

4-20-95  
Rep call  
10:00-3:00  
4-21-95  
ASAP

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50642

A REPAIR

DISTRICT 3rd

DATE 4-10-95

DATE SYSTEM APPROVED 4/21/95

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

04-335406

INDEXED

Dun-rite Septic Tank Service IS PERMITTED TO INSTALL ALTER

ADDRESS 10439 Fredrick Road PHONE 461-3255

SUBDIVISION Glenwood Estates LOT 8 ROAD 14636 Mustang Path

PROPERTY OWNER Lisa Gross

ADDRESS 10439 Mustang Path  
Glenwood, Maryland 21730

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 75'

REPAIR - PURPOSE - DRYWELL HAS FAILED

Call for inspection when ground is opened so sanitarian can recommend repair. 4/10/95

Install one trench off existing drywell along contour  
towards right-rear of property.  
Inlet 4', bottom 9', store 5'

PLANS APPROVED BY [Signature] DATE 4/20/95

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, 90° ELBOWS NOT ACCEPTABLE.

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

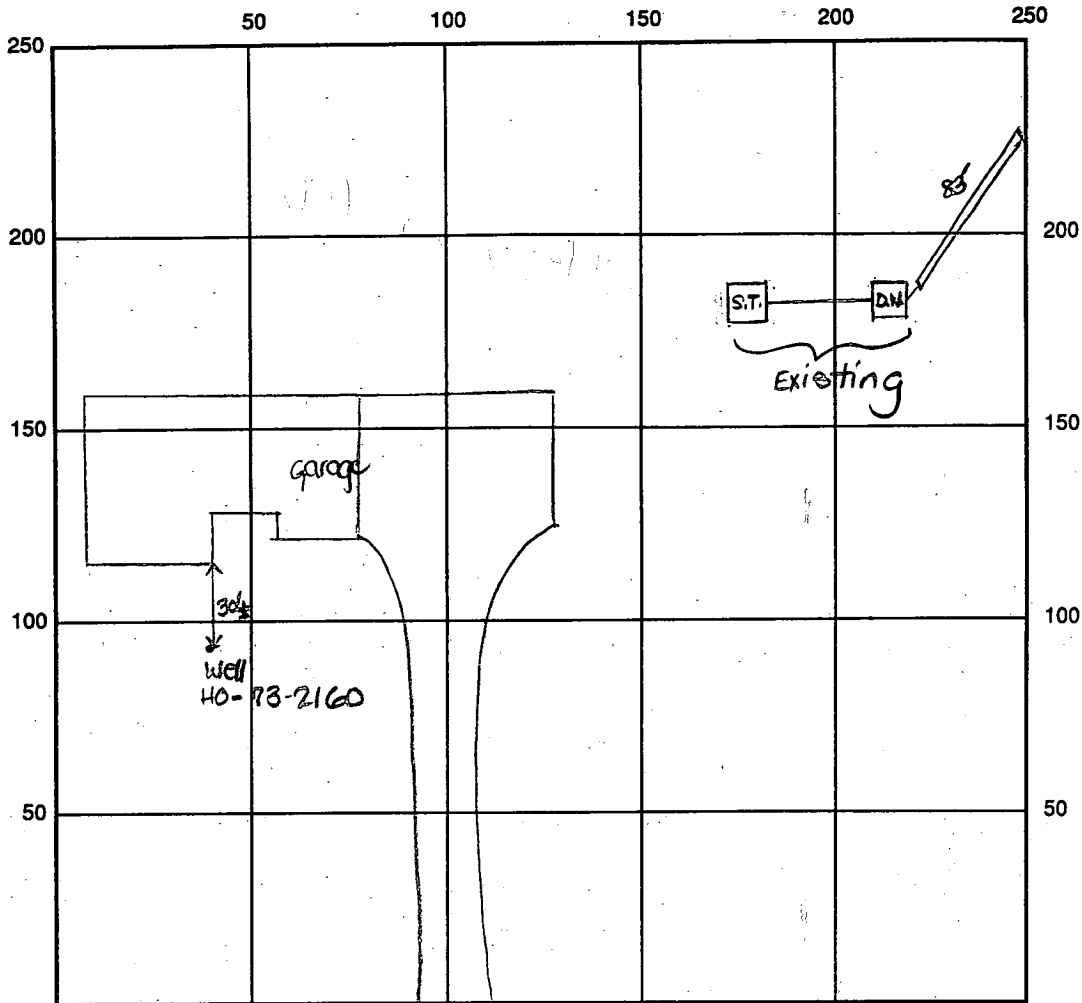
PERMIT VOID AFTER TWO YEARS

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 PVA 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**

P 50642



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

*Mustang Path*

SEPTIC TANK LEVEL Existing CLEANOUTS one on st., one on d.w.

DISTRIBUTION BOX LEVEL Existing

DRAIN FIELD/TITLE DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 83 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL ~~AREA~~ AREA 415 SQ. FT.

DRYWALL INSIDE DIAMETER Exist. FT. EFFECTIVE DEPTH BELOW INLET Exist. FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT. +Existing

REMARKS: 4/20/95 A.M. OK to begin work as specified. DKS

4/20/95 P.M. OK to continue. DKS

4/21/95 Final- OK to cover all work. DKS

DATE SYSTEM APPROVED

4/21/95

INSPECTOR

*John A. See*

11/11/78 approved J.S.  
12/12/77  
1/9/78 cancelled

# PERMIT

SEWAGE DISPOSAL SYSTEM

C. Kitchener  
Wingfield  
Fox Den Lane

P 26595

A 19182

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 4th

DATE 8/16/77

Commercial use.  
Treas. Bldg. - 876-2195

Westminster Lawn Service IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 848-2212

A SEWAGE DISPOSAL SYSTEM LOCATED AT \_\_\_\_\_

SUBDIVISION Glenwood Estates ROAD 14636 Mustang Path LOT 8, Sec. 1

PROPERTY OWNER Mr. and Mrs. Terrence Smith

ADDRESS \_\_\_\_\_

SPECIFICATIONS 3 bedrooms

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ABSORBENT SIDE-WALL AREA \_\_\_\_\_ SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

OK toward  
4 1/2

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

OTHER DRY WELL AND TRENCH - Dry well to have 250 sq. ft. sidewall area. Inlet at 4 ft. and maximum depth 9 1/2 ft. below original grade. Effective depth begins at 5 1/2 ft. below original grade. Locate dry well 100 ft. from the front lot line and 75 ft. in from right lot line as seen when facing lot from road. Trench to be 80 ft. long for a sidewall area of 320 sq. ft. Inlet into trench at 4 1/2 ft. and maximum depth 9 1/2 ft. below original grade. (Effective depth begins at 5 1/2 ft. below original grade on trench). Come off rear of dry well, run trench towards right rear corner of lot. Follow contour to keep trench level. NOTE: CALL FOR INSPECTION OF TRENCH BEFORE PLACING STONE IN TRENCH. NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. PERMIT VOID AFTER THREE YEARS. NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND

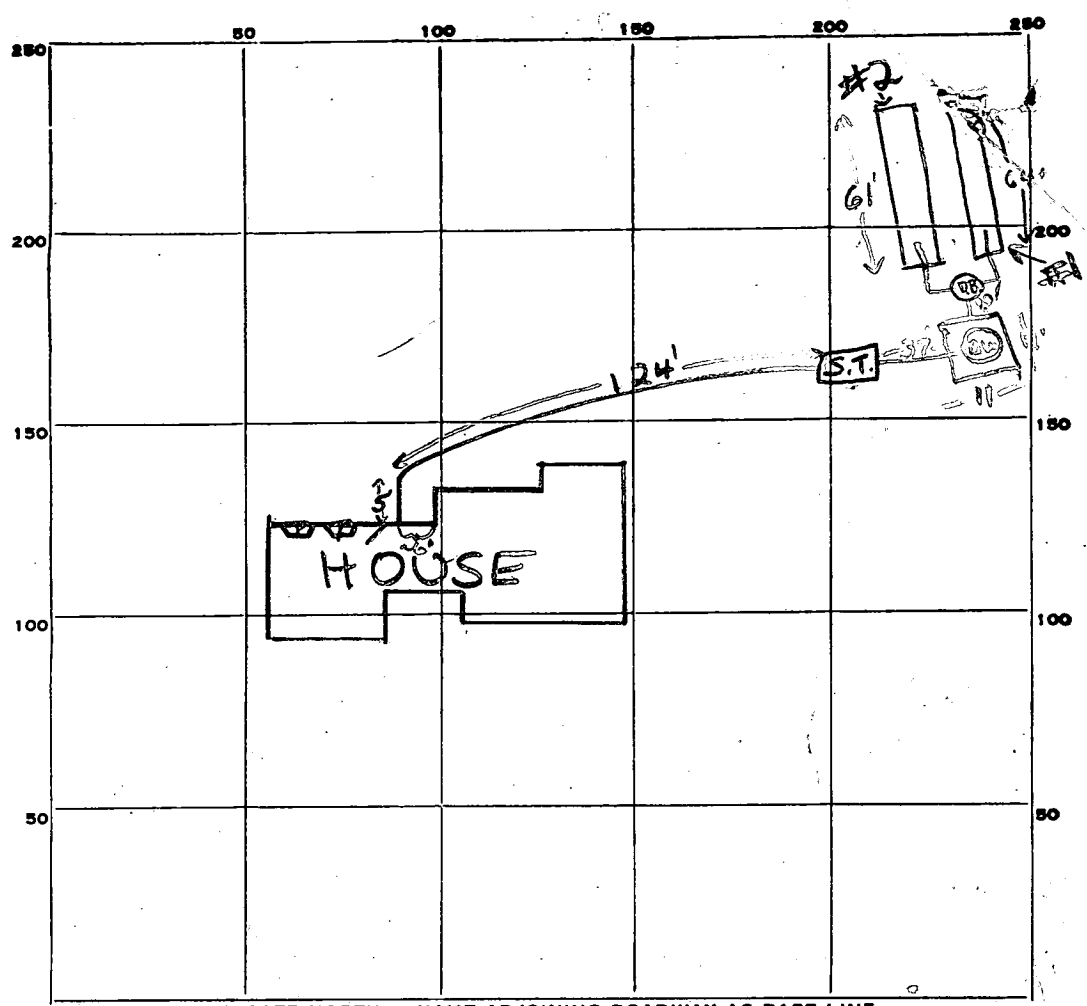
PLANS APPROVED BY William W. Zepp DATE 8/1/77

PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED. 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.

19182

Lacey's EPC.  
 now Commercial "A.C."



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

11/16/78  Signed Stop Work F.S.  
 PERMIT CARD  Signed STOP WORK F.S.

S.T.	D.W.
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SEPTIC TANK, LEVEL          CLEANOUTS         

DISTRIBUTION BOX, LEVEL D.K.

TILE FIELD, DEPTH 9 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 4' effective FT. TOTAL LENGTH 125 FT.

NUMBER OF TRENCHES 2 1/2 SIDEWALL TOTAL BOTTOM AREA 500 sq ft

OUTSIDE PERIMETER 44 FT. DEPTH BELOW INLET 4' useable FT.

Drywell ABSORBENT AREA  $\pm 176$  SQ. FT. Total abs. area  $\pm 676$  sq ft

REMARKS 12/12/77 Gravel installed in trenches, unable to measure depth of these trenches (only one small pile of soil left between 2 trenches). Wrong size gravel used in trenches average diameter  $\approx 3/4$  to 1". Drywell lid is flush (even with)  $\pm$  grade; should have at least 1 1/2' cover over drywell top. F.S. 11/10/78 Unable to determine depth of gravel because holes only  $\approx$  6 ft deep or they had card in it. info to use #2 size stone gravel 11/11/78 Depth of trenches checked, worn PVC dist. pipe repaired F.S.

DATE SYSTEM APPROVED 1/11/78 INSPECTOR F. Skinner

C 1 0460 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 W26126

DATE RECEIVED (WRA USE ONLY) July 6, 1977

DATE WELL COMPLETED 070677

DEPTH OF WELL 102 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 70-13-2160

DRILLERS IDENTIFICATION NO. 296

OWNER Smith Terrence M.  
 LAST NAME FIRST NAME

STREET OR RD 5158 Stafford Road POST OFFICE Baltimore, Md. 21229

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	
Light Brown Sand	0	2	
Brown Sand	2	14	
Sliding Rock Ledge	14	15	
Brown Sand	15	21	
Hard Brn. Sand-Stone	21	25	X
Black Sandstone	25	32	X
Black Sandstone	32	40	
Brown Sandstone	40	42	X
Black Sandstone	42	70	
Brown Sandstone	70	71	X
Black Sandstone	71	102	

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES Y 44 NO N 44

TYPE OF GROUTING MATERIAL (CIRCLE BOX): CEMENT CM 45-46 BENTONITE CLAY BC 45-46

NO. OF BAGS 29 NO. OF POUNDS 2,726

GALLONS OF WATER 174

DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 FT. TO 33 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S 4 PLASTIC PL CONCRETE CO OTHER OT

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

S T 6 35

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL ST BRASS OR BRONZE BR HOX PLASTIC PL OTHER OT

DEPTH (NEAREST WHOLE FOOT)

FROM 35 TO 102

SCREEN 1 2 3

8 9 11 15 17 21 23 24 26 30 32 36 38 39 41 45 47 51

SLOT SIZE 1. 2. 3.

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

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

TELESCOPE CASING 70 LOG INDICATOR 72 OTHER DATA AVAILABLE 74 75 76

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 6

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 20

METHOD USED TO MEASURE PUMPING RATE Flowmeter

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 42 (NEAREST FOOT) WHEN PUMPING 71 (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

AIR AIR P PISTON R ROTARY S SUBMERSIBLE T TURBINE OTHER (DESCRIBE BELOW)

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES Y NO N

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 + BELOW -

LAND SURFACE 2 (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

CIRCLE APPROPRIATE BOXES

A 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 (PLEASE PRINT) Ronald L. Kyker

SIGNATURE Ronald L. Kyker

Eventuals  
 SHADY LINE  
 X Well

**B 1** 1188 SEQUENCE NO. (WRA USE ONLY)

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

**WRA PERMIT NUMBER**  
 HD-73-2160

**FILL IN THIS FORM COMPLETELY**

**DATE RECEIVED (WRA USE ONLY)**  
 7/6/77 11:00

**OWNER**  
 COL 15 LAST NAME: Smith, COL 34 FIRST NAME: Terrence M.

**STREET OR RFD**  
 COL 36: 5158 Stafford Road COL 55:

**POST OFFICE**  
 COL 57: Baltimore, Maryland 21229 COL 76:

**B 1 CONTINUED DRILLER INFORMATION**

1 2 3 (SEQ. NO.) 6

DATE: June 13, 1977 LICENSE NUMBER: 30

FIRST NAME: Dana DRILLER LAST NAME: Kyker

SIGNATURE: *[Signature]*

**B 2 WELL INFORMATION**

1 2 3 (SEQ. NO.) 6

MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5

AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 500

**USE FOR WATER (CIRCLE APPROPRIATE BOX)**

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING, AGRICULTURE, IRRIGATION

INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.

MUNICIPAL WATER SUPPLY

PRIVATE WATER COMPANY

TEST

MUST HAVE STATE HEALTH DEPT. APPROVAL

**APPROXIMATE DEPTH OF WELL** 170' 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 DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)**

THIS WELL WILL NOT REPLACE AN EXISTING WELL

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

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

THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE):

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

APPROPRIATION PERMIT NUMBER: 54 ENGINEER REVIEW DISTRICT NO.: 63

FORCE: 67 WRITE INITIALS IN BOX: MP CONDITIONS: 70 71 72 73 74 75 76 77 78 79

**B 4 CONTINUED HEALTH DEPARTMENT APPROVAL**

1 2 3 (SEQ. NO.) 6

41  STATE HEALTH (CIRCLE BOX) COUNTY NAME: Howard COUNTY NO.: 126126

DATE: 7.17.77 APPROVED BY: Ronald W. Monaghan, Sanitarian

**B 3 LOCATION OF WELL**

1 2 3 (SEQ. NO.) 6

COUNTY: Howard

SUBDIVISION: "Glenwood Estates"

SECTION: 1 LOT: 8

NEAREST TOWN: Glenwood

MILES FROM TOWN (ENTER 0 IF IN TOWN): 1 1/2 MI

**B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)**

1 2 3 (SEQ. NO.) 6

NORTH  EAST  NORTHEAST  SOUTHEAST

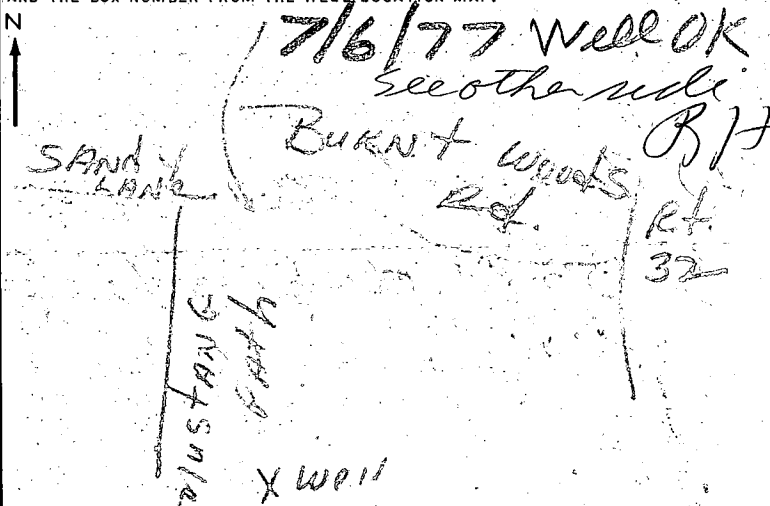
SOUTH  WEST  NORTHWEST  SOUTHWEST

NEAR WHAT ROAD: 14636 Mustang Path

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX):  NORTH  SOUTH  EAST  WEST

DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 40 MI

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.



**BOX NUMBER**

E: 700

N: 620

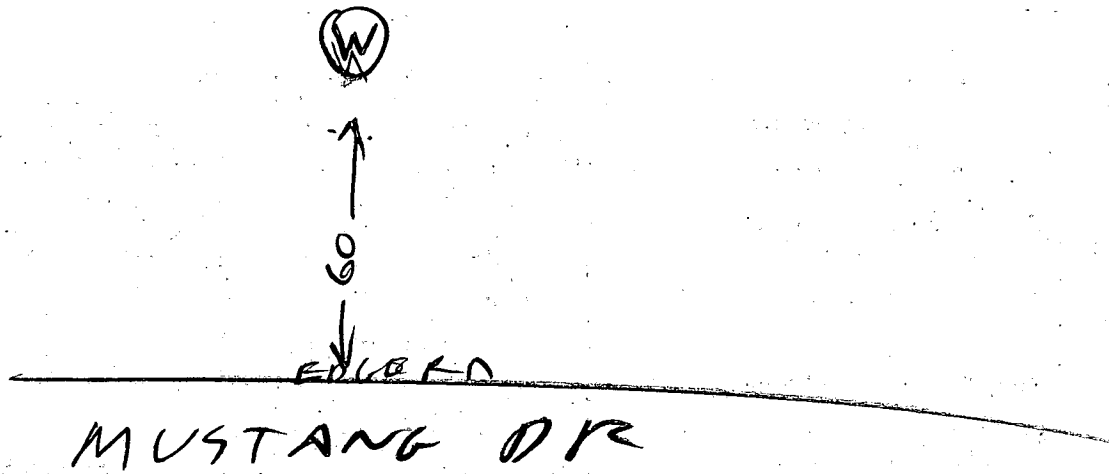
**NORTH COORDINATE**: 50 51 52 53 54 55

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

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

**B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)**

1 2 3 (SEQ. NO.) 6



7/6/77 1100

- ① Well location OK
- ② 35 ft casing with 2 ft out of ground
- ③ 33 ft depth to be grouted measured with a weighted string
- ④ 28 bags used
- ⑤ Well is OK

B. Hedges

RECEIVED  
 HOWARD COUNTY  
 HEALTH DEPT.  
 JUL 27 1977  
 DIVISION OF  
 ENVIRONMENTAL  
 HEALTH

7/12/77

I visited Lot with Mr. Donovan  
I decided that lot was OK  
The construction of the storm  
drain might a little effect on only  
the lowest. Hall. Mr  
Donovan is to send in  
revised Septer Plans. The  
Drq well will be in same  
location as original plans  
but the house will be  
moved. Send Mr. Donovan  
specification of septer system  
If he calls. I do not have  
the address

Installed -  
Westminster Lawn Service  
848-2212

# APPLICATION

A 19182

## SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 463-8000, EXT. 356

DATE 10/30/73

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 Justice Tract, Joint Venture

ADDRESS 1131 University Blvd.W.#215,Silver Spring,Md.20902 PHONE 301-649-1500

PROPERTY LOCATION:

SUBDIVISION Glenwood Estates LOT NO. 8 Sec I

ROAD AND DESCRIPTION S.E.Quadrant of intersection of Shady Lane & Burntwoods Rd.

SIZE OF LOT ~~2.0 acres~~ 87.000 sf. TYPE BLDG. 3-4 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 Justice Tract, Joint Venture: By *Martin Novak* Partner

APPROVED BY *William H. Zapp* FOR *DW + trench* DATE 4/1/77  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 8/1/79 MORE TOLBS NEEDED

BLDG. PERMIT SIGNED  
AND RETURNED 4/23/77

serial 32421

# THIS IS NOT A PERMIT



# APPLICATION

A 19182

## 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: 465-8000, EXT. 356

DISTRICT 4th

DATE 10/30/73

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 Justice Tract, Joint Venture

ADDRESS 1131 University Blvd. W. #215, Silver Spring, Md. 20902 PHONE 301-649-1500

PROPERTY LOCATION:

SUBDIVISION Glenwood Estates LOT NO. 9 Sec I

ROAD AND DESCRIPTION S.E. Quadrant of intersection of Shady Lane & Burntwoods Rd.

SIZE OF LOT ~~2.0 acres~~ 87.000 s.f. TYPE BLDG. 3-4 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 Justice Tract, Joint Venture: By *Walter D. Cook* Partner

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



