Baltimore County
Department of Environmental Protection and Sustainability
Ground Water Management Section
111 W. Chesapeake Ave, Room 319
Towson, MD 21204
Phone: 410-887-2762; Fax: 410-887-4817
groundwater@baltimorecountymd.gov

OSDS Inspection Form

General Information							
Property Address	3220 Vance Rd						
City	Monkton	State	MD	Zip Code	21111		
County	Baltimore	Date and Time of Inspection			11.13.2023		
Inspector Name		Company	Earl E. Preston Jr, Inc				
Phone Number	443.562.7655	email	LRhuppman2@icloud.com				
Property Type	Residential	Age of Dwelling	1982	Number of Bedrooms	3		
Occupied?		If Vacant, How long?		Rental?			
Number of People Moving In?		Homeowner Interview Conducted?					
OSDS Records Requested from County?	Yes	Were Records Available?	N/A				
Type of Water Supply?	Well						
OSDS History							
How long Has Resident Lived There?							
Number of People In Dwelling now	2						
Age of OSDS?	Unknown						
Any History Of Sewage Problems?	Unkniown						
If Yes, Detail Problems Below							
Pumping Frequency	N/A	Last Date Pumped					
Any Repairs to OSDS?	Uknown						
If Yes, Detail Repairs (Include Dates)							

OSDS Components								
☑ Septic Tank	Size		Construction	Metal				
☐ Pre-Treatment Unit	Make		Model					
☐ Pump Chamber	Size		Construction					
☐ Grease Trap	Size		Construction					
Conveyance System Type: ☐ PVC	☐ Cast Iron	☑ Terra Cotta	☐ Orangeburg					
☐ Effluent Filter	☐ Peat Filter		☐ Sand Filter					
☐ Distribution Box	☐ Dropboxes (Number)							
☐ Alternating Valve	☐ Headworks Box (for drip tubing)							
☑ Trenches (Number)	1	Length		Width		Depth		
☐ Seepage Pits/Drywells (Number)			Diameter		Depth			
☐ Low Pressure Pipe	☐ Drip Tubing							
☐ At-Grade Mound	☐ Sand Mound							
☐ Other								

Inspection and Observations					
Was Septic Tank Located?					Yes
If Pre-Treatment Unit, Note Current Service Provider	N/A				
Describe Access to Septic Tank	N/A				
Depth of Tank Below Grade					
Liquid Level in Tank (below normal/normal/above normal)					Below Normal
Any Evidence of Elevated Levels of Sewage In the Past?					
Was Sludge Sample Collected?					Select
If Yes, Total Liquid Depth		Sludge Depth		Scum Depth	
During Septic Tank Pump Out was any Flow Back Observed from Field System?					
After Pump Out, Is Structural Integrity of the Tank Interior Acceptable?					
Presence of Inlet Baffle Verified and Condition Acceptable?					
Presence of Outlet Baffle Verified and Condition Acceptable?					
Pumping Chamber Observations (if Present)					
Was Distribution Box Located?					No
Distribution box Excavated or Located by Video Camera? (Circle one)					Select
Does the distribution of effluent appear to be equal? Note any field components being rested and/or adjustments made below:					
No Distribution Box					

Was Soil Absorption System Located?	No
Was the Soil Absorption System Excavated or Probed or Videoed? (Circle One)	Select
Are Observation Ports Present / Functional?	
Soil Absorption System Observations	
Was Hydraulic Load Test Performed?	No
If Yes, Volume of Water Introduced to System	
Hydraulic Load Test Observations	
Were All Plumbing Fixtures and Appliances Verified to be Plumbed to the OSDS?	Select
Other Observations	
Is there a water treatment system on the water supply? Where is discharge being directed? What is the estimated volume and frequency of discharge?	

OSDS Layout
On separate sheet of paper (preferably 8.5 x 11"), show a diagram of the OSDS layout relative to the house. Include well location, street location, driveway and other pertinent site features as well as all OSDS piping and components. Indicate distances from the house and distances between system components.

Findings and Comments		
System Component	Condition	Comments
Septic Tank / Pre-Treatment Unit	☐ Acceptable ☐ Acceptable with concerns ☑ Unacceptable ☐ Needs Further Evaluation	Collapsed Metal Septic Tank
Pump Tank	☐ Acceptable ☐ Acceptable with concerns ☐ Unacceptable ☐ Needs Further Evaluation	
Distribution Box	☐ Acceptable ☐ Acceptable with concerns ☐ Unacceptable ☐ Needs Further Evaluation	
Soil Absorption System	☐ Acceptable ☐ Acceptable with concerns ☑ Unacceptable ☐ Needs Further Evaluation	
Conveyance System: (i.e. Piping)	☐ Acceptable ☐ Acceptable with concerns ☑ Unacceptable ☐ Need Further Evaluation	
Other: _____	☐ Acceptable ☐ Acceptable with concerns ☐ Unacceptable ☐ Need Further Evaluation	
Additional Comments		

I attest that the information contained herein and my assessment is honest, thorough, and, to my knowledge, correct. Furthermore, I have completed an MDE approved course in the proper inspection procedures and have fully applied the standards of practice taught in the course during this inspection.

THIS INSPECTION REPORT INDICATES THE PRESENT CONDITION OF THE PRIVATE ON-SITE SUBSURFACE SEWAGE DISPOSAL SYSTEM BASED ON RECOMMENDED INSPECTION PROCEDURES OUTLINED IN THIS REPORT. THE RESULTS OF THIS INSPECTION DOES NOT GUARANTEE OR PROVIDE A WARRANTY FOR FUTURE PERFORMANCE.

The recipient of this report should discuss any deficiencies found by this inspection with the Inspector.

Certified Inspector Signature Doug Dufour Date 3.7.24

Certified Inspector Name (printed) Doug Dufour

Company Name Earl E. Preston Jr, Inc.

Certified Inspector Phone Number 410.557.8100

Certified Inspector Email Steph@eprestonjr.com

License Type and Number DC-9002

Return Completed Form and OSDS Layout to:

Baltimore County EPS
Groundwater Management
111 West Chesapeake Ave., Room 319
Towson, Maryland 21204
Phone: 410-887-2762 Email: groundwater@baltimorecountymd.gov

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