

APPLICATION

PERCOLATION TESTING

A 50036U

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 5/18/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Clarksville Pike ^{CORNERSTONE ARMES, Inc} Joint Venture

ADDRESS C/O Land Design + Development Inc
10805 Hickory Ridge Rd Col Md 21044 PHONE 740-2100

AGENT OR PROSPECTIVE BUYER Mark Reich

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Windy knolls LOT NO. 20 17

ROAD AND DESCRIPTION West side of Clarksville Pike (Rt. 108)
(6444 Prestwick Drive)

TAX MAP 34 PARCEL # 84+134

SIZE OF LOT 1 + or - acres TYPE BLDG. _____
BLDG. PERMIT SIGNED
AND RETURNED 8/8/96
APPL # B 10 1496
SFD - 4/8/96
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Mark Reich
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

50036 U

COUNTY #

SOIL PROFILE

0' (1) (2)
 tan
 sa
 cl / m

2' tan
 beige
 sand
 ↓
 sa / m

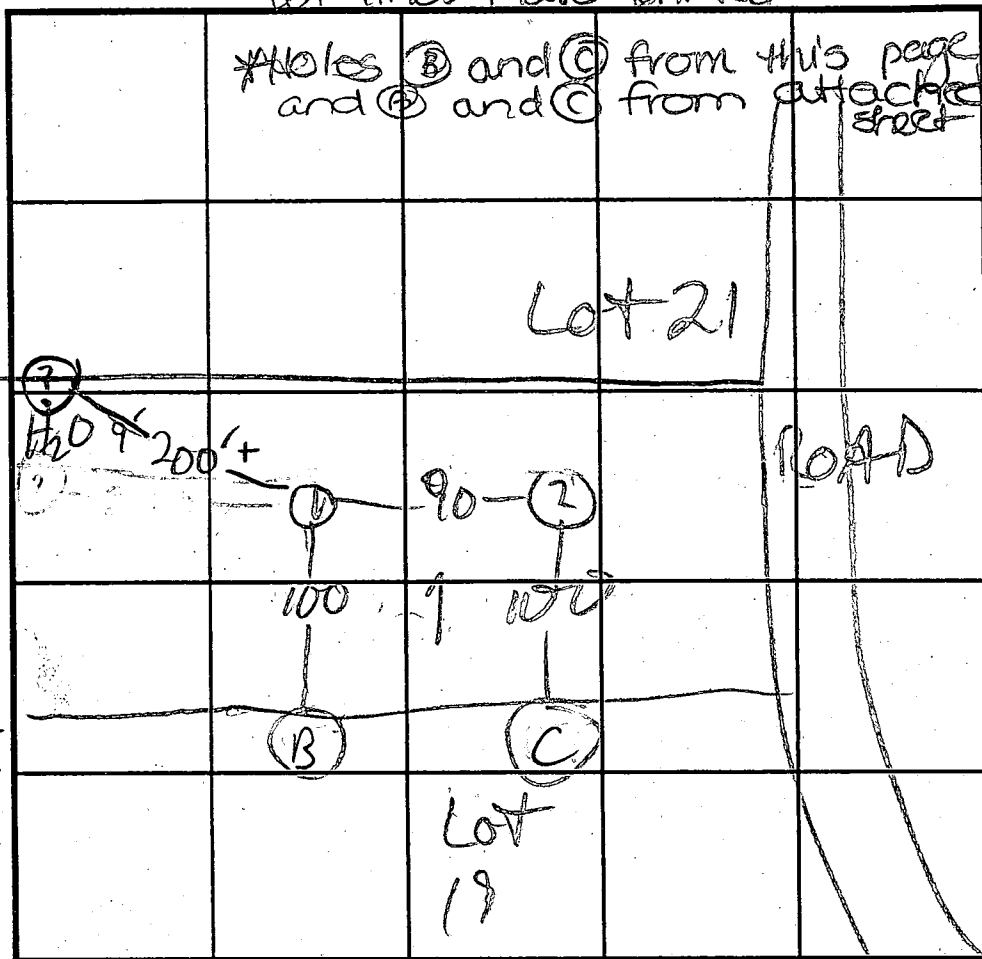
10' (B) (C) per
 DKS
 topsoil
 1' red br
 cl / m

3' br tan
 sa / m

12-13

lot lines have shifted

*Holes (B) and (C) from this page
and (B) and (C) from attached sheet



SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
5/27/94	1S	3 1/2	11:53:00	11:54:30	11:54:30	11:55:35	FAST FAST	
	1S	3 1/2	11:55:15	11:56:00	11:56:00	11:56:40	40 sec	
	1V	10 1/2	11:57:10	11:57:45	11:57:45	11:58:30	45 sec	
	2S	4 1/2	12:03:50	12:04:25	12:04:25	12:06:50	2 1/2 min	
	2V	10 1/2	see profile					
5/25/94	BS	4	11:42	11:48	11:48	11:59	11	
	DKS BV	13	see profile					
	CV	12	see profile					
	C							

REMARKS (1) (B) (C) PER PLAN

TYPE OF SOIL

TESTED BY M. Ripkin

ALSO PRESENT OK Jr

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4

TRENCH WIDTH 3

INLET DEPTH 3

MAXIMUM BOTTOM DEPTH 5

SQ. FT/BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 50036T

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 5/18/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Clarksville Pike Joint Venture

ADDRESS C/O Land Design + Development Inc
10805 Hickory Ridge Rd Col Md 21044 PHONE 740-2100

AGENT OR PROSPECTIVE BUYER Mark Reich

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Windy knolls LOT NO. 19 18

ROAD AND DESCRIPTION West side of Clarksville Pike (Rt 108)

TAX MAP 34 PARCEL # 84+134

SIZE OF LOT 1 + or - acres TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Mark Reich
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

500367
COUNTY #

SOIL PROFILE

0'
1'
3'
13'

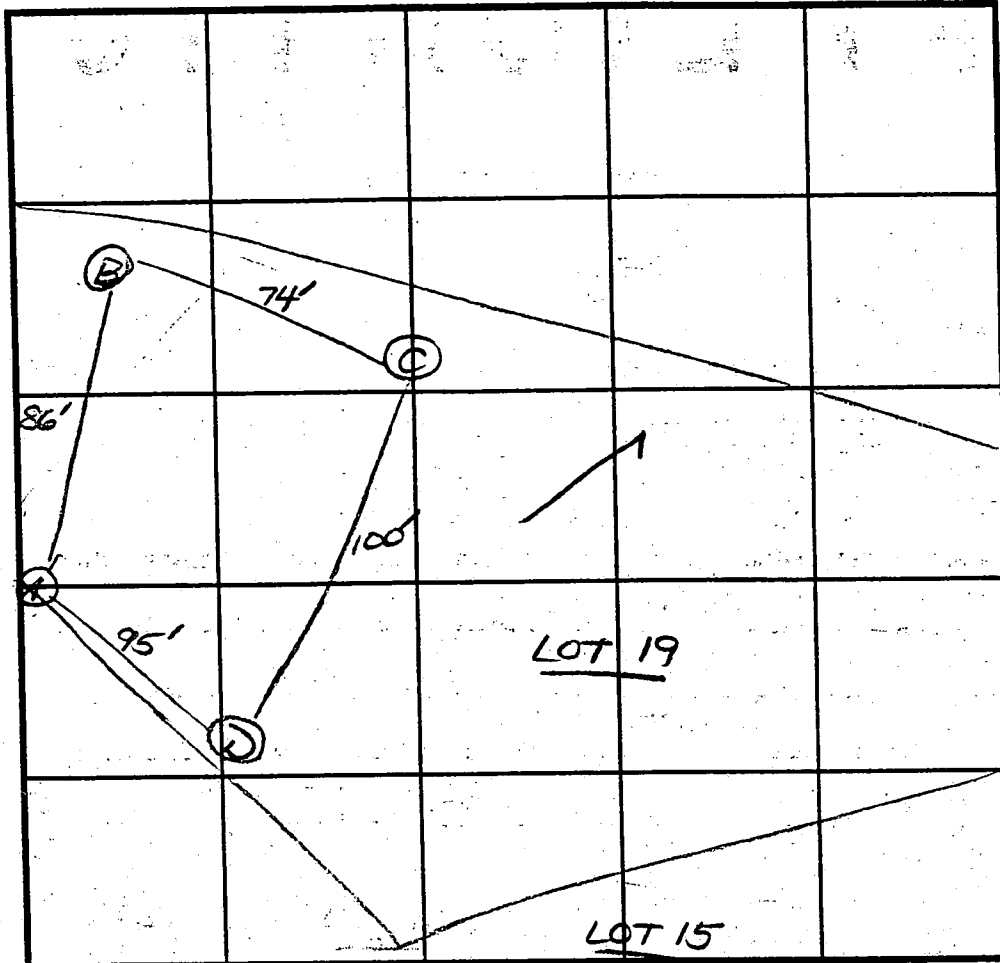
(B)

topsoil
red br clay loam
tan sandy loam

(C)

1'
3'
12'

topsoil
red br clay loam
br / sandy loam



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE

0'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/25/94	B	4.0'S	11:42	11:48	11:48	11:59	11
		13.0'D	see profile				
	C	12.0'D	visual - see profile				
	A	5.0'S	11:32	11:33 ₃₀	11:33 ₃₀	11:35	2
		12.0'D	see profile				
	D	4.0'S	11:05	11:06 ₃₀	11:06 ₃₀	11:08	2
		8.0'M	11:04	11:07	11:07	11:11	4
		12.0'D	see profile				

REMARKS Tests as staked

TYPE OF SOIL

TESTED BY D. SOE

ALSO PRESENT D.K. JR & wife

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5

TRENCH WIDTH 2'

INLET DEPTH 3'

MAXIMUM BOTTOM DEPTH 7'

SQ. FT./BEDROOM 180