



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_ AP 5 27883

AGENCY REVIEW: \_\_\_\_\_ DATE 10/26/07

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

Describe Basement

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

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) Greg and Carol Nolf

DAYTIME PHONE 240-228-8216 CELL 240-252-0667 FAX \_\_\_\_\_

MAILING ADDRESS 16400 Ed Warfield Road Woodbine MD 21797  
STREET CITY/TOWN STATE ZIP

APPLICANT Paul Barnard

DAYTIME PHONE 410-489-7621 CELL 443-745-2221 FAX 410-489-7621

MAILING ADDRESS 1045 St. Michaels Rd Mt. Airy MD 21771  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME Greg & Carol A. Nolf Property LOT NO. \_\_\_\_\_

PROPERTY ADDRESS 16400 Ed Warfield Rd Woodbine 21797  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 13 GRID 16 PARCEL(S) 44 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.

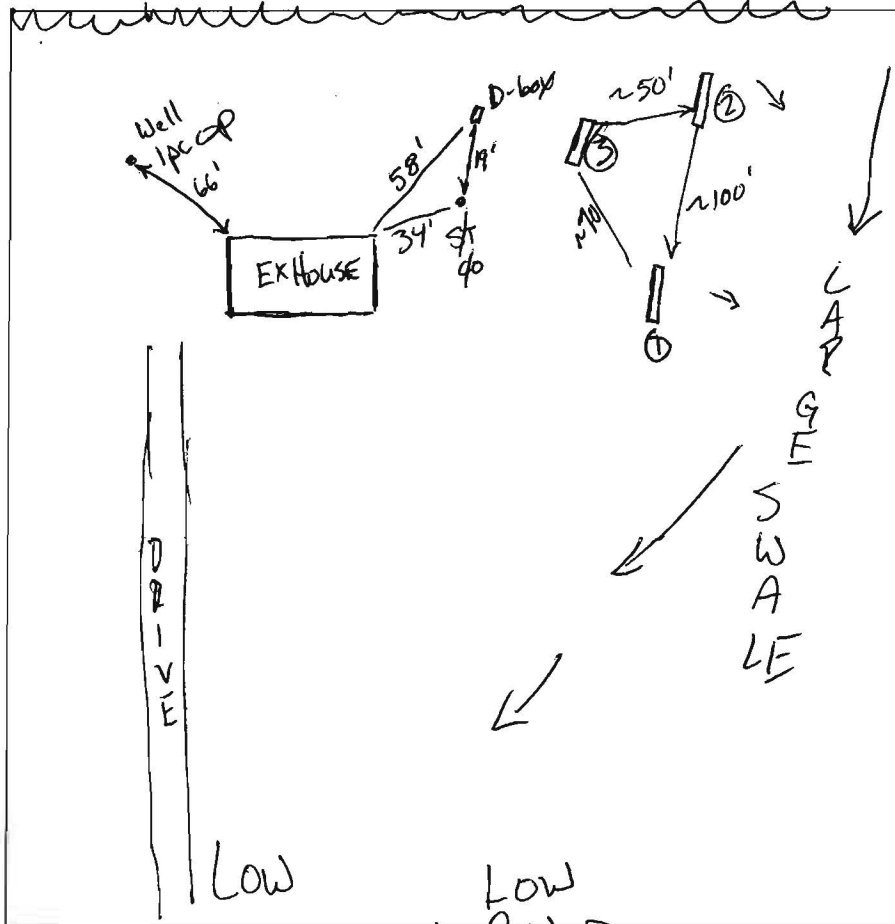
TEST RESULTS WILL BE MAILED TO APPLICANT. Paul Barnard  
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
1718 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

1	Brn 3fsbk	
	str. Brn 3csbk	
	Heavy L	
	channery ~10%	2 1/2
	Red Yellow	
	Heavy L	3 1/2
	Yellow/Red	
	SL ~ 15% channery	4 1/2
	Pale Red	
	FSL	
	strags	
	as block	
	e yellow	
	(wk sdr)	
	marly hard	11 1/2
		12

2	Brn/2sbk	
	2in L	8"
	str. Brn	
	#L 3sbk	2 1/2
	Pale Yellow Brn	
	2msbk	3 1/2
	Yellow Red	
	ch/gravelly	
	CL 3sbk	5
	Pale Red	
	massive	
	SL ch. ~ 15%	
	heavy sbk	8
	Yellow/Pale Red	
	FSL	
	massive	11

3	Brn 3fsbk L	
	str. Brn	
	3msbk HL	1
	Red Chan. ~ 15%	
	SL-CL	2 1/2
	Red SL	
	ch. ~ 20%	
	1sbk	4
	Yellow/Red	
	SL fine massive	6-7
	~ 15% chann.	11



Ed Warfield Rd

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
11/1/07	1	5/12	2:17	2:18	2:20	2m	P
	"	active area begins @				4ft	
	2	6/11	2:50	2:54	3:10	16m	P
	3	v/11				est 25m @ SA	P

REMARKS \_\_\_\_\_  
 SANITARIAN GAC BACKHOE Will Hopkins OTHERS Barnard Bros.  
 TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_  
 TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE S/W \_\_\_\_\_



