

APPLICATION

A 21331

P _____

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 465-5000, EXT 336

DISTRICT 3

DATE 4/9/75

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 James R. Dickey

ADDRESS Dickey Farm, Sykesville, Maryland PHONE _____

PROPERTY LOCATION

SUBDIVISION _____ LOT NO. 32

ROAD AND DESCRIPTION Dwy Road - go to end of hard surfaced road

SIZE OF LOT 2.6143 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____
(Single Fmly. Dwllg.)

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

SIGNATURE OF APPLICANT /s/ Boender Associates

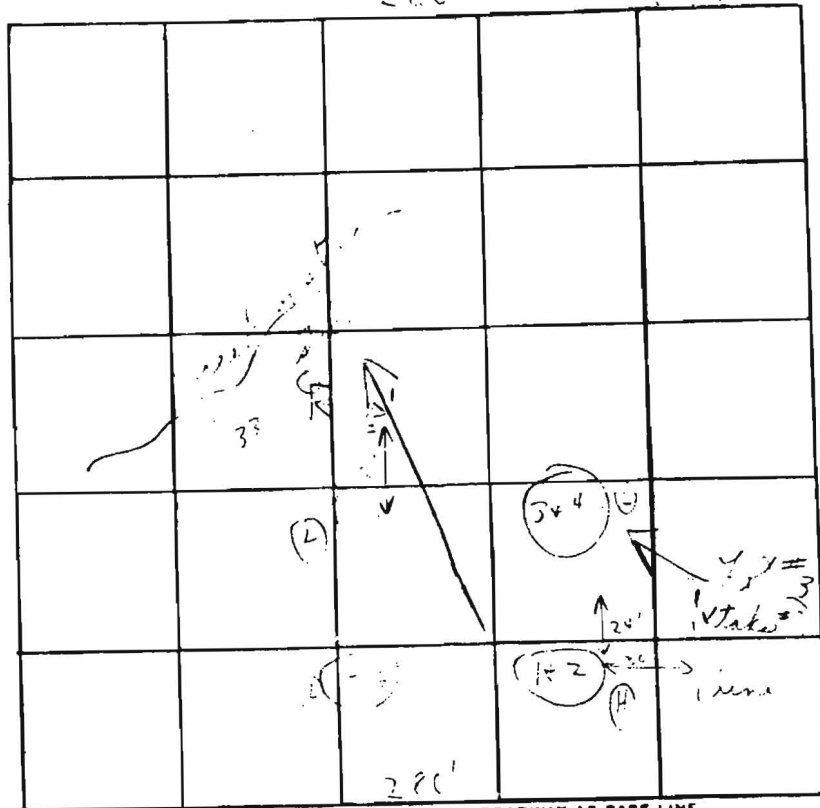
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

1. Test

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 10" DROP		TIME
			START	STOP	START	STOP	
7/1/5	1	4'	2:04	2:10	2:10	2:26	6 min
	2	12 1/2'	2:03	2:10	2:10	2:28	18 min
	3	4'	2:58	2:10	2:10	2:28	18 min
	4	12 1/2'	2:58	2:10	2:10	2:28	18 min
	5	4'	2:12	2:20	2:20	2:24	4 min
	6	12 1/2'	2:15	2:20	2:20	2:26	6 min
	7	11 1/2'	2:15	2:20	2:20	2:26	6 min
	8	5'	2:25	2:32	2:32	2:51	19 min

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT:

Handwritten notes on the right side of the page, including '34', '17 min', '672/123', and other illegible scribbles.