

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) _____ TEST TIME _____

AP 525619

AGENCY REVIEW: _____

DATE 10/30/06

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) CRAIG Tyrrell

DAYTIME PHONE 888.865.0300 CELL 443.745.4600 FAX 888.865.7410

MAILING ADDRESS 6690 LUSTER DR HIGHLAND MD 20777
STREET CITY/TOWN STATE ZIP

APPLICANT MARK SHAFFERY

DAYTIME PHONE _____ CELL 410.808.2505 FAX _____

MAILING ADDRESS 1783 Forest Dr ANNAPOLIS MD 21401
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION
SUBDIVISION/PROPERTY NAME Green Hill Manor Section 4 LOT NO. 17

PROPERTY ADDRESS 6690 LUSTER DRIVE HIGHLAND 20777
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 34 GRID 20 PARCEL(S) 369 PROPOSED LOT SIZE .945 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.

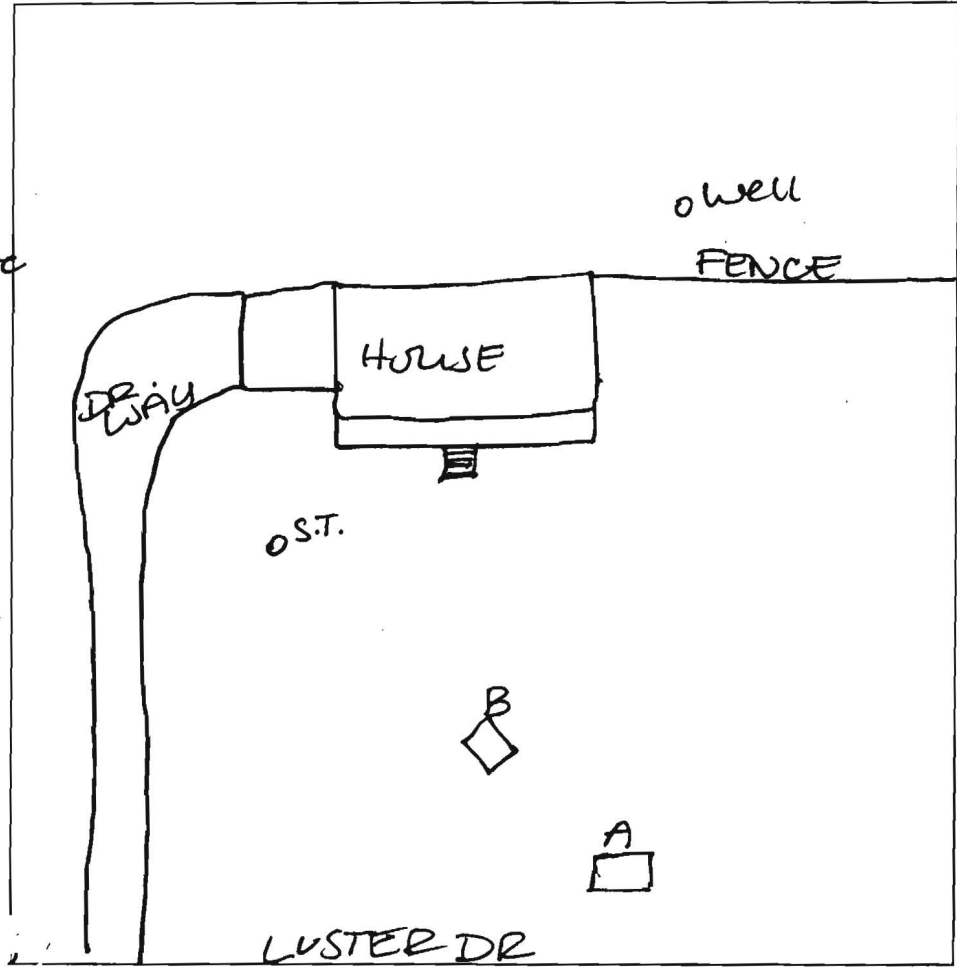
TEST RESULTS WILL BE MAILED TO APPLICANT. _____
SIGNATURE OF APPLICANT

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

AP 525619
A

1" BRL
Rd Br
CL
3 5/8" 2nd drainage
mottles
5.5' H₂O

B
1" Br L
Rd Br
CL
3.5' (cavein)
H₂O
4' 2nd drainage
mottles
5.5'

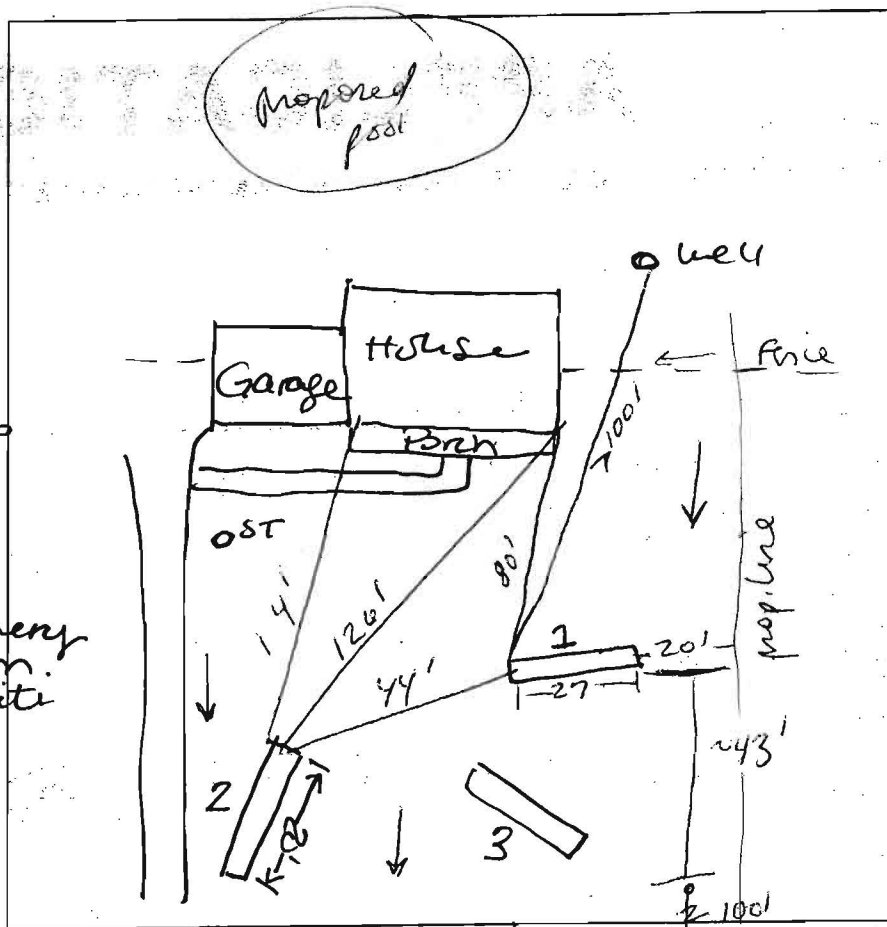


DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
11/8/02	A	H ₂ O @ 5.5'		~~~~~		F	
	B	H ₂ O @ 3.5'		~~~~~		F	

REMARKS _____
 SANITARIAN at/SF BACKHOE milu OTHERS mark
 TEST HOLES USED IN SDA _____ AVG. PERC TIME _____ SQ. FT/BR _____
 TRENCH WIDTH _____ INLET DEPTH _____ MAX. BOT DEPTH _____ EFFECTIVE SW _____

A/P

2
 8" Bm L
 RDBm
 SCL
 micaeolus
 5'
 RD
 v micaeolus
 SL
 multi-color
 saprolite
 platy
 9'
 40% Channery
 and st. cem.
 saprolite
 12.5' Bottom



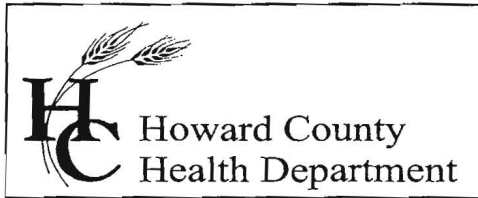
1
 dark brown
 2
 strong brown
 s.c. s.b.k.
 dense (packed & gravel)
 micaceous
 4'
 st. brown
 s.c. s.b.k.
 micaceous
 5 1/2 notes
 6 1/2
 channery 30%
 gravel
 7
 red s.e.
 medium gr
 micaceous
 20%
 clay
 13'

Luster DRue

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
3/23/07	2	6' / 12.5'	11:37	11:40	11:44	4	P
	3	visual	effective area				P
		below 6'					
	1	7' / 13'	11:14	—	7:15 min	—	—
		8'	11:40	11:50	12:20	30	P

3
 1' Bm L
 Yell Bm
 SCL
 micaeolus
 5'6" Rx Vein
 6' RD Brn
 v micaeolus
 SL coarse
 saprolite
 9'
 Yell Bm
 SL v micaeolus
 40% Channery
 + st. cem.
 saprolite
 12' - Bottom

REMARKS: Enough area established for a repair in front
 SANITARIAN: AT/SF BACKHOE: mark OTHERS: Craig Tyrell
 TEST HOLES USED IN SDA: _____ AVG. PERC TIME: _____ SQ. FT/BR: _____
 TRENCH WIDTH: _____ INLET DEPTH: _____ MAX. BOT DEPTH: _____ EFFECTIVE SW: _____



Bureau of Environmental Health
7178 Columbia Gateway Drive, Columbia, MD 21046
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Penny E. Borenstein, M.D., M.P.H., Health Officer

November 13, 2006

Craig Tyrrell
6690 Luster Drive
Highland, Maryland 20777

RE: PERCOLATION TEST RESULTS -525619
6690 Luster Drive

Dear Mr. Tyrrell:

Percolation testing conducted November 8, 2006 on the referenced property indicated unsatisfactory soil conditions. Copies of the test results are enclosed. While testing, the water table was found at 3.5 and 5.5 feet, indicated by water seepage thru the walls of the test holes and soil mottling. Drainage mottles in the soil profile indicated a seasonable high water table. As a result, additional testing during the wet season (February thru April) will be necessary. This testing will consist of conventional testing as well as sand mound testing. It is essential that a suitable sewage disposal area be located prior to building permit approval. I have enclosed paperwork explaining the requirements for the "percolation test plan" and the "percolation certification plan".

If you have any questions regarding 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

OT