



Howard County Health Department

Maura J. Rossman, M.D., Health Officer

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

RECEIPT DATE: 7/1/2026

ONSITE SEWAGE DISPOSAL SYSTEM

P 591090

APPROVAL DATE: _____

PERMIT: REPAIR

A Repair

PROPERTY ADDRESS: 5380 Green Bridge Road

SUBDIVISION: Hartley Johnson

LOT: 9

TAX ID: 05-357330

CONTRACTOR: Fogle's

EMAIL: Jeff@foglesinc.com

CONTRACTOR ADDRESS: 580 Obrecht Road, Sykesville 21784

PHONE: 410-795-5670

PROPERTY OWNER: Christopher Beisel

EMAIL: cbeisel@comcast.net

OWNER ADDRESS: Same as above

PHONE: 443-722-4956

SEPTIC TANK SIZE: Existing

PUMP SIZE: n/a

PUMP TANK CAPACITY: n/a

DISTRIBUTION SYSTEM:



GRAVITY



LPD

BEDROOMS: 4

APPLICATION RATE:

1.2gpd/ft

TRENCHES:	LINEAR FEET REQUIRED: <u>74</u>	INLET DEPTH: <u>2.5</u>
	TRENCH WIDTH: <u>3</u>	MAXIMUM BOTTOM DEPTH: <u>7.5</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>n/a</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>3.5 (.45)</u>
LOCATION:	SYSTEM STAKED BY INSTALLER/DESIGNER AND VERIFIED BY APPROVING AUTHORITY DURING PRE-CONSTRUCTION INSPECTION.	
NOTES:	Install replacement system per approved design plan. Ex. drywell to be pumped and collapsed	

ISSUED BY: Kevin M. Wolf, L.E.H.S.

ISSUE DATE: 7/13/2026

EXPIRATION DATE: 7/13/2027

NOTE: CONTRACTOR MUST SCHEDULE A PRE-CONSTRUCTION INSPECTION PRIOR TO BEGINNING ANY INSTALLATION

NOTE: CONTRACTOR REGISTERED WITH THE STATE OF MD ON-SITE WASTEWATER PROFESSIONALS BOARD: CONFIRMED ☒

NOTE: CONTRACTOR MUST SCHEDULE AN INSPECTION AND GAIN APPROVAL OF ALL COMPONENTS PRIOR TO COVERING

NOTE: STONE MUST BE APPROVED BY HEALTH DEPARTMENT AND GRAVEL TICKET MUST BE AVAILABLE FOR REVIEW.

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADIENT FROM ANY WATER WELL

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: AN ELECTRICAL PERMIT IS REQUIRED FOR INSTALLATION OF ANY ELECTRICAL COMPONENTS OF THE SYSTEM



ELECTRICAL PERMIT ISSUED

E

n/a

NOTE: THE HCHD DOES NOT WARRANTY ANY SYSTEM AND CANNOT GUARANTEE THE PERFORMANCE OF THIS SYSTEM AS DESIGNED. BY ACCEPTING THIS PERMIT, THE OWNER AND/OR APPLICANT ACKNOWLEDGE THAT THE SPECIFICATIONS DETAILED IN THIS DESIGN ARE ONE POSSIBLE OPTION AND THAT THE HCHD WILL REVIEW OTHER PROPOSALS. YOU HAVE THE OPTION TO SEEK THE ADVICE OF A QUALIFIED DESIGN CONSULTANT OR PROFESSIONAL ENGINEER FOR FURTHER GUIDANCE.

NOTE: AN INDIVIDUAL CERTIFIED BY MDE AND THE MANUFACTURER FOR BAT INSTALLATION MUST BE PRESENT AT ALL TIMES DURING BAT INSTALLATION.

NOTE: MDE RECOMMENDS SEPTIC TANKS, BAT, AND OTHER PRETREATMENT UNITS BE PUMPED AT A FREQUENCY ADEQUATE TO ENSURE THAT SOLIDS ARE NOT DISCHARGED TO THE DISPOSAL AREA

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

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

CALL 410-313-1771 TO SCHEDULE INSPECTIONS.



HOWARD COUNTY HEALTH DEPARTMENT

91061

CODES

DATE

6/5/26

P5

☐ CASH

☒ CHECK

NO.

83029

Received
From

For

Fogles Septic Clean, Inc.
Repair - 5380 Green Bridge Rd

Two Hundred sixty five

— 00/100

Dollars

\$

265.00

Received By

A. Taylor

RECEIPT

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

Application: WS-PT-RP-26-00009
Application Type: EnvHealth/Well and Septic/Percolation Test/Repair Application
Address: 5380 GREEN BRIDGE RD, Dayton, 21036

Receipt No.	15550					
Payment Method	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
Check	83029	\$265.00	06/05/2026	SMARTIN		

Owner Info.:
BEISEL CHRISTOPHER E
5380 GREEN BRIDGE RD
DAYTON, MD 21036

Work Description:

Maura J. Rossman, M.D., Health Officer

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: _____
☒ No

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

☒ Yes Explain observation: located collapsed drywell
☐ 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: Fogle's Septic Clean, Inc.

Contractor's Phone: 410-795-5670

Contractor's Address: 580 Obrecht Rd Sykesville, MD 21784

Property Address: 5380 Green Bridge Rd

County File: 05-357330

Subdivision: T Hartley Johnson

Lot: 9 Year Built: 1968

Owner's Name: Christopher Beisel

Existing bedrooms: 4

Name of previous owners: Andre Lavanceau

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



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

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APPLICATION FOR PERCOLATION TESTING AND SITE EVALUATION

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME T Hartley Johnson

PROPERTY ADDRESS 5380 Green Bridge Rd Dayton, MD 21036
STREET TOWN ZIP

TAX ACCOUNT # 05-357330 TAX MAP 27 GRID 24 PARCEL 61 LOT NO. 9 PROPOSED LOT SIZE (ACRES) _____

ZONING CATEGORY _____ TIER _____

PROPERTY OWNER(S) Christopher Beisel

DAYTIME PHONE 443-722-4956 CELL _____ EMAIL cbeisel@comcast.net

MAILING ADDRESS 5380 Green Bridge Rd Dayton, MD 21036
STREET CITY, STATE ZIP

APPLICANT Fogle's Septic Clean, Inc.

RELATIONSHIP TO OWNER: Septic Contractor

DAYTIME PHONE 410-795-5670 CELL _____ EMAIL john@foglesinc.com

MAILING ADDRESS 580 Obrecht Rd Sykesville, MD 21784
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 4 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

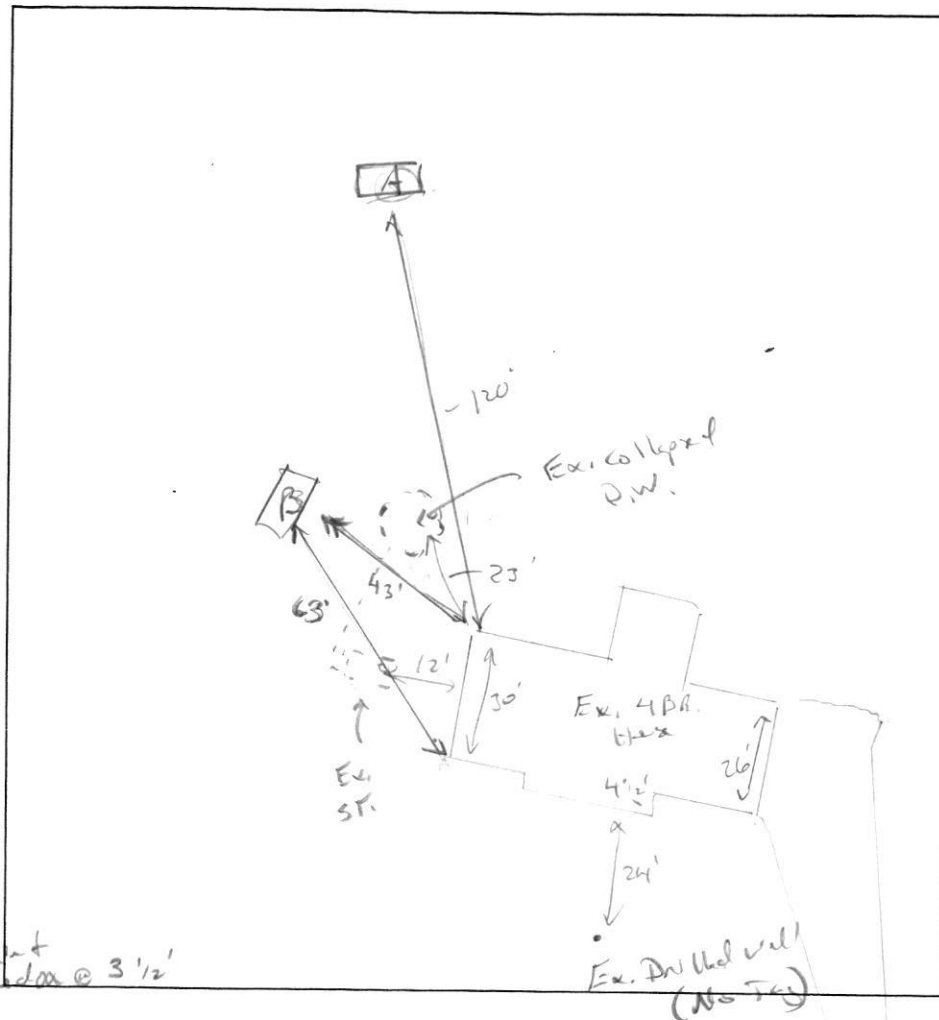
I declare and affirm that to the best of my knowledge, the information contained herein is correct. I declare that I am the owner of the property or duly authorized to make this application on behalf of the owner. I agree to comply with all applicable state and county regulations.

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

6/5/2026

DATE



Dark Br L
Wk Co Sdk
roots, Fresh
1. br Sil
Wk F Sdk
Fresh
100% Spall

1. br 1/4 Sil.
Wk Co PL.
Redox. (Faint)
100% - 20% Spall
measures
Gray Redox. (moor)
Sil. Wk FPL
100% by measure

H₂O

Dark Br L
Wk Co Sdk, roots 12'
1. br L
Wk Co Sdk
Fresh
roots, CW 3'-4'
1. br Sil
Wk F Sdk
CW, Fresh
5'
1. br VFSK
Wk Co PL.
Measure
150% Spall
10% R_x 12'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
6/18/2006	(A)	12'					F
	(B)	4' 1/2	00:39	00:43	00:48	5	P
		H ₂ O found @ 12'				~7mp.	P

REMARKS Ex. Dm. collapsed.

SANITARIAN R. Wolf BACKHOE Milk-Hopper OTHERS Hummer

TEST HOLES USED IN SDA 2 AVG. PERC TIME 1.2 SQ. FT/BR 1

TRENCH WIDTH 3 INLET DEPTH 2.5' MAX. BOT DEPTH 7.5 EFFECTIVE SW 4-7.5 (415)

$$4BR = \frac{600}{1.2} = 500 \div 3 = 167 (\cdot) = 75 \text{ LF } (2 \times 39)$$



Search Tax Maps		No Ground Rent Redemption on File		No Ground Rent Registration on File					
Special Tax Recapture: None									
Account Number:		District - 05 Account Identifier - 357330							
Owner Information									
Owner Name:		CHRISTOPHER E BEISEL REVOCABLE TRUST LORIE E LANA REVOCABLE TRUST ETAL		Use:	RESIDENTIAL				
Mailing Address:		5380 GREEN BRIDGE RD DAYTON MD 21036-1202		Principal Residence:	YES				
				Deed Reference:	/22499/ 00115				
Location & Structure Information									
Premises Address:		5380 GREEN BRIDGE RD DAYTON 21036-0000		Legal Description:	LOT 9 S 2 5380 GREEN BRIDGE RD T HARTLEY JOHNSON				
Map:	Grid:	Parcel:	Neighborhood:	Subdivision:	Section:	Block:	Lot:	Assessment Year:	Plat No:
0027	0024	0061	5010101.14	1001			9	2026	Plat Ref:
Town: None									
Primary Structure Built		Above Grade Living Area		Finished Basement Area		Property Land Area		County Use	
1968		2,687 SF		1110 SF		1.9100 AC			
Stories	Basement	Type	Exterior	Quality	Full/Half Bath	Garage	Last Notice of Major Improvements		Pending Permit
2	YES	STANDARD UNIT	FRAME/	4	2 full/ 1 half	1 Attached			None
Value Information									
			Base Value		Value		Phase-in Assessments		
					As of		As of		As of
					01/01/2026		07/01/2025		07/01/2026
Land:			285,300		315,300				
Improvements			359,100		430,800				
Total:			644,400		746,100		644,400		678,300
Preferential Land:			0		0				
Transfer Information									
Seller: BEISEL CHRISTOPHER E				Date: 09/25/2024		Price: \$0			
Type: NON-ARMS LENGTH OTHER				Deed1: /22499/ 00115		Deed2:			
Seller: LAVANCEAU ANDRE				Date: 04/23/1997		Price: \$269,200			
Type: ARMS LENGTH IMPROVED				Deed1: /03959/ 00650		Deed2:			
Seller:				Date:		Price:			
Type:				Deed1:		Deed2:			
Exemption Information									
Partial Exempt Assessments:		Class		07/01/2025		07/01/2026			
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 01/07/2014									
Homeowners' Tax Credit Application Information									
Homeowners' Tax Credit Application Status: No Application						Date:			