

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 461-9933

DISTRICT 3d

DATE 1/22/91

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 W. Michael Andrew

ADDRESS 1340 Driver Rd, Marriottsville, MD 21104

442-2344 home

PHONE 965-3280 work

PROSPECTIVE BUYER none- home for owner and new tenant house on 60 ac farm

ADDRESS _____

PHONE _____

PROPERTY LOCATION:

SUBDIVISION na

LOT NO _____

ROAD AND DESCRIPTION at end of Sugar Maple Dr, off Driver Rd. Go through white wagon wheels to gate into pasture on left 300' up drive (1340 Driver Road)

TAX MAP 10 PARCEL # 10

SIZE OF LOT 60.757 ac

TYPE BLDG single family home

(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT. SIGNED

AND RETURNED 4/1/91

Serial # 37013-SFD

THIS IS NOT A PERMIT

A46849

SOIL PROFILE

brn clay loam
20% frags
lt. brn lt. gray sand loam
20-25% frags structured mottles

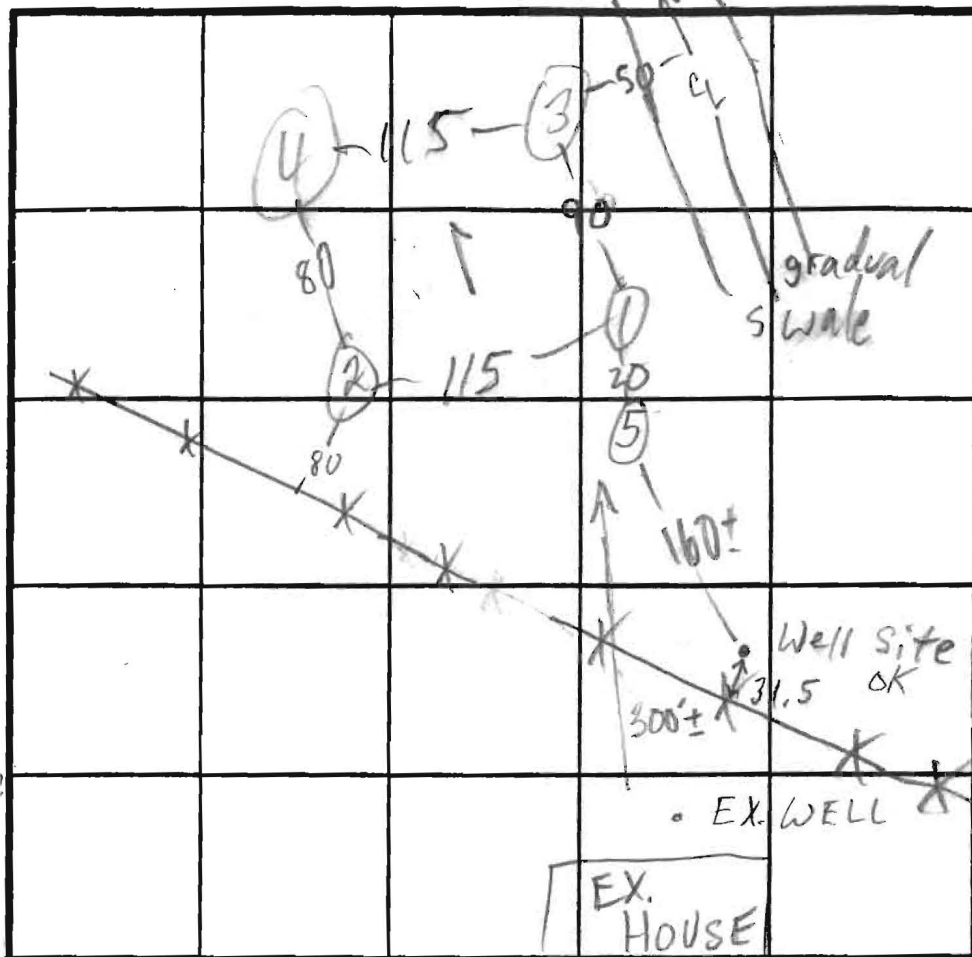
brn clay loam
5-10% frags

Minor Rock Formation
25-30% lt. brn lt. gray sand loam
quartzite 10-15% frags

org + brn clay + clay loam

lt. gray some brn fine quartzite sand loam structured mottles

15% frags



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

15% frags brn clay loam
sand loam 15% frags
ROCK BOT

X=7
180 BR
Inlet 4'
Bottom 6'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/12/91	1 S	4	10:26	NO MOVEMENT	10:26	10:40±	
	1 M	7 1/2	10:26	10:28	10:28	10:30	2
	1 V	10 1/2	see profile				
	2 S	5	10:28	10:31	10:31	10:38	7
	2 V	13 1/2	see profile				
	3 S	5 1/2	10:33	10:36	10:36	10:45	9 EST
	3 V	14	see profile				
	1 S ₂	4 1/2	10:50	10:53	10:53	11:03	10
	4 S	8 1/2	11:05	11:17	LITTLE MOVEMENT		
	4 S ₂	5 1/2	11:23	11:32	11:32	12:01	3/4
	4 V	12 1/2	see profile				
	5 V	10 1/2	REFUSAL - FAIL				

REMARKS

ALL S₃ HOLES PER PLAT

TYPE OF SOIL

M. Rifkin

TESTED BY

ALSO PRESENT owner, builder, B. Arnold

Big Parent
Application
Area
Resistance

10-Block 10 - Per 110
ve of 1.16/141.00 450

20 = 60.757 Acres

~~SECRET~~
INSTR
FOR
HOUSE
DETAIL

20-67720

21/12/2019 14:00

App
me
Hooges

Well	Relative Elevations
1st Flr.	101.0
Basmt	103.0
	94.0
	Out of Hse 92.0
	Into Tank 90.5
	Out of Tank 90.2
	Into Field 86.0

Revised Plan 05-411191

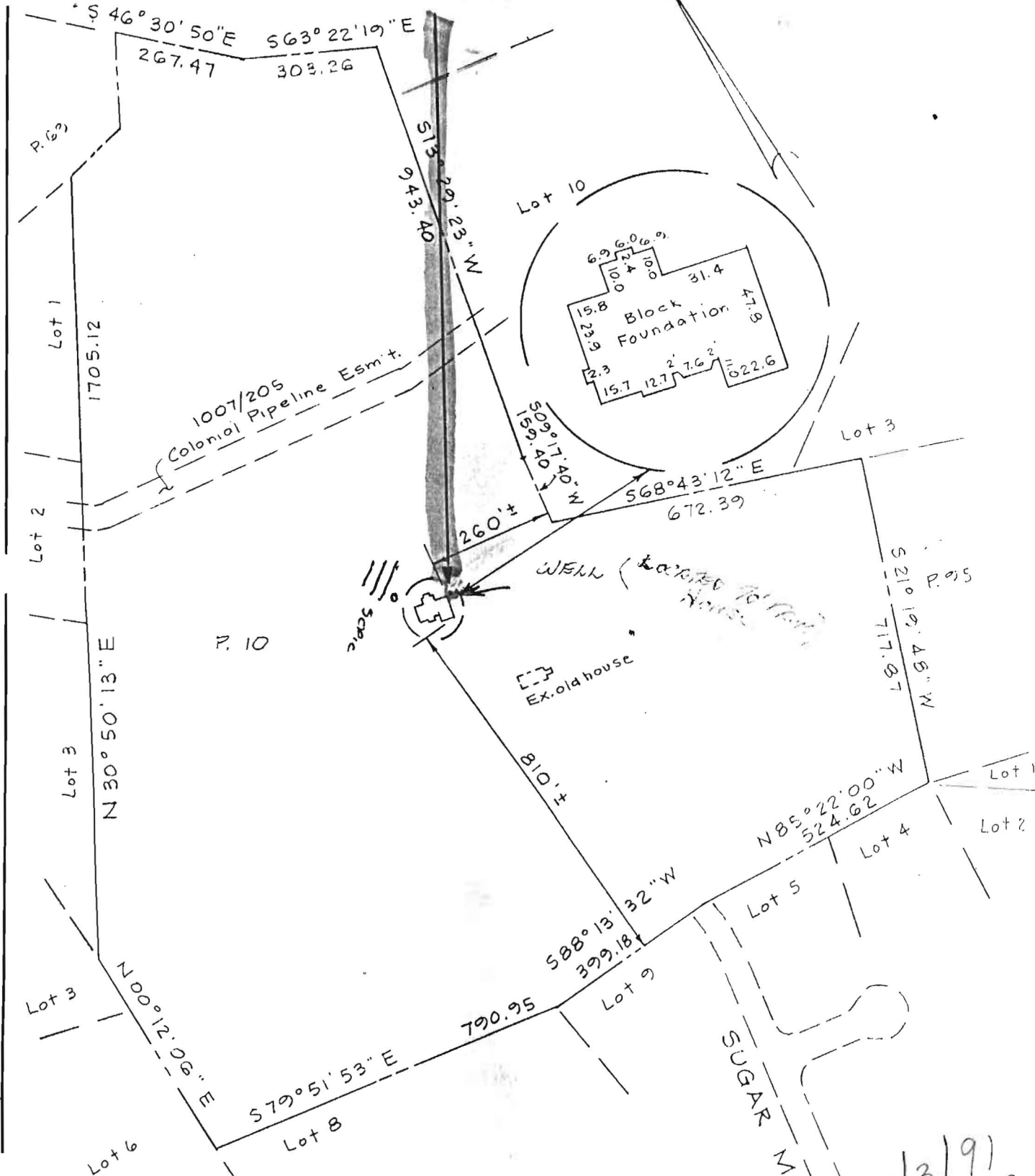
BP 37013

Excursions

3/27/91 Field Center
Williams Pt-

Phone # 137 William H. ...
- 904-8177

PROPOSED PROPRANE TANK ALLN BE LOCATED
 APPROX 10 FT FROM HOUSE
 P. 228



I hereby certify that the information on this plat shows only that the improvements indicated hereon are contained within the outlines of the lot upon which they were erected, unless otherwise noted, and is not to be used to establish property lines or corners.

10/3/91
 PLANS OK
 RH
 BP 39858



Wall Check
 1340 DRIVER RD.
 Tax Map 10 P. 10
 Deed Ref. 1421/458

3rd Election Dist. Howard Co. Md.
 Scale: 1" = 300' Date: 5-14-91

The **RBA** Group
 ENGINEERS • ARCHITECTS • PLANNERS

5560 STERRETT PLACE, SUITE 300, COLUMBIA, MD 21044 (301) 730-7950

3-12-91
10:00am

APPLICATION

PERCOLATION TESTING

A 46848

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 3d

DATE 1/22/91

2-8-91 Preview ok.
Need repair for
existing house.
100 ft buffer to
stream. JEN
Need fees.

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 W. Michael Andrew

ADDRESS 1340 Driver Rd, Marriottsville, MD. 21104 PHONE 442-2344 home
965-3280 work

PROSPECTIVE BUYER none

ADDRESS _____ PHONE _____

PROPERTY LOCATION: Driver Property Parcel 10
~~SUBDIVISION~~ at end of Sugar Maple Dr, off Driver Rd. Go through white wagon wheels up

ROAD AND DESCRIPTION drive to existing house

TAX MAP 10 PARCEL # 10

SIZE OF LOT 60.757 ac TYPE BLDG existing single family house
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

W. Michael Andrew
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____


HD-216

THIS IS NOT A PERMIT

NEW LOT
↑ 300'±

EX. SUBSU

FACE
WELL



49'

BARN

EX.
HOUSE

5

5

✓c/o

60

100%

S.T. C

10	gentle swale
----	--------------

407
N.Y.

6/10?

~~deep~~

1

120

②

SOIL PROFILE

org clay loam 59% frag	tan org silt loam ↓
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INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

[illegible]

REMARKS HOLES OK

TYPE OF SOIL

TYPE OF SOIL _____
TESTED BY M. Rifkin

ALSO PRESENT owner, B. Arnold

DATE: 3/13/91

NAME: Mr. W. Michael Andrew
ADDRESS: 1340 Driver Rd
Marriottsville, MD 21104

RE: PERCOLATION TEST RESULTS
APPLICATION #'(s) A 46848, 46849
PROPOSED USE: Tenant House
PROPERTY ID: Driver Property
Tax Map 10, Parcel 10

Dear Mr. Andrew:

Percolation testing conducted 3/12/91 on the above referenced property indicated ~~unsatisfactory/limited satisfactory~~ [satisfactory] soil conditions. Copies of the test results are enclosed.

Further review is contingent upon submission [by a registered engineer] of a percolation certification plat showing actual locations and elevations of all excavated test holes and a suitable house and well site. [The plat should also include] [the following additional information]: locations of the existing house, well and septic system, as well as existing fence lines. FOR EASE IN IDENTIFICATION, PLEASE LABEL EACH PROPOSED SEPTIC RESERVE AREA WITH THE TEST APPLICATION NUMBER.

This should be submitted within sixty (60) days to allow field verification if necessary. If the proposal is for subdivision or for commercial use, a groundwater appropriations permit must be approved prior to approval of either the record plat or the site development plan.

If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 461-9933.

Very truly yours,

Craig Williams, Director
Water and Sewerage Program

CW:jr

Enclosure(s)

cc: ~~[Tax Assessment Office]~~
[Engineer]
~~[Owner]~~
File

* PRINCIPAL AGENT
- AL TALLIS HAS COPY,
NO NEED TO TYPE
ON SEND.
3/14/91
Cwells

