

6/25/79
as if possible
4/22/79

app. 6.27.79
J

PERMIT

P 29911

A 24256

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY 05-382386

ELLICOTT CITY

DISTRICT 5th

INDEXED

DATE 6/12/79

Robert L. Orndorff, Jr. IS PERMITTED TO INSTALL ALTER

ADDRESS 13938 Highland Road, Clarksville, Md. 21029 PHONE 596-9394

SUBDIVISION Riverside Estates ROAD 10718 Mooseberger Court LOT 22, Block H

PROPERTY OWNER Stanley Halle

ADDRESS 9322 Annapolis Road, Lanham, Md. 20801

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 _____ SQ. FT.

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ 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 200' of tile

TILE FIELD - 150 sq. ft. bottom area per bedroom. Trenches to be 3 ft. wide, 5 ft. deep below original grade, 3 foot of stone - follow contour of the ground. Distribution box to be used and trenches to be 10 ft. apart edge-to-edge. Begin trenches at point 150 ft. from front lot line and 25 ft. from the left side-line as seen when facing from the front.

PLANS APPROVED BY Robert T. Moorefield & Donald W. Monaghan DATE 7/21/77

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.

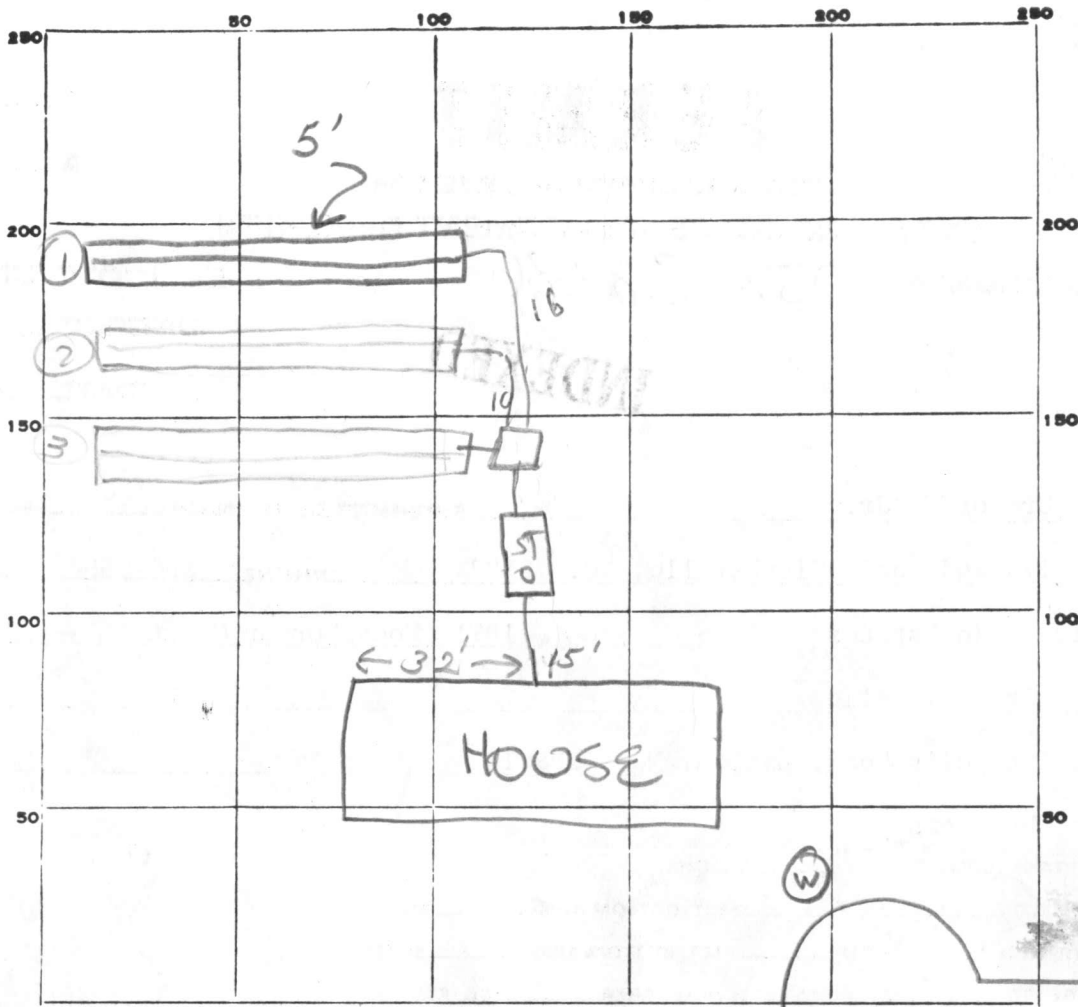
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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.**

A 24256



68
 75
 225
 450
 255
 705
 235
 43
 705

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD contractor
 6/22
 SEPTIC TANK, LEVEL 1500 Tapered CLEANOUTS ST - terracotta
 DISTRIBUTION BOX, LEVEL _____
 TILE FIELD, DEPTH 5 FT. TRENCH WIDTH 3 FT.
 GRAVEL DEPTH _____ IN. TOTAL LENGTH 75' 75' 85' FT. ± 235
 NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA _____ ± 705
 SEEPAGE PITS, INSIDE DIAMETER NA FT. DEPTH BELOW INLET _____ FT.
 ABSORBENT AREA _____ SQ. FT.

REMARKS 21 June 79 - Call for next inspection when trenches (1)+(3) excavated, gravel added to (1), AND sewers, cleanouts, 3 DB installed. (GLK) 6/25/79 - OK to add gravel + pipe to trenches (1)+(2) - OK to cover (3) trench. Call JS

DATE SYSTEM APPROVED 6-27-79 INSPECTOR [Signature]

APPLICATION

A 24256

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 5th

DATE July 21, 1976

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 Residential Developers, Inc.
P. O. Box 700, Seabrook, Md. 20801 % William Miller
ADDRESS 17512 Bowie Mill Rd., Derwood, Md. 20855 PHONE 301-948-5115

PROPERTY LOCATION:
SUBDIVISION Riverside Estates LOT NO. 3 Block "E"

ROAD AND DESCRIPTION From Rt. 29, South of Rt. 32 1/2 mile, West on Vista Rd.,
3 Blocks to Newberry Drive, left to job.

SIZE OF LOT one acre plus TYPE BLDG. 4 bedroom + -
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 _____

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

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

HOLD PENDING FURTHER TESTS _____ DATE _____

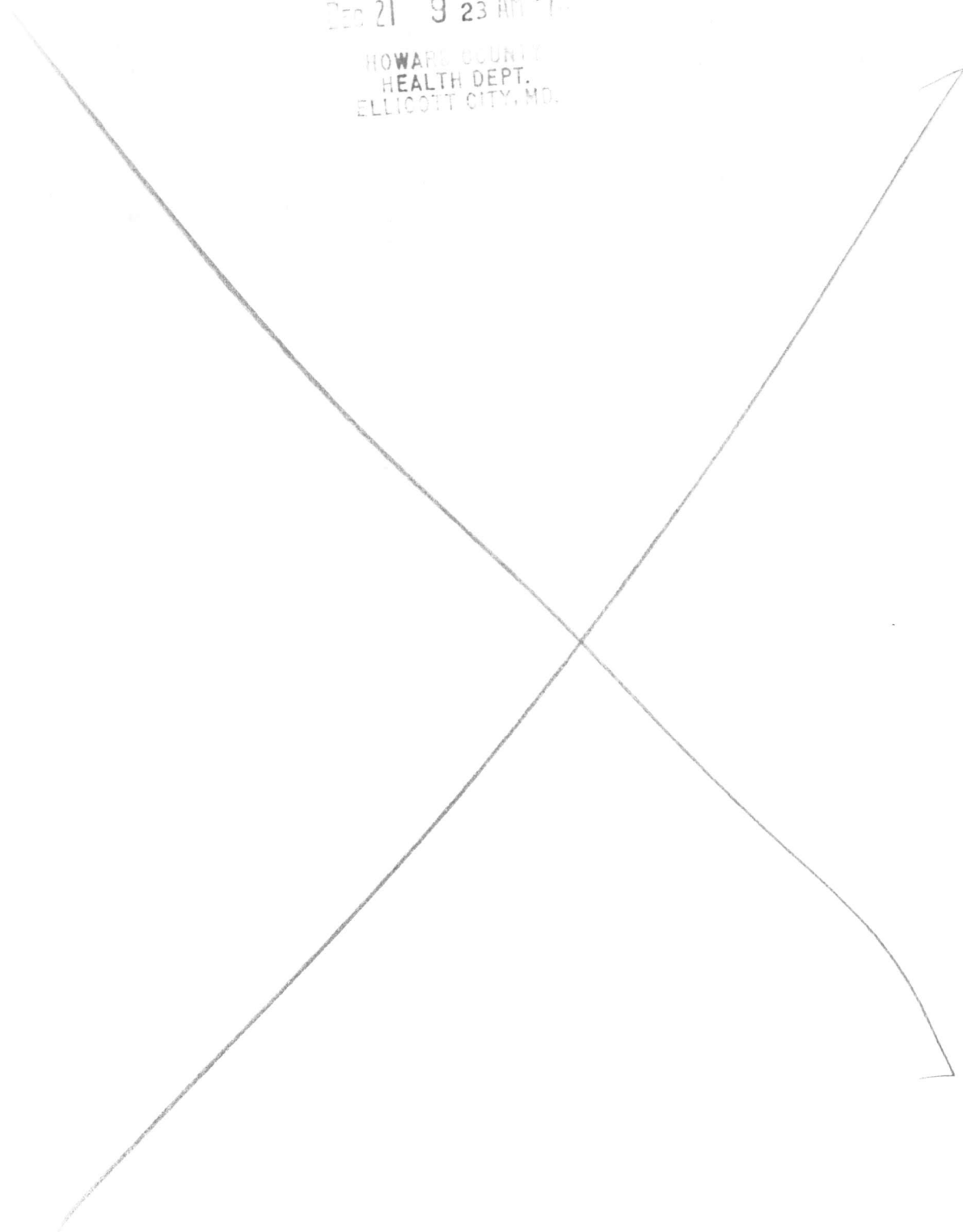
REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

RECEIVED

DEC 21 9 23 AM '78

HOWARD COUNTY
HEALTH DEPT.
ELLCOTT CITY, MD.



B 1 4632
 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, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
 40-73-3256
 FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
 12/4/78
 9:30 A.M.

OWNER: Halle Stanley Communitites
 COL 15 LAST NAME COL 34 FIRST NAME
 STREET OR RFD: 9332 Annapolis Rd.
 COL 36 COL 55
 POST OFFICE: Lanham Md.
 COL 57 COL 76

B 1 CONTINUED DRILLER INFORMATION
 1 2 3 (SEQ. NO.) 6
 DATE: Nov 6, 1978 LICENSE NUMBER: 238
 77 80
 FIRST NAME: Joseph L. Mayne DRILLER LAST NAME
 SIGNATURE: Joseph L. Mayne

B 3 LOCATION OF WELL
 1 2 3 (SEQ. NO.) 6
 COUNTY: Howard (DO NOT ABBREVIATE COUNTY NAME) 21
 SUBDIVISION: Reverside Estates 42
 SECTION: H LOT: 22
 44 46 48 50
 NEAREST TOWN: Atholton 52
 MILES FROM TOWN (ENTER 0 IF IN TOWN): 1 1/2 73 76 77 78

B 2 WELL INFORMATION
 1 2 3 (SEQ. NO.) 6
 MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5 8 12
 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 750 14 20
 USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING, AGRICULTURE, IRRIGATION
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
 PRIVATE WATER COMPANY }
 TEST

B 4 DIRECTION FROM TOWN
 (CIRCLE APPROPRIATE BOX)
 1 2 3 (SEQ. NO.) 6
 NORTH EAST NE NORTHEAST SE SOUTHEAST
 SOUTH WEST NW NORTHWEST SW SOUTHWEST
 NEAR WHAT ROAD: Mooseberger Court
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): NORTH SOUTH EAST WEST 30
 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 18 34 37 38 39

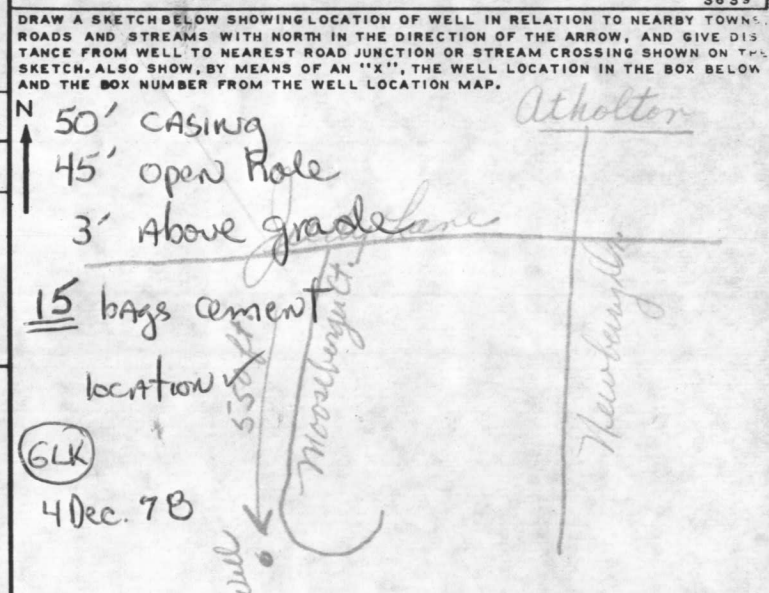
APPROXIMATE DEPTH OF WELL: 180 FEET
 APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
 BORED (OR AUGERED) JETTED DRIVEN
 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
 CABLE REVERSE-ROTARY DRIVE-POINT
 OTHER (DESCRIBE):

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
 THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
 APPROPRIATION PERMIT NUMBER: 54 ENGINEER REVIEW DISTRICT NO.: 63
 FORCE: 67 WRITE INITIALS IN BOX: 68 CONDITIONS: 70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
 1 2 3 (SEQ. NO.) 6
 41 STATE HEALTH (CIRCLE BOX) COUNTY NAME: Howard COUNTY NO.: W29184
 MO. DAY YR. APPROVED BY: Donald W. Monaghan, Sanitarian
 DATE: 11 03 78 43 48



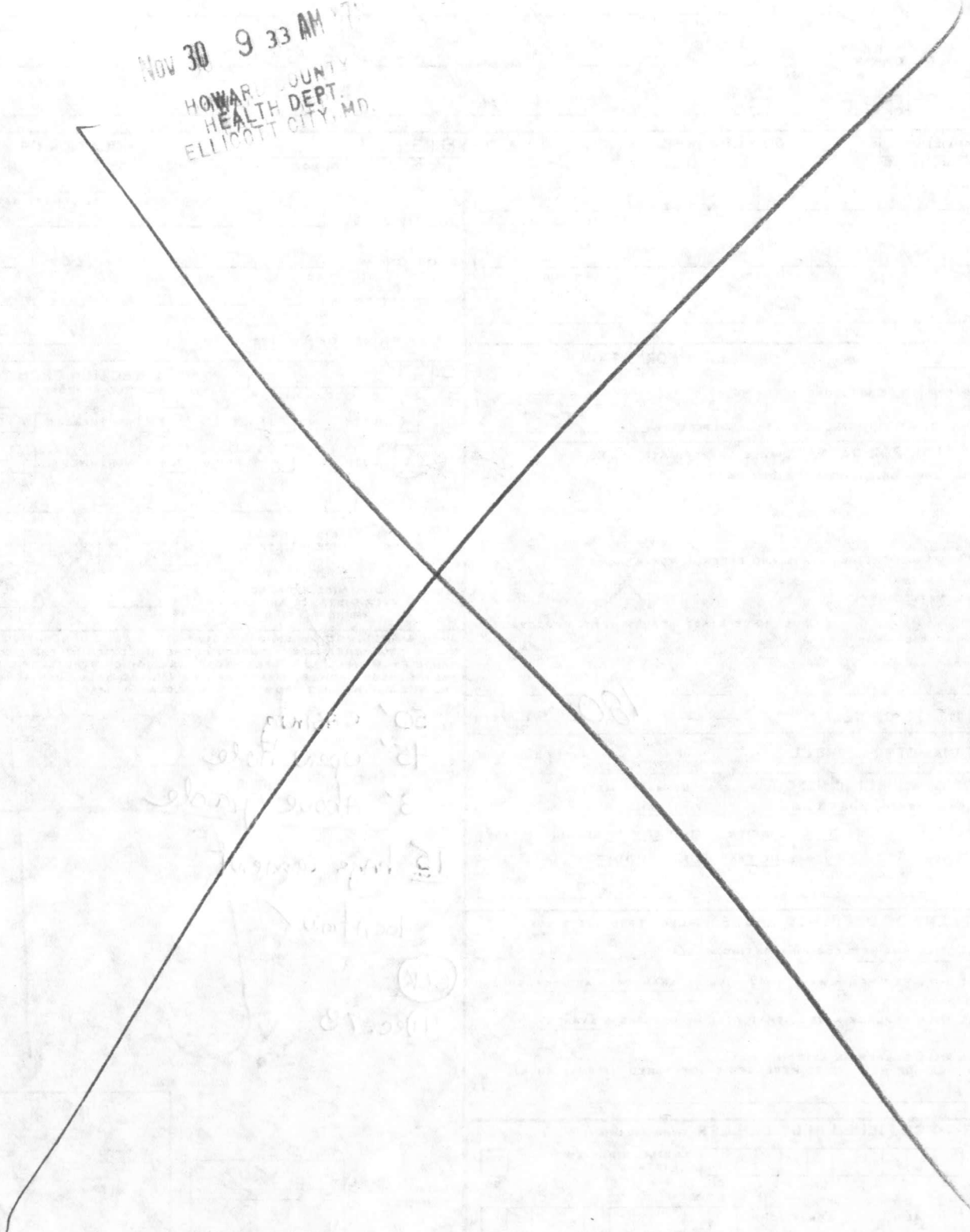
BOX NUMBER: 830 (E) 480 (N)
 NORTH COORDINATE: 485000 50 51 52 53 54 55
 EAST COORDINATE: 830000 57 58 59 60 61 62 63
 ELEVATION AT WELL HEAD (FEET): 0/0 65 66 67 68 0/0 5/0

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
 1 2 3 (SEQ. NO.) 6

RECEIVED

Nov 30 9 33 AM '71

HOWARD COUNTY
HEALTH DEPT.
ELLICOTT CITY, MD.



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