

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

Plot must accompany this
APPLICATION

A 12085

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 30 Gallon Tank

ELLCOTT CITY

Tile Field - 300 sq ft bottom over
6" or

DISTRICT 3

DATE 8-16-66

Pry Well - 300 sq ft sidewalk area below
inlet with the inlet no deeper than 4 FT
below grade

Place the dry well or tile field 300 ft to
300 ft from the fence along the front
lot line and 130 ft to the

TO: THE COUNTY HEALTH OFFICER
ELLCOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE
DISPOSAL SYSTEM.

PROPERTY OWNER GORDON S. WOLFE 130 ft from the left side
of the lot as seen

ADDRESS 702 Old Fred. Rd. ELLCOTT CITY PHONE 465-4344

PROPERTY LOCATION: when facing the lot from
River Road

SUBDIVISION _____ LOT NO. 1

ROAD AND DESCRIPTION DRIVER RD. MARIOTTSVILLE - New Marriottville
land - land for white dog tail in stick

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 0.55 ACRES TYPE BLDG. 2
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Gordon S. Wolfe

APPROVED BY Raymond Hodge FOR Dry Well DATE 19 OCT 66
(KIND OF SYSTEM)

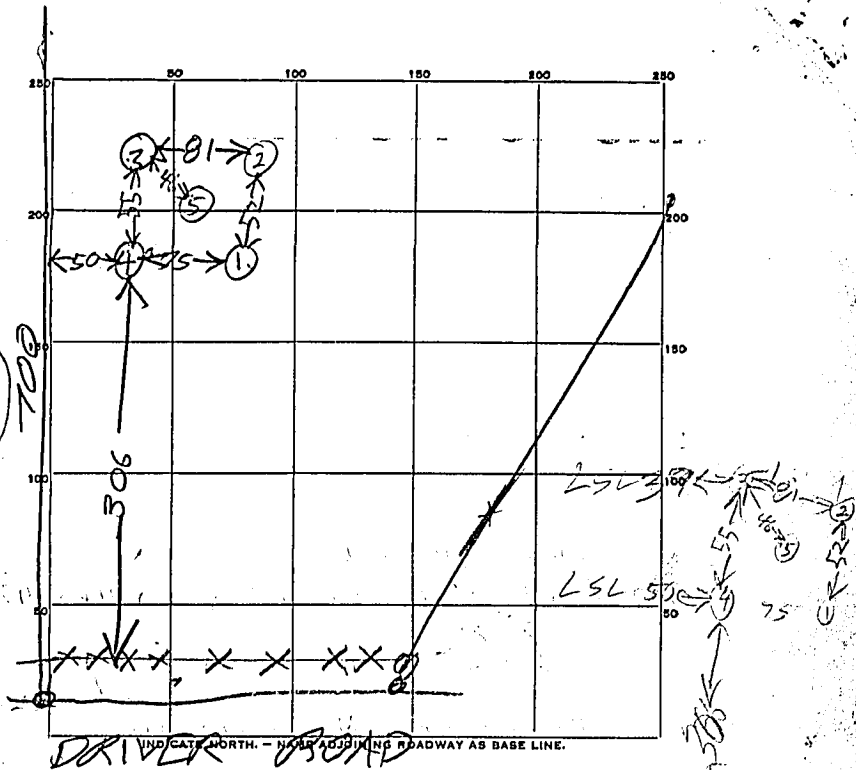
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS B/H DATE 8/18/66

REASONS FOR REJECTION OR HOLDING 8/18/66 - Hold for second plot

THIS IS NOT A PERMIT

ARRIVE
9:50
8/19/66
DIA



306
Fence

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/19/66	1	4 1/2	1000	1001	1001	1004	3
8/19/66	2	4 1/2	1006	1008	1012	1024	12
8/19/66	3	4	1012	1024	1024	1042	18
8/19/66	4	3 1/2	1017	1024	1024	1031	7
8/19/66	5	8 1/2	1024	1030	1030	1036	6

SOIL AUGER FINDING _____

TESTED BY

B. Hodges

REMARKS _____

LOG #1