



Howard County
Health Department

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

Attn: Willy

TEST DATE(S) _____ TEST TIME _____ A/P A 526159

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 3 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) Gary + Judy Persing

DAYTIME PHONE 410-489-2539 CELL 443-538-5087 FAX _____

MAILING ADDRESS 1005 River Rd. 5085 Sykesville MD 21784
STREET CITY/TOWN STATE ZIP

APPLICANT Judy Persing

DAYTIME PHONE 410-489-2539 CELL 443-538-5087 FAX _____

MAILING ADDRESS 1005 River Rd. Sykesville MD 21784
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION Homeowner
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS 1005 River Rd. Sykesville MD 21784
STREET TOWN/POST OFFICE

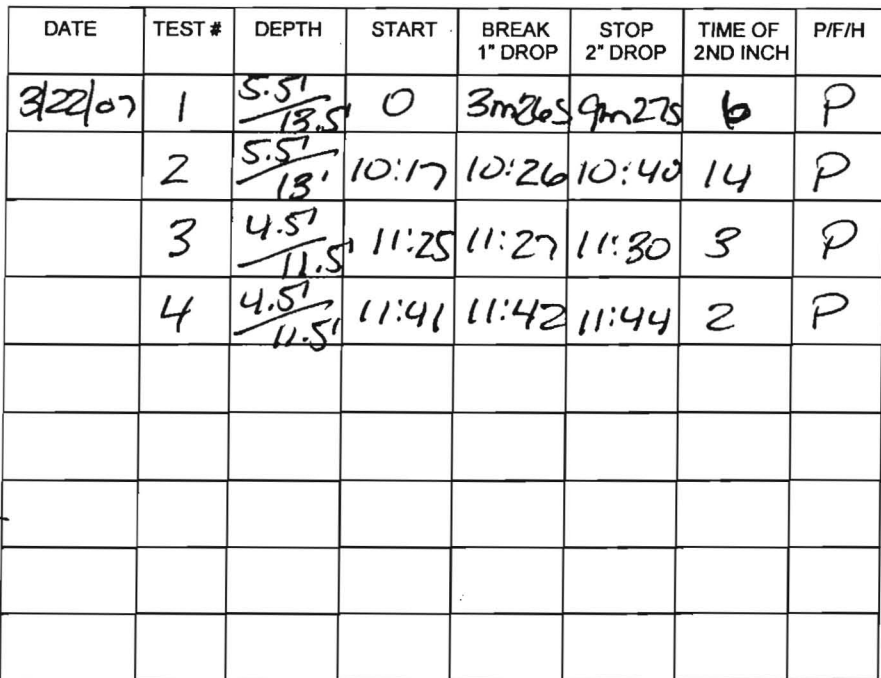
TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

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. Judy Persing
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

3



REMARKS Testing for denrofl Rebuild

SANITARIAN AT/RB BACKHOE Bill OTHERS Judy Persing

TEST HOLES USED IN SDA _____ AVG. PERC TIME 6.25 SQ. FT/BR _____

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

* Tested during wet season

0.8 $\frac{3 \times 0.8}{0.8} = \frac{2.4}{0.8} = 120$
120 x 7

River Road

B

Bm SCL
few quartz
stones

RD Bm SCL

LRD Bm
FSL

Bm + Bk FSL
saprolite

Cld depl.

DK Bm FSL
micaceous

pale RD/Bm
FSL

Cld depl.

micaceous
saprolite

quartz gr.
H₂O seeps

FSL continues

13'8" - Bottom

A/P

A

Bm SCL

RD Bm
SCL

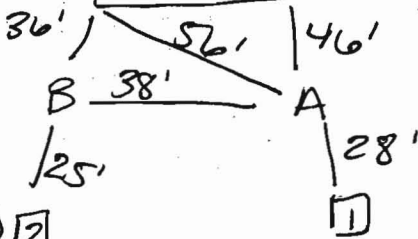
RD Bm
SL

RD Bm FSL

LR Bm + Bk
FSL
saprolite

LR Bm + Bk
FSL

Cld depl. (olive
grey)
flp enrich (orange)



B

38'

25'

12

A

28'

11

0.5'

2'

3.5'

7'

12'

12.5'

13'8"

moisture
collects

relatively
drier

Bm + Bk
SL

Bottom

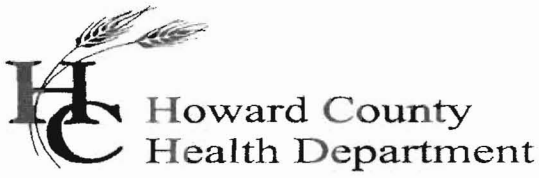
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
4/4/07							
A + B are auger tests							

REMARKS 11 12 = Perc Tests conducted 3/22/07

SANITARIAN PB BACKHOE OTHERS

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

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



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-899-313-6300
website: www.hchealth.org

Peter Beilenson, M.D., M.P.H., Health Officer

May 8, 2007

Gary & Judy Persing
1005 River Road
Sykesville, MD 21784

RE: Percolation Test Results A# 526159
1005 River Road

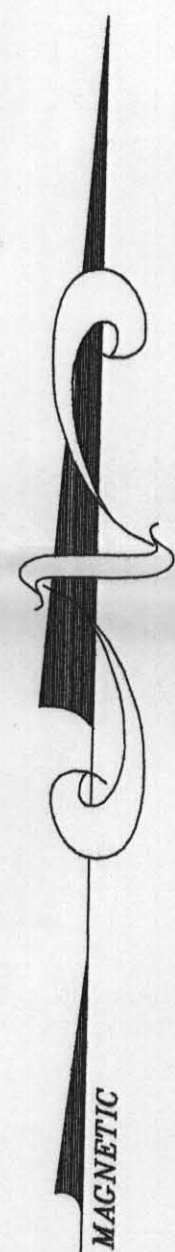
Dear Mr. and Mrs. Persing,

Percolation testing conducted March 22, 2007 on the referenced property indicated satisfactory soil conditions. Copies of the test results are enclosed. As a result of limited area on the referenced property it will be necessary for a partial septic easement to be described in front of the existing house as well as behind the existing house. As a result, the existing well will need to be abandoned and a new well drilled in a location approved by the Health Department prior to building permit. In addition, the existing dry well will need to be properly abandoned prior to building permit approval. The existing septic tank and trench to remain will adequately support the proposed 3 bedroom house and an upgrade shall not be necessary.

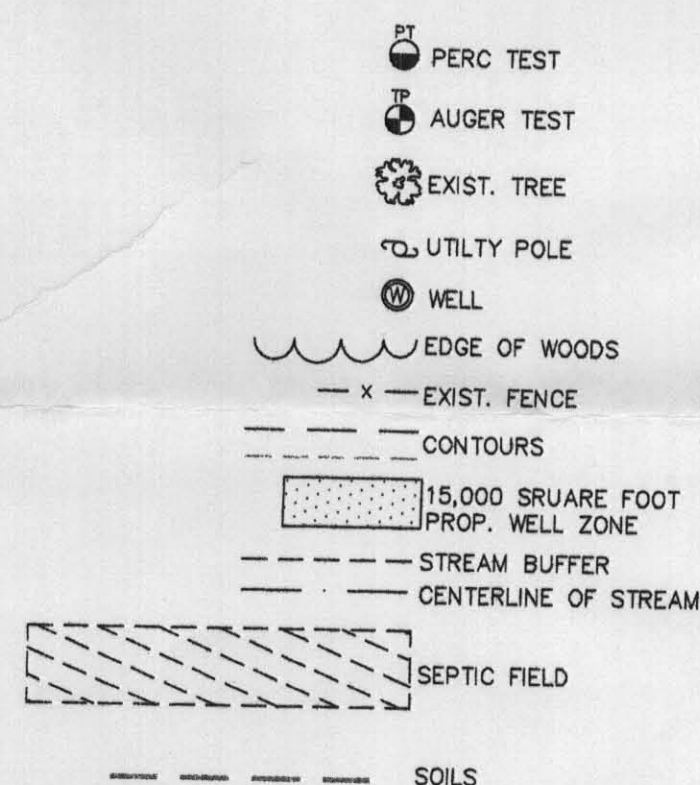
Further review is contingent upon submission of a Percolation Certification Plan showing the following:

1. Identification of the property, road, street address if applicable, tax map page, parcel number, subdivision name; a purpose statement as appropriate (re-subdivision, SDA adjustment, etc.)
2. Name, address, and telephone number of the owner, developer, and the person preparing the plan.
3. The date the plan was drawn, the plan scale (1:30-1:100), a scaled vicinity map and the A# (the percolation test fee receipt number, referenced above).
4. Health Officer Signature block conditioned with the statement: "Approved for private water and private sewerage systems."
5. Existing and any proposed property lines
6. Except for staked holes not dug, all excavated test holes observed by the approving authority, identified according to the original percolation testing proposal, or, as otherwise identified at the time of testing.
7. Actual surveyed elevation (not based on County aerial topography) of each test hole.
8. Legend symbols to distinguish holes, which passed, failed, or were held for future review. Legend symbols to distinguish between existing holes previously documented and new holes.
9. For lots created after March 1972, proposed minimum 10,000 Sq. Ft. Sewage Disposal Area for each lot and for lots created before March 1972, proposed adequate area for an initial system and two repair systems.

SOILS		
Ba	BAILE SILT LOAM	3 TO 8 PERCENT SLOPES MODERATELY ERODED
GIB2	GLENELG LOAM	8 TO 15 PERCENT SLOPES MODERATELY ERODED
MIC2	MANOR LOAM	3 TO 8 PERCENT MODERATELY ERODED
MIB2	MANOR LOAM	



LEGEND



APPROX. LOCATION EXISTING 2' TRENCH 50' LONG

EXIST SDA 3512 SQUARE FEET ±
ADEQUATE FOR PROPOSED IMPROVEMENTS

PREPARED BY:
JOHN C. MELLEMA SR., INC.
LAND SURVEYORS
5409 EAST DR. BALTO., MD. 21227
PHONE: 410-247-7488 FAX: 410-247-2507

I HEREBY CERTIFY THERE ARE NO WELLS OR SEPTIC SYSTEMS
WITHIN 100 FEET OF THE PROPERTY BOUNDARY UNLESS
OTHERWISE SHOWN HEREON.
I FURTHER CERTIFY THAT THE PERCOLATION TEST HOLES HAVE
BEEN FIELD LOCATED AS SHOWN HEREON.

I, CERTIFY THAT THE INFORMATION SHOWN HEREON IS BASED
ON FIELD WORK PERFORMED BY ME OR UNDER MY DIRECT
SUPERVISION, AND IS CORRECT, TO THE BEST OF MY
KNOWLEDGE AND BELIEF.

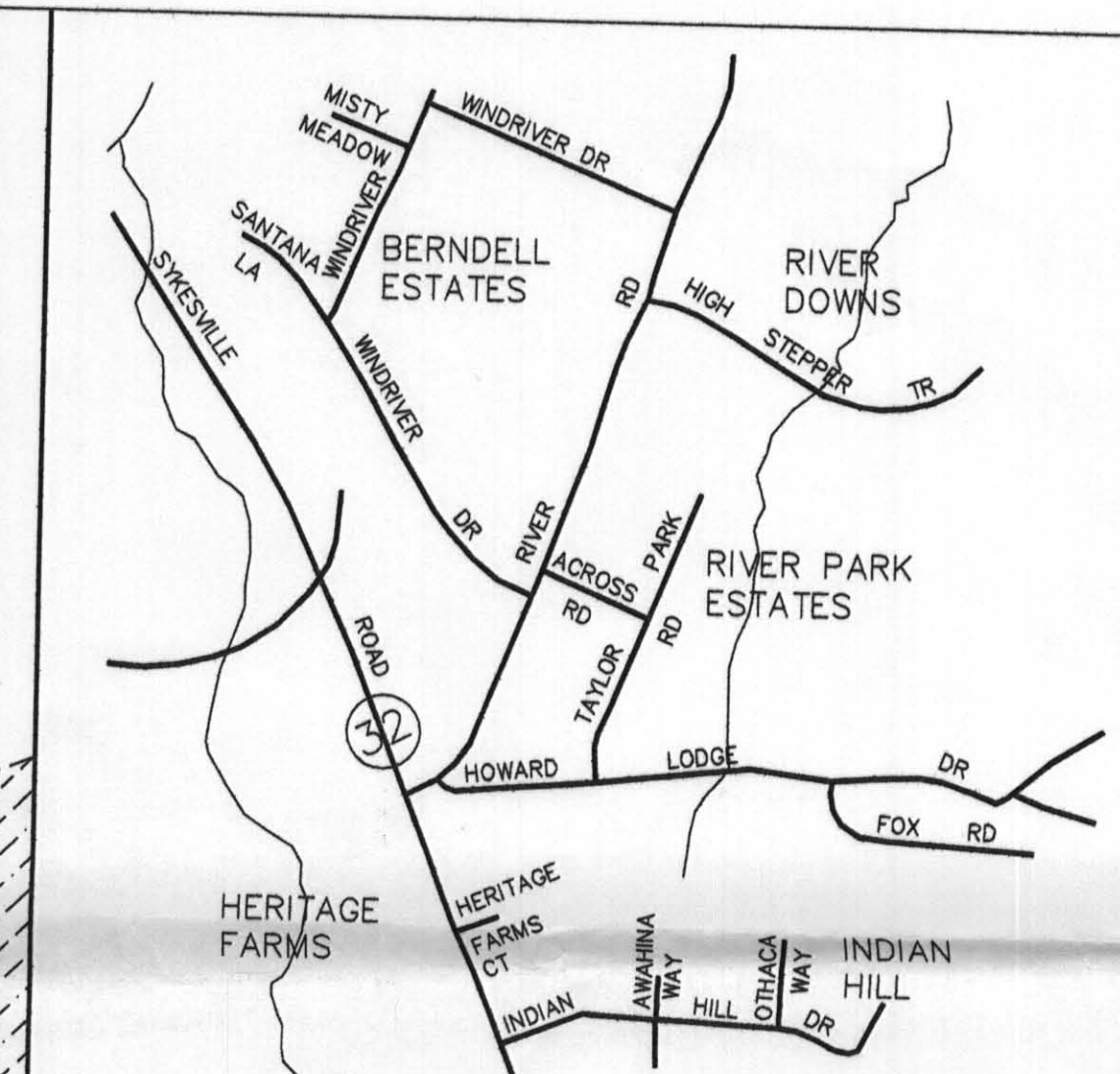


OWNER/DEVELOPER
GARY PERSING
1005 RIVER ROAD
SYKESVILLE, MD. 21784
PHONE: 410-489-2539

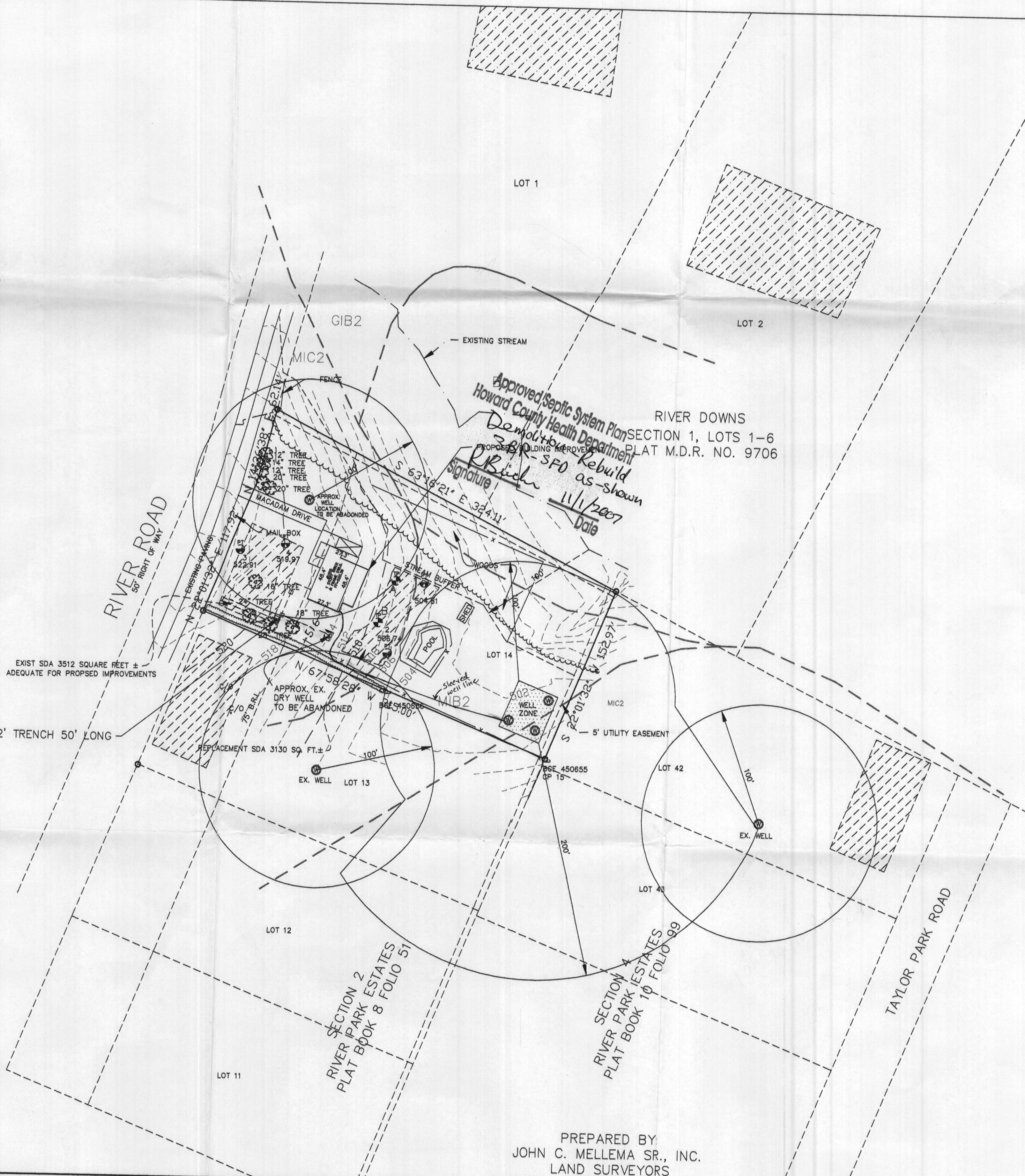
PERCOLATION CERTIFICATION PLAN
#1005 RIVER ROAD
HOWARD COUNTY, MARYLAND
TAX MAP 9 GRID 5 PARCEL 103
LOT 14 SECTION 2
"RIVER PARK ESTATES"
PLAT BOOK 8 FOLIO 15
DEED REF.: 9894/073
SCALE: 1"=50' DATE: JUNE, 2007

NOTES

1. PERCOLATION TEST RESULTS A#526159
2. THE PURPOSE OF THIS PLAN IS TO ADJUST THE SDA
3. PROPOSED WELL TO BE DRILLED PRIOR TO BUILDING PERMIT AND
THE EXISTING WELL TO BE ABANDONED PRIOR TO BUILDING
PERMIT APPROVAL.
4. TOPOGRAPHY IS AT 2' CONTOUR INTERVALS AND HAS BEEN
FIELD RUN AND VERIFIED AND IS ACCURATELY SHOWN.
5. THE ENGINEER HAS USED ALL REASONABLE EFFORTS TO FIND
THE LOCATION OF ALL SURROUNDING WELLS AND SEPTICS.
6. ANY CHANGES TO A PRIVATE SEWAGE EASEMENT SHALL
REQUIRE A REVISED PERCOLATION CERTIFICATION PLAN.
7. THE DRY WELL MUST BE ABANDONED PRIOR TO BUILDING PERMIT
APPROVAL
8. THIS AREA DESIGNATES A PRIVATE SEWAGE
EASEMENT AS REQUIRED BY THE MARYLAND
STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL
SEWAGE DISPOSAL (COMAR 26.04.03). IMPROVEMENTS OF ANY
NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE
IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND
VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE
COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO
GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE
SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE
EASEMENT SHALL NOT BE NECESSARY.
9. THE SDA ON THIS LOT CAN ONLY SUPPORT A 3 BEDROOM
HOME MAXIMUM



VICINITY MAP
SCALE: 1"=1000'



APPROVED: FOR PRIVATE WATER AND PRIVATE SEWER SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT

Howard County Health Officer
DATE 7/9/07

John C. Mellema Sr.
JOHN C. MELLEMA SR. REG. NO. 107

6-21-07
DATE

John C. Mellema Sr.
JOHN C. MELLEMA SR. REG. NO. 107

6-21-07
DATE

FILE INQUIRY NOTES

[illegible]



HOWARD COUNTY HEALTH DEPARTMENT

26159

DATE 12 / 29 / 06

AS

Received From

Judy Persing

PHONE # 413 538-5057

QHP ✓
NO FAX # ✓
CLARE ✓
LOG ✓

☐ CASH
☒ CHECK

For pers APP -
1005 River Rd

NO.

1532

five hundred six dollars Dollars

\$ 506.00

Received By

1/18/07