Howard County Health Department

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ AP 520108

AGENCY REVIEW: _____ DATE 4/9/04

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. / Lee Plaza

DAYTIME PHONE 301-585-7000 CELL _____ FAX _____

MAILING ADDRESS 8601 Georgia Ave. (STREET) Silver Spring (CITY/TOWN) MD (STATE) 20910 (ZIP)

APPLICANT VanMar Associates Inc.

DAYTIME PHONE 301-829-2890 CELL _____ FAX _____

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

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME Schwabe Farms LOT NO. 1

PROPERTY ADDRESS MD Route 32 (STREET) West Friendship 21794 (TOWN/POST OFFICE)

TAX MAP PAGE(S) 15 GRID 5 PARCEL(S) 12 PROPOSED LOT SIZE 1AC±

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. Daniel Hart
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

 PLEASE SUBMIT ORIGINALS ONLY (BY MAIL OR IN PERSON)

A/P _____

405

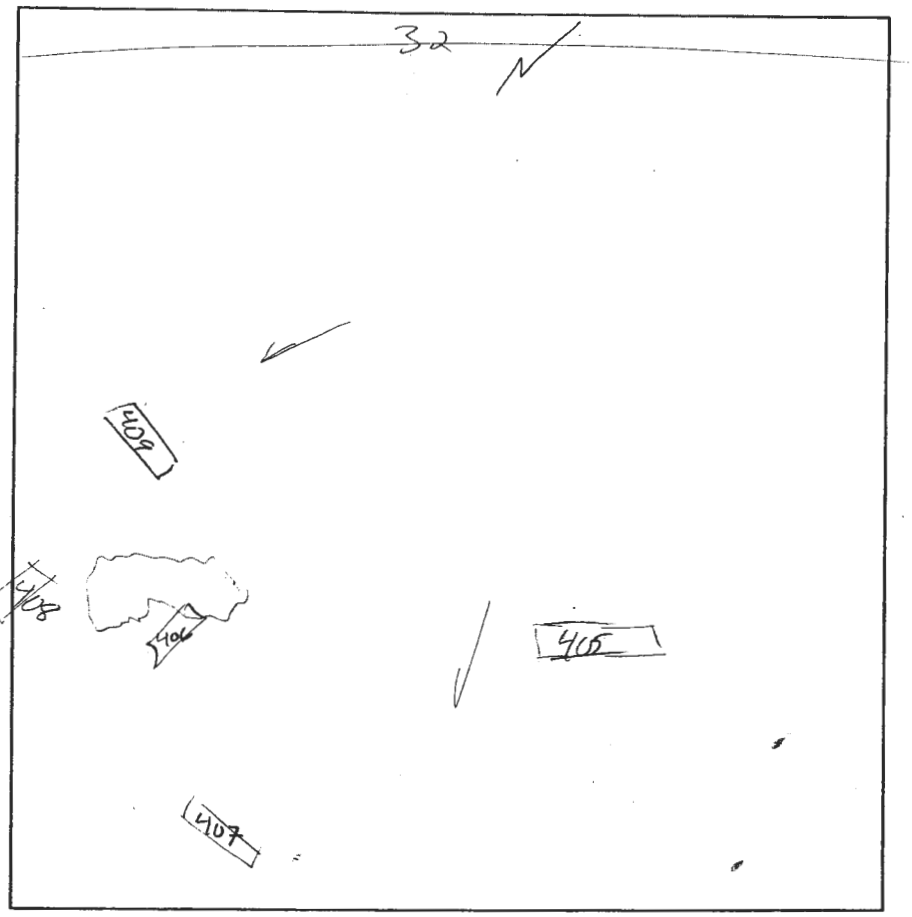
Brown L	1'
Red/Orange micacs Scl	2'
Orange/Yellow micacs Sl	3½
Yellow/Brown Sl	9'
Gray/Brown micass Sl w/15% sapwlk	13'

407

Brown L	2'
Orange/Yellow Brown micacs Scl	4'
Yellow/Brown micacs Sl	9'
Yellow/Brown Sdy micas 10% sapwlk water	12½

406

Brown L	1'
Orange/Yellow micas Scl	3'
Yellow/Brown micas Sl	8'
Black mass Pocket Sl	10½'
Orange/Glade 2d mottes Sl water	13'



408

Brown L	1'
Orange/Yellow Brown micacs Scl	4'
Gray/Yellow Brown micas Sl	10'
Brown/Black micas S + trace Rock -	12'

409

Brown L	1'
Red/Orange micacs Scl	3'
Yellow/Brown micacs Sl w/10% sapwlk	10'
Brown/Gray micacs S trace Rock	12½'

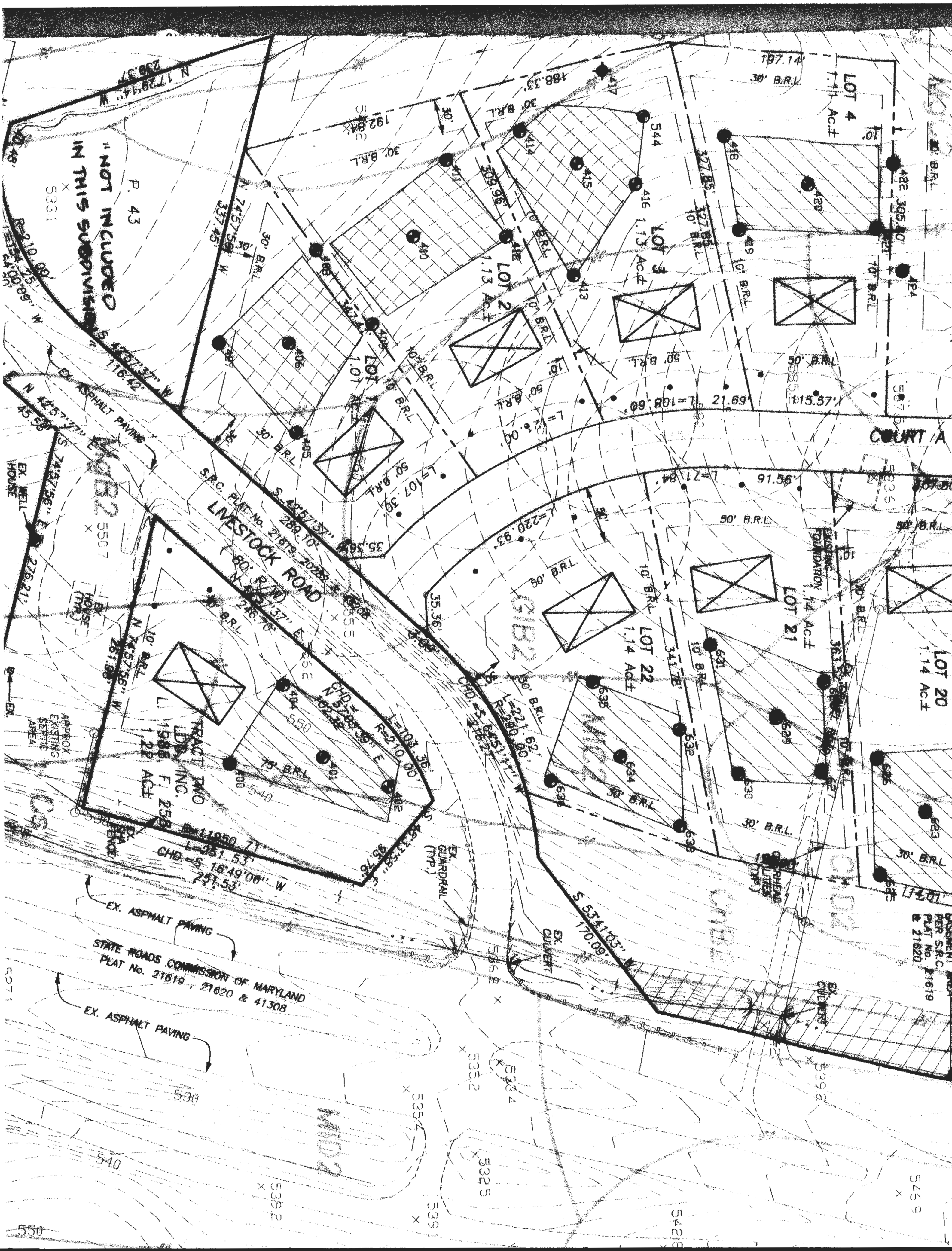
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
7/13/01	405	5'/13'	10:09	10:13	10:18	5min	P
	407	5'/12½'	10:13	10:19	10:26	7min	P
	406	-/13'	- Visual -				P
	408	5'/12'	10:32	10:36	10:40	4min	P
	409	4'/12½'	10:44	10:47	10:51	4min	P

REMARKS all holes dug per plan

SANITARIAN KJB BACKHOE Justin OTHERS Zack

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

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____



"NOT INCLUDED IN THIS SUBDIVISION"
P. 43
LOT 1 1.07 Ac.±
LOT 2 1.13 Ac.±
LOT 3 1.13 Ac.±
LOT 4 1.11 Ac.±
LOT 20 1.14 Ac.±
LOT 21 1.14 Ac.±
LOT 22 1.14 Ac.±
COURT A
LIVESTOCK ROAD
(60' R/W)
S.R.C. PLAT No. 21619-20288 & 40908
TRACT TWO LDD, INC. 1986, F. 258 1.22 AC.±
EX. ASPHALT PAVING
STATE ROADS COMMISSION OF MARYLAND PLAT No. 21619, 21620 & 41308
EX. WELL
EX. HOUSE
EX. HOUSE (TYP.)
APPROX. EXISTING SEPTIC AREA
EX. GUARDRAIL (TYP.)
EX. CULVERT
EXISTING FOUNDATION
OVERHEAD UTILITIES (TYP.)
EASEMENT AREA PER S.R.C. PLAT No. 21619 & 21620
30' B.R.L.
50' B.R.L.
10' B.R.L.
75' B.R.L.