

Building Permit Application
Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455

Date	Received:	

www.howardcountymd.gov

Permit No.:	

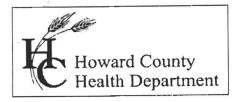
1200	-11 -0hr			, ,		
uilding Address:	1HUNDEN 1/1	DO	Property Owner's Name:	1.10 13	ABER	
70	MD Zip Code: 21	207	Address: 1024 THUNDELBIRD OF			
ity: [MIDBINE State:		City: WIDD BINK State: MD Zip Code: 21/7				
	P/WP/BA #:		Phone: 410 - 370-	9548 Fax		
ubdivision: REGENTS	PARK IL		Email:			
11. A	V)					!\
ot: 40 Tax Map: 4	Parcel:		Applicant's Name & Mailing	Address, (If oth	er than stated n	ereinj
1			Applicant's Name:	1000	120	
xisting Use:			Address: 2212 Dry W City: Martinoph	State: Ma	Zip Code	21204
COD			Phone: 417. 200 - 1	Last -	Zip code:	-
Proposed Use:	D(1)		Email: Eddie Vel	(Co	megst.	net
stimated Construction Cost: \$	15,000		Control			1.04210
Description of Work: Concte	ver 14 270	- 11	Contractor Company: 501	ungun	c constr	14/2
Land Con T		4	Contact Person: Jim	NV5		
WOOD HEAVING 1	JUSCE WITH	1	Address: 3211 Ens	TORN AN	/ K.	
GAIRS TO OR	ADE OFF		City: 1 ACTIMINE State	e: MP	Zip Code: 21	224
REAR OF its	155	11	License No.: 135390	7		
1691 01 010			Phone: 410-837 95	78 Fax:	-	
			Email:			
Occupant/Tenant Name:		.	· ·			
	DV	ENO.	Engineer/Architect Company:	NONE		
Was tenant space previously occupied	? □Yes	□No				
Contact Name:			Responsible Design Prof.:			
Address:			Address:		27.2	
				_		
City:	State:Zip Code:		City:Stat			
Phone:	Fax:		Phone:	Fax:	••	
Email:			Email:			
Commercial Building Characteristic	s Residential Building Ch	aracteristics	Utilities			
Commercial Building Characteristic	☐ SF Dwelling ☐ SF Tow			□ No	100	
Height: No. of stories:	Depth	Width	210001101	□ No		
Gross area, sq. ft./floor:	1st floor:					
Gross area, sq. rc./ noor.	2 nd floor:		Water Supply	<u>K</u>		
Area of construction (sq. ft.):	Basement:		☐ Public			102 (4)
Alea of construction (sq. 1c).	☑ Finished Basement		☐ Private			14/5
Use group:	Unfinished Basement		Sewage Dispos	sal .		
Soc Broads.	☐ Crawl Space		☐ Public			
Construction type:	☐ Slab on Grade		☐ Private			
☐ Reinforced Concrete	No. of Bedrooms:					
☐ Structural Steel	Multi-family Dw	elling	Heating Syste	<u>m</u>		
□ Masonry	No. of efficiency units:		☐ Electric ☐ Oil			
☐ Wood Frame	No. of 1 BR units:		☐ Natural Gas ☐ Prop			
☐ State Certified Modular	No. of 2 BR units:		☐ Other:			
v	No. of 3 BR units:		Sprinkler System:			
	Other Structure:		Yes No			
	Dimensions:					
> Roadside Tree Project Permit	Footings:		Grading Permit Number:			
□Yes □No	Roof:		Creding Fermit realisers		 	
Roadside Tree Project Permit #	☐ State Certified Modul	ar				
	☐ Manufactured Home	red Home Building Shell Permit		rmit Number:		
Roadside Tree Project Permit #	☐ State Certified Modul ☐ Manufactured Home	S ALITHOPIZED TO MA	KE THIS APPLICATION: (2) THAT THE IN	FORMATION IS COF	RRECT; (3) THAT HE/S	HE WILL CO
THE UNDERSIGNED HEREBY CHITTIES AND AGE WITH ALL REGULATIONS OF JOWARD COUNTY APPLICATION; (5) THAT BE THE GRANTS COUNT APPLICATION; SIGNATURE APPLICATION; SIGNATURE COMMENT Email Address	WHICH ARE APPLICABLE THERETO; (4) Y OFFICIALS THE RIGHT TO ENTER ON	THAT HE/SHE WILL PE TO THIS PROPERTY EQ	BEORM NO WORK ON THE AROVE REF	ERENCED PROPERTY	NO I SPECIFICALLY D	ESCRIBED IN
Title/Company						
y warriparry	Checks Pavable to	: DIRECTOR OF FIN	ANCE OF HOWARD COUNTY			
		LEASE WRITE NEAT	LY & LEGIBLY**			
		-FOR OFFICE L	ISE ONLY-			
AGENCY DATE	SIGNATURE OF APPROVÁL	DPZ SETBACK	ACK INFORMATION Fi		\$	
	SIGNATURE OF AFFROYAL	Front:		Permit Fee	\$	
State Highways		Rear:		Tech Fee		
Building Officials		Side:		Excise Tax \$		

PSZA (Zoning) PSZA (Engineering) Health

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

Front:		
Rear:		
Side:		
Side St.:		
All minimum setbacks met?		□No
Is Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
Lot Coverage for New Town Z	one:	
SDP/Red-line approval date:		

Filing Fee	\$		
Permit Fee	\$		
Tech Fee	\$		
Excise Tax	\$		
PSFS	\$		
Guaranty Fund	\$		
Add'l per Fee	\$		
Total Fees	\$		
Sub- Total Paid	\$		
Balance Due	\$		
Check	#		



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: 8.218 ONSITE SEWAGE DISPOSAL SYSTEM P 26.39 to					
APPROVAL DATE: 9/10/18 SEC PERMIT: CONSTRUCTION A					
PROPERTY ADDRESS: 1024 Thunderbird Drive					
SUBDIVISION: Fairlane Farms LOT: 40 TAX ID:					
CONTRACTOR: South Carroll Backhoe EMAIL: scbackhoe@comcast.com					
CONTRACTOR ADDRESS: 4410 Salem Bottom Road, Westminster, MD 21157 PHONE: 410-596-3618					
PROPERTY OWNER: NV Homes EMAIL:					
OWNER ADDRESS: 9720 Patuxent Woods Drive, Columbia, MD 21046 PHONE: 410-379-5956					
SEPTIC TANK SIZE (GALLONS): 2000 TANK MANUFACTURER: Babylon Vault or equivalent					
PUMP MODEL: N/A PUMP SIZE N/A PUMP TANK CAPACITY: N/A					
DISTRIBUTION SYSTEM: GRAVITY PRESSURE DOSED BEDROOMS: 5 APPLICATION RATE 1.2					
LINEAR FEET REQUIRED: 87.50 INLET DEPTH: 4					
TRENCHES: TRENCH WIDTH: 3 MAXIMUM BOTTOM DEPTH: 8					
MINIMUM SPACE					
BETWEEN TRENCHES: 10 EFFECTIVE AREA BEGINNING DEPTH: 4					
LOCATION: SURVEYOR PRIOR TO PRE-CONSTRUCTION INSPECTION.					
NOTES:					
ISSUED BY: Hank Oswald ISSUE DATE: 8.218 EXPIRATION DATE: 8.218					
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 TANKS REQUIRED NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADIENT FROM ANY WATER WELL					
NOTE: NAANHOLE DISERS RECUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS					
NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM					
NOTE: MORE 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.

	@ HO-15-0398			
[1"≈30]	NOT TO SCALE	< <		TRENCH/DRAINFIELD DATA WIDTH INLET BOTTOM 3' 4' 8' NUMBER OF TRENCHES 2
			Driveway	ABSORPTION AREA 267' + SIDEWALDISTRIBUTION BOX LEVEL YES DISTRIBUTION BOX BAFFLE YES
		Garage		SEPTIC TANK DATA SEPTIC TANK 1 LEVEL YES
	well line A 2	9		MANUFACTURER BABYLON CAPACITY 2000 GAL SEAM LOC TOP TANK LID DEPTH 1.5-2' BAFFLES YES
	23' to A O O			MANHOLE LOC FRONT - REAR 6" PORT LOC NONE WATERTIGHT TEST NO SLOTTED YES
	16.5'_	555		DATE ON LID
		'++ A '++ C }5'	\	TANK LIDDEPTH BAFFLES BAFFLE FILTER MANHOLE LOC 6" PORTLOC
	120' to C TI = 44'			WATERTIGHT TEST SYOTTED DATE ON LID
Slightly than st	roll on site for layou	yench enas	trenches at	house are closer, shapes highest part of SDA. Keep
1NSTALLATION: 0/3), 9/4/18 Trenches	/18 On site while the complete + left op need bonse cannot	nk was set. I	to obvious crack	es on bottom or sides of tank. 3-3.5' to stone. Pipe land from
Connection made,	(cc)			
FINAL INSPECTOR	Savah Collins		DATE OF APPRO	OVAL 9/10/18



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

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

MEMORANDUM

TO:

Fisher, Collins & Carter, Inc. 10272 Baltimore National Pike

Ellicott City, MD 21042

FROM:

Hank Oswald, L.E.H.S.

Well & Septic Program

RE:

1024 Thunderbird Drive

Fairlane Farms, Lot 40

Date:

April 24, 2018

The OSDS Plan for 1024 Thunderbird Drive has been reviewed with the following comments:

- 1.) Application rates are incorrect. Should be 1.2 not 0.8. Please review septic specs and make changes to calculations as necessary.
- 2.) Initial trench detail and trench elevations are incorrect (i.e. bottom trench elevation 603.8?)
- 3.) Septic profile elevations do not match adjacent list of elevations
- 4.) Move d-box to center and split trenches. Adjust trench lengths according to new calculations.

Oswald, Hank

From:

Oswald, Hank

Sent:

Wednesday, April 25, 2018 1:48 PM

To:

'Tony Fertitta'

Subject:

OSDS Plan_1024 Thunderbird Drive

Attachments:

OSDS Memo To FCC_2018.pdf

Hi Tony:

Please see attached memo regarding the OSDS Plan for 1024 Thunderbird Drive. Please contact me with any questions.

Thanks,

Hank

Hank Oswald
Licensed Environmental Health Specialist
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
hoswald@howardcountymd.gov

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FISHER, COLLINS & CARTER, INC.

CIVIL ENGINEERING CONSULTANTS and LAND SURVEYORS

Transmittal

Terrell A. Fisher, P.E., L.S. Earl D. Collins, P.E. Charles J. Crovo, Sr., P.E., L.S.

Paul W. Kriebel, P.E.
Mark L. Robel, P.L.S.
Aldo M. Vitucci, P.E.
Frank Manalansan II, L.S.
Stephanie Tuite, RLA, P.E., LEED AP BD&C

Via:	☐ Fax	☐ Mail ginal to follow via U.		ger	E-Mail	☐ To Be Picked Up
To:	Bureau of E	invironmental H	lealth		Attn: Ha	ink
	8930 Stanfo	ord Blvd.			Fax:	
	Columbia, I	Maryland 21046	6-4544		Phone: 41	10-313-2640
<u> </u>						
From:	Tony Fertitt	a			CC:	
Re:	Fairlane Fa	rms Lot 40			W.O.# 05	106-3003
	April 23, 20				Pages: 0	Page(s) Including this cover
Late.		m quadrice (graphs) 1 quadrice (replacement of graphs) 1 quadrice (gr	Account, consider constant			
We a	re forwarding:	⊠ Prints □ 0	Copy of Letter	Spec	cifications	☐ Shop drawings ☐ Other
	.	Urgent F			equested	□ For Review & Comment
Rema	irks:					
Re:	Fairlane Farm	n, Lot 40, 1024 F	airlane Rd.			
Here any c	are 3 new co	opies of the OSI	DS for Lot 24	for your	review. F	Please let me know if you have
Than	k You,					
Tony	·.					
Fish	er, Collins, &	Carter, Inc. Ph.	410-461-285	5		

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Bureau of Environmental Health

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Facebook: www.facebook.com/hocohealth Twitter: HowardCoHealthDep

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

SEWAGE DISPOSAL SYSTEM SPECIFICATIONS WORKSHEET
Address: Thunderbird Dr
Address: Thunderbird Dr Subdivision: Fairlane Farm Lot: 40
Initial system: Application rate: 1.2 Effective area beginning depth: 4 Bottom maximum depth: 8 1st Replacement: Application rate: 1.2 Effective area beginning depth: 4 Bottom maximum depth: 8 2nd Replacement: Application rate: 1.2 Effective area beginning depth: 4 Bottom maximum depth: 8 Design Flow = 150 gallons per day per bedroom Design flow ÷ application rate = square footage of drainfield required Linear length of trench required = drainfield square footage x sidewall reduction percentage ÷ trench width
Sidewall reduction credit formula: $\frac{W+2}{W+1+2D} \times 100 = \frac{\text{Percent of length of standard trench where W=trench width and D= depth between effective area beginning depth and trench bottom.}$
 Standard design requirements: All trenches must be equal length unless low pressure dosed All trenches must be on contour Minimum trench spacing: 10' for all trenches utilizing sidewall reduction credit. Additional spacing may be necessary for any trench using over 3.5' of effective sidewall. In those cases, the spacing formula is 2D +W up to a maximum spacing of 18'. Minimum trench spacing for trenches with no sidewall credit (bottom area only) is 6' for a 2' wide trench and 9' for a 3' wide trench (spacing is measured edge to edge) Maximum trench length is 100' Maximum pipe depth is 4'
Additional requirements:

Approved: Hank Oswald Date: 1/30/18

