

DEPARTMENT OF HEALTH – CHARLES COUNTY

Division of Environmental Health Services 4545 Crain Highway, Post Office Box 1050 White Plains, MD 20695-1050

Tel: 301-609-6751 Fax: 301-932-0254 MD TTY: 1-800-735-2258

PRIVATE CONSULTANT

ON-SITE SEWAGE DISPOSAL SITE EVALUATION APPLICATION

(Percolation test)

		Address		
City	State	e Zip Code	Phone	
Owner	Add	ress		
Election District	Tax Map	Grid	Parcel	(required)
Property Account/Tax Id	dentification Numb	ber		
Subdivision		Lot	t	_ Section
Directions (specific)				
				ercial
Water Source: Commun	nity	Private (drilled) _		
				native System
1. Are there any existing				
2. Name of private consults.	uting firm	ualiminaur plan force -		
3. Lots/Sites greater than				
4 D ' 1E () D				
			dmound; \$210/Al	ternative System
(Make checks payable to	Charles County Dep	partment of Health)	,	·
(Make checks payable to 6 5. Number of Lots/Sites _	Charles County Dep	partment of Health) ost per site	Total amount of p	payment
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(Make checks payable to 65. Number of Lots/Sites _ **For any refunds issued, The applicant he	Charles County Dep Times c a \$25.00 administrate and a	partment of Health) ost per site ration fee will be deducte agrees as follows:	Total amount of ped from payments	payment s made**
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