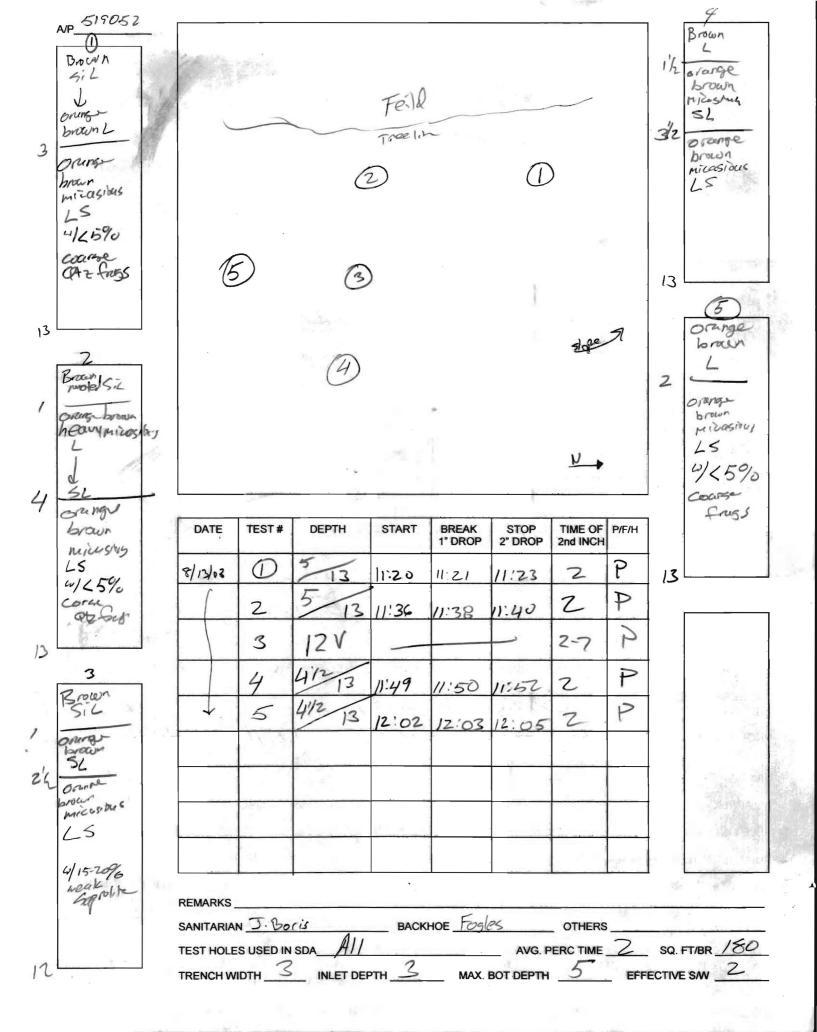


APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) 8/3/03	TI	EST TIME 9:00	A/P	510952	
AGENCY REVIEW:			DATE	7/15/03	
DO NOT WRITE ABOVE THIS LINE					
I HEREBY APPLY FOR THE NECESSARY TESTING CHECK AS NEEDED: CONSTRUCT NEW SEPTIC SYSTEM(S) REPAIR/ADD TO AN EXISTING SEPTIC REPLACE AN EXISTING SEPTIC SYSTEM	SYSTEM	CHECK AS NEEDED: NEW STRUCTURE(S) XISTING STRUCTURE		
CHECK ONE: CREATE NEW LOT(S) BUILD ON AN EXISTING LOT IN A SUBI BUILD ON AN EXISTING PARCEL OF R		IS THE PROPERTY WITH YES NO	IIN 2500' OF ANY RES	ERVOIR?	
THE TYPE OF STRUCTURE IS: RESIDENTIAL WITH PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE <i>UNKNOWN</i> IF APPROPRIATE) COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN) INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)					
PROPERTY OWNER(S) Mercer, P	hilip 1 + Cay				
DAYTIME PHONE 410 964 9815	_ CELL		FAX		
MAILING ADDRESS 11208 Richard STREET	nark Row C	CITY/TOWN	MD STATE	21044 ZIP	
APPLICANT					
DAYTIME PHONE	CELL		FAX		
MAILING ADDRESSSTREET	*	CITY/TOWN	STATE	ZIP	
APPLICANT'S ROLE: DEVELOPER B	UILDER BUYER	RELATIVE/FRIEND	REALTOR	CONSULTANT	
	selin Proper	ty	LOT NO		
PROPERTY ADDRESS 4747 Teasurement of STREET			ST OFFICE		
TAX MAP PAGE(S) 28 GRID	PARCEL(S)	301 PR	OPOSED LOT SIZE	3.8	
AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPT-					
ABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A					
SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND					
"MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.					
TEST RESULTS WILL BE MAILED TO APPLIC	ANT	SIGNATURE OF APP	LICANT		
* *		SIGNATURE OF AFF	LIOAN		

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM 3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648 TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH



APPLICATION

PERCOLATION TESTING

A <u>519052</u>
P_____
DISTRICT <u>5th</u>
DATE 7/15/03

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

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRU	CT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.				
ADDRESS 1208 Ridermark Row 21044 PHONE	410-964-9815				
1.1/1	70 101 1013				
AGENT OR PROSPECTIVE BUYER					
ADDRESSPHONE					
PROPERTY LOCATION:					
SUBDIVISION R. L. Gosselin Property LOTNO.	7 6				
ROAD AND DESCRIPTION 4747 Ten Oaks Road, Payt	on, Maryland Z1036-1124				
TAX MAP 28 PARCEL # 301					
SIZE OF LOT 3.8 AC. TYPE BLDG.	(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	E UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO				
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.	(SIGNATURE OF BALICANT)				
APPROVED BY FOR	DATE				
DISAPPROVED BYFOR	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)

