



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 5350952

AGENCY REVIEW: _____

DATE 08/23/2011

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 4 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) Mike Gaylor

DAYTIME PHONE 443-909-7814 CELL _____ FAX _____

MAILING ADDRESS 3303 KenAllen Ct Glenwood MD
STREET CITY/TOWN STATE ZIP

APPLICANT Ronnie Heaps

DAYTIME PHONE _____ CELL 443-297-17526 FAX 410-552-5815

MAILING ADDRESS 425 Gerecht Rd. Sykesville MD 21784
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME 3303 KenAllen Ct. LOT NO. _____

PROPERTY ADDRESS Glenwood MD
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.

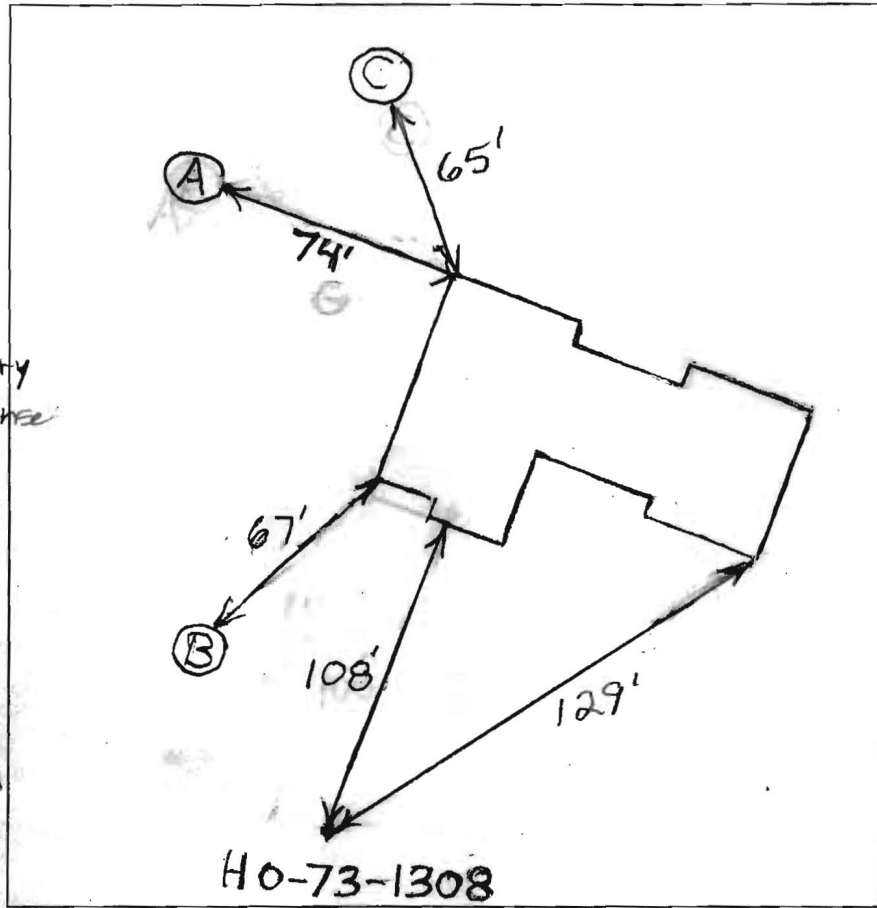
SIGNATURE OF APPLICANT

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

(A)
 2.5-3' Red Br Si Loam
 5.4' Red Br Sa Cl Loam
 Red Br Sa Loam Very Dense
 Turning to a Loamy Sa Deep Rocky Bottom, Dry
 14.5'

(B)
 3'-3.5' Red Br Si Loam-Loam
 5.5' Red Sa Cl Loam
 Red Br Sa Loam Turning to a Loamy Sa Deeper 6' and Below is Too Rocky
 15'

(C)
 2.5' Red Br Si Loam
 Dense Red Sa Cl Loam - Sa Loam
 7' Dense Red Sa Loam
 10' Excessive Rock
 14.5'



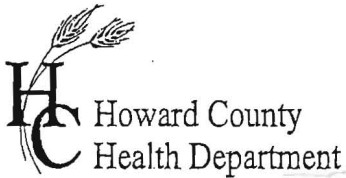
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
8/30/2011	A	6.5'/14.5'				Slow	F
		8.5'	2:15	2:43	3:20	~1/2"	F
	B	15'	Water Poured on Shelf at 6' Depth → Too Fast				F
	C	6.5'/14.5'	3:23	Pulled Too Slow			F
		7.5'	3:40	3:53	3:30	4:27:30	34 F
		No 4' Buffer ←					

REMARKS Water Poured in Bottom of (A) → Too Fast Dense

SANITARIAN B. Baker BACKHOE R. Heaps OTHERS _____

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

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



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

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

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 _____ 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) _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

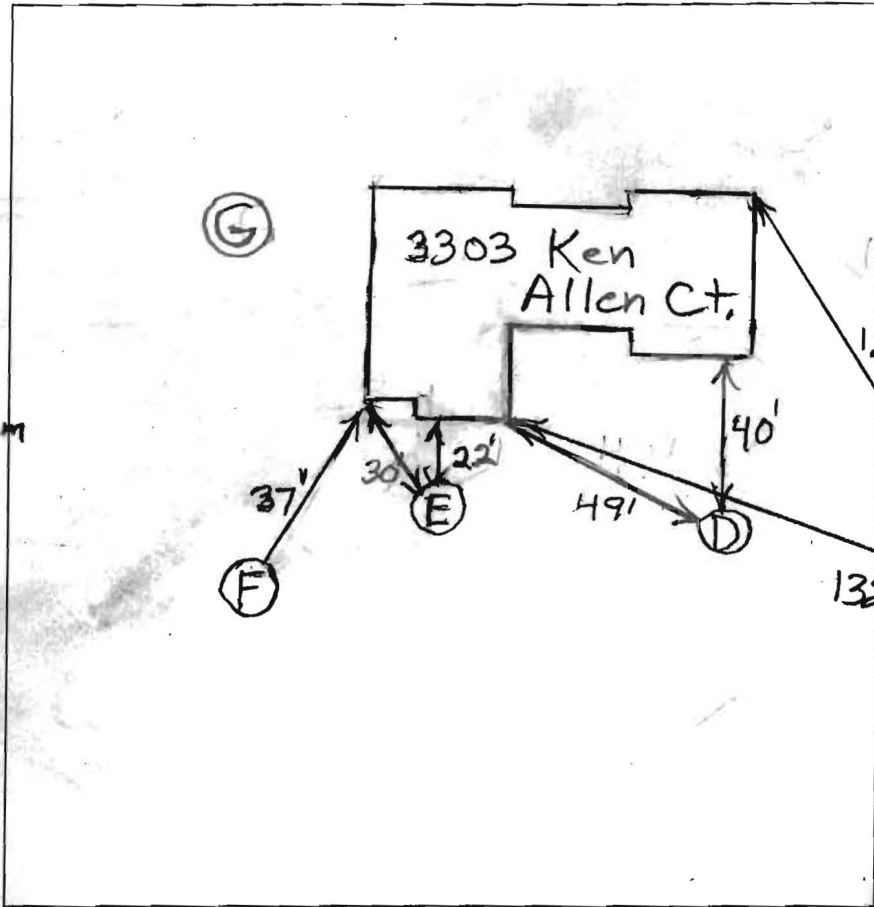
TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

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.

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



ⓓ
 Red Br Sa
 Cl Loam
 2-2.5'
 Dense
 Red Br Sa
 Cl Loam
 4.5'
 Moderately
 Dense Red
 Br Sa Cl
 Loam-Sa loam
 6-6.5'
 Dense Or
 Br Sa Loam
 ~10-15%
 Rock
 11'
 ~75% Rock
 12.5'

Dense Red
 Br S. Cl Loam
 5.5'
 Red Br Cl
 Loam
 6.5'
 Dense Red
 Br Sa Cl Loam -
 Sa Loam
 7-7.5'
 Dense Or
 Br Sa Loam
 30-40% Rock
 Closet 0.50
 13'
 Hard Bottom

ⓔ
 Br + Red Br
 Loam
 2-2.5'
 Red Br Sa
 Cl Loam
 3.5-4'
 Dense
 Or Br Sa
 Loam
 4-4.5'
 Moderately
 Dense
 Red Br
 Sa Loam
 Rock
 14'

ⓕ
 Br Sa Cl
 Loam
 1-1.5'
 Dense Red
 Br Sa Cl
 Loam
 2'
 Dense Or
 Br Sa Cl
 Loam
 4'
 Dense Red
 Br Sa Cl
 Loam - Sa
 Loam
 5-5.5'
 Dense Red
 Br Sa Loam
 Hard
 Bottom
 12.5'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
9/1/2011	D	5.5'/12.5'	11:46:30	11:52:30	12:04:30	16	P
		7'	12:12:30	12:21	12:40	19	P
	E	5.5'/14'	12:36	12:48:30	12:51	10 1/2	P
	F	6.5'/12.5'	1:29	1:39	2:00	21	P
9/9/11	G	7.5'/13'	12:42:30	12:47:30	1:03:30	16	

REMARKS _____
 SANITARIAN B. Baker BACKHOE R. Heaps OTHERS _____
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____

Neighbors Well

JOHN W. DAUBER
264/225

W B. OWINGS
480/210

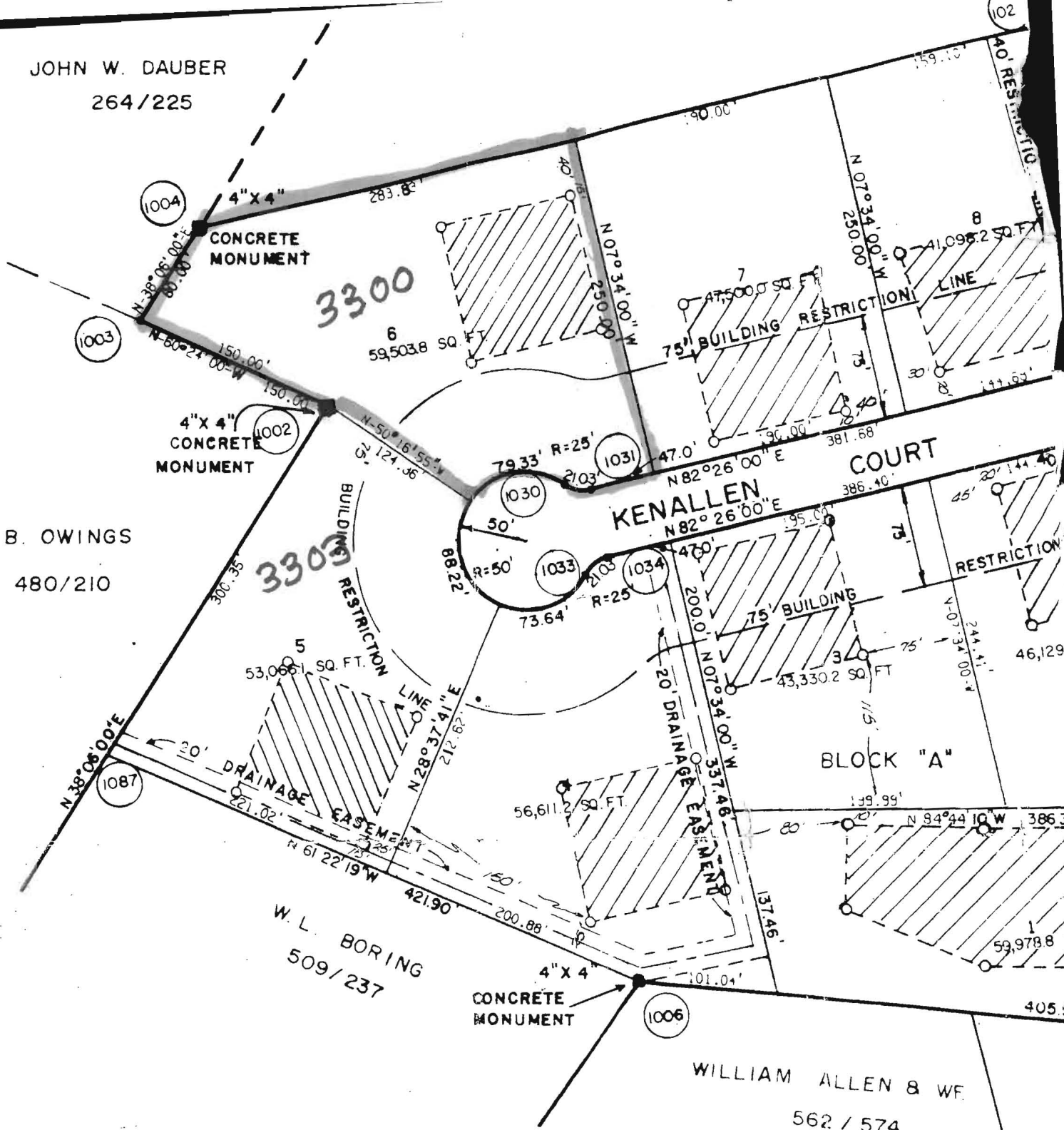
W. L. BORING
509/237

WILLIAM ALLEN & WF
562/574

WENLEE ESTATES SECTION I 11th ELECTION DISTRICT HO.CO.,MD.

Scale: 1"=100'

AUGUST 1973



*Approved
Final*