



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_

TEST TIME \_\_\_\_\_

AP A519074

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

DATE 7/30/2003

**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 (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)	<b>Thomas Clark Linthicum c/o Tracy Diamond Griffin</b>			
DAYTIME PHONE	<b>410-531-3137</b>	CELL	<b>410-984-2501</b>	FAX <b>410-531-8070</b>
MAILING ADDRESS	<b>4231 Linthicum Road</b>	<b>Dayton</b>	<b>MD</b>	<b>21036</b>
	STREET	CITY/TOWN	STATE	ZIP
APPLICANT	<b>Tracy Diamond Griffin</b>			
DAYTIME PHONE	<b>410-531-3137</b>	CELL	<b>410-984-2501</b>	FAX <b>410-531-8070</b>
MAILING ADDRESS	<b>3060 Washington Road, Suite 220</b>	<b>Glenwood</b>	<b>MD</b>	<b>21738</b>
	STREET	CITY/TOWN	STATE	ZIP
APPLICANT'S ROLE	<input checked="" type="checkbox"/> DEVELOPER	<input type="checkbox"/> BUILDER	<input type="checkbox"/> BUYER	<input type="checkbox"/> RELATIVE/FRIEND
			<input type="checkbox"/> REALTOR	<input type="checkbox"/> CONSULTANT
PROPERTY LOCATION	<b>Linthicum Oaks I</b>			
SUBDIVISION NAME	<b>Lot #1</b>			
PROPERTY ADDRESS	<b>Lot #1 - Situated on the West Side of Linthicum Road</b>		<b>Dayton, MD 21036</b>	
	STREET		TOWN/POST OFFICE	
TAX MAP PAGE(S)	<b>22</b>	GRID	PARCEL(S) <b>50</b>	PROPOSED LOT SIZE <b>1 acre</b>

AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWAGE 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.

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SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P

606  
Brown  
SCL

1  
Brown  
L  
w/ 50-60%  
flossy  
mud  
schist  
frag

5  
refused

600  
orange  
brown  
SCL

1 1/2  
red orange  
fine  
L

3  
red  
orange  
fine  
SL  
w/ 5-10%  
course  
cherty  
frag

12

601  
red brown  
heavy  
SiCL/SCL

4/30-40%  
course  
cherty  
frag

5 1/2  
orange  
brown  
SCL  
w/ 50-60%  
course  
cherty  
frag

9  
refused



605  
Brown  
mud  
SCL

1 1/2  
heavy  
orange  
brown  
SCL

4  
orange  
brown  
heavy  
SL  
w/ 5-10%  
course  
frag

12 1/2

607  
heavy  
red  
orange  
SCL

3  
heavy  
red  
orange  
L

4 1/2  
red  
orange  
fine  
SL

14

604  
orange  
brown  
L  
w/ 60-70%  
course  
cherty

3

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
8/25/03	606	5U	< 50%	frag			F
	600	5 1/2 12	12:23	12:25	12:30	5	P
	601	9V	< 50%	frag			F
	605	4 1/2 12 1/2	1:07	1:12	1:19	7	P
	607	5 14	1:09	1:11	1:14	3	P
	604	3V	< 50%	frag			F

REMARKS holes dug for shared

SANITARIAN J. Borri/K. Bell BACKHOE C+C OTHERS \_\_\_\_\_

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

TRENCH WIDTH \_\_\_\_\_ INLET DEPTH \_\_\_\_\_ MAX. BOT DEPTH \_\_\_\_\_ EFFECTIVE S/W \_\_\_\_\_