

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

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

RECEIPT DATE: 12/28/21	ONSITE SEWAGE DISPOSA	AL SYSTEM		P P570895		
APPROVAL DATE: 1/25/22(PERMIT: RI	EPAIR		A Repair		
PROPERTY ADDRESS: 1400	1 Celbridge Drive					
SUBDIVISION: Burntwoods	111	LOT: 12	TAX ID:	03-288188		
CONTRACTOR: Fogle's Sept	ic Clean Inc.	EMAIL: Joh	n@fogles	inc.com		
CONTRACTOR ADDRESS: 580 Obrecht Road Sykesville,MD 21784 PHONE: 410-795-5670						
PROPERTY OWNER: David 2	Zwanetz	EMAIL:				
OWNER ADDRESS: Same as ab	ove		PHONE:			
SEPTIC TANK SIZE: n/a	PUMP TANK CAPACITY: 1500	PUMP	SIZE: 1/3	ВНР		
DISTRIBUTION SYSTEM:	GRAVITY PRESSURE DOSED	BEDROOMS:	APF	PLICATION RATE: n/a		
LINEAR FEET REC	UIRED: n/a		INLET DEPT	гн:		
TRENCHES: TRENCH	TRENCHES: TRENCH WIDTH: MAXIMUM BOTTOM DEPTH:					
MINIMUM						
BETWEEN TRE		ECTIVE AREA BEGI	NNING DEPT	гн:		
	SANITARIAN DURING PRE-CONSTRUCTION					
	nk just beyond existing septic tank. Explaine Electrical permit required. Pump and colla					
NOTES: trench. Call for in		apac existing dryw	en. He new	2 Torce main into existing		
ISSUED BY: K. Wolf, LEHS	ISSUE DATE: _:	1/4/2022	EXPIRATION	N DATE: 1/5/2023		
NOTE: CONTRACTOR MUST SCHE	DULE A PRE-CONSTRUCTION INSPECTION PRIOR	TO BEGINNING AN	Y INSTALLATI	ION		
NOTE: CONTRACTOR MUST SCHEE	DULE AN INSPECTION AND GAIN APPROVAL OF A	LL COMPONENTS PR	RIOR TO COVE	ERING		
NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.						
NOTE: WATERTIGHT SEPTIC TANK						
	EM SHALL BE AT LEAST 100 FEET DOWNGRADIEN ED ON ALL SEPTIC TANKS AND PUMP CHAMBERS	T FROM ANY WATER	RWELL			
	REQUIRED FOR INSTALLATION OF ANY ELECTRIC	CAL COMPONENTS (OF THE SYSTE	M		
ELECTRICAL PERM		AL COMPONENTS C)			
NOTE: THE HCHD DOES NOT WARRANTY ANY SYSTEM AND CANNOT GUARANTEE THE PERFORMANCE OF THIS SYSTEM AS DESIGNED. BY						
	THE OWNER AND/OR APPLICANT ACKOWLEDGE					
	D THAT THE HCHD WILL REVIEW OTHER PROPOSITION OR PROFESSIONAL ENGINEER FOR FURTI		E OPTION TO	SEEK THE ADVICE OF A		
NOTE: AN INDIVIDUAL CERTIFIED BY MDE AND THE MANUFACTURER FOR BAT INSTALLATION MUST BE PRESENT AT ALL TIMES DURING BAT						
INSTALLATION.						
	E: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE					

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.

NOT TO SCALE TRENCH/DRAINFIELD DATA Castlebar Dr WIDTH INLET 90° 4' verticle 4P - 5 collapsed NUMBER OF TRENCHES DW TOTAL LENGTH ~ 75 ABSORPTION AREA 225 so A +9 go" 4" verticle down, then 2" = 4" Fence DISTRIBUTION BOX LEVEL no DISTRIBUTION BOX BAFFLE d-box DISTRIBUTION BOX PORT SEPTIC TANK DATA SEPTIC TANK 1 LEVEL MANUFACTURER CAPACITY 750 GAL SEAM LOC __ midsean TANK LID DEPTH BAFFLES inlet + outlet (terracata) HO-15-0245 W BAFFLE FILTER MANHOLE LOC out of ex, house 6" PORT LOC________ WATERTIGHT TEST___ SLOTTED ho DATE ON LID PUMP/SEPTIC TANK LEVEL MANUFACTURER Babulm CAPACITY 1500 SEAM LOC TANK LID DEPTH BAFFLES Met BAFFLE FILTER MANHOLE LOC intet + outle 6" PORT LOC _ WATERTIGHT TEST ___ SLOTTED 10 ROAD NAME DATE ON LID 11 - 26 - 21 PRE-CONSTRUCTION: INSTALLATION: 1/14/22 purposed and collapsed. T.B. (contro) FINAL INSPECTOR . DATE OF APPROVAL _

existing/

FILE INQUIRY NOTES

DATE	RESULTS OF REVIEW FOR FILE
1/4/22	upon arreal to the site, the custers drynell was
	determed full (100%). The easiling pipe innot charten
	sons to existly turch (installed m1993) respectly
	is too shallow. Shot outlet ehrester from tank
	apra- 18" Wither, Will ned to set new 1.509 purp
	take just begand ea. S.T. the M to ex. tanch
	Tranch duy op @ beginning and end. Stone den.
	neer been used (km)



HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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DISTRICT

J	X464-3638X 313-2640	INDEXED	INSPECTO	OR M. Rifkin
· · · · · · · · · · · · · · · · · · ·	Jack Fyock	ısı	PERMITTED TO INSTALL	ALTER X
ADDRESS			PHONE 988-9270	
SUBDIVISION_B	URNTWOODS III	LOT 12 , BL D ROAD	14001 Celbridge Dri	ve
PROPERTY OWNE	R	Coble Judia	4 Darling	
ADDRESS	rright	14001 Celbridge Glenwood, Mary	e Drive	
SEPTIC TANK CAP	ACITY 1000 GALLONS			
NUMBER OF BEDR	ary and homen	inec		
100	TOOMS 3			50 (A)
	JARE FEET PER BEDROOM			***
LINEAR FEET OF T	RENCH REQUIRED FO T			
REPAIR - PUI	RPOSE - SEPTIC SYSTEM HAS	S FAILED.		
^ Ca.	ll for inspection when g	round is opened so sant	tarian can recommend	repair. 4/12/
		and the second of		<u> </u>
PLANS APROVED BY			DATE	e s
			DATE	
	NTIL INSPECTED AND APPROVED			
NEITHER THE HOWAI	RD COUNTY COUNCIL NOR THE HEALTH D	EPARTMENT IS RESPONSIBLE FOR THE	SUCCESSFUL OPERATION OF ANY	SYSTEM
NOTE: CLEANOUT F	REQUIRED EVERY 70 FEET OF SEWER L E.	LINE AND/OR AT 90° SWEEPS IN LINE	0,0,10	ALCON TOTAL
	OF SEPTIC SYSTEMS (I.E. TANK, DISTRIE)) NCH(ES) ARE USED CALL FOR INSPECTION		FAMILY, FOYER, DIN	STORY ADDITION
	L SHALL EXCEED 15 FOOT IN DIAMETER N			B 65
	OM HOUSE TO SEPTIC TANK MUST BE CAS		and the second s	

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CO

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

