

Bureau of Environmental Health

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Maura J. Rossman, M.D., Health Officer

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME Green Henge

PROPERTY ADDRESS 2877 Evergreen Way E. G. 21042

TAX ACCOUNT # 295737 TAX MAP 16 GRID 19 PARCEL 257 LOT NO. 28 PROPOSED LOT SIZE (ACRES) n/a

ZONING CATEGORY TIER

PROPERTY OWNER(S) Frank Lampieri

DAYTIME PHONE 410-493-0548 CELL EMAIL n/a

MAILING ADDRESS Same as above

APPLICANT Foster Septic Clean Inc RELATIONSHIP TO OWNER:

DAYTIME PHONE 410-795-5670 CELL EMAIL

MAILING ADDRESS 580 Obrecht Rd Sykesville, MD 21781

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S):

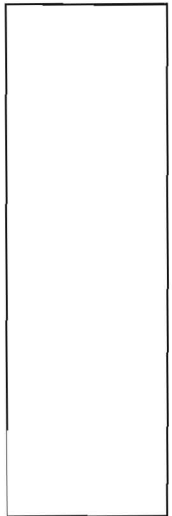
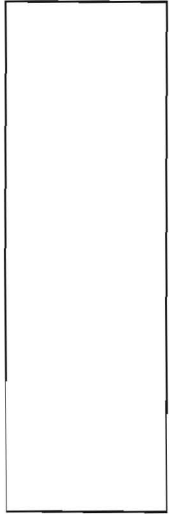
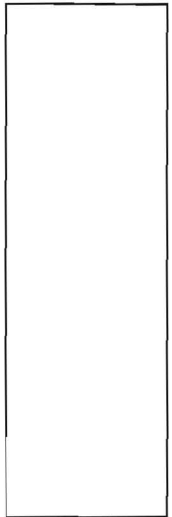
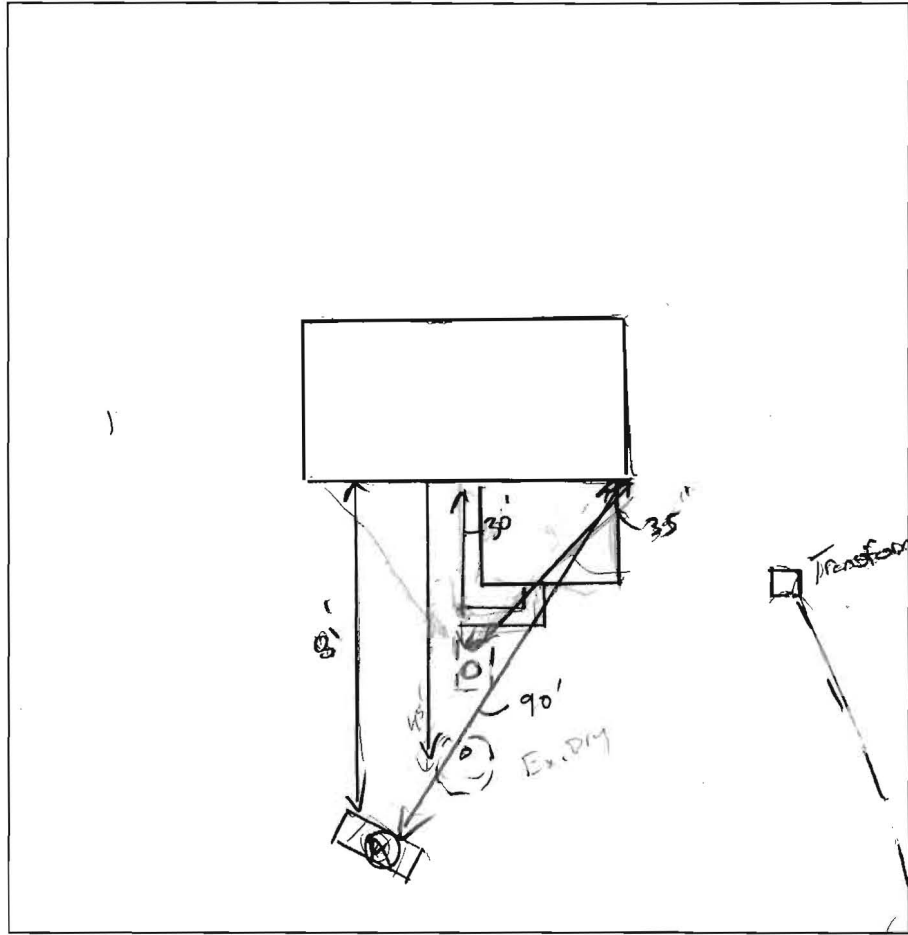
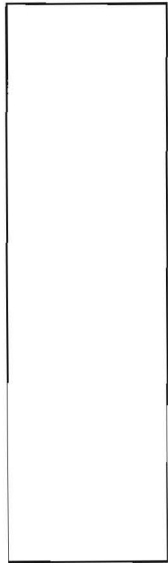
- PROPERTY: SUBDIVISION: NUMBER OF LOTS INCLUDING RESIDUE: SUBDIVISION CLASSIFICATION (PER DEPT. OF PLANNING AND ZONING) MAJOR MINOR CONSTRUCT NEW OSDS ON UNDEVELOPED LOT REPAIR OR REPLACE FAILING OSDS UPGRADE EXISTING OSDS BUILDING: RESIDENTIAL WITH 3 EXISTING OR PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE COMMERCIAL (PROVIDE DETAIL OF TYPE OF USE AND NUMBERS OF EMPLOYEES/CUSTOMERS ON ACCOMPANYING PLAN) IS THE PROPERTY WITHIN 2500 FEET OF ANY RESERVOIR? YES NO

- AS APPLICANT, I UNDERSTAND THE FOLLOWING: THIS APPLICATION IS VALID FOR TWO(2) YEARS FROM DATE OF FEE PAYMENT AND APPROVAL IS BASED UPON HEALTH OFFICER SIGNATURE OF A PERC CERTIFICATION PLAN PRIOR TO EXPIRATION OF THIS PERMIT. THE APPLICATION FEE IS NON-REFUNDABLE THIS APPLICATION MUST BE ACCOMPANIED BY ALL APPLICABLE FEES AND A SUITABLE SITE PLAN IN ORDER TO BE PROCESSED THIS IS A PUBLIC DOCUMENT

I declare and affirm that to the best of my knowledge, the information contained herein is correct. I declare that I am the owner of the property or duly authorized to make this application on behalf of the owner. I agree to comply with all applicable state and county regulations.

By signature of this application, I hereby grant Howard County Health Department officials the right to enter onto the property for the purpose of inspecting the property as directly related to the requested permit/service.

SIGNATURE OF APPLICANT DATE 3/1/17



(A)  
 Br/Y CL  
 w SBK, Fw  
 DY,  
 2'  
 Br/Y/Red  
 Frable, dy  
 w SBK, roots  
 10% chert  
 4'  
 Y/Br. FSL  
 Frable,  
 w pl,  
 Hg/L  
 micaceous,  
 5% chert  
 ↓ consistent  
 uniform  
 below  
 5'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
3/10/17	(A)	5' 14'	00:58 (00:00)	01:01 03:00	01:04 06:00	3	A
	repair	5'	00:00	03:00			
		14'				2 top	OK

REMARKS 3-8' inside eff. CH-6 (3-9) = 70LF

SANITARIAN Kindle BACKHOE Reky OTHERS \_\_\_\_\_

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

TRENCH WIDTH 21 INLET DEPTH 3 MAX. BOT DEPTH 8 EFFECTIVE S/W 4

