

4/21/98 - 4/28
&
5/19/98 - 5/22

APPLICATION

PERCOLATION TESTING

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

56 LOTS
EXISTING HOUSE(S) - 06003-5607165
TO BE RECONSTRUCTED
4 DAYS FOR PERMITS
WET SEASON TESTING
4 DAY FOR
FOLLOW-UP TESTING
will promptly submit
IMPROVED PLAN/
APPLICATION (CW)

A 59914
P _____

DISTRICT _____
DATE 4/3/98

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 ALFRED KNAPP

ADDRESS MONTICELLO AVE. / SYKESVILLE PHONE 410-465-4242

AGENT OR PROSPECTIVE BUYER CLARK SPERRY / SDC GROUP

ADDRESS 8480 Ballman Not. PIKE PHONE 410-465-4244

PROPERTY LOCATION:

SUBDIVISION Knapp Prop. LOT NO. _____

ROAD AND DESCRIPTION M

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] Security Div.
(SIGNATURE OF APPLICANT)
STEVE SKIPPE - TSA

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

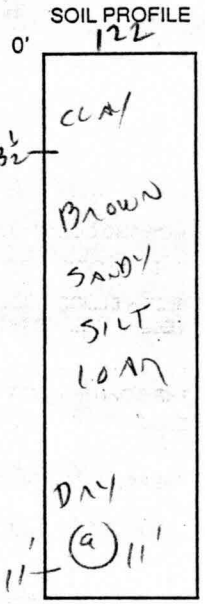
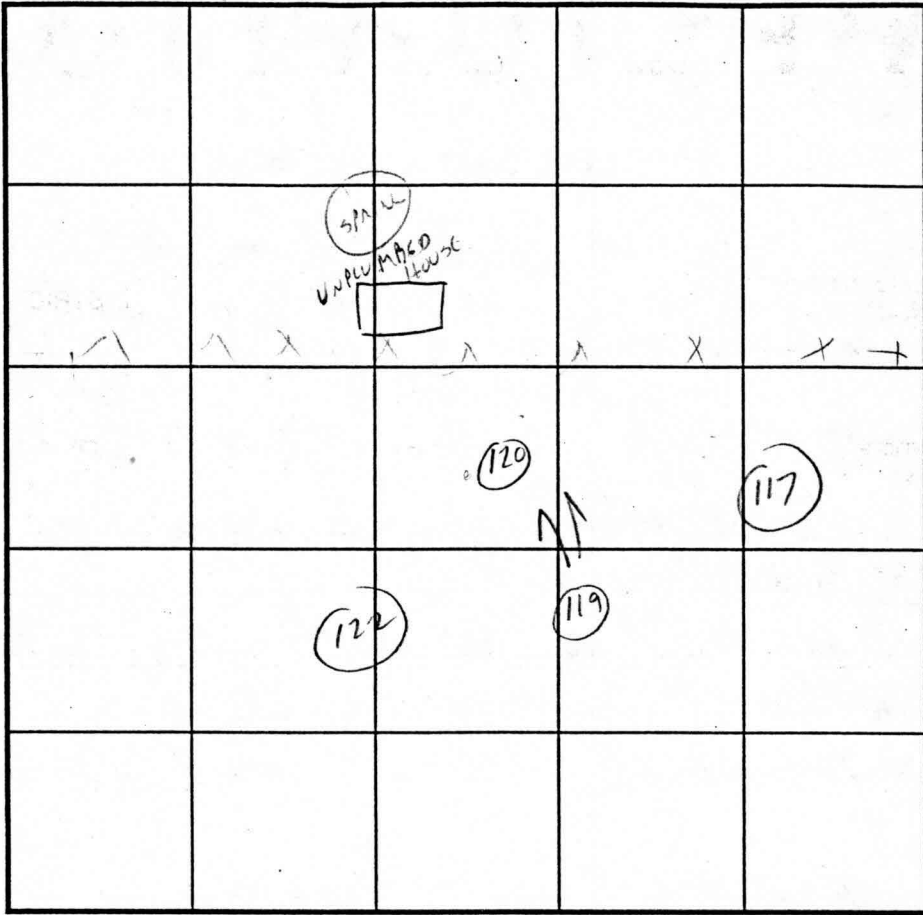
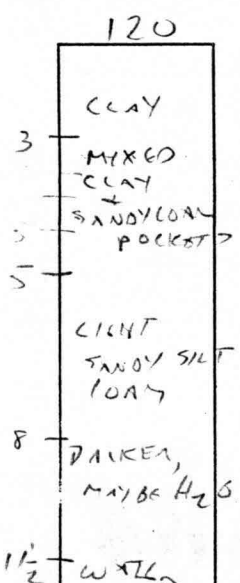
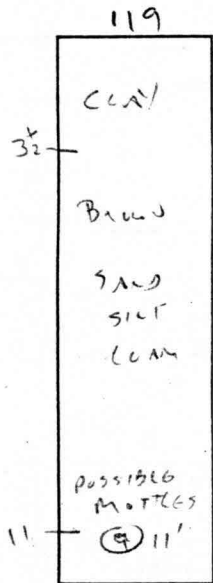
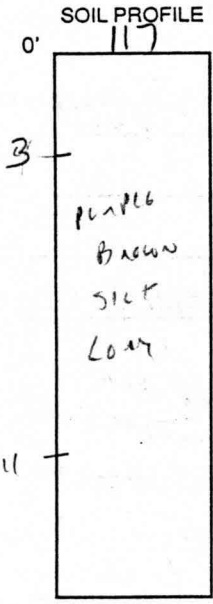
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

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

THIS IS NOT A PERMIT

A 59914/5
COUNTY #

KNAPP SUBD.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
7/22/98	117	3 1/2'	4:04	4:06	4:06	4:09	3 MIN	
	119	3 1/2'	4:06	4:08	4:08	4:12	4 MIN	
	120	5'	4:14	4:17	4:17	4:21	4 MIN	
			WATER @ 11 1/2' NO 3 & H-9					
			LIKE BUT REACHABLE @ 4'					BAD LANDSCAPE POSITION
	122	4'	4:18	4:20	4:20	4:23	3 MIN	
			SAME ELEVATION AS 120 BUT NOT AS AFFECTED BY SITED DRAINAGE					

REMARKS _____

TYPE OF SOIL _____

TESTED BY C. Wilha ALSO PRESENT SPERRY

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

APPLICATION

PERCOLATION TESTING

A 59914

P _____

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

56 LOTS
EXISTING HOUSE(S) - 46003-56071 CS
TO B+ PERMITS
4 DAYS FOR PERMITS
WET SEASON TESTING
4 DAY FOR FOLLOW-UP TESTING
WILL PROBABLY SUBMIT IMPROVED PLAN/ APPLICATION (CW)

DISTRICT _____

DATE 4/3/98

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 Alfred Knapp

ADDRESS Monticello Ave. / Sykesville PHONE 410-465-4242

AGENT OR PROSPECTIVE BUYER Clark Sperry / SDC Group

ADDRESS 8480 Ballenger Not. Pike PHONE 410-465-4244

PROPERTY LOCATION:

SUBDIVISION Knapp Prop. LOT NO. _____

ROAD AND DESCRIPTION M

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.

APPROVED BY _____ FOR _____ DATE _____
Steve Shiple - TSA (SIGNATURE OF APPLICANT) SECURITY DIV.

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 _____

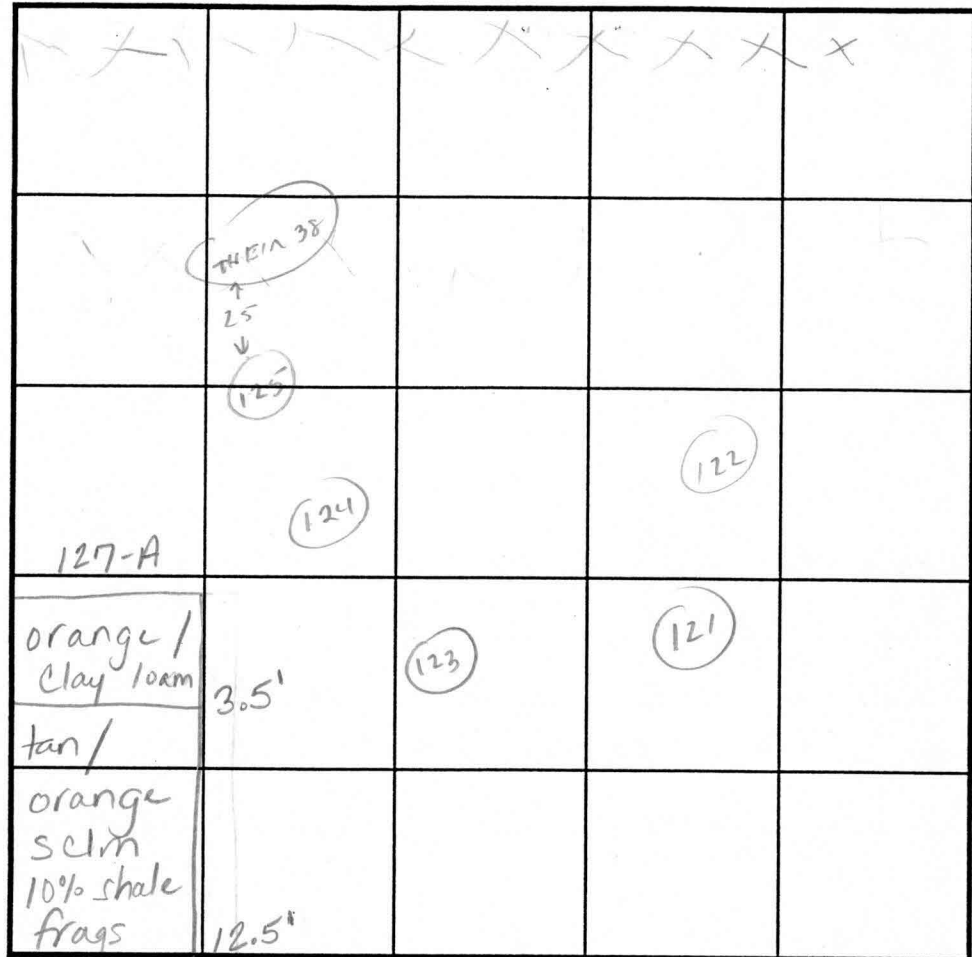
THIS IS NOT A PERMIT

159914/5
COUNTY #

RNAPP SUBV.

SOIL PROFILE

0' 121
ORANGE CLAY
3' ORANGE SILT LOAM
11'



SOIL PROFILE

0' THEIR 38"
ABANDONED
REPORTED
SANDY
w
H₂O
(a) 10'
BACK FILL
SHOWS
EXTENSIVE
MOTTLES

123
CLAY/
4' ORANGE CHANGING TO TAN SILT LOAM
11'

125
3 1/2' CLAY
SAND SILT LOAM
UNCERTAIN DEPTH TO MOTTLES DUE TO SHADOWS
11' SANDY/WATER
11 1/2'

124
3' CLAY TRANSITION ZONE
5' TAN SANDY SILT LOAM w/ FEW POCKETS CLAY
11' SOME WEARING @ SILTY WATER
11'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/22/98	121	4	4:21	4:22	4:22	4:24	4 MIN
	123	6	4:24	4:25	4:25	4:26	1 MIN
	124	5	4:29	4:31	4:31	4:35	4 MIN
	125	4	4:34	4:37	4:37	4:41	4 MIN
			QUESTIONABLE FOR WATER TABLE				
7.21.98	127-A	4.5'S	1:45:50	1:47:50	1:47:50	1:50:30	2:20
		12.5'D	Visual	ok	-see profile		

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY C. Wilho ALSO PRESENT SPERRY
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
 INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

