

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

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

RECEIPT DATE: 3/8/2021

ONSITE SEWAGE DISPOSAL SYSTEM

P 568781

APPROVAL DATE: _____

PERMIT:

REPAIR

A Repair

PROPERTY ADDRESS: 16700 Frederick Road (House only, corner of Frederick Rd and Watersville)

SUBDIVISION: n/a

LOT: n/a TAX ID: 04-367464

CONTRACTOR: South Carroll Backhoe

EMAIL: scbackhoe@comcast.net

CONTRACTOR ADDRESS: 4410 Salem Bottom Rd, Westminster MD 21157

PHONE: 410-596-3618

PROPERTY OWNER: Jack Azat

EMAIL: AZATRENTAL@COMCAST.NET

OWNER ADDRESS: 3219 Hooper Rd, New Windsor MD 21776

PHONE: 443-744-1998

SEPTIC TANK SIZE: Existing

PUMP TANK CAPACITY: n/a

PUMP SIZE: n/a

DISTRIBUTION SYSTEM: GRAVITY

PRESSURE DOSED

BEDROOMS: 3

APPLICATION RATE: 0.6

TRENCHES:	LINEAR FEET REQUIRED: <u>105</u>	INLET DEPTH: <u>4'</u>
	TRENCH WIDTH: <u>3'</u>	MAXIMUM BOTTOM DEPTH: <u>10'</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>n/a</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>6'</u>
LOCATION:	TO BE STAKED BY SANITARIAN DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	Install 1x105' trench on contour running through perc test A. Pump and collapse ex. Drywell.	

ISSUED BY: K. Wolf

ISSUE DATE: 3/30/2021

EXPIRATION DATE: 3/30/2022

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

ELECTRICAL PERMIT ISSUED E n/a

NOTE: THE HCHD DOES NOT WARRANT ANY SYSTEM AND CANNOT GUARANTEE THE PERFORMANCE OF THIS SYSTEM AS DESIGNED. BY ACCEPTING THIS PERMIT, THE OWNER AND/OR APPLICANT ACKNOWLEDGE THAT THE SPECIFICATIONS DETAILED IN THIS DESIGN ARE ONE POSSIBLE OPTION AND THAT THE HCHD WILL REVIEW OTHER PROPOSALS. YOU HAVE THE OPTION TO SEEK THE ADVICE OF A QUALIFIED DESIGN CONSULTANT OR PROFESSIONAL ENGINEER FOR FURTHER GUIDANCE.

NOTE: AN INDIVIDUAL CERTIFIED BY MDE AND THE MANUFACTURER FOR BAT INSTALLATION MUST BE PRESENT AT ALL TIMES DURING BAT INSTALLATION.

NOTE: MDE 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

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.

NOT TO SCALE

TRENCH/DRAINFIELD DATA

WIDTH 3 INLET 4' BOTTOM 10'

NUMBER OF TRENCHES 1

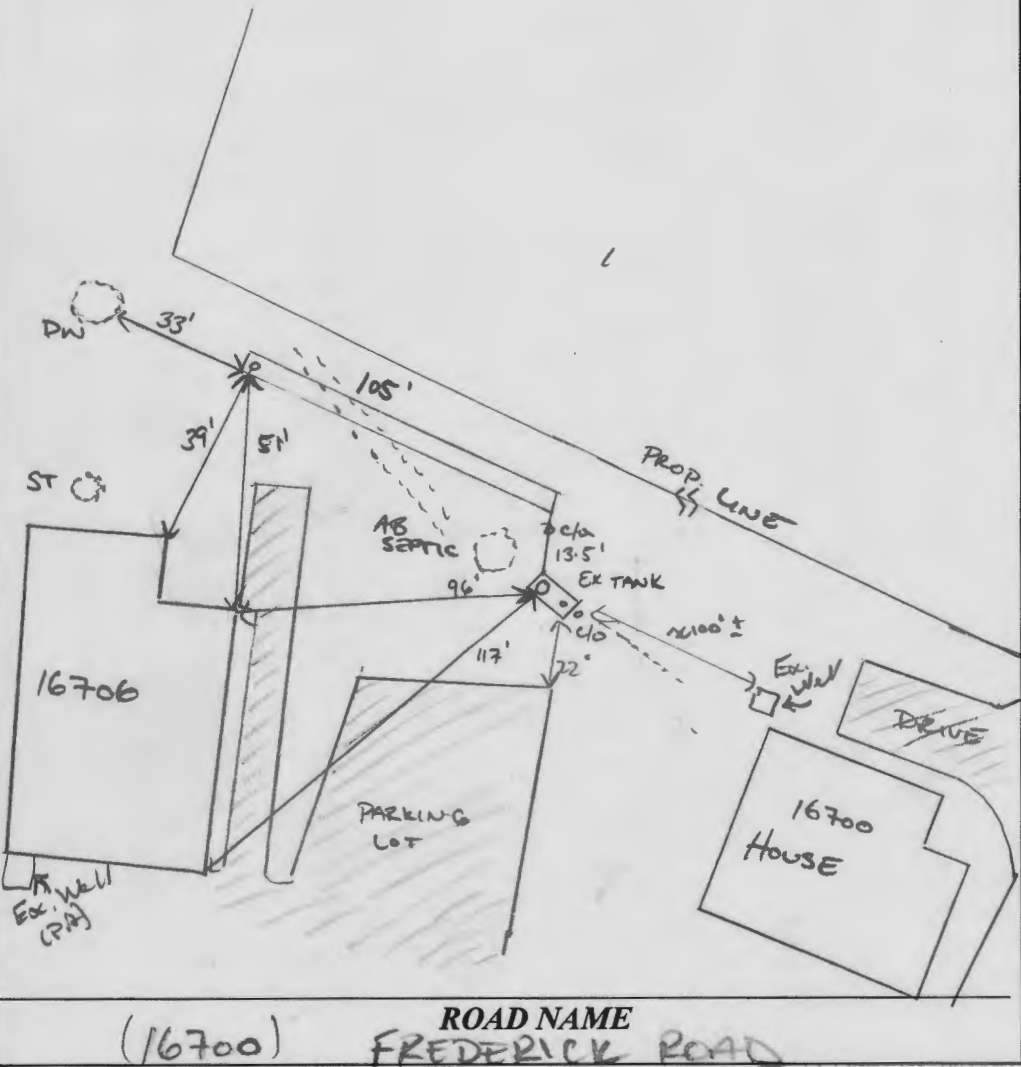
TOTAL LENGTH 105

ABSORPTION AREA 315 + SIDE WALL

DISTRIBUTION BOX LEVEL R/A

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 _____

EXISTING

PRE-CONSTRUCTION: 3/30/21 Install 1 x 105' trench on contract.

INSTALLATION: 04/16/2021 60' OF TRENCH INSTALLED 04/19/2021 Completed TRENCH. OK TO BACKFILL

FINAL INSPECTOR Lauren Alabaz DATE OF APPROVAL 4/16/21



HOWARD COUNTY HEALTH DEPARTMENT

68781

P15/15

DATE 3/8/21

Received From

S. Carroll backhoe

PHONE #

410-875-4197

INC.

CASH
 CHECK

For

Repair Perce (2)
16700 Frederick Rd
4939 Remondell Rd.

NO.

51610

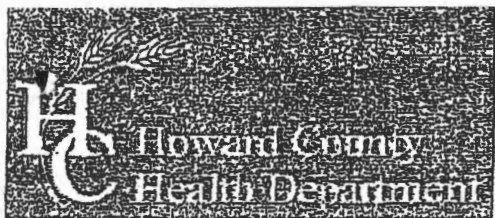
Seventy numbered fifty

Dollars

\$ 6600.00

Received By

J Kemp



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Twitter: HowardCoHealthDep

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

INFORMATION FORM - SEPTIC SYSTEM REPAIR/UPGRADE

Reason for Request:

- Failing System
System relocation for proposed addition
System upgrade for proposed addition
Inadequate treatment zone
Collapsed septic tank
Collapsed drywell

Has the septic tank been pumped within the last month?

- Yes Date pumped:
No

Was a visual inspection of the septic tank and/or drain fields conducted?

- Yes Explain observations:
No

Was a visual inspection of the sewage line conducted?

- Yes
Blockage leading to the tank
Yes. Explain:
No
Blockage leading to the field
Yes. Explain:
No

Existing system design

- Drywell
Trench
Mound
Unknown
Other:

Is discharge surfacing on the ground?

- Yes
No

Additional Comments:

*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, testing, and submittal of a Percolation Certification Plan, if the property does not meet current Code and Regulation.

Septic Contractor: South Carroll Beach Co Contractor's Phone: 410-596-3618
Contractor's Address:

Property Address: 16700 Frederick Rd County file:
Subdivision: Lot Year Built:
Owner's Name: Jack Azat Owner's Phone: 443-744-1998

Name of previous owners: Existing bedrooms:
Proposed bedrooms:

Has this request been previously discussed with a Sanitarian? (Name): Kevin Wolfe
Public Sewer available/nearby: N/A

*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.

Prior to scheduling inspections, scaled plans should be submitted to clarify the nature of the addition.

Print out a copy of Real Property Data via Dept. of Taxation website Indexed file found

If public sewer may be nearby, verify whether sewer is technically "available" through the Bureau of Engineering.

If sewer is available and the property is within the Metropolitan District, connection to sewer is required. If the owner believes reason for exemption exists, the owner should justify the request in writing.

If soil/site conditions are limited and sewer and/or Metro District status is not conducive to connection, the Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. The Owner should contact the Bureau of Utilities for details.

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

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

**APPLICATION
FOR PERCOLATION TESTING AND SITE EVALUATION**

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME _____
 PROPERTY ADDRESS 16700 Frederick RD
STREET TOWN ZIP
 TAX ACCOUNT # _____ TAX MAP _____ GRID _____ PARCEL _____ LOT NO. _____ PROPOSED LOT SIZE (ACRES) _____
 ZONING CATEGORY _____ TIER _____

PROPERTY OWNER(S) JACK AZAT
 DAYTIME PHONE _____ CELL 410-744-1998 EMAIL _____
 MAILING ADDRESS _____
STREET CITY, STATE ZIP

APPLICANT South Carol Bachhoe RELATIONSHIP TO OWNER: _____
 DAYTIME PHONE _____ CELL 410-396-3618 EMAIL _____
 MAILING ADDRESS _____
STREET CITY, STATE ZIP

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

PROPERTY:

- SUBDIVISION: NUMBER OF LOTS INCLUDING RESIDUE: _____
SUBDIVISION CLASSIFICATION (PER DEPT. OF PLANNING AND ZONING) MAJOR MINOR
- CONSTRUCT NEW OSDS ON UNDEVELOPED LOT
- REPAIR OR REPLACE FAILING OSDS
- UPGRADE EXISTING OSDS

BUILDING:

- RESIDENTIAL WITH _____ EXISTING OR PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE
- COMMERCIAL (PROVIDE DETAIL OF TYPE OF USE AND NUMBERS OF EMPLOYEES/CUSTOMERS ON ACCOMPANYING PLAN)

IS THE PROPERTY WITHIN 2500 FEET OF ANY RESERVOIR?

- YES
- NO

AS APPLICANT, I UNDERSTAND THE FOLLOWING:

- THIS APPLICATION IS VALID FOR TWO(2) YEARS FROM DATE OF FEE PAYMENT AND APPROVAL IS BASED UPON HEALTH OFFICER SIGNATURE OF A PERC CERTIFICATION PLAN PRIOR TO EXPIRATION OF THIS PERMIT.
- THE APPLICATION FEE IS NON-REFUNDABLE
- THIS APPLICATION MUST BE ACCOMPANIED BY ALL APPLICABLE FEES AND A SUITABLE SITE PLAN IN ORDER TO BE PROCESSED
- THIS IS A PUBLIC DOCUMENT

I declare and affirm that to the best of my knowledge, the information contained herein is correct. I declare that I am the owner of the property or duly authorized to make this application on behalf of the owner. I agree to comply with all applicable state and county regulations.

By signature of this application, I hereby grant Howard County Health Department officials the right to enter onto the property for the purpose of inspecting the property as directly related to the requested permit/service.

Kenneth J. Whissel

3-2-2021

SIGNATURE OF APPLICANT

DATE



Bureau of Environmental Health
 8930 Stanford Blvd | Columbia, MD 21045
 410.313.2640 - Voice/Relay
 410.313.2648 - Fax
 1.866.313.6300 - Toll Free

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

**APPLICATION
 FOR PERCOLATION TESTING AND SITE EVALUATION**

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME _____

PROPERTY ADDRESS 16700 Frederick RD
STREET TOWN ZIP

TAX ACCOUNT # _____ TAX MAP _____ GRID _____ PARCEL _____ LOT NO. _____ PROPOSED LOT SIZE (ACRES) _____

ZONING CATEGORY _____ TIER _____

PROPERTY OWNER(S) JACK AZAT

DAYTIME PHONE _____ CELL 744-1998 EMAIL _____

MAILING ADDRESS _____
STREET CITY, STATE ZIP

APPLICANT South Carol Bachae RELATIONSHIP TO OWNER: _____

DAYTIME PHONE _____ CELL 596-3618 EMAIL _____

MAILING ADDRESS _____
STREET CITY, STATE ZIP

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IS THE PROPERTY WITHIN 2500 FEET OF ANY RESERVOIR?

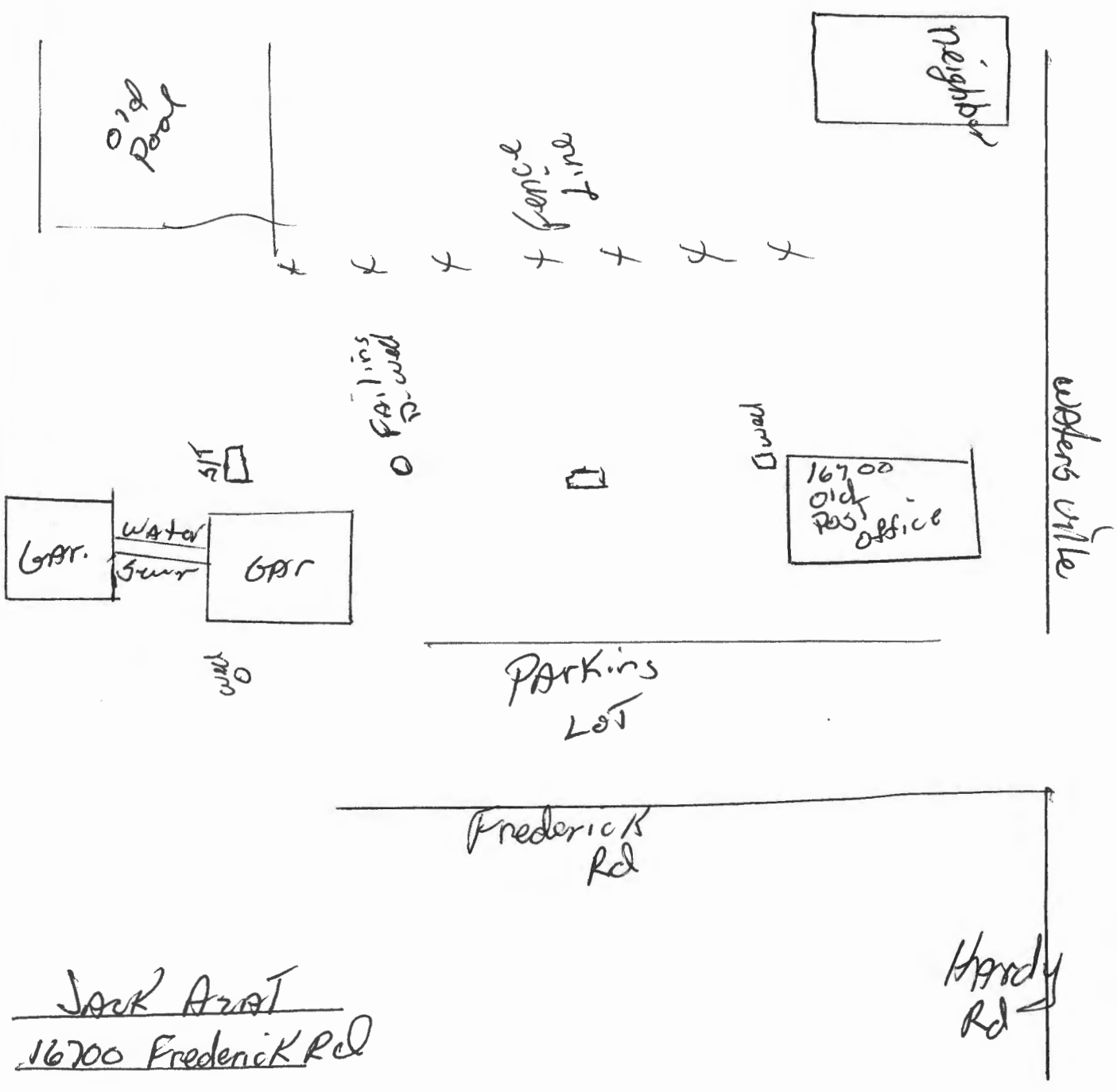
- YES
- NO

AS APPLICANT, I UNDERSTAND THE FOLLOWING:

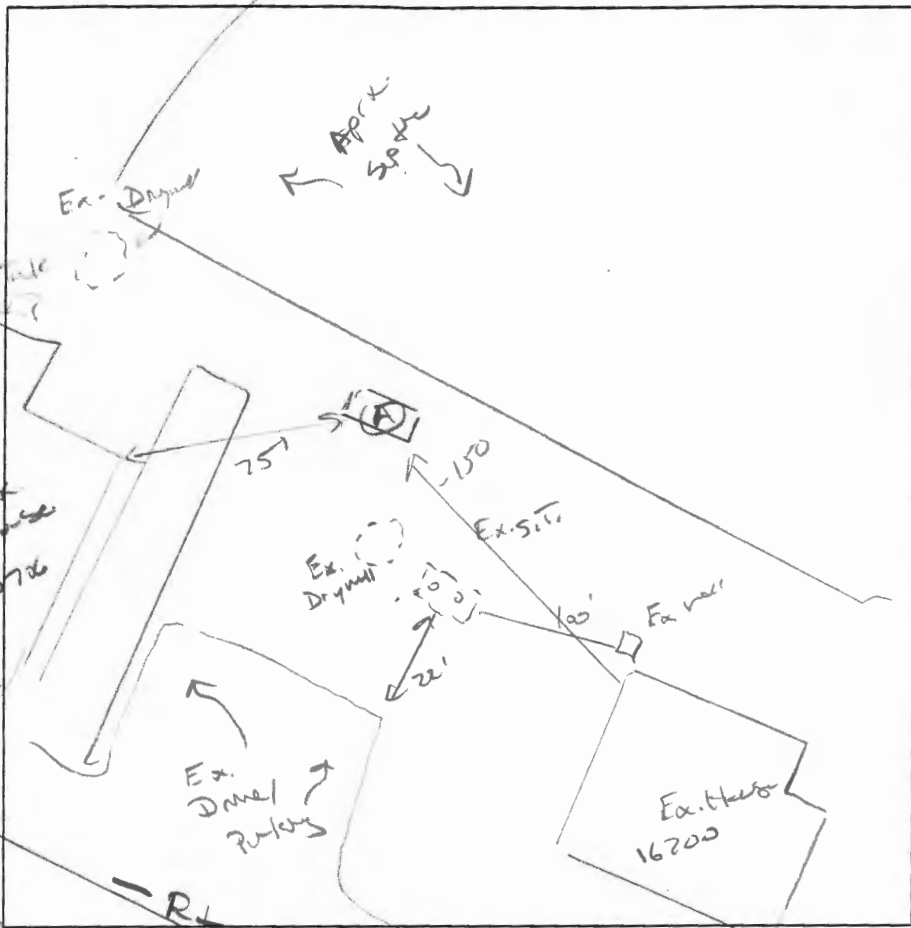
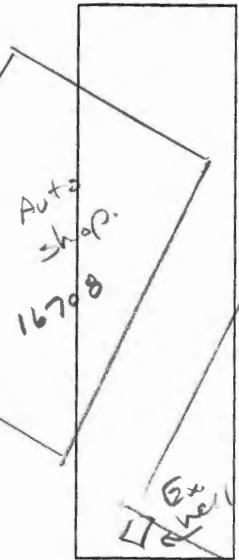
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Kenneth J. Whissel 3-2-2021
SIGNATURE OF APPLICANT DATE



Jack Azar
16700 Frederick Rd



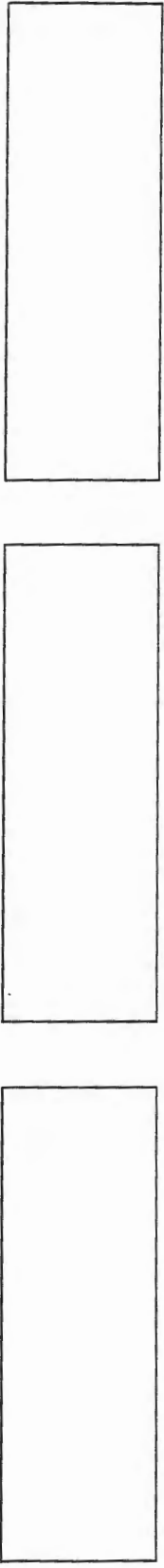
(A)
Dk Br L on roots, made fresh
11" Br cl wk Cosak Fresh h 10% shot
2'
9'
6'
Br/Y sil wk f pl. cl, roots Fresh h weathered shale 10% consistent
4'
weathered shale ~30%

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
3/30/21	(A)	6' HV	00:24	00:38	00:58	20	P
		H ₂ O percol @ 14'				~3mp	P

REMARKS 16706 is showing well + depth w/ 16708
 SANITARIAN K. Wolf BACKHOE Kenny Shuler OTHERS owner

TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH 3' INLET DEPTH 4' MAX. BOT DEPTH 10' EFFECTIVE SW 6-10' (.42)

$$33R = \frac{750}{0.6} = 750 \div 3 = 250 (.42) = \underline{\underline{105}}$$





FREDERICK RD

FREDERICK RD

FREDERICK RD

FREDERICK RD

FREDERICK RD

WATERSVILLE RD

WATERSVILLE RD

WATER

720

18706

18708

18700

922

710

wall

Wolf, Kevin

From: jackshandyman <jackshandyman@comcast.net>
Sent: Wednesday, March 17, 2021 11:20 PM
To: Wolf, Kevin
Cc: ken schissler
Subject: Re: 16700 Frederick Road

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

The system at the address 16700, single family on the corner.

No I dont have a well and septic site plan but I know where they are.

*- what are the 2 units
for 16706?
- own some new system?
- Area behind pool?*

Sent from my Galaxy

----- Original message -----

From: "Wolf, Kevin" <KWolf@howardcountymd.gov>
Date: 3/17/21 9:26 AM (GMT-05:00)
To: Jack Azat <jackshandyman@comcast.net>
Cc: ken schissler <schackhoe@comcast.net>
Subject: Re: 16700 Frederick Road

Jack,

Can you tell me which system is failing? I will proceed with setting up a perc test/site evaluation with Kenny. In the meantime, is there a site plan you can provide me that shows where the wells are and where the septic system components are?

Thanks,

Kevin M. Wolf, LEHS, REHS/RS
Groundwater Mgmt. Sec. Supervisor
Well & Septic Program
Howard County Health Department
8930 Stanford Blvd.
Columbia, MD 21045
410-313-2645 (Office)
410-313-2648 (Fax)
www.hchealth.org



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This message and the accompanying documents are intended only for the use of the individual or entity to which they are addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this email is not the intended recipient, you are hereby notified that you are strictly prohibited from reading, disseminating, distributing, or copying this communication. If you have received this email in error, please notify the sender immediately and destroy the original transmission.

From: Jack Azat <jackshandyman@comcast.net>
Sent: Tuesday, March 16, 2021 11:48 AM
To: Wolf, Kevin <KWolf@howardcountymd.gov>
Cc: ken schissler <scbackhoe@comcast.net>
Subject: Re: 16700 Frederick Road

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

Hi Kevin, I left you a voice office message to call me to discuss, please see the answers to the questions that you are asking in RED

Hello Jack,

Kenny and I spoke about your property on Frederick Road. I wanted to gather some information first before we process your application for site evaluation and perc testing. Can you please give me the details of each building on the referenced property? Please include the following:

- Which structure is being lived in. (Single family 16700 Frederick road and 16706 Frederick road is 2 units)
-
- Which structure is being used as a business (16708 Frederick Rd - Small automotive repair shop)
-
- The business structure, how many workers are there and how often (operating hours) (1 mechanic and 1 part time office worker - Hours are 9-5 at 5 days a week)
-
- How many bedrooms is the house on the property? (3 Bedrooms for the Single family) = 450000
-
- How many wells are on the property and which are connected to what buildings (2 wells - One well for 16700 Single family, One well for 16706 and 16708)
-
- How many septic systems are on the property and which buildings are connected to what. (2 Septic Systems - One for 16700 and One for 16706 and 16708)