



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 unknown 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) Robert Williams

DAYTIME PHONE 410 465 5366 CELL _____ FAX _____

MAILING ADDRESS 13110 GREENBERRY LANE CLARKSVILLE MD 21029
STREET CITY/TOWN STATE ZIP

APPLICANT MILDENBERG, BOENDER & ASSOC., INC.

DAYTIME PHONE 410 997 0296 CELL 1 FAX 410 997 0298

MAILING ADDRESS 6800 Deerpath Rd Elkridge, MD 21075
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME GREENBERRY LOT NO. 10

PROPERTY ADDRESS 13110 GREENBERRY LANE CLARKSVILLE MD 21029
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 28 GRID _____ PARCEL(S) 48 PROPOSED LOT SIZE 1A±

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.

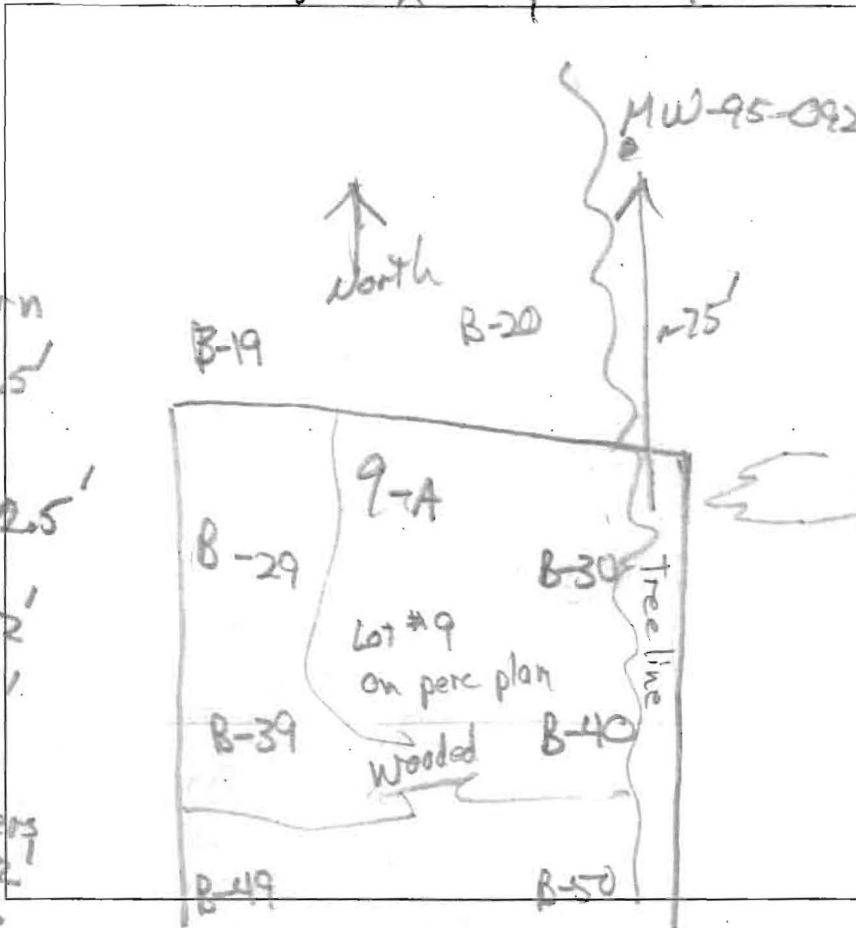
SIGNATURE OF APPLICANT

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

Greenberry lot 9

AVP _____

9-A
 dk grey-brn
 L. 2 cpl
 0.5'
 yel-brn cl
 2msbk
 few gravel
 2.5'
 brn grl
 1msbk
 4.2'
 yel-red L
 @ m
 5'
 yel-red sl
 many mica
 few channers
 8.2'
 brn chls
 micaceous
 9.8'
 yel-brn ls
 micaceous
 few Mn coats
 12'



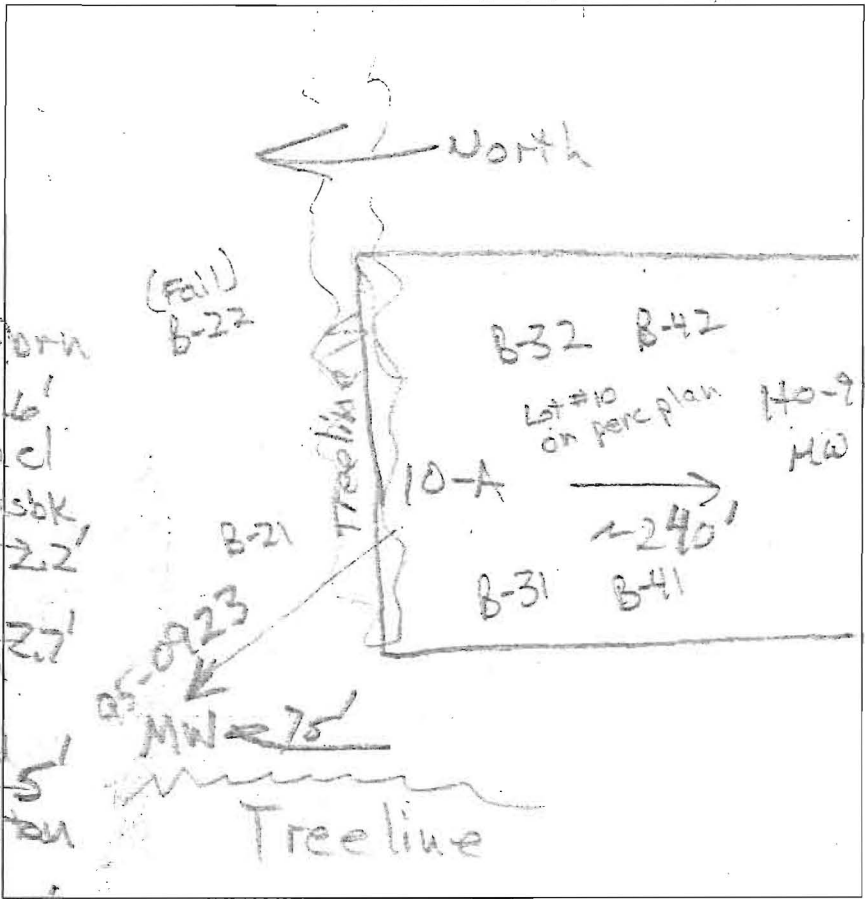
DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	PIF/H
11/2/12	9-A	12'	Visual		5' to 8' 0.89 gpd/ft P		

REMARKS _____
 SANITARIAN RB BACKHOE JSA OTHERS Jacob Hikmat
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

Greenberry lot 10

A/P

10-A
 dk. gray-brn
 L, 8m 0.6'
 pale yel-brn cl
 2 csbk to 2 csbk 2.2'
 brn L
 1 w/sbk 2.2'
 brn L, 8m 2.7'
 w/yel-brn sl
 interlayered 5'
 red, blk
 Ls mainly mica 6.3'
 red, blk
 & lg grey
 Ls micaceous 10'
 red Ls
 2 mpl
 manu. concret
 few clasts
 12'



DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
11/2/12	10-A	12'	Visual		5' to 8' 1.25	OK ad/03	P

REMARKS _____
 SANITARIAN RB BACKHOE JJA OTHERS Jacob H. Kmet
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

MATCHLINE SHEET

UN-BUILDABLE 'B'
PRESERVATION PARCEL 'B'
6.63 Ac



*copy cert
signed 7/20/15*

ABANDONED
MONITORING
WELL #2
PERMIT #
HO-95-0922

ABANDONED
MONITORING
WELL #4
PERMIT #
HO-95-0924

CATHERINE
PUBLIC - 50' R/W

MICRO-BIORETE
FACILITY

651-D

651-D

651-D

454

455

452

453

454

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