

**HAR. JRD COUNTY HEALTH DEPARTMENT**  
120 S. HAYS STREET, SUITE 200 P O BOX 797, BEL AIR, MD 21014-0797

Phone: 410-877-2302,03,04  
Fax: 443-643-0334

New System  
 Repair 50<sup>00</sup>

**ON-SITE SEWAGE DISPOSAL**

**APPLICATION:**

Owner BEARSCH WILLIAM JR. 3729 ABINGDON BEACH RD. ABINGDON MD 21009 410-676-5829

Installer PRESTON GENE 2228 ENGLE RD. FALLSTON MD 21047 410-557-8100  
Last Name First Name Address Phone No.  
PRESTON GENE 2228 ENGLE RD. FALLSTON MD 21047 410-557-8100  
Last Name First Name Address Phone No.

Plumber  Drainlayer Certification No: 1539  Owner

NOTE: Application must be made by a licensed plumber, a licensed drainlayer, or an owner intending to install the septic system.

Exact Address of Building Site 3729 ABINGDON BEACH RD. Tenant House  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ Sec. \_\_\_\_\_

Tax I.D. # 01 039636 Tax Map # 62 Grid 4D Parcel 187 Acreage 3.338

Building Use: 1. Residential \_\_\_\_\_ --No. of Bedrooms 3  
2. Commercial \_\_\_\_\_ --Estimated Use (gal./day) \_\_\_\_\_  
3. Other \_\_\_\_\_ --Estimated Use (gal./day) \_\_\_\_\_

Applicant must attach a plat plan, drawn to scale, showing at a minimum: well site, dwelling site, waste disposal area, and driveway. This office reserves the right to request additional information.

NOTE: THERE WILL BE NO REFUND FOR ISSUED PERMITS

Date: 7/29/09 Signature: Gene Preston Building Permit Application \_\_\_\_\_

**OFFICE USE ONLY**

**On-site Sewage Disposal System Requirements**

1. Septic Tank Capacity \_\_\_\_\_ Gallons All septic tanks must be two compartments and fitted with one or two manhole risers so that both compartments are accessible.  
A. Tank type  Concrete  Plastic/Fiberglass  Grease Interceptor  Other \_\_\_\_\_
  2. Pump Chamber Capacity \_\_\_\_\_ Gallons  Concrete  Plastic/Fiberglass  Other \_\_\_\_\_
  3. Type of system:  Deep Trench  Tile Field  Seepage Pit  Sand Mound  Low Pressure Dose  
 Holding Tanks  Other \_\_\_\_\_
  4. Disposal Requirements: Trench Length \_\_\_\_\_ ft. Width \_\_\_\_\_ ft. Depth \_\_\_\_\_ ft. Other \_\_\_\_\_
  5. Distance between the trenches edge to edge \_\_\_\_\_ ft.
- Percolation Test Results: Minutes \_\_\_\_\_ Sidewall Area \_\_\_\_\_ Clay \_\_\_\_\_ Pit Depth \_\_\_\_\_ Perc Test Date \_\_\_\_\_ Sanitarian \_\_\_\_\_  
Well Information: Year Drilled \_\_\_\_\_ Driller \_\_\_\_\_ Well No. \_\_\_\_\_ Depth \_\_\_\_\_ Yield \_\_\_\_\_  
The septic tank and disposal area must be installed a minimum of \_\_\_\_\_ from any drilled well, shallow well, spring, or stream.  
Special Requirements or Conditions: \_\_\_\_\_ Attachments:  yes  no No. of pages \_\_\_\_\_

JET 500 CF PRETREATMENT BRF

**Please Note:**

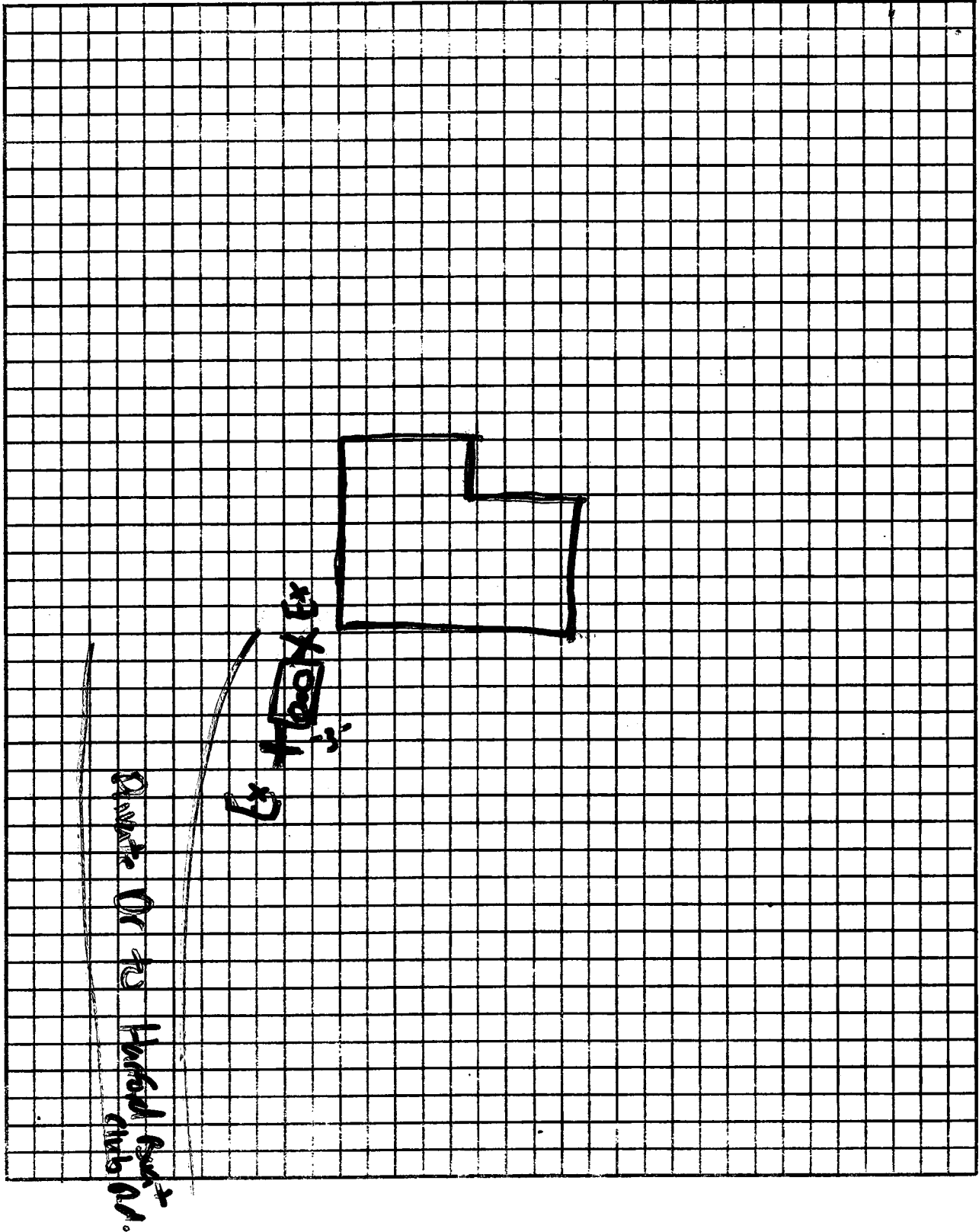
1. The septic system must be installed by a licensed drainlayer or licensed plumber. If the owner intends to install the septic system he/she must contact the Health Department 24 hours prior to installing the system.
2. Install the septic system at highest contour of the septic area with two (2) feet of cover maximum, unless otherwise approved by the Health Department in writing.
3. No filling or grading is permitted in the Septic Reserve Area.
4. The Maryland Department of the Environment recommends septic tanks be pumped once every 5 years or at a frequency adequate to ensure that solids are not discharged from the septic tank.

Sanitary Construction Permit 0921050080

Date Issued 8/17/09 By KMB

Date Inspected 11/15/09 By gjh

Application expires one (1) year from date of issuance. All work must be inspected prior to completion. Call 24 hours prior to completion to set up an inspection. Scale drawing on other side for use by inspector only.



In accordance with Title VI of the Civil Rights Act of 1964 and Regulation 504 of the Rehabilitation Act of 1973. The Harford County Health Department prohibits discrimination against anyone because of race, color, national origin or because of physical or mental handicap. This prohibition includes the provision of Departmental Services and Benefits, the operation of its facilities and Departmental Employment Practices. This policy applies to all programs conducted by The Harford County Health Department, including all state and/or federal grant programs. Any complaints may be directed to The Compliance Division, Department of Health and Mental Hygiene, 201 West Preston Street, Baltimore, MD. 21201, or The Office of Civil Rights, Washington, DC 20201

**INTERIM PERMIT**

**This permit is for an interim individual sewage system. The applicant or any future owner must discontinue use of this individual system and connect to the public system when the public system becomes available.**

✓  
critical  
area

# Chesapeake Bay Septic Tank LLC

Authorized Jet Distributor

P.O. Box 104, Jarrettsville, MD 21084 www.chesapeakebayseptic.com Ph.: 410-682-6996  
Email: sales@chesapeakebayseptic.com

## Pre-treatment Service Policy

Owner <b>William Bearsch Jr.</b>	Unit Specs: <b>Jet J500CF</b>	Date Prepared: <b>12/1/2014</b>
Street Address <b>3729 Abingdon Beach Rd.</b>	Installation Date: <b>11/5/2009</b>	
City, State, ZIP <b>Abingdon, MD 21009</b>	County: <b>Harford</b>	
Mailing Address <b>COTTAGE HOUSE</b>	Contract Period: <b>1 Yr.</b>	
City, State, ZIP	Contract Effective Start Date: <b>11/5/2014</b>	
Owner Contact Info Cell: <b>410-837-3689</b>		
Home: <b>410-678-6828</b>		
Work: <b>410-678-6828</b>		
Email: <b>elittleherbie@gmail.com</b>		

**\* This contract is transferable but not refundable \***

Upon receipt of this signed agreement and payment, Chesapeake Bay Septic Tank LLC will perform bi-annual

service at above referenced premises of specified pre-treatment unit, include:

- Removal of aeration unit, inspection, adjustment, cleaning, field service of unit
  - Inspection, cleaning and adjustment, if necessary, of surface skimmer (if equipped)
  - Inspection, cleaning and adjustment, if necessary, of tube settler (if equipped)
  - Examination of final effluent for color and odor, if there is access to time of visit
  - Inspection, backwashing and cleaning of filter (if equipped)
  - Cleaning/pumping not included. Sludge thickness will be gauged and owner will be informed if pumping is needed.
- This service can be done by Whiteford Septic Service at 410-557-1100.
- Service will be done at discretion of CBST, leaving report at front door when complete.

**RECEIVED**

SEP 24 2015

HARFORD COUNTY HEALTH DEPT.  
ENVIRONMENTAL HEALTH

Service per year: **\$250.00**

**\*\*PLEASE REMIT PAYMENT WITH SIGNED AGREEMENT\*\***

**Emergency service:**

One (1) of the two (2) service calls covered under this agreement may be used for emergency service if done during normal business hours, not to include weekend or nights.

If removal and reinstallation of aeration unit is necessary on an emergency service call, there will be no service or labor charge. Homeowner will be responsible for parts.

If necessary, entire mechanical unit will be replaced at Homeowner's expense including freight charges.

Service policy ACCEPTED by: <u><i>Elizabeth A. Bearsch</i></u> (Signature of Homeowner or Representative)	Date: <u><i>12/30/14</i></u>
Printed Name: <u><i>ELIZABETH A. BEARSCH</i></u>	
ACCEPTED by CBST LLC: <u><i>Curt D. [Signature]</i></u>	Paid: <u><i>12/30/14</i></u> <u><i># 51081 (\$500)</i></u>

This contract covers the mechanical operation of your system. If the mechanical portion of the system is operating, there is a biological operation taking place in your system. The degree of biological treatment is not covered under this service contract. Treatment to a Standard or Permit Parameter will not be specified by this contract nor is it covered by this contract. If you have to meet a certain Discharge Parameter you may want to hire additional service.

# Chesapeake Bay Septic Tank LLC

Authorized Jet Distributor



P.O. Box 104, Jarrettsville, MD 21084

www.chesapeakebayseptic-tank.com

Ph.: 410-692-5995

Email: sales@chesapeakebayseptic-tank.com

## PRE-TREATMENT START-UP REPORT

Owner: <u>William Bersch "Cottage"</u>	Operator:	Start-up Date:
Street Address: <u>3729 Abingdon Beach Rd</u>	Installed Date: <u>11/5/09</u>	<u>11/5/09</u>
City, State, ZIP: <u>Abingdon, Md 21009</u> County:	BRF Grant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address: <u>(same)</u>	Installer: <u>E. Preston</u> Ph: <u>410 557-8100</u>	
City, State, ZIP:	Electrician: <u>Little Electric</u> Ph: <u>410 692 6561</u>	
Owner Contact Info	Cell:	Permit # <u>09210502530211</u>
Hm: <u>410 676 7129</u> Fax:	Bedrooms: <u>1</u>	Occupants: <u>1</u> Occupancy Date:
Wk: Email:		

### System Specifications

<b>Primary Treatment</b>	<b>Control Panel</b>
Processing Tank: <u>Jet J500 CF</u>	I.D. <u>419417X09209</u>
Septic Volume: <u>500</u>	"On" Timer Setting: <u>30 min</u>
Construction: <u>Concrete</u>	"Off" Timer Setting: <u>30 min</u>
Manufacturer: <u>Monarch</u>	
Aerator Serial #: <u>00 Oct 09 0043</u>	
<b>Filter</b>	<b>Dispersal System Type</b>
<u>A300 - 8 x 18 with alarm</u>	<input checked="" type="checkbox"/> Gravity <input type="checkbox"/> Pumped

### Declarations:

- Jet Inc. start-up procedure was followed
- "For Service Call" label (w/phone #) is affixed to panel
- Homeowner Package was reviewed with
  - Builder on \_\_\_\_\_ (date)
  - Resident on 11/5/09 (date)
- Circuit breakers are on & control panel is latched
- All lids are secured

This system is ready for use:  Yes  No (explain)

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I certify the above to be true and accurate on this date.

Chad Preston  
Signature

11/5/09  
Date

**AGREEMENT AND EASEMENT FOR  
INSTALLATION OF  
BEST AVAILABLE TECHNOLOGY SYSTEMS WITH BAY RESTORATION FUNDS**

THIS AGREEMENT is made this 23 day of July 2009, among William Bearsch Jr., hereinafter referred to as "Owner", and the Harford County Health Department, hereinafter collectively referred to as the "County".

WHEREAS, Owner owns a tract of land located on 3729 Abingdon Beach Road (COTTAGE HOUSE), in the 1<sup>st</sup> Election District of Harford County, Maryland, and the deed to same is recorded among the Land Records of Harford County, Maryland, in Bel Air, and in Liber 3290, Folio 570.

WHEREAS, the Bay Restoration Fund (BRF) may provide a grant for the cost attributable to upgrading an onsite sewage disposal system to the Best Available Technology (BAT) for the removal of nitrogen.

WHEREAS, Owner understands that participation in the Bay Restoration Fund is voluntary.

NOW, THEREFORE, the parties hereto agree as follows:

- A. Owner hereby grants to the County the right to enter upon the property at any reasonable time for access to the system to make periodic inspections and the Owner agrees to provide any information and data requested and needed by the County to develop accurate and thorough test results.
- B. Owner acknowledges and agrees that a manufacturer-approved installer will install the BAT system.
- C. Owner acknowledges and agrees that the manufacturer will provide for the Operation and Maintenance of the BAT for a period of 5 years as a condition of sale of the BAT. After the 5-year period, the Operation and Maintenance contract can be further extended at the behest of the property owner. The County encourages the property owner to continuously maintain an Operation and Maintenance contract during the lifetime of the system.

IMP FD SUKE \$	20.00
RECORDING FEE	20.00
TOTAL	40.00
Res# W403	Rcrt # 87403
JJR JD	Blk # 2463
Aug 11, 2009	11:55 am

D. Owner acknowledges and agrees that the manufacturer appointed Operation and Maintenance provider will have access to the BAT system at all times.

E. Owner acknowledges and agrees that the manufacturer or manufacturer's designee will have access to sample the effluent of the BAT system. Owner acknowledges and agrees that the proposed installation of a BAT system funded by the BRF is voluntary. Owner agrees that there shall be no liability on the part of the County to Owner if this BAT system fails, and that the County does not warrant or guarantee that the BAT system will adequately or properly function.

F. Owner acknowledges and agrees that neither the County nor any of its agents or employees, either officially or individually, underwrites the operation of any system approved by them.

G. The Owner will devote such care and effort to the maintenance of the whole system so that a system malfunction is not the result of poor maintenance, faulty operation, or neglect.

H. The County agrees to grant \$11,250.00 toward the cost of installation of the BAT System, and financial responsibility is limited to this amount.

I. The Owner acknowledges that the BRF grant can only be used for that portion of the OSDS attributable to BAT for the removal of nitrogen.

J. Owner acknowledges in the event the total BRF project cost is greater than \$25,000 the proposal will have to be approved by the Maryland State Board of Public Works.

K. The Owner agrees to contact the County at least twenty-four (24) hours prior to system installation, so that the County can schedule a required inspection.

L. The Owner must install the BAT system according to the manufacturer's recommended plans and specifications approved by the Maryland Department of the Environment (MDE).

M. The Owner agrees and acknowledges that if the installation deviates substantially from the approved plans or changes such that performance of the system is compromised or reduced, BRF funding will not be provided.

N. This agreement shall run with the land and binds the Owner, his heirs, successors, assigns except that the provisions of paragraphs A, C, D, & E shall be binding for a period of 5 years only after installation of the system and occupation of the home. Owner further agrees that he shall inform in writing any purchaser or lessee of the property that the system may require maintenance or other attention. The Owner agrees to record this agreement in the land records of Harford County.

O. This agreement shall not be construed to limit any authority of the County to protect the public health, safety or comfort or to issue any other orders to take any other action which is now or may hereafter be within its authority.

P. This agreement may be voided at the discretion of the County if the system construction is not completed within three (3) months of the effective date of this agreement.

Q. This agreement contains the entire agreement and understanding between the County and the Owner. There are no additional terms other than as contained in this agreement. This agreement may not be modified except in writing signed by each of the parties or by their authorized representatives.

R. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated above.

DATE: 7/23/09

William H. Bousch Jr.  
Owner

DATE: 7/21/09

Kevin Barnaba  
Kevin Barnaba, R.S.  
Program Supervisor  
Bay Restoration Fund Program  
Harford County Health Department

RETURN TO:  
Earl E. Preston Jr. Inc.  
2228 Engle Rd.  
Fallston, MD 21047

410 557 8100

# HARFORD COUNTY HEALTH DEPARTMENT

120 S. HAYS STREET, SUITE 200. P.O. BOX 797, BEL AIR, MD 21014-0797

Phone: 410-877-2302,03,04  
Fax: 443-643-0334

New System  
 Repair 50<sup>00</sup>

## ON-SITE SEWAGE DISPOSAL

### APPLICATION:

Owner BEARSCH WILLIAM JR. 3729 ABINGDON BEACH RD. ABINGDON MD 21009 <sup>7129</sup>  
Last Name First Name Address Phone No. 410-676-5829  
Installer PRESTON, GENE 2228 ENGLE RD. FAULSTON MD 21047 410-557-8100  
Last Name First Name Address Phone No.  
 Plumber  Drainlayer Certification No: 1539  Owner

NOTE: Application must be made by a licensed plumber, a licensed drainlayer, or an owner intending to install the septic system.

Exact Address of Building Site 3729 ABINGDON BEACH RD. (Main House)  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ Sec. \_\_\_\_\_

Tax I.D. # 01 039636 Tax Map # 62 Grid 4D Parcel 187 Acreage 3.338  
Building Use: 1. Residential \_\_\_\_\_ --No. of Bedrooms 3  
2. Commercial \_\_\_\_\_ --Estimated Use (gal./day) \_\_\_\_\_  
3. Other \_\_\_\_\_ --Estimated Use (gal./day) \_\_\_\_\_

Applicant must attach a plat plan, drawn to scale, showing at a minimum: well site, dwelling site, waste disposal area, and driveway. This office reserves the right to request additional information.

NOTE: THERE WILL BE NO REFUND FOR ISSUED PERMITS

Date: 7/29/07 Signature: Gene Preston Building Permit Application \_\_\_\_\_

### OFFICE USE ONLY

#### On-site Sewage Disposal System Requirements

1. Septic Tank Capacity \_\_\_\_\_ Gallons All septic tanks must be two compartments and fitted with one or two manhole risers so that both compartments are accessible.  
A. Tank type  Concrete  Plastic/Fiberglass  Grease Interceptor  Other \_\_\_\_\_
  2. Pump Chamber Capacity \_\_\_\_\_ Gallons  Concrete  Plastic/Fiberglass  Other \_\_\_\_\_
  3. Type of system:  Deep Trench  Tile Field  Seepage Pit  Sand Mound  Low Pressure Dose  
 Holding Tanks  Other \_\_\_\_\_
  4. Disposal Requirements: Trench Length \_\_\_\_\_ ft. Width \_\_\_\_\_ ft. Depth \_\_\_\_\_ ft. Other \_\_\_\_\_
  5. Distance between the trenches edge to edge \_\_\_\_\_ ft.
- Percolation Test Results: Minutes \_\_\_\_\_ Sidewall Area \_\_\_\_\_ Clay \_\_\_\_\_ Pit Depth \_\_\_\_\_ Perc Test Date \_\_\_\_\_ Sanitarian \_\_\_\_\_  
Well Information: Year Drilled \_\_\_\_\_ Driller \_\_\_\_\_ Well No. \_\_\_\_\_ Depth \_\_\_\_\_ Yield \_\_\_\_\_  
The septic tank and disposal area must be installed a minimum of \_\_\_\_\_ from any drilled well, shallow well, spring, or stream.  
Special Requirements or Conditions: Attachments:  yes  no No. of pages \_\_\_\_\_

JET 500 CF PRETREATMENT BRF

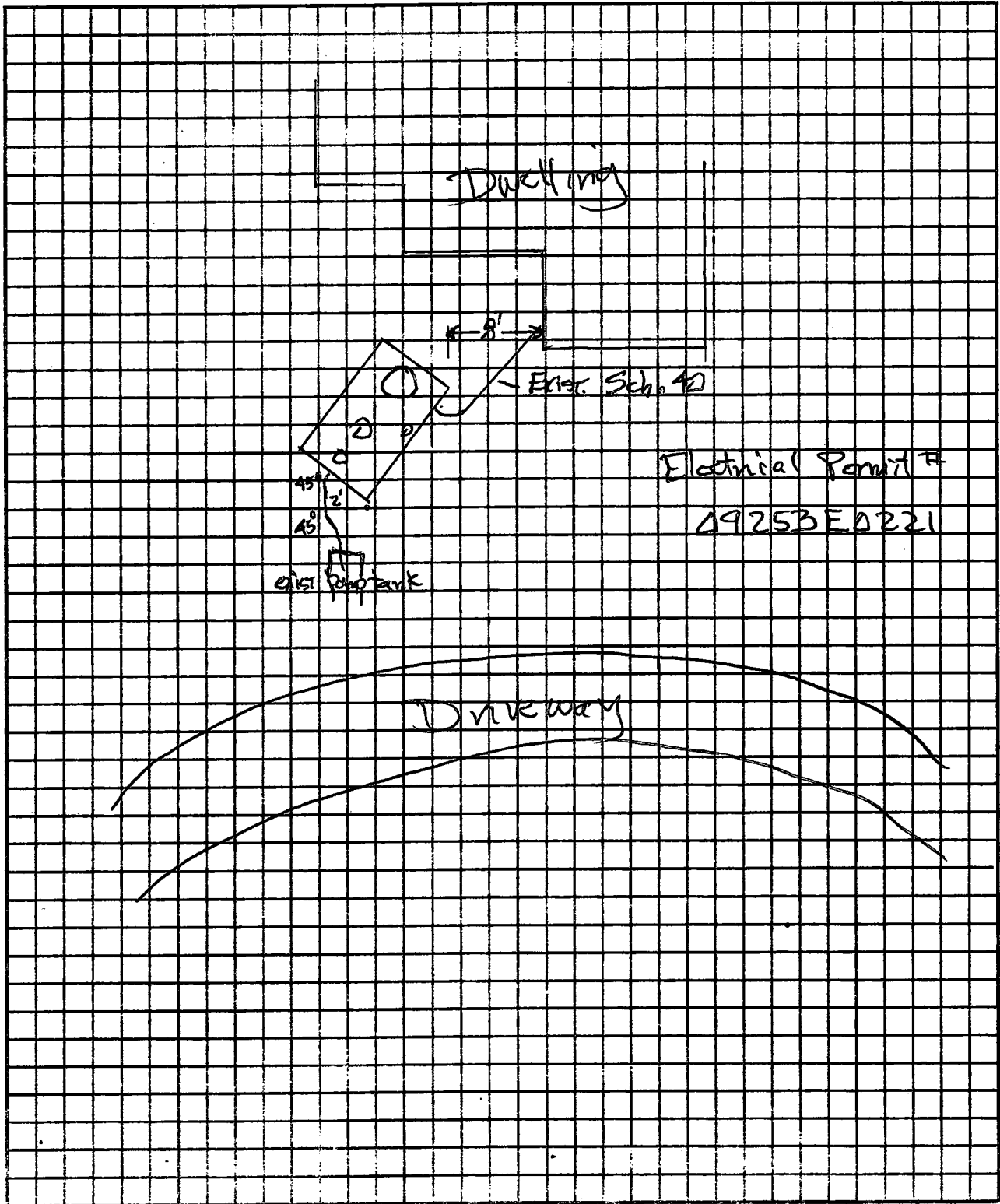
#### Please Note:

1. The septic system must be installed by a licensed drainlayer or licensed plumber. If the owner intends to install the septic system he/she must contact the Health Department 24 hours prior to installing the system.
2. Install the septic system at highest contour of the septic area with two (2) feet of cover maximum, unless otherwise approved by the Health Department in writing.
3. No filling or grading is permitted in the Septic Reserve Area.
4. The Maryland Department of the Environment recommends septic tanks be pumped once every 5 years or at a frequency adequate to ensure that solids are not discharged from the septic tank.

Sanitary Construction Permit 0921050090  
Date Issued 8/17/09 By KMB  
Date Inspected 11-4-09 By PHH

Application expires one (1) year from date of issuance. All work must be inspected prior to completion. Call 24 hours prior to completion to set up an inspection. Scale drawing on other side for use by inspector only.

# WATER



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## INTERIM PERMIT

**This permit is for an interim individual sewage system. The applicant or any future owner must discontinue use of this individual system and connect to the public system when the public system becomes available.**

**AGREEMENT AND EASEMENT FOR  
INSTALLATION OF  
BEST AVAILABLE TECHNOLOGY SYSTEMS WITH BAY RESTORATION FUNDS**

THIS AGREEMENT is made this 13 day of JULY, 2009, among William Bearsch Jr., hereinafter referred to as "Owner", and the Harford County Health Department, hereinafter collectively referred to as the "County".

WHEREAS, Owner owns a tract of land located on 3729 Abingdon Beach Road, in the 1<sup>st</sup> Election District of Harford County, Maryland, and the deed to same is recorded among the Land Records of Harford County, Maryland, in Bel Air, and in Liber 3290, Folio 570.

20  
20  
p.w.  
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IMP FD SURE \$	20.00
RECORDING FEE	20.00
TOTAL	40.00
Res# HAD3	Rcpt # 87463
JJR JD	Blk # 2462
AUG 11, 2009	11:54 am

D. Owner acknowledges and agrees that the manufacturer appointed Operation and Maintenance provider will have access to the BAT system at all times.

E. Owner acknowledges and agrees that the manufacturer or manufacturer's designee will have access to sample the effluent of the BAT system. Owner acknowledges and agrees that the proposed installation of a BAT system funded by the BRF is voluntary. Owner agrees that there shall be no liability on the part of the County to Owner if this BAT system fails, and that the County does not warrant or guarantee that the BAT system will adequately or properly function.

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O. This agreement shall not be construed to limit any authority of the County to protect the public health, safety or comfort or to issue any other orders to take any other action which is now or may hereafter be within its authority.

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Q. This agreement contains the entire agreement and understanding between the County and the Owner. There are no additional terms other than as contained in this agreement. This agreement may not be modified except in writing signed by each of the parties or by their authorized representatives.

R. The laws of the State of Maryland govern the provisions of all transactions pursuant to this agreement.

IN WITNESS WHEREOF, the parties have signed and sealed this agreement on the date indicated above.

DATE: 7-13-09

William Beasly Jr.  
Owner

DATE: 7/15/09

Kevin Barnaba  
Kevin Barnaba, R.S.  
Program Supervisor  
Bay Restoration Fund Program  
Harford County Health Department

RETURN TO:  
Earl E. Preston Jr. Inc.  
2228 Engle Rd.  
Fallston, MD 21047  
410 557-8100

# Chesapeake Bay Septic Tank LLC

Authorized Jet Distributor



P.O. Box 104, Jarrettsville, MD 21084

www.chesapeakebayseptic tank.com

Ph.: 410-692-5995

Email: sales@chesapeakebayseptic tank.com

## PRE-TREATMENT START-UP REPORT

Owner <u>William Bearsch</u>	Operator:	Start-up Date:
Street Address <u>3729 Abingdon Beach Rd</u>	Installed Date: <u>11/4/09</u>	<u>11/4/09</u>
City, State, ZIP <u>Abingdon, Md 21009</u> County: <u>HANTS</u>	BRF Grant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address (same)	Installer: <u>E. PRESTON</u> Ph: <u>4105578100</u>	
City, State, ZIP	Electrician: <u>Little Electric</u> Ph: <u>4106926361</u>	
Owner Contact Info Cell:	Permit # <u>0921050080</u>	
Hm: <u>410 676 5829</u> Fax:	Bedrooms: <u>3</u>	
Wk: Email:	Occupants: <u>2</u> Occupancy Date: <u>1986</u>	

### System Specifications

<b>Primary Treatment</b>	<b>Control Panel</b>
Processing Tank: <u>Jet J500 CF</u>	I.D. <u>418656 X 09202</u>
Septic Volume: <u>500</u>	"On" Timer Setting: <u>30 min</u>
Construction: <u>CONCRETE</u>	"Off" Timer Setting: <u>30 min</u>
Manufacturer: <u>MONARCH</u>	
Aerator Serial #: <u>JUL 090472</u>	
<b>Filter</b>	<b>Dispersal System Type</b>
<u>A300 - 8 x 18 with alarm</u>	<input checked="" type="checkbox"/> Gravity <input type="checkbox"/> Pumped

### Declarations:

- Jet Inc. start-up procedure was followed
- "For Service Call" label (w/phone #) is affixed to panel
- Homeowner Package was reviewed with
  - Builder on \_\_\_\_\_ (date)
  - Resident on 11/4/09 (date)
- Circuit breakers are on & control panel is latched
- All lids are secured

This system is ready for use:  Yes  No (explain)

I certify the above to be true and accurate on this date.

Emil Preston  
Signature

11/4/09  
Date

# HARFORD COUNTY HEALTH DEPARTMENT

119 Hays Street • P.O. Box 191 • Bel Air, Maryland 21014

879-8322, 8322 / 838-1500 Ext. 244, 245

New System \_\_\_\_\_

## ON-SITE SEWAGE DISPOSAL

Correction/ Rep. 9570

### APPLICATION:

Owner Bearsch Wm E 3729 Abingdon Beach Rd Abingdon  
Last Name First Name Address Phone No.

Builder or General Contractor \_\_\_\_\_  
Last Name First Name Address Phone No.

Septic System Installer Frank Lucas  Plumber  Bonded Drainlayer  Owner

**NOTE:** The septic system must be installed by a licensed plumber or bonded drainlayer. If the owner intends to install the septic system he must contact the Health Dept. prior to the installation.

Exact Location of Building Site 3729 Abingdon Beach Rd (Cottage) Tax ID # 01/099636  
Tax Map # 060

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ Parcel # 187-40

Perc Tests Completed  Yes  No Name Used on Test \_\_\_\_\_ Year of Test \_\_\_\_\_

For Non Sub-division Lots

Size of Lot \_\_\_\_\_ ft. x \_\_\_\_\_ ft. acreage \_\_\_\_\_ Existing Septic System  Yes  No Well Drilled  Yes  No

Building Use: 1. Residential No. of Bedrooms 1 Year Drilled \_\_\_\_\_

A. Individual  B. Multifamily  C. Mobile Home Driller \_\_\_\_\_

2.  Commercial (Give exact use) \_\_\_\_\_ Well No. \_\_\_\_\_

3.  Other (Give exact use) \_\_\_\_\_

Applicant must attach a lot plan, drawn to scale, showing: well site, dwelling site, waste disposal area and septic system layout, driveway, and any septic systems or wells within 100 feet of property line, unless you are supplying the same with a building permit.

Applicant must return both copies of the application to the Harford County Health Department for issuance of permit.

DATE June 4, 1996 APPLICANT SIGNATURE Elizabeth A. Bearsch

### PERMIT - Office Use Only

Building Permit Number \_\_\_\_\_

1. Type of System:  Septic Tank and Deep Trenches  Septic Tank and Tile Field

Septic Tank and Seepage Pit  Other TANK ONLY

2. Tank: A. Capacity 750 Gallons B. Tank Material  Concrete  Metal  Other

3. Disposal Requirements: Trenches: Length \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_ Seepage Pits: Number \_\_\_\_\_ Diameter \_\_\_\_\_ Depth \_\_\_\_\_

Distances: Maintain a minimum of \_\_\_\_\_ feet between Disposal Area and any drilled well, shallow well, spring or stream.

Percolation Test: Date \_\_\_\_\_ Results \_\_\_\_\_ Soil Type \_\_\_\_\_ Wet \_\_\_\_\_ Anytime \_\_\_\_\_

Time/E.S.S.A./Max Depth

Special Requirements or Conditions:

HARFORD COUNTY REVENUE COLLECTIONS  
PAID  
05 JUN -4 PM 2:42

Please Note:

1. Install septic system at approved contours of septic area with 2 feet of cover.

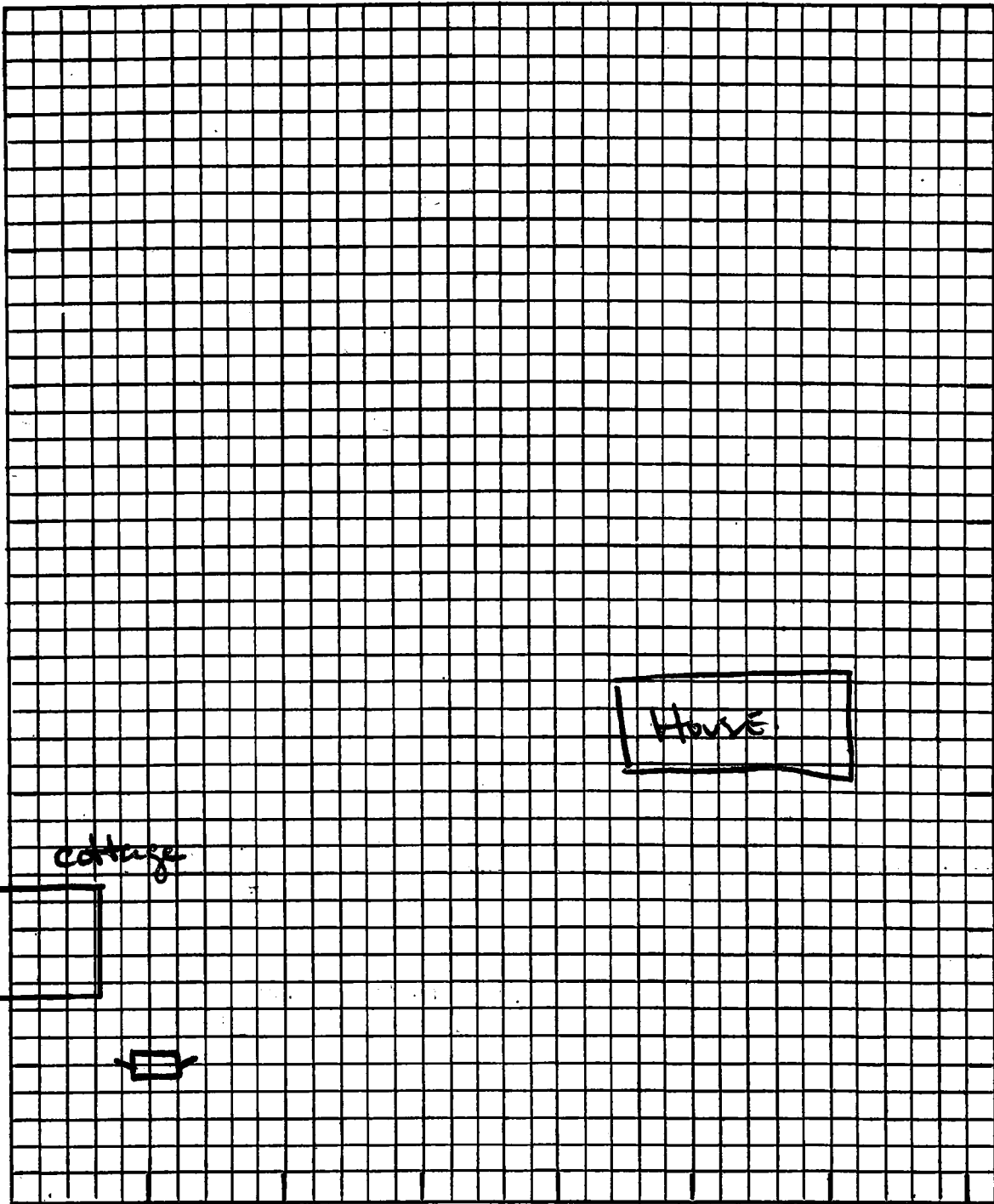
2. No filling or grading permitted in reserve area without prior written approval of Health Department.

Permit Number 96156 50010

Date Issued 6/21/96 By act

Inspected By act Date 6/21/96

Application expires one (1) year from date of issuance. All work must be inspected prior to completion. Call 24 hours prior to completion. Scale drawing on other side (for use by Inspector only).



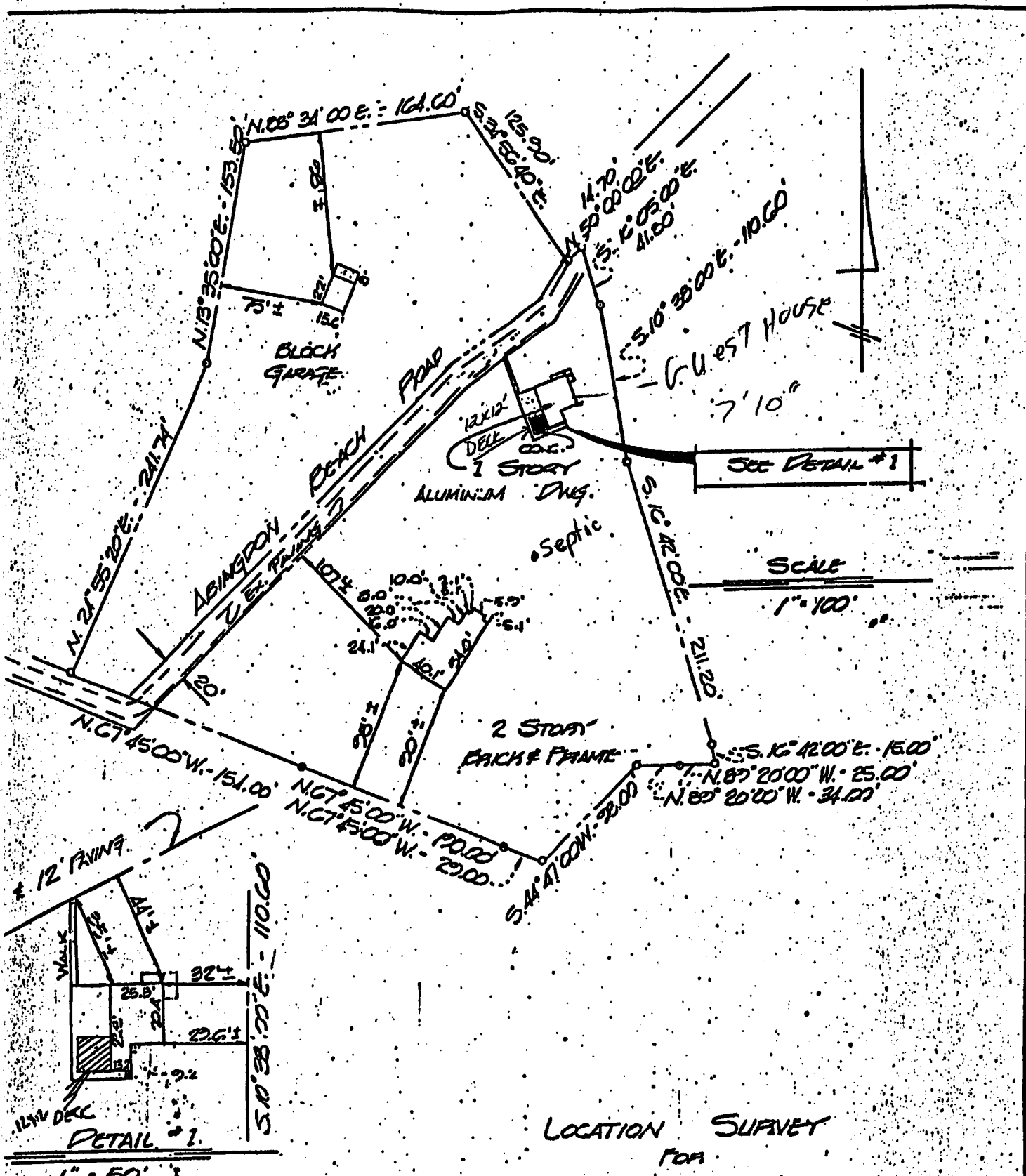
Scale: each block - 5' on a side

ROAD

In accordance with Title VI of The Civil Rights Act of 1964 and Regulation 504 of the Rehabilitation Act of 1973, The Harford County Health Department prohibits discrimination against anyone because of race, color, national origin or because of physical or mental handicap. This prohibition includes the provision of Departmental Services and Benefits, the operation of its facilities and Departmental Employment Practices. This policy applies to all programs conducted by The Harford County Health Department, including all state and/or federal grant programs. Any complaints may be directed to The Compliance Division, Department of Health and Mental Hygiene, 201 West Preston Street, Baltimore, MD. 21201, or The Office of Civil Rights, Washington, D.C. 20201.

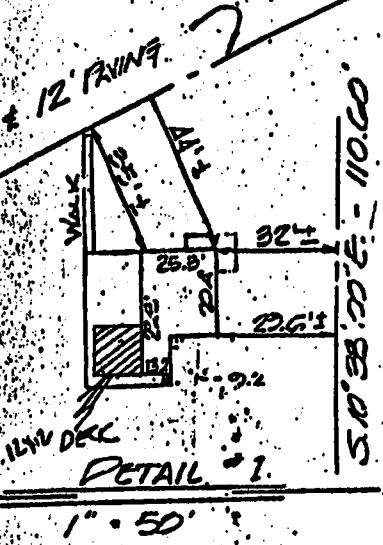
### INTERIM PERMIT

**This permit is for an interim individual sewage system. The applicant or any future owner must discontinue use of this individual system and connect to the public system when the public system becomes available.**



SEE DETAIL #1

SCALE  
1" = 100'



LOCATION SURVEY FOR

#3729 ABINGDON BEACH ROAD  
HARFORD CO, MD.  
ELECTION DIST. #1  
DATE: OCT 21, 1986



DEED REC. 1208-762

62-187

4D

This is to certify that we have made a location survey of the improvements, and they are located on the lot as shown hereon.

JARRETSVILLE Bldg 7

Fee  
 New 15.00  
 Correct 5.00  
Receipt Number

**HARFORD COUNTY HEALTH DEPARTMENT**  
119 Hays Street • Bel Air, Maryland 21014  
838-6000, Ext. 217 • 879-2000

Type of Request  
 New System  
 Correction/  
Addition/  
Replacement

LAND OF BRITCHER #3

**ON-SITE SEWAGE DISPOSAL**

APPLICATION:

Owner BEARSCH WILLIAM 2912 EMMERTON ROAD 21009  
Last Name First Name Address Phone No.  
Builder or General Contractor JARRETSVILLE BUILDERS Box 57 JARR MD 557-9305  
Address Phone No.  
Septic System Installer DEL'S CONTRACTING 836-9666  
Phone No.

Plumber  Bonded Drainlayer  Owner

Exact Location of Building Site 3929 ABINGDON BEACH ROAD 01039636  
ABINGDON, M.D.

Size of Lot \_\_\_\_\_ ft. X \_\_\_\_\_ ft. acreage \_\_\_\_\_ Existing Septic System  Yes  No

Building Use: 1.  Residential No. of Bedrooms 3  
 A. Individual  B. Multifamily  C. Mobile Home  
2.  Commercial (Give exact use) \_\_\_\_\_  
3.  Other (Give exact use) \_\_\_\_\_

*Plain Jan Martin*

PERMIT - Office Use Only

Building Permit Number \_\_\_\_\_

1. Type of System:  Septic Tank and Deep Trenches  Septic Tank and Tile Field  
 Septic Tank and Seepage Pit  Other \_\_\_\_\_  
2. Tank: A. Capacity 1000 Gallons B. Tank Material  Concrete  Metal  Other \_\_\_\_\_  
3. Disposal Requirements: Length 150' Seepage Pits: 1. Number \_\_\_\_\_  
Width 2' 2. Diameter \_\_\_\_\_  
Depth 6' 3. Depth \_\_\_\_\_ (Below Inlet)

Distances: Maintain a minimum of 75 feet between Disposal Area and any drilled well. Maintain a minimum of 100 feet between Disposal Area and any shallow well, spring or stream. NA

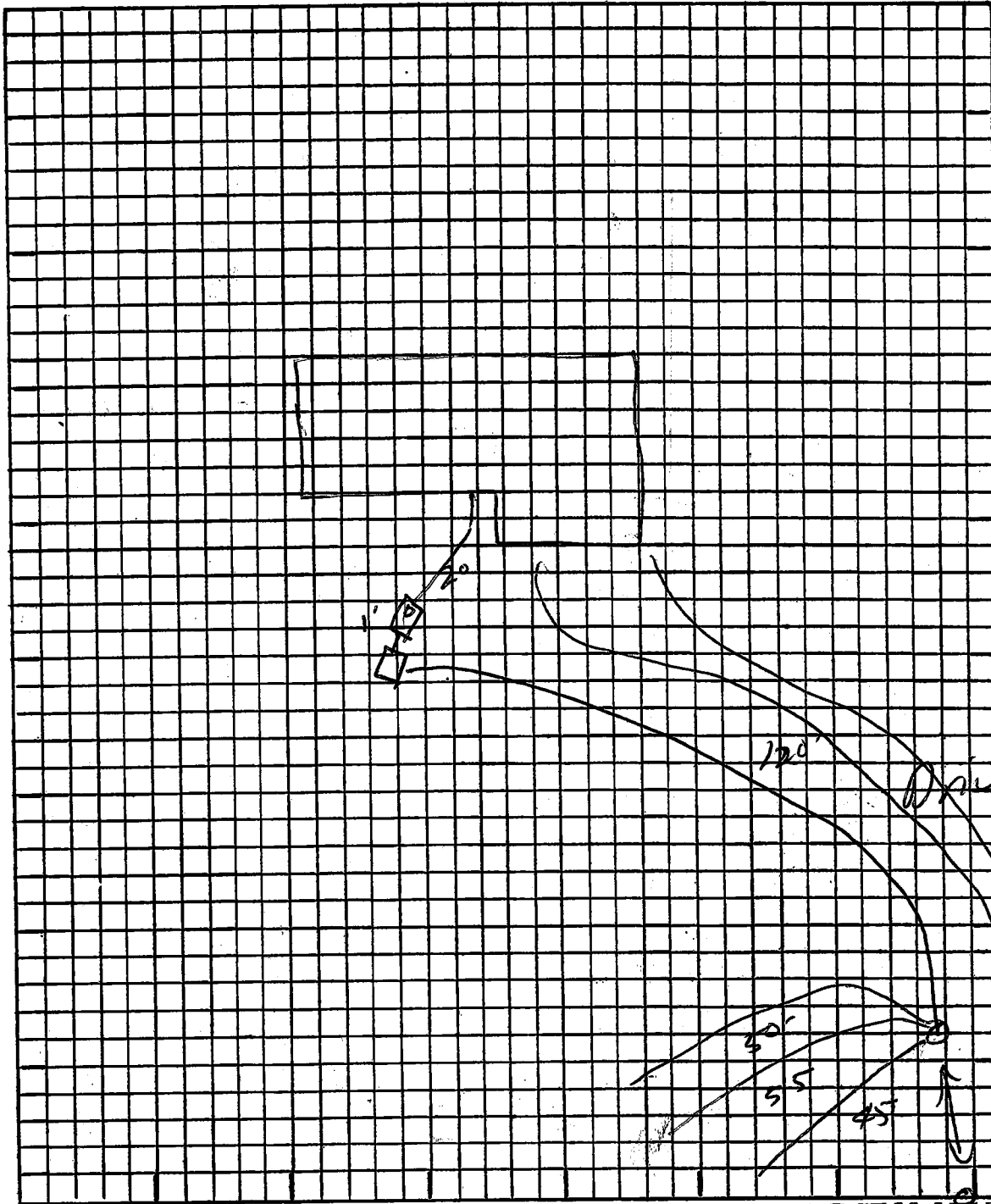
Percolation Test: Date \_\_\_\_\_ Results \_\_\_\_\_ Soil Type  Wet  Anytime  
Time/E.S.S.A./Max Depth

Special Requirements or Conditions: Permit Number 419-87  
Date Issued 9-3-86 SK  
Date Completed 11/20/86  
Inspected By [Signature]

*Install trenches on the highest contour of the area designated for the septic system. See the attached sheet for additional installation instructions. Contact Paul King on 1248 for a system layout prior to installation*

Applicant must return both copies to the Harford County Health Department for issuance of permit. Expires one (1) year from date of issuance. All work must be inspected prior to covering. Call 24 hours prior to completion. Scale drawing on other side (For use by inspector only).

\*Paul, keep tank out of flood plain, 25' away if possible. The line on the plat shows the approx. flood plain, however, think →



Scale: each block - 5' on a side

ROAD

RECEIVED

telephone pool

AUG 07 1986

HARFORD COUNTY  
**INTERIM PERMIT**

**This permit is for an interim individual sewage system. The applicant or any future owner must discontinue use of this individual system and connect to the public system when the public system becomes available.**

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*ran field elevations & states that house is not in flood plain, so, the demarcation line is obviously inaccurate.*



# HARFORD COUNTY HEALTH DEPARTMENT

119 South Hays Street

P.O. Box 191

Bel Air, Maryland 21014-0191

Telephone 879-2000 / 838-6000

Ext. 7245, 7244

1773

Thomas M. Thomas  
Health Officer  
Beverly Stump, M.D., MPH  
Deputy Health Officer

## RESULTS OF SOIL TESTING

Bearsch, William

To : \_\_\_\_\_

From: Division of Community Health Protection

File: MISC. NAME \_\_\_\_\_ SUBDIVISION \_\_\_\_\_

APPLICANT: William Bearsch Address 2912 Emmerton Rd Phone 676-5829

OWNER: William Bearsch Address Abingdon Md 21009 Phone \_\_\_\_\_

LOCATION: End of Abingdon Beach Rd

TAX MAP: 62 PARCEL: 187 LIBER: \_\_\_\_\_ FOLIO: \_\_\_\_\_ SECTION: \_\_\_\_\_ LOT: 3

SIZE: \_\_\_\_\_ ACRES: 1.13 SOIL MAPS: \_\_\_\_\_ SOILS: Bc B

HOLE	DEPTH	SOIL DESCRIPTION	START	FINISH	DROP	TIME
A	4	fine sandy clay	10:16	10:28	No Drop	
AA	6	6-3 sand & gravel				
		3-6 white fine sandy clay				
B	4	0-7 sand & gravel				
		7-10 fine sandy clay				
C		0-3 cover	10:20	10:21	10:22	2" 1 min
		3-11 sand & gravel				30 sec

REMARKS: Perc results satisfactory. System must be installed at least 105' from bulk head. Prior to approval submit a plot showing house, driveway, bulk head and all perc holes.

TEST LOC.: \_\_\_\_\_ ESAA: 8812 TRENCH DEPTH: 6ft WELL LOC.: public water

BACKHOE: Charley Sonberg backhoe PERSONS PRESENT: Bill Bearsch

SANITARIAN: Larry Outten TIME: 10:00-11:00 DATE: April 3, 1986

Date: \_\_\_\_\_

TO : SANITATION OFFICE  
RE : REQUEST FOR SOIL TEST

NAME: Bearsch

ADDRESS: \_\_\_\_\_

Location of property: Abingdon Beach

Property Owned by: \_\_\_\_\_

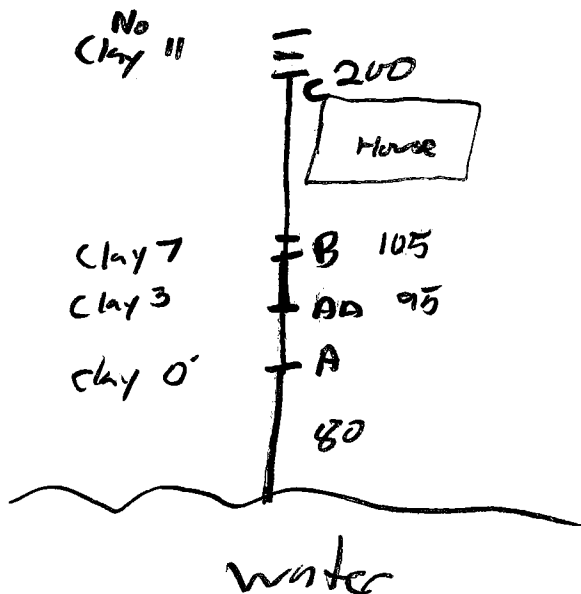
Name of Subdivision: \_\_\_\_\_

Lot No. : \_\_\_\_\_

Size of lot: \_\_\_\_\_

Date to run soil test: Thurs April 3 1986 Time: 10:00

Sanitarian: \_\_\_\_\_





**RECEIVED**  
**HARFORD COUNTY HEALTH DEPARTMENT**

119 South Hays Street

P.O. Box 191

Telephone 879-2000 / 838-6000

JAN 13 1985  
Bel Air, Maryland 21014-0191

Ext. 7244, 7245  
**HARFORD COUNTY**  
**HEALTH DEPT.**

Thomas M. Thomas  
Health Officer  
Beverly Stump, M.D., MPH  
Deputy Health Officer

**PERCOLATION TEST APPLICATION FORM**

Fee: \_\_\_\_\_ Test Application No.: GPT 48-85 Date: 5-10-85

This is an application for a percolation test, and is not a permit of any type. Percolation tests must be conducted for installation of underground disposal of drainage, sewage, and waste in accordance with the Harford County Code, Section 453, and Maryland Regulations 10.17.02. Fill in all appropriate items. Return the application with the necessary fee and plat.

Type of Building: New (X) Old ( )  
Use of Building : Residential (X) Commercial ( ) Industrial ( )  
If Residential : Single Family (X) Multi-Family ( )

Size of Lot 1.13 AC  
Owners Name Wm. H. & Elizabeth Bearsch  
Address 2912 Emmorton Rd., Abingdon, Md. 21009  
Phone Number 676-5829

Location of Property (give directions) RT. 24 SOUTH TO ABINGDON RD;  
ABINGDON RD TO OTTER PT. RD.; TO HARFORD BOAT CLUB RD. LEFT ON DIRTY  
RD TO 3<sup>rd</sup> Lot  
#3  
Subdivision (if applicable) \_\_\_\_\_ Lot \_\_\_\_\_ Section \_\_\_\_\_

A fee of ten (10) dollars is required for testing each lot or parcel. Make checks payable to Harford County, Maryland.

A plat of the property to be tested must be submitted with this application.

The following information may be obtained from the owner's tax bill or assessment notice. It must be provided before the tests can be conducted.

Tax Map # 62 Liber # 884/285 OLD OWES  
Block # D-4 Folio # \_\_\_\_\_ NEW OWES NOT ON FILE YET.  
Parcel # 187

Elizabeth C. Bearsch 2912 Emmorton Rd., Abingdon, Md. 21009  
Signature of owner or agent Address

OFFICE USE ONLY HARFORD COUNTY  
COMPTROLLER

Soil Map \_\_\_\_\_ Type B&B. MAY 10 1985  
Sanitarian \_\_\_\_\_

Public water

**PAID**  
April 3 10:00 AM

SHIRLEY LANE

EXTENDER

Greg L. Stancil  
17,1956  
GRG 455-12

Lot No 4  
Percy K. Britcher  
Mary O. Britcher  
Dec 29, 1960 GRG 564-362  
Area - 0.666 Aci

S. 15° 35' W 153.50

Lot No 2  
Percy K. Britcher  
Mary O. Britcher  
Area 1.042 Aci

Lot No 1  
Percy K. Britcher  
Mary O. Britcher  
Sept 23, 1955 GRG 444-142  
Area - 0.50 Aci

Lot No 3  
Percy K. Britcher, Mary O. Britcher  
August 1, 1956 GRG 466-265  
AREA 1.13 Aci

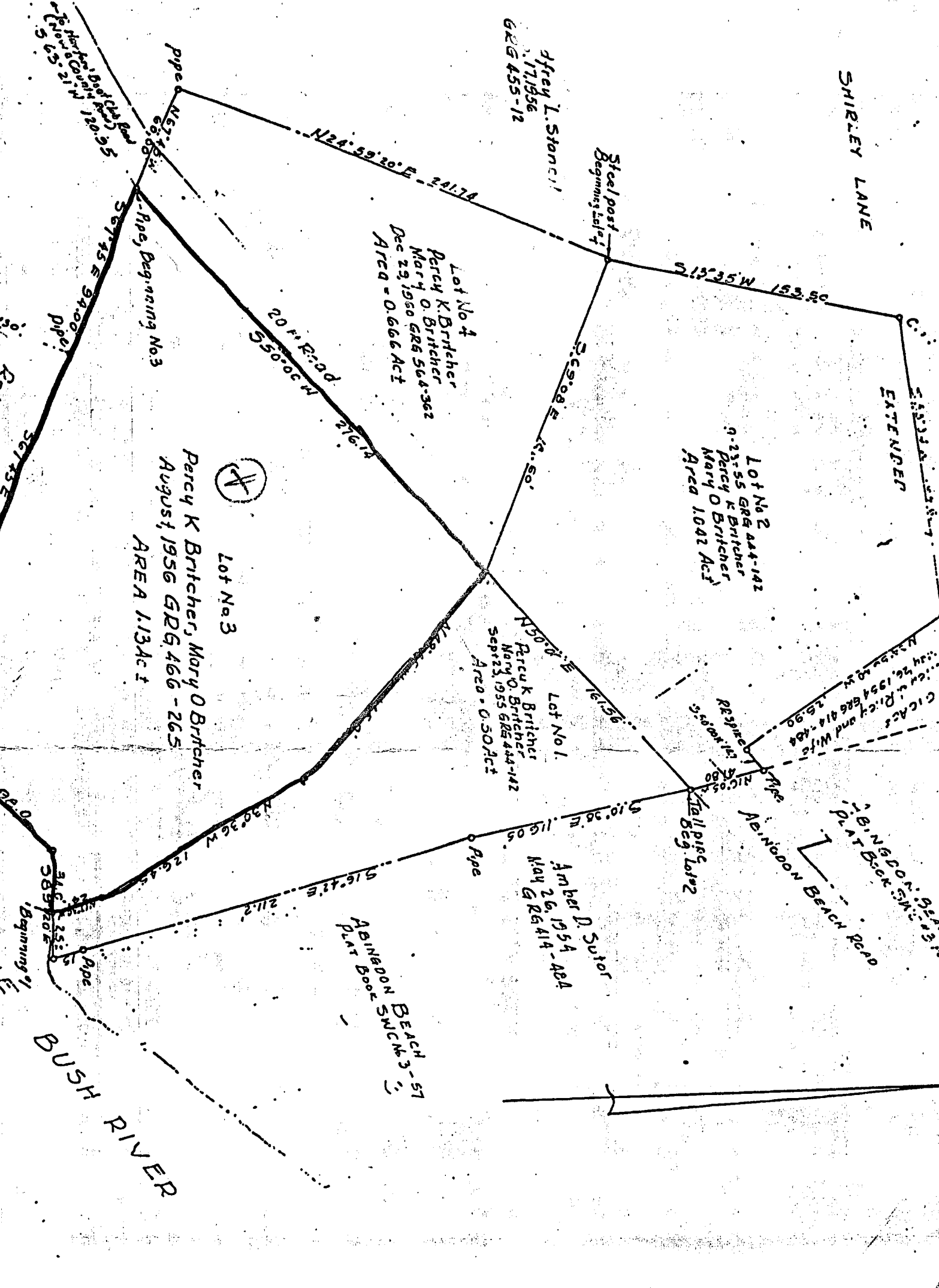
Amber D. Sutor  
May 26, 1954 - ADA  
May GRG 414-484

CICAC  
Mary & Percy and Wife  
May 26, 1954 GRG 414-484  
Area 1.2590

ABINGDON BEACH ROAD  
100' AT BACK

ABINGDON BEACH - 57  
PLANT

BUSH RIVER



120.95  
N 21° 21' W  
567.45

567.45  
N 21° 21' W  
567.45

20 ft Road  
N 55° 06' W  
550.06

Steel post  
Beginning Lot 1

pipe

Pipe

Well pipe  
Beg. Lot 2

Pipe

Beginning of

SHIRLEY LANE

EXTENDED

Cut

Godfrey L. Stancil  
Feb. 17, 1956  
G2G 455-12

Lot No 4  
Percy K. Britcher  
Mary O. Britcher  
Dec. 29, 1953 G2G 564-362  
Area - 0.666 Act

Lot No 3  
Percy K. Britcher, Mary O. Britcher  
August 4, 1956 G2G 466-265  
AREA 1.13 Act

Lot No 1  
Percy K. Britcher  
Mary O. Britcher  
Sept. 23, 1955 G2G 544-142  
Area - 0.50 Act

Amber D. Sutor  
May 26, 1954 - ADA  
G2G 414-484

Lot No 2  
Percy K. Britcher  
Mary O. Britcher  
Area 1.002 Act

CICACT  
J. R. Rice and Wife  
May 26, 1954 G2G 414-484  
Area 1.590

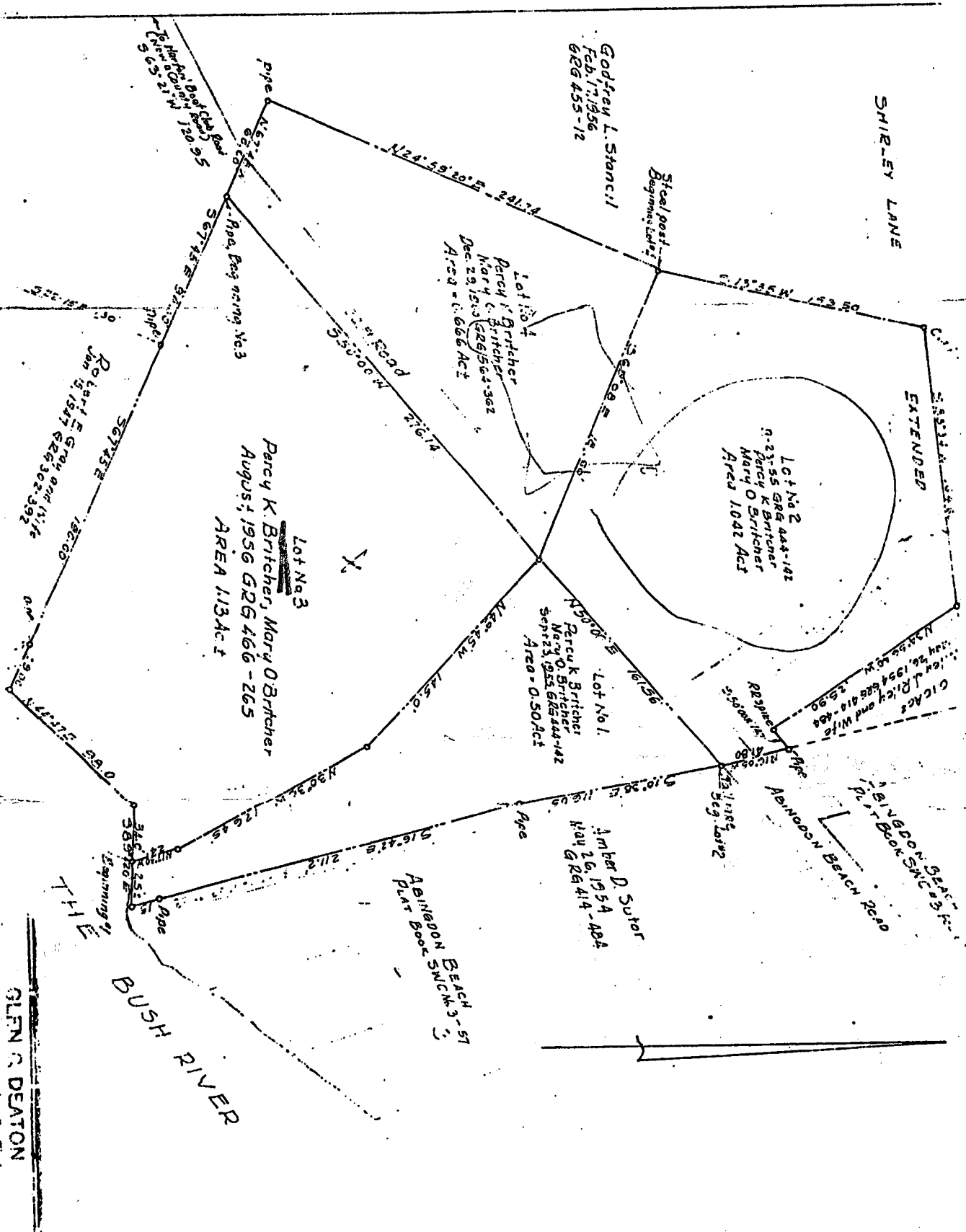
ABINGDON BEACH ROAD  
PLAT BOOK SWICK 3-51

ABINGDON BEACH ROAD

ABINGDON BEACH  
PLAT BOOK SWICK 3-51

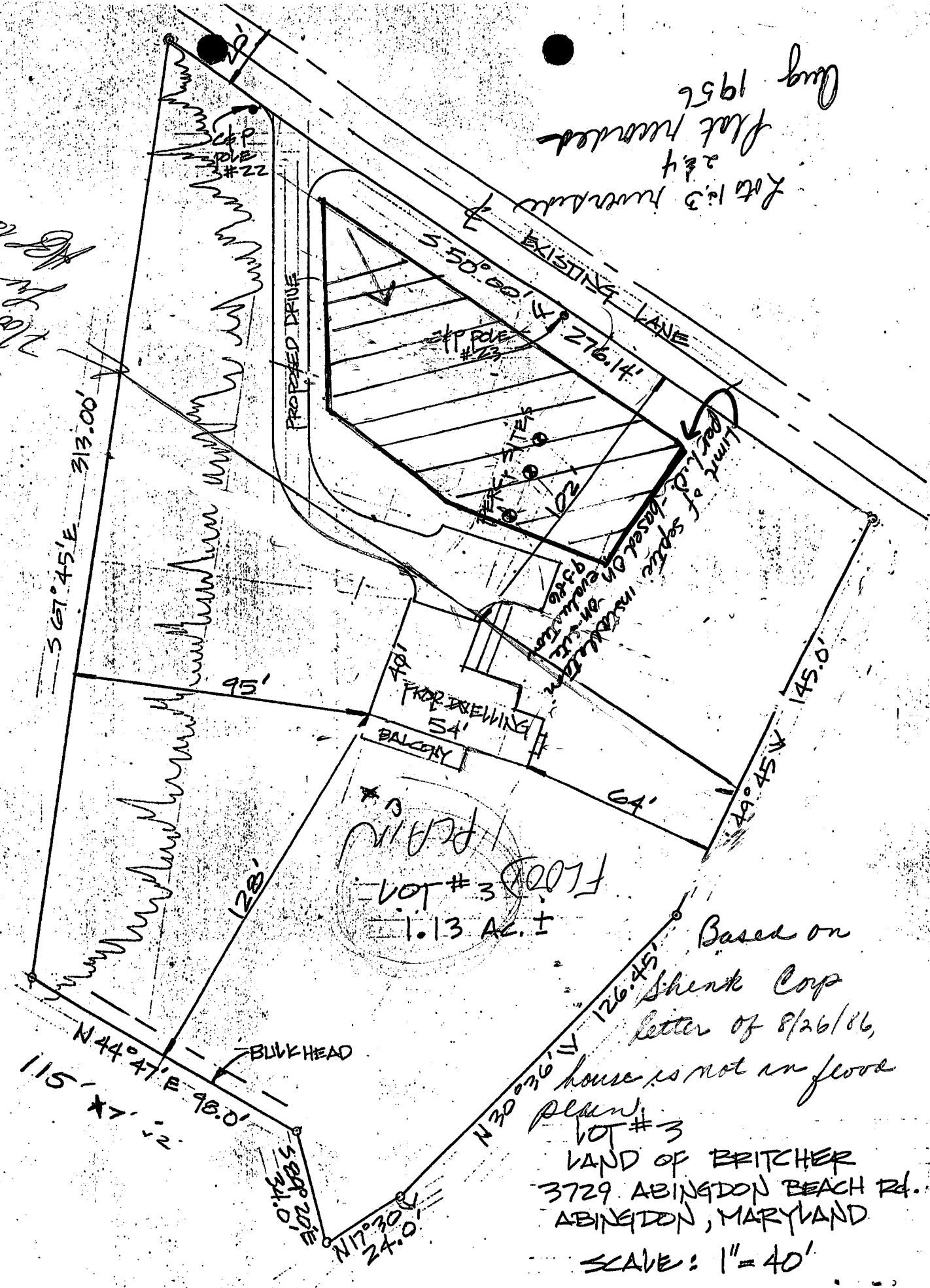
BUSH RIVER

GLENN & DEATON



Aug 1956  
flat number  
244  
Kato's number of

Black  
plan  
for  
Kato



Based on  
Shenk Corp  
letter of 8/26/86,  
house is not in flood  
plain.  
LOT # 3  
LAND OF BRITCHER  
3729 ABINGDON BEACH RD.  
ABINGDON, MARYLAND  
SCALE: 1" = 40'

MEMO

To : Jarrettville Bears Building Permit Number 419.87

From : Harford County Health Department

Date : 9.3.06

Re : Septic System Requirements for a Pump System

1. The system will require a minimum of a 1000 gallon septic tank and 150 feet of trench, 2 feet wide and 6 feet deep.
2. Maintain a maximum of 24 inches of cover over the trenches, <sup>prefer</sup> 12 inches.
3. The system will require a sewage ejector pump, 2 pumps are recommended, in a minimum 1000 gallon pump pit.
4. The trench and distribution box will be located on the highest ground in the septic reserve area.
5. Use 2 inch plastic (schedule 40 plastic) between the pump and distribution box. The force main must be placed below the frost line.
6. A bell or alarm is required on the pump unit.
7. The trenches must be installed on contour.

The septic system must be installed per regulations in Bill Number 73-24, "Private Waste Disposal System".

FF/dn