

Bureau of Environmental Health

7178 Gateway Drive (410) 313-2640 Columbia, MD 21046 Fax (410) 313-2648 Toll Free 1-866-313-6300

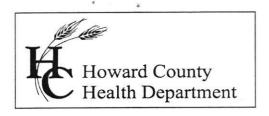
TDD (410) 313-2323 Toll Free 1-86 website: www.hchealth.org

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

RECEIPT D	ATE: 4/2/13 ONSITE SEWAGE DISPOSAL SYSTEM	544587-A			
INSTALLA	PERIVIT				
APPROVAL D	ATE:	Repair			
	REPAIR				
	DRESS: 14027 Triadelphia Mill Road				
	Karinwood LOT: 4 TAX ID:				
CONTRACTOR: Harrison Contracting EMAIL:					
CONTRACTOR ADDRESS: 2858 Flag Marsh Road, MT. Airy, MD 21771 PHONE: 410-795-8691					
PROPERTY ON	VNER: Abhay Moghekar and Yogeeta Narkar EMAIL:				
OWNER ADD	RESS: 14027 Triadelphia Mill Road, Dayton, MD 21036 PHONE	443-413-8108			
SEPTIC TANK SIZE (GALLONS):					
PUMP CHAMBER CAPACITY (GALLONS): PUMP SIZE:					
NUMBER OF BEDROOMS: HOUSE SQ. FT. APPLICATION RATE:					
DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED					
	LINEAR FEET REQUIRED: INLET DEPTH	:			
TRENCHES:	TRENCH WIDTH: MAXIMUM BOTTOM DEPTH	:			
C	MINIMUM SPACE BETWEEN TRENCHES: EFFECTIVE AREA BEGINNING DEPTH				
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.				
NOTES:					
ISSUED BY:	ISSUE DATE: EXPIRATION	DATE:			
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					
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 WIDTH INLET BOTTOM
	NUMBER OF TRENCHES
	TOTAL LENGTH
	ABSORPTION AREA
	DISTRIBUTION BOX LEVEL
	DISTRIBUTION BOX BAFFLE
	DISTRIBUTION BOX PORT
	SEPTIC TANK DATA SEPTIC TANK 1 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
	CAPACITYGAL
	SEAM LOC
	TANK LID DEPTH
	BAFFLES
	BAFFLE FILTER
	MANHOLE LOC
	6" PORT LOC
	WATERTIGHT TEST
	SLOTTED
ROAD NAME	DATE ON LID
PRE-CONSTRUCTION:	
PRE-CONSTRUCTION:	
INSTALLATION:	
EINAL INSPECTOR	ATE OF APPROVAL
FINAL INSPECTOR DA	ATE OF APPROVAL



Reason for Request:

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website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

A544587-A

INFORMATION FORM - SEPTIC SYSTEM REPAIR / UPGRADE

A. Failing System (includes surface discharg Has the contractor verified through excavation/ B. System relocation for proposed addition f C. To replace a collapsed septic tank D. To replace a collapsed drywell	pumping evaluation that there are no pipe blockages?
property, i.e. pools, living space additions, garage Health Department will not be able to accommo	do they plan to add in the future, any additions or modifications to the ges etc? This information must be disclosed at the time of this application. The odate requests in the field for property modifications unrelated to the repair al fee, additional testing, and submittal of a Percolation Certification Plan, if egulation.
Septic Contractor:	Harrison Conference
Contractor's Address:	2858 Flag Marsh Rd
C	M+ A.Ly MO 21771
Contactor's Phone #:	14027 Triadelebia Mill Rd Daytun
Property Address:	
Property (Subdivision) & Lot #: County file #, if known:	Karin wood Lot 44
Owner's Name and Phone #:	Albay Moghe Kar + logeeta Narkar 443-413-8108
Is public sewer available/nearby:	No
If public sewer may be close, mention further re	esearch will be performed to verify availability
Names of any previous owners:	Michael Morroni Raymond Hance
Year House Built:	1975
# of Existing Bedrooms:	3
# of Bedrooms after completion of addition:	5
Has this request been discussed previously with an	other Sanitarian: Name:
A Sanitarian will be in contact within three businesscheduling/review of the repair or upgrade.	ss days depending upon the urgency of the situation to coordinate the
Print out a copy of the Real Property Data via Depr	t. of Taxation websiteIndexed file found
*Prior to scheduling inspections, scaled plans sh	ould be submitted to clarify the nature of the addition.

If public sewer may be nearby, verify whether the sthrough the Bureau of Engineering (x2414).	sewer is technically "available" (defined as abutting or within the property),

If soil/site conditions are limiting and sewer and/or Metro District status not conducive to connection, Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. Owner should contact Charlotte Dryden, x4419, for further detail.

If sewer is available, and property is within the Metropolitan District, connection to sewer is required. If owner believes reasons for

If sewer is available, verify whether the property is within the Metropolitan District (Finance x2061).

exemptions exist, owner should justify request in writing.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. Contractor is to notify office of the emergency situation as soon as possible.

