

05-383528

5-15-85
Approved
S. Schul

PERMIT

P 34640

A 24063

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

ELLICOTT CITY

DISTRICT 5th

DATE 12/05/84

INDEXED

Oskar Schulz IS PERMITTED TO INSTALL ALTER

ADDRESS 6610 Blackwatch Lane Highland, Md. 20777 PHONE 531-2000

SUBDIVISION Highland Lakes ROAD 6582 Castlebay Lane LOT 67, Sec. 2

PROPERTY OWNER Oskar Schulz Mr. and Mrs. Row Marx

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO

1250 4

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 158 sq.ft. per bedroom. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 5 feet of stone below distribution pipe. LOCATION: Start the trench 85 feet from the front lot line and 20 feet from the right side of the lot as seen when facing the lot from Prestwick Drive. Run the trench toward the left side of the lot as seen when facing the lot from Prestwick Drive. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Raymond Hodges DATE 12/28/83

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

PERMIT VOID AFTER THREE 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED

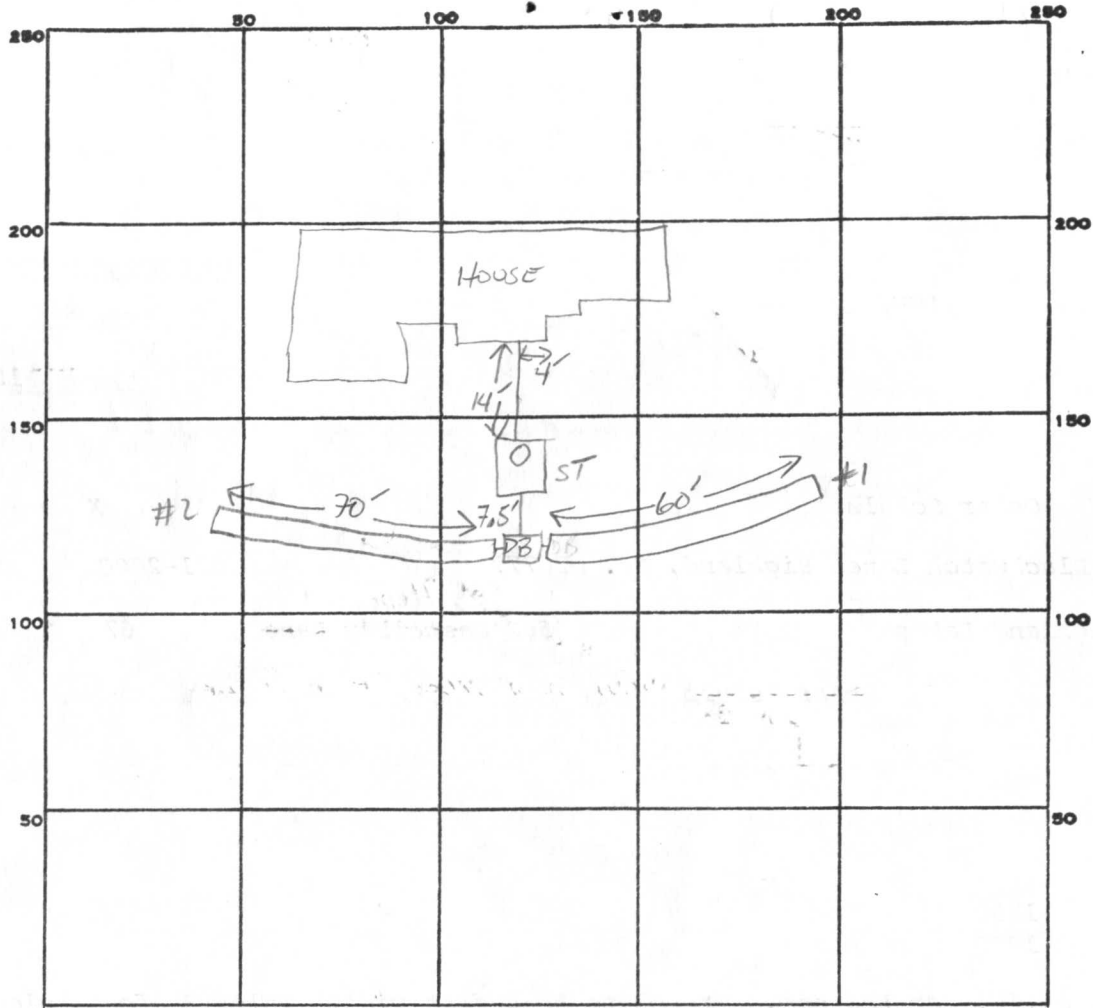
BLDG. PERMIT SIGNED
AND RETURNED 4/4/94
Serial # 53297
Attached garage

A 24063

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082



56
3
2 158
32

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PRESWICK DR.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9' FT. TRENCH WIDTH 2 FT.

INLET 3.5'

GRAVEL DEPTH 5.5 FT IN. TOTAL LENGTH #1 60' #2 70' FT.

TOTAL 130 FT

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 715 SQ. FT.

130
5.5
650
650
715.0

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 715 SQ. FT.

REMARKS 5-15-85 OK TO ADD STONE TO REMAINDER OF TRENCH; NEED ST CLEANOUT
AND PIPE IN TRENCH; 5-15-85 OK TO COVER ALL WORK

DATE SYSTEM APPROVED 5-15-85

INSPECTOR SAMP

APPLICATION

A 24063

P _____

SEWAGE DISPOSAL TESTING

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: 465-5000, EXT. 356

DISTRICT Fifth

DATE 9/15/76

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 Mr. Walter Bucher

ADDRESS Highland Partnership
8777 First Avenue PHONE (8)-588-5100
Silver Spring, MD 20901

PROPERTY LOCATION:

SUBDIVISION Highland Lake LOT NO. 122 122

ROAD AND DESCRIPTION Castlebay Lane

SIZE OF LOT one acre m/1 TYPE BLDG. 3 or 4 bedroom
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 /s/ Mr. Walter Bucher

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

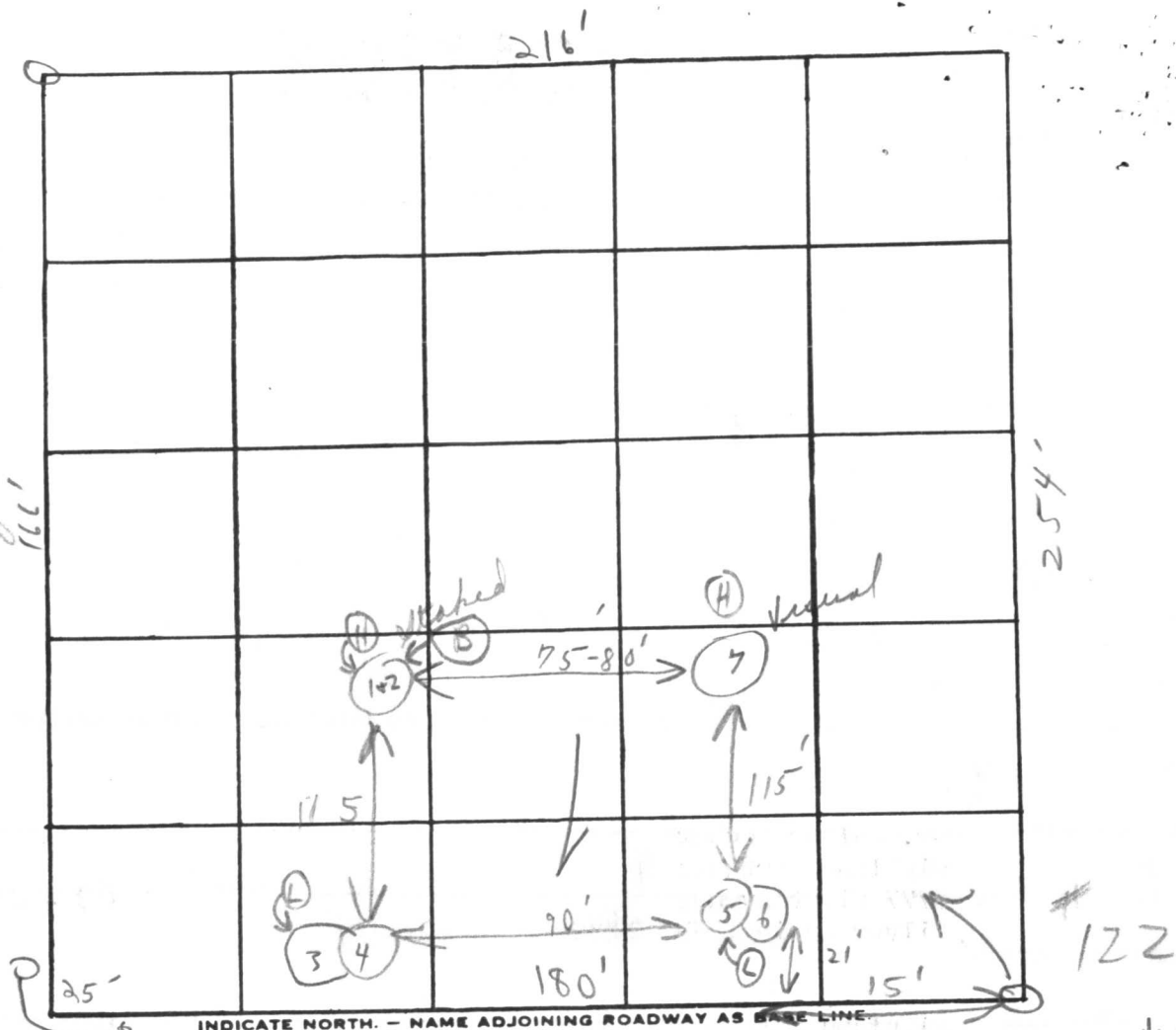
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Cattleway Lane



Prestwick Drive

Soil Profile
 ↓ 3 1/2' clay
 ↓ 9 1/2' loam
 ↓ 4' clay
 ↓ 8 1/2' sandy loam
 ↓ 4' clay
 ↓ 9' loam

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/10/76	1	3 1/2' s	10:46	10:48	10:48	10:58	10 m
	(H) 2	13' p	10:46	10:48	10:48	10:52	4 m
	3	4' s	10:38	10:40	10:40	10:45	5 m
	(L) 4	12 1/2' p	10:38	10:40	10:40	10:45	5 m
	5	4 1/2' s	10:24	10:28	10:28	10:35	7 m
	(L) 6	13' p	10:24	10:25	10:25	10:27	2 m
	(H) 7		Visual		1-4' clayed	4-12 1/2' sandy loam	
						6	33

Soiled 3 1/2'

6 m

Have them field locate holes

REMARKS Open field

TYPE OF SOIL Sandy loam below clay

TESTED BY C. B. S. ALSO PRESENT: Kitterman + Son
Son in law

APPLICATION

A 20260

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 6/27/74

Preliminary

more tests

VOID 70

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 J.T. Barnes of Washington, D.C. Inc. & D. Grunberg

ADDRESS 152 New Mark Esplanade, Rockville, Md. PHONE 340-8979

PROPERTY LOCATION:

SUBDIVISION Highland Lake LOT NO. 166-Phase 4 *? ok*

ROAD AND DESCRIPTION Corner Prestwick Drive & Castlebay Lane *57*

SIZE OF LOT 40000 +/- TYPE BLDG. 3,9
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 *Paul King*

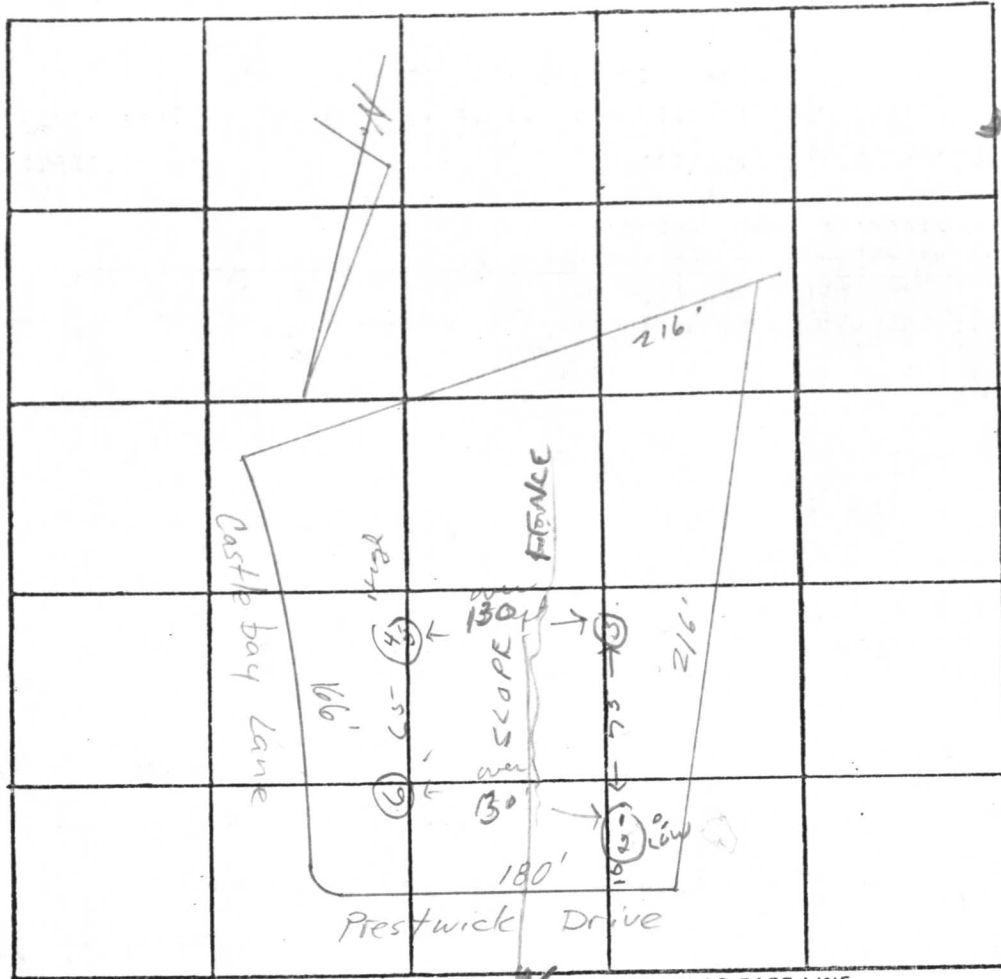
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



11/10

certify
Helen

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

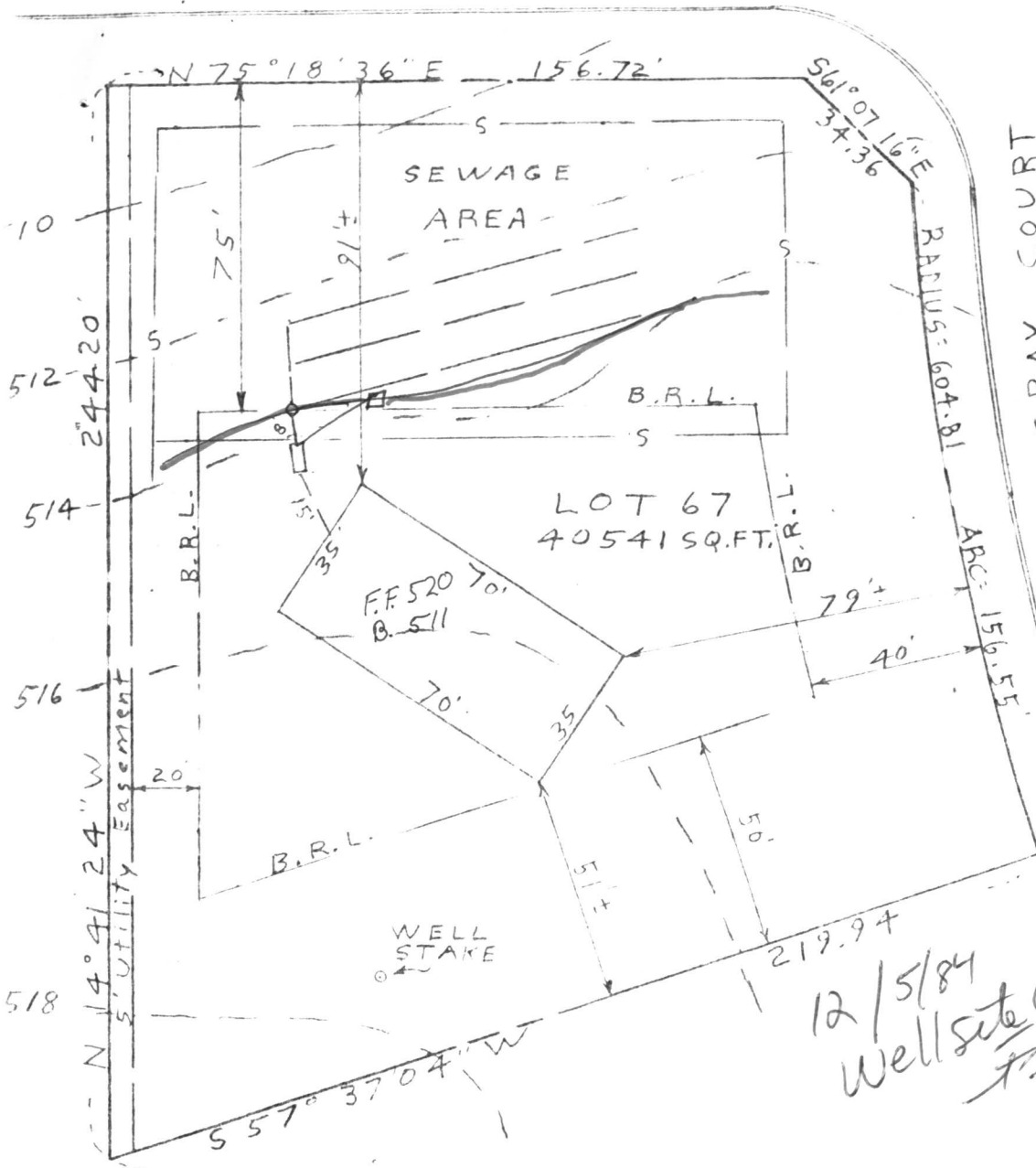
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/13/74	1	12 ft	10 35	(5 gal poured very sandy - did not seal in here)	10 45	10 45	10 min dry
	2	6 ft	10 35	10 45	10 45	11 03	18 min
	3	11 ft	same soil	same soil			
	4	5 ft	11 15	10 20	10 20	11 36	16 min
	5	10 ft	11 10			11 13	3 min
	6	11 ft	soil	soil			

REMARKS _____

TYPE OF SOIL _____

TESTED BY R. Jones ALSO PRESENT: _____

PRESTWICK DRIVE



CASTLE BAY COURT

*Elevation of
12/17/84
dwelling*

*12/5/84
Well site OK.
J.S.*

EXIST, GRN. AT DISTR. BOX	513.60
INV. IN DISTR. BOX	510.10
INV. OUT OF SEPTIC TANK	510.26
INV. INTO SEPTIC TANK	510.66
INV. OUT OF DWELLING	510.96
FIRST FLOOR ELEV.	520.00
CELLAR ELEV.	511.00
WELL ELEV.	517.70
NO. OF BEDROOMS	4
ACREAGE	0.9307 ACRE

PLOT PLAN
 LOT 67 PRESTWICK DRIVE
 SECTION 2, SHEET 2 of 3
 HIGHLAND LAKE
 PLAT 3876, F-78 75
 ELECTION DISTRICT 5
 HOWARD COUNTY MD.

SCALE: 1" = 40'

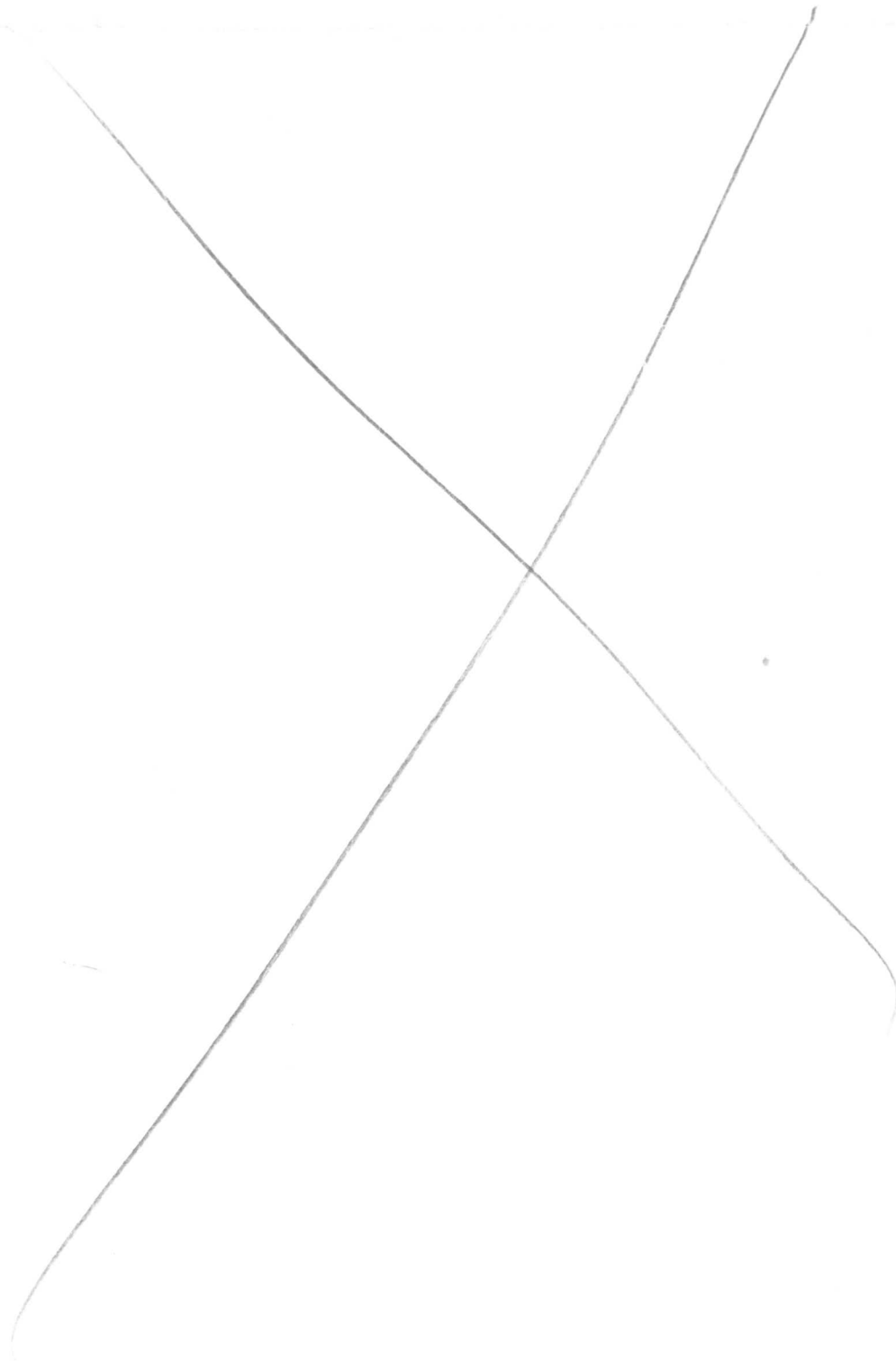
DRAWN: DEC. 1, 1984



NEW JERSEY
HEALTH DEPT.

APR 4 12 27 PM '99

DIVISION OF
ENVIRONMENTAL
HEALTH



C1 2934 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER A 24063

DATE Received: [] [] [] [] [] [] DATE WELL COMPLETED: 120784 Depth of Well: 200 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL": HQ-81-0809

OWNER: Oskar Schulz Inc. last name: Castlebay Court first name: TOWN: Clarksville
 SUBDIVISION: Highland Lake SECTION: 2 LOT: 67

WELL LOG
 Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
rolling ground & gravel	0	57'	
brown schist	57'	98'	
water			
gray schist	98'	129'	
water			
gray schist	129'	154'	
water			
gray schist	154'	200'	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N
 TYPE OF GROUTING MATERIAL
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 22 NO. OF POUNDS 2112
 GALLONS OF WATER 157
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 93 ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST CO STEEL CONCRETE
 PL OT PLASTIC OTHER

MAIN CASING
 Nominal diameter top (main) casing (nearest inch): 57
 Total depth of main casing (nearest foot): 65

OTHER CASING (if used)
 diameter inch depth (feet) from to

SCREEN RECORD
 screen type or open hole insert appropriate code below
 ST BR HO STEEL BRASS OPEN HOLE
 PL OT PLASTIC OTHER

SCREEN
 DEPTH (nearest ft.)
 1 HO 65 200
 2
 3
 SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from to

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) WQ
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) 5
 PUMPING RATE (gal. per min. to nearest gal.) 10
 METHOD USED TO MEASURE PUMPING RATE: watch & bucket
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 35
 WHEN PUMPING 140
 TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

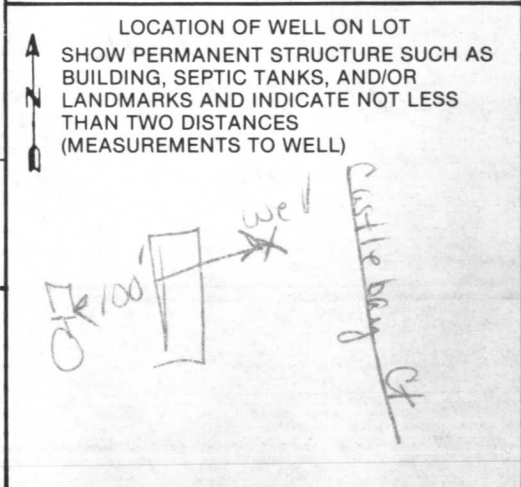
PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
 CAPACITY: GALLONS PER MINUTE (to nearest gallon)
 PUMP HORSE POWER
 PUMP COLUMN LENGTH (nearest ft.)
 CASING HEIGHT (circle appropriate box and enter casing height)
 + above } LAND SURFACE (nearest foot)
 - below }

CIRCLE APPROPRIATE LETTER 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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 064
 Wm. M. Reichart
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

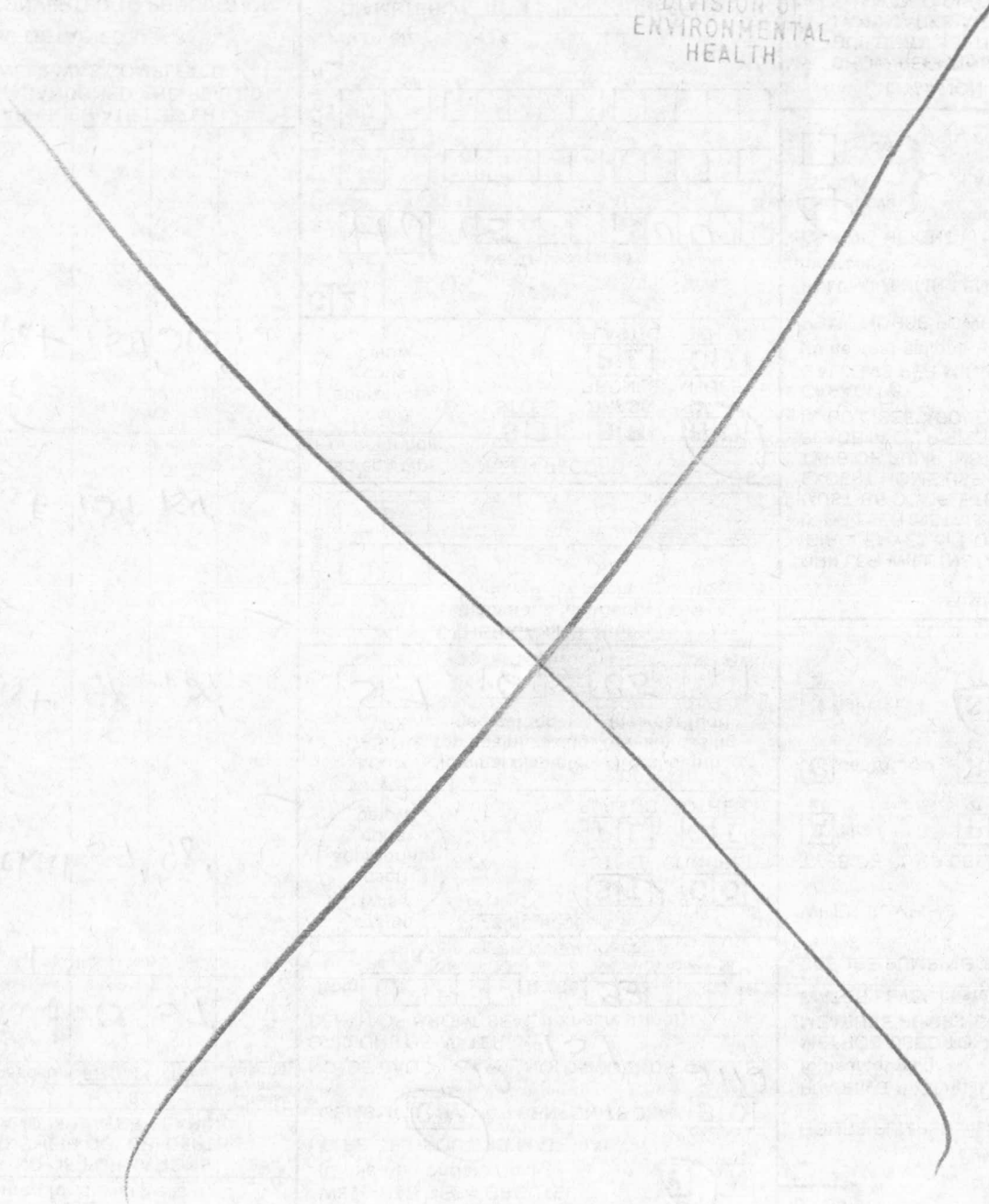


RECEIVED
HOWARD COUNTY
HEALTH DEPT.

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

EC 12 11 55 AM '8

DIVISION OF
ENVIRONMENTAL
HEALTH

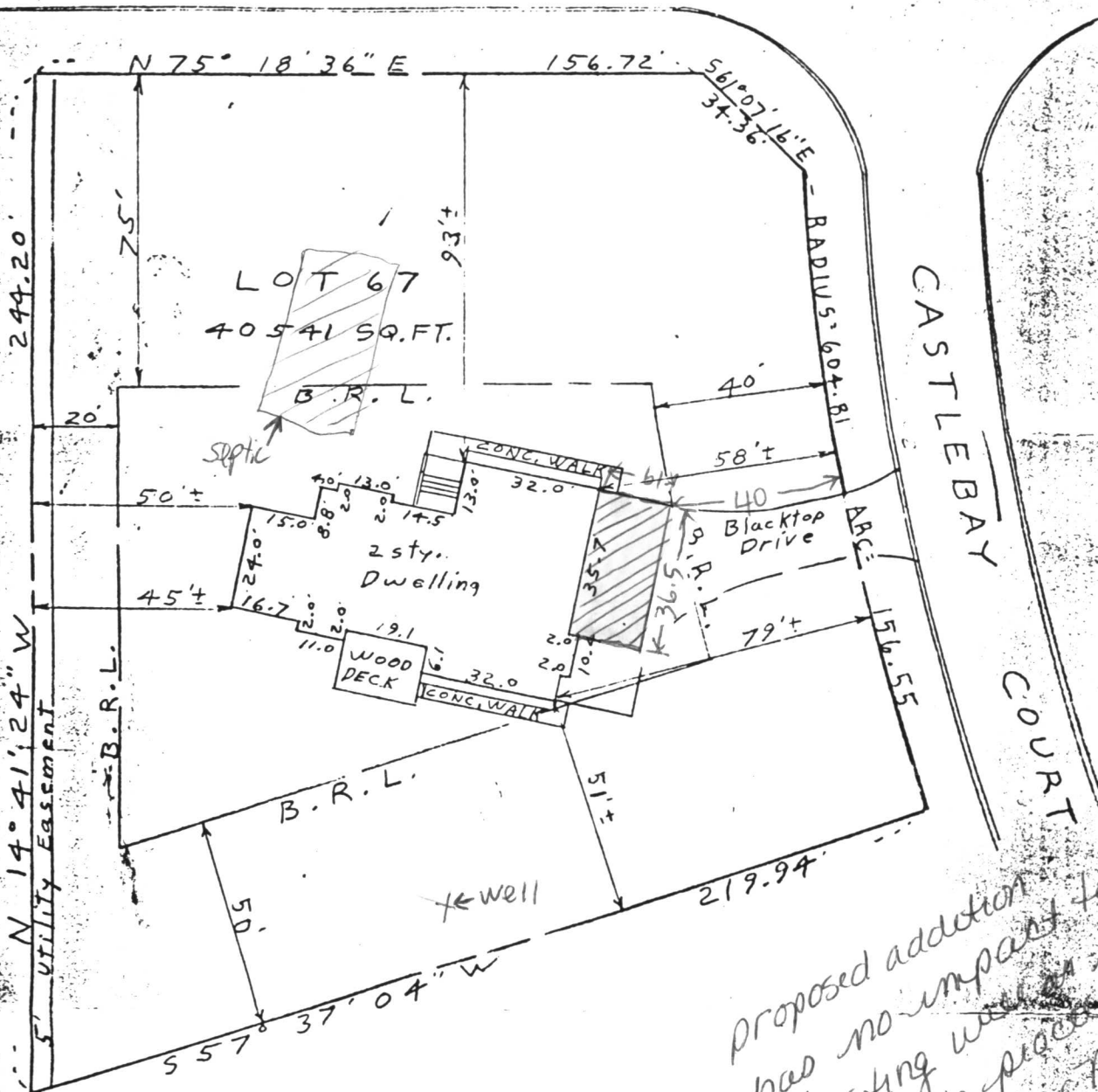


RECEIVED
HOWARD COUNTY
HEALTH DEPT.

LOCATION SURVEY

LOT 67, CASTLEBAY COURT
 SECTION 2 SHEET 2 OF 3
 HIGHLAND LAKE
 PLAT 3876, F-78 75
 ELECTION DISTRICT 5
 HOWARD COUNTY MD.

PRESTWICK DRIVE



*Proposed addition
 has no impact to
 existing well or septic.
 OK to proceed
 J. Miller
 H. Department*



THIS IS TO CERTIFY THAT WE HAVE MADE A
 LOCATION SURVEY OF THE IMPROVEMENTS, AND
 THAT THEY ARE LOCATED ON THE LOT AS SHOWN
 HEREON.

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

94 APR -4 AM 11:25

