



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 537969-A

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) GILLIECE FAMILY LLC

DAYTIME PHONE 410-531-0797 CELL 410-916-4164 FAX _____

MAILING ADDRESS 13111 LINDEN CHURCH Rd CLARKSVILLE MD 21029-1174
STREET CITY/TOWN STATE ZIP

APPLICANT DEVELOPMENT DESIGN CONSULTANTS - BRIAN COLLINS

DAYTIME PHONE 410-386-0560 CELL 410-336-6362 FAX 410-386-0564

MAILING ADDRESS 192 EAST MAIN STREET WESTMINSTER MD 21157
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME RESUBDIVISION of Lot 2 of THE Diehl Prop. LOT NO. 2

PROPERTY ADDRESS S/E RIVER ROAD SYKESVILLE 21784
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 09 GRID 06 PARCEL(S) 66 PROPOSED LOT SIZE 1.37AC

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

Lot 2

AVP

108

0.8' dk brn L
to brn L, 2msbk

1.3' brn L, 2csbk

2' brn sl, 1esbk

brn sl, sm

9.1' red & yel-brn

brn & pale brn

1s, 2mpl

110

dk brn

to brn L, 2msbk

to brn L, 2csbk

1.4' brn & yel-red sl

many mica

2.3' yel-red ls

many mica

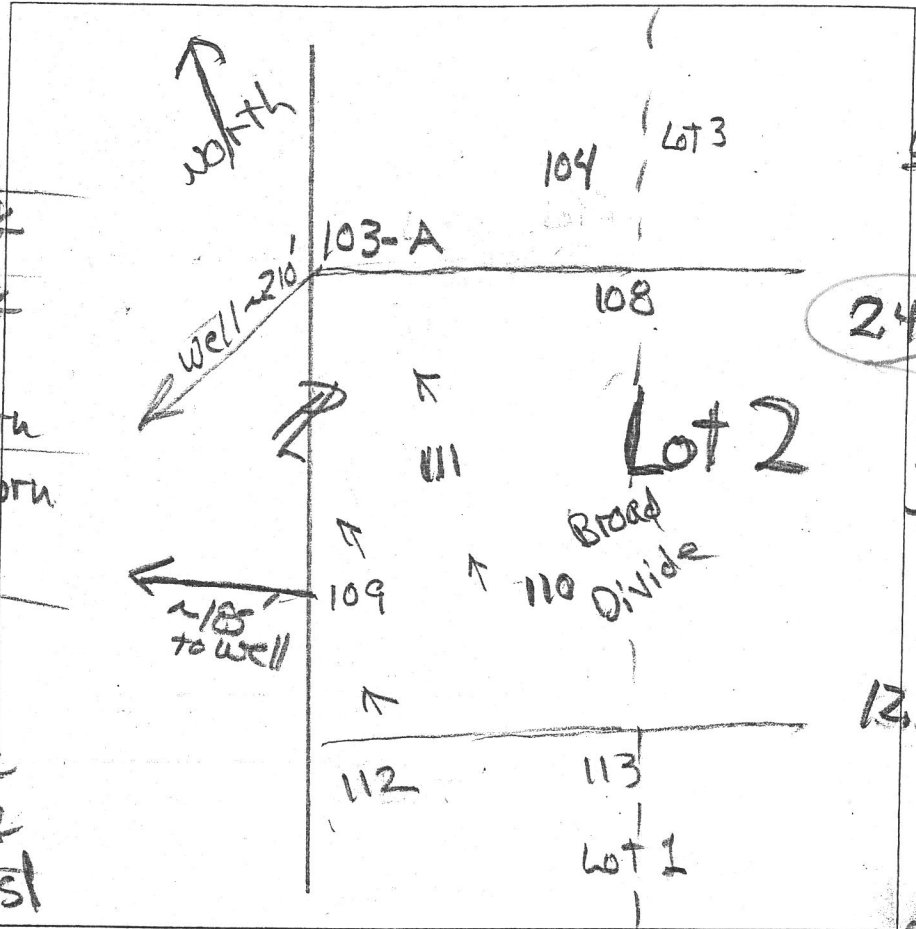
to yel-red ls

many mica

10' brn & pale brn

ls, com. mica

13.1'



111

dk brn L

to dk grey-brn

0.7' L, 2msbk, com. mica

brn L

2esbk com. mica

to 2msbk

2.4' red-yel & yel-brn

sl, many mica

3' red-yel & yel-brn

ls, many mica

12.3'

109

dk brn L

to brn L, 2msbk

0.8' brn L

1.5' 1esbk

yel-red sl

many mica

to brn sl

many mica

3' yel-red

& brn ls

many mica

8.5' brn & pale brn ls

com. mica

12.1'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
12/19/13	108	4.2' / 12.2'	11:09	11:11	11:14	3	P
12/19/13	111	12.3'	Visual	Sidewall 24°-8'		1.2 gpd / 16"	P
12/19/13	110	5' / 13.1'	11:47	11:49	11:52	3	P
12/19/13	109	5.2' / 2.1'	12:05	12:07	12:10	3	P

REMARKS #107 NOT Dug; #103-A tested in wet-season

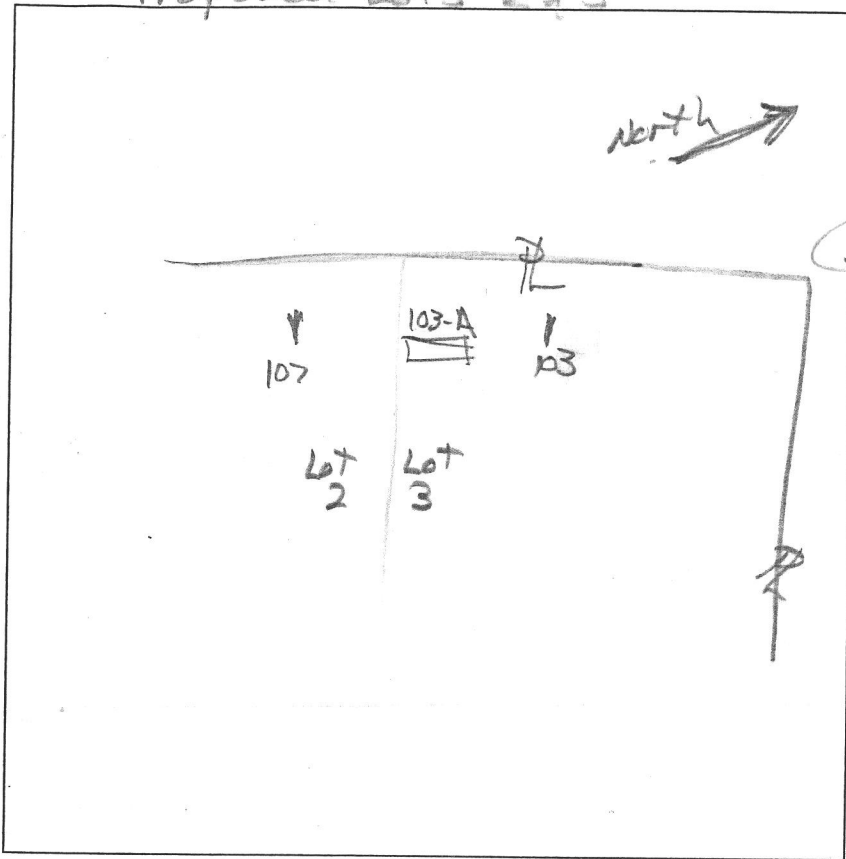
SANITARIAN R Bricker BACKHOE Chuck Zapp OTHERS Jeremy Rutter

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

TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

Proposed Lots 2 & 3

AVP _____



103A

dk brn L
to, brn L
2' brn sl
common mica
2.5' brn, blk
& pale yellow
fs
many fine mica
7.3' red-yel
& pale brn
chls
many fine mica
12' pale yellow
& red-yellow
15, 2mpl
13'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
3/27/13	103-A	3.7/13'	3:53	3:56	3:59	3	P

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