

APPLICATION

PERCOLATION TESTING

A _____

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 KENNARD WARFIELD JR

ADDRESS 14663 TRIADELPHIA ROAD PHONE 410-442-2337

AGENT OR PROSPECTIVE BUYER LAND DESIGN & DEVELOPMENT

ADDRESS 8000 MAIN STREET ELLICOTT CITY PHONE 410-480-9105

PROPERTY LOCATION:

SUBDIVISION THE WARFIELDS II LOT NO. 46 51

ROAD AND DESCRIPTION SOUTH SIDE OF TRIADELPHIA ROAD AT THE INTERSECTION OF TRIADELPHIA ROAD AND HOWARD ROAD

TAX MAP 21 PARCEL # _____

SIZE OF LOT ONE ACRE TYPE BLDG. SINGLE FAMILY DWELLING
(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.

DONALD R. LEWIS
(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

0' 6084
brn orge hvy sal m
tan gray
lt. brn sa lm
20-30% frags
HB

11 1/2

3 1/2

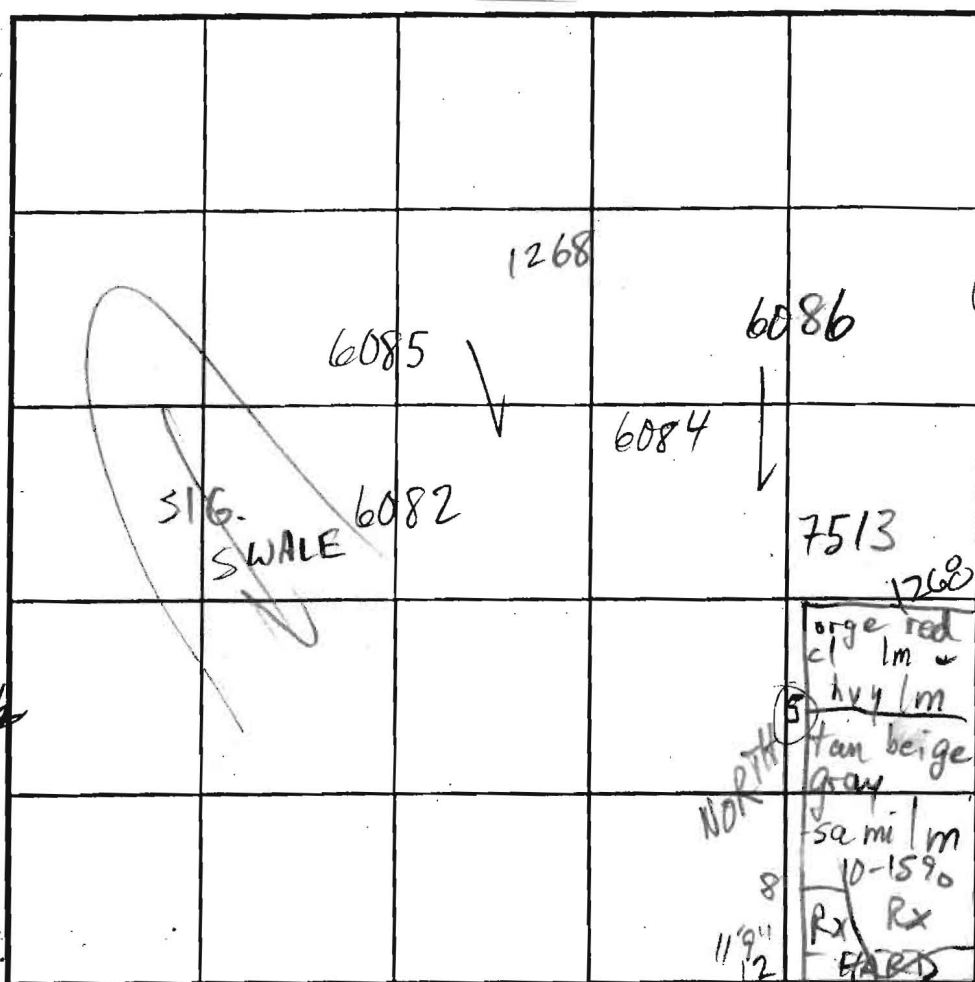
13

6

6086
brn orge hvy lm
tan gray
lt. brn sa lm
10-15% frags

7513
dk. brn dk. orge hvy lm
beige tan gray sa lm
10% frags

13 1/2



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0' 6082
hvy orge cl lm
orge sal m pockets
25% Rx
beige lt. brn sa lm
15-20% frags

6085
med brn hvy cl lm
lt. orge dk. gray sa lm
20% Rx
35-40% Rx

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/7/02	6084 SM	5 1/2' / 7 1/2' / 11 1/2'	9:54	9:57	9:57	10:02	5
			9:53	9:55	9:55	9:59	4
	6086 SM	4 1/2' / 7 1/2' / 13'	10:02	10:07	10:07	10:17	10
			10:02	10:05	10:05	10:08	3
	7513 SM	6' / 8 1/2' / 13 1/2'	10:15	10:25	10:25	10:41	16
			10:14	10:20	10:20	10:28	8
10/31/02	6085 SM	5' / 6' 9" / 10'	2:14	2:22	2:22	2:39	17
			2:14	2:17	2:17	2:23	6
	6082 SM	4' 3" / 7 1/2' / 14'	2:11	2:15	2:15	2:22	7 EST
			12:22	12:24	12:24	12:29	5
8/20/03	1268 ^S	6' / 11' 9" / 12'	11:06	11:13	11:13	11:19	6
			HARD	BOT			

REMARKS ALL HOLES PER PLAN; TEST HOLE REQ'D 25' TO EAST OF 6085

TYPE OF SOIL _____
 TESTED BY M. Ripkin ALSO PRESENT Mike J. crew, Tori M.
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

OF
HARRY
40
185
DEC

ROAD

Non-Buildable
Preservation
Parcel 'C'

Signed per
ME cut 1-16-08

SEE
SHEET
2

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

in for Peter B. Jensen, M.D.

1/16/2008

PERC CERTIFICATE

I certify that the information shown hereon
supervising and approved to the best of

Signature of Professional Land Surveyor

MATCH LINE SEE SHEET

