## APPLICATION

PERCODATION TESTING	· · · · · · · · · · · · · · · · · · ·
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HOWARD COUNTY HEALTH DEPARTMENT	DICTRICT
BUREAU OF ENVIRONMENTAL HEALTH	DISTRICT
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 313-2640	DATE 9/5/95
	* . *
O: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND	
I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUC	T (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER Feager Family	
PROPERTY OWNER FEAGER FAMILY	
ADDRESSPHONE _	
AGENT OR PROSPECTIVE BUYER Land Marketing Inc. C/o	Tim Feaga
ADDRESS 3243 Bethany Lane City PHONE	313-8808
21042	
PROPERTY LOCATION:	76-4-
SUBDIVISION Fenge Property LOTNO.	27/675
ROAD AND DESCRIPTION Rt 144 + Folly Quarter	Rd
TAX MAP 16 +23 PARCEL # 34 + 63	
SIZE OF LOT 1 acre +/- TYPE BLDG. S	FD
	(SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES	ITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE
EE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE	UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY WITH ALL MOSH A REQUIREMENTS IN TESTING THIS LOT	/ \ ( - 0
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.	(SIGNATURE OF APPLICANT)
ALL STATE OF THE S	
APPROVED BYFOR	DATE
DISAPPROVED BYFOR	DATE
DIOAFFROYED 81	12-44 N S' S S S S
HOLD PENDING FURTHER TESTS	
REASONS FOR REJECTION OR HOLDING	
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #	DATE
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #	DATE

## THIS IS NOT A PERMIT





