

APPLICATION

A 05879

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

750 Gallon Tank

ELLICOTT CITY

Leaching bed

DISTRICT 4

450 sq ft bottom area installed at a depth of 4 to 5 ft

DATE 10/8/62

Place the leaching bed about 120 ft to 160 ft from the back lot line and about 10 ft to 50 ft from the left side of the lot as seen when facing the lot from

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.

ALBETH

PROPERTY OWNER

Jones Co.

HEIGHT

ADDRESS

Walden Road

PHONE _____

PROPERTY LOCATION:

SUBDIVISION

Albeth Heights

LOT NO. 11, sec 2

ROAD AND DESCRIPTION

Albeth Road

OCCUPANT

PHONE _____

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE _____

SIZE OF LOT

100' X 200'

TYPE BLDG. 3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT

Raymond Hodges

APPROVED BY

FOR

Leaching bed

DATE

11 Oct 62

REJECTED BY

FOR

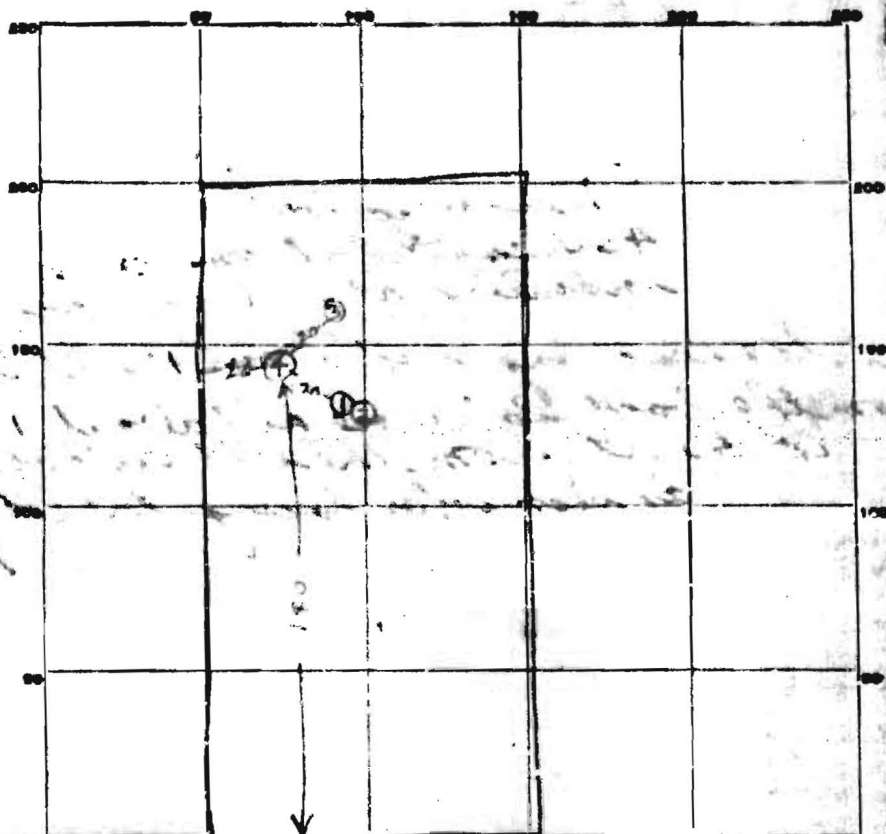
DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



0.4
9.5
4.7
15.0

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

← TO ~~MARIOTTSVILLE~~ ALBETH HEIGHTS

DATE	TEST NO.	DEPTH	PERMET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11 OCT 13	1	4	126	148	148	2:5	27	
"	2	3	NO WATERGATED WATER					
"	3	5	132	143	143	208	15	
"	4	4	135	143	143	153	10	

SOIL AUGER FINDING _____

TESTED BY Raymond Hodges

REMARKS _____

ALSO PRESENT Albion LOT NO. _____