

9/16/86 NOOK
9/17/86 ASAP

03-305260

9-17-86 approved S. Abel

P 36946
A 24604

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~

ELLICOTT CITY
DISTRICT 3rd
DATE 5/16/86

461-9933

40
5
200
INDEXED

Fogle Septic Cleaners IS PERMITTED TO INSTALL ALTER

ADDRESS 115 Streaker Road, Sykesville, Maryland 21784 PHONE 795-5670

SUBDIVISION Annandale ROAD 13375 Pipes Lane LOT 30

PROPERTY OWNER Donald Benson 442-2174

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

1 DW 300 SQFT
+ 120 FT TRENCH

TRENCHES - 180 sq. ft. bed room. Trench to be 2 feet wide. Inlet maximum depth 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe. ~~OR DRY WELL~~ CHANGE TO DW & DITCH

LOCATION - Start the first trench 140 feet from front lot line and 40 feet from the right side property line. Run trench on level ground (Constant elevation) along the 361.5' contour stopping 10 feet from the lot 31 property line. Trenches to be maximum 10 feet apart and tank 25 feet from house.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

dm/qa

9/15/86 - OK TO CHANGES TO DRYWELL + TRENCH IF DESIRED
INLET TO DRYWELL TO BE 3 FT BOTTOM OF DRYWELL

PLANS APPROVED BY F. Frommelt DATE 5/05/86
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.

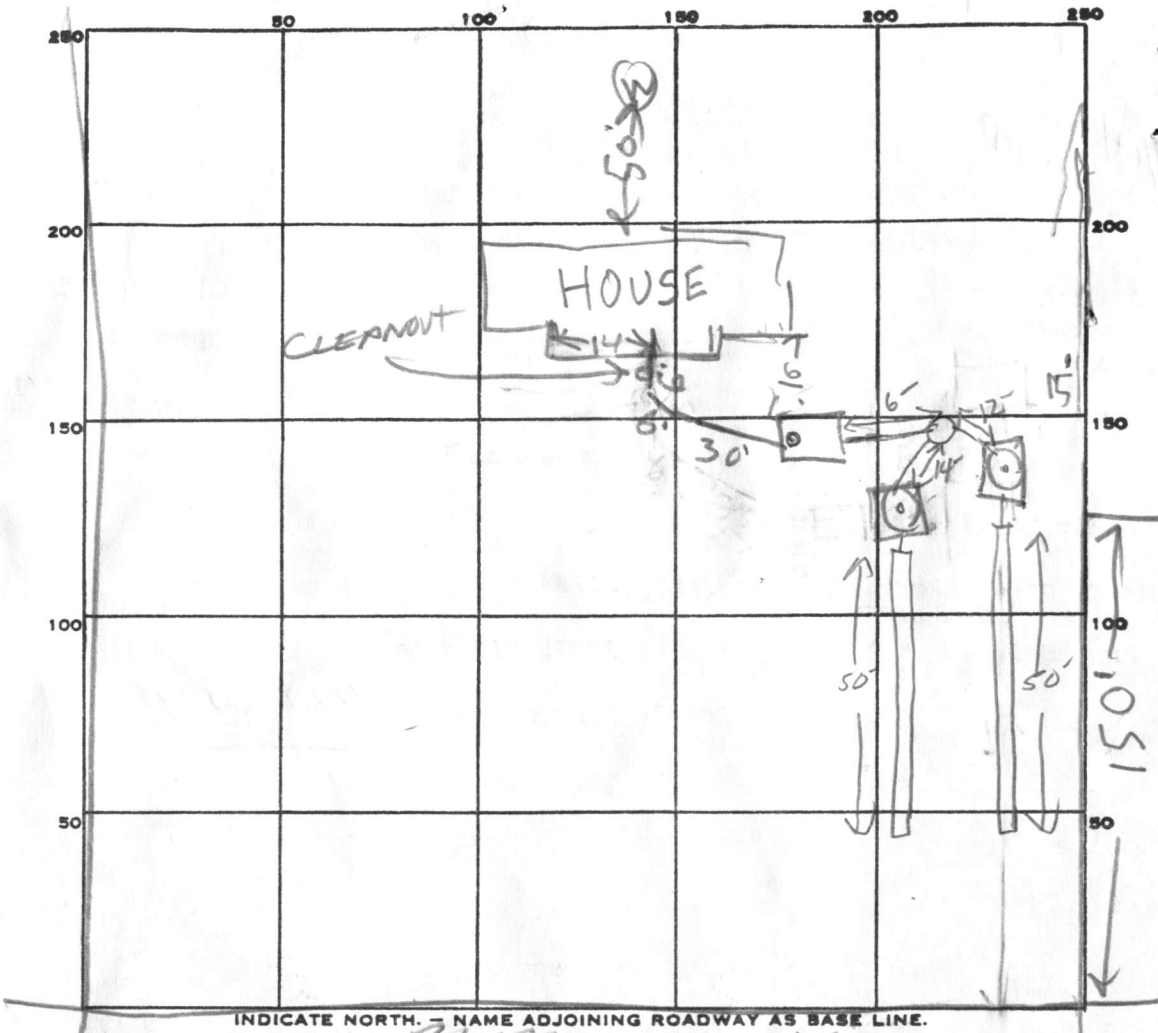
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS. 190 SQFT PER BEDROOM FOR SYSTEM. RH

PERMIT VOID AFTER THREE YEARS. SOFT 8 FT DEEP 40 FT PER METER
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.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS. 9/16/86
EH - 2-1082

A 24604



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PIPES LANE

PERMIT CARD

SEPTIC TANK, LEVEL 1500 CLEANOUTS HOUSE SEWER O.K.

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH 8 FT. TRENCH WIDTH 2 FT. INLOT 3

GRAVEL DEPTH 5 FT IN. TOTAL LENGTH 50 50 TOTAL 100 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 500 ϕ

2 SEEPAGE PITS, INSIDE DIAMETER 40 40 FT. DEPTH BELOW INLET 15 400 ϕ BOTH DW

ABSORBENT AREA 900 SQ. FT.

REMARKS 7/16/86 - TWO DRYWELL HOLES DUG 8 FT DEEP BELOW OG
8 40 FT PERIMETER, OK TO COVER TANK FINISH DW
8 16 TRENCHES & CALL R/H

4/2/87 owner INDICATES SYSTEM INSTALLED ACROSS PROPERTY LINE. TAGY
TO ESTABLISH EASEMENT ALLOWING SYSTEM TO REMAIN IN PLACE. CWT D. KEAR.

DATE SYSTEM APPROVED 9-17-86 INSPECTOR S. Abel

July 2, 1987

Howard County Health Department
Bureau of Environmental Health
3525 Ellicott Mills Drive
Ellicott City, MD 21043

**Attn: Mr. Craig Williams, Director
Water and Sewerage Program**

Dear Mr. Williams:

In accordance with your request, this letter constitutes our acknowledgement that we are aware that a portion of the septic system belonging to Mr. & Mrs. Donald Benson of 13375 Pipes Lane, Sykesville, Maryland 21784 extends onto our property. We hereby inform you that the location of such a portion of their system on our property is acceptable to us. The only condition we would attach to our acceptance is that if for any reason said system belonging to the Benson's requires excavation or other work which disturbs our property, either at or below ground level, that such disturbance shall be remedied upon completion of any work so as to restore the disturbed area as nearly as possible to its original condition.

Sincerely,

Craig R. Garrison

Craig R. Garrison

Dawn T. Garrison

Dawn T. Garrison
13379 Pipes Lane
Sykesville, MD 21784
489-5357

cc: Mr. & Mrs. Donald Benson

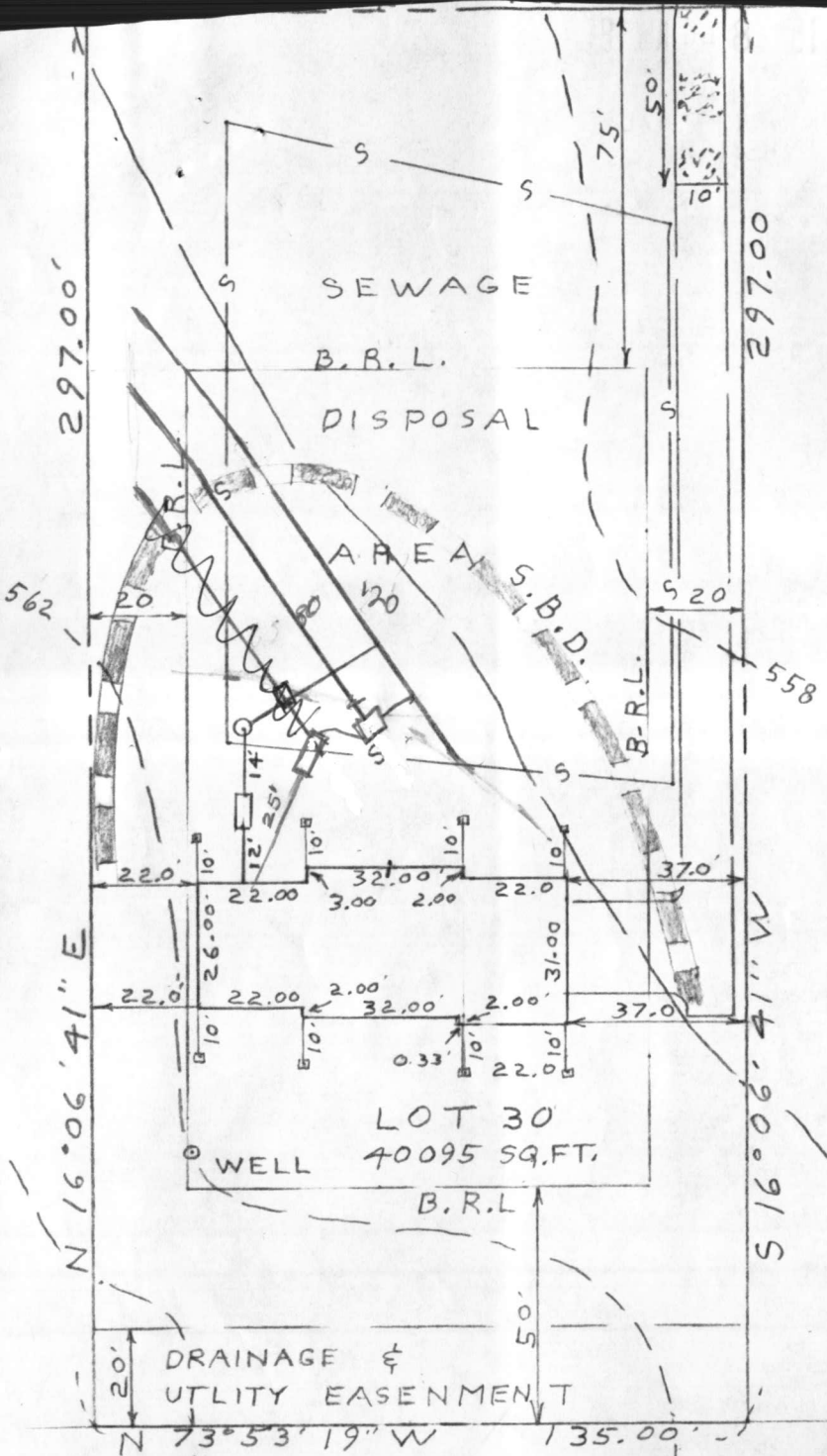
Mr. E. Sponaugle, President
Prime Homebuilders, Inc.

RECEIVED
HOWARD COUNTY
HEALTH DEPT

MAY 6 10 38 AM '87

CITY OF
ENVIRONMENTAL
HEALTH





S.C.E.-DENOTES, STABILIZED CONSTRUCTION ENTRANCE
 S.B.D.-DENOTES STRAWBALE DIKE
 □ - DENOTES 10 FT. OFFSET HUB SET.

Benson
 B.P. # 69843

well at / J.S.

EXIST. GRN. AT DISTR. BC.	561.40	✓
INV. IN DISTR. BOX	557.90	✓
INV. OUT OF SEPTIC TANK	558.18	✓
INV. INTO SEPTIC TANK	558.58	✓
INV. OUT OF DWELLING	558.82	✓
FIRST FLOOR ELEV.	565.00	✓
CELLAR ELEV.	556.00	✓
WELL ELEV.	562.00	✓
NO. OF BEDROOMS	5	✓
ACREAGE	40095 SQ. FT.	

TRENCH INV. 558.40

PLOT PLAN
 LOT 30 PIPES LANE
 SECTION 2, ANNANDALE
 PLAT NO. 3874
 ELECTION DISTRICT 3
 HOWARD COUNTY MD.



APPLICATION

A _____

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 _____

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. _____

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 _____

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

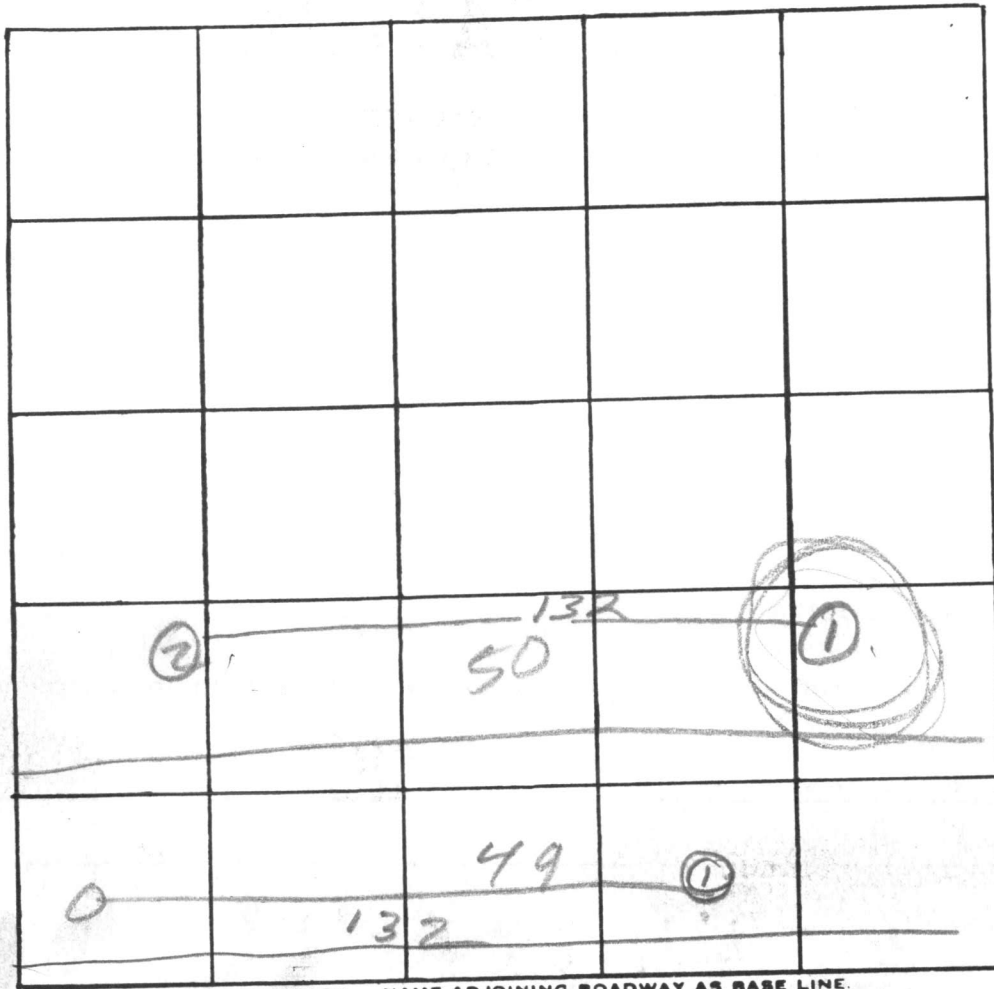
REJECTED BY _____ FOR _____ DATE _____

(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.

49 ①

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
50 Mar 1	1	13	1106	1110	1110	1120	10
	2	12	1108	2	2	11:11	
49	1	4	1129	1140	1139	1150	11
	1a	13	1129	1140	11:40	1149	9
	2						
48	2a						
	1	13	1144	1150	1150	1156	6
	1a	3	1147	1200	1200	1225	25

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT: _____

APPLICATION

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

A _____

P _____

DISTRICT 3rd

DATE 9/24/76

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

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

PROPERTY LOCATION:

SUBDIVISION Annandale LOT NO. 48

ROAD AND DESCRIPTION Pipes Lane

SIZE OF LOT 40,095 sq. ft. TYPE BLDG. 3 or 4
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/ Fred James Pipes

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

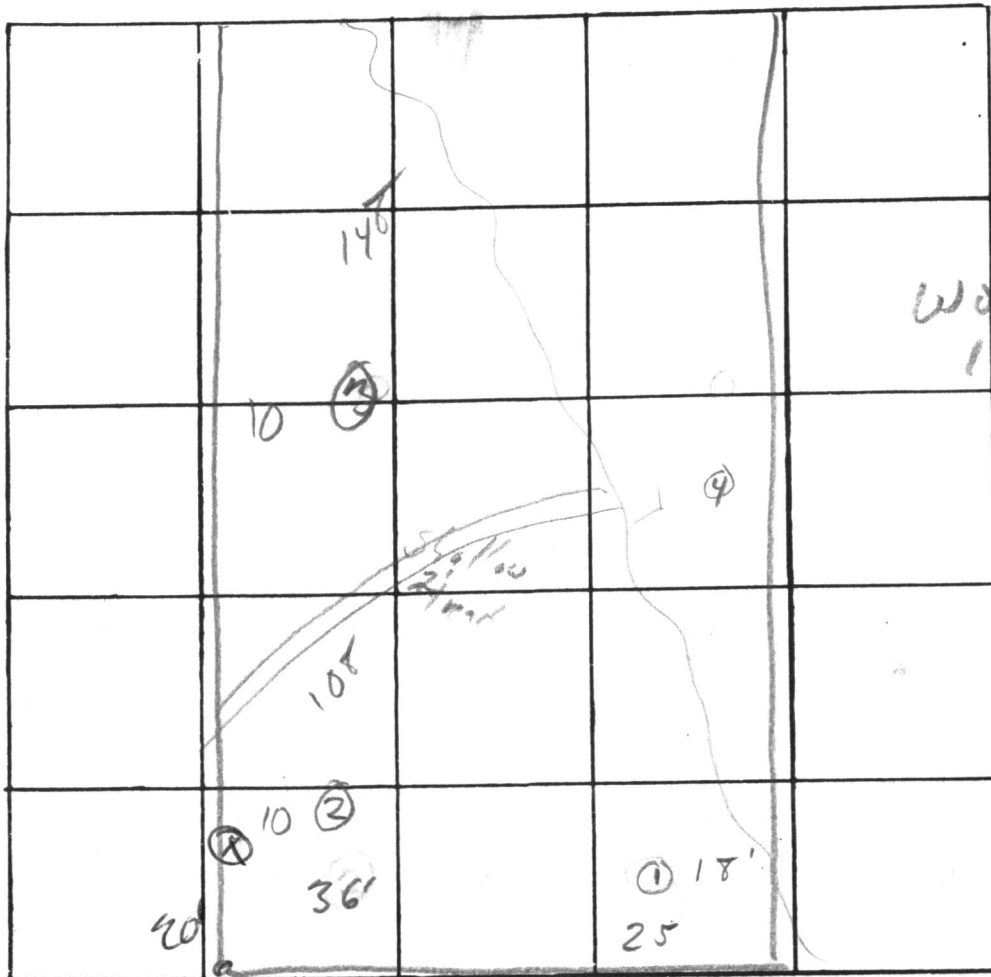
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Old
lot
48



Wadded
lot
on
lot

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Pipes Lane

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
MAR 1 77	1s	3'	1147	1200	1200	1225	25
"	d	13'	1144	1150	1150	1156	6
"	2s	3	130	142	148	215	27
"	d	12	129	132	132	136	4
"	3	3-13'	silty loam		- Best soil		5-13'
"	4s	4	155	201	201	214	13
"	d	12.6	155	202	202	212	10
2/2/8	*	Fuel pipes dug		12'	dry hole.		upon

4'
200.1
230.1

REMARKS _____

TYPE OF SOIL _____

TESTED BY RB ALSO PRESENT: David Hall

APPLICATION

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

A _____

P _____

DISTRICT _____

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. _____

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 _____

APPROVED BY _____ FOR _____ DATE _____

(KIND OF SYSTEM)

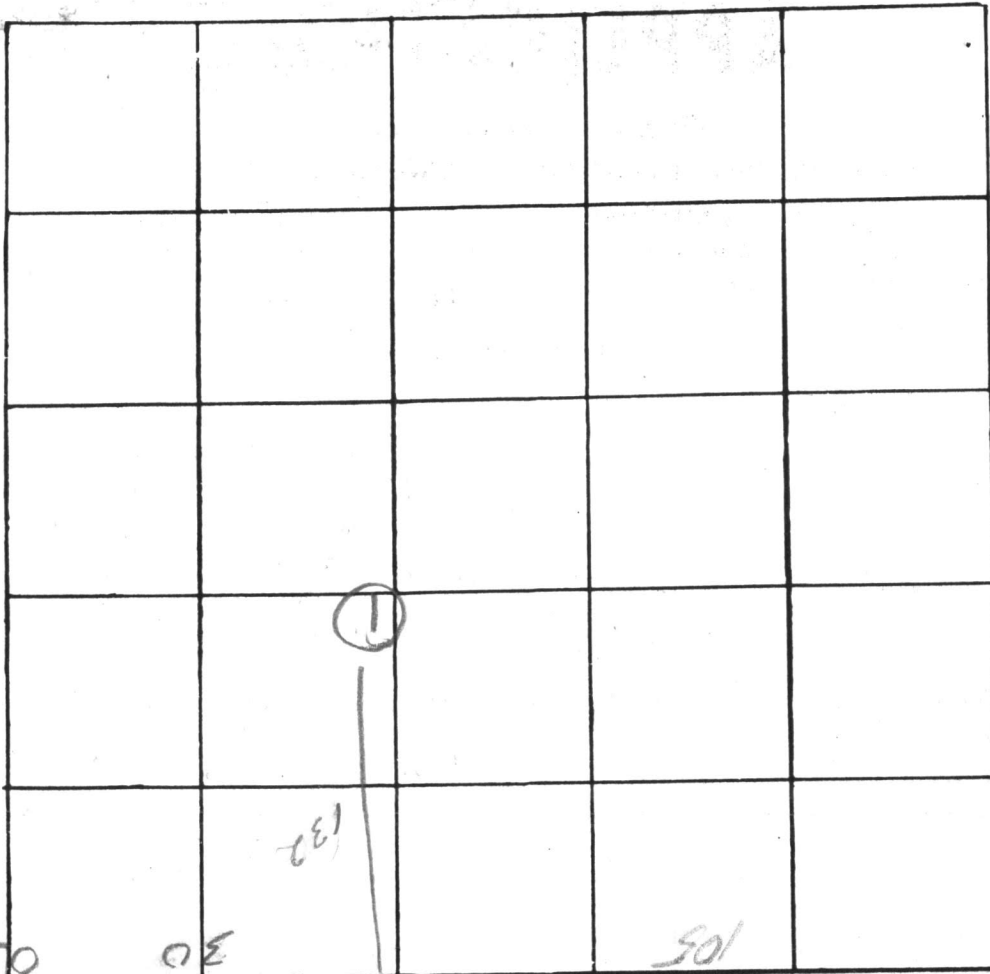
REJECTED BY _____ FOR _____ DATE _____

(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.

Orange Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	1a	7.5	1007	1020	1020	1042	22
	b	13	1008	1019	1019	1039	20

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT: _____

