# APPLICATION

PERCOLATION TESTING

A <u>399356</u>
P\_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

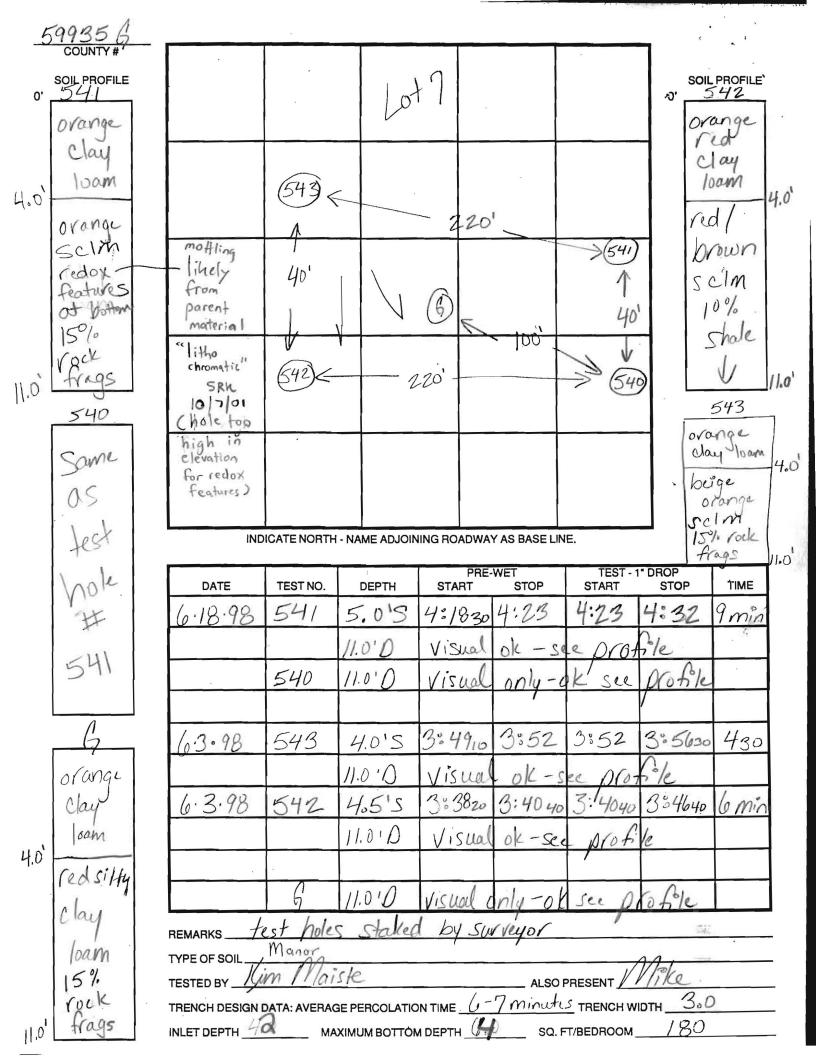
DATE 4/13/98

TO: THE COUNTY HEALTH OFFICER

ELLICOTT CITY, MARYLAND		
HEREBY APPLY FOR THE NECESSARY TEST PI	RIOR TO APPLICATION FOR PERMIT TO CONS	STRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER BOBERT	P. BUICE	
ADDRESS 7979 MUNCAST	ER MILL ROAD PH	ONE 410-975-0200
AGENT OR PROSPECTIVE BUYER TOMAL	DR REUMICE L	AND DESIGN & DEN INC
ADDRESS 10805 HICKORY	Y KIRGE BOND PH	ONE 410-740-2100
PROPERTY LOCATION:	0 21044	
SUBDIVISION BUICE PEOPLE	Jee 1 100	rno
ROAD AND DESCRIPTION EAST	BIDE OLD ROX	BURY ROAD
JUST EAST OF IN	TERSECTION OF	8797 & ROXBURY MICE ROM
TAXMAP 21 PARCEL# 86	A	
SIZE OF LOT ONE ACRE	TYPE BLDG	SFD
• · · · · · · · · · · · · · · · · · · ·		(SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION	ON IS ACCEPTABLE ONLY UNTIL PUBLIC	FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
*		DABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN	TESTING THIS LOT. YONALD	(SIGNATURE OF APPLICANT)
APPROVED BY	FOR	DATE
DISAPPROVED BY	FOR	DATE
HOLD PENDING FURTHER TESTS		
REASONS FOR REJECTION OR HOLDING		
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE	OR I.D. #	DATE
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D.	#	DATE

### THIS IS NOT A PERMIT

HD-216 (3/92)





### 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

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

#### **MEMORANDUM**

TO:

Dave Howard

Fisher, Collins, & Carter, Inc.

FROM:

Robert Freemon #15

Well & Septic Program

RE:

15428 Rivercrest Ct.

Brookeville, MD 20833 BAT & Perc Plan Comments

DATE:

4/12/2016

I am reviewing the BAT Plan and Perc Plan for 15428 Rivercrest Court Lot 7 and have some comments. On the BAT Plan we need to see the details of the BAT Unit itself such as make, model, dimensions and labeled components. The 20ft setback between the house and BAT unit is not met and needs to be corrected. The trench data calculations show Trench 1 with an 8ft bottom depth. The maximum bottom depth of each trench is 7ft as stated on the Spec Sheet. On the Perc Plan note #4 needs to state "All wells and septic systems located within 100' of the property boundaries and 200' down gradient of any wells and/or septic systems have been shown."

As for the wells we need to see the existing well labeled along with the tag number on the Perc Plan. The alternate well site nearest the cul-de-sac is less than 50ft away from a storm water drainage area and needs to be corrected on both plans. It is our recommendation however to move the well to the left side of the driveway and maximize the distance between well sites. We have been having problems with road side salt contamination and would like to avoid the swale and storm water drainage as well.

Lotin P

7as V

6 V

5009 V

717 V

717 V

SY1 V

SY0 V

P

SHALLOW SYSTEM ONLY BOTTOM Y'MAX

# APPLICATION

### PERCOLATION TESTING

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P\_\_\_\_\_

DISTRICT\_\_\_\_

DATE 10/3/01

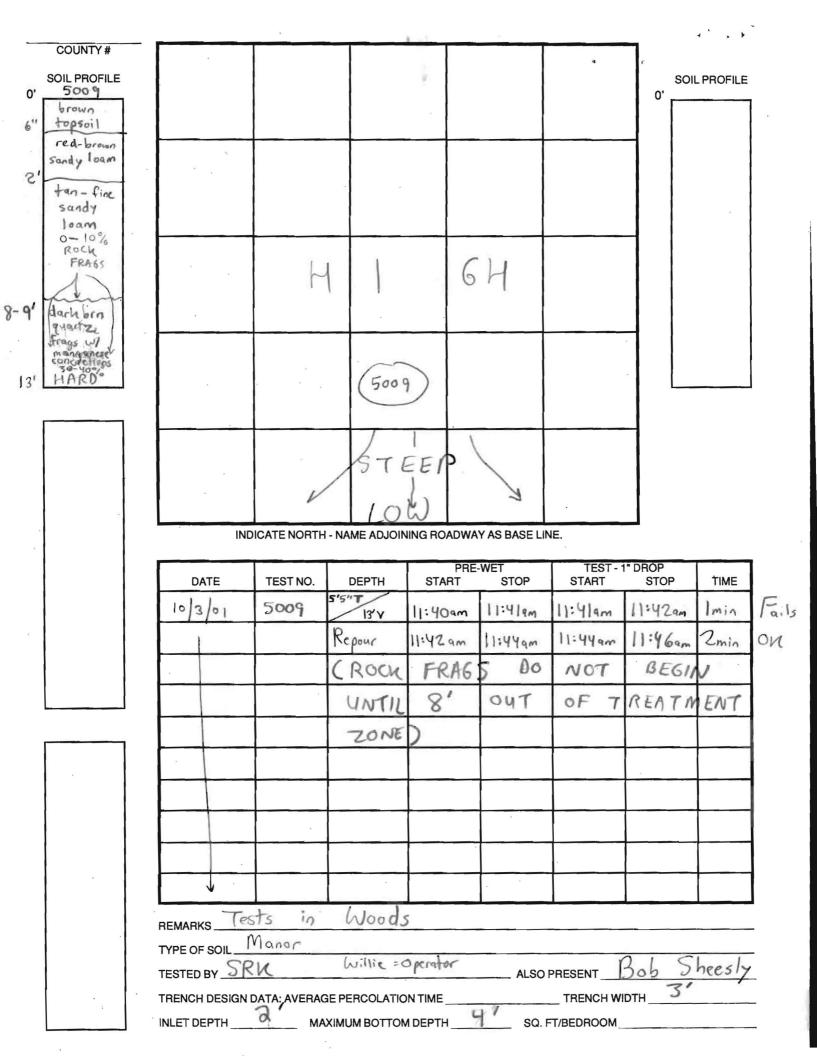
HOWARD COUNTY HEALTH DEPARTMENT
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3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLI	ICATION FOR PERMIT TO	O CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER		
ADDRESS		PHONE
AGENT OR PROSPECTIVE BUYER		
ADDRESS		PHONE
PROPERTY LOCATION:  SUBDIVISION Buice Property 5	ec. 1	LOT NO.
ROAD AND DESCRIPTION		
TAX MAPPARCEL#	TYPE BL(	DG(SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEP	PTABLE ONLY UNTIL P	PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND TH
FEE CONNECTED WITH THE FILING OF THIS PERC TEST	APPLICATION IS NON-F	REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE 1
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THI	IS LOT	(SIGNATURE OF APPLICANT)
APPROVED BY	FOR	DATE
DISAPPROVED BY	FOR	DATE
HOLD PENDING FURTHER TESTS		
REASONS FOR REJECTION OR HOLDING		
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #		DATE
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #		DATE

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TELEPHONE: 313-2640

DISTRICT 4/13/98

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION F	OR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER ROBERT P. BO	SICE
ADDRESS 7979 MUNCASTER MILL	ROAD PHONE 410-975-0200
AGENT OR PROSPECTIVE BUYER PONALD & REUM	IRE LAND DESIGN & PEN INC.
ADDRESS 10805 HICKORY KIDGE K	CAD PHONE 4/10 - 746 - 2100
PROPERTY LOCATION: MD 210444	
SUBDIVISION BUICE PROPERTY Sec	1 LOT NO.
ROAD AND DESCRIPTION EAST SIDE C	
	N OF ET97 & BOXBURY MILLE ROM
TAX MAP 21 PARCEL# 84 GR	,
SIZE OF LOT ONE ACRE	TYPE BLDG(SINGLE FAMILY DWELLING OR COMMERCIAL)
	,
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE O	NLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
	ON IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS INTESTING THIS LOT	VONACO K. KEWILL DE
APPROVED BY F	DR DATE
DISAPPROVED BY	FORDATE
HOLD PENDING FURTHER TESTS	
REASONS FOR REJECTION OR HOLDING	
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #	DATE
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