

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER KENNARD WARFIELD JR

ADDRESS 14663 TRIADELPHIA ROAD PHONE 410-442-2337

AGENT OR PROSPECTIVE BUYER LAND DESIGN & DEVELOPMENT

ADDRESS 8000 MAIN STREET ELLICOTT CITY PHONE 410-480-9105

PROPERTY LOCATION:

SUBDIVISION THE WARFIELDS II LOT NO. 21

ROAD AND DESCRIPTION SOUTH SIDE OF TRIADELPHIA ROAD AT THE INTERSECTION OF TRIADELPHIA ROAD AND HOWARD ROAD

TAX MAP 21 PARCEL # _____

SIZE OF LOT ONE ACRE TYPE BLDG. SINGLE FAMILY DWELLING
(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 UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

DONALD R. LEWIS
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

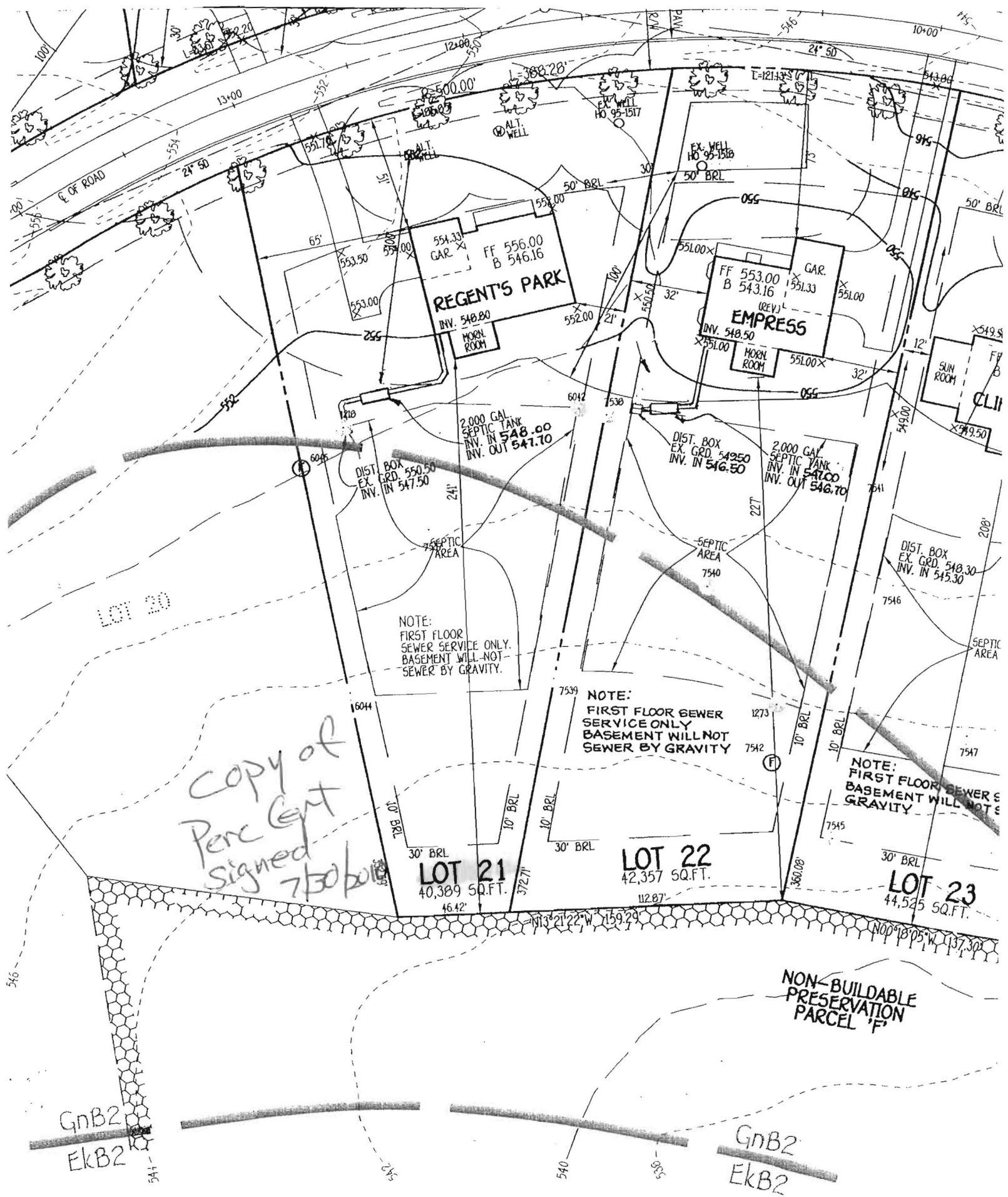
HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

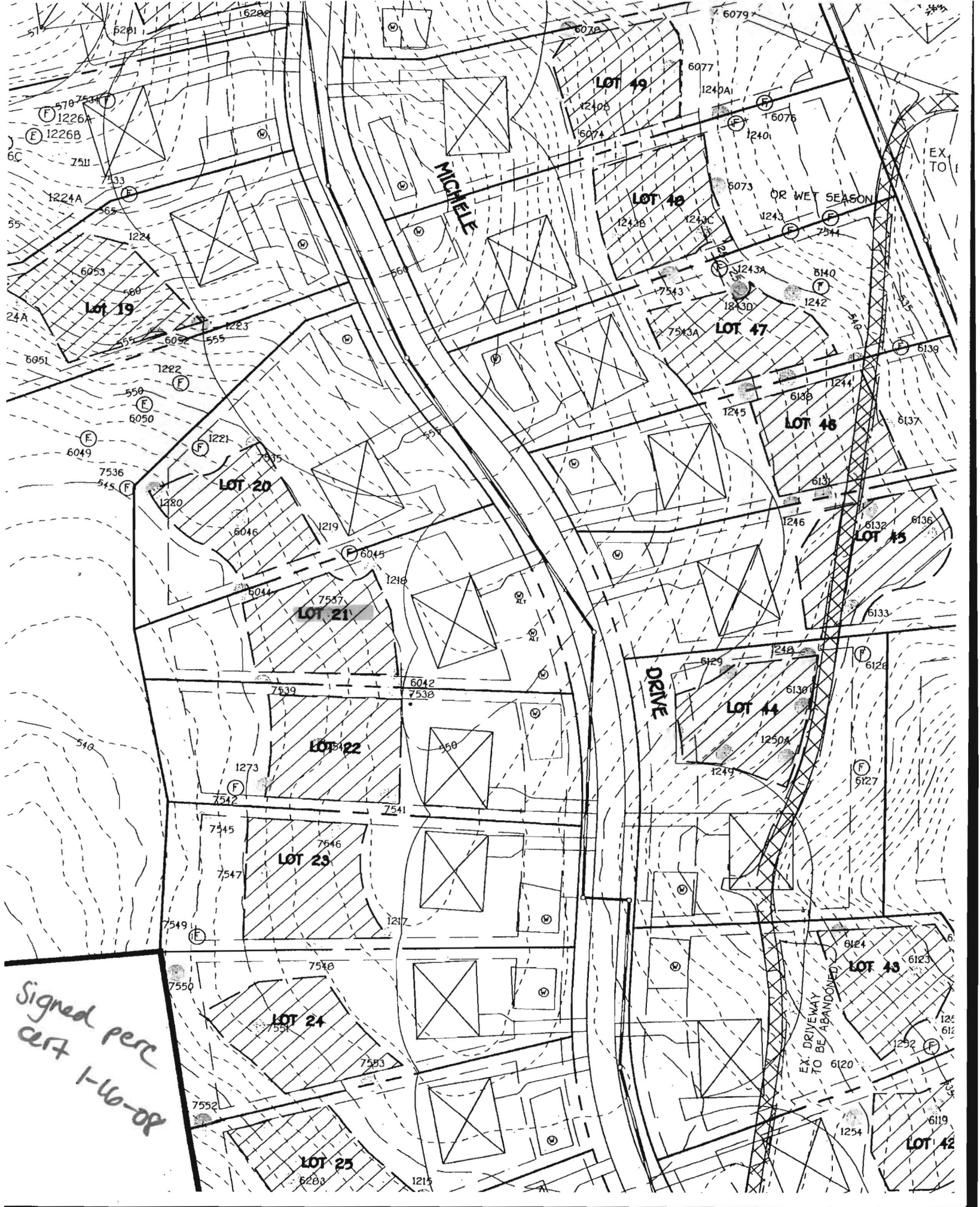
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT



NOTE
THE EXISTING WELLS SHOWN ON THIS PLAN, TAG NOS HO 95-1517 THRU HO 95-1524, ARE LOCATED IN THE SEWER FIELD LOCATED

DEVELOPER'S CERTIFICATE



MICHELE

LOT 19

LOT 46

LOT 47

LOT 48

LOT 45

LOT 44

LOT 20

LOT 21

LOT 22

LOT 23

LOT 24

LOT 25

DRIVE

OR WET SEASON

EX. DRIVEWAY TO BE ABANDONED

Signed perc cert 1-16-08

