

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: 7/10/15 **ONSITE SEWAGE DISPOSAL SYSTEM** P 556529

INSTALLATION APPROVAL DATE: 7-10-15 **PERMIT** A Repair

MINOR REPAIR

PROPERTY ADDRESS: 14939 Victory Lane

SUBDIVISION: Meriwether Farm LOT: 21 TAX ID: _____

CONTRACTOR: J. R Plumbing EMAIL: _____

CONTRACTOR ADDRESS: 502 Carrick Lane, Severn MD, 21144 PHONE: 443-618-0806

PROPERTY OWNER: Steve Casey EMAIL: _____

OWNER ADDRESS: 14939 Victory Lane, Glenelg, MD 21737 PHONE: 410-987-1094

NUMBER OF BEDROOMS: 4 SEPTIC TANK SIZE: _____ DRAINFIELD SIZE/TYPE: _____

LOCATION:	<i>Sie in sewer line to pool house.</i>
NOTES:	

ISSUED BY: *Dana Leonard* ISSUE DATE: 7-10-15 EXPIRATION DATE: 7-10-16

- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM
- 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 FOR INSPECTION OF SEPTIC SYSTEM.

NOT TO SCALE

As-Built submitted
by plumber/contractor

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 I LEVEL _____

MANUFACTURER _____
CAPACITY _____ GAL
SEAM LOC _____
TANK LID DEPTH _____
BAFFLES _____
BAFFLE FILTER _____
MANHOLE LOC _____
6" PORT LOC _____
WATERTIGHT TEST _____
SLOTTED _____
DATE ON LID _____

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:

INSTALLATION:

7/12/15
See notes on separate page (KAW)

7/13/15 Side visit made. Everything covered per verbal inspection
comm. to. Own all site insp. records. No issue seen

FINAL INSPECTOR

R. Wall

DATE OF APPROVAL

7/13/15



HOWARD COUNTY HEALTH DEPARTMENT

56529

7/10/15
DATE

PS

Received From

ACE Plumbing

PHONE #

410 989-1094

For

Repair / 14939 Victoria Lane

- CASH
- CHECK

NO.

5018

Gifts - June

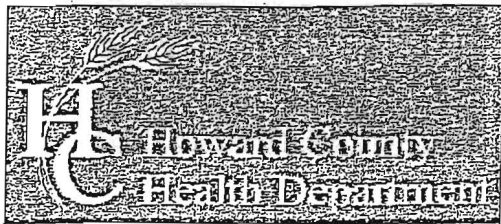
Dollars

\$

55.00

Received By

Atkins



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

INFORMATION FORM - SEPTIC SYSTEM REPAIR/UPGRADE

Reason for Request:

- Reason for Request:
- [] Failing System
- [] System relocation for proposed addition
- [x] System upgrade for proposed addition
- [] Inadequate treatment zone
- [] Collapsed septic tank
- [] Collapsed drywell

Has the septic tank been pumped within the last month?

- Has the septic tank been pumped within the last month?
- [] Yes Date pumped: _____
- [] No

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

- Was a visual inspection of the septic tank and/or drain fields conducted?
- [x] Yes Explain observations: _____
- [] No

Was a visual inspection of the sewage line conducted?

- Was a visual inspection of the sewage line conducted?
- [x] Yes
 - Blockage leading to the tank
 - [] Yes. Explain: _____
 - [] No
 - Blockage leading to the field
 - [] Yes. Explain: _____
 - [] No

Existing system design

- Existing system design
- [] Drywell
- [x] Trench
- [] Mound
- [] Unknown
- [] Other: _____

Is discharge surfacing on the ground?

- Is discharge surfacing on the ground?
- [] Yes
- [x] No

[] 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: JTR Plumbing & Heating Contractor's Phone: (410) 618-0800
Contractor's Address: 502 CAROL Lane, St. Charles, MD 21144
Property Address: 14939 Victory Lane, St. Charles, MD 21144
Subdivision: _____ Lot: _____ Year Built: _____
Owner's Name: Steve Casey Owner's Phone: (410) 987-1094
Name of previous owners: _____ Existing bedrooms: _____
Proposed bedrooms: _____

Has this request been previously discussed with a Sanitarian? (Name): _____
Public Sewer available/nearby: _____

*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.

14939 Victory Lane
Glenelg, MD 21737

