

## $Division\ of\ Environmental\ Health$ 403 S $7^{th}$ Street, Rm 248, Denton, MD 21629

Health Officer, Scott T. LeRoy, MPH, MS

## **SEWAGE AND WATER ALLOCATION CERTIFICATE**

NAME OF TOWN:	DATE:
ADDRESS:	FAX:
CITY/STATE/ZIP	
Proposed Project: Single family dwelling (number of lots) Multi-family dwelling (Duplex, number of units) Commercial/Industrial, Type of Business	and # employees
Name of Project: (Please put Owner's name <u>and</u> Business name	e if applicable)
Property Tax ID:	
Location of Project:(911 # and Road Name)	Map Block Parcel Lot #
Is sewer and/or water supply extension needed? () Yes	() No
HEALTH DEPARTMENT USE:	
Approved by: Date:	Est. Flow: GPD.
This results in a net available flow of G	GPD.
THIS APPROVAL HEREBY CONFIRMS THE REQUIREMENTS OF THE ANNOTATED CODE OF MAYRLAND, ENVIRONMENTAL ARTICLE §-512 HAVE BEEN MET. THE APPROVAL AND ISSUANCE OF ANY BUILDING PERMIT FOR THE PROJECT IS THE JURISDICTION OF THE TOWN.	
	Health Dept. Rc'd:
<b>TOWN USE</b> : To the Health Department: This available flow has been reviewed and is granted to the applicant for the proposed use.	
If not utilized, this allocation expires, unless an extension is granted.	
Approved by:	Date:
	Town Rc'd:

Revised-September 2017