

APPLICATION

A 24016

SEWAGE DISPOSAL TESTING

P _____

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: 465-5000, EXT. 356

DISTRICT Fifth

DATE 9/15/76

TO: 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 OWNER Mr. Walter Bucher

ADDRESS Highland Partnership PHONE (8)-588-3100

8777 First Avenue
Silver Spring, MD 20901

PROPERTY LOCATION:

SUBDIVISION Highland Lake LOT NO. 94

ROAD AND DESCRIPTION River Clyde Dr

SIZE OF LOT one acre m/1 TYPE BLDG. 3 or 4 bedroom

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Mr. Walter Bucher

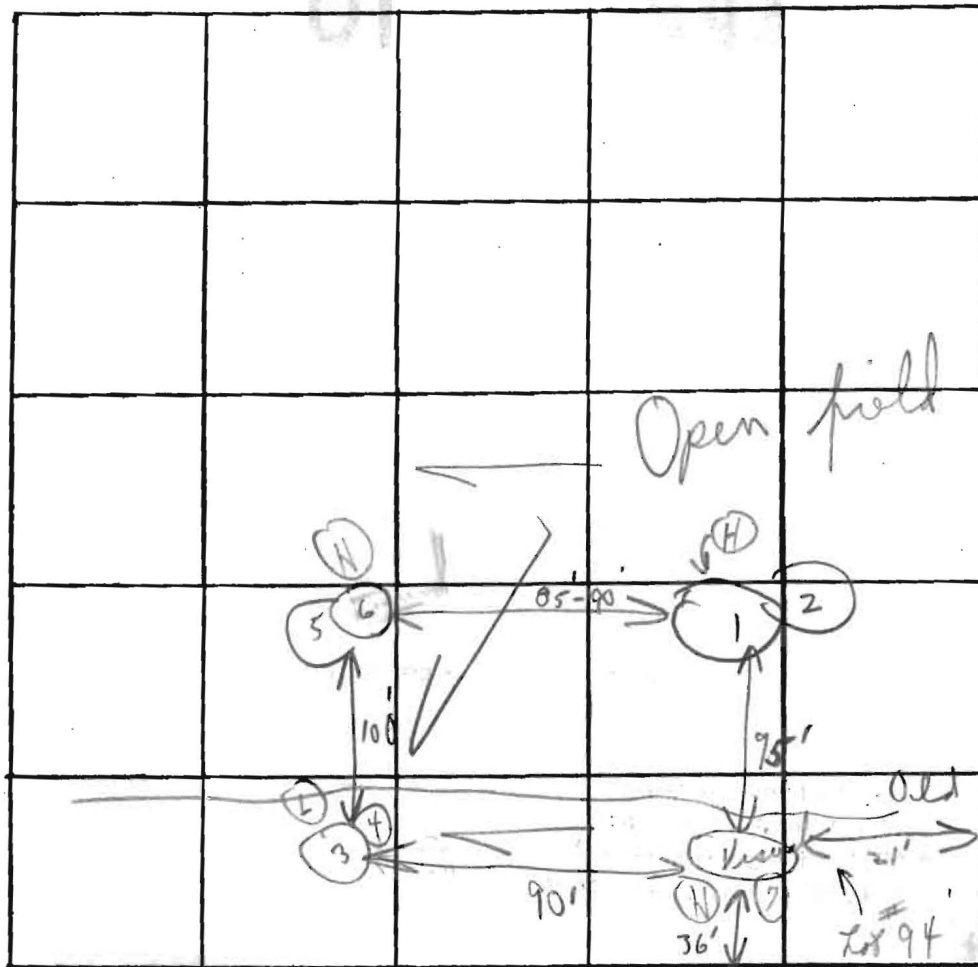
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

River Clyde Drive

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/8/76	1	3'	3:11	3:13	3:13	3:16	3 min
	(H) 2	13'	3:12	3:14	3:14	3:17	3 min
	3	3 1/2'	3:38	3:40	3:40	3:44	4 min
	(L) 4	11'	3:38	3:40	3:40	3:46	6 min
	5	3'	3:23	3:25	3:25	3:28	3 min
	(H) 6	12'	3:22	3:24	3:24	3:30	6 min
	(H) 7	10 1/2'	Visual		1-4 clay 4'-10 1/2'	Sandy loam	5 min

REMARKS

3 holes - similar elevation

TYPE OF SOIL

Sandy loam

TESTED BY

C. B. S.

ALSO PRESENT:

Ketterman & Son

10' { 1-3' 10' sandy loam
11' { 1-3' clay 8' sandy loam
12' { 1-3' clay 9' 1/4 loam

undisturbed

out

5 min