

02-235382

approved 6/13/79

J. Stayer

PERMIT

P 29364

A 25287

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 2nd

DATE 1/3/79

6/13/79

INDEXED

Stephen R. Hannon (Schissler) IS PERMITTED TO INSTALL ALTER

ADDRESS 2416 McKenzie Road, Ellicott City, Md. 21043 PHONE 461-1911

SUBDIVISION HANNON PROPERTY ROAD 2301 McKenzie Road LOT 1

PROPERTY OWNER Stephen R. Hannon
2335 RIDGE TREE COURT

ADDRESS same as above

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

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

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 240 SQ. FT. total sidewall area (12 x 12 dry well)

INLET PIPE 2 - 8 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 10 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN

FACING LOT FROM

Trench to be 80 ft. long. Inlet at 2 to 4 ft. below original grade and maximum depth 10 to 12 ft. below original grade. Locate dry well 448 ft. from south corner (305.54 lot line) and 500 ft. from north end of 305.54 lot line.

PLANS APPROVED BY David J. O'Neill DATE 7/17/78

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

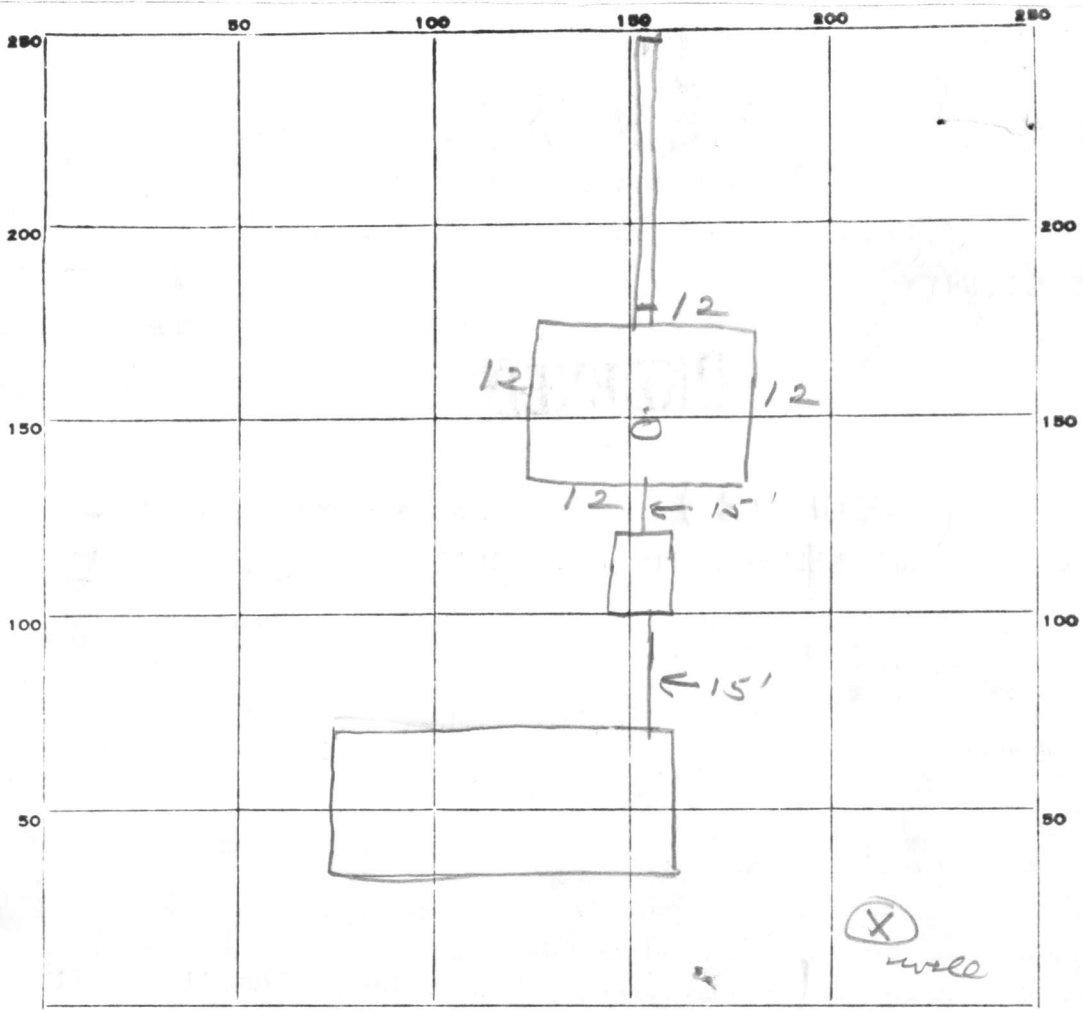
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

A 25287

48
-6
288

85
7
595
288
883



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS

ST	DW
✓	✓

 cast iron

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 11 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 7 IN. TOTAL LENGTH 85 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 595

SEEPAGE PITS, INSIDE DIAMETER 48 FT. DEPTH BELOW INLET 6 FT.

ABSORBENT AREA 883 SQ. FT.

REMARKS 12 June 79 - Little work done - Call. GLK

6/13/79 - OK to cover work to trench - add gravel & pipe js

6/13/79 - OK to cover work js

DATE SYSTEM APPROVED 6/13/79 INSPECTOR J. Stayer

3/8/77
1:30 p.m.

APPLICATION

A 25287

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

140 sq ft / bldg
140 2' max 10' 5' 240 dw
max 10' 5'

DISTRICT 2

DATE 2/25/77

No charge for Retest
12x12 dw, 140 2' max 10' 80' front 140 2'-4"
max 10'-12' 448' From south corner 305.54' lot line
and 50' From north end of 305.54' lot line
1000 gal ST.
9/10/77

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 Stephen R. MRS. PHILIP A. HANNON

ADDRESS 2416 MCKENZIE RD PHONE 465-0778
E. C., Md. 461-1911

PROPERTY LOCATION:

SUBDIVISION NONE LOT NO. NONE

ROAD AND DESCRIPTION 2301
END OF MCKENZIE RD.

SIZE OF LOT 50 ACRES TYPE BLDG. 3 bedrooms
TENANT HOUSE - 3/4
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 Jean O. Hannon

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

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

HOLD PENDING FURTHER TESTS Disc 90' Disc DATE 5/23/78

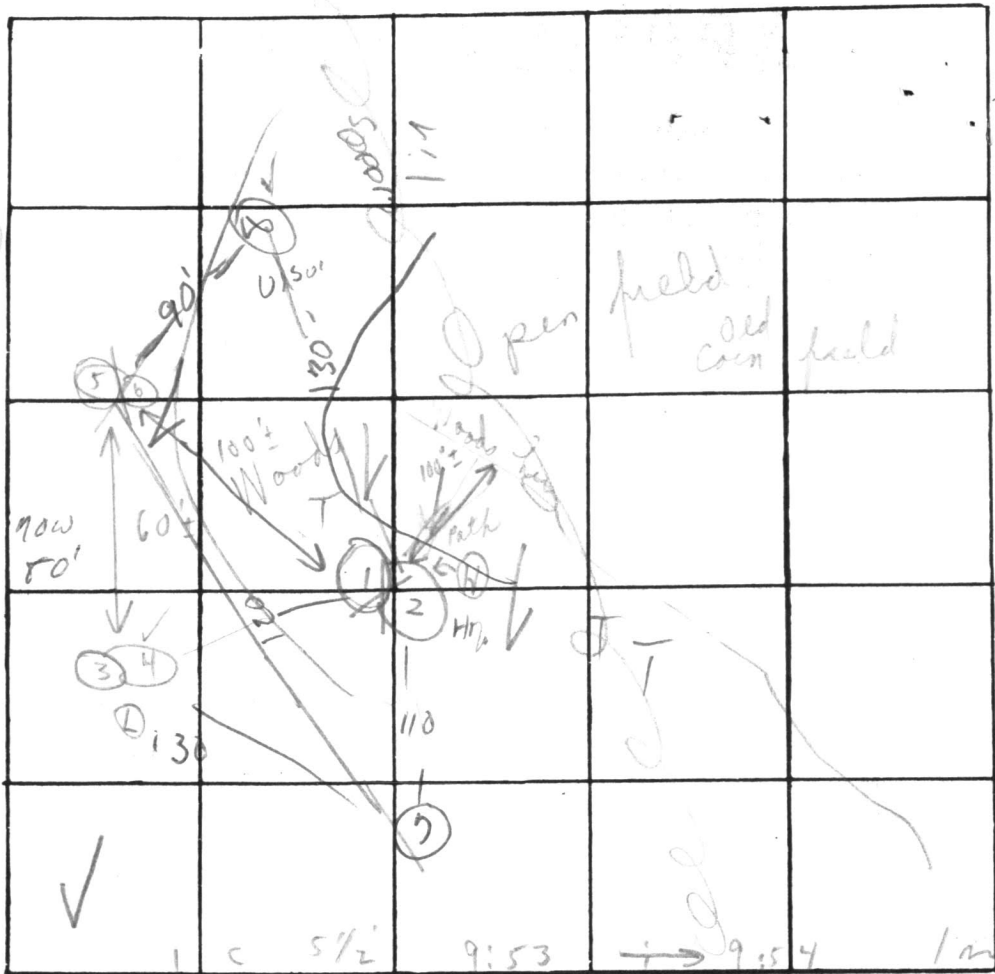
4/25/78 REASONS FOR REJECTION OR HOLDING Test in another area Hold pending
possibility of C.B. d. plat showing location of test holes. Disc C. DSM. 5/23/78 D/M

BLDG. PERMIT SIGNED AND RETURNED 7/18/78

serial # 36327

THIS IS NOT A PERMIT

Field sheet



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

1 B 4 1/2 9:50 9:51 9:51 9:52 1 m

Soil P
Below clay
↓
Loam

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/2/78	(1) A	5'	9:45			9:46	less than 1 min
	(2)	12 1/2'	9:45	9:48	9:48	9:51	3 min
	3	4'	9:55	9:57	9:57	10:00	3 min
	4	13'	9:58	10:02	10:02	10:13	11 min
	(5)	3'	10:04	10:08	10:10	10:11	1 min
	New hole	8'	10:08	10:08	10:09	10:09	1 min
	(7)		Visual		(stopped above 200 feet)		

Runy at 9:49
Sandy + Blue block
Sandy + Blue rock (less than)
(less than)
Rock on bottom of hole

REMARKS

Tested in woods (Hold for supervisor) give memo if get. free area

TYPE OF SOIL

{stopped piece} went to Battery 3 per Mr. Fyock Steve Mannon

TESTED BY

C. B. J

ALSO PRESENT:

J. Fyock + det.

C 1 **3883** SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WI IN 30 DAYS AFTER WELL COMPLET

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) 6/23/78 DEPTH OF WELL 100 PERMIT NO. FROM "PERMIT TO DRILL WELL" 42

DATE WELL COMPLETED 6/23/78 (TO NEAREST FOOT) 22 26

8-13 15 20

DRILLERS IDENTIFICATION NO. 42

OWNER Hannon LAST NAME Steve FIRST NAME

STREET OR RFD Mackenzie Rd POST OFFICE Ellicott City

WELL DESCRIPTION

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Topsoil	0	2	
Mica	2	18	
Schist	18	40	
Clay	40	41	✓
Mica	41	80	
Quartz	80	82	
Mica	82	100	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT M BENTONITE CLAY B

NO. OF BAGS 14 NO. OF POUNDS 1400

GALLONS OF WATER 70

DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 FT. TO 40 FT.

CASING RECORD

CASING TYPES: INSERT APPROPRIATE CODE BELOW

S STEEL C CONCRETE

P PLASTIC O OTHER

MAIN CASING TYPE S T NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 42

OTHER CASING (IF USED)

EACH CASING	DIAMETER (INCH)		DEPTH (FEET)	
	FROM	TO	FROM	TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: INSERT APPROPRIATE CODE BELOW

S STEEL B BRASS OR BRONZE H OPEN HOLE

P PLASTIC O OTHER

SCREEN

C 2 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT) FROM TO

1	<u>H</u>	<u>0</u>	<u>40</u>	<u>100</u>
2				
3				

SLOT SIZE 1, 2, 3,

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) W Q

70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

C 3 (SEQ. NO.) 6

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 20

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 30 (NEAREST FOOT) 17 20

WHEN PUMPING 100 (NEAREST FOOT) 22 25

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

A AIR P PISTON T TURBINE

C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)

J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

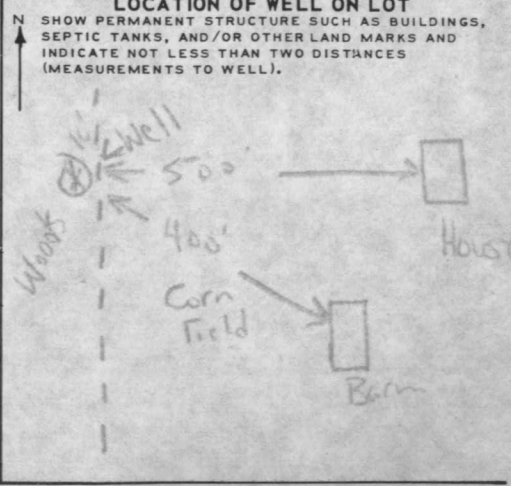
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE } LAND SURFACE

- BELOW } 2 (NEAREST FOOT) 49 50 51



CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME L.F. EASTERDAY

(PLEASE PRINT) L.F. Easterday

SIGNATURE L.F. Easterday

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

AUG 16 9 49 AM '78

DIVISION OF
ENVIRONMENTAL
HEALTH