

Recorded 9/22/70
over 500 yds. - Original plot will be at test site.

APPLICATION

SEWAGE DISPOSAL TESTING

A 15509
P _____

MARYLAND STATE DEPARTMENT OF HEALTH
 HOWARD COUNTY *Septic tank to be 1000 gallon* ELLICOTT CITY

DISTRICT 4 DATE 9/8/70

Dry well to be 390 sq ft of absorption below the inlet pipe. Inlet pipe to be 12 ft below original grade. Manhole depth of dry well to be 12 ft below original grade. Locate dry well 4 1/2 ft from property line that runs parallel with St. Michael's road and 132 ft from left side of 50 ft right of way road to property as lot is seen standing St. Michael's road facing lot.

TO: THE COUNTY HEALTH OFFICER
 ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Dayton Barnard & wife

ADDRESS Rt. 3, Mt. Airy, Maryland PHONE 489-4036

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION St. Michael's Church Road - approx. 1/4 mile in from Rt. 144
left side - last house before Hardy Rd. on left is Barnard's - go there

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 18 ± acres TYPE BLDG. 3
 NUMBER OF BEDROOMS Single Fmly. Dwllg.

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Dayton Barnard - Roy Barnard

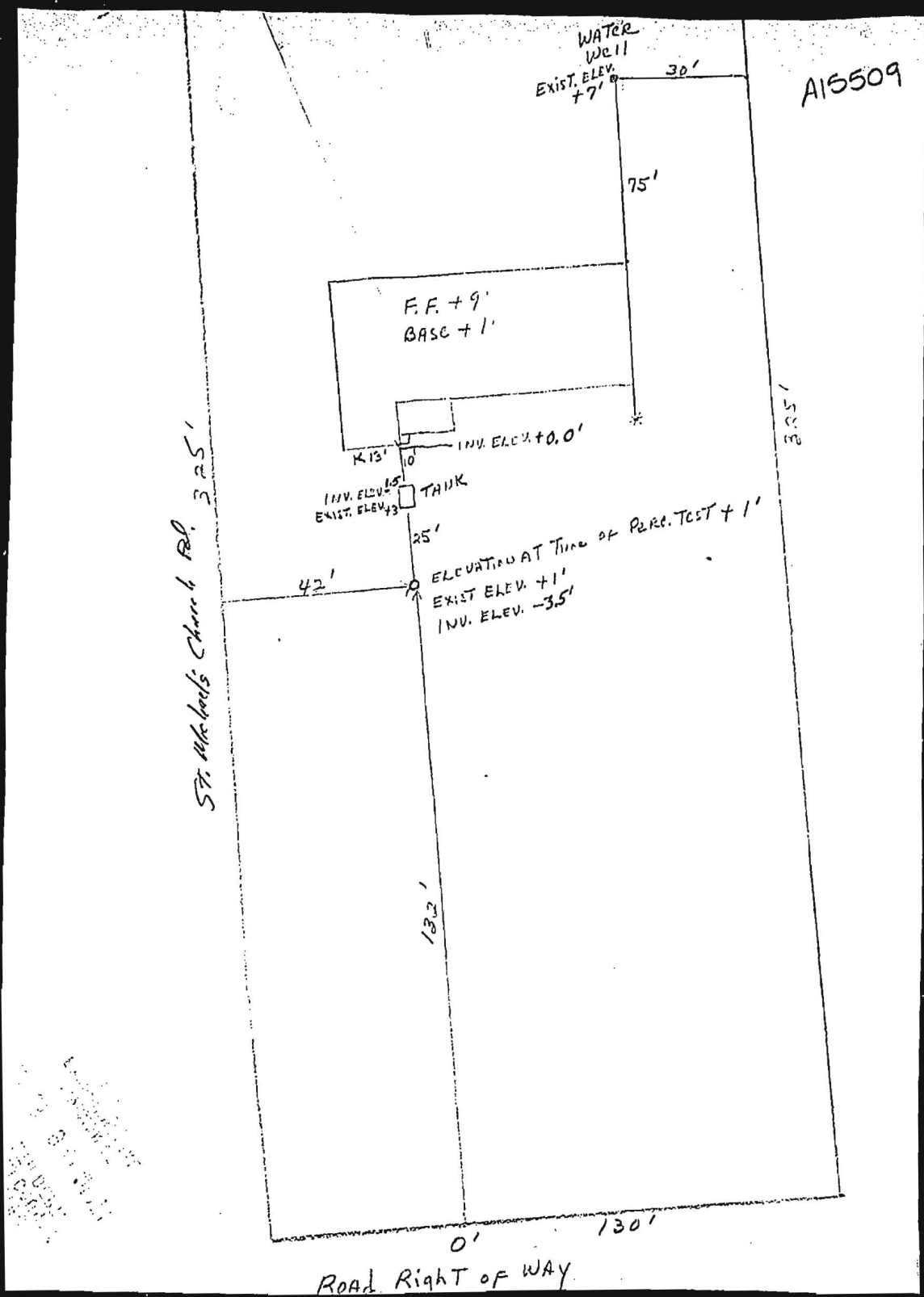
✓ APPROVED BY James T. Wright FOR Dry well DATE 9/22/70

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLCOTT CITY

DISTRICT 4

DATE 7/27/79

*5 Septic Tank - 1000 gal
Dry Well - Dry pit 14 ft deep 15 ft below & top for
12 ft diameter - full on rest of pit with 12 ft Dry Well
Septic tank depth to be 6 ft below like front 5 ft more above pit
ground.*

*Locate dry well about 20 ft below street Dry Well must be
100 ft away from street. All pipes must be test runs available*
TO: THE COUNTY HEALTH OFFICER
ELLCOTT CITY, MARYLAND *located inside*

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Charles Layton & wife

ADDRESS RFD #2, Woodbine, Maryland

PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____

LOT NO. _____

ROAD AND DESCRIPTION Corner of St. Michael's Road & Long Corner Rd. e R₂

OCCUPANT _____

PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____

PHONE _____

SIZE OF LOT 64 acres

TYPE BLOC. _____

Existing house

3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Herman Slik

APPROVED BY W. H. Herring

FOR

(KIND OF SYSTEM)

DATE 7-30-79

REJECTED BY _____

FOR

(KIND OF SYSTEM)

DATE _____

HOLD PENDING FURTHER TESTS _____

DATE _____

REASONS FOR REJECTION OR HOLDING _____

SIGNATURE OF HEALTH OFFICER

DATE

THIS IS NOT A PERMIT

