

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 535210

AGENCY REVIEW: _____

DATE 5/23/11

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 4 TO 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) DEBRA TAYLOR

DAYTIME PHONE _____ CELL _____ FAX _____

MAILING ADDRESS P.O. Bx 535 FULTON MD 20759-0535
STREET CITY/TOWN STATE ZIP

APPLICANT FAL Development, LLC

DAYTIME PHONE 443-367-0422 CELL _____ FAX _____

MAILING ADDRESS 5300 DORSEY HILL DRIVE SUITE 102 ELLCOTT CITY MD 21042
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME PROPOSED FULTON MANDR VALLEY LOT NO. 108

PROPERTY ADDRESS 11987 ROUTE 216 HIGHLAND
STREET TOWN/POST OFFICE

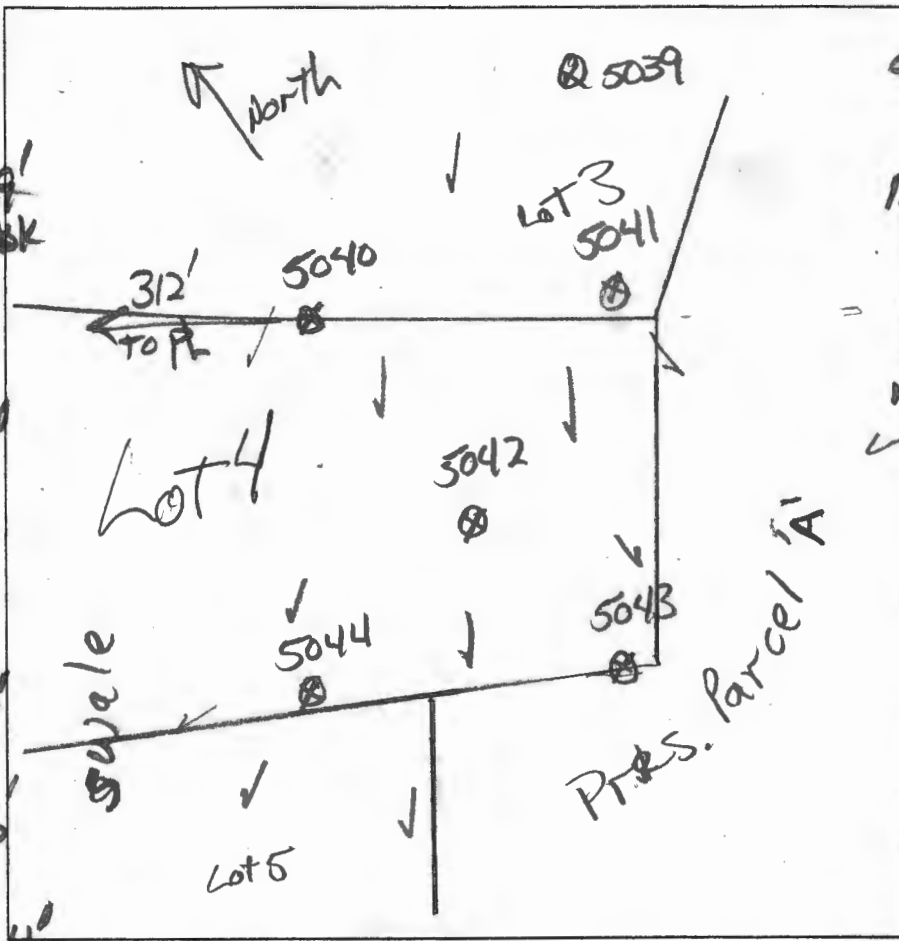
TAX MAP PAGE(S) 41 GRID 19 PARCEL(S) 78 PROPOSED LOT SIZE 61,416 SQ.FT

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



5044
 dk brnsl
 brn sl
 2msbk to 2msbk
 brn sl
 dense
 brn lfs
 dense
 brn ls
 10% channels
 many mica
 yel-brn lfs
 common Fp
 3 Mn coatings

5042
 dk brnsl
 brn sl
 3msbk
 roots
 yel-red sl
 many mica
 dense
 red & yel ls
 micaceous
 few med roots
 brn ls
 micaceous
 brn & dk grey
 shls micaceous

5041
 dk grey-brn
 sl many roots

brn sl
 2msbk
 c. roots
 yel red ls
 many mica
 dense

yel-red ls
 many mica
 w/ vein of
 stls

5043
 dk brnsl
 brn sl
 2msbk many roots
 red sl dense
 many mica
 red lfs
 w/ m 1p white
 micaceous
 yel brn ls
 mica
 red shls
 micaceous
 many Mn coats

DATE	TEST #	DEPTH	START	BREAK 1' DROP	STOP 2' DROP	TIME OF 2ND INCH	P/F/H
4/19/11	5044	4.2'	11:02	11:08	11:18	10	P
4/19/11	5043	11'	Visual		3'-7" 0.8 gpd/sq ft		P
4/19/11	5042	5.5'	11:24	11:35	11:26	repair	w/ vein of stls
4/19/11	5042	5.5'	0	1.2	3	reshelf	
4/19/11	5042	3.2'	12:02	12:08	12:21	13	P
4/19/11	5040	4.8'	11:54	12:04	no movement		reshelf
4/19/11	5040	6'	12:17	12:18	12:20	2	P
4/19/11	5040	2.7'	12:22	12:25	12:31	6	P
4/19/11	5041	11'	Visual		Trench bottom at 4' Inlet 2'; 0.8 gpd/sq ft.		P

5040
 dk grey-brn
 brn sl
 3msbk many roots,
 to 2msbk
 yel-red lfs
 dense
 brn ls
 micaceous
 few channels
 red, pale yellow
 grey-brn ls
 micaceous
 common Mn

REMARKS Trench bottom at 4' for initial system & pass. 1st Repair
 SANITARIAN RR BACKHOE Chuck Zapp OTHERS Jeremy Rutter
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH 4' EFFECTIVE SW _____
 Initial