

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37824
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P O BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 992-2330

DISTRICT _____
DATE 10/29/86
June 30, 1986

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER ESD Associates, Inc Martha V. Langenfelder
Conrad J. and Patricia Langenfelder
ADDRESS 11904 Clarksville Road 5511 Hamilton Avenue
Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION: _____
SUBDIVISION Langenfelder Farm Clearview Est. Sec. 1 LOT NO. 52 23 on final 149 Prelim
ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane 11921 Meadow Vista Way

SIZE OF LOT 3.2 AC. TYPE BLDG. Residential
(NUMBER OF BEDROOMS) _____

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.
Steven P. Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

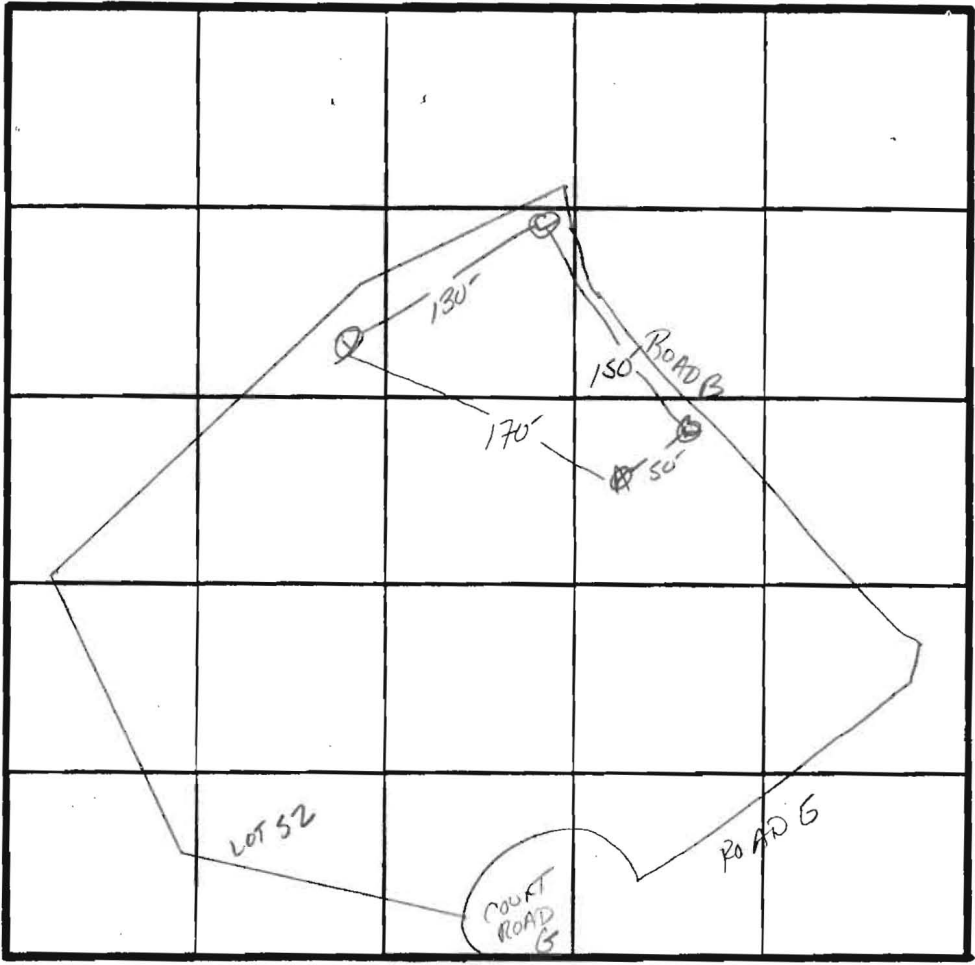
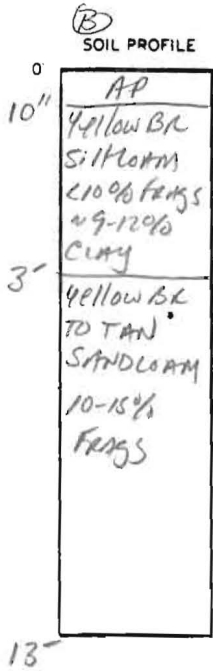
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10-22-86 Perc Satisfactory - 1 dtd for Subdivision Plat -

S. Abel BLDG. PERMIT SIGNED
AND RETURNED 3/8/91
Serial # 36761 - ST-P

THIS IS NOT A PERMIT



\bar{X} 2 min
160 #1 BR
INLET 3"
BOTTOM 8"

↓ TO 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
19/2/86	A ✓	13"	SIMILAR TO HOLE B w/ small amt of gravel 15-20%					
	B S	4"	11:30	11:31	11:31	11:33	2 min	
	B V	13"	UNIFORM soil below 3"					
	D S	4"	11:35	11:36	11:36	11:38	2 min	
	D M	9"	11:35	11:36	11:36	11:38	2 min	
	D V	13"	SAMP AS HOLE A - CHESTER LOAM					
	C S	4"	11:37	11:38	11:38	11:40	2 min	
	C V	12.5"	SAME AS HOLE B					

REMARKS AS PLATED

TYPE OF SOIL Glendy / Chester w/ Transition

TESTED BY S. Abel

ALSO PRESENT JAMES WOOD
Allen Backhor
(mail)

EH 12 1079

APPLICATION

A 37828

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 992-2330

DISTRICT _____

DATE _____

*3/9/87
Based on info
& additional tests
no perc alone*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Crystal Hill Investments

ADDRESS 10005 Old Columbia Rd. Suite ^{L265} PHONE 730-2411

PROPERTY LOCATION: Columbia, Md. 21046 *family st Failed Holes*

SUBDIVISION Clearview Estates Sec. 1 LOT NO. 45 *LOT 9*

ROAD AND DESCRIPTION Rt. 108 and Shepherd Lane

SIZE OF LOT 5.3 ac. TYPE BLDG. residential
(NUMBER OF BEDROOMS)

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.

Stephen Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING TESTS FROM 1/87 HAD HIGH H₂O TABLE IN
MOST HOLES DUG

THIS IS NOT A PERMIT

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37828
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P O BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 992-2330

DISTRICT _____
DATE 10/09/86
June 30, 1986

*10/30/86
wet season*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Conrad J. and Patricia Langenfelder Martha V. Langenfelder
11904 Clarksville Road 5511 Hamilton Avenue
ADDRESS Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION:

SUBDIVISION Langenfelder Farm LOT NO. 56

ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane

SIZE OF LOT 3.5 AC. TYPE BLDG. Residential
(NUMBER OF BEDROOMS)

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.

Steven P. Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

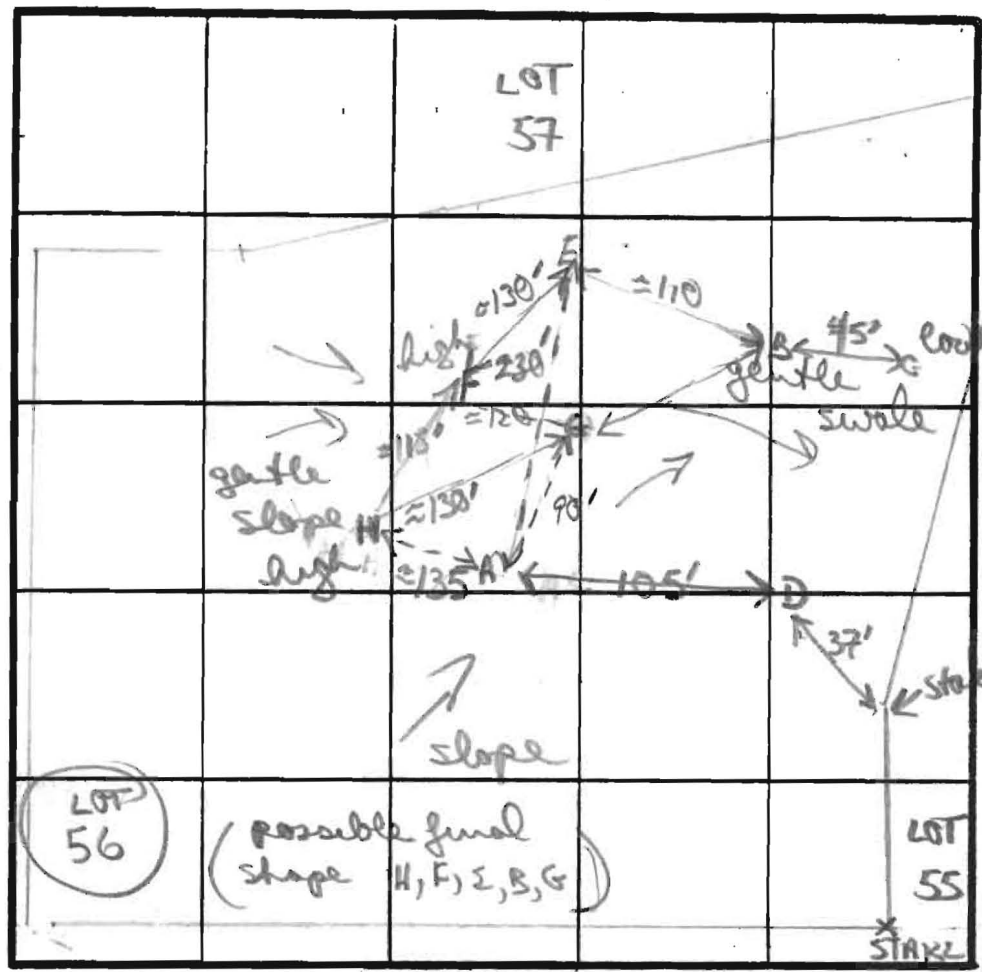
HOLD PENDING FURTHER TESTS WET SEASON RECHECK DATE _____
OF H₂O LEVEL

REASONS FOR REJECTION OR HOLDING SOILS FINE FOR SHALLOW SYSTEM

10/30/86

THIS IS NOT A PERMIT

D
SOIL PROFILE



B
Brown/orange
gritty/gravelly
sandy clay
3 1/2'
tan/brown
silty/sandy
loam
↓
sand bottom
10'D

C
Brown
sandy silty
loam
↓ getting
deeper
↓
H₂O 9 1/2'D
11'D

INDICATE NORTH LINE ADJOINING ROADWAY AS BASE LINE.
RT 108

A 12'D
Brown sandy
gravelly
loam 4'
brown
sandy loam
↓ some
nodules 10"
H₂O 10'D
11'D
E
brown gritty
sandy loam
changing to
brown silty
loam
↓
10' grey white
at 12'D
12'D

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/30/86	D	H ₂ O 10 1/2'	NOT TESTED				
		12'D	bottom	(see profile)			
	A	H ₂ O 10'D	NOT TESTED				
		11'D	bottom	(see profile)			
	H	2'S	333	334	334	335	2MIN
		12 1/2'D	bottom	(see profile)			
	C	H ₂ O 9 1/2'D	NOT TESTED				
	B	4'	303	304	304	305	1MIN
		10'D	bottom	(see profile)			
			(PAGE 2 OVER)				

Remarks: perc adjusted, H₂O in almost all holes

NOTE: IF
THEY COULD
GO DEEPER
MAY GET
H₂O ALSO

REMARKS: predominantly brown silty loams, some
noddled soils 10' deep
TESTED BY: B Nyfan
ALSO PRESENT: Jane

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT _____

DATE 10/30/86

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Langerfelder LOT NO. 56 on 2

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(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 _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

F

SOIL PROFILE

0'
brown to light tan
brown sandy
silty/gravelly
(scattered)
loam
3'
powdery
tan silty
fine
loam
↓

12 1/2 D

G + H

brown sandy
gummy loam
predominately
silty loam

↓ darker
brown silty
fine loam
trickle of
H₂O 12' D

12' D

H₂O 12 1/2
in H

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/30	F	4 1/2 S	315	316	316	317	1 MIN
		12 1/2	bottom (see profile)				
	G	2' S	328	330	330	334	4 MIN
		6' M	325	326	326	328	2 MIN
		12' D	bottom (trickle of H ₂ O)				
	E	4 1/2 S	320	321	321	322	1 MIN
		8' M	320	321	321	322	1 MIN
		12' D	bottom (H ₂ O at 12')				

NOTE FOR WET SEASON RE-TEST (VISUAL OF H₂O LEVEL in lower holes)
 TYPE OF SOIL ~~SHALLOW SYSTEM ONLY~~ (SOILS ARE GOOD)

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37829
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P O BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 992-2330

DISTRICT _____
DATE 10/09/86
June 30, 1986

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Conrad J. and Patricia Langenfelder Martha V. Langenfelder
11904 Clarksville Road 5511 Hamilton Avenue
ADDRESS Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION:
SUBDIVISION Langenfelder Farm Clearview Est. Sec-1 LOT NO. 57 9 *Failed Hole Lot*
ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane

SIZE OF LOT 3.1 AC. TYPE BLDG. Residential
(NUMBER OF BEDROOMS)

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

Steven P. Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

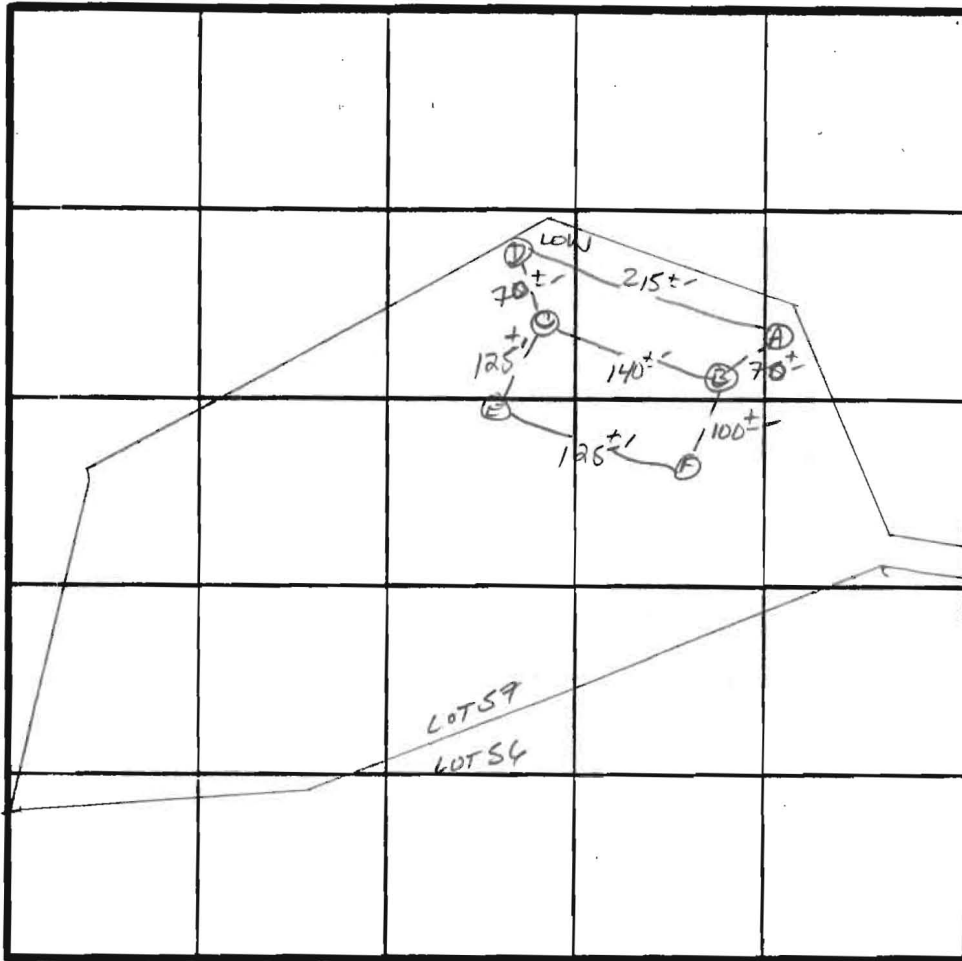
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/2/86 Perc Satisfactory - H₂O in all holes -> hold for W/S,
RETEST OR Redesignate S. Hole

THIS IS NOT A PERMIT

SOIL PROFILE

AP
 9'11"
 4Yell BR
 Silt loam
 19-20% clay
 <10% frags
 4Yell. BR to
 Lsht BR
 Silt Sand
 Lo Am
 10-20% frags
 Highly
 micaceous
 11'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RE 108

E
 9'11"
 AP
 Strong BR
 Silt loam
 9-12% clay
 Very gravelly
 (G) 25-40%
 3'
 Light BR
 Sand silt loam
 to 4Yell BR
 Silt loam
 10-20%
 Fragments
 no mottles
 11.5'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/21/86	D	WATER AT 10"	CHESTER Soil Group ROCKY CLAY TO 5"					
	C S	4.5"	10:45	10:54	10:54	11:15		
	V	WATER TABLE AT 11"	CAP FRINGE AT 10"					
	B S	4"	10:45	10:51	10:51	10:59	8 min	
	M	8"	11:00	11:01	11:01	11:03	2 min	
	B V	WATER TABLE AT 2.5"	CAP FRINGE 11.5 FT					
	A -	NOT TESTED / USED						
	E V	WATER AT 11.5"	CAP AT 11" - CLAY TO 3"					
	S	4.5"	11:14	11:25	11:25	11:53	28 min	
	F V	12.5"	WATER AT 12.5 FT CAP FRINGE 11.5'					

REMARKS ^{REF} PERC DIFF THAN PLAT / WET SEASON RETEST

TYPE OF SOIL CHESTER Soil

TESTED BY S. Abel

ALSO PRESENT Allen BACHME JANE NADRE

EH 12 10/9