

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ (AP) 5 31920

AGENCY REVIEW: _____ DATE 9/16/09

DO NOT WRITE ABOVE THIS LINE

I 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) Chris Hayes

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS 2555 Sand Hill Road Elkott City MO 21042
STREET CITY/TOWN STATE ZIP

APPLICANT Freedom Septic Service Inc

DAYTIME PHONE 410 795-2947 CELL _____ FAX _____

MAILING ADDRESS 2809 Liberty Road Sylversville MD 21784
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS 2555 Sand Hill Road
STREET TOWN/POST OFFICE

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

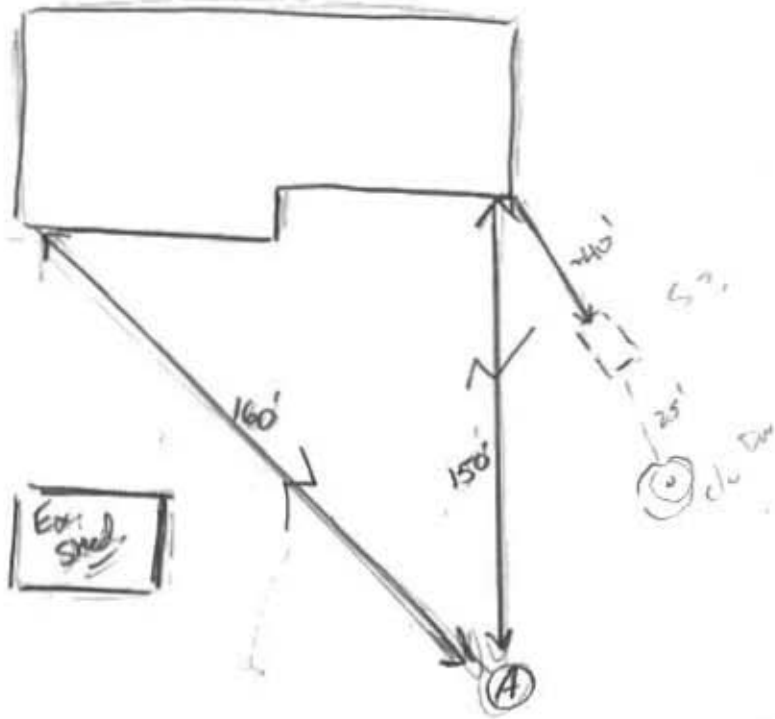
AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A.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

TEST RESULTS WILL BE MAILED TO APPLICANT.

Bruce / (VF)
SIGNATURE OF APPLICANT

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

Public H₂O



B" (A)
 Top Soil
 Silt. m. r. roots
 10 YR 4/4, SCL
 MSBK,
 very friable,
 20% schist chnrs
 10 YR 4H SL
 Friable,
 platy structure
 from bedding
 Plures, roots
 5-10% schist
 angular schist chnrs
 ↓
 cherty SL
 getting harder.
 large size
 11.5' mica schist

| DATE | TEST # | DEPTH | START | BREAK 1" DROP | STOP 2" DROP | TIME OF 2ND INCH | P/F/H |
|---------|--------|----------|-------|------------------|-----------------|---------------------|-------|
| 9/29/09 | (A) | 4' 11.5" | 11:45 | 11:47 | 11:50 | 3 | P |
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* Paved H₂O bottom hole (A) ~ 10 min.
 REMARKS 3BR, near soil 1 sec
 SANITARIAN K. Wolf BACKHOE Jante OTHERS _____
 TEST HOLES USED IN SDA 1 AVG. PERC TIME 3 SQ. FT/BR _____
 TRENCH WIDTH 2' INLET DEPTH 2' MAX. BOT DEPTH 6' EFFECTIVE SW 4'

$$\frac{450}{1.2} = 375 \div 2' = 187.5 = 107.5 \text{ LF}$$

-78°55'45"

39°18'3."



39°18'3."



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-78°55'45"

150455

Howard County

M A R Y L A N D

By:
Office:
Map Width: 910.00 ft.
Print Date: 8/29/2009
Scale: 1 in. = 100 ft.