

September 16, 1971

Mr. Joseph M. Mamana
1133 Fifteenth Street, N. W.
Washington, D. C. 20005

Dear Sir:

The five (5) lots of the R. E. Greenfield property, et al,
on Route 27 & Windsor Forest Road, have passed the standard percolation
test but final approval cannot be given until a record plat is received.

Very truly yours,

Donald W. Monaghan,
Sanitarian

DWM:jr

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

A 16135

P _____

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 R. E. Greanfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md. PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 1 (parcel)

ROAD AND DESCRIPTION next lot to corner of Route 27 & Windsor Forest Rd.

OCCUPANT _____ PHONE _____

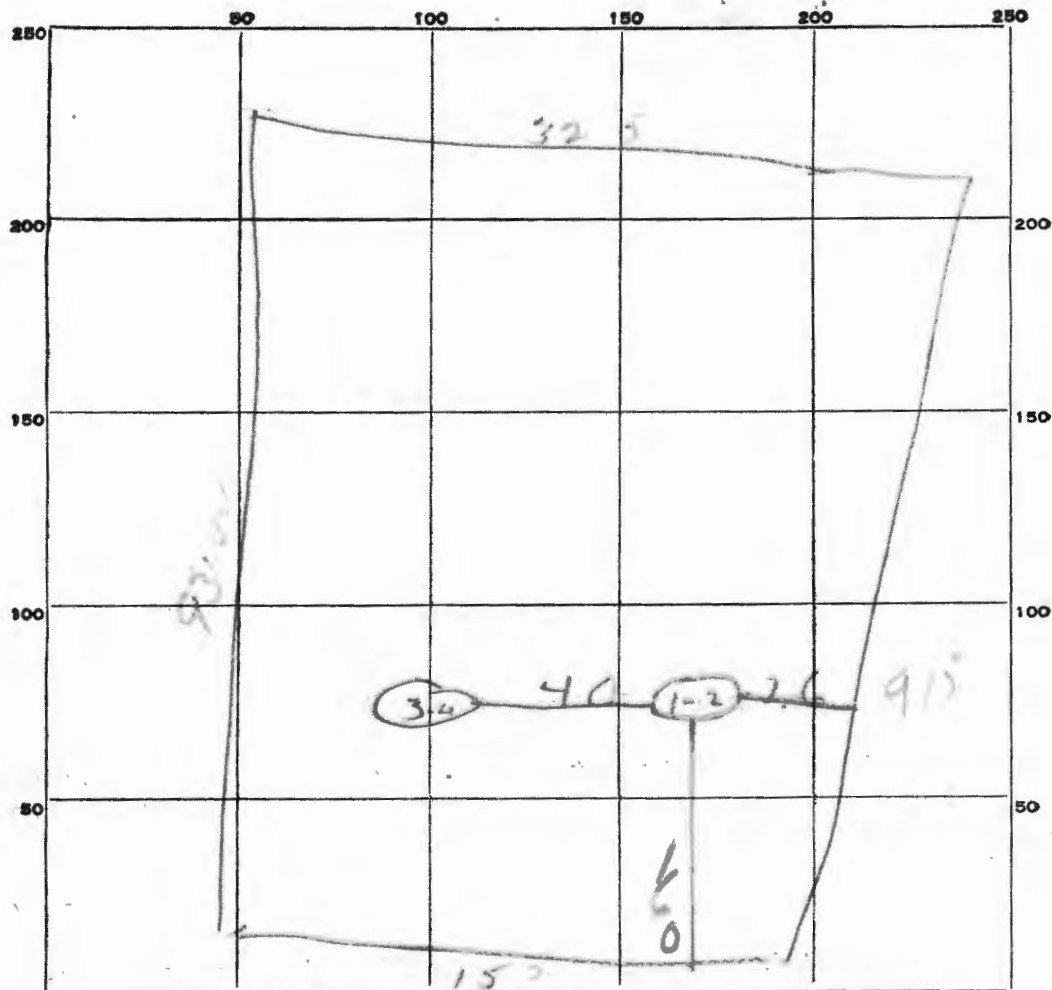
PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

(Single Fmly. Dwllg.)



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

RT 27

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/8/71	1	2 1/2	10 <u>27</u>	10 <u>29</u>	10 <u>29</u>	10 <u>34</u>	5 min
	3	2 1/2	10 <u>29</u>	10 <u>30</u>	10 <u>30</u>	10 <u>33</u>	3 min
	4	9 ft	10 <u>32</u>	10 <u>38</u>	10 <u>38</u>	10 <u>55</u>	17 min
Same as p. 1	10		40 <u>40</u>	45 <u>45</u>	45 <u>45</u>	52 <u>52</u>	

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

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 R. E. Greenfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 3 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

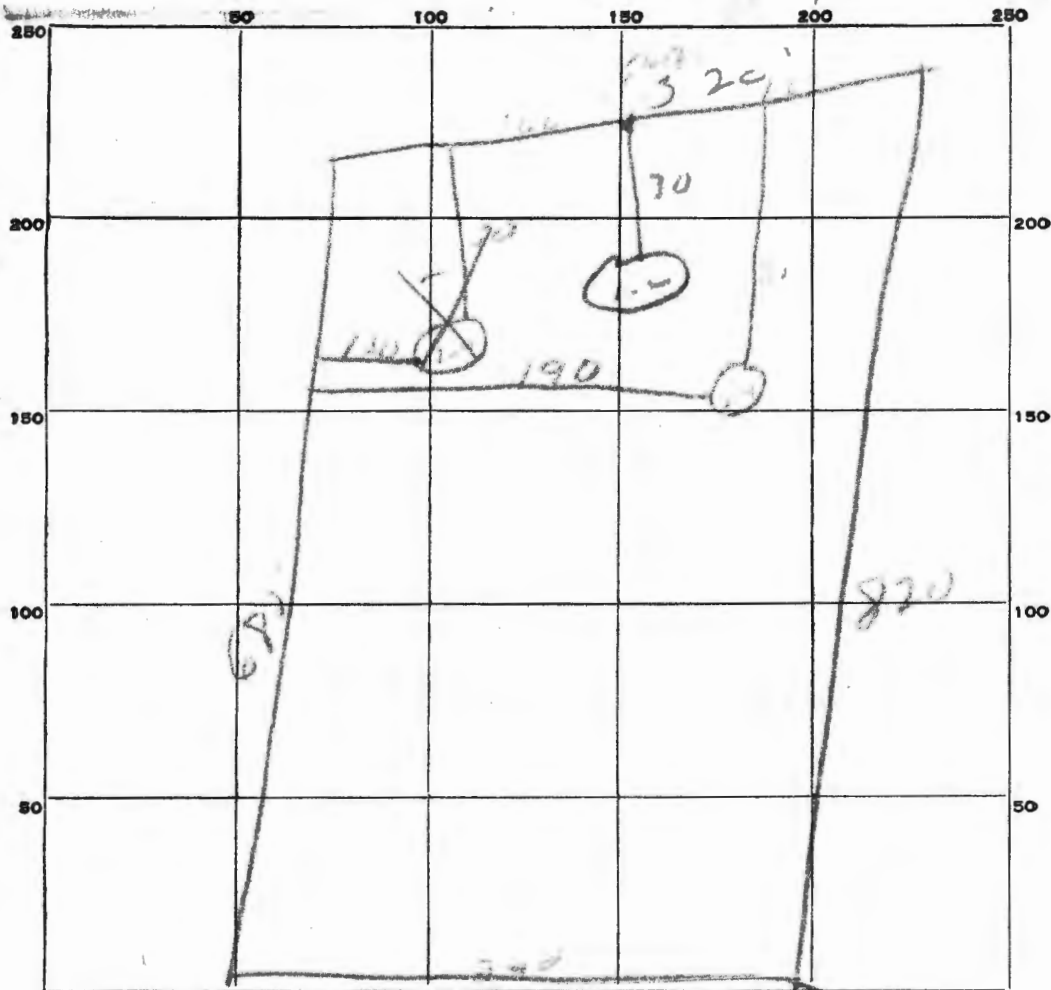
SIZE OF LOT 5.00 acres

TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

A 16137

P _____



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

W. Main Street

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7-8-71	1	9 ft	11 ²³			11 ²³	1 min
	2	2 ft	11 ²⁷	11 ²⁵	11 ²⁵	11 ²⁷	1 min
	3	1 ft	12 ⁵⁸	12 ⁵³	12 ⁵³	12 ⁵⁸	4 min

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MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

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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 R. E. Greenfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md. PHONE 948-9487
Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 1 (parcel)

ROAD AND DESCRIPTION next lot to corner of Route 27 & Windsor Forest Rd.

OCCUPANT _____ PHONE _____

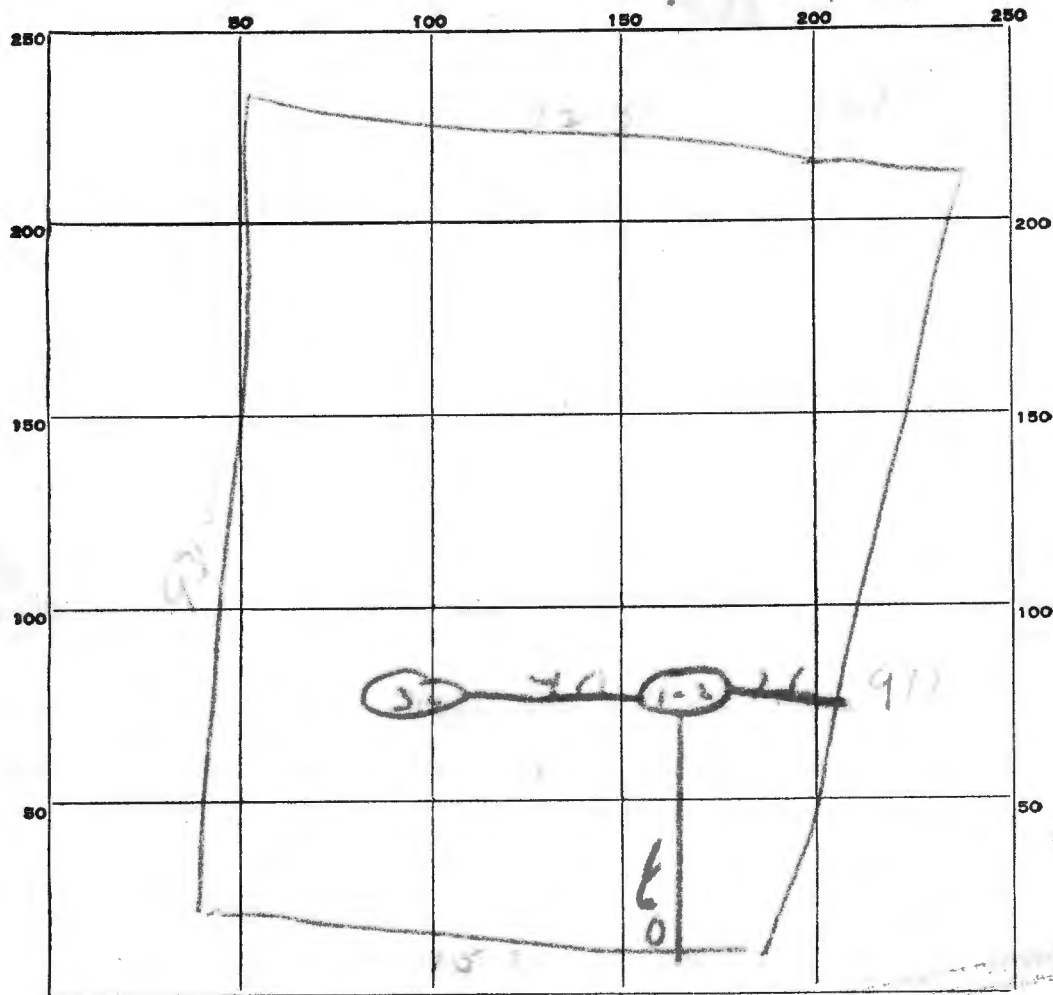
PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwlla.)

Sealed
Preliminary
98
9/1/71
9:30



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/71	1	2 1/2	10 <u>27</u>	0 <u>29</u>	10 <u>38</u>	0 <u>34</u>	5 min
	3	2 1/2	10 <u>39</u>	10 <u>70</u>	10 <u>30</u>	10 <u>33</u>	3 min
	4	9 ft	10 <u>32</u>	10 <u>38</u>	10 <u>38</u>	10 <u>55</u>	17 min
	12		10 <u>40</u>	10 <u>43</u>	10 <u>43</u>	10 <u>52</u>	

Sound as per

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

A 16139

P _____

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 R. E. Greenfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 5 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

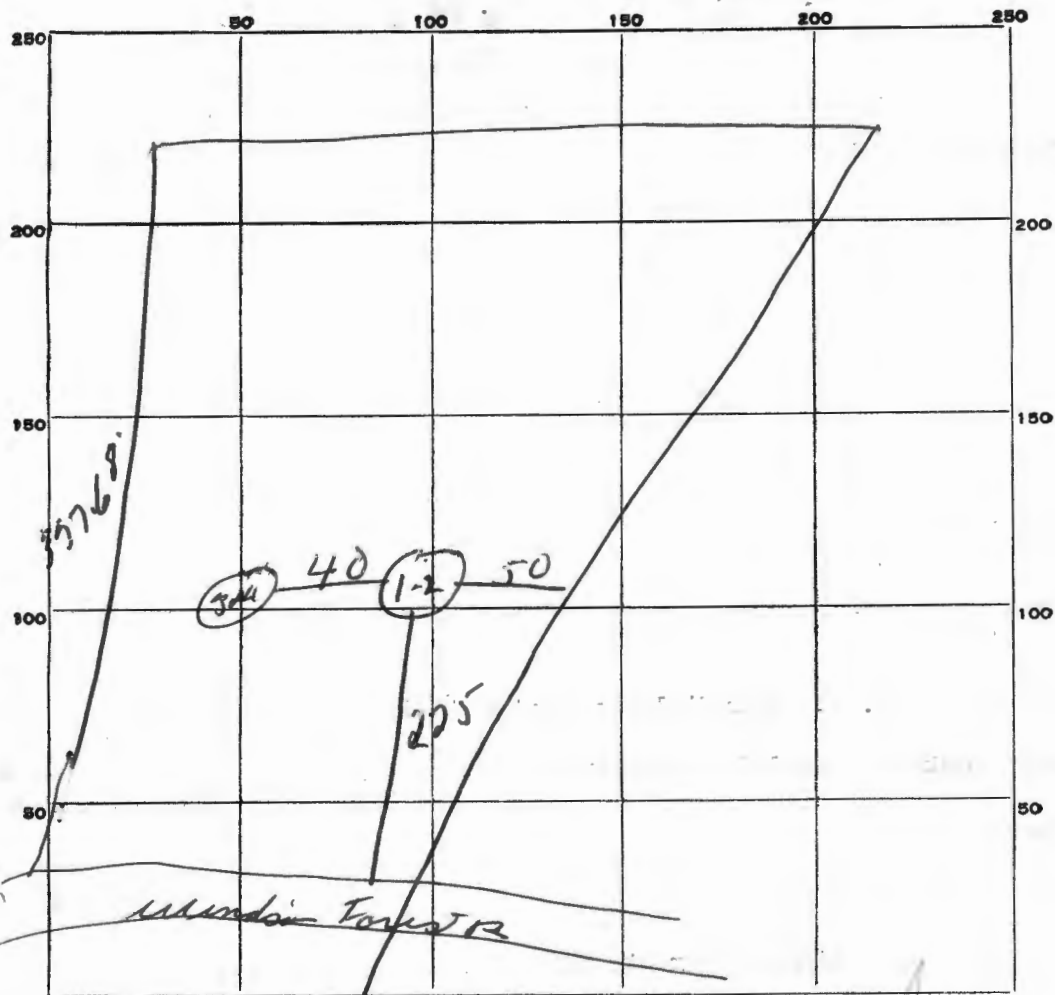
PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 6.00 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

(Single Fmly. Dwlla.)



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/8/11	1	90	1 50	1 53	1 53	2 00	7m
	2	30	1 52	1 58	1 58	2 16	18min
	3	90	2 02	2 04	2 04	2 10	6m
			03	06	06	19	13m

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MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

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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 R. E. Greenfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 5 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

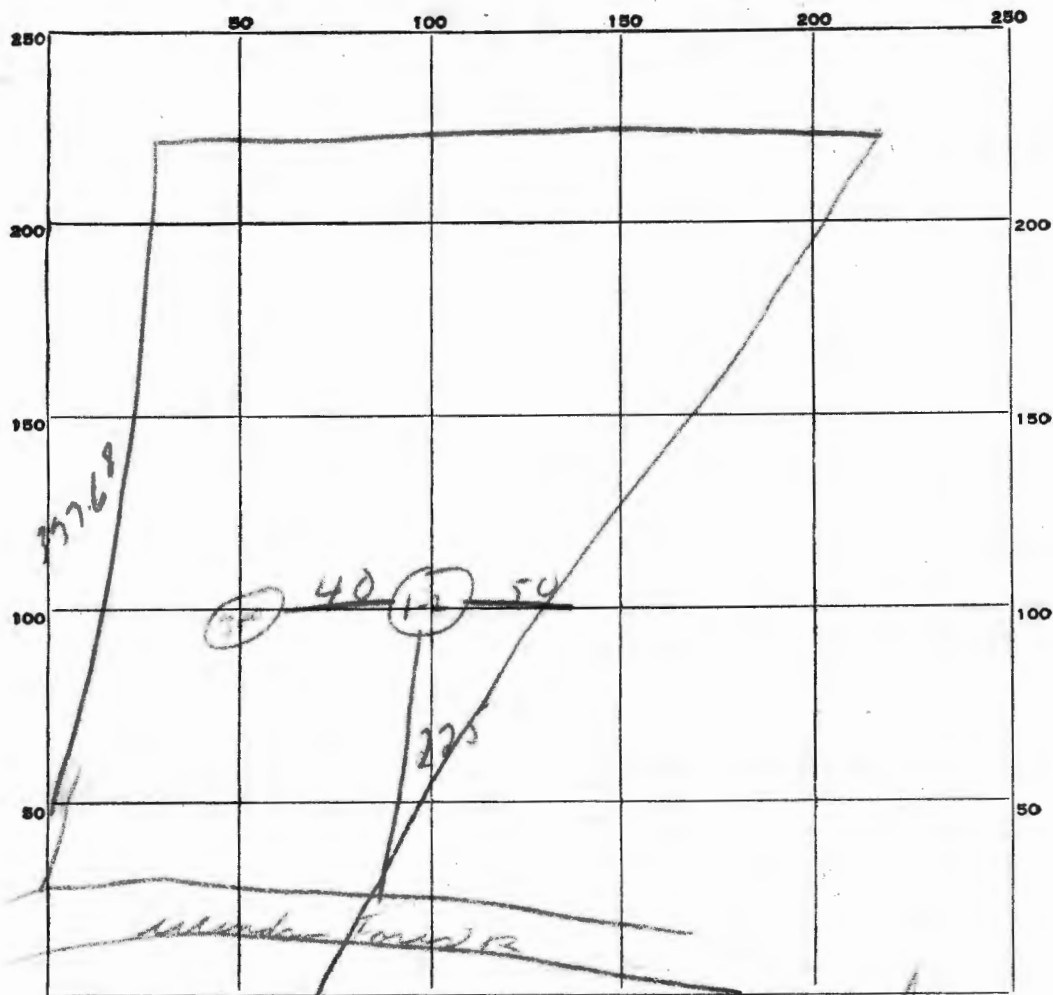
OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 6.00 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

[illegible]

TESTED BY _____

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

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 Raymond E. Greenfield et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 6.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____
(Single Fmly. Dwllg.)

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

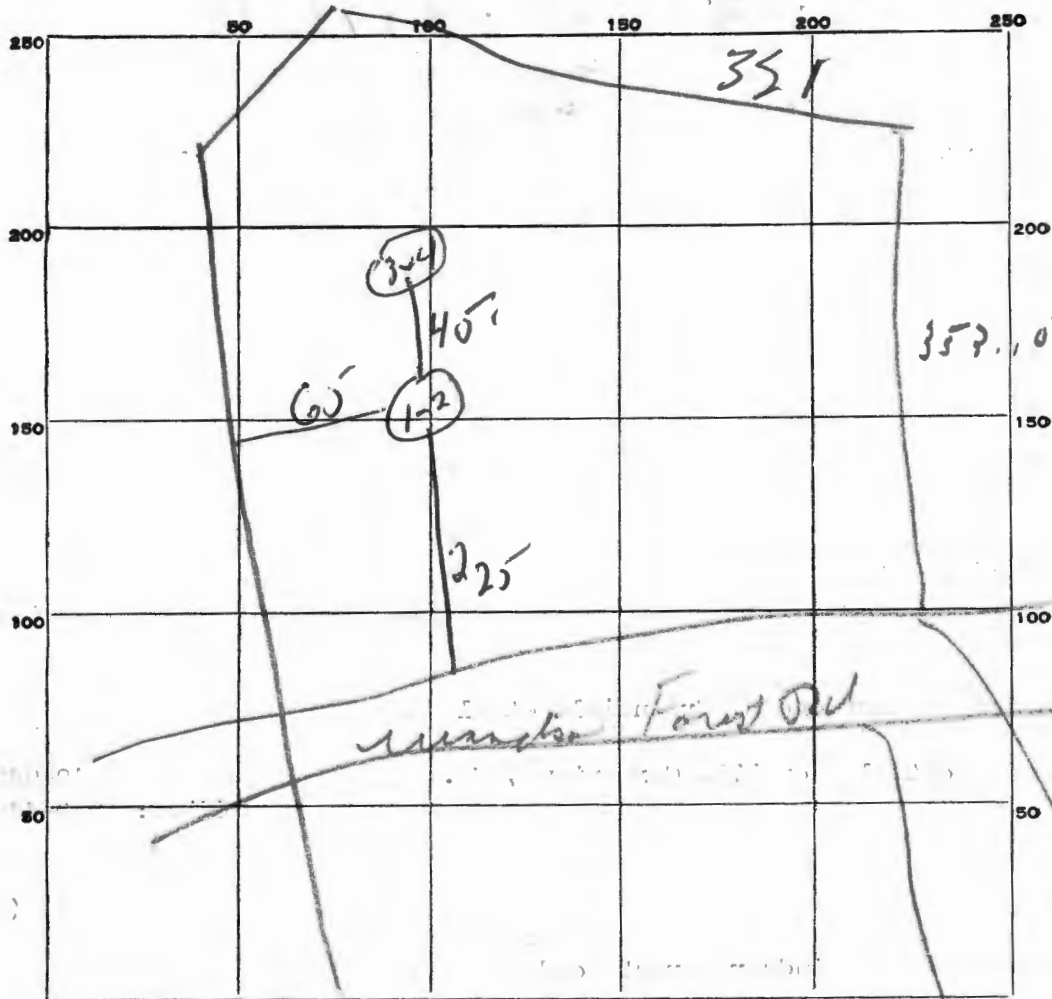
REJECTED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/8/11	1	3 ft	2 10	2 19	2 19	2 40	21 min
	2	8 ft	2 12	2 15	2 15	2 22	7 min
	3	3 ft	2 18	2 20	2 30	2 53	23 min
	4	9 ft	2 19	—	—	2 25	6 min

SOIL AUGER FINDING

TESTED BY

[Signature]

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

A 16138

P _____

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 Raymond E. Greenfield et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 6.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____
(Single Fmly. Dwllg.)

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

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

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

A 16138

P _____

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

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 Raymond E. Greenfield et al

ADDRESS Route 1, Box 171, Germantown, Md. PHONE 948-9487
Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 6.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____
(Single Fmly. Dwllg.)

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

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

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

A 16136

P _____

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 R. E. Greenfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 2 (parcel)

ROAD AND DESCRIPTION Corner of Route 27 & Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE (Single Fmly. Dwlg.)

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

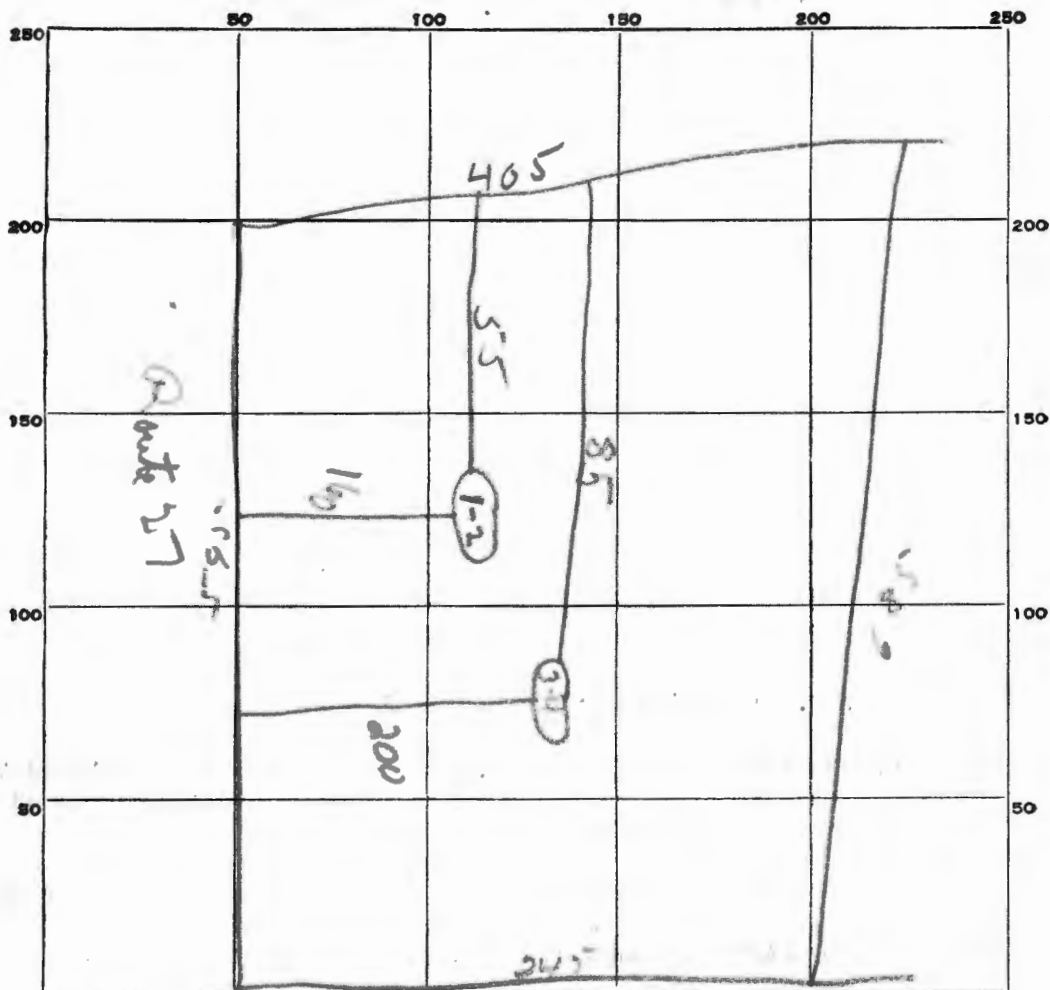
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Mindon Forest Rd

[illegible]

SOIL AUGER FINDING.

TESTED BY.

REMARKS

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

A 16136

P _____

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 2 (parcel)

ROAD AND DESCRIPTION Corner of Route 27 & Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.0 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____
(Single Fmly. Dwllg.)

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

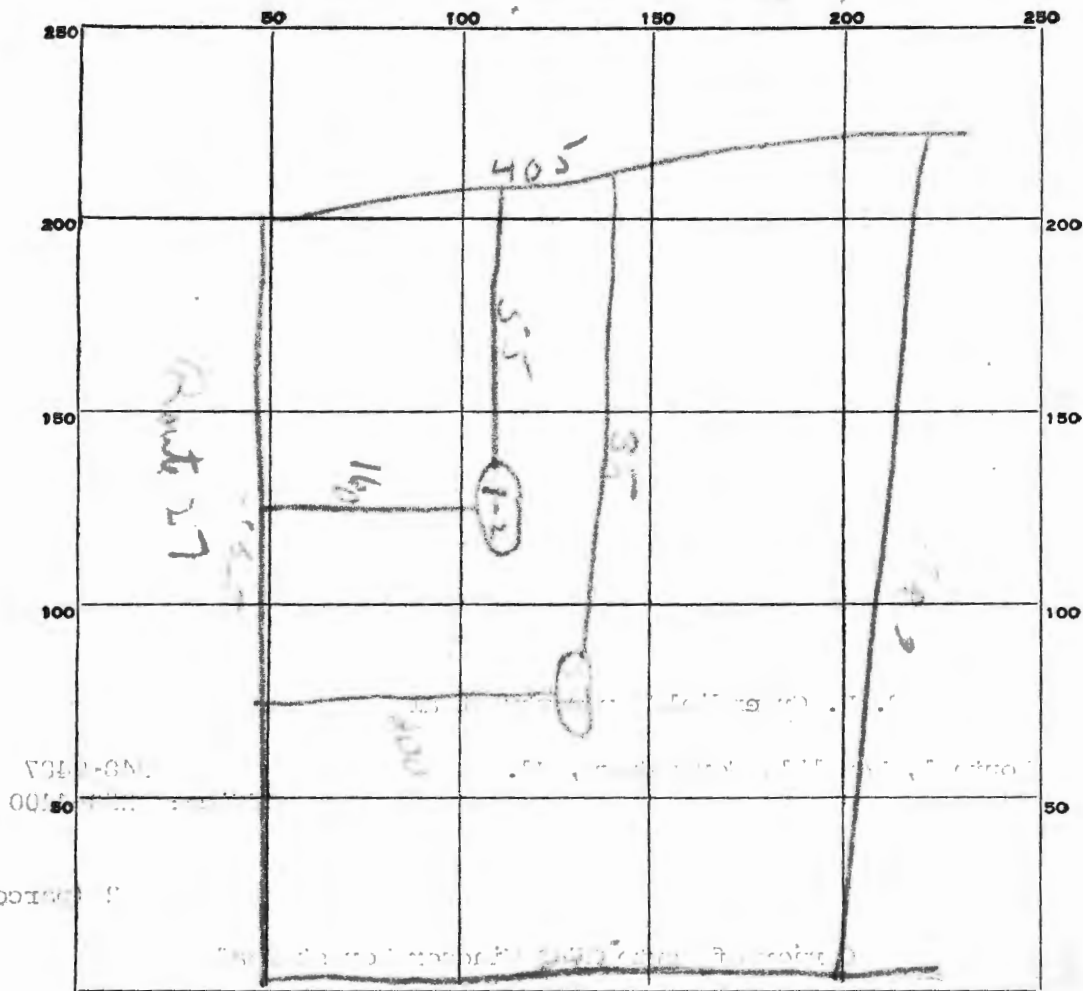
REJECTED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9-2-71	1	9 ft	10:57			11:00	3 min
	2	10 ft	11:00			11:10	10 min
	3	9 ft	11:05	11:07	11:07	11:12	5 min
	4	2 ft	11:12	11:10	11:10	11:15	5 min

SOIL AUGER FINDING

TESTED BY

REMARKS

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4

DATE 7/23/71

A 16137

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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 R. E. Greenfield Property et al

ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 3 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.00 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

(Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

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REASONS FOR REJECTION OR HOLDING _____

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ADDRESS Route 1, Box 171, Germantown, Md.

PHONE 948-9487

Office: 253-4400

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 3 (parcel)

ROAD AND DESCRIPTION Windsor Forest Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 5.00 acres TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____
(Single Fmly. Dwllg.)

SIGNATURE OF APPLICANT /s/ Raymond E. Greenfield

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

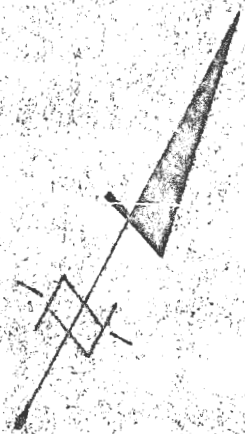
THIS IS NOT A PERMIT

JOSEPH M. MAMANA

ATTORNEY AT LAW

**TELEPHONE
(202) 466-8270**

**1133 FIFTEENTH STREET, N. W.
WASHINGTON, D. C. 20005**



Levi O Campbell
512/253

RTE

P=1482.39
C=46.81

67.49
528.0000E
46.2045
C=1232.39
C=52.2
15.56
N 100° 11' 00" E

Henson Jones
314/641

100' R.O.W.

175

179

23/81
aney

108



C. B. Jones