

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ AP 532512

AGENCY REVIEW: _____ DATE 1-28-10

DO NOT WRITE ABOVE THIS LINE

HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- ☐ CONSTRUCT NEW SEPTIC SYSTEM(S)
☒ REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
☐ REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- ☐ NEW 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?

- ☐ YES
☐ NO

THE TYPE OF STRUCTURE IS:

- ☐ RESIDENTIAL WITH _____ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE **UNKNOWN** IF APPROPRIATE)
☐ COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
☐ INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) David Szelag

DAYTIME PHONE 1-202-369-5306 CELL _____ FAX _____

MAILING ADDRESS 6118 Thompson Dr CITY/TOWN _____ STATE _____ ZIP _____
STREET

APPLICANT Freedom Septic Service - Bruce Bopst

DAYTIME PHONE 410 795 2947 CELL 410 984-6863 FAX 410 549 1163

MAILING ADDRESS 2809 Liberty Road CITY/TOWN _____ STATE _____ ZIP _____
STREET

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME 6118 Thompson Dr - CLARKSMILE Md LOT NO. 21029

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

CROSS MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

I, APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A VAILABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "ISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN. TEST RESULTS WILL BE MAILED TO APPLICANT.

SIGNATURE OF APPLICANT Freedom Septic

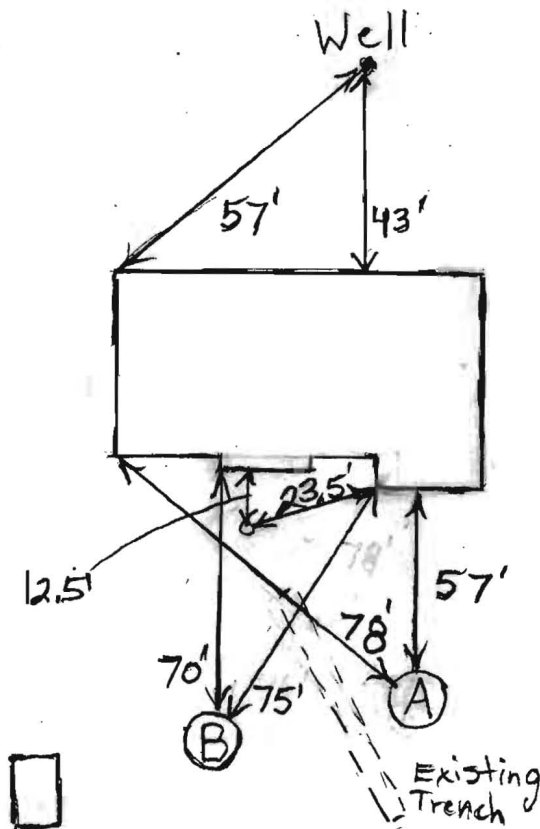
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A

Red sbk
Si Cl Loam 3'
Or sbk
Si Cl Loam 8'
Beige and
Tan sbk
Sa Loam
Sa Cl Loam
~25% Saprolite 15.5'
Water
Indicators 1/6

B

Red sbk
Cl Loam 2.5'-3'
Or Red
sbk gravelly
Cl Loam 3.5'-4'
Beige sbk
Gravelly Cl
Loam 6'-8'
Beige Sa
Loam 10-15%
Rock 11'



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
3/11/2010	A	6'4 1/16"	11:05	~ 1/4" in 15 minutes			F
		9'3"	11:37	Close to 1" in 30			F
		10'	12:13				
	B	6'5 1/11"	12:44	- Little Movement			F
		9'	1:06:30	1:11:45	1:21:45	10	P
Holes Dug During Wet Season							

REMARKS Inconsistent Soils - Designed System at 0.6 Rate

SANITARIAN B. Baker BACKHOE Freedom OTHERS _____

TEST HOLES USED IN SDA B AVG. PERC TIME 0.6 SQ. FT/BR _____

TRENCH WIDTH 2' INLET DEPTH 5' MAX. BOT DEPTH 10' EFFECTIVE S/W 4'