

1572183

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

**APPLICATION**

**FOR PERCOLATION TESTING AND SITE EVALUATION**

**PROPERTY LOCATION**

SUBDIVISION/PROPERTY NAME \_\_\_\_\_  
 PROPERTY ADDRESS 4709 Linthicum Road Dayton MD 21036  
STREET TOWN ZIP  
 TAX ACCOUNT # \_\_\_\_\_ TAX MAP \_\_\_\_\_ GRID \_\_\_\_\_ PARCEL \_\_\_\_\_ LOT NO. \_\_\_\_\_ PROPOSED LOT SIZE (ACRES) \_\_\_\_\_  
 ZONING CATEGORY \_\_\_\_\_ TIER \_\_\_\_\_

**PROPERTY OWNER(S)** Larry Livesay  
 DAYTIME PHONE \_\_\_\_\_ CELL 443 615 4589 EMAIL \_\_\_\_\_  
 MAILING ADDRESS 12295 Howard Lodge Road Sykesville MD 21784  
STREET CITY, STATE ZIP

**APPLICANT** Hatfields Equipment Inc RELATIONSHIP TO OWNER: \_\_\_\_\_  
 DAYTIME PHONE 301 490 4289 CELL 410 984 4880 EMAIL khathfield@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 3 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:

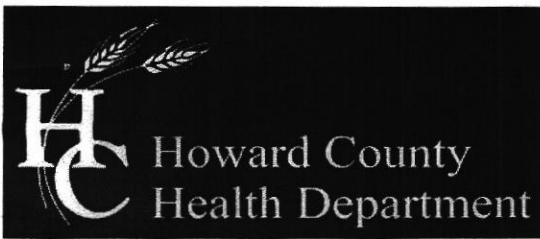
- THIS APPLICATION IS VALID FOR TWO(2) YEARS FROM DATE OF FEE PAYMENT AND APPROVAL IS BASED UPON HEALTH OFFICER SIGNATURE OF A PERC CERTIFICATION PLAN PRIOR TO EXPIRATION OF THIS PERMIT.
- THE APPLICATION FEE IS NON-REFUNDABLE
- THIS APPLICATION MUST BE ACCOMPANIED BY ALL APPLICABLE FEES AND A SUITABLE 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.

Ken Hatfield For Hatfield 9/27/22  
 SIGNATURE OF APPLICANT DATE

HoCo Health Depart  
SEP 27 2022  
Environmental Health



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

Twitter: HowardCoHealthDep

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SEWAGE DISPOSAL SYSTEM SPECIFICATIONS WORKSHEET

Address: 4709 Linthicum

Subdivision: N/A Lot: N/A

Report ~~Initial~~ system: Application rate: 1.2 Effective area beginning depth: 4' Bottom maximum depth: 6'

1st Replacement: Application rate: Effective area beginning depth: Bottom maximum depth:

2nd Replacement: Application rate: Effective area beginning depth: Bottom maximum depth:

Design Flow = 150 gallons per day per bedroom

Design flow ÷ application rate = square footage of drainfield required

Linear length of trench required = drainfield square footage x sidewall reduction percentage ÷ trench width

Sidewall reduction credit formula:

(W + 2) / (W + 1 + 2D) x 100 = Percent of length of standard trench where W=trench width and D= depth between effective area beginning depth and trench bottom.

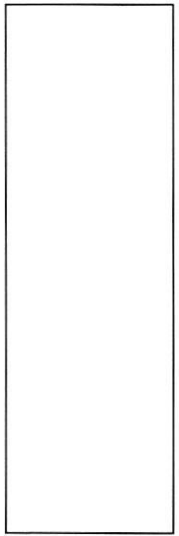
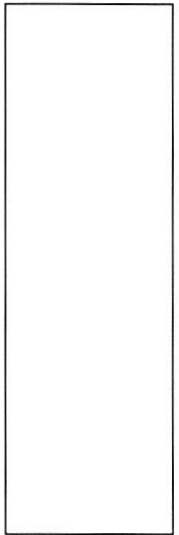
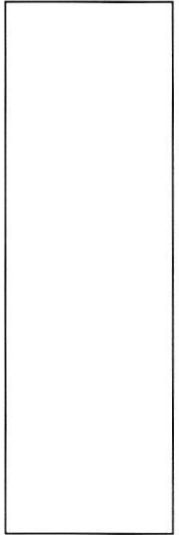
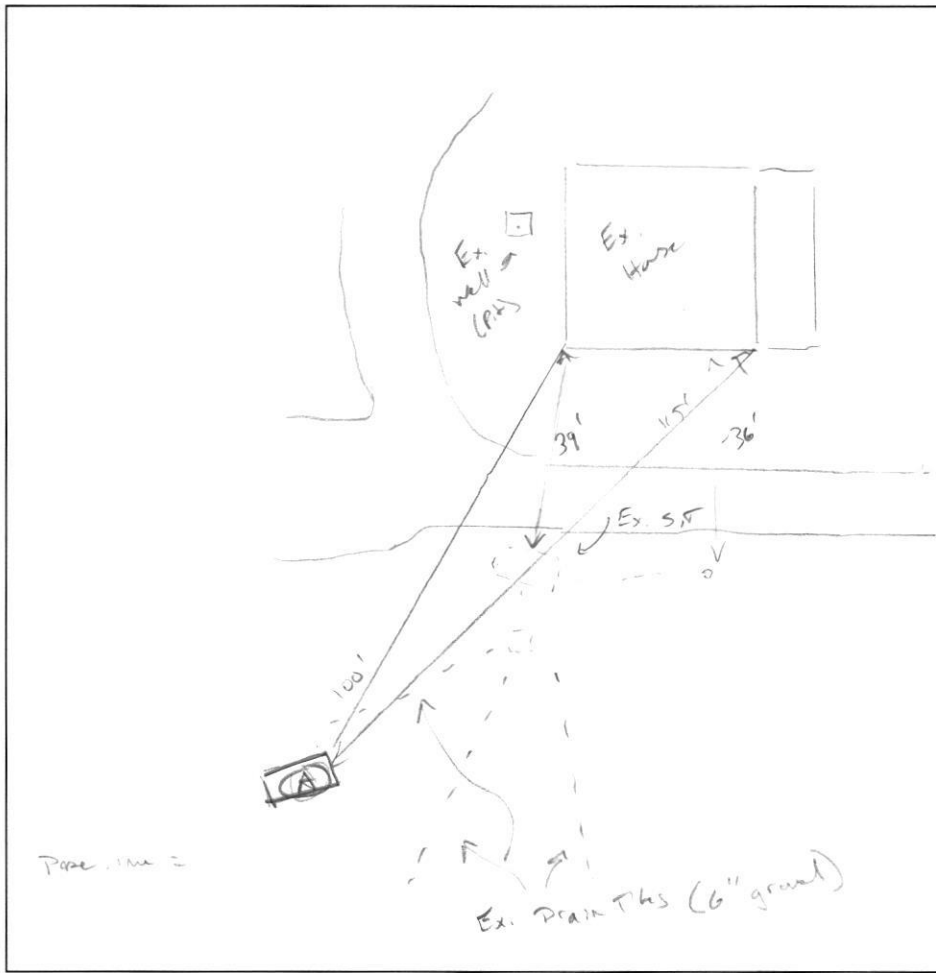
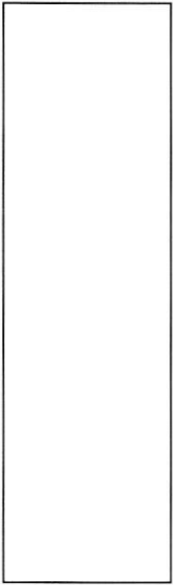
Standard design requirements:

- All trenches must be equal length unless low pressure dosed
All trenches must be on contour
Minimum trench spacing: 10' for all trenches utilizing sidewall reduction credit. Additional spacing may be necessary for any trench using over 3.5' of effective sidewall. In those cases, the spacing formula is 2D + W up to a maximum spacing of 18'.
Minimum trench spacing for trenches with no sidewall credit (bottom area only) is 6' for a 2' wide trench and 9' for a 3' wide trench (spacing is measured edge to edge)
Maximum trench length is 100'
Maximum pipe depth is 4'

Additional requirements:

Inlet: 2.5' - 3' New S.I.T.: 1500g
Bottom: 6' Pump/c-1/2" Ex. S.I.T. / DWI
Length: 77'

Approved: J.K. Vay Date: 10/7/2022



(A)  
 12" Br L. mscr. wts.  
 1" Br/R sl. w/c ssk Fiddle, roots  
 4' moly mca.  
 1" Br/R Rd/Y sl. w/c cop. w/c Fiddle 100% ssk chncl Highly rears  
 7' Br/Rd/Y sl. w/c cop. Fiddle  
 15' H2o sample 4

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
10/7/22	(A)	4'8" / SW	00:46	00:50	00:56	6	P
		5'7"	00:01	00:02	00:04	2	
		re-pour	00:04	00:06	00:10	4	P

REMARKS Ex. ssk (black) leakage, Ex. Div dry

SANITARIAN K Wolf BACKHOE \_\_\_\_\_ OTHERS \_\_\_\_\_

TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR 112 sq ft

TRENCH WIDTH 3' INLET DEPTH 2.5' MAX. BOT DEPTH 6' EFFECTIVE SW 4

$$3BR = \frac{450}{1.2} = 375 \div 3 = 125 = 77 LF$$





# HOWARD COUNTY HEALTH DEPARTMENT

72654

DATE 10/13/22

Received From

Hathfields Equip 301-490-4289

PHONE #

For

Septic Repair - 41109

Linthicum RD.

CASH

CHECK

NO.

4549 One hundred seventy five Dollars

\$ 16500

Received By

A Kemp