

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 9-11-59

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

ADDRESS

PHONE

PROPERTY LOCATION:

SUBDIVISION

LOT NO.

ROAD AND DESCRIPTION

OCCUPANT

PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE

SIZE OF LOT

TYPE BLDG.

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT

APPROVED BY

FOR

(KIND OF SYSTEM)

DATE

REJECTED BY

FOR

(KIND OF SYSTEM)

DATE

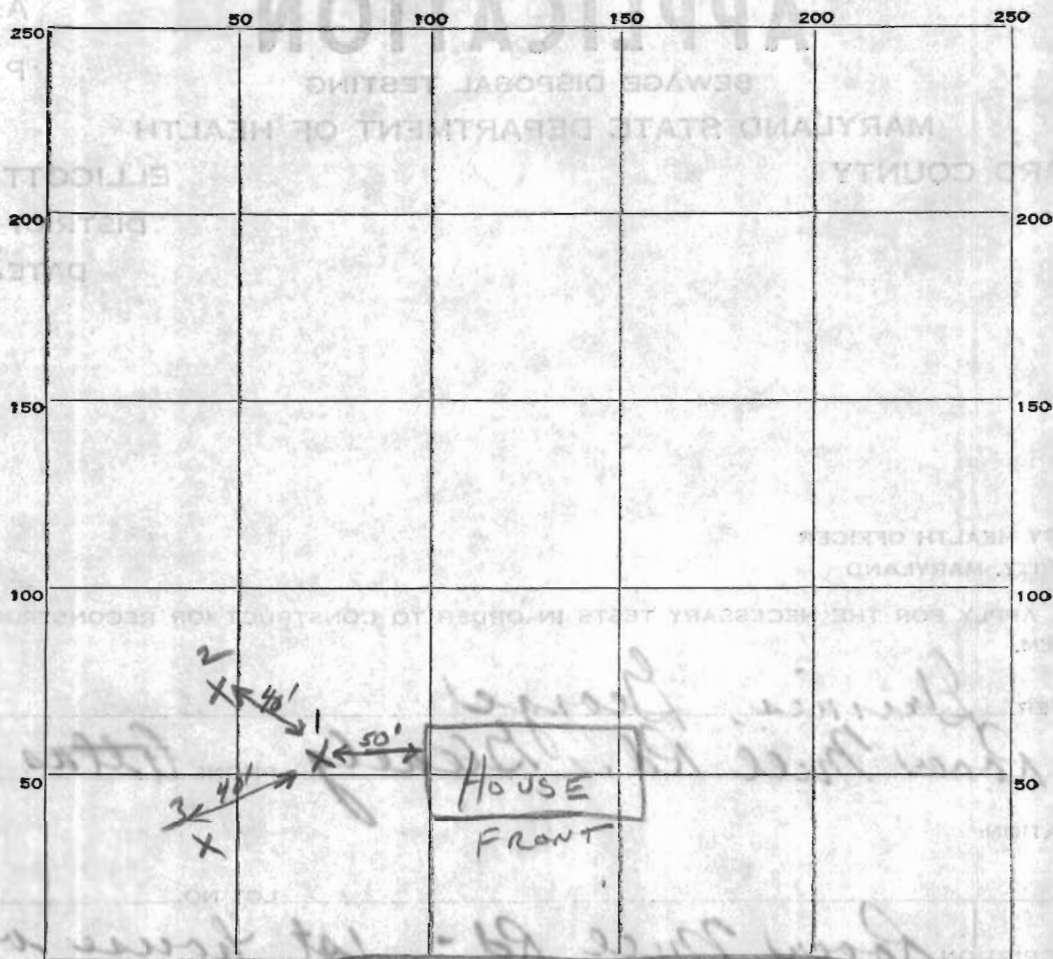
HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

340 sq. ft. of Tile
Field located 50 to 60
ft. from left side foundation
wall of house. Soft side of
house determined to be facing
front of house.
600 gal septic Tank.



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-11-59	1	2 FT	10:48	11:00	11:00	11:24	24 Minutes
	2		10:50	11:00	11:00	11:12	12 Minutes
	3		10:54	1/2 inch at 11:22			

SOIL AUGER FINDING

TESTED BY: J.H.

REMARKS

ALSO PRESENT

LOT NO.