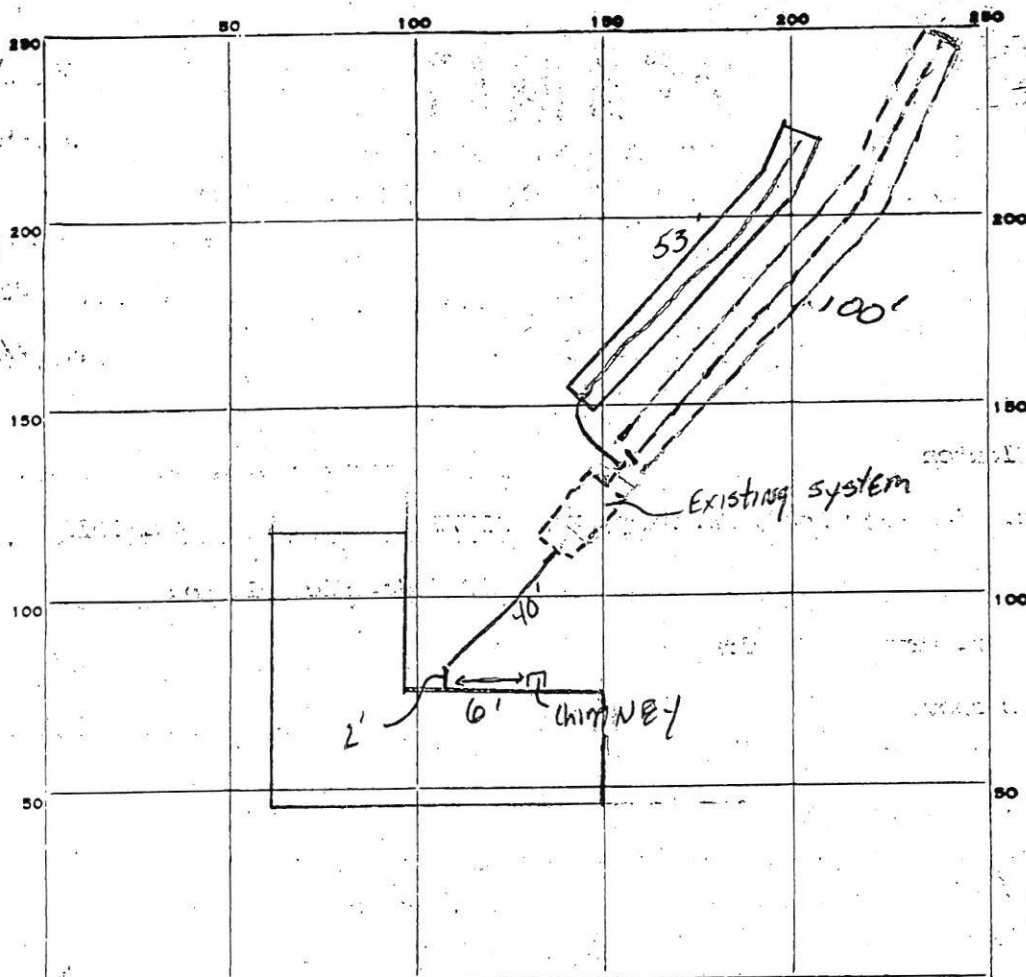
ABSORBENT AREA 265 SQ. FT.

7/3/80 STOPPED - LEFT INSTRUCTIONS ON CARD FOR REPAIR.
 80 OK To add gravel to trench. SK+JS C.B.S. & T.O.
 80 OK to cover all work. JH

7/15/80

INSPECTOR

J. Stanger



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ☒

SEPTIC TANK, LEVEL

CLEANOUTS

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 9' FT. TRENCH WIDTH 2 1/2' FT.

GRAVEL DEPTH 5 IN. TOTAL LENGTH 53 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 265

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 265 SQ. FT.

REMARKS 7/3/80 STOPPED - LEFT INSTRUCTIONS ON CARD FOR REPAIR.

7-11-80 OK To add gravel to trench. SK+LS

C.B.S. & T.O.

7/15/80 OK to cover all work. JF

DATE SYSTEM APPROVED

7/15/80

INSPECTOR

J. Stager



HOWARD COUNTY HEALTH DEPARTMENT

71511

DATE
4/25/02

A5

Received
From

Oak Hill Const.

PHONE #

301 421-4155

For

Tank Replacement -
1044 St. Michaels
Rd.

☐ CASH
☒ CHECK

NO.

10567

One hundred sixty-two

Dollars

\$

165.00

Received By

Alex