



HOWARD COUNTY HEALTH DEPARTMENT

67927

P/S A/S

8/17/20 DATE

Received From

Freedom Septic

PHONE #

410 785-2947

Services

For

perc app/repair

7500 Greenwood Dr

CASH

CHECK

NO.

4819

Three hundred thirty

Dollars

\$ 330.00

Received By

J King

A567927

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

**APPLICATION
FOR PERCOLATION TESTING AND SITE EVALUATION**

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME _____
 PROPERTY ADDRESS 7500 Greenwood Dr Highland 20777
STREET TOWN ZIP
 TAX ACCOUNT # _____ TAX MAP 0040 GRID 0018 PARCEL 0158 LOT NO. 14 PROPOSED LOT SIZE (ACRES) _____
 ZONING CATEGORY _____ TIER _____

PROPERTY OWNER(S) Rick Sigurdson
 DAYTIME PHONE 443-285-3312 CELL _____ EMAIL Rsigurdson@hotmail.com
 MAILING ADDRESS _____

APPLICANT Freedom Septic RELATIONSHIP TO OWNER: Contractors
 DAYTIME PHONE 410-735-2947 CELL _____ EMAIL Christy@freedomseptic.com
 MAILING ADDRESS 2809 Liberty Rd Sykesville, MD 21784
STREET CITY, STATE ZIP

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

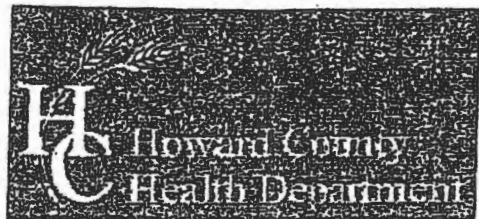
- PROPERTY:**
- SUBDIVISION: NUMBER OF LOTS INCLUDING RESIDUE: _____
 - SUBDIVISION CLASSIFICATION (PER DEPT. OF PLANNING AND ZONING) MAJOR MINOR
 - CONSTRUCT NEW OSDS ON UNDEVELOPED LOT
 - REPAIR OR REPLACE FAILING OSDS
 - UPGRADE EXISTING OSDS
- BUILDING:**
- RESIDENTIAL WITH _____ EXISTING OR PROPOSED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

SIGNATURE OF APPLICANT [Signature] DATE 8/4/20



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

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

P567924

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: Freedom Septic Contractor's Phone: 410-795-2947
Contractor's Address: 2809 Liberty Rd Sykesville, MO 21784

Property Address: 7500 Green Wood Dr Highland, MO County file:

Subdivision: Lot: Year Built:

Owner's Name: Vick Sigurdson Owner's Phone: 443-285-3317

Name of previous owners: Existing bedrooms:
Proposed bedrooms:

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

*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.

Wolf, Kevin

From: Wolf, Kevin
Sent: Monday, August 24, 2020 4:08 PM
To: rsigurdson@hotmail.com; Christy Sheubrooks
Cc: Freemon, Robert
Subject: 7500 Greenwood Drive

Mr. Sigurdson,

The Health Department was scheduled to perform a perc repair for a failing septic system last week. However, after further evaluation and in-depth discussion with you onsite, there was no evidence of septic failure at this time. Moreover, you went into explaining to me that you were not having any issues with your septic system but rather in need of information and evaluation concerning a possible detached garage addition. From my initial site assessment, i could not conclude where a possible replacement septic system could go and therefor, a percolation testing application would need to be submitted. The testing would accompany a plan showing the future replacement area followed by actual perc testing via the Health Department. From the testing, if soils prohibit, a percolation certification plan would be generated which ultimately defines your sewage disposal area. I strongly encourage you to seek a civil engineering firm who understands the process listed above for generating a percolation certification plan.

I would start with a site plan showing your proposal with what you are trying to build. A test plan application could go along with this from your engineer. The rest we will coordinate with your engineer for the review and testing phase. Let me know if you have any questions.

[http://hcnvhealthinfo.org/hcnvapp_2/index.php/file-search/11849-WS Greenwood 7500 PercApp-2009_05-359007?highlight=Wzc1MDBd](http://hcnvhealthinfo.org/hcnvapp_2/index.php/file-search/11849-WS_Greenwood_7500_PercApp-2009_05-359007?highlight=Wzc1MDBd)

WS_Greenwood_7500_PercApp-2009_05-359007

7500 Greenwood; Perc App-2009; 05 359007

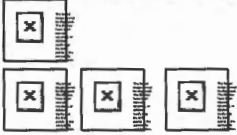
hcnvhealthinfo.org

[http://hcnvhealthinfo.org/hcnvapp_2/index.php/file-search/11850-WS Greenwood 7500 SepticPermit-2009_05-359007?highlight=Wzc1MDBd](http://hcnvhealthinfo.org/hcnvapp_2/index.php/file-search/11850-WS_Greenwood_7500_SepticPermit-2009_05-359007?highlight=Wzc1MDBd)

[http://hcnvhealthinfo.org/hcnvapp_2/index.php/file-search/11851-WS Greenwood 7500 Well-94-3701_05-359007?highlight=Wzc1MDBd](http://hcnvhealthinfo.org/hcnvapp_2/index.php/file-search/11851-WS_Greenwood_7500_Well-94-3701_05-359007?highlight=Wzc1MDBd)

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



kwolf@howardcountymd.gov

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