4:30
4/16/97

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 58088-A
A Repair

DISTRICT

DATE 4/17/97

HOWARD COUNTY HEALTH DEPARTMENT #21504?
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE SYSTEM APPROVED 4/18/97

INSPECTOR

Jenkins Brothers IS PERMITTED TO INSTALL ____ ALTER ____

ADDRESS ____ PHONE ____

SUBDIVISION ____ LOT ____ ROAD 3551 Sylvan Lane

PROPERTY OWNER Wayne Harris

ADDRESS 3551 Sylvan Lane

SEPTIC TANK CAPACITY EX. 1000 GALLONS

NUMBER OF BEDROOMS 3

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED ____

LEACH BED 15' x 20' ALONG EDGE OF EX. DRIVEWAY
INV 3' BOT 8'; REPLACE LINE HOUSE TO S.T.
MR 4/16/97

PLANS APROVED BY ____ DATE ____

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° **ELBOWS** NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

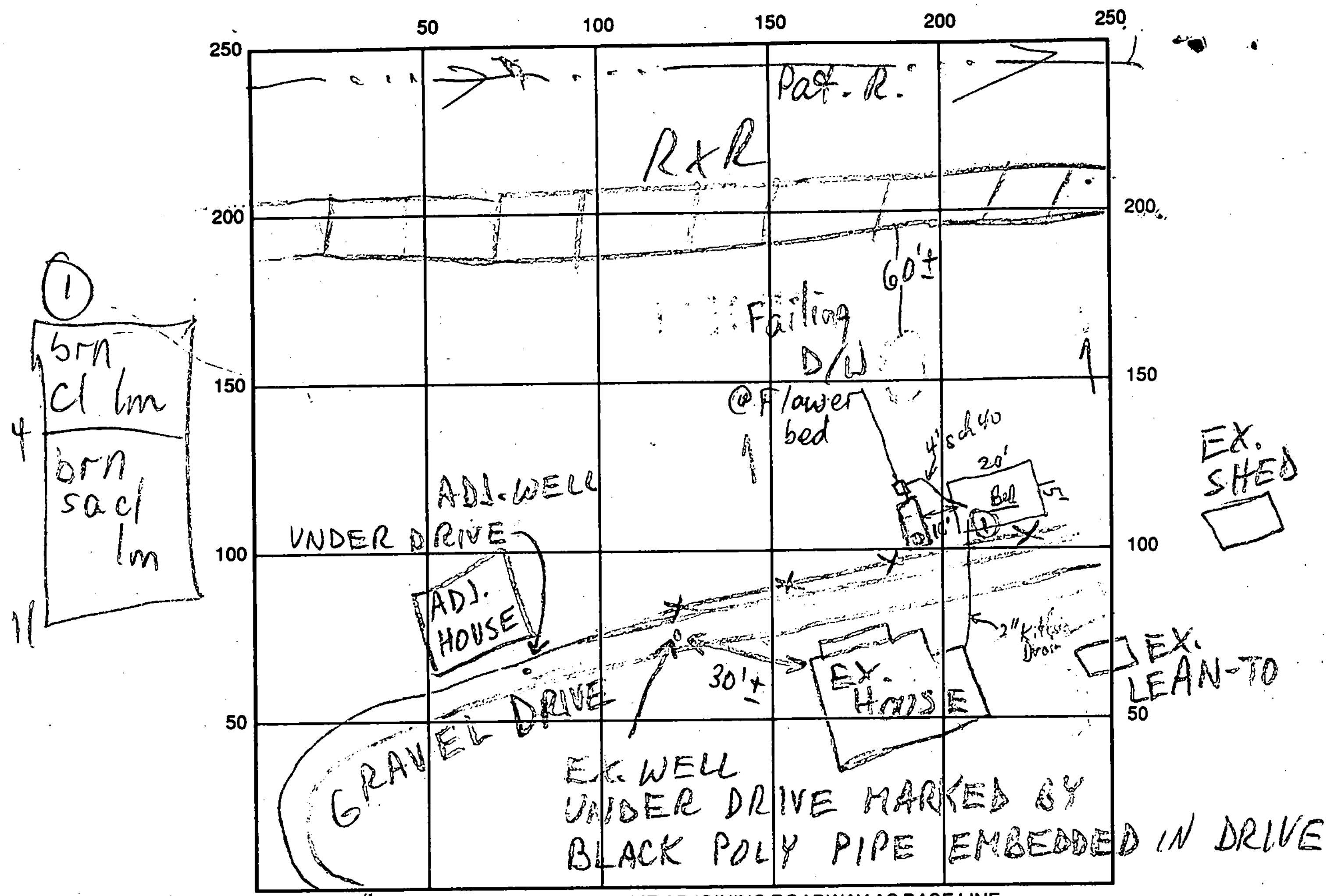
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

HD-260(6-90)

AP 58088A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SYLVAN LA

SEPTIC TANK LEVEL EX 1000 GAL   CLEANOUTS EX-OK

DISTRIBUTION BOX LEVEL OK (dial a flow set higher bias to old dr. wl.)

Leach Bed ~~DRAIN~~ FIELD/TITLE DEPTH 8½ (at down slope end) FT.   Bed ~~TRENCH~~ WIDTH 15'x20' FT.   INLET DEPTH 3½ FT.

EFFECTIVE GRAVEL DEPTH 5 FT.   ~~TOTAL LENGTH~~ NA FT.

NUMBER OF TRENCHES one bed   ONE SIDEWALL/BOTTOM AREA 350 SQ. FT. (Sidewalls) vs 300 Bottom

DRYWALL INSIDE DIAMETER 15'x20' FT.   EFFECTIVE DEPTH BELOW INLET 5 FT.

ABSORBENT AREA 350 SQ. FT.

REMARKS: 4/16/97 LIMITED AREA, OK FOR LEACHING BED; EX. D/W TO BE MAINTAINED; JENKINS REQUESTED PERMISSION FOR SATURDAY INSTALLATION; I INDICATED FRI WOULD BE APPRECIATED, BUT SAT OK IF NEC. (OWNER TO PHOTOGRAPH) MR

Open Bed (Seepage Pit?) good Loamy - Sandy loamy Soils - 8½ ft deep on downslope side (10 ft deep on uphill side) - Bed is installed thru old 1000 gal St. (New cleanout pipe) and New Dist. Box - old Drywell connected but dial-a-flow favors New bed!

DATE SYSTEM APPROVED 4/18/97   INSPECTOR [signature]

HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

March 6, 2000

Dwayne and Sandra Harris
3551 Sylvan Lane
Ellicott City, MD 21043

RE: **NOTICE OF VIOLATION**
3551 Sylvan Lane
Tax Map 25, Parcel 243

Dear Mr. & Mrs. Harris:

On March 1, 2000, Mark Rifkin and Brian Baker, sanitarians from this office, conducted an inspection at your property at the referenced address in response to a report of an overflowing septic system. On that date, Mssrs. Rifkin and Baker observed an actively-discharging PVC pipe about 200 feet from the dwelling and about twenty feet from the adjacent railroad tracks.

This condition is in violation of Section 12.110 of the Howard County Code.

As the sewage discharge creates a condition which is, or may be, hazardous to the public health you are hereby ordered to effect repairs within fifteen (15) days of receipt of this letter. If the installation of a septic tank or drainfields is necessary, then you must also apply to this office for a septic system repair permit, the fee for which is $25.00. **You must immediately (within 48 hours) provide documentation to this office that the septic tank contents have been pumped by a licensed sewage scavenger. Until repairs are completed, you must continue pumping, as often as necessary, to prevent future sewage overflows.**

If you believe that the condition described above is not and could not be a hazard to health, or that the Health Department is not acting in compliance with pertinent laws and regulations, you may request a formal hearing before the Board of Health within ten (10) days of receipt of this letter. If you wish to discuss the evidence, the regulations, or your individual circumstances, you are encouraged to request a meeting with us by calling (410) 313-2640 and scheduling an appointment.

The investigation of this complaint and the enforcement powers of the Health Department are set forth in Section 12 of the Howard County Code, a copy of which is available for your investigation at this office.

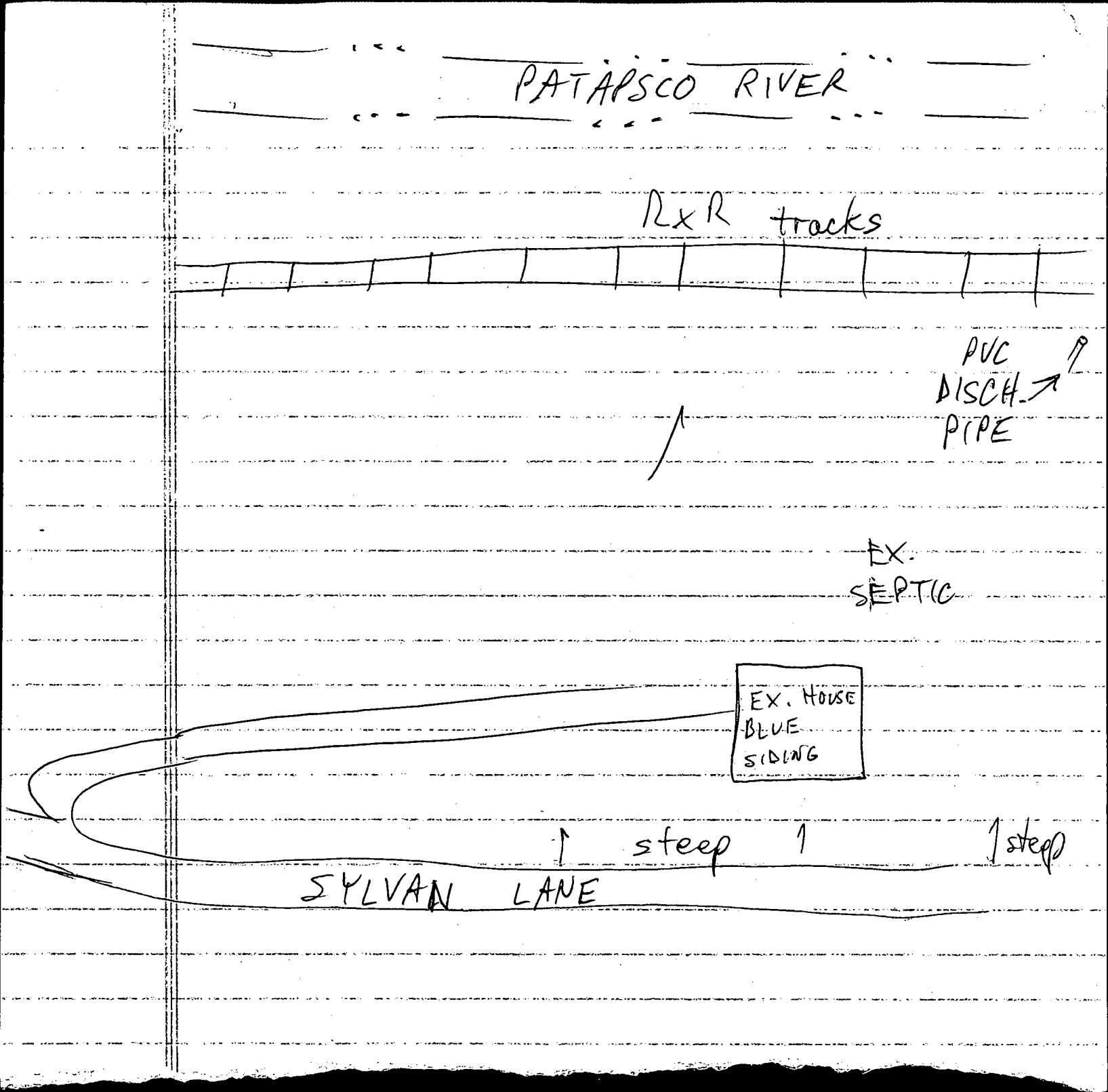
If you have any questions, please contact me at (410) 313-2640.

Very truly yours,

Mark E. Rifkin

Mark E. Rifkin, R.S.
Water & Sewerage Program

MR
cc: File


PATAPSCO RIVER
RxR tracks
PVC
DISCH.
PIPE
EX.
SEPTIC
EX. HOUSE
BLUE
SIDING
steep
steep
SYLVAN LANE

REGION _____ AREA _____ RATING _____

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health

BUREAU OF ENVIRONMENTAL HEALTH

RECORD OF INVESTIGATION

DISPOSITION	DATE

LOCATION 3551 Sylvan Lane ZIP _____

OWNER ☐ OCCUPANT ☐ Dwayne + Sandra Harris ADDRESS same PHONE 410 465-2285

COMPLAINANT Monte Gutstafson ADDRESS _____ PHONE 410-230-4560 x2021

REASON FOR INVESTIGATION sewage discharge visible from RxR tracks ~¼ mi N of Main St. EC; look for one of the first two houses visible (either blue or cream colored) CODES _____

RECEIVED BY DKS DATE 2/29/00 ASSIGNED TO MR/BB DATE 3/1/00

DATE OF INVESTIGATION 3/1/00 TIME 10:30 WEATHER mild cloudy

REPORT MET OWNER @ SITE; PVC DISCHARGE PIPE OBSERVED ~200' FROM HOUSE, ACTIVE DISCHARGE; OWNER REPORTS REPAIR 3 YRS AGO, BUT DOES NOT QUESTION LIABILITY SINCE OBVIOUS LAUNDRY WATER W/SUDS (~15 GAL - 20 GAL) DISCHARGED IN OUR PRESENCE W/OWNER'S ADMISSION OF ACTIVE WASHING MACHINE; I ADVISED HER OF PENDING LETTER, POTENTIAL IMPACTS TO A DRAINFIELD OF LIMITED SIZE IN RESTRICTED (SOIL ROCKY, SLOPE, LOT SIZE) CONDITIONS (MR)

3/8/00 T/C FROM OWNER: REPAIRS TO BE STARTED SOON (MR)

3/16/00 OWNER REPORTS REPAIRS COMPLETE, BUT PIPE TO REMAIN TO HANDLE EXCESS FLOW FROM NEARBY WELL/SPRING; INSP SCHED. TO VERIFY REPAIR (MR)

3/10 - 3/15/00 DATE UNCERTAIN - REPAIR OK FILE CLOSED. (MR)

DATE SUBMITTED _____ SANITARIAN _____

HD-172

REGION _____ AREA _____ RATING _____

ACKNOWLEDGMENT AND CONTROLS	DATE

Howard County Department of Health

BUREAU OF ENVIRONMENTAL HEALTH

RECORD OF INVESTIGATION

DISPOSITION	DATE

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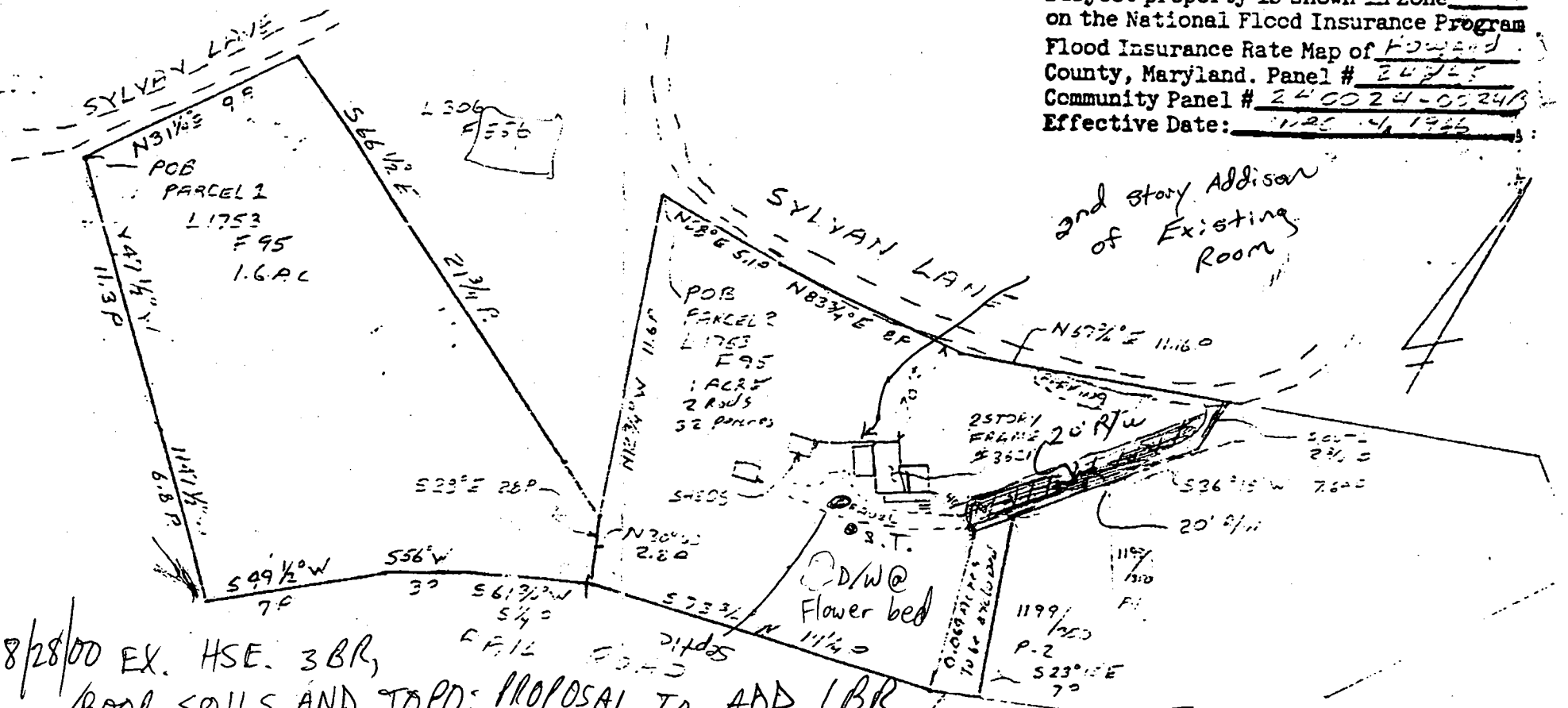
3/10 - 3/15/00 DATE UNCERTAIN - REPAIR OK FILE CLOSED (MR)

DATE SUBMITTED _____ SANITARIAN _____

HD-172

EXHIBIT "A"

Subject property is shown in Zone C
on the National Flood Insurance Program
Flood Insurance Rate Map of Howard
County, Maryland. Panel # 24925
Community Panel # 240024-0024B
Effective Date: 11/25/1985



8/28/00 EX. HSE. 3BR, w/POOR SOILS, AND TOPO; PROPOSAL TO ADD 1BR T/C to owner requesting excavation of lid of ex. d/w to determine size & capacity (MR)

9/11/00 D/W ACCESSED, H_2O LEVEL ~5' BELOW LID @ GRADE

OK TO SIGN (MR)

PUB SEWER EXPECTED 1-2 YRS?

PORTION OF Parcel 2 TO BE conveyed TO SUE HALL

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.

STATE OF MARYLAND
JAMES C. HUDGINS
No. 96
REGISTERED
PROPERTY LINE SURVEYOR

J. Carl Hudgins PLS#96

LOCATION SURVEY

3621 SYLVAN LANE
2ND ELECTION DISTRICT
HOWARD COUNTY MD

NTT ASSOCIATES, INC.
16205 Old Frederick Road
Mt. Airy, Maryland 21771
Phone 442-2031

Scale	1"=100'
Date	8/28/00
Field By	J.C.H.
Drawn By	[illegible]
Drawing #	EC353

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410)313-2466 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B00125986

Building Address 3551 Sylvan Lane
Ellicott city MD 21043
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 6023 Subdivision _____
Section _____ Area _____ Lot _____
Tax Map 25 Parcel 1161 Grid 8
Zoning R-20 Map Coordinates 12G8 Lot size

Property Owner's Name Dwayne & Sandra Harris
Address 3551 Sylvan Lane
City Ellicott State MD Zip Code 21043
Home Phone 410 203-2292 Work Phone 410 644-0257
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone Fax

Existing Use Single Family Home
Proposed Use Same w/ Addition
Estimated Construction Cost $ 10,000
Description of Work 2nd Floor Bedroom over existing Living Room

Contractor Company Owner
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
License No. _____
Phone Fax

Occupant or Tenant Owner
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone Fax

Engineer or Architect Company NONE
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
Phone Fax

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:
No. of stories:
Gross area, sq. ft. per floor:
Use group:
Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame
_____ State Certified Modular

Utilities

Water Supply:
___ Public
___ Private
Sewage Disposal:
___ Public
___ Private
Electric Yes ☐ No ☐
Gas Yes ☐ No ☐
Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐
Sprinkler system: N/A ☐
___ Full
___ Partial
___ Other Suppression
___ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☑ SF Townhouse ☐

	Depth	Width
1st floor:	33	46
2nd floor:	33	32
Basement:	15	18

Finished Basement ☐ Unfinished Basement ☑
Crawl space ☑ Slab on Grade ☐
No. of Bedrooms 3

Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____

Other Structure: _____
Dimensions: _____
Footings: _____
Roof: _____

_____ State Certified Modular
_____ Manufactured Home

Utilities

Water Supply:
✓ Public
___ Private
Sewage Disposal:
___ Public
✓ Private
Electric Yes ☑ No ☐
Gas Yes ☐ No ☑
Heating System:
Electric ☑ Oil ☐
Natural Gas ☐
Propane Gas ☐
Sprinkler system: N/A ☑
___ NFPA #13D
___ NFPA #13R
___ Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Dwayne E Harris
Applicant's Signature
Owner
Title/Company

Dwayne E. Harris
Print Name
8-14-00
Date

Checks payable to: *DIRECTOR OF FINANCE OF HOWARD COUNTY*
** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	9/11/00	Mark Reiter
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met?
YES ☐ NO ☐
Is Entrance Permit required?
YES ☐ NO ☐
Historic District?
YES ☐ NO ☐
Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____ Accepted by _____

PROPERTY ID#: 42336

Filing fee	$ 25
Permit fee	$ _____
Excise tax	$ _____
Sub-total paid	$ _____
Add'l permit fee	$ _____
TOTAL FEES	$ _____
Balance due	$ _____
Check	# 3167
Validation	# 32324

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

s:\permit.frm

Rev. 10/15/98

7/29/63

Approved 7/29/63 DWM

P 07008
58084-B
A 06385

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY ELLICOTT CITY

DISTRICT 5

DATE 6-21-63

INDEXED INDEXED

Elwood Scaggs IS PERMITTED TO INSTALL ✓ ALTER

ADDRESS PHONE

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Moorsefield ROAD Wayne Ridge & Cherry Tree LOT 16 HKC of Plat 1

PROPERTY OWNER Souder & Walker

ADDRESS

SPECIFICATIONS

DRAIN FIELD ____ DEPTH ____ FEET, BOTTOM AREA ____ SQ. FT.

SEEPAGE PITS ✓ ABSORBENT SIDE-WALL AREA 400 SQ. FT. below inlet.*

SEPTIC TANK CAPACITY ____ GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER * First 4½' of original ground not included in sidewall area. Place dry well about 54' from rear lot line and about 54' from left line as determined when facing lot from Cherry Tree Dr.

PLANS APPROVED BY D W Monaghan DATE 3-14-63

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

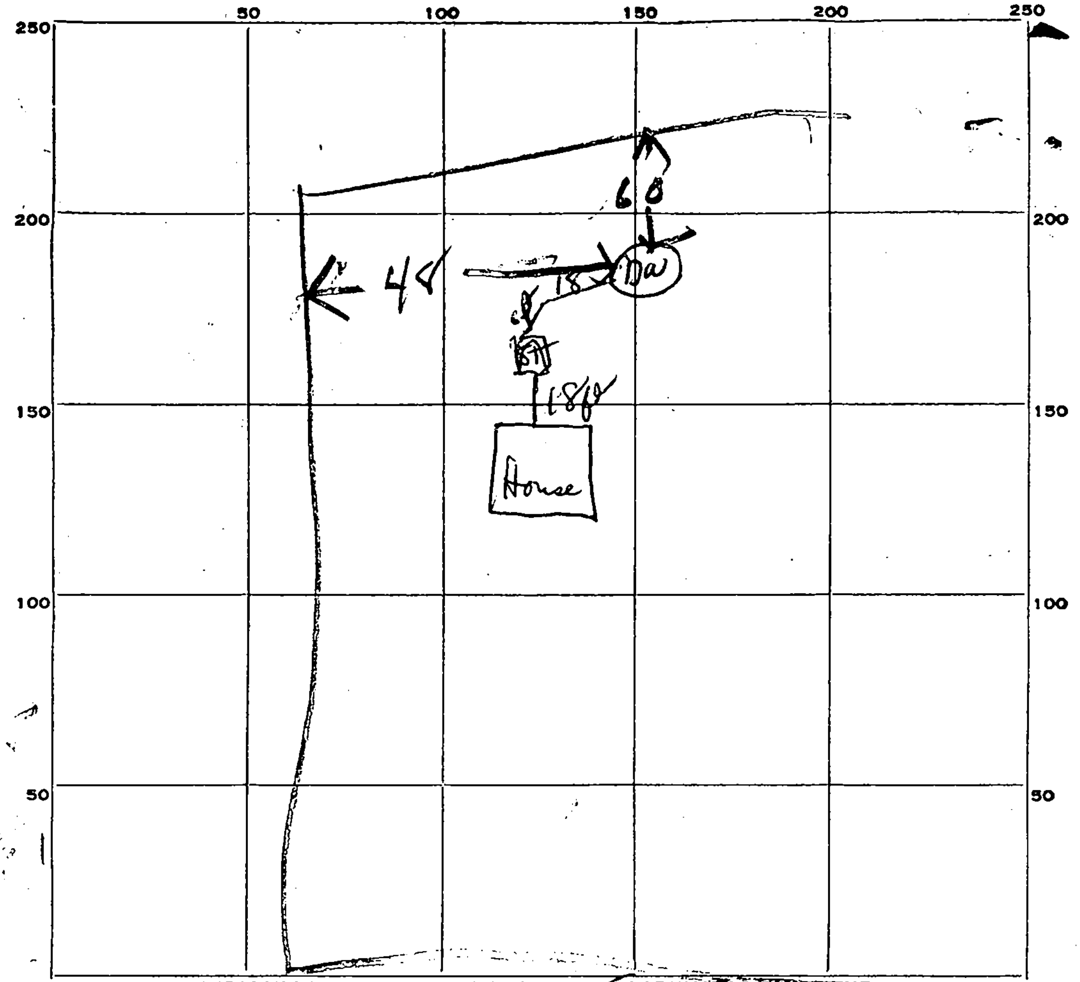
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 58084-B
A 06385

Seeping

3.14
14
12.56
3.14
43.96
9
395.1

3.14
12
6.28
3.14
37.68
9
338.4



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE

Cherry Tree Drive

PERMIT CARD OK

SEPTIC TANK, LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH ____ FT. TRENCH WIDTH ____ FT.

GRAVEL DEPTH ____ IN. TOTAL LENGTH ____ FT.

NUMBER OF TRENCHES ____ TOTAL BOTTOM AREA ____

SEEPAGE PITS, INSIDE DIAMETER 12 FT. DEPTH BELOW INLET 9 FT.

ABSORBENT AREA 338.4 SQ. FT.

REMARKS 7/27/83 - Wall to wall diameter is 14 ft + giving sidewall area of 395+ sq ft.

DATE SYSTEM APPROVED 7/29/83 INSPECTOR DW Monaghan

APPLICATION

A 06385

P

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 3-5-63

Septic Tank - 1000 gal.
Dry Well - 400 sq ft. absorbent sidewall area to begin below the inlet pipe. The first 4½ ft of original ground is not to be included in sidewall area.
Place Dry Well about 54 ft from rear lot line and about 54 ft from left sideline which is determined as you face from Cherry Tree Drive.

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 Clyde Souder & Gordon Walker

ADDRESS Box 140 B RT 216 Highland PHONE

PROPERTY LOCATION:

SUBDIVISION Moorsefield LOT NO. 1 blk C of plat 1

ROAD AND DESCRIPTION Corner of Wayne Ridge & Cherry Tree

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 43,457 sq. ft. TYPE BLDG. 4 (NUMBER OF BEDROOMS)

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT Donald Souder/dma

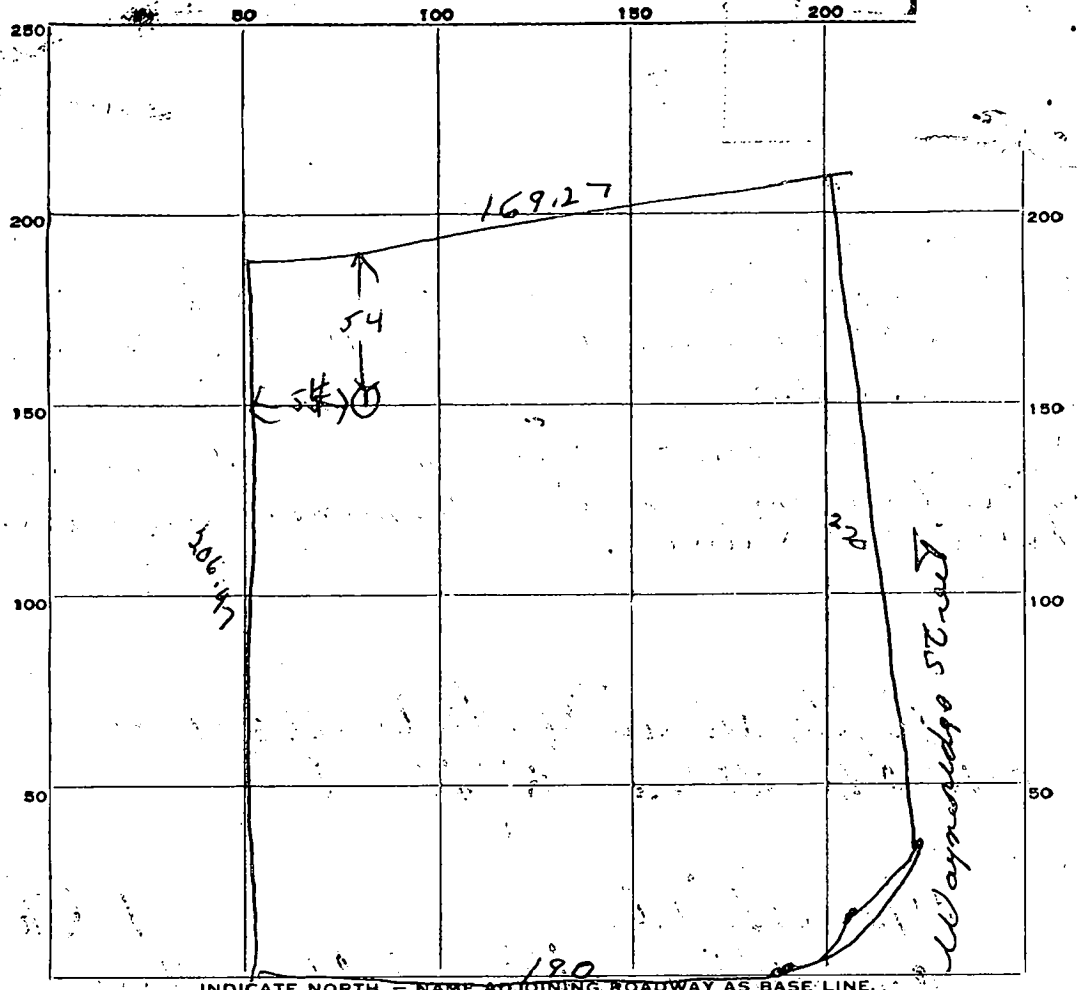
APPROVED BY Donald W. Monaghan FOR Dry Well (KIND OF SYSTEM) DATE 3/14/63

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT



INDICATE NORTH. — NAME ADJOINING ROADWAY, AS BASE LINE.

Cherry Tree Drive

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
3/14/13	1	9	1028	1031	1031	1037	6 min
	1A	4 1/2	1029	little perc			

SOIL AUGER FINDING 4" + Sand - mottle sand

TESTED BY DWM - 3/14/13

REMARKS

ALSO PRESENT Donald E. Sauder LOT NO. 1 Blk C Plot 1