

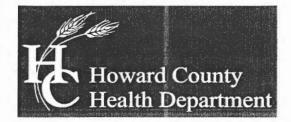
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IL Howard County Flealth Department	Bureau of Environmental Health 8930 Stanford Boulevard, Columbia, MD 21045 Main: 410-313-2640 Fax: 410-313-2648 TDD 410-313-2323 Toll Free 1-866-313-6300 www.hchealth.org Facebook: www.facebook.com/hocohealth Twitter: HowardCoHealthDep	Э` \$
Dr. Maura J. Rossma	n, M.D., Health Officer	_
INFORMATION FORM – SEP	FIC SYSTEM REPAIR/UPGRADE	
	ic tank been pumped within the last month?	
Failing System 🛛 Yes	Date pumped:	
System relocation for proposed addition No		
□ System upgrade for proposed addition Was a visual	inspection of the septic tank and/or drain fields conducted?	
 Inadequate treatment zone Collapsed septic tank 	Explain observations:	
Collapsed drywell		
Was a visual	inspection of the sewage line conducted?	
Existing system design	· · · · · ·	
	Blockage leading to the tank	
	Yes. Explain:	
Mound	No install	ing
-	Blockage leading to the field Norweco E	ATtank
O Other:	Yes Explain:	-
Is discharge surfacing on the ground?	No	
Yes Additional	Comments: Spoke to Kerin Wolk w	The Sard
No No	Permit with be roade Erro	aloing
*For REPAIRS, are the owners proposing, or do they plan to add in living space additions, garages, etc? This information must be discle able to accommodate requests in the field for property modifications additional fee, testing, and submittal of a Percolation Certification Pl	unrelated to the repair request. Such requests may require an	perc.
Septic Contractor: <u>Freedom Septic</u> Contractor's Address: <u>3809</u> Liberty PL	Contractor's Phone: <u>410-934-6363</u> Julie MD 21-734	
Property Address: 13014 Triadelphin Subdivision: <u>Creen Henge</u> Owner's Name: <u>Siegel</u> , maetin	D. County file: Lot: 4 ' Year Built: 191.93 ' Owner's Phone: 410-903-5238	
Name of previous owners:	Proposed bedrooms:	/
Has this request been previously discussed with a Sanitar Public Sewer available/nearby:	rian? (Name): <u>Ken'n WOLF</u>	٢
*A Sanitarian will be in contact within three business days, dep scheduling/review of the repair or upgrade.	pending upon the urgency of the situation, to coordinate the	
*Prior to scheduling inspections, scaled plans should be submittee Print out a copy of Real Property Data via Dept. of Taxation website. If public sewer may be nearby, verify whether sewer is technically "a If sewer is available and the property is within the Metropolitan Distr exemption exists, the owner should justify the request in writing.	Indexed file found	
exemption exists, the owner should justify the request in writing. If soil/site conditions are limited and sewer and/or Metro District stat	us is not conducive to connection, the Sanitarian may recommend	

If soil/site conditions are limited and sewer and/or Metro District status is not conducive to connection, the Sanitarian may recommen 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.

	ig .	Bureau of Environmental Health 8930 Stanford Boulevard, Columbia, MD 21045			
H.		Main: 410-313-2640 Fax: 410-313-2648			
	Ioward County	TDD 410-313-2323 Toll Free 1-866-313-6300 www.hchealth.org			
· F	Iealth Department	Maura I December M.D. Us		w.facebook.com/hocohe	alth
DECEIDE	DATE E 20 2017 O	Maura J. Rossman, M.D., He NSITE SEWAGE DISPOS			
RECEIPT					560647
APPROVAL PROPERTY A	BISUTT DE		F <u>REPAI</u>	<u>×</u> A	A560621
SUBDIVISION			LOT: 4	TAX ID: 0	3-290719
CONTRACTO				Kristin@freedoms	and the second definition of the
CONTRACTOR		Road, Sykesville, MD 21784			410-984-6863
CONTRACT	TOR CERTIFIED FOR BAT INST			UFACTURER:	
PROPERTY C	WNER: Martin and To	by Siegal	EMAIL:	tskim@yahoo.com	<u>m</u>
OWNER ADDR	ESS: 12014 Triadelphia	Road		PHONE: 4	10-905-5228
BAT UNIT M	ODEL: Norweco TNTLP	600 PUMP SIZE:	PUMP 1	ANK CAPACITY:	
OPERATION &	MAINTENANCE AGREEMEN	T DATE SIGNED: 5-17-1	7 1	DATE RECORDED:	-18-18 KAD
DISTRIBUTIO	N SYSTEM: 🛛 GRAVI		BEDROOMS		TION RATE: 1.2
	LINEAR FEET REQUIRED:	135		INLET DEPTH:	3
TRENCHES:	TRENCH WIDTH:	2	MAXIMU	M BOTTOM DEPTH:	9
	MINIMUM SPACE BETWEEN TRENCHES:	EFF	ECTIVE AREA	BEGINNING DEPTH:	5
LOCATION:		RIAN DURING PRE-CONSTRUCTION			
Install 2x68' trenches on contour running North towards property line, just above perc test A. Trench elevations confirmed in field at time of perc test. Locations staked in field. BAT unit to be set outside 100' well radius. Pump NOTES: and collapse existing septic tank and drywell.					
ISSUED BY:	Kevin Wolf	ISSUE DATE:	5-30-2017	EXPIRATION DAT	TE: 5-30-2018
NOTE: CONT	RACTOR MUST SCHEDULE A PR	E-CONSTRUCTION INSPECTION PRIO	R TO BEGINNIN	G ANY INSTALLATION	
		SPECTION AND GAIN APPROVAL OF A			
	E MUST BE APPROVED BY HEAL RTIGHT SEPTIC TANKS REQUIRE	TH DEPARTMENT AND GRAVEL TICKET	MUST BE AVA	ILABLE FOR REVIEW.	
NOTE: ALL P	ARTS OF SEPTIC SYSTEM SHALL	BE AT LEAST 100 FEET DOWNGRADIEN		VATER 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 ACKOWLEDGE 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 GUIADNCE. NOTE: AN INDIVIDUAL CERTIFIED BY MDE AND THE MANUFACTURER FOR BAT INSTALLATION MUST BE PRESENT AT ALL TIMES DURING BAT INSTALLATION.					
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.					
	CAL	410-313-1//1 TO SCHEDU	E INSPECT	UNS.	

TRENCH/DRAINFIELD DATA WIDTH * INDET BOTTOM
2' 3' 9' NUMBER OF TRENCHES 2 TOTAL LENGTH 135' ABSORPTION AREA 270' + SIDEWA DISTRIBUTION BOX LEVEL YES DISTRIBUTION BOX BAFFLE YES DISTRIBUTION BOX PORT YES
SEPTIC TANK DATA SEPTIC TANK I LEVEL YES MANUFACTURER BACKYIVER CAPACITY 1300 GAL SEAM LOC TOP TANK LID DEPTH 0.5 - 1 BAFFLES NO BAFFLE FILTER MV MANHOLE LOC FRONT, MID. KEAR 6" PORT LOC NONE WATERTIGHT TEST NO SLOTTED NO DATE ON LID 5-23-17 (STAMP) PUMP/SEPTIC TANK LEVEL MANUFACTURER CAPACITY GAL SEAMLOC GAL
TANK LID DEPTH BAFFLES BAFFLE FILTER MANHOLE LOC 6" PORT LOC WATERTIGHT TEST SLOTTED DATE ON LID
E towards property he. me at fore today. system me. Location grun
in with dirt. Nonveco tank om Norweco on site to nun for inspection. 2' wide, 2-2.5' connected tomorrow - need up. Alarm Sounds, acrator



1 2 1

Bureau of Environmental Health

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

AGREEMENT AND EASEMENT FOR INSTALLATION OF BEST AVAILABLE TECHNOLOGY SYSTEMS WITH BAY RESTORATION FUNDS.

THIS AGREEMENT is made this day of <u>May</u>, among <u>Siggel Mathic how etable</u> hereinafter referred to as "Owner," the <u>Howard</u> County Health Department hereinafter collectively referred to as the "County," and the Department of the Environment, hereinafter referred to as the "Department."

WHEREAS, Owner owns a tract of land located on <u>JOD 14 Triadelphia</u> <u>fu</u>, in the Election District of <u>Howard</u> County, Maryland, and the deed to same is recorded among the Land Records of <u>Howard</u> County, Maryland, in <u>Columbia</u> and in Liber <u>1298</u> Folio <u>416</u>.

WHEREAS, the Bay Restoration Fund (BRF) may provide a grant for the cost attributable to upgrading an onsite sewage disposal system to the Best Available Technology (BAT) for the removal of nitrogen.

WHEREAS, the BRF may also provide a grant for the cost difference between a traditional onsite sewage disposal system and a system that utilizes the BAT for the removal of nitrogen.

WHEREAS, Owner understands that participation in the Bay Restoration Fund is voluntary.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the Department and the County the right to enter upon the property at any reasonable time for access to the system to make periodic inspections and the Owner agrees to provide any information and data requested and needed by the Department to develop accurate and thorough test results.
- B. Owner acknowledges and agrees that a MDE certified and manufacturer-approved installer will install the BAT system.
- C. Owner acknowledges and agrees the manufacturer or manufacturer's authorized service provider will provide for Operation and Maintenance of the BAT for a period of 5 years as a condition of sale of the BAT. After the initial 5 year period an Operation and Maintenance contract with a certified service provider must be maintained in perpetuity by the property owner.
- D. Owner acknowledges and agrees that the manufacturer appointed Operation and Maintenance provider will have access to the BAT system at all times.
- E. Owner acknowledges and agrees that the manufacturer or manufacturer's authorized service provider will have access to sample the effluent of the BAT system. Owner acknowledges and agrees that the proposed installation of a BAT system funded by the BRF is voluntary. Owner agrees that there shall be no liability on the part of the County or Department to Owner if this BAT system fails, and that the County and the Department do not warrant or guarantee that the BAT system will adequately or properly function.
- F. Owner acknowledges and agrees that neither the County nor the Department nor any of its

agents or employees, either officially or individually, underwrites the operation of any system approved by them.

- G. The Owner will devote such care and effort to the maintenance of the BAT system so that any malfunction is not the result of poor maintenance, faulty operation, or neglect.
- H. The Canaan Valley Institute agrees to grant up to <u>\$ 100%</u> toward the cost of installation of the BAT system, and financial responsibility is limited to this amount. Operating costs will be at the Owners expense.
- I. The Owner acknowledges that the BRF grant can only be used for that portion of the OSDS attributable to (BAT) for the removal of nitrogen.
- J. Owner acknowledges in the event the total project cost is greater than \$25,000 the proposal will have to be approved by the Maryland State Board of Public Works.
- K. The Owner agrees to contact both the Water Management Administration, On-Site Systems Division of the Wastewater Permits Program and the County at least forty-eight (48) hours prior to system installation, so that the Department has the opportunity to be present at the time of installation or thereafter for inspection.
- L. The Owner must install BAT system according to the manufacturer recommended plans and specifications approved by the Department.
- M. The Owner agrees and acknowledges that if installation deviates substantially from the approved plans or changes such that performance of the system is compromised or reduced, BRF funding will not be provided.
- N. This agreement shall run with the land and binds the Owner, his heirs, successors, assigns. Owner further agrees that he shall inform in writing any purchaser or lessee of the property that the system may require maintenance or other attention. The Owner agrees to record this agreement in the land records of <u>Howard</u> County.
- O. This agreement shall not be construed to limit any authority of the Department to protect the public health, safety or comfort or to issue any other orders to take any other action that is now or may hereafter be within its authority.
- P. This agreement may be voided at the discretion of the Department if the system construction is not completed within six (6) months of the effective date of this agreement.
- Q. This agreement contains the entire agreement and understanding between the County and the Owner and the Department. There are no additional terms other than as contained in this agreement. This agreement may not be modified except in writing signed by each of the parties or by their authorized representatives.
- R. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated above.

DATE: 46

DATE:

Owner

Howard County Health Department

	MARYLAND DEPARTMENT OF 1800 Washington Boulevard Ba (410) 537-3000 1-800-633-6101	Clerk of the Circuit Court for Howard County Land Records/Licensing	20.00
BAY REST	WASTEWATER PERMIT	The Thomas Dorsey Building 9250 Bendix Road Columbia, MD 21045 410-313-5850	40.00 60.00
General Information:	PRE-APPLICATION FOR FINAN(LR - Agreement Recording Fee 1x 20.00 20.00 Ref: 83	= 50.00 14 CC13-MH oan
Project Address:	funds are being requested. 12014 Thiadelphia ha	LR - Agreement Surcharge 1x 40.00 40.00 SubTotal: 60.00	8.05 -
Project Location/Count	Toby Siegel, Reing Mart	CRD-Credit 60.00 Credit Card Confirmation : 018626	_
Applicant Address: Congressional District		05/18/2017 15:13 CC13-MH #8409010 /497/109 Thank you for visiting us today~	
Contact Person/Title: Contact Address:	12014 Triadelphin Rd Ellist	E-mail: +SKIMG Yahoo. (na Mini Markata kata kata kata kata kata kata kat
Facility Type: │ Individual Res │ Small Multiple │ Large Multiple │ Small Commer		e permit) lischarge permit)	<u>.0/h_</u>
Project is locat	Please check all that apply to your applicati ed either within Chesapeake or Coastal Bay es a replacement or repair of a failing OSD	Critical Areas	
five years, and	the cost of the unit only. All other necessar	e engineering, inspection, maintenance contract y sewage disposal system costs including conve ments encountered or required by the local app	entional tank,

authority during the unit installation are to be paid by the property owner/applicant.

*Please note, this is only a Pre-Application and the completion of this form does not guarantee the availability of funds to the applicant.

Date Received:

Reset Form

Print Form

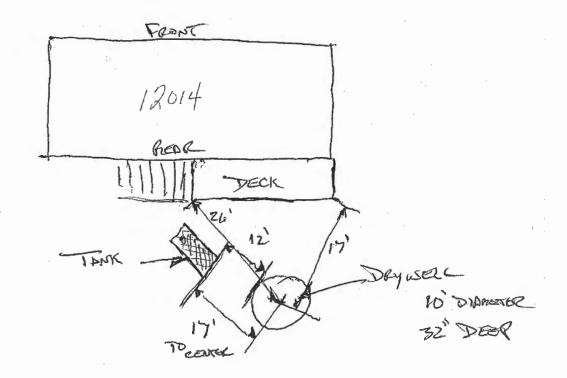
MDE/WMA/FIN.020 2/2/2006 TTY Users 1-800-735-2258 Page 1 of 1 Recycled Paper Back River Pre-Cast, LLC PO BOX 329 Glyndon, MD 21071 Phone # 410-833-3394 Fax # 410-833-4116

Letter of Certification

This is to certify that the Norweco Singulair TNT 600 GPD Septic Tank installed at 12014 Triadelphia Rd., Ellicott City, MD 21042 June 27, 2017 was installed according to the manufacture's specifications. Installer: Daniel Farrow Property Owner: Martin Siegel Permit #

THIS CERTIFICATION IS FOR INSTALLATION ONLY. THE 5-YEAR OPERATIONS & MAINTENANCE AGREEMENT FROM DATE OF INSTALLATION WILL ONLY GO INTO EFFECT AFTER BACK RIVER PRE-CAST, LLC RECEIVES FINAL AND FULL PAYMENT FOR THE SYSTEM.

MATTHEW GECKLE Vice-President



Fogle's Septie Clean, Inc. sketch submitted by Toby Siegel, 12/2/2016

Allied Well Drilling

P.O. Box # 129 Annapolis Junction, MD 20701 Office #: 301-776-8370 Fax #: 301-776-8374 **Contract**

Cell #:				Primary Phone #:			
Map Coordinates:		Work #:				Fax	#:
This Agreement, made this and Allied Well Drilling (hereinafter c				Martin S	-	•	ter called the "Owner")
			-		WORK OF U	le property	
12014 Triadel	phia Rd	EII	icott City,	MD u	inder the te	rms, conditie	ons
and consideration, and pay for the sa	ame, all as herein	set forth:					
1. To perform service listed below ar	nd furnish all equip	ment and la	abor to comple	ete job.			
All electrical wiring, connections, in at the expense of the owner.	nstallations from t	he power pa	anel and any a	and all non-d	rilling work	to be perfor	med by owner
The owner agrees to pay the full c collected by an attorney.	contract price plus	33 1/3% for	attorney fees	and court c	osts if the a	iccount shou	uld have to be
4. Interest at the rate of 18% percent	t will be charged o	n all money	not paid whe	n due.			
5. The owner agrees that title in and	to any and all mat	terials furnis	hed by the dr	iller, whethe	r in the grou	und or attach	hed to the premises,
shall remain the property of the dr	iller, and the right	to remove t	he pump from	the well and	d materials	from the pre	mises, and it is
agreed that the driller will not be d	eemed guilty of tro	espass in ar	ny manner wh	atsoever if h	e shall retu	rn to remove	e said materials due to
default of payment. The owner as	sumes full respons	sibilities for	property dama	age and/or li	ability which	h may arise	from removal of such
material. This clause binding until	full payment is rea	ceived.					
All materials and/or equipment fur instructions.	nished by the drill	er are guara	inteed for a pe	eriod of (1 Year's)	if maintain	ed according to
7. The contractor will not be respons	ible for damaged	oil lines, sep	otic lines, buri	ed structures	s, foundatio	ns, lawns, tr	rees, shrubbery,
flowers, driveways, walkways or u	inmarked utility lin	es. All cutti	ng, debris and	fluids will re	emain on th	e owners pr	emises.
8. Service/repairs and/or installation:	s of water systems	s are as follo	DWS:				

Service Call to Include:

1

1

Dig up Well with Mini-Excavator

Install coupling and additional casing to 2 ft above grade Rough Grade Backfill

\$ 1,250.00

9. The undersigned acknowledges the complete understanding of this agreement and authorizes the work and/or installations

herein above set forth, and agrees to make payments as follows: balance due at time of install

10. For Value Received, and in order to induce the Driller to enter this Contract, Owner by signing in any capacity below ALSO personally guino payment is to be held pending well certification.

Contract Accepted

(Date) 12. (1. 12

Martin Siegel Signed: Martin Slegel

11. This contract will expire after 30 days from the issued