

Hardy Rd

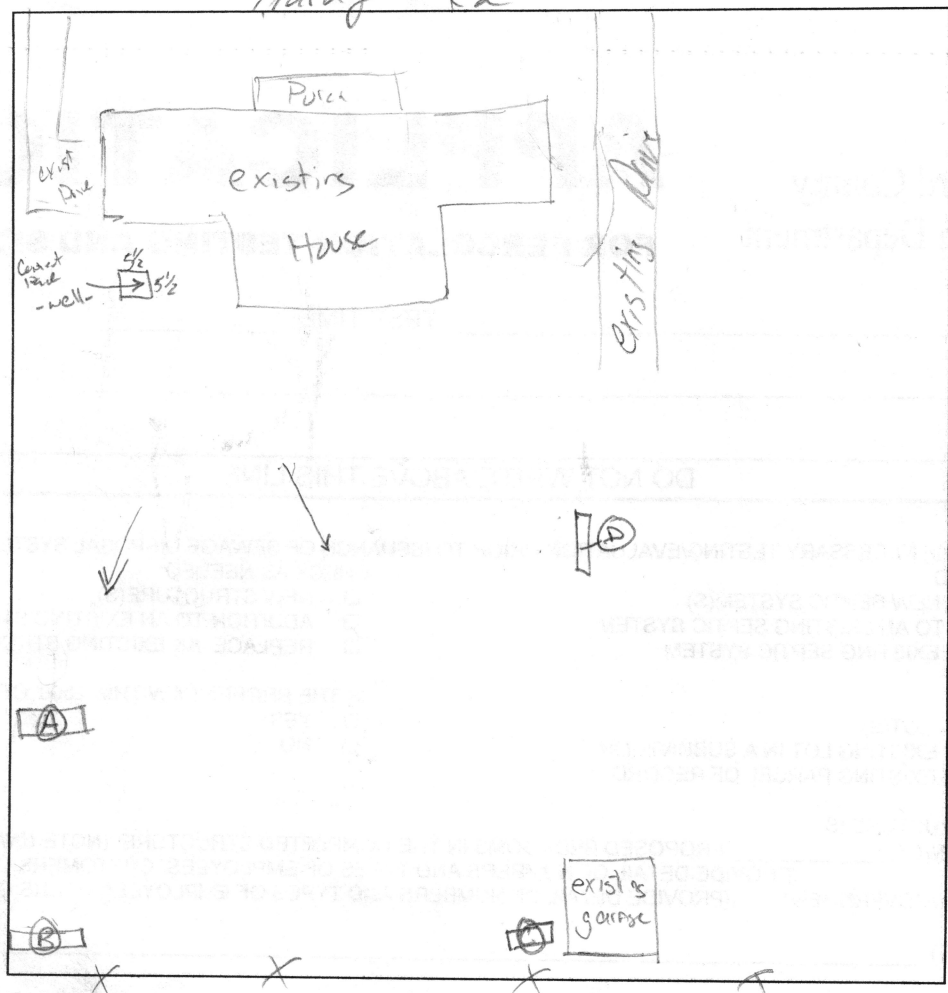
A/P A

Brown L
1

Brown/Red
Orange
Silt
5

Yellow/Brown
Silt
8'

Yellow/Purple
Brown
Silt w/
15% platy
Rock
11'



B

Brown L
1

Yellow/Red
Orange
Silt
4 1/2

Yellow/Red
Brown Silt
w/ 10%
SAP.
9

Purple/Yellow
Silt w/
30-35%
Platy
Sap.
12'

A

Brown L
1

Yellow/Brown
Silt
3 1/2

Red/Brown
Silt
5'

Yellow/Brown
Silt w/
trace
Rock
8 1/2'

Purple/Red
Silt w/
30% Plat
HB
D

C

Brown L
1

Red/Purple
Brown
Silt
w/ 25%
Platy sap.
3 1/2

Brown/Red
Silt
6

Yellow/Brown
Silt
9

Purple/Yellow
Brown Silt
w/ trace
Rock
11'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
7/15/03	A	5' / 11'	2:24	2:34	2:47	13 min	P
	B	5' / 12'	2:47	2:58	3:12	14 min	P
	C	- / 11'	- Visual -			ok	P
	D	4 1/2' / 10'	3:09	3:18	3:35	17 min	P

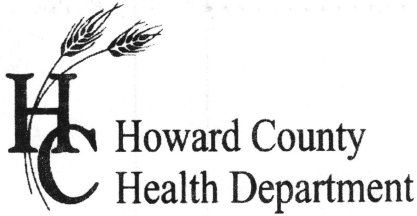
REMARKS ground very spotty

SANITARIAN KJB BACKHOE Curtis Cumberland OTHERS _____

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

TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH 6 EFFECTIVE S/W 1

240x4 = 960 - 3 = 320 x .83 = 266' Linear trench Per System



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. _____

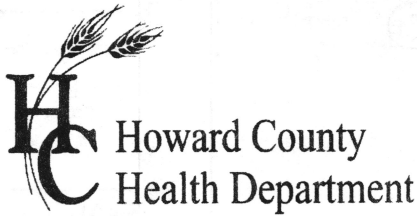
PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

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



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 522417

AGENCY REVIEW: _____

DATE *4/2/05*

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

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- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

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- 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)
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- 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 *17197 Hardy Rd - original property / 17201 subdivided off*
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE *belongs in this file per GAC*

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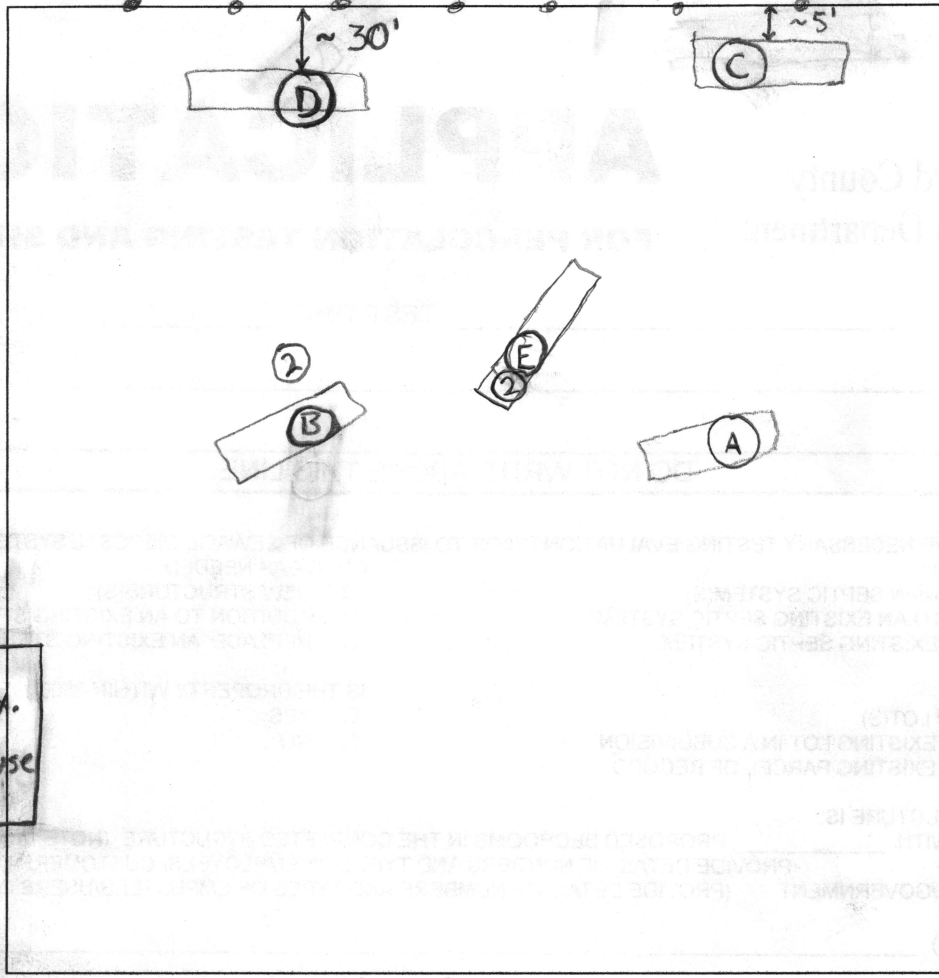
White Picket Fence

AVP
 1' Brown lm
 Orange Brown
 SiCL 15%
 Strong
 Saprolite
 3.5'
 Red Brown
 Silm
 WS
 15-20%
 Saprolite
 6'
 Red Brown
 Silm 25%
 Saprolite
 10'
 Yellow Brown
 Silm
 15%
 Saprolite
 15'

0' (B)
 Brown lm
 2' Orange Brown
 Heavy Silm
 10% Saprolite
 8'
 Si/Silm
 20%
 Saprolite
 Orange
 Brown/Red
 14.5'

0' (C)
 1' Brown loam
 Orange Brown
 SiCL
 10%
 Saprolite
 5'
 Red Brown
 Silm
 ~15%
 Saprolite
 8'
 Yellow Brown
 Silm
 15-25%
 Saprolite

Ex.
 House



0' (D)
 2' Brown lm
 Orange Brown
 SiCL
 15% thin
 rock
 7'
 Silm
 Red Pink
 w/yellow
 <15%
 Saprolite

0' (E)
 1' Brown loam
 Orange Brown
 SiCL
 <10% rock
 4 1/2'
 Red Brown
 Silm 20% rock
 6'
 Yellow Brown
 Silm
 30% rock
 floggy
 Saprolite
 11 1/2'

HARDY RD.

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
5/17/05	A	6.5' / 15'	3:11	3:18	3:29	11m	P
5/17/05	B	7.5' / 14.5'	3:37	3:55	Pulled 4:21	N/A	F
5/17/05	C	7' / 15'	3:27	3:35	3:50	15m	P
5/17/05	D	7' / 13'	3:32	3:43	3:58	15m	P
5/17/05	E	7' / 11 1/2'	4:19	Pulled			F
	E2	8" / 10 1/2'	4:32	4:35	4:39	4min	P
	B2	8' / 11.5'	4:31	4:46	4:58	12min	P

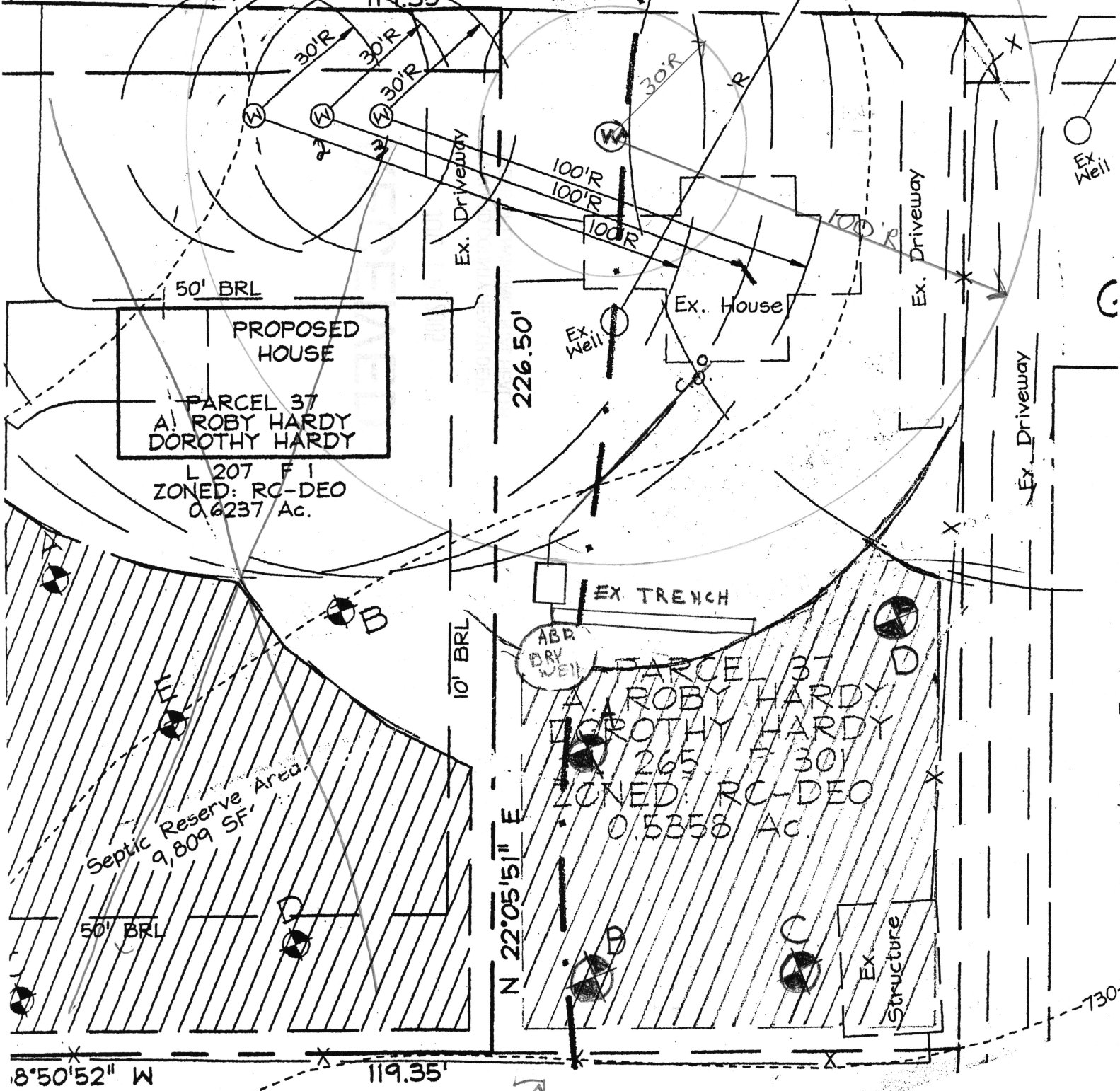
REMARKS _____
 SANITARIAN GAC & KB BACKHOE Zepp OTHERS _____
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____

HARDY ROAD

(LOCAL ROAD)

S 67°44'42" E

119.35'



PROPOSED HOUSE
 PARCEL 37
 A. ROBY HARDY
 DOROTHY HARDY
 L 207 F 1
 ZONED: RC-DEO
 0.6237 Ac.

EX TRENCH
 ABR DRY WELL
 PARCEL 37
 A. ROBY HARDY
 DOROTHY HARDY
 265 F 30Y
 ZONED: RC-DEO
 0.5358 Ac.

730
 Perc Cot.
 Robert Weber
 Signature: (KJB)
 7/25/05

SPRING HOLLOW
 PARCEL 1
 PLAT #

17197 Hardy Rd.
 Mt. Airy M.D.

Curtis Cumberland
 Cell 301 252-1122