

Retest
12/3/76 p.m.
1:30

APPLICATION

A 24923

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 12/3/76

$T = 17 \text{ min} \Rightarrow 150 \text{ } \cancel{\text{A}} \text{ / BR}$
 $+20\% = 30 \text{ } \cancel{\text{A}} \text{ / BR} \rightarrow 180 \text{ } \cancel{\text{A}} \text{ / BR}$

$\frac{180}{3} = 60$
 $\frac{540}{3} = 180$

$\frac{324}{16} = 20.25$
 $\frac{16}{30}$

$\frac{180}{4} = 45$
 $\frac{720}{350} = 2.057$
 $\frac{370}{370} = 1$

$\frac{47}{32} = 1.46875$
 $\frac{50}{25} = 2$
 $\frac{47}{32} = 1.46875$
 $\frac{32}{24} = 1.333$

$\frac{24}{7.5} = 3.2$
 $\frac{26}{7.5} = 3.466$
 $\frac{168}{12} = 14$
 $\frac{182}{13} = 14$

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 Joseph L. Lorditch

ADDRESS 347 Brock Bridge Road PHONE 725-4894
Laurel, Md. 20810

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION Route 32 - see old application for directions

SIZE OF LOT 2.000 acres 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 /s/ Judith A. Ketterman BLDG. PERMIT SIGNED AND RETURNED 3/21/77
Serial No. 31016

APPROVED BY William H. Zapp FOR DW & trench DATE 12/9/76
(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

