

APPLICATION

PERCOLATION TESTING

A 515042

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Benedict Farm LOT NO. _____

ROAD AND DESCRIPTION _____

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 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 _____

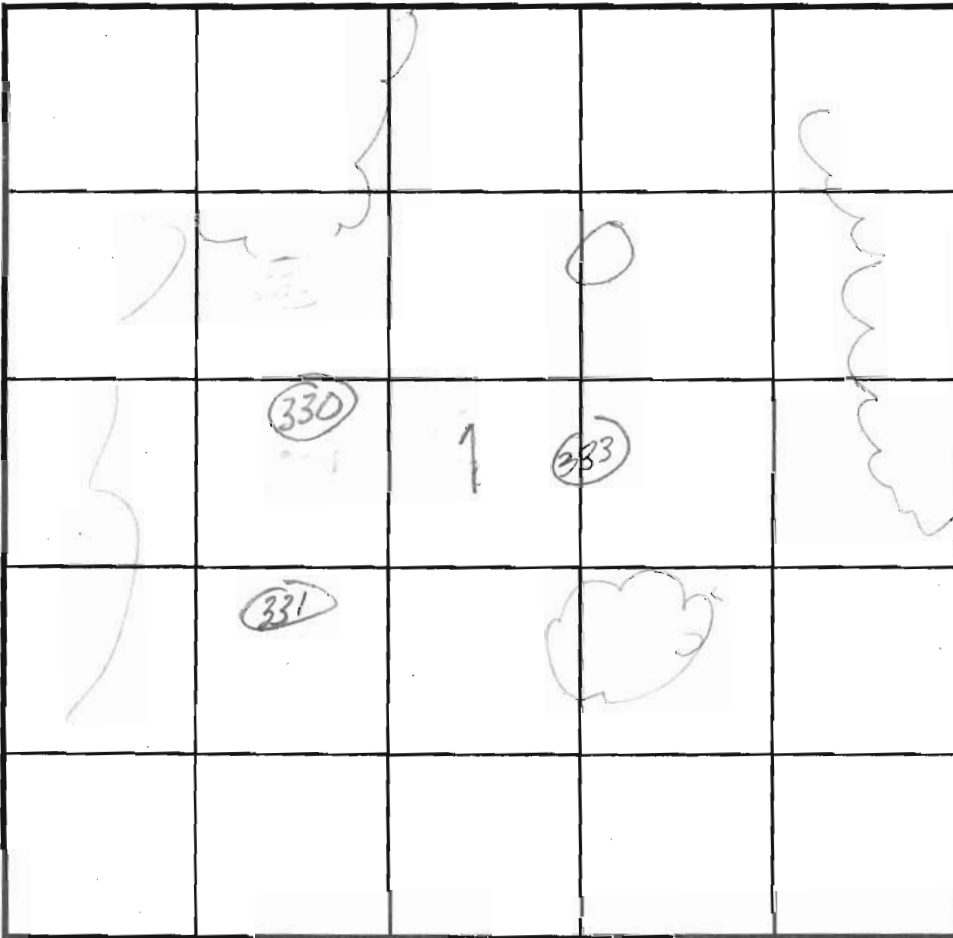
THIS IS NOT A PERMIT

119
121

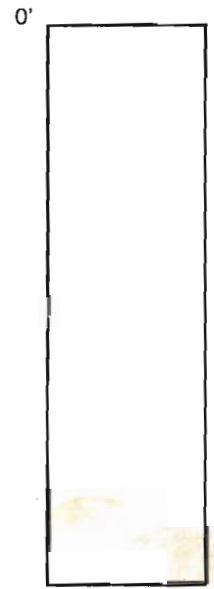
COUNTY #

SOIL PROFILE

0' (330) (333)
dK. brn
tan org
CLM
3-4' Lt. brn
H beige
tan
SalM
10-15%
frags
Bottom



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

14' (331)
46' T.S
DK rd
brn
CLM
tan
5' tan
org brn
SiLm
Frg < 5%
3' Bottom

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-31-01	330	5'4" / 14	1:19	1:21	1:21	1:23	2
	333	5' / 13'3"	12:59	1:00	1:00	1:04	4
	331	5'8" / 5	2:04	2:05	2:05	2:07	2 min
		13' D	—————→				Pass
	332						

REMARKS Holes per plan

TYPE OF SOIL _____

TESTED BY Goedeking ALSO PRESENT Chuck C Mike & crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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

COUNTY #

SOIL PROFILE

0' **(327)**
 Topsoil 3-4"
 DK brn
 CL Lm
 2 1/2' **Rock**
 Micaceous
 Sa Lm
 brn
 tan
 beige
 Frag
 25-35%
 Bottom

(328)

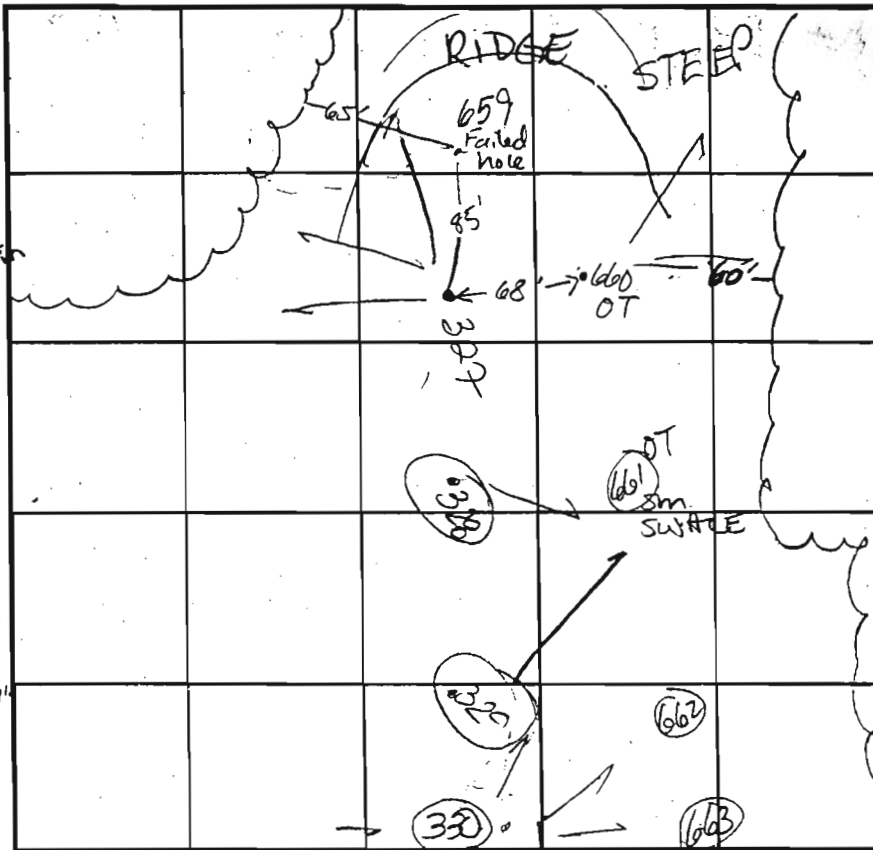
T.S.
 org brn
 CL
 Lm
 4 1/2'

off white
 tan
 brn
 beige
 micaceous
 Si Lm
 570% Frag
 Bottom

(329)

T.S.
 Brn
 DK Brn
 CL Lm
 4-6"

beige
 tan
 white
 Sa
 Loam
 Frag < 5%
 Bottom



SOIL PROFILE

0' **(330)**
 T.S.
 DK brn
 tan
 3-4"
 CL Lm
 3-4"
 H beige
 H brn
 Sa Lm
 10-15%
 Frag
 Bottom
 14'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-31-01	327	5'2" S 11" D	1:29 ³⁰	1:31 ³⁰	1:31 ³⁰	1:32	~ 1 min PASS
			1:32 ⁰⁰	1:34	1:34	1:36	2 min PASS
	p 328	5'5" S 14" D	12:56	12:57 ³⁰	12:57 ³⁰	12:59 ³⁰	2 min PASS
			1:01 ²⁰	1:02 ³⁰	1:02 ³⁰	1:04 ³⁰	2 min PASS
	p 329	5'8" S 13" D	12:55	1:05	1:05	1:22	7 min PASS
							PASS
	p 330	5'4" S 14" D	1:19	1:21	1:21	1:23	2 min PASS
							PASS

HOLES PER PLAN

REMARKS

TYPE OF SOIL

TESTED BY Gnedeking

ALSO PRESENT Chuck C
Mike J crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

515042

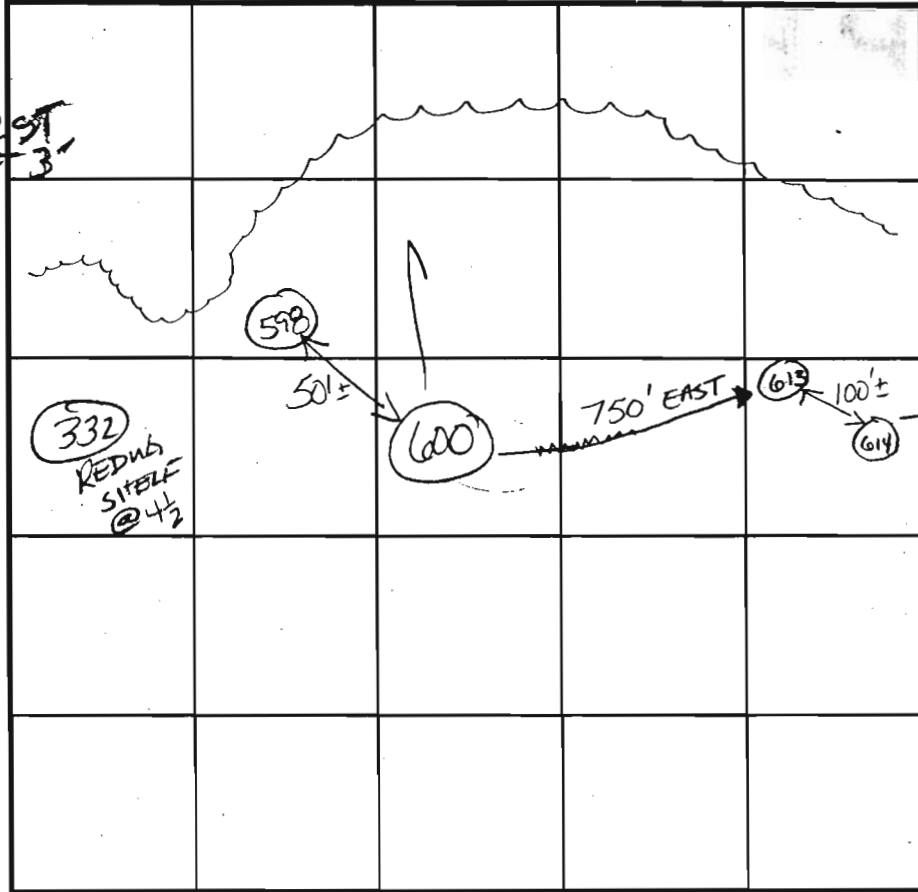
COUNTY #

SOIL PROFILE

600/598

0' brn org
1' saclm
3 1/2' brn sa
20-25%
Frags
H.B.

West 1/2-3'



SOIL PROFILE

614

0' brn org
3' brn saclm
4 1/2' 1 1/2' brn beige
brn micaceous sand
Saprotite + hard frags
20-25%
10 1/2' H. Bottom

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

332
0' org brn
3 1/2' saclm
4' brn
saclm
5-10%
Rx
Bottom

13 3/4"

613

yellow brn
saclm
3 1/2-4'
yellow org brn
hdylm
6'3"
brownish org
Lm
5-10%
Rx
Bottom

13 1/2"

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/16/02	613S	7'3"	3:32	3:43	3:43	3:56	13 OK
	614M	6	3:38:35 3:41:00	3:34:15 3:42:30	3:39:45 3:42:30	3:40:45 3:44:30	1.5 2 OK
	600	4 1/2 / 11	3:56:30 3:59:50	3:57:30 4:03:20	3:52:30	3:59:00	1.5 5 EST OK
	598	4 1/2 / 11	4:07	4:18			25- 30 EST OK
	332	4 1/2 / 13 1/4"	4:14	4:16	4:16	4:22	6 OK

REMARKS Holes per plan

TYPE OF SOIL _____

TESTED BY MR ALSO PRESENT Mike Johnson

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

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