

9/18/86 12:00 approved
05-384893 9/18/86 Stayer

PERMIT

P 37455
A 25142

SEWAGE DISPOSAL SYSTEM MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
X892K2330X
461-9933

ELLICOTT CITY
DISTRICT 5th
DATE 8/5/86

INDEXED

Paul Schissler IS PERMITTED TO INSTALL ALTER
ADDRESS 4410 Salembottom Road, Westminster, MD 21157 PHONE 875-4197
SUBDIVISION Allnutt Farm Estates ROAD 13407 Golden Corn Drive LOT 30
PROPERTY OWNER Joseph & Connie Boone
ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 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.

LOCATION - Start the trench 35 feet from the left side line and 125 feet from the front lot line, as seen when facing the lot from Golden Corn Drive. Continue to dig the trench on level ground running towards the right side of the lot. Place the second trench if needed parallel to and 12 feet downslop of the first trench.

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. *ok/cw*

PLANS APPROVED BY Frank Skinner DATE 10/14/85

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.

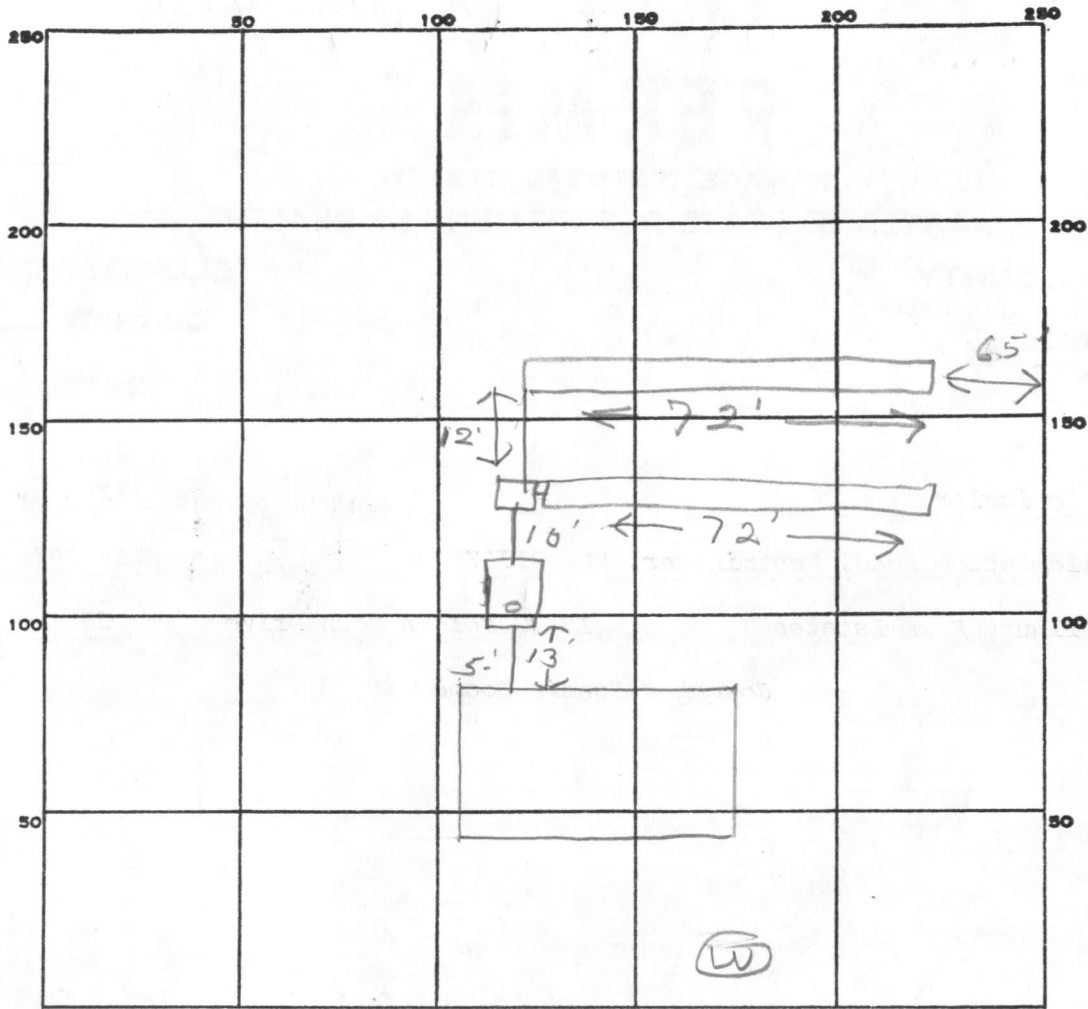
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 25142



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Golden Corn

PERMIT CARD _____

SEPTIC TANK, LEVEL 1500 gal CLEANOUTS ST

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 8 FT. TRENCH WIDTH 2' FT.

GRAVEL DEPTH 5' IN. TOTAL LENGTH 72' 72' FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA 720

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 9/18/86 OK to cover #1 trench jf

9/18/86 OK to cover all work. jf

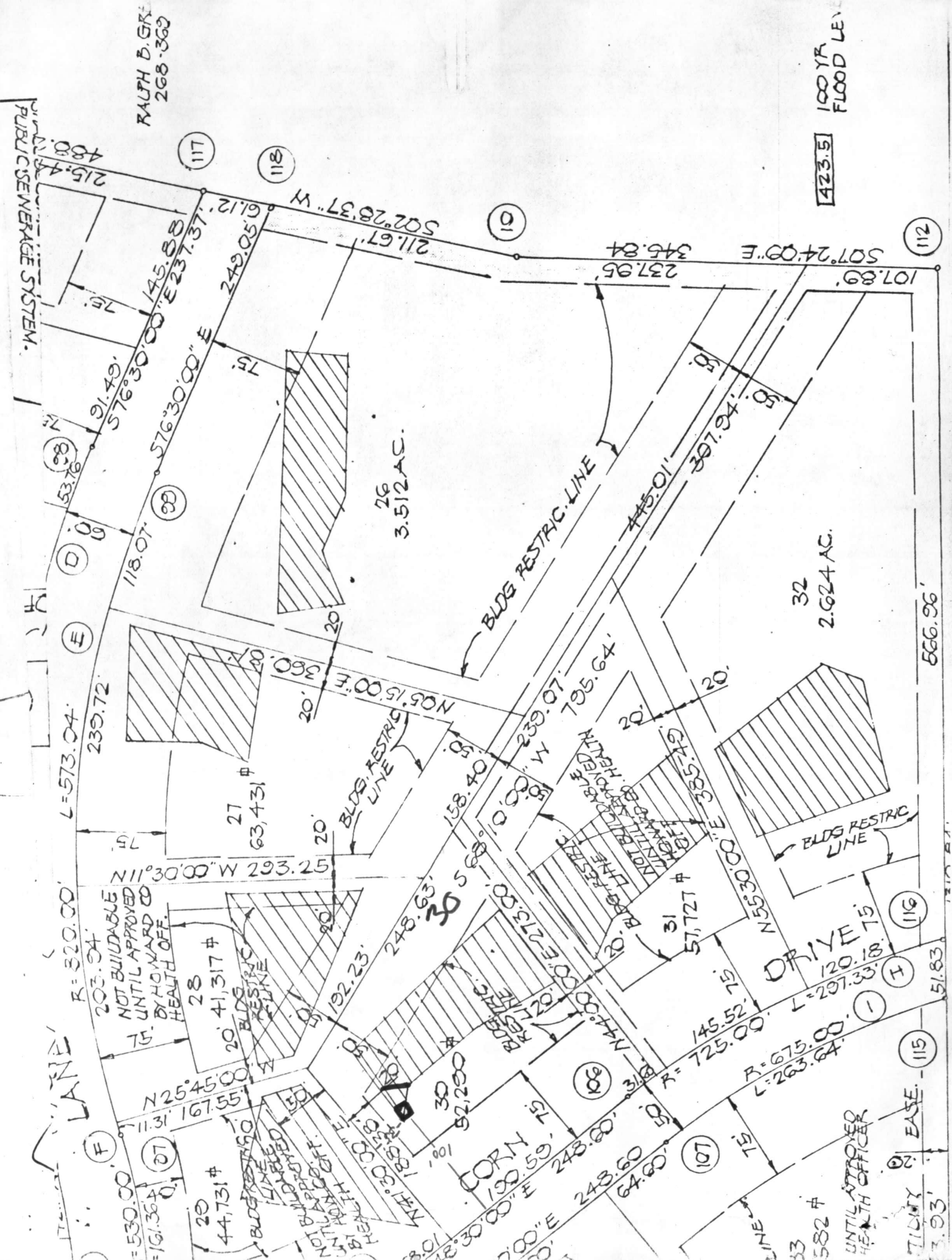
DATE SYSTEM APPROVED 9/18/86 INSPECTOR Stayer

RALPH B. GRE
268-362

100 YR
FLOOD LE

423.5

PUBLIC SEWERAGE SYSTEM



26
3.512 AC.

32
2.624 AC.

28
41,317 #
NOT BUILDABLE
UNTIL APPROVED
BY HOWARD CO
HEALTH OFF.

20
44,731 #
NOT BUILDABLE
UNTIL APPROVED
BY HOWARD CO
HEALTH OFF.

30
92,200 #
CORN

31
57,727 #
NOT BUILT
UNTIL APPROVED
BY HOWARD CO
HEALTH OFF.

DRIVE
120.18' 75'

UNTIL APPROVED
HEALTH OFFICER

3.93' EASE

566.96'

51.83'

117

118

119

112

116

115

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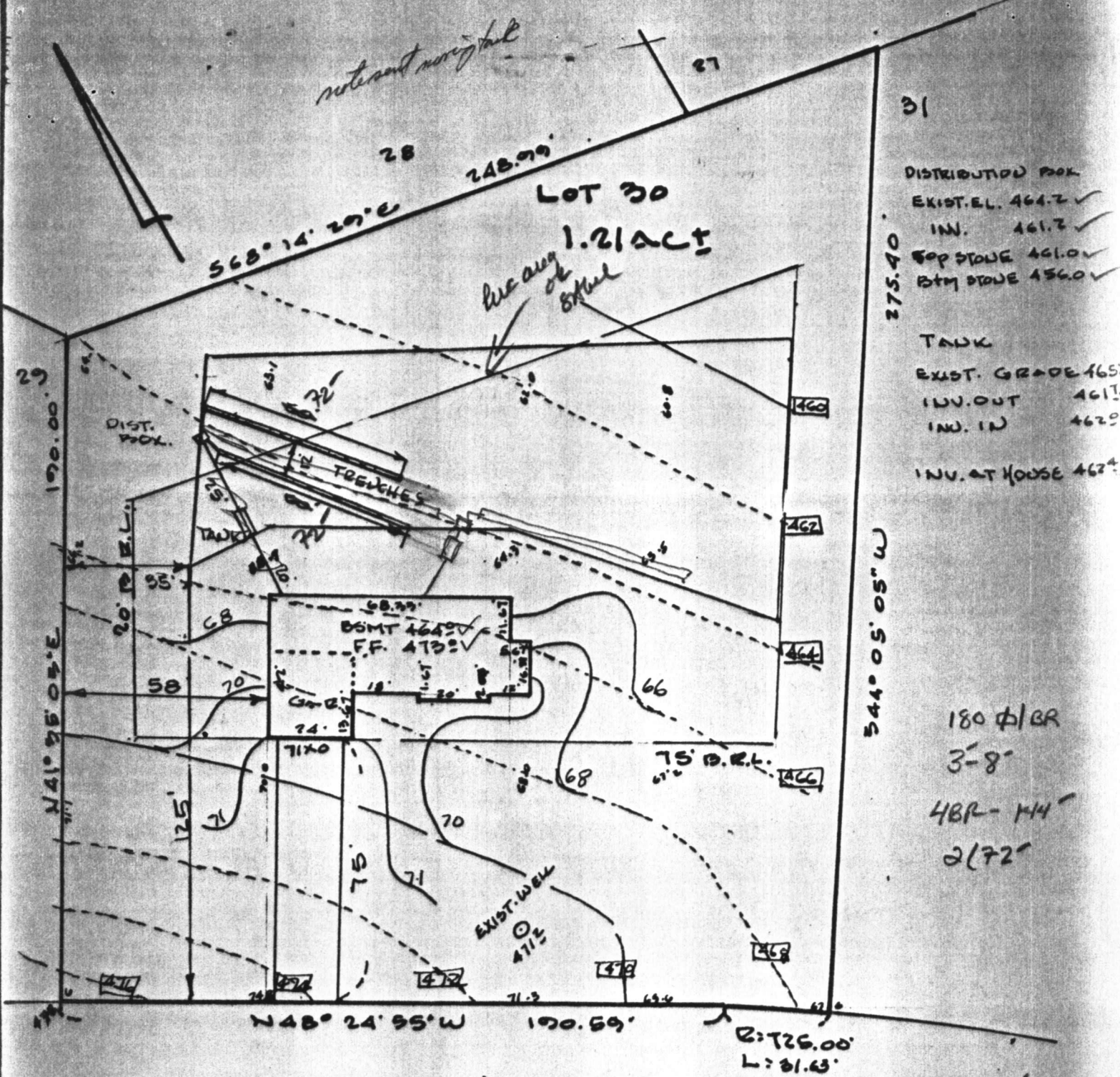
54

53

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51

note about north arrow



31

DISTRIBUTION POOL
 EXIST. EL. 464.2 ✓
 INV. 461.2 ✓
 TOP STONE 461.0 ✓
 BTM STONE 456.0 ✓

TANK
 EXIST. GRADE 465 ✓
 INV. OUT 461 ✓
 INV. IN 462 ✓
 INV. AT HOUSE 462 ✓

375.40

544° 05' 05" W

180 φ / BR
 3'-8"
 4BR - 114"
 2(72")

GOLDEN CORN DRIVE

SITE PLAN

B.P. # 70936
 app 6-17-86

LOT 30 ALLNOTT FARMS ESTATES
 AMENDED PLAT SECTION IV PLAT 4622
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MD
 SCALE 1"=40' MAY 21, 1986

HUDKINS & ASSOCIATES
 231 JOSEPH SQUARE
 COLUMBIA, MD 21044

well/S.A.

APPLICATION

A 25142

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 Fifth

DATE 9/9/76

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 Mr. and Mrs. Smith W. Allnut
13288 Highland Road
ADDRESS Highland, MD 20777 PHONE 988-9303

PROPERTY LOCATION:

SUBDIVISION Hiland Farm Estates LOT NO. 65

ROAD AND DESCRIPTION Road "C"

SIZE OF LOT 1.16 Ac TYPE BLDG. 3 or 4 bedroom
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/ Margaret G. Allnut

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

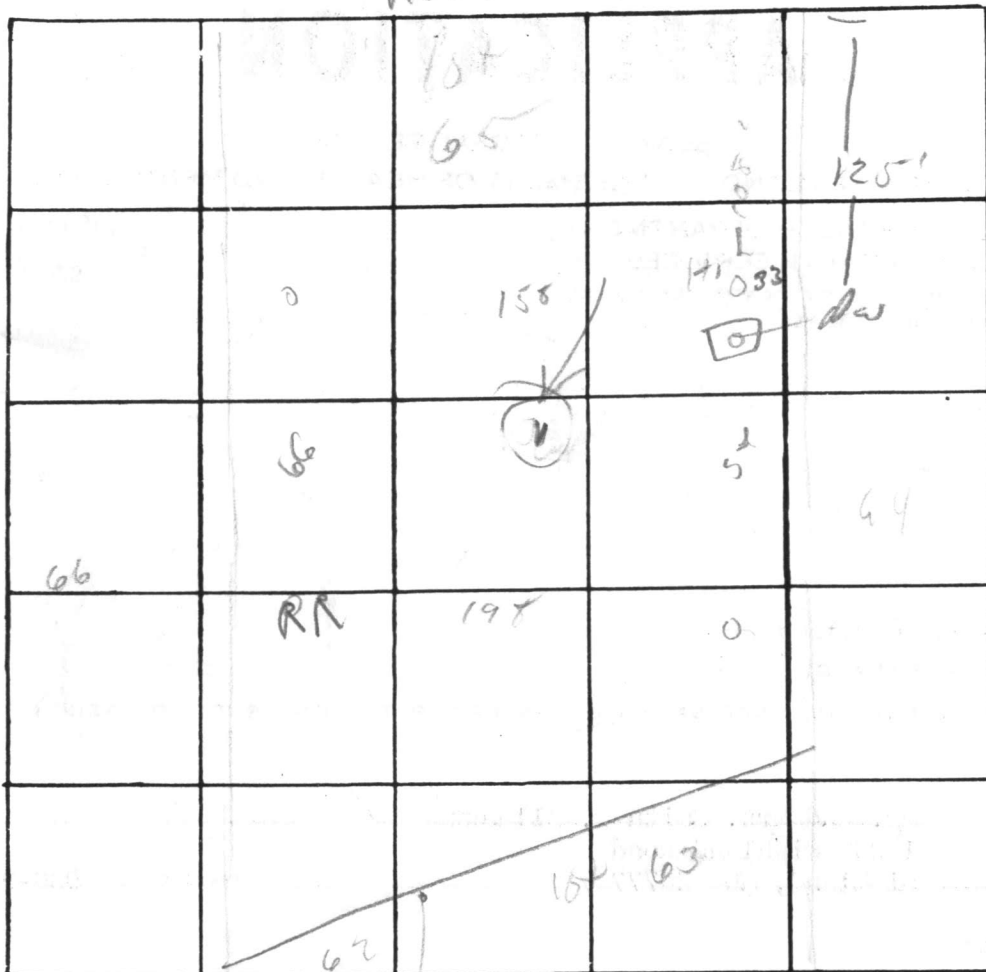
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Road C



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/24/55	RRS	3 1/2'	10 00	10 17	10 19	10 39	19
	d	1 1/2'	10 00	10 05	10 05	10 19	9
	LRs	3'	10 20	10 27	10 27	10 43	16
	a	1/2'	10 23	10 24	10 26	10 31	5
	LFs	3 1/2'	10 32	10 48	10 48	11 02	14
	a	1 2'	10 36	10 36	10 36	10 48	12
	RF	0.3'	4'-10'				
	1 visual	4-12'	Similar to other holes				

REMARKS _____

TYPE OF SOIL _____

TESTED BY PPON ALSO PRESENT: _____

C-1 00867 SEQUENCE NO. (OEP USE ONLY)
 1 2 3 6
 (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-25142

DATE Received
 DATE WELL COMPLETED 031180
 Depth of Well 200 (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-81-1332

OWNER BOONE JOE
 STREET OR RFD GOLDEN CORN DR. first name TOWN HIGHLAND
 SUBDIVISION ALLENUT FARMS ESTATES SECTION 1 LOT 30

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	
Bn Shale	2	40	
mica	40	58	
Bn mica	58	60	✓
mica	60	64	
Bn mica	64	66	✓
mica	66	200	

GROUTING RECORD
 WELL HAS BEEN GROUTED Y N
 TYPE OF GROUTING MATERIAL
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 12 NO. OF POUNDS 1200
 GALLONS OF WATER 60
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 23 ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST CO
 STEEL CONCRETE
 PL OT
 PLASTIC OTHER
 MAIN CASING TYPE 57 Nominal diameter 6 Total depth of main casing 53
 (nearest inch) (nearest foot)

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

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

C 2
 DEPTH (nearest ft.)
 1 H0 57 200
 2
 3
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN (NEAREST INCH)
 from _____ to _____

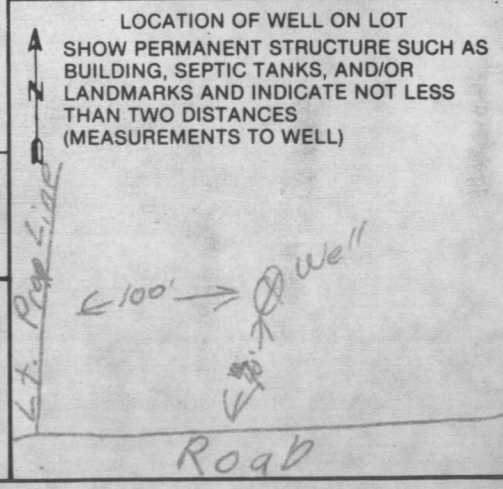
GRAVEL PACK
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) 6
 PUMPING RATE (gal. per min. to nearest gal.) 3
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface) BEFORE PUMPING 25
 WHEN PUMPING 110
 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
 (CIRCLE) (YES or 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)
 + above } LAND SURFACE (nearest foot)
 - below }



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. 40
 DRILLERS SIGNATURE John J. Epstein
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee) Bruce Shomson

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

MAR 13 4 21 PM '86

DIVISION OF
ENVIRONMENTAL
HEALTH

THIS IS A COPY OF THE REPORT OF THE
INSPECTOR OF THE HEALTH DEPARTMENT
AND IS NOT TO BE USED FOR ANY OTHER
PURPOSE. THE REPORT IS THE PROPERTY
OF THE HEALTH DEPARTMENT AND IS
TO BE KEPT IN THE FILES OF THE
HEALTH DEPARTMENT.

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REPORT OF THE INSPECTOR OF THE
HEALTH DEPARTMENT
TO THE BOARD OF HEALTH
ON THE
MATTER OF THE
HEALTH DEPARTMENT

SECTION OF THE
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ON THE
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ON THE
MATTER OF THE
HEALTH DEPARTMENT

Page _____ of _____
Date _____

Monday
3-10-84
Should BE EASY TO GET TO

Review 6-12-86 of 876

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1332
Location of property (road) GOLDEN CORN DR
Subdivision ALNUT FARMS ESTATES Lot 30 Block _____ Plat _____ Sec. _____
Well Driller GEORGE EASTRDAY Owner BOONEY, JOE

Depth of well 200 36pm
Distance of measuring point (M.P.) above ground 2
Static water level (S.W.L.) below M.P. 25

I. High rate pumping -- reservoir drawdown
Time pump started, 8:30 Pumping rate 9 cpm
Total time 30 mins to reach pumping water level 110 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 7/1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
9:15	110	20 SEC.		3
9:30	110	20		3
9:45	110	20		3
10:00	110	20		3
10:15	110	20		3
10:30	110	20		3
10:45	110	20		3
11:00	111	20		3
11:15	111	20		3
11:30	111	20		3
11:45	111	20		3
12:00	111	20		3
12:15	112	20		3
12:30	111	20		3
12:45	110	20		3
1:00	110	20		3
1:15	110	20		3
1:30	110	20		3
1:45	110	20		3
2:00	110	20		3
2:15	110	20		3
2:30	110	20		3
2:45	110	20		3
3:00	110	20		3

Pump SAT AT 180'

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

MAR 13 4 21 PM '86

DIVISION OF
ENVIRONMENTAL
HEALTH

1875
360
221
85
425
15
88

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HOWARD COUNTY
HEALTH DEPT.

JAN 23 3 19 PM '80

DIVISION OF
ENVIRONMENTAL
HEALTH

RECEIVED
L.F. EASTERN, INC.
JAN 21 1985

RECEIVED

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD.

JAN 23 9 11 AM '80