

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

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. 34 39

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. REOWER
(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' 7514

orange red brn
hvy lm

4 1/2 S
tan brn
sa lm
10-20% frags

7518

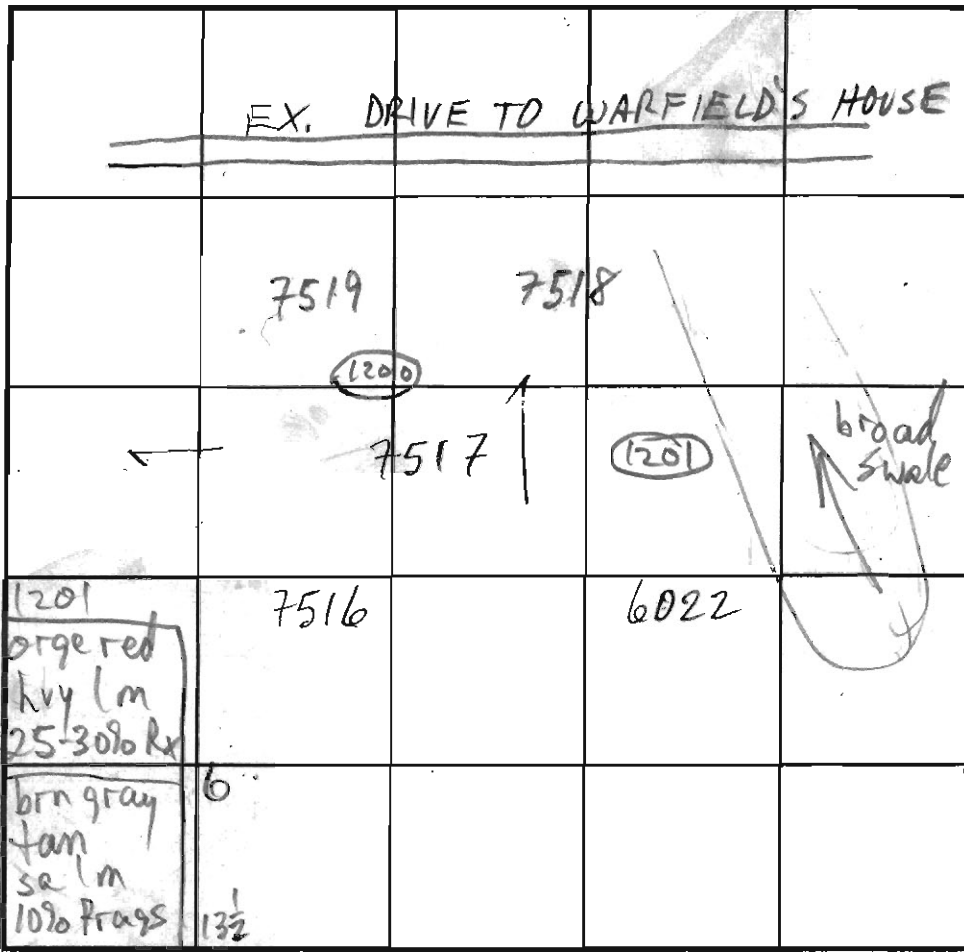
orange red
brn cl lm
pockets of
30% Rx

tan lt. brn
sa lm
20-30% frags
↓ w/depth

7517/1200

orange red
brn
hvy lm
20% Rx

brn
lt. brn
si lm
10-20% frags



SOIL PROFILE

0' 7516

orange
brn
hvy lm

4 1/2
lt. brn
tan
gray
sa lm
10-20 frags

6022

orange
lt. orange
brn cl lm
+ hvy cl lm

tan beige
10-15% frags

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/8/03	7519	7' 13 1/2"	1:38 1:42:35	1:40 1:43:25	1:40 1:43:25	1:41 1:45:50	2 1/2
	7518	7' 13"	1:59:35	2:02	2:02	2:13	11
	7517	7' 13"	2:07	2:18	2:18	2:35	17 EST
	7516	7' 13 1/2"	2:17	2:20	2:20	2:23	3
	6022	12 1/2"	FAIL	CLAY TO 8'4"			
8/11/03	1200	6 1/2" 12"	10:55	11:08	11:08	11:20	12 EST
	1201	7' 13 1/2"	11:08	11:10	11:10	11:13	3

FAIL

REMARKS ALL HOLES PER PLAN, ADJ. REQ'D DUE TO RX @ 7519 AND CLAY @ 6022

TYPE OF SOIL

TESTED BY M. Ripkin

ALSO PRESENT Mike L. crew, Tori M.

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS,
 HOWARD COUNTY HEALTH DEPARTMENT

B. Wilson for Peter Brilensen, MD
 COUNTY HEALTH OFFICER

12/08

1/16/2008
 DATE

*Signed perc
 cert 1-16-08*

MATCH L



4
 FIELDS
 9583

L. 'A'

THE WATFIELD

LOT 38
44,727 SQ.FT.

NOTE:
FIRST FLOOR
SEWER SERVICE ONLY.
BASEMENT WILL NOT
SEWER BY GRAVITY.

Copy of Plat signed 7/3/2016

LOT 40
44,245 SQ.FT.

NOTE:
FIRST FLOOR
SEWER SERVICE ONLY.
BASEMENT WILL NOT
SEWER BY GRAVITY.

LOT 39
52,992 SQ.FT.

2,000 GAL
SEPTIC TANK
INV. IN 512.60
INV. OUT 512.30

2,000 GAL
SEPTIC TANK
INV. IN 526.70
INV. OUT 526.40

DIST. BOX
EX. GRD. 529.00
INV. IN 525.00

MOON ROOM
INV. 527.20
FF 535.00
B 523.16

CLIFTON PARK
(REV)
FF 532.00
B 522.16

SUNROOM

MOON ROOM
INV. 519.50
FF 530.00
B 530.33
GAR.

EX. WELL
NO. 95-1532

EX. WELL
NO. 95-1532

EX. DRIVEWAY
TO BE REMOVED
UPON THE COMPLETION
OF SECTION TWO

EX. DRIVEWAY
TO BE REMOVED
UPON THE COMPLETION
OF SECTION TWO

