

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

05-363195

ELLICOTT CITY

DISTRICT 5th

DATE 10/15/76

P 24108

A _____

INDEXED

Hayward F. Pickens

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 6510 Haviland Mills Rd., Clarksville, Md. 21029

PHONE 344-3779

A SEWAGE DISPOSAL-SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD 6510 Haviland Mills Rd. LOT _____

PROPERTY OWNER Hayward Pickens

NO NAME ON MAILBOX

ADDRESS same as above

on Right coming from Brighton Dam Rd

SPECIFICATIONS 3 Bedrooms

Owner indicated he has plans to add addition bedroom
System designed for 4 bedroom.

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

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER REPAIR- Call for inspection when ground is opened up so Sanitarian can recommend

Drywell 13 X 13 X 13 X 13 sq. feet maximum depth to be 9 feet deep-inlet at 3 feet below original grade- also trench maximum depth 9 deep inlet at 3 feet with 6 feet of stone length 25 feet. All sewer lines from house to sewage disposal area must be cast iron. two inspections necessary for trench two cleanouts (concrete-cast iron or terra cotta one on drywell and 1 on septic tank.

PLANS APPROVED BY Palmer F. Wine

DATE 10/1/76

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

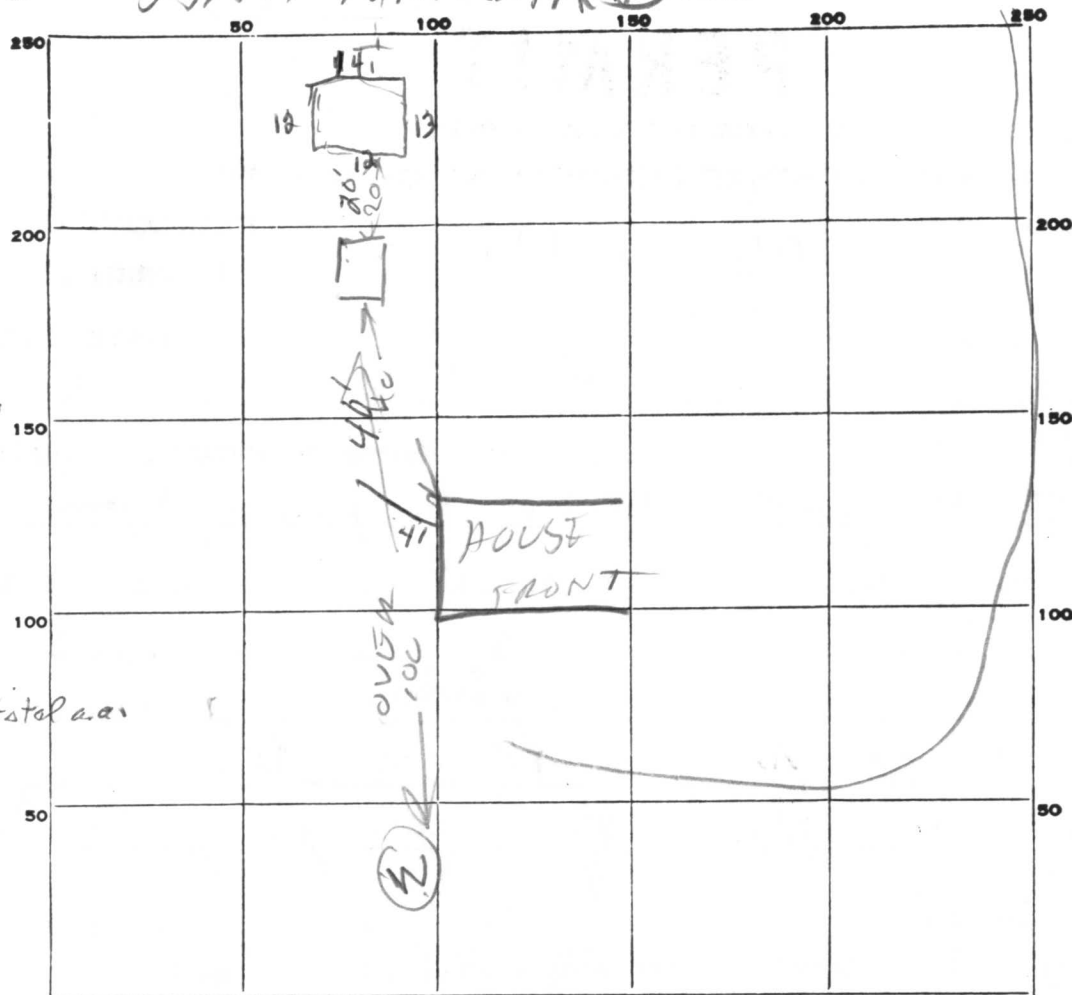
permit for addition signed 10/11/78

37441

24108

A2408

HAVILANA avy R D stand



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL OK 250 Top
2ft below grade

CLEANOUTS ST / DW

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 12 FT. TRENCH WIDTH 3 FT.

GRAVEL DEPTH 8' ft. TOTAL LENGTH 25 FT.

NUMBER OF TRENCHES 1 TOTAL sidewall BOTTOM AREA _____

SEEPAGE PITS, INSIDE perimeter DIAMETER 51 FT. DEPTH BELOW INLET 6' FT.

ABSORBENT AREA 506 SQ. FT.

REMARKS 9/5/77 Hole for DW dug. It is 9 1/2 ft
below grade. Perimeter of hole 50 FT. Hole
for ditch dug also
8/10/77 OK to cover.

DATE SYSTEM APPROVED 8/10/77 INSPECTOR Thomas A. Oyle

14
13
13
13

10/19/76
7:30 P.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

Redeveloped
11/15/76

24108

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 10/1/76

Hayward F. Pickens

IS PERMITTED TO INSTALL ALTER X

ADDRESS 6510 Havilland Mills Road, Clarksville, Md. 21029 PHONE 384-1735

A SEWAGE DISPOSAL SYSTEM LOCATED AT OR 286-3779

SUBDIVISION _____ ROAD 6510 Havilland Mills Road LOT _____

PROPERTY OWNER Hayward F. Pickens

ADDRESS same as above

SPECIFICATIONS 3 bedrooms *owner indicated he has plans to Add Addition bedroom - System designed for 4 bedroom*
DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.
SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%

OTHER REPAIR - Call for inspection when ground is opened up so Sanitarian can *13x13x13x13*

recommend repair system. recommend Dry Well *12' x 12'*

max depth to be 9 Ft deep - inlet at 3' below original grade - Also trench - MAX depth 12' deep inlet at 3' with 8 1/2 to 9' of stone - length 25'

PLANS APPROVED BY Palmer F. Wine DATE 10/1/76

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

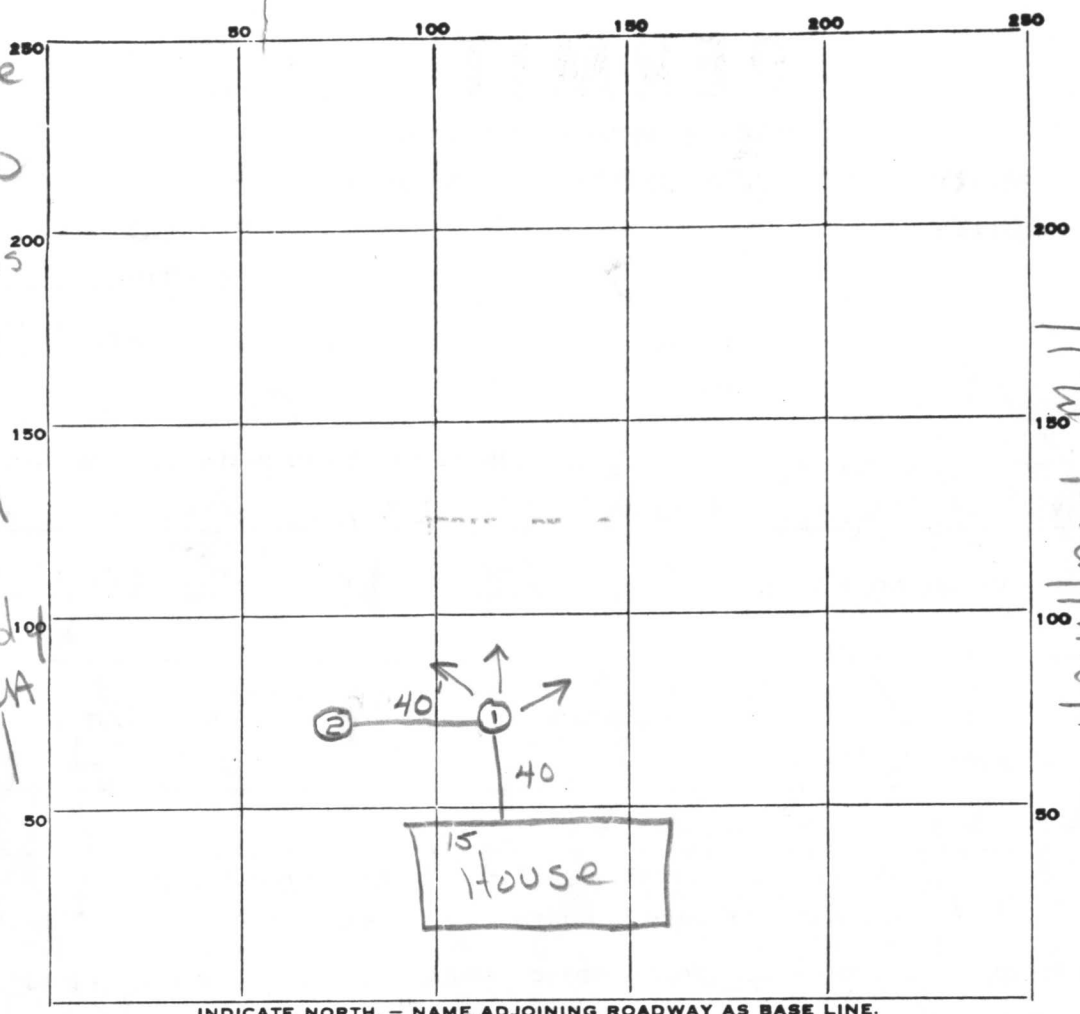
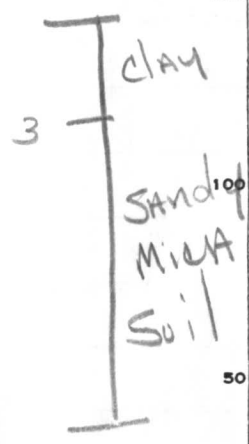
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

All sewer lines from house to sewage disposal AREA MUST be cast iron

*2 inspections necessary for trench
2 cleanouts (concrete-cast iron or terra cotta)
1 on DW & 1 on S.T*

A24108

Hole #1
high-use
Trench to
come off
DW towards
hole #2



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD yes

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED _____ INSPECTOR _____

C1 1359 SEQUENCE NO. (OEP USE ONLY)

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 P 24108

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

Date Received (OEP use only)

DATE WELL COMPLETED 12 9 87

Depth of Well 300 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-4072

OWNER Pichens Hayward F. STREET OR RFD 6510 Havilland Mill Rd. TOWN Brighton

SUBDIVISION SECTION LOT

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: Brown shale 0-34, Gray mica rock 34-300.

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 9 NO. OF POUNDS 816 GALLONS OF WATER 54 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 39 ft.

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

MAIN CASING TYPE S+ Nominal diameter top(main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 42

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

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

DEPTH (nearest ft.) HO 40 300

- 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 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...

DRILLERS IDENT. NO. 238 DRILLERS SIGNATURE Joseph L. Mayne

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

DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX (F)

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 (seq. no.)

PUMPING TEST HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min. to nearest gal.) 3

METHOD USED TO MEASURE PUMPING RATE air

WATER LEVEL (distance from land surface) BEFORE PUMPING 25

WHEN PUMPING 180

TYPE OF PUMP USED (for test) [A] air [P] piston [T] turbine [C] centrifugal [R] rotary [O] other [J] jet [S] submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES (Y) NO (N)

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

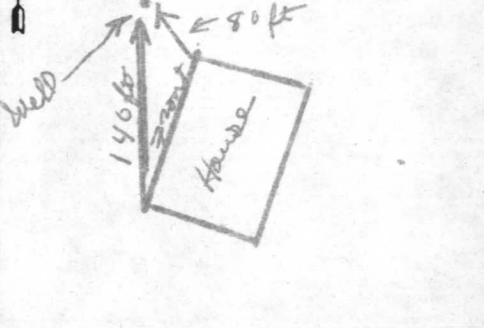
TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))

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 [-] below LAND SURFACE 2 (nearest foot)

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)



RECEIVED
HOWARD COUNTY
HEALTH DEPT.

DEC 15 10 48 AM '81

DIVISION OF
ENVIRONMENTAL
HEALTH

