

Bureau of Environmental Health

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Maura J. Rossman, M.D., Health Officer

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

54010

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME Heatherwood

PROPERTY ADDRESS 1701 Heatherwood Way Sykesville 21074

TAX ACCOUNT # 307549 TAX MAP 0009 GRID 0021 PARCEL 0314 LOT NO. 18 PROPOSED LOT SIZE (ACRES) 3.00

ZONING CATEGORY TIER

PROPERTY OWNER(S) Sheila Gordon

DAYTIME PHONE 410-442-2882 CELL EMAIL

MAILING ADDRESS 1701 Heatherwood Way Sykesville, MD 21784

APPLICANT Fogles Septic RELATIONSHIP TO OWNER:

DAYTIME PHONE 410-795-5670 CELL EMAIL

MAILING ADDRESS 580 Obrecht Rd. Sykesville, MD 21784

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S):

PROPERTY:

- Subdivision: Number of lots including residue:
Subdivision classification (per Dept. of Planning and Zoning) Major Minor
Construct new OSDs on undeveloped lot
Repair or replace failing OSDs
Upgrade existing OSDs

BUILDING:

- Residential with existing or proposed bedrooms in the completed structure
Commercial (provide detail of type of use and numbers of employees/customers on accompanying plan)

IS THE PROPERTY WITHIN 2500 FEET OF ANY RESERVOIR?

- Yes
No

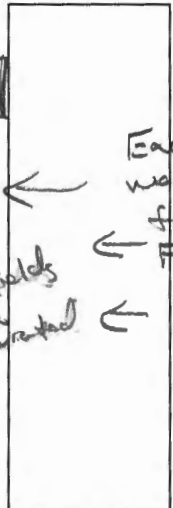
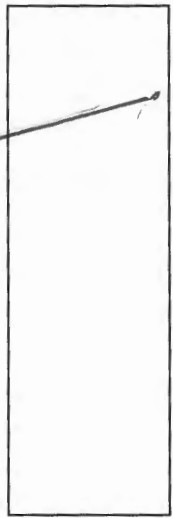
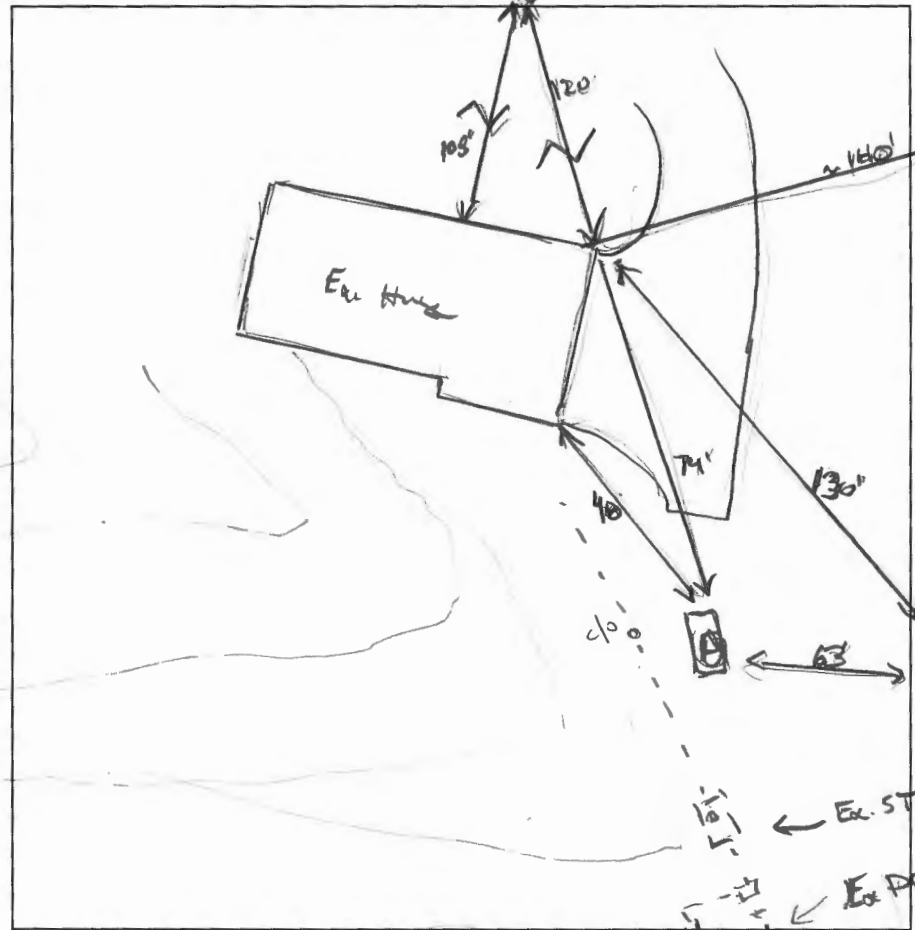
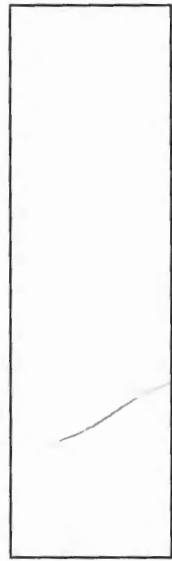
AS APPLICANT, I UNDERSTAND THE FOLLOWING:

- This application is valid for two(2) years from date of fee payment and approval is based upon health officer signature of a perc certification plan prior to expiration of this permit.
The application fee is non-refundable
This application must be accompanied by all applicable fees and a suitable site plan in order to be processed
This is a public document

I declare and affirm that to the best of my knowledge, the information contained herein is correct. I declare that I am the owner of the property or duly authorized to make this application on behalf of the owner. I agree to comply with all applicable state and county regulations.
By signature of this application, I hereby grant Howard County Health Department officials the right to enter onto the property for the purpose of inspecting the property as directly related to the requested permit/service.
Signature of Applicant: [Signature] DATE: 9-19-15

← Heatherwood Way →

AP _____



Ex well
old Private Pond

Excess water flow from Farm →

Ex Drain Field rock saturated ←

(A)
18" DK Br. OM, WKFSBK roots, Fr. L.
11 Br CL, WKFSBK roots, silty clay
3-4' 11 Br/R FS: CL, WKFPL, moist roots.
6' Br/R/Y SIL, Faint redox (1/4 inch)

(B)
2" DK Br L, 2" SBK, roots
11 Br, SIL, WKFSBK, roots, moist friable
6' Br/R SIL, WKFPL, faint redox.
8' H₂O seep

| DATE | TEST # | DEPTH | START | BREAK 1" DROP | STOP 2" DROP | TIME OF 2ND INCH | P/F/H |
|---------|--------|--------------|-------|---------------|--------------|------------------|-------|
| 10/2/18 | (A) | 5 1/2' / 14' | 00:26 | Pulled | no amount | 35 mi | F |
| | (B) | | no | 4' | 5' 18" | | F |
| | (C) | 5 1/2' / 13' | 00:14 | 00:20 | 00:27 | 7 | P |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

(C)
BR L, roots, WKFSBK
11 Br/Y CL
WKFSBK, Friable, roots
Few mica
4-5'
11 Br/Y SIL
WKFSBK, Friable, mica
7'
11 Br/Y SIL
WKFPL, Friable,
↓
H₂O seep.
12.5'
13.5'

REMARKS Entire area of back yard high water table.

SANITARIAN Id. Wolf BACKHOE P. Icy OTHERS none

TEST HOLES USED IN SDA 1 AVG. PERC TIME 7 SQ. FT/BR 0.8

TRENCH WIDTH 2 INLET DEPTH 2.5' MAX. BOT DEPTH 8' EFFECTIVE SW 5-8'

$$\frac{600 \text{ cfd} \cdot 2750}{2.5} \div 2 = 375 \text{ (cfd)} = 165 \text{ (gpm)}$$

$$165 \cdot (1.36) = 214 = 3 \times 71$$

2' side wall (30)