



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ AP# 532556

AGENCY REVIEW: _____ DATE 3-17-10

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)

1518 4 01 9 51

PROPERTY OWNER(S) Molly + John Wilson

DAYTIME PHONE 301-317-1265 CELL 301-332-7728 FAX _____

MAILING ADDRESS 11241 Old Hopkins Rd. CLARKSVILLE Md 21029
STREET CITY/TOWN STATE ZIP

APPLICANT S.M. CONTRACTING INC

DAYTIME PHONE N/A CELL 443-277-7526 FAX 410-552-5815

MAILING ADDRESS 425 Obercht Rd. SYKESVILLE Md. 21784
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME same as owner LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

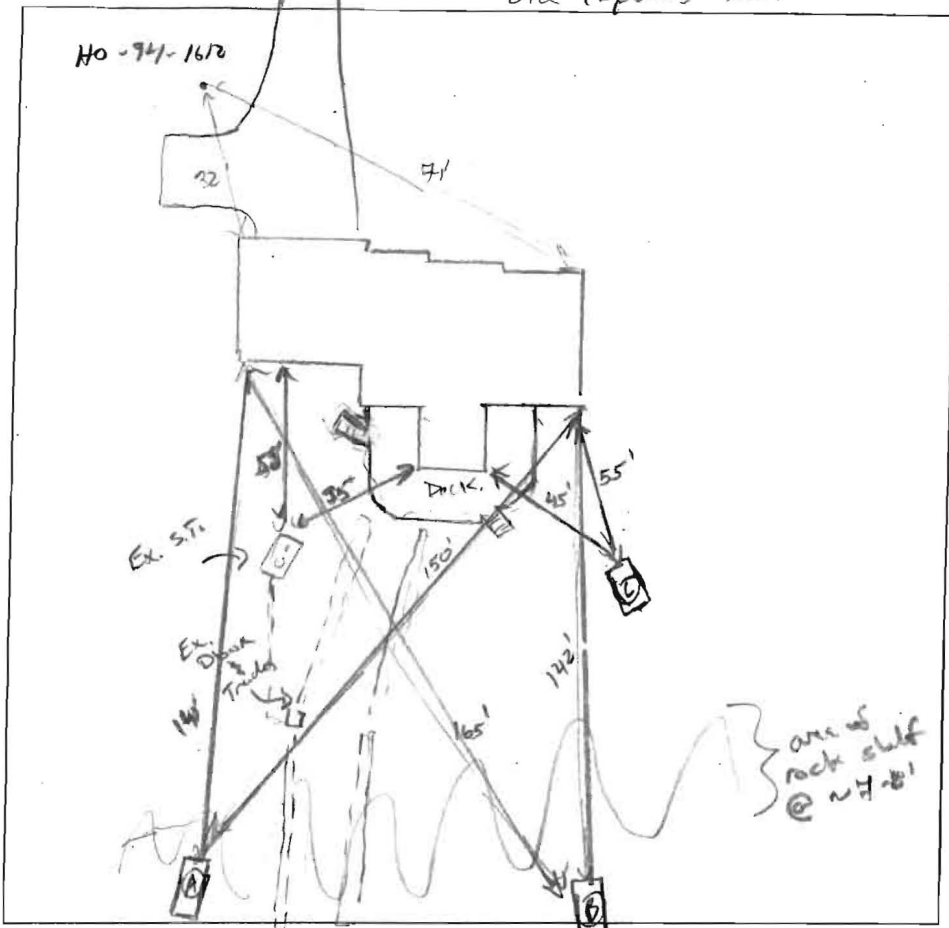
FAX MAP PAGE(S) 41 GRID 16 PARCEL(S) 119 PROPOSED LOT SIZE _____

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. Woody F... 03-17-2010
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-1771 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

HO-74-1670



10" Topsoil, dm SBK.
 1' CL, CW
 Few roots SBK.
 Sticky CL
 CS, ribbons
 3' Clear boundary
 Dense, Br./red Loam, Friable
 CW, shales
 6' few rca
 SL, wk
 thick platy structure
 inherited from pre
 or Friable.
 15 1/2' Highly micaceous

Visual OK
 same as hole B

RECEIVED
 HAWK COUNTY HEALTH DEPT.
 ENVIRONMENTAL HEALTH
 2010 HR 18 AM 9:04

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
3/25/10	(A)	8'2" / 15'	10:56	11:05	11:16	11	(P)
	(B)	6'6" / 15'	11:24	11:30	11:41	11	(P)
	(C)	visual		OK			(P)

8" Topsoil, dm SBK, om
 Str. Br./orange CL, massive MSBK
 3' SCL, Dense CS, Friable. Thick platy.
 6' Smooth boundary
 Rca, quartzite. vep
 7.5' tight SL, Br, yellow, orange.
 wk thick plates inherited from Rca, 5% siltstone
 Highly micaceous

REMARKS Ex. system put in too shallow. looks be installed in tight platy clay loam w/ a rock shelf/rim (quartzite) @ around 6-8'
 SANITARIAN K. Wolf BACKHOE R. Heggs OTHERS owner
 TEST HOLES USED IN SDA 2 holes AVG. PERC TIME 11 SQ. FT/BR _____
 TRENCH WIDTH 2' INLET DEPTH 5' MAX. BOT DEPTH 10' EFFECTIVE SW 6.5-7'

$$4(150) = \frac{600 \text{ gal}}{0.8} = 750 \div 2 = 375 (0.5) = 187.5 \text{ LF}$$