

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ A/P _____

AGENCY REVIEW: _____ DATE _____

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) _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
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 _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ 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 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

602
str org brn
compact
R/L

6'

Str brn
SL/L

overall
Rx 10-15%

Bottom

13'

604
strong
v. micac
SiL

4 1/2'

Wk org
gritty
micac
loam
SL
3pl @ 8'

Bottom

11'

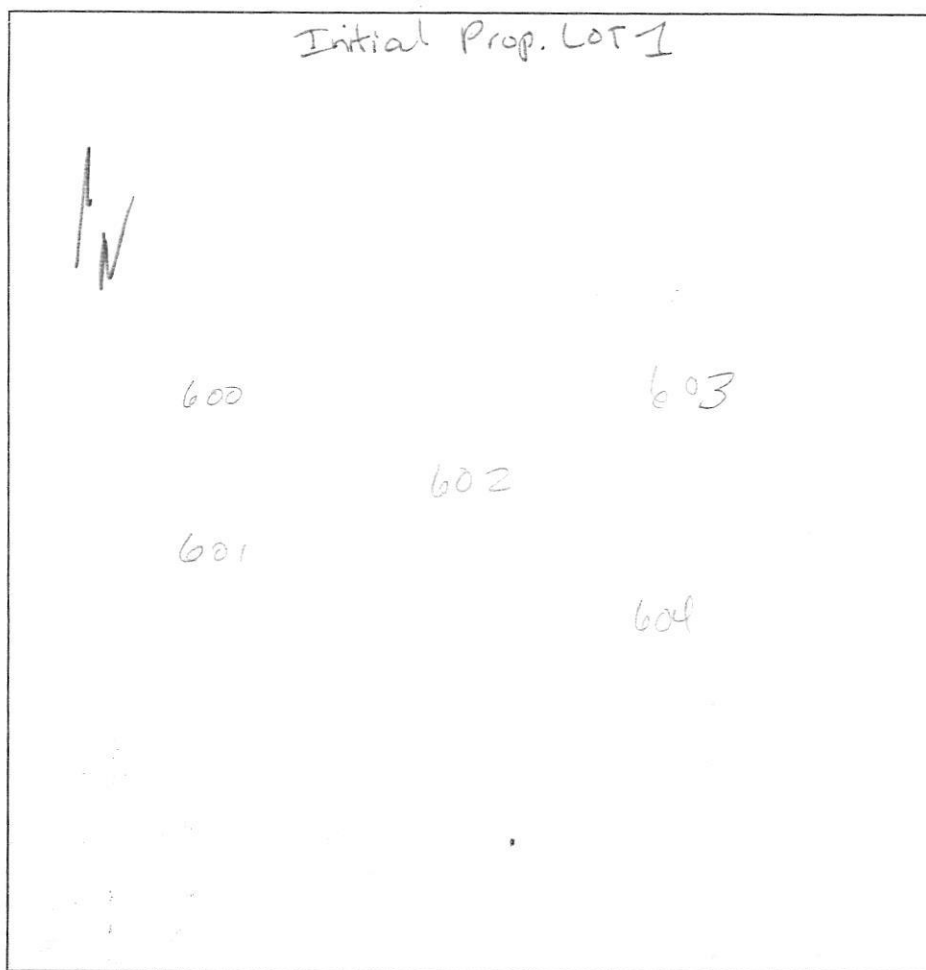
601
Wk org
CL
massive
Rx < 5%

7'

Str brn
v.f. SL/
SiL
C.W. sg
mp
Bottom

13 1/2'

Initial Prop. Lot 1



603
strong
brn
CL

5'

brn
v.f. micac
Slam
sprinkle
~ 5%

12'

Bottom

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
8/29/05	602	0 1/2' / 15'	12:20	12:23	12:35	12	P
	603	5 1/2' / 11'	12:28	12:32	12:38	6	P
	601	7 1/2' / 13 1/2'	DIRTY Felt in				
	604	6' / 12'	12:43	12:48	12:56	8	P

Holes Dug Per Stake

REMARKS Topo Per Plan Pockets Deep Clay

SANITARIAN Kneue BACKHOE Johnson OTHERS _____

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

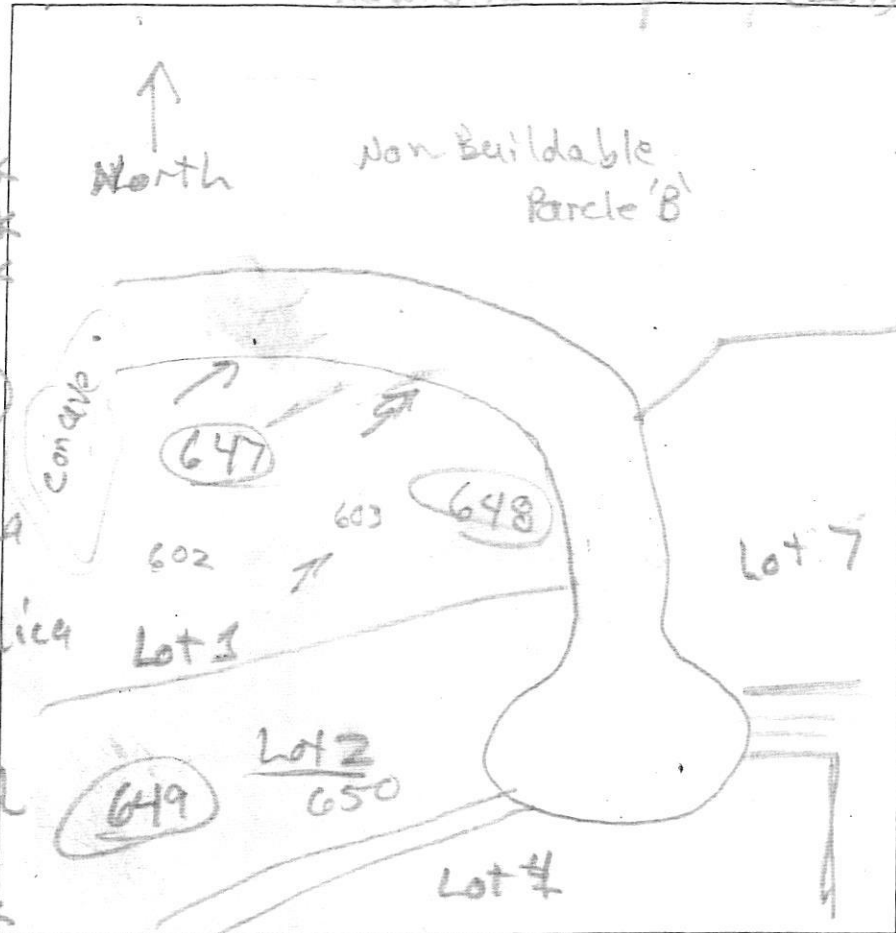
TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____

Chawls Property (2014)

A/P

(647)
 0.5' dk brn L, 3g
 2.5' brn L, 1f sbk
 3.3' brn sl, 1f sbk
 3.8' brn L, 1f sbk
 3.8' brn ch sl
 7.2' dk brn L, heavy
 10' sl, many mica
 12' red slbk
 12' chls, many mica

(648)
 0.5' dk brn L
 2' dk gray-brn L
 2' brn L, 1f sbk
 2' dk brn chls
 12' micaceous



(649)
 0.4' dk gray-brn L
 2' dk gray-brn L
 2' brn L, 1f sbk
 2' yel-brn L
 3.5' impl, dense
 4.5' red L, 1f sbk
 5' red chsl
 12' many mica
 12' red chls
 12' many mica

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
6/12/14	647	12'	Visual	Sidewall	4'-8"	1.2 gpd/ft ²	P
6/12/14	648	12'	Visual	Sidewall	2'-8"	1.2 gpd/ft ²	P
6/12/14	649	12'	Visual	Sidewall	5'-8"	1.2 gpd/ft ²	P

REMARKS _____
 SANITARIAN R. Bricker BACKHOE Justin Brendel OTHERS Doug
 TEST HOLES USED IN SOA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

A/P

6/14

Strong
brn
CLTRANSIT.
HWM/LMStr brn
wkrd brn
Loam
Rx < 10%

Bottom

5-5 1/2'

12'

(613)

wkrd brn
CL
massive
trace Rxwk red
v.f. SL

Rock 25%

Bottom

6'

(615)

6/16

compact
S.g. loam
v. micacv.f. wk
red
v. micac
SL

4 1/2'

Bottom

12'

SEE PROPOSED
LOT 4
1/2 LOT 1on July 29
per app
plan

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
8/29	614	5'3" / 12'	2:27	TOO SLOW 2:47 NOT TO 2		1/4" tag hd ppg	F
	613	TOO SHALLOW will go 6'	2:30				P
	615	5' / 13'	2:42	2:43	2:45	2+	P
	616	5' / 12 1/2'	2:44	2:45	2:48	2+-3	P
	617	5' / 13'	2:47	2:49	2:52	3	P
-	600	6' / 13'	deep clay	perc slow - 40 min			F

TOP PER PLAN

REMARKS

SANITARIAN

Krause

BACKHOE

Johnson

OTHERS

TEST HOLES USED IN SDA

AVG. PERC TIME

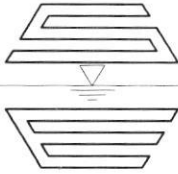
SQ. FT/BR

TRENCH WIDTH

INLET DEPTH

MAX. BOT DEPTH

EFFECTIVE S/W



16005 Frederick Road, 2nd Floor
Woodbine, MD 21797
Website: www.sillengineering.com
Civil Engineering for Land Development

Letter of Transmittal

Office: 443-325-5076
Fax: 410-696-2022
Email: info@sillengineering.com

SILL ENGINEERING GROUP, LLC

To: Mr. Jeff Williams
Howard County Health Department
Bureau of Environmental Health
8930 Stanford Boulevard
Columbia, MD 21045

Date:	April 12, 2021
Attention:	Robert Bricker
Re:	The Woodlands, Lot 1 Redlined Site Plan for Onsite Sewage Disposal System
Project #:	20-003

We are sending you

<input checked="" type="checkbox"/> Attached	Under Separate Cover Via Mail the following:	
Letter	Originals	Other:
<input checked="" type="checkbox"/> Plans	Computations	

Quantity	Description	Quantity	Description
2	Sets Redlined Site Plan For OSDS Plan		

These are transmitted as checked below

<input checked="" type="checkbox"/> For Approval	As Requested	Please Return After Using
<input checked="" type="checkbox"/> For Review	For Your Use	As Approved

Comments:

Dropped off due to Covid-19

Copy To:

Signed:

Zachary Sill

Received by:

Date Received: