



**HARFORD COUNTY HEALTH DEPARTMENT**  
**Environmental Health**  
 120 South Hays Street, Suite 200  
 P.O. Box 797, Bel Air, Maryland 21014-0797  
 410-877-2300 • FAX 443-643-0334



**APPLICATION FOR SOIL PERCOLATION TEST**

**CHECK ALL AREAS THAT APPLY:**

- Non-conventional test/single ring (\$200.00 per lot area)
- Repair (no fee)
- Conventional test (\$150.00 per lot area)

**RESIDENTIAL**

- New subdivision       Existing subdivision
- Name: \_\_\_\_\_
- Number of new lots: \_\_\_\_\_
- Year created/recorded: \_\_\_\_\_

**NON-RESIDENTIAL†**

- New       Existing
- Project name: \_\_\_\_\_
- Use:     Commercial       Institutional
- Industrial               Other

**IMPROVED LOT**

- Failing OSDS
- Nature of problem: \_\_\_\_\_
- Active building permit (# \_\_\_\_\_)
- Future building plans
- Septic reserve area revision/reduction or OSDS relocation

**UNIMPROVED LOT**

- Re-test (past failed test)
- Never tested
- Septic reserve area revision/reduction
- Active building permit (# \_\_\_\_\_)

†Please attach a brief description of project so wastewater flow can be projected. Note: Flows from 2,500-4,999 gallons/day may require a joint review with the Maryland Department of the Environment (MDE). Flows of 5,000 gallons/day or greater will require a joint review.

**PROPERTY INFORMATION:**

Property location/address: \_\_\_\_\_

Subdivision (if applicable): \_\_\_\_\_ Lot #: \_\_\_\_\_

Tax Map #: \_\_\_\_\_ Parcel #: \_\_\_\_\_ Tax ID #: \_\_\_\_\_ preferred contact

**OWNER'S NAME:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT/AGENT NAME:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of contact person (if other than applicant): \_\_\_\_\_ Phone \_\_\_\_\_

**The owner/applicant is solely responsible for contacting MISS UTILITY prior to digging.**

**Note for non-repair percs:**

1. A site plan of the property must be submitted with this application. It must be drawn to scale (1"=30', 1"=50', or 1"=100') and indicate property lines, house location, well site, driveway, septic area, and any wells, septic systems, and/or SRAs located within 200' of the property line.
2. Corners of proposed septic reserve areas must be staked prior to testing.
3. The appropriate fee (cash or check) must be submitted with the application. **MAKE CHECKS PAYABLE TO HARFORD COUNTY, MARYLAND.**

Health Department staff will contact the applicant/agent to schedule the test unless another person is specified. Please refer to the Percolation Test Application Procedures for general requirements. By signing this application, the applicant agrees to allow representatives from the Harford County Health Department on the property at reasonable times to perform testing and site analysis.