

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____ A/P _____

AGENCY REVIEW: _____ DATE _____

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) _____

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 _____

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TEST RESULTS WILL BE MAILED TO APPLICANT. _____
SIGNATURE OF APPLICANT

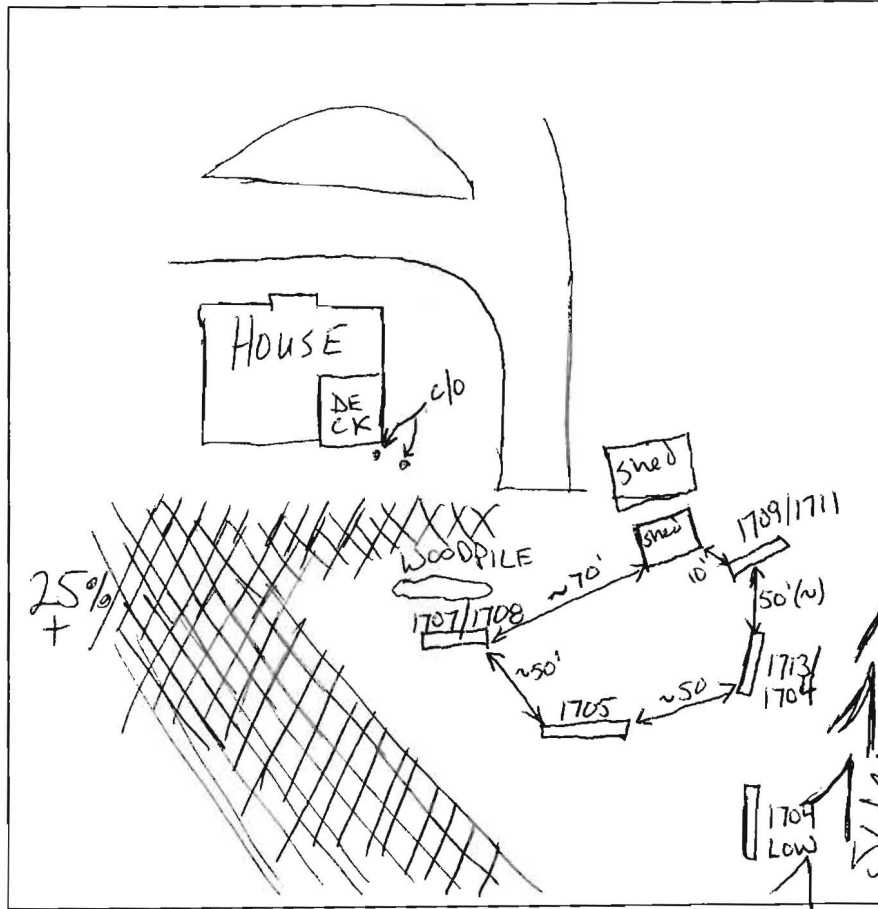
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM
7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

AP 525158

1704/1713

1709/1711
 10" Topsoil
 3' Light Red FSL
 4' Red Ctm
 15% cobbles
 Light Red FSL
 Weakly cemented w/weak yellow saprolite
 7' Yellow Brown Sa
 Single Grain
 11' Not A HARD Bottom
 1707/1708
 10" Topsoil
 2' Yellow Brown ctm
 5' Red Ctm Well formed Sub L Blocky Structure 15% cobbles
 7' Yellow Brown Fine loam
 Red Brown - Yellow Fine Sa lm
 Fine - coarse @ bottom
 12' Platy Rx 40%

1705
 6" Topsoil
 3' Strong Red Ctm
 Light Red - Yellow Brown Ctm
 5' Vein of grey saprolite
 Strong Red Sa
 7' Light Red Salty
 9' Yellow Brown Sa
 12'



10" Topsoil
 3' Strong Red Ctm
 5' Red Med Cemented FSL
 Yellow Brown Sa
 12'

1704 Low
 6" Topsoil
 3' Red Sa cl
 15% gravel
 3' Red Sa cl
 5' 25% cobbles
 Yellow Brown Sa
 25% cobbles - Boulders
 7% @ Bottom
 12'

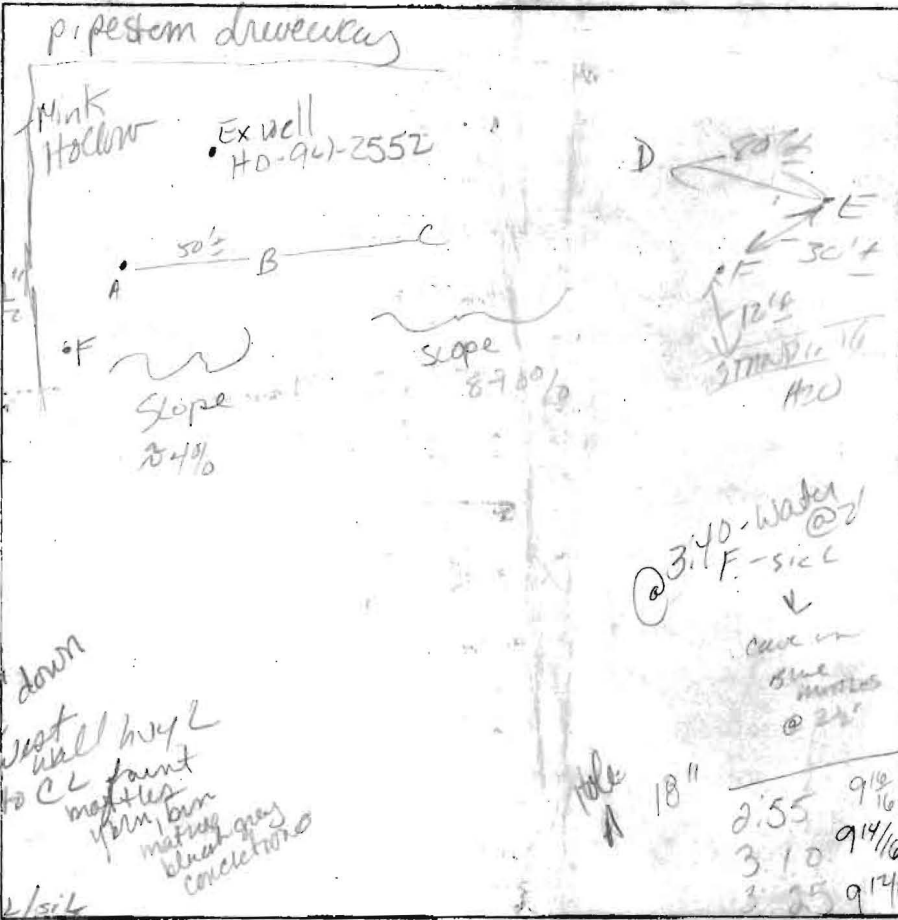
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
8/15/06	1709/1711	5'/11"	00:00	3:30	7:30	4m	P
	1707/1708	6'/12"	00:00	14:45	43:29	29m	P
	1705	5'/12"	00:00	10:30	40:30	Pulled Slow	H
		6'/12"	00:00	07:34	28:34	21m	P
	1704/1713	5'/12"	00:00	7:30m	Pulled	Slow	H
		7'/12"	00:00	4:00	16:00	6m	P
	1704 Low	5'/12"	00:00	3:30	11:30	8m	P

REMARKS 10000 sq' for existing House
 SANITARIAN GAC BACKHOE George OTHERS Mr Trivelli
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE S/W _____

Copy of original field notes

AIP (A)

wkrd brn
bk struct
hwy L
high Cl₂
diff thump out
Ribbons @ 1/4"
Prominent/
distinct
Mottles
@ 2 1/2"
water @ 4"



S-side
water @ 18"
Mottles
@ 18"
faint
20" distinct
H₂O in
@ 3"

(A)
Root mat
1 sbk, 3bk
hwy L
dk brn, wkrd brn
bluish
red, or
compact L
faint
Mottles 18"
@ 24" to
distinct
blue
matrix
Loam SL
bottom

12" down
west
well
hwy L
to CL
faint
mottles
brn
matrix
black grey
concretions

(A) 3.40 - water @ 2 1/2"
F-side
water @ 2 1/2"
water @ 2 1/2"

18"
2:55 9 10/16
3:10 9 14/16
3:25 9 14/16

(D) (E)
9
strbrn
sbk
Loam
brn pl
brn
moist
mud
distinct
mottles
orange
bole
concretions

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H	
4/28/06	A	Marginal to Fail						
	NO	NO	Surr. acceptable					
	(B)	Need Surr passing notes						
	(C)	Fail					F	
	(D)	SEE (E)						
	(E)	16"	1:55	5:10	9 10/16			
			2:10		9 10/16			
			2:25		9 5/16			
			2:40		8 16/16			
			3:05		8 8/16			

(B)
2sbk, bk
I pl
roots
to 13"
2 1/2" ubrn
dense
hwy L-CL
pockets Loam
@ 2 1/2" wkrd brn
@ 3" mottley
@ 4" water

REMARKS owner said H₂O @ 6" in March 06
SANITARIAN Kazic BACKHOE _____ OTHERS _____
TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

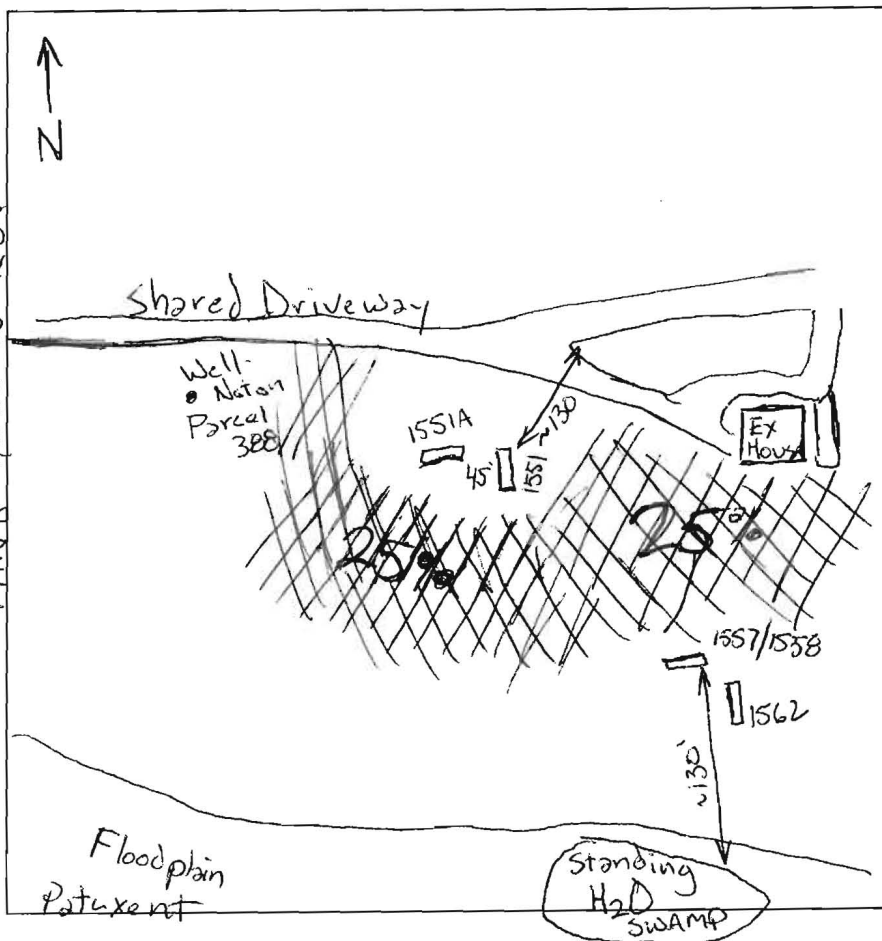
AVP 525158

1551
 10" Brown Lm
 Red Brown S&Cl
 2' Red Brown S&Cl 35%
 4' Cherty Fragg S&lm
 5' Dmg Brwn Grey Saprolite
 Red Brown S&lm
 6' Red/Grey (mottled?) Saprolites & S&lms
 8' HARD BOTTOM

1551A
 10" Brwn Lm
 Yellow Brown Clm
 3' Red Brown Clm
 7' Yellow Brown S&Cl
 30% Brwn vs s&pr.
 9' S&lm
 30% Saprolite

1557/1558
 10" Topsoil
 Brwn-Red Brwn Lm-Fine S&lm
 5% Rx Prismatic Structure
 8' Wet Red Brwn Lm
 8 1/2' Grey-green mottles
 9' Scapage
 H2O
 10 1/2'

MINK HOLLOW RD.



1562
 0 Red Brown Fine S&lm
 1' Red Brown Silm
 3.5' Yellow Brown Cl
 4.5' Grey-Yellow Brown mottles
 5.5' Water

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
7/21/06	1551	2 1/2 / 8	00:00	30M+		< 1" 30m	F
	1551A	6' / 11	00:00	30M+		< 1" 30m	F
	1557/1558	4' / 10 1/2	1:15	1:25	1:45	20m	Marginal Pass
	1562	5.5'	(V)	Mottles @ 4.5'			F

REMARKS Hole 1557/1558 between stakes - poor topographic position - toe slope Active Soils?

SANITARIAN GAC/RB/AT BACKHOE George OTHERS Mr. Trivelli

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TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

copy of original field notes



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MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT _____

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

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PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

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APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 524385

AGENCY REVIEW: _____

DATE 4/3/06

04-372364

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PROPERTY OWNER(S) EDWARD & KATHERINE TRIVELLI

DAYTIME PHONE 301 854 0495 CELL 240 417 6276 FAX 301 854 0487

MAILING ADDRESS 7491 MINK Hollow RD HIGHLAND MD 20777
STREET CITY/TOWN STATE ZIP

APPLICANT EDWARD TRIVELLI

DAYTIME PHONE 301 854 0495 CELL 240 417 6276 FAX 301 854 0487

MAILING ADDRESS 7491 MINK Hollow RD HIGHLAND MD 20777
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME _____ LOT NO. 3

PROPERTY ADDRESS 7491 MINK Hollow RD HIGHLAND, MD 20777
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 40 GRID 7 PARCEL(S) 227 PROPOSED LOT SIZE 13.826A

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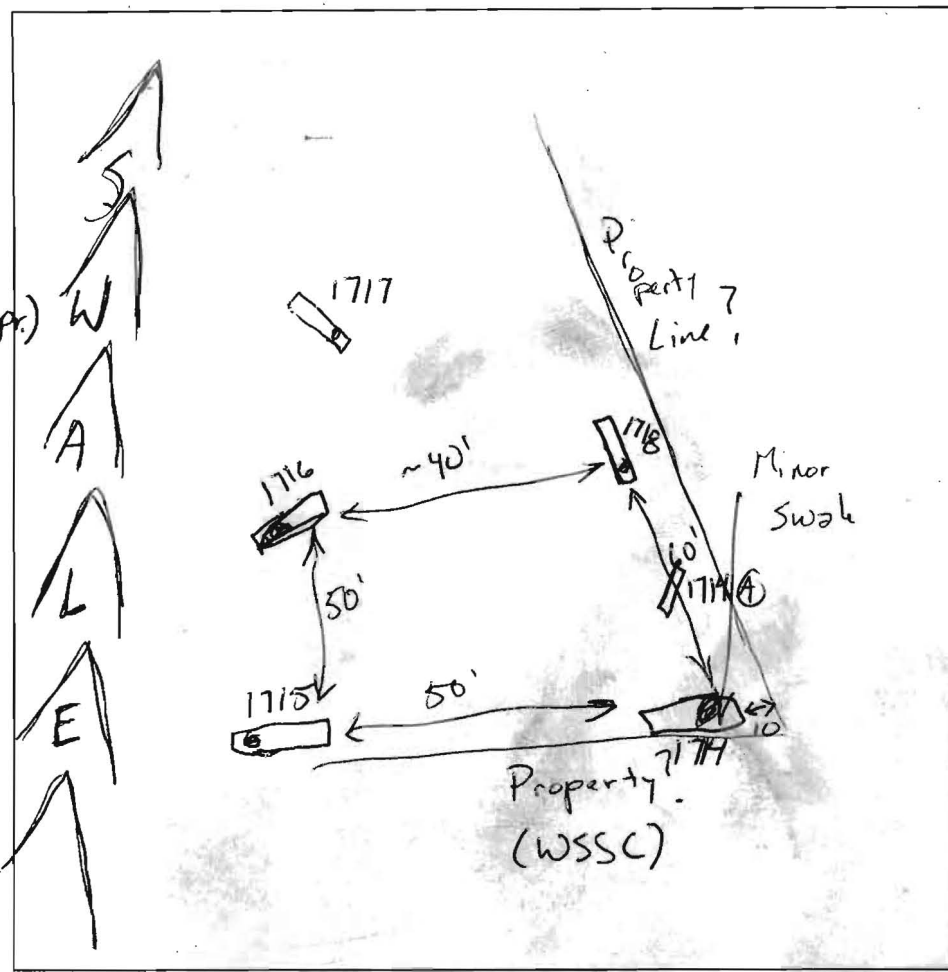
Edward Trivelli
SIGNATURE OF APPLICANT

A 518053

AP 1714
 0" Root Mat
 6" Yellow-Red Fine gr. Salm
 4" Yellow-Red WC Sandstone (sapr.)
 5" MICA
 Red-Yellow Brown Salm 30% Rx
 8" HARD BOTTOM

1718
 8" Fine Laminar Yellow Brown Fine Salm
 3" Red S&Cl
 5" Yellow-Red Brown Salm
 high side
 10' Mica vein

1714A
 Strong Red Clm - S&Cl
 6'
 Yellow Brown - Red Brown - Pink S&Cl



1715
 Topsoil
 Red Clm
 Red S&Cl 40% cobbles
 Yellow Brown S&Salm 35%+ Yellow Brown W/ Sapr.
 Flaggy Rx Bottom
 HARD BOTTOM

1716
 Yellow Brown Lm
 Yellow-Red Brown Clm
 Red Brown S&Cl
 Red/Clm w/ granulest white mottles
 Or Cl Prom. wh mottles
 Red Salm 25% cherty frags

1717
 Yellow Brown Lm
 Yellow Brn Lm 25% cobbles
 Red S&Cl cherty Mica Frags 55%
 Yellow Brown S&Salm 35% Flaggy Rx
 HARD BOTTOM

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
8/15/06	1714	8' (V)	(V)	7:50	1/2 Rx	< 8'	F
	1718	5 1/2 / 12	3:14	3:39	Pulled slow dig	1' deeper	
	1714A	12' (V)	(V)				P
	1718	7 / 12	0000	10:30 Reset 00	20:00	20m	P
8/16/06	1715	5 1/2 / 10 1/2	1:31		1:32		Re Pour (H)
	1715 Re pour	See above	0000	6:55	2:00	1:05	F
with 30m ??	1716	6 / 11	00	Pulled slow @	2m 2 1/4 in	1" deeper	
	1717	5' / 9'	00	10:00 Reset 00	30m	30m	MP
	1716	7 / 11	13:00	< 1" in	30m		F

REMARKS Holes Staked - impossible to tell property lines (assume)
 SANITARIAN GAC BACKHOE George? OTHERS Mr. Trivelli
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STREET CITY/TOWN STATE ZIP

APPLICANT _____

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME _____ LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE

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3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648
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