

APPLICATION

A 09425

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Septic Tank - 1000 gal.

DISTRICT 5

Leaching Bed - 400 sqft bottom area installed at a depth of 5 ft below original grade. This depth includes the bottom of gravel.

DATE 11/23/64

Please Leaching Bed between 125 and 150 ft from front lot line and between 18 and 75 ft from left sideline as seen when facing lot from Braeburn Road.

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 A. H. Young, Jr., Inc.

ADDRESS Ashton, Maryland PHONE WA 4-4103

PROPERTY LOCATION:

SUBDIVISION Braeburn LOT NO. 23, Plat 1

ROAD AND DESCRIPTION Braeburn Rd.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 1.00 acres TYPE BLDG. 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ A. H. Young, Jr.

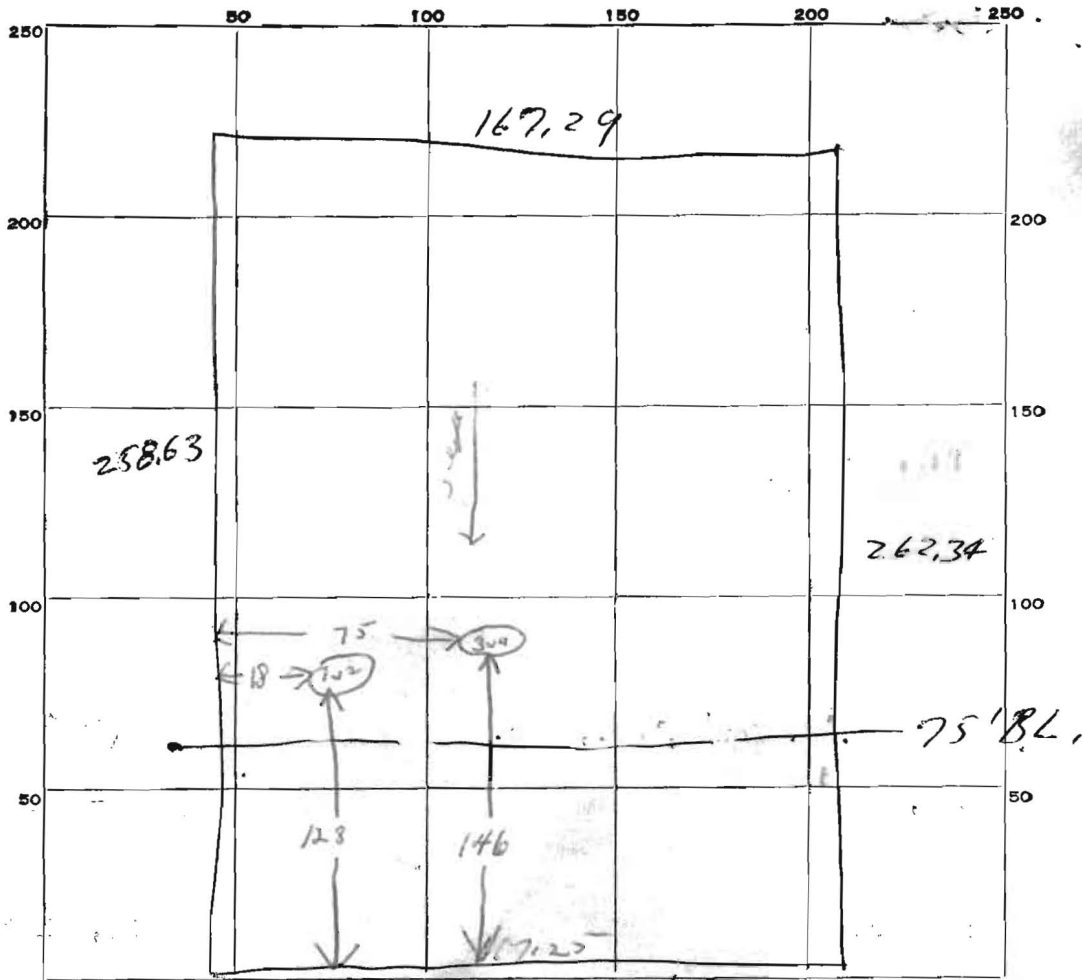
APPROVED BY DW Monaghan FOR Leaching Bed DATE 12/22/64
(KIND OF SYSTEM)

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 & BASE LINE.

Bracturn Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
<i>12/22/11</i>	<i>1</i>	<i>9ft</i>	<i>9:53</i>	<i>9:55</i>	<i>9:55</i>	<i>1000</i>	<i>5 min</i>
	<i>2</i>	<i>5ft</i>	<i>9:54</i>	<i>9:57</i>	<i>9:57</i>	<i>1003</i>	<i>6 min</i>
	<i>3</i>	<i>9ft</i>	<i>9:57</i>	<i>9:59</i>	<i>9:57</i>	<i>1006</i>	<i>9 min</i>
	<i>4</i>	<i>5ft</i>	<i>9:58</i>	<i>1001</i>	<i>1001</i>	<i>1006</i>	<i>5 min</i>

SOIL AUGER FINDING _____

TESTED BY *DM*

REMARKS _____

ALSO PRESENT *David Scogge* LOT NO. *23, Plot 1*