



Bureau of Environmental Health

2930 Stamford Boulevard, Columbia, MD 21045

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www.hchealth.org

Facebook: www.facebook.com/hchohealth

Twitter: HowardCoHealthDep

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

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME

PROPERTY ADDRESS

7009 Deer Valley Rd Highland 20777
STREET TOWN ZIP

TAX ACCOUNT #

342031

TAX MAP

40

GRID

2

PARCEL

202

LOT NO.

7

PROPOSED LOT

SIZE (ACRES)

2.541 Ac

ZONING CATEGORY

TIER

PROPERTY OWNER(S)

Sherry March

DAYTIME PHONE

240-463-0268

CELL

EMAIL

sherrymarch@verizon.net

MAILING ADDRESS

2009 Deer Valley Rd Highland 20777
STREET CITY, STATE ZIP

APPLICANT

Fogle's Septic Clean

RELATIONSHIP TO OWNER:

contractor

DAYTIME PHONE

410-795-5670

CELL

EMAIL

kim@foglesinc.com

MAILING ADDRESS

580 Obirett Rd Sykesville 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 5 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

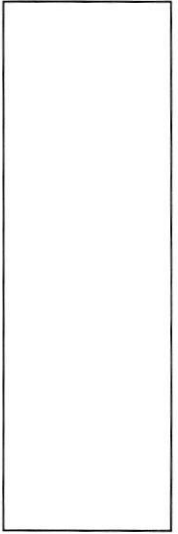
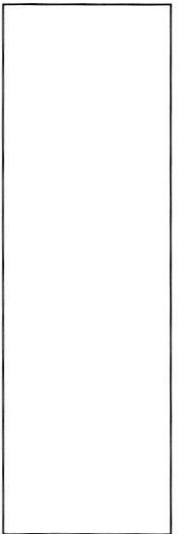
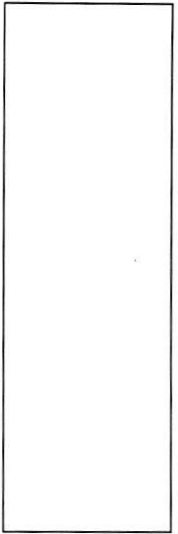
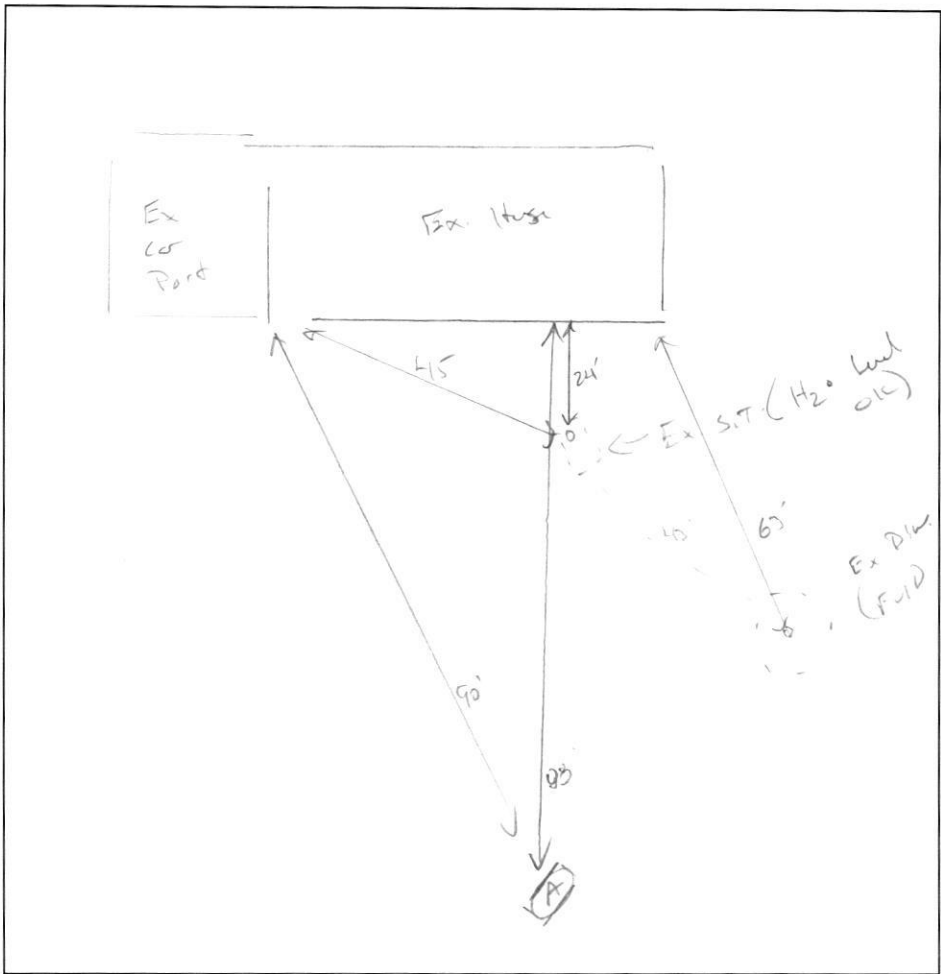
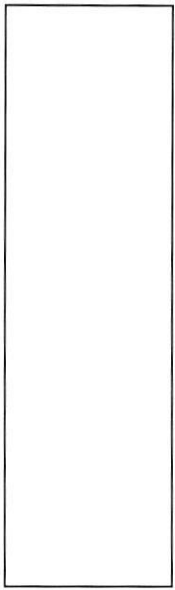
AS APPLICANT, I UNDERSTAND THE FOLLOWING:

- 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: Kim Fogles DATE: 8/1/22



(A)
 2' BR L, OM, roots
 WK SBLK
 1 1/2" BR L
 WK FDBK
 Frable
 4' 15% Rock
 BR 1/4 SL
 M to SOK
 Frable -
 roots
 mica
 15% mica
 6' 1 1/2" BR - BR 1/4
 SL
 WK FPL
 Highly micaous
 15'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
8/25/22	(A)	3' 10" / 15'	00:41	00:41:30	00:44	2 1/2	P
		5 3"	00:53	00:54	00:56	2	P
		rc-pwr	00:56	00:58	01:00	2	P

REMARKS _____

SANITARIAN K. Wolf BACKHOE milg OTHERS _____

TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR 1.2

TRENCH WIDTH 3' INLET DEPTH 3.5' MAX. BOT DEPTH 6.5' EFFECTIVE SW 1.5 (3')

5 BR = $\frac{150}{12} = 12.5 \div 3 = 208 (.50) = 104$

HOME LAND

ENVIRONMENTAL

p:443-995-5385 | info@homelandhealthyhomes.com | www.homelandhealthyhomes.com

Date: July 5, 2022 Name of Evaluator: David Vincent Time: 8:00 AM Property Address: 7009 Deer Valley Road Highland, MD 20777 Recent Weather Conditions: Normal	Ordered By: Sherry March Buyers: Sherry March Homeowner Interview: The homeowner interview was sent but was not received prior to the evaluation.	Occupied: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Length of Time Vacant: Unknown # of People Living in Home: N/A # of People moving in: Not Moving Property Age: 1964 System Age: Unknown Last Date of Cleaning: Unknown Recomm'd Pumping Freq: 2-3 Years
Liquid level in tank is: <input type="checkbox"/> Above Normal <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Below Normal		Bottom Solids Depth: 12 Inches
Depth of tank: 26 Inches	Type of Tank Access: 8" Cleanout	Depth of tank access: At Grade
Maintenance appears: <input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor		Depth to Distribution Box: N/A
Effluent Filter present: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Previous high liquid level: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Distance to well: -100 Feet
Records Search: Records were requested but were not received from Howard County prior to the evaluation.		
Were there any impermeable surfaces above the septic system (i.e. driveway)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Type of Tank	Tank Composition and Size	Type of Absorption System
<input checked="" type="checkbox"/> Septic Tank <input type="checkbox"/> Aeration System <input type="checkbox"/> Other:	<input type="checkbox"/> Metal <input checked="" type="checkbox"/> Concrete <input type="checkbox"/> Plastic Tank Size: 1,000 Gallons	<input type="checkbox"/> Leaching Field <input type="checkbox"/> Raised Mound <input checked="" type="checkbox"/> Drywell (Number of: 1) <input type="checkbox"/> Cesspool <input type="checkbox"/> Unknown:
System Component	Condition	Comments
Septic Tank	<input type="checkbox"/> Acceptable <input checked="" type="checkbox"/> Unacceptable <input type="checkbox"/> Needs Further Evaluation	The septic tank is composed of concrete and has a capacity of approximately 1,000 gallons. Access to the tank consists of an 8" terracotta cleanout to grade over the front end of the tank; the tank is 26" below grade. It is recommended that a riser to grade be installed to facilitate future maintenance of the system. The terracotta back baffle was found to be broken upon arrival; the baffle will need to be replaced by a licensed contractor. There are currently 12" of solids as well as foreign objects in the tank, indicating the tank is due to be cleaned. There is what appears to be minor root intrusion in the back line just after the septic tank; the roots will need to be removed by a licensed contractor. Please see camera inspection report for more information.
Absorption System	<input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable <input checked="" type="checkbox"/> Needs Further Evaluation	One drywell was located during the evaluation; the drywell has access at grade consisting of a 6" PVC cleanout. The drywell was found to have approximately 9 feet of total liquid depth, with approximately 1 foot of liquid depth remaining. A hydraulic load test was unable to be performed due to the house not having running water at the time of the inspection. Due to the age and condition of the system, buyers should budget for future repairs. The absorption system may need to be replaced at this time. Please see camera inspection report for more information.

APPLICATION

SEWAGE DISPOSAL TESTING

A 09210

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 10/15/64

*Dry well 10 ft. in dia. by 10 ft. deep below
the inlet located 193 ft. from the front
property line and 81 ft. from the left side
property line as seen when facing the lot from
Deer Valley road. Locate inlet 4 FT. below original
grade.*

750 gal. septic tank.

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 Earl Kruhm

ADDRESS Littleton St., Wheaton, Maryland PHONE _____

PROPERTY LOCATION:

SUBDIVISION Gissel Farms LOT NO. 7

ROAD AND DESCRIPTION Deer Valley Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 2.54 acres TYPE BLDG. 3
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT *Russell J. Mainick*

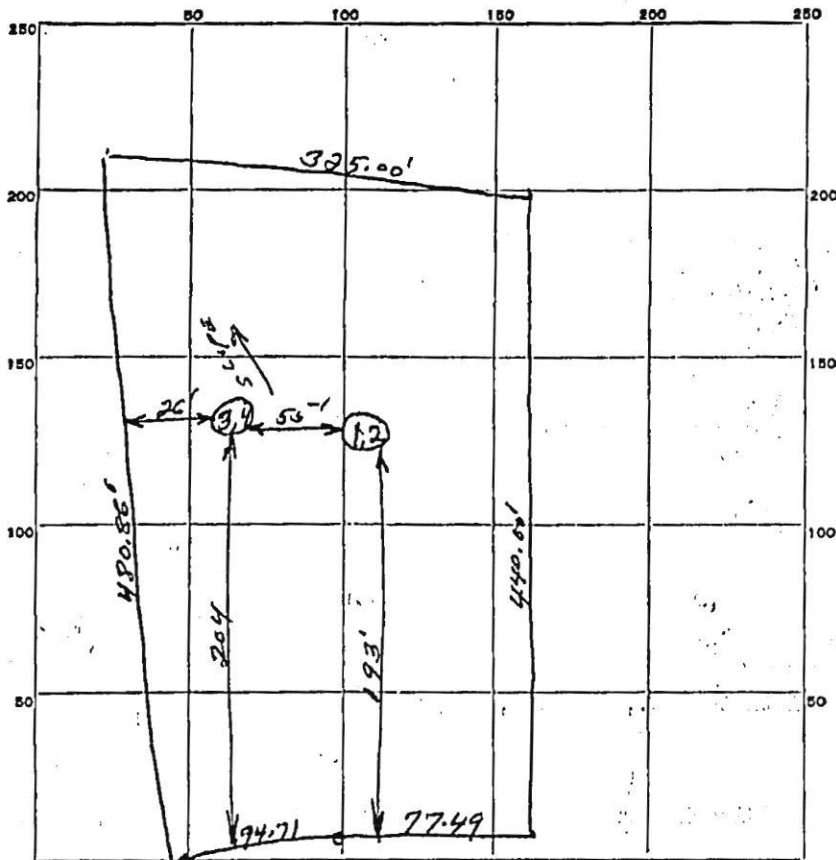
APPROVED BY *E. Hennigan* FOR *Dry Well* DATE 10-28-64
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. NAME ADJOINING ROADWAY AS BASE LINE.

DEER VALLEY ROAD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10-28-64	1	12'	10:22	10:25	10:25	10:34	9 Min
	2	5	10:24	10:25	10:25	10:28	3 Min
	3	9	10:40	10:41	10:41	10:43	2 Min
	4	4 1/2	10:41	10:43	10:43	10:46	3 Min

SOIL AUGER FINDING _____

TESTED BY JH

REMARKS

Good soil starts 4 FT below original grade below 1 + 2

ALSO PRESENT

Carroll C. Casel

LOT NO. 1