



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: 5/13/26

ONSITE SEWAGE DISPOSAL SYSTEM

P 591042

APPROVAL DATE: 6/9/2026 SP

PERMIT:

Repair Tank

Replacement

A

PROPERTY ADDRESS: 16048 Ed Warfield Road

SUBDIVISION: _____

LOT: _____

TAX ID: _____

CONTRACTOR: Freedom Septic

EMAIL: christy@freedomseptic.com

CONTRACTOR ADDRESS: 2809 Liberty Road, Sykesville, MD 21784

PHONE: 410-795-2947

PROPERTY OWNER: Glen Pederson

EMAIL: _____

OWNER ADDRESS: 16048 Ed Warfield Road, Woodbine, MD 21797

PHONE: _____

SEPTIC TANK SIZE (GALLONS): 1500

TANK MANUFACTURER: 132by1m

PUMP MODEL: N/A

PUMP SIZE

N/A

PUMP TANK CAPACITY:

N/A

DISTRIBUTION SYSTEM:



GRAVITY



PRESSURE DOSED

BEDROOMS: 3

APPLICATION RATE: N/A

TRENCHES:	LINEAR FEET REQUIRED: <u>N/A</u>	INLET DEPTH: <u>N/A</u>
	TRENCH WIDTH: <u>N/A</u>	MAXIMUM BOTTOM DEPTH: <u>N/A</u>
	MINIMUM SPACE BETWEEN TRENCHES: <u>N/A</u>	EFFECTIVE AREA BEGINNING DEPTH: <u>N/A</u>
LOCATION:	New tank location per approved site plan.	
NOTES:	Install new tank per plan Pump crush + fill old septic tank + dry well	

ISSUED BY: S. Page

ISSUE DATE: 6/2/2026

EXPIRATION DATE: 5/13/27

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 TANKS REQUIRED

NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE AT LEAST 100 FEET DOWNGRADE 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: 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.

NOT TO SCALE

Ex Trench

TRENCH/DRAINFIELD DATA

WIDTH N/A INLET N/A BOTTOM N/A
NUMBER OF TRENCHES 1
TOTAL LENGTH 17'
ABSORPTION AREA 1500
DISTRIBUTION BOX LEVEL Top
DISTRIBUTION BOX BAFFLE 1.5' - 2'
DISTRIBUTION BOX PORT 6" Front & Back

SEPTIC TANK DATA

SEPTIC TANK 1 LEVEL yes
MANUFACTURER Baby-lin
CAPACITY 1500 GAL
SEAM LOC Top
TANK LID DEPTH 1.5' - 2'
BAFFLES 6" Front & 4" Back
BAFFLE FILTER ---
MANHOLE LOC Front & Back
6" PORT LOC ---
WATERTIGHT TEST ---
SLOTTED yes
DATE ON LID 5/5/2026

PUMP/SEPTIC TANK LEVEL N/A

MANUFACTURER ---
CAPACITY --- GAL
SEAM LOC ---
TANK LID DEPTH ---
BAFFLES ---
BAFFLE FILTER ---
MANHOLE LOC ---
6" PORT LOC ---
WATERTIGHT TEST ---
SLOTTED ---
DATE ON LID ---

SEPTIC CONTRACTOR ONSITE INSTALLING SYTEM: Dan Farrow
SEPTIC CONTRACTOR ONSITE LICENSED WITH THE STATE OF MD: YES/NO

PRE-CONSTRUCTION NOTES:

6/2/2026 - Design Plan Approved. (SP)

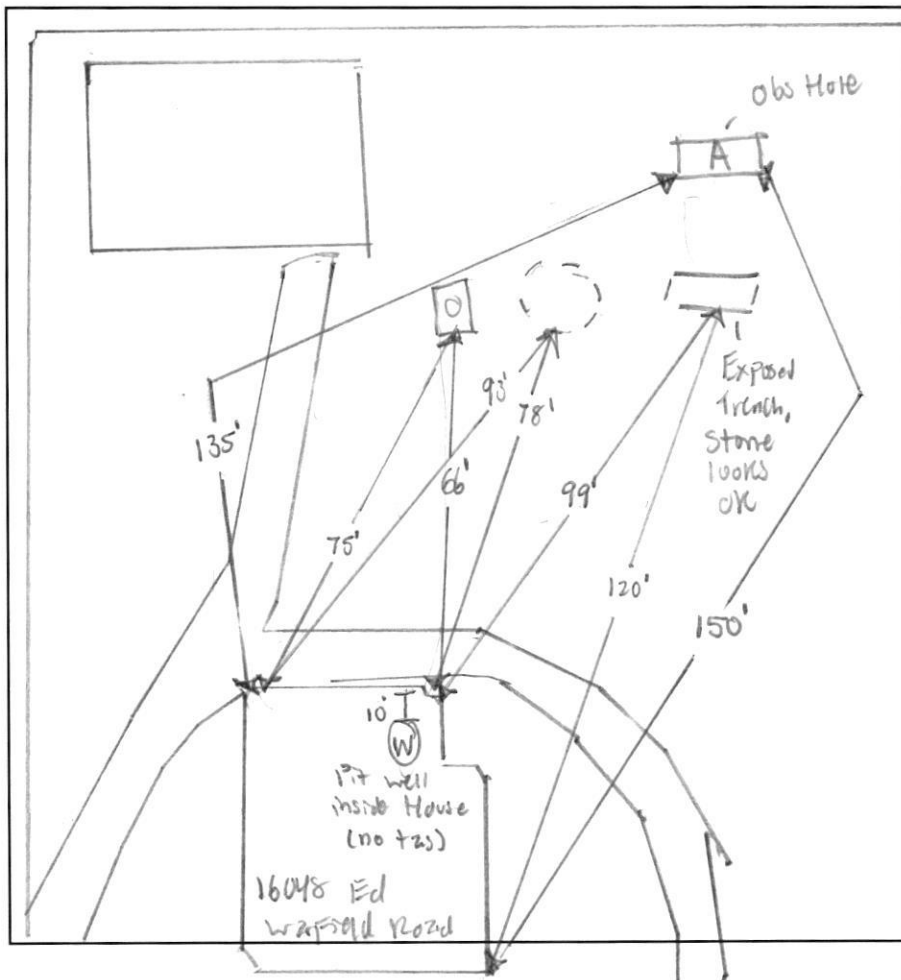
CONTROL PANEL DATA

CONTROL PANEL HEIGHT N/A
(MIN 30")
INSPECTION DATE N/A
INSPECTION: PASS/FAIL (CIRCLE ONE)

INSTALLATION NOTES:

6/9/2026 - Installer onsite for inspection. c/p installed in front of st. st installed w/ 2' of cover. old tank abandoned & old drywell abandoned. Adequate fill before & after tank. OK to Backfill. (SP)

FINAL INSPECTOR S. Page DATE OF APPROVAL 6/9/2026



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
6/2/2026	→	Visual	Inspection				

A

Dark Brown
102m
SBK

1' Light Brown
Clay 102m
SBK

3' Reddish Brown
Silty 102m

5.5' Light Brown/
reddish Brown
Silty 102m
Fine
granular w/ clumps

12' Light Brown
Silty sand 102m
Very Fine

15' < 50% rock

REMARKS Seal + wire replacement laid out onsite, to make fall back to be next to ex st.

SANITARIAN _____ BACKHOE _____ OTHERS _____

TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____

Approved Septic System Plan

Howard County Health Department

Signature

[Signature]

Date

6/2/2026

Date

Signature

Approved Septic System Plan

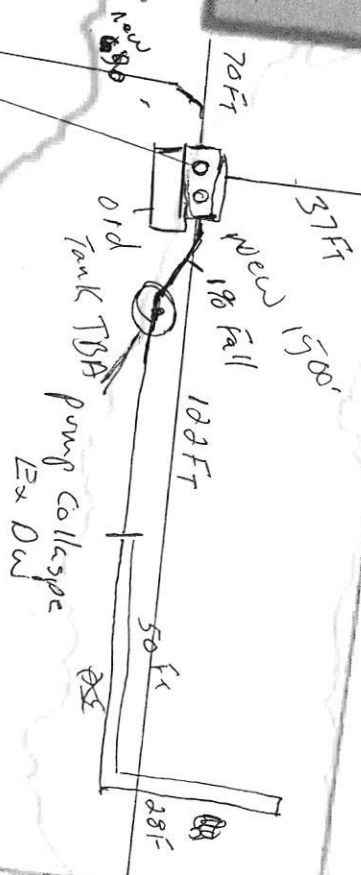
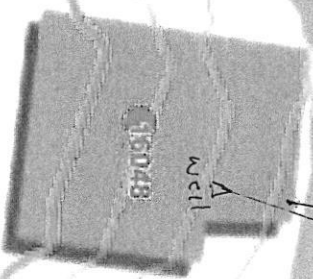
Howard County Health Department

ED WARFIELD RD

Ed Warfield Rd

ED WARFIELD RD

540



Tank Replacement-1500gal 2comp

Installer: Freedom Septic Service

2809 Liberty Rd

Sykesville md
410-795-2947

Owner: Glen Pederson

16048 Ed Warfield Rd

woodbine md

240-994-7564

Glenpedersen@rockwell.com

2 Bed room

Plan Repair: Dan Farnon

MD License #: 00387

HOME LAND

ENVIRONMENTAL

p:443-995-5385 | info@homelandhealthyhomes.com | www.homelandhealthyhomes.com

Date: May 4, 2026 Name of Evaluator: Mitchel Ruhkamp Time: 8:15 AM Property Address: 16048 Ed Warfield Road Woodbine, MD 21797 Recent Weather Conditions: Fair		Ordered By: Pam Astori Buyers: David Dwyer Homeowner Interview: The homeowner interview was sent and received prior to the evaluation.		Occupied: ☒ Yes ☐ No Length of Time Vacant: N/A # of People Living in Home: 2 # of People moving in: 4 Property Age: 1956 System Age: Unknown Last Date of Cleaning: 2024 Recomm'd Pumping Freq: 2-3 Years	
Liquid level in tank is: ☐ Above Normal ☒ Normal ☐ Below Normal		Bottom Solids Depth: 13 Inches			
Depth of tank: 18 Inches		Type of Tank Access: Lid on Tank		Depth of tank access: 18 Inches	
Maintenance appears: ☐ Good ☒ Fair ☐ Poor		# of Bedrooms: 4		Depth to Distribution Box: N/A	
Effluent Filter present: ☐ Yes ☒ No		Previous high liquid level: ☐ Yes ☒ No		Distance to well: ~100 Feet	
Records Search: Records were requested but were not received from Howard County prior to the evaluation.					
Were there any impermeable surfaces above the septic system (i.e. driveway)? ☐ Yes ☒ No					
Type of Tank		Tank Composition and Size		Type of Absorption System	
☒ Septic Tank (1 Tank)		☐ Metal ☒ Cinder Block ☐ Plastic		☒ Leaching Field ☐ Raised Mound	
☐ Aeration System				☒ Drywell (Number of: 1) ☐ Cesspool	
☐ Other:		Tank Size: Unknown		☐ Unknown: _____	
System Component		Condition		Comments	
Septic Tank		☐ Acceptable ☒ Unacceptable ☐ Needs Further Evaluation		The septic tank is composed of cinder block and is a unknown volume. The block tank is 18 inches below grade and is accessible via the excavated lid on the center of the septic tank. The front baffle and back baffle are both in place and both are composed of cast iron. Currently, there are 13 inches of solids in the block tank. Block tanks are unacceptable because they are prone to leaking and lack structural integrity over time. A licensed septic contractor will need to remediate the septic tank. Remediation should include replacing the block tank with a structurally sound, watertight septic tank after permits have been issued by the local county health department. Please refer to page 2, and the OSDS PTI form for further information.	
Absorption System		☒ Acceptable ☐ Unacceptable ☐ Needs Further Evaluation		One drywell and what appears to be an overflow drainfield were located during inspection. There is no apparent access to the drywell at grade. It is recommended access be installed to grade on the drywell to monitor future status. The sides of the drywell were probed and found to be dry within 36" below grade. The area over the believed overflow drainfield was probed and found to be dry within 55 inches below grade. Approximately 330 gallons of water were introduced to the system with no signs of a backup in the septic tank or effluent surfacing in the yard. The absorption system is acceptable with concern due to the unknown age of the system. Buyers should budget for future repairs and replacement.	

HOME LAND

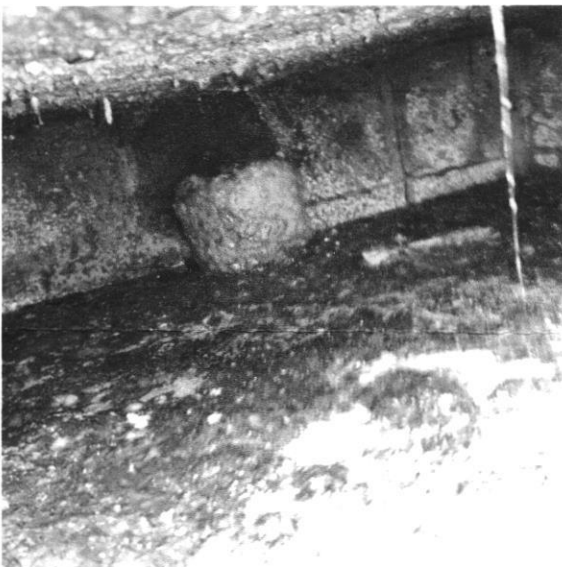
ENVIRONMENTAL

p:443-995-5385 | f:443-267-0098 | info@homelandhealthyhomes.com | www.homelandhealthyhomes.com



Picture 1:

This shows the septic tank in relation to the house.



Picture 2:

This shows the cast iron back baffle and interior of the block tank.

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Picture 3:

This shows the cast iron front baffle and the interior of the block tank.



Picture 4:

Third visual of the interior of the block tank.

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Picture 5:

This shows the drywell in relation to the septic tank.



Picture 6:

This shows the drywell in relation to the location of the believed overflow drainfield.

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Sketch of System

Please refer to the separate sketch of the system.

DISCLAIMERS

- This is a subjective and visual inspection only, the conclusions of which are based on the observed condition of the system components that could reasonably be accessed, and information known about the system at the time this report was completed. There may be unknown historical problems or unseen conditions which may compromise the conclusions stated in this report.
- Suggestions or recommendations for repairs or remediation may result in the need for further repair or remediation once the system components are fully excavated.
- A 'Satisfactory' evaluation does not mean the system will meet the local approving authority's criteria for determining compliance with state code: COMAR 26.04.02.02 D(4).
- The evaluation of the Sewage Disposal System as reported is based on the conditions observed on the day of the inspection.
- This report is neither a WARRANTY nor does it GUARANTEE continued acceptable functionality or performance of the Sewage Disposal Systems operations.
- If the house has been unoccupied the findings in this report may not be accurate, as limited or no use of the system may conceal or mask problems that may be revealed under typical sewage loading.
- If the general ground condition is excessively wet at the time of inspection, the findings in this report may not be accurate, as ground moisture may cover or hide septic effluent that may be on or near the ground surface.
- If the house is vacant or the conditions excessively wet during inspection, it is recommended that the system be reevaluated at a later date and/or alternate techniques be used to address those potential issues.
- Payment and/or use of this evaluation signify understanding and acceptances of the above clauses, as well as any noted faults with the system.

Representative's Signature:		Date: 5/4/2026
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Maryland On-Site Sewage Disposal System Inspection Report



** For this inspection to be considered a proper inspection, all sections must be completed**

Pre-Inspection Information

Property Information

Address: 16048 Ed Warfield Road

City: Woodbine

State: MD

Zip Code: 21797

Permitted # of Bedrooms: ?

Build Year: 1956

Water Supply: Well

Property Type: Single Family Home

If Other:

Comments: Please refer to separate septic evaluation from Homeland Environmental.

Owner Information/ Interview

Last Name: Unknown

First Name: Unknown

Number of Occupants: 2

Number of Years Occupied: ~25-26

If Vacant, Date Vacated (mm/dd/yyyy): N/A

In-Home Business: No

Type:

Has the Property Recently had a Septic Inspection:

Date:

Any Septic System Issues:

Type:

Comments: No knowledge of any recent septic inspection.

Document Search Information

Document Request Date: 4/24/2026

Septic Permit Reviewed: No-Explain in Comments

Permitted Septic System Components:

Septic Tank:

Install Year:

Size: gal

BAT Unit:

Install Year:

Manufacturer:

Distribution Box:

Pumping Chamber:

Absorption Type:

Total Trench Length/ Width: Ft

Bed Size (L/W): Ft

Absorption Component Depth: Ft

Comments: No records on file.

On-site Inspection

Start Date: 5/4/2026

Completion Date: 5/4/2026

Crawl Space/ Basement Evaluation

Number of Drain Pipes Exiting Foundation Wall 1

Describe Each Pipe and Source: All plumbing exits the house through one sewer line.

Does Plumbing Evaluation Confirm all Wastewater is Directed into the Septic System: Yes

Water Treatment

Does the House have any Water Treatment Devices: Yes If Yes, Number: 2

Describe each Water Treatment Device: Sediment filter (x2), no discharge.

If any, where is the Water Treatment Discharge Directed:

Sewer Line Outside of Foundation

Pipe Material: Cast Iron

Cracks/ Breaks:

Blockage:

Comments: No camera introduced to sewer line during inspection due to the block composition of the tank. Please refer to the separate septic evaluation from Homeland Environmental.

Grease Trap

Grease Trap: No

Size: (Gal)

Construction:

Liquid Level:

Proper Baffle:

Comments: N/A

Septic Tank

Septic Tank: Yes

Number of Tanks: 1

Total Size of Tank(s): Unknown (Gal)

Type of Tank(s): Single Compartment

Construction: Block

Liquid Level: Normal

Evidence of High Water Staining: No

Effluent Filter: No

Inlet Baffle: Yes

Outlet Baffle: Yes

Baffle Condition: Good

Access: Below Grade

Evidence of Ground or Surface Water Intrusion: No

Comments: Please refer to separate septic evaluation from Homeland Environmental.

Best Available Technology Unit (BAT)BAT Unit: Manufacturer: Model: Power to Control Panel: Control Panel: Control Panel Alarm: Last Service Date: Was Last Service Date more than 365 days: Comments: **Distribution Box**Distribution Box: Number of Drainlines leaving Box: Distribution Box Level: Is there Equal Distribution to Drainlines: Liquid Level: Comments:
Pumping ChamberPumping Chamber: Access: Liquid Level: High Water Alarm: Alarm Properly Functioning: Separate Float Tree: Pump Elevated off the Bottom of the Tank: Electrical Connections: Comments: **Soil Absorption System**Absorption Type: Observation Pipes (OP): OP Water Depth: Trenches Probed: Describe Observation: "55" below grade."/>Evidence of Surfacing Effluent: Describe: Comments:
Other On-Site Disposal Systems (OSDS) Components and Systems

Detail all other OSDS components not covered in the above sections.

Comments:

OSDS Testing

Hydraulic Load Test

Hydraulic Load Test Performed: Testing Volume: Gal Elapsed Time: Min

Comments:

Dye Test

Suspicious Liquid Discharge on or near the Property:

Dye Test Performed: Reason:

Comments:

Tank Pump Out

Tank(s) Pumped: Number of Tanks Pumped: Total Gallons Pumped:

Any Flow into Tank from Outlet Pipe: Any Groundwater Entering the Tank:

Does the Tank Appear to be Watertight:

Comments:

Summary/Conclusions

Wastewater Collection System		☒ Satisfactory ☐ Unsatisfactory ☐ Satisfactory with Concerns
Conveys all Wastewater to Sewer Line:		
Sewer Line		☐ Satisfactory ☐ Unsatisfactory ☒ Satisfactory with Concerns
Grease Trap	N/A	☐ Satisfactory ☐ Unsatisfactory ☐ Satisfactory with Concerns
Septic Tank		☐ Satisfactory ☒ Unsatisfactory ☐ Satisfactory with Concerns
BAT Unit	N/A	☐ Satisfactory ☐ Unsatisfactory ☐ Satisfactory with Concerns
Distribution Box	N/A	☐ Satisfactory ☐ Unsatisfactory ☐ Satisfactory with Concerns
Pumping Chamber	N/A	☐ Satisfactory ☐ Unsatisfactory ☐ Satisfactory with Concerns
Soil Absorption System		☐ Satisfactory ☐ Unsatisfactory ☒ Satisfactory with Concerns
All other OSDS components	N/A	☐ Satisfactory ☐ Unsatisfactory ☐ Satisfactory with Concerns

Does any component of the OSDS need to be repaired or replaced: Yes

Explain: A licensed septic contractor will need to remediate the block tank. Remediation should include replacing the septic tank after permits have been issued by the local county health department.

In my professional opinion this OSDS is properly functioning base on permitted capacity:

My Inspection verifies the OSDS is consistant with the septic permit:

If listed for sale, does the number of bedrooms advertised match what is legally permitted:

Comments: No records received prior to inspection.

Check with the Approving Authority for permitting requirements before any repair is performed to the septic system.

****ATTACH ALL DOCUMENTS PROVIDED BY THE APPROVING AUTHORITY**

THIS INSPECTION REPORT DETAILS COMPONENTS AND THE PRESENT CONDITION OF THE ON-SITE SEWAGE DISPOSAL SYSTEM FOR THE ADDRESS LISTED IN THE PROPERTY INFORMATION SECTION OF THIS REPORT. THE CONCLUSIONS OF THIS REPORT DO NOT GUARANTEE OR WARRANTY THIS OSDS WILL FUNCTION IN THE FUTURE.

This inspection of the septic system is an evaluation of function and is not an evaluation that the system meets current State regulations. The owner should not assume future expansion of the home is possible without additional evaluation completed by the Approving Authority.

I attest that I have properly completed an inspection of the OSDS at this property. This inspection includes information obtained from the property owner, or representative, and a document search from the Approving Authority. I have completed all sections pertaining to components of this OSDS. The conclusions of this report are my professional opinions based on my training and experience inspecting OSDS.

First Name: Mitchel

Last Name: Ruhkamp

License Number: **01679**

Signature: 

Date: 5 - 4 - 26



HOWARD COUNTY HEALTH DEPARTMENT

91042

CODES

DATE

5/13/26

ps

Received
From

Freedom Septic

For

Tank Replacement 16082462field

Two hundred eighty eight

Dollars

00/100

Received By

[Signature]

☐ CASH

☐ CHECK

NO.

00

\$

288 | 00



HOWARD COUNTY HEALTH DEPARTMENT

91042

CODES

DATE

5/13/26

ps

☐ CASH

☐ CHECK

NO.

00

Received
From

Freedom Septic

For

Took Replacement 11048246 Field

Two hundred eighty eight

Dollars

\$

288 | 00

Received By

[Signature]

RECEIPT

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

Application: WS-SP-APP-26-00108
Application Type: EnvHealth/Well and Septic/Sewage Disposal System/Application
Address: 16048 ED WARFIELD RD, Woodbine, 21797

Receipt No.	15306					
Payment Method	Ref Number	Amount Paid	Payment Date	Cashier ID	Received	Comments
Credit Card		\$288.00	05/13/2026	SMARTIN		

Owner Info.: PEDERSEN GLEN EDWARD
16048 ED WARFIELD RD
WOODBINE, MD 21797

Work Description:

Receipt Summary**Trans NBR** : 15306**For Permit Nbr**: WS-SP-APP-26-00108**Business Date** : 05/13/2026 02:09:35PM**Today Date** : 05/13/2026 02:10:03PM**Permit Fee Due**: \$288.00**Admin Fee Due** : \$0.00**Total Amt Paid**: \$288.00**Received** :**Operate ID** : SMARTIN**Cash Drawer ID**:

Credit Card Tendered : \$288.00**Change Due** : \$0.00**Payor** :**Print Receipt****Cancel**

Receipt Summary**Trans NBR** : 15306**For Permit Nbr:** WS-SP-APP-26-00108**Business Date** : 05/13/2026 02:09:35PM**Today Date** : 05/13/2026 02:10:03PM**Permit Fee Due:** \$288.00**Admin Fee Due** : \$0.00**Total Amt Paid:** \$288.00**Received** :**Operate ID** : SMARTIN**Cash Drawer ID:**

Credit Card Tendered : \$288.00**Change Due** : \$0.00**Payor** :**Print Receipt****Cancel**

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

x tank replacement - 1,500 Gallon 2 Compartment
Existing system design

- ☐ Drywell
- ☐ Trench
- ☐ Mound
- ☐ Unknown
- ☐ Other: _____

Is discharge surfacing on the ground?

___ Yes
 ___ No

Additional Comments:

from failed inspection

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: _____
 ___ No

Was a visual inspection of the sewage line conducted?

___ Yes
 ___ No

Blockage Leading to the field
 ___ Yes Explain _____
 ___ No

*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: Freedom Septic Service Contractor's Phone: 410.795.3847
 Contractor's Address: 2809 Liberty Rd Sykesville, MD 21784
 Property Address: 110048 Ed Warfield Rd County File: _____
 Subdivision: 1003 Lot: _____ Year Built: 1956
 Owner's Name: Glen Pedersen Existing bedrooms: 4
 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