

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

approved
3/10/86
C Williams

5rd

8/12/85
8-6-85
2 PM

P 35798
A 30249

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

ELLICOTT CITY
DISTRICT 4th
DATE 7/22/85

INDEXED

Barry D. Howard IS PERMITTED TO INSTALL ALTER

ADDRESS 12625 Blacksaddle Lane, Germantown, Md. 20874 PHONE 428-9161

SUBDIVISION Roxbury Estates ROAD 4010 Route 97 LOT 20

PROPERTY OWNER Barry D. and Janet Howard

ADDRESS 12625 Blacksaddle Lane, Germantown, Md. 20874 Home: 428-9161 Office: 428-9330

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

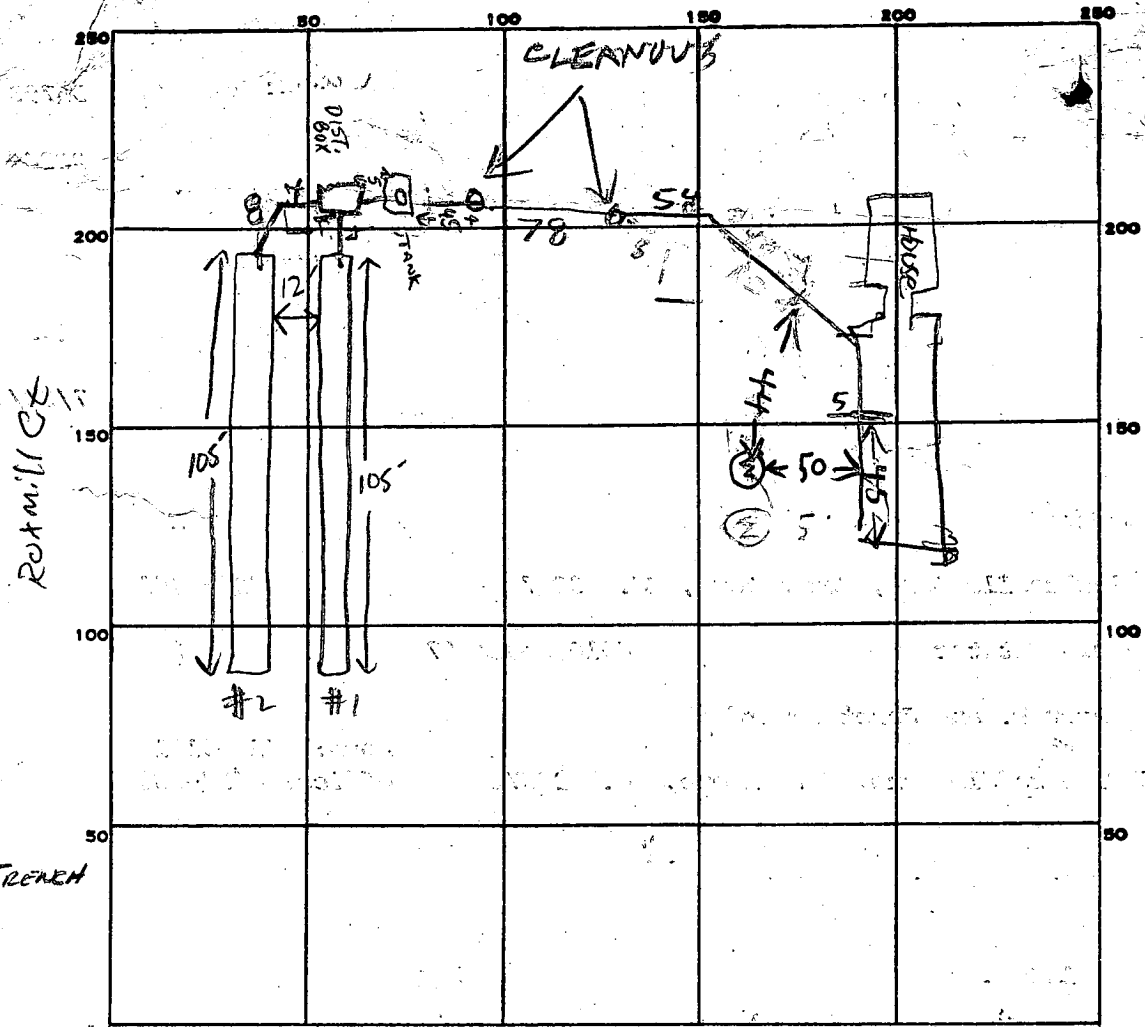
TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe. Start first trench at a point 45 ft. from the left lot line and 230 ft. from the front lot line as seen when ~~XXXXXX~~ facing the property from Roxmill/Split Rail Court. Run trench(es) along level ground toward right lot line.

PLANS APPROVED BY Craig Williams DATE 8/19/83

- 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.
- 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, 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 APPROVAL ON THIS PERMIT

A 30249



Rotmill Ck

900 ft
4-9
180 FT TRENCH

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Rt 97

PERMIT CARD _____

TANK IN WRONG PLACE 8/12 ST 8/12 NO.

SEPTIC TANK, LEVEL OK 1500 CLEANOUTS _____

DISTRIBUTION BOX, LEVEL OK 9/1 _____

TILE FIELD, DEPTH ① 9.5' ② 9.5' FT. TRENCH WIDTH 2 FT. INLET

GRAVEL DEPTH ① 4.5' ② 4.5' IN. TOTAL LENGTH ① 105' ② 105' FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA _____

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 8-2-85 OK TO ADD STONE TO TRENCHES S&L

8/6/85 ADD REST OF PIPE & PAPER TO BOTH TRENCHES ONLY ABOUT 6" STONE NEEDED. HOLD FOR REVIEW TANK ONLY 44 FT FROM WELL MAY HAVE TO MOVE TANK RT

8/9/85 TRENCHES OK TO COVER. SEPTIC TANK MUST BE MOVED. ON 8/12/85 TANK NOT MOVED. PIPE FROM TANK TO TRENCH INSTALLED RT

SEPTIC TANK RELOCATED OK, MANHOLE CLEANOUT INSTALLED 3/10/86 CW.

DATE SYSTEM APPROVED 3/10/86 INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL
DRILLER:

My well driller is not to install the pump for my water well, and I
hereby certify that it will be my responsibility to have a Pump Permit
taken out by a registered master plumber or certified pump installer.
It will be my responsibility to notify the Health Department before
and during the installation so that inspections can be made by their
representative. (Pursuant to Chapter XVII, of the Plumbing Code of
Howard County.)

BARRY D. HOWARD

Barry D. Howard 4-25-85
(Name)

12625 Blackapple Lane
(Address) GERMANTOWN, MD 20874
H. 428-9161 W. 428-9330

HO-81-1020
(OEP Well Permit Number)

4/30/85
(Date)

APPLICATION

SEWAGE DISPOSAL TESTING

A 30249

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th.

DATE 9/28/79

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 J. Garrett Reilly Barry D. Howard

ADDRESS Roxbury Mills Rd, Glenwood, Md. 21738 PHONE 489-4481

German town, Md 20874

PROPERTY LOCATION:

SUBDIVISION Roxbury LOT NO. 25 new 20

ROAD AND DESCRIPTION 4010 Route 97

SIZE OF LOT 3.00 Acres TYPE BLDG. 3 or 4 Bedrooms

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER

ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT E. Smariga /s/

APPROVED BY R.D. & R.H. FOR DRY WELL DATE 10/10/79

REJECTED BY _____ FOR _____ DATE _____

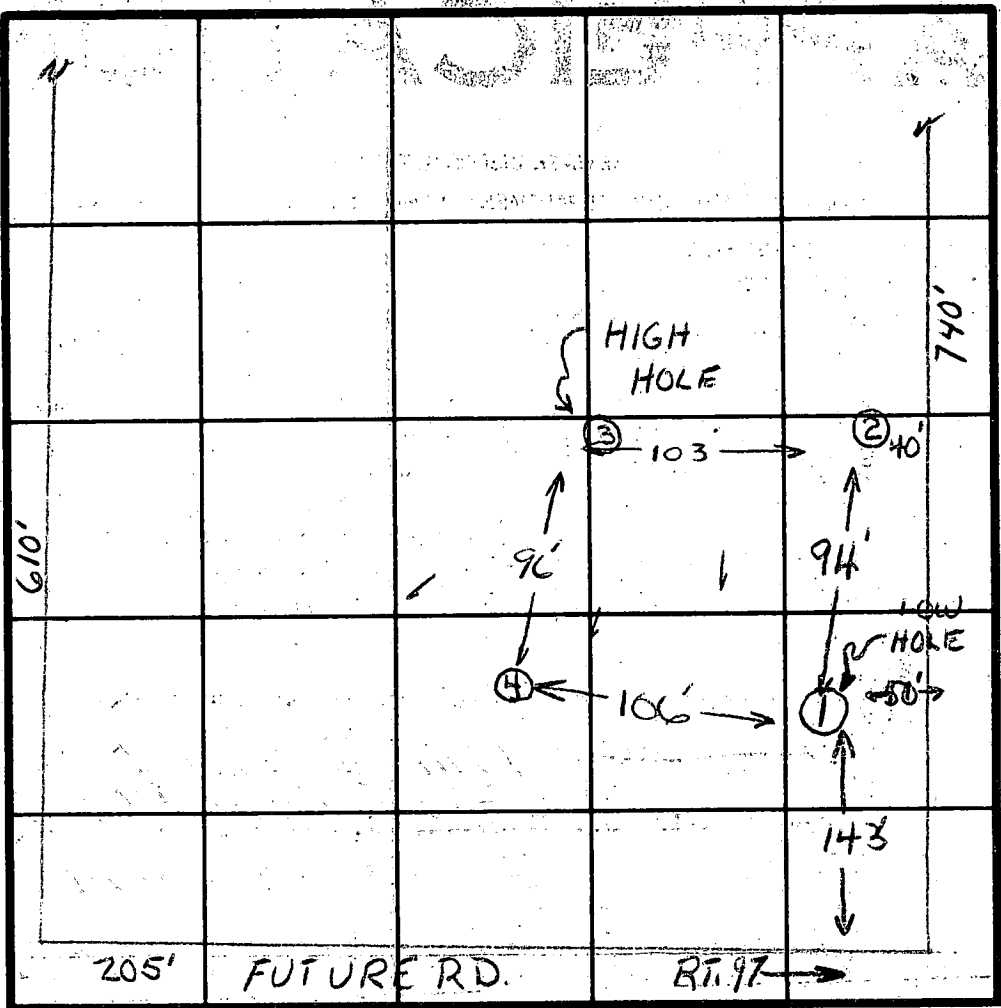
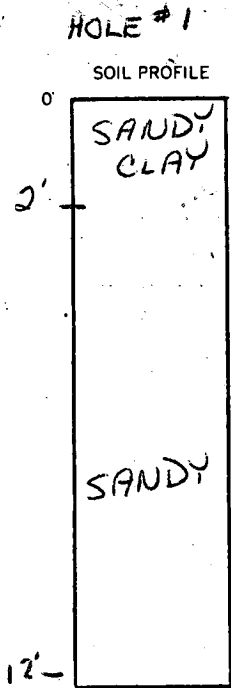
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/2/79 - OIC R.H. & R.D.

BLDG. PERMIT SIGNED
AND RETURNED 4/24/85
Serial # 65568

THIS IS NOT A PERMIT

LOT 23



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/8/79	1S	3'	2:30	2:34	2:34	2:40	6
	1D	12 1/2'	2:29	2:47	2:47	3:14	27
	2S	4'	2:54	2:58	2:58	3:10	12
	2D	12'	2:50	2:59	2:59	3:13	14
	3S	4 1/2'	3:15	3:18	3:18	3:22	4
	3D	13'	3:14	3:21	3:21	3:27	6
	4	VISUAL 12 1/2'	2' CLAY 10 1/4' SAND				

REMARKS _____

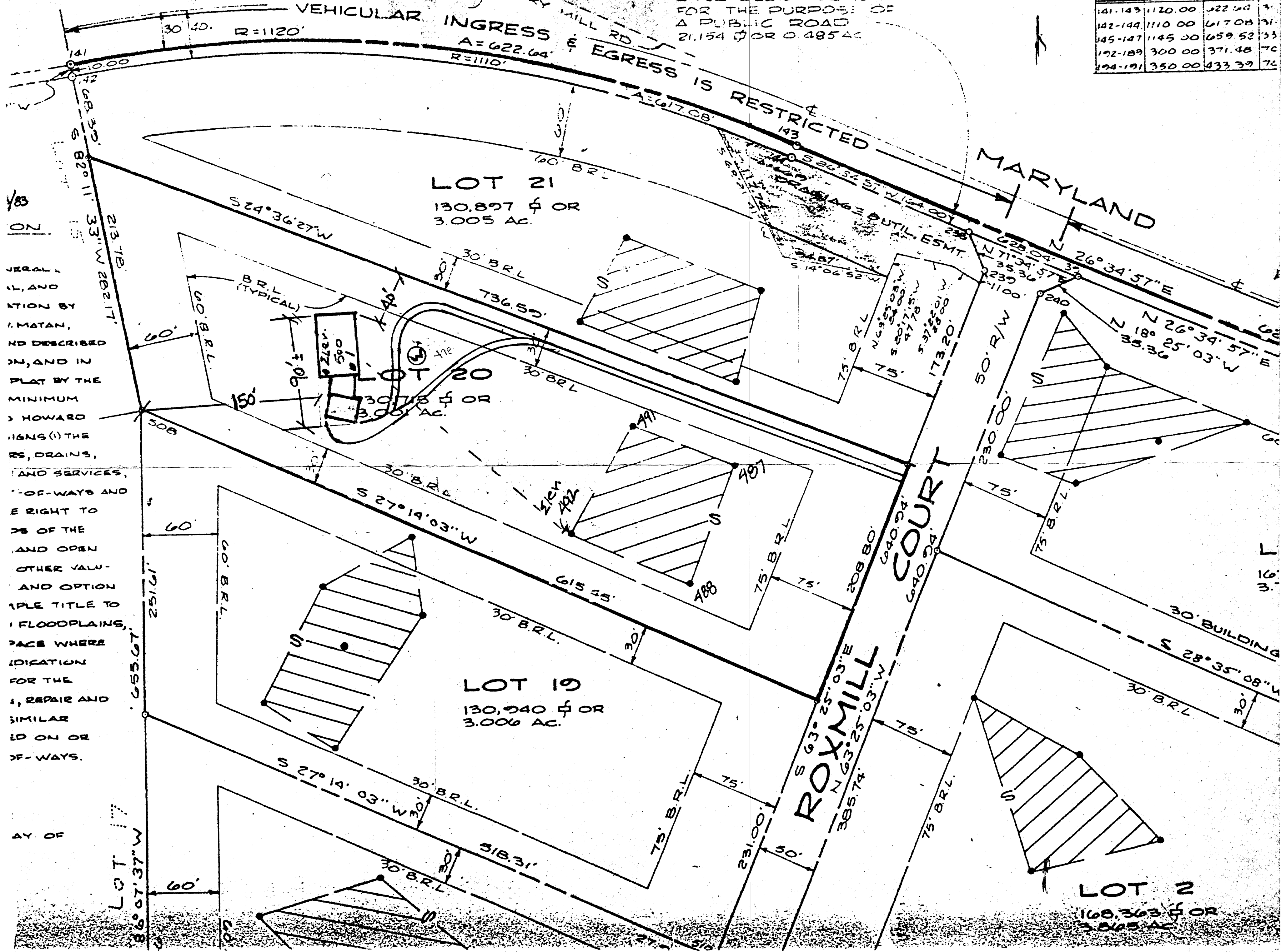
TYPE OF SOIL _____

TESTED BY R.N. & R.W. ALSO PRESENT KETTERMAN JR & SR.

N 520021.777 E 785569.067

LAND DEDICATED TO PUBLIC USE
FOR THE PURPOSE OF
A PUBLIC ROAD
21,154 ± OR 0.485 AC

PT-PT	RADIUS	ARC	D
141-143	1120.00	622.64	31
142-144	1110.00	617.08	31
145-147	1145.00	659.52	33
192-189	300.00	371.48	70
194-191	350.00	433.39	76



GENERAL
AND
LOCATION BY
PLAN, AND IN
PLAN BY THE
MINIMUM
HOWARD
SIGN(S) THE
RES, DRAINS,
AND SERVICES,
OF-WAYS AND
THE RIGHT TO
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AND OPEN
OTHER VALU-
AND OPTION
TITLE TO
FLOODPLAINS,
FACE WHERE
INDICATION
FOR THE
I, REPAIR AND
SIMILAR
ED ON OR
OF-WAYS.

AY. OF

C1 **2288** 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 30249**

DATE Received DATE WELL COMPLETED **06/19/85** Depth of Well **205** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-81-1020**

OWNER **BARRY HOWARD** last name **ROXMILL CT** first name **BARRY** TOWN **GLENWOOD**
 STREET OR RFD SUBDIVISION **ROXBURY** SECTION _____ LOT **20**

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	
Brown Shale	0	45	
Gray Granite	45	205	✓

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **10** NO. OF POUNDS **940**
 GALLONS OF WATER **60**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **40** ft.

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

MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **49**

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

screen type or open hole insert appropriate code below
ST **BR** **HO** **PL** **OT**
 STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

C 2
 DEPTH (nearest ft.)
 1 **HO** **48** **205**
 2 _____
 3 _____

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. **238**
 DRILLERS SIGNATURE **James L. Hays**
 (MUST MATCH SIGNATURE ON APPLICATION)

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

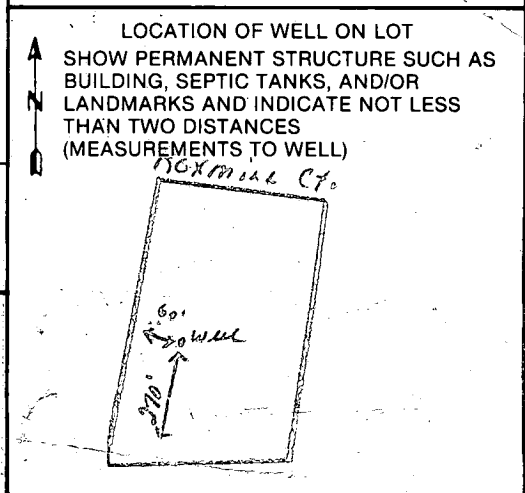
SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)

GRAVEL PACK _____ from _____ to _____
 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 _____
 70 _____ 72 _____ 74 75 76 _____
 TELESCOPE LOG OTHER DATA
 CASING INDICATOR

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **9**
 METHOD USED TO MEASURE PUMPING RATE **bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **48** WHEN PUMPING **121**
 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: 29
 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 **1** (nearest foot)



B 1 **8555** SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

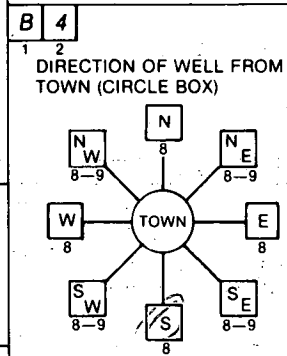
STATE OF MARYLAND
 PERMIT TO DRILL WELL *Z.M.D.*
 please print or type

OEP PERMIT NUMBER
HO-81-1020
 fill in this form completely

U/aps
 Date Received **04/30/85**
 OWNER INFORMATION
HOWARD D **BARRY**
 Last Name Owner First Name
21ST CENTURY **BOZLO**
 Street or RFD
GERMANTOWN **MD** **20874**
 Town State Zip

B 3 LOCATION OF WELL
HOWARD COUNTY
ROYBURY SUBDIVISION
 SECTION **20** LOT **20**
GLENWOOD NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **2 1/2** MI

DRILLER INFORMATION
Joseph H. Wayne
 Driller's Name **238** License No. 80
Joseph H. Wayne WELL DRILLING
 Firm Name
5512 Ridge Rd. Mt. Airy Md. 21771
 Address
Joseph H. Wayne **4/30/85**
 Signature Date



Rodmill Court NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
415 DISTANCE FROM ROAD
 ENTER FT or MI **FT**

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard COUNTY NAME **A30249** COUNTY NO.
 OEP SIGNATURE **Chris William** STATE HEALTH INSERT S
 DATE ISSUED **052085** EXP. DATE
 NORTH GRID **520000** EAST GRID **0785000**

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

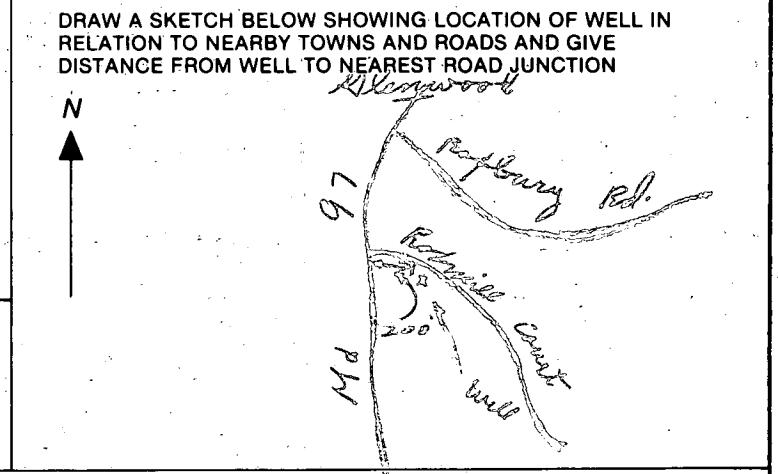
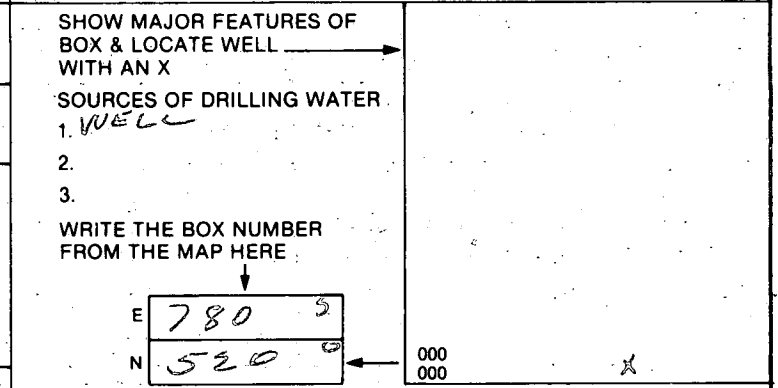
APPROXIMATE DEPTH OF WELL **180** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary DRive-POINT
 other _____

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 DEEPEN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER **GAP**
 FORCE **CU** WRITE INITIALS IN BOX PERMIT No. **HO-81-1020**



SPECIAL CONDITIONS

