

PERMIT

Needs to be signed
512734
P ~~512~~

SEWAGE DISPOSAL SYSTEM

A 58533-B

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

INDEXED

DATE 9-28-99

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 3/10/08

INSPECTOR DLS

317994

Jack Fyock Septic Service _____ IS PERMITTED TO INSTALL ALTER _____

ADDRESS P.O. Box 89, Triadelphia Road, Glenelg, Maryland 21737 PHONE 410-988-9270

SUBDIVISION Buckskin Lake Overlook LOT Parcel "A" ROAD 13032 Folly Quarter Road

PROPERTY OWNER William & Robin Lukens

ADDRESS _____

TOP SEAMED TANK REQUIRED
SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

PUMPED SEPTIC SYSTEM REQUIRED

INSTALL: 1-1250 GALLON TOP SEAMED PUMP CHAMBER

- NOTES: - Septic pump detail to be provided by installer prior to issuance of septic permit
- Pump performance test is necessary prior to Health Department approval of pumped septic system.

TRENCHES - Trench to be 3 feet wide. Inlet 2.5 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 2.5 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 10 feet off the rear (233.56') lot line and 30 feet off the 199.62' lot line as seen from Folly Quarter Road. Run trenches along contour towards the 199.62' lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *5124199 ORAU*

PLANS APPROVED BY Donna K. Soe DATE 5-07-1999

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 A25

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

RECEIVED PERMIT SIGNATURE AND RETURNED 12-27-99
Serial # B00121864
Returning Wall

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

***CALL 461-9333 FOR INSPECTION OF SEPTIC SYSTEM.**

A 58533-B

APPLICATION

PERCOLATION TESTING

A 58533

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER John Mullinix

ADDRESS P.O. Box 490 MINERAL BLUFF GA PHONE _____

AGENT OR PROSPECTIVE BUYER Land Source Development Corporation % Creston Catholic

ADDRESS 10480 LITTLE PATUXENT PARKWAY PHONE _____
SUITE 500 COLUMBIA MARYLAND 21044

PROPERTY LOCATION:

SUBDIVISION Buckskin Lake Overlook LOTS 5-7 LOT NO. 7 Parcel 'A'

ROAD AND DESCRIPTION FOLLY QUARTER ROAD

TAX MAP 22 PARCEL # 73

Bob 121864
12/27/99

SIZE OF LOT 1 AC. TYPE BLDG. S.F.D
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE

FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO

COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Fecunaria Y. Fisch (agent)
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

58533
COUNTY #

SOIL PROFILE

501

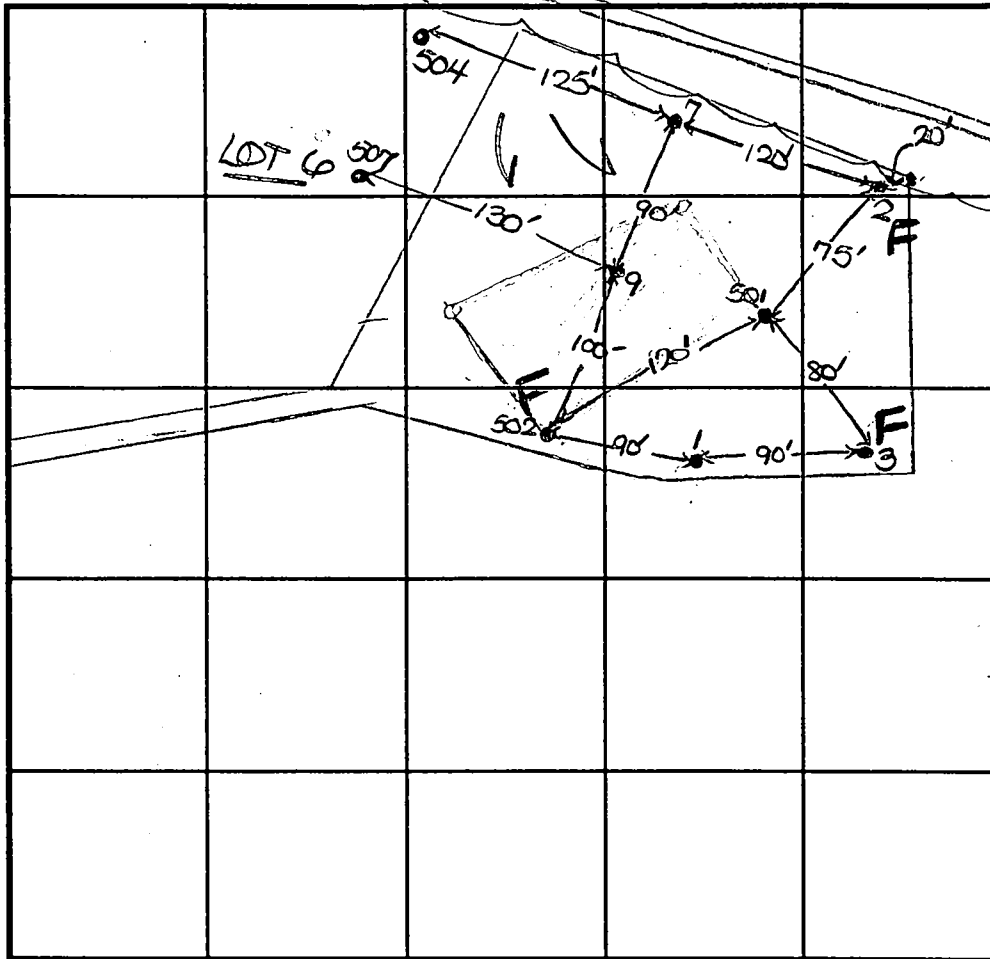
0' topsoil
1' red org
brn
cl lm
2.5'
3' pale org
brn
to
pale
brn
gray
sa lm
w/mica
15%
Rx

502

0' topsoil
1' org red
brn
cl lm
4'
CAVE-
IN
(pk grey
si cl lm
moist)
10' WATER

①

0' topsoil
1' red brn
cl lm
4' pale
brn
sa lm
w/mica
12' 15-20%
Rx



SOIL PROFILE

②

0' topsoil
1' red org
brn
cl lm
2' med
brn
sa lm
w/mica
10' CAVE IN
11.5' WATER

③

0' topsoil
1' red org
brn
cl lm
org brn
sa lm
w/mica
10' CAVE IN
11' WATER

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
Folly Quarter Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6-27-97	501	4.0'S	11:41	11:41 ₃	11:41 ₃	11:43	2
		7.5'M	11:41 ₃	11:42 ₃	11:42 ₃	11:44 ₃	2
		12.0'D	VISUAL OK				
	502	10.0'D	WATER				F
	1	12.0'D	VISUAL OK				
	2	10.0'D	WATER				F
	3	4.5'S	11:57 ₃	12:03	12:03	12:10	-
		10.0'D	WATER				F

REMARKS = approx. septic area approved F-89-59

TYPE OF SOIL _____
TESTED BY D. Soe ALSO PRESENT Mr. Cathcart
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 TRENCH WIDTH 3
INLET DEPTH 2.5 MAXIMUM BOTTOM DEPTH 4.5 SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A 58533A

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER John Mullinix

ADDRESS P.O. Box 490 MINERAL BLUFF GA PHONE _____

AGENT OR PROSPECTIVE BUYER Land Source Development Corporation % Creston Catholic

ADDRESS 10480 LITTLE PATUXENT PARKWAY PHONE _____
SUITE 500 COLUMBIA MARYLAND 21044

PROPERTY LOCATION:

SUBDIVISION Buckskin Lake Overlook LOTS 5-7 LOT NO. 7

ROAD AND DESCRIPTION FOLLY QUARTER ROAD

TAX MAP 22 PARCEL # 73

SIZE OF LOT 1 AC. TYPE BLDG. S.F.D
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Felecia Y. Fisch (agent)
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

58533

COUNTY #

SOIL PROFILE

(7)

topsoil
org brn
cl lm

lt org
brn
sa lm

10-15%
Rx

(9)

topsoil
red org
brn
cl lm

lt org
brn
sa lm
w/mica

15%
Rx

SOIL PROFILE

0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6-27-97	7	3.5'S	1:01 ₃	1:02 ₃	1:02 ₃	1:04	2
		11.0'D	Visual	OK			
	9	4.0'S	1:06 ₃	1:10	1:10	1:20	10
		11.5'D	Visual	OK			

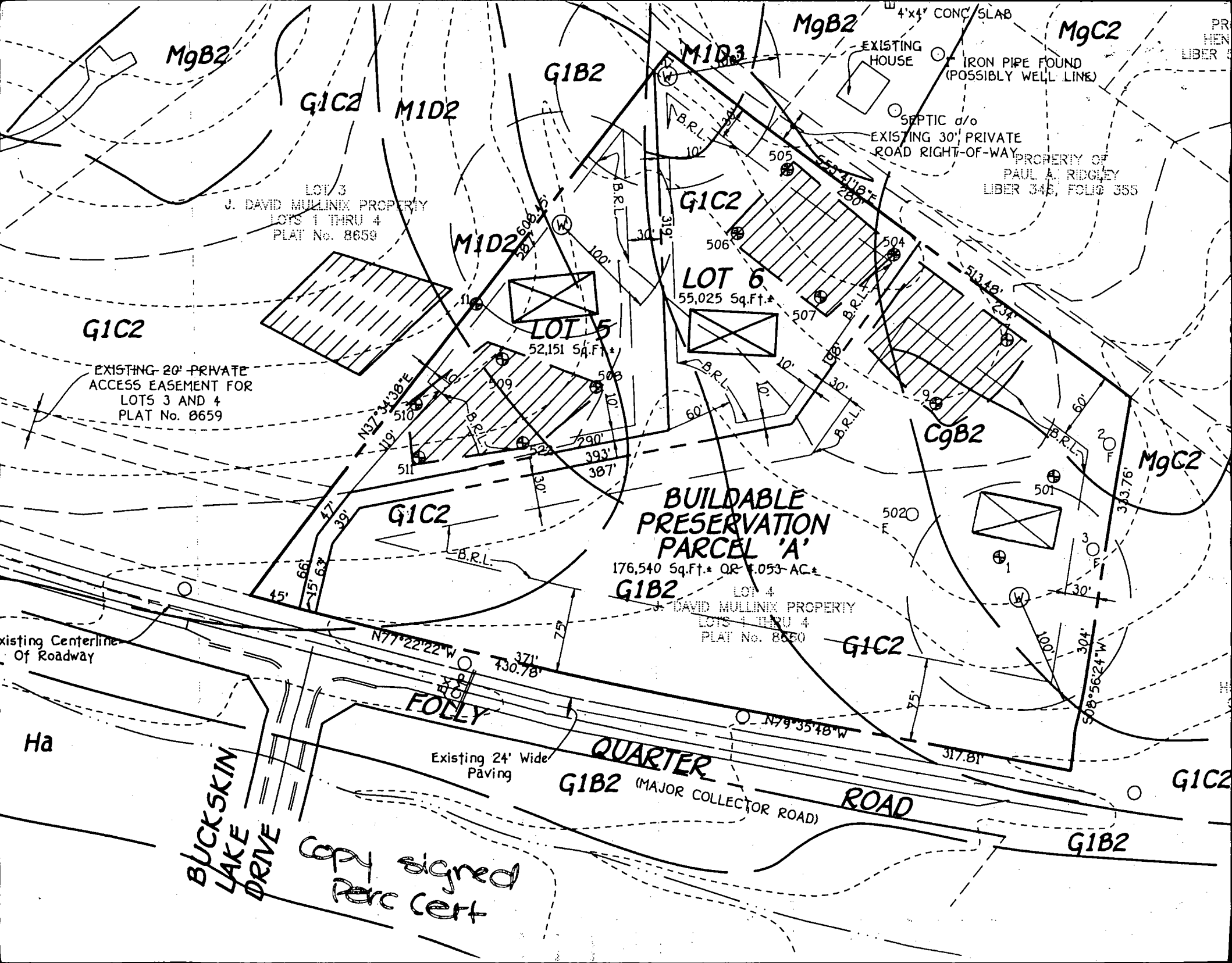
REMARKS _____

TYPE OF SOIL _____

TESTED BY D. Soe ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____



M9B2

G1C2

M1D2

G1B2

M1D3

M9B2

M9C2

LOT 3
J. DAVID MULLINX PROPERTY
LOTS 1 THRU 4
PLAT No. 8659

EXISTING HOUSE
SEPTIC d/o
EXISTING 30' PRIVATE ROAD RIGHT-OF-WAY
PROPERTY OF PAUL A. RIDGLEY
LIBER 345, FOLIO 355

G1C2

EXISTING 20' PRIVATE ACCESS EASEMENT FOR LOTS 3 AND 4
PLAT No. 8659

LOT 5
52,151 Sq.Ft.*

LOT 6
55,025 Sq.Ft.*

BUILDABLE PRESERVATION PARCEL 'A'
176,540 Sq.Ft.* OR 4.053 AC.*

G1B2
LOT 4
J. DAVID MULLINX PROPERTY
LOTS 1 THRU 4
PLAT No. 8659

C9B2

M9C2

G1C2

G1C2

G1C2

G1B2

Existing Centerline Of Roadway

Ha

BUCKSKIN LAKE DRIVE

Copy signed Perc Cert

FOLLY

QUARTER

G1B2 (MAJOR COLLECTOR ROAD)

ROAD

N77°22'22"W

N79°35'48"W

Existing 24' Wide Paving

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

B.R.L.

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75'

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371'

430.78'

317.81'

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B 1	8642	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-2045 <small>fill in this form completely</small>
-----	-------------	--------------------------------	---	---

Date Received (APA) **12/24/98**

OWNER INFORMATION **RN 7705**

Mitchell & Best
Last Name Owner First Name

1686 E. Gude Dr.
Street or RFD

Rockville, Md 20850
Town State Zip

LOCATION OF WELL **CCM**

Howard
COUNTY

Buckskin Lake Overlook
SUBDIVISION

SECTION **44** LOT **48** **Parcel A**

Clonally **Ellicott City**
NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **1** Mi

DRILLER INFORMATION

George F. Easterday M **040**
Driller's Name License No.

L. Franklin Easterday, Inc.
Firm Name

9265 Brown Church Rd., MT. Airy, Md. 21771
Address

George F. Easterday **12/23/1998**
Signature Date

Folly Quarter Rd
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD
(CIRCLE APPROPRIATE BOX)

150
DISTANCE FROM ROAD Ft.

ENTER FT OR MI

TAX MAP: BLK: PARCEL

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) **5**

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

USE FOR WATER (CIRCLE APPROPRIATE BOX)

DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

INDUSTRIAL, COMMERCIAL, DEWATERING

PUBLIC WATER SUPPLY WELL

TEST, OBSERVATION, MONITORING

GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard **A58583**
COUNTY NAME COUNTY NO.

STATE SIGNATURE INSERT S

DATE ISSUED **1/8/99** **1/7/00**
CO SIGNATURE EXP DATE

NORTH GRID **518** EAST GRID **0810**

APPROXIMATE DEPTH OF WELL **300** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. **wells**

2. **No**

3. **well**

WRITE THE BOX NUMBER FROM THE MAP HERE

808 **510**

000
000

2/4/99
1:00 Grant X

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)

CABLE REVerse-ROTary DRive-POINT

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

(32)

Clonally **Folly Quarter** **Buckskin Lake**

MAP 10 A11

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER **54** G A P **63**

PERMIT No. **HO-94-2045**

SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

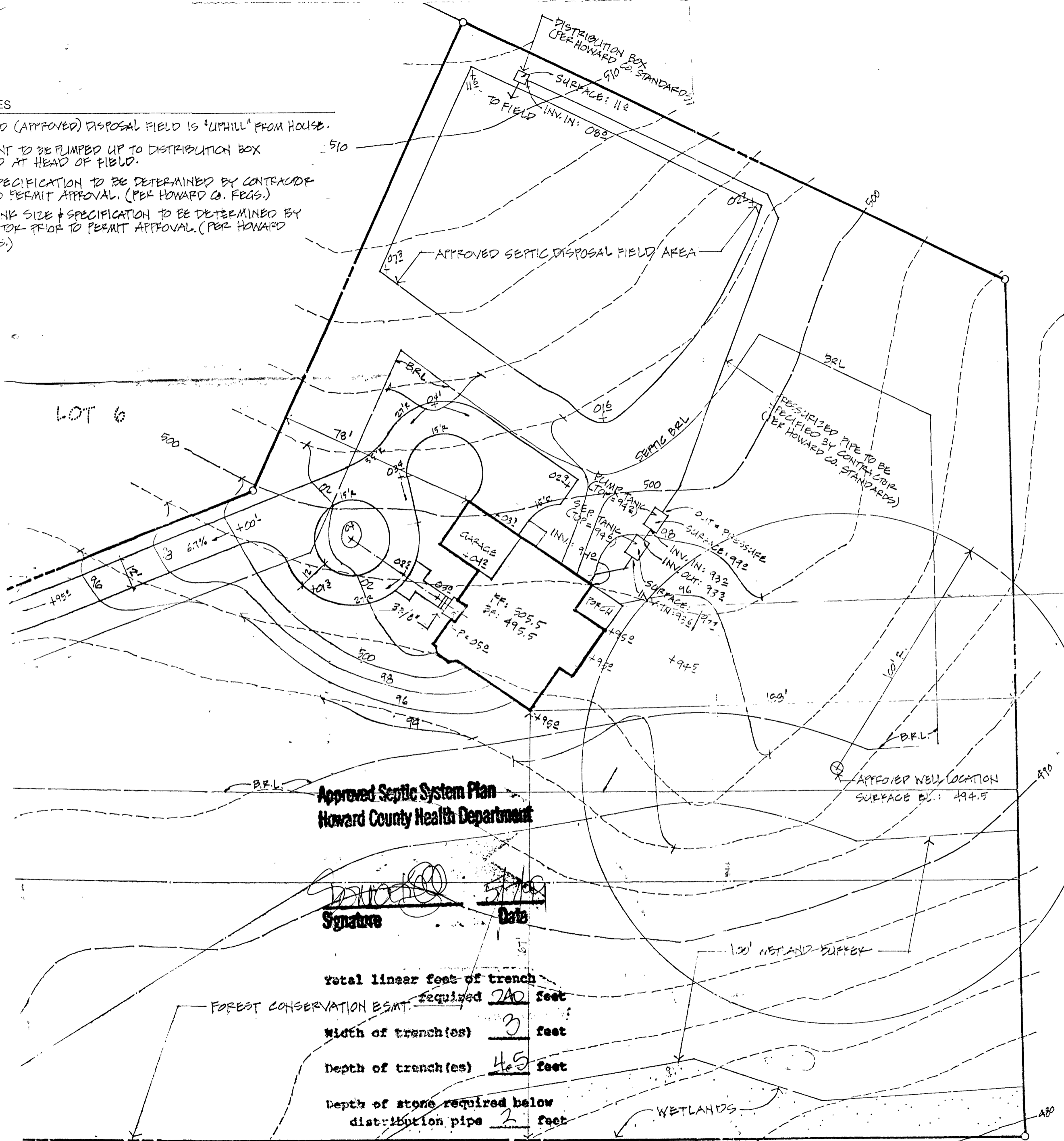
IES

30 (APPROVED) DISPOSAL FIELD IS "UPHILL" FROM HOUSE.

WATER TO BE PUMPED UP TO DISTRIBUTION BOX
LOCATED AT HEAD OF FIELD.

PIPE SPECIFICATION TO BE DETERMINED BY CONTRACTOR
PRIOR TO PERMIT APPROVAL. (PER HOWARD CO. FECS.)

TANK SIZE & SPECIFICATION TO BE DETERMINED BY
CONTRACTOR PRIOR TO PERMIT APPROVAL. (PER HOWARD
CO. FECS.)



Approved Septic System Plan
Howard County Health Department

[Signature]
Signature

[Date]
Date

total linear feet of trench required 240 feet

width of trench(es) 3 feet

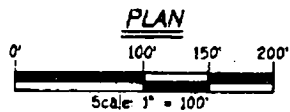
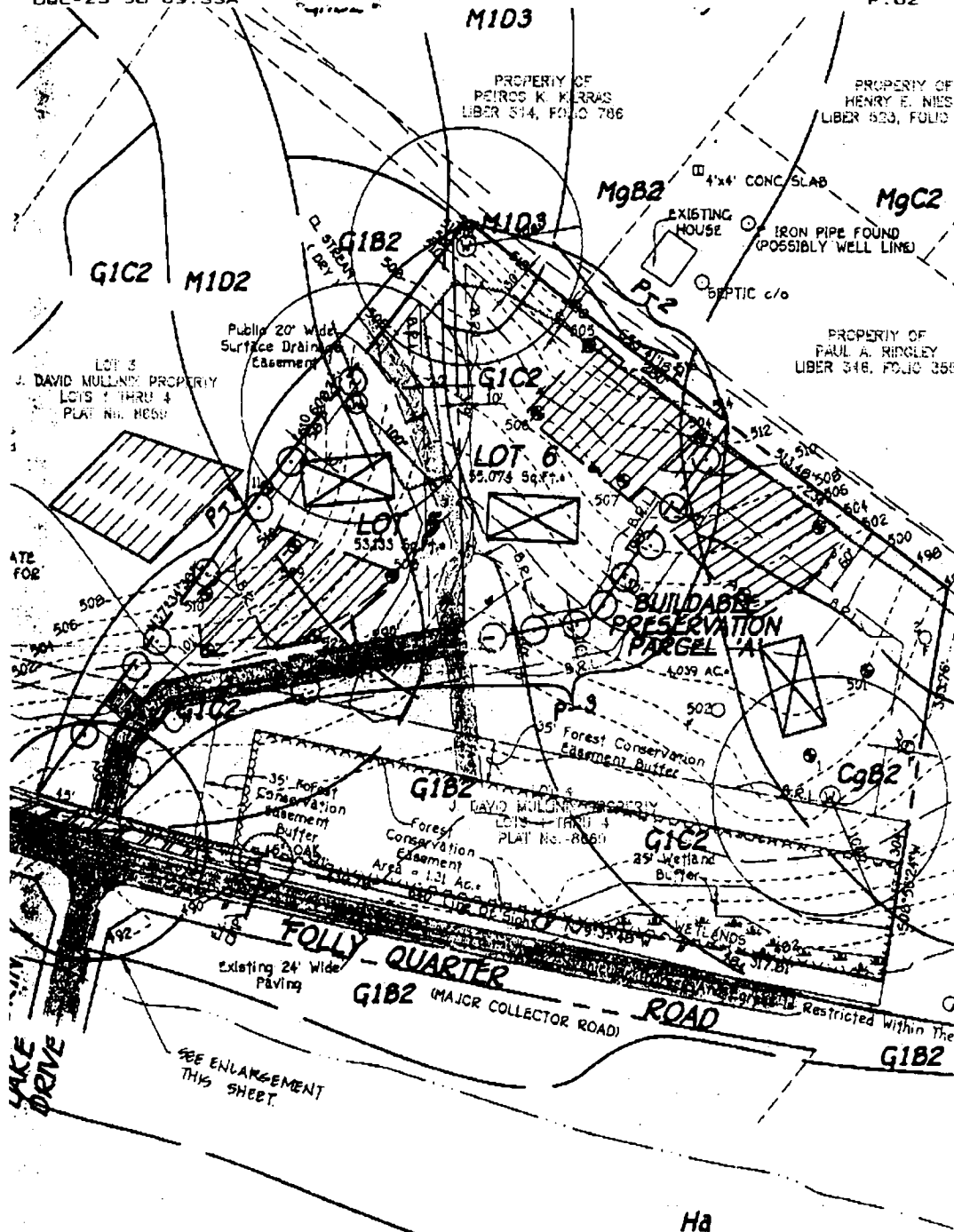
depth of trench(es) 4.5 feet

depth of stone required below distribution pipe 2 feet

SSi

PLANNING · ENGINEERING · LANDSCAPE ARCHITECTURE

FOLLY QUARTER ROAD



1/8/99
 well still
 OK as planned
 (DAS)

E. Storday
 fax 301-879-2667