



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_

AP 537390

AGENCY REVIEW: \_\_\_\_\_

DATE 7/10/12

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

- RESIDENTIAL WITH 4 PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE UNKNOWN IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) Robert Harnday

DAYTIME PHONE 301 439 2509 CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS 1963 Daisy Rd Woodbine  
STREET CITY/TOWN STATE ZIP

APPLICANT Fogle's Septic Clean Inc / Kurt Cassell

DAYTIME PHONE 410 795-5670 CELL 410 984-5211 FAX \_\_\_\_\_

MAILING ADDRESS 580 Obrecht Rd Sykesville MD 21784  
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME \_\_\_\_\_ LOT NO. \_\_\_\_\_

PROPERTY ADDRESS 1963 Daisy Rd Woodbine  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 8 GRID 19 PARCEL(S) 45 PROPOSED LOT SIZE \_\_\_\_\_

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT. Kurt A. Cassell  
SIGNATURE OF APPLICANT

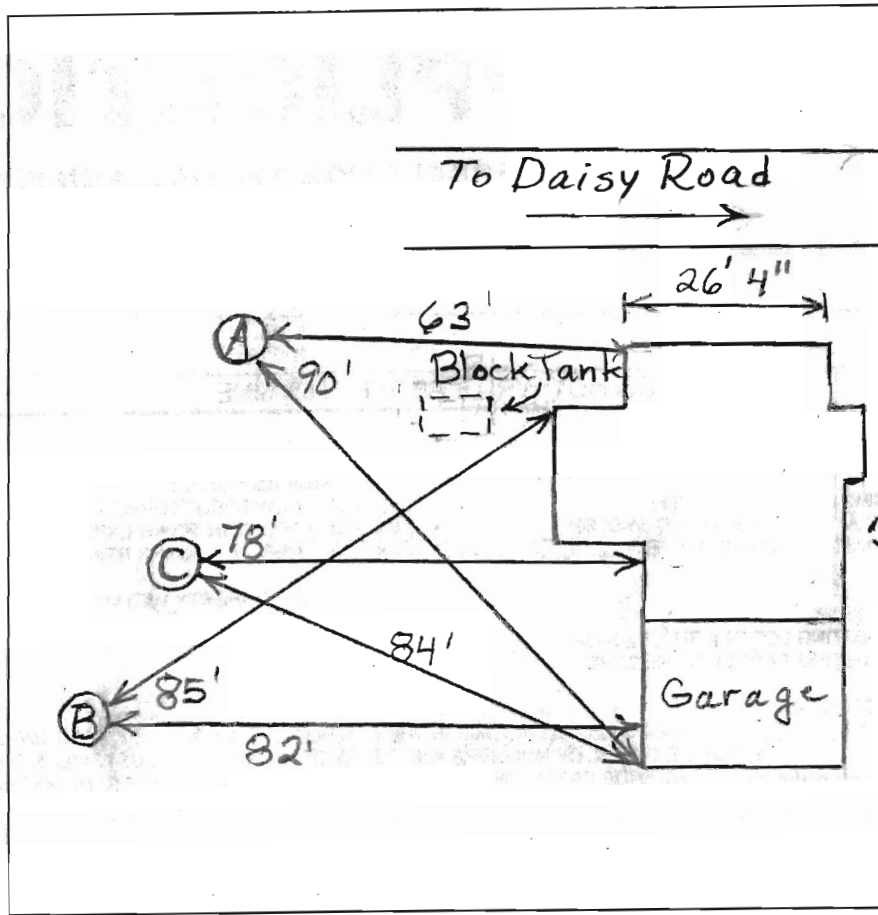
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

AP 537390

(A)  
Moderately Dense Red Br Cl Loam, sbk  
5'-5.5'  
~75% Rock  
9'

(B)  
Red Br scl, granular  
1.5'-2'  
Dense Red Br scl, sbk  
2.5'-3.5'  
Dense scl, granular  
6'-6.5'  
Dense Red Br sl  
7.5'  
Dense ls-sl, Less Dense with Depth 15-20% Rock  
16.5'

(C)  
Red Br cl, sbk  
2'  
Dense Red Br scl, sbk  
3.5'-4'  
Dense Red Br sl  
7.5'  
Red Br ls  
~20% Rock  
16.5'



Well (Buried)

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
7/18/2012	A	9' V	Excessive Rock				F
	B	8' / 16.5'	9:41	9:56	10:18	22	P
		9'	10:55	11:05	11:25	20	P
	C	8.5' / 16.5'	10:17	10:27	10:26	6	P

REMARKS Well is Supposed to Be in the Front Part of the Basement  
 SANITARIAN B. Baker BACKHOE Fogles OTHERS  
 TEST HOLES USED IN SDA B + C AVG. PERC TIME SQ. FT/BR  
 TRENCH WIDTH INLET DEPTH MAX. BOT DEPTH EFFECTIVE SW

## Williams, Jeffrey

---

**From:** Kristin Mielcarek [kristin.mielcarek@canaanvi.org]  
**Sent:** Wednesday, January 23, 2013 4:24 PM  
**To:** Harriday, Darryl I  
**Cc:** Williams, Jeffrey  
**Subject:** RE: Grant application-1963 Daisy rd  
**Attachments:** HOW\_CO\_approval letter\_Smith.pdf

Hi Darryl,

I received your Sharon's tax information today. Attached is the award letter for her grant funds. I'm mailing the original to her so she can sign it and send it back to me. I know the timeframe laid out in the letter is tight, especially this time of year. So just keep me posted on progress so I can keep your funds in place.

Let me know if you have any questions.

Thanks  
Kristin

-----Original Message-----

**From:** Harriday, Darryl I [mailto:Darryl.Harriday@dcsg.com]  
**Sent:** Wednesday, January 23, 2013 10:30 AM  
**To:** Kristin Mielcarek  
**Subject:** RE: Grant application-1963 Daisy rd

Did you receive the tax return yet?

-----Original Message-----

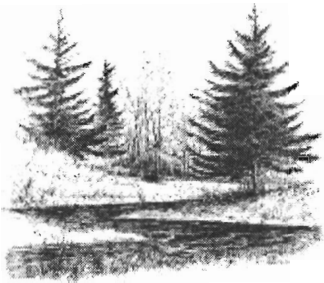
**From:** Harriday, Darryl I  
**Sent:** Friday, January 18, 2013 9:27 AM  
**To:** kristin.mielcarek@canaanvi.org  
**Subject:** Grant application-1963 Daisy rd

Kristin, I faxed this to you this morning. My sister will fax her tax return to you today also. Thanks for your help in this matter.

\*Can you please respond to this email address when you receive this.

Darryl Harriday  
412-802-5179

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# Canaan Valley Institute

WORKING FOR THE SUSTAINABILITY OF THE MID-ATLANTIC HIGHLANDS SINCE 1995

January 22, 2013

Ms. Sharon Smith  
1963 Daisy Road  
Woodbine, MD 21797

RE: FY 2013 Howard County Bay Restoration Fund OSDS Upgrade Program

Dear Ms. Smith:

Thank you for your application to participate in the Howard County Bay Restoration Fund OSDS Upgrade Program. The Howard County Health Department has verified that your existing septic system is failing and in need of repair. Based on your 2011 income tax return form, you are eligible to receive funding to cover **100%** of the cost to upgrade your system to one of the MDE approved BAT units up to \$13,000. The approved price includes the cost of the unit, installation of the unit, and 5 years of operation and maintenance. The price does not include the cost of permits.

In order to receive your OSDS upgrade, **you MUST follow these steps:**

1. **Sign this letter** on the bottom of page 2 **and return it** in the envelope provided within **2 weeks of the date of this letter.**
2. File a septic repair permit application with the Howard County Health Department **within 2 weeks of the date of this letter.** The permit application fee is \$396.00 (\$165 for tank approval only).
3. Contact the Howard County Health Department, Well and Septic Division to obtain the Agreement and Easement for Installation of Best Available Technology Systems with Bay Restoration Funds. Have it signed by a Howard County Health Department Bureau Director or Designee. Then take it to the Circuit Court and have it recorded in Land Records **within 2 weeks of the date of this letter.**
4. Prepare your property and schedule installation of the system. The system must be installed **within 6 weeks of the date the Agreement and Easement is recorded.**

If assistance is needed in completing any of the steps listed above, you may contact me at 304-940-3443 or [kristin.mielcarek@canaanvi.org](mailto:kristin.mielcarek@canaanvi.org).

494 RiverStone Road | Davis, WV 26260  
Phone: (304) 259.4739 or (800) 922.3601 | Fax: (304) 259.4759  
[www.canaanvi.org](http://www.canaanvi.org)

The system vendor may provide a contractor to install your BAT unit. CVI will provide payment of 75% of the cost of the system and installation (not to exceed \$9230) directly to the vendor. The homeowner will be responsible for the remaining balance. The vendor may also require proof of insurance from your contractor.

**If your system is not installed within the 8 week timeframe listed in the steps on page 1, the funds may be released and used elsewhere. If you cannot complete installation in within this timeframe, please contact me to request an extension.**

For more information on septic repair permitting, contact:

Jeff Williams  
Program Supervisor, Well and Septic  
410-313-1771

Please sign and return this original letter and keep a copy for your records. If you have any questions, please contact me at 304-940-3443 or by email at [kristin.mielcarek@canaanvi.org](mailto:kristin.mielcarek@canaanvi.org).

Sincerely,

Kristin Mielcarek, Watershed Circuit Rider

Accepted by: Sharon Smith, Property Owner

I have read and agree to the conditions of this Agreement Letter.

---

*Signature*

*Date*

494 RiverStone Road | Davis, WV 26260  
Phone: (304) 259.4739 or (800) 922.3601 | Fax: (304) 259.4759  
[www.canaanvi.org](http://www.canaanvi.org)

## Williams, Jeffrey

---

**From:** Williams, Jeffrey  
**Sent:** Thursday, January 17, 2013 1:36 PM  
**To:** 'Kristin Mielcarek'  
**Subject:** BRF applicant

Hi Kristin. We have someone interested in applying for BRF. We have determined that the system is failing. The property address is 1963 Daisy Road. The homeowner is Sharon Smith, but her brother is facilitating all of this and is the one who will be handling the BRF paperwork. His info is:

Darryl Harriday  
412-802-5179  
10800 Robin Lynn Dr  
Ellicott City, MD 21042  
[dharriday@aol.com](mailto:dharriday@aol.com)

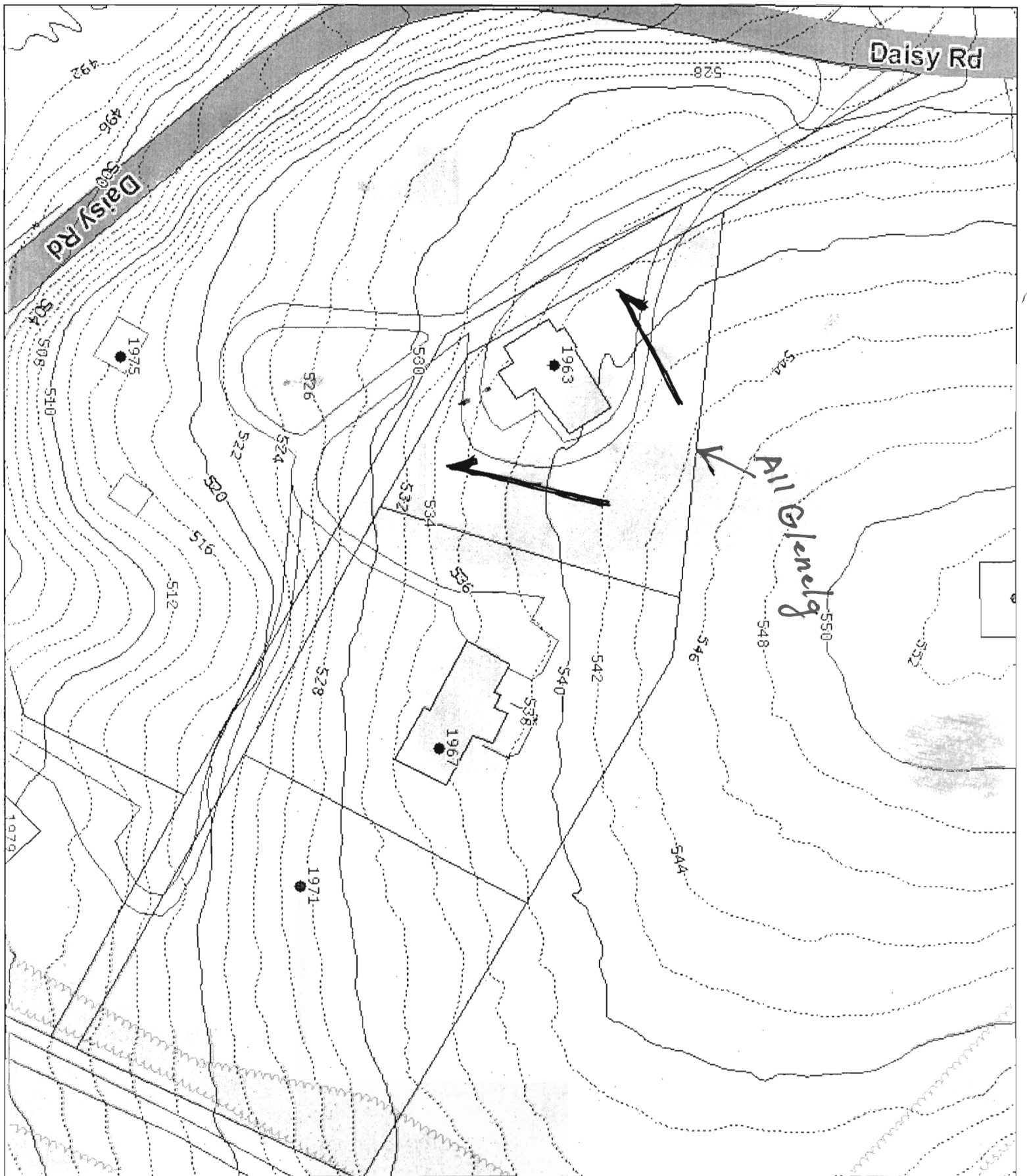
Thanks

Jeff Williams  
Program Supervisor, Well & Septic Program  
Bureau of Environmental Health  
Howard County Health Dept.  
410-313-4261  
[jewilliams@howardcountymd.gov](mailto:jewilliams@howardcountymd.gov)

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# APPLICATION

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ASP 537400

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PROPERTY OWNER(S) Carol & Davyly Harri day

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS 10800 Robin Lynn Dr Ellicott City MD 21042  
STREET CITY/TOWN STATE ZIP

APPLICANT Ronnie Heaps

DAYTIME PHONE 443 277 7526 CELL SAME FAX 410 552 5815

MAILING ADDRESS 425 Church Rd Sykesville MD 21784  
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME 1967 Daisy Rd LOT NO. \_\_\_\_\_

PROPERTY ADDRESS 1967 Daisy Rd Woodbine Md. 21797  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) \_\_\_\_\_ GRID \_\_\_\_\_ PARCEL(S) \_\_\_\_\_ PROPOSED LOT SIZE \_\_\_\_\_

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Ronnie Heaps  
SIGNATURE OF APPLICANT

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