

Bruno - Freedom Septic



Howard County Health Department

# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_

AP 522541

AGENCY REVIEW: \_\_\_\_\_

DATE 6/17/05

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- REPAIR/ADD TO AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

- RESIDENTIAL WITH \_\_\_\_\_ PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE **UNKNOWN** IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) Renee Rundenza

DAYTIME PHONE 410 480 4909 CELL 410 952 2804 FAX \_\_\_\_\_

MAILING ADDRESS 2311 Daniels Rd Ellicott City Md 21043  
STREET CITY/TOWN STATE ZIP

APPLICANT Renee Rundenza

DAYTIME PHONE 410 480 4909 CELL 410 952 2804 FAX \_\_\_\_\_

MAILING ADDRESS 2311 Daniels Rd Ellicott City Md 21043  
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME \_\_\_\_\_ LOT NO. \_\_\_\_\_

PROPERTY ADDRESS Same  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 18 GRID 7 PARCEL(S) 106 PROPOSED LOT SIZE 1 AC

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT.

SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P (A)

1-1.5' Topsoil

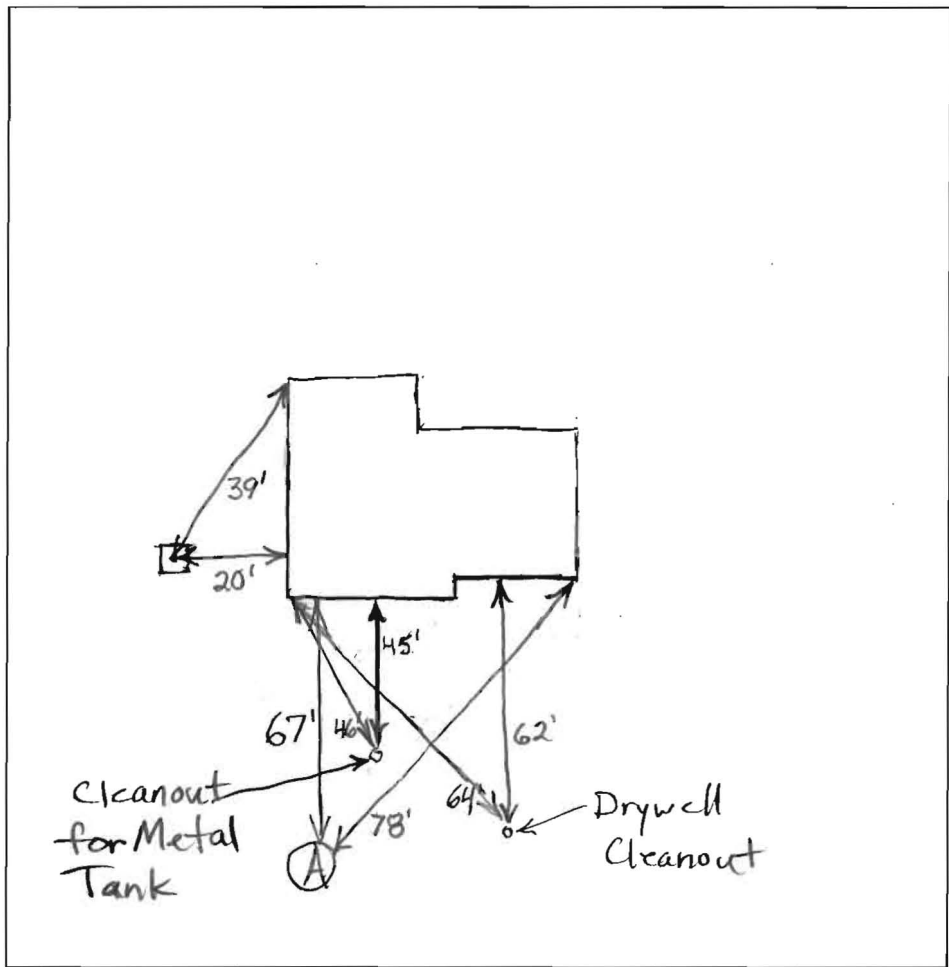
Red Br Sa Cl Loam

3' Trace Rock

Compacted Red Br Sa Loam - Some Saprolite

4-4.5' Tan Sa Loam ~10% Saprolite

15' Hard Bottom



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
6/27/05	A	4.5'/15'	11:14:30	11:22:30	11:40	17 1/2	P
		5.5'	11:44:30	11:46:15	11:48:45	2 1/2	P

REMARKS Next System Will Have to Be Pumped to Backyard

SANITARIAN B. Baker BACKHOE Freedom OTHERS Homeowners

TEST HOLES USED IN SDA A AVG. PERC TIME 10 SQ. FT/BR 210

TRENCH WIDTH 2' INLET DEPTH 3.5' MAX. BOT DEPTH 11' EFFECTIVE SW 7.5