



Division of Environmental Health

P.O. Box 980, Prince Frederick, MD 20678, 410-535-3922 Fax 410-535-5252

ON-SITE SEWAGE DISPOSAL SYSTEM SEPTIC INSTALLATION APPLICATION & PERMIT

Date: _____ For: Replacement OSDS NEW OSDS

Property Owner: _____ Phone Number: _____ Email: _____

Premise Address: _____

Subdivision: _____ Lot: _____ Blk: _____ Sec: _____ Map: _____ Parcel: _____ Tax ID#: _____

Owner Signature: _____ Date: _____

Contractor information section including Contractor, Phone number, Email, Address, City, State, Zip, Contractor License #, Additional Licenses required for this installation (if applicable), and Contractor Signature.

System type: Conventional Trench Mound Drip Low Pressure Dose (LPD) Holding Tanks Other: _____

Design Point:

Residential: Above ground square footage: _____ Basement square footage (finished & unfinished): _____ TOTAL SQUARE FOOTAGE: _____ Design Flow (gpd) _____

Commercial: Type of business/es _____ Number of Units: _____ Square footage: _____ Permitted Design Flow (gpd): _____

System Specifications:

Table with 4 columns: Tank(s), Capacity, Add'l info (pumps, etc.), and checkboxes for Septic tank, BAT system, and Holding tank.

Table with 4 columns: Trenches (ft), Total length (ft), Trench width (ft), # of trenches; and Ind. Trench lengths (ft), Trench Depth (ft), Separation (ft), Gravel under pipe (ft).

Other specifications: _____ Distance from well to septic= _____ feet

Conditions: A site plan from a licensed land surveyor or drawn on the Calvert County topography map (replacement OSDS only) must be attached with this permit that conforms with all state and local requirements. Trenches must be installed on contour. Contractor is responsible for verifying that all parts of the system are installed on the property. Contractor must schedule inspections and gain approval of all components prior to covering any part of the system. An individual certified by MDE for BAT, sand mound, or at-grade systems must be present on site the entire time during installation of such systems. This permit cannot be transferred to another septic installer and any change in the responsible septic contractor will result in the permit being null and void. The new contractor must apply for a separate permit. All permits shall expire 2 years from the date of issuance and may not be renewed unless a building permit has been applied for and issued for the proposed construction. Once the building permit has been issued one renewal of this permit may be issued for two years if acceptable. All tanks used in the construction of this system must be approved by the Calvert County Health Department and shall be top-seam, 2 compartment, and watertight concrete tanks whenever possible (with the exception of BAT). The Maryland Department of the Environment 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.

HEALTH DEPARTMENT USE ONLY:

Date Approved: _____

Expiration Date: _____

Issued by: _____

Notes section

Date Finaled: _____

Installer: _____

Health Department use only section including AP#, Paid, Receipt, Received by, and Assigned to.

Inspected by: _____