

# APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 1/2/71

*Dry well to be 150 ft. ft. of absorption system  
Area filled with water 1/2 ft. per foot, until  
pipe to be 3 ft. below original grade 11 ft. depth of dry well in  
the 12 ft. below original grade. locate dry well*

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 Frank E. & Linda Willson, et. al

Mr. Johnson

ADDRESS Ashtr. Maryland 20702 PHONE 924-4811

PROPERTY LOCATION:

SUBDIVISION Linden Chapel Hills LOT NO. 4, Blk. B, Sec. 2

ROAD AND DESCRIPTION Road "A"

OCCUPANT \_\_\_\_\_ PHONE \_\_\_\_\_

PERSON TO CONSTRUCT SYSTEM \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SIZE OF LOT 40,300 sq. ft. TYPE BLOC 1 OF 1

NUMBER OF UNITS

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

SIGNATURE OF APPLICANT /s/ Robert Johnson

APPROVED BY James T. Smith FOR Dry well DATE 1/2/71

KIND OF SYSTEM

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

KIND OF SYSTEM

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

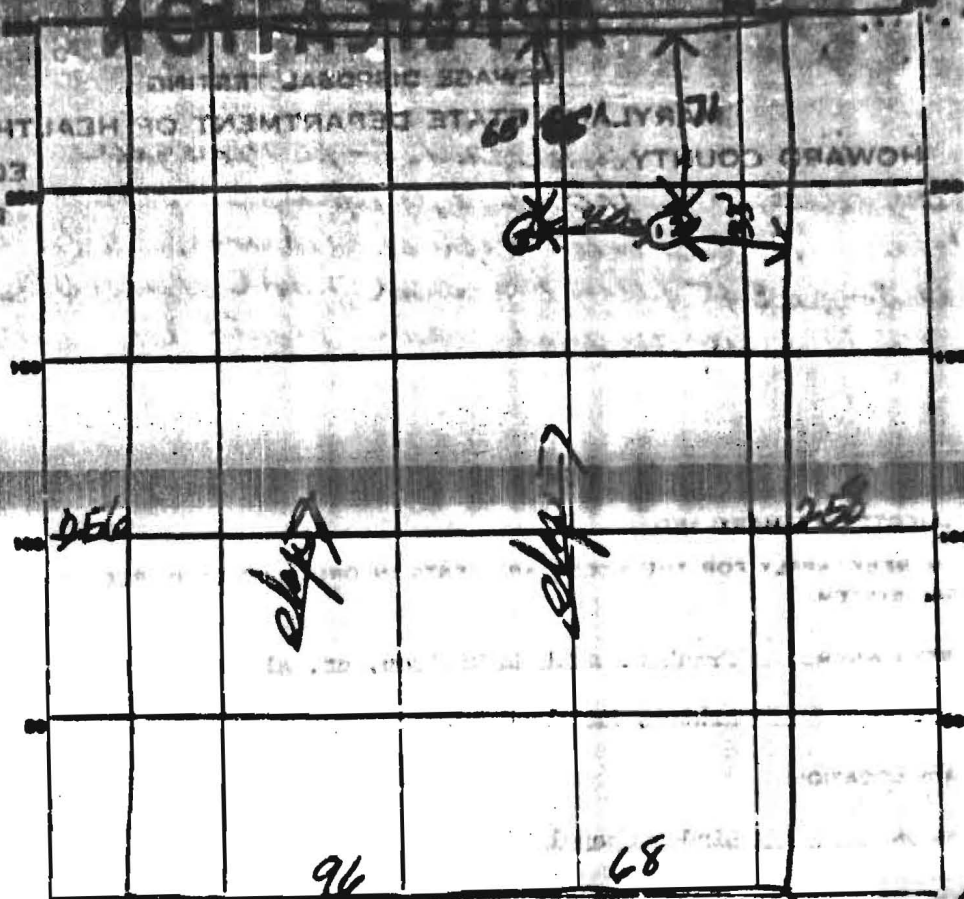
DATE AND TIME

RECEIVED

# THIS IS NOT A PERMIT

ELLICOTT CITY  
DISTRICT  
DATE AND

HOWARD COUNTY  
STATE DEPARTMENT OF HEALTH  
EMERGENCY RESPONSE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

*Am. Named Rd*

*lot 4 B*

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
<i>3/19/71</i>	<i>1</i>	<i>17'</i>	<i>201</i>	<i>203</i>	<i>203</i>	<i>205</i>	<i>2m</i>
	<i>2</i>	<i>3'</i>	<i>202</i>	<i>201</i>	<i>201</i>	<i>203</i>	<i>2m</i>
	<i>3</i>	<i>11'</i>	<i>207</i>	<i>209</i>	<i>209</i>	<i>212</i>	<i>3m</i>
	<i>4</i>	<i>3 1/2'</i>	<i>208</i>	<i>212</i>	<i>212</i>	<i>212</i>	<i>5m</i>

SOIL AUGER FINDING \_\_\_\_\_  
 TESTED BY \_\_\_\_\_  
 REMARKS \_\_\_\_\_

THIS IS NOT A PERMIT