



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

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

AP A535291

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

DATE 07/18/2011

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 4 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) Harry + Sarah Sherman

DAYTIME PHONE 301-617-0567 CELL 410 693 8766 FAX \_\_\_\_\_

MAILING ADDRESS 11205 Joan Marie Ct Clarksville MD 21029  
STREET CITY/TOWN STATE ZIP

APPLICANT Ronnie Heaps / J.M. Contracting LLC

DAYTIME PHONE 443 277 7526 CELL Same FAX 410 552-5815

MAILING ADDRESS 425 Obrecht Rd Sykesville MD 21784  
STREET CITY/TOWN STATE ZIP

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

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME Hallmark Section 1 LOT NO. 7

PROPERTY ADDRESS 11205 Joan Marie Ct Clarksville MD 21029  
STREET TOWN/POST OFFICE

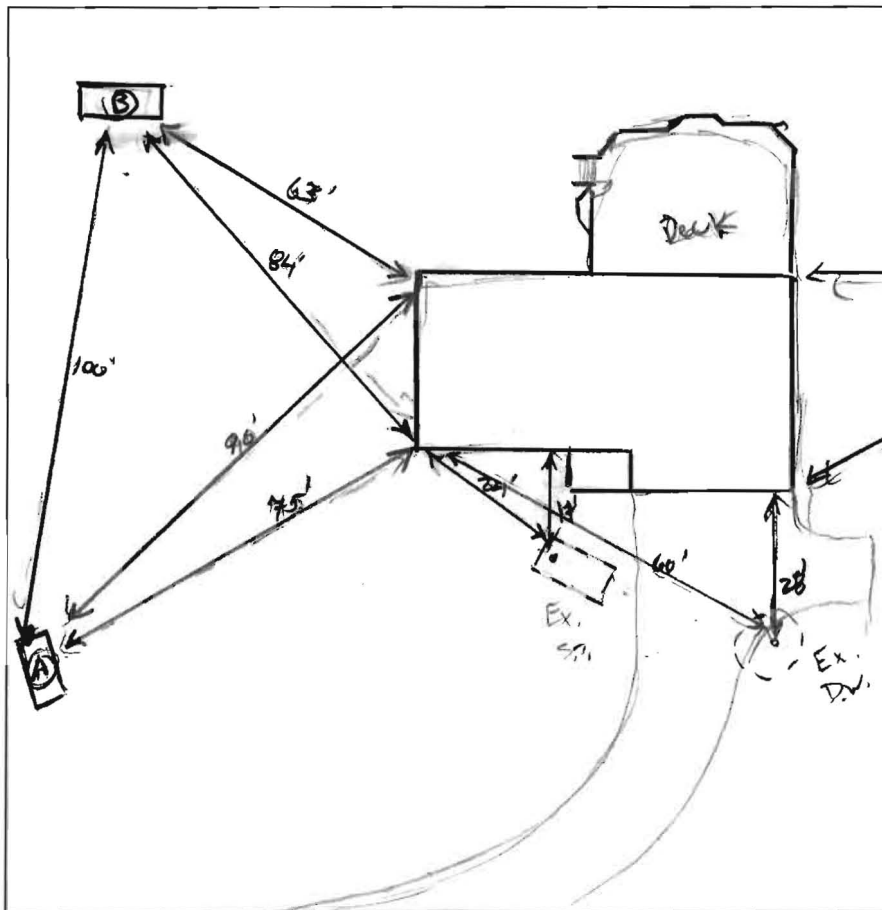
TAX MAP PAGE(S) \_\_\_\_\_ GRID \_\_\_\_\_ PARCEL(S) \_\_\_\_\_ PROPOSED LOT SIZE \_\_\_\_\_

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.

Ronnie Heaps  
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



(A)  
 8" Top Soil, OM, any roots - ssk.  
 2' Br./Y CL, Frable, 2MSAK roots, Dry  
 6" Yellow/Br. Cbl, ms BK Frable.  
 6" yellow/red litho frags  
 6" Small Rck Inclusion  
 16' 3" FSL, CL Frable, many near Br/Y litho frags 10% sst chng Very consistent

(B)  
 Top. Tight CL 2SSK. roots 9"  
 Red/Br/Y CL, CS, Frable, strong ssk, Dry 5% sst  
 3' LL, Frable. Sim. whst. plastic substance.  
 6' SCL Br/Y/Red SL VFSL Frable, many mica

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2ND INCH	P/F/H
7/19/11	(A)	7' 2" / 16"	10:50	10:55	11:03	8	P
	(B)	6' 3" / 16"	11:19	11:22	11:25	3	P

Soil is largely Urbanized ~67 to 1  
 REMARKS Poured H<sub>2</sub>O @ bottom of (A) ~ 7mins  
 SANITARIAN K. Wolf BACKHOE R. Hepp's OTHERS Homeowner  
 TEST HOLES USED IN SDA 2 AVG. PERC TIME 5.5 SQ. FT/BR  
 TRENCH WIDTH 2' INLET DEPTH 5' MAX. BOT DEPTH 10' EFFECTIVE S/W 7-10

$$(4BR) = \frac{600 \text{ gal}}{1.2} = 500 \div 2 = 250 (1.44) = 110 \quad 2 \times 55$$