

Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

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

April 25, 2019

William M. Tang
2881 Evergreen Court
Ellicott City, MD 21042

RE: Waiver Approval
2881 Evergreen Court
Ellicott City, MD 21042

Mr. Tang,

This letter is being issued in response to your waiver request dated April 25, 2019. Your request for a waiver of the Howard County Code requirement for a percolation certification plan has been **approved**. The proposed sixteen (16) by sixteen (16) foot sunroom to replace an existing deck located within the one-hundred-foot well setback and do not test soils (Ha) does not impact the area available for future on-site sewage disposal system repair. The sunroom does not increase the number of bedrooms in the home and will not have plumbing.

Any deviations from the proposed work illustrated on the site plan submitted with the waiver request will be subject to further review by this department. Future proposed improvements to the property requiring a building permit will require perc testing and a percolation certification plan.

Any questions regarding this decision may be directed to the Well and Septic Program of the Howard County Health Department.

Respectfully,

A handwritten signature in black ink, appearing to read 'Michael J. Davis', is written over the typed name.

Michael J. Davis
Assistant Director
Bureau of Environmental Health

From: William M Tang
2881 Evergreen Ct, Ellicott City MD 21042

Date: April 25, 2019

Mr Mike Davis,
Environmental Health Deputy Director
Howard County Health Department
8930 Stanford Boulevard, Columbia MD 21045

Mr Davis:

I am writing this letter in regarding the sunroom permit for my home. The property address is 2881 Evergreen Ct, Ellicott City, MD 21042. I am requesting a waiver for the perc certificate requirement for the following reasons:

- The sunroom will be within the 100' well arch. An area which cannot be used for sewage disposal.
- The back half of the property is in do not test soils (Ha) which is where the sunroom will be constructed.
- The sunroom will not contain living space or bedrooms. This room is an open room that will not have any plumbing but only electric for lights.

Thank you for considering this request for waiver for the perc certificate requirement. Please call if additional information is needed. You can reach me at 443-220-1817.

Sincerely,



William M Tang.

Homeowner.

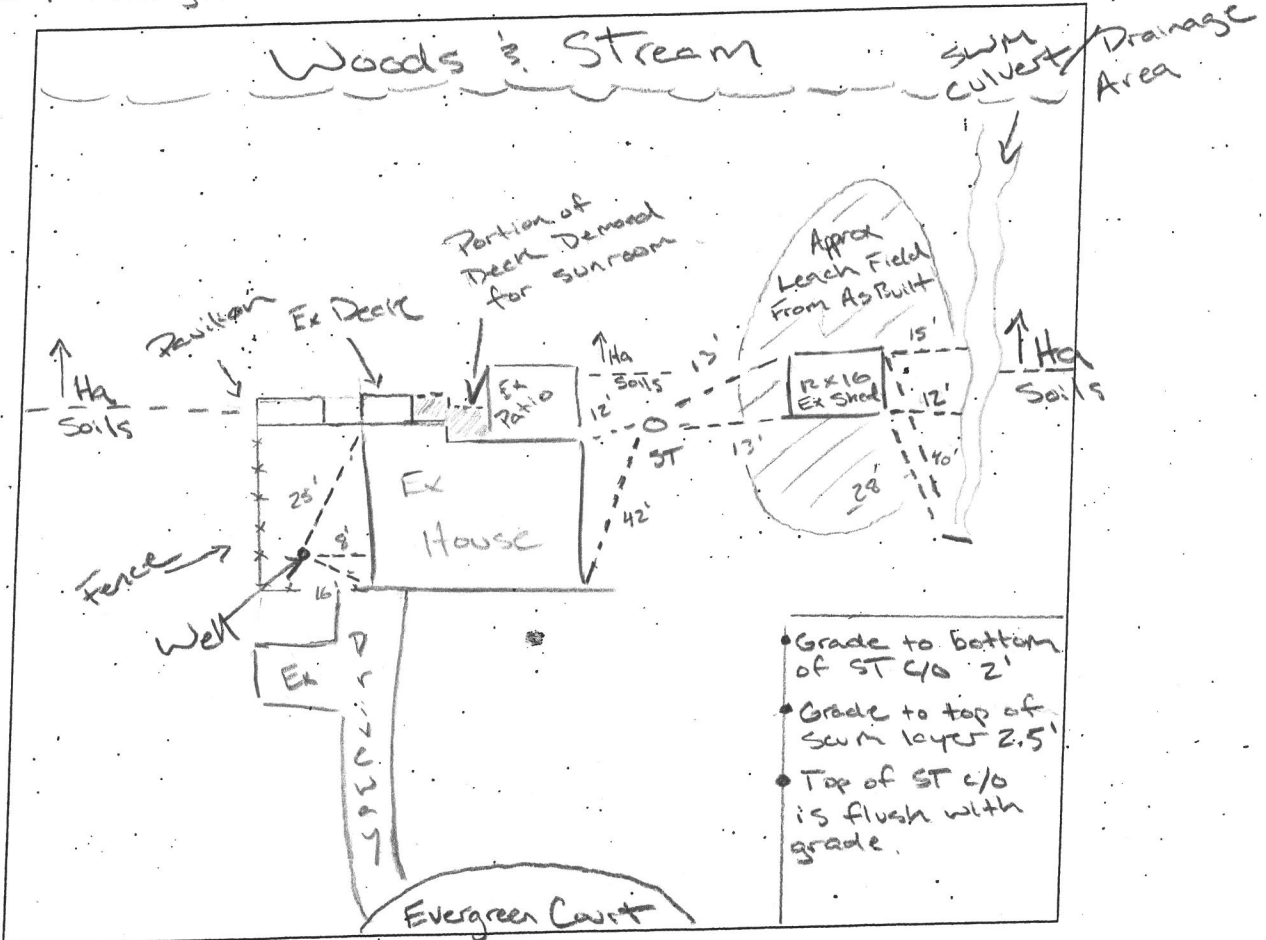
Spencer, 4/25/19

Need waiver request.
OK to approve BP
when request is
received. I will
write approval ltr. when
I return. M J Davis

SITE INSPECTION SHEET

OWNER: William Tang PHONE #: _____
 ADDRESS: 2881 Evergreen Ct. CONTRACTOR: N/A
Ellicott City 21042 WELL TAG #: No Tag #
 SUBDIVISION: Green Henge LOT: 29 COUNTY #: Howard

PROPOSAL: Owner wants to put a sunroom on rear of house which would replace a portion of the existing deck. No plumbing, only electric. LOCATION DIAGRAM Asking for waiver to perc cert.



COMMENTS: Septic System does not appear to be failing, from the surface. Mentioned to homeowner the septic tank should be pumped soon. Leach field appears to be under shed possibly according to as built. Well appears to be in good condition with two piece cap. Just needs tightening on bolts.

DATE: 4/23/2019 INSPECTOR: RSP

* Half of property is in do not test soils (Ha soil).

Freemon, Robert

From: Robert Freemon <coastal4life@icloud.com>
Sent: Thursday, April 25, 2019 8:43 AM
To: Freemon, Robert
Subject: Pics

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]



← ST
C/O

(NE Side of House 1/3 Rear of House)



No Tag # SW side of House



SWM
Culvert/
Drainage
Area
←
Flow

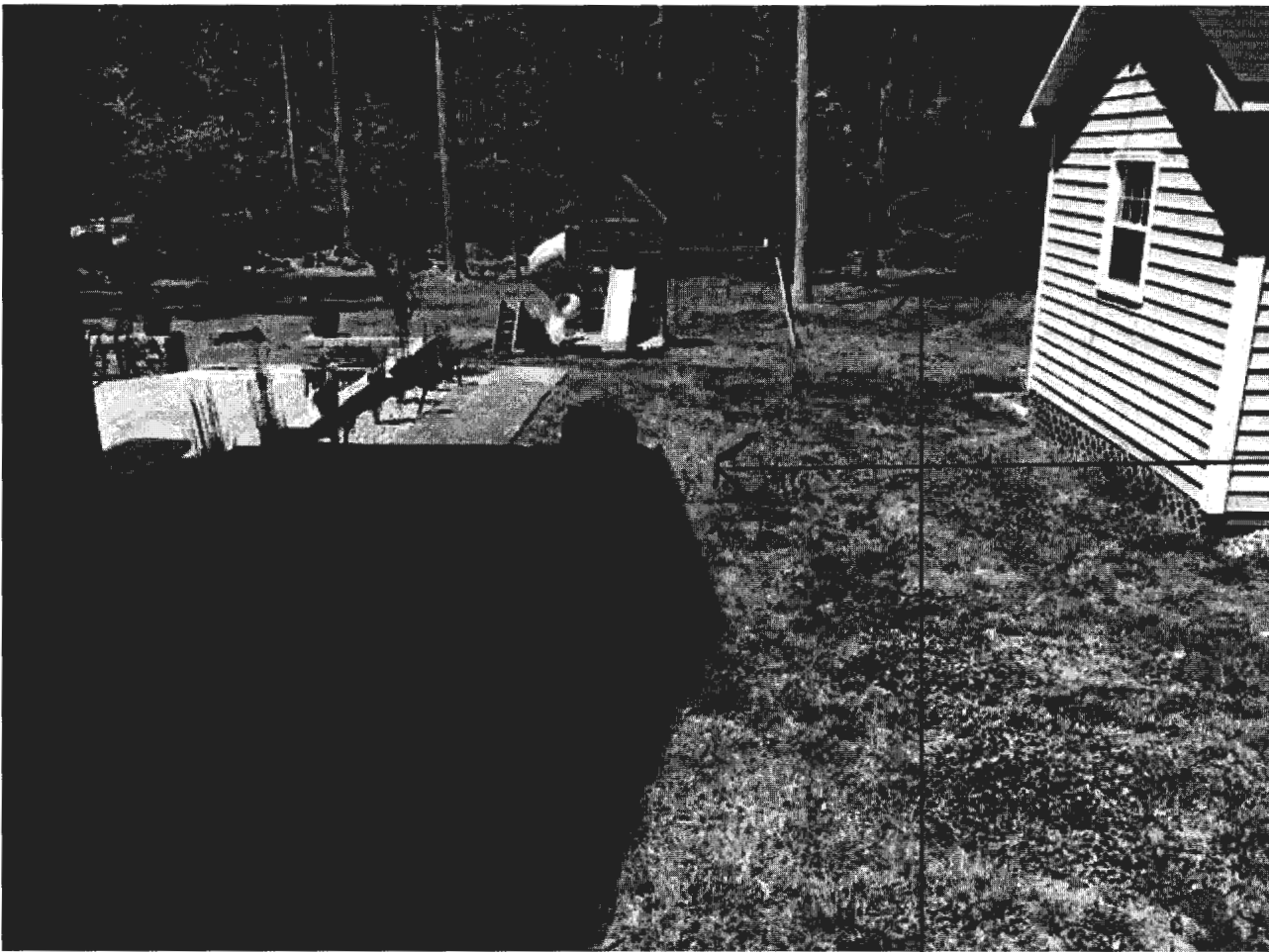
(NE side of House)

12' x 16' Shed



11-03

(NE Side of House) Culvert / Drainage Area



Shed
12' x 16'
←

ST
C/O

(NE Side of House)

Woods & Stream

SWM Culvert / Drainage Area

Freemon, Robert

From: Robert Freemon <coastal4life@icloud.com>
Sent: Thursday, April 25, 2019 8:41 AM
To: Freemon, Robert
Subject: Pics

[Note: This email originated from outside of the organization. Please only click on links or attachments if you know the sender.]



No Tag # (SW Side of House)



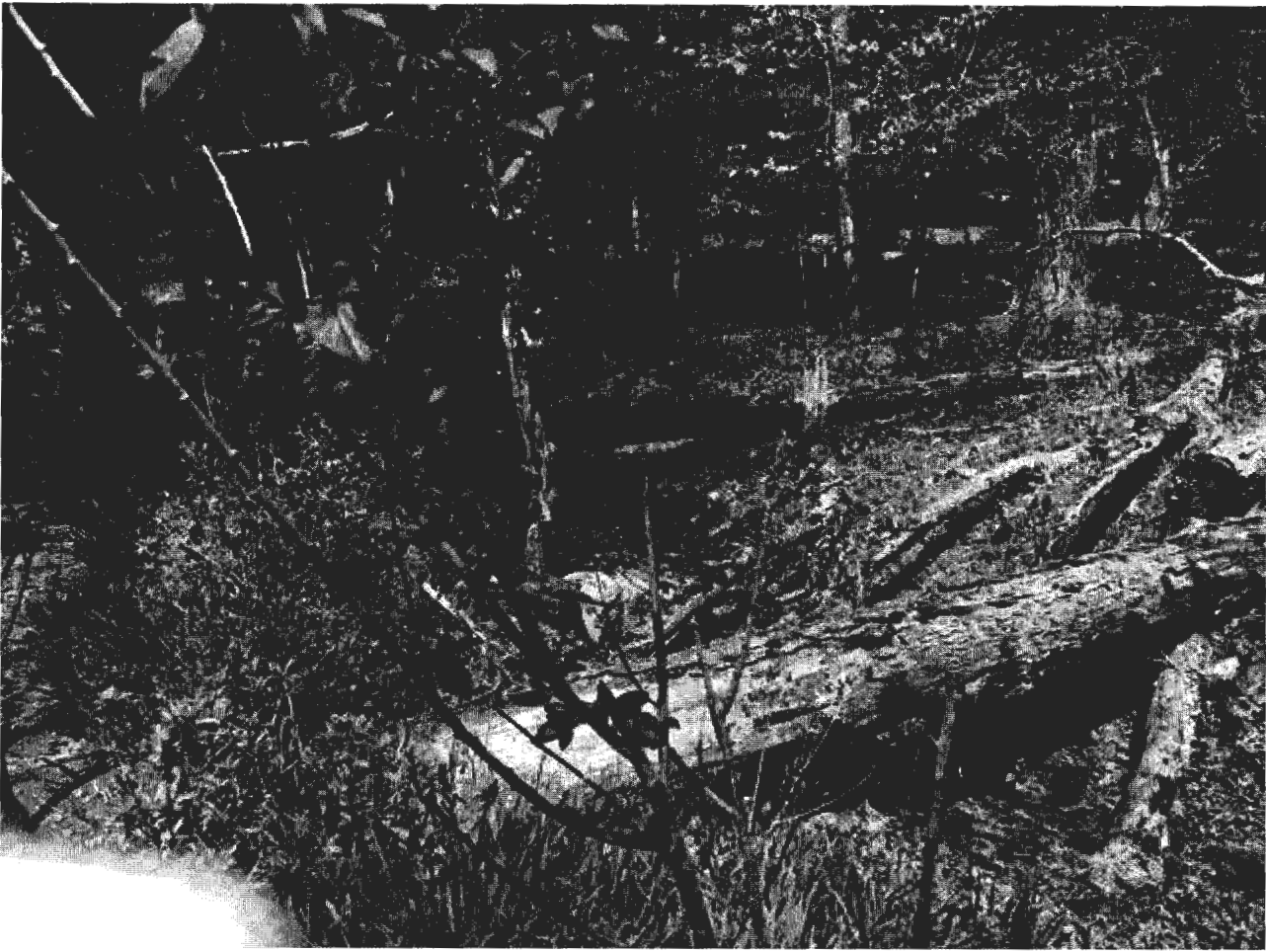
Sent from my iPhone

(NW Side of House)
"Rear of House"

Demolished Deck
For Sunroom

Existing Deck
To Remain





Sent from my iPhone (NE Side of House)

← Flow
SWM
Conduit/Drainage
Area

Map interface showing layers and tools:

- Tools: Add Layer, Length, Area, Select, Point, Line, Polygon, Clear
- Layers:
 - 2017 Aerial Photo
 - BASE MAP LAYERS
 - HEALTH SPECIAL LAYERS
 - UTILITY LAYERS
 - GEOGRAPHY
 - BALTIMORE_GNEISS
 - B GNEISS BUFFER 1000 FT
 - FLOODPLAIN
 - GEOLOGY
 - HYDRIC SOILS
 - SOILS
 - STREAMS
 - STREAMS BUFFER 75FT
 - WETLANDS
 - PLANNING

Map features and annotations:

- Property address: 2881
- Measurement: 80.54 ft
- Scale bar: 50 ft
- Emergency exit sign: EMERGENCY
- Handwritten note: Well to Septic Tank
- Handwritten arrow pointing North (N)

+ Add Layer
 Home
Length
Area
📷
Select
✎
Point
Line
Polygon
Clear

2016 Aerial Photo

BASE MAP LAYERS

HEALTH SPECIAL LAYERS

UTILITY LAYERS

GEOGRAPHY

- BALTIMORE_GNEISS
- B_GNEISS_BUFFER_1000_FT
- FLOODPLAIN
- GEOLOGY
- HYDRIC_SOILS
- SOILS
- STREAMS
- STREAMS_BUFFER_75FT
- WETLANDS

PLANNING

100 ft



Building Permit Application

Howard County Maryland
 Department of Inspections, Licenses and Permits
 3430 Court House Drive
 Permits: 410-313-2455
 www.howardcountymd.gov

Date Received: _____

Permit No.: _____

EC OK LHP

Building Address: 2881 Evergreen Ct
 City: Ellicott City State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Subdivision: _____
 Lot: _____ Tax Map: _____ Parcel: _____

Property Owner's Name: William Tang
 Address: 2881 Evergreen Ct
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 443-220-1817 Fax: _____
 Email: william.m.tang@gmail.com

Existing Use: Deck
 Proposed Use: Sunroom
 Estimated Construction Cost: \$10,000
 Description of Work: remove old deck and add sunroom to replace it
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: William Tang
 Address: 2881 Evergreen Ct
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 443-220-1817 Fax: _____
 Email: william.m.tang@gmail.com

Contractor Company: Do it myself
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
Area of construction (sq. ft.):	2 nd floor:	
Use group:	Basement:	
	<input type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
Construction type:	No. of Bedrooms:	
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling	
<input type="checkbox"/> Structural Steel	No. of efficiency units:	
<input type="checkbox"/> Masonry	No. of 1 BR units:	
<input type="checkbox"/> Wood Frame	No. of 2 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: William Tang Print Name: WILLIAM MING TANG
 Email Address: william.m.tang@gmail.com Date: 4/17/2019
 Title/Company: _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

****PLEASE WRITE NEATLY & LEGIBLY****
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/26/2019</u>	<u>[Signature]</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

APPROVED

WALK-THRU BUILDING PERMIT.

BP#

A#

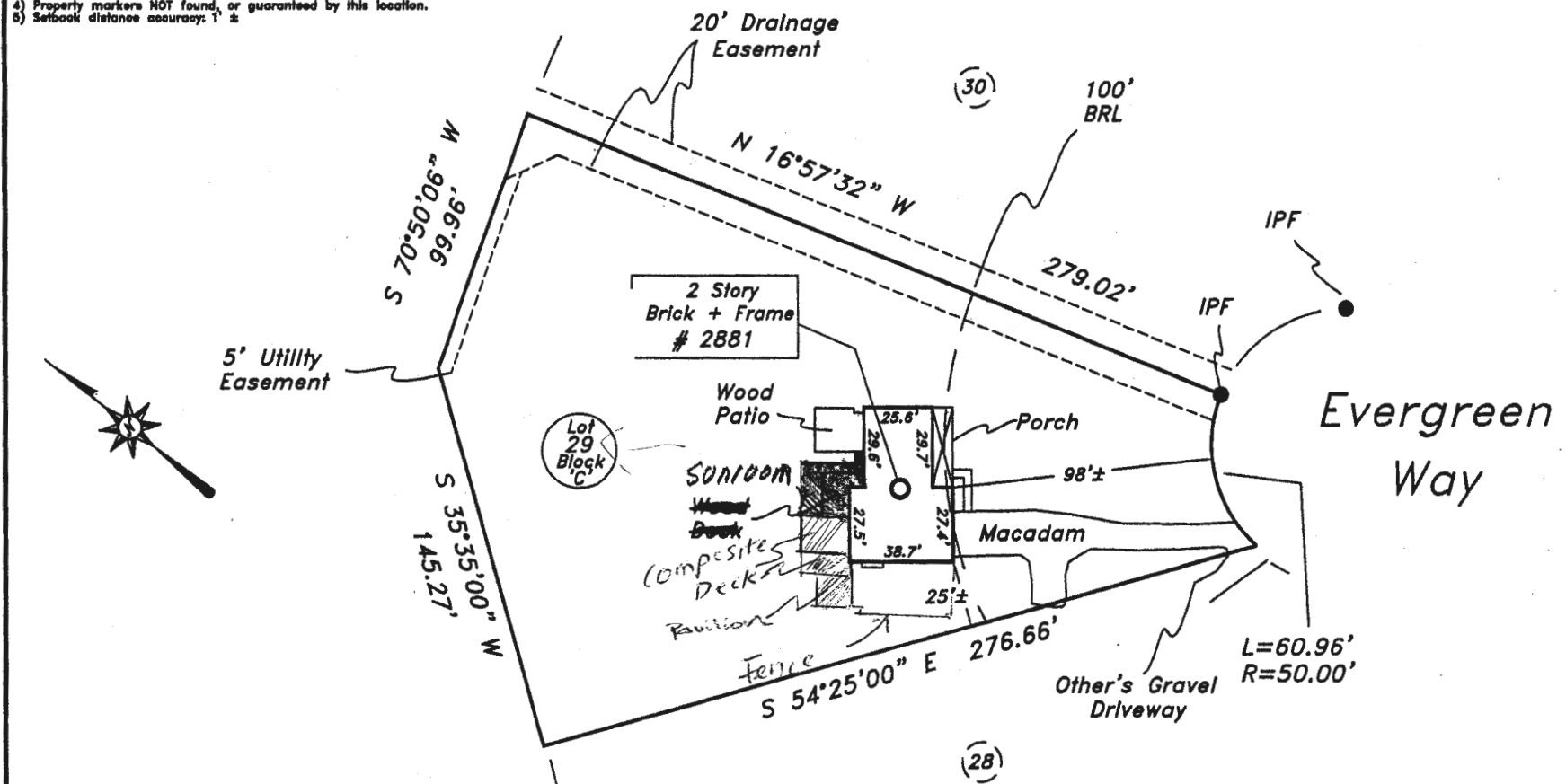
APP. SAN Robert Ficarno DATE: 4/26/2014

DESC. OF WORK: Remove existing

deck and add sunroom

NOTES:

- 1) B.R.L. Information, if shown, was obtained from existing record plat or local agencies and is not guaranteed by NTT, Inc.
- 2) Building line and/or Flood Zone Information is subject to the interpretation of the originator.
- 3) NTT, Inc. does not certify to unshown or unrecorded encroachments or overlaps.
- 4) Property markers NOT found, or guaranteed by this location.
- 5) Setback distance accuracy: 1' ±



Subject property is shown in Zone C on the FIRM Map of Howard County, Maryland on Community Panel # 240044 0016B. Effective 12-4-86

Driveway appears to exceed property line as shown.
Dwelling appears to exceed BRL as shown.

This is to certify that I have surveyed the property shown hereon, being known as Lot 29, Block C, Section No. 4, Green Henge and recorded among the land records of Howard County, Maryland in Pl Bk 13 folio 19 for the purpose of locating the improvements thereon.

- * This plat is of benefit to the consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing, or refinancing purposes.
- * This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future structures.
- * This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.



LOCATION DRAWING
2881 Evergreen Way
Howard County, Maryland
Election District No. 03

NTT Associates, Inc.
16205 Old Frederick Road
Mt. Airy, Maryland 21771
Ph. (410)442-2031
Fax No. (410)442-1315

Scale:	1" = 60'
Date:	9-25-08
Field By:	Don
Drawn By:	Don
Drawing #	9557HEC

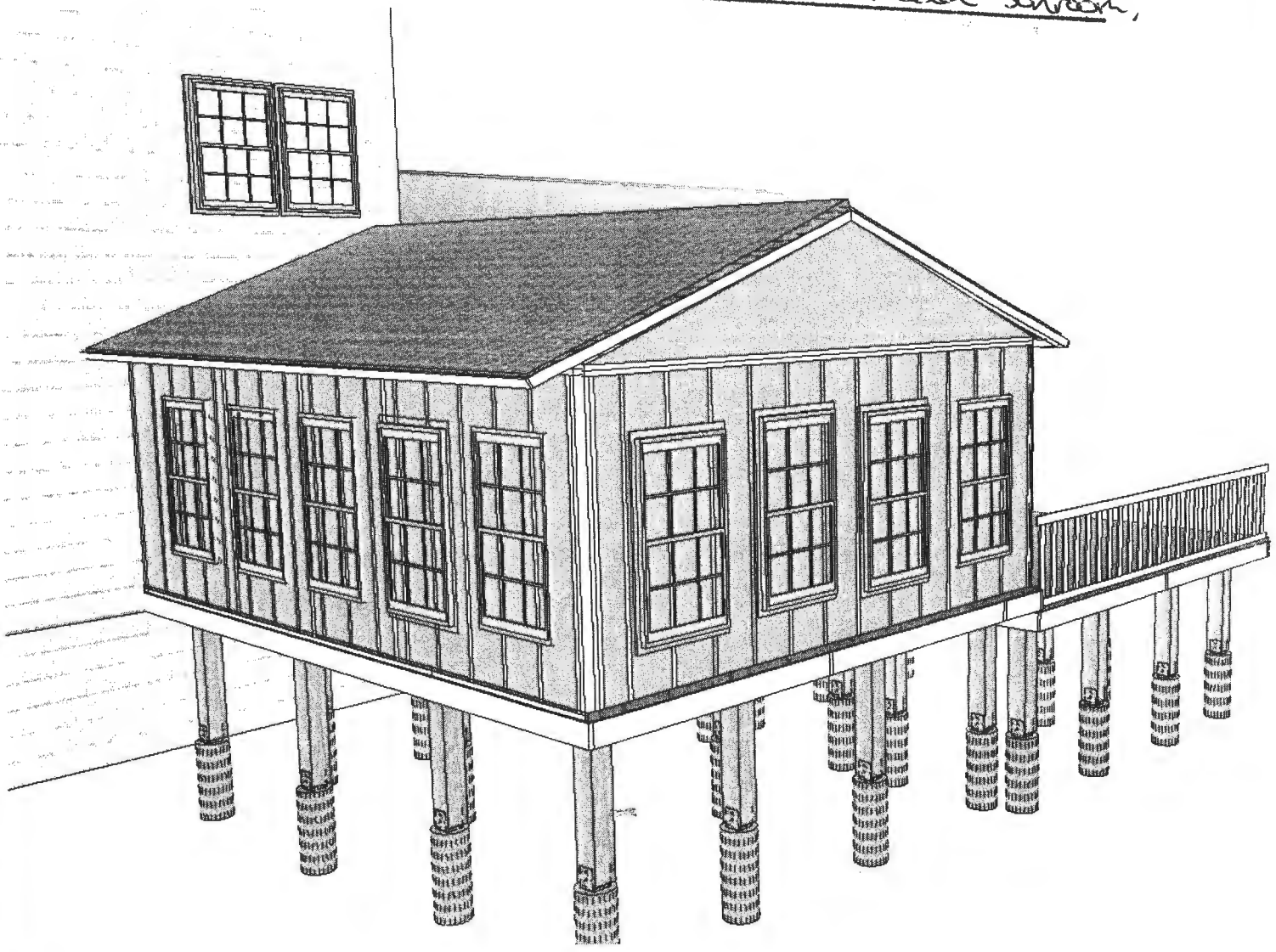
APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____

APP. SAN Robert Freeman DATE: 4/26/2019

DESC. OF WORK: Remove existing deck and add sunroom,



16'

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____

APP. SAN Robert Freeman DATE: 4/26/2011

DESC. OF WORK: Remove existing deck and add sunroom.

SUNROOM

16'

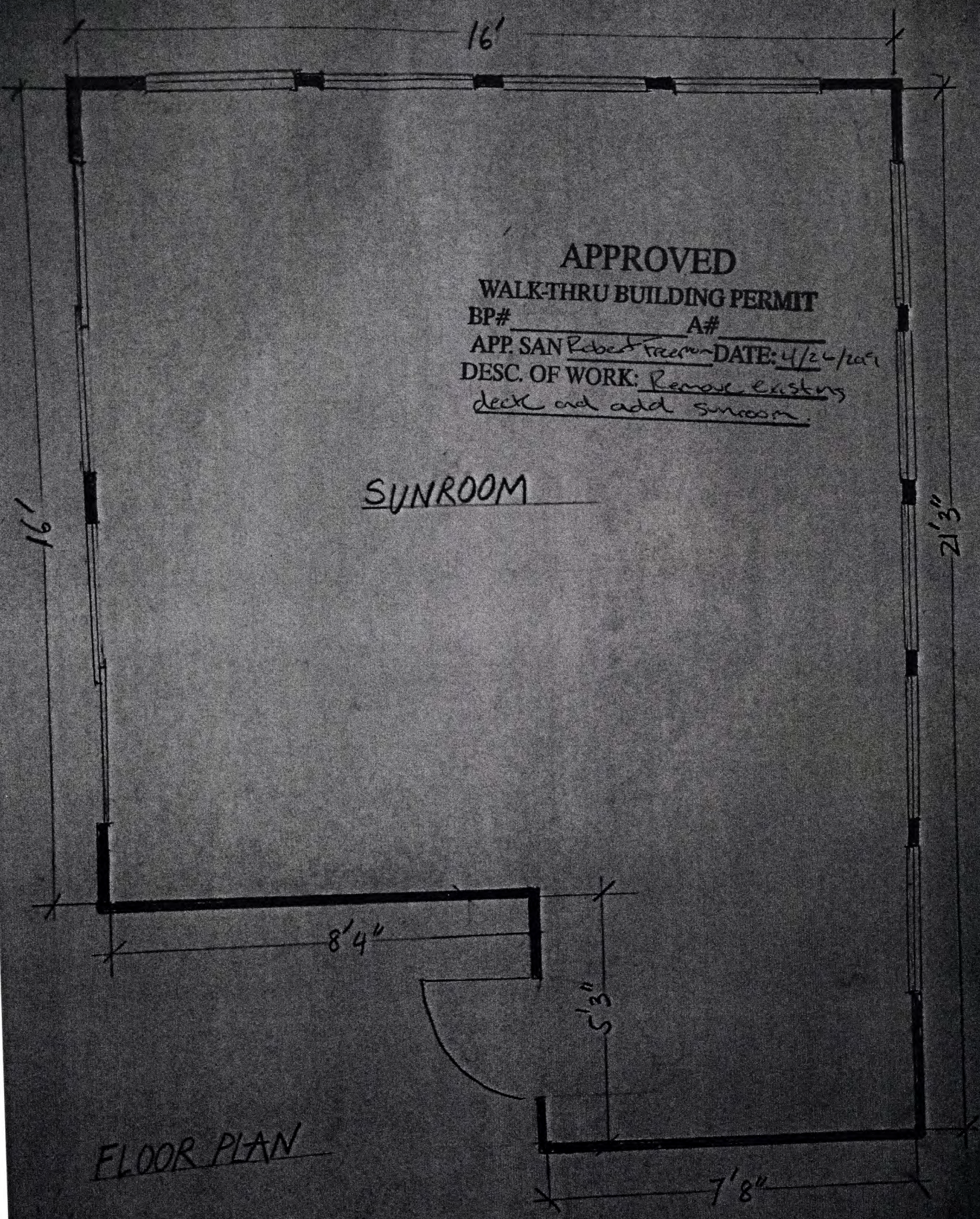
21'3"

8'4"

5'3"

7'8"

FLOOR PLAN



9-27-68
A.G.
945

FF 10-2-68
DWM

PERMIT

P 13806
A 12106

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY
DISTRICT 3

INDEXED

DATE 8/2/68

Hudson Construction Corp. IS PERMITTED TO INSTALL X ALTER
ADDRESS 363 Chapel Avenue, Ellicott City, Md. PHONE 465-2205

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Green Henge ROAD Evergreen Way LOT 29, Sec. 4
PROPERTY OWNER Garwell, Inc.

ADDRESS _____

SPECIFICATIONS - 4 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.
SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 130 sq. ft. absorbent sidewall area to begin below inlet pipe per bedroom. Inlet pipe 4 ft. below original grade. Max. depth of Dry well below original grade is 11 ft.

Place dry well 135 ft. from front lot line and 35-ft. from right side line as seen when facing lot from Evergreen Ct.

PERMIT VOID AFTER THREE YEARS.
PLANS APPROVED BY J. H. Kilmore DATE 1/29/68

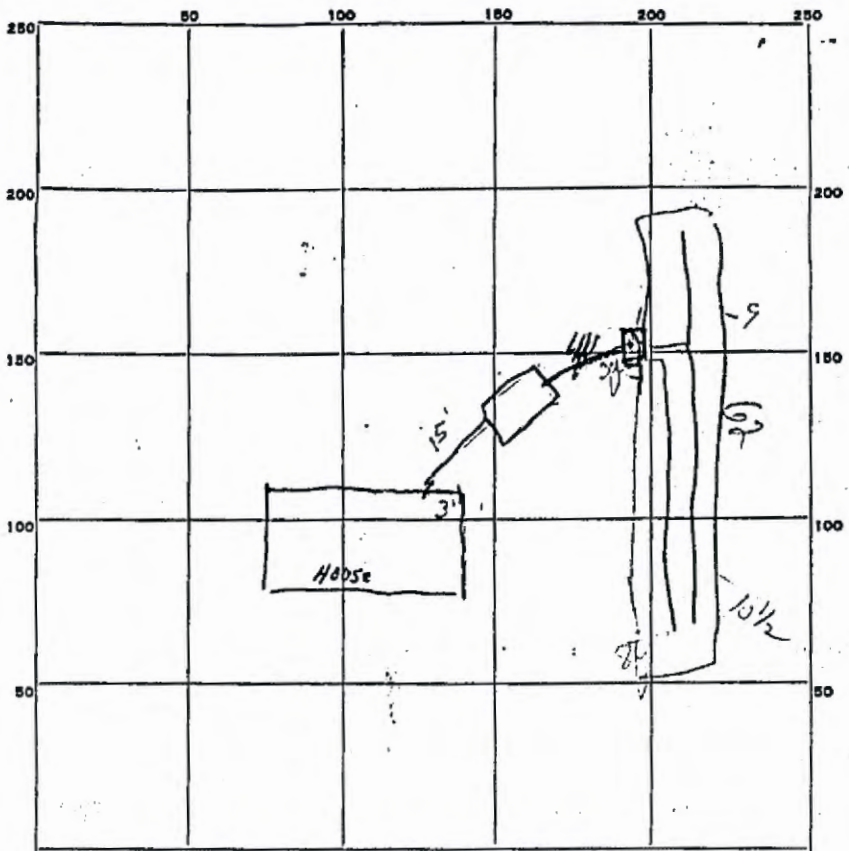
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

new spec OK - 9/34/68 FF + JWM
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

trench 10ft wide - 60 ft long - with 3-ft gravel under pipe
depth of trench 7 1/2 ft at shallow end. trench at 5' slope 2 1/2' 3' and
NOTIFY THE HEALTH DEPARTMENT 48 HOURS
toward road. call for resp. of trench before approval
BEFORE EXCAVATIONS ARE TO BE BACK FILLED.
is installed.

12/2/106

60' x 30'
width of 10'



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD not posted

SEPTIC TANK, LEVEL 1000 gal. CLEANOUTS OK

DISTRIBUTION BOX, LEVEL OK

L Bed
TRENCH FIELD, DEPTH 7 1/2 to 8 FT. TRENCH WIDTH 9 1/2 to 10 1/2 FT.

GRAVEL DEPTH 36 IN. TOTAL LENGTH 62 FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA 600 + opp. better area

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 10/2/68 INSPECTOR W. M. Money

APPLICATION

A 12106

P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 8/17/66

Septic Tank - 3 bedrooms - 750 gal
4 " " - 1000 gal

Dry Well: 130 sq ft charcoal sidewall one to begin below inlet pipe per
bedroom. Inlet pipe 4 ft below orig. grade. Max depth of all below dig
grade is 11 ft.

Place Dry Well: 135 ft from front lot line and 3.5 ft from right
sideline as run when facing lot from Congress St.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Carwell, Inc.

ADDRESS 177 Chatham Rd., Ellicott City, Md. PHONE HO 5-2642

PROPERTY LOCATION:

SUBDIVISION Green Henge LOT NO. 29, Sec. 4

ROAD AND DESCRIPTION Evergreen Way

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 50' x 263' x 300' x 23' x 305' TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT s/s/ Mr. Sutherland

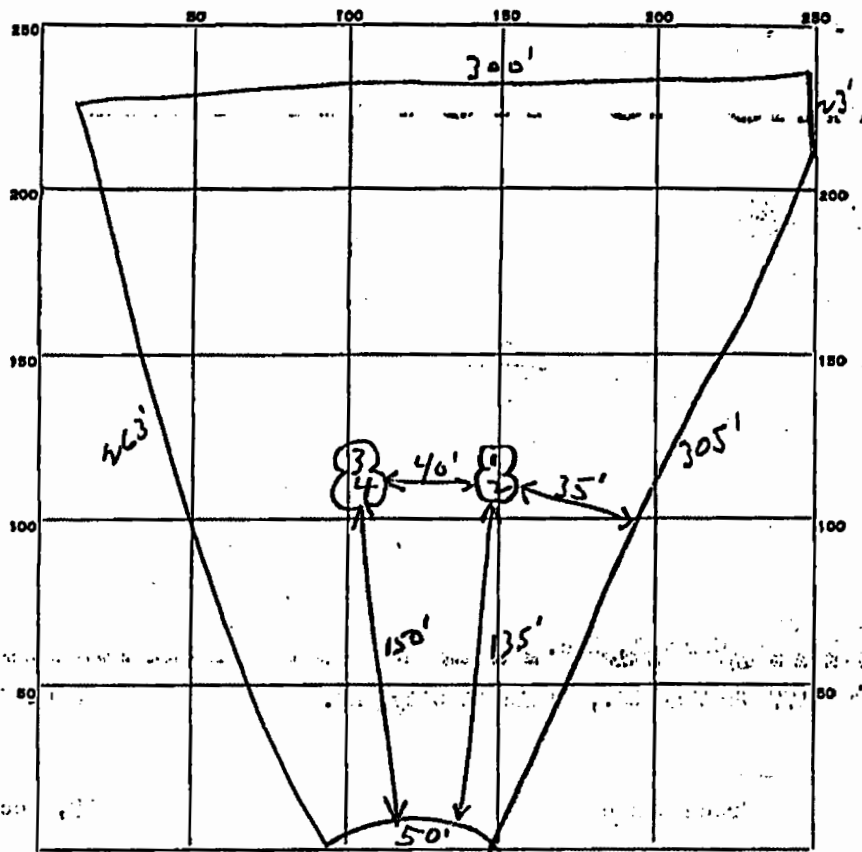
APPROVED BY Jill Kulmose FOR Carwell (KIND OF SYSTEM) DATE 1-27-68

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Unnamed Ct.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/24/66	1	5'	10:04	10:06	10:06	10:08	2 min
	2	9'	10:05	10:07	10:07	10:10	3 min
	3	5'	9:58	10:10	10:10	10:32	22 min
	4	9'	9:58	10:00	10:00	10:03	3 min

Av. Time
8 min
Depth of
water
4 ft.

SOIL AUGER FINDING _____

TESTED BY JHK _____

REMARKS _____

L0429

**THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL**

WELL COMPLETION REPORT

WELL DESCRIPTION

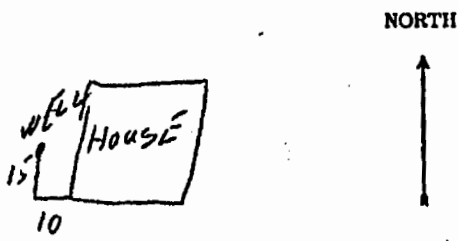
A WELL LOG
State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

B CASING AND SCREEN RECORD
State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

	FEET from ___ to ___		DIAM. (Inches)	FEET from ___ to ___
top coil	0-3	steel	6 1/2	0-40
sandy	3-35			
sand rock	35-50			
gray rock	50-340			
water 50				

Permit Number HO-68-4251
 Owner Hudson Construction
 Address Ellicott City Md.
 Subdivision Green Hange
 Section _____ Lot 29
 County Permit Number _____
PUMPING TEST
 Hours Pumped 3
 Type of Pump Used air
 Pumping Rate _____
 Gallons per Minute 1
WATER LEVEL
 (Distance from land surface to water)
 Before Pumping 45 Ft.
 When Pumping 340 Ft.
APPEARANCE OF WATER
 Clear _____ Cloudy _____
 Taste _____
 Odor _____
 Height of Casing Above Land
 Surface 1 Ft.
PUMP INSTALLED
 Type _____
 Capacity _____
 Gallons per Minute _____
 Gallons per Hour _____
 Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT
 Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE WELL WAS COMPLETED

I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

L. J. Costello Well Driller

9-30-68

Well Driller License No.: 70

Reed

- No Perc Cert
- Half of property is in the soil (Do not test)
- Note the well
- Well is how far from septic