



Bureau of Environmental Health
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Maura J. Rossman, M.D., Acting Health Officer

APPLICATION

FOR PERCOLATION TESTING AND SITE EVALUATION

54165

PROPERTY LOCATION

SUBDIVISION/PROPERTY NAME Brantly LOT # 11

PROPERTY ADDRESS 3348 Brantly Rd
STREET

TAX ACCOUNT # 337530 TAX MAP 21 GRID 6 PARCEL 185 TOWN ZONING DESIGNATION District 4
STREET TOWN ZIP

PROPERTY OWNER(S) Tom Hanlon

DAYTIME PHONE CELL 410-707-3148 EMAIL

MAILING ADDRESS 3348 Brantly Rd Glenwood, Md 21738
STREET CITY, STATE ZIP

APPLICANT Fogle's Septic Clean, Inc RELATIONSHIP TO OWNER: Consultant

DAYTIME PHONE 410-795-5670 CELL 410-984-5211 EMAIL

MAILING ADDRESS 580 Obrecht Rd Sykesville, MD 21784
STREET CITY, STATE ZIP

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S):

- BUILDING:
- RESIDENTIAL WITH 4 EXISTING OR PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE
 - COMMERCIAL (PROVIDE DETAIL OF TYPE OF USE AND NUMBERS OF EMPLOYEES/CUSTOMERS ON ACCOMPANYING PLAN)

- PROPERTY:
- SUBDIVISION: NUMBER OF LOTS INCLUDING RESIDUE: _____
 - CONSTRUCT NEW OSDS ON UNDEVELOPED LOT
 - REPAIR OR REPLACE FAILING OSDS
 - UPGRADE EXISTING OSDS

IS THE PROPERTY WITHIN 2500 FEET OF ANY RESERVOIR?
 YES
 NO

AS APPLICANT, I UNDERSTAND THE FOLLOWING:

- THIS APPLICATION IS VALID FOR TWO(2) YEARS FROM DATE OF FEE PAYMENT AND APPROVAL IS BASED UPON HEALTH OFFICER SIGNATURE OF A PERC CERTIFICATION PLAN PRIOR TO EXPIRATION OF THIS PERMIT.
- THE APPLICATION FEE IS NON-REFUNDABLE
- THIS APPLICATION MUST BE ACCOMPANIED BY ALL APPLICABLE FEES AND A SUITABLE SITE PLAN IN ORDER TO BE PROCESSED
- THIS IS A PUBLIC DOCUMENT

I declare and affirm that to the best of my knowledge, the information contained herein is correct. I declare that I am the owner of the property or duly authorized to make this application on behalf of the owner. I agree to comply with all applicable state and county regulations.

By signature of this application, I hereby grant Howard County Health Department officials the right to enter onto the property for the purpose of inspecting the property as directly related to the requested permit/service.

 SIGNATURE OF APPLICANT DATE