HOWARD COUNTY HEALTH DEPARTMENT

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

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

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME _____

PROPERTY ADDRESS 5325 Kerger Road (STREET) Ellicott City (TOWN) 21043 (ZIP)

TAX ACCOUNT # 185527 TAX MAP 0031 GRID 0022 PARCEL 0654 LOT NO. 48 PROPOSED LOT SIZE (ACRES) 3+

ZONING CATEGORY _____ TIER _____

PROPERTY OWNER(S) Phillip Quick

DAYTIME PHONE _____ CELL 410 790 9066 EMAIL pquickjr@gmail.com

MAILING ADDRESS 5325 Kerger Road (STREET) Ellicott City (CITY, STATE) 21043 (ZIP)

APPLICANT Hatfields Equipment Inc RELATIONSHIP TO OWNER: Contractor

DAYTIME PHONE 301 490 4289 CELL 410 984 0101 EMAIL khatfield@hatfieldsequipment.com

MAILING ADDRESS P O Box 519 Annapolis Junction MD 20701 (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.

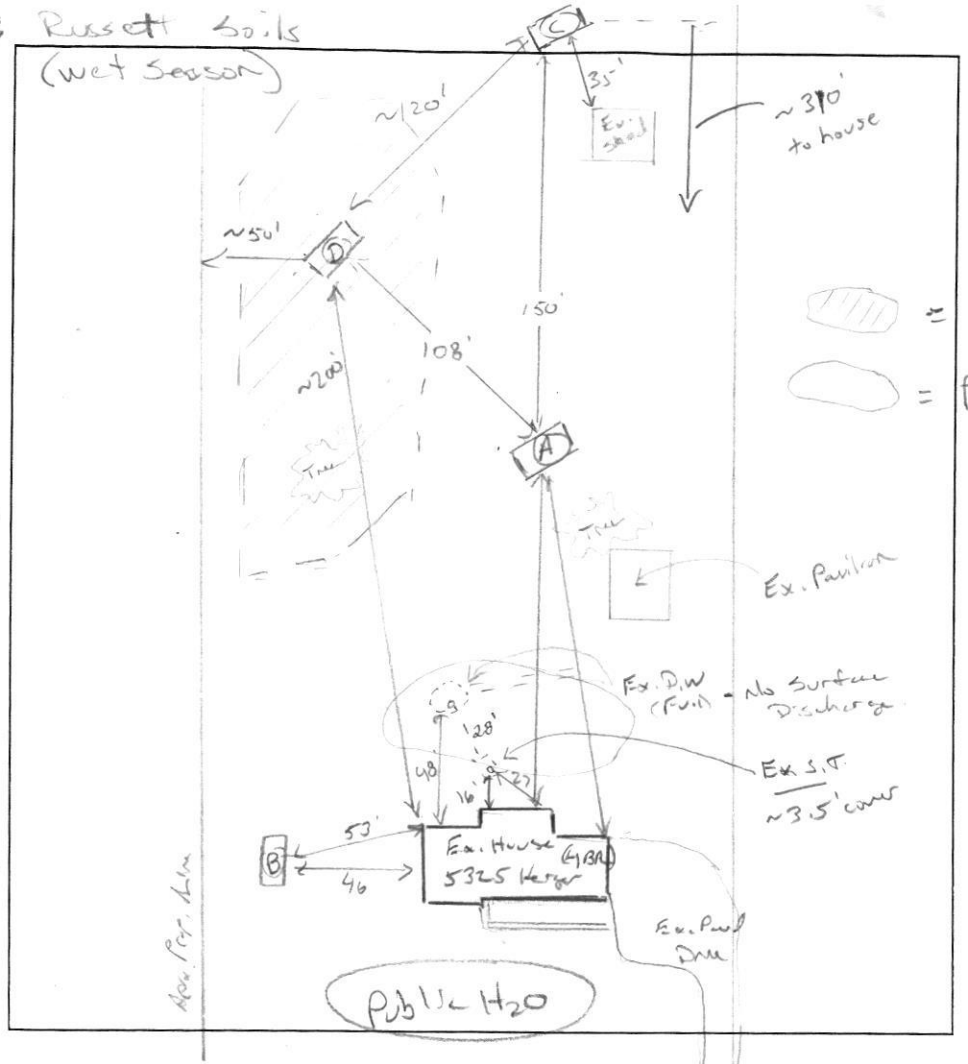
By signature of this application, I hereby grant Howard County Health Department officials the right to enter onto the property for the purpose of inspecting the property as directly related to the requested permit/service.

K. Hatfield 4/09/26

SIGNATURE OF APPLICANT DATE

A/P _____

* Note: Russett Soils (wet season)



A

2' 1i Br/Y CL mCo SBK

4' R d/Br CL mCo SBK ribbons 1/2" CW, sticky Few NCA

6' 1.br/Y CL MF BL, CS, ribbons 1/2"

7' 1.br/Y SiCL WK FSBL micaceous clay films 5% ss prisms

10' Br/Y FSiCL mCo pL

13'6" 15% Saprolite WK Iron Inclusions 15% ss prisms

Br/Y/Rd SiCL mFpL, Tight, 10YR

B

1' Drk Br L WK Co SBK roots

40" Rd Br/Y CL mCo SBK sticky Grey inclusions Redox

6' ↓

C

2' Br L mCo SBK, roots

1i br/Red inclusions 1.br/Y SiCL St. Co SBK sticky, y, CS

4' 1i Br/Y CL CS, mCo SBK sticky

9' Hard Bottom

D

12" Drk Br CL WK Co SBK

1i br/Y CL MFSBK CS, sticky

4'½' Br/Y SL WK Co pL Friable, granular

7' Br/Y FSL WK Co pL Friable, micaceous

11½' Hard Bottom

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
4/28/2026	(A)	7'6"/13'6"	00:21	No movement after 2hrs →			F
	(B)	Fail	— Redox @ 41				F
	(C)	Did not test not suitable —					F
	(D)	5'/11½'	00:22	00:23	00:24	1	P
		Repeat	00:24	00:26	00:29	3	P
		H2O pwd @ 11½'				~7mpi	P

REMARKS Soils very throughout. May need to stay low in elevation above perc D

SANITARIAN K. Wolf BACKHOE Nathan = Hat Falls OTHERS Todd, Ken Sr., Homeowner

TEST HOLES USED IN SDA 4 AVG. PERC TIME _____ SQ. FT/BR _____

TRENCH WIDTH 3' INLET DEPTH 3' MAX. BOT DEPTH 7' EFFECTIVE S/W 5'-7' (.62)

4BR = 600/1.2 = 500 ÷ 3 = 168 (.62) = 103 LF (2 × 52)

PERMIT

P 48509

SEWAGE DISPOSAL SYSTEM

A REPAIR

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT

INDEXED

DATE 9/15/92

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE SYSTEM APPROVED 9/16/92

3132640 01-2470

PECTOR

Keep w/ File until Approved.

Arlie Diehl

ALTER X

ADDRESS 5325 Kerger Road

8-4274

SUBDIVISION ROY D EMERY UNKNOWN SUB DIV LOT 4B

ad

PROPERTY OWNER Arlie Diehl

ADDRESS 5325 Kerger Road

SEPTIC TANK CAPACITY _____ GALLONS

1979
old A 29129
old P 30357

NUMBER OF BEDROOMS 4

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 84

REPAIR - PURPOSE = Septic System has failed.
Call for inspection when ground is opened so sanitarian can recommend repair. 9/14/92

9/15/92 DEEP TRENCH OFF OLD DRY WELL 11FT DEEP
INLET 5 FT DEEP 6 FT STONE 2 FT WIDE
PLACE THE DITCH OFF THE OLD DRY WELL
RUNNING ALONG LEVEL GROUND TOWARD
THE REAR RJH

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

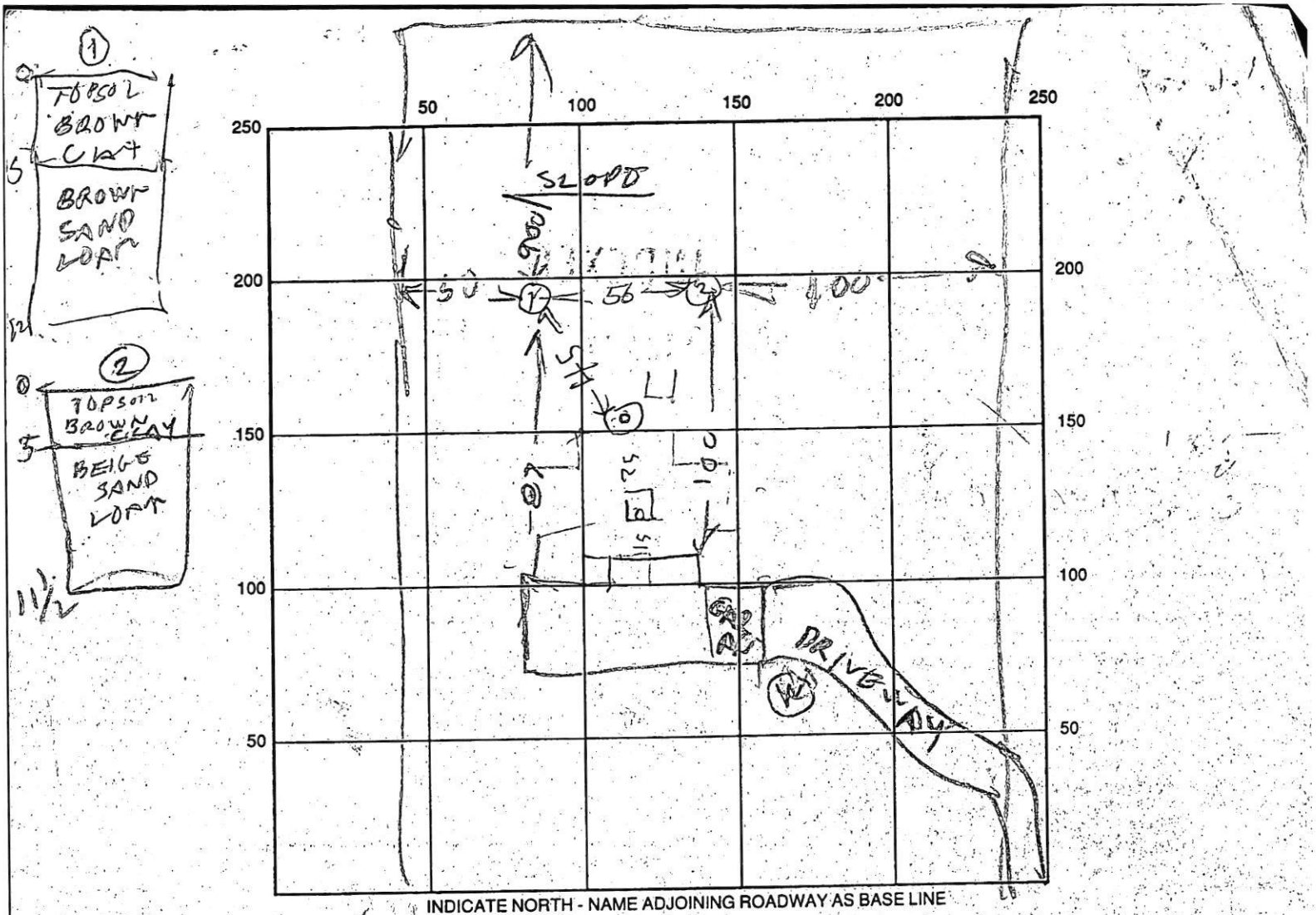
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

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)

P# 48509



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL N/A CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 11 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3½ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH 84/5 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: 9/15/92 AM city water well over 150 FT from Septic Dont not used. System installed 1979, SOIL OK. HOME OWNER TO MEASURE DEPTH OF TRENCH RH
9/15/92 PM = TRENCH DUG ADD STONE & CALL RH
9/16/92 9:40 AM STONE ADDED

DATE SYSTEM APPROVED 9/16/92 INSPECTOR Raymond Hodge

Final

APPLICATION

#39085 A 29129

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE P

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 1st

DATE 11/2/78

Septic Tank - 1250 gal. - 1500
Dry Well - ~~600~~ sq ft absorbent sidewall area to begin below the first 4½ ft of avg road grade. Max depth permitted for DW is 11½ ft below avg grade. Place 1st Dry Well 135 ft from front lot line and 80 ft from left side as seen when facing from the front. Place second DW 45 ft directly behind first one and connect in series. OK to install trench 30 ft long 11½ ft deep 2 ft stone - Trench to follow contour - to be inspected before gravel is installed.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER ~~Roy Emery property~~ Arlie Dickl off dw after 5' east buffe

ADDRESS 5203 Arbutus Ave. PHONE
Balto., Md. 21227

PROPERTY LOCATION:

SUBDIVISION LOT NO. 4-B

ROAD AND DESCRIPTION 5325 Kerger Road

SIZE OF LOT ? TYPE BLDG. ~~3~~ 3 or 4 bedrooms

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT /s/ Don Reuwer, Rhett Realty

BLDG. PERMIT SIGNED AND RETURNED 5/7/79
Serial No. 39085

APPROVED BY RH FOR DWell DATE 3-20-79

REJECTED BY FOR DATE

HOLD PENDING FURTHER TESTS DATE

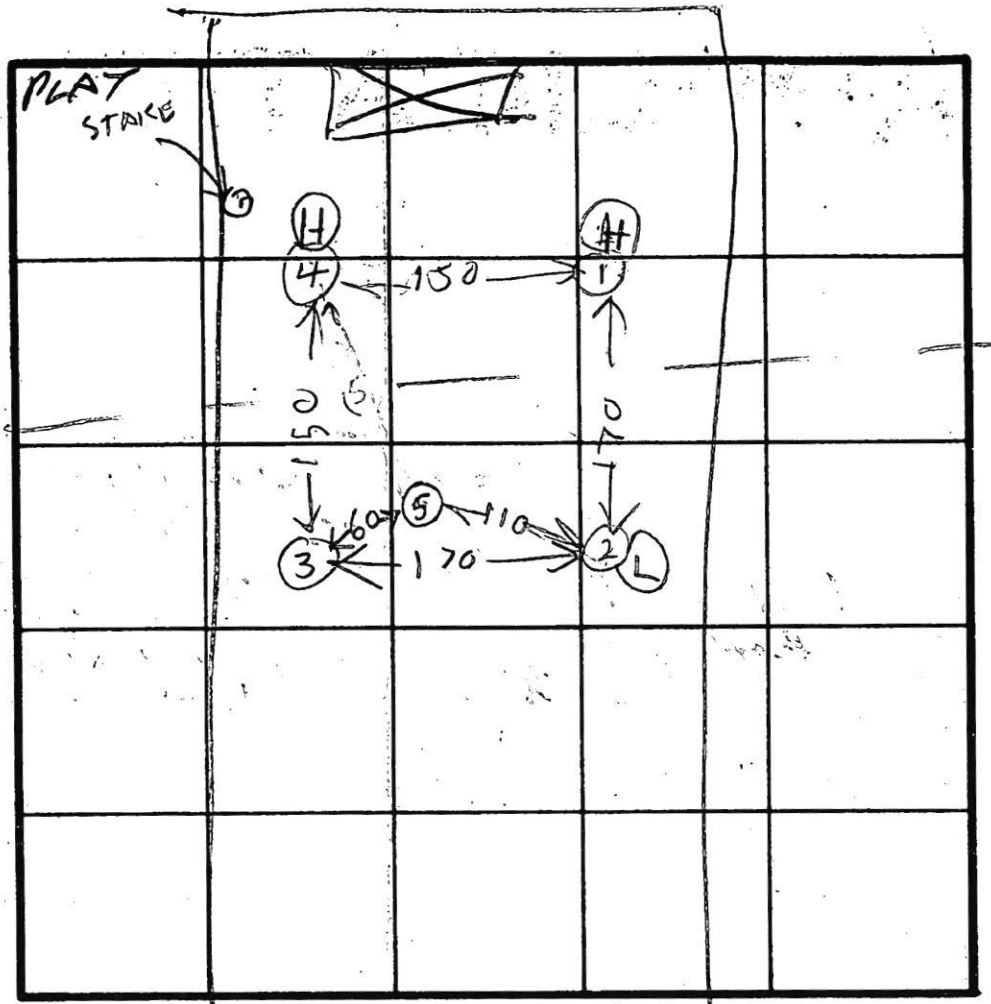
REASONS FOR REJECTION OR HOLDING 11/20/78 PERC OK BUT NO HOUSE SITE
THIS LOT TOBE COMBINED WITH ADJACENT LOT RH
3/5/79 HELD FOR REVIEW DM SAID ANOTHER #100 NEEDED BECAUSE THREE OF PERC HOLES DUG ON LOT 4B BUT TWO EXTRA PERC HOLES DUG ON EXTRA LAND FOR WHICH NO PERC TEST FEE HAD BEEN PAYED RH

THIS IS NOT A PERMIT

SEE ATTACHED PLAT

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
11/24/78	1S	5	210	230	230	355	25
	1D	13	210	218	218	230	12
	2S	4	213	217	217	220	3
	2D	13½	213	232	232	245	13
	3S	5	221	232	232	252	little open
	3D	14	221	252	little open		
	4S	3½	227	228	228	229	1
	4V	12	NOT TESTED SOFT SAND		DANGER OF CAVE IN		
	5S	3	306	324	little open	FAIL	
11/24/78	5D	12	307	304	309	311	2
	5M	5½	322	326	326	329	3

REMARKS NO HOUSE ON THIS BUT LOT LINES TO BE CHANGED

TYPE OF SOIL

TESTED BY BH ALSO PRESENT DENNEY DEURA D. REUER