

LAYOUT 5/30/02 PM INSP 4 7/19/02 pm Pump TEST  
 INSP 2 5/31/02 2:00 INSP 5 \_\_\_\_\_  
 INSP 3 6/4/02 3:00 INSP 6 \_\_\_\_\_

ISSUE DATE: 5/23/2002

APPROVAL DATE: 7/19/02

**PERMIT**  
**INDEXED**

*01-363469*

P 516990

A 59915-F

**ON-SITE SEWAGE DISPOSAL SYSTEM  
 HOWARD COUNTY HEALTH DEPARTMENT  
 BUREAU OF ENVIRONMENTAL HEALTH**

Fogles Septic Clean, Inc IS PERMITTED TO INSTALL  ALTER

ADDRESS: 580 Obrecht Road, Sykesville PHONE NUMBER: 410-795-5670

SUBDIVISION: Monticello LOT NUMBER: 4

ADDRESS: 1714 Oakdale Drive PROPERTY OWNER: D. R. Horton, Inc.

SEPTIC TANK CAPACITY (GALLONS): 1250 OUTLET BAFFLE FILTER REQUIRED

PUMP CHAMBER CAPACITY (GALLONS): 1250 COMPARTMENTED TANK REQUIRED

NUMBER OF BEDROOMS: 4

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 240

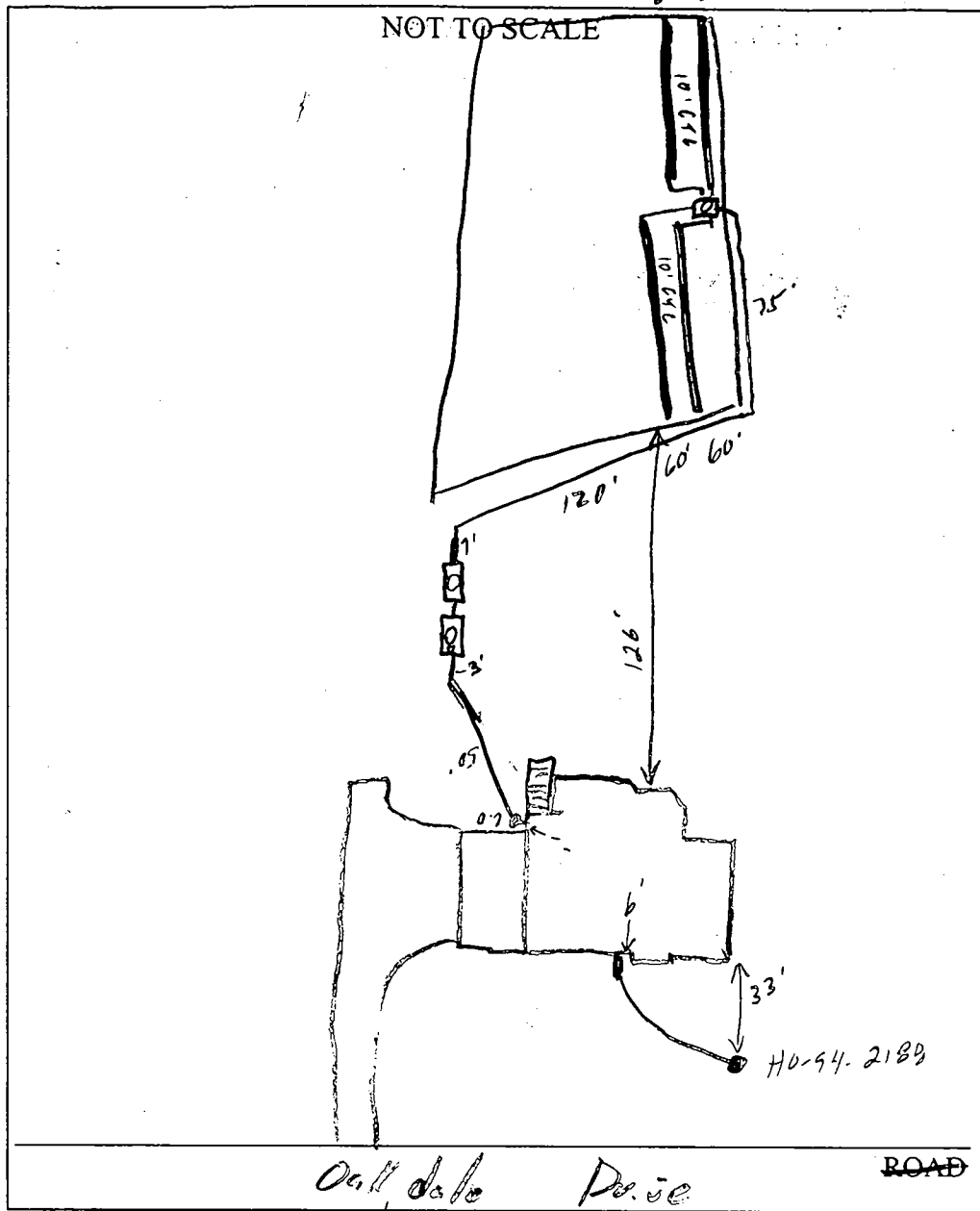
TRENCHES:	Trench to be 3.0 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.
LOCATION:	Place distribution box as shown on the approved site plan. Run trenches on contour in both directions. Trench layout may be altered at the time of layout inspection.
NOTES:	Septic Tank and Pump Tank to be adjusted in field so grading the swale does not impact them.

PLANS APPROVED: Steven R. Krieg / RL DATE: 2/06/2002

- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS UNLESS SPECIFICALLY AUTHORIZED

**NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS  
 RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM  
 PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
 ALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM**

*A59915-F*



TRENCH/DRAINFIELD DATA		
WIDTH	INLET	BOTTOM
<u>3</u>	<u>3'</u>	<u>5'</u>
NUMBER OF TRENCHES		<u>4</u>
TOTAL LENGTH		<u>240'</u>
ABSORPTION AREA		<u>7204</u>
DISTRIBUTION BOX LEVEL		<u>—</u>
DISTRIBUTION BOX BAFFLE		<u>—</u>
DISTRIBUTION BOX PORT		<u>—</u>

SEPTIC TANK DATA	
SEPTIC TANK 1 LEVEL	<u>—</u>
CAPACITY	<u>1250</u> GAL
SEAM LOC	<u>Top</u>
TANK LID DEPTH	<u>2'</u>
BAFFLES	<u>—</u>
BAFFLE FILTER	<u>—</u>
MANHOLE LOC	<u>Center</u>
6" PORT LOC	<u>Front</u>
WATERTIGHT TEST	<u>—</u>
SEPTIC TANK 2 LEVEL	<u>—</u>
CAPACITY	<u>1250</u> GAL
SEAM LOC	<u>Top</u>
TANK LID DEPTH	<u>1'</u>
BAFFLES	<u>—</u>
BAFFLE FILTER	<u>—</u>
MANHOLE LOC	<u>Center</u>
6" PORT LOC	<u>—</u>
WATERTIGHT TEST	<u>—</u>

PRE-CONSTRUCTION 5/30/02 Lot staked, Layout per BP w/ (4) 60's (50) 10' CTC

INSTALLATION 5/31/02 House corner higher than BP. Tanks set (50)

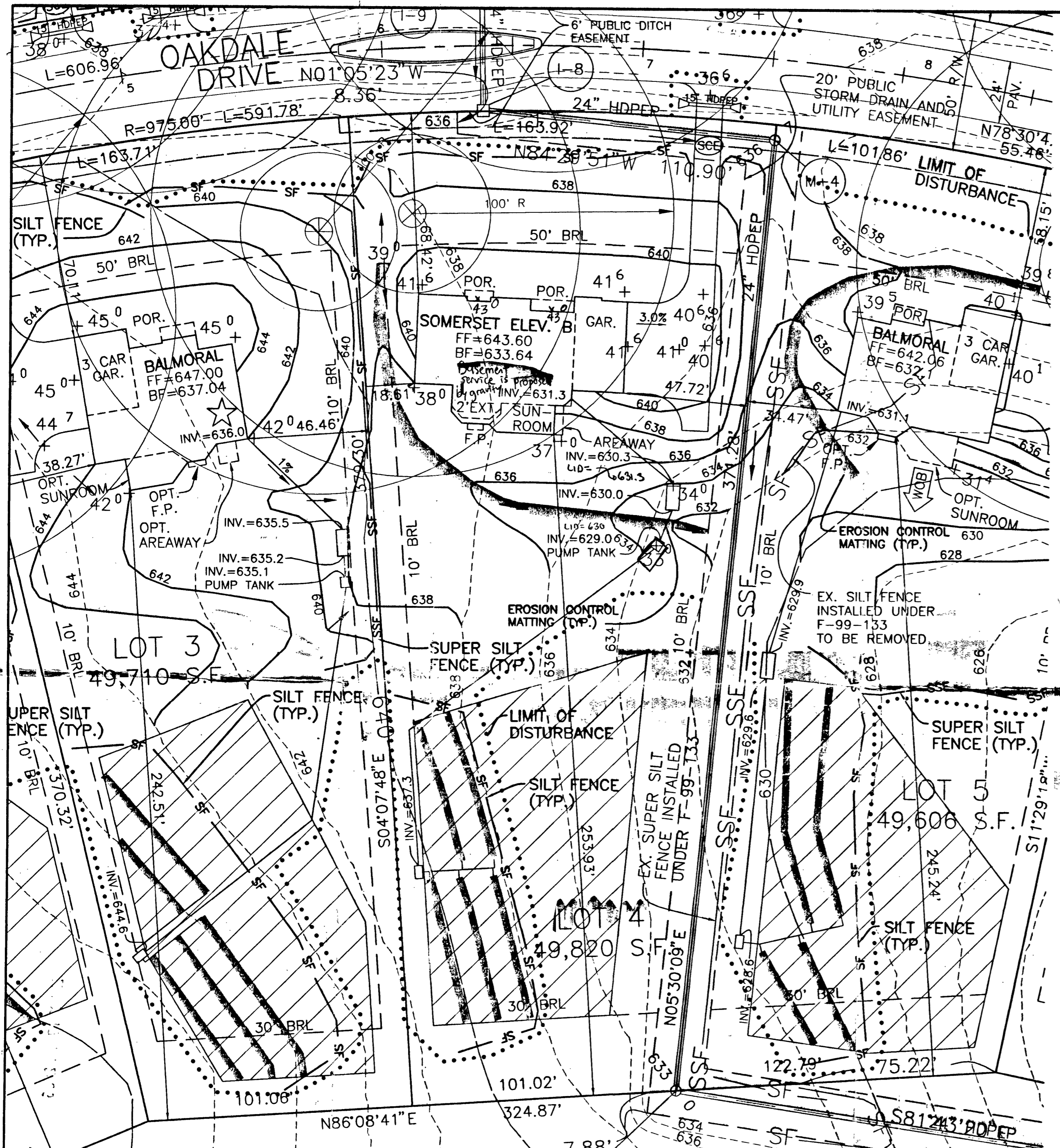
6/4/02 OK to cover all work. Pump & Alarm tests needed (50)

7/19/02 Pump & Alarm test OK (50)

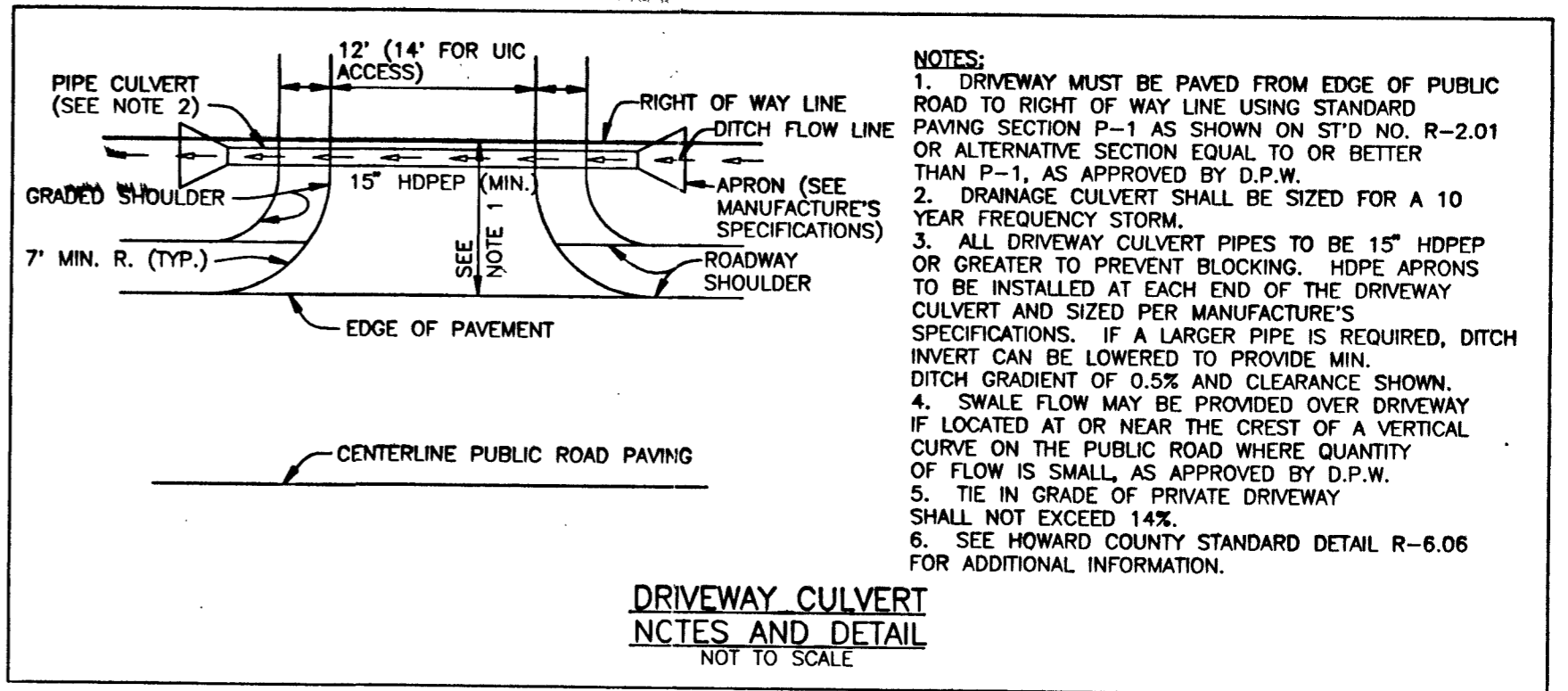
FINAL INSPECTOR [Signature]

DATE OF APPROVAL 7/19/02





- NOTES:**
1. THE LOT SHOWN HEREON WAS RECORDED ON PLAT NUMBER 14086, REFER TO THE PLAT FOR LOT DIMENSIONS, LOT AREAS, ALL EASEMENTS AND BUILDING RESTRICTIONS.
  2. THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE STATE DEPARTMENT OF THE ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA IS RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENT INTO THE PRIVATE SEWERAGE EASEMENT. RECORDATION OF A MODIFIED SEWERAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
  3. SEDIMENT AND EROSION CONTROLS WERE APPROVED BY HOWARD COUNTY SOIL CONSERVATION DISTRICT UNDER GP-03-92 AND MODIFIED FOR THIS SPECIFIC HOUSE.
  4. TOPOGRAPHY SHOWN HEREON IS TAKEN FROM THE APPROVED ROAD CONSTRUCTION PLANS.
  5. EXACT LENGTH OF SEPTIC TRENCHES ARE TO BE DETERMINED BY THE HEALTH DEPARTMENT AT THE TIME OF PERMIT ISSUANCE.
  6. SPOIL FROM THE TRENCHING OF THE SEPTIC AREA IS TO BE PLACED ON THE UPHILL SIDE OF THE EXCAVATION FOR EACH INDIVIDUAL LOT.
  7. ALL SEDIMENT AND EROSION CONTROL FEATURES USED ON THIS SITE SHALL COMPLY WITH 1994 MARYLAND STANDARDS AND SPECIFICATIONS FOR SOIL EROSION AND SEDIMENT CONTROL.
  8. ALL STORMWATER MANAGEMENT FEATURES USED ON THIS SITE MUST COMPLY WITH THE APPROVED ROAD CONSTRUCTION PLANS.



- NOTES:**
1. DRIVEWAY MUST BE PAVED FROM EDGE OF PUBLIC ROAD TO RIGHT OF WAY LINE USING STANDARD PAVING SECTION P-1 AS SHOWN ON ST'D NO. R-2.01 OR ALTERNATIVE SECTION EQUAL TO OR BETTER THAN P-1, AS APPROVED BY D.P.W.
  2. DRAINAGE CULVERT SHALL BE SIZED FOR A 10 YEAR FREQUENCY STORM.
  3. ALL DRIVEWAY CULVERT PIPES TO BE 15" HDPEP OR GREATER TO PREVENT BLOCKING. HDPEP APRONS TO BE INSTALLED AT EACH END OF THE DRIVEWAY CULVERT AND SIZED PER MANUFACTURER'S SPECIFICATIONS. IF A LARGER PIPE IS REQUIRED, DITCH INVERT CAN BE LOWERED TO PROVIDE MIN. DITCH GRADIENT OF 0.5% AND CLEARANCE SHOWN.
  4. SWALE FLOW MAY BE PROVIDED OVER DRIVEWAY IF LOCATED AT OR NEAR THE CREST OF A VERTICAL CURVE ON THE PUBLIC ROAD WHERE QUANTITY OF FLOW IS SMALL, AS APPROVED BY D.P.W.
  5. TIE IN GRADE OF PRIVATE DRIVEWAY SHALL NOT EXCEED 14%.
  6. SEE HOWARD COUNTY STANDARD DETAIL R-6.06 FOR ADDITIONAL INFORMATION.

- LEGEND**
- LIMIT OF DISTURBANCE
  - EX. SILT FENCE
  - PROP. SILT FENCE
  - EX. SUPER SILT FENCE
  - PROP. SUPER SILT FENCE
  - EX. EARTH DIKE
  - PROP. EARTH DIKE
  - STABILIZED CONSTRUCTION ENTRANCE
  - EXISTING CONTOUR
  - PROPOSED CONTOUR
  - EROSION CONTROL MATTING

Approved Septic System Plan  
Howard County Health Department

Total linear feet of trench required **240** feet

Width of trench(es) **3** feet

Depth of trench(es) **5** feet

Depth of stone required below distribution pipe **2** feet

PAVING SECTION NOT TO SCALE

Signature: *Steve R. King* Date: \_\_\_\_\_

NO.	DATE	REVISION

**BENCHMARK**  
ENGINEERS & LAND SURVEYORS & PLANNERS  
**ENGINEERING, INC.**

8480 BALTIMORE NATIONAL PIKE & SUITE 418  
ELLICOTT CITY, MARYLAND 21043  
PHONE: 410-485-6105 FAX: 410-485-6644  
EMAIL: benchmark@cois.com

OWNER/BUILDER: D.R. HORTON, INC. SUITE 230 1370 PICCARD DRIVE ROCKVILLE, MARYLAND 20850 1-301-670-6144	PROJECT: <b>MONTICELLO LOT 4</b>
LOCATION: 1714 OAKDALE DRIVE COOKSVILLE, MD 21723 TAX MAP 14 - BLOCK 19 - P/O PARCEL 246 4th ELECTION DISTRICT OF HOWARD COUNTY, MARYLAND	TITLE: <b>PERMIT PLAN</b>
HOUSE TYPE: <b>SOMERSET</b>	DATE: DECEMBER 12, 2001
DESIGN: JMC	DRAFT: JMC
SCALE: 1" = 30'	PROJECT NO. 1304 DRAWING 1 OF 1

HOWARD COUNTY HEALTH DEPARTMENT  
 BUREAU OF ENVIRONMENTAL HEALTH  
 WATER AND SEWERAGE PROGRAM  
 TEL: (410)313-2640 FAX: (410)313-2648

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 25.04.04 (MED Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Fogles Well Drilling Telephone #: 410-795-5670  
 Address: 580 Odrecht Rd  
Sykesville, MD 21784

(Must circle one) Licensed Plumber  Licensed Well Driller  Licensed Well Pump Installer  
 License # and name of individual responsible for the field installation:  
 Name (Print): Allen Compton License# MSD 009

\*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: D.E. Horton Telephone #: \_\_\_\_\_  
 Subdivision: Monticello Lot #: 4 Well Tag #: HO-94-2188  
 Site Address: 1714 Oakdale Dr

<u>Submersible Pump Data</u>	<u>Pitless Adapter</u>	<u>Well Cap and Electric Conduit</u>
Make: <u>Goolds</u>	Make: <u>Campbell</u>	Two piece watertight cap: <u>yes</u>
Model #: <u>75B05</u>	Model#: _____	Screened, vented well cap: <u>yes</u>
Pump Capacity <u>7</u> GPM	Depth: <u>42"</u> (36" min)	Cap secured to casing: <u>yes</u>
Well Yield: <u>8.5</u> GPM	NSP/WSC approved: _____	Conduit min 18" B.G.: <u>yes</u>
Depth of well encountered at time of pump installation: <u>205</u> (feet)		Conduit secured to well cap: <u>yes</u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4  
 Torque arrestors, Cable guards, or other acceptable method used- Must circle one  
 Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing N/A

<u>Piping to house</u>	<u>House Connection</u>
Type: <u>1" Black Plastic</u>	PVC sleeve to undisturbed soil at wall penetration: <u>yes</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>yes</u>
Depth of supply line: <u>42</u> (36" min)	Sleeve caulked and sealed properly: <u>yes</u>

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Allen Compton  
 Signature of company representative responsible for installation 7-11/02  
 date

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: \_\_\_\_\_ Date Insp. Approved: 7/1/02 Inspector: (50) SRK  
 Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade   
 Two piece cap installed and attached to casing securely   
 Elec. conduit extends at least 18" below grade/attached to cap properly   
 Safety rope not seen outside of well cap/casing   
 Correct well tag attached properly and casing 8" above finished grade   
 Water supply line sleeved adequately at house connection   
 Adequate grout observed below pitless adapter

C1 9686

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8/24/99

4/22/99

2205

40-94-2188

OWNER HIGHLAND Development

STREET OR RFD

TOWN GLENWOOD

SUBDIVISION KNAPP Property

SECTION

LOT 4

WELL LOG

Not required for driven wells

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

yes (Y) no (N)

TYPE OF GROUTING MATERIAL (Circle one)

CEMENT (CM) BENTONITE CLAY (BC)

NO. OF BAGS 25 NO. OF POUNDS 2350

GALLONS OF WATER 150

DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 81 ft.

CASING RECORD

casing types insert appropriate code below

ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing 6 Total depth of main casing 89

OTHER CASING (if used)

inch depth (feet) from to

screen type or open hole

SCREEN RECORD

ST STEEL BR BRASS HO OPEN HOLE PL PLASTIC OT OTHER

NUMBER OF UNSUCCESSFUL WELLS 0

WELL HYDROFRACTURED

yes (Y) no (N)

CIRCLE APPROPRIATE LETTER

- 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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS LIC. NO. 1 MSD024

DRILLERS SIGNATURE

LIC. NO. 1 D

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min.) 8.5

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 39 ft.

WHEN PUMPING 108 ft.

TYPE OF PUMP USED (for test)

A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (CIRCLE) (YES OR NO) YES (NO)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35

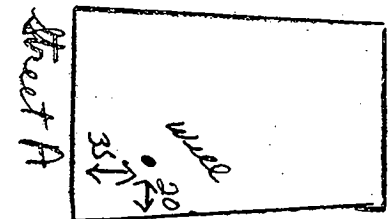
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above LAND SURFACE - below 2 (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)







B 1 **7481**

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND  
PERMIT TO DRILL WELL  
please print or type

STATE PERMIT NUMBER

**HO - 94 - 2188**

fill in this form completely

Date Received (APA)

OWNER INFORMATION

8 MM DD YY 13

**Highland Development**  
15 Last Name Owner First Name 34

**P.O. Box 228**  
36 Street or RFD 55

**Clarksville Md. 21029**  
57 Town 70 State 72 Zip 76

B 3 **Howard** LOCATION OF WELL

8 COUNTY 21

**Knapp Property**  
23 SUBDIVISION 42

SECTION 44 46 LOT **4** 48 50

**Clenwood**  
52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **3** M I  
73 76 77 78

DRILLER INFORMATION

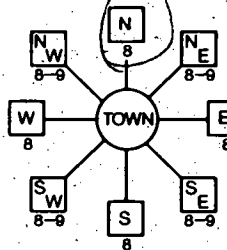
**Joseph L. Mayne** MS D 024  
Driller's Name 76 License No. 81

**Joseph L. Mayne Well Drilling**  
Firm Name

**5512 Ridge Rd. Mt. Airy 21771**  
Address

**Joseph L. Mayne** 3/8/99  
Signature Date

B 4  
1 2  
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



**Street A**  
11 NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 **30** 37  
DISTANCE FROM ROAD FT  
ENTER FT OR MI 38 39

TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

B 2 WELL INFORMATION

APPROX. PUMPING RATE **5**  
(GAL. PER MIN.) 8 12

AVERAGE DAILY QUANTITY NEEDED **500**  
(GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- I INDUSTRIAL, COMMERCIAL, DEWATERING
- P PUBLIC WATER SUPPLY WELL
- T TEST, OBSERVATION, MONITORING
- G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

**HOWARD** **13**  
COUNTY NAME COUNTY NO.

STATE SIGNATURE \_\_\_\_\_ INSERT S → 41

DATE ISSUED **03/10/99** **Chris** **03/09/00**  
43 MM DD YY 48 CO SIGNATURE EXP. DATE

NORTH GRID **544** 0 0 0 EAST GRID **0796** 0 0 0  
50 55 57 63

APPROXIMATE DEPTH OF WELL **300** FEET  
24 28

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered)  JETTED  Jetted & DRIVEN
- AIR-ROTary  AIR-PERCussion  ROTARY (Hydraulic Rotary)
- CABLE  REVerse-ROTary  Drive-POINT
- other \_\_\_\_\_

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

1. **el**
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E **796**  
N **544**

**4-22-99**  
**No Insp**  
**X**

REPLACEMENT OR DEEPEINED 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
- D THIS WELL WILL DEEPEIN AN EXISTING WELL

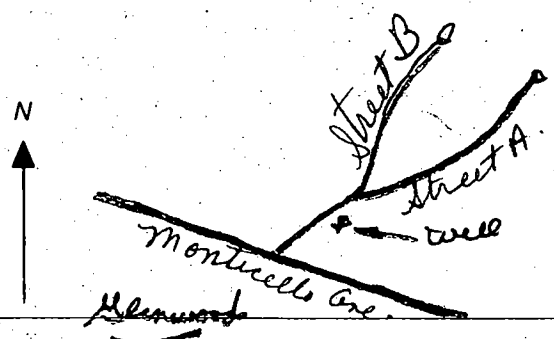
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 \_\_\_\_\_ 52

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

APPROP. PERMIT NUMBER \_\_\_\_\_ G A P \_\_\_\_\_ 54 63

PERMIT No. **HO - 94 - 2188**  
70 71 72 73 74 75 76 77 78 79

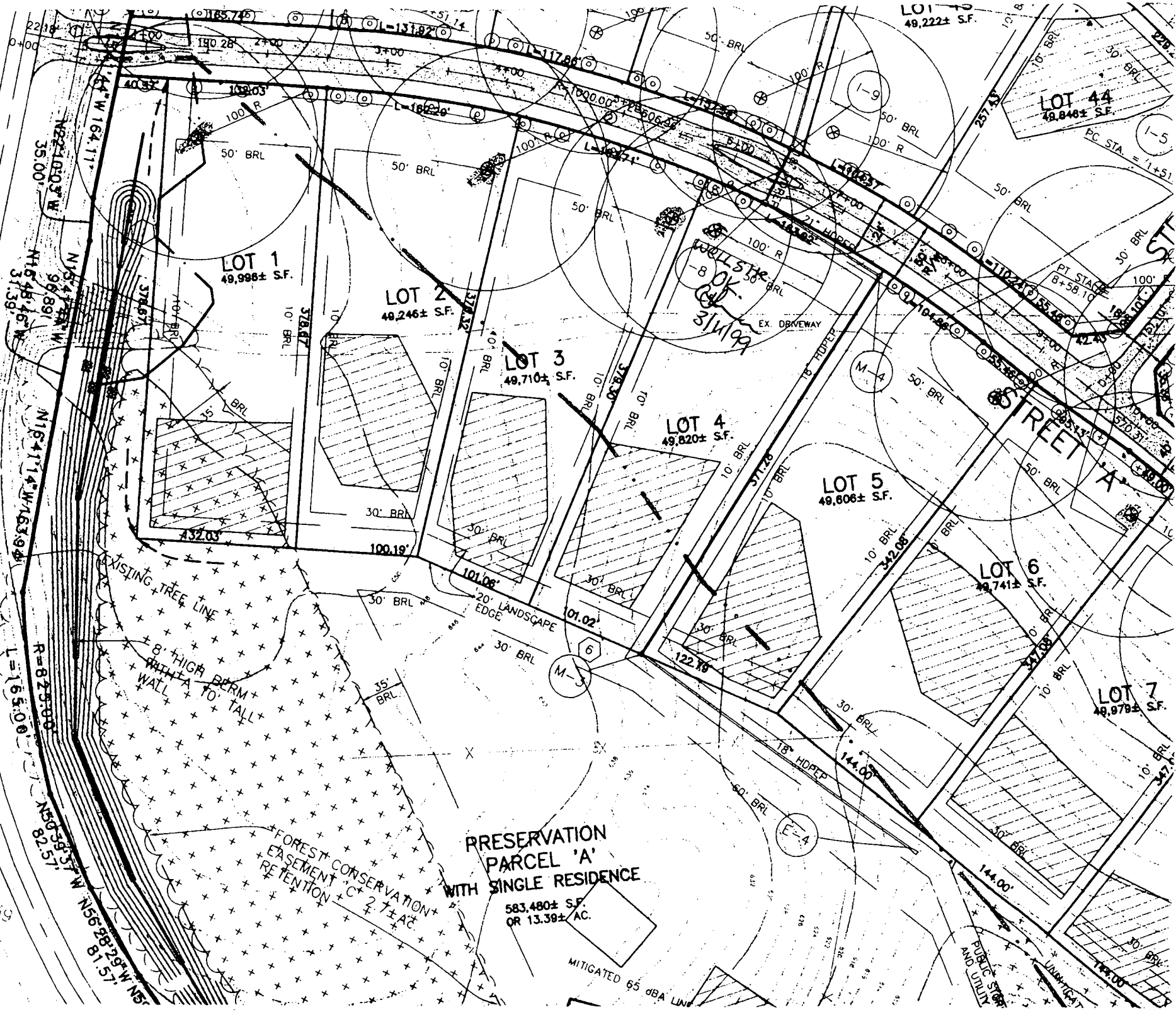
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

GRID NORTH



LOT 1  
49,998± S.F.

LOT 2  
49,246± S.F.

LOT 3  
49,710± S.F.

LOT 4  
49,820± S.F.

LOT 5  
49,806± S.F.

LOT 6  
49,741± S.F.

LOT 7  
49,979± S.F.

**PRESERVATION  
PARCEL 'A'  
WITH SINGLE RESIDENCE**  
583,480± S.F.  
OR 13.39± AC.

FOREST CONSERVATION  
EASEMENT  
RETENTION

EXISTING TREE LINE  
8' HIGH BERM  
WITH A 10' TALL  
WALL

STREET 'A'

LOT 44  
49,846± S.F.

LOT 10  
49,222± S.F.

WILL SITE  
OK.  
3/1/99

MITIGATED 65 dBA L<sub>10</sub>

PUBLIC STORM  
AND UTILITY

LIQUIDITY

100.00

144.00

30' BRL

50' BRL

10' BRL

30' BRL

35' BRL

10' BRL

10' BRL

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# APPLICATION

4/21/98  
5/19/98  
4/28  
5/22

## PERCOLATION TESTING

A 59914  
P \_\_\_\_\_

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

56 LOTS  
EXISTING HOUSE(S) - 2600-5607105  
TO 1st PERMITS  
4 DAYS FOR PERMITS  
WET SEASON TESTING  
4 DAY FOR FOLLOW-UP TESTING  
WILL PROBABLY SUBMIT IMPROVED PLAN/ APPLICATION (CW)  
DATE 4/3/98  
DISTRICT \_\_\_\_\_

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

4/21 - 4/24  
&  
5/19 - 5/22

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

PROPERTY OWNER ALFRED KNAPP

ADDRESS MONTICELLO AVE / SYKESVILLE PHONE 410-465-4242

AGENT OR PROSPECTIVE BUYER CLARK SPERRY / SOC GROUP

ADDRESS 3480 Ballenger Not. PIKE PHONE 410-465-4244

PROPERTY LOCATION:

SUBDIVISION Knapp Prop. LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION M

TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_ (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.

[Signature] SECURITY DIV.  
(SIGNATURE OF APPLICANT)  
STEVE SHIPLE - TSA

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

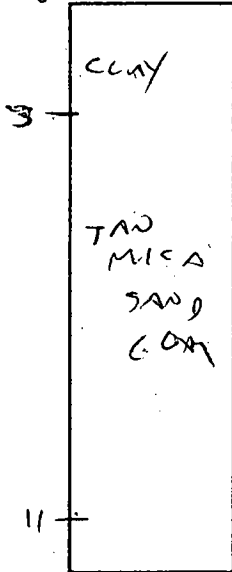
KNAPP SUBD.

A59915

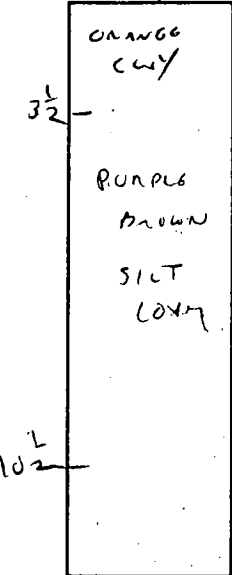
COUNTY #

SOIL PROFILE

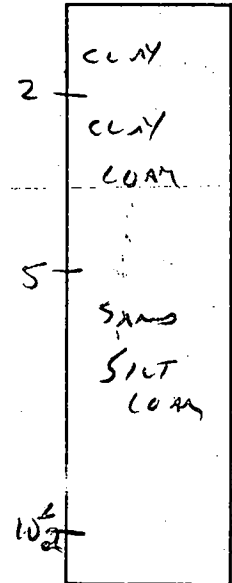
12-8+13



14+8

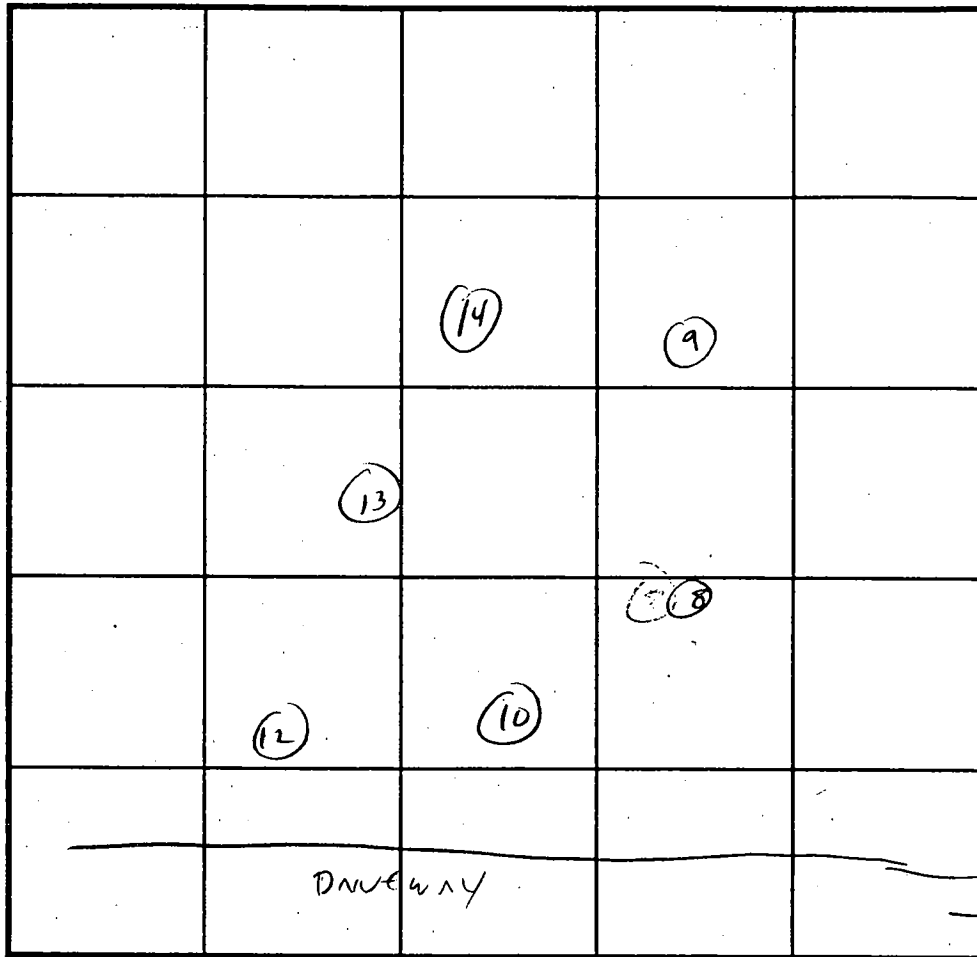
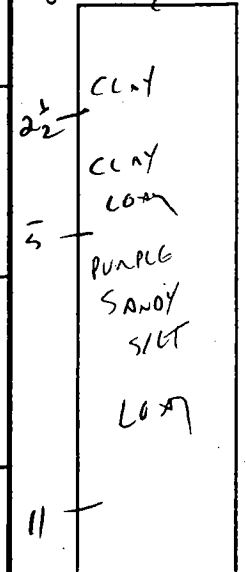


10



SOIL PROFILE

9



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/23/98	12	4	3:57	4:00	4:00	4:05	5 MIN
	13	VIS OK	3-11'				
	14	4	4:00	4:01	4:01	4:03	2 MIN
	10	4 1/2	4:04	4:07	4:07	4:12	5 MIN
	8	3 1/2	4:05	4:07	4:07	4:11	4 MIN
	9	4 1/2	4:07	4:08	4:08	4:10	2 MIN

REMARKS \_\_\_\_\_  
 TYPE OF SOIL \_\_\_\_\_  
 TESTED BY CWilla ALSO PRESENT SPERRY  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_  
 INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_

4/21/98 - 4/28  
5/19/98 - 5/22

# APPLICATION

## PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 313-2540

56 LOTS  
EXISTING HOUSE(S) - W6-65-52071CS  
TO BE ELIMINATED  
4 DAYS FOR PERMITS  
WET SEASON TESTING  
4 DAY 150N  
FOLLOW-UP TESTING  
will provide submit  
FEES &  
IMPROVEMENT PLAN/  
APPLICATION (CW)

A 59914  
P \_\_\_\_\_

DISTRICT \_\_\_\_\_  
DATE 4/3/98

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 ALFRED KNAPP  
ADDRESS MONTICELLO AVE / SYKESVILLE PHONE 410-465-4242  
AGENT OR PROSPECTIVE BUYER CLARK SPERRY / SOC GROUP  
ADDRESS 8480 BELLEMEAD PIKE PHONE 410-465-4244

PROPERTY LOCATION:  
SUBDIVISION Knapp Prop. LOT NO. \_\_\_\_\_  
ROAD AND DESCRIPTION M  
TAX MAP \_\_\_\_\_ PARCEL # \_\_\_\_\_  
SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_  
(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.

[Signature] SECURITY O.N.  
(SIGNATURE OF APPLICANT)  
STEVE SHIPLE - TSA

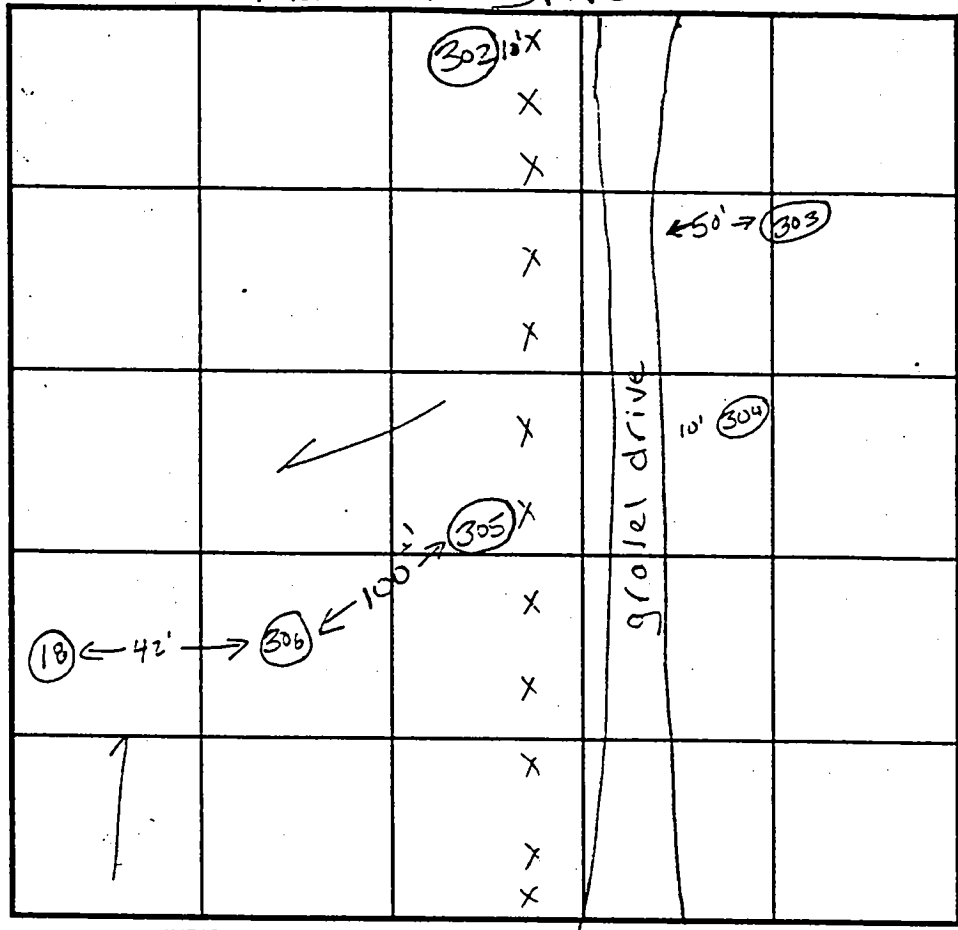
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

Monticello Drive

COUNTY # \_\_\_\_\_  
 SOIL PROFILE  
 0' 306  
 or/red  
 cl lm  
 3.0'  
 pink  
 brown  
 mica  
 sandy  
 clay  
 loam  
 11.0'  
 305  
 or/red  
 cl lm  
 5.0'  
 orange  
 pink  
 silty  
 clay  
 loam  
 powdery  
 2.0'  
 304  
 orange  
 clay  
 loam  
 3.5'  
 pink  
 yellow  
 silty  
 clay  
 loam  
 12.0'



SOIL PROFILE  
~~302~~ 302  
 0' or/red  
 cl lm  
 3.0'  
 tan  
 orange  
 silty  
 clay  
 lm  
 3.0'  
 303  
 orange  
 clay lm  
 3.0'  
 pink tan  
 yellow  
 silty  
 clay  
 20% rx  
 frags  
 11.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME	
			START	STOP	START	STOP		
5.19.98	306	4.0'S	10:02	10:03 <sup>30</sup>	10:03 <sup>30</sup>	10:05 <sup>30</sup>	2min	
		11.0'D	visual	ok - see profile				
	305	12.0'D	visual	only - see profile				
	304	4.0'S	10:14 <sup>15</sup>	10:18	10:18	10:24 <sup>30</sup>	6:30	
		12.0'D	visual	ok - see profile				
	303	11.5'D	visual	only - ok see profile				
	302	3.5'S	10:52	10:52 <sup>30</sup>	10:52 <sup>30</sup>	10:53	30 sec	
		12.0'D	visual	ok - see profile				
			(hole re-perced 3 times)					

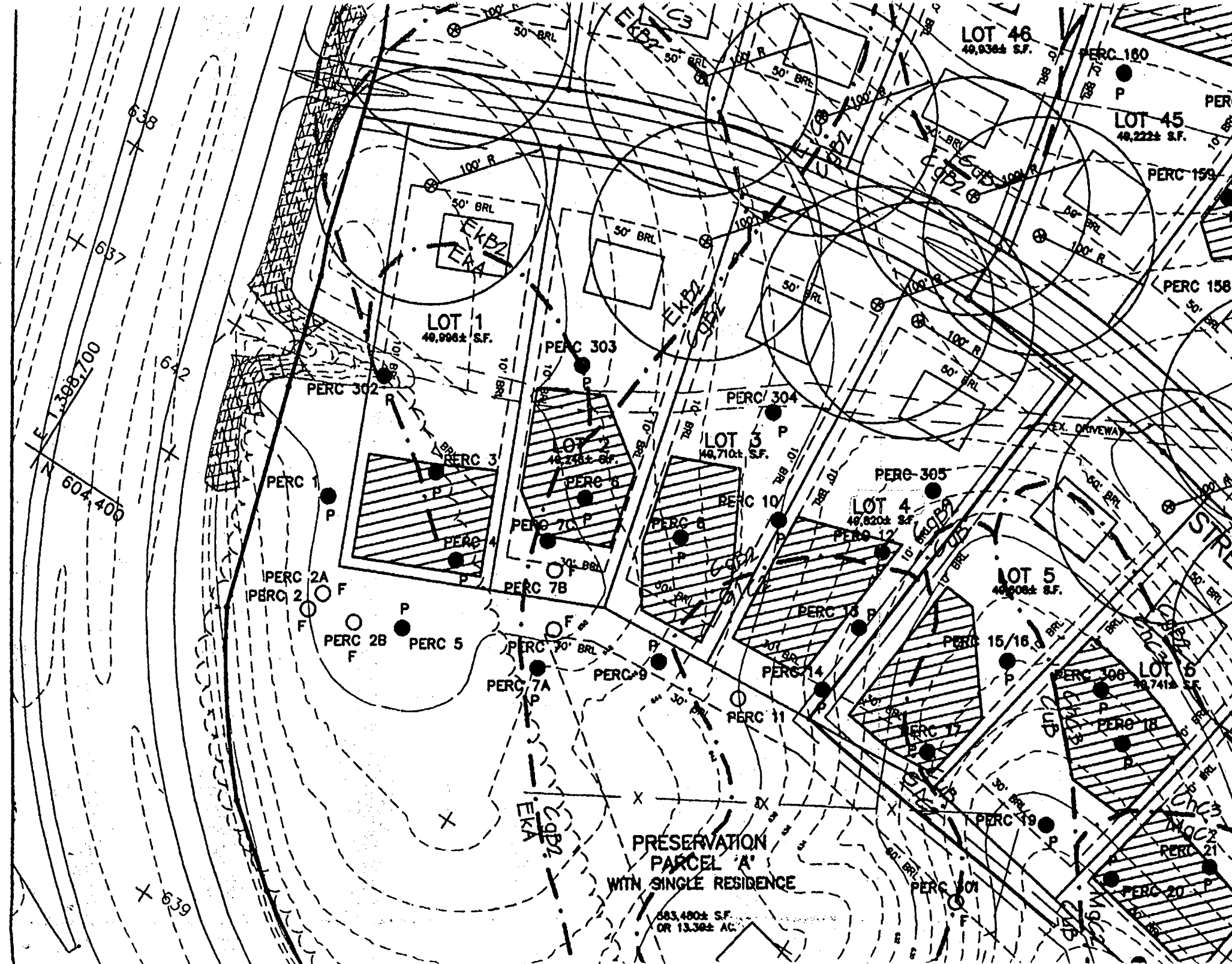
REMARKS test holes staked  
 TYPE OF SOIL Lim Maiste  
 TESTED BY Jim Maiste ALSO PRESENT Clark Sperry  
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 1/2 minutes TRENCH WIDTH \_\_\_\_\_  
 INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT/BEDROOM 180

Perc Holes That Correspond To Different  
Lots For Knapp Property - (Lots 1-28)

Lot # -

Perc Hole Numbers for Lot -

1	1, 2, 2A, 3, 4, 5, 7C, 302
2	6, 7B, 7C, 8, 303
3	6, 8, 9, 10, 304
4	10, 11, 12, 13, 14, 305
5	13, 14, 15, 16, 17
6	15, 16, 18, 19, 306
7	18, 19, 20, 21, 22, 23
8	23, 24, 25, 26, 27
9	37, 38, 39, 40
10	39, 40, 41, 42, 43, 44
11	43, 44, 45, 46, 47, 48
12	47, 48, 49, 50, 51, 52
13	51, 52, 53, 54, 55, 56
14	55, 56, 57, 58
15	59, 60, 61, 62
16	62, 63, 64, 65, 317
17	69, 70, 71, 72, 314, 315, 315A, 316
18	72, 73A, 74, 312, 313, 314
19	78, 78A, 80, 311, 311A, 312, 313
20	80, 81, 82, 83, 84, 310
21	83, 84, 85, 86, 87, 309, 310
22	85, 86, 87, 87A, 88, 89, 90, 91A, 309
23	90, 91, 91A, 92, 93
24	91, 92, 94, 95, 96, 308
25	95, 96, 97, 101, 103, 308
26	100, 101, 102, 103, 105, 320
27	102, 318, 320
28	103, 104, 105, 106, 107, 108, 109



LOT 46  
49,936± S.F.

LOT 45  
48,222± S.F.

LOT 1  
48,996± S.F.

LOT 3  
48,710± S.F.

LOT 4  
49,520± S.F.

LOT 5  
49,998± S.F.

PRESERVATION  
PARCEL 'A'  
WITH SINGLE RESIDENCE

583,400± S.F.  
OR 13.39± AC.

638

637

E 1,398.700

604.400

636

635

634

633

632

631

630

629

100' R

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