

25 June 79

Approved  
GUC

~~6/20/79~~  
~~6/22/79~~  
if possible

# PERMIT

P 279/2

A 24257

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY

05 382394

ELLICOTT CITY

DISTRICT 5th

INDEXED

DATE 6/22/79

Robert L. Orndorff, Jr.

IS PERMITTED TO INSTALL X ALTER

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

SUBDIVISION Riverside Estates ROAD 10722 Mooseberger Court LOT 23, 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 175' of file

TILE FIELD - 130 sq. ft. bottom area per bedroom. Trenches to be 3 ft. wide, x 4 ft. deep below original grade, 2 ft. of stone and be 9 ft. apart center to center and follow contour of the ground. Begin trenches at point 150 ft. from front lot line and 100 ft. from right side as seen when facing from the front. (Hole A).

PLANS APPROVED BY Robert T. Moorefield & Donald W. Monaghan DATE 6/21/77

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.

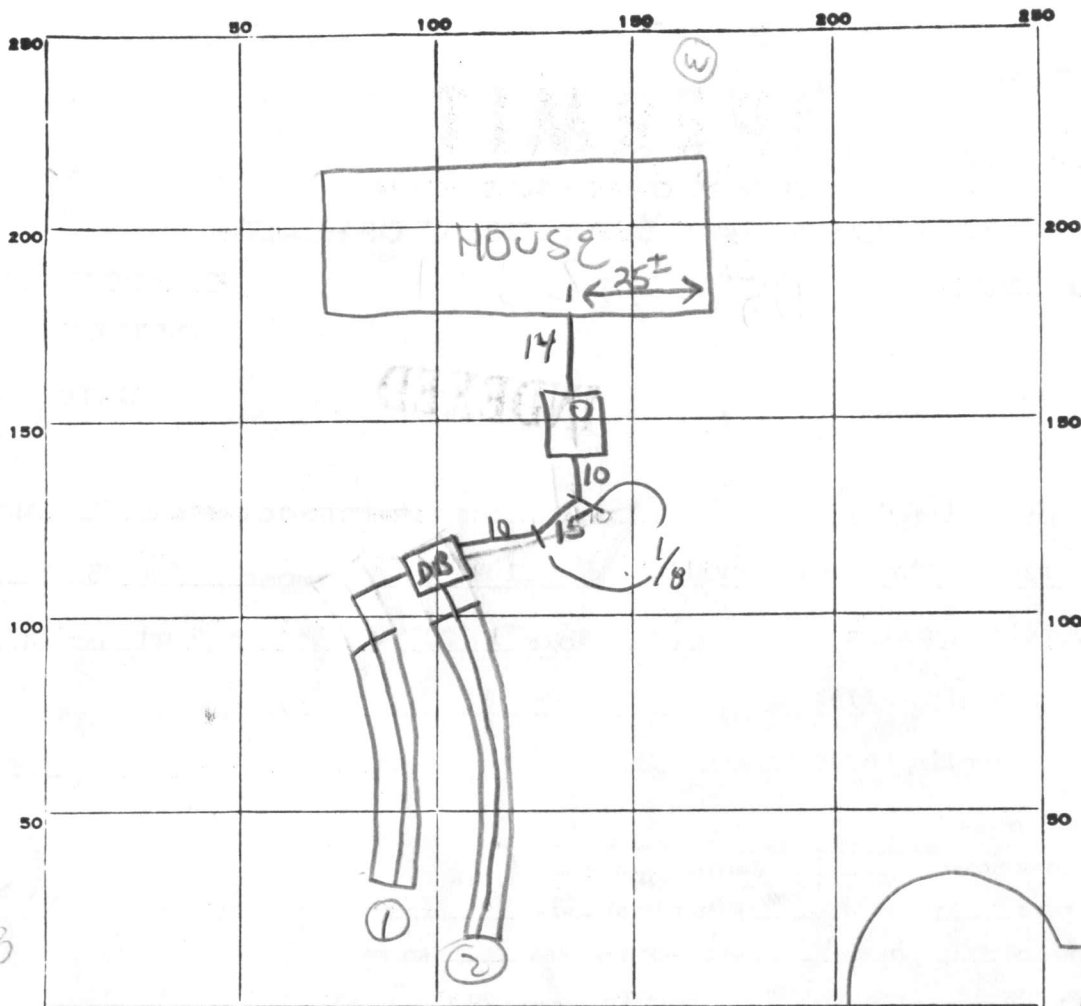
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 24257



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD contractor ✓

SEPTIC TANK, LEVEL 6 PL 1250 approved

CLEANOUTS ST ✓ terracotta

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH 4 FT. TRENCH WIDTH 3 FT.

GRAVEL DEPTH 2 IN. TOTAL LENGTH 86 90 FT. ± 176

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA ± 528 ± 528

SEEPAGE PITS, INSIDE DIAMETER N/A FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 21 June 79 - System located as on approved elevations. Call for  
final when: DISTRIB. BOX WITH BAFFLE, ALL SEWERS, CLEANOUT INSTALLED  
3 WHEN GRAVEL added to trenches. (GLK)  
25 June 79 - FINAL OK. (GLK)

DATE SYSTEM APPROVED 25 June 79

INSPECTOR (GLK)

86  
90  
176

136  
x 4  
3 | 520  
~ 176  
x 3  
528

# APPLICATION

A 2425.7

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

PROPERTY LOCATION:  
SUBDIVISION Riverside Estates LOT NO. 4 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 \_\_\_\_\_

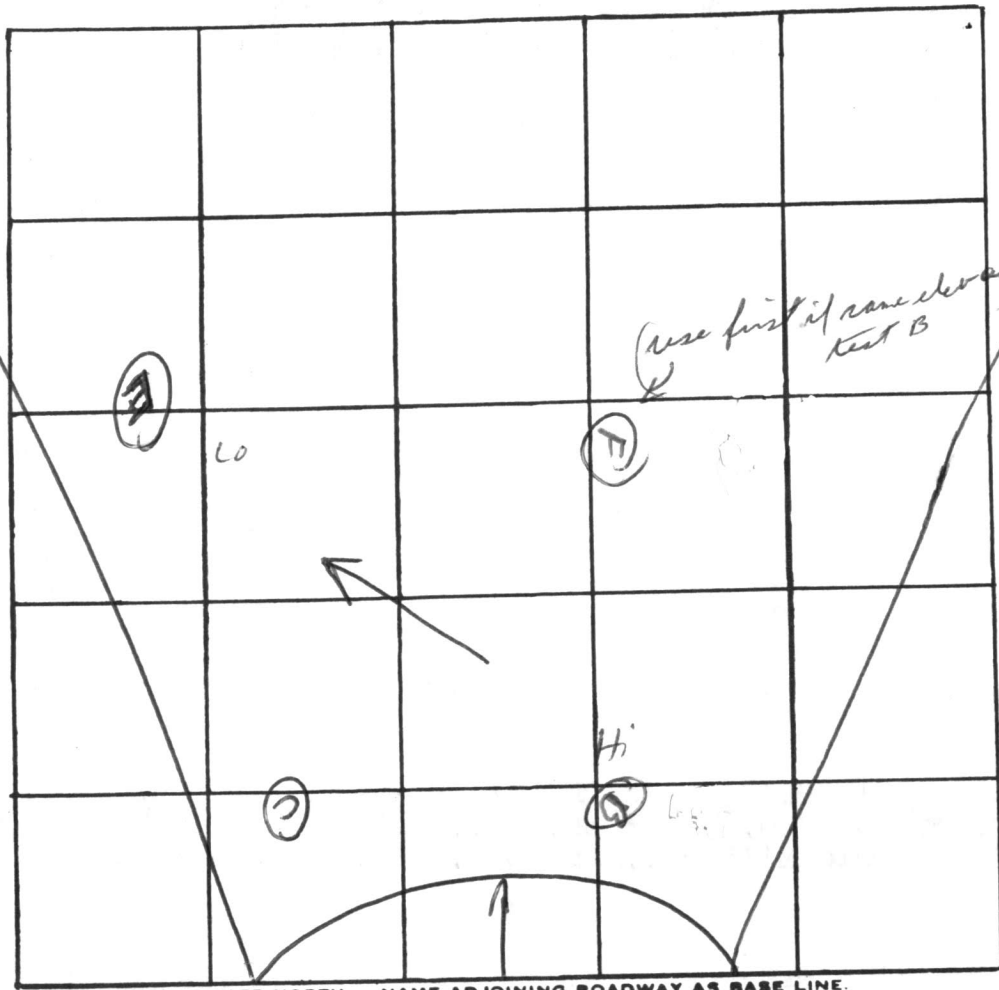
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

(E)  
0 -  
1 clay  
3-4  
1 sand  
12 -

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/12/76	C	4	2 <sup>50</sup>	2 <sup>52</sup>	2 <sup>52</sup>	2 <sup>57</sup>	5
	C <sub>1</sub>	12	2 <sup>51</sup>	2 <sup>54</sup>	2 <sup>54</sup>	3 <sup>03</sup>	9
	E	4	3 <sup>00</sup>	3 <sup>04</sup>	3 <sup>04</sup>	3 <sup>11</sup>	7
	E <sub>1</sub>	12	3 <sup>00</sup>	3 <sup>02</sup>	3 <sup>02</sup>	3 <sup>00</sup>	4
	F	12	vis	dry			
	B	3	10 <sup>58</sup>	11 <sup>00</sup>	11 <sup>00</sup>	11 <sup>04</sup>	4
	B <sub>1</sub>	10	10 <sup>55</sup>	70 <sup>58</sup>	10 <sup>58</sup>	11 <sup>04</sup>	6
	B <sub>2</sub>	13	dry				

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

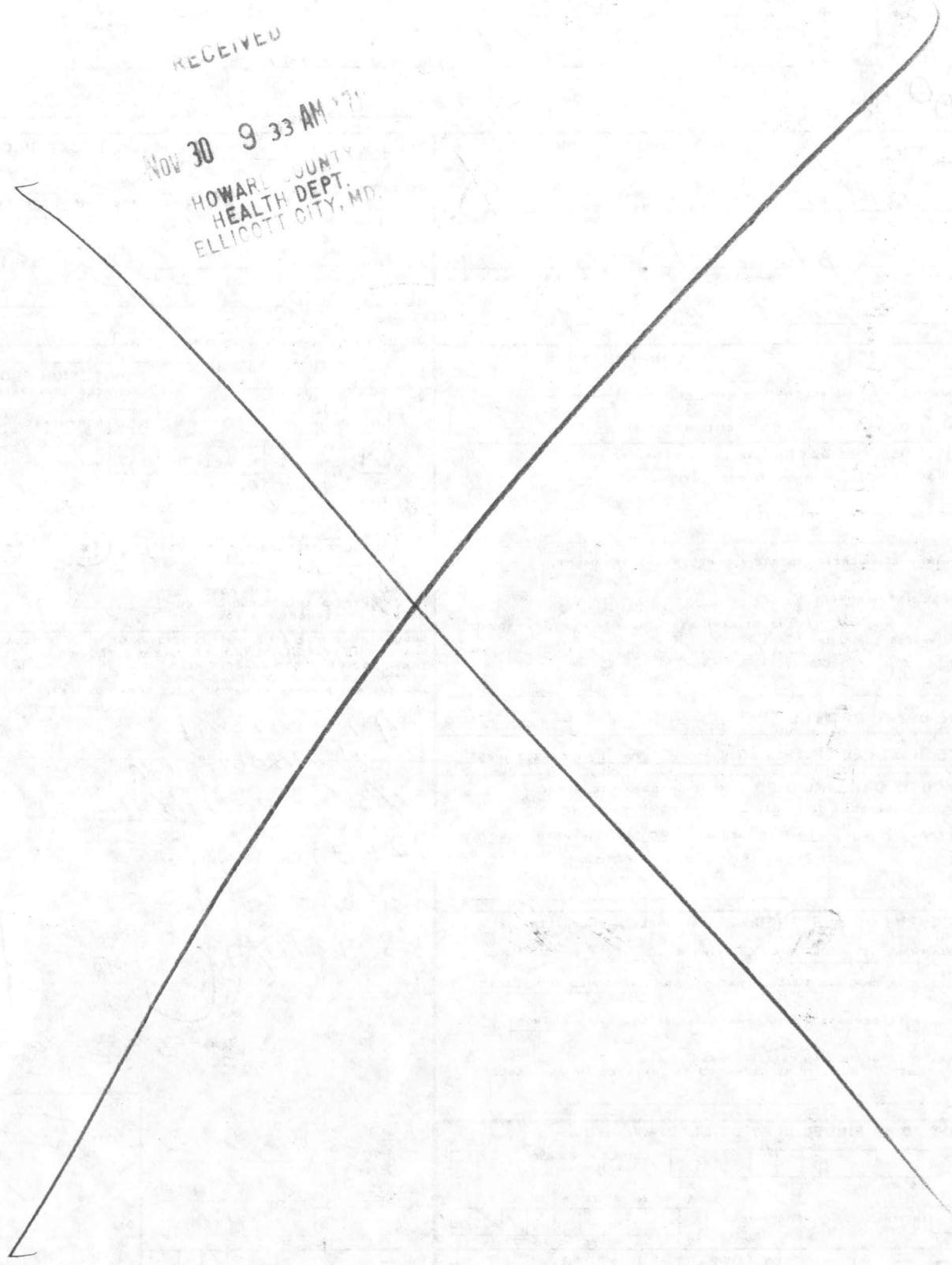
TESTED BY [Signature] ALSO PRESENT: Barth



RECEIVED

NOV 30 9 33 AM '71

HOWARD COUNTY  
HEALTH DEPT.  
ELLIOTT CITY, MD.





RECEIVED

Dec 21 9 22 AM '78

HOWARD COUNTY  
HEALTH DEPT.  
ELLICOTT CITY, MD.

C 1 **0532** 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 **73-3057**

DATE RECEIVED (WRA USE ONLY) \_\_\_\_\_ DATE WELL COMPLETED June 1, 1977

DEPTH OF WELL 185 (TO NEAREST FOOT) 22 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-3057

8-13 15 20 DRILLERS IDENTIFICATION NO. 238

OWNER Shack Stanley LAST NAME FIRST NAME Stanley

STREET OR RFD 9302 Annapolis Rd. POST OFFICE Laurel, Md.

**WELL DESCRIPTION**

**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	
<u>Sand &amp; Peck</u>	<u>0</u>	<u>43</u>	
<u>Gray granite</u>	<u>43</u>	<u>185</u>	

**GROUTING RECORD**

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  YES  NO

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

NO. OF BAGS 12 NO. OF POUNDS 448

GALLONS OF WATER 70

DEPTH OF GROUT SEAL (TO NEAREST FOOT)  
 FROM 0 FT. TO 45 FT. (ENTER 0 IF FROM SURFACE)

**PUMPING TEST**

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 9

METHOD USED TO MEASURE PUMPING RATE psi

WATER LEVEL: (DISTANCE FROM LAND SURFACE)  
 BEFORE PUMPING 17 (NEAREST FOOT) 45 20

WHEN PUMPING 22 (NEAREST FOOT) 25

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)  
 AIR  PISTON  TURBINE  
 CENTRIFUGAL  ROTARY  OTHER (DESCRIBE BELOW)  
 JET  SUBMERSIBLE

**CASING RECORD**

INSERT APPROPRIATE CODE BELOW

STEEL  CONCRETE   
 PLASTIC  OTHER

MAIN CASING TYPE S NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 47

**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)  YES  NO

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  BELOW LAND SURFACE (NEAREST FOOT) 2

**OTHER CASING (IF USED)**

DIAMETER (INCH) \_\_\_\_\_ DEPTH (FEET) FROM \_\_\_\_\_ TO \_\_\_\_\_

**SCREEN RECORD**

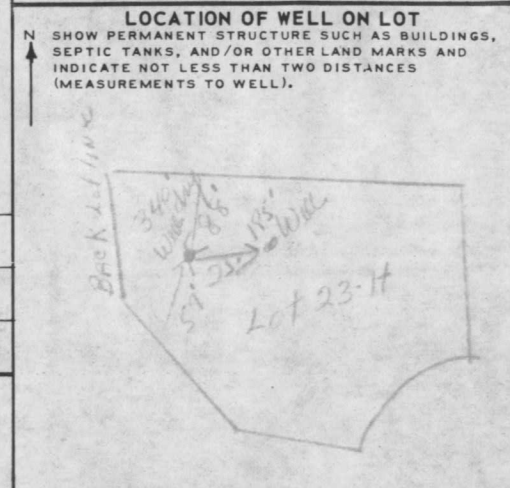
INSERT APPROPRIATE CODE BELOW

STEEL  BRASS OR BRONZE  OPEN HOLE   
 PLASTIC  OTHER

**DEPTH (NEAREST WHOLE FOOT)**

EACH SCREEN	DEPTH (NEAREST WHOLE FOOT)	
	FROM	TO
1	<u>45</u>	<u>185</u>
2		
3		

SLOT SIZE 1, \_\_\_\_\_ 2, \_\_\_\_\_ 3, \_\_\_\_\_



**CIRCLE APPROPRIATE BOXES**

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 \_\_\_\_\_

(PLEASE PRINT) Joseph L. May

SIGNATURE Joseph L. May

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM 60 TO \_\_\_\_\_

GRAVEL PACK 5' 11" OR MORE

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68  F

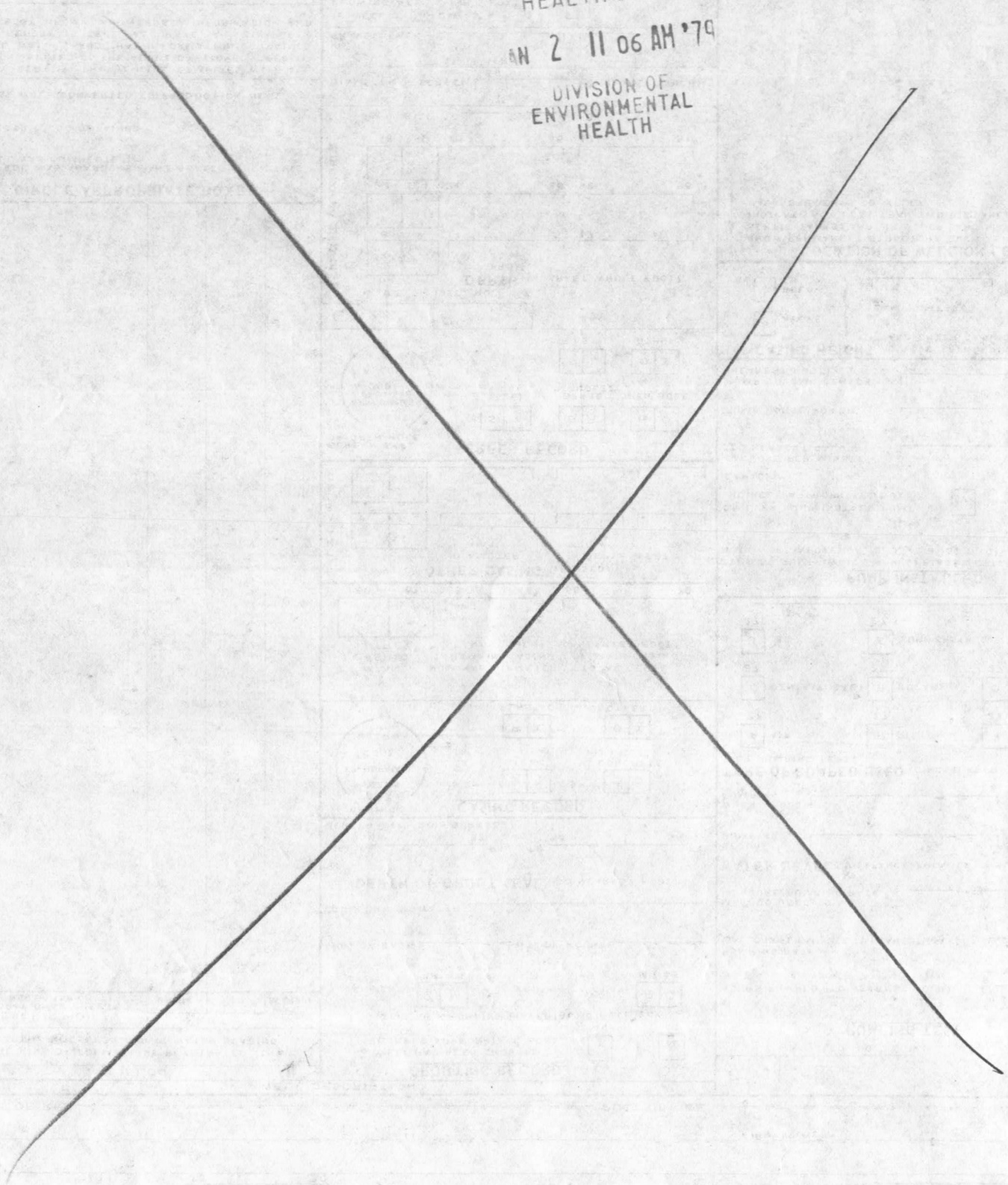
WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING  LOG INDICATOR  OTHER DATA AVAILABLE

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.

APR 2 11 06 AM '79

DIVISION OF  
ENVIRONMENTAL  
HEALTH



1202-31  
1202-31