

APPLICATION

SEWAGE DISPOSAL TESTING

A 09584

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5

DATE 1/22/65

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 Josephine A. Petrillo Swanner

ADDRESS Washington, D. C. PHONE _____

PROPERTY LOCATION:

SUBDIVISION Highland Acres LOT NO. 19, Sec. 23

ROAD AND DESCRIPTION Petrillo Drive

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 1 acre TYPE BLDG. 4 NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT William C Jackson

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY J. H. Kelman FOR Septic system DATE 1/28/65

HOLD PENDING FURTHER TESTS Septic 5-2 Bkte DATE 3/21/65

REASONS FOR REJECTION OR HOLDING High water table / pipes high water table not

suit (by sewer main) slope of lot precludes installing system on high portion of lot sufficient area for system on other

THIS IS NOT A PERMIT

