

# PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-283887

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXXX 410-313-2640

INDEXED

P 516050

A 58960

DISTRICT \_\_\_\_\_

DATE 9/28/2001

DATE SYSTEM APPROVED 11/2/01

INSPECTOR S.R.K.

## PUBLIC WATER

Fogles Septic Clean, Inc

IS PERMITTED TO INSTALL  ALTER \_\_\_\_\_

ADDRESS 580 Obrecht Road, Sykesville, MD 21784

PHONE 410-795-5670

SUBDIVISION King's Gift

LOT 48

2832 KINGS GIFT DRIVE  
ROAD 11704 Frederick Road

PROPERTY OWNER Anwar I. Khokhar, M.D.

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 2000 GALLONS

NUMBER OF BEDROOMS 6

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 420

### ~~PUMPED SEPTIC SYSTEM PROPOSED~~

INSTALL: 1-2000 GALLON PUMP CHAMBER

- NOTES:
- Septic pump detail to be provided by installer prior to issuance of septic permit.
  - Pump performance test is necessary prior to Health Department approval of pumped septic system.

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 330 feet off the 400' lot line and 100 feet off the 540' lot line as seen from the existing drive way off Frederick Road. Run trenches along contour towards the 540' lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 11/5/99 OK AU

PLANS APPROVED BY Donna K. Soe

DATE 10-26-99

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS. 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

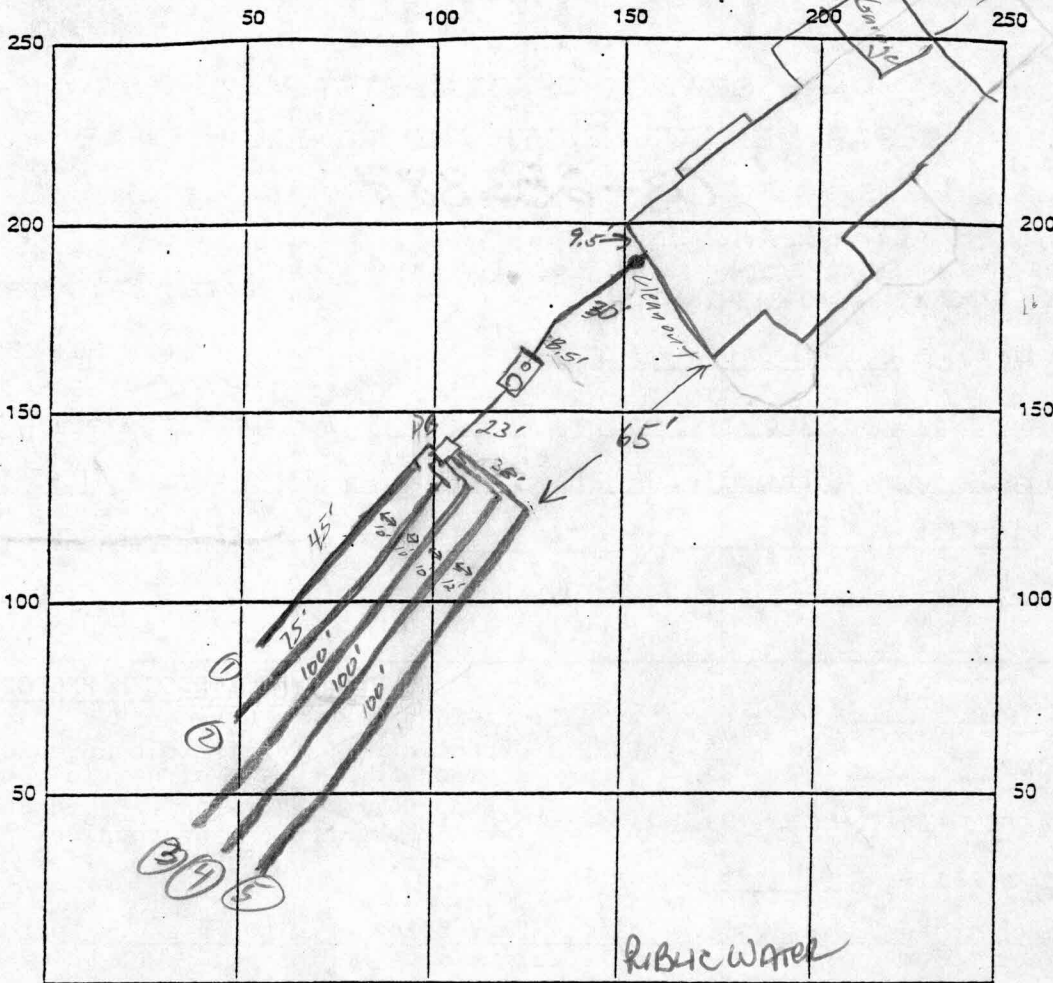
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

**BUILDING PERMIT SIGNED  
AND RETURNED**  
12-4-03 80014537-D ECK

516050



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

3' riser on manhole Concrete BATTLES?  
 SEPTIC TANK LEVEL 2000 gal MS? CLEANOUTS 6' (3' riser)

DISTRIBUTION BOX LEVEL YES

DRAIN FIELD/TITLE DEPTH 6'? FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 26 FT. TOTAL LENGTH 420 FT.

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 1260 SQ. FT.

DRYWALL INSIDE DIAMETER NA FT. EFFECTIVE DEPTH BELOW INLET NA FT.

ABSORBENT AREA NA SQ. FT.

REMARKS: 10/9/01 - LAYOUT WAIVED, INSTALLER REPORTS PUMP TANK/SYSTEM NOT REQUIRED

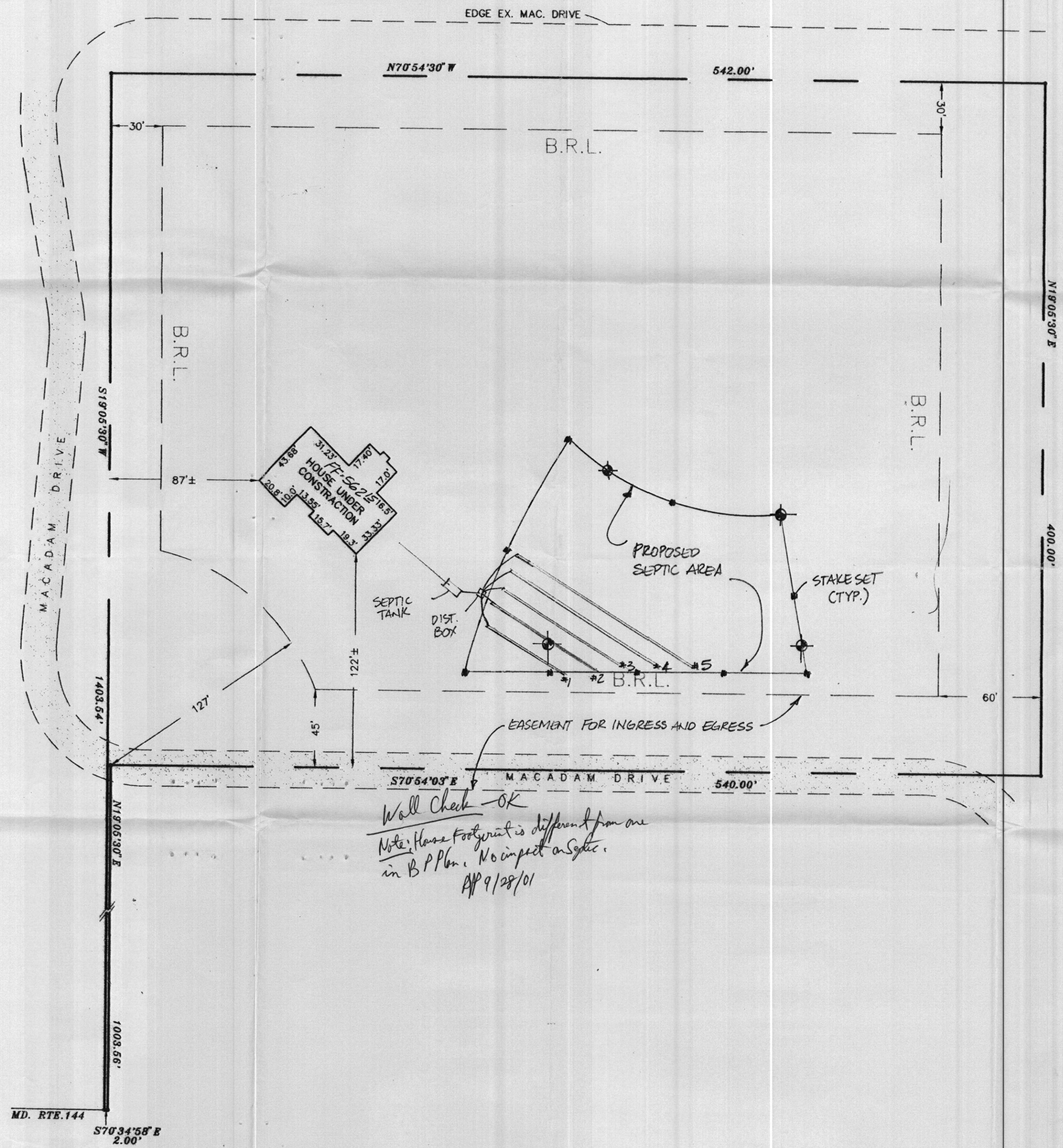
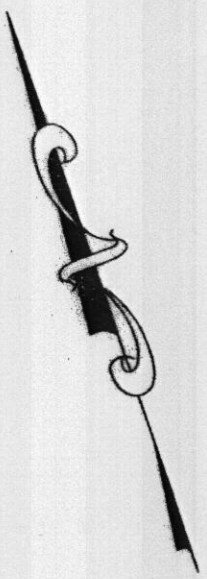
INLET CAN BE MADE AT 4', KEEP TRENCHES 7' ETE (10' CTC) (SRV)

10/9/01 Lines 1(2)(3)(4) covered, Line 5 uncovered, prepared, grouted, & piped. House line not connected. House changed - 4500 sq ft w/ 4 bedrooms

OK to cover (50) 10/13/01 Called Tringles - informed them that Mayer Brothers does make and deliver 2000 gallon top seam tanks.

DATE SYSTEM APPROVED 11/2/01 INSPECTOR Steven R. Krieg

He said he will use these for future jobs instead of Babylon, mid-seam tanks. They are supposed to water test the



Wall Check - OK  
 Note: House Footprint is different from one in B.P. Plan. No impact on Septic.  
 AP 9/28/01

I HEREBY CERTIFY THAT I HAVE MADE A SURVEY OF THIS PROPERTY FOR THE PURPOSE OF LOCATING THE IMPROVEMENTS THEREON, AND THAT THEY ARE LOCATED AS SHOWN.

*Alvin J. Poter* 3-28-2001

LOCATION SURVEY LOT 48  
**KINGS GIFT**  
 3rd ELECTION DISTRICT  
 HARFORD COUNTY, MARYLAND  
 DATE: MARCH 27, 2001



**APR ASSOCIATES, INC.**  
 SURVEYORS - ENGINEERS  
 7427 Harford Road Baltimore, Maryland 21234-7160  
 (410) 444-4312 FAX: (410) 444-1647  
 E mail: apr444@erats.com

SCALE: 1"=50'



---

## HOWARD COUNTY HEALTH DEPARTMENT

---

Diane L. Matuszak, M.D., M.P.H., County Health Officer

October 26, 1999

### MEMORANDUM

**TO:** Canam Inc.  
212 Washington Avenue  
Towson, MD 21204

**BP#** B00118956  
11704 Frederick Road  
Kings Gift, Lot 48

**FROM:** Donna K. Soe, R. S.  
Water and Sewerage Program

This is to advise that the Health Department has recently recommended approval of the above referenced building permit application. Please be aware of the following conditions related to future permit processes:

#### SEPTIC SYSTEM ISSUES

1. A copy of the certified location drawing (i.e., wall check) for each structure shall be submitted to this office to allow sufficient review time prior to septic permit issuance.
2. Corners of the approved septic area should be staked by a licensed surveyor/engineer prior to system installation.
3. No grading shall be performed over any portion of the approved septic easement, unless specifically approved by the Health Department.

#### WELL WATER ISSUES

1. Final driveway location should be at least 15 feet from the existing well.
2. Notification of the well pump installation and well line connection must be forwarded to this office by the installer (licensed plumber/well driller/pump installer) prior to any approval request regarding the well water supply.
3. Prior to application for a Use and Occupancy Permit, the well water supply should be sampled by a private, state-certified laboratory and tested for at least the following parameters:
  - pH, chlorine, nitrates, coliform/fecal coliform bacteria, sand and turbidity
4. A licensed installer should submit "Notification of Water Treatment Device Installation" (if applicable).
5. OTHER:

cc: File