



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 536194

AGENCY REVIEW: _____

DATE 5-11-11

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 4 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) Bryan S. Kirk + Dawn J. Kirk

DAYTIME PHONE 410-489-0980 CELL 443-865-4451 FAX _____

MAILING ADDRESS 1715 Old Annapolis Rd. Woodbine MD 21797
STREET CITY/TOWN STATE ZIP

APPLICANT Bryan Kirk

DAYTIME PHONE 410-489-0980 (Home) CELL 443-865-4451* FAX _____

MAILING ADDRESS 1715 Old Annapolis Rd. Woodbine MD 21797
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME N/A LOT NO. _____

PROPERTY ADDRESS 1715 Old Annapolis Rd. Woodbine/Lisbon
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 7 GRID 20 PARCEL(S) 254 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.

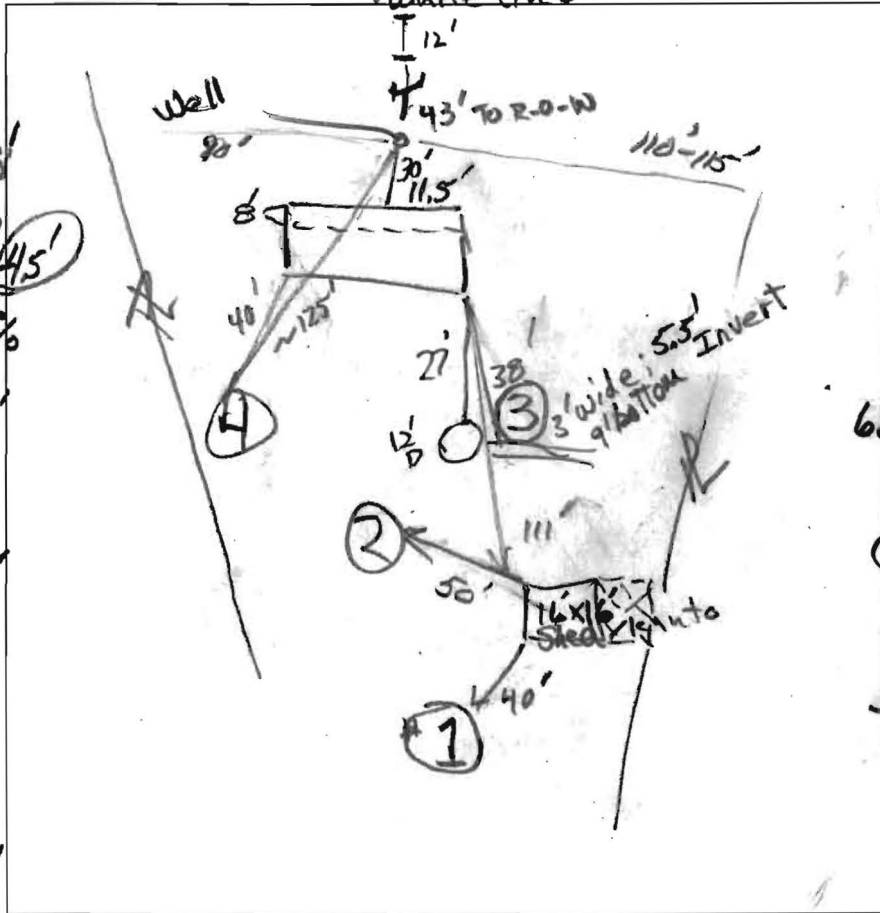
SIGNATURE OF APPLICANT

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

1715 Old Annapolis Road

1

AP



2
brn fl loam
brn loam slightly sticky
brn chg fl loam 30%
few boulders
brn fl bby loam 40%
R 10'

3
brn fl loam
brn loam
red-brn loam
brn fl loam few boulders
brn v fl loam 45%
brn x bby loam
R 25% R 95'

2' brn loam many rats
yel red vch loam w/ 20% flags & boulders
5.2' red-brn fl loam 25% flags
6.5' brn-yel & brn fl loam
9' few mica
brn vch fl loam 35%
12' brn v fl bby sandy loam
13' Hard 55-60% rock

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
6/7/11	1	12'	Visual	OK	2' to 8'	27	P
6/7/11	2	35' 10'	11:04	11:24	11:51	27	P
6/7/11	2	5' 10'	12:42	12:44	12:47	3	P
6/7/11	3	8'	Visual	>50% rock			F
6/7/11	4	3' 7.7'	2:12	2:23	2:30	15	P

4
1.4' brn fl loam
brn loam slightly sticky
2.0' brn ch loam
4.5' brn fl loam
6' brn v fl loam
7.7' R 40%

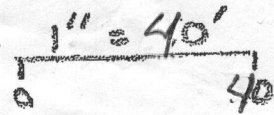
REMARKS Septic Tank INV OUT = -3.8'; Dry Well, 2' Dia, 4' to Conc Cap (8" thick), Solution 30" to Bottom
SANITARIAN RB BACKHOE J.R. Hatfield OTHERS Jeff
TEST HOLES USED IN SDA 1, 2 & 4 AVG. PERC TIME 3 min to 15 min SQ. FT/BR 125' to 187.5'
TRENCH WIDTH 3' INLET DEPTH 2' MAX. BOT DEPTH 35' to 8' EFFECTIVE SW 1.5' to 6'

Well; steel casing 9.5" soil-to-top; 2-pc. metal cap - not tight
conduit holds cap onto well casing; NO TAG

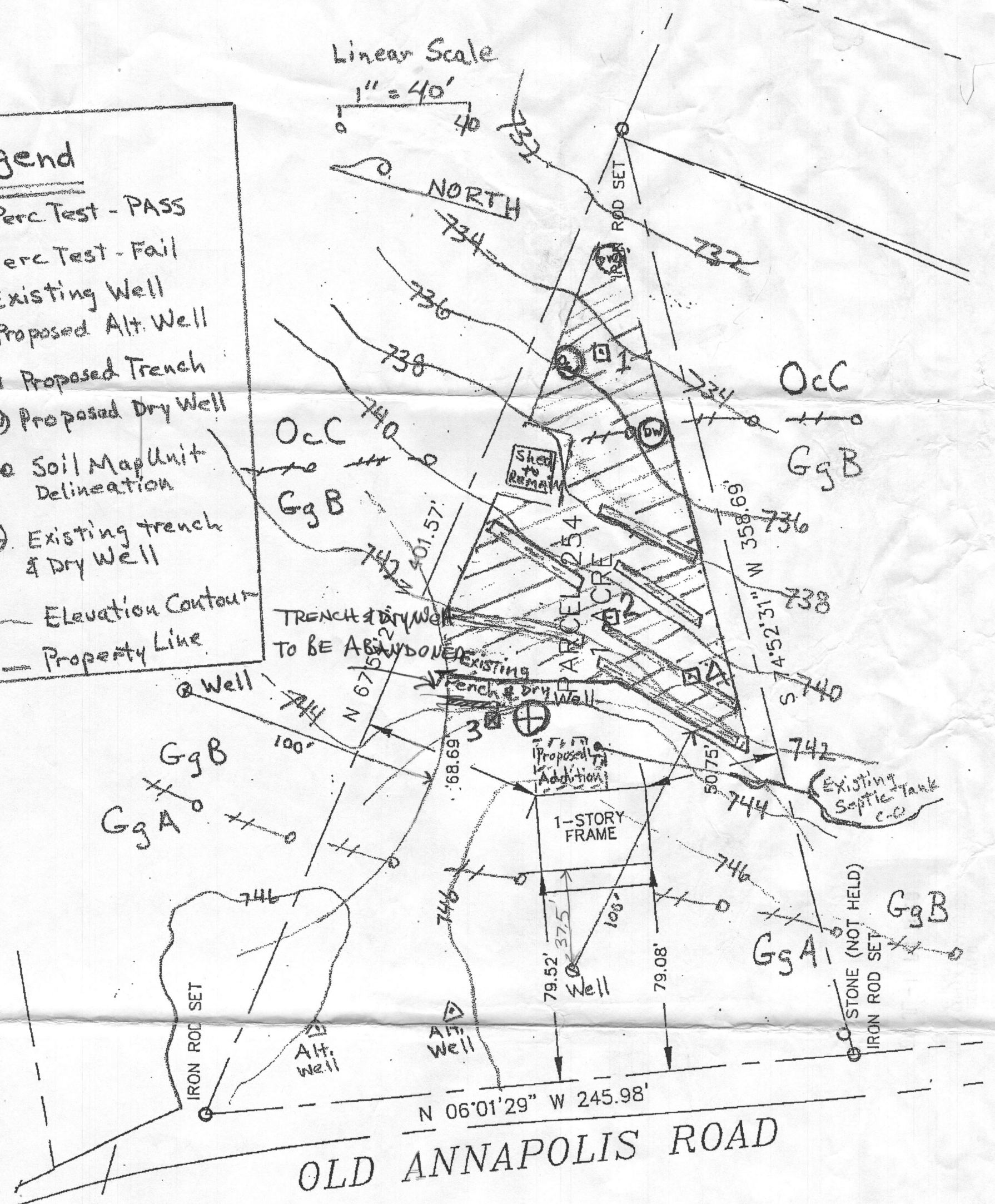
Legend

- Perc Test - PASS
- Perc Test - Fail
- Existing Well
- Proposed Alt. Well
- Proposed Trench
- Proposed Dry Well
- Soil Map Unit Delineation
- Existing trench & Dry Well
- Elevation Contour
- Property Line

Linear Scale



NORTH



THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT AS REQUIRED BY THE MARYLAND DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS EASEMENT ARE RESTRICTED. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO GRANT ADJUSTMENTS TO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A REVISED SEWAGE EASEMENT SHALL NOT BE NECESSARY.