



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 520078-R

AGENCY REVIEW: _____

DATE 3/2/04

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 unknown 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) LDG, Inc.

DAYTIME PHONE (301) 585-7000 CELL _____

FAX (301) 831-5603

MAILING ADDRESS Lee Plaza, Suite 200
8001 Georgia Avenue

Silver Spring

MD 20910-3437

APPLICANT Van Mar Associates, Inc.

DAYTIME PHONE (301) 829-2890 CELL _____

FAX (301) 831-5603

MAILING ADDRESS 310 South Main St.

Mt. Airy

MD 21771

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME Patapsco Overlook

LOT NO. 12

PROPERTY ADDRESS Old Fredericke Road

Lisbon

TAX MAP PAGE(S) 2 GRID 24 PARCEL(S) 32

PROPOSED LOT SIZE 1.14 Ac ±

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.

Melanie Repp
SIGNATURE OF APPLICANT

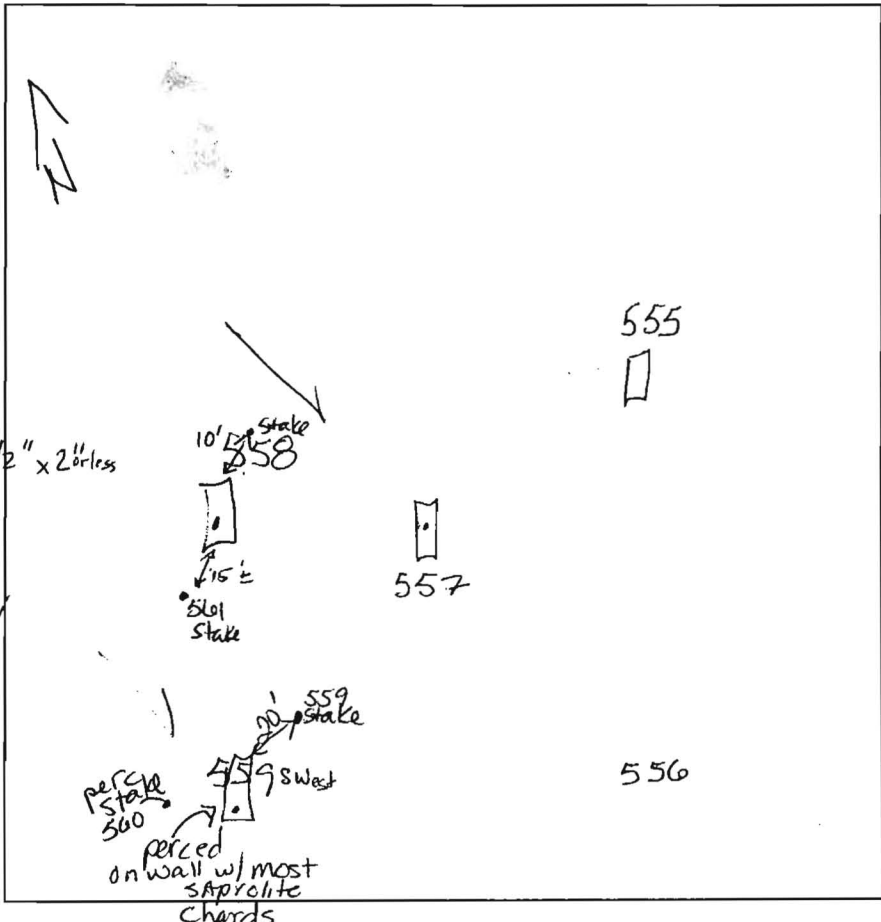
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

AP

555
 org sil
 Rx-pebbles
 ~5%
 org 5'±
 fine-med
 gr SAND
 to
 LSAND
 sm hard
 saprolite
 frags ~10-15%
 Bottom 13 1/2'

557
 Dense
 RED & yellow
 Si-sil
 trace Rx
 4'±
 str. org
 Loam w/
 some sil
 pockets
 sm. sap.
 frags ~10-15%
 Bottom 13'

559
 1' Tan sil (top 1')
 2' Strong org
 wk red sil - sil
 Qtz ~5-10%
 5'
 magenta
 brn
 wk red
 fine sil
 platy
 struct.
 sm sap & Rx
 ~20%
 Bottom 13'



558
 str org
 yellow
 dense
 sil sil
 RED sil
 3'±
 yellow brn
 wk red
 v. fine sil
 L
 Rx ~5%
 14'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
6/16/64	555	5'	5:36	5:38	5:41	3 min	P
	557	4'2"	5:40	5:42	5:45	3 min	P
	560 / 559	6'3"	5:46	5:50	6:00	10 min	P
	561 / 559	4'	5:55	6:05	6:15	10 min	P
#558 / #561 share hole							

REMARKS holes stakes & dug per plan #560 / #559 share hole
 SANITARIAN Kace BACKHOE J. Brendel OTHERS _____
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

