

PERCOLATION TEST SUMMARY AND DATA FORM

Property Address:					
Legal Description:					
Saturation and Swelling					
Date and time presoak water added:					
Amount of presoak added (gallons):					
Date and time percolation test was started:					
Did water remain in hole after the overnight	swelling period:				
Hole 1 ☐ Yes ☐ No	Hole 2 ☐ Yes ☐ No	Hole 3 ☐ Yes	□No		
Hole 4 ☐ Yes ☐ No	Hole 5 ☐ Yes ☐ No	Hole 6 ☐ Yes	□ No		
Percolation Rate					
Hole 1	Hole 2	Hole 3	-		
Hole 4	Hole 5	Hole 6	_		
А	verage	_			
Certification					
I certify that the information on this for that I performed all tests in accordance with 22. I certify that I have all the competencies	n the provisions of Adam	s County Health Depa	rtment Regulation O-		
Original Signature	Company	Company Name			
Print Name	Address	Address			
Date	Phone	Phone			
	Email				



PERCOLATION TEST RESULT FORM

(Submit additional forms, as necessary)

Hole No.	Hole Depth (in.)	Hole Diameter (in.)	Length of interval (min.)	Water Depth @ Start of Interval (in.)	Water Depth @ End of Interval (in.)	Drop in Level (in.)	Percolation Rate @ Final Interval (min./in.)

Note:

- 1) Field Notes shall be recorded on this form or in this format; typed copies of field records may be submitted on this form.
- 2) A four hour test must be conducted unless (a) water remains in the hole after the presoak in which case one 30 min. interval is sufficient, (b) the first 6" of water seeps away in <30 minutes in which case a one-hour test of 6-10 minute time intervals may be used, (c) the test is being conducted in sandy soils in which case a one-hour test of 6-10 minute time intervals may be used,(d) three successive water level drops do not vary by more than 1/16 inch in which case a two-hour test may be conducted, (e) test is in Dawson Arkose, in which case the test must be run a minimum of four hours until the last three successive water level drops vary by less than 1/16 inch.