



Howard County
Health Department

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 529492

AGENCY REVIEW: _____

DATE 7/21/08

DO NOT WRITE ABOVE THIS LINE

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

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS: 3

- RESIDENTIAL WITH _____ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE UNKNOWN IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) Karen + Jasm Jenkins

DAYTIME PHONE 410-350-8509 CELL 410-227-5874 FAX 410-636-1250

MAILING ADDRESS 13739 Brnaridge Ct. Highland MD 20777
STREET CITY/TOWN STATE ZIP

APPLICANT Fogle's Septic Clean Inc

DAYTIME PHONE 410-795-5670 CELL _____ FAX _____

MAILING ADDRESS 580 Obrecht Rd Sykesville MD
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR **CONSULTANT**

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME Bonaridge Subdivision LOT NO. 3

PROPERTY ADDRESS 13739 Brnaridge Ct Highland
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 40 GRID _____ PARCEL(S) 312 PROPOSED LOT SIZE 41,508 ft²
15

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN. TEST RESULTS WILL BE MAILED TO APPLICANT.

SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

HD-216 (2/03)

PLEASE SUBMIT ORIGINALS ONLY (BY MAIL OR IN PERSON)

A-1

5' brn l roots
 org brn scl
 2fsbk
 100% chert

4' brn fsl
 micaceous
 saprolite
 platy
 mica schist
 15% chert

9' ↓
 brn fsl
 saprolite
 5% boulders

A-2

5' brn l
 brn scl
 1fsbk
 15% coarse chert

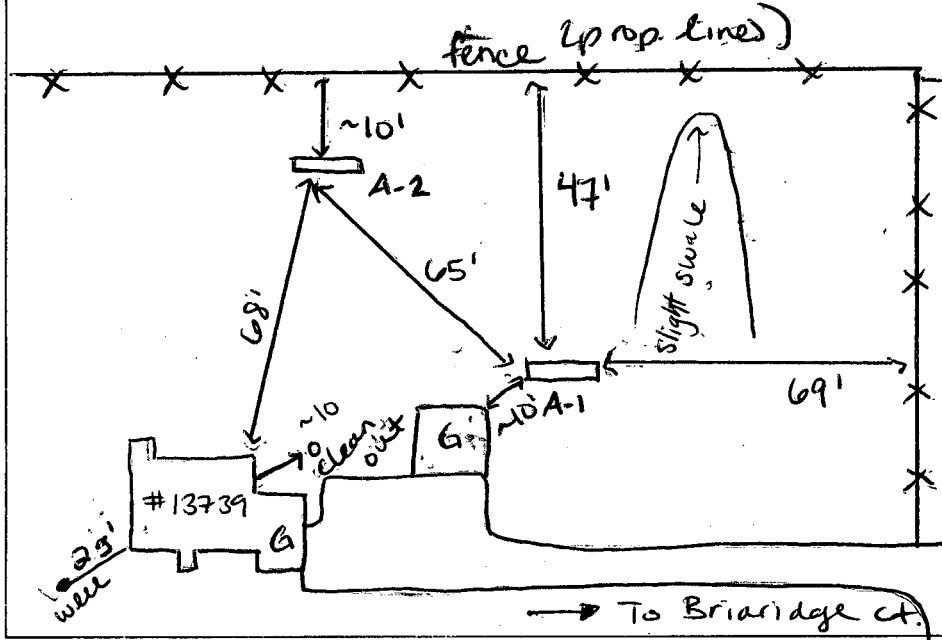
3' brn fsl
 micaceous
 saprolite

7' ↓
 few boulders

9' hard
 mica
 schist +
 platy

10' HB

NOT TO SCALE



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
8/1/08	A-1	5'/14'	9:15	9:28	9:40	12	P
8/1/08	A-2	5'/10.5'	9:28	9:43	9:55	12	P

REMARKS holes consistent adding 1 BR 2 → 3 BR

SANITARIAN HS BACKHOE Jake (Fogles) OTHERS homeowner

TEST HOLES USED IN SDA 2 AVG. PERC TIME 12 SQ. FT/BR 39'

TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH 7' EFFECTIVE SW 2'-2.5'

Fee Paid \$ 11/3/08
Receipt # P 530223

SEPTIC SYSTEM REPAIR / UPGRADE / EVALUATION REQUEST

Please fill out this form completely and check off the reason for the request:

Date requested: _____

Reason for Request

Failing System (includes surface discharge or inadequate treatment zone) _____

Has the contractor verified through excavation/pumping evaluation, that there are no pipe blockages? _____

In support of a building permit. Type of building addition: 1 Brm

*System relocation for proposed addition for setback compliance _____

*Verification of adequate system capacity per COMAR 26.04.02.02D (4) _____

To replace collapsed septic tank or upgrade tank capacity

To replace collapsed drywell

Septic Contractor: Fogles Septic

Contractor's Address: 580 Obrecht Rd

Sykes

Contractor's Phone #: 410 795-5670

Property Address: 13739 Briaridge Ct

Property (Subdivision) & Lot # 5 Briaridge

Owner's Name: Karent Jason Jenkins

Is public sewer available/nearby: _____

Names of Any Previous Owners: _____

Year House Built: 1972

of Existing Bedrooms: 2

of Bedrooms after completion of addition: 3

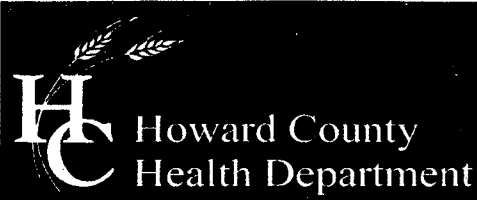
Has this request been discussed previously with a Sanitarian, who? _____

If public sewer is close, further research will be performed to verify availability and possible hook up to public sewer.

A Sanitarian will be in contact within three business days depending upon the urgency of the situation to coordinate the scheduling of the repair /upgrade/evaluation. No inspection will be performed without fee collection at the office.

Environmental Sanitarian tentatively assigned _____

FAX TO 410-313-2648



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

August 8th, 2008

Mr. & Ms. Jenkins
13739 Briaridge Ct.
Clarksville, MD 21029

Re: **Percolation Test Results**
#A529492
13739 Briaridge Ct.

Dear Mr. & Ms. Jenkins,

Percolation testing was conducted at your property on August 1st, 2008 in response to a future building permit application for an addition which will include 1 additional bedroom. Percolation testing yielded sufficient results indicating satisfactory soil conditions for conventional onsite wastewater disposal and adequate septic system repair area to support your existing home and the proposed addition. Test holes were dug in the vicinity of the originally approved septic area. Field data collected are shown on the Percolation Test Worksheet enclosed with this letter. Acceptable ranges for recommended inlet and trench bottom depths, and usable sidewall have been provided, and may be confirmed at time that a system upgrade or replacement is installed.

As explained, prior to release of a building permit our department requires that your existing septic system be upgraded to support the potential increase in sewage flow due to the increase in the number of bedrooms. This will include abandoning the existing drywell and upgrading the septic tank capacity to 1500 gallons if the addition will increase the square footage of your home to greater than 1,500 sq. ft.

Further review of your proposed addition is contingent upon submission of a Percolation Certification Plan per *Howard County Code Sec. 3.805*. I have enclosed a copy of the requirements for this plan and some additional materials to assist you. The Percolation Certification plan must receive approval and signature prior to any septic work or building permit approval.

If you have any questions regarding this evaluation or requirements for the Percolation Certification Plan please contact me at (410) 313-6287.

Sincerely,

A handwritten signature in black ink, appearing to read 'Heidi Scott', written over a horizontal line.

Heidi Scott
Well & Septic Program
Development Coordination Section

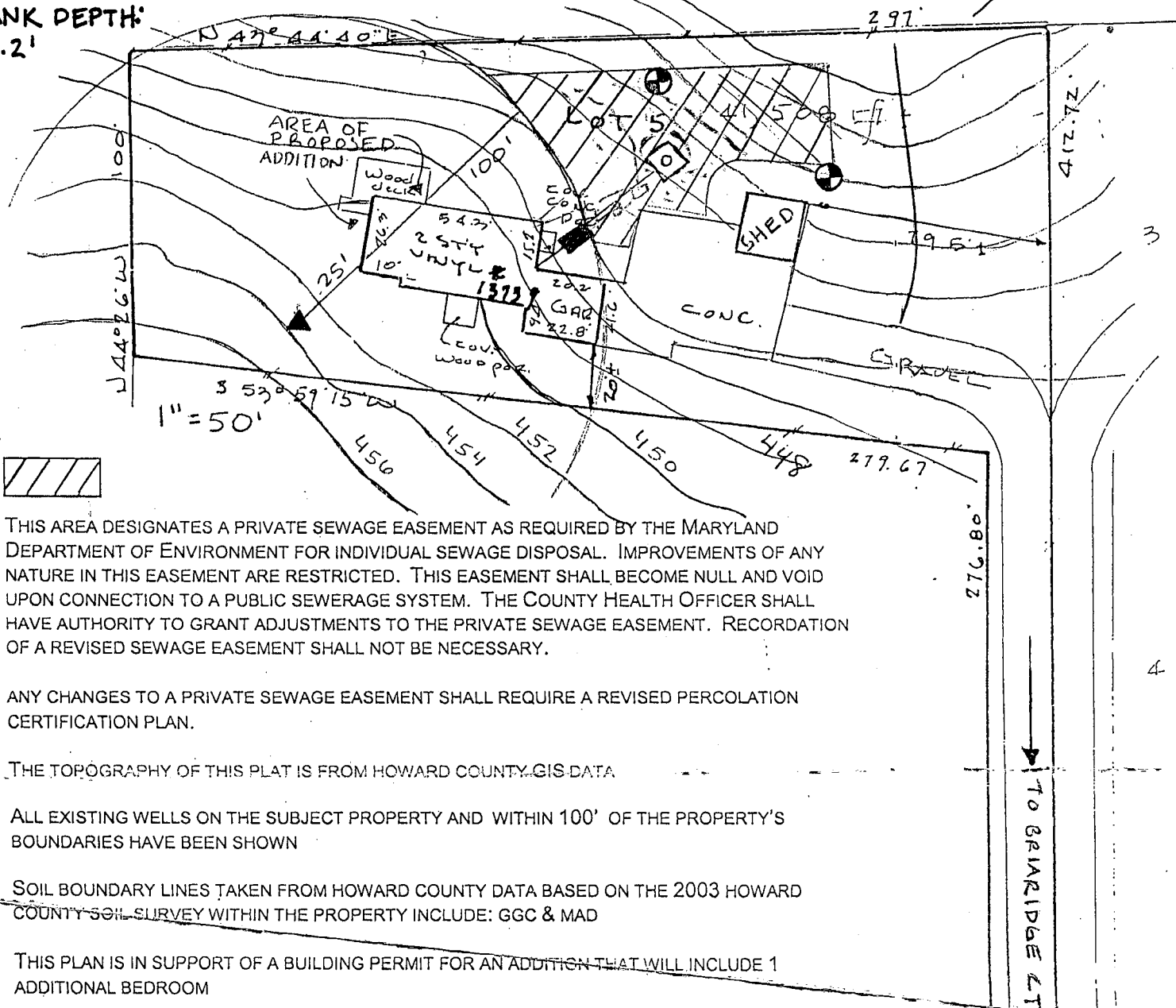
Enclosures
Cc: File

PROPERTY KNOWN AS: LOT 5
 "BRIARIDGE SUBDIVISION"
 LOTS 1-8
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MD
 PLATBOOK 22 F. 86

THIS PLAT CAN NOT BE USED TO ESTABLISH
 PROPERTY LINES OR CORNERS.

- ▲ EX. WELL
- PASSED PERC 8-1-08
- EX. TANK
- EX. DRYWELL

EX. TANK DEPTH:
 ~3.2'



NOTES



1. THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS EASEMENT ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.
2. ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
3. THE TOPOGRAPHY OF THIS PLAT IS FROM HOWARD COUNTY GIS DATA
4. ALL EXISTING WELLS ON THE SUBJECT PROPERTY AND WITHIN 100' OF THE PROPERTY'S BOUNDARIES HAVE BEEN SHOWN
5. SOIL BOUNDARY LINES TAKEN FROM HOWARD COUNTY DATA BASED ON THE 2003 HOWARD COUNTY SOIL SURVEY WITHIN THE PROPERTY INCLUDE: GGC & MAD
6. THIS PLAN IS IN SUPPORT OF A BUILDING PERMIT FOR AN ADDITION THAT WILL INCLUDE 1 ADDITIONAL BEDROOM
7. THE EXISTING SEPTIC SYSTEM SHALL BE UPGRADED PRIOR TO BUILDING PERMIT APPROVAL

I CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED ON WORK PERFORMED IN MY PRESENCE OR BY MY DIRECTION AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Kan Jahn
 Signature

09/09/08
 Date

Liquid depth measured @ ~2' from cleanout

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS.

B. Wilson for Peter Brilenoen
 (SIGNATURE, HO. CO. HEALTH OFFICER) KS

9/18/2008
 (DATE)
 1790