

APPLICATION

A 26384

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE JUNE 28, 1977

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER JOHN MIKOLASKO

ADDRESS 2205 FOXLEY ROAD PHONE 252-3478

TIMONIUM, MD. 21093

PROPERTY LOCATION:

SUBDIVISION HALL MARK SECTION 2 LOT NO. 41

ROAD AND DESCRIPTION HALL MARK ROAD

SIZE OF LOT 1 ACRE (±) TYPE BLDG. 3 OR 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT JOHN MIKOLASKO by James L. Neuborn

APPROVED BY David J. O'Neill FOR Dry Well + Turner DATE 12/1/77
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

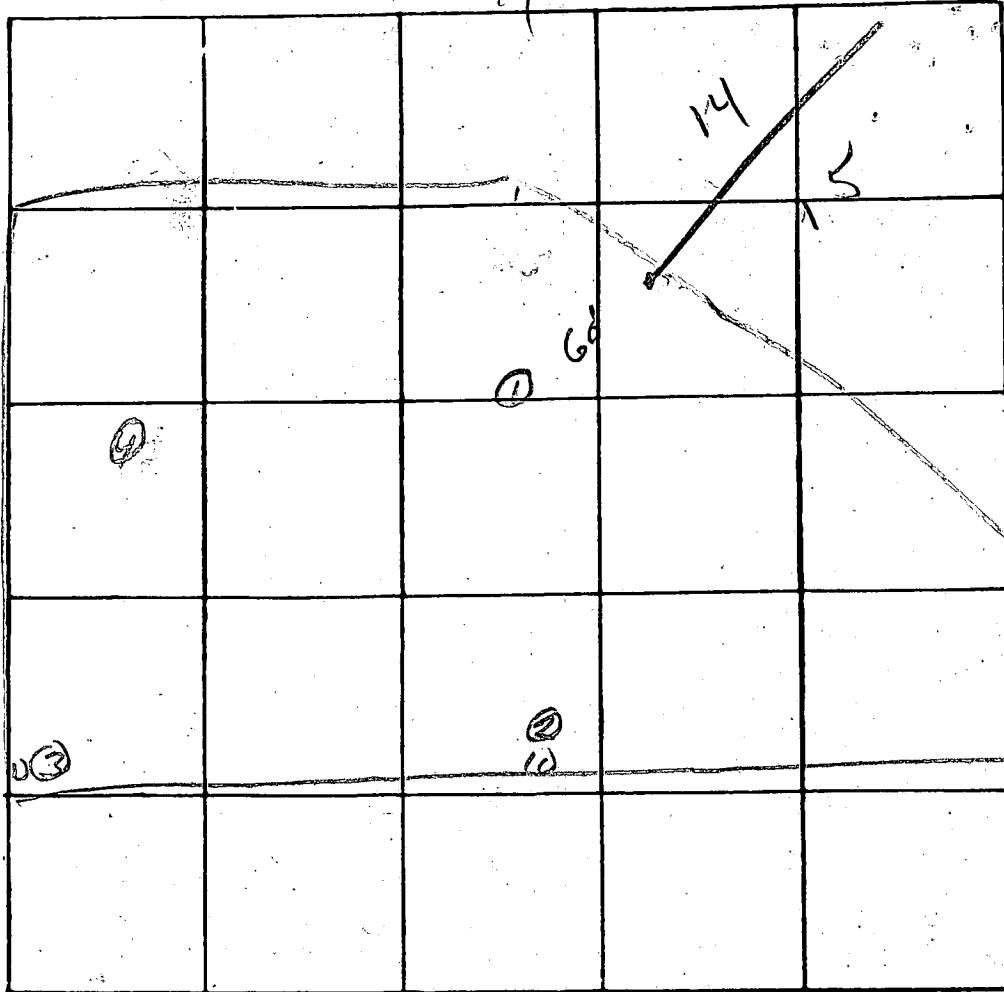
REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 6/15/78
serial # 310063

~~BLDG. PERMIT SIGNED
AND RETURNED 6/15/78~~

THIS IS NOT A PERMIT

4/1



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

8x
3'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/14	1 s	3 1/2'	955	955	955	957	2
	d	12'	955	954	956	1007	11
	4 s	5	959			1007	4
	d	13	959			1004	4
	3 s	3'	1001			1008	4
	d	13'	1001			1005	4
	2 s	3'-12'	OK				

REMARKS _____

TYPE OF SOIL _____

TESTED BY PJG ALSO PRESENT: Craw. Britting