



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 528488

AGENCY REVIEW: _____

DATE 2/8/08

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 1 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) GREGORY + ALISON MEYER

DAYTIME PHONE 410 531-9272 CELL _____ FAX 301-384-7586

MAILING ADDRESS 13254 TRIADELPHIA ROAD ELLICOTT CITY MD 21042
STREET CITY/TOWN STATE ZIP

APPLICANT GREGORY V. MEYER

DAYTIME PHONE 410 531-9272 CELL _____ FAX 301-384-7586

MAILING ADDRESS 13254 TRIADELPHIA ROAD ELLICOTT CITY MD 21042
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS 13254 TRIADELPHIA ROAD ELLICOTT CITY MD 21042
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 22 GRID _____ PARCEL(S) 250 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.

Mary J Meyer
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
1718 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

.....

P

Fogles

410-531-9272

called Mr. Myers

2/19

[illegible]

REMARKS _____

SANITARIAN _____ BACKHOE _____ OTHERS _____

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

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

AP 528488

(A)

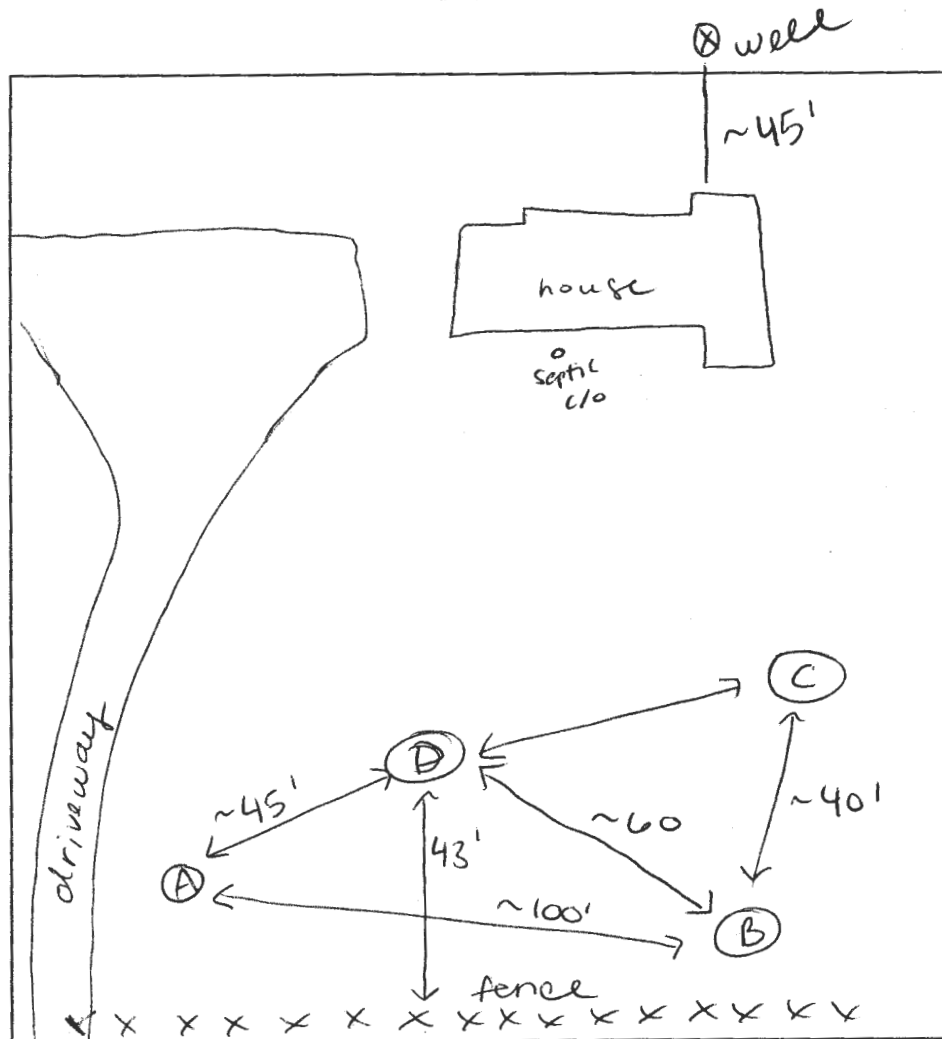
4' dk brn l
moist
brn scl
2csbk
15% chert
2.5' brn fsl
many mica
saponite
micaceous
fsl
20% channels
13.5'

(B)

3' dk brn l
moist
brn scl
2csbk
10% stones
15% chert
3' yellow
brn fsl
micaceous
platy mica
schist
Mn deposits
cw rx frags
13'

(C)

5' dk brn l
yellow brn
scl
3csbk
20% channels
moist
2.8' brn fsl
micaceous
(similar
to A+B)
Mn+Fe
deposits
platy
mica
3'



not to scale

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
2-25-08	A	4' / 13.5'	10:15	10:16	10:18	2	P
	B	4' / 13'	10:24	10:27	10:32	5	P
	C	4' / 13'	10:37	10:39	10:42	3	P
	D	5' / 13'	10:45	10:47	10:50	3	P

REMARKS all holes passed - all consistent cw = weakly cemented
 SANITARIAN HS BACKHOE Fogles OTHERS
 TEST HOLES USED IN SDA 4 AVG. PERC TIME 3
 TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH 6 EFFECTIVE SW 2'

(D)

5' dk brn l
roots
reddish
brn scl
5% stones
moist 3csbk
15% chert
3.5' brn fsl
micaceous
15% chert
saponite
13'



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046-2147
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

February 25th, 2008

Gregory & Alison Meyer
13254 Triadelphia Rd
Ellicott City, MD 21042

**Re: Percolation Test Results
#A528488**

Dear Mr. & Mrs. Meyer,

Percolation testing was conducted on your property February 25th, 2008 in response to a building permit application to convert an existing garage to a bedroom. Percolation testing yielded sufficient results to indicate soil conditions are satisfactory for onsite wastewater disposal and that there is adequate septic system repair area to support your existing home and the proposed addition.

Field data collected are shown on the Percolation Test Worksheet enclosed with this letter. Acceptable ranges for recommended Inlet and Trench Bottom depths, and Usable Sidewall have been provided, and may be confirmed at time that a system upgrade or replacement is deemed necessary. Values for these parameters are based on observed soil properties and characteristics at respective test locations. A total of four test holes were dug so as not to disturb mature trees and shrubs. Each hole represents an area for a potential replacement system. The subsoils described at the test location are deep, micaceous sandy soils, having very similar physical properties and depth.

Further review is contingent upon submission of a Percolation Certification Plan per Howard County Code Sec. 3.805. I have enclosed a copy of these requirements for your convenience including some additional materials to assist you. If you have any questions regarding this evaluation or requirements for the Percolation Certification Plan, please contact me by calling (410) 313-6287.

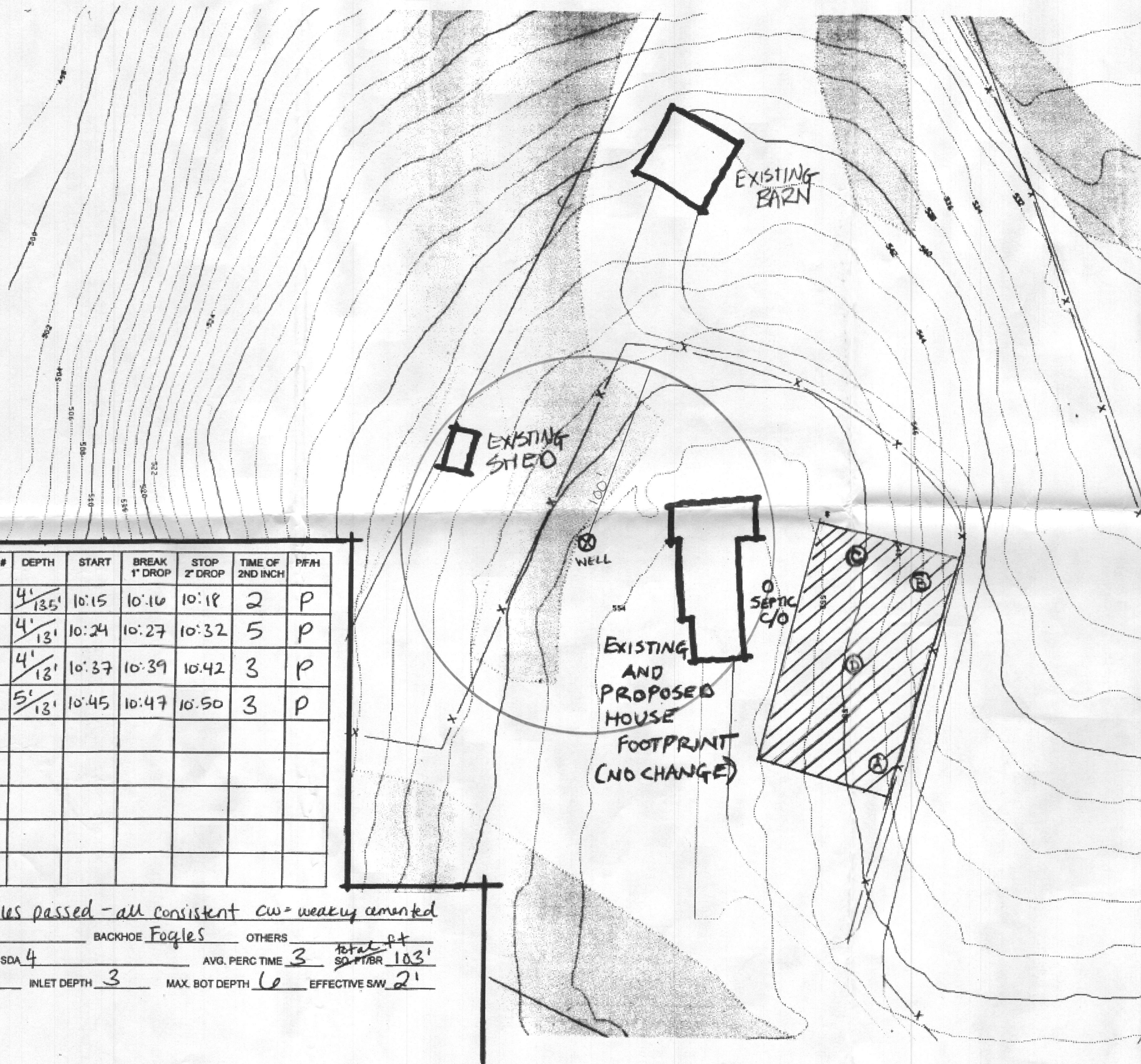
Sincerely,

A handwritten signature in black ink, appearing to read 'Heidi Scott', is written over the typed name.

Heidi Scott
Well & Septic Program
Development Coordination Section

Enclosures

~~Enc. File~~



REMARKS all holes passed - all consistent CW = weakly cemented
 SANITARIAN HS BACKHOE Fogles OTHERS _____
 TEST HOLES USED IN SDA 4 AVG. PERC TIME 3 total ft
SD FT/HR 103'
 TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH 6 EFFECTIVE S/W 2'

- B. Nelson for Peter Brilenson, MD 4/9/2008
(SIGNATURE) HS (DATE) 17902

MARCH 2 2008
SCALE: 1" = 50'