

# APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) \_\_\_\_\_ TEST TIME \_\_\_\_\_ AD 520087

AGENCY REVIEW: \_\_\_\_\_ DATE 3/10/2004

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 UNKNOWN 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) MR. JOSEPH BLOUIN

DAYTIME PHONE 410-489-9394 CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS 13800 KENNARD DRIVE GLENELG MD 21737  
STREET CITY/TOWN STATE ZIP

APPLICANT MR. JOSEPH BLOUIN

DAYTIME PHONE 410-489-9394 CELL \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS 13800 KENNARD DRIVE GLENELG MD 21737  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION RESUB OF  
SUBDIVISION/PROPERTY NAME CRYSTAL CLEAR LOT 1 LOT NO. 3

PROPERTY ADDRESS 13800 KENNARD DRIVE GLENELG  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 22 GRID 7 PARCEL(S) 533 PROPOSED LOT SIZE 3 AC

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.

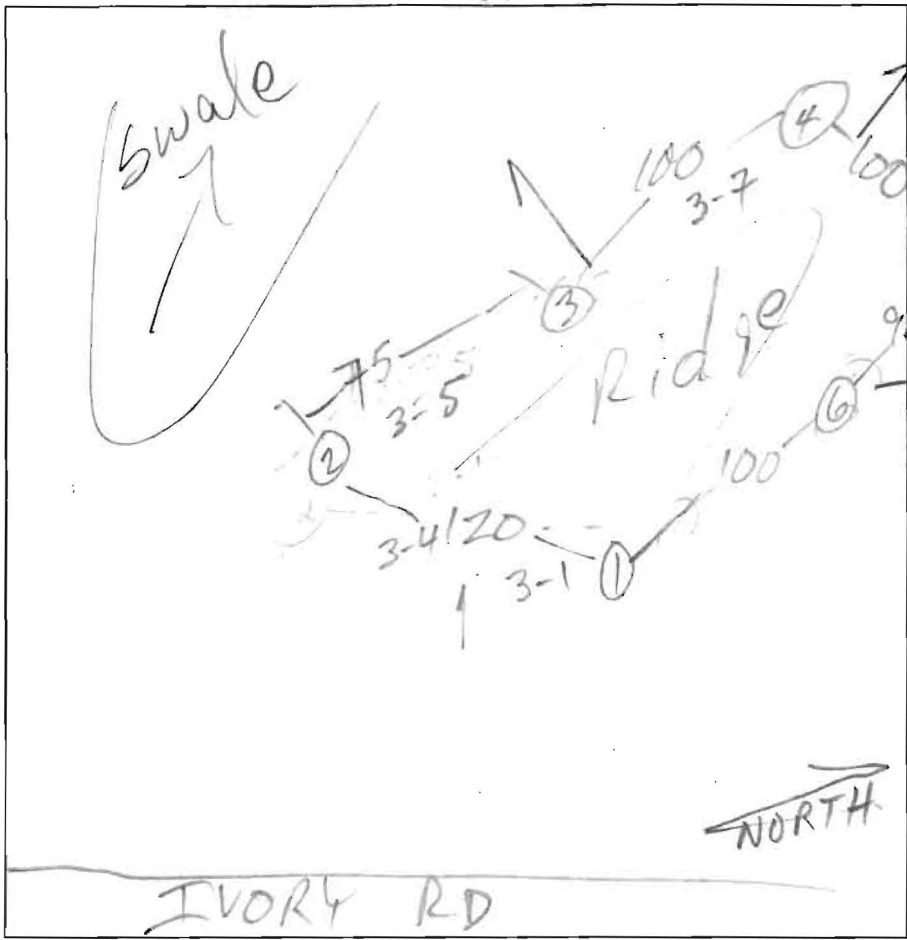
TEST RESULTS WILL BE MAILED TO APPLICANT.

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

Lot 3

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DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
6/22/04	1 S	12 1/2	9:22	9:24	9:29	5	P
	2 S	11	9:32	9:38	9:46	8	P
	3 S	11 1/2	9:47	10:04	10:46	28	P
	4 S	11	10:15	10:22	10:32	10	P
	5 S	11 1/2	10:36	10:41	10:53	12 EST	P
	6 S	11	10:59	11:05	11:13	8	P

REMARKS ABOUT ENOUGH AREA FOR TWO LOTS  
 SANITARIAN M. Ripkin BACKHOE Skip OTHERS —  
 TEST HOLES USED IN SDA 1-2-3-6 AVG. PERC TIME 12 SQ. FT/BR 210  
 INITIAL 3 TRENCH WIDTH 3 INLET DEPTH 3 MAX. BOT DEPTH 5 EFFECTIVE S/W 2  
 REPAIR 3 2 1/2 4 1/2 0.5  
 INIT SYS 4BR = 175  
 REPAIR 4BR = 280