



PERCOLATION TEST DATA LOG

COMPLETE THE FOLLOWING SHEET AND SUBMIT WITH PERCOLATION REPORT

SITE ADDRESS: \_\_\_\_\_

APN: \_\_\_\_\_ TEST PERFORMED BY: \_\_\_\_\_

TEST DATE: \_\_\_\_\_ TEST HOLES WERE PRESATURATED FOR \_\_\_\_\_ HOURS

HOLE #	1				2				3			
	DEPTH											
	TIME (MIN)		WATER LEVEL DROP (IN)	PERC RATE (MIN/IN)	TIME (MIN)		WATER LEVEL DROP (IN)	PERC RATE (MIN/IN)	TIME (MIN)		WATER LEVEL DROP (IN)	PERC RATE (MIN/IN)
	INITIAL	FINAL			INITIAL	FINAL			INITIAL	FINAL		

MINIMUM OF 2 TEST HOLES REQUIRED. MINIMUM OF 3 TEST PER HOLE REQUIRED. AVERAGE PERC RATE MAY BE USED IF 5 OR MORE TEST PER HOLE ARE PERFORMED OTHERWISE SLOWEST PERC RATE SHALL BE USED.

NUMBER OF TEST PER HOLE: \_\_\_\_\_

FINAL RATE TO BE USED IN DESIGN: \_\_\_\_\_ MINUTES PER INCH. SOIL TYPE 

1	2	3	4	5
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SIGNATURE OF QUALIFIED PROFESSIONAL: \_\_\_\_\_