



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ AP _____

AGENCY REVIEW: _____ DATE _____

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 UNKNOWN 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) DONALD J. MUNRO

DAYTIME PHONE (202) 871-3022 CELL - FAX -

MAILING ADDRESS 3914 HUNTINGTON ST. NW, WASHINGTON DC 20015
STREET CITY/TOWN STATE ZIP

APPLICANT G. SCOTT SHANABERGER, SHANABERGER & LANE

DAYTIME PHONE (410) 461-9563 CELL - FAX (410) 461-9613

MAILING ADDRESS 8726 TOWN & COUNTRY BLVD, SUITE 201, ELICOTT CITY, MD 21043
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME MUNRO PROPERTY, LOTS 1-4 LOT NO. 3

PROPERTY ADDRESS 8601 RESERVOIR ROAD FULTON, MD 20779
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 45 GRID 12 PARCEL(S) 9 PROPOSED LOT SIZE 3.40 AC

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.

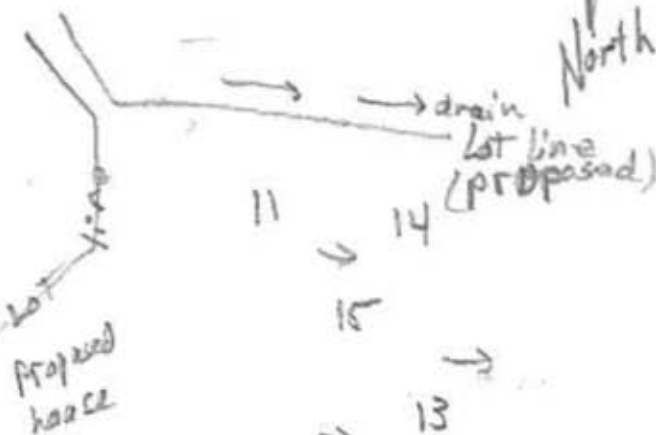
G. Scott Shanabarger
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

Proposed Lot 3



11
 0.5
 1.3
 4
 11.3
 13
 13
 13



14
 0.4
 1.3
 2.5
 4.5
 8.5
 12
 0.4
 1.3
 1
 2
 7
 12

13
 0.8
 1.3
 2.5
 11
 12

DATE	TEST #	DEPTH	START	BREAK 1' DROP	STOP 2' DROP	TIME OF 2ND INCH	P/F/H
5/31/12	11	4' 11.3'	11:54	12:19 ⁺	—	—	reshelf
5/31/12	14	4' 12'	0	1.7	5.1	3.4	P
5/31/12	15	—	Visual	sidewall ok	2'-7'	12 gpd/ft ²	P
reshelf	11	5' 11.3'	12:57	1:14 ⁺	—	—	reshelf
reshelf	11	11.3'	Visual	sidewall ok	5' to 7'	1.2 gpd/ft ²	P
5/31/12	13	3.8' 11'	0	1.1	3.3	2.2	P
5/31/12	12	4.2' 12.5'	1:30	1:50 ⁺	—	—	reshelf
reshelf	12	6' 15.5'	1:59	2:02	2:05	3	P

REMARKS Initial system 5' to 7' sidewall.

SANITARIAN R2

BACKHOE Bill Ingram OTHERS

TEST HOLES USED IN SDA

AVG. PERC TIME

SQ. FT/BR

TRENCH WIDTH

INLET DEPTH

MAX. BOT DEPTH

EFFECTIVE SW

12
 0.3
 2
 2
 3
 7.5
 12.5

