

3-12-87  
11AM

03-305279

# PERMIT

P 38834

A 24605

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

**INDEXED**

DATE 3/4/87

DATE SYSTEM APPROVED 6/3/87

INSPECTOR S. Abel

Fogle's Septic Service, Inc. IS PERMITTED TO INSTALL  ALTER

ADDRESS 6430 Woodbine Road, Woodbine, Maryland 21797 PHONE 795-5670

SUBDIVISION Annandale ROAD 13379 Pipes Lane LOT 31

PROPERTY OWNER Craig Garrison

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

**TRENCHES** - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

**LOCATION** - Place the distribution box 140 feet from the front (135') lot line and 28 feet from the right (297') lot line as seen when facing the property from Pipes Lane. Run trenches on contour toward the front lot line.

**NOTE** - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *ok cw*

*3/10/87 OK to extend to 1124  
113  
if per area permits  
DATE 11/07/86*

PLANS APPROVED BY S. Abel

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

**BUILDING PERMIT SIGNED  
AND RETURNED**

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES).

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH *5-foot 800147910-AL POOL*

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER TWO 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 OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

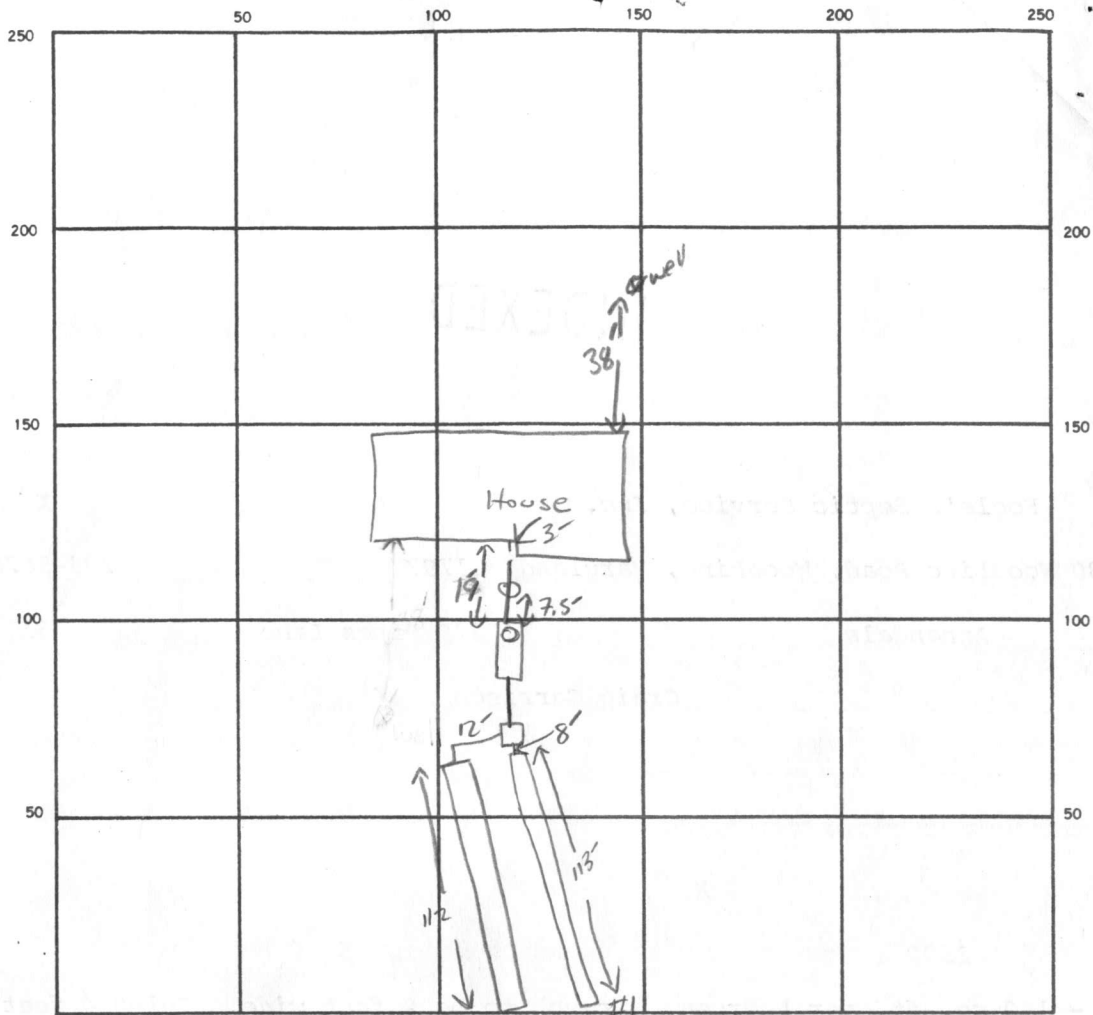
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 24605



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

113  
112  
180  
900  
225  
4 1900  
8  
10420

SEPTIC TANK. LEVEL ✓ 1500 GAL CLEANOUTS ✓ 1ST + INLINE

DISTRIBUTION BOX. LEVEL ✓ 100

DRAIN FIELD/TILE FIELD. DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH ① 4 FT. TOTAL LENGTH ① 113 ② 112 FT. 225LF

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 900 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 900 SQ. FT.

REMARKS 3/13/87 USE CONNECTION BEFORE FINAL S. PLAN

DATE SYSTEM APPROVED 6-3-87 INSPECTOR S. 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 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

ADDRESS 13555 Old Frederick Road, Sykesville, Md. 21784 PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Annandale LOT NO. 49

ROAD AND DESCRIPTION Pipes Lane

SIZE OF LOT 40,095 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

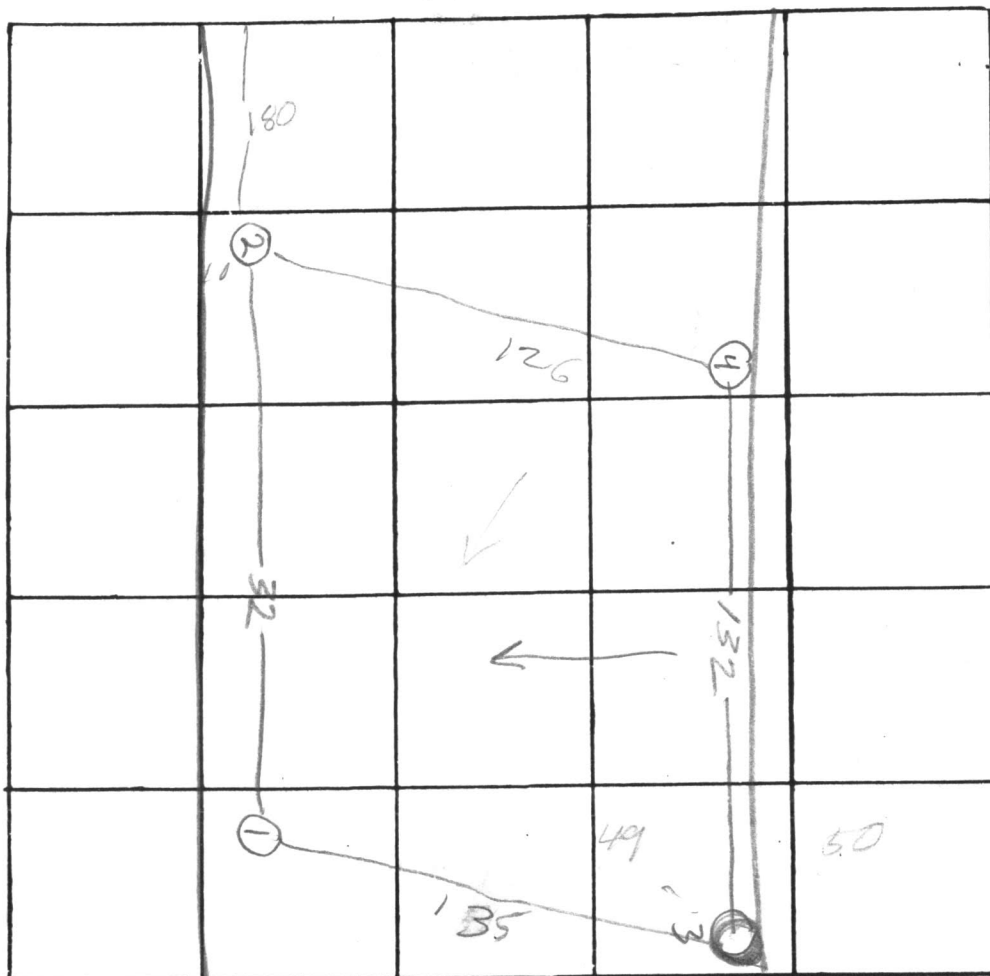
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

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

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

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

## THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

Pipes 1000.<sup>46</sup>

Hole on corner

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	1	4	1129	1140	1140	1150	10
	1a	13	1129	1140	1140	1149	9
	2	Visual					
	3						
	3a	13	1106	1110	1110	1120	10
	4						
	4a	12	1108	?	?	1111	2-3 minutes

REMARKS \_\_\_\_\_

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

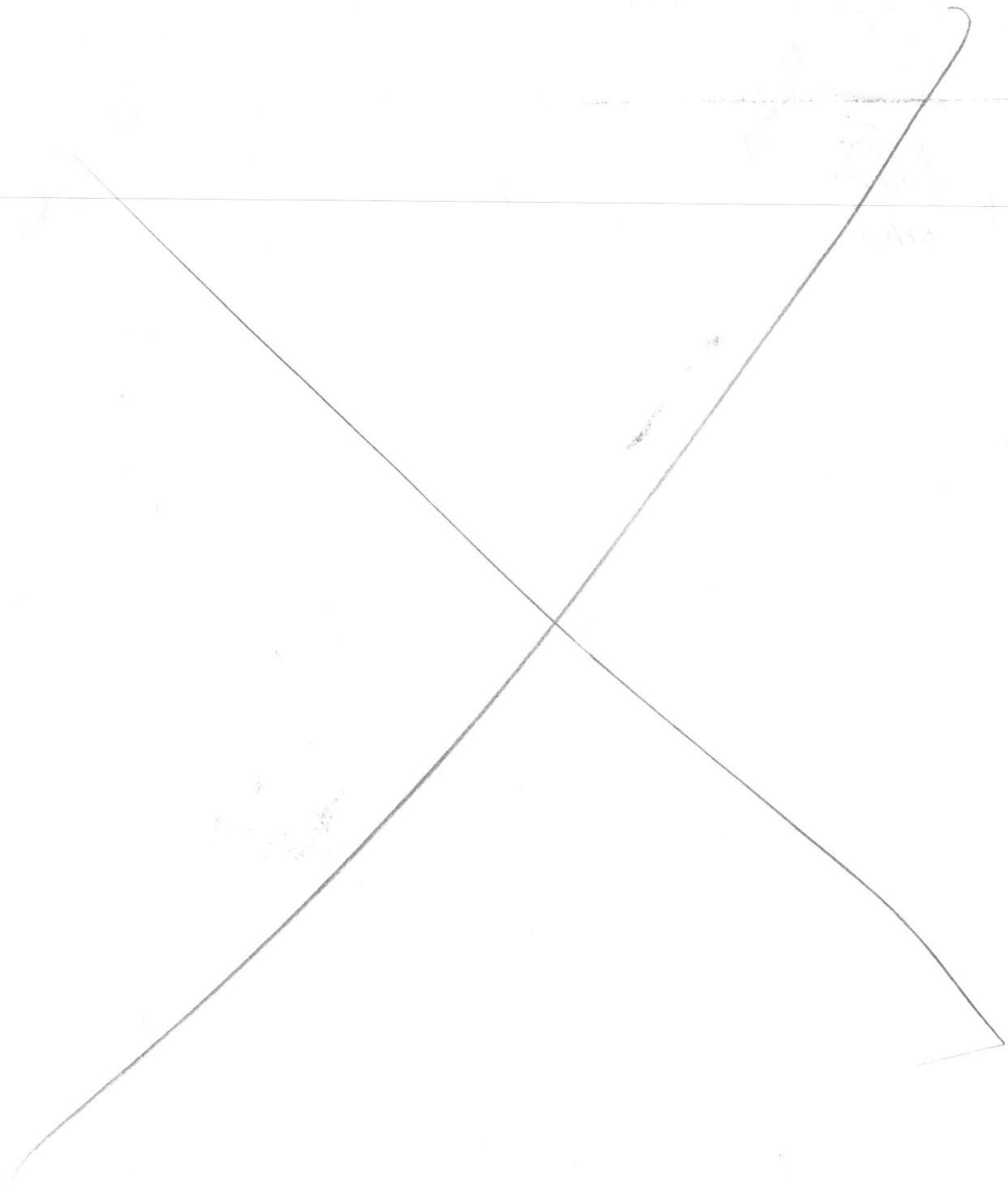
TESTED BY RAB ALSO PRESENT: \_\_\_\_\_



RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.

NOV 3 11 05 AM '86

DIVISION OF  
ENVIRONMENTAL  
HEALTH



C1 0707 SEQUENCE NO. (OEP USE ONLY)  
 THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6, ON ALL CARDS

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

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  
 COUNTY NUMBER A 24605

DATE Received [ ] DATE WELL COMPLETED 052383 Depth of Well 85 (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-0112

OWNER Pipes last name Fred first name  
 STREET OR RFD Pipes Lane TOWN Sykesville  
 SUBDIVISION Annandale SECTION 2 LOT 31

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	
Brown shale	2	38	
Granite	38	55	
Brown Sandstone	55	58	✓ 30
Granite	58	85	

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 564  
 GALLONS OF WATER 36  
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 34 ft.

CASING RECORD  
 casing types insert appropriate code below  
 STEEL  CONCRETE   
 PLASTIC  OTHER   
 MAIN CASING TYPE  Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 40

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

SCREEN RECORD  
 screen type or open hole insert appropriate code below  
 STEEL  BRASS  OPEN HOLE   
 PLASTIC  OTHER

DEPTH (nearest ft.)  
 1 HO 38 85  
 2  
 3  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN [ ] (NEAREST INCH)  
 from to

PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 12  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface) BEFORE PUMPING 17 WHEN PUMPING 23  
 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 YES  NO   
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

CIRCLE APPROPRIATE LETTER  
 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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 308  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) WQ  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

LOCATION OF WELL ON LOT  
 SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)  
 HOUSE 40

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.

JUL 16 4 09 PM '80

DIVISION OF  
ENVIRONMENTAL  
HEALTH

INSPECTION  
REPORT

DATE OF INSPECTION  
BY

ADDRESS

CITY

STATE

TYPE OF BUSINESS

DATE OF LAST INSPECTION

INSPECTOR

STATUS

THIS REPORT IS TO BE FILED IN THE OFFICE OF THE HEALTH DEPARTMENT

IF THIS BUSINESS IS A RESTAURANT, THE INSPECTOR MUST CHECK THE FOLLOWING:

IF THIS BUSINESS IS A FOOD SERVICE ESTABLISHMENT, THE INSPECTOR MUST CHECK THE FOLLOWING:

IF THIS BUSINESS IS A CHILD CARE CENTER, THE INSPECTOR MUST CHECK THE FOLLOWING:

IF THIS BUSINESS IS A DAY CARE CENTER, THE INSPECTOR MUST CHECK THE FOLLOWING:

IF THIS BUSINESS IS A NURSING HOME, THE INSPECTOR MUST CHECK THE FOLLOWING:

INSPECTION REPORT

INSPECTION REPORT

# PIPES LANE

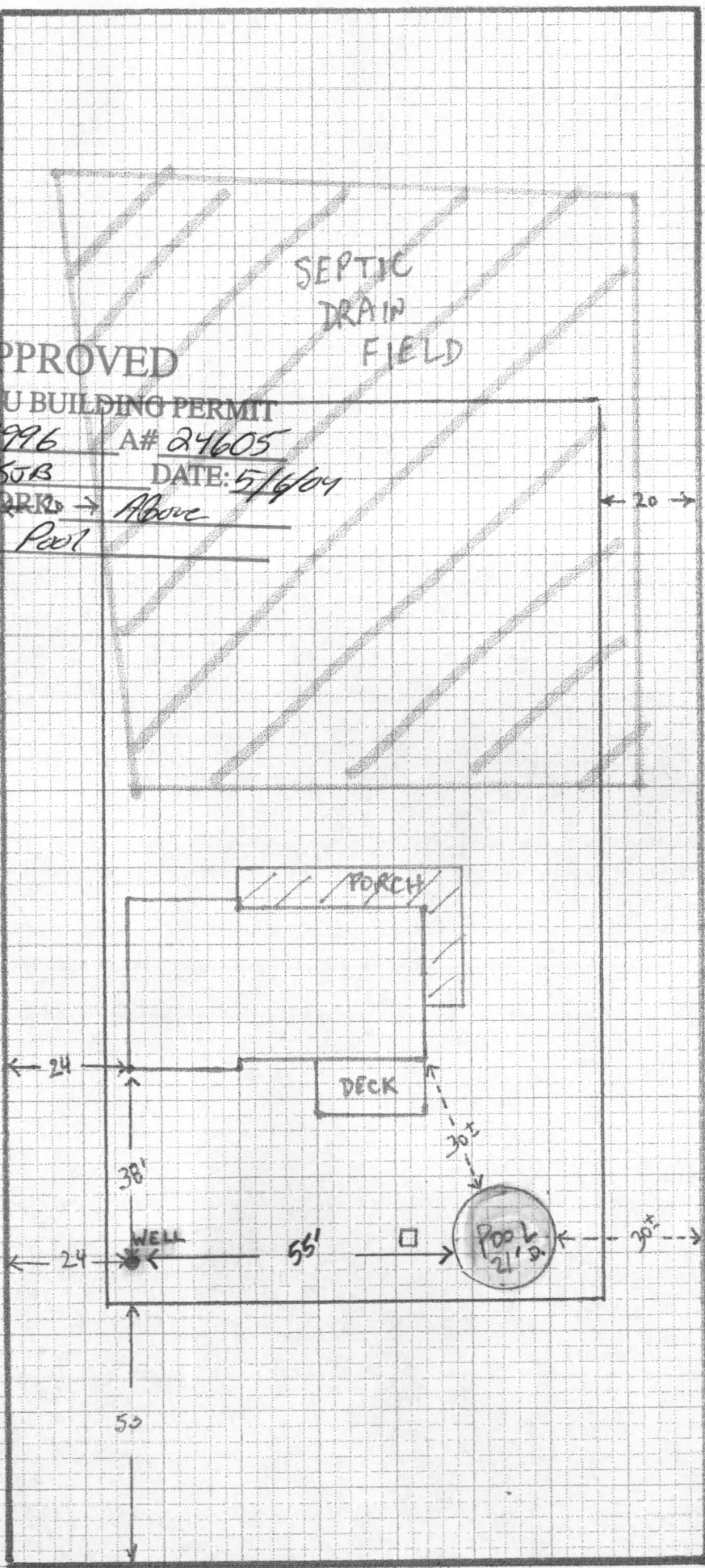
**APPROVED**

**WALK-THRU BUILDING PERMIT**  
 BP# 00147996    A# 24605  
 APP. SAN KJB    DATE: 5/6/04  
 DESC. OF WORK → Above  
ground Pool

SEPTIC  
DRAIN  
FIELD

SCALE:  
 1" = 30'

LOT #31  
 ANNANDALE  
 SECTION 2  
 Plat #3874  
 10/18/77



No. 5510 - 8 1/2" x 11"