



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

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

AP # 520864

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

DATE 9/3/2004

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) DANIEL MYUNG

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS 12020 ROUTE 99, MARRIOTTSTVILLE, MD 21104-1408  
STREET CITY/TOWN STATE ZIP

APPLICANT ROBERT W. ZOPP (CONSTRUCTION SERVICES)

DAYTIME PHONE 410-665-0240 CELL \_\_\_\_\_ FAX 410-665-7944

MAILING ADDRESS ORBITAN RD PARKVILLE, MD 21234  
STREET CITY/TOWN STATE ZIP

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

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

PROPERTY ADDRESS 12020 Route 99 MARRIOTTSTVILLE, MD 21104-1408  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 10 GRID 19 PARCEL(S) 19 = ~~PROPOSED~~ LOT SIZE 5.55 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 \_\_\_\_\_

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H

REMARKS \_\_\_\_\_

SANITARIAN \_\_\_\_\_ BACKHOE \_\_\_\_\_ OTHERS \_\_\_\_\_

TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_

TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE SW \_\_\_\_\_

AP (2)

Brown L  
4'

Red/Orange  
micas  
Sol  
4 1/2'

Brown/Orange  
Red  
micas  
Sl  
11'

Brown Sl  
w/ 20%  
Platt  
micas sol  
13'

(3)

Brown L  
11'

Red/Orange  
micas  
Sol  
4'

Red/Brown  
micas  
Sl w/ 10%  
Rack  
9 1/2'

Brown Sl  
w/ 35%  
Platt  
micas sol  
12'

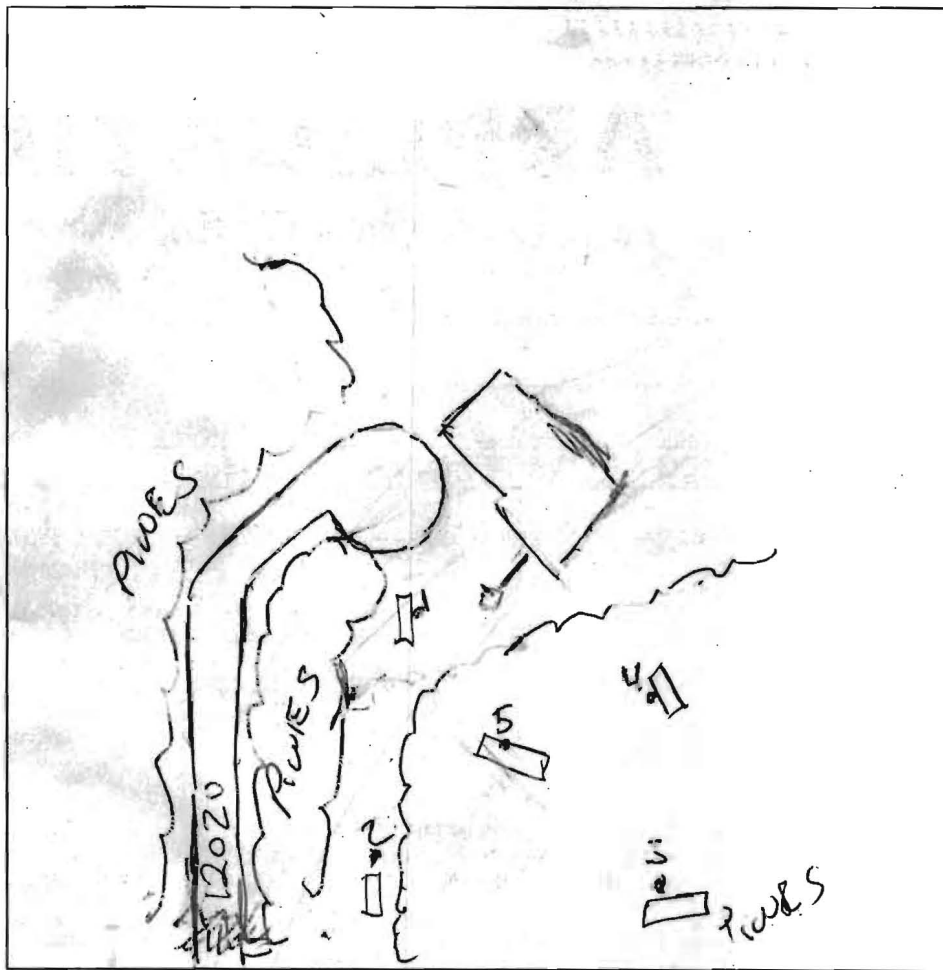
(4)

Brown L  
4'

Red/Brown  
micas  
Sol  
4'

Yellow/Orange  
Brown  
Sl w/ 10%  
Rack  
12'

Yellow/Brown  
Sl w/ 15%  
Rack  
HB



(1)

Brown L  
4'

Brown/Red  
Sol w/  
10% Rack  
4 1/2'

Red/Orange  
micas  
Sl w/  
trace Rack  
11'

Brown Sl  
w/ 10%  
saprolite  
13'

(5)

Brown L  
4'

Red/Orange  
Brown  
Sol  
4'

Brown/Red  
micas  
Sl w/  
trace  
4'

Yellow/Brown  
Sl -  
10% saprolite  
12'

Route 99

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
<del>10/14/09</del>							
10/14/09	2	6' / 13'	9:20	9:22	9:25	3 min	P
	3	5' / 12'	9:39	9:43	9:48	5 min	P
	4	5' / 12'	10:15	10:19	10:30	11 min	P
	1	6' / 13'	11:32	11:36	11:45	9 min	P
	5	14'	VISUAL			OK	P

REMARKS #5 moved, 10' off stake due to digwell

SANITARIAN K.B. / P.J. BACKHOE \_\_\_\_\_ OTHERS \_\_\_\_\_

TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_

TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE S/W \_\_\_\_\_



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_ A/P \_\_\_\_\_

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

TAX ID # 03-284220 DO NOT WRITE ABOVE THIS LINE

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

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- BUILD ON AN EXISTING LOT IN A SUBDIVISION
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IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

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- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

APPLICANT \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_ CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
STREET CITY/TOWN STATE ZIP

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

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

PROPERTY ADDRESS \_\_\_\_\_  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) \_\_\_\_\_ GRID \_\_\_\_\_ PARCEL(S) \_\_\_\_\_ PROPOSED LOT SIZE \_\_\_\_\_

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



3525 H Ellicott Mills Drive, Ellicott City, MD 21043  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

October 14, 2004

Mr. Myung  
12020 Route 99  
Mattiottsville, MD 21104-1408

RE: PERCOLATION TEST RESULTS-A520864  
Tax Map 10, Parcel 19  
Myung Property

Dear Mr. Myung:

Percolation testing conducted October 14, 2004 on the referenced property indicated satisfactory soil conditions. Copies of the test results are enclosed.

Further review is contingent upon submission by a registered engineer/surveyor of a percolation certification plan showing the following:

- 1) Actual locations and elevations of all excavated test holes
- 2) Existing house, well and septic system
- 3) Locations of any other relevant features such as streams, swales, or existing structures
- 4) A note must be included certifying that all existing wells and septic systems within 100 feet of Property boundaries have been shown
- 5) A note indicating that depicted topography reflects field-matched information
- 6) A health officer signature block stating "approved for private water and private sewer systems"
- 7) A MDE sewage disposal area statement is required
- 8) MDE minimum lot width statement
- 9) All neighboring well and septic systems show on the plan

The percolation certification plat should be submitted within 60 days to allow field verification if necessary. If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-1771.

Sincerely,



Kevin J. Bell  
Water and Septic Program  
Development Coordination Section

KJB  
Enclosures  
cc: Robert W. Zopp (Construction Services)  
File

EXISTING WELL (FIELD SURVEYED)  
NO TAG - FOUND

ELB2

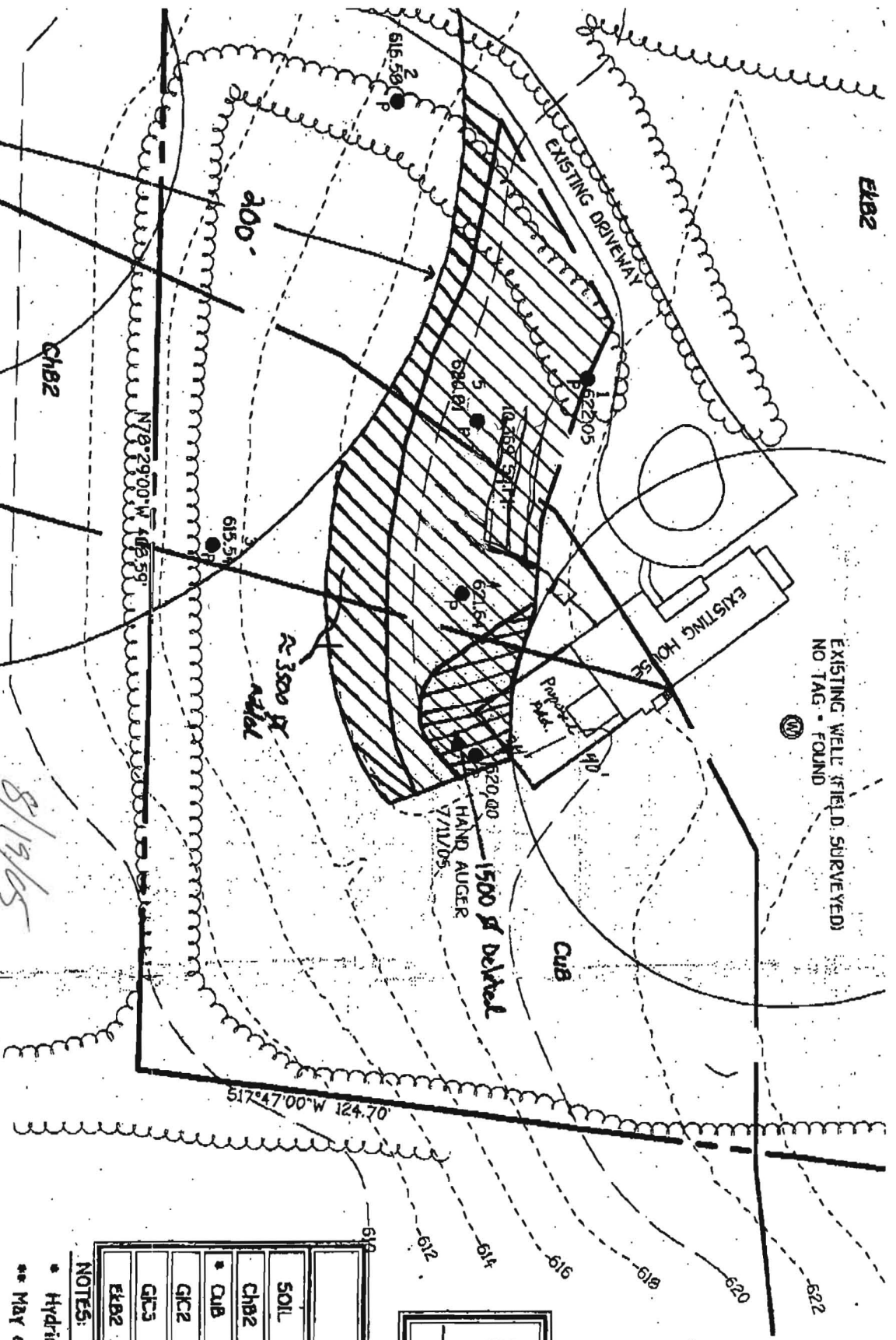
EXISTING WELL (FIELD SURVEYED)  
NO TAG - FOUND

**PERC CERTIFICATION OF MARY**

I certify that the test data shown hereon are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.

*7/12/05*

*8/19/05*  
*papers add ok*  
*upgrade complete PR*



APPROVED FOR  
 HOWARD COUNTY  
 COUNTY HEALTH

SOIL	
ChB2	Chester silt
CUB	Cornus silt k
GIC2	Glensly loam,
GIC3	Glensly loam,
ELB2	Eliot silt lo

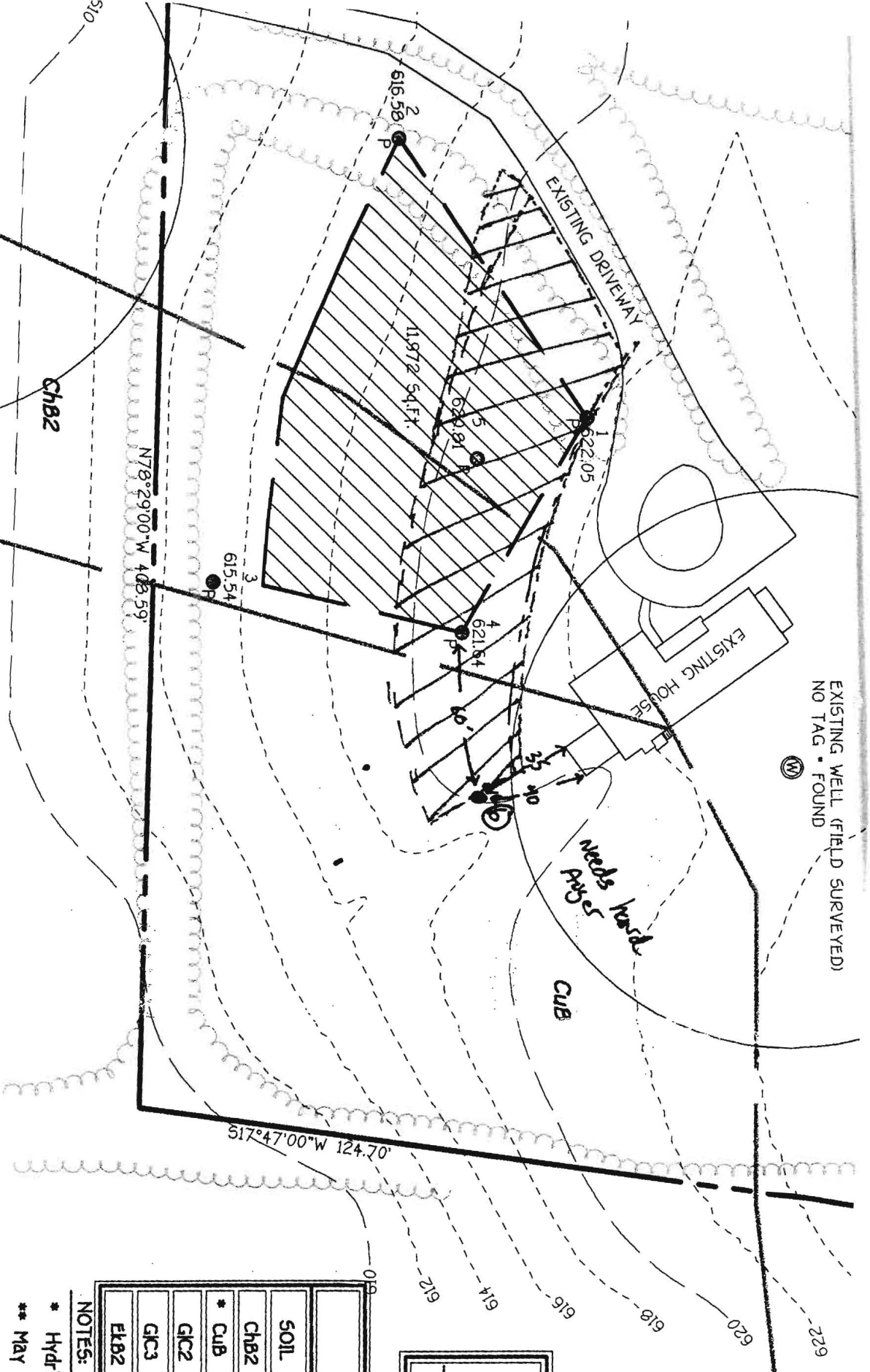
- NOTES:
- \* Hydric soils and/or
  - \*\* May contain hydric
  - † Generally only with

4. EX
5. OF
6. INF
7. AL
8. RE
9. AL
10. TH
11. TO
12. DE
13. SIC
14. TC
15. NI
16. NI
17. RU
18. BR
19. TH
20. DE

121

TAX MAP

EXISTING WELL (FIELD SURVEYED)  
NO TAG • FOUND



EXISTING WELL (FIELD SURVEYED)  
NO TAG • FOUND

**PERC CERTIFICATION**

I certify that the locations shown hereon are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.

Signature of Professional Land Surveyor

Date 7/7/65

- 5. ALL REGULATIONS
- 6. ALL THE TO F DELA SIGN
- 7. TOP INTEL RUN
- 8. BOL THE
- 9. DEC

APPROVED FOR P  
HOWARD COUNTY  
COUNTY HEALTH

SOIL	
ChB2	Chester silt
* CuB	Cornus silt l
GK2	Glenelg loam
GK3	Glenelg loam
EKB2	Eliok silt lo

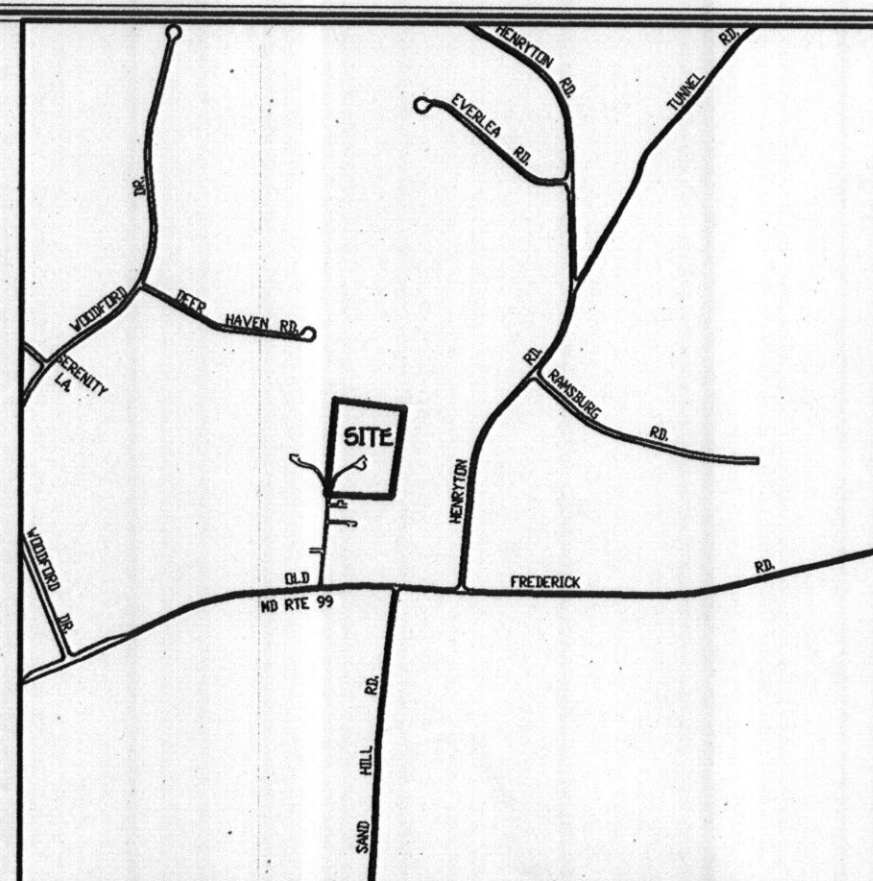
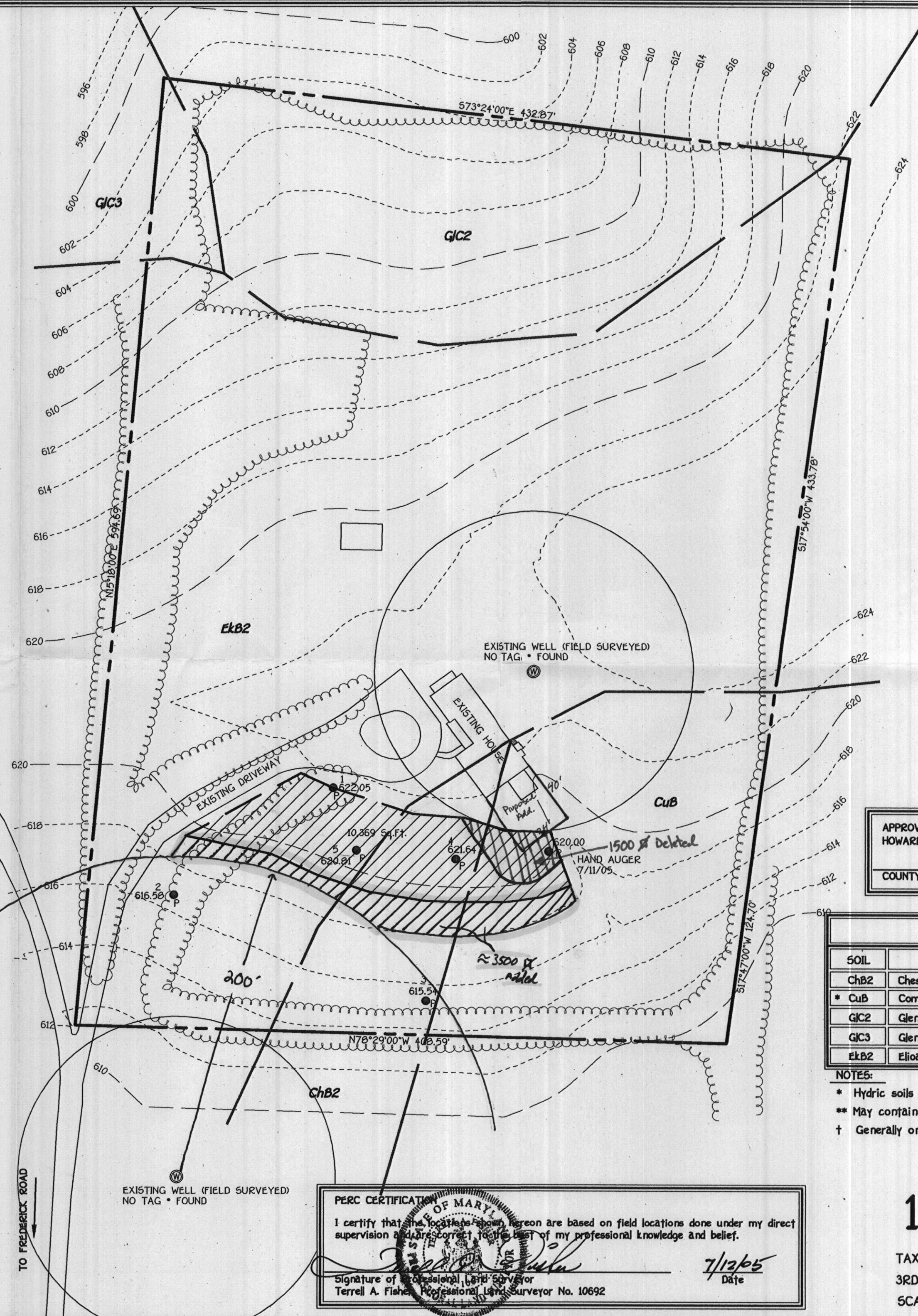
**NOTES:**

- \* Hydric soils and/or
- \*\* May contain hydric
- + Generally only with

TAX MAP  
3RD ELEC  
**12**

**LEGEND**

- - - - - EXISTING 2' CONTOURS
- - - - - EXISTING 10' CONTOURS
- ~~~~~ EXISTING TREE LINE
- GLB2  
MLC2 SOIL LINES AND TYPES
- DENOTES FAILED PERC
- DENOTES PASSED PERC
- DENOTES PROPOSED HOUSE
- DENOTES 25% AND GREATER SLOPE



**VICINITY MAP**  
SCALE : 1" = 1200'

**GENERAL NOTES:**

1. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.
2. ADJUSTMENTS TO SEPTIC EASEMENT AREA IS NOT PERMITTED WITHOUT ADDITIONAL TESTING.
3. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
4. EXISTING WELLS AND/OR SEWERAGE EASEMENTS WITHIN 100 FEET OF THE PROPERTY HAVE BEEN SHOWN FROM THE BEST AVAILABLE INFORMATION.
5. ALL HOUSE SITES SHOWN COMPLY WITH MINIMUM BUILDING RESTRICTION REGULATIONS.
6. ALL WELLS SHALL BE DRILLED PRIOR TO FINAL PLAT RECORDATION. IT IS THE DEVELOPER'S RESPONSIBILITY TO SCHEDULE THE WELL DRILLING PRIOR TO FINAL PLAT SUBMISSION. IT WILL NOT BE CONSIDERED "GOVERNMENT DELAY" IF THE WELL DRILLING HOLDS-UP THE HEALTH DEPARTMENT SIGNATURE OF THE RECORD PLAT.
7. TOPOGRAPHY SHOWN IS FROM HOWARD COUNTY GIS TOPOGRAPHY AT 5' CONTOUR INTERVAL INTERPOLATED FOR 2' CONTOUR INTERVAL WITH BLENDED IN FIELD RUN TOPO PER FISHER, COLLINS AND CARTER, INC ON JULY, 2005.
8. BOUNDARY OUTLINE BASED ON AVAILABLE DEED OF RECORD WITHOUT THE BENEFIT OF A FIELD SURVEY AT THIS TIME.
9. DEED REFERENCE LIBER 0244 FOLIO 202

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

COUNTY HEALTH OFFICER \_\_\_\_\_ DATE \_\_\_\_\_

**SOILS LEGEND**

SOIL	NAME	CLASS
ChB2	Chester silt loam, 3 to 8 percent slopes, moderately eroded	B
* CuB	Comus silt loam, local alluvium, 3 to 8 percent slopes	B
G/C2	Glenelg loam, 0 to 15 percent slopes, moderately eroded	B
G/C3	Glenelg loam, 0 to 15 percent slopes, severely eroded	B
EkB2	Elioak silt loam, 3 to 8 percent slopes, moderately eroded	B

- NOTES:
- \* Hydric soils and/or contains hydric inclusions
  - \*\* May contain hydric inclusions
  - † Generally only within 100-year floodplain areas

**PERC CERTIFICATION PLAT**  
**12020 ROUTE 99**

TAX MAP \*10 ZONED: RR-DEO PARCEL: 19  
3RD ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SCALE: 1" = 50' DATE: JULY 7, 2005  
REVISED DATE: JULY 12, 2005

**PERC CERTIFICATION OF MARYLAND**

I certify that the locations shown hereon are based on field locations done under my direct supervision and are correct to the best of my professional knowledge and belief.

Signature of Professional Land Surveyor: *Terrell A. Fisher*  
Terrell A. Fisher, Professional Land Surveyor No. 10692

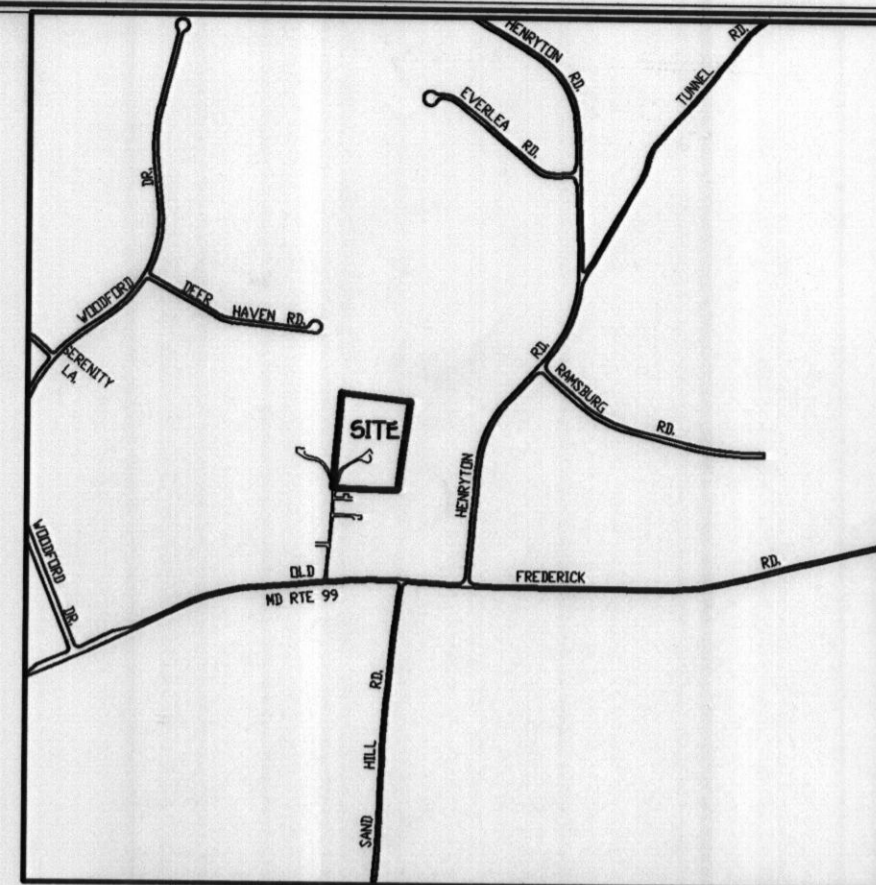
Date: 7/12/05

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTIMORE NATIONAL PIKE  
ELLICOTT CITY, MARYLAND 21042  
4101 461 - 2955

**LEGEND**

- - - - - EXISTING 2' CONTOURS
- - - - - EXISTING 10' CONTOURS
- ~~~~~ EXISTING TREE LINE
- GLB2  
MLC2 SOIL LINES AND TYPES
- DENOTES FAILED PERC
- DENOTES PASSED PERC
- ▭ DENOTES PROPOSED HOUSE
- DENOTES 25% AND GREATER SLOPE



**VICINITY MAP**  
SCALE : 1" = 1200'

**GENERAL NOTES:**

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HOWARD COUNTY HEALTH DEPARTMENT.

COUNTY HEALTH OFFICER \_\_\_\_\_ DATE \_\_\_\_\_

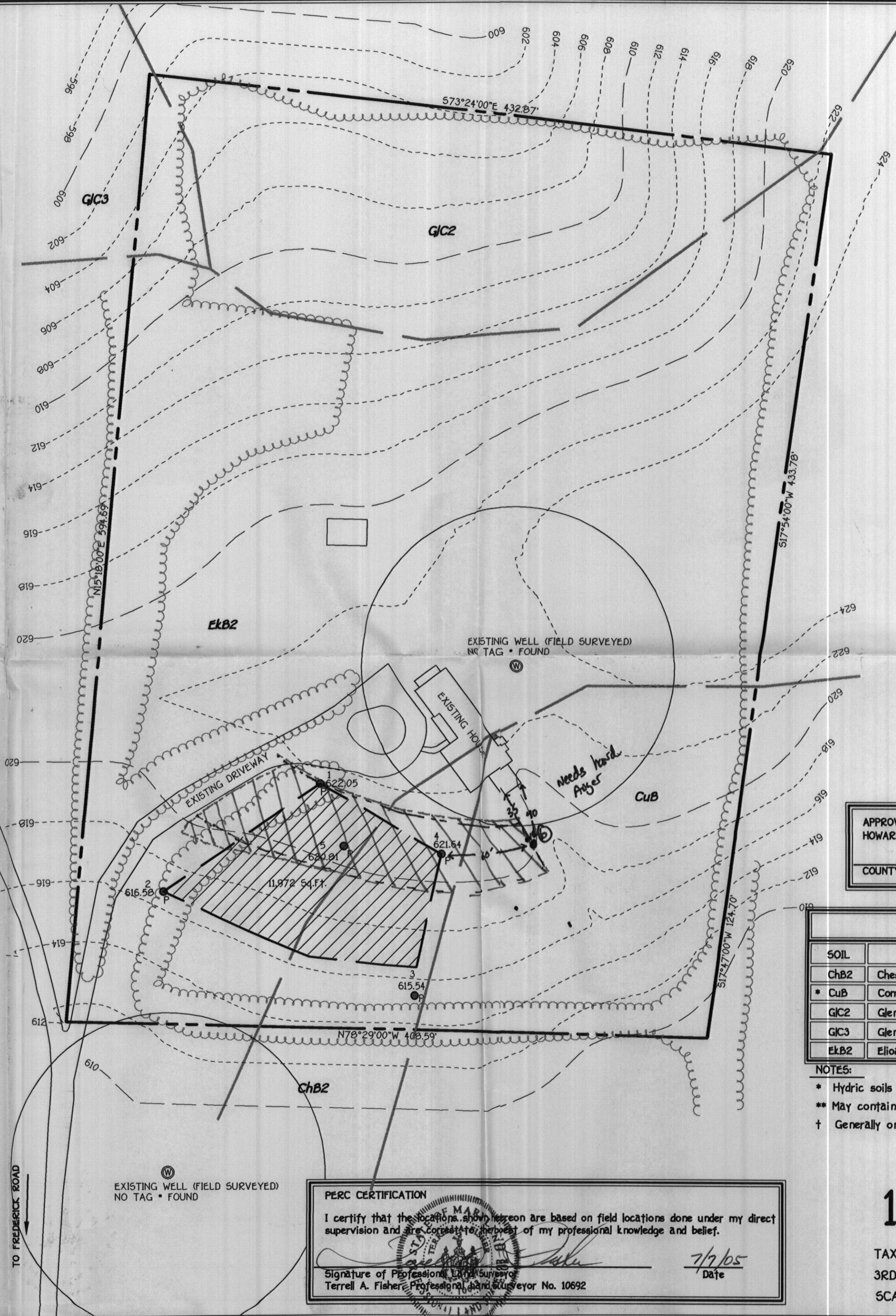
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Terrell A. Fisher, Professional Land Surveyor No. 10692

Date: 7/7/05

Called 7/12/05  
KRS

**FISHER, COLLINS & CARTER, INC.**  
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS

CENTENNIAL SQUARE OFFICE PARK - 10272 BALTORE NATIONAL PIKE  
ELLCOTT CITY, MARYLAND 21042  
PHONE: (410) 461-2255  
FAX: (410) 461-2255