

03-304965

10/3/78 P.C.O
C.B.V
P.C.O

10/3/78
10/5/78

PERMIT

File

P 28776

A 24165

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 8/28/78

Paul Schissler

IS PERMITTED TO INSTALL ALTER

ADDRESS _____

PHONE _____

SUBDIVISION Annandale

ROAD 13377 Grinstead Court

LOT 5-36

PROPERTY OWNER Thomas A. Shivers

**BUILDING PERMIT SIGNED
AND RETURNED**

ADDRESS 1019 Taylor Park Road, Sykesville, Md.

5/18/64 B00148202 - Expanding Bldg + New Deck

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA 236 SQ. FT. *per bedroom*

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 9 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

Locate dry well 225 ft. from Court, and 10 ft. from right lot line. Trench to be 50 ft. long with inlet at 4 ft. and maximum depth 9 ft. Trench to run towards rear of lot, 10 ft. from right lot line. Start trench 150 ft. from front.

PLANS APPROVED BY David J. O'Neill

DATE 12/6/77

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 ACCEPTED.

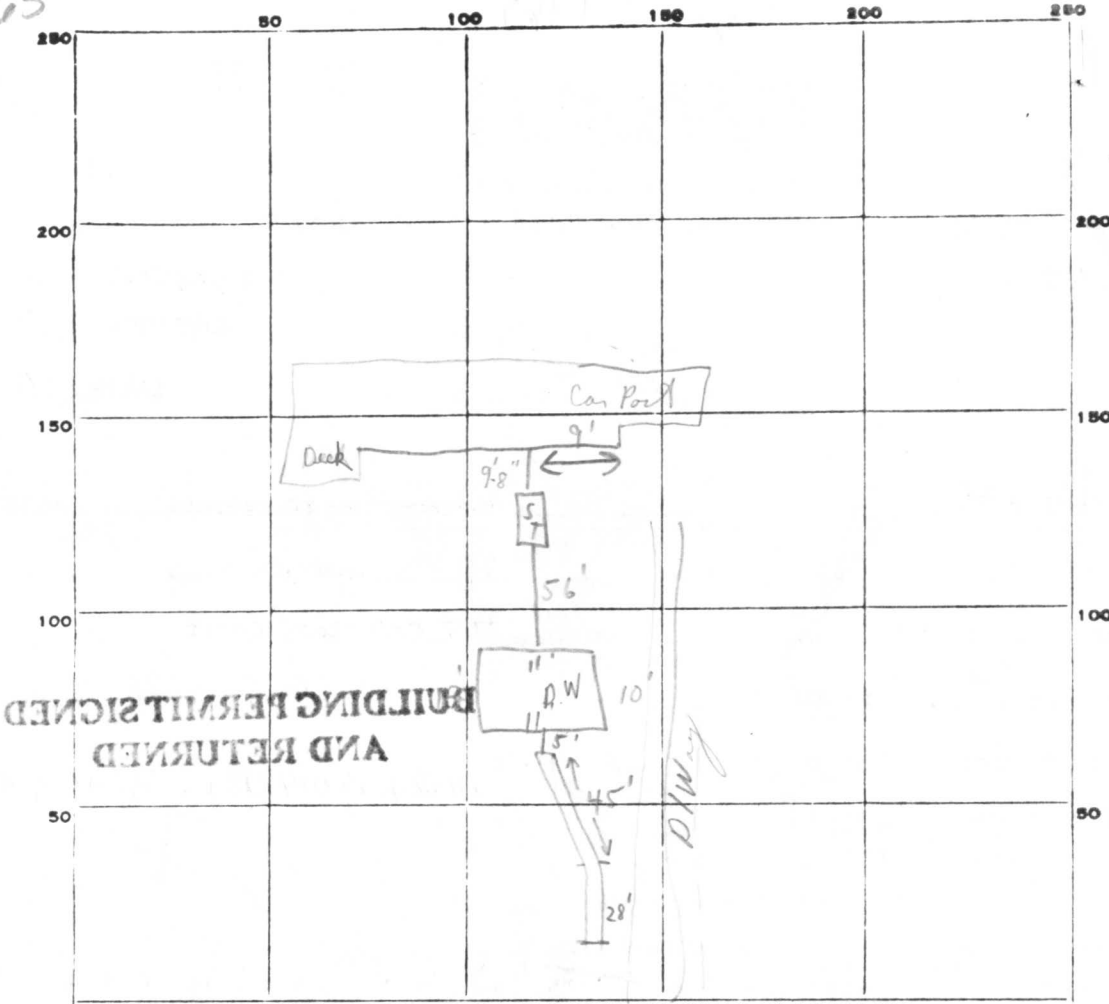
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.**

BLDG. PERMIT SIGNED
AND RETURNED 8/28/78

Serial # 66592

A 24165

A241165



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD 10/5/78 (Not seen)

SEPTIC TANK, LEVEL ok CLEANOUTS No / No Plug

DISTRIBUTION BOX, LEVEL N/A Plug 10/5/78 / Yes 10/5/78

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH — FT.

GRAVEL DEPTH 5 IN. TOTAL LENGTH 73 FT. (2) 36 5

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA —

SEEPAGE PITS, INSIDE DIAMETER outside perimeter 45 FT. DEPTH BELOW INLET 5 FT. (2) 2 2 5

ABSORBENT AREA 590 SQ. FT.

REMARKS 10/3/78 Not ready. (Spoke to Paul Schieder) (2) Cast iron
septic tank. OK for stones in trench = 73' long;
ok to cover to dry well - Need to see plugs at S.T. + D.W.
only. 10/5/78 (1) Permit card at end of road; (2) Paper on trench to
3' of grade.

DATE SYSTEM APPROVED 10/5/78 above INSPECTOR C. B. Streeker

C 1 **5688** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER **A24165**

DATE RECEIVED (WRA USE ONLY) **3/18/78**

DATE WELL COMPLETED **3/18/78**

DEPTH OF WELL **120** (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" **40-73-2573**

DRILLERS IDENTIFICATION NO. **42**

OWNER **TATHAM TEEVY CONST** LAST NAME **TATHAM** FIRST NAME **TEEVY**

STREET OR RFD **3689 STOP RD.** POST OFFICE **GLENNWOOD, MD.**

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
TOP SOIL	0	2	
BROWNSLATE	2	8	
GRANITE	8	52	✓
BROWNSLATE	52	58	
GRANITE	58	140	✓

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 CEMENT C M BENTONITE CLAY B C

NO. OF BAGS **4** NO. OF POUNDS **1400**

GALLONS OF WATER **20**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **19** FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T CONCRETE C O
 PLASTIC P L OTHER O T

MAIN CASING TYPE S T NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **21**

OTHER CASING (IF USED)

EACH CASING	DIAMETER (INCH)		DEPTH (FEET)	
	FROM	TO	FROM	TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL S T BRASS OR BRONZE B R OPEN HOLE H O
 PLASTIC P L OTHER O T

SCREEN

DEPTH (NEAREST WHOLE FOOT) FROM TO

1	8	9	11	15	17	21
2						
3	23	24	26	30	32	36
	38	39	41	45	47	51

SLOT SIZE 1, _____ 2, _____ 3, _____

DIAMETER OF SCREEN **56** (NEAREST INCH) FROM **60** TO _____

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING T LOG INDICATOR W Q OTHER DATA AVAILABLE 74 75 76

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **5**

METHOD USED TO MEASURE PUMPING RATE **BUCKET**

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING **50** (NEAREST FOOT)
 WHEN PUMPING **140** (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)
 A AIR P PISTON T TURBINE
 C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)
 J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) _____ 31 _____ 35
 PUMP HORSE POWER _____ 37 _____ 41
 PUMP COLUMN LENGTH (NEAREST FOOT) _____ 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 STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

60' WELL

200'

OLD FREDERICK RD

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME **L. F. EASTERDAY**

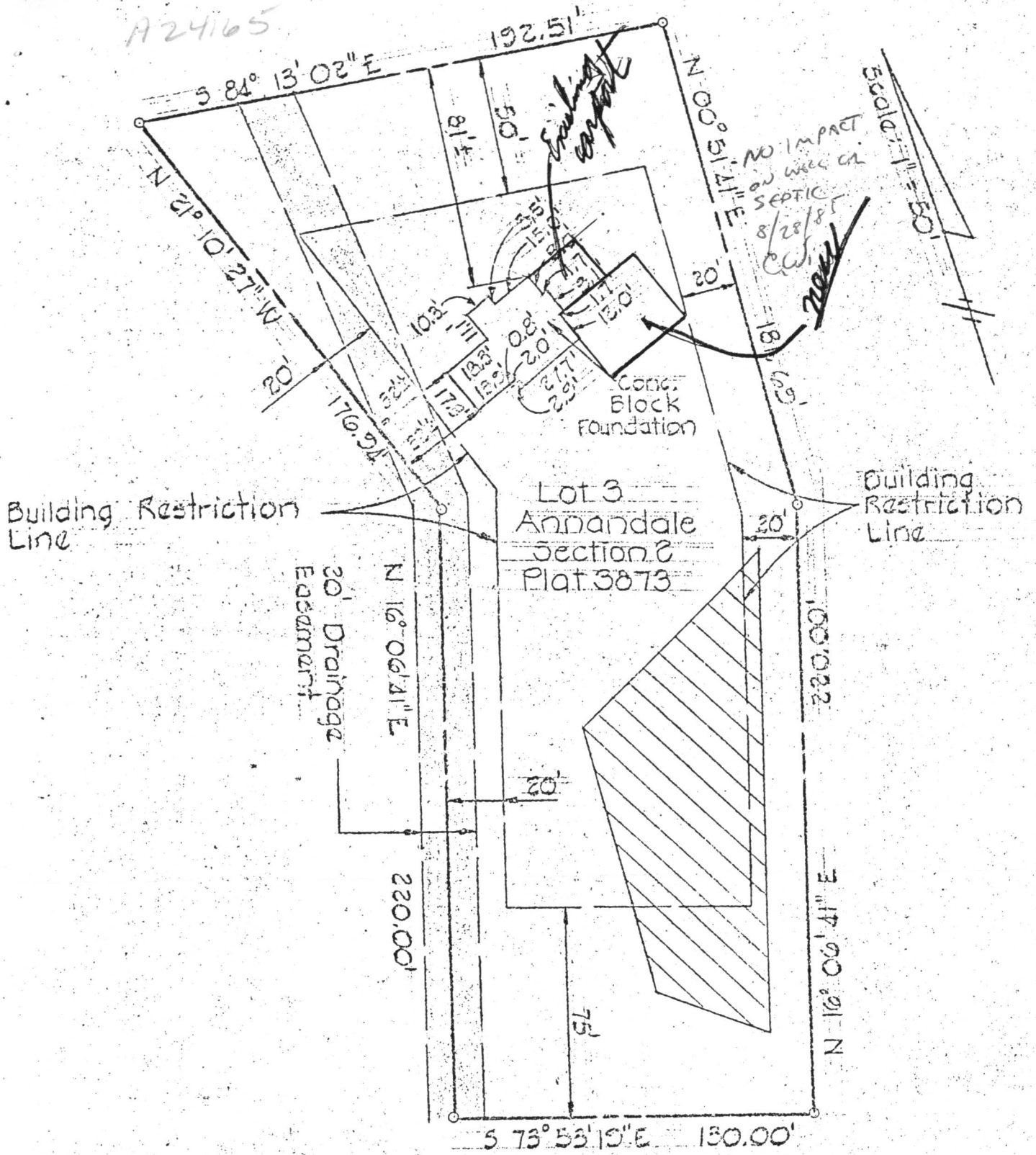
SIGNATURE **L. F. Easterday**

RECEIVED

MAY 8 8 55 AM '71

HOWARD COUNTY
HEALTH DEPT.
ELLICOTT CITY, MD.

A24165



GRINSTEAD COURT

I hereby certify that I have surveyed the property known as Lot 3, Annandale, Section 2, Plat 3873, in Howard County, Maryland, and the improvements thereon and the improvements thereon and the improvements thereon.



Signed this 10th Day of May, 1978

Walter Park
 Walter Park, Land Surveyor

APPLICATION

FILED
24165
A 24166

SEWAGE DISPOSAL TESTING

P. _____

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 3rd

DATE 9/21/76

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 Fred James Pipes

ADDRESS 13555 Old Frederick Rd. Sykesville, Md. 21784 PHONE _____

PROPERTY LOCATION:

SUBDIVISION Annandale LOT NO. 9

ROAD AND DESCRIPTION Grinstead Ct.

SIZE OF LOT 46,000 sq. ft. TYPE BLDG. 3 or 4

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE single family dwelling

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

SIGNATURE OF APPLICANT /s/ Fred James Pipes

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

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

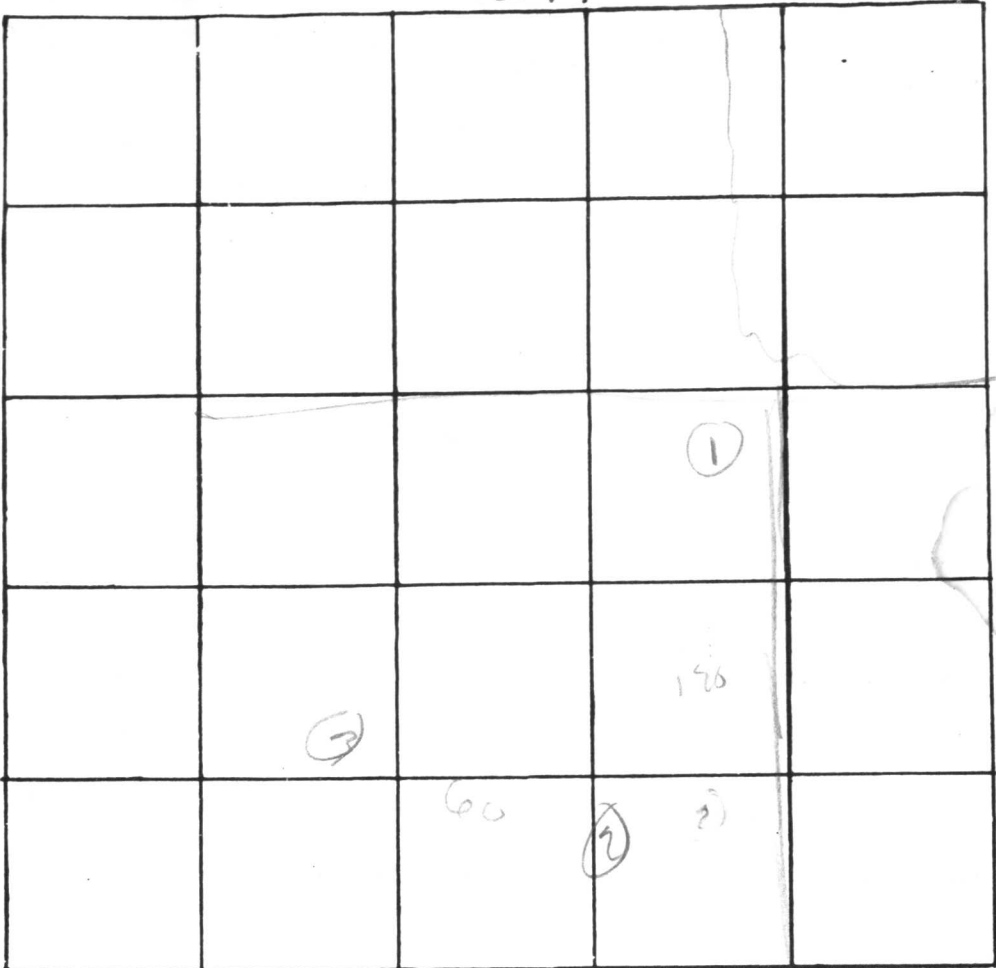
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

A24165
 166 ON
 FRONT
 FILED AS 165

Lot 9



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

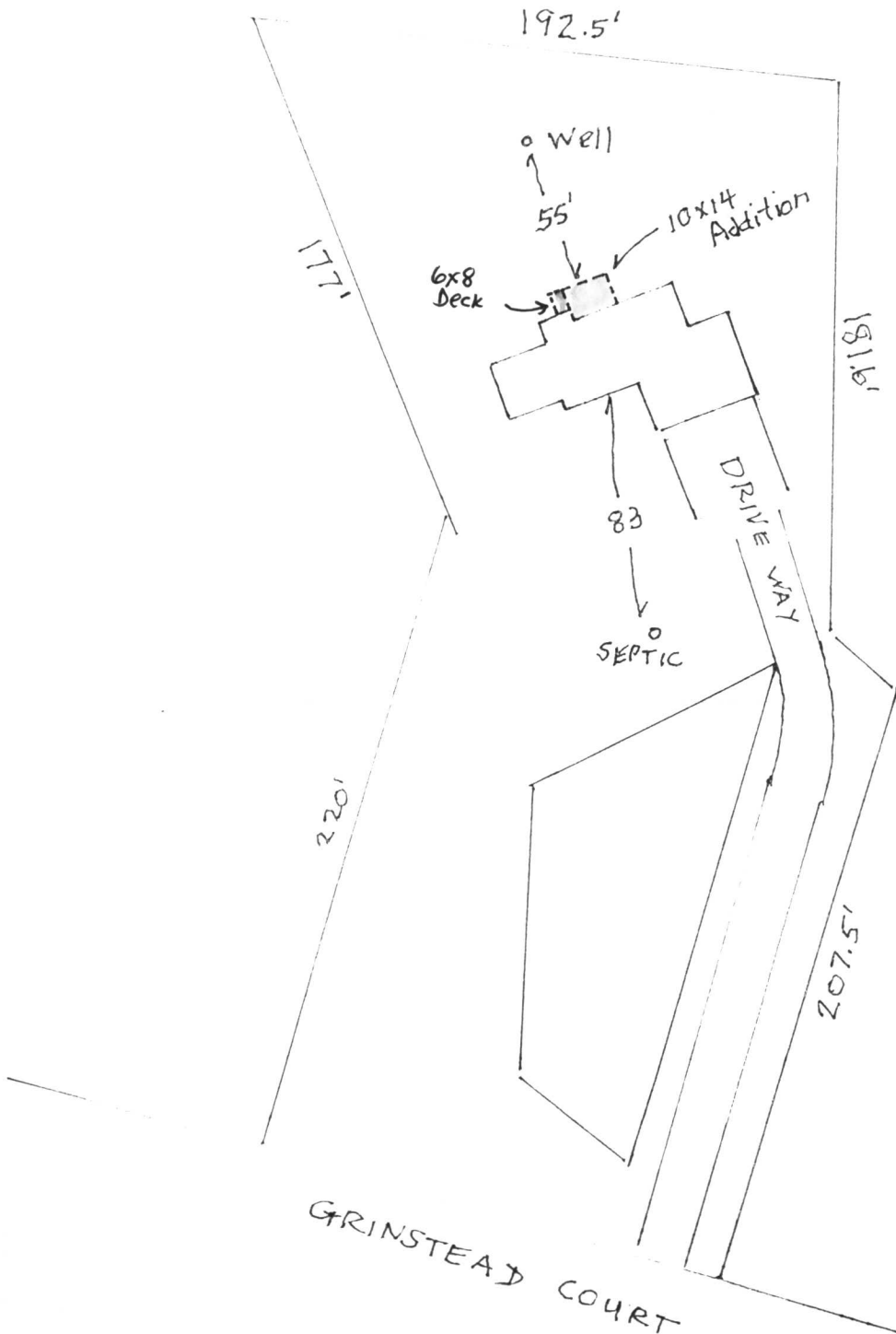
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	1 s	4 1/2	3 24	3 30	3 30	3 40	10
	d	15'	3 20	3 40	3 30	3 40	10
	2	10'	Row				
	3	15'	Row				

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY _____ ALSO PRESENT: _____

5/20/04

B00148202
Proposed addition OK.

(KB)



1" = 60'

MARCUS
13377 GRINSTEAD CT
SYKESVILLE MD

A24165
P28776

1 10 17 10 10 10