

LAYOUT _____ INSP 4 _____
 INSP 2 _____ INSP 5 _____
 INSP 3 _____ INSP 6 _____

ISSUE DATE: 3/14/05

P 522030

APPROVAL DATE: 4/6/05

A 512857

**PERMIT
 INDEXED
 TAX ID #05-435897**

**ON-SITE SEWAGE DISPOSAL SYSTEM
 HOWARD COUNTY HEALTH DEPARTMENT
 BUREAU OF ENVIRONMENTAL HEALTH**

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Rd., Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: Gray Property LOT NUMBER: _____

ADDRESS: 1660 Woodbine Road PROPERTY OWNER: Wendy Gray

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): N/a COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 120 HOUSE SERVED BY PUBLIC WATER

TRENCHES:	Trench to be 3.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 5.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Run (2) 60' trenches from distribution box.
NOTES:	Pump and Collapse existing septic tank. Also, pump and collapse existing drywell if needed.

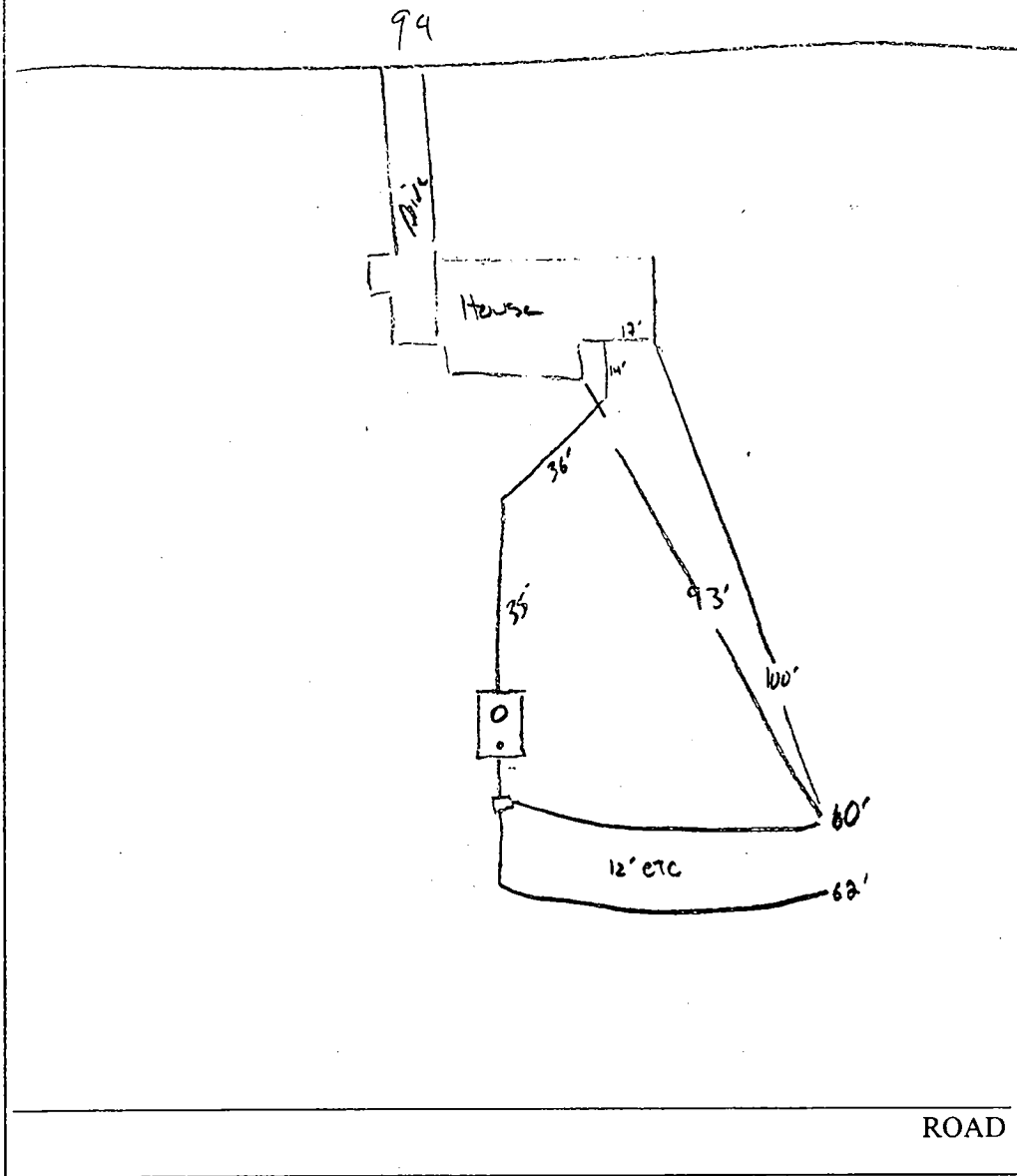
PLANS APPROVED: Kevin J. Bell Reviewed by: _____ DATE: 3/14/05

NOTES: PERMIT VOID AFTER 2 YEARS
 CONTRACTOR IS RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
 WATERTIGHT SEPTIC TANKS REQUIRED
 ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL UNLESS SPECIFICALLY AUTHORIZED
 MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED
 CONTRACTOR RESPONSIBLE FOR COMPLIANCE WITH APPLICABLE REGULATIONS, GUIDELINES AND THE TERMS OF THIS PERMIT

**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
 ALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**

A512857

NOT TO SCALE



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
<u>3</u>	<u>7</u>	<u>8</u>
NUMBER OF TRENCHES		<u>2</u>
TOTAL LENGTH		<u>122</u>
ABSORPTION AREA _____		
DISTRIBUTION BOX LEVEL _____		
DISTRIBUTION BOX BAFFLE _____		
DISTRIBUTION BOX PORT _____		

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<input checked="" type="checkbox"/>
CAPACITY	<u>1500</u> GAL
SEAM LOC	_____
TANK LID DEPTH	<u>3'</u>
BAFFLES	<input checked="" type="checkbox"/>
BAFFLE FILTER	_____
MANHOLE LOC	<u>front</u>
6" PORT LOC	<u>Back</u>
WATERTIGHT TEST	<u>—</u>
SEPTIC TANK 2 LEVEL	<input type="checkbox"/>
CAPACITY	_____ GAL
SEAM LOC	_____
TANK LID DEPTH	_____
BAFFLES	_____
BAFFLE FILTER	_____
MANHOLE LOC	_____
6" PORT LOC	_____
WATERTIGHT TEST	_____

PRE-CONSTRUCTION _____

INSTALLATION 4/6/05 @ Tank set & one 60' trench installed / (PM)
Second trench installation OK to cover all work

FINAL INSPECTOR KJB DATE OF APPROVAL 4/6/05

p 5 22 030
paid on 3/14/05

INFORMATION FORM - SEPTIC SYSTEM REPAIR (UPGRADE) EVALUATION
For internal office use only

Reason for Request:

- Failing System (includes surface discharge or inadequate treatment zone) _____
- Has the contractor verified through excavation/pumping evaluation, that there are no pipe blockages? _____
- System relocation for proposed addition for setback compliance * _____
- Verification of adequate system per COMAR 26.04.02.02D (4)* Upgrade System
- To replace collapsed septic tank _____
- To replace collapsed drywell _____

Septic Contractor: Fosler's
 Contractor's Address: 580 Obrecht Road
Sykesville MD 21784
 Contractor's Phone #: 410.795.5670
 Property Address: 1660 Woodbine Road Woodbine MD 21797
 Property (Subdivision) & Lot #: 1
 County file number if known: _____
 Owner's Name and Phone number: Wendy Gray / Scott Campagnari 410.303.5790
 Is public sewer available/nearby: NO
If public sewer may be close, mention further research will be performed to verify availability
 Names of Any Previous Owners: Joan Snoutter
 Year House Built: 1968
 # of Existing Bedrooms: 3
 # of Bedrooms after completion of addition: 4
 Has this request been discussed previously with another Sanitarian: _____ Name: _____

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, upgrade or evaluation.

Print out copy of Real Property Data via Dept. of Taxation website _____ Indexed file found _____

***Prior to scheduling inspections, scaled plans should be submitted to clarify the nature of the addition.**

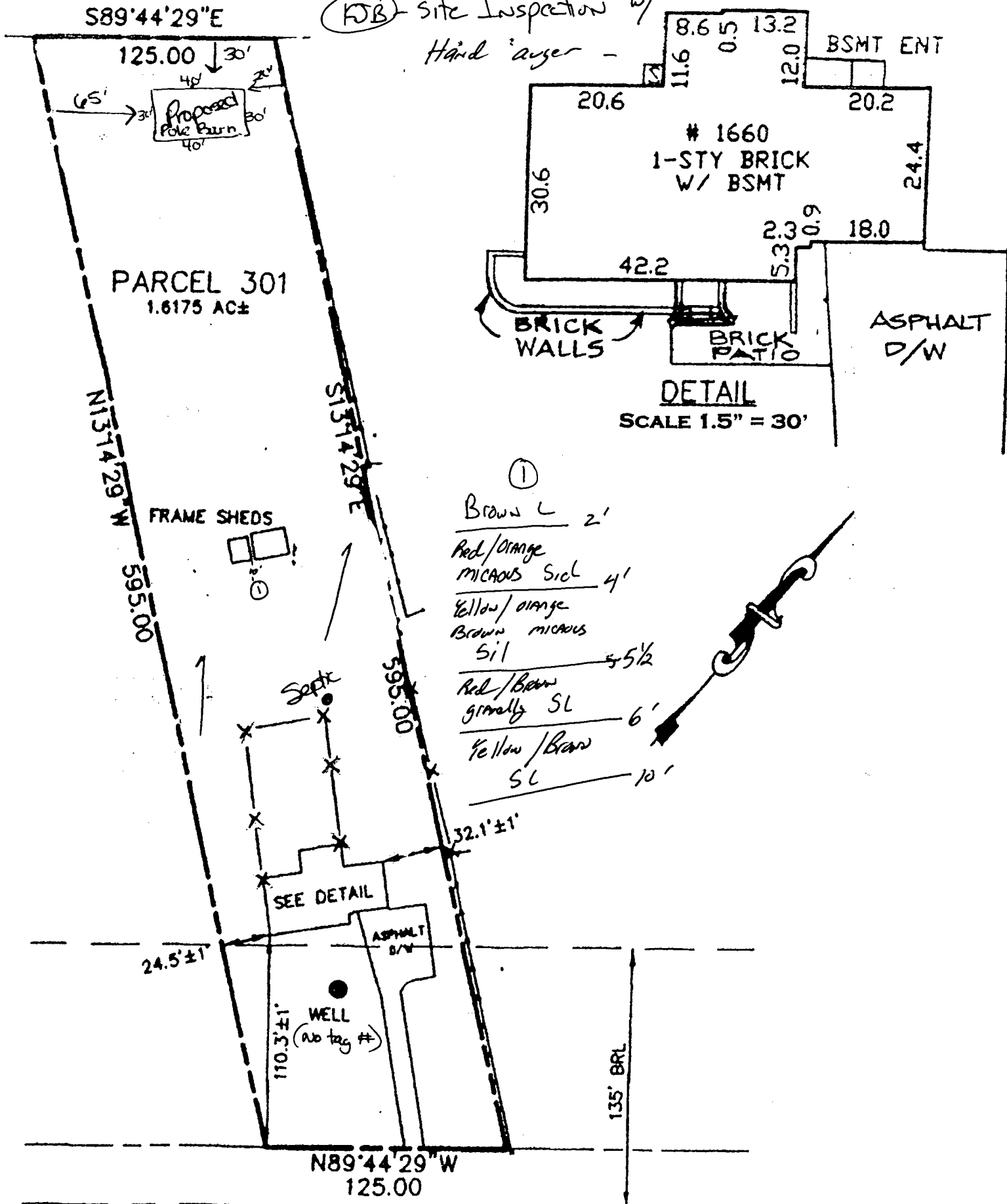
If public sewer may be nearby, verify whether the sewer is technically "available" (defined as abutting or within the property), through the Bureau of Engineering (Diane Nason x 3372 or Jean Reed x 3362).
 If sewer is available, verify whether the property is within the Metropolitan District (Finance x 2061).
 If sewer is available, and property is within the Metropolitan District, connection to sewer is required. If owner believes reasons for exemptions exist, owner should justify request in writing.
 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 at x 4419 for further detail.

Environmental Sanitarian tentatively assigned per rotating index card box: _____
 Date of request: _____ (Clerical staff to update scheduling card with date of request/property address)

Septic permit to be typed by clerical staff after instruction from scheduling Sanitarian.
No permit is to be issued nor inspection to be scheduled without prior fee collection at office unless an emergency situation exists. Contractor to notify office of the emergency situation as soon as possible.

2/16/05

(KJB) site inspection w/
Hard layer -



- ①
- Brown L 2'
 - Red/Orange micaceous Sil 4'
 - Yellow/orange Brown micaceous Sil 5 1/2'
 - Red/Brown gravelly SL 6'
 - Yellow/Brown SL 10'

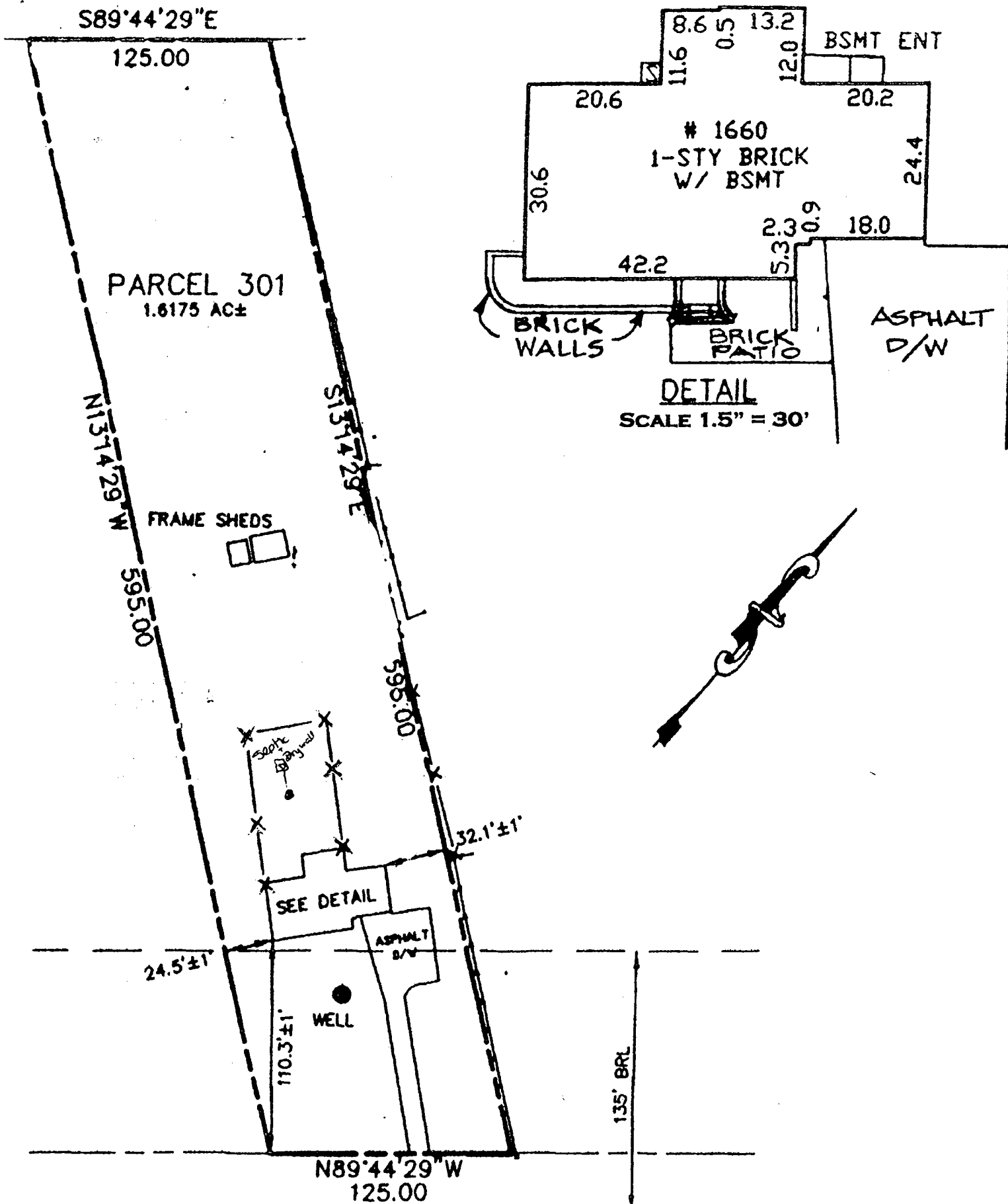
WOODBINE ROAD, MD ROUTE 94

SCALE 1.5" = 100'

FILE INQUIRY FORM

Property Address: 1660 (Rt. 74) Woodlawn Rd.

I did a site inspection on 2/16/05 to verify
area for future repairs. I was able to hand Auger
down 10' showing soils capable for septic. The well
is shown correctly on the plan but was unable to locate
any septic c/p.



WOODBINE ROAD, MD ROUTE 94

SCALE 1.5" = 100'

SEPTIC SPECIFICATIONS WORK-SHEET

SUBDIVISION: _____

A _____

STREET NAME: 94

LOT NUMBER: _____

AVERAGE PERCOLATION RATE: _____

SQUARE FEET PER BEDROOM: 180

NUMBER OF BEDROOMS: 7

LINEAR FEET OF TRENCH PER BEDROOM: _____

TOTAL LINEAR FEET OF TRENCH: 120

SEPTIC TANK CAPACITY: 1250

TOP SEAMED TANK REQUIRED? YES NO

COMPARTMENTED TANK REQUIRED? YES NO

TRENCH DIMENSIONS: Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade.

Effective area begins at 5 feet below original grade. 124 feet of stone below distribution pipe.

$180 \times 4 = 720 \div 3 = 240 \times .50 = 120'$

PUMPED SYSTEM PROPOSED: YES NO

PUMPED SEPTIC SYSTEM DETAIL: _____ gallon pump chamber.

YES NO Top seamed pump chamber required?

Note 1: Septic pump detail to be provided by installer prior to issuance of septic permit.

Note 2: Pump performance test is necessary prior to Health Department approval of pumped septic system.

LOCATION: Row 2 (60) from D-Box - Pump & Cell exist
adjust if needed.

ADDITIONAL NOTES: ~~_____~~

Reviewer: RTS

Date: 3/16/05