

APPLICATION

A 24010

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5

DATE 9/24/76

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

9/28/76
1:30

*Re-test needed
equivalent
of 10,000 ft*

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 John L. McCarty

ADDRESS 7491 Milk Hollow Rd. PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 11, Sec. 1

ROAD AND DESCRIPTION 7491 Milk Hollow Rd.

SIZE OF LOT 5.0121 acres TYPE BLDG. 5
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE (Single family duplex)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE

SIGNATURE OF APPLICANT John L. McCarty

APPROVED BY Raymond Hodges FOR Dry Well & Pit DATE 9/28/76
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

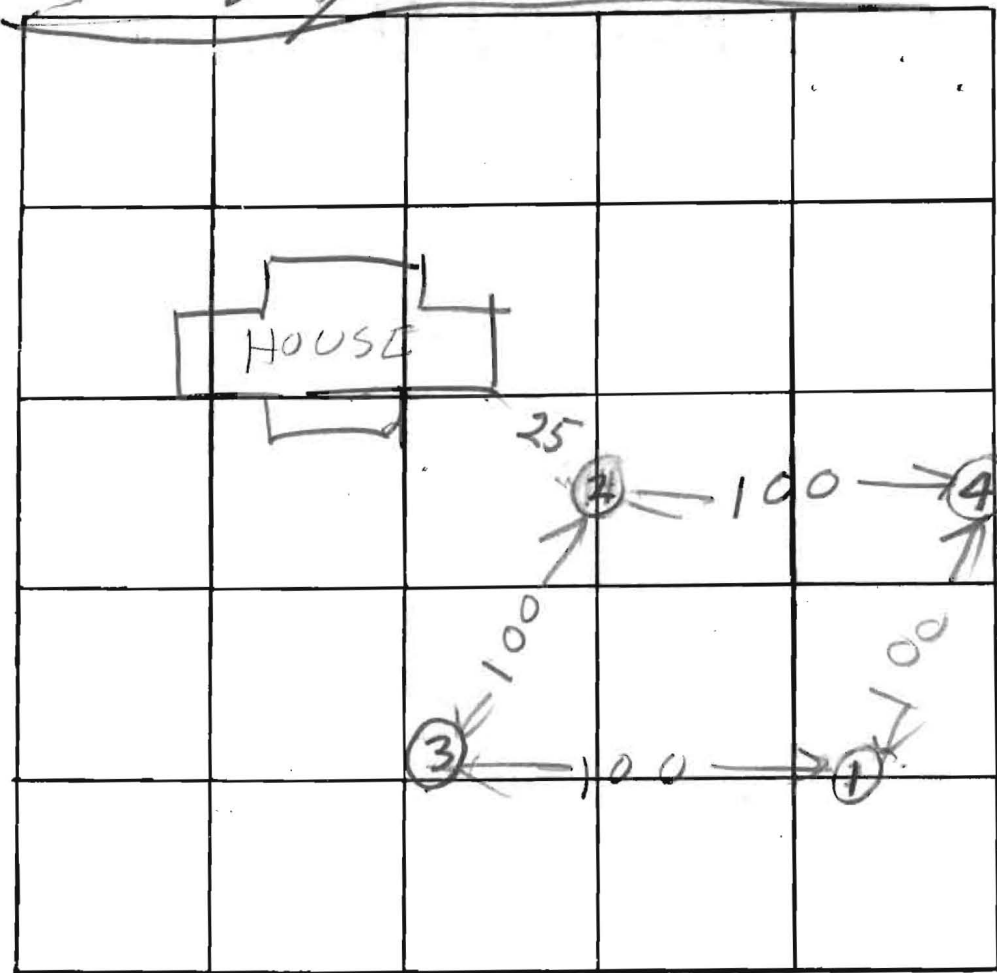
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

TO MINK HOLLOW RD

R/W



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

9/5/00
450

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/20/00	11D	12	218	219	219	221	2
	15	4 1/2	218	224	224	231	7
	12D	12	235	239	237	238	1
	12S	3	236	237	237	241	4
	13D	12	242	30	301	306	5
	13S	3	302	308	308	323	15
9/26/00	14V	12	TOP 4 FT CLAY BOT 8 FT SANDY				8

REMARKS _____

TYPE OF SOIL SAND 1

TESTED BY B. HODGES

ALSO PRESENT: JRM CARTHY, W. HODGES

120
600