

APPLICATION

PERCOLATION TESTING

A 514972

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

PROPOSAL TO
REVISE EX. PLATTED
SRA TO
ACCOMMODATE
PROPOSED POOL MR

DISTRICT _____

DATE 3/8/2001

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Earl Scott

ADDRESS 13307 Royden Court PHONE _____

AGENT OR PROSPECTIVE BUYER Barnard Bros. Const. Co., Inc.

ADDRESS 1612 Brittle Branch Way PHONE (410) 489-7621

PROPERTY LOCATION: Woodbine, MD 21797

SUBDIVISION Ridgewood Estates LOT NO. 26

ROAD AND DESCRIPTION End of cul de sac of Royden Court

TAX MAP _____ PARCEL # _____

SIZE OF LOT 3.1 acs. TYPE BLDG. SFD with pool and Add's
(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. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

0'

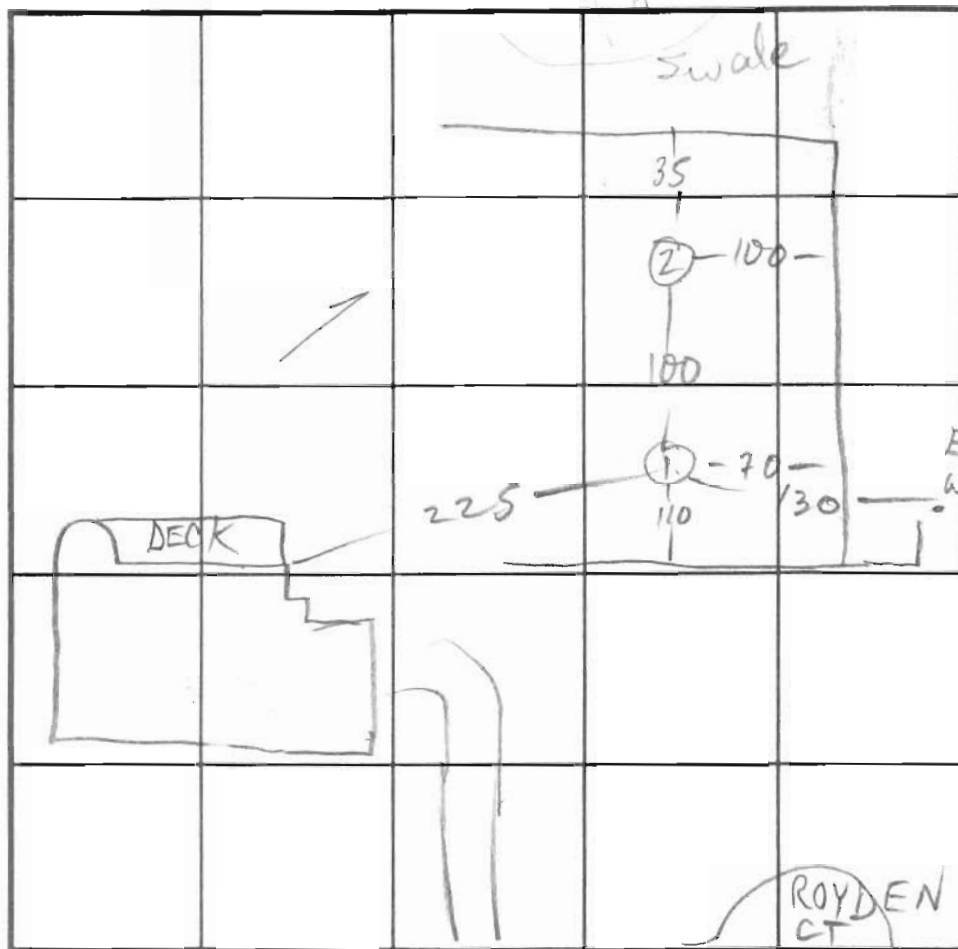
4 1/2 - orange
cl
5
tan
pink
s mica
1m
10%
frags

12'

(2)
red
s: cl 1m
3
orange
s: sa 1m

6-6 1/2'

brn gel
orange
s mica
1m
10% Frags
11 1/2'



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/28/01	1 S	5	10:08	10:21	10:21	10:51	30
	1 M	8 1/2	10:26	10:28	10:28	10:30	2
	1 V	12					
	2 S	3 1/2	10:33	10:34	10:34	10:40	6
	2 M	7 1/2	10:42	10:43	10:43	10:46	3
	2 V	11 1/2					

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____