

Fill out in triplicate.
Make \$15.00 check payable to
Howard County Health Dept. - Sanitation

APPLICATION

A 13905
P _____

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY
DISTRICT 4
DATE 8/29/68

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 Richard Talley

✓ ADDRESS Box 238, M. Laurel, Maryland PHONE 725-2244

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

✓ ROAD AND DESCRIPTION Daisy Rd. off Rt. 144 - 1/2 mile in on left - look for red flag as marker

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

✓ SIZE OF LOT 1.31 acres TYPE BLDG. 4

NUMBER OF BEDROOMS

(Single Fmly. Dwllg.)

IF NOT SINGLE RESIDENCE DESCRIBE _____

✓ SIGNATURE OF APPLICANT R. H. Talley

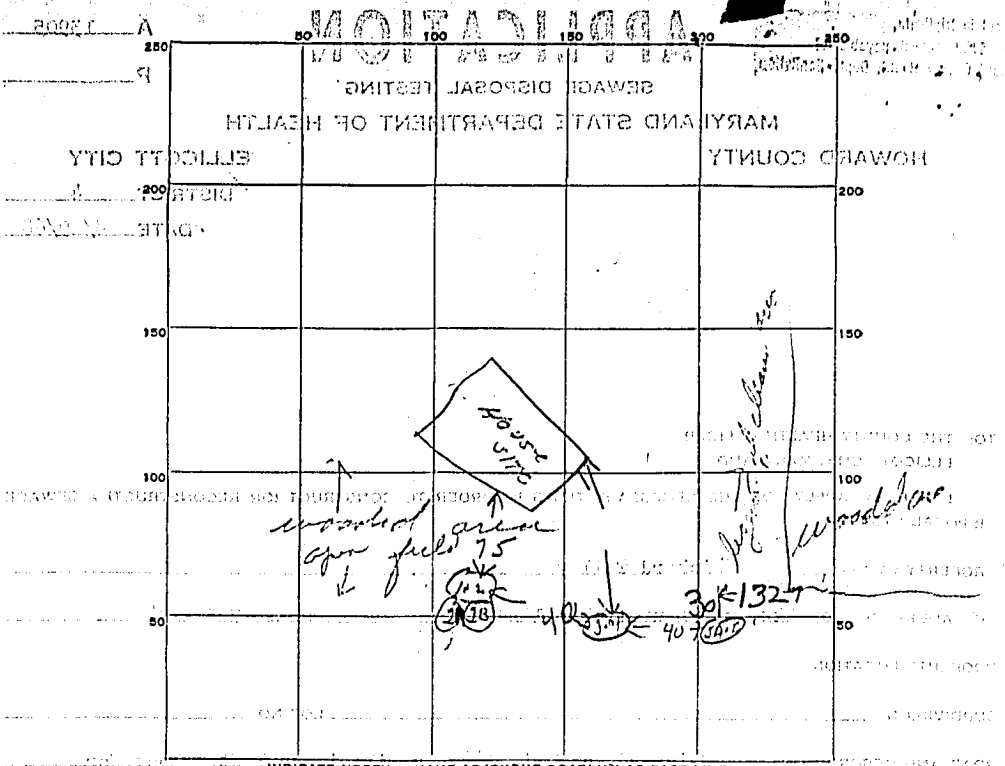
✓ APPROVED BY Donald W. Manning FOR Donald W. Manning DATE 9/1/68

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

HOLD PENDING FURTHER TESTS for Manning home DATE 9/1/68

REASONS FOR REJECTION OR HOLDING: 7/1/68 - no permit being held schedule for installation 8/21/68

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	
9/11/68	1	4 ft	10 ⁰⁰	10 ¹⁰	10 ¹⁰	10 ¹⁸	8 min
	2	9 1/2 ft	10 ⁰⁹	sty lat m/p			
9/20/68	2A	9 ft.	10 ¹³	11 ³⁷	11 ³⁷		Overtime 2nd inch
	2B	12 1/2 ft.	11 ¹⁵	Little Per.			
	3	8 ft	11 ³⁹				1 min
	4	4 ft.	11 ⁴⁰	11 ⁴⁴	11 ⁴⁴	11 ⁵³	9 min
9/20/68	5	12 ft	9 ⁵⁸	9 ⁵⁹	9 ⁵⁹	10 ⁰²	3 min
	5A	8 ft	9 ⁵⁹	10 ⁰⁹	10 ⁰⁹	10 ³⁰	1/2 min
	5B	4 ft	10 ⁰³	10 ⁰⁵	10 ⁰⁵	10 ¹⁰	5 min

SOIL AUGER FINDING _____

TESTED BY JDM 9/20/68 - R. Tove 9/24/68 JDM

REMARKS Designated - R. H. Talley