



Howard County Health Department

WET SEASON TESTING

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_ CRIP 526602

AGENCY REVIEW: \_\_\_\_\_ DATE \_\_\_\_\_

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 PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE
COMMERCIAL
INSTITUTIONAL/GOVERNMENT

PROPERTY OWNER(S) TROY W. TIPTON & THERESA TIPTON

DAYTIME PHONE \_\_\_\_\_ CELL 301-343-9602 FAX \_\_\_\_\_

MAILING ADDRESS 2890 ORDWAY DRIVE ELLICOTT CITY MD 21042

APPLICANT TROY & THERESA TIPTON

DAYTIME PHONE 410-531-6884 CELL 301-343-9602 FAX \_\_\_\_\_

MAILING ADDRESS 2890 ORDWAY DRIVE ELLICOTT CITY MD 21042

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

PROPERTY LOCATION SUBDIVISION/PROPERTY NAME GREEN HENCE LOT NO. 5

PROPERTY ADDRESS \_\_\_\_\_ STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 16 GRID 13 PARCEL(S) 314 PROPOSED LOT SIZE 698A

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

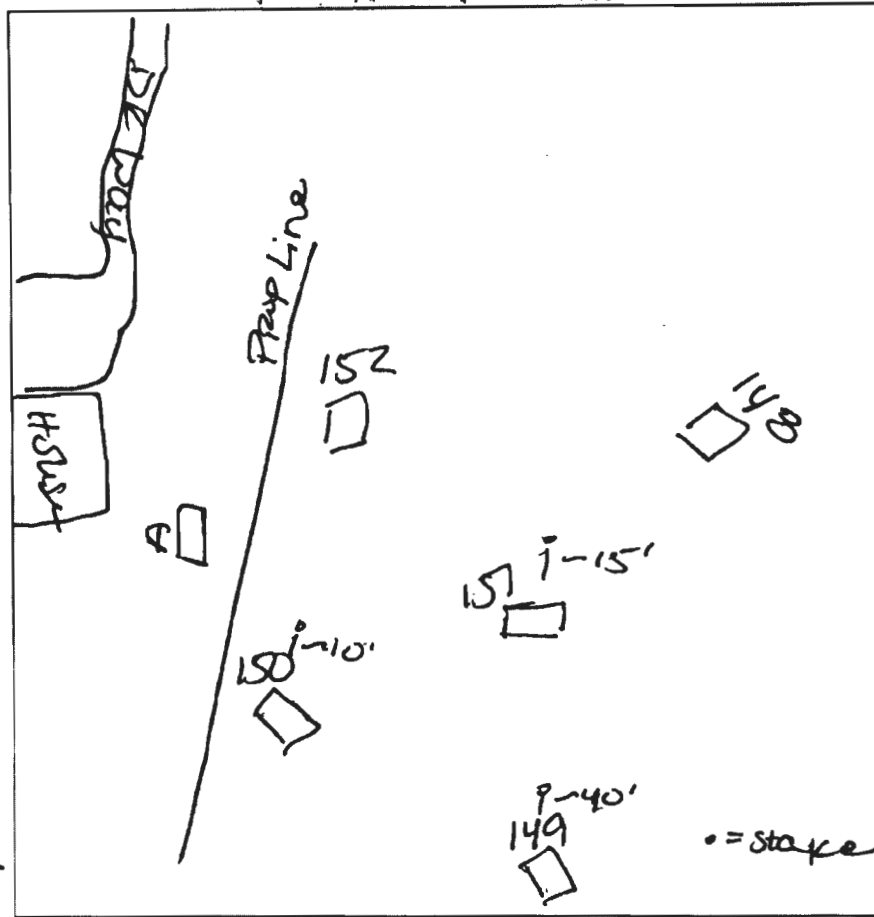
HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM 7178 COLUMBIA GATEWAY DRIVE COLUMBIA, MARYLAND 21046 (410) 313-2640 FAX (410) 313-2648 TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

② S210102

150  
 1' Bm L  
 Bm CL  
 quartz gr  
 2.5' Pale Rd/Bm  
 SIL  
 5' Pale Bm  
 FSL  
 Saprolite  
 8' Bm SL  
 Saprolite  
 13'

149  
 1' Bm L  
 Pale Bm  
 CL  
 quartz gr  
 5' Pale Rd/Bm  
 FSL  
 10' Bm SL  
 Saprolite  
 14'

151  
 1' Bm L  
 Pale Bm  
 CL quartz  
 gr  
 3' Rd Bm  
 SCL quartz  
 gr  
 5.5' Bm FS  
 8' Yell/Pale Bm  
 SL Saprolite  
 13'

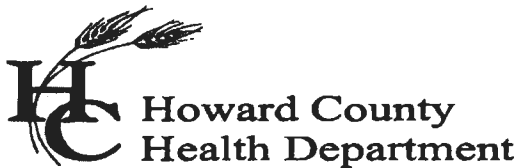


152  
 5" Bm L  
 Pale Bm  
 CL  
 2.5' quartz vein  
 4' Pale Bm  
 FSL  
 Saprolite  
 8.5' H2O Seepage  
 9'

148  
 6" dk Bm L  
 Pale Bm  
 CL quartz  
 gr  
 2' Pale Rd/Bm  
 gr CL  
 3.5' quartz vein  
 5' Pale Bm  
 dense SL  
 9' H2O Seepage  
 9.5' Bottom

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
4/19/07	150	6' / 13'	9:25	9:32	9:47	15	P
	149	6.5' / 14'	9:38	9:45	9:57	12	P
	151	6.5' / 15'	10:02	10:05	10:12	7	P
	152	4.5' / 8.5'	10:32	10:36	10:46	10	P
	148	5.5' / 9'	10:43	10:57	—	>30	F

REMARKS Tested during wet season  
 SANITARIAN AT BACKHOE Jack Fyock OTHERS Tony Tipton  
 TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_  
 TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE SW \_\_\_\_\_



**Howard County  
Health Department**

Bureau of Environmental Health  
7178 Columbia Gateway Drive, Columbia MD 21046  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-899-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

**Peter Beilenson, M.D., M.P.H., Health Officer**

April 23, 2007

Troy Tipton  
3587 Conchita Drive  
Ellicott City, MD 21042

RE: Percolation Test Results A# 526602  
2890 Ordway Drive

Dear Mr. Tipton,

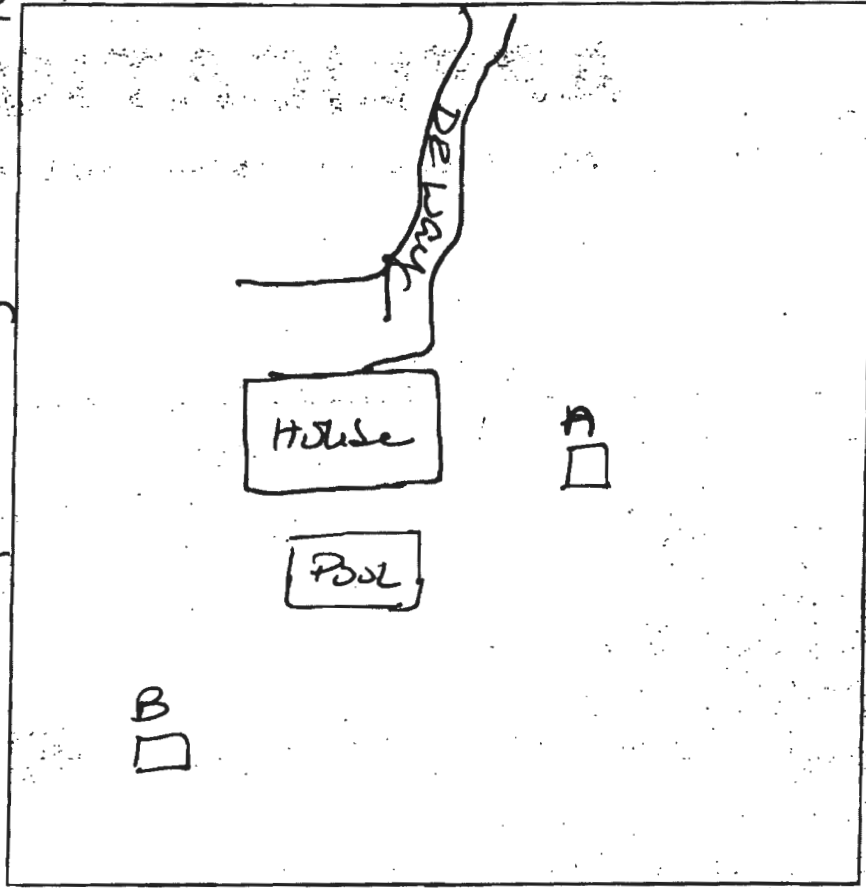
Percolation testing conducted April 19, 2007 on the referenced property indicated both satisfactory and unsatisfactory soil conditions. Limiting factors influencing soil conditions included high water levels and well compacted/dense soil material. Copies of the test results are enclosed.

Further review is contingent upon submission of a Percolation Certification Plan showing the following:

1. Identification of the property, road, street address if applicable, tax map page, parcel number, subdivision name; a purpose statement as appropriate (re-subdivision, SDA adjustment, etc.)
2. Name, address, and telephone number of the owner, developer, and the person preparing the plan.
3. The date the plan was drawn, the plan scale (1:30-1:100), a scaled vicinity map and the A# (the percolation test fee receipt number, referenced above).
4. Health Officer Signature block conditioned with the statement: "Approved for private water and private sewerage systems."
5. Existing and any proposed property lines
6. Except for staked holes not dug, all excavated test holes observed by the approving authority, identified according to the original percolation testing proposal, or, as otherwise identified at the time of testing.
7. Actual surveyed elevation (not based on County aerial topography) of each test hole.
8. Legend symbols to distinguish holes, which passed, failed, or were held for future review. Legend symbols to distinguish between existing holes previously documented and new holes.
9. For lots created after March 1972, proposed minimum 10,000 Sq. Ft. Sewage Disposal Area for each lot and for lots created before March 1972, proposed adequate area for an initial system and two repair systems.
10. Field verified/field run topography at two-foot intervals and statement certifying such.
11. Existing structures, wells, septic systems and sewage easements. List use and intent designated for each (example: remain, remove, or abandon)

② S26602

A  
 1' Bm L  
 Pale Bm  
 gr CL  
 4' Pale Rd/Bm  
 FSL  
 9' Bm SL  
 13' H<sub>2</sub>O  
 Seepage  
 135'



B  
 6" Bm L  
 Pale Bm  
 SCL gr  
 4' Pale Bm/RD  
 SL  
 Saprolite  
 13'

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
4/19/07	A	5.5' 13.5'	10:02	10:05	10:12	7	P
	B	5' 13'	10:23	10:24	10:26	2	P

REMARKS Tested during wet season  
 SANITARIAN AT BACKHOE Jack Fyock OTHERS Troy Tipton  
 TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_  
 TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE SW \_\_\_\_\_

12. Three proposed well sites or 1500 square foot well zone with an elliptical radius of 100 feet around the entire set/well zone for each lot.
13. Identification of streams, ponds, floodplains, 25% and greater slopes, soil types and soil type boundaries.
14. Suitable house site (55 feet X 70 Feet) and driveway with building restriction lines as determined by other county agencies.
15. All existing wells, septic systems and sewage disposal easements within 100 feet of property boundaries and a note stating such. The engineer shall use all reasonable efforts to find the location of all surrounding wells and septic systems and a note stating such.
16. All existing and proposed wells that are located within 200 feet down-gradient of existing or proposed septic systems and sewage disposal easements.
17. Professional seal OR the following statement with signature: "I certify that the information shown hereon is based on field work performed by me or under my direct supervision, and is correct, to the best of my knowledge and belief."
18. Include the following statement: "Any changes to a private sewage easement shall require a revised Percolation Certification Plan."
19. Include the MDE sewage easement statement with appropriate shading
20. For proposed subdivisions and retests of lots created after November 1985, certification of compliance with MDE ownership width requirements and the statement that, "The lot(s) shown hereon complies/comply with the minimum ownership width and lot area as required by the Maryland Department of the Environment."

If you have any questions about this matter, please contact me at the above address or by calling 410-313-1775.

Sincerely,

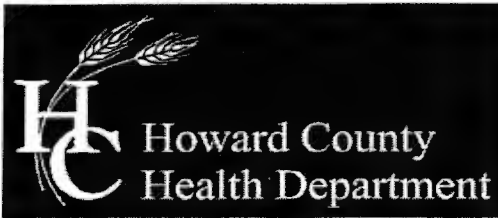


Ashley Trump  
Well and Septic Program  
Development Coordination Section

Enclosures

cc: file





Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

SEWAGE DISPOSAL SYSTEM SPECIFICATIONS WORKSHEET

Address: 2890 Ordway Drive

Subdivision: Greenhenge Lot: 5

Table with 4 columns: Replacement type, Application rate, Effective area beginning depth, Bottom maximum depth. Rows include Initial system, 1st Replacement, and 2nd Replacement.

Design Flow = 150 gallons per day per bedroom
Design flow ÷ application rate = square footage of drainfield required
Linear length of trench required = drainfield square footage x sidewall reduction percentage ÷ trench width

Sidewall reduction credit formula:

(W + 2) / (W + 1 + 2D) x 100 = Percent of length of standard trench where W=trench width and D= depth between effective area beginning depth and trench bottom.

Standard design requirements:

- Trenches must be located to provide room for 3 systems in the disposal area
• All trenches must be equal length unless low pressure dosed
• All trenches must be on contour
• Minimum trench spacing: 10' for all trenches utilizing sidewall reduction credit. Additional spacing may be necessary for any trench using over 3.5' of effective sidewall. In those cases, the spacing formula is 2D + W up to a maximum spacing of 18'.
• Minimum trench spacing for trenches with no sidewall credit (bottom area only) is 6' for a 2' wide trench and 9' for a 3' wide trench (spacing is measured edge to edge)
• Maximum trench length is 100'
• Maximum pipe depth is 4'

Additional requirements:

Approved: [Signature] Date: 8/2/2021