

APPLICATION

PERCOLATION TESTING

A _____

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 410-313-2640

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 Robert T. Matthews Revocable Trust
ADDRESS c/o Cloverfield/Pfefferkorn, LLC, 10705 Charter Drive, Suite 320, Columbia, MD 21044 PHONE 410-997-7400

AGENT OR PROSPECTIVE BUYER Heritage Land Development
ADDRESS 3060 Washington Rd., Suite 220, Glenwood, MD 21738 PHONE 410-489-7900

PROPERTY LOCATION:

SUBDIVISION Matthews Property LOT NO. 1716

ROAD AND DESCRIPTION _____
2400 Pfefferkorn Road, West Friendship, MD 21794

TAX MAP NO. 15 PARCEL # 4

SIZE OF LOT 1 acre TYPE OF BLDG. SFD
(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 _____

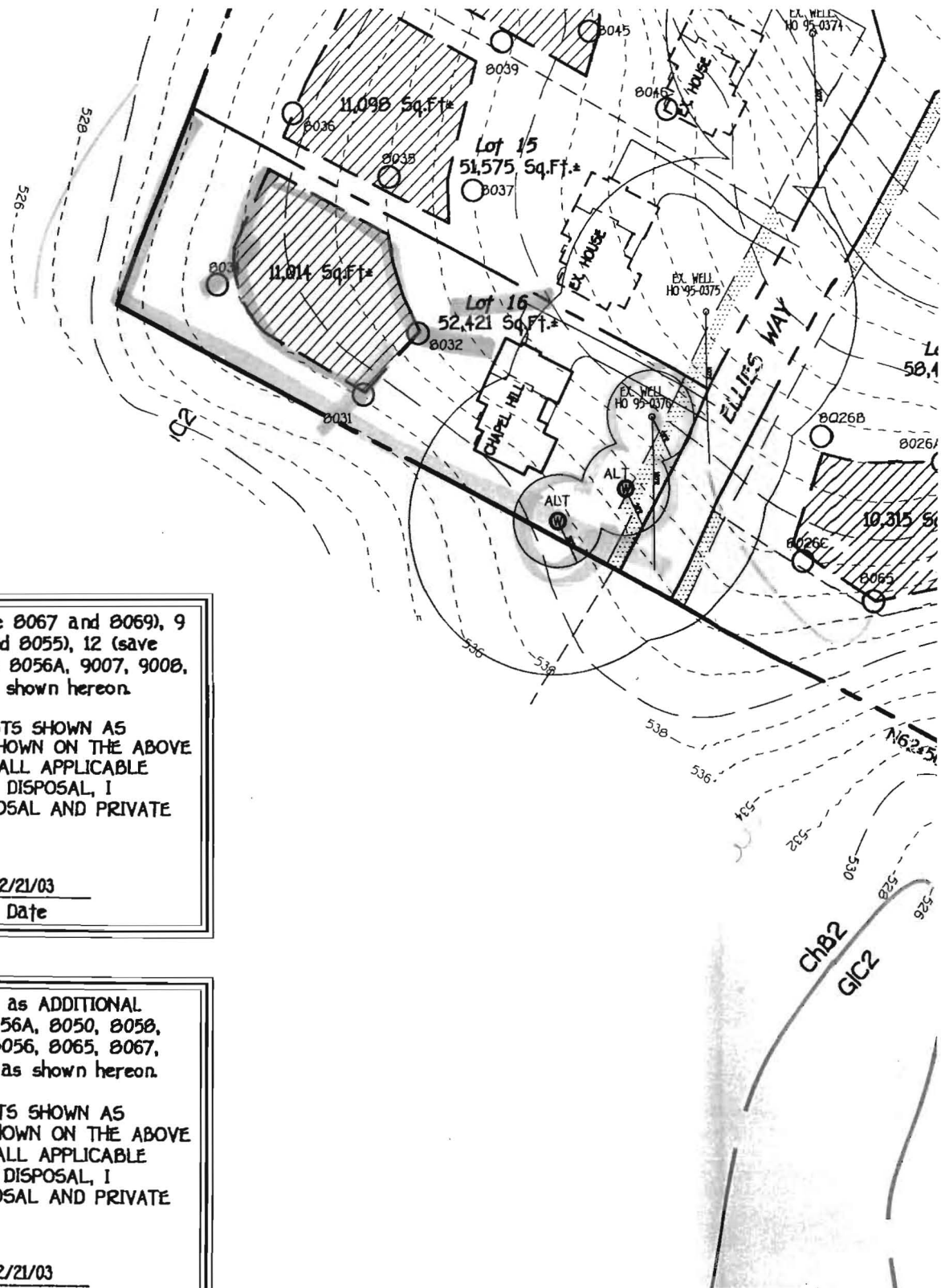
HOLD PENDING FURTHER TESTS _____

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



FOR LOTS 1, 2, 3, 4, 5, 6, 7, (save B262), 8 (save B067 and B069), 9 (save B254 and B253), 10, 11 (save B056, B054 and B055), 12 (save B050 and B051C), and ADDITIONAL HOLE NUMBERS B056A, 9007, 9008, 9009, 9013, B000, B001, B002, B003 AND B004 as shown hereon.

I PERSONALLY WITNESSED SOIL PERCOLATION TESTS SHOWN AS "CLOVERFIELD". ALL SEWAGE DISPOSAL AREAS SHOWN ON THE ABOVE REFERENCED LOTS AND ADDITIONAL HOLES MEET ALL APPLICABLE COMAR REGULATIONS REGARDING ONSITE SEWAGE DISPOSAL, I RECOMMEND APPROVAL FOR ONSITE SEWAGE DISPOSAL AND PRIVATE WATER SUPPLIES ON THESE LOTS.

FOR SIGNATURE SEE ORIGINAL SIGNED PERC DRAWING DATED 2/21/03

Signature	License *	Date
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FOR LOTS 14, 15, 16, 17, 18, 19, 20, and 21, as well as ADDITIONAL HOLE NUMBERS 9007, 9008, 9013, 9009, B051C, B056A, B050, B058, B058A, B051A, 9001A, B033, B052A, B052, B054, B056, B065, B067, B069, B254, B253, B257A, B259, B262, and B002 as shown hereon.

I PERSONALLY WITNESSED SOIL PERCOLATION TESTS SHOWN AS "CLOVERFIELD". ALL SEWAGE DISPOSAL AREAS SHOWN ON THE ABOVE REFERENCED LOTS AND ADDITIONAL HOLES MEET ALL APPLICABLE COMAR REGULATIONS REGARDING ONSITE SEWAGE DISPOSAL, I RECOMMEND APPROVAL FOR ONSITE SEWAGE DISPOSAL AND PRIVATE WATER SUPPLIES ON THESE LOTS.

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Drawings 3\30757 Matthews Property\30757 Revised Cloverfield Perc Certification Plat.dwg, 5/4/2010 7:05:56 AM, tomy,

FOR LOTS 1, 2, 3, 4, 5, 6, 7, (save 0262), 8 (save 0067 and 0069), 9 (save 0254 and 0253), 10, 11 (save 0056, 0054 and 0055), 12 (save 0050 and 0051C), and ADDITIONAL HOLE NUMBERS 0056A, 9007, 9008, 9009, 9013, 0000, 0001, 0002, 0003 AND 0004 as shown hereon.

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FOR SIGNATURE SEE ORIGINAL SIGNED PERC DRAWING DATED 2/21/03

Signature _____ License • _____ Date _____

FOR LOTS 14, 15, 16, 17, 18, 19, 20, and 21, as well as ADDITIONAL HOLE NUMBERS 9007, 9008, 9013, 9009, 0051C, 0056A, 0050, 0050, 0050A, 0051A, 9001A, 0033, 0052A, 0052, 0054, 0056, 0065, 0067, 0069, 0254, 0253, 0257A, 0259, 0262, and 0002 as shown hereon.

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Signature _____ License • _____ Date _____

PERC CERTIFICATION

I certify that the locations shown hereon are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.


Terrell A. Fisher
Signature of Professional Land Surveyor
Terrell A. Fisher, Professional Land Surveyor No. 10692

5/4/10
Date

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
HOWARD COUNTY HEALTH DEPARTMENT.

B. Wilson for Peter Beilenson
COUNTY HEALTH OFFICER

5/26/10
DATE

