



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 520078

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) 585-4604

MAILING ADDRESS Lee Plaza Suite 200 Silver Spring MD 20910-3437
STREET CITY/TOWN STATE ZIP

APPLICANT VanMar Associates, Inc.

DAYTIME PHONE (301) 829-2890 CELL _____ FAX (301) 831-5603

MAILING ADDRESS 310 South Main St. Mt. Airy MD 21771
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME Patapsco Overlook LOT NO. 1

PROPERTY ADDRESS Old Frederick Rd. Lisbon
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 2 GRID 24 PARCEL(S) 32 PROPOSED LOT SIZE 1.06 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 Rep
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

CAP 520078

503

Topsoil 18"
 Strong yell. tan 24"
 Cl L 50%
 Wk org Siltm 42-5
 6"
 Strong yellow
 Fine SL & Loam
 Saprolite frags
 10-15% platy structure
 Bottom 13

504

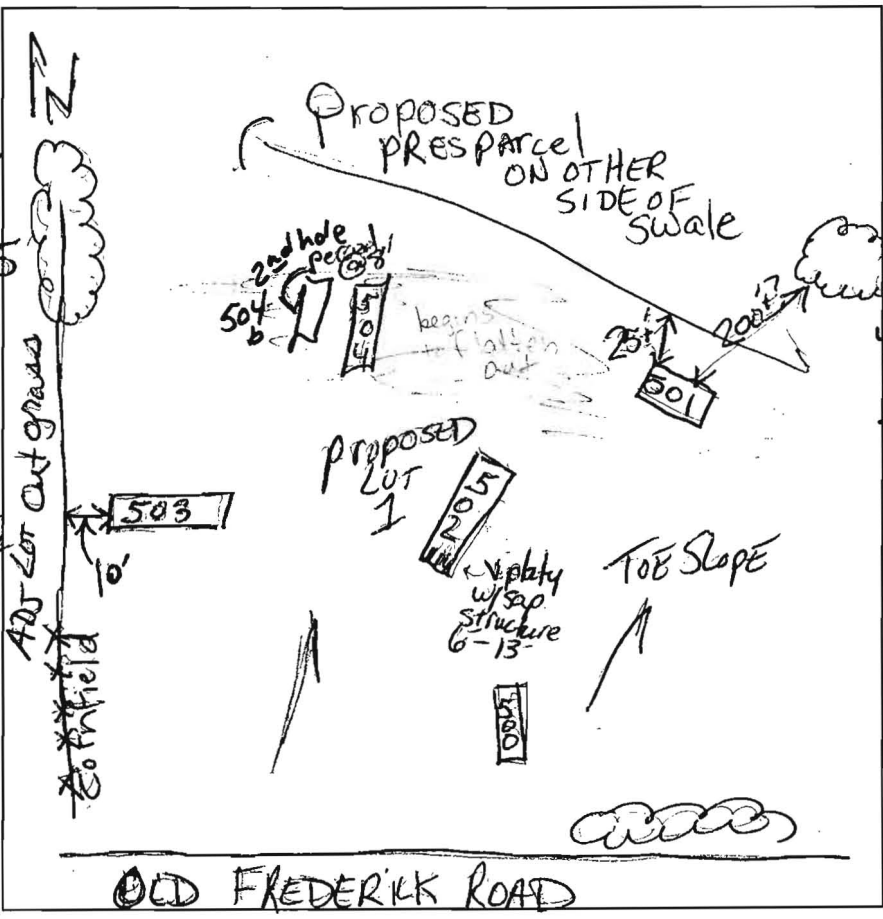
Wk org + brn tightly packed Sil w/ packets of ccl

501

org brn silt
 Saprolite frags
 Am 34" x 24" v. fragile weak
 25-30%

502

org, packed sil v. fine SLoam 4 1/2
 OK rd org Loamy SAND high si content weak ball Saprolite platy white black org
 25-30% Bottom 13 1/2



NE 501 SW

org brn, packed L-sil 1 1/2-5'
 Strong org
 fine loamy Sand 3 1/4" x 3"
 Saprolite frags
 8" x 2" x 2" 13'

500
 Strong org yellow tightly packed S.g. Silt org v. fine Loamy SAND
 Saprolite lens v.wk 6'
 8'

504b

SAME AS 504 but less Saprolite
 white/red Mn spots Bottom

DATE	TEST #	DEPTH	START	BREAK 1' DROP	STOP 2' DROP	TIME OF 2ND INCH	P/F/H	
6/14/04	503	4 1/2'S	8:25 ³⁰	@ 8:45 - base of 1st pag		too slow	NO PROB	
	504	5 1/2'S	8:34 ⁰⁰	8:57 - tip of 2nd pag		too slow		
	502	4 1/2'S	8:38	8:42	8:49	7 min	OK	
	501	4 1/2'S	8:44	8:57	9:11	18	OK	
	500	4'3"	8:53	8:56	9:02	6 min	OK	
	Repairs	503	6'2" S	9:19	9:25	9:33	8 min	OK
		504	6'5" S	9:22	TOO SLOW			
6/16		8'5"	9:22	9:32	9:42	10 min	TOP	

REMARKS: Holes dug on stake. Staked per plan
 SANITARIAN: Kauer BACKHOE: Justin B OTHERS:
 TEST HOLES USED IN SDA: _____ AVG. PERC TIME: _____ SQ. FT/BR: _____
 TRENCH WIDTH: _____ INLET DEPTH: _____ MAX. BOT DEPTH: _____ EFFECTIVE SW: _____

- 410-977-5546 -

17416
7933

few
frags

white/red
Mn spots

