

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: _____

PERMIT

P 537390

APPROVAL DATE: 3/20/2013

A REPAIR

Septic Repair 4317092 ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Fogles Septic Clean Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road Sykesville, MD 21784 PHONE NUMBER: 410-795-5670

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 1963 Daisy Road PROPERTY OWNER: Hobert Harriday

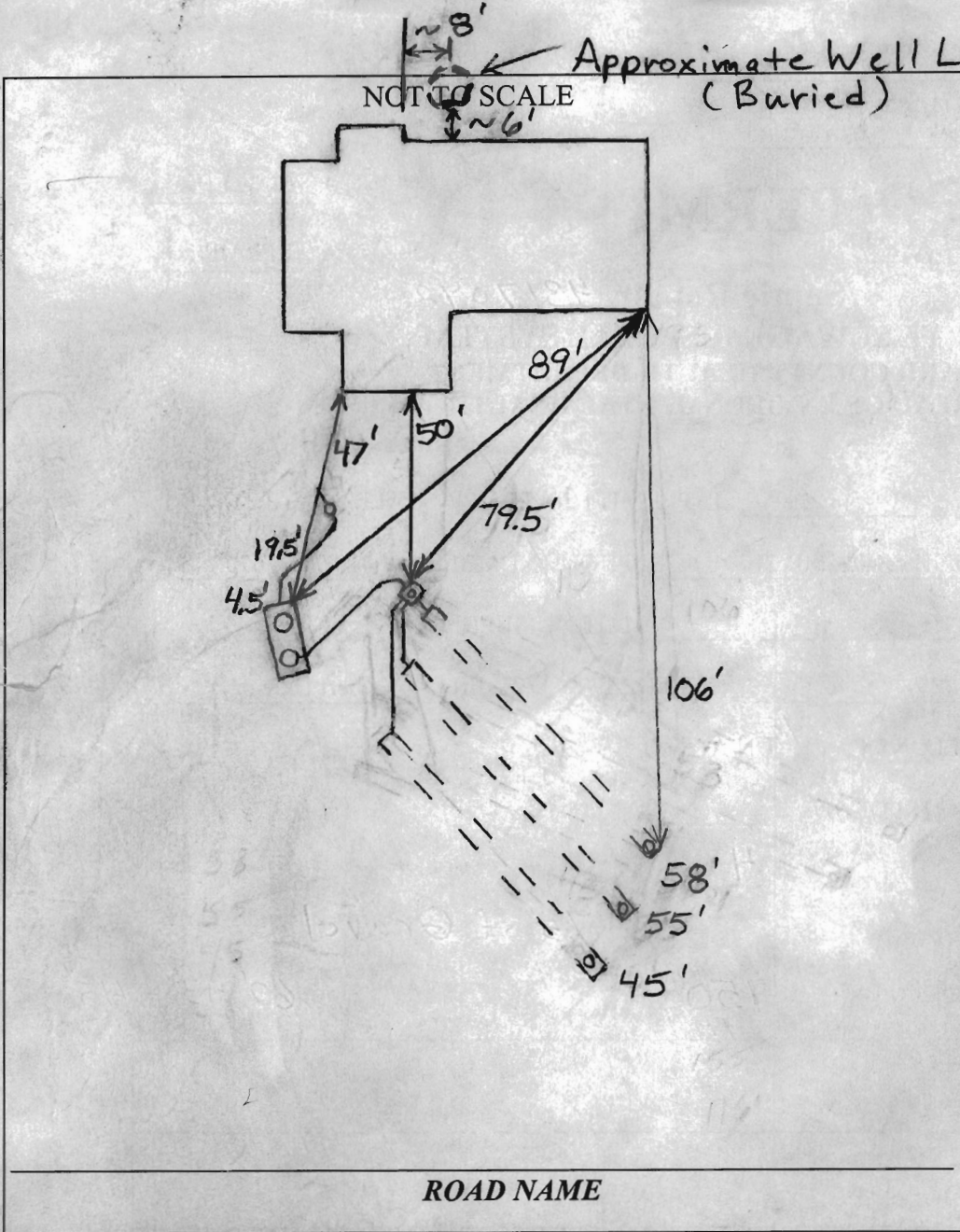
SEPTIC TANK CAPACITY (GALLONS): 1500 ? - Trenches 2' Wide
 PUMP CHAMBER CAPACITY (GALLONS): 2-Comp - Inlet 5'
 NUMBER OF BEDROOMS: 4 - Bottom 12.5'
 SQUARE FEET OF HOUSE: _____ - 7.5' of Gravel
 LINEAR FEET OF TRENCH REQUIRED: 150' Below Pipe 62', 43' + 45' Trenches

TRENCHES:	
LOCATION:	
PURPOSE:	

PLANS APPROVED: _____ DATE: _____

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

**NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS
 RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
 CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM**



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
2'	4.5'	12.5'
NUMBER OF TRENCHES		3
TOTAL LENGTH		158' Per Fogles
ABSORPTION AREA		~1185
DISTRIBUTION BOX LEVEL		Yes
DISTRIBUTION BOX BAFFLE		Elbow
DISTRIBUTION BOX PORT		Yes

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	Yes
MANUFACTURER	Hoot/Mayer Bros.
CAPACITY	600 BNR GAL
SEAM LOC	Top
TANK LID DEPTH	0.5'-1.5'
BAFFLES	2 Front
BAFFLE FILTER	No
MANHOLE LOC	Front + Rear
6" PORT LOC	None
WATERTIGHT TEST	No
SLOTTED	N/A
DATE ON LID	Dry
RUMP/SEPTIC TANK LEVEL HOOT	
MANUFACTURER _____	
CAPACITY _____ GAL	
SEAM LOC _____	
TANK LID DEPTH _____	
BAFFLES _____	
BAFFLE FILTER _____	
MANHOLE LOC _____	
6" PORT LOC _____	
WATERTIGHT TEST _____	
SLOTTED _____	
DATE ON LID _____	

PRE-CONSTRUCTION:

7/13/2012 May need new tank. I think existing tank is made of block. Will have to dig up and confirm this. Will also have to confirm distance from well to repair. I install a 60', 50' and 40' trench on contour 100' from the neighbor's well and 100' from the homeowner's well if possible. Set the tank as far from the homeowner's well as possible.

INSTALLATION:

Will also have to reconfirm where the neighbor's property line is. (BB)

12/11/2012 Tank is block construction and must be replaced. Suggested to Fogles that they encourage owner to use a pretreatment unit since there is no repair area less than 100' from their well. Trench locations staked. (BB) 3/14/2013 Repeated layout. Keep tank depth no greater than 3' deep. (BB)

3/15/2013 System finished and mostly covered by installer. Need certification from HOOT installer that system is working satisfactorily. (BB) 3/20/2013 Received certification from Mayer Bros. (BB)

FINAL INSPECTOR

B. Baker

DATE OF APPROVAL

3/20/2013

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P 537390

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

Fogles Septic Clean Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS: 580 Obrecht Road Sykesville, MD 21784 PHONE NUMBER: 410-795-5670

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 1963 Daisy Road PROPERTY OWNER: Hobert Harriday

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET OF HOUSE: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	
LOCATION:	
PURPOSE:	

PLANS APPROVED: _____ DATE: _____

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NEITHER THE HOWARD COUNTY COUNCIL OR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-1771 FOR INSPECTION OF SEPTIC SYSTEM

NOT TO SCALE

TRENCH/DRAINFIELD DATA

WIDTH INLET BOTTOM

NUMBER OF TRENCHES _____
TOTAL LENGTH _____
ABSORPTION AREA _____
DISTRIBUTION BOX LEVEL _____
DISTRIBUTION BOX BAFFLE _____
DISTRIBUTION BOX PORT _____

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL _____
MANUFACTURER _____
CAPACITY _____ GAL
SEAM LOC _____
TANK LID DEPTH _____
BAFFLES _____
BAFFLE FILTER _____
MANHOLE LOC _____
6" PORT LOC _____
WATERTIGHT TEST _____
SLOTTED _____
DATE ON LID _____

PUMP/SEPTIC TANK LEVEL _____
MANUFACTURER _____
CAPACITY _____ GAL
SEAM LOC _____
TANK LID DEPTH _____
BAFFLES _____
BAFFLE FILTER _____
MANHOLE LOC _____
6" PORT LOC _____
WATERTIGHT TEST _____
SLOTTED _____
DATE ON LID _____

ROAD NAME

PRE-CONSTRUCTION:

INSTALLATION:

FINAL INSPECTOR _____ DATE OF APPROVAL _____



Howard County
Health Department

7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

INFORMATION FORM – SEPTIC SYSTEM REPAIR / UPGRADE

Reason for Request:

- A. Failing System (includes surface discharge or inadequate treatment zone)
- Has the contractor verified through excavation/pumping evaluation that there are no pipe blockages?
- B. System relocation for proposed addition for setback compliance *
- C. To replace a collapsed septic tank
- D. To replace a collapsed drywell

****For REPAIRS, are the owners proposing, or do they plan to add in the future, any additions or modifications to the property, i.e. pools, living space additions, garages etc? This information must be disclosed at the time of this application. The Health Department will not be able to accommodate requests in the field for property modifications unrelated to the repair request. Such requests may require an additional fee, additional testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulation.**

Septic Contractor: Fogle's Septic Clean Inc
 Contractor's Address: 580 Obrecht Rd
Sykesville, MD 21784
 Contactor's Phone #: 410 795-5670
 Property Address: 1963 Daisy Rd
 Property (Subdivision) & Lot #: _____
 County file #, if known: _____
 Owner's Name and Phone #: Robert Harriday 301 439-2509
 Is public sewer available/nearby: _____
If public sewer may be close, mention further research will be performed to verify availability
 Names of any previous owners: _____
 Year House Built: _____
 # of Existing Bedrooms: 4
 # of Bedrooms after completion of addition: _____
 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 or upgrade.

Print out a copy of the 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 (x2414).
 If sewer is available, verify whether the property is within the Metropolitan District (Finance x2061).
 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, x4419, for further detail.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. Contractor is to notify office of the emergency situation as soon as possible.



MAYER BROS., INC.

Precast Concrete Products

6264 Race Rd. Elkridge, MD 21075

Letter of Satisfaction Hoot System Installation

Address of Property: 1963 DAISY RD
WOODBINE, MD

Date of Final Inspection: 3-19-2013

Installer: FOGLE'S

Hoot Technician/Inspector: ED McMULLEN

I hereby certify that the Hoot system installed at the property listed above has been installed according to proper Hoot installation practices. I have also verified the startup of the system and it is in proper working order.

Sincerely,

Name of Inspector
Mayer Bros., Inc.

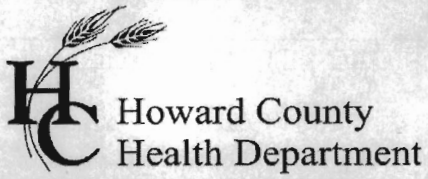
• Brian MD 410 313-2648
• CVI 240-777-6314

PH: 410-796-1434
FX: 410-796-1438

WBE
NPCA Certified Plant

mayerbro@connext.net
www.mayerbrosprecast.com

Grease Interceptors, Grease Solutions, Aerobic Treatment Units, Septic Tanks, Holding Tanks, Storm Water Structures, Hydroceptors,
Bench Barrier, Water Meter Vaults, Sectional Valve Vaults, Top Slabs, Curb Heads, Curb Rumpers, PermEntry Basement Entries,
Scapowal Window Wells, Custom Precast Products



Bureau of Environmental Health
 7178 Gateway Drive Columbia, MD 21046
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Maura J. Rossman, M.D., Health Officer

RECEIPT DATE: 7/17/12

ONSITE SEWAGE DISPOSAL SYSTEM

P 537400

INSTALLATION APPROVAL DATE: _____

**PERMIT
REPAIR**

A Repair

PROPERTY ADDRESS: 1963 Daisy Road

SUBDIVISION: _____ LOT: _____ TAX ID: 04-317092

CONTRACTOR: Fogles Septic Clean Inc. EMAIL: kurt@foglesinc.com

CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville, MD 21784 PHONE: 410-984-5211

PROPERTY OWNER: Dana Johnson/Sharon Smith EMAIL: _____

OWNER ADDRESS: Same as above PHONE: _____

SEPTIC TANK SIZE (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____ PUMP SIZE: _____

NUMBER OF BEDROOMS: _____ HOUSE SQ. FT. _____ APPLICATION RATE: _____

DISTRIBUTION SYSTEM: GRAVITY FED LOW PRESSURE DOSED

TRENCHES:	LINEAR FEET REQUIRED: _____	INLET DEPTH: _____
	TRENCH WIDTH: _____	MAXIMUM BOTTOM DEPTH: _____
	MINIMUM SPACE BETWEEN TRENCHES: _____	EFFECTIVE AREA BEGINNING DEPTH: _____
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:		

ISSUED BY: _____ ISSUE DATE: _____ EXPIRATION DATE: _____

- NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION
- NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING
- NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADIENT FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS
- NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM

**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.
 CALL 410-313-1771 TO SCHEDULE INSPECTIONS.**

Howard County Health Department

Bureau of Environmental Health, Ellicott City, Maryland 410-313-2640

SEWAGE DISPOSAL PERMIT NO. A-Repair P-537400

PERMITTEE

J.M. Contracting LLC.

LOCATION

19107 Daisy Road Ar
Carol and Daisy Holidays

Do Not Cover Work Until Health Department Approval Appears On This Card

POST THIS CARD WHERE IT CAN BE SEEN FROM ROAD

STOP ALL CONSTRUCTION ON SEWAGE DISPOSAL SYSTEM AND CONTACT HEALTH DEPARTMENT BEFORE CONTINUING

WORK IS SATISFACTORY, CONTINUE

Inspector _____ Date _____

Inspector _____ Date _____

FINAL INSPECTION MADE, COVER ALL WORK

HD-230 (3/97)

Inspector _____ Date _____

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: _____

APPROVAL DATE: _____

PERMIT

P 537400

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

J.M. Contracting LLC. IS PERMITTED TO INSTALL ALTER

ADDRESS: 425 Obrecht Road Sykesville, MD 21784 PHONE NUMBER: 443-277-7526

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 1967 Daisy Road PROPERTY OWNER: Carol and Darryl
Harriday

SEPTIC TANK CAPACITY (GALLONS): N/A

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET OF HOUSE: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	
LOCATION:	
PURPOSE:	

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P 537400 _____

A REPAIR _____

Septic Repair

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PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET OF HOUSE: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	
LOCATION:	
PURPOSE:	

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Circuit Court for
HOWARD COUNTY
Clerk of the Court,
WAYNE A ROBEY
8360 COURT AVENUE
ELLCOTT CITY, MD 21043-
(410) 313-2111

Transaction Block: 1360
Ref: 157
MISC AMOUNT
IMP FD SURE \$5 40.00
RECORDING FEE \$20.00 20.00
SUBTOTAL: 60.00

Transaction Block: 1361
Ref: 158
MISC AMOUNT
IMP FD SURE \$5 40.00
RECORDING FEE \$20.00 20.00
SUBTOTAL: 60.00

TOTAL CHARGES: 120.00
PAYMENTS
CASH 120.00
TOTAL TENDERED: 120.00

Cashier: NTR Reg # H003
Nopt # 28511
Date: Jan 29, 2013 Time: 09:16 am

Darryl HARRIS
412-802-5179-C

AGREEMENT AND EASEMENT FOR INSTALLATION
OF BEST AVAILABLE TECHNOLOGY SYSTEMS
WITH BAY RESTORATION FUNDS.

000157

THIS AGREEMENT is made this 29 day of JANUARY, 2013, among Dareyl HARRIDAY, hereinafter referred to as "Owner," the Howard County Health Department hereinafter collectively referred to as the "County," and the Department of the Environment, hereinafter referred to as the "Department."

WHEREAS, Owner owns a tract of land located on 1963 Daisy Road, in the 4th Election District of Howard County, Maryland, and the deed to same is recorded among the Land Records of Howard County, Maryland, in Columbia MD and in Liber 10175 Folio 31.

WHEREAS, the Bay Restoration Fund (BRF) may provide a grant for the cost attributable to upgrading an onsite sewage disposal system to the Best Available Technology (BAT) for the removal of nitrogen.

WHEREAS, the BRF may also provide a grant for the cost difference between a traditional onsite sewage disposal system and a system that utilizes the BAT for the removal of nitrogen.

WHEREAS, Owner understands that participation in the Bay Restoration Fund is voluntary.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the Department and the County the right to enter upon the property at any reasonable time for access to the system to make periodic inspections and the Owner agrees to provide any information and data requested and needed by the Department to develop accurate and thorough test results.
- B. Owner acknowledges and agrees that a manufacturer-approved installer will install the BAT system.

- C. Owner acknowledges and agrees the manufacturer will provide for Operation and Maintenance of the BAT for a period of 5 years as a condition of sale of the BAT. After the 5 year period the Operation and Maintenance contract can be further extended at the behest of the property owner. The Department and County encourage the property owner to continuously maintain an Operation and Maintenance contract during the lifetime of the system.
- D. Owner acknowledges and agrees that the manufacturer appointed Operation and Maintenance provider will have access to the BAT system at all times.
- E. Owner acknowledges and agrees that the manufacturer or manufacturers designee will have access to sample the effluent of the BAT system. Owner acknowledges and agrees that the proposed installation of a BAT system funded by the BRF is voluntary. Owner agrees that there shall be no liability on the part of the County or Department to Owner if this BAT system fails, and that the County and the Department do not warrant or guarantee that the BAT system will adequately or properly function.
- F. Owner acknowledges and agrees that neither the County nor the Department nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.
- G. The Owner will devote such care and effort to the maintenance of the BAT system so that any malfunction is not the result of poor maintenance, faulty operation, or neglect.
- H. The Canaan Valley Institute agrees to grant \$ 13,000 toward the cost of installation of the BAT system, and financial responsibility is limited to this amount. Operating costs will be at the Owners expense.
- I. The Owner acknowledges that the BRF grant can only be used for that portion of the OSDS attributable to (BAT) for the removal of nitrogen.

- J. Owner acknowledges in the event the total project cost is greater than \$25,000 the proposal will have to be approved by the Maryland State Board of Public Works.
- K. The Owner agrees to contact both the Water Management Administration, On-Site Systems Division of the Wastewater Permits Program and the County at least forty-eight (48) hours prior to system installation, so that the Department has the opportunity to be present at the time of installation or thereafter for inspection.
- L. The Owner must install BAT system according to the manufacturer recommended plans and specifications approved by the Department.
- M. The Owner agrees and acknowledges that if installation deviates substantially from the approved plans or changes such that performance of the system is compromised or reduced, BRF funding will not be provided.
- N. This agreement shall run with the land and binds the Owner, his heirs, successors, assigns except that the provisions of paragraph A, C, D and E shall be binding for a period of 5 years only after installation of the system and occupation of the home. Owner further agrees that he shall inform in writing any purchaser or lessee of the property that the system may require maintenance or other attention. The Owner agrees to record this agreement in the land records of Howard County.
- O. This agreement shall not be construed to limit any authority of the Department to protect the public health, safety or comfort or to issue any other orders to take any other action that is now or may hereafter be within its authority.
- P. This agreement may be voided at the discretion of the Department if the system construction is not completed within six (6) months of the effective date of this agreement.
- Q. This agreement contains the entire agreement and understanding between the County and the Owner and the Department. There are no additional terms other than as contained in this

agreement. This agreement may not be modified except in writing signed by each of the parties or by their authorized representatives.

R. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated

above.

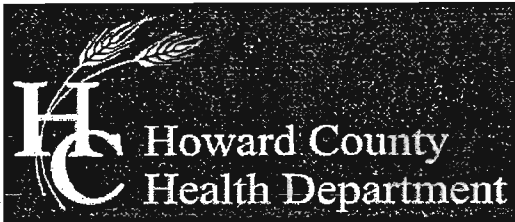
DATE: 1/24/13

Daryl Ham
Owner DARYL HARRIS

DATE: 1/29/2013

Bert Rifer
Howard County Health Department

IMP FD SURE \$	48.00
RECORDING FEE	20.00
TOTAL	68.00
Res# H083	Acct # 22011
MAR NTN	Blk # 1060
Jan 29, 2013	09:17 am



Bureau of Environmental Health **000158**
 7178 Columbia Gateway Drive, Columbia, MD 21046-2147
 Main: 410-313-2640 | Fax: 410-313-2648
 TDD 410-313-2323 | Toll Free 1-866-313-6300
 www.hchealth.org
 Facebook: www.facebook.com/hocohealth
 Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

**OPERATION AND MAINTENANCE AGREEMENT
 FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM
 HAVING AN ADVANCED PRE-TREATMENT SYSTEM**

THIS AGREEMENT is made this 29 day of JANUARY, 2013, among Daryl Harroday, hereinafter collectively referred to as "Owner", and the Howard County Health Department hereinafter referred to as the "County".

WHEREAS, Owner is the owner or contract owner of a parcel of land located at 1963 Darby Road, in the 4th Election District of Howard County, Maryland, and the deed to same is recorded or shall be recorded among the Land Records of Howard County, Maryland in Liber 10175 Folio 31.

40
20

WHEREAS, The Lot is suitable for the installation of a conventional on-site sewage disposal system, but an advanced pre-treatment system, utilizing best available technology to perform nitrogen reduction, must be installed as part of the sewage disposal system for a ___ bedroom home with ___ square feet of finished living space and ___ square feet of unfinished living space. Advanced pre-treatment has been required (pick one):

not

- ___ To minimize the potential impact of the on-site sewage disposal system on down grade wells.
- ___ For an existing lot of record that does not have enough area available for an initial and two replacement onsite sewage disposal systems.
- For the purpose of repairing a failing onsite sewage disposal system on an existing lot of record.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the County the right to enter upon the Lot at any reasonable time for access to the system to make periodic inspections and the Owner agrees to provide any information and data in Owner's possession reasonably requested and needed by the County to develop accurate and thorough test results.
- B. Owner acknowledges and agrees that neither the County nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.
- C. The Owner will devote reasonable care and effort to the operation and maintenance of the system in perpetuity or until a public sewer connection is made so that a system malfunction is not the result of poor maintenance, faulty operation, or neglect.

ok per Maura

D. The Owner agrees to enter into a contract reasonably acceptable to the Owner and the County with a private entity to operate and maintain on a regularly scheduled basis an approved advanced pre-treatment system. The owner shall supply a copy of the contract to the County when it is renewed or altered.

E. This agreement shall run with the land and upon Owner's taking title to the Lot shall bind the Owner, their heirs, successors, and assigns to the provisions of the agreement as long as the property is in existence and after installation of the system. Owner further agrees that they shall inform in writing any subsequent purchaser or lessee of the Lot that the system shall require maintenance or other attention. Upon taking title to the Lot, the Owner agrees to cause this agreement to be recorded in the Land Records of Howard County and assure that it becomes part of the Deed for the subject property in order that prospective buyers may be aware of the special conditions affecting this property.

F. This agreement shall not be construed to limit any authority of the County to protect the public health, safety or comfort or to issue any other orders to take any other action which is now or may hereafter be within its authority.


G. This agreement may be voided at any time at the discretion of the County.

H. This agreement contains the entire agreement and understanding between the County and the Owner. There are no additional terms other than as contained in this agreement. This agreement may not be modified, except in writing signed by each of the parties or by their authorized representatives.

I. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

J. Owner acknowledges and agrees that interior renovations to increase the number of bedrooms or an increase in living space shall not be permitted without approval from the County.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated above.


Owner _____ Date 1/29/13
DARYL HARRISON

Owner _____ Date _____


Howard County Health Department 1/29/2013

IMP FD SUKE \$	40.00
RECORDING FEE	20.00
TOTAL	60.00
Res# H003	Acct # 28511
WAR NTN	Blk # 1361
Jan 29, 2013	09:18 am



7178 Columbia Gateway Drive, Columbia MD 21046
 (410) 313-2640 Fax (410) 313-2648
 TDD (410) 313-2323 Toll Free 1-866-313-6300
 website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

INFORMATION FORM – SEPTIC SYSTEM REPAIR / UPGRADE

Reason for Request:

- A. Failing System (includes surface discharge or inadequate treatment zone)
- B. System relocation for proposed addition for setback compliance *
- C. To replace a collapsed septic tank
- D. To replace a collapsed drywell

Has the contractor verified through excavation/pumping evaluation that there are no pipe blockages?

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Septic Contractor: Ronnie Heaps
 Contractor's Address: 425 OBrecht Rd
Sylkesville MD 21784
 Contractor's Phone #: 443-277-7526
 Property Address: 1967 DAISY RD WOODBINE MD 21797
 Property (Subdivision) & Lot #: _____
 County file #, if known: _____
 Owner's Name and Phone #: Carol Darryl HARRIS
 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: _____
 Year House Built: 1960
 # of Existing Bedrooms: 3
 # of Bedrooms after completion of addition: _____
 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 or upgrade.

Print out a copy of the 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 (x2414).
 If sewer is available, verify whether the property is within the Metropolitan District (Finance x2061).
 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, x4419, for further detail.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency situation exists. Contractor is to notify office of the emergency situation as soon as possible.

Howard County Health Department

Bureau of Environmental Health, Ellicott City, Maryland 410-313-2640

SEWAGE DISPOSAL PERMIT NO. A- Repair **P-** 537390

PERMITTEE

Fokes Septic Clean Inc.

LOCATION

1963 Daisy Rd

Robert Herridal

Do Not Cover Work Until Health Department Approval Appears On This Card

POST THIS CARD WHERE IT CAN BE SEEN FROM ROAD

STOP ALL CONSTRUCTION ON SEWAGE DISPOSAL SYSTEM AND CONTACT HEALTH DEPARTMENT BEFORE CONTINUING

WORK IS SATISFACTORY, CONTINUE

Inspector

Date

Inspector

Date

FINAL INSPECTION MADE, COVER ALL WORK

HD-230 (3/97)

Inspector

Date

04-313585

File

P 27942

A 25885

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

DATE 4/25/78

INDEXED

Westminster Lawn Service

IS PERMITTED TO INSTALL ALTER

ADDRESS Westminster, Md.

PHONE 876-1400

SUBDIVISION (Warfields Subdivision)

ROAD 1967 Daisy Road

LOT 3

PROPERTY OWNER Lawrence W. Stanton

ADDRESS 1967 Daisy Road, Woodbine, Md.

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA 576 SQ. FT. total absorbent area

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT 5 FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN

FACING LOT FROM

Locate dry well as per approved

~~Place the dry well 75 ft. from the old house and 60 ft. from the back lot line as~~

plan attached.

~~seen when facing the lot from the right of way. OK to add ditch off dry well if~~

necessary. Stone in ditch to be between 5 ft. & 12 ft.

PLANS APPROVED BY Raymond Hodges

DATE 6/8/77

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

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

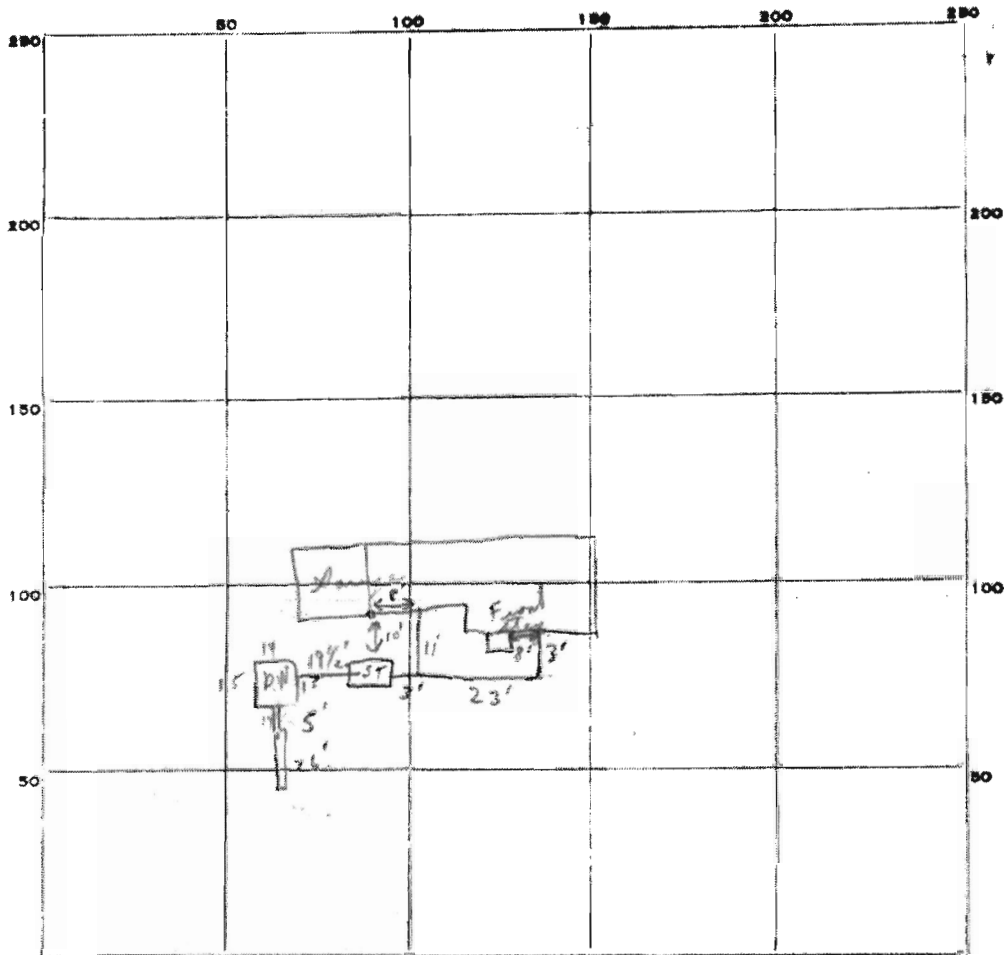
BLDG. PERMIT SIGNED

AND RETURNED 9/26/91

Serial # 30450

addition sun room

A 25885



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD

← Not used — Dirt Road —→

SEPTIC TANK, LEVEL

ok

CLEANOUTS

S.T. / D.W.

ok / ok

DISTRIBUTION BOX, LEVEL

N/A

Trench

FILE FIELD, DEPTH

12

FT.

TRENCH WIDTH

— 12" gravel in trench at time of check & paper on 2 1/2' of gravel

FT.

GRAVEL DEPTH

7 1/2"

IN.

TOTAL LENGTH

26

FT.

NUMBER OF TRENCHES

1

TOTAL BOTTOM AREA

SEEPAGE PITS, INSIDE DIAMETER

outside perimeter 585

FT.

DEPTH BELOW INLET

8

FT.

ABSORBENT AREA

+

SQ. FT.

REMARKS

5/26/78 Discussed with Mr. Dick & always call off before installed gravel-stone in trench. C.B.D.

DATE SYSTEM APPROVED

5/26/78 Inspector above

INSPECTOR

C. B. Dick

APPLICATION

A. 25885

SEWAGE DISPOSAL TESTING

P. _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

1000 GAL. TANK DATE 5/18/77

DRY WELL 576 SPITSIDE WALL AREA
DRY WELL INLET TO BE ⁴ 4 FT DEEP & EFFECTIVE TO START AT 5 FT
WELL BOTTOM TO BE ¹² 12 FT DEEP below original grade.
PLACE THE DRY WELL 75 FT FROM THE
OLD HOUSE & 60 FT FROM THE BACK LOT
LINE AS SEEN WHEN FACING THE
LOT FROM THE RIGHT OF WAY
TO THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND OK TO ADD DITCH OFF DW

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM. IF NECESSARY, STONE IN DITCH

PROPERTY OWNER Lawrence W. Stanton TO BE BETWEEN
5 FT & 1 FT
ADDRESS 1967 Daisy Road Woodbine, Md. PHONE 489-4739 ¹² ^{2 inspections} if.

PROPERTY LOCATION:
SUBDIVISION WARFIELDS Subdivision LOT NO. 3

ROAD AND DESCRIPTION About 1/2 miles so. of rd 44 on Daisy Rd.
Left turn off of Daisy.

SIZE OF LOT 0.735 AC. TYPE BLDG. 3
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE

SIGNATURE OF APPLICANT Lawrence W. Stanton Series No. 34356
BLDG. PERMIT SIGNED
AND RETURNED 11/4/78

APPROVED BY Raymond Hodges FOR Drywell DATE 6/8/77
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6/3/77 Hold for review
with DM 6/3/77 Mr. Smart cannot find records
of original perc 6/8/77 held for review
with DM LOT IS OK

THIS IS NOT A PERMIT

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/3/77	1D	13 1/2	247	254	254	309	15
	1S	5 1/2	247	258	258	320	22
	2D	13	312	315	315	326	11
	2S	5	314	345	1st anch 3 min		30+
	3D	12	344	346	346	349	3
	3S	6	346	353	353	405	8
	2M	7	400	422	little pre Failed		30+
6/3/77	4	13	TOP BOT	4 FT 7 FT	7 C L A SANDY SILT CLAY (PK)		

Stinson
etc

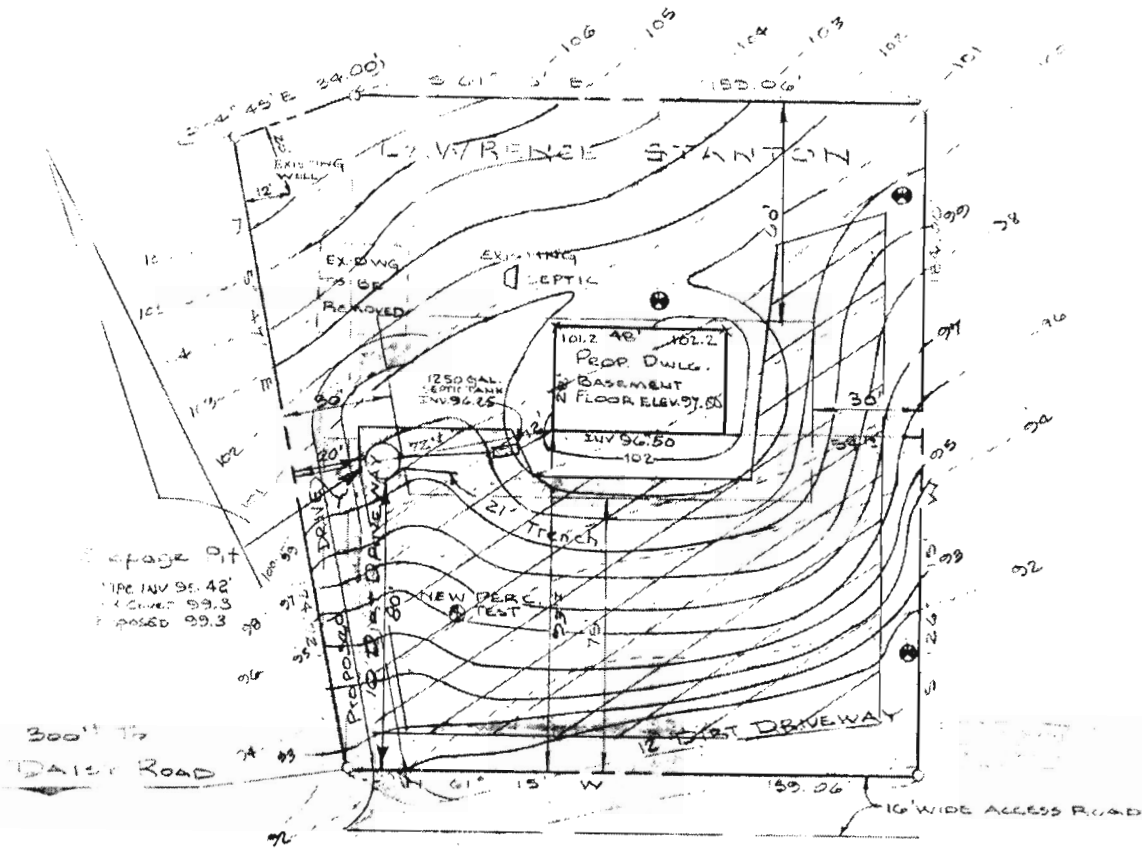
REMARKS Existing House to Bottom Down & New House to be
 TYPE OF SOIL Excavated House built 15 years ago might have per
Test records under name of DORSET OR WISE
 TESTED BY Raymond Hobbes ALSO PRESENT: JOLSON SMITH RELATIVE
H. SIRK MAURICE
BERTHA STANTON

EVANS, HAGAN & HOLDEFER, INC.



S URVEYORS AND CIVIL ENGINEERS

813 BELAIR ROAD / BALTIMORE, MD. 21236 (301) 668-1501
 511 POPLAR STREET / CAMBRIDGE, MD. 21613 (301) 228-3350
 111 JOHN STREET / WESTMINSTER, MD. 21157 (301) 848-1790
 111 S. WASHINGTON STREET / EASTON, MD. 21601 (301) 822-6433



300' To
 DAISEY ROAD
 10\"/>

*1-4-78.
 clear & location
 of f.f.*

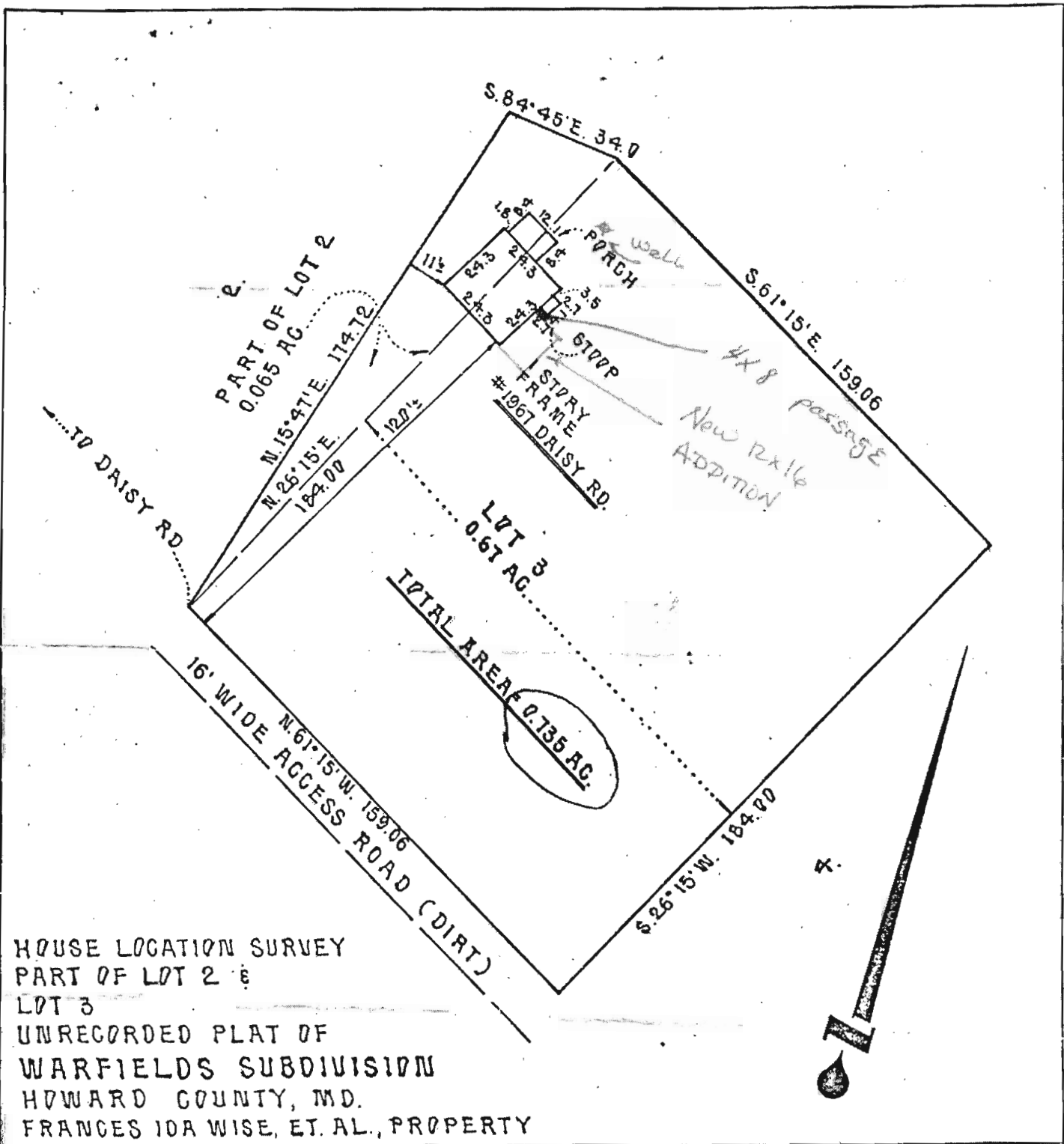
**LOT PLAN
 OF
 LAWRENCE STANTON
 PROPERTY
 4TH ELECT. DIST. HOWARD CO., MD**

Signed this 25TH day of NOVEMBER 1977

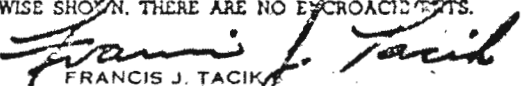
D. Wayne Keller
 SURVEYOR

SCALE 40 ft. = 1 inch

NOTE: This survey for title purposes only. Not to be used for determining property lines. Property corner Markers Not guaranteed by this survey.

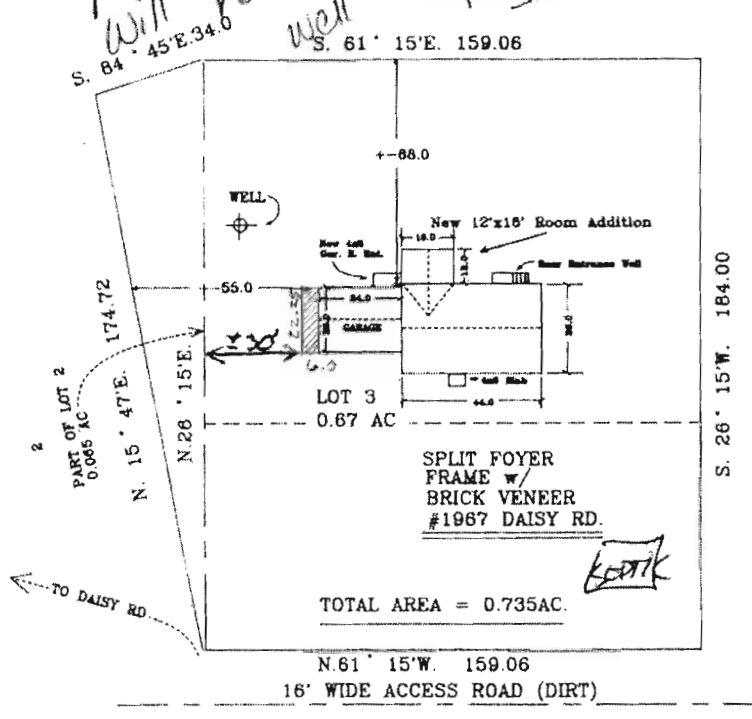


HOUSE LOCATION SURVEY
 PART OF LOT 2 &
 LOT 3
 UNRECORDED PLAT OF
 WARFIELDS SUBDIVISION
 HOWARD COUNTY, MD.
 FRANCES IOA WISE, ET. AL, PROPERTY

SURVEYOR'S CERTIFICATE I HEREBY CERTIFY THAT THE POSITION OF ALL THE EXISTING IMPROVEMENTS ON THE ABOVE DESCRIBED PROPERTY HAS BEEN CAREFULLY ESTABLISHED BY A TRANSIT-TAPE SURVEY AND THAT UNLESS OTHERWISE SHOWN, THERE ARE NO ENCROACHMENTS.  FRANCIS J. TACIK PROFESSIONAL LAND SURVEYOR REGISTERED LAND SURVEYOR MARYLAND #9164	REFERENCES PLAT BK. PLAT NO. LIBER 437 FOLIO 659	FRANCIS J. TACIK PROFESSIONAL LAND SURVEYOR LAND PLANNING CONSULTANT (301) 770-3642 • ROCKVILLE (301) 623-8882 • FREDERICK ROUTE 6 FREDERICK, MARYLAND 21701
	DATE OF SURVEYS WALL CHECK: HSE. LOC: 2.3.75 BOUNDARY:	SCALE: 1"=40' DRAWN BY: J. JOB NO: 1675

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
91 FEB 21 AM 9:10

7-23-98
 Proposed garage addition
 will have no impact on
 well & septic as
 shown (Km)



HOUSE LOCATION SURVEY
 PART OF LOT 2 &
 LOT 3
 UNRECORDED PLAT OF
 WARFIELDS SUBDIVISION
 HOWARD COUNTY, MD
 FRANCIS IDA WISE, ET. AL., PROPERTY

SURVEYOR'S CERTIFICATE		REFERENCES	
I HEREBY CERTIFY THAT THE POSITION OF ALL THE EXISTING IMPROVEMENTS ON THE ABOVE DESCRIBED PROPERTY HAS BEEN CAREFULLY ESTABLISHED BY A TRANSIT-TAPE SURVEY AND THAT UNLESS OTHERWISE SHOWN, THERE ARE NO ENCROACHMENTS. <i>Francis J. Tacik</i> FRANCIS J. TACIK PROFESSIONAL LAND SURVEYOR REGISTERED LAND SURVEYOR MARYLAND #9164		PLAT BK.	FRANCIS J. TACIK PROFESSIONAL LAND SURVEYOR LAND PLANNING CONSULTANT CRU 770-3642 - ROCKVILLE CRU 632-8882 - FREDERICK ROUTE 6 FREDERICK, MARYLAND 21704
		PLAT NO.	
LIBER: 437		DATE OF SURVEYS	SCALE: 1"=40'
FOLIO: 659		WALL CHECK:	DRAWN BY: J
		HSE. LOC: 2-3-75	
		BOUNDARY:	JOB NO: 1675

RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH

1998 JL 21 PM 4:58

Maryland Department of Assessments and Taxation Real Property Data Search (vw3.1A) HOWARD COUNTY	Go Back View Map New Search GroundRent Redemption GroundRent Registration
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Account Identifier: District - 04 Account Number - 317092

Owner Information

Owner Name:	JOHNSON DANA SMITH SHARON ETAL J/T	Use:	RESIDENTIAL
Mailing Address:	1963 DAISY RD WOODBINE MD 21797-8409	Principal Residence:	YES
		Deed Reference:	1) /10175/ 00031 2)

Location & Structure Information

Premises Address	Legal Description
1963 DAISY RD WOODBINE 21797-0000	.588 ACRE 1963 DAISY RD RT 144

Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Assessment Area	Plat No:
0008	0019	0045		0000				2	Plat Ref:

Special Tax Areas	Town	NONE
	Ad Valorem	100
	Tax Class	

Primary Structure Built	Enclosed Area	Property Land Area	County Use
1952	1,248 SF	25,613 SF	

Stories	Basement	Type	Exterior
1.500000	YES	STANDARD UNIT BRICK	

Value Information

	Base Value	Value		Phase-in Assessments	
		As Of	As Of	As Of	As Of
Land	228,610	01/01/2011	188,600	07/01/2011	07/01/2012
Improvements:	125,830		97,600		
Total:	354,440		286,200	286,200	286,200
Preferential Land:	0			0	

Transfer Information

Seller:	HARRIDAY HERBERT H	Date:	08/15/2006	Price:	\$0
Type:	NON-ARMS LENGTH OTHER	Deed1:	/10175/ 00031	Deed2:	
Seller:		Date:		Price:	
Type:		Deed1:		Deed2:	
Seller:		Date:		Price:	
Type:		Deed1:		Deed2:	

Exemption Information

Partial Exempt Assessments	Class	07/01/2011	07/01/2012
County	000	0.00	
State	000	0.00	
Municipal	000	0.00	0.00

Tax Exempt:		Special Tax Recapture:
Exempt Class:		NONE

Homestead Application Information

Homestead Application Status: Application received