

APPLICATION

PERCOLATION TESTING

A 58533

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 John Mullinix ROSENBERG Custom Homes, Inc.

ADDRESS P.O. Box 490 MINERAL BLUFF GA PHONE 30559

AGENT OR PROSPECTIVE BUYER Land Source Development Corporation c/o Creston Catholic

ADDRESS 10480 LITTLE PATUXENT PARKWAY PHONE _____
SUITE 500 COLUMBIA MARYLAND 21044

PROPERTY LOCATION:

SUBDIVISION Buckskin Lake Overlook LOTS 5-7 LOT NO. 5

ROAD AND DESCRIPTION 13040 FOLLY QUARTER ROAD

BLOG. PERMIT SIGNED

AND RETURNED 5-3-89

Serial # B00117373

TAX MAP 22 PARCEL # 73

SIZE OF LOT 1 AC. TYPE BLDG. S.F.D - 4 Brm
(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. Fecharia Y. Fisch (agent)
(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

58533
COUNTY #

SOIL PROFILE
510/509

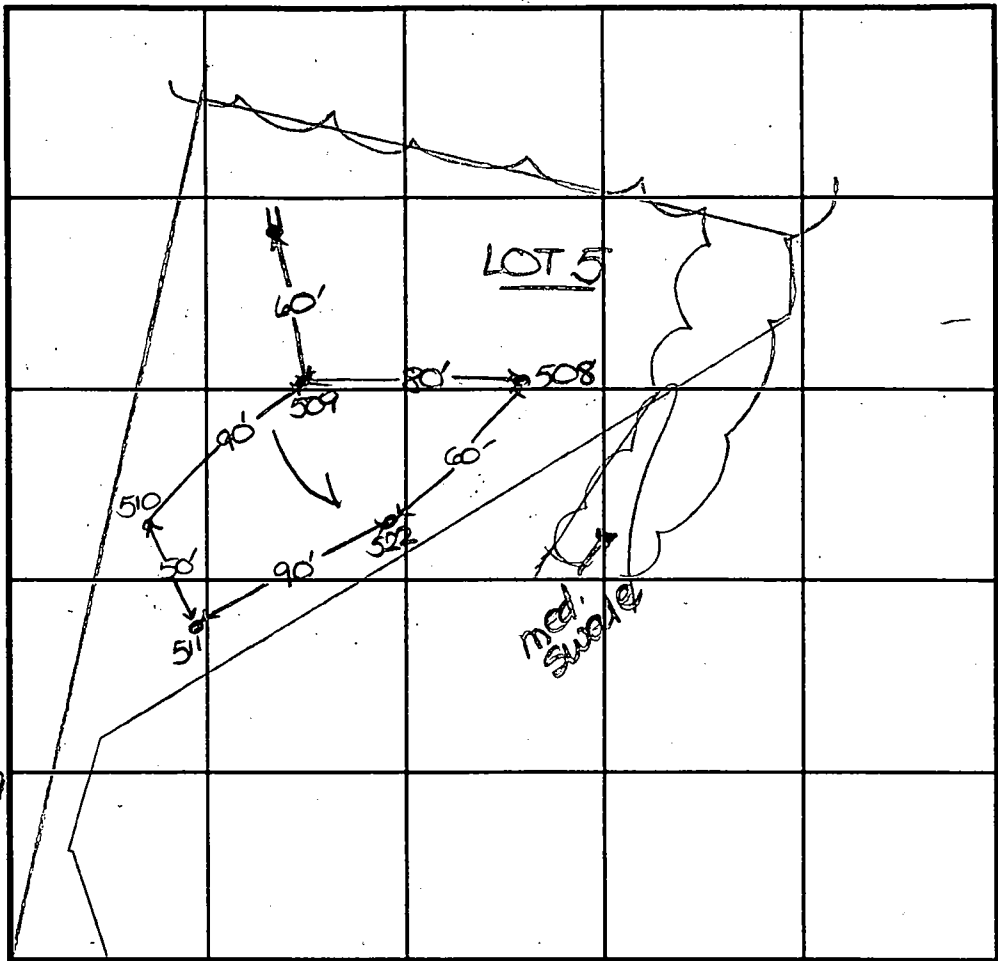
0' topsoil
1' org brn
cl 1m
3.5' med to pale
brn
sa 1m
w/ mica
flocs
15-20%
Rx

511/522

0' topsoil
1' org brn
cl 1m
2.5' med to pale
brn
sa 1m
w/ mica
flocs
15%+
Rx

508

0' topsoil
1' red org
brn
cl 1m
3'-3.5' pale org
brn
sa 1m
w/ mica
flocs
7' Rx patch
7.5' 20%+
Rx
11.5'



SOIL PROFILE
11

0' topsoil
1' org brn
cl 1m
3+ pale
brn
sa 1m
w/ mica
flocs
20%
Rx
12

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
Folly Quarter Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6-27-97	510	12.5'D	Visual	OK			
	511	3.5'S	10:51	10:51 ₃	10:51 ₃	10:53	2
		12.5'D	Visual	OK			
	522	3.5'S	10:55 ₃	10:56 ₃	10:56 ₃	10:58	2
		12.0'D	Visual	OK			
	508	4.5'S	11:02	11:03 ₃	11:03 ₃	11:05 ₃	2
		11.5'D	Visual	OK			
	509	4'4"S	11:14	11:15 ₃	11:15 ₃	11:17 ₃	2
		7.5'M	11:13	11:14	11:14	11:16	2
		12.5'D	Visual	OK			
REMARKS	11	12.0'D	Visual	OK			

TYPE OF SOIL _____
 TESTED BY D. SOE ALSO PRESENT Mr. Cathcart
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 TRENCH WIDTH 3
 INLET DEPTH 2.5 MAXIMUM BOTTOM DEPTH 4.5 SQ. FT./BEDROOM 180

