



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) 3/23/05 TEST TIME 9:00 AP 35921  
 AGENCY REVIEW: No fee, confirmation holes required 1/5/05 DATE 3/4/05

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) LINDY DELL  
 DAYTIME PHONE 410-531-3332 CELL \_\_\_\_\_ FAX \_\_\_\_\_  
 MAILING ADDRESS 12211 FREDERICK RD. ELLICOTT MD. 21042  
STREET CITY/TOWN STATE ZIP  
 APPLICANT SAME AS OWNER  
 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 DELL PROPERTY LOT NO. 3  
 PROPERTY ADDRESS Frederick Rd  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 116 GRID B PARCEL(S) 115 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]  
 SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
 TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P \_\_\_\_\_

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H

REMARKS \_\_\_\_\_

SANITARIAN \_\_\_\_\_ BACKHOE \_\_\_\_\_ OTHERS \_\_\_\_\_

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

TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE SW \_\_\_\_\_



Howard County  
Health Department

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PROPERTY OWNER(S) LINDY DELL  
 DAYTIME PHONE 4105313332 CELL \_\_\_\_\_ FAX \_\_\_\_\_  
 MAILING ADDRESS 19211 FREDERICK RD ELICOTT MD 21042  
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 DELL PROPERTY LOT NO. Back Lot  
 PROPERTY ADDRESS Frederick Road  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 16 GRID 13 PARCEL(S) 115 PROPOSED LOT SIZE \_\_\_\_\_

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TAX ID 03-283267

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PROPERTY OWNER(S) LINDY DELL

DAYTIME PHONE 410 531 3332 CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS 10211 FREDERICK ROAD ELLCOTT MD. 21042  
STREET CITY/TOWN STATE ZIP

APPLICANT SAME AS OWNER

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 DELL PROPERTY LOT NO. 2

PROPERTY ADDRESS 12211 Frederick Rd  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 16 GRID 13 PARCEL(S) 115 PROPOSED LOT SIZE \_\_\_\_\_

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