

APPLICATION

A 1066
P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 470, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 468-8400, EXT. 300

DISTRICT 4th
DATE 3/27/73

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 H. THOMAS GRIBBS (Contract Purchaser - Peter M. Schwartz)
350 Highland Road, Glen Burnie, Md.
ADDRESS _____ PHONE 763-2506

PROPERTY LOCATION:

SUBDIVISION Route 94 LOT NO. _____

ROAD AND DESCRIPTION Route 94 - West at the little red barn at Courtney Place (Arnold
Septic Service)

SIZE OF LOT 5.035 acres TYPE BLDG. 3 or 4 bedrooms
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/ David Arnold

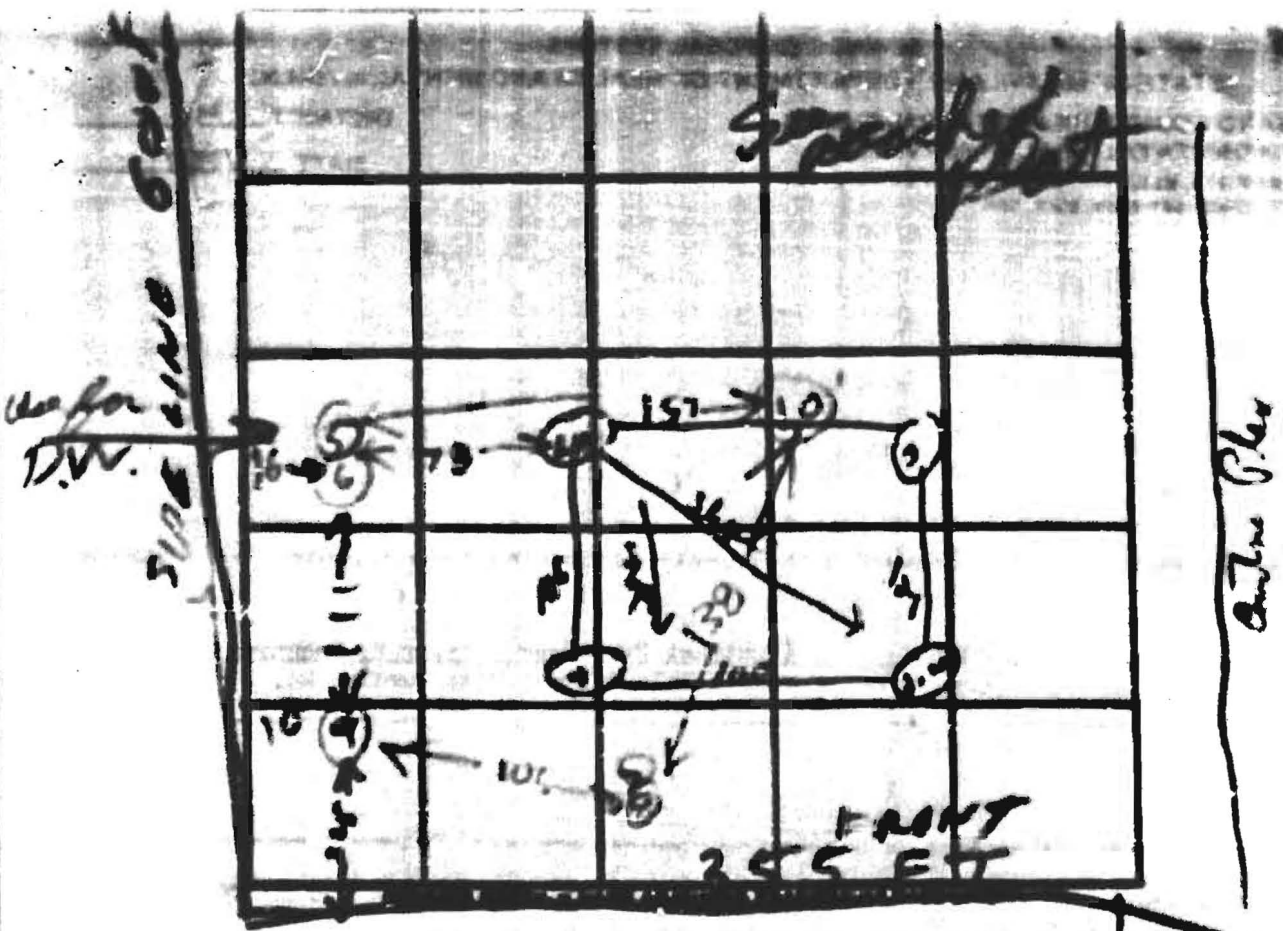
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



NO.	DEPT	DPTH	CORRECT		CORR - 1" CORR		TIME
			START	STOP	START	STOP	
1	12 1/2	10	LE	position			
2	10	4 1/2	10	LE	10	10	15
3	10 1/2	10	LE	10	10	10	12
4	10 1/2	10	LE	overlimes			
5	4	149	203	203	229	20	
6	10 1/2	150	152	152	156	4	
7	10 1/2	203	204	204	206	2	
8	3 1/2	204	207	207	215	8	

REMARKS: TOP OF GROUND NO WATER

TYPE OF SOIL: 10 1/2 9 1/2 TOP SOIL WITH SAND AND WATER

TESTED BY: _____