

9/21/98

APPLICATION

PERCOLATION TESTING

A 510657

9-3-98

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

Preview - create 3
new 1 acre lots -
Need to perc for
existing house also
Au

DISTRICT _____

DATE 9.1.98

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER SUE & JEFFREY HARRISON

ADDRESS 2119 Bellis Falls Rd Woodborne Md PHONE 410-795-9375

AGENT OR PROSPECTIVE BUYER Chuck SHARD

ADDRESS 4003 Jennings Chapel Road PHONE 410 489 4630

PROPERTY LOCATION:

SUBDIVISION For 3 lots 1 ac cluster subdivision LOT NO. Prelim lot 3 only 2, 3 + remainder

ROAD AND DESCRIPTION PENN SHOP ROAD

LIBER 2244 FOLIO 48

TAX MAP 6 PARCEL # Lib 2244 Folio 48 Parcel 19

SIZE OF LOT 56 ac TYPE BLDG. N/A
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Jeff Harrison
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

Copy of Signed
Per. Cert.

