

Preliminary
11/23/87
9:30

APPLICATION

PERCOLATION TESTING

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

A 40271

P _____

DISTRICT 10/15/87

DATE Oct 1987

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 LEONARD GEORGE FISCHER

ADDRESS 6160 ROCKBURN HILL RD PHONE 796 2817

W - 992-2000 Karen ✓
796-5879 MOORE ✓

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO _____

ROAD AND DESCRIPTION _____

TAX MAP 31 PARCEL # 1

SIZE OF LOT 14.02 ACRES TYPE BLDG RESIDENCE
(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

Leonard G. Fischer
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

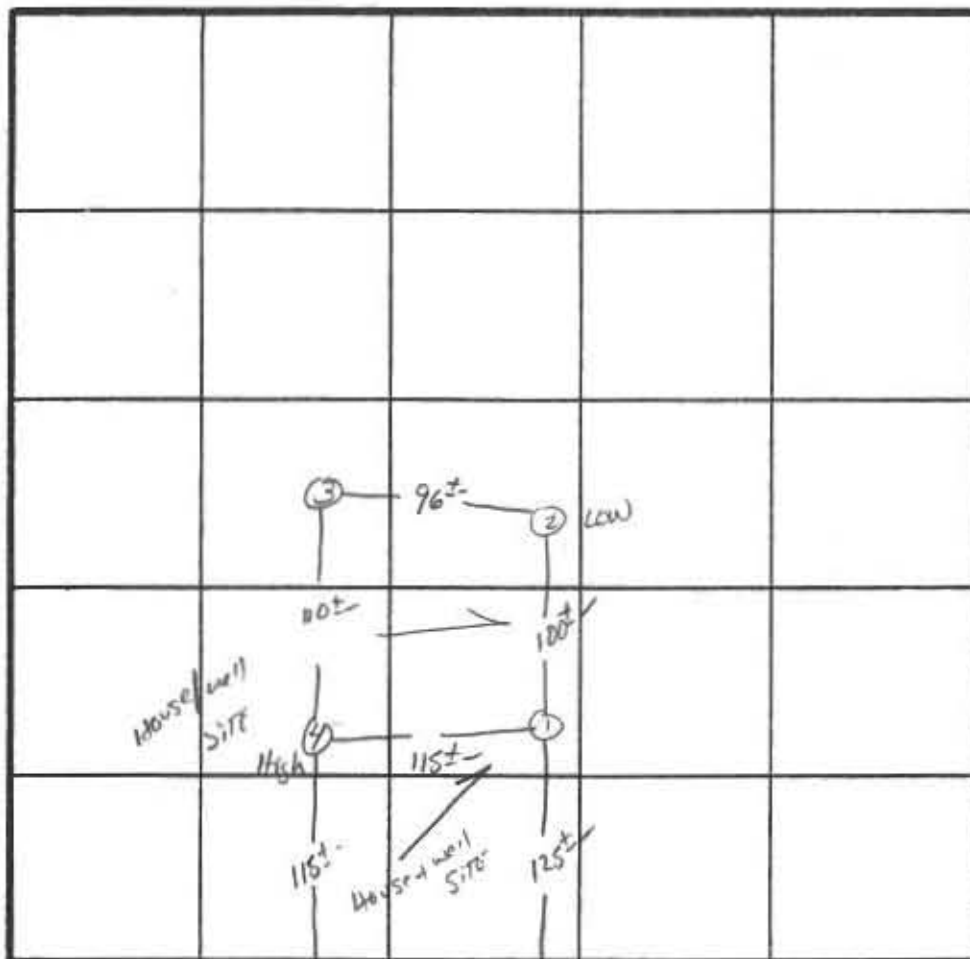
REASONS FOR REJECTION OR HOLDING 11/23/87 PERC SATISFACTORY 1461d for REAST. S.M.

THIS IS NOT A PERMIT

SOIL PROFILE

| | |
|----|--|
| 6" | A1-3 |
| | Yellow BL Silt clay loam 10-15% frags |
| 4" | Yellow BL to Grey (Parent material) Sandy loam 15-20% frags |

11.5



HOLE 2
(QUARTER VIEW)
(SIDE VIEW)

FRRC MIN
Φ/BL

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
Rockaway Hill Rd.

| DATE | TEST NO | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|----------|------------|---------------|---|----------------|----------------|----------------|------------------|
| | | | START | STOP | START | STOP | |
| 11/23/87 | 1 S 1 M | 4.5 8.5- | 10:42 10:42 | 10:50 10:46 | 10:50 10:46 | 11:02 10:53 | 12 MIN 7 MIN |
| | 1 V | 11.5' | UNIFORM SOIL BELOW 4'- | | | | |
| | 2 S 2 M | 4.5' 8.5' | 11:07 11:01 | 11:15 11:09 | 11:15 11:09 | 11:31 11:22 | 16 MIN 13 MIN |
| | 2 V | 11.0' | SIMILAR TO #1 w/ a SMALL VIB OF LEATHER | | | | |
| | 3 S 3 V | 4.5' 11.5' | 11:05 11:05 | 11:16 11:16 | 11:16 11:16 | 11:38 11:38 | 22 MIN POORLY |
| | 4 S 4 M | 4.5' 7.5' | 11:32 11:23 | 11:37 11:25 | 11:37 11:25 | 11:44 11:32 | 7 MIN 7 MIN |
| | 4 V | 11.5' | SAME AS #1 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Inlet 45
Bottom 45

QUANTZIR

12 min average Time

REMARKS 51 allow sys? only

TYPE OF SOIL CLAY

TESTED BY: S. Abe

ALSO PRESENT L. FANER / KALAN PROSEC

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, Maryland 21043

Director - 461-9956
Water & Sewerage, Permits - 461-9933
Community Environmental Health - 461-9944
Technical Services - 461-9955

November 25, 1987

Mr. Leonard Fischer
6160 Rockburn Hill Road
Elkridge, Maryland 21227

RE: Percolation Testing
Fischer Property
Tax Map 31 Parcel 1
Rockburn Hill Road

Dear Mr. Fischer:

Percolation testing conducted November 23, 1987 on the above referenced property indicated satisfactory soil conditions.

Approval is contingent upon submission by a registered engineer of a plat showing certified test hole locations and a suitable house and well site.

This should be submitted within sixty (60) days to allow field verification if necessary.

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

GT:JR

NEW 4 LOT PROPOSAL FEB 94
TEST DATE APRIL 94
OK TO APPLY AGAIN FOR 140285 TO
EXISTING LOT (ADDITIONAL HOLE REQUIRED)
CW

Name FISHER PROP. LOTS 1-5

**DEPARTMENT OF PLANNING AND ZONING
FINAL PLAT ORIGINAL SIGNATURE APPROVAL**

This is for the processing of final plat originals for signature approvals. If it is found necessary for any corrections or additions to be made on the original, the owner and consultant should be notified, along with the Division of Land Development and Research and other County/State agencies that would be affected by the changes. A notation should be added to this form if the originals are changed.

DPZ

Date ReceivedDate ForwardedTIM CALLAHAN

Reviewing Agent

8/27/968/28/96

Rejected for: _____

② DPW/HEALTHDate InDate Forwarded

Reviewing Agent

Rejected for: _____

① HEALTH/DPWDate InDate Forwarded

Reviewing Agent

Rejected for: _____

DPZ

Date ReceivedOwner/Engineer
Notified

Reviewing Agent

Actions or Revisions Needed: _____

APPLICATION

PERCOLATION TESTING

A 40285
P _____

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

DISTRICT _____
DATE Oct 15 1987

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 LEONARD G FISCHER AND CLARE V. FISCHER

ADDRESS 6160 ROCKBURN HILL RD. PHONE 796-2817

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION: ROCKBURN HILL RD. EAST SIDE OF ROAD

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

TAX MAP 32 PARCEL # 1

SIZE OF LOT 14.02 ACKERS TYPE BLDG. EXISTING RESIDENCE
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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REASONS FOR REJECTION OR HOLDING 11/23/87 Perc Satisfactory - Hold for Plot: JAB

THIS IS NOT A PERMIT