

# APPLICATION

19124

## SEWAGE DISPOSAL TESTING

P. \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 468-3000, EXT. 336

DISTRICT ~~Third & Fourth~~

DATE October 30, 1973

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 Mr. Wilson I. Hoving

ADDRESS Burkwoods Road, Clearwood, Maryland PHONE 442-2483

PROPERTY LOCATION:

SUBDIVISION Gwynlee Estates - Section II LOT NO. 7, Block D

ROAD AND DESCRIPTION East side of Gwynlee Circle

SIZE OF LOT 125' x 300' TYPE BLDG. 3 or 4 Bedrooms  
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 William R. Hopkin

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(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

