



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

**SITE INVESTIGATION AND PERCOLATION
TEST REPORT FOR ONLOT DISPOSAL OF SEWAGE**

INSTRUCTIONS FOR COMPLETION OF THIS FORM ARE LOCATED ON THE REVERSE SIDE

Application No. _____ Municipality York County York

Site Location Lot 19 Subdivision Name Blue Springs

- SUITABLE Soil Type _____ Slope _____ % Depth to Limiting Zone 30 Ave. Perc. Rate 13
- UNSUITABLE Mottling Seeps or Pounded Water Bedrock Fractures Coarse Fragments
- Perc. Rate Slope Unstabilized Fill Floodplain Other _____

SOILS DESCRIPTION:

Soils Description Completed by: P. Laska, P.E., Hydrologist Date: 4/17/17

Inches	Description of Horizon
0 TO 9	2 1/2" of brown SL #2 0-9 1/2" SL
9 TO 20	2 1/2" of SL 9-20 1/2" of SL
20 TO 29	1 1/2" of SCF 20-29 1 1/2" of SCF
29 TO _____	
_____ TO _____	
_____ TO _____	

PERCOLATION TEST:

Percolation Test Completed by: _____ Date: 4/17/17

- Weather Conditions: Below 40°F 40°F or above Dry Rain, Sleet, Snow (last 24 hours)
- Soil Conditions: Wet Dry Frozen

Hole No.	***		Reading Interval	Reading No. 1:	Reading No. 2:	Reading No. 3:	Reading No. 4:	Reading No. 5:	Reading No. 6:	Reading No. 7:	Reading No. 8:
	Yes	No		Inches of drop	Inches of drop	Inches of drop	Inches of drop	Inches of drop	Inches of drop	Inches of drop	Inches of drop
1			10/30	2 1/2	2 1/2	2 1/2	2 1/2				
2			10/30	2 1/2	2 1/2	2 1/2	2 1/2				
3			10/30	4 1/4	4	4 1/4	4				
4			10/30	4	4 1/2	4	4				
5			10/30	2 1/4	2	2 1/4	2				
6			10/30	1 3/4	1 3/4	1 1/2	1 1/2				

***Water remaining in the hole at the end of the final 30-minute presoak? Yes, use 30-minute interval; No, use 10-minute interval.

Calculation of Average Percolation Rate:

Hole No.	Drop during final period	Perc. Rate as Minutes/Inch	Depth of Hole
1	2 1/2"	12	12"
2	2 1/2"	12	"
3	4"	7.5	"
4	4"	7.5	"
5	2"	15	"
6	1 1/4"	20	"
TOTAL OF MIN / IN →		74	46.5
TOTAL NO. OF HOLES →		6	12.5

The information provided is the true and correct result of tests conducted by me, performed under my personal supervision, or verified in a manner approved by DEP.

(S) [Signature]
Sewage Enforcement Officer