



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ @P 523 269

AGENCY REVIEW: _____ DATE 9/7/05

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 4705 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) MRS. WILLIAM A. SCHULTE

DAYTIME PHONE 443-367-0422 CELL _____ FAX 443-367-0420

MAILING ADDRESS 5300 TORSEY HALL DR. ELLICOTT CITY, MD 21042
STREET CITY/TOWN STATE ZIP

APPLICANT LAND DESIGN & DEVELOPMENT LLC

DAYTIME PHONE 443-367-0422 CELL _____ FAX 443-367-0420

MAILING ADDRESS 5300 TORSEY HALL DR #102 ELLICOTT CITY, MD 21042
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME SCHULTE PROPERTY NORTH SIDE LOT NO. 21

PROPERTY ADDRESS 15320 OLD FREDERICK RD WOODBINE MD 21797
STREET AT MORGAN STATION ROAD TOWN/POST OFFICE

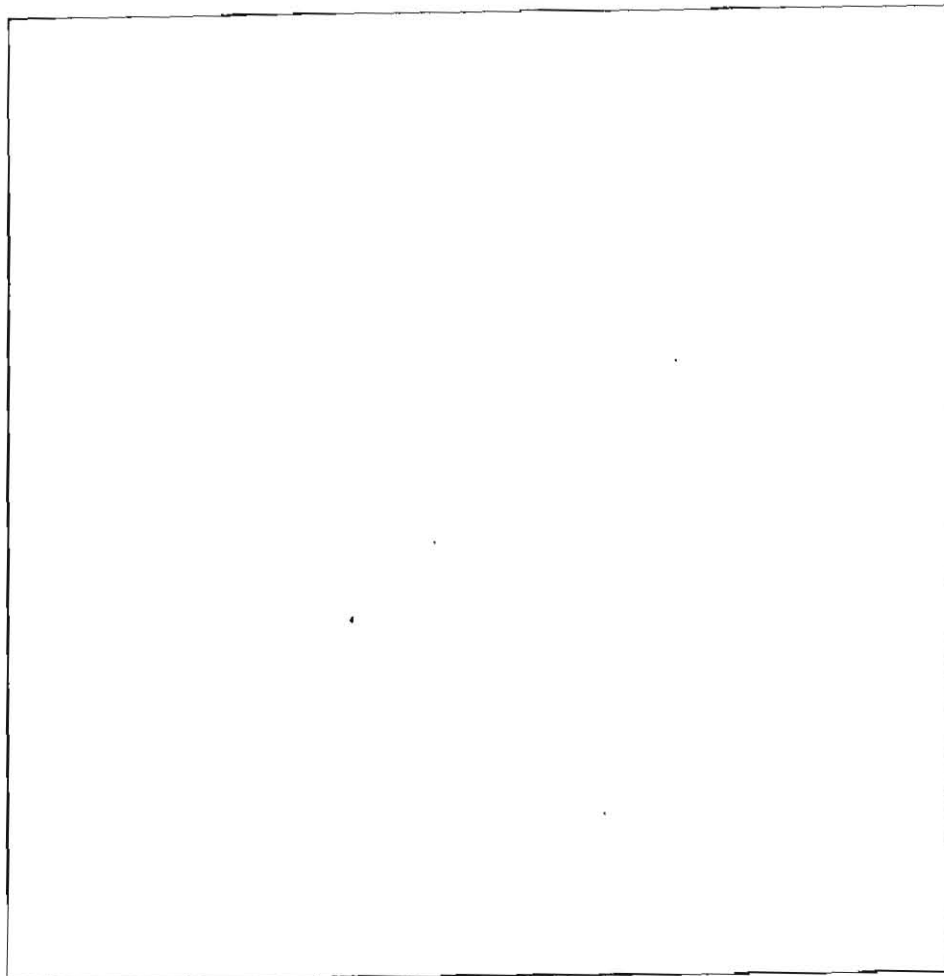
TAX MAP PAGE(S) B GRID 223 PARCEL(S) 8E17 PROPOSED LOT SIZE 40,000 sq ft

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.

SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P _____



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H

REMARKS _____

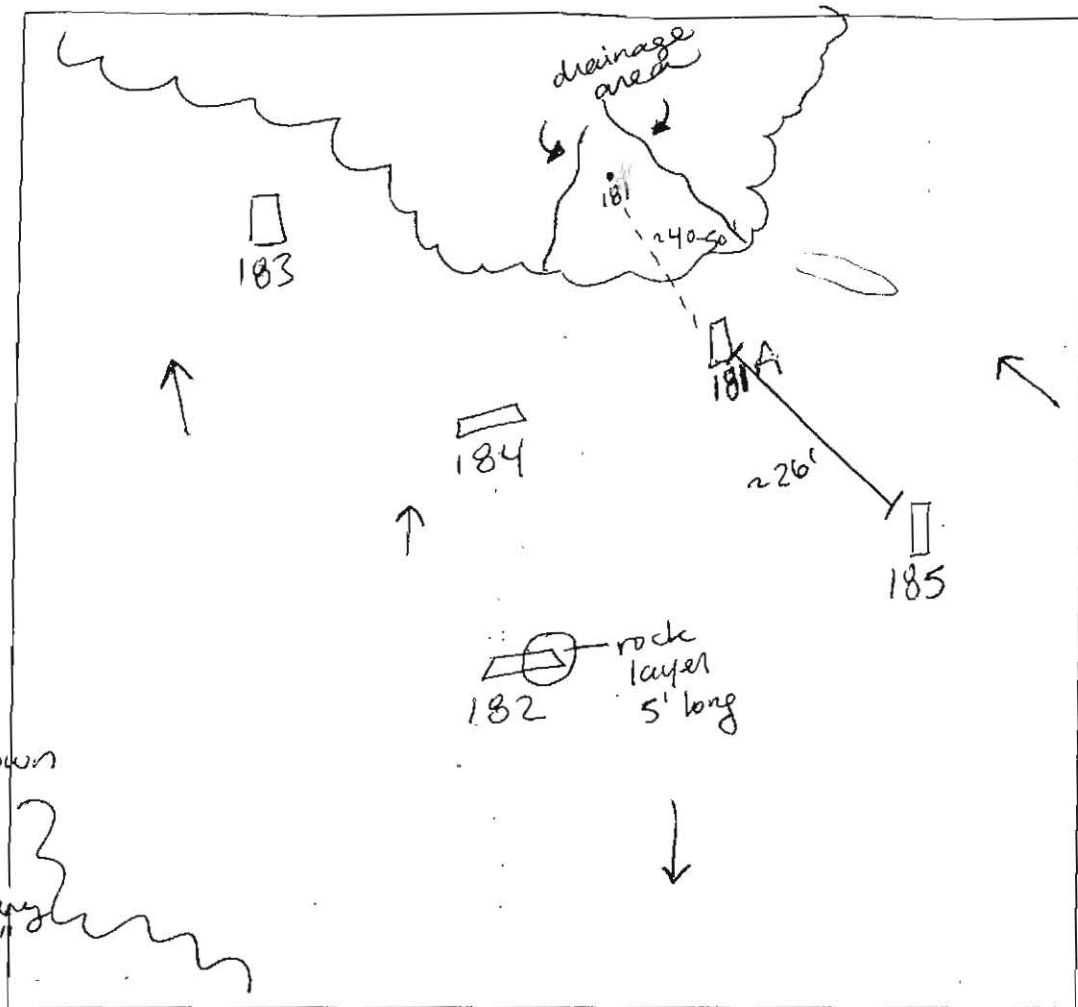
SANITARIAN _____ BACKHOE _____ OTHERS _____

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

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

Lot 22

A/P



55% channery / coarse chert

182
brown L
red/yellow brown
silt
2'8"
rock layer
light channery
red brown
dense silt
4'
yellow brown
silt sg
HB

183
brown L
reddish brown
silt sbk
micaceous
2'
reddish brown
silt sg
micaceous
channery
2'5"
4'
brown
silt
20% channery
25% coarse
chert @ bottom
9'5" HB

184
brown L
red brown
dense silt
micaceous
2'10"
brown
silt sg
micaceous
15-20% channery
9'
HB
185
brown L
red yellow brown
silt
dense silt
2'
yellow brown
w/ pink
silt sg
15% channery
gravel granite
11'

181
brown L
red brown
silt →
dense silt
micaceous
roots
2'
2'8"
red yellow
brown
silt sg
10% channery
gravel

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
10/28/05	182	4' / 8'	1:42 ³⁹	1:46 ¹³	1:55	9"	P
	183	4'9" / 9'5"	1:49	1:52	1:57	5"	P
	184	3'6" / 9'	2:02 ⁰¹	2:05	2:09 ¹⁵	4"	P
	185	5'5" / 11'	2:11 ²⁶ 2:14 ¹⁹	2:11 ²⁷ 2:16 ³³	2:13 ²⁰ 2:19	3"	P
	"	4'	2:35 ⁰²	2:37"	2:42"	5"	P
	181A	3'7" / 11'	2:33 ¹⁸	2:36 ³¹	2:39 ²¹	3"	P

REMARKS #181 Shallow systems - Holes started by surveyor per plan
moved in field due to location in drainage area
SANITARIAN SF BACKHOE Tom (AEC) OTHERS R. Webster
TEST HOLES USED IN SOA
AVG. PERC TIME 5 SQ. FT/BR

TRENCH WIDTH INLET DEPTH MAX. BOT DEPTH EFFECTIVE S/W

