

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: 6/29/2015 **ONSITE SEWAGE DISPOSAL SYSTEM** P 556504
 APPROVAL DATE: 7/23/15 SEC **PERMIT:** **REPAIR** A REPAIR
 PROPERTY ADDRESS: 13501 Golden Corn Drive
 SUBDIVISION: Allnutt Farms LOT: 31 TAX ID: 5384907
 CONTRACTOR: ~~Zapp Plumbing~~ JM Contracting EMAIL: _____
 CONTRACTOR ADDRESS: 5820 Clarksville Square Drive, Clarksville MD PHONE: ~~410-531-6712~~
 PROPERTY OWNER: Ray Grose EMAIL: Raypatti1@verizon.net
 OWNER ADDRESS: 13501 Golden Corn Drive PHONE: 410-531-3645

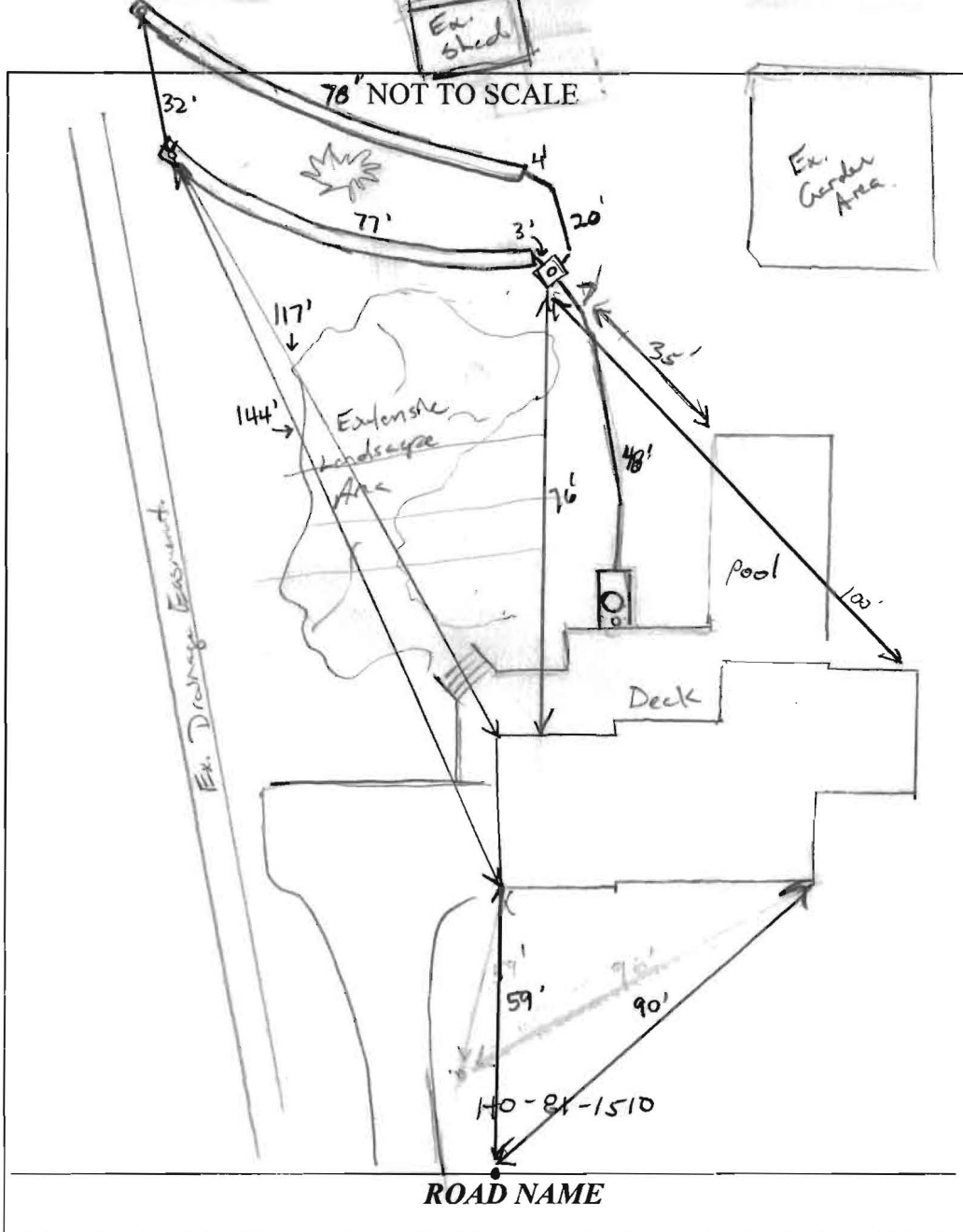
SEPTIC TANK SIZE (GALLONS): Existing PUMP CHAMBER CAPACITY (GALLONS): N/a PUMP SIZE: n/a
 NUMBER OF BEDROOMS: 5 HOUSE SQ. FT. n/a APPLICATION RATE: 0.8
 DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: <u>156</u>	INLET DEPTH: <u>4</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>7.5</u>
	MINIMUM SPACE BETWEEN TRENCHES: _____	EFFECTIVE AREA BEGINNING DEPTH: <u>5</u>
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	Grades shot at time of perc repair. Install the trenches as staked in field. 2x78' trenches on contour below existing failed trenches. Avoided as much land scape/hard scape as possible. Future trenches may be installed at garden area or below replacement trenches. Manhole access needed on ex. tank. New Dist Box to be set.	

ISSUED BY: K. Wolf, LEHS ISSUE DATE: 7/17/2015 EXPIRATION DATE: 7/17/2016

- 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 WARRANT 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.**



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
3	4	7.5
NUMBER OF TRENCHES		2
TOTAL LENGTH		156'
ABSORPTION AREA		310' + SIDEWALL
DISTRIBUTION BOX LEVEL		YES
DISTRIBUTION BOX BAFFLE		YES
DISTRIBUTION BOX PORT		YES

SEPTIC TANK DATA	
SEPTIC TANK I LEVEL	YES
MANUFACTURER	?
CAPACITY	1250 GAL
SEAM LOC	mid
TANK LID DEPTH	2'
BAFFLES	Yes
BAFFLE FILTER	NO
MANHOLE LOC	FRONT
6" PORT LOC	FRONT
WATERTIGHT TEST	OK
SLOTTED	no
DATE ON LID	N/A
PUMP/SEPTIC TANK LEVEL N/A	
MANUFACTURER	
CAPACITY	
SEAM LOC	
TANK LID DEPTH	
BAFFLES	
BAFFLE FILTER	
MANHOLE LOC	
6" PORT LOC	
WATERTIGHT TEST	
SLOTTED	
DATE ON LID	

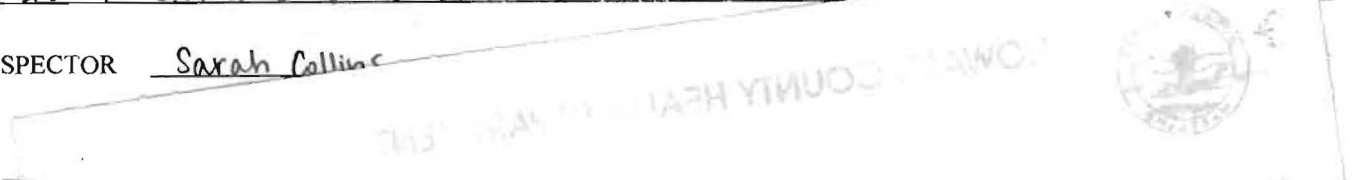
PRE-CONSTRUCTION:

7/15/15 Trenches laid out best possible locations w/ortly ground existing. Hard scraping/landscaping. Install 2x78' trencher as staked out in field. New riser on tank. New Dbox - Ex trenches to be abandoned. (KAW)

INSTALLATION:

7/22/15 upon arrival, contractor had lower trench dug. 57 stone on-site (clean, from Berricks Quarry, Woodford). Fabricated, plastic Dbox installed. Explained Ho Co Code on fabricated Dist. box's must be pre-approved. Remove Dbox and install concrete /standard Dist. box. OK to continue (KAW) Lower trench installed. Dbox to be removed tomorrow. The installed from tank to trench system. OK to cover work (KAW) 7/23/15 D-box installed and leveled with water (speed levelers). 2nd trench complete and open. 35' to stone, 3' wide. Manhole access + cover installed.

FINAL INSPECTOR Sarah Collins





HOWARD COUNTY HEALTH DEPARTMENT

56504

DATE
6/29/15

Received From

Ray Glose

PHONE #

410 531-3645

For

Perc Repair/13501 Golden
Coun Dr.

CASH

CHECK

NO.

0012

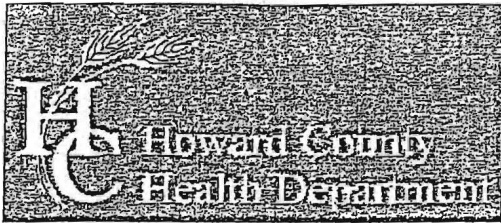
Two hundred thirty ~~7~~ Dollars

\$

330.00

Received By

Q Kemp



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Twitter: HowardCoHealthDep

Dr. 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 Date pumped: 6/9/15
No

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

- Yes Explain observations:
No

Was a visual inspection of the sewage line conducted?

- Yes
Blockage leading to the tank
Yes Explain:
No
Blockage leading to the field
Yes Explain:
No

Existing system design

- Drywell
Trench
Mound
Unknown
Other:

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 Regulation.

Septic Contractor: Zepp Contractor's Phone: 410-531-6712
Contractor's Address: 5820 Claustrale Sq. Dr.

Property Address: 13501 Golden Corn Dr. County file: Howard
Subdivision: Allott Farm Estates Lot: 31 Year Built: 1986
Owner's Name: Ray Groce Owner's Phone: 410-531-3645

Name of previous owners: Same Existing bedrooms: 5
Proposed bedrooms: 0

Has this request been previously discussed with a Sanitarian? (Name): Kevin Wolke
Public Sewer available/nearby: No

*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.

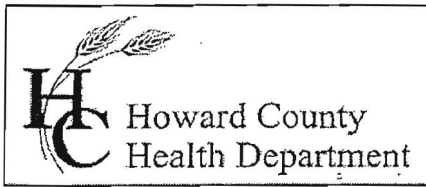
Print out a copy of Real Property Data via Dept. of Taxation website Indexed file found

If public sewer may be nearby, verify whether sewer is technically "available" through the Bureau of Engineering.

If sewer is available and the property is within the Metropolitan District, connection to sewer is required: If the owner believes reason for exemption exists, the owner should justify the request in writing.

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



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 website: www.hchealth.org

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

APPLICATION FOR PERCOLATION TESTING AND SITE EVALUATION

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME Ray Grose LOT # 31
 PROPERTY ADDRESS 13501 Golden Corn Dr. Highland 20777
STREET TOWN ZIP
 TAX ACCOUNT # _____ TAX MAP 34 GRID _____ PARCEL 372 ZONING DESIGNATION _____

PROPERTY OWNER(S)

Ray & Patricia Grose
 DAYTIME PHONE 410-531-3645 CELL 202-213-9953 EMAIL raypatti1@verizon.net
 MAILING ADDRESS 13501 Golden Corn Dr. Highland, MD 20777
STREET CITY, STATE ZIP

APPLICANT

Ray Grose RELATIONSHIP TO OWNER: Self
 DAYTIME PHONE 410-531-3645 CELL 202-213-9953 EMAIL raypatti1@verizon.net
 MAILING ADDRESS 13501 Golden Corn Dr. Highland, MD 20777
STREET CITY, STATE ZIP

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S):

BUILDING:

- RESIDENTIAL WITH 5 EXISTING OR PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE
- COMMERCIAL (PROVIDE DETAIL OF TYPE OF USE AND NUMBERS OF EMPLOYEES/CUSTOMERS ON ACCOMPANYING PLAN)

PROPERTY:

- SUBDIVISION: NUMBER OF LOTS INCLUDING RESIDUE: _____
- CONSTRUCT NEW OSDS ON UNDEVELOPED LOT
- REPAIR OR REPLACE FAILING OSDS
- UPGRADE EXISTING OSDS

IS THE PROPERTY WITHIN 2500 FEET OF ANY RESERVOIR?

- YES
- NO

AS APPLICANT, I UNDERSTAND THE FOLLOWING:

- THIS APPLICATION IS VALID FOR TWO(2) YEARS FROM DATE OF FEE PAYMENT AND APPROVAL IS BASED UPON HEALTH OFFICER SIGNATURE OF A PERC CERTIFICATION PLAN PRIOR TO EXPIRATION OF THIS PERMIT.
- THE APPLICATION FEE IS NON-REFUNDABLE
- THIS APPLICATION MUST BE ACCOMPANIED BY ALL APPLICABLE FEES AND A SUITABLE SITE PLAN IN ORDER TO BE PROCESSED
- THIS IS A PUBLIC DOCUMENT

I declare and affirm that to the best of my knowledge, the information contained herein is correct. I declare that I am the owner of the property or duly authorized to make this application on behalf of the owner. I agree to comply with all applicable state and county regulations.

By signature of this application, I hereby grant Howard County Health Department officials the right to enter onto the property for the purpose of inspecting the property as directly related to the requested permit/service.

Ray W. Grose
 SIGNATURE OF APPLICANT

6/29/15
 DATE

IMPROVEMENT LOCATION SURVEY

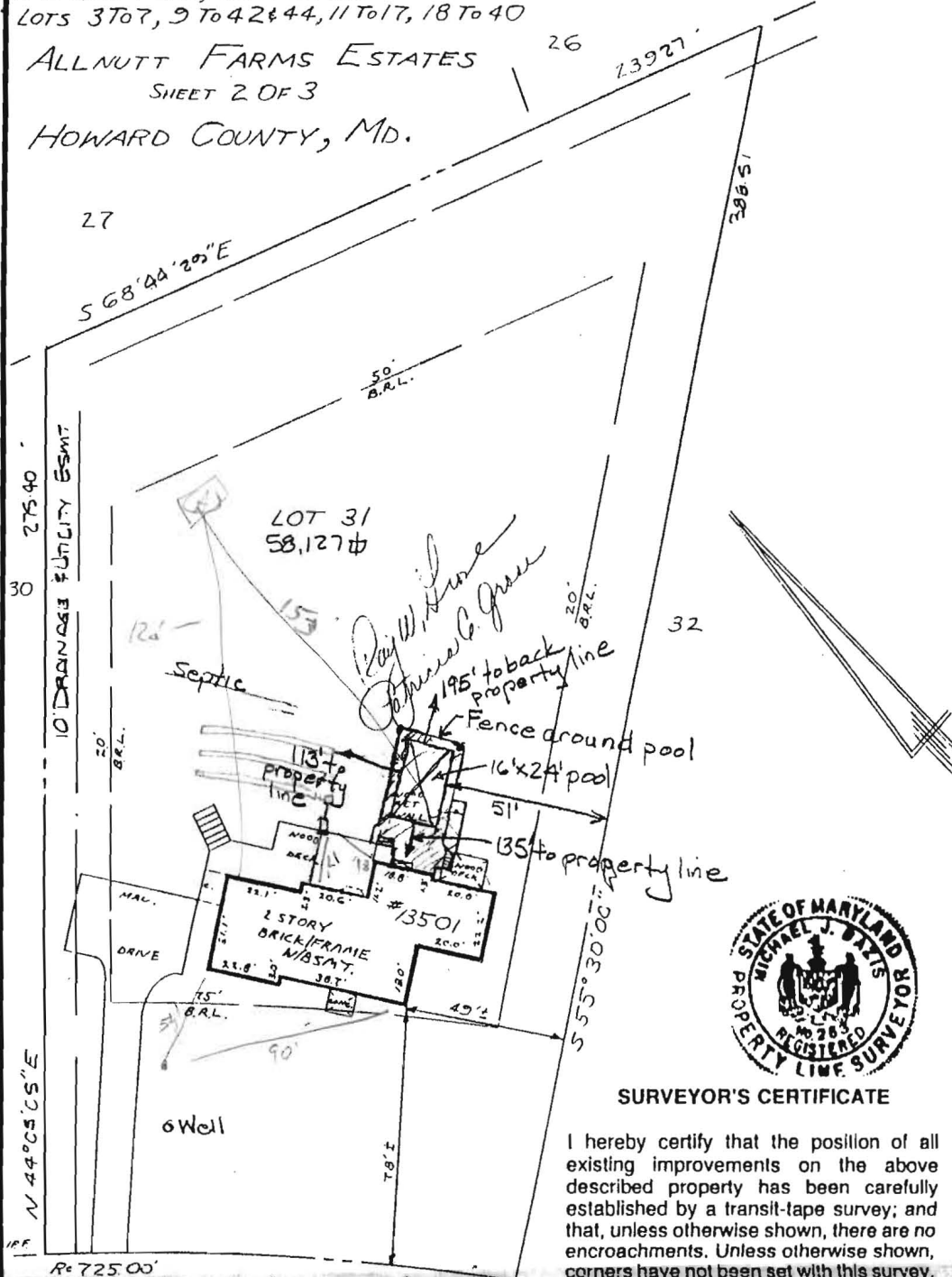
LOT 31

AMENDED FLAT, SECTION IV
 LOTS 3 TO 7, 9 TO 42 & 44, 11 TO 17, 18 TO 40

ALLNUTT FARMS ESTATES
 SHEET 2 OF 3

HOWARD COUNTY, MD.

NOTE: The lot shown hereon does not lie within the limits of the 100 year flood plain as shown on FIRM Panel No. 32 Date of Map 7-4-86 Flood Zone: C



SURVEYOR'S CERTIFICATE

I hereby certify that the position of all existing improvements on the above described property has been carefully established by a transit-tape survey; and that, unless otherwise shown, there are no encroachments. Unless otherwise shown, corners have not been set with this survey. This survey is not to be used to determine property lines.

Michael J. Bazis
 Michael J. Bazis PLS#263

GOLDEN CORN DRIVE
 R=725.00' (50' R/W) A=145.00'

THIS SURVEY IS FOR TITLE PURPOSES ONLY

JOB # 92.1076-H	DATE 4-2-92
FIELD J.B.B.	DRAFT W/CB
	P.B. P# 4622
	SCALE: 1" = 40'

R. C. KELLY
LAND SURVEYORS
 10111 COLESVILLE ROAD, SUITE 123
 SILVER SPRING, MD 20901
 301-593-8005
& ASSOC., INC.