

**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](http://www.hchealth.org)  
 Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)

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

RECEIPT DATE: 4/16/20      **ONSITE SEWAGE DISPOSAL SYSTEM**      P 567366

INSTALLATION APPROVAL DATE: 04/23/2020 (initials)      **PERMIT**      A \_\_\_\_\_  
**MINOR REPAIR - SEWER LINE**

PROPERTY ADDRESS: 13603 Fox Stream Way  
 SUBDIVISION: Fox Meadow      LOT: 5      TAX ID: 03-342107  
 CONTRACTOR: Fogle's Septic Clean Inc.      EMAIL: kim@foglesinc.com  
 CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784      PHONE: 410-795-5670  
 PROPERTY OWNER: Anne Sennet      EMAIL: \_\_\_\_\_  
 OWNER ADDRESS: 13603 Fox Stream Way, West Friendship, MD, 21794      PHONE: 410-963-4600

NUMBER OF BEDROOMS: \_\_\_\_\_ SEPTIC TANK SIZE: \_\_\_\_\_ DRAINFIELD SIZE/TYPE: \_\_\_\_\_

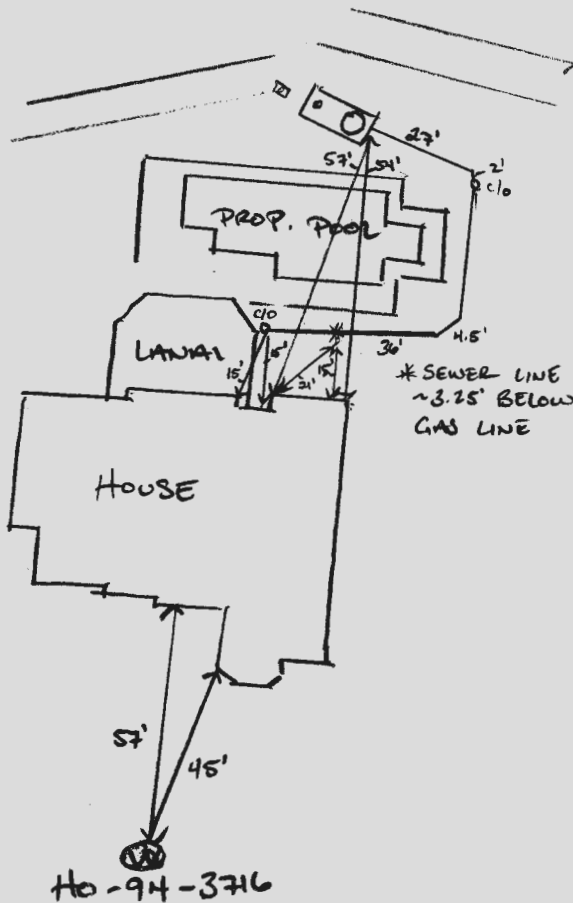
LOCATION:	
NOTES:	W.P. FOR 10' / 20' SET BACK FROM POOL TO SEPTIC TANK FOR B20000893

ISSUED BY: \_\_\_\_\_ ISSUE DATE: 4/16/20 EXPIRATION DATE: 4/16/21

- 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.**

\* SEPTIC TANK HAS POLYLOCK CHILD SAFETY SCREEN.



ROAD NAME  
FOX STREAM WAY

**TRENCH/DRAINFIELD DATA**

WIDTH INLET BOTTOM

EXISTING

NUMBER OF TRENCHES \_\_\_\_\_  
 TOTAL LENGTH \_\_\_\_\_  
 ABSORPTION AREA \_\_\_\_\_  
 DISTRIBUTION BOX LEVEL \_\_\_\_\_  
 DISTRIBUTION BOX BAFFLE \_\_\_\_\_  
 DISTRIBUTION BOX PORT \_\_\_\_\_

PRE-CONSTRUCTION:

**SEPTIC TANK DATA**

SEPTIC TANK 1 LEVEL \_\_\_\_\_  
 MANUFACTURER \_\_\_\_\_  
 CAPACITY \_\_\_\_\_ GAL  
 SEAM LOC \_\_\_\_\_  
 TANK LID DEPTH < 3'  
 BAFFLES \_\_\_\_\_  
 BAFFLE FILTER \_\_\_\_\_  
 MANHOLE LOC INLET  
 6" PORT LOC OUTLET  
 WATERTIGHT TEST \_\_\_\_\_  
 SLOTTED \_\_\_\_\_  
 DATE ON LID \_\_\_\_\_

EXISTING

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 \_\_\_\_\_

INSTALLATION: 04/23/2020 SEWER LINE REDIRECTED TO ~~PER~~ PERIMETER AROUND PROPOSED POOL. INSTALL HAS APPROVED WAIVER FOR A 10' SET BACK FROM POOL TO SEPTIC TANK. OK TO BACKFILL. (S)

FINAL INSPECTOR

DATE OF APPROVAL

04/23/2020



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

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May 16, 2019

Esther Price  
13603 Fox Stream Way  
West Friendship, MD 21794

**RE: Waiver Approval**  
13603 Fox Stream Way  
West Friendship, MD 21794

Ms. Price,

This letter is being issued in response to your waiver request received on May 15, 2019. Your waiver has been **approved** to waive the setback from the proposed pool to the existing sewage disposal area and allow the proposed pool to be constructed as close as ten (10) feet to the sewage disposal area. Any equipment used to excavate for the pool should not be allowed to drive in the sewage disposal area. Any deviations from the proposed work illustrated on the building permit site plan will be subject to further review by this department.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

A handwritten signature in black ink that reads 'Michael J. Davis'. The signature is written in a cursive style with a large, stylized 'M' and 'D'.

Michael J. Davis  
Assistant Director  
Bureau of Environmental Health

Minor Repair



Bureau of Environmental Health  
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Dr. Maura J. Rossman, M.D., Health Officer

INFORMATION FORM - SEPTIC SYSTEM REPAIR/UPGRADE

Reason for Request

- Failing System
- <sup>line</sup> System relocation for proposed addition
- System upgrade for proposed addition
- Inadequate treatment zone
- Collapsed septic tank
- Collapsed drywell

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?

- Yes Explain observations: \_\_\_\_\_
- No

Existing system design

- Drywell
- Trench
- Mound
- Unknown
- Other: \_\_\_\_\_

Was a visual inspection of the sewage line conducted?

- Yes
  - Blockage leading to the tank
    - Yes Explain: \_\_\_\_\_
    - No

Blockage leading to the field

- Yes Explain: \_\_\_\_\_
- No

Is discharge surfacing on the ground?

- Yes
- No

Additional Comments: Re-Route inlet line for pool installation

\*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: Fogle's Septic Clean Contractor's Phone: 410-795-5670  
Contractor's Address: 580 Obrecht Rd Sykesville Md 21784

Property Address: 13603 Fox Stream Way County file: \_\_\_\_\_  
Subdivision: Fox Meadow Lot: 5 Year Built: \_\_\_\_\_  
Owner's Name: Anne Sennet Owner's Phone: 410-963-4600

Name of previous owners: \_\_\_\_\_ Existing bedrooms: \_\_\_\_\_  
Proposed bedrooms: \_\_\_\_\_

Has this request been previously discussed with a Sanitarian? (Name): Hank  
Public Sewer available/nearby: No

\*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 for 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.