

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 531310-1

AGENCY REVIEW: _____

DATE 6-28-12

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 5 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) JANET MARSHALL (CHM, LLC.)

DAYTIME PHONE (410) 531-1460 CELL N/A FAX N/A

MAILING ADDRESS 5027 TEN OAKS ROAD CLARKSVILLE MD 21029
STREET CITY/TOWN STATE ZIP

APPLICANT JEREMY RUTTER

DAYTIME PHONE N/A CELL (410) 982-2882 FAX N/A

MAILING ADDRESS P.O. Box 126 LISBON MARYLAND 21765
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME 5027 TEN OAKS ROAD LOT NO. 6

PROPERTY ADDRESS CLARKSVILLE, MD 21029
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 28 GRID 9 PARCEL(S) 45 PROPOSED LOT SIZE 1

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. Jeremy Rutter
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

(27)
 dk brn to brn 0.8'
 brncl 2msbk 1.5'
 brn l 7msbk 3.0'
 brn ls many mica 3.5'
 Boulderly 5.5'
 red & yel-brn & blk ls, 10 pl
 many mica 8'

pale red yel-brn, grey & blk chls 30% micaceous 2 m pl 12'

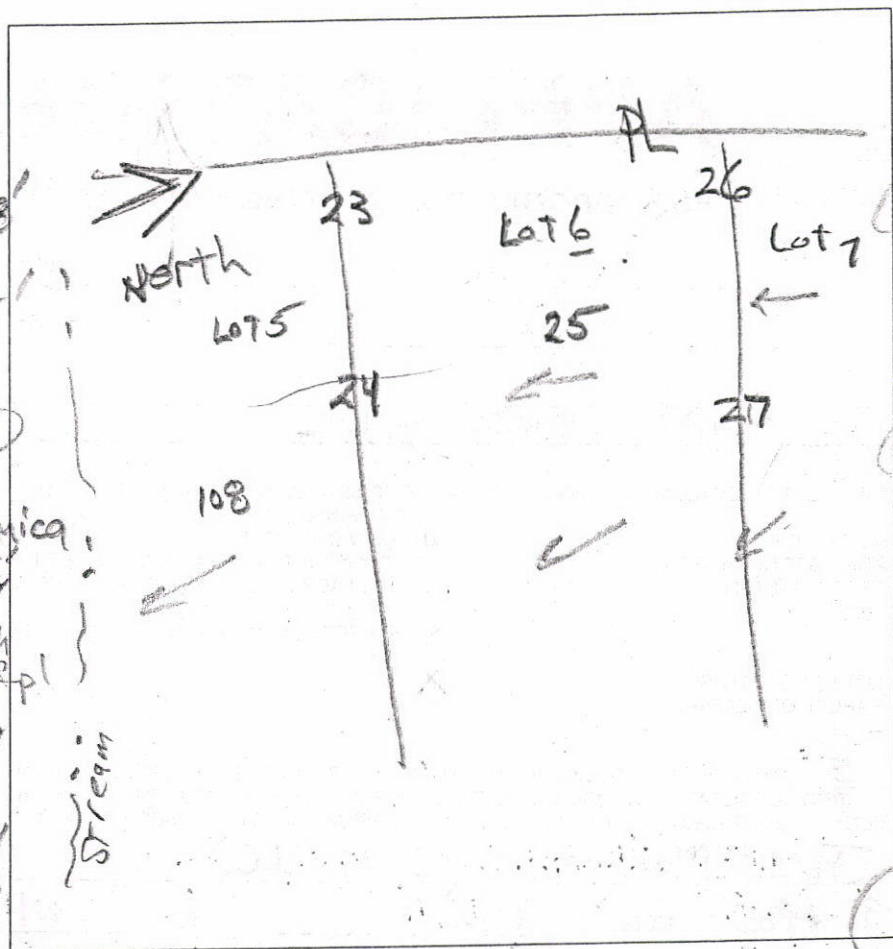
(24)
 dk grey-brn L, 2 & g 0.4'
 brncl 2msbk 1.8'

yel-red heavy fld 4'

brn, grst com. mica 5'

brn, grey & blk ls micaceous 10.5'

yel-red dk grey & grey loam 11.5'



12.5'
 dk brn 2
 brncl
 yel-red L
 4'
 5'
 brn ls many mica
 brn & grey ls, few chls micaceous
 9'
 lt. grey-brn ch & chls
 14%
 13.5'
 few boulders

(25)
 0.3'
 dk brn
 brn l 0.8'
 yel-red L

2'
 brn sl many mica
 3'
 grey-brn & yel-brn ls many mica
 9'
 lt. grey-brn ch & chls 30%

13'
 (26)
 dk brn
 brn ch
 yel-red
 brn
 pale red yel-brn & blk chls

5.3'
 J.R.
 grey brn chls micaceous
 12.5'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
12/12/12	23	4.5 / 1.0	3:11	3:25	—	res self	
12/12/12	24	5.1 / 1.5	3:22	3:24	3:28	4	P
	res self	5 / 2.5	0	1.5	3.5	2	P
12/12/12	25	13'	Visual	Sidewall	2-5'	1.2	P
12/12/12	26	4.1 / 2.5	0	2.5	7	4.5	P
12/12/12	27	12.5'	Visual	Sidewall	1.2	3.2	P

REMARKS _____
 SANITARIAN RBicker BACKHOE Chuck Zapp OTHERS _____
 TEST HOLES USED IN SDA _____ AVG. PERC TIME 12.5 SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____