



APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

A511600-511999
P511959

TEST DATE(S) _____ TEST TIME _____ A/P _____

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 (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) Victoria Sessler

DAYTIME PHONE _____ CELL 443-745-6115 FAX _____

MAILING ADDRESS _____
STREET CITY/TOWN STATE ZIP

APPLICANT Hutbelds Equipment

DAYTIME PHONE 301 854-6172 CELL 410-984-0047 FAX _____

MAILING ADDRESS Po Box 519 Annapolis Junction Md 20701
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME 12401 Lime Kiln Rd LOT NO. _____

PROPERTY ADDRESS _____
STREET TOWN/POST OFFICE Fulton Md 20759

TAX MAP PAGE(S) _____ GRID _____ PARCEL(S) _____ PROPOSED LOT SIZE _____

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
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 (A)

0.5' brn sl, 16sbk
common mica

brn sl, heavy
1msbk
common mica

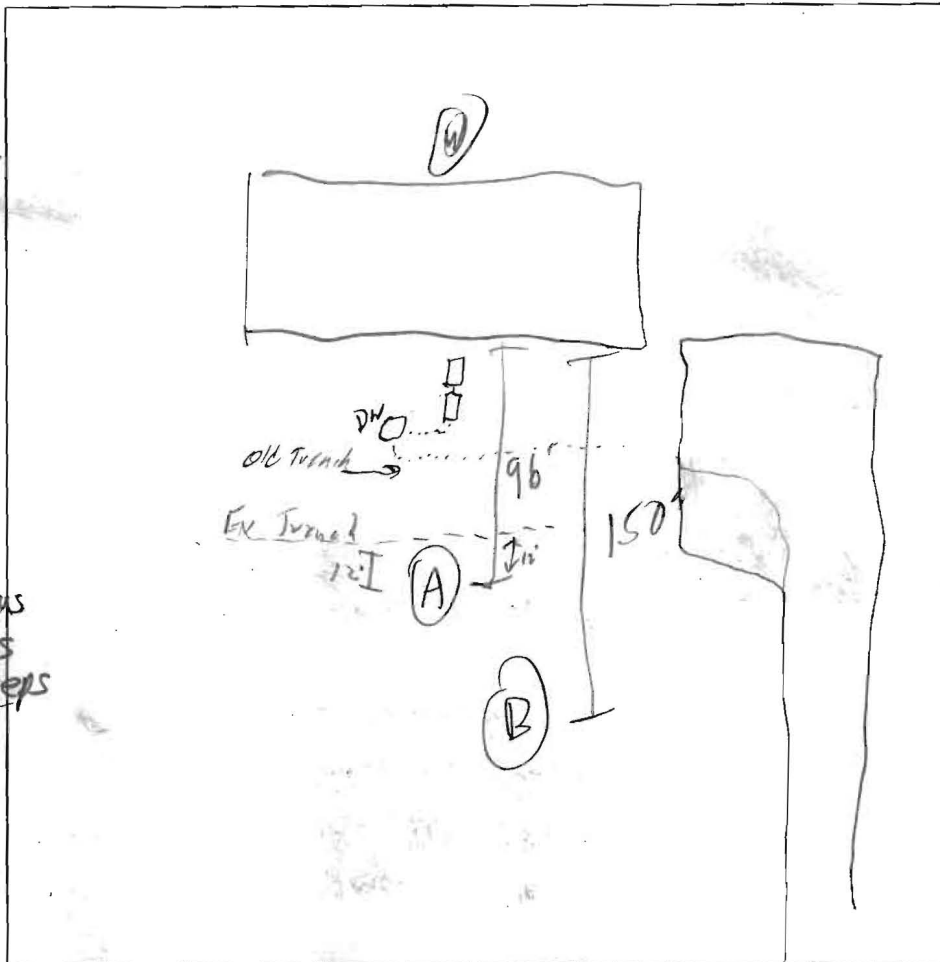
2' brn sl, heavy
many mica

3.5' sticky
brn sl
slightly sticky
many mica

6' red-brn sl
micaceous

11' red sl, micaceous

* 13' red ls, micaceous
moist, water seeps



(B)

dk brn sl, 16sbk
few mica

0.5' dk brn sl, few mica

1msbk

1.5' brn sl
1msbk
common mica

3.5' brn sl, heavy
many mica

4' brn & red-brn
sl, micaceous

10' dk red & 2.5 yr
pale yellow 3/6
5/84

w/m 1/1 2.5 yr 8/3

loam
(no mica)

Water seeps

11' cave-in

12'

Linn. Kln Rd

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
6/9/08	A	4' / 14.5'	10:37	10:39	10:45	6	P
	A2	3' / 10'	10:48	11:07	10:37	30	P
	B	4' / 14'	11:31	11:05	11:42	7	P
	B2	3' / 10'	11:42	11:55	12:22	27	P

REMARKS 9' CYC

SANITARIAN SO/RB Jang BACKHOE Donnie OTHERS Kenny (J)

TEST HOLES USED IN SDA 333' trench AVG. PERC TIME 6-7 SQ. FT/BR

TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH 6 EFFECTIVE S/W 3