



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ AP 522021

AGENCY REVIEW: _____ DATE 3/10/2005
TAX ID # 04-332245

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) **Howard E. Schisler, II**

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS **740 Middletrail Court** **Mt. Airy** **MD** **21771**

STREET CITY/TOWN STATE ZIP

APPLICANT **Heritage Land Development**

DAYTIME PHONE **410-489-7900** CELL **410-984-0408** FAX **410-489-9768**

MAILING ADDRESS **3060 Washington Road, Suite 220** **Glenwood** **MD** **21738**

STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION

SUBDIVISION NAME _____ LOT NO. **15**

PROPERTY ADDRESS **Lot 15, Middletrail Court** **Mt. Airy**

STREET TOWN/POST OFFICE

TAX MAP PAGE(S) **2** GRID **23** PARCEL(S) **196** PROPOSED LOT SIZE **1.203 ac**

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWAGE 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.

Timothy W. Deagan
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 (2)

Brown
~
2'

Yellow/Brown
Silt
w/ 20% sspate
1'

Yellow/Brown
Sil w/
30% sspate
1'

Yellow/Brown
Sil w/ trace
Rock
13'

(1)

Brown
L
2'

Orange/Red
microm
Sil w/
20% sspate
3 1/2'

Brown/Red
Orange
microm Sil
w/ 15%
Sspate
10'

Yellow/Brown
Sil w/ 10%
Sspate
1'

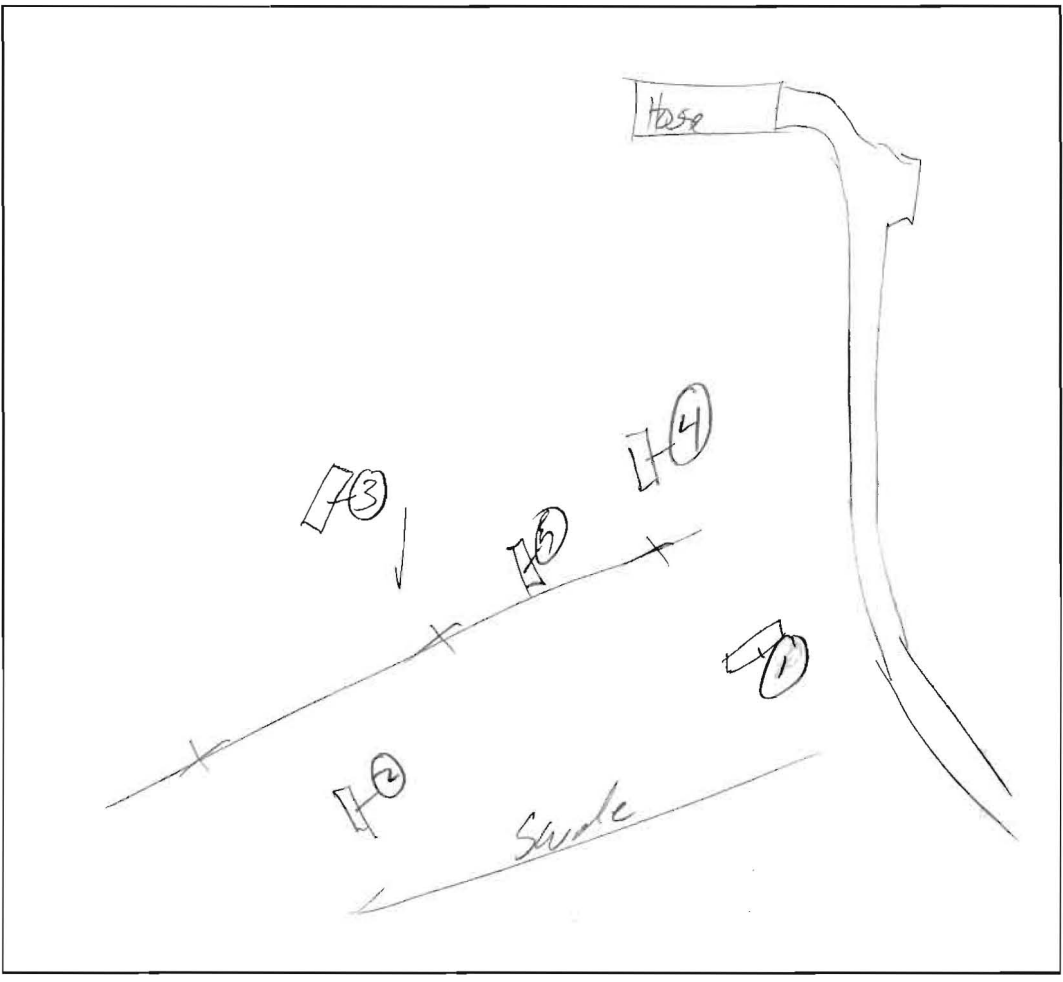
3

Brown L
1

Brown/Red
Orange
Silt w/
20% sspate
4'

Yellow/Brown
microm
Sil w/
20-25%
Sspate
9 1/2'

Yellow/Brown
Sil w/
10% sspate
13 1/2'



(4)

Brown
L
1'

Yellow/Brown
microm
Sil
2'

Yellow/Brown
Sil
3 1/2'

Yellow/Brown
microm
Sil w/
15% sspate
14'

(5)

Brown L
2'

Yellow/Brown
Red
Sil
5'

Purple/Brown
microm
Sil
w/ 20%
Sspate
10'

Brown/Yellow
Red
Sil w/
10%
Sspate
12'

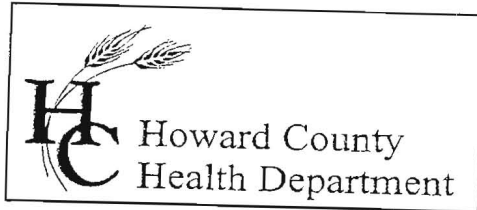
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
3/16/05	2	4' / 13'	1:37	1:42	1:50	8min	P
	1	3 1/2' / 14'	1:53	2:01	2:15	14min	P
	3	4 1/2' / 13 1/2'	2:07	2:10	2:14	4min	P
	4	4' / 14'	2:22	2:25	2:31	6min	P
	5	- / 12'	- Visual -			OK	P

REMARKS _____

SANITARIAN _____ BACKHOE _____ OTHERS _____

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

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____



7178 Columbia Gateway Drive, Columbia, MD 21046
(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
March 18, 2005

Heritage Land Development
3060 Washington Road, Suite 220
Glenwood MD 21738

RE: PERCOLATION TEST RESULTS – A522021
Tax Map 2, Parcel 196
Schisler Property

To Whom It My Concern:

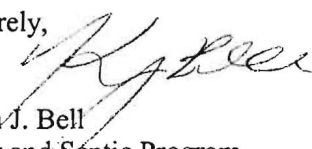
Percolation testing conducted March 16, 2005 on the referenced property indicated satisfactory soil conditions. Copies of the test results are enclosed.

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) Proposed 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

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: Howard E. Schisle, II
File

SYMBOL	MAPPING UNIT	SOILS	DEPTH TO WATER TABLE
GIB2	GLENELG LOAM, 3 TO 8 PERCENT SLOPES, MODERATELY ERODED		20+

PERCOLATION TEST RESULTS AS OBSERVED BY MRS. KACIE NOONAN ON JULY 1, 2002.

TEST NO.	DEPTH	RESULTS
PT1	7'7"	< 2 MIN.
PT2	4.5'/14'	11 MIN.
PT3	5.5'/12'	3 MIN.
PT4	14'	< 2 MIN.
PT4A	4.5'/7.5'	35 MIN./6 MIN.
PT5	4'7"	15 MIN.
PT6	14'	OBS. HOLE

AVERAGE PERCOLATION TIME = 15 MIN.
 INLET DEPTH = 5.5'
 TRENCH WIDTH = 3.0'
 MAXIMUM BOTTOM DEPTH = 7.5'

SEPTIC DESIGN: 4 BEDROOM HOUSE
 REQUIRED LENGTH OF TILE FIELD:
 210 S.F. PER BEDROOM/3 = 280 L.F.

INITIAL AND REPLACEMENT SYSTEMS:
 TRENCH LENGTH = 280 LF (3 TRENCHES @ 93.5 LF EA.)
 SEPTIC TANK SIZE: 1250 GAL.

LEGEND

- EXISTING GRADE
- APPROVED PERC TEST
- EXISTING UNDERGROUND UTILITIES
- FAILED PERC TEST WITH REQUIRED SEPARATION RADIUS PER HOWARD COUNTY HEALTH DEPARTMENT
- PROPOSED WELL LOCATION
- PROPOSED CONFIRMATION TEST HOLE TO BE INSPECTED BY HOWARD COUNTY HEALTH DEPARTMENT AT TIME OF SEPTIC LAYOUT
- PROPOSED SEPTIC & PUMP TANKS
- INITIAL SEWAGE DISPOSAL SYSTEM
- REPLACEMENT SEWAGE DISPOSAL SYSTEM
- PROP. SEWAGE DISPOSAL AREA

Approved for private water and private sewerage systems for lot 190.

[Signature] 6/14/02
 Howard County Health Officer Date

MARYLAND LAND DESIGN, INC.
 CONSULTING ENGINEERS AND LAND PLANNERS

2001 MEADOW DRIVE
 WESTMINSTER, MARYLAND 21158
 TELEPHONE: (410) 857-0210 FAX: (410) 840-0143

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REVISIONS

NO.	DATE	DESCRIPTION
1	6/8/02	PER HEALTH DEPT. COMMENTS

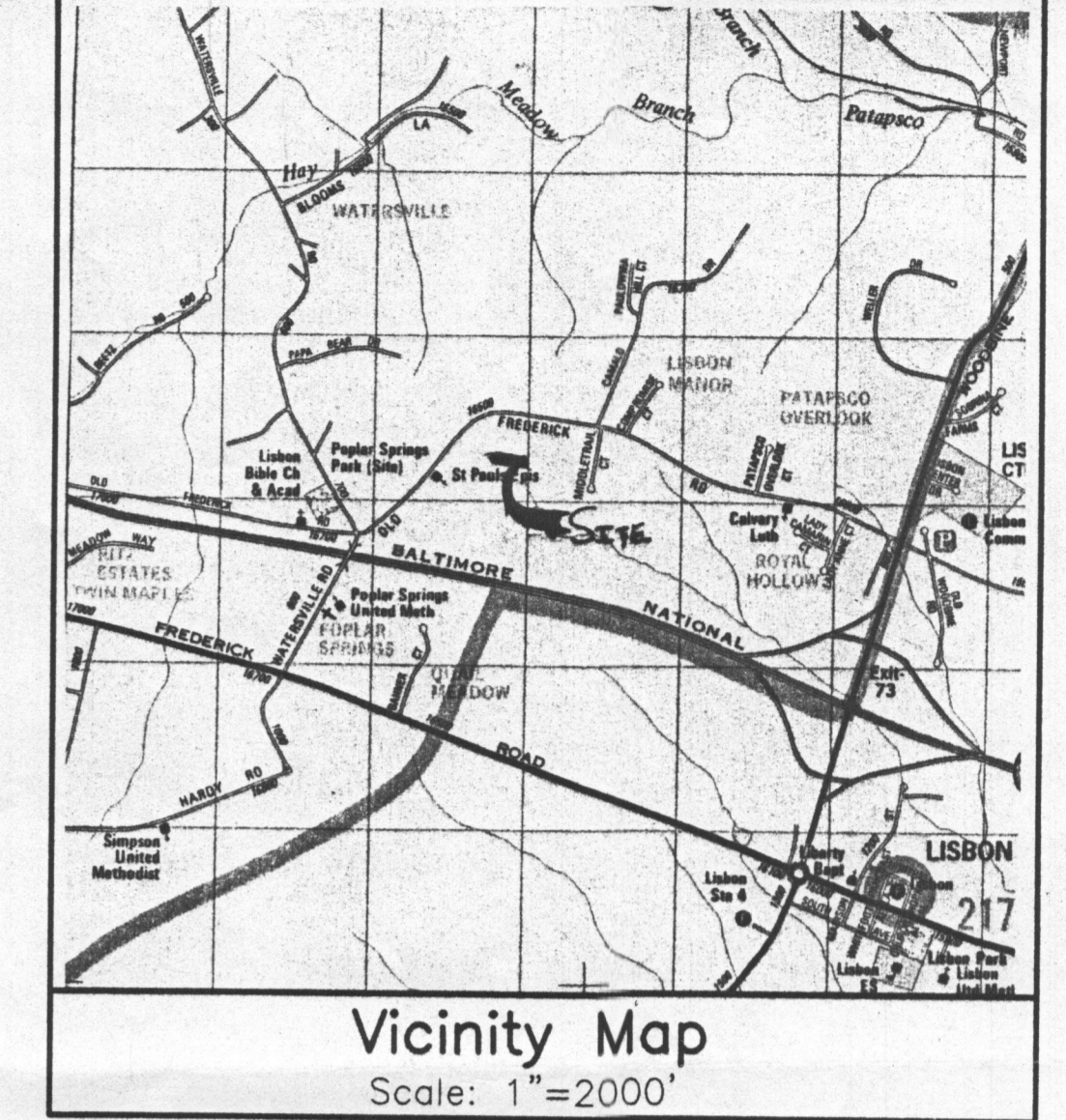
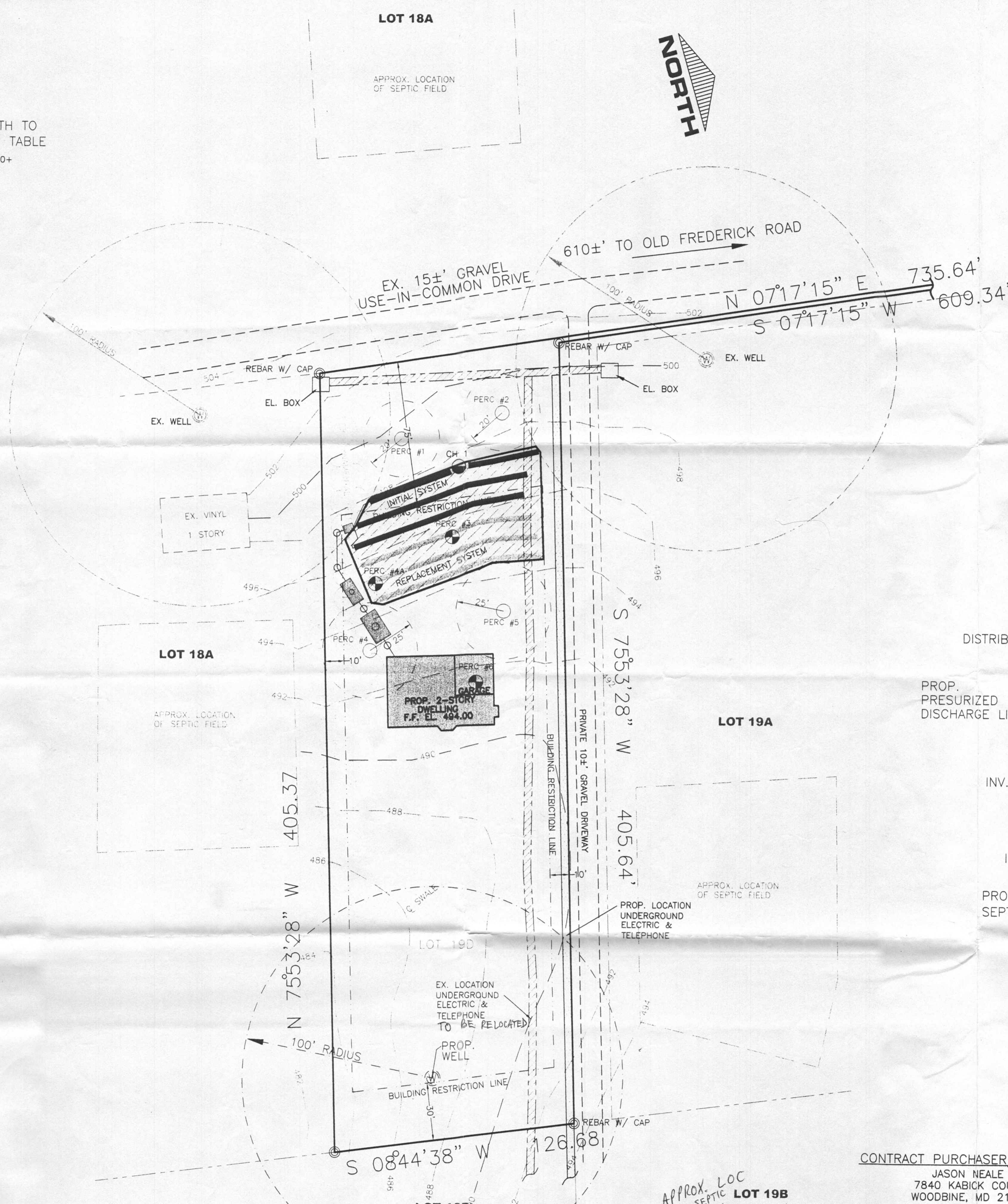
PLAN PREPARATION

DRAWN BY:	DWS	DATE:	1 JUNE 2002
DESIGNED BY:	DWS	FILE NO.:	2002-40
CHECKED BY:	DAB	DRAWING NO.:	

PERCOLATION TEST PLAN

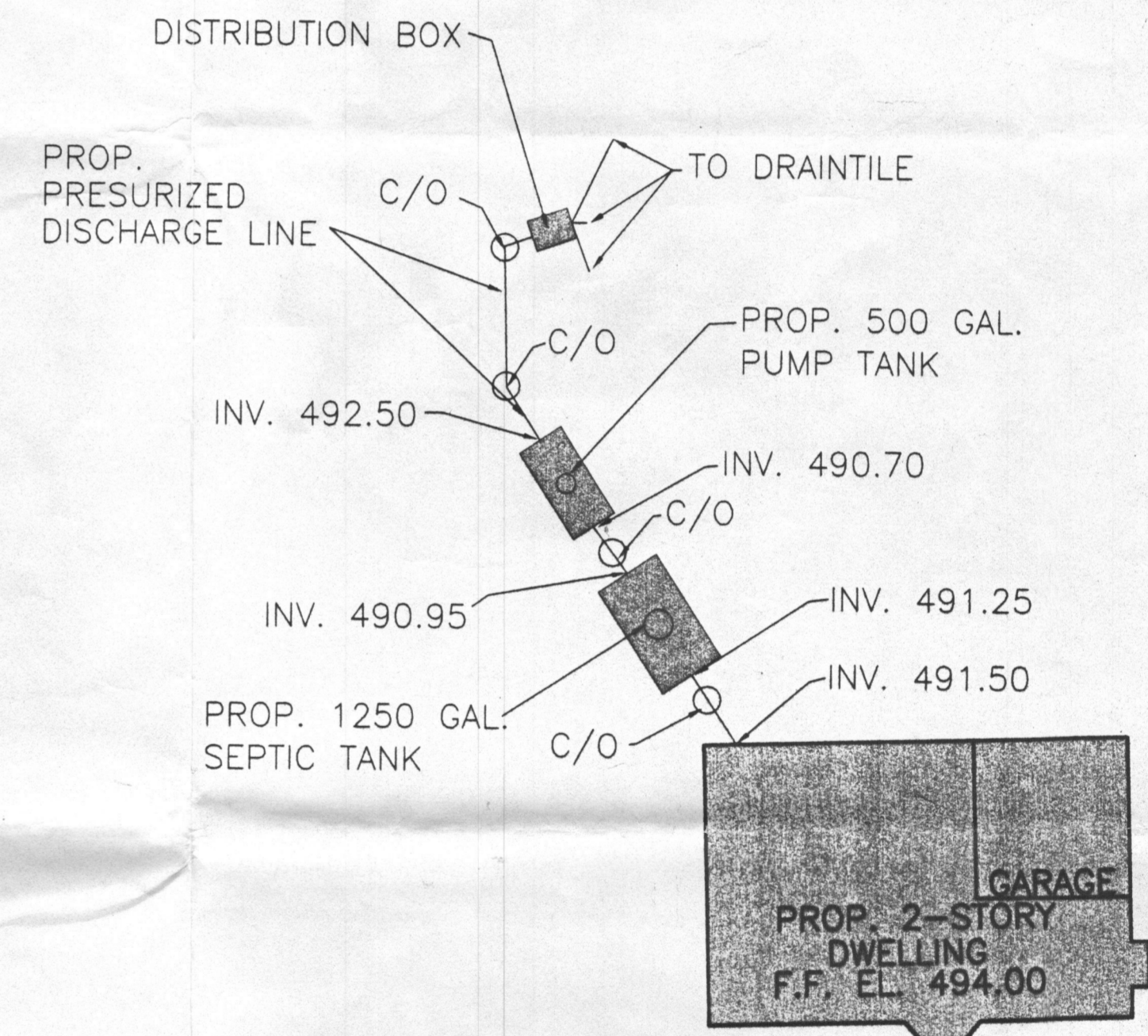
MIDDLE TRAIL FARMS
 LOT 19D
 TAX MAP 2, BLOCK 22, PARCEL NO. 165, LIBER 2196 FOLIO 431
 4th ELECTION DISTRICT, HOWARD COUNTY, MARYLAND

SCALE
 1" = 30'
SHEET NO.
 1 OF 1



GENERAL NOTES:

- THE ELEVATIONS SHOWN HEREON WERE ESTABLISHED FROM A FIELD SURVEY PERFORMED MAY, 2002 BY MARYLAND LAND DESIGN, INC., BASED ON ASSUMED DATUM.
- ALL WELLS AND SEPTIC SYSTEMS WITHIN 100 FEET OF ANY PROPERTY BOUNDARY ARE SHOWN HEREON.
- THIS AREA DESIGNATES A PRIVATE SEWAGE AREA AS REQUIRED BY THE MARYLAND DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNLESS PUBLIC SEWAGE BECOMES AVAILABLE. THE SEWAGE AREA SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE AREA.
- THE ENTIRE SITE IS COMPRISED OF THE GLENELG LOAM (GIB2) SOIL SERIES AS SHOWN IN THE SOIL SURVEY FOR HOWARD COUNTY, MARYLAND ISSUED JULY 1968.
- SEPTIC DESIGN: 4 BEDROOM HOUSE MAXIMUM
- LOT AREA = 1.214 ACRES
- EXISTING UNDERGROUND UTILITIES MUST BE RELOCATED, FIELD LOCATED, AND SHOWN ON THE WALL CHECK PLAN TO BE SUBMITTED TO THE HOWARD COUNTY HEALTH DEPARTMENT PRIOR TO ISSUANCE OF A SEWAGE SYSTEM PERMIT.



SEPTIC DESIGN DETAILS
 SCALE
 1" = 20'

CONTRACT PURCHASER/DEVELOPER:

JASON NEALE
 7840 KABICK COURT
 WOODBINE, MD 21797
 410-795-8877

OWNER:

JASON NEALE
 1620 OLD FREDERICK ROAD
 MOUNT AIRY, MD 21771

Signed Copy - Health Dept. File Copy

