

# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATIO

TEST DATE(S) \_\_\_\_\_\_ TEST TIME \_\_\_\_\_

AGENCY REVIEW:

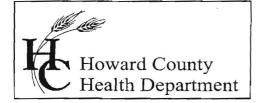
CA/P.C DATE

## DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSU CHECK AS NEEDED: CONSTRUCT NEW SEPTIC SYSTEM(S) REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM REPLACE AN EXISTING SEPTIC SYSTEM	ANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO: CHECK AS NEEDED: INEW STRUCTURE(S) ADDITION TO AN EXISTING STRUCTURE REPLACE AN EXISTING STRUCTURE
CHECK ONE: CREATE NEW LOT(S) BUILD ON AN EXISTING LOT IN A SUBDIVISION BUILD ON AN EXISTING PARCEL OF RECORD	IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?
COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYL INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS A	COMPLETED STRUCTURE (NOTE UNKNOWN IF APPROPRIATE PES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN ND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN
PROPERTY OWNER(S) Mashhood and Mary E	-Stanaji
	7958 FAX
MAILING ADDRESS 1050 Saint Michaels Rd Mon STREET	NT Airy MD 2177] CITY/TOYN STATE Z
APPLICANT	·
DAYTIME PHONE CELL	FAX
MAILING ADDRESS	CITY/TOWN STATE Z
APPLICANT'S ROLE: DEVELOPER BUILDER BUYER	RELATIVE/FRIEND REALTOR CONSULTAN
PROPERTY LOCATION SUBDIVISION/PROPERTY NAME Poplar Heights Su	bdivision LOTNO. H
PROPERTY ADDRESS 1050 SAINT MICHAELS Kd STREET	Mount Hiry TOWN/POST OFFICE
TAX MAP PAGE(S) GRID S PARCEL(S)	PROPOSED LOT SIZE 5.12A
AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTA	ALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPT
ABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICAT	ION IS COMPLETE WHEN ALL APPLICABLE FEES AND #
SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPON	ISIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND
"MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISF	ACTORY REVIEW OF A PERC CERTIFICATION PLAN.
TEST RESULTS WILL BE MAILED TO APPLICANT.	signature of applicant 06/03/05
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRO 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAN TDD (410) 313-2323 TOLL FREE	D 21043-4544 (410) 313-1771 FAX (410) 313-2648

PLEASE SUBMIT ORIGINALS ONLY (BY MAIL OR IN PERSON)

A/P					trees	1	1	Δ.		ĩ	<u> </u>
	1			$\wedge$			]]0		2	(	brown
			ħ	1		1	/		(		red Snown
		A	$\square$			( ~2º	1		2	30-	sicl sbk
			A	mas					2	30- 35%	"hsil yellowbran
				$\backslash$			,			nel	5.1
				'n		~50'	T			chant Fe	P 97/
				LB-			E				r
-11	d		0	~108						12	ŀ
			W	195					Ganage		A
Ē.	_	1	Hous			7				11	brown L
brown			home		. M					6"	red brown
brewn	T			Ourse	parl						sicl sbk
hsil pl				Du					εž.	4'	P1 -
grlsbk	coon	ty cherty		Kt. M	ichaels	Rd					red brown
. ),		- 40%						t			25% micao
s; l	(	DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H	ANR .	pl J sil gr
gr sbk		71105	Ē	4'9"/6'7" 13'	9:25	9:44	10:20	36 3	P	12'3'	. 0
τ.			D	4'5" 121	9:42	9:50	10:06	16	P	1010	<u> </u>
			С	6 12'	10:07	10:11	10'.17	6	ρ	911-	brownl
D			B	6 12	E (11:00)	11:01	11:03	2	ρ		red brown
brown L			A	6' 12'3	10:35		11:0	17	ρ	55	Sicl sbk
brown						<u> </u>				6	red brown
nsil pl	±35-	-								가귀~	Sil gr
sbklgr	40%										ρl
brown		rentry								114	Automic .
sil gr sbk pl		0	11.2							12'	UTURIDA
SbK pl	1 1			field	located	2 owner	1 dua	0-11	Me la	I.M.	ny Esfan
5		SANITARIAN		SDA	BACKH	IOE	$\sim$		- A		T/BR
	V.	TRENCH WI									



### Penny E. Borenstein, M.D., M.P.H., Health Officer

July 12, 2005

Mashhood and Mary Esfanaji 1050 Saint Michaels Rd. Mount Airy, MD 21771

### RE: PERCOLATION TEST RESULTS – A522507 Tax Map 7, Parcel 27 1050 St. Michaels Rd.

services and an an appreciate a service of the

Dear Mr. and Mrs. Esfanaji:

Percolation testing conducted July 11, 2005 on the referenced property indicated satisfactory soil conditions. Copies of the test results are enclosed.

Further review is contingent upon submission by a registered engineer/surveyor of a percolation certification plan showing the following:

- 1) Actual locations and elevations of all excavated test holes
- 2) Proposed house, well and septic system
- 3) Locations of any other relevant features such as streams, swales, or existing structures
- 4) A note must be included certifying that all existing wells and septic systems within 100 feet of property boundaries have been shown
- 5) A note indicating that depicted topography reflects field-matched information
- 6) A health officer signature block stating "approved for private water and private sewer systems"
- 7) A MDE sewage disposal area statement is required
- 8) MDE minimum lot width statement

The percolation certification plan should be submitted within 60 days to allow field verification if necessary. Enclosed is a copy of the information needed on a percolation certification plan. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-1771.

Sincerely,

Sara Fegel Water and Septic Program Development Coordination Section

SF Enclosures Cc: File

