

4/6/90 done

05-373166

PERMIT

P 45937

SEWAGE DISPOSAL SYSTEM

A REPAIR

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 5/10/90

DATE SYSTEM APPROVED 4/6/90

INDEXED

INSPECTOR M. P. Skin

Jack Fyock IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION _____ ROAD 13530 Route 108 LOT _____

PROPERTY OWNER Libby Wright

ADDRESS 13530 Route 108
Highland, Maryland 20707

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

GARBAGE GRINDER? ~~YES~~ NO

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS 3

S.S.
7.5
7.5
335.6

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED SO SANITARIAN CAN RECOMMEND REPAIR.

125 A BR INLET 3' BOT 10 1/2 55' TRENCH

PLANS APPROVED BY C. Williams DATE 4/02/90

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

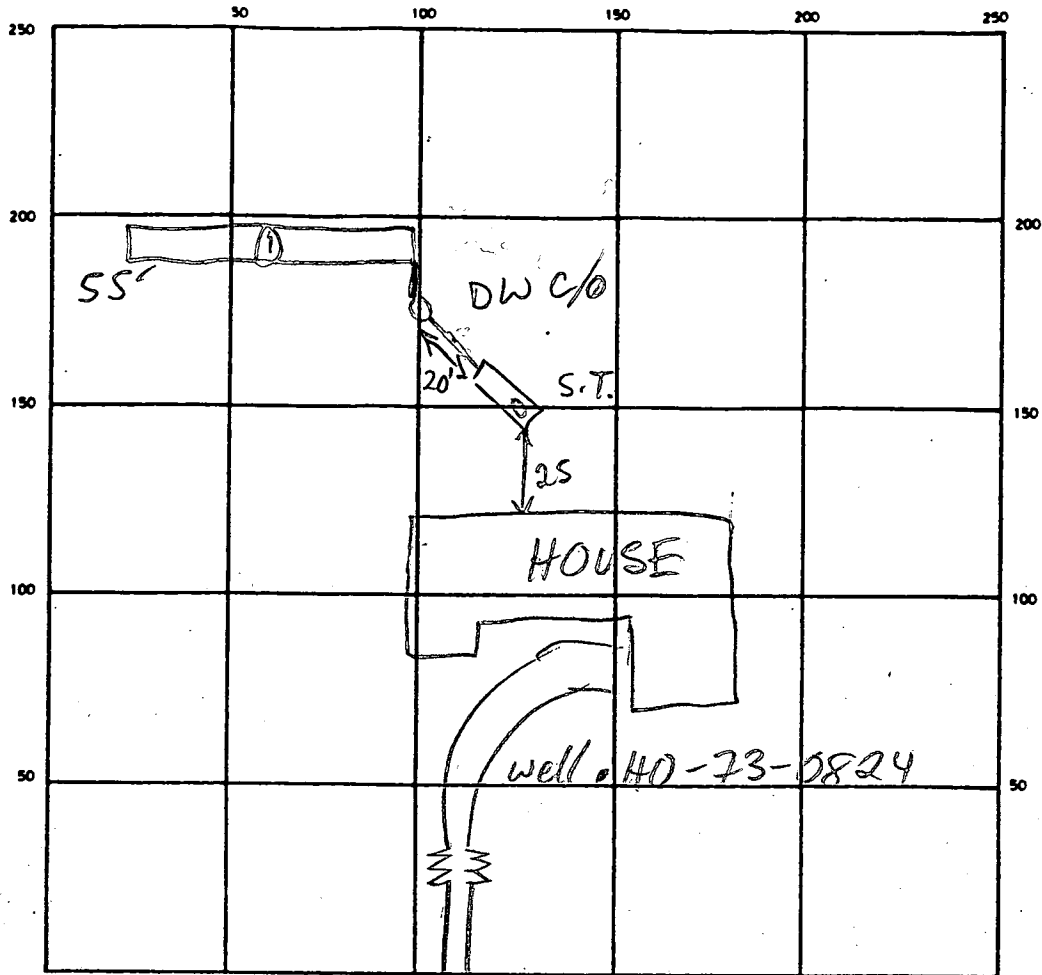
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

45937



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL —

DRAIN FIELD/TILE FIELD DEPTH 10 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 7 1/2 FT. TOTAL LENGTH 55 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 412 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 412 SQ. FT.

REMARKS 4/6/90 TRENCH DUG IN WRONG DIRECTION (OUT OF ISDA), BUT SOILS LOOK OK, PIPE FROM S.T. TO D/W REPLACED
MR

DATE SYSTEM APPROVED 4/6/90 INSPECTOR M. Ripkin

9/6/74
after 1:00 P.M.

File final
C.B.S.

PERMIT

P 20561

SEWAGE DISPOSAL SYSTEM

A 18818

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 5

DATE 8/20/74

Paul Gregor IS PERMITTED TO INSTALL ALTER

Route 2 - Box 47
ADDRESS Wright Road, Hanover, Md. 21076 PHONE 796-0952

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD 13530 Route 108
Brooks Road - see LOT 6

PROPERTY OWNER Dr. Daniel Wright application for better directions

ADDRESS _____
About 1/4 mile past Rt. 216 on the right hand side going down hill - white stone driveway going up through field.

SPECIFICATIONS - 3 bedrooms (Paul Gregor)
4 bedrooms 8/20/74

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1000
1250 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well to have 115 sq. ft. effective absorbent sidewall area per bedroom

below inlet. Inlet to be 4 ft. below original grade and maximum depth 14 ft. Location

180 ft. from left front corner of lot back towards rear of lot and 30 ft. in from left side

of lot. (Perc hole (1 & 2) per certified plat) when facing lot from Rt. 108.

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

Per approved plat plan of

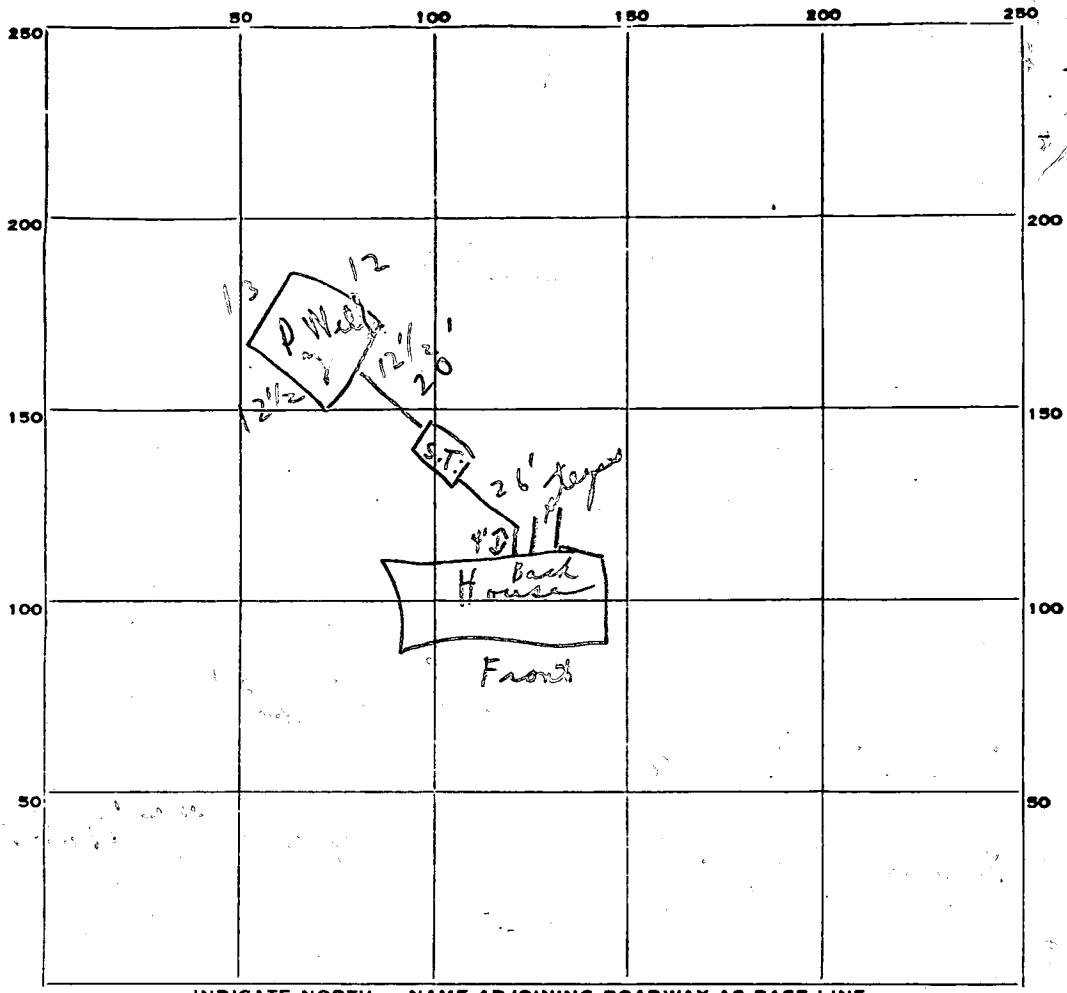
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY C. Streaker DATE 10/31/73

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 18818



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Rd 108

PERMIT CARD signed - kept in truck

SEPTIC TANK, LEVEL OK CLEANOUTS S.T. OK | P.W. OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 50 FT. DEPTH BELOW INLET 7 1/2 FT.

ABSORBENT AREA 375 ± SQ. FT.

7.5
50
375.0

REMARKS 9/6/94 Note ① Dry Well + Septic Tank in 10,000
sq ft - area. ② Cleanouts on 11' C.B.D.
C.B.D.

DATE SYSTEM APPROVED 9/6/94 INSPECTOR C. Stecker

PRELIMINARY

APPLICATION

Mr. Daniel Wright

A 18818

8/28/73
9:30 A.M.

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

Septic Tank { 3 Bedrooms - 1000 gallons
4 Bedrooms - 1250 gallons } DISTRICT 5th

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

DATE 8/3/73

*Dry Well to have 115 sqft effective absorbent
sidewall area per bedroom below inlet. Inlet to be
4' below original grade and maximum depth 14'
location 180' from left front corner of lot back
towards rear of lot + 40' in from left side of lot.
{ 2 per hole (1+2) per certified plan. } when facing lot
from Rt 108.*

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 Raymond Morgan

ADDRESS _____ PHONE 796-0952
Any questions call Mr. Gregor

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 6

ROAD AND DESCRIPTION Brooks Road - off Route 108
(sewage test on Rt. 108 just before Brooks Rd.)

SIZE OF LOT 5.019 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/ Paul Gregor

APPROVED BY C. Stueker FOR Dry Well DATE 10/31/73
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

10/31/73 Checked plan of certified holes => OK.

Bd permit signed 11/24/73

THIS IS NOT A PERMIT

C.B.S

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

PRELIMINARY

APPLICATION

A 18818

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

DISTRICT 5th

DATE 8/3/73

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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SIGNATURE OF APPLICANT /s/ Paul Gregory

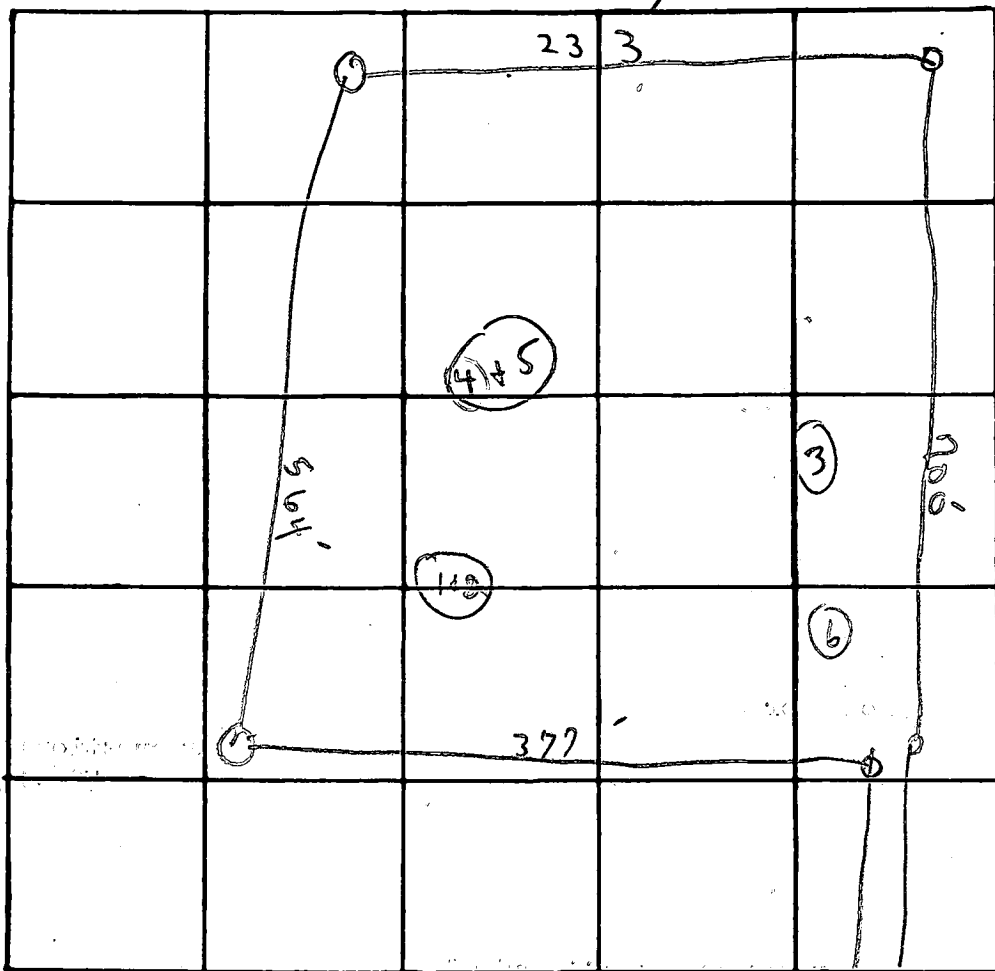
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

RX 108

elev: s
 +2.5'
 -3'
 -5.5'
 +2'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/28/73	1	4'	2:32	2:34	2:34	2:37	3 min
	H 2	14'	2:50	2:52	2:52	2:55	3 min
	3	12'	Visual		similar to		4+5
	4	6'	3:34	3:36	3:36	3:41	5 min
	5	14 1/2'	2:57	2:59	2:59	3:02	3 min
	6	9 1/2'	Visual		similar to		4+5
							4 14

Use
 some stones
 at 9 1/2'
 3 min

REMARKS Wooded hold for certification
 TYPE OF SOIL of holes + distance 5' down below
class level

6019 (SEQ. NO.) **1** (THIS NUMBER IS TO BE PUNCHED IN COLS. 9-6 ON ALL CARDS)

STATE OF MARYLAND WATER RESOURCES ADMINISTRATION
TOWNSHIP OFFICE BLDG. ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER *A18818*

FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY) *9/24/74 1:30 P.M. lat*

OWNER: COL 15 LAST NAME *Blumenthal* COL 34 FIRST NAME *Blumenthal*

STREET OR RFD: COL 36 *Blumenthal* COL 55

POST OFFICE: COL 57 *Blumenthal* COL 76

B 1 CONTINUED DRILLER INFORMATION

1 2 3 (SEQ. NO.) 6

DATE: *Aug 20 1974* **LICENSE NUMBER:** *477*

FIRST NAME: *Blumenthal* **DRILLER LAST NAME:** *Blumenthal*

SIGNATURE: *[Signature]*

B 3 LOCATION OF WELL

1 2 3 (SEQ. NO.) 6

COUNTY: *Howard* **DO NOT ABBREVIATE COUNTY NAME**

SUBDIVISION: *42*

SECTION: *44* **LOT:** *46*

NEAREST TOWN: *52*

MILES FROM TOWN (ENTER 0 IF IN TOWN): *79*

B 2 WELL INFORMATION

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): *8*

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): *14*

USE FOR WATER (CIRCLE APPROPRIATE BOX):

D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

F FARMING, AGRICULTURE, IRRIGATION

I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT

M MUNICIPAL WATER SUPPLY

P PRIVATE WATER COMPANY

T TEST

MUST HAVE STATE HEALTH DEPT. APPROVAL

B 4 DIRECTION FROM TOWN

1 2 3 (SEQ. NO.) 6

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX):

NORTH EAST NORTHEAST SOUTHEAST

SOUTH WEST NORTHWEST SOUTHWEST

NEAR WHAT ROAD: *Blumenthal*

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX):

NORTH SOUTH EAST WEST

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): *34*

APPROXIMATE DEPTH OF WELL: *140* FEET

APPROXIMATE DIAMETER OF WELL: *6* (NEAREST INCH)

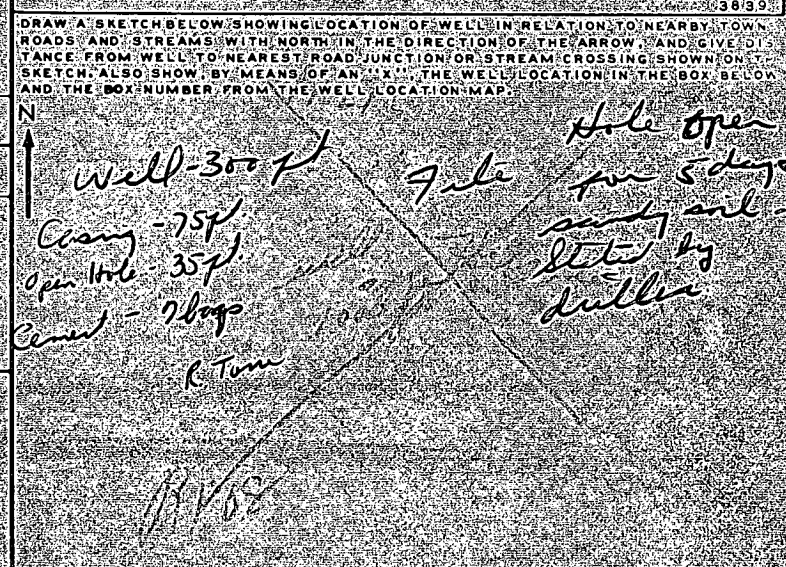
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD):

BORED (OR AUGERED) **JETTED** **DRIVEN**

AIR-ROTARY **AIR-PERCUSSION** **ROTARY (HYDRAULIC ROTARY)**

CABLE **REVERSE-ROTARY** **DRIVE POINT**

OTHER (DESCRIBE):



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX):

N THIS WELL WILL NOT REPLACE AN EXISTING WELL

Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED

S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY

D THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)

APPROPRIATION PERMIT NUMBER: *64*

ENGINEER REVIEW DISTRICT NO.: *65*

FORCE: *67* **WRITE INITIALS IN BOX:** *68*

CONDITIONS: *70* *71* *72* *73* *74* *75* *76* *77* *78* *79*

BOX NUMBER: *0/0*

NORTH COORDINATE: *50* *51* *52* *53* *54* *55*

EAST COORDINATE: *57* *58* *59* *60* *61* *62* *63*

ELEVATION AT WELL HEAD (FEET): *65* *66* *67* *68*

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL

1 2 3 (SEQ. NO.) 6

STATE HEALTH (CIRCLE BOX): *S*

COUNTY NAME: *Howard* **COUNTY NO.:** *47*

DATE: *9/24/74*

APPROVED BY: *[Signature]*

B 5 SPECIAL CONDITIONS (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6

C 1 7648 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 9-16-74 DATE WELL COMPLETED 300 DEPTH OF WELL 300 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" 42

DRILLERS IDENTIFICATION NO. 42

OWNER *Wright Donald* LAST NAME FIRST NAME *Donald M.*

STREET OR RFD. POST OFFICE

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<i>get well</i>	0	0	
<i>by sand stone</i>	0	70	
<i>nickel</i>	70	80	
	80	300	<input checked="" type="checkbox"/>

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT BENTONITE CLAY

NO. OF BAGS 7 NO. OF POUNDS 700

GALLONS OF WATER 42

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 30 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL CONCRETE

PLASTIC OTHER

MAIN CASING TYPE NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 75

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL BRASS OR BRONZE OPEN HOLE

PLASTIC OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM 40 TO 300

DIAMETER OF SCREEN 56 (NEAREST INCH)

FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL, CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) 70 W Q 72

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 2

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 40 (NEAREST FOOT)

WHEN PUMPING 300 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)

AIR PISTON TURBINE

CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)

JET SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, Q)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY

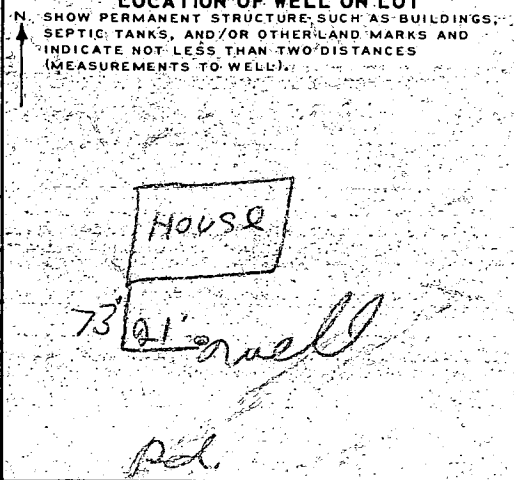
GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE LAND SURFACE BELOW 9 (NEAREST FOOT)



CIRCLE APPROPRIATE BOXES

A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME *Wright Donald*

SIGNATURE *Wright Donald*

MAP OF PRIVATE
WATER AND SEWER SYSTEM
FOR DANIEL WRIGHT
SCALE 1 IN. = 50 FT.

ALL ELEVATIONS ARE GIVEN
IN REFERENCE TO ZERO POINT GROUND
LEVEL BY + OR - FEET

HOUSE: F.F. = +5'
BASE = -3½'
INV. ELEV. = -4'

SEPTIC TANK:
EXISTING GROUND LEVEL = 0'
INV. ELEV. = -4.8'

DRY WELL:
EXISTING GROUND LEVEL = ~~0~~ -0.5'
INV. ELEV. = ~~0~~ -4.29'

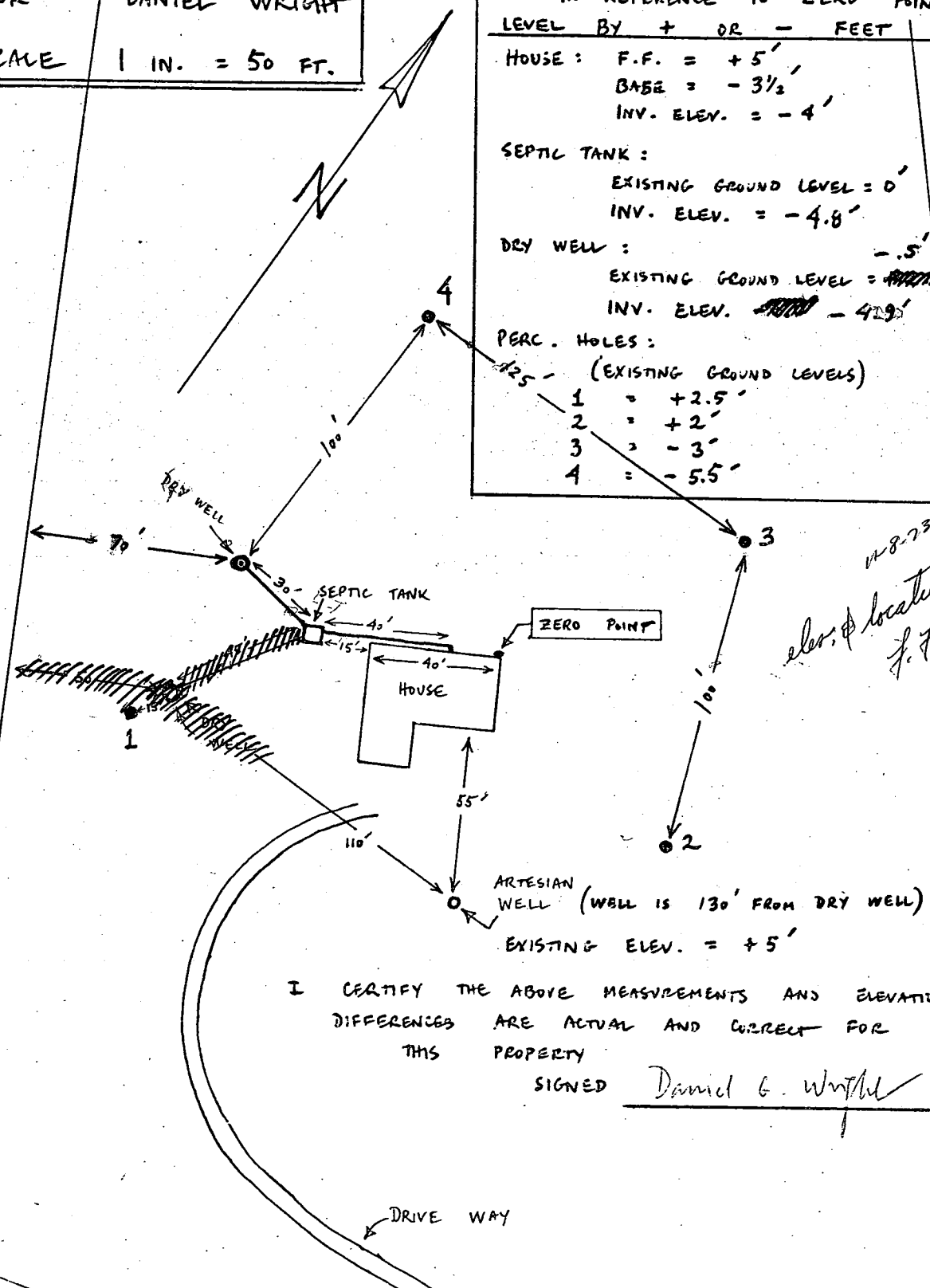
PERC. HOLES:
(EXISTING GROUND LEVELS)

1	= +2.5'
2	= +2'
3	= -3'
4	= -5.5'

S 41° 23' E 700.04'

11-8-73
elev. of location
f.f.

N 28° 28' W 564.83'

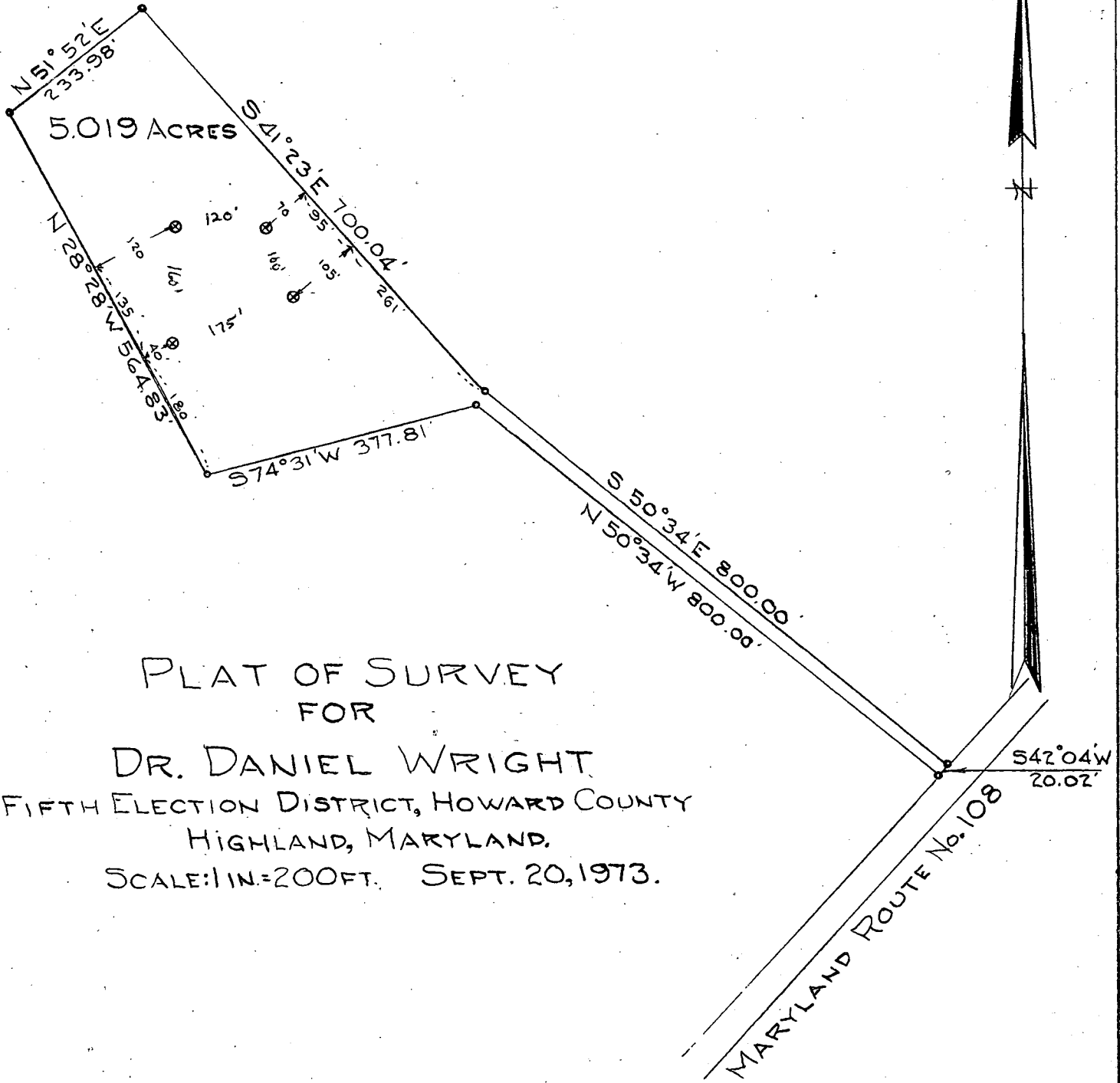


I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATION
DIFFERENCES ARE ACTUAL AND CORRECT FOR
THIS PROPERTY

SIGNED Daniel G. Wright

S 74° 31' W 377.81'

ENTRANCE
TO LOT

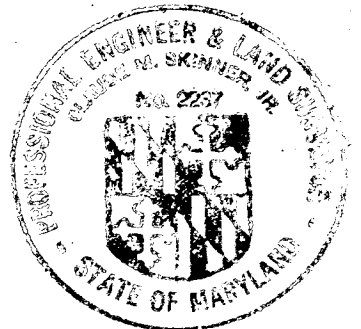


PLAT OF SURVEY
 FOR
 DR. DANIEL WRIGHT
 FIFTH ELECTION DISTRICT, HOWARD COUNTY
 HIGHLAND, MARYLAND.
 SCALE: 1 IN. = 200 FT. SEPT. 20, 1973.

Note: The lot shown hereon complies with the minimum ownership and lot area as required by the Maryland State Health Department.

Approved: Private Water and Private Sewer

⊗ Denotes percolation test hole



John P. Hogan M.D.
 Howard County Health Officer

11/1/73
 Date

