



Howard County
Health Department

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 52082-B

AGENCY REVIEW: _____

DATE 3/5/04

DO NOT WRITE ABOVE THIS LINE

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 UNKNOWN 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) PRINCE FLORENCE UNDINE

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT Hailey Development c/o RICH THOMETZ

DAYTIME PHONE (301) 476-7715 CELL (301) 346-1037 FAX (301) 476-7717

MAILING ADDRESS 3905 NATIONAL DRIVE, SUITE 105, BURTONSVILLE MD. 20866
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME PRINCE PROPERTY LOT NO. 3

PROPERTY ADDRESS END OF HUNTERBROOKE LANE / HUNTFIELD DRIVE
STREET TOWN/POST OFFICE

AX MAP PAGE(S) 46 GRID 137 PARCEL(S) 104 PROPOSED LOT SIZE 3 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.

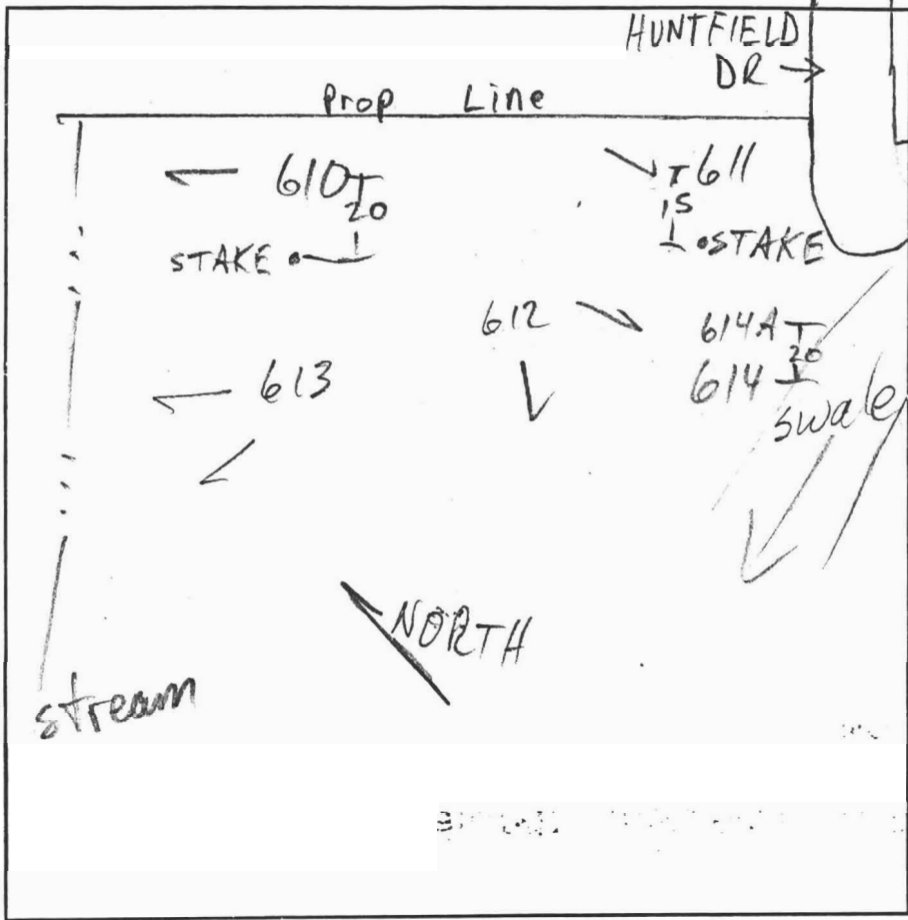
Zacharia G. Frisch (agent for Developer)
SIGNATURE OF APPLICANT

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

AP

614
 orge hv 4 lm
 2 1/2-3
 NW
 tan gray mi sand 1m
 10-20% frags
 ↑ w/depth
 H₂O seeping
 9
 12

5 1/2 SE



613
 orge hv 4 lm
 7-8
 tan lt. brn sa mi lm
 5% frags
 14

610
 orge red sacl lm
 3
 orge hv 4 lm
 4
 DN
 lt. brn tan gray sa lm
 10-15% frags
 14

611
 orge red sacl lm
 2
 orge hv 4 lm
 6-2
 25% frags
 14

614A
 orge hv 4 lm
 4
 tan lt. brn sa lm
 10% frags
 12
 12 1/2
 H₂O

612
 orge sa cl lm
 3
 orge hv 4 lm varying depths
 4 1/2
 7 1/2
 tan gray sa mi lm
 15-20% saprolite
 13

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
4/20/04	610 ^S V	5 14	10:37	10:42	10:48	6	P
	611 ^V	14					P
	612 ^M V	7 1/2 13	10:04	10:12	10:29	17	P
	613 ^V	14					P
	614 ^S V	4 3/4 12	9:55	9:59	10:06	7	P
	614 ^A V	12 9"					P

REMARKS ALL HOLES PER PLAN EXCEPT 614A
 SANITARIAN M. Ripkin BACKHOE K&K OTHERS Hailey Dev.
 TEST HOLES USED IN SDA ALL EXCEPT 614 AVG. PERC TIME 10 SQ. FT/BR 210
 TRENCH WIDTH 2 INLET DEPTH 4 MAX. BOT DEPTH 8 EFFECTIVE SW 1-2

