



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_

*AP 523963*

AGENCY REVIEW: \_\_\_\_\_

DATE *1/25/06*

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:

- RESIDENTIAL WITH 4 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) Edward & Catherine Cochran

DAYTIME PHONE 410-531-6567 <sup>410</sup> CELL 916-4311 FAX \_\_\_\_\_

MAILING ADDRESS 7400 Guilford Rd Clarksville MD 21029  
STREET CITY/TOWN STATE ZIP

APPLICANT Fyax sept:c

DAYTIME PHONE \_\_\_\_\_ CELL 240-882-4025 FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME \_\_\_\_\_ LOT NO. \_\_\_\_\_

PROPERTY ADDRESS 7400 Guilford Rd  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 20 GRID H10 PARCEL(S) \_\_\_\_\_ PROPOSED LOT SIZE \_\_\_\_\_

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  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH





# APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_

AR 524382-A

AGENCY REVIEW: \_\_\_\_\_

DATE 3/30/06

05-346444

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:

- 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) EDWARD & CATHRINE COCHRAN

DAYTIME PHONE (410) 531-6567 CELL N/A FAX N/A

MAILING ADDRESS 7400 GUILFORD RD. HIGHLAND MD. 21029  
STREET CITY/TOWN STATE ZIP

APPLICANT FSH Associates

DAYTIME PHONE (410) 750-2251 CELL \_\_\_\_\_ FAX (410) 750-7350

MAILING ADDRESS 8318 Forrest Ct. ELlicott city MD. 21043  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME COCHRAN PROPERTY LOT NO. 2

PROPERTY ADDRESS 7400 Guilford Rd. HIGHLAND MD.  
STREET TOWN/POST OFFICE

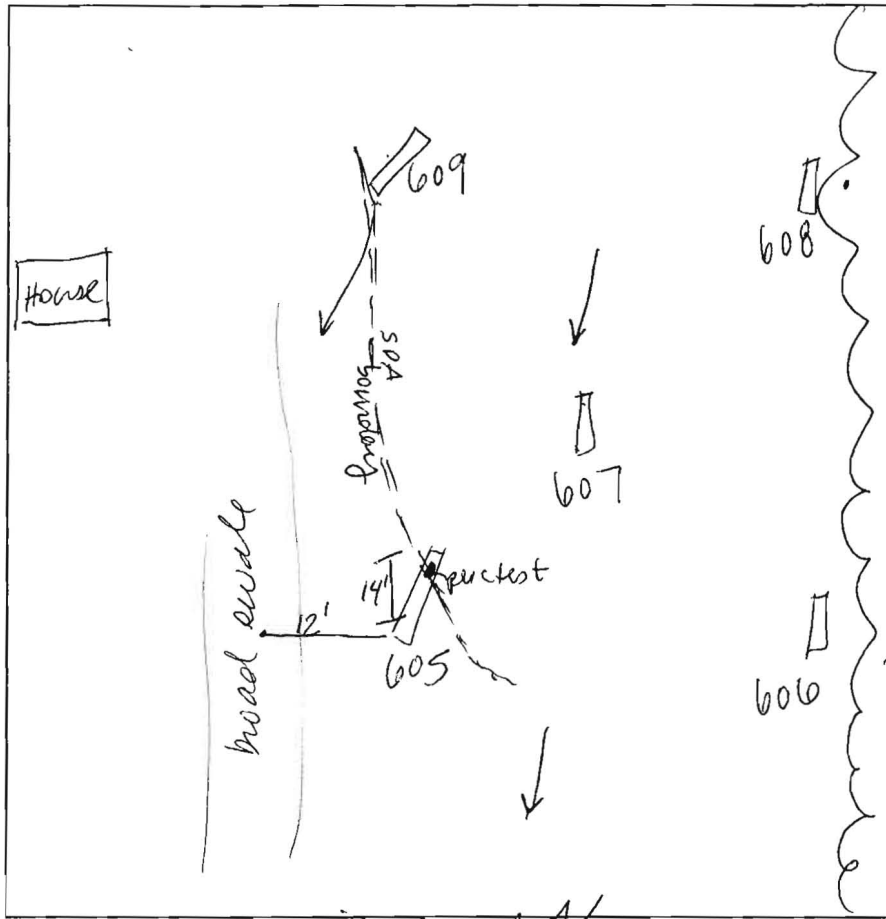
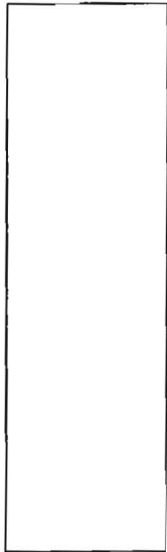
TAX MAP PAGE(S) 41 GRID 4 PARCEL(S) 148 PROPOSED LOT SIZE 3 Ac.

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. Isabella J. Fisch  
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P Lot 2



607

dark brown  
5% gravels  
L ssk  
7"  
brown  
sl sg  
dense  
micaceous  
2'  
brown  
sl sg  
micaceous  
5% gravels  
cw  
spherulite  
toward bottom  
15'

609

dark brown  
L ssk  
6"  
reddish  
yellow  
sl/dense  
sg  
15"  
sl dense  
in ground  
sg  
micaceous  
2'5"  
pale brown  
sl sg  
horizontal layering  
micaceous  
13'  
cw spherulite

608

dark brown  
L ssk  
1'  
brown  
reddish yellow  
sl  
micaceous  
m  
4'  
brown  
dense sl  
sg 10%  
stones/cobbles  
micaschist  
cw  
14'  
sl sg cw  
micaceous  
spherulite

605  
dark brown  
L ssk  
1'  
brown  
sl sg  
well compact  
in ground  
micaceous  
2'9"  
brown  
sl sg  
compact in  
ground  
micaceous  
5% gravels  
brown sl  
sg cw  
13'

606

brown L  
slk  
1'  
reddish  
yellow  
sl cw m  
micaceous  
5% cobbles  
gravels  
2'  
brown  
dense in ground  
sl sg  
micaceous  
4'  
brown  
fine sl/l  
sg micaceous  
13'  
cw spherulite

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
5/3/06	605	4' / 13'	10:39	10:41	10:44	3	P
	606	5' / 13'	10:50	10:51	10:52		
			10:53	10:54 <sup>38</sup>	10:56 <sup>40</sup>	2	P
	607	15'		visual	ok		P
	609	3' / 13'	11:07 <sup>50</sup>	11:10 <sup>47</sup>	11:13 <sup>41</sup>	3	P
	608	5' / 14'	11:15 <sup>32</sup>	11:22 <sup>01</sup>	11:35	13	P

REMARKS: Holes dug per plan #605 do not extend SPT any further.  
 SANITARIAN: SF BACKHOE: JM Lorka OTHERS: owner  
 TEST HOLES USED IN SDA: \_\_\_\_\_ AVG. PERC TIME: 5 SQ. FT/BR: 180  
 TRENCH WIDTH: \_\_\_\_\_ INLET DEPTH: \_\_\_\_\_ MAX. BOT DEPTH: \_\_\_\_\_ EFFECTIVE SW: \_\_\_\_\_

than test hole to keep out of swale.



# APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_

AP 524382-B

AGENCY REVIEW: \_\_\_\_\_

DATE 3/30/06

05-346444

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:

- 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) EDWARD & CATHRINE COCHRAN

DAYTIME PHONE (410) 531-6567 CELL N/A FAX N/A

MAILING ADDRESS 7400 GUILFORD RD. HIGHLAND MD. 21079  
STREET CITY/TOWN STATE ZIP

APPLICANT FSH Associates

DAYTIME PHONE (410) 750-2251 CELL \_\_\_\_\_ FAX (410) 750-7350

MAILING ADDRESS 8318 Forrest Ct. Ellicott city MD. 21043  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME COCHRAN PROPERTY LOT NO. 3

PROPERTY ADDRESS 7400 Guilford RD. HIGHLAND MD.  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 41 GRID 4 PARCEL(S) 148 PROPOSED LOT SIZE 3 ac.

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. Faccharia J. Fisch  
SIGNATURE OF APPLICANT

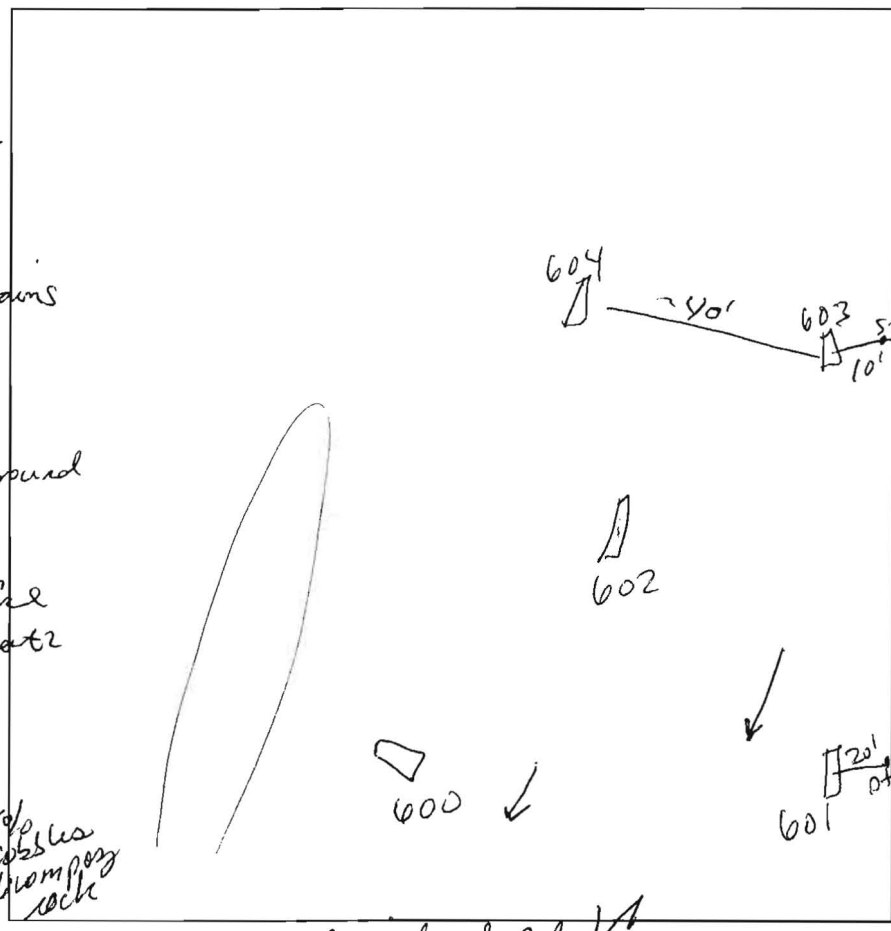
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

lot 3  
A/P

601  
dark brown  
1'  
brown  
sl coarse  
w/ quartz grains  
well compact  
in ground  
3'  
less compact  
but still dense w/ ground  
6'  
pale brown  
sl/ls medium  
course  
11'  
decomposing quartz  
12'  
HD

602  
brown L  
1'  
reddish  
yellow  
sl cw  
dense sl  
well compact  
3'  
reddish  
yellow  
sl sg  
coarse  
compact in  
ground  
6'  
white gray  
coarse  
ls sg cw  
14'

600  
dark brown  
L  
1'  
brown/  
reddish yellow  
wavy/dense  
sl  
well compact  
sg coarse  
3'  
pale brown  
sl sg  
coarse  
12'  
cw 5%  
spherulite  
13'  
respage  
13'5" H2O level  
14' bottom



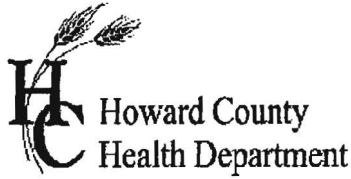
603  
8" brown L  
brown  
dense sl (or fine sl)  
micaceous  
225 reddish  
yellow  
sl coarse  
mica schist  
damp to touch  
5% gravels  
well compact  
4'  
pale brown  
sl coarse  
dense in ground  
14' raw rock

604  
dark brown  
L  
1'  
brown  
fine sl  
micaceous  
3'  
brown  
fine sl sg  
w/ patches  
white coarse  
sl  
mica schist  
quartz grains  
spherulite  
5% quartz  
5% gravel  
13'5"

DATE	TEST #	DEPTH	START	BREAK 1' DROP	STOP 2' DROP	TIME OF 2ND INCH	P/F/H
5/3/06	601	4'12"	9:23 <sup>30</sup>	9:24 <sup>24</sup>	9:25 <sup>24</sup>	—	—
	"		9:25 9:29	9:27 9:30 <sup>17</sup>	9:28 9:32 <sup>50</sup>	2	P
	602	5' 14'	9:40 <sup>15</sup>	9:42 <sup>12</sup>	9:45 <sup>22</sup>	3	P
	600	14'		visual	ok		P
	603	4'5" 14'	10:05 <sup>54</sup>	10:22	—	—	F
	"	5'5"	12:54	1:00	1:08	8	P
	604	3'7" 13'5"	10:17	10:19	—	—	—
	"		10:21 <sup>11</sup>	10:24 <sup>10</sup>	10:26 <sup>40</sup>	2	P

REMARKS Holes dug per plan  
 SANITARIAN SF BACKHOE JM Lantieri OTHERS owner  
 TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME 4 SQ. FT/BR 180  
 TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE SAW \_\_\_\_\_

Paid 1518.00



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_

AP 524382

AGENCY REVIEW: \_\_\_\_\_

DATE 3/30/06

05-346441

DO NOT WRITE ABOVE THIS LINE

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CHECK AS NEEDED:

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CHECK AS NEEDED:

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

- RESIDENTIAL WITH \_\_\_\_\_ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE **UNKNOWN** IF APPROPRIATE)
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PROPERTY OWNER(S) EDWARD & CATHRINE COCHRAN

DAYTIME PHONE (410) 531-6567 CELL N/A FAX N/A

MAILING ADDRESS 7400 GUILFORD RD. HIGHLAND MD. 21029  
STREET CITY/TOWN STATE ZIP

APPLICANT FSH Associates

DAYTIME PHONE (410) 750-2251 CELL \_\_\_\_\_ FAX (410) 750-7350

MAILING ADDRESS 8318 Forrest Ct. Ellicott city MD. 21043  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME COCHRAN PROPERTY LOT NO. 1

PROPERTY ADDRESS 7400 Guilford Rd. HIGHLAND MD.  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 41 GRID 4 PARCEL(S) 148 PROPOSED LOT SIZE 3 Ac.

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. Faccharia J. Fisch  
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

4 bedrooms

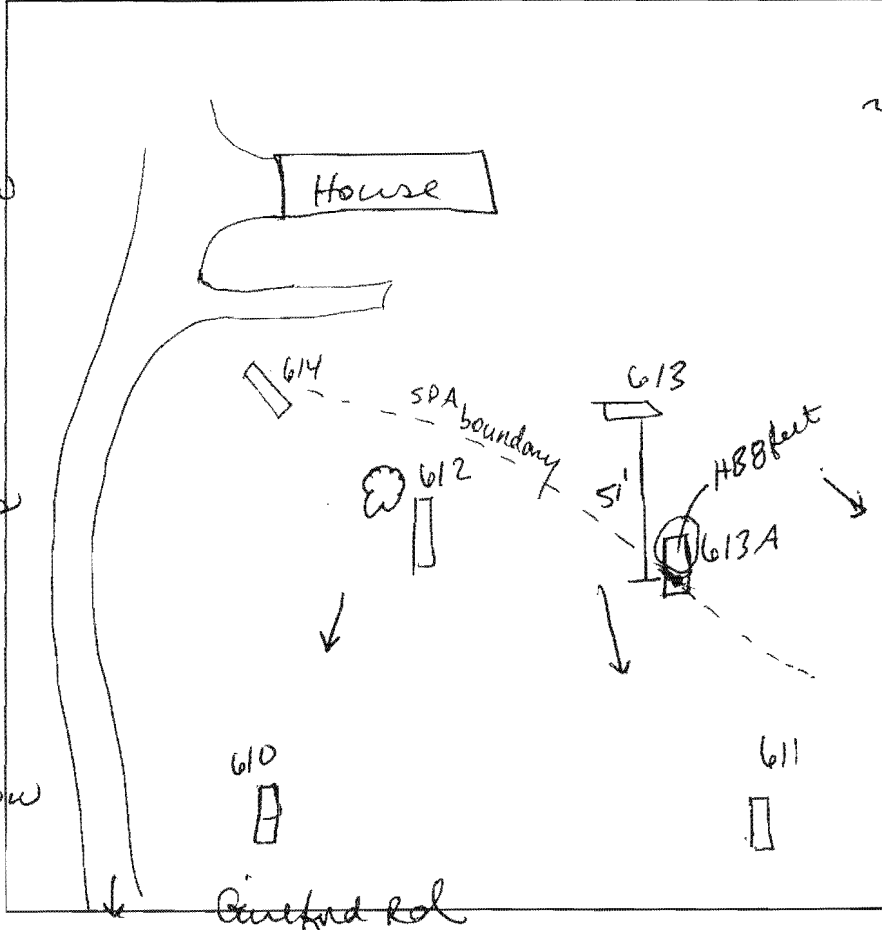
Lot 1

AP

613A  
dark brown  
1' reddish yellow  
scl m  
micaceous  
10% gravel  
23' brown  
sl sg  
micaceous  
~100% fine  
cobbles  
gravel  
8' HB  
14'

613  
dark brown  
1' reddish yellow  
sl  
2' well compact  
10% gravel  
75' HB

614  
dark brown  
1' reddish yellow  
dense  
scl/sl  
well compact  
m  
2' brown  
sg sl  
well compact  
w/ patches  
of white  
reddish  
yellow  
135"



612  
dark brown  
L slk  
26' reddish yellow  
scl sg  
dense  
sl micaceous  
35' 4' sl pate brown  
white fine sl  
5% gravel  
15  
Cw.  
14' siltstone  
611  
dark brown  
5' brown  
sl sg  
micaceous  
compact  
ground  
15-20%  
gravel/cobbles  
9' reddish yellow  
sl/sg  
course  
5% stony  
11' HB @ bottom

610  
dark brown  
28' reddish yellow  
scl dense  
dense sl  
well compact  
course  
38' reddish yellow  
lapped w/ white  
5' sl  
course  
8' 10% cobbles  
gravel  
14'

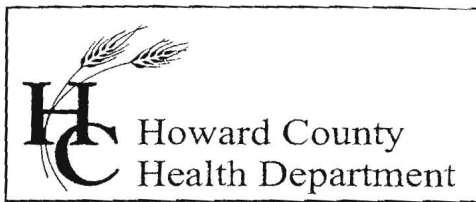
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
5/3/06	613	7'5"				visual	F
	614	5' 13'5"	11:46	11:49	11:55	6	P
	612	5' 14'	11:59 <sup>40</sup>	12:00 <sup>48</sup>	12:02 <sup>50</sup>	2	P
	611	3'6" 11'	12:21 <sup>46</sup>	12:23 <sup>00</sup>	12:25	2	P
	610	4'5" 14'	12:10	12:13	12:17	4	P
	613A	14'				visual	OK P

REMARKS Holes dug per plan #613A dug 25' off #613

SANITARIAN SF BACKHOE JM CONTRACTOR OTHERS owner

TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME 4 SQ. FT/BR 180

TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE S/W \_\_\_\_\_



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

Penny E. Borenstein, M.D., M.P.H., Health Officer

May 10, 2006

Edward and Catherine Cochran  
7400 Guilford Road  
Highland, Maryland 21029

RE: PERCOLATION TEST RESULTS – A524382B  
7400 Guilford Rd

Dear Mr. and Mrs. Cochran:

Percolation testing conducted May 3, 2006 on the referenced property indicated satisfactory soil conditions. Copies of the test results are enclosed.

Further review is contingent upon submission by a registered engineer/surveyor of a percolation certification plan showing the following:

- 1) Actual locations and elevations of all excavated test holes
- 2) Proposed building, well and septic system
- 3) The existing sewage disposal area
- 4) Locations of any other relevant features such as streams, swales, or existing structures
- 5) A note must be included certifying that all existing wells and septic systems within 100 feet of property boundaries have been shown
- 6) A note indicating that depicted topography reflects field-matched information
- 7) A note stating all wells to be drilled prior to final plat approval
- 8) A health officer signature block stating "approved for private water and private sewer systems"
- 8) A MDE sewage disposal area statement is required
- 9) MDE minimum lot width statement
- 10) Include A# in the title block

If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-1771.

Sincerely,

Sara Fegel  
Well and Septic Program  
Development Coordination Section

SF  
Enclosures  
Cc: FSH  
File



# HOWARD COUNTY HEALTH DEPARTMENT

23963

DATE  
1/25/06

Received From

Jack Fyock Septic Service Inc

PHONE #

410 985-9270

90 Box 89 Triadelphia Rd Glenelg MD 21737

FOR DEPOSIT ONLY

For

Pa Ling Septic Repair

7400 Guilford Rd

*Handwritten signature*

- CASH
- CHECK

NO.

582

three hundred thirty

Dollars

\$

330 | 00

Received By

*Handwritten signature*

Howard County Health Department  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043

# Memorandum

---

**To:** Carletta McKnight  
**From:** Michael J. Davis *mjd*  
**Date:** 4/10/2006  
**Re:** Refund for 7400 Guilford Road

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On January 25, 2006, Jack Fyock Septic Service paid a fee of \$330.00 for a percolation testing application and repair permit (receipt #523963). No work was done. Subsequently, they decided to subdivide the property, and Edward L. Cochran paid \$1518.00 for percolation testing applications (receipt #524382), of which \$506.00 was for the same lot as the \$330.00 fee mentioned above. (Copies of the receipts are attached.) Robert Fyock has requested a refund for the payment of the \$330.00 fee. Please send the refund to Jack Fyock Septic Service, P.O. Box 89, Glenelg, MD 21737.

Thank you for your assistance in this matter.

7400 Guilford Road  
Clarksville, MD 21029

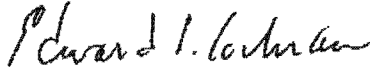
April 7, 2006

Mary Lou Briggs  
Howard County Health Dept.  
Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, MD 21046

Dear Ms. Briggs:

In January of this year Mr. Robert Fyock submitted to your office on my behalf an application for a perc test for my property at 7400 Guilford Rd., accompanied by a \$330 fee. Our intention at that time was to upgrade the existing drain field at our home. Subsequently we asked that that application be held while we decided whether to submit an application to subdivide the property into three lots, including the existing dwelling. We decided to go forward with the subdivision plan and FSH Associates submitted a perc application to your office on or about March 27<sup>th</sup> along with a fee of \$1518 covering the three lots. Accordingly, I am requesting the first application be voided, and the \$330 fee be refunded.

Sincerely,



Edward L. Cochran

Cc: Mr. Robert Fyock  
Fyock Septic Service

Mr. Zach Fisch  
FSH Associates