

APPLICATION

PERCOLATION TESTING

A 516084
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____
DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER SECURITY DEVELOPMENT, L.L.C.
P.O. BOX 417
ADDRESS ELLICOTT CITY, MD 21041 PHONE 410-465-4244

AGENT OR PROSPECTIVE BUYER _____
ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION HOMEWOOD LOT NO. 90

ROAD AND DESCRIPTION HOMEWOOD ROAD

TAX MAP 23 & 29 PARCEL # 20 & 86

SIZE OF LOT 1 ACRE ± TYPE BLDG. SINGLE FAMILY DETACHED
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

SECURITY DEVELOPMENT LLC
BY: [Signature] MEMBER
(SIGNATURE OF APPLICANT) STEVEN K BISHOP

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

516084

COUNTY #

PROB W/ HOLE LOCATIONS

SOIL PROFILE

90A

Strong rd brn
DK brn
CL Lm
Rx ≤ 5%

DK yellow brn
hvy Lm

Sandy Loam
Ybrn
org brn
Rx
Trace

Bottom

90C

Strong dk brn
DK brn
CL Lm
Trace Rx

Strong ag brn
Loamy
Sand

Tr Rock

Micaeous

dk grey

fine water

Bottom

90D

org brn

hvy Lm

Trace Rx

tan, org brn

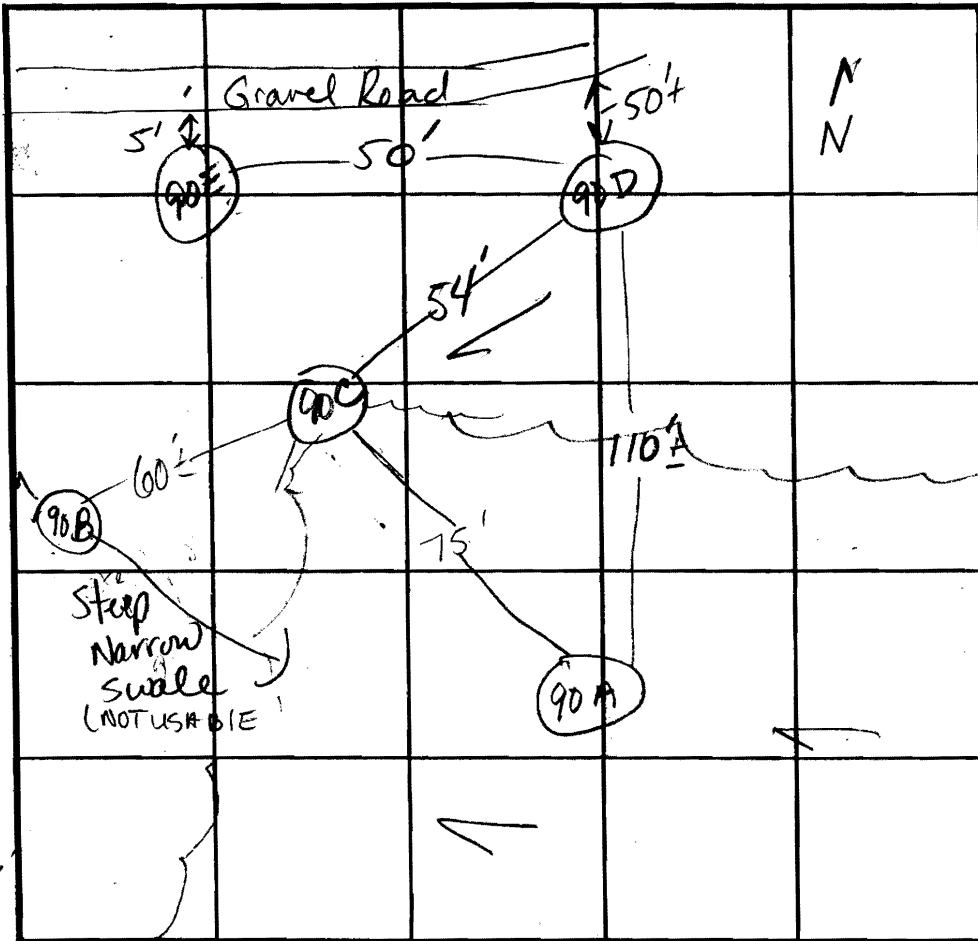
Ybrn

SANDY Lm

Rx = 5%

Lm

Sand Trace
fine-med Rx
Bottom



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

90E

Strong rd
org brn
hvy Lm
Rx ≤ 5%

strong brn
sandy loam

grey
coarse sand
gravel - 30 to 40%

water

Bottom

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6-20-02	90A	6' S / 14 1/2'	9:43	RETEST DEEPER TOO SLOW AT 6'				
	90C	5' / 14'	9:33	9:34:30	"	9:35:50	~ 1 1/2 WS	
	12x12	5'	9:38:02	9:40:41	"	9:43:30	3min	
	90D	5' / 15'	9:47:50	9:52	9:52	10:00	8min OK	
	90E	6 1/2' / 14'	10:04:35	10:11	"	10:23	12min WS	
	- 90B - directly in narrow steep swale NOT DUG (F)							
	PLAN HAS 90E 60' FROM GRAVEL RD.							
	" " 90D 70' FROM GRAVEL RD							
	90C TO 90D IS 69' FROM EA. OTHER							

REMARKS 90-D Mottling @ very bottom contrast of blue grey + ag brn

TYPE OF SOIL _____

TESTED BY Kacie ALSO PRESENT Donny & Roberto

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 516084

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Security Development

ADDRESS P.O. Box 417, Ellicott City, MD PHONE (410) 465-4244
21041

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Homewood LOT NO. _____

ROAD AND DESCRIPTION Homewood Road

TAX MAP 23+29 PARCEL # 20+86

SIZE OF LOT 1 Acre ± TYPE BLDG. SED
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

(219A)

Red Br Heavy Loam

Dense Red Br and Or Br Silty Loam Very Little Rock

Beige Sa Loam

~20% Saprolite

Water Seeping In

5'

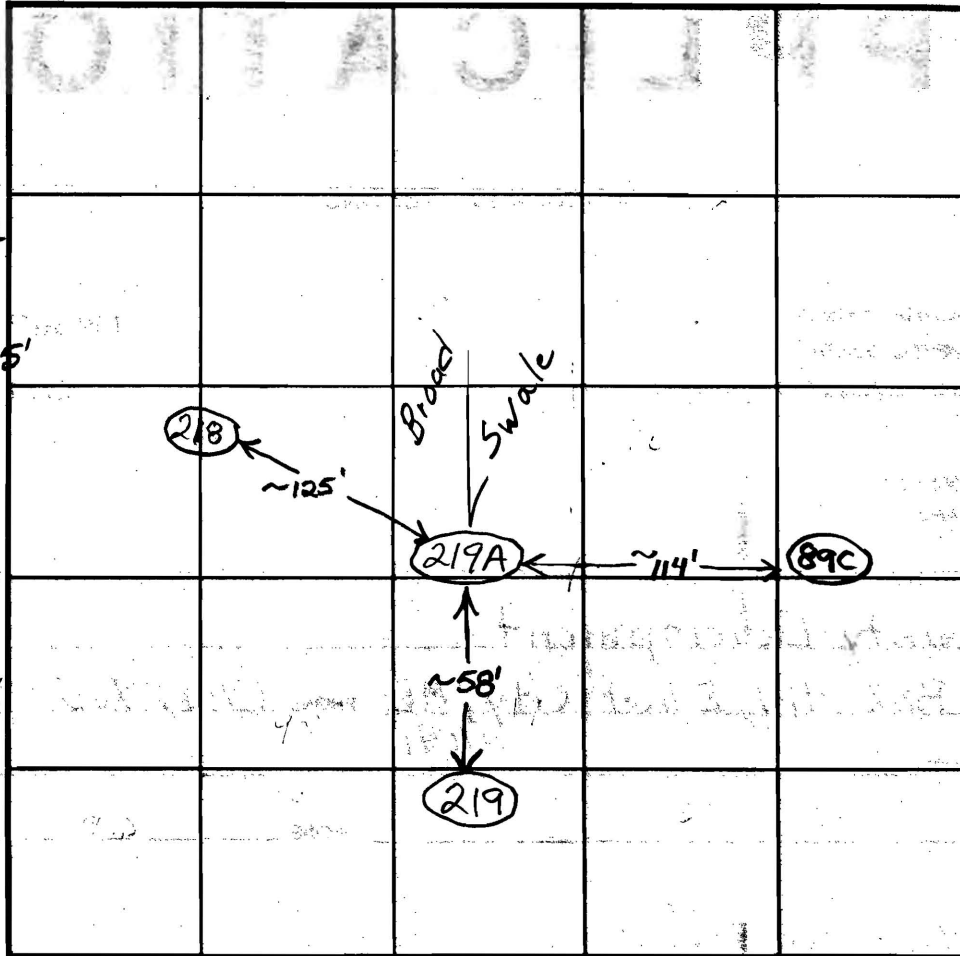
6'-6.5'

13'

14.5'

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/23/03	219A	62" / 14.5'	3:10	Little Movement in	10 minutes	Slow	O.K.
		6'7"	3:11	3:16	3:16	3:25	9

REMARKS

TYPE OF SOIL

TESTED BY B. Baker / F. Alfonso

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPLICATION

PERCOLATION TESTING

A 516084

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Homewood LOT NO. 25

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

516084
COUNTY #

SOIL PROFILE

0' 218
densely packed
hvy loam -
lm
Trace R_x 3'
lt brn
fine
sand
densely
packed
Trace R_x
Bottom 14

219

Wk rd brn
hvy strong brn
Sandy
Pebbles 15%
Bottom 7'

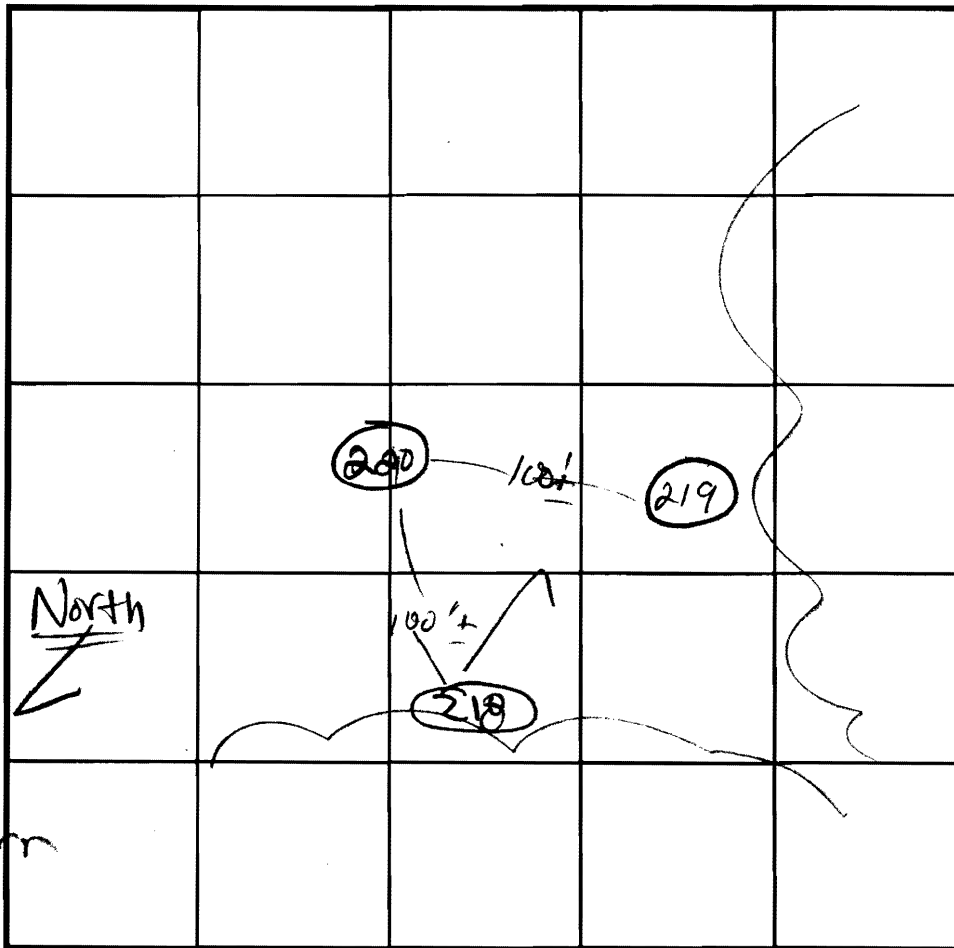
fine +
md
grained
loamy
sand
Bottom 14

220

Strong
Red
CL L_A

org br -
dk brn
Coarse
loamy
sand

Rx pockets
Lateral
Mn concretions
Bottom 14



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-13-02	218	5 1/2' S / 14'	12:11 ³⁰	12:22	12:22	12:44	20 min OK
		WILL PERC at 3', too					
	219	7 1/2' S	12:15 ²⁰	12:36	Still not to 2nd peg; 1/8" to 2nd		(F)
		Surface rain water infiltrating to 7' where sandy lm begins					
	220	6' / 14'	12:19:24	12:22	12:22	12:29	7

REMARKS Rained last night
TYPE OF SOIL _____
TESTED BY KN ALSO PRESENT C. Sperry
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

82-E
448.9

83
448.8

COMMUNITY SEPTIC TANK

Copy of signed
perc plan

7-10-03



HILLIP D. CARROLL
 CAMILLA CARROLL
 D. ACCOUNTY 281 779
 ICEL 71. TAX MAP 23

19C3
G1B2

G1C2

FUTURE LOT 80
48,750 S.F.

86-B 420.5
87-A 418.4
87-B 417.6
87-C 418.1

FUTURE LOT 81
51,932 S.F.

88-A 414.9
88-B 415.1
88-C 413.3
88-D 413.6

ChB2

P-220
408.6

89-A 409.7
89-C 406.7
89-D 404.0

LOT 25
46,217 S.F.

FUTURE LOT 82
48,805 S.F.

90-A 404.5
90-B 403.3
90-C 398.2
90-D 403.4
90-E 403.0

PHILLIP D. CARROLL
CAMILIA CARROLL
TAX ACCOUNT 28177
PARCEL 71, TAX MAP 23

CASTLEBRIDGE ROAD

FUTURE PRES. PARCEL R
12' SWM ACCESS

SWMF#7
WET ED POND

ChC2

GnB2

MCC2

MATCH LINE SE

ChB2

P03-10
perc test plan 3/2003