

APPROVED
11/12/80
P 30998
A 24171

11/14/80
around 2:00 P.M.

11/13/80
late afternoon

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

03-305104

ELLICOTT CITY

DISTRICT 3rd

DATE 10/22/80

INDEXED

Paul Schissler

IS PERMITTED TO INSTALL ALTER

ADDRESS 7311 Brangles Road, Marriottsville, Md. 21104 PHONE 795-2642

SUBDIVISION Annandale ROAD 13382 Grinstead Road LOT 15, Sec. 2

PROPERTY OWNER Charles Newton

ADDRESS 10318 Globe Court, Ellicott City, Md. 21043 Phone: 461-7037

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

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

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

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 288 SQ. FT. total in dry well.

INLET PIPE 3 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 9 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 110 FT. FROM rear LOT LINE AND 110 FT. FROM right LOT LINE AS SEEN WHEN FACING LOT FROM the front.

Trench to be 50 ft. long; inlet at 3 ft. and maximum depth 9 ft. below original grade.
Trench to begin 75 ft. from right lot line and 110 ft. from rear of lot and run towards left rear lot corner on contour.

PLANS APPROVED BY David J. O'Neill DATE 11/1/76

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.

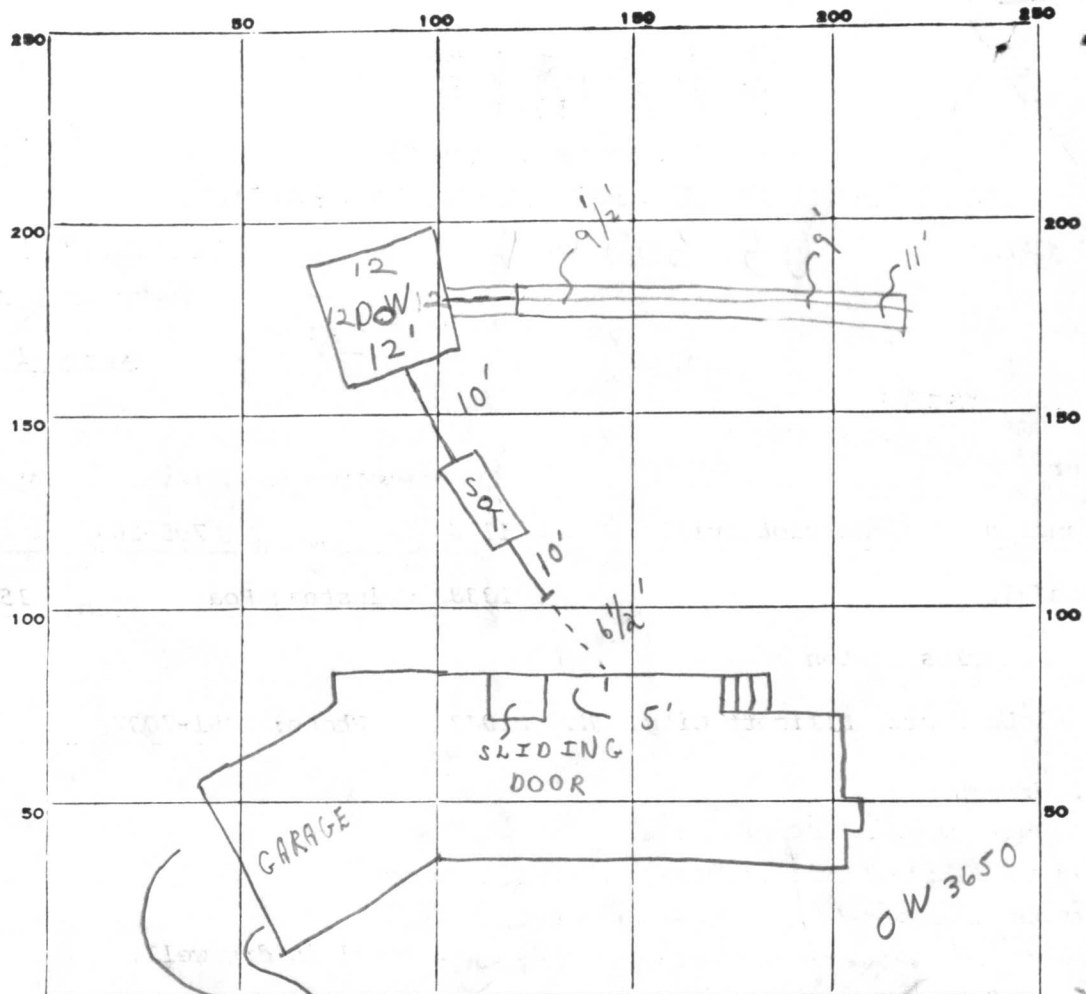
PERMIT VOID AFTER THREE YEARS.

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.

BLDG. PERMIT SIGNED
AND RETURNED 8/5/80
Serial # 43962

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

A 24171



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

GRINSTEAD COURT

PERMIT CARD

SEPTIC TANK, LEVEL

CLEANOUTS S.T. D.W. Cast Iron

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9'-9 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 55 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 330

288
330

SEEPAGE PITS, INSIDE DIAMETER 48 FT. DEPTH BELOW INLET 6 FT.

ABSORBENT AREA 618 SQ. FT. of Drywell 9 1/2'

REMARKS 11/13/80 CHECKED TRENCH ONLY OK FOR STONE.
11/14/80 OK to cover trench & drywell. Need to see cast iron pipe from septic to drywell. JB
11/14/80 OK to cover all work. call - must see house connection. JB. SK

11281 HOUSE SEWER COVERED BUT CHECKED FLOW BY FLUSHING TOILET RH

DATE SYSTEM APPROVED 1/12/81 INSPECTOR Raymond Hodger

APPLICATION

A 24171

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 9/31/76

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 J Fred James Pipes

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

PROPERTY LOCATION:

SUBDIVISION Annandale LOT NO. 14

ROAD AND DESCRIPTION Grinstead Road

SIZE OF LOT 43,700 sq. ft. TYPE BLDG. 3 or 4

IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS 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)

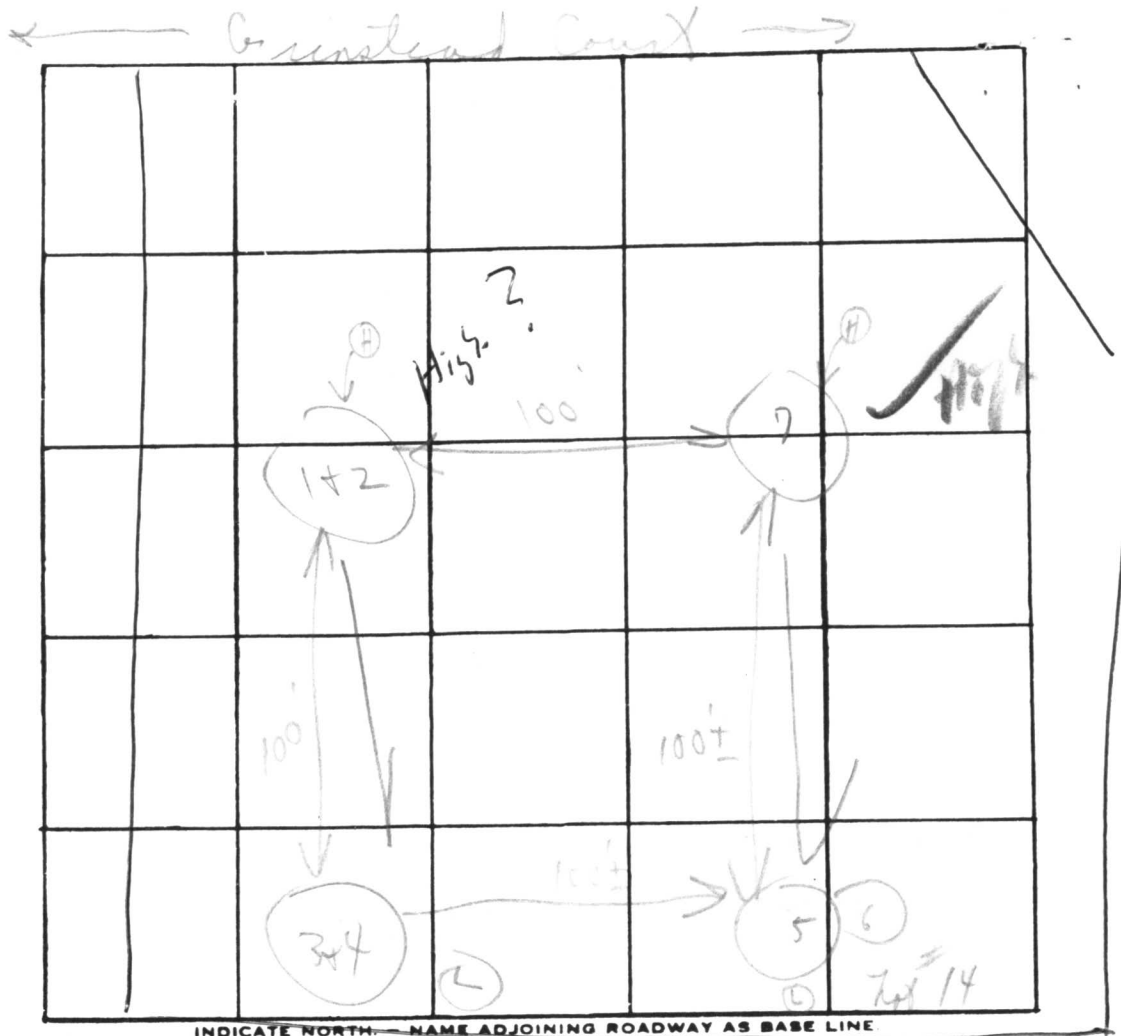
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

A24171



Soil Profile

Loam
below
clay

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/9/2	1	4'	2:59	3:01	3:01	3:05	4m
	2	11 1/2'	2:59	3:02	3:02	3:07	5m
	3	4'	2:39	2:41	2:41	2:44	3m
	4	11'	2:38	2:40	2:40	2:45	5m
	5	4'	2:47	2:49	2:49	2:54	5m
	6	13' pt	2:46	2:48	2:48	2:53	5m
	7	12'	Visual		4-4 1/2	Loam	stat

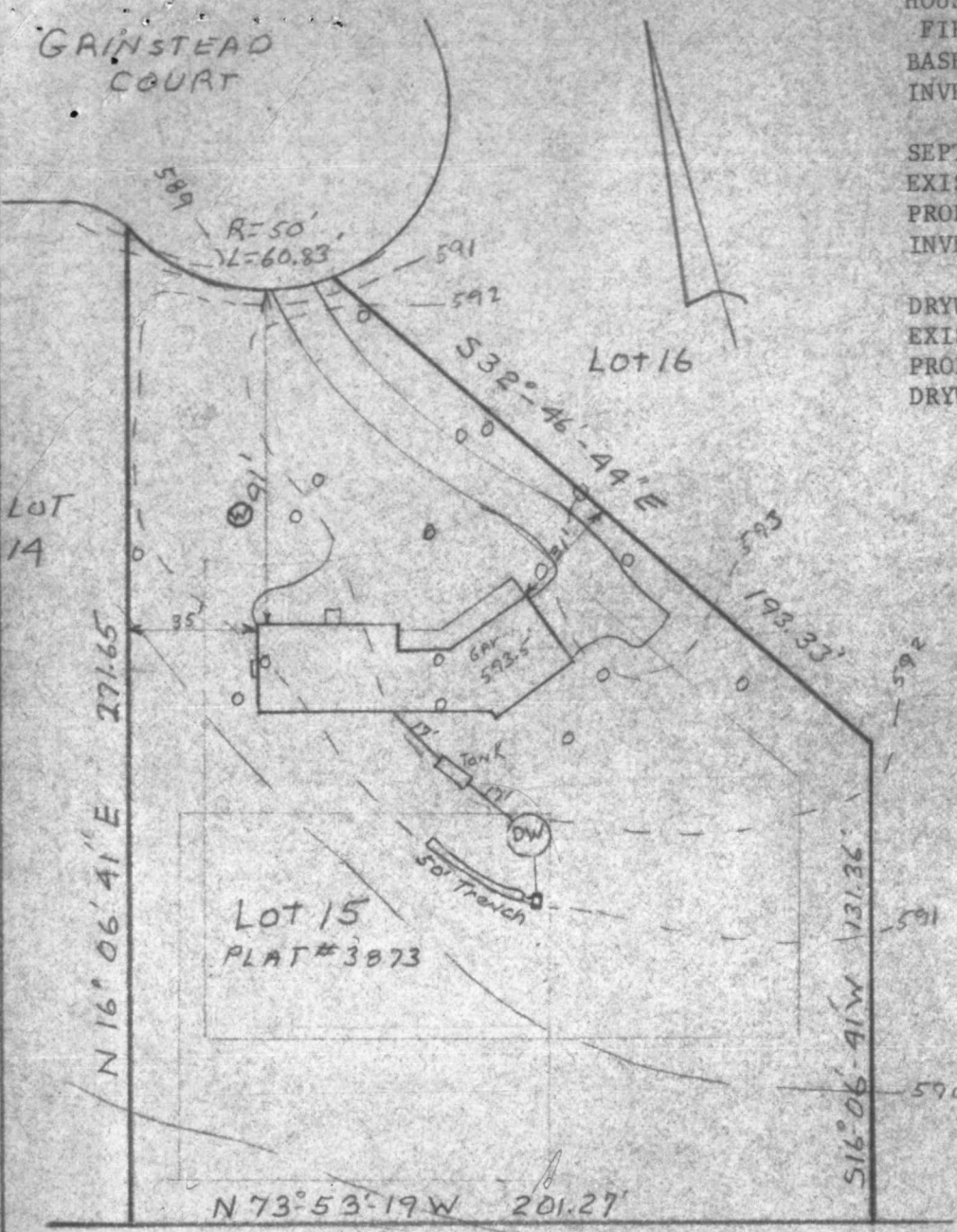
44'

REMARKS Wooded lot

TYPE OF SOIL Loam below clay

TESTED BY CBD ALSO PRESENT: Field Pipe

GRAINSTEAD COURT



HOUSE :	
FIRST FLOOR ELEV.	594.0
BASEMENT ELEV.	585.0
INVERT @ HOUSE.	589.69
SEPTIC TANK:	
EXISTING GRADE	592.0
PROPOSED GRADE	592.0
INVERT OF TANK	589.33
DRYWELL:	
EXISTING GRADE	592.0
PROPOSED GRADE	592.0
DRYWELL INVERT	589.00

8/15/80
 Sketch O.K.
 elevations O.K.
 J.S.

I certify the above measurements and elevations are actual and true for this lot.

J. Carl Hudgins
 J. Carl Hudgins PLS #96

GRADING STUDY LOT 15

ANNANDALE
 Section Two
 3rd Election district
 Howard County Maryland
 Scale 1"=50' Date 7/18/80
 Revised 8-11-80

C 1 4825 SEQUENCE NO. (WRA USE ONLY)

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

THIS REPORT MUST BE SUBMITTED WITHIN
30 DAYS AFTER WELL IS COMPLETED
COUNTY NUMBER A 24171

Date Received (WRA use only) 12/4/80
DATE WELL COMPLETED

Depth of Well 220' (TO NEAREST FOOT)
PERMIT NO. FROM "PERMIT TO DRILL WELL" H10-73-3753

OWNER Lebling Richard
STREET OR RFD 13382 Grinstead Ct. TOWN West Friendship
SUBDIVISION Annapdale SECTION LOT 15

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	
TOP SOIL	0	2	
SHALE	2	10	
BROWN SLATE	10	25	
BLUE SLATE	25	60	
SANDSTONE	60	70	✓
GRANITE	70	90	
SANDSTONE	90	95	✓
GRANITE	95	220	

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO
TYPE OF GROUTING MATERIAL
CEMENT BENTONITE CLAY
NO. OF BAGS 6 NO. OF POUNDS 600
GALLONS OF WATER 30
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 19 ft.

CASING RECORD
casing types insert appropriate code below
STEEL CONCRETE
PLASTIC OTHER
MAIN CASING TYPE Nominal diameter top(main)casing (nearest inch) Total depth of main casing (nearest foot)
ST 6 31

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

SCREEN RECORD
screen type or openhole insert appropriate code below
STEEL BRASS, BRONZE OPEN HOLE
PLASTIC OTHER

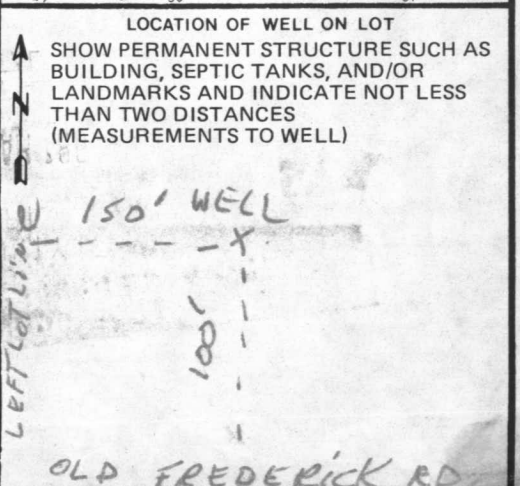
DEPTH (nearest ft.)
1 HO 19 220
2
3
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK
IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX

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

PUMPING TEST
HOURS PUMPED (nearest hour) 2
PUMPING RATE (gal. per min. to nearest gal.) 3
METHOD USED TO MEASURE PUMPING RATE BUCKET
WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 220
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 YES NO
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))
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 - below (nearest foot) 2



- CIRCLE APPROPRIATE BOX
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 IDENT. NO. 40
DRILLERS SIGNATURE
SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELLCOTT CITY, MD.

JAN 28 9 44 AM '80

STATE OF MARYLAND
WELL COMPLETION REPORT
DATE WELL COMPLETED: 12/1/79
OWNER: L. Collins
ADDRESS: 13322 Grinstead Ct., Annapolis, Md.
TOWN: West Friendship

WELL HAS BEEN GROUNDED
TYPE OF GROUNDING MATERIAL: CEMENT
NO. OF BAGS: 30
GALLONS OF WATER: 30
DEPTH OF GROUT SET TO NEAREST FOOT: 19
METHOD USED TO MIX GROUT: BAKER
WATER LEVEL: 30
BEFORE PUMPING: 30
WHEN PUMPING: 30
TYPE OF PUMP USED: OTHER
CIRCUIT BREAKER: A
TYPE OF PUMP: J
PUMP HORSEPOWER: 1/2
PUMP TYPE: JET
PUMP LOCATION: BELOW
PUMP INSTALLATION: YES
DRILLER WILL INSTALL LUMP (CIRCLE APPROPRIATE BOX): Y
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME TYPE
TYPE OF PUMP: JET
LETTER IN BOX: SEE ABOVE
CAPACITY: 1/2
GALLONS PER MINUTE
PUMP HORSEPOWER: 1/2
PUMP TYPE: JET
PUMP LOCATION: BELOW
PUMP INSTALLATION: YES
DRILLER WILL INSTALL LUMP (CIRCLE APPROPRIATE BOX): Y

DIAMETER OF SCREEN: 4
SLOT SIZE: 1/8
GRAVEL PACK: YES
IF WELL DRILLED WAS FLOWING WELLED IN BOX: YES
WRA USE ONLY: YES
NOT TO BE FILLED IN BY DRILLER: YES
INDICATOR: YES
CIRCUIT BREAKER: A
TYPE OF PUMP: J
PUMP HORSEPOWER: 1/2
PUMP TYPE: JET
PUMP LOCATION: BELOW
PUMP INSTALLATION: YES
DRILLER WILL INSTALL LUMP (CIRCLE APPROPRIATE BOX): Y

HEALTH
DIVISION OF
ENVIRONMENTAL
HEALTH
AN 28 7 5 AM '80

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELLCOTT CITY, MD.

DESCRIPTION OF WELL
WELL NO. 4823
DATE WELL COMPLETED: 12/1/79
OWNER: L. Collins
ADDRESS: 13322 Grinstead Ct., Annapolis, Md.
TOWN: West Friendship

DEPTH (feet)	SOIL TYPE
0-5	TOP SOIL
5-10	CLAY
10-20	RAIN STATE
20-30	BLUE SLATE
30-40	SANDSTONE
40-50	CRINITE
50-60	SANDSTONE
60-70	CRINITE

C 1 - 4614 SEQUENCE NO. (WRA USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL IS COMPLETED COUNTY NUMBER A 24171

Date Received (WRA use only) 7/31/10 DATE WELL COMPLETED

Depth of Well 1200 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-23-8650

OWNER last name LEBLING, RICHARD first name STREET OR RFD 3290 PINE ORCHARD LANE TOWN ELLEICOTT CITY, MD. 21043 SUBDIVISION ANNANDALE SECTION LOT 15

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Topsoil, shaley mica, SANDstone, mica, SANDstone, mica.

WELL HAS BEEN GROUTED (yes Y, no N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 65 NO. OF POUNDS 4500 GALLONS OF WATER 325 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 48 ft. (enter 0 if from surface)

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

MAIN CASING TYPE 5T Nominal diameter top(main)casing (nearest inch) 6 Total depth of main casing (nearest foot) 221

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

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

DEPTH (nearest ft.) 19 120

CIRCLE APPROPRIATE BOX 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 IN 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 IDENT. NO. 040 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

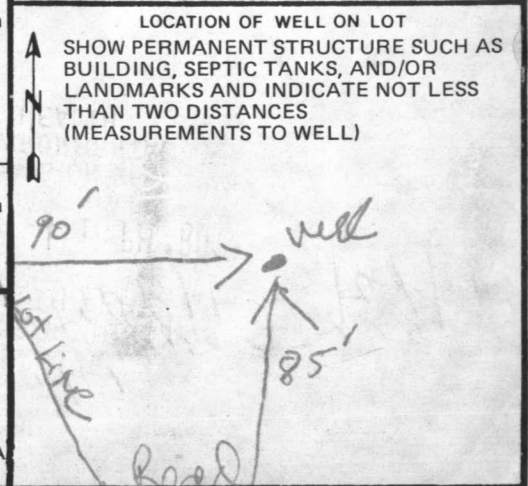
SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

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

PUMPING TEST HOURS PUMPED (nearest hour) 4 PUMPING RATE (gal. per min. to nearest gal.) 38 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 30 WHEN PUMPING 120 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 (CIRCLE APPROPRIATE BOX) Y N IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)) 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 below 2 (nearest foot)



WHICH IS ON SIGNATURE OF THE PERSON
OR OTHER SIGNATURE

TO THE BEST OF HIS KNOWLEDGE AND BELIEF
THE INFORMATION FURNISHED IS TRUE AND CORRECT

IF TEST MET COMPLETED TO PRODUCTION
ELECTRICITY OBTAINED
WHEN THIS TEST WAS COMPLETED
A MET WAS SUBMITTED AND TESTED
CIRCUIT BOARD

FROM TO
DESCRIPTION OF WORK
DATE OF WORK
NAME OF WORKER
NAME OF SUPERVISOR
NAME OF CONTRACTOR
NAME OF OWNER

FROM TO
DESCRIPTION OF WORK
DATE OF WORK
NAME OF WORKER
NAME OF SUPERVISOR
NAME OF CONTRACTOR
NAME OF OWNER

FROM TO
DESCRIPTION OF WORK
DATE OF WORK
NAME OF WORKER
NAME OF SUPERVISOR
NAME OF CONTRACTOR
NAME OF OWNER

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELLIOTT CITY, MO
SEP 25 9 12 AM '80

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
SEP 25 1 15 PM '80

OF SCREEN
DIAMETER

SCREEN RECORD

SCREEN RECORD

SCREEN RECORD

SCREEN RECORD

SCREEN RECORD

SCREEN RECORD

SCREEN RECORD

DIVISION OF
ENVIRONMENTAL
HEALTH

TEST MET COMPLETED TO PRODUCTION
ELECTRICITY OBTAINED
WHEN THIS TEST WAS COMPLETED
A MET WAS SUBMITTED AND TESTED
CIRCUIT BOARD

FROM TO
DESCRIPTION OF WORK
DATE OF WORK
NAME OF WORKER
NAME OF SUPERVISOR
NAME OF CONTRACTOR
NAME OF OWNER

FROM TO
DESCRIPTION OF WORK
DATE OF WORK
NAME OF WORKER
NAME OF SUPERVISOR
NAME OF CONTRACTOR
NAME OF OWNER