SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

ENVIRONMENTAL HEALTH SERVICES P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

HOWARD COUNTY HEALTH DEPARTMENT

TELEPHONE: 992-2330

A 34799

O: THE COUNTY HEALTH OFFICER		
ELLICOTT CITY, MARYLAND		
I. HEREBY, APPLY FOR THE NECESSARY TEST IN ORD	ER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPO	SAL SYSTEM.
ROPERTY OWNER ALCHOLUS O.		
ADDRESS 3737 Shup Bo	& GLANWOOD, Md 21738 PHO	NE
PROPERTY LOCATION:  UBDIVISION MICHOLOGY Sharp  ROAD AND DESCRIPTION WEST SIDE. Shall	(Phoposal) Parcel 45 Tax Map 21 Tax Map 21 LOT NO.	New 607#3 5-6
OAD AND DESCRIPTION WEST SIDE. Shall	g Rd 1200 St North	of Shady Lane
IZE OF LOT 3ac.	TYPE BLDG.	Residence
THE SYSTEM INSTALLED UNDER THIS APPLICATION I	S ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BE	ECOME AVAILABLE. I FULLY UNDERSTAND THE
	ST APPLICATION IS NON-REFUNDABLE UNDER AN	Y CIRCUMSTANCES. I ALSO AGREE TO COMPLY
EE CONNECTED WITH THE FILING OF THIS PERC TE		
EE CONNECTED WITH THE FILING OF THIS PERC TE	THIS LOT. NICK SHARP	
EE CONNECTED WITH THE FILING OF THIS PERC TE	THIS LOT. MCK SHARP (SIGNATURE	OF APPLICANT)
EE CONNECTED WITH THE FILING OF THIS PERC TE	THIS LOT. MCK SHARP (SIGNATURE) FOR	OF APPLICANT)  DATE
EE CONNECTED WITH THE FILING OF THIS PERC TE  VITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING T  PPROVED BY	THIS LOT. MCK SHARP (SIGNATURE)  FOR  FOR	OF APPLICANT)  OATE  DATE
EE CONNECTED WITH THE FILING OF THIS PERC TE  VITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING TO  PPROVED BY  EJECTED BY  OLD PENDING FURTHER TESTS	THIS LOT. MCK SHARP (SIGNATURE)  FOR  FOR	OF APPLICANT)  OATE  DATE
FEE CONNECTED WITH THE FILING OF THIS PERC TE WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING TO IPPROVED BY REJECTED BY ROLD PENDING FURTHER TESTS	THIS LOT. MCK SHARP (SIGNATURE)  FOR  FOR	OF APPLICANT)  OATE  DATE

## THIS IS NOT A PERM

SOIL PROFILE 0 INDICATE NORTH - NAME ADJUMING ROADWAY AS BASE LINE RD SHARP × Pore 7 min 158 place High PRE-WET TEST - 1" DROP TEST NO. DATE DEPTH START STOP START STOP 1106 3/4/25 REMARKS \_ BACKHOS COLLINS TYPE OF SOIL

## APPLICATIO

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

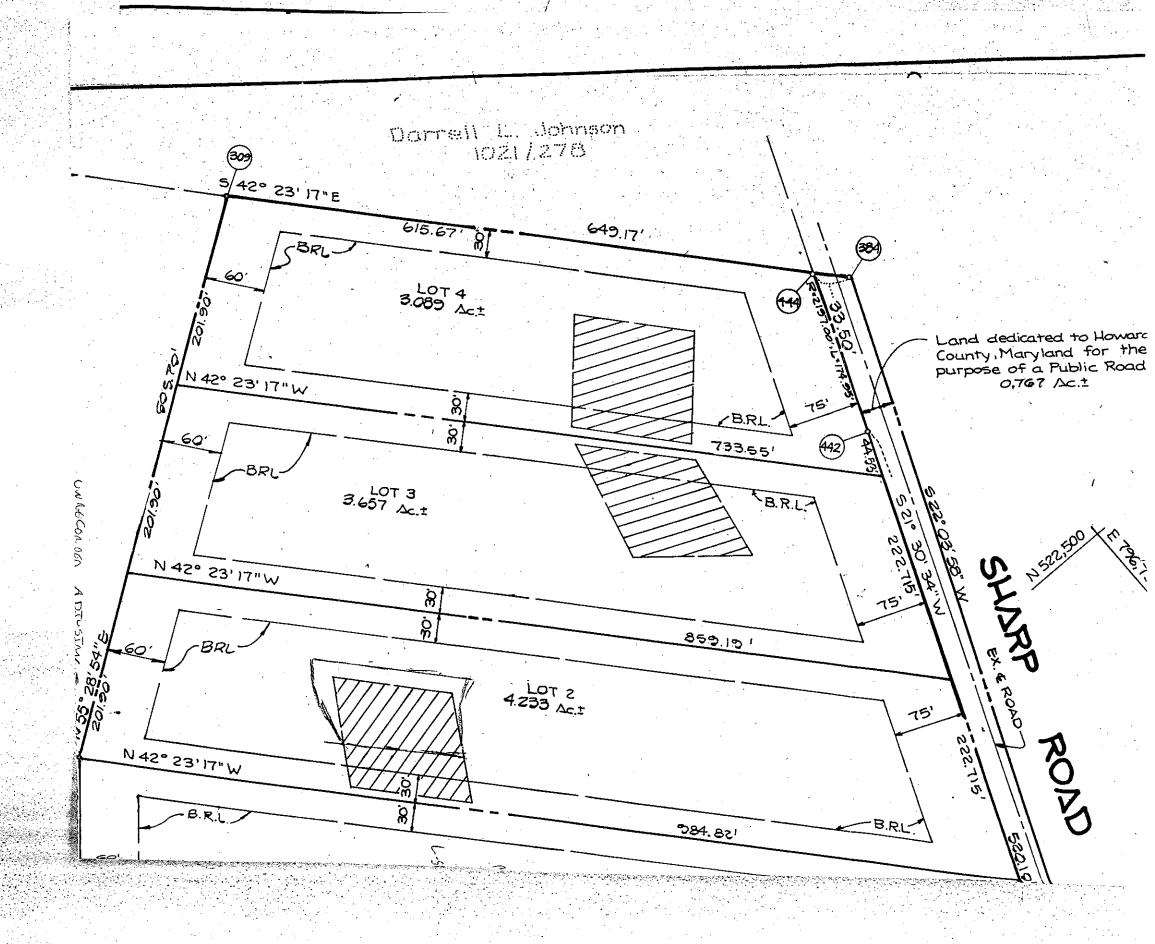
HOWARD COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH SERVICES** 

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 992-2330

THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM. PROPERTY LOCATION: (NUMBER OF BEDROOMS) THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. (SIGNATURE OF APPLICANT) HOLD PENDING FURTHER TESTS REASONS FOR REJECTION OR HOLDING

## THIS IS NOT A PERMIT

Signed Record Plat F-86-189



Signed Perc Cert of 5/8/86 No topography Shown

