

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

1587828

**APPLICATION  
 FOR PERCOLATION TESTING AND SITE EVALUATION**

**PROPERTY LOCATION**

SUBDIVISION/PROPERTY NAME \_\_\_\_\_  
 PROPERTY ADDRESS 7553 Greenwood Dr Highland, MD  
STREET TOWN ZIP  
 TAX ACCOUNT # \_\_\_\_\_ TAX MAP 0040 GRID 0018 PARCEL 015B LOT NO. 5 PROPOSED LOT SIZE (ACRES) 1.0100  
 ZONING CATEGORY \_\_\_\_\_ TIER \_\_\_\_\_

**PROPERTY OWNER(S)** Mark Tucker  
 DAYTIME PHONE 410.531.2835 CELL \_\_\_\_\_ EMAIL markleo.tucker@gmail.com  
 MAILING ADDRESS 7553 Greenwood Dr Highland MD  
STREET CITY, STATE ZIP

**APPLICANT** Freedom Septic Services RELATIONSHIP TO OWNER: \_\_\_\_\_  
 DAYTIME PHONE 410.785.2847 CELL \_\_\_\_\_ EMAIL \_\_\_\_\_  
 MAILING ADDRESS Christy @freedomseptic.com  
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 Dana Bryant DATE 12/10/14



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**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

**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 Regulations.

Septic Contractor: Freedom Septic Service Contractor's Phone: 410.795.2947  
 Contractor's Address: 2809 Liberty Rd Sykesville, MD 21784  
 Property Address: 7553 Greenwood Dr County File: \_\_\_\_\_  
 Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Owner's Name: Mark Tucker Existing bedrooms: 4  
 Name of previous owners: \_\_\_\_\_ Existing bedrooms: \_\_\_\_\_  
 Proposed bedrooms: \_\_\_\_\_

\*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 \_\_\_\_\_

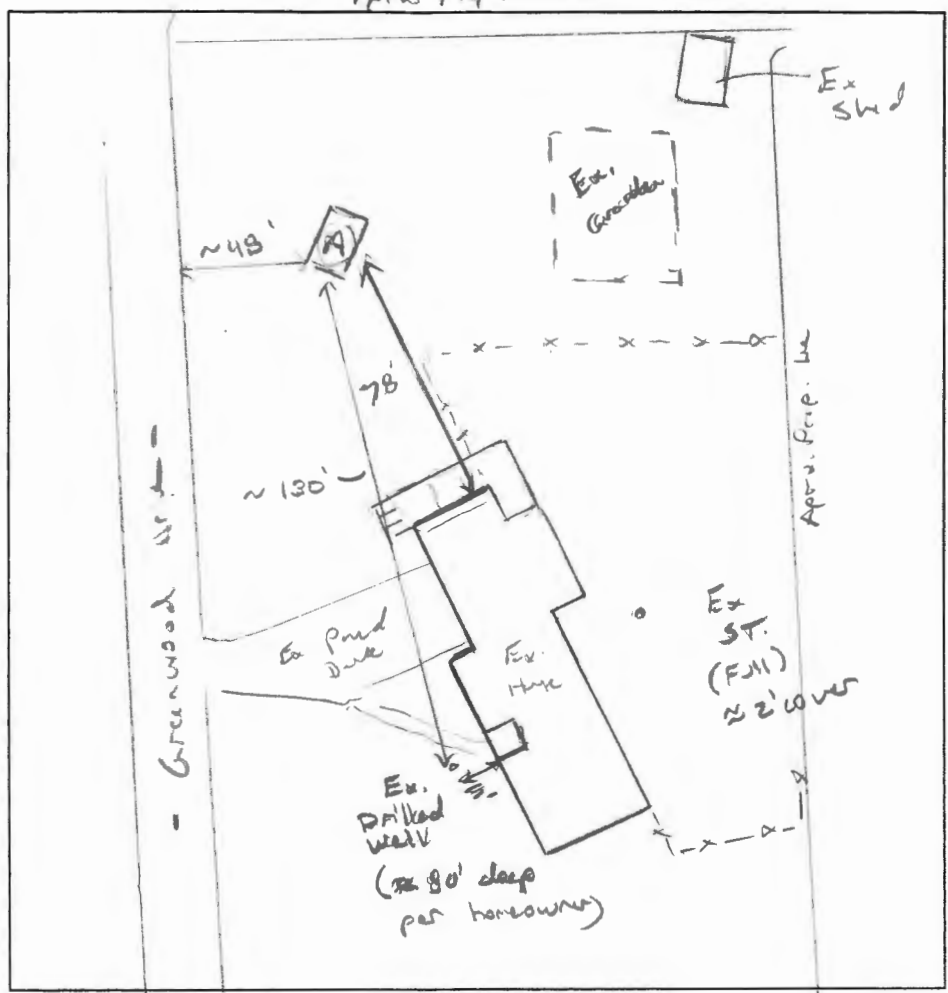
If soil/site conditions are limited and sewer and/or Metro District status is not conducive to connection, the Sanitarian may recommend pursuit of Emergency Sewer Extension or Emergency Metro District Inclusion. The Owner should contact the Bureau of Utilities for details.

No permit is to be issued nor inspection to be scheduled without prior fee collection at the office unless an emergency exists.

The contractor is to notify the office of the emergency as soon as possible.

2/2020

2024  
health



- 2' (A)  
Drill Article  
M/G SAK,  
Fibre  
1.0r S/L  
M/G SAK  
Std 4.1 cu  
5% ch...  
4' 1.0r S/L  
W/G S/L  
F. lde,  
10% ch...  
9' Dr 14 FSL  
W/G S/L  
F. lde  
13' mca  
F. lde  
14' H2O sep.

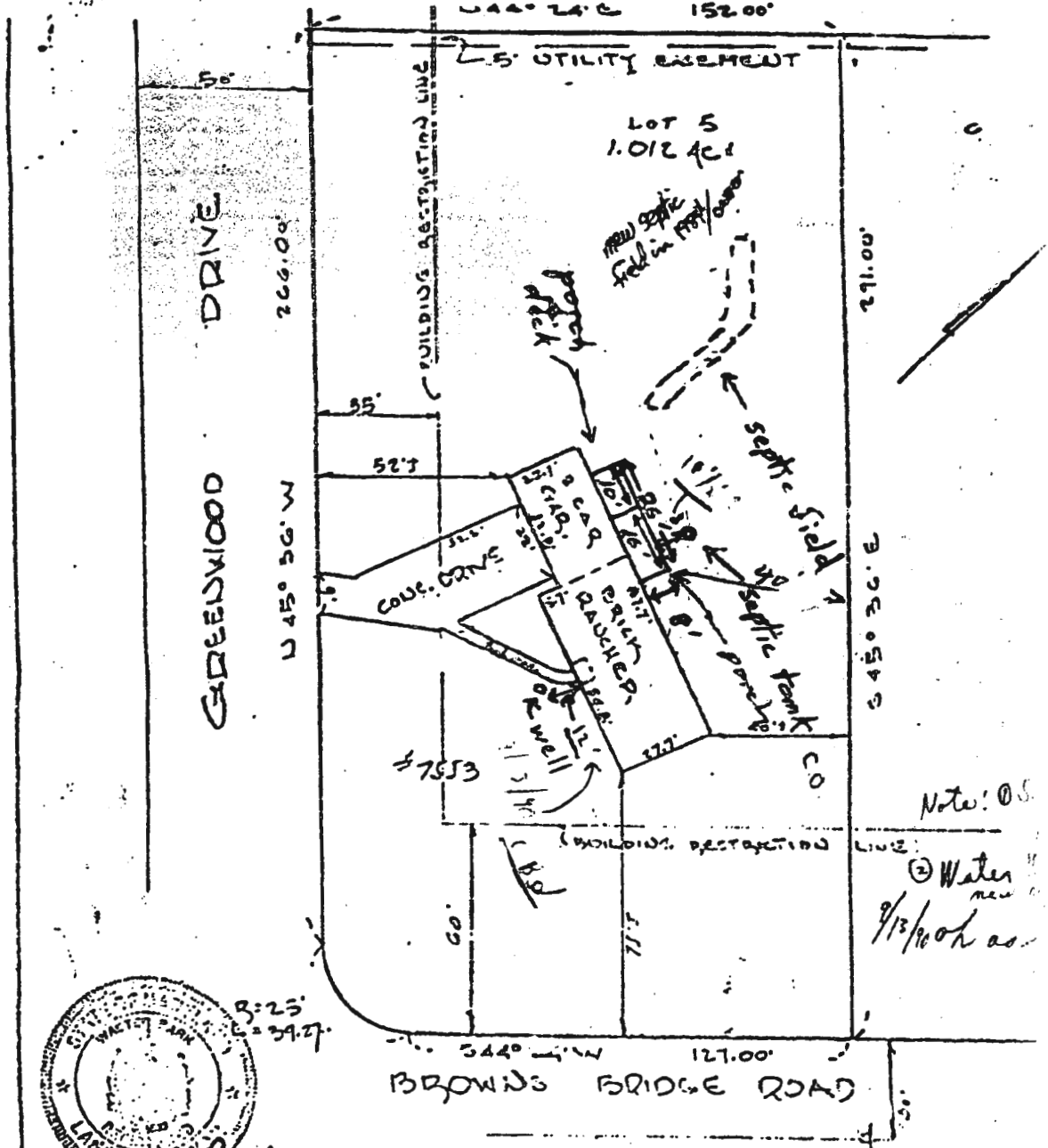
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
1/14/2025				Draws Bridge			
	(A)	3' 8" 14'	00:50			Pull	F
		7'	00:54	00:56	00:59	3	P

REMARKS Ex bed full. No surface discharge  
 SANITARIAN K. Wolf BACKHOE Don Ferron OTHERS Huber

TEST HOLES USED IN SDA 1 AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR 1.25 gal / 80  
 TRENCH WIDTH 3 INLET DEPTH 2' MAX. BOT DEPTH 7 EFFECTIVE SW 4-7 (50)

$$4.00 = \frac{600}{1.2} = 500 \div 3 = 167 \times 50 = 8425, \text{ or } 2' \text{ wide}$$

$$= 110 \text{ LF}$$



*Walter Park*

I HEREBY CERTIFY THAT I HAVE LOCATED THE IMPROVEMENTS AS SHOWN.

WALTER PARK REG. L.S. #5539  
 SURVEYING ASSOCIATES  
 231 JOSEPH SQUARE  
 COLUMBIA, Md 21044

LOCATION SURVEY

Lot 5 Map of Greenwood Farms  
 Section 1 Plat Book 5 Folio 25  
 5th Election District Howard County  
 Scale 1"=40' January 9 1976

# APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 6

DATE 6/23/60

Builder: Jattree & Levy  
750 Gallon Tank - 16-3241

Leaching Bed - 4-750 ft bottom area depth  
3 ft to 5 ft Place the bed about

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

90 ft to 115 ft from the edge  
of Greenwood Lane and  
about 190 to 220 ft  
from the edge  
of Bridge Road

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

PROPERTY OWNER John A. Henkle  
ADDRESS \_\_\_\_\_

PROPERTY LOCATION: Greenwood Farms  
SUBDIVISION \_\_\_\_\_ LOT NO. 5

ROAD AND DESCRIPTION: corner Brown Bridge & Greenwood  
owner) Mr. 89 Sara Lutzbacher 7553 G.D.

OCCUPANT \_\_\_\_\_ PHONE \_\_\_\_\_

PERSON TO CONSTRUCT SYSTEM \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SIZE OF LOT 1 acre TYPE BLDG. 3 NUMBER OF SECTIONS \_\_\_\_\_

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

SIGNATURE OF APPLICANT Raymond Hodges

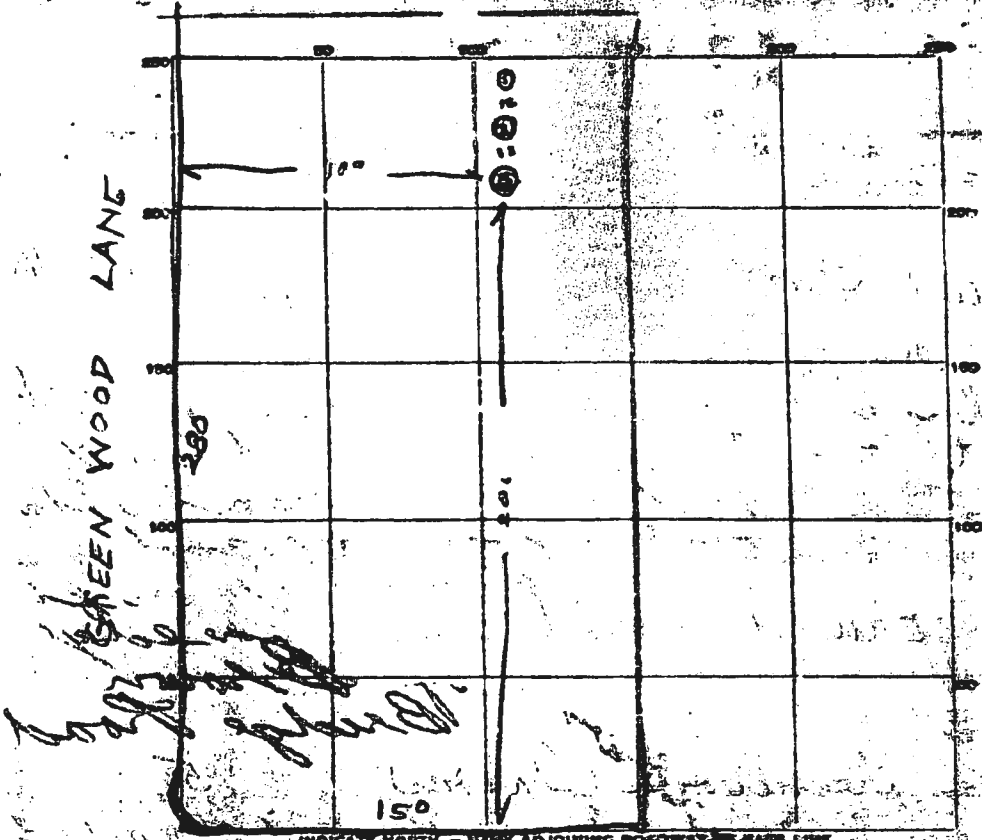
APPROVED BY Raymond Hodges FOR Leaching Bed DATE 6/20/60

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

## THIS IS NOT A PERMIT

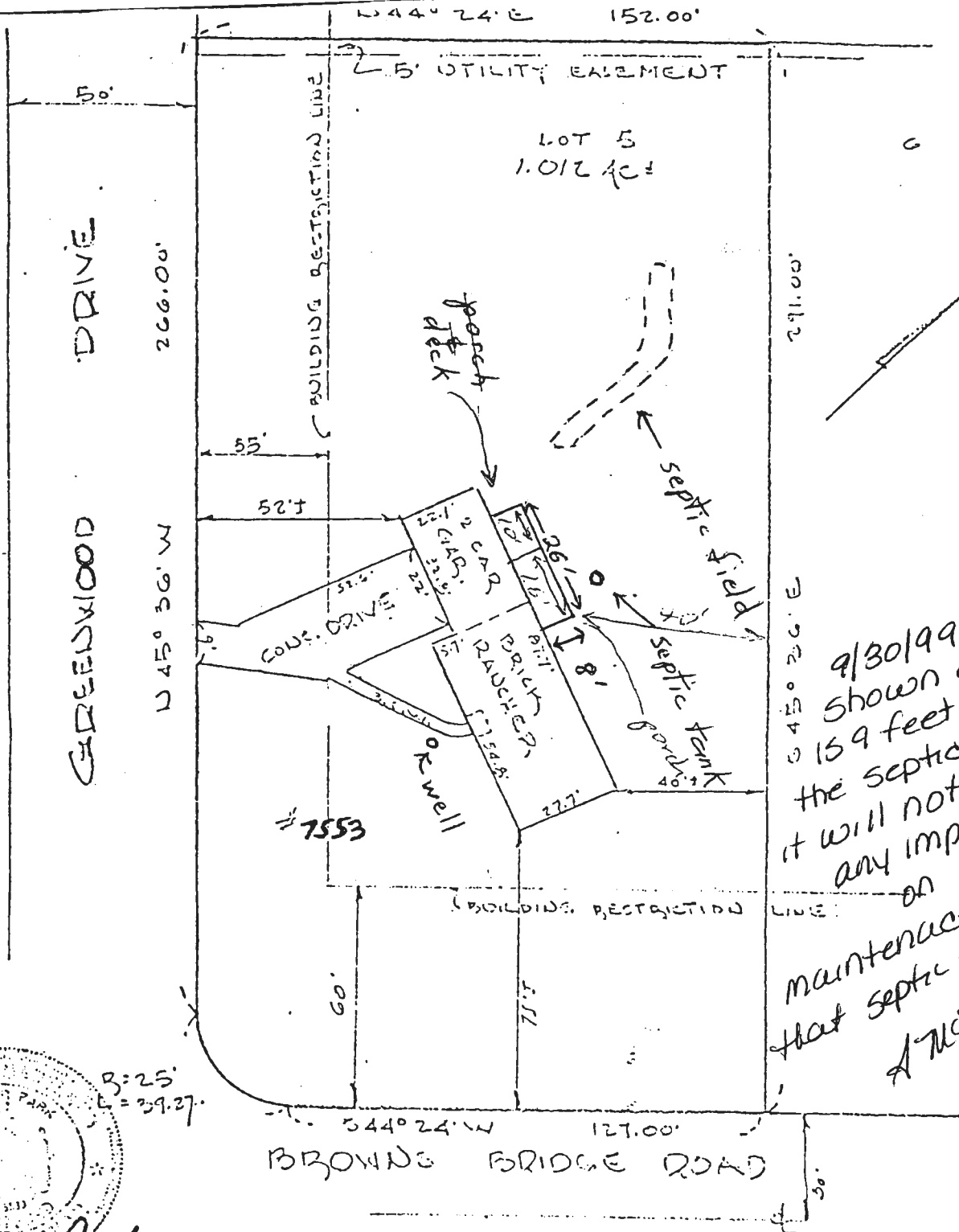


INDICATE NORTH - EDGE ADJOINING ROADWAY OR SADE LINE.

**BROWN BRIDGE RD.**

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/28/60	1	4	134	140	140	149	8 min
	2	5 1/2	136	146	146	150	7 min
	3	4	137	147	147	151	2 min

SOIL AUGER FINDING \_\_\_\_\_  
 TESTED BY Raymond Hodges  
 REMARKS Underground water at 4 ft near area to test  
 ALSO PRESENT [Signature] LOT NO. 5



9/30/99  
 shown deck  
 is 9 feet from  
 the septic tank  
 it will not have  
 any impact  
 on  
 maintenance of  
 that septic tank  
 A McMillen



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