APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT **BUREAU OF ENVIRONMENTAL HEALTH** 3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 313-2640

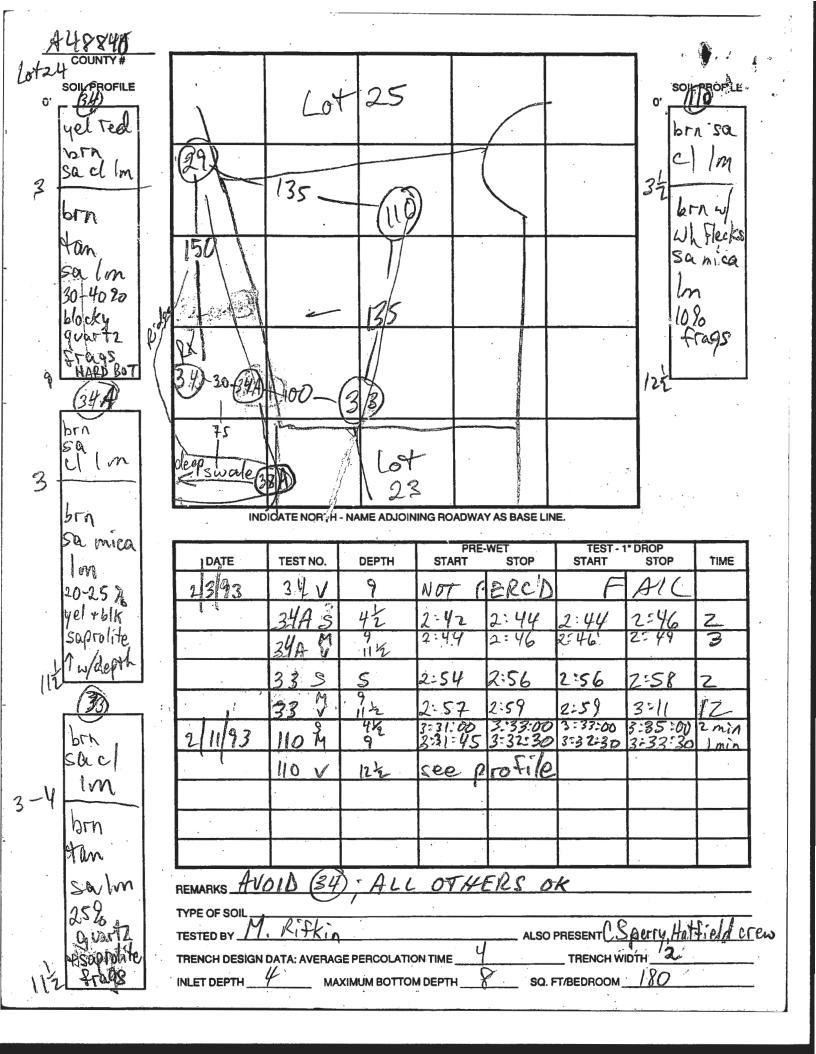
DISTRICT

TO: THE COUNTY HEALTH OFFICER

ELLICOTT CITY, MARYLAND		• •
I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATIO	ON FOR PERMIT TO CON	ISTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
PROPERTY OWNER Joseph M. Zoller III 11696 Carroll Mill Road		•
ADDRESS Ellicott City, Maryland 21	043 P	HONE
AGENT OR PROSPECTIVE BUYER SDC Group, Inc.		
ADDRESS P.O. Box 417, Ellicott City	, MD 21041 _P	HONE (410) 465-4244
PROPERTY LOCATION:		
subdivision Zoller Property		DT NO. 24 P/O 13 2 3
ROAD AND DESCRIPTION Northeast quadrant Fol		
intersection. (11433 Quarte	exfield Driv	BLDG. PERMIT SIGNED
TAX MAP 23 PARCEL# 8,82 & 101		LESCALT ASSOCIO 2364
SIZE OF LOT 1 Ac +/-	TYPE BLOG	Single Family - 3 Banger (SINGLE FAMILY DWELLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE	E ONLY UNTIL PUBLIC	CFACILITIES BECOME AVAILABLE. ! FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLIC	CATION IS NON-REFUI	NDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LO	T By S	(SIGNATURE OF APPLICANT)
APPROVED BY		
DISAPPROVED BY	FOR	DATE
HOLD PENDING FURTHER TESTS		
REASONS FOR REJECTION OR HOLDING		
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. #		DATE
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #		DATE

THIS IS NOT A PERMIT

HD-216 (3/92)

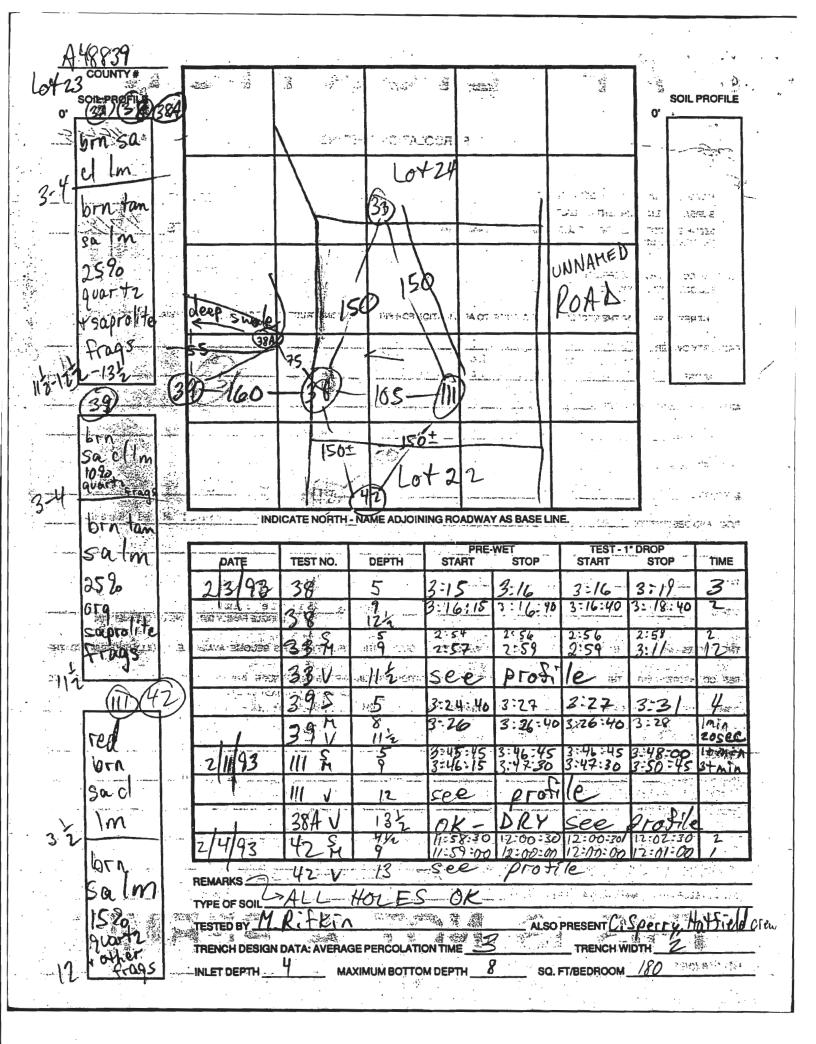


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HOWARD COUNTY HEALTH DEPARTMENT				DISTRICT	
BUREAU OF ENVIRONMENTAL HEALTH			•	DISTRICT_	1//
3525-H ELLICOTT MILLS DRIVE/ELLICOTT C			. A	DATE_	17/93
				. •	
TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND				4	
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PROPERTY OWNER Joseph M. Zo	oller. III				
11696 Carroll	Mill Road	•			
ADDRESS Ellicott City	. Maryland 2104	PH	ONE	-	
AGENT OR PROSPECTIVE BUYERSDC_(***		·
ADDRESS P.O. Box 417, 1	Ellicott City,	MD 21041PH	ONE (410)	465-4244	
		277	`.		
PROPERTY LOCATION:					
SUBDIVISION Zoller Propert			22	17-4	- //
SUBDIVISION Zoller Propert	7		T NO		
ROAD AND DESCRIPTION Northeast	quadrant Folly	Quarter	Road and	Carroll M	ill Road
The All Deserving Heritage					•
intersection.				· .	· · · · ·
TAX MAP 23 PARCEL# 8	,82 & 101	••			
SIZE OF LOT Ac +/-		TYPE BLDG	Single F	amily	•
SIZE OF LOT RC . /			(SINGLE FA	WILY DWELLING O	R COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APP	I ICATION IS ACCEPTABLE C	NIY LINTIL PURLIC	FACILITIES RECO	AF AVAILARLE. L	FULLY LINDERSTAND THE
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COMPLY WITH ALL M.O.S.H.A. REQUIREMEN	NTS INTESTING THIS LOT		tol Bull	RE OF APPLICANT)	
		•	(SIGNATU	TE OF APPLICANT)	
APPROVED BY	·	FOR		DATE	
DISAPPROVED BY		FOR		DATE	
HOLD PENDING FURTHER TESTS			<u></u>	<u> </u>	
REASONS FOR REJECTION OR HOLDING					· · · · · · · · · · · · · · · · · · ·
PERCOLATION TEST PLAT/PRELIMINARY PLAT	-TITLE OR I.D. #	<u>.</u>	-	DATE	·
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE	OR I.D. #	, • :	·	DATE	

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HOWARD COUNTY HEALTH DEPARTMENT DISTRICT BUREAU OF ENVIRONMENTAL HEALTH 3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 DATE **TELEPHONE: 313-2640** TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM. PROPERTY OWNER Joseph M. Zoller, III 11696 Carroll Mill Road ADDRESS Ellicott City, Maryland 21043 PHONE_ AGENT OR PROSPECTIVE BUYER SDC Group, Inc. ADDRESS P.O. Box 417, Ellicott City, MD 2104 PHONE (410) 465-4244 PROPERTY LOCATION: SUBDIVISION Zoller Property ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road TAX MAP 23 PARCEL# 8,82 & 101 Single Family SIZE OF LOT | Ac +/-(SINGLE FAMILY DWELLING OR COMMERCIAL) 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. ___ ___ FOR _______ FOR HOLD PENDING FURTHER TESTS... REASONS FOR REJECTION OR HOLDING ____ PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _______ DATE ______ SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. #_

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