

Carl R. Shupe

DWQ Certified

DOPL Licensed Environmental Health Scientist **Onsite Wastewater Level 3**

5630685-2001 00464-OSP-3

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801-814-3036

PERCOLATION TEST CERTIFICATE

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PROPERTY INFORMATION											
159-221 N 4700 West St									15-048-0017		
SITUS ADD	ORESS OF PRO	OPERTY						PARCE	L ID NUMBER (TAX NUMBER)		
Ogden				Utah			84404		4.59		
CITY				STATE			ZIP		Lot Si	ZE	
Unsubdivided											
Additional Information (Subdivision Name, Lot #, etc.)											
VERIFICATION NOTIFICATION											
Contacted Health Department Prior to Testing											
Brett Bunderson>											
Name of Person Contacted											
PERCOLATION TEST											
TESTING DEPTH AND LOCATION											
						nin Soil Test Pit					
DEPTH FROM EXISTING GRADE LOCATION											
TESTING DATE											
2017-10-31 1400-1800 hours 2017-11-01											
Date and Time of Saturation and Swelling Period Date of Percolation Test The time of the graph test week start within sixteen to thirty hours often the saturation and swelling period											
The time of the percolation test must start within sixteen to thirty hours after the saturation and swelling period.											
	Start	Reference	End				mount	Elapsed	I	Other Factors Affecting Test	
	Time	Point	Time	End	Point	_	ropped	Time	MPI	Results	
Start	1625	0	1641	6		6		16	2.7		
2	1643	0	1657	6	10	6	10	14	2.3		
3	1657	0	1702		7/8		7/8	5	2.7		
4	1705	0	1710		1/2		1/2	5	3.3		
5	1711	0	1716	1	7/16	1	7/16	5	3.5		
6				-							
7				_							
8	- balasa T		ha ahawa i	l cat v		luat	ad in aa	aandanaa r	.∺+b IIAC S E] R317-4-14 Appendix D	
	-		ne above	test v	vas conc	luct	ed in ac	cordance	WILLI UAC 9 F	(317-4-14 Appendix D.	
CERTIFIED TESTER											
Carl Shupe Name 801-814-3036 cshupe001@gmail.com Phone Number and Email											
00464-OSP-3											
CERTIFICATION NUMBER EXPIRATION DATE											
() () () () () () () () () ()											
SIGNATURE OF CERTIFIED TESTER							2017 Nov 1 Date of Signature				
DIGNATUR	SIGNATURE OF CERTIFIED TESTER / DATE OF SIGNATURE										

Pictures



