



Howard County
Health Department

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

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

RECEIPT DATE: 9/2/21

ONSITE SEWAGE DISPOSAL SYSTEM

P 570138

APPROVAL DATE: _____

PERMIT:

REPAIR

A _____

PROPERTY ADDRESS: 1701 Sykesville Road

SUBDIVISION: _____

LOT: _____

TAX ID: _____

CONTRACTOR: Fogles Septic Clean Inc

EMAIL: kim@foglesinc.com

CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784

PHONE: 410-795-5670

PROPERTY OWNER: Jung Lee

EMAIL: _____

OWNER ADDRESS: 1701 Sykesville Road, Sykesville, MD 21784

PHONE: 443-306-4418

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.



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CALL 410-313-1771 TO SCHEDULE INSPECTIONS.

11/7/83
11/8/83
ASAP

approved
11-8-83
C. Williams

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 33284

A Repair

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
992-2330

ELLICOTT CITY

DISTRICT

DATE 11/07/83

INDEX

Jack Fyock

IS PERMITTED TO INSTALL ☐ ALTER ☒

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION ROAD 1731 Route 32 LOT

PROPERTY OWNER William Davis
1731 Route 32

ADDRESS 4 mile N of Rt 99 - East Side of Rt 30

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES ☐ NO ☒

SEPTIC TANK CAPACITY GALLONS. NUMBER OF BEDROOMS 3

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND

REPAIR. DEEP LEACHING BED 7 FT DEEP

WITH 2 FT STONE, 7 FT WIDE, & 100 FT LONG

PLACE BED BETWEEN TANK & OLD

DRAIN FIELD 11/4/83

PLANS APPROVED BY Frank Skinner DATE 11/07/83

COVER NO WORK UNTIL INSPECTED AND APPROVED.

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 AND AFTER PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

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, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

BLDG. PERMIT SIGNED
AND RETURNED 4/4/85
Serial # 64034 Prob

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

83342

Howard County Health Department

Bureau of Environmental Health, Columbia, MD 21045 - 410-313-1771

SEWAGE DISPOSAL PERMIT NO. A-_____ P- 570138

RESIDENTIAL PERMIT ☐

(NUMBER OF BEDROOMS: _____)

COMMERCIAL PERMIT ☐

(DESIGN FLOW: _____ GPD)

PERMITEE:

Fogles Septic Clean Inc.

LOCATION:

1701 Sykesville Road

****POST THIS CARD WHERE IT CAN BE SEEN FROM ROAD****

☐

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

Inspector

Date

☐

WORK IS SATISFACTORY, OK TO
CONTINUE

Inspector

Date

COMMENTS:

☐

FINAL INSPECTION MADE, OK TO
COVER ALL WORK

Inspector

Date

SITE INSPECTION SHEET

OWNER: _____ PHONE #: _____

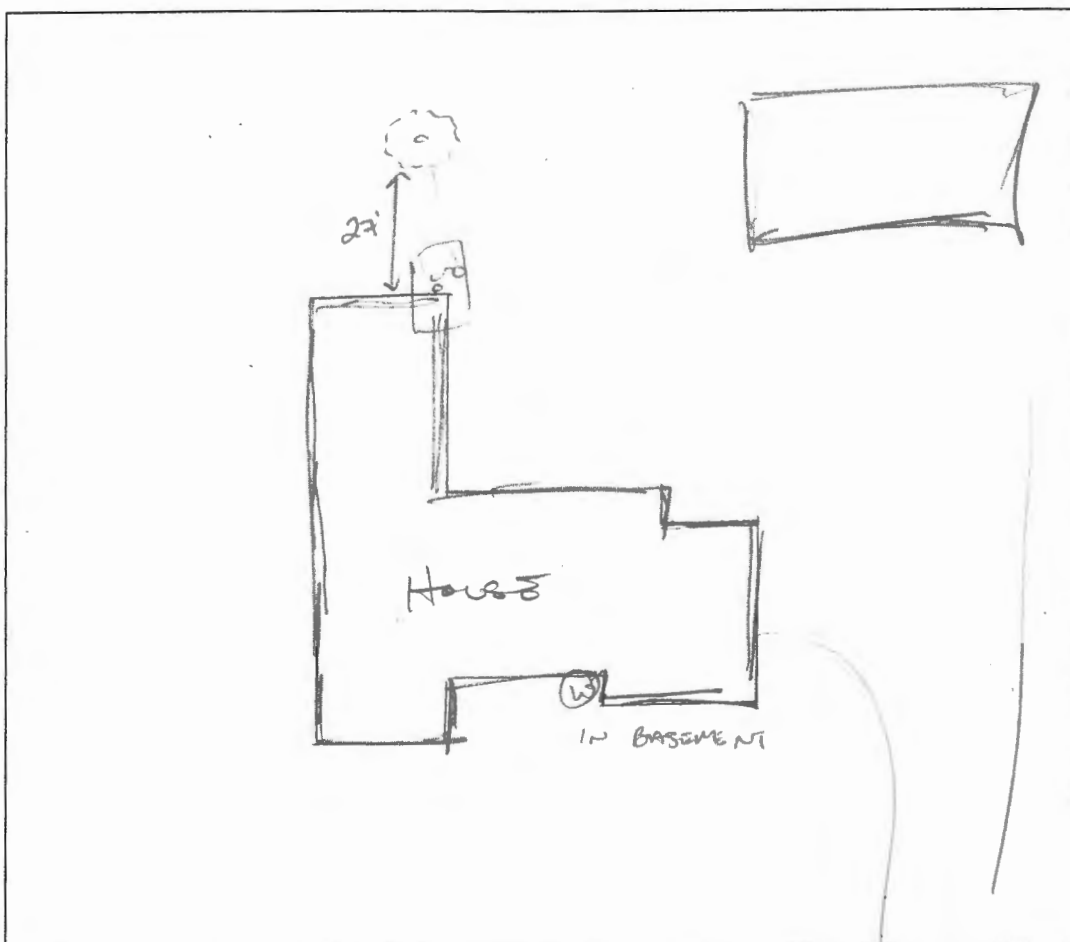
ADDRESS: _____ CONTRACTOR: _____

_____ WELL TAG #: _____

SUBDIVISION: _____ LOT: _____ COUNTY #: _____

PROPOSAL: REPAIR FAULTING SYSTEM

LOCATION DIAGRAM



COMMENTS: Homeowner

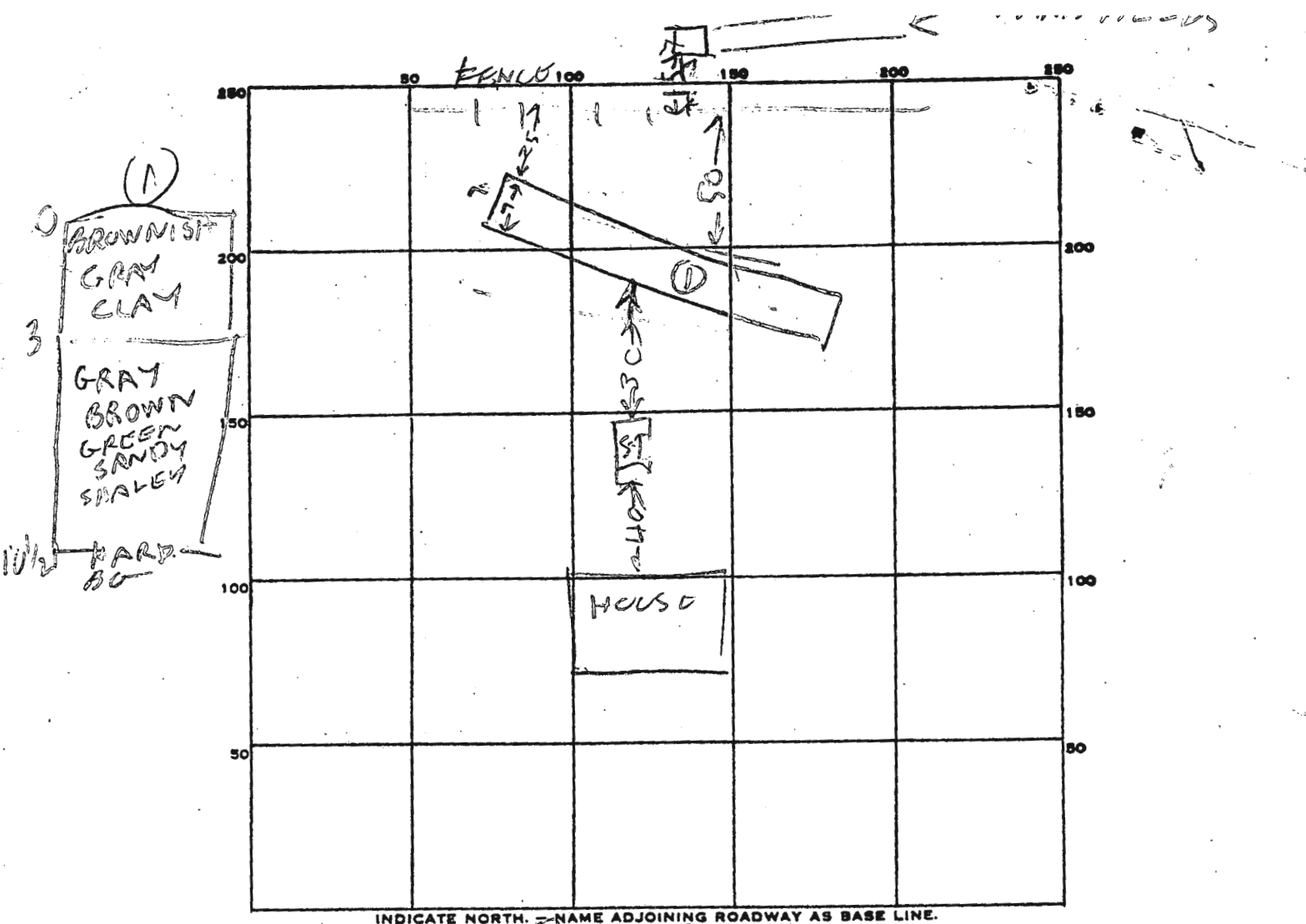
LINDA LEE 410 497 2369

JUNG LEE 443 300 4418

JUNG HO LEE 1969@

gmail.com

DATE: 09/29/2021 INSPECTOR: CABAHUG 001997



ROUTE 32

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS ST - MANHOLE CLEANOUT

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 7 FT. TRENCH WIDTH 7 FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH 50 98 100 FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA 700

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

ABSORBENT AREA 700 SQ. FT. + OLD DRAINFIELD

REMARKS 11/7/83 DITCH DUG OUT 60 FT LONG 7 FT WIDE 7 FT DEEP

& VISUAL HOLE DUG - SOIL LOOKS OK BELOW 3 FT

11/7/83 - DITCH LENGTHENED TO 98 FT & SOME STONE ADDED RH

11/8/83 DITCH FINISHED. NEW 1500 G ST TANK INSTALLED

W/ MANHOLE CLEANOUT. CW

11-2-11

0.1.11



HOWARD COUNTY HEALTH DEPARTMENT

70138

DATE
9/12/21

AP5

Received
From

Fogles Septic Clean Inc

PHONE # 410 715 8670

For

Pump/Repair 1701 Sykesville Road

☐ CASH

☒ CHECK

NO.

73172

Three hundred thirty

Dollars

\$

330.00

Received By

[Signature]



Bureau of Environmental Health
8930 Stanford Blvd | Columbia, MD 21045
410.313.2640 - Voice/Relay
410.313.2648 - Fax
1.866.313.6300 - Toll Free

P510138

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

INFORMATION FORM - SEPTIC SYSTEM REPAIR/UPGRADE

Reason for Request:

- ☒ Failing System
☐ System relocation for proposed addition
☐ System upgrade for proposed addition
☐ Inadequate treatment zone
☐ Collapsed septic tank
☐ Collapsed drywell

Has the septic tank been pumped within the last month?

- ☒ Yes
☐ No

Date pumped: 8/23/21

Was a visual inspection of the septic tank and/or drain fields conducted?

- ☒ Yes
☐ No

Explain observation: See attached

Existing system design

- ☒ Drywell
☐ Trench
☐ Mound
☐ Unknown
☐ Other: _____

Was a visual inspection of the sewage line conducted?

- ☒ Yes
☐ No

Blockage Leading to the field

- ☐ Yes Explain _____
☒ No

Is discharge surfacing on the ground?

- ☐ Yes
☐ No

Additional Comments:

*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, testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulations.

Septic Contractor: Fogle's Septic

Contractor's Phone: 410.795.5670

Contractor's Address: 580 Obrecht Rd

Sykesville, 21784

Property Address: 1701 Sykesville Rd

County File: 285979

Subdivision: N/A

Lot: 4 Year Built: 1958

Owner's Name: Jung Lee

Existing bedrooms: 4

Name of previous owners: James Rush

Existing bedrooms: _____

Proposed bedrooms: _____

*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.

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

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

If soil/site conditions are limited and sewer and/or Metro District status is not conducive to connection, the Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. The Owner should contact the Bureau of Utilities for details.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency exists.

The contractor is to notify the office of the emergency as soon as possible.

2/2020