

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 5

DATE 3-8-02

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 Thomas C. Curtis and Betty Jean Curtis

ADDRESS 13471 Triadelphia Mill Rd. Clarksville, MD 21029 PHONE 301-854-2141

AGENT OR PROSPECTIVE BUYER Highland Development Corporation, Richard J. Demmitt, President

ADDRESS PO Box ~~228~~ Clarksville, MD ~~21029~~ 21029 PHONE 410-531-5539
L-228

PROPERTY LOCATION:

SUBDIVISION Curtis Property LOT NO. 9

ROAD AND DESCRIPTION Triadelphia Mill Road

TAX MAP 34 PARCEL # 2

SIZE OF LOT 1 Acre TYPE 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. Richard J. Demmitt
(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

P-38
 0' Brown Red CL
 1/2' Brown SL w/ 0-5% Channery frags

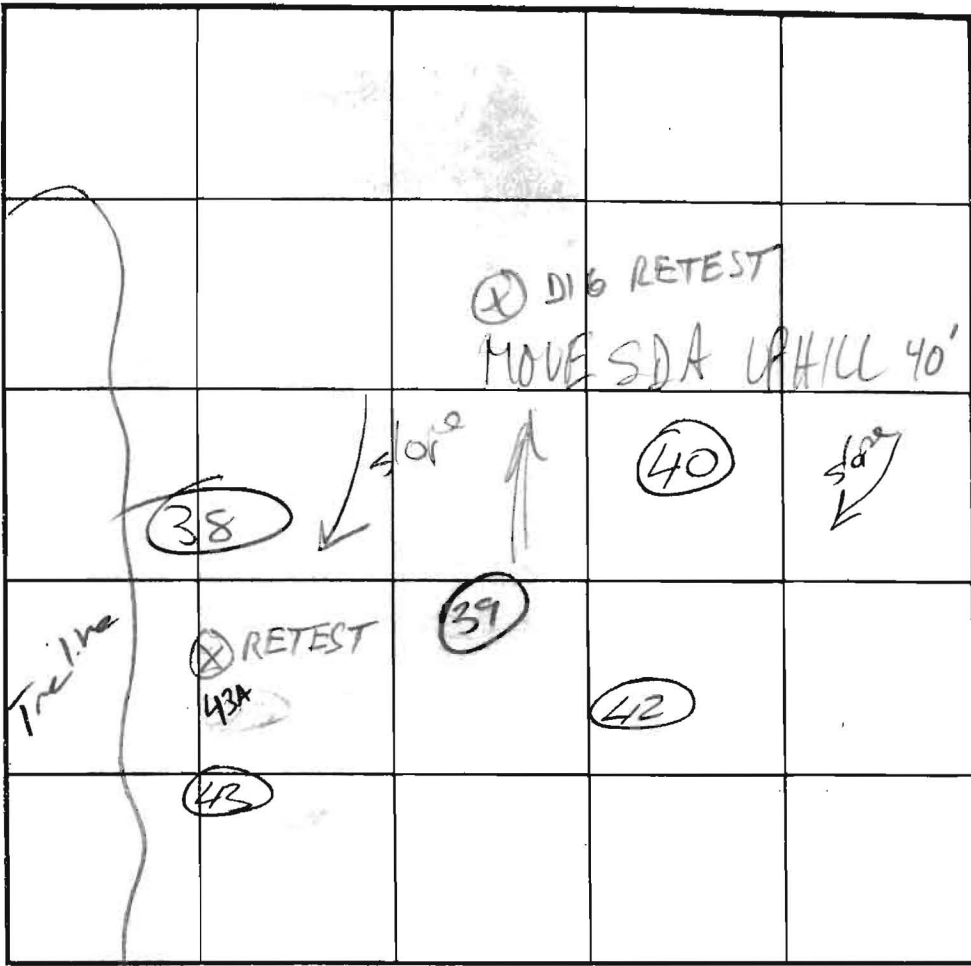
P-39
 Brown CL
 ↓ 5-10% Channery frags
 Red Brown

red brown Heavy SL w/ 0-5% well s.p. rocks
 ↓ becomes fine SL

P-40
 Brown CL
 ↓
 red brown micaceous SL w/ 5-10% s.p. rocks
 ↓ 5-10% Channery frags

SOIL PROFILE

P-42
 0' Heavy Brown L
 3' Brownish red SL w/ lithochromite mottling
 5' Fine micaceous red brown SL
 11' mottled SL
 12' H₂O



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/18/02	P-38	4 12 1/2	1:08:15	1:10:00	1:10:00	1:12:00	2
6/18/02	P-39	4 1/2 13	1:17:30	1:20:30	1:20:30	1:28:30	8
6/18/02	P-40	4 13	12:44:45	12:48:45	12:48:45	12:55:00	6:15
6/18/02	P-42	5 12	1:50:45	1:53:15	1:53:15	1:59:30	6:15
			FAILS		MOTTLED @ 11		

REMARKS 2 HOLES REQUESTED TO MOVE SDA UPHILL
 TYPE OF SOIL Glands
 TESTED BY J. Boriz ALSO PRESENT
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 TRENCH WIDTH 3
 INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 6 SO. FT./BEDROOM 180

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

DISTRICT _____

DATE _____

THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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PROPERTY OWNER _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ADDRESS AND DESCRIPTION _____

LOCAL MAP _____ PARCEL # _____

TYPE OF LOT _____ TYPE BLDG. _____

(SINGLE FAMILY DWELLING OR COMMERCIAL)

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COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. _____

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REASON FOR PENDING FURTHER TESTS _____

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

THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

Heavy Brown L

Heavily mottled CL (redox)

Fine micaceous SL

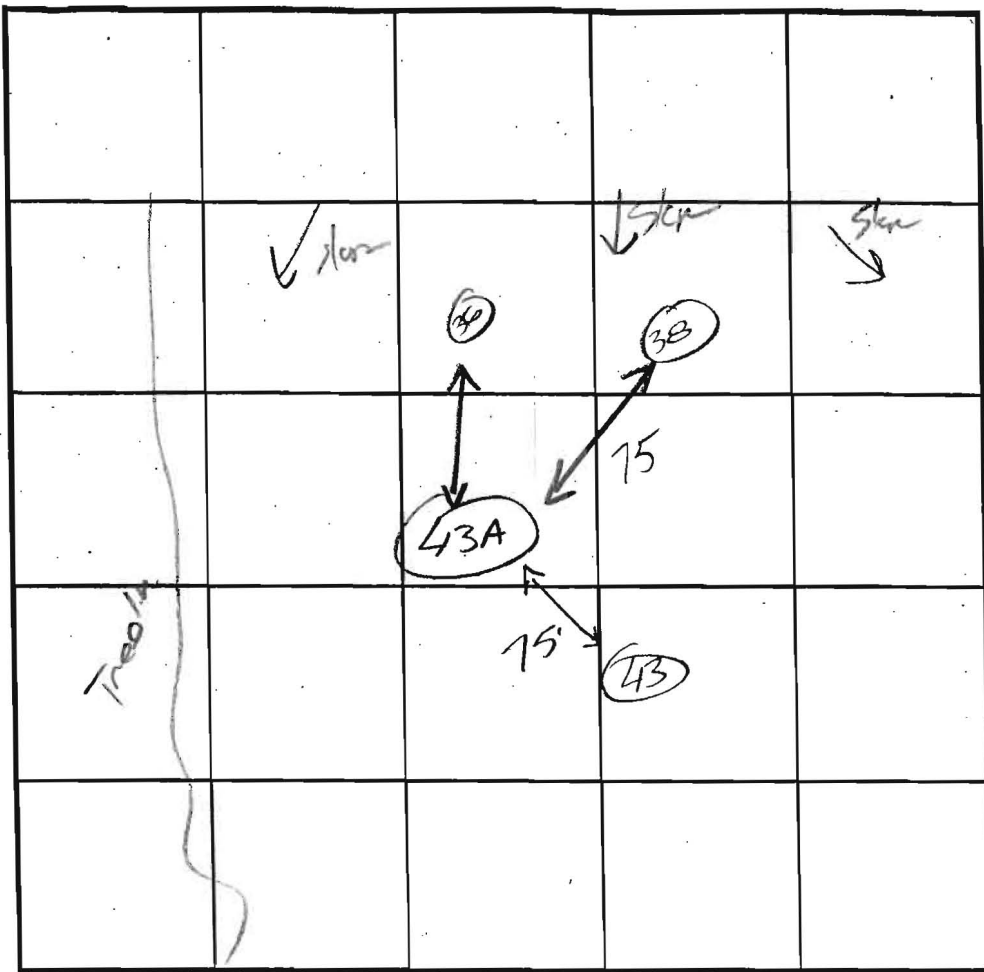
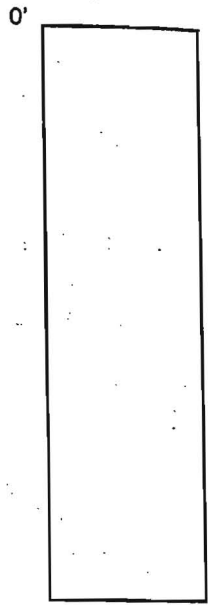
H₂O 43A

Heavy reddish orange L w/ <5% Channal Frag

Fine micaceous tan/red SL

No H₂O!!

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6/18/03	P-43	3 1/2 11 1/2	1:37:00	1:38:15	1:38:15	1:42:45	4:30 AF	
6/18/03	P-43	6 1/2 11 1/2	1:36:30	1:41:45	1:41:45	1:48:45	7 AF	
			FAILS PERCHED H ₂ O + GROUNDWATER					
7/25/02	43A	6 13	10:58:00	10:59:30	10:59:30	11:02:45	3:15 01	

REMARKS _____

TYPE OF SOIL Glacially

TESTED BY Boris ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 TRENCH WIDTH 3

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

