



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 2004  
 PROPERTY ADDRESS 3589 Folly Quarter Rd Elliott City 21042  
STREET TOWN ZIP  
 TAX ACCOUNT # 305325 TAX MAP 0023 GRID 0009 PARCEL 0115 LOT NO. 3 LOT SIZE (ACRES) .980  
 ZONING CATEGORY \_\_\_\_\_ TIER \_\_\_\_\_

PROPERTY OWNER(S) Jeffrey Haier  
 DAYTIME PHONE (443) 956-7013 CELL \_\_\_\_\_ EMAIL jjh@gdlaw.com  
 MAILING ADDRESS 3589 Folly Quarter Rd Elliott City MD 21042  
STREET CITY, STATE ZIP

APPLICANT Jet Septic Inc. RELATIONSHIP TO OWNER: \_\_\_\_\_  
 DAYTIME PHONE (410) 875-2311 CELL \_\_\_\_\_ EMAIL jetseptic23@gmail.com  
 MAILING ADDRESS 440 Bear Branch Rd Westminster MD 21157  
STREET CITY, STATE ZIP

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

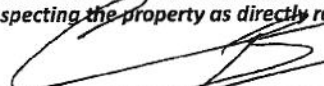
- PROPERTY:
- SUBDIVISION: TOTAL NUMBER OF BUILDABLE LOTS ON PLAT: \_\_\_\_\_  
 SUBDIVISION CLASSIFICATION (PER DEPT. OF PLANNING AND ZONING)  MAJOR  MINOR
  - CONSTRUCT NEW OSDS ON UNDEVELOPED LOT
  - UPGRADE EXISTING OSDS FOR BUILDING PERMIT BUILDING PERMIT NUMBER: \_\_\_\_\_
  - REPAIR OR REPLACE FAILING OSDS
- BUILDING:
- RESIDENTIAL WITH 6 EXISTING OR PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE
  - COMMERCIAL (PROVIDE DETAIL OF TYPE OF USE/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

7/17/25  
 \_\_\_\_\_  
DATE

JW 7/17/2024



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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

**Has the septic tank been pumped within the last month?**

Yes      Date pumped: 7/3/25  
 No

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

Yes      Explain observation: Drywell full  
 No

**Existing system design**

- Drywell
- Trench
- Mound
- Unknown
- Other: \_\_\_\_\_

**Was a visual inspection of the sewage line conducted?**

Yes  
 No

**Blockage Leading to the field**

Yes      Explain \_\_\_\_\_  
 No

**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: Jet Septic Inc      Contractor's Phone: 410-875-2311  
 Contractor's Address: 440 Bear Branch Rd Westminster MD 21157  
 Property Address: 3589 Folly Quarter Rd      County File: \_\_\_\_\_  
 Subdivision: 2004      Lot: 3      Year Built: 1979  
 Owner's Name: Jeffrey Hines      Existing bedrooms: 6  
 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

[View Map](#)

No Ground Rent Redemption on File

No Ground Rent Registration on File

Special Tax Recapture: None

Account Number: District - 03 Account Identifier - 305325

**Owner Information**

Owner Name: HINES JEFFREY J Use: RESIDENTIAL  
 HEINRICH AMY B Principal Residence: YES  
 Mailing Address: 3589 FOLLY QUARTER RD Deed Reference: /03287/ 00684  
 ELLICOTT CITY MD 21042-1407

**Location & Structure Information**

Premises Address: 3589 FOLLY QUARTER RD Legal Description: LOT3 .980AR  
 ELLICOTT CITY 21042-1407 3589 FOLLY QUARTER RD  
 CAMERON TRACT

Map:	Grid:	Parcel:	Neighborhood:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0023	0009	0115	3020204.14	2004			3	2025	
									Plat Ref:

Town: None

Primary Structure Built	Above Grade Living Area	Finished Basement Area	Property Land Area	County Use
1979	2,932 SF	700 SF	42,688 SF	

Stories	Basement	Type	Exterior	Quality	Full/Half Bath	Garage	Last Notice of Major Improvements
2	YES	STANDARD UNIT	FRAME/	6	2 full/ 1 half	1 Attached	

**Value Information**

	Base Value	Value	Phase-In Assessments	
			As of	As of
Land:	220,800	360,800	07/01/2024	07/01/2025
Improvements	438,300	543,000		
Total:	659,100	903,800	659,100	740,667
Preferential Land:	0	0		

**Transfer Information**

Seller:	Date:	Price:
MELE EUGENE JR	06/28/1994	\$290,000
Type: ARMS LENGTH IMPROVED	Deed1: /03287/ 00684	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:

**Exemption Information**

Partial Exempt Assessments:	Class	07/01/2024	07/01/2025
County:	000	0.00	
State:	000	0.00	
Municipal:	000	0.00 0.00	0.00 0.00

Special Tax Recapture: None

**Homestead Application Information**

Homestead Application Status: Approved 04/04/2011

**Homeowners' Tax Credit Application Information**

Homeowners' Tax Credit Application Status: No Application Date:

**RECEIPT**

Howard County, MD  
HOWARD COUNTY HEALTH DEPARTMENT  
ASCEND ONE BUILDING  
Columbia, MD 21045  
8930 STANFORD BLVD

**Application:** WS-PT-RP-25-00012  
**Application Type:** EnvHealth/Well and Septic/Percolation Test/Repair Application  
**Address:** 3589 FOLLY QUARTER RD, Ellicott City, 21042

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Receipt No.	13141					
Payment Method	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
Credit Card		\$265.00	07/17/2025	PUBLICUSER599111		

**Owner Info.:** HINES JEFFREY J  
3589 FOLLY QUARTER RD  
ELLCOTT CITY, MD 21042

**Work Description:** 3589 FOLLY QUARTER RD Ellicott City 21042

