

SEPTIC SYSTEM TO BE
INSTALLED FIRST BEFORE
BUILDING PERMIT IS SIGNED.

PERMIT

P 25627
A 25512

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 4/14/77

Eugene Riggs

IS PERMITTED TO INSTALL ALTER

ADDRESS 17534 New Hampshire Avenue, Ashton, Md.

PHONE 774-4824

A SEWAGE DISPOSAL SYSTEM LOCATED AT

14038 ← ON MAILBOX

SUBDIVISION 18935? Howard Rd ROAD Howard Road

LOT 4C

1/2 mile past Dayton

PROPERTY OWNER Lawrence E. Weyer, Jr.

ADDRESS 8832 Hunting Lane, Laurel, Md.

Phone: 776-3373

SPECIFICATIONS 3 bedrooms

13F1

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 DRY WELL AND TRENCH - System to have 135 sq. ft. effective sidewall absorption area per bedroom to begin below the first 4 ft. of non-porous soil. Maximum depth permitted for dry well is 11 ft. below original grade. Place the dry well 100 ft. from the rear (438.07 ft. long) lot line and 150 ft. from the left (400 ft. long) side line, as seen when facing the property from Howard Road. Start the trench after a 5 ft. earth buffer with the dry well and proceed to dig it on level ground the necessary distance. NOTE: CALL FOR INSPECTION OF TRENCH BEFORE PLACING GRAVEL IN TRENCH. NOTE: IN NO CASE IS ANY DRY WELL TO 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,

PLANS APPROVED BY Frank Skinner

DATE 4/1/77

CONCRETE OR TERRA COTTA ACCEPTED.

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.

BLDG. PERMIT SIGNED
AND RETURNED 6/15/77

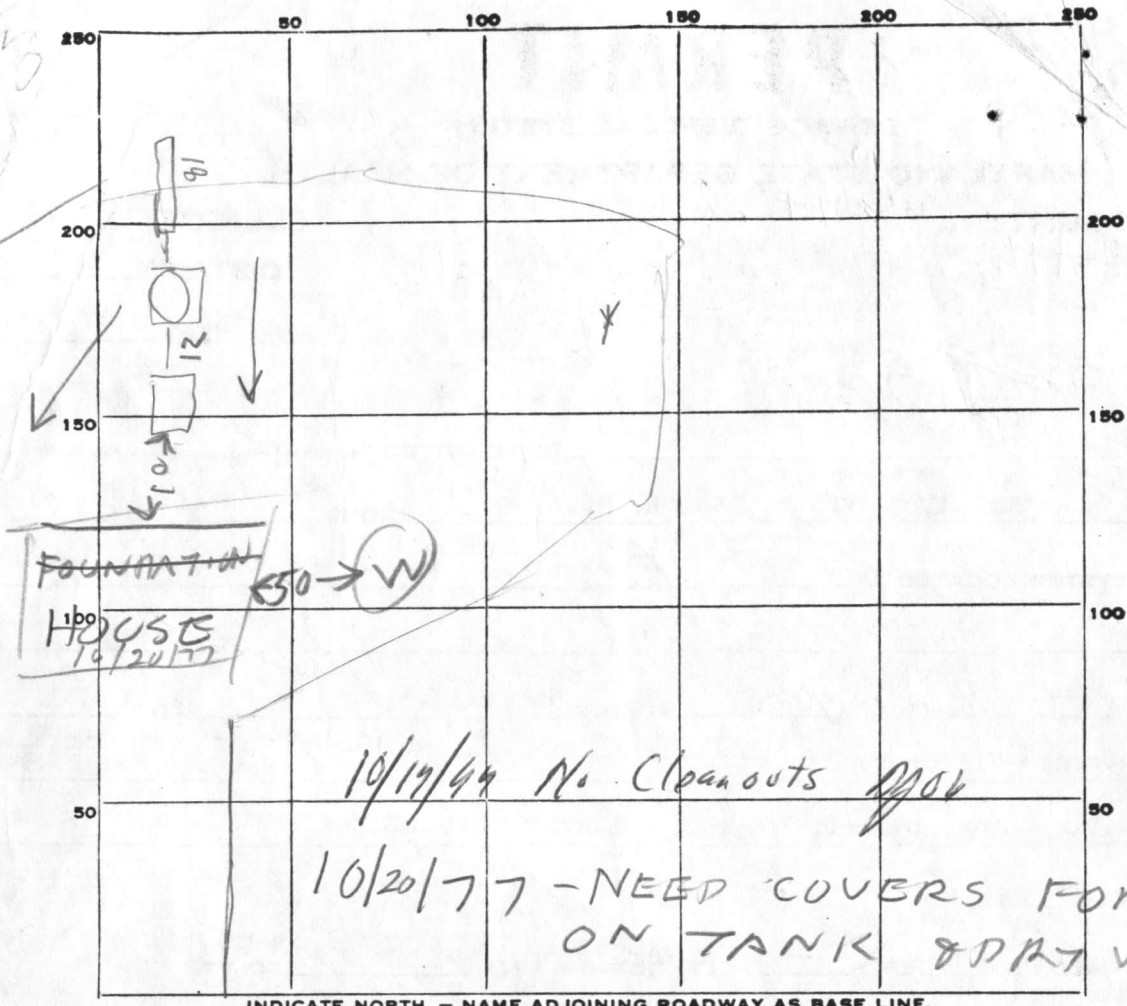
serial no. 31727

A 25512

6/6/77
incomplete 6/8/77
6/7/77
10/17/77
10/20/77
incomplete

well under Riggs
Construction
Bldg. Permit
No. 31727

22
18
- 9
4.0



22
14
50

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS NO _____

DISTRIBUTION BOX, LEVEL NA _____

DITCH
TILE FIELD, DEPTH 13 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 9 FT IN. TOTAL LENGTH 18 FT.

NUMBER OF TRENCHES 1 TOTAL ^{SIDE} BOTTOM AREA 162 ON 57 IN

SEEPAGE PITS, INSIDE DIAMETER 60 FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA 480 SQ. FT.

REMARKS No cleanouts, no pipe, trench too deep no stone in DW, trench does not follow contour

6/6/77 - NO PROGRESS SINCE LAST INSPECTION

DRY WELL INLET & DITCH INLET NOT INSTALLED RAH

FOUNDATION DUG & WELL INSTALLED FINISH JOB RAH

6/20/77 DW INLET 4 FT below ground & DITCH INLET 4 FT SEE BACK OF PLANS FOR NOTES RAH

DATE SYSTEM APPROVED _____

INSPECTOR _____

Need cleanout covers PDB 10 June 77

Retest
4/11/77 1:30 pm

APPLICATION

A 25512

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 3 B.R. 1000 gal. septic tank DISTRICT 5th
ENVIRONMENTAL HEALTH SERVICES 4 B.R. 1250 gal. septic tank DATE 3/30/77
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

Drywell & trench system to provide 135 sq. ft. effective sidewall absorption area per bedroom to begin below the first 4 ft. of nonporous soil. Maximum depth permitted for drywell is 1 ft. below original grade. Place the drywell 100 ft. from the rear (438.07 ft. long) lot line and 150 ft. from the left (400 ft. long) side line, as seen when facing the property from Howard Road. Start the trench after a 5 ft. earth buffer with the drywell, and proceed to dig it on level ground the necessary distance. NOTE: Call for inspection of trench before gravel is installed.

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 Lawrence E. Weyer, Jr.

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4C

ROAD AND DESCRIPTION Howard Road - 1 1/2 miles past Dayton intersection on right hand side of Howard Road.

SIZE OF LOT 400' x 420' x 500' x 200' TYPE BLDG. 3 or 4 bedrooms
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/ Lawrence E. Weyer, Jr.

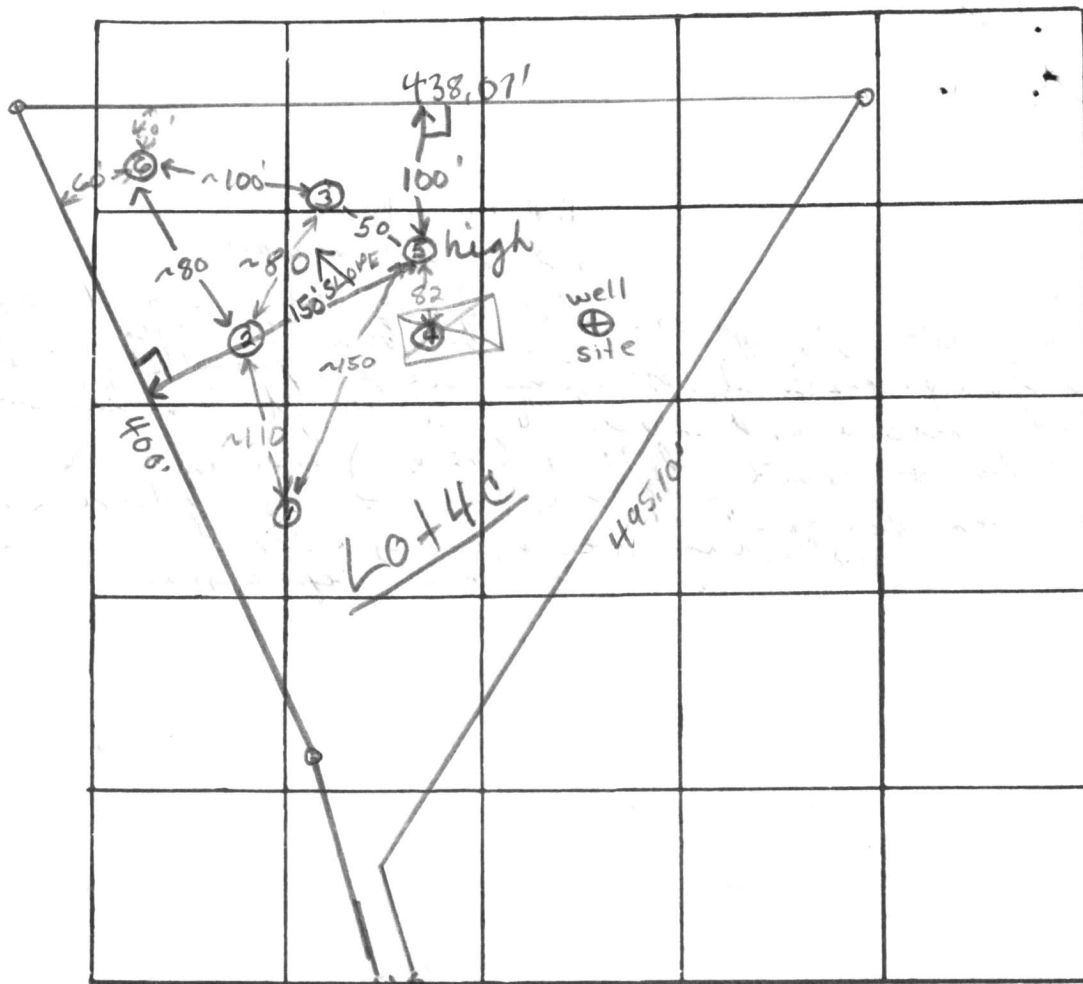
APPROVED BY Frank Skinner FOR Drywell & trench DATE 4/1/77
(KIND OF SYSTEM)

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

To R/w off Howard Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4/1/77	5 high	4 1/2'	1:43	1:46	1:46	1:51	5 min	
	5A	14 1/2'	1:47	1:51	1:51	1:59	8 min	
	6 low	13 1/2'	2:02	pulled pag 2:16 1/2" drop				
	6A	12 1/2'	2:19	2:34	2:34	2:58	24 min	
	6B	13 1/2'	clayey to 4' mica loam below					
	6C	5'	2:33	2:35	2:35	2:39	4 min	

REMARKS ~8' drop between (5) & (6)

TYPE OF SOIL Silty mica loam below top 4' clayey soil

TESTED BY F.S.

ALSO PRESENT: Eugene Riggs & Sam

APPLICATION

A 21136

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICESDISTRICT 2P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356DATE 2/14/75TO: 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 Carter H. WillsonADDRESS 14507 Gilpin Road, Silver Spring, Md. PHONE 774-9698

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4 CROAD AND DESCRIPTION Howard Road - 1½ miles past Dayton intersection on right on
Howard RoadSIZE OF LOT 400' x 420' x 500' x 200' TYPE BLDG. 3 or 4IF NOT SINGLE RESIDENCE DESCRIBE _____
NUMBER OF BEDROOMS
(Single Fmly. Dwllg.)

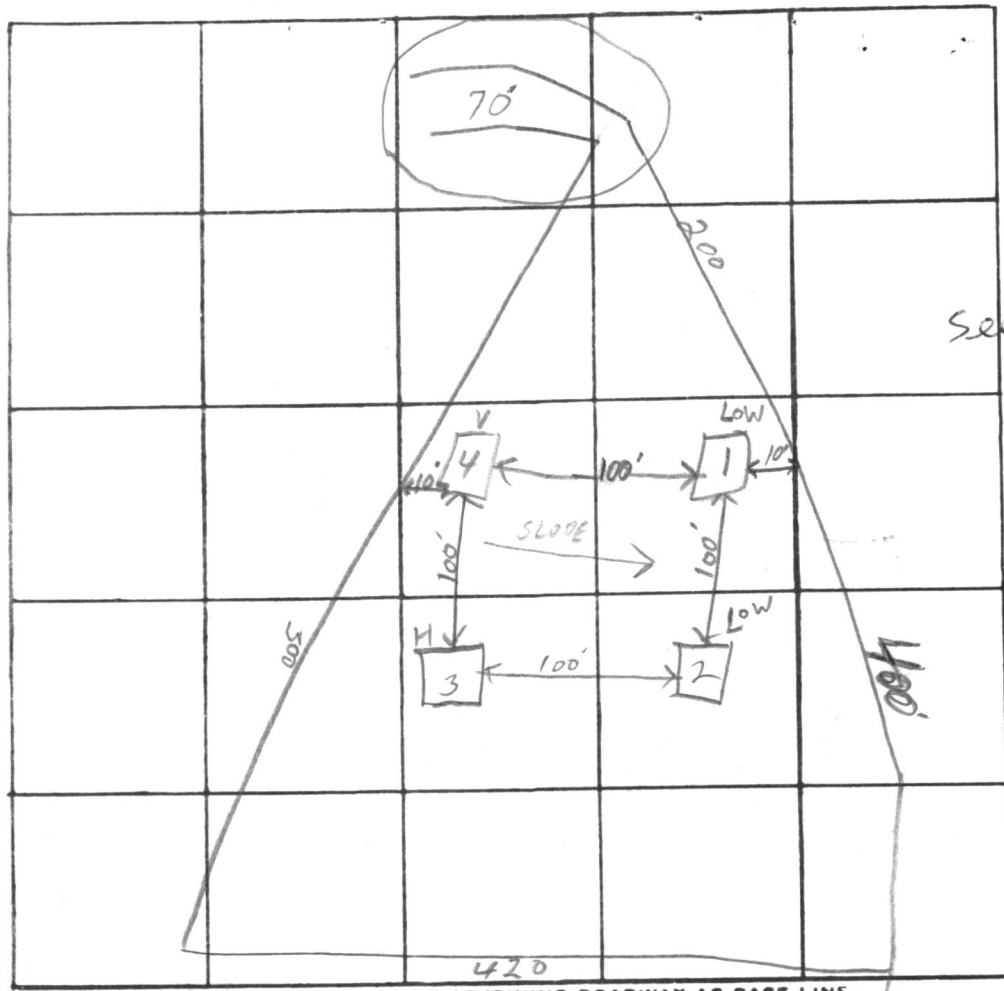
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Edwin WillsonAPPROVED 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

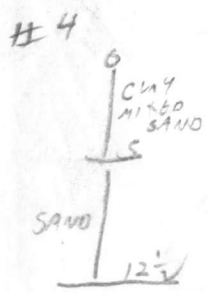
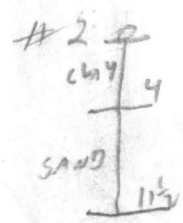
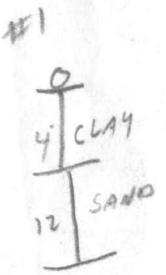


See attached Plot

Lot 4c

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE

RELATIVE ELEVATION

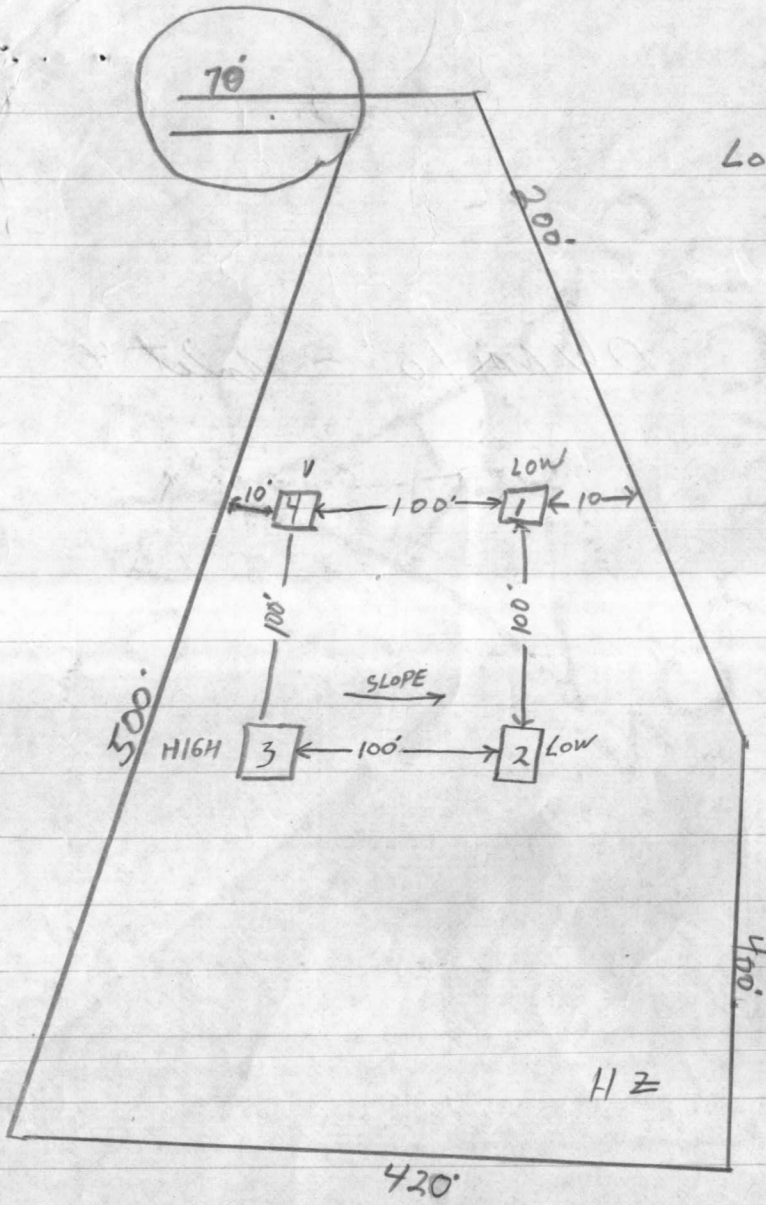


DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
2-25-75	1	12"	1245	1247	1247	1257	10	LOW
	1A	4"	1245	1250	1250	1254	4	
	2	11 1/2"	156	100	100	103	3	LOW
	2A	4"	156	102	102	110	8	7 1/4 IN
	3	12 1/2"	123	125	125	130	5	4 1/2 IN
	3A	5"	123	125	125	137	7	HIGHER
	4	11 1/2"	VISUAL	DRY 6000	SOIL AFTER TOP	3"		1+16-17

REMARKS Correct lot lines from front or back

TYPE OF SOIL Moist depth 5'

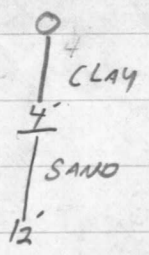
TESTED BY HZ RH ALSO PRESENT: J. F. York



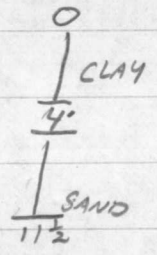
LOT 4-C

7 MIN AVG.
 SUGGEST INLET 4"
 max 10"

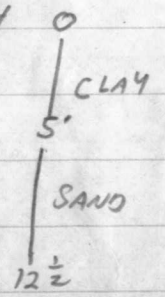
#1



#2



#4

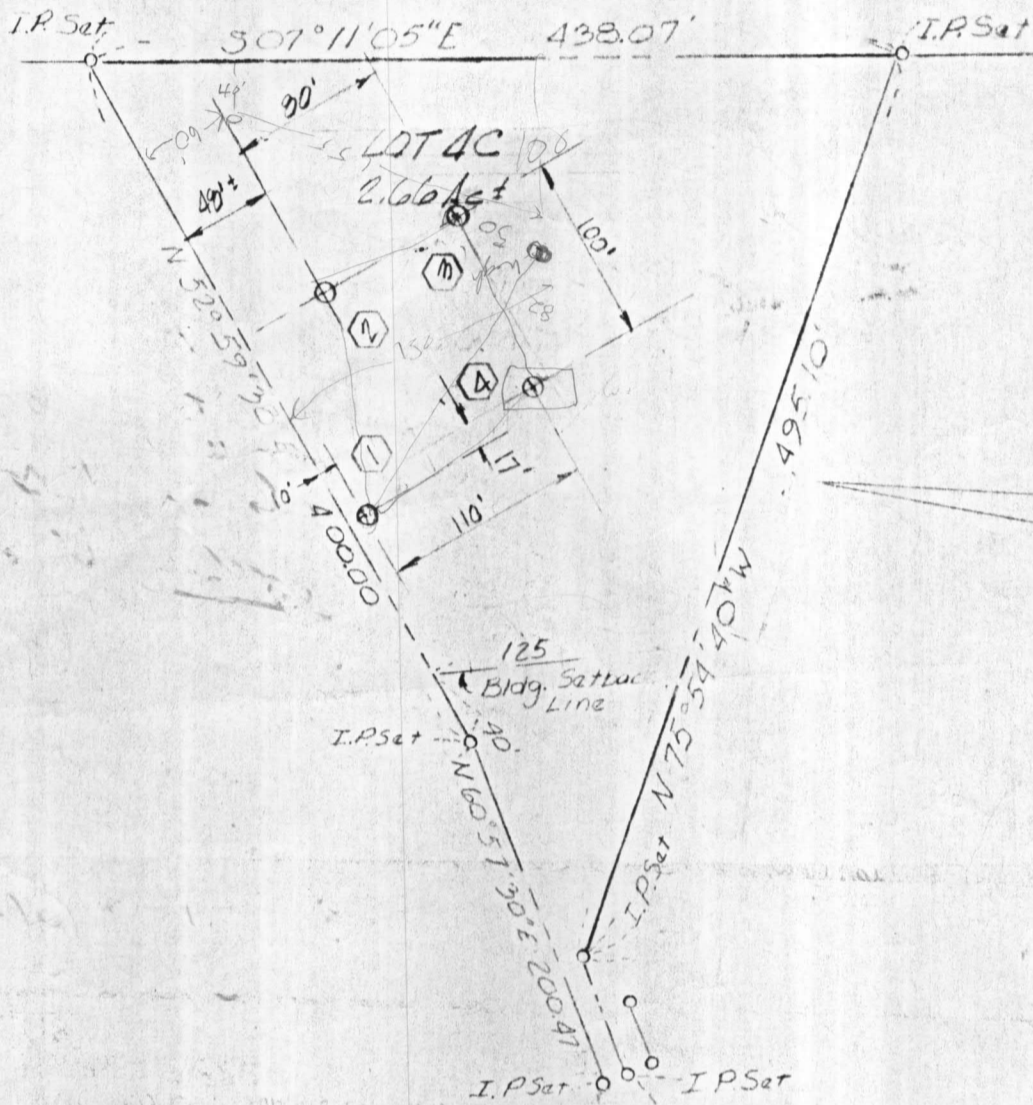


DW MAX 10' - Inlet 4

$$\begin{array}{r} 18 \\ 9 \\ \hline 162 \text{ Inlet} \\ 480 \text{ DW} \\ \hline 642 \text{ Total} \end{array}$$

$$\begin{array}{r} 135 \\ 3 \\ \hline 505 \text{ sq ft req'd} \end{array}$$

Use pit #3 for dry well.



PERC HOLE LOCATION

LOT - 4C

Edwin G. Willson Property
 5th Election Dist. Howard Co, MD.
 Scale: 1"=100' 2-28-75

APPROVED FOR PRIVATE WATER AND PRIVATE SEWER SYSTEMS

Palmer F. Wine 3-18-75
 HOWARD CO. HEALTH OFFICER DATE



NOTE:

The LOTS shown hereon comply with the minimum ownership width and lot area as required by the Maryland State Department of Health Regulations and that the Holes shown hereon are located correctly.

John B. Garry 3/1/75
 JOHN B. GARRY PLS 66 DATE

GARY AND ASSOCIATES INC.

BUILDERS-ENGINEERS-SURVEYORS
 HOLZ BUILDING 616 Old Edmondson Ave.
 Catonsville Maryland 21228
 301-788-2618

Lawrence Weyer, Jr.
9214 Flower Ave.
Silver Spring, Md.
20901

6/8/77 OK to Cover Tank & Dry
well but pipe in ditched layed ¹⁸ wrong
Pipe must be layed with holes
on bottom of pipe & pipe must
be covered with 2" of stone
for protection Re lay pipe
and call for inspection

B 1 8645 SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
(THIS NUMBER IS TO BE PUNCHED IN COLS. 2-6 ON ALL CARDS)

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER
HO-B-2012
FILL IN THIS FORM COMPLETELY

DATE RECEIVED (WRA USE ONLY)
5/18/77
9:30 AM
lat

OWNER: Rings Eugene
COL 15 LAST NAME
OWNER: Lawrence E. Wynn
FIRST NAME
STREET OR RFD: 17534 N. H. ave.
COL 36
POST OFFICE: Ashton, Md.
COL 57
COL 55
COL 76

B 1 CONTINUED DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6
DATE: 4-6-77
LICENSE NUMBER: 42
77 80
FIRST NAME: J F Eshelton
DRILLER
LAST NAME: J F Eshelton
SIGNATURE: J F Eshelton

B 3 LOCATION OF WELL
1 2 3 (SEQ. NO.) 6
COUNTY: Howard
8 (DO NOT ABBREVIATE COUNTY NAME) 21
SUBDIVISION: Edwin & Wilson
23 42
SECTION: C
44 46 LOT: 4
48 50
NEAREST TOWN: DAYTON
52 71
MILES FROM TOWN (ENTER 0 IF IN TOWN): 1
73 76 77 78 MI

B 2 WELL INFORMATION
1 2 3 (SEQ. NO.) 6
MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5
8 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 600
14 20
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 F FARMING, AGRICULTURE, IRRIGATION
 I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.
 M MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL
 P PRIVATE WATER COMPANY }
 T TEST

B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)
1 2 3 (SEQ. NO.) 6
 N NORTH E EAST NE NORTHEAST SE SOUTHEAST
 S SOUTH W WEST NW NORTHWEST SW SOUTHWEST
NEAR WHAT ROAD: TEN OAKS RD.
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): N 32 S 32 E 32 W 32
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 200
34 37 38 39 MI

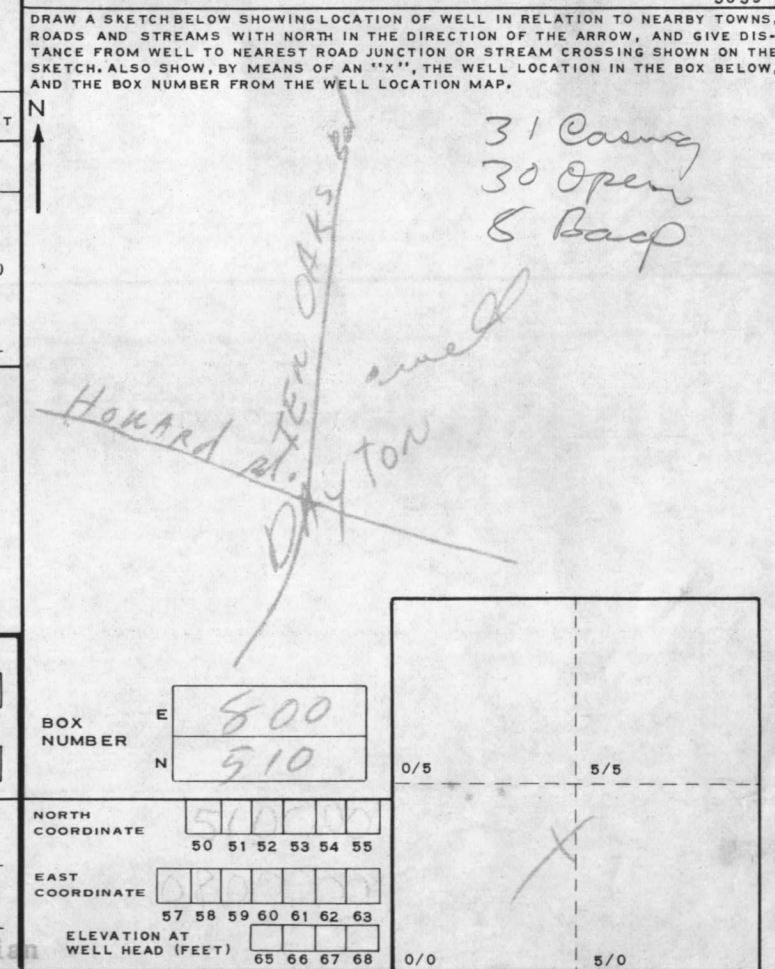
APPROXIMATE DEPTH OF WELL: 150
24 28 FEET
APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)
BORED (OR AUGERED) JETTED DRIVEN
30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY)
CABLE REVERSE-ROTARY DRIVE-POINT
OTHER (DESCRIBE)

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 N THIS WELL WILL NOT REPLACE AN EXISTING WELL
 Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)
41 52

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
APPROPRIATION PERMIT NUMBER: 54
ENGINEER REVIEW DISTRICT NO.: 63
FORCE: 67 68
WRITE INITIALS IN BOX
CONDITIONS: A E N S G W Q C L U
70 71 72 73 74 75 76 77 78 79

B 4 CONTINUED HEALTH DEPARTMENT APPROVAL
1 2 3 (SEQ. NO.) 6
41 S STATE HEALTH (CIRCLE BOX)
COUNTY NAME: Howard COUNTY NO.: W25617
DATE: 04 12 77
APPROVED BY: Donald W. Monaghan, Sanitarian



B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6

C **8883** 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 WITHIN 30 DAYS AFTER WELL COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) _____

DATE WELL COMPLETED 5/17/77

DEPTH OF WELL 120 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" HC-19-0078

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 42

OWNER RIGGS EUGENE LAST NAME FIRST NAME

STREET OR RFD 17534 NEW HAMPSHIRE AVE. POST OFFICE HSHTON, MD 20702

WELL LOG

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	
<u>Top Soil</u>	<u>0</u>	<u>2</u>	
<u>Slaty Sandstone</u>	<u>2</u>	<u>25</u>	
<u>lca</u>	<u>25</u>	<u>90</u>	<input checked="" type="checkbox"/>
	<u>90</u>	<u>120</u>	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT BENTONITE CLAY

NO. OF BAGS 4 NO. OF POUNDS 800

GALLONS OF WATER 40

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 30 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL CONCRETE

PLASTIC OTHER

MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 31

OTHER CASING (IF USED)

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

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL BRASS OR BRONZE OPEN HOLE

PLASTIC OTHER

SCREEN

C 2 (SEQ. NO.)

EACH SCREEN	DEPTH (NEAREST WHOLE FOOT)	
	FROM	TO
1	<u>40</u>	<u>120</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

HOURS PUMPED (TO NEAREST HOUR) 3

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 15

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 25 (NEAREST FOOT)

WHEN PUMPING 120 (NEAREST FOOT)

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

AIR PISTON TURBINE

CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)

JET SUBMERSIBLE

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

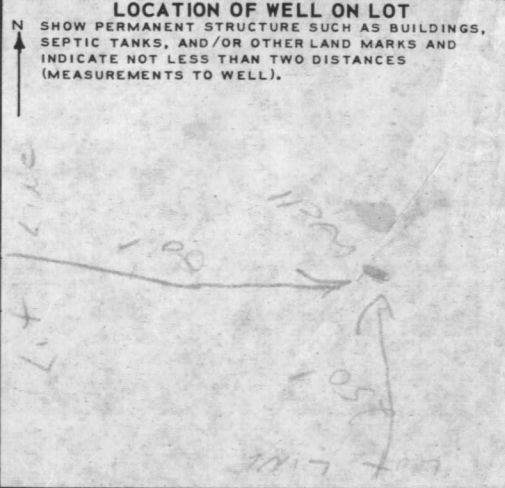
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE } LAND SURFACE (NEAREST FOOT) 49 50 51

BELOW }



CIRCLE APPROPRIATE BOXES

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

(PLEASE PRINT) L.F. Easterday

SIGNATURE L.F. Easterday

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

APR 12 10 21 AM '77

DIVISION OF
ENVIRONMENTAL
HEALTH