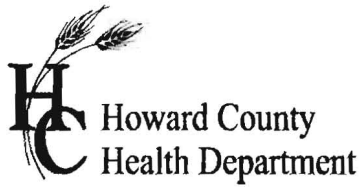


1767  
# 1309  
654.5



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

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

AP 527262

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

DATE 7/17/07

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

WE MAY NOT NEED TO DO ANYTHING TO EXISTING SEPTIC SYSTEM

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)

WE ARE ADDING 1 BR TO 3 BR'S, THEREFORE TOTAL BR'S WILL BE 4

PROPERTY OWNER(S) MARK MILLSTEIN & LINDA-LEE EARLE

DAYTIME PHONE 410-752-5930 CELL 443-722-2595 FAX 410-752-7676

MAILING ADDRESS 6980 MINK HOLLOW RD HIGHLAND MD 20777

APPLICANT same as owner

DAYTIME PHONE same CELL " FAX "

MAILING ADDRESS " " " " "

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

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

PROPERTY ADDRESS 6980 Mink Hollow Rd. Highland 20777

TAX MAP PAGE(S) 40 GRID 2 PARCEL(S) 05-364057 PROPOSED LOT SIZE 3 ACRES

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] SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
1718 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH



Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia, MD 21046-2147  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

August 2, 2007

Mark Millstein and Linda-Lee Earle  
6980 Mink Hollow Rd  
Highland, Maryland 20777

RE: PERCOLATION TEST RESULTS –  
A#527262  
6980 Mink Hollow Rd

Dear Sir and Madam,

Percolation testing conducted July 26, 2007 on the referenced property indicated satisfactory soil conditions. Copies of the test results are enclosed. In addition to the required percolation certification plan requirements described below, the current septic system must be upgraded to accommodate the proposed addition prior to building permit approval.

Further review is contingent upon submission of a percolation certification plan showing the following:

- 1) Actual locations of all excavated test holes
- 2) Existing house site, other structures, and driveway location
- 3) Existing property lines
- 4) Existing well locations and septic location.
- 5) Description of use and intent designated for existing structures and systems, e.g. 'to remain' or 'to remove.'
- 6) A note must be included certifying that all existing wells and septic systems within 200 feet of property boundaries have been shown
- 7) A note stating the engineer used all reasonable efforts to find the location of all surrounding wells and septic systems
- 8) Topography needs to be shown at 2 foot contour intervals and a note certifying it was from Howard County
- 9) MDE sewage disposal area statement
- 10) Include the statement, "Any changes to a private sewage easement shall require a revised percolation certification plan"
- 11) Legend symbols to distinguish between new holes, any existing holes previously documented (by the HCHD), passed holes, failed holes, and any holes held for future review
- 12) A health officer signature block stating "approved for private water and private sewer systems."
- 13) Signed statement that "I certify that the information shown heron is based on field work performed by me or under my direct supervision, and is correct, to the best of my knowledge and belief."
- 14) Identification of the property, road, street address if applicable, tax map page, parcel number, subdivision name (if appropriate); add purpose statement as appropriate, e.g. subdivision, SDA adjustment, percolation certification plan etc

- 15) Name, address and telephone number of each owner, developer and the plan author.
- 16) The date the plan was drawn, the plan scale (1:30 - 1:100), a scaled vicinity map and, the A # (percolation test fee receipt number, referenced in the HCHD correspondence)

If you have any questions regarding this matter, please contact me at the above address or by calling (410) 313-4261.

Sincerely,

Sara Fegel, R.S.  
Well and Septic Program  
Development Coordination Section

Enclosures





