

3
11/22/78
trench trip - please

File

PERMIT

P 29013 ✓
A 26378

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

11/20/78

11/22/78

DATE 10/13/78

INDEXED

05-383137

Mitchell-Wiley

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE _____

SUBDIVISION Hallmark 7346 ROAD Hallmark Road LOT 36

PROPERTY OWNER Ward Ebert
Mikoloso off Johns Hopkins Rd

ADDRESS _____

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

1912

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

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

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA 120 SQ. FT. per bedroom. Total in dry well 264 sq. ft.

INLET PIPE 3 1/2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 9 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

Locate dry well 125 ft. from Hallmark Road and 10 ft. from left (lot 37) lot line.

Trench to be 60 ft. long with inlet 2 ft. and maximum depth 9 ft. Start trench

around 143 ft. from left lot line and 10 ft. from line, run towards right.

NOTE 480 SQ FT SIDEWALL AREA

PLANS APPROVED BY David O'Neill DATE 12/1/77

COVER NO WORK UNTIL INSPECTED AND APPROVED. 264 IN NW & 216 SQ FT

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. FOR TRENCH

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

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

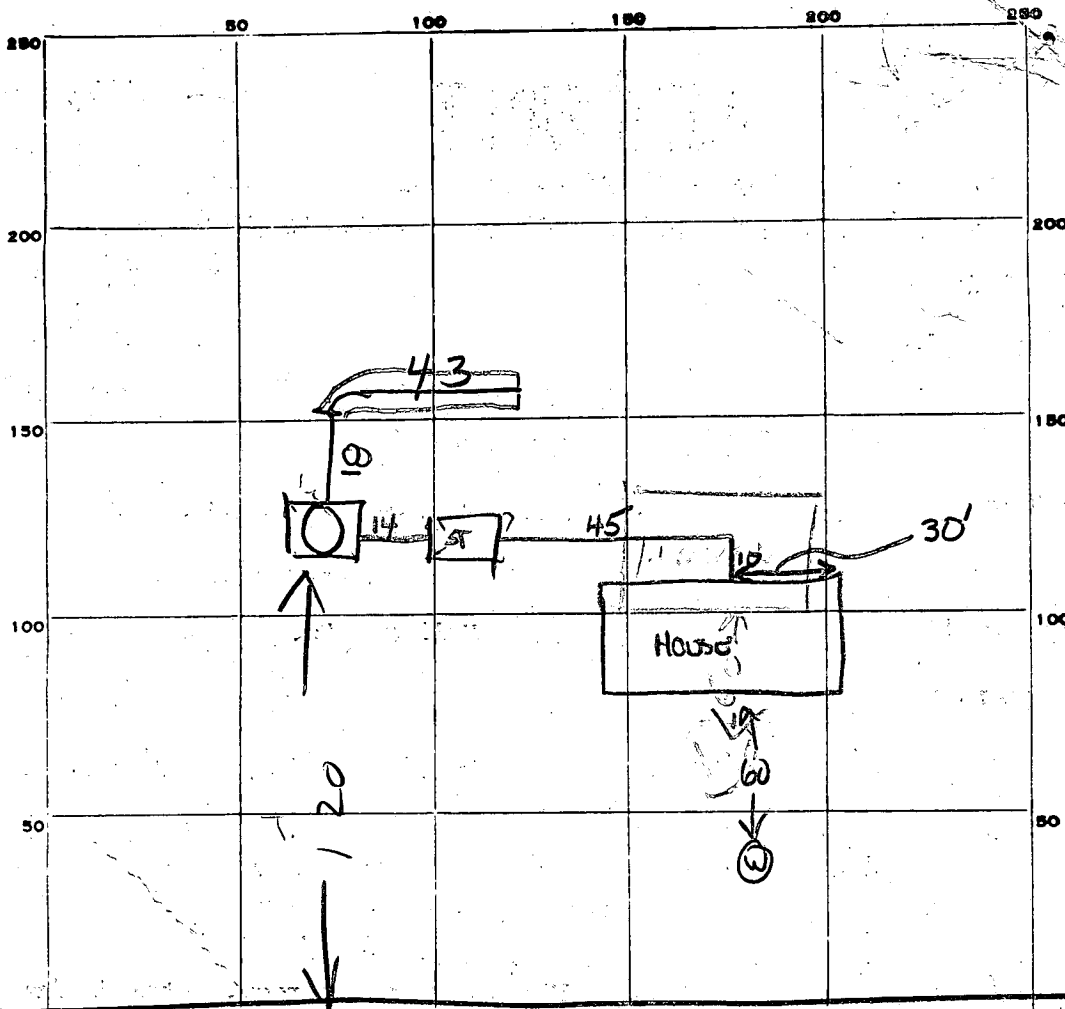
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 8 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRAZO ACCEPTED.

INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

BLDG. PERMIT SIGNED AND RETURNED 4/25/84
Serial # 58586
check

A 26378



$$\begin{array}{r} 44 \\ 13 \\ \hline 57 \end{array}$$

$$\begin{array}{r} 43 \\ 76 \\ \hline 258 \end{array}$$

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD Now 11/20 11/24/78 as at S. Tank of
cleanout
 SEPTIC TANK, LEVEL OK 1250 CLEANOUTS terra ST DW HOUSE SEWER
collar OK OK

DISTRIBUTION BOX, LEVEL _____
RTU
 TILE FIELD, DEPTH 9-10 FT. TRENCH WIDTH 2 FT.
3 1/2 → 9 1/2 GRVEL DEPTH 6' TOTAL LENGTH 43 FT.
 NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 258
 SEEPAGE PITS, INSIDE DIAMETER 49 FT. DEPTH BELOW INLET 5 FT. 245
 ABSORBENT AREA ±503 SQ. FT. 503

REMARKS 11/3/78 ADD STONE TO DITCH & DW
INSTALL CLEANOUTS & SEWERS &
CALL FOR INSPECTION RT
20 Nov. 78 - OK to backfill from septic tank to trench. Cast iron
cleanout will be needed on house sewer at 90° bend. Call when
installed (GLK) 11/24/78 cast iron cleanout installed.

DATE SYSTEM APPROVED 11/24/78 INSPECTOR C. B. [Signature] C.P.D.
above

APPLICATION

A 26378

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE JUNE 28, 1977

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 JOHN MIKOLASKO

ADDRESS 2205 FOXLEY ROAD PHONE 252-3478
TIMONIUM, MD, 21093

PROPERTY LOCATION:
SUBDIVISION HALL MARK SECTION 2 LOT NO. 35

ROAD AND DESCRIPTION HALL MARK ROAD

SIZE OF LOT 1 ACRE (±) TYPE BLDG. 3 OR 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 JOHN MIKOLASKO by James L. Keuborn

APPROVED BY David J. O'Neill FOR DW Turner DATE 12/1/77
(KIND OF SYSTEM)

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

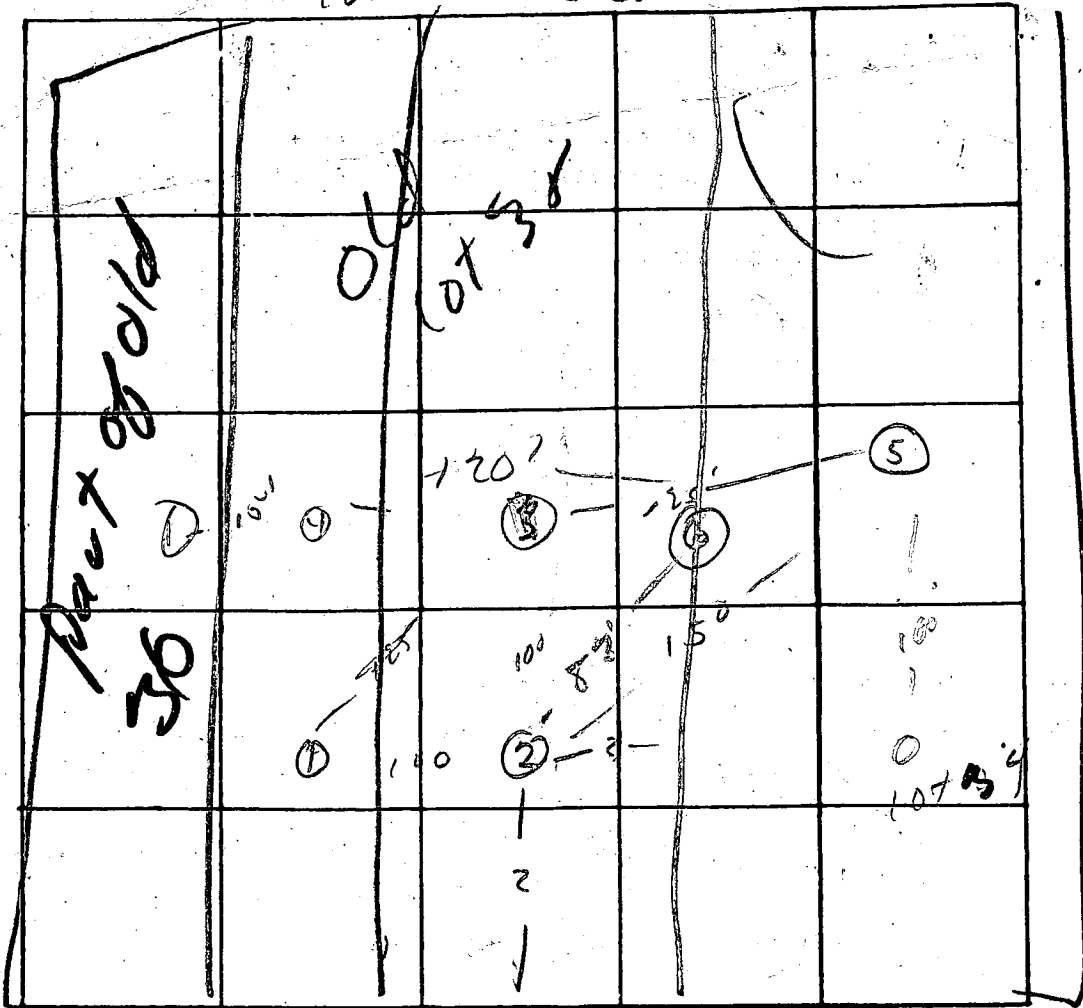
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 9/13/78
serial # 37107

THIS IS NOT A PERMIT

lot 35 36



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/26	2/2	4	3:22	3:24	3:21	3:30	6
		12	3:24	3:29	3:29	5:34	5
	1. vis	OK 3 1/4 - 13'					
	5	Rock	4'				
	6 good.	3	2:58	3:00	3:00	3:02	2
		121	2:58	3:06	OK 1/2 m.		
	4 vis	OK 4 - 12					
		test	1 adjacent lot				

3 1/2
xi

See
over
lot 36.

REMARKS _____

TYPE OF SOIL _____

TESTED BY J.P. ALSO PRESENT: C.V.O.

APPLICATION

A 26366

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE JUNE 28, 1977

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 JOHN MIKOLASKO

ADDRESS 2205 FOXLEY ROAD PHONE 252-3478

PROPERTY LOCATION: TIMONIUM, MD, 21093

SUBDIVISION HALL MARK SECTION 2 LOT NO. ~~25~~ 36

ROAD AND DESCRIPTION HALL MARK ROAD

SIZE OF LOT 1 ACRE (±) TYPE BLDG. 3 OR 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 JOHN MIKOLASKO by James L. Neubauer

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

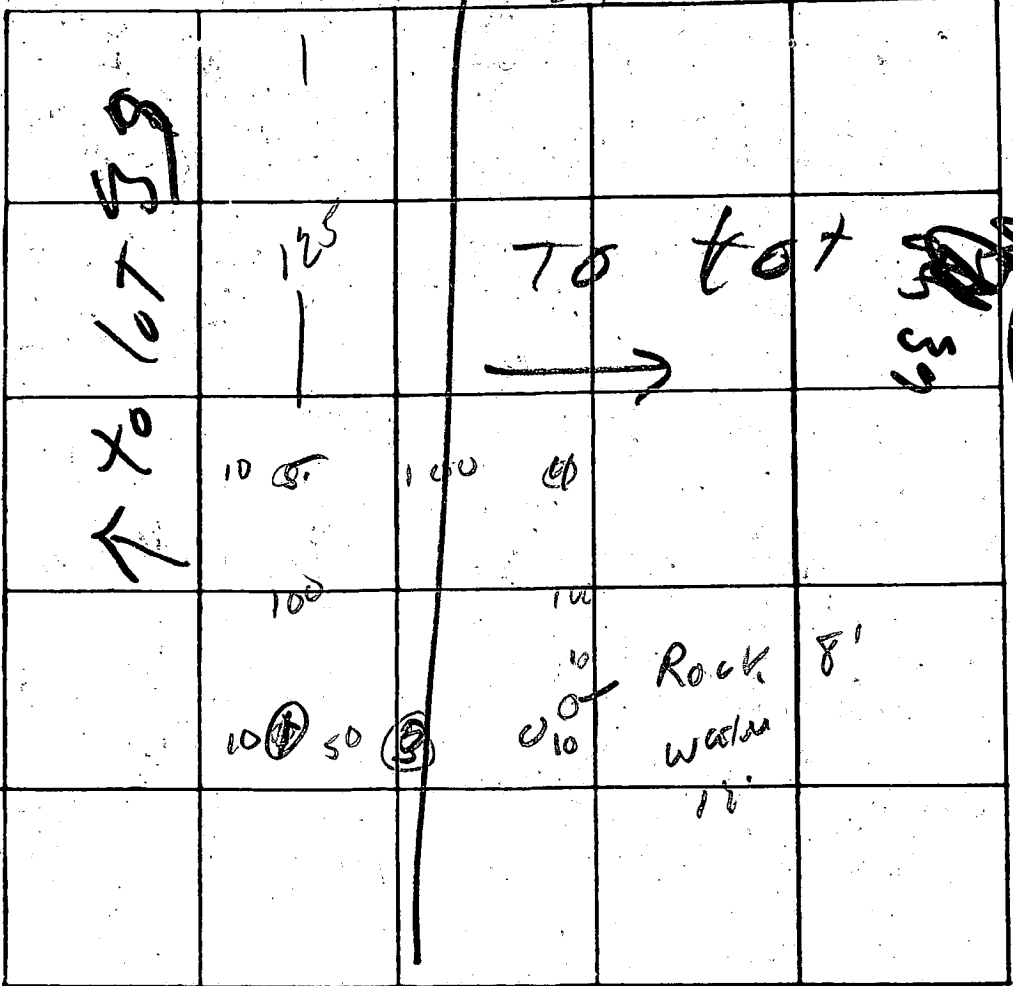
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Roady ~~35~~ ~~35~~ ~~35~~



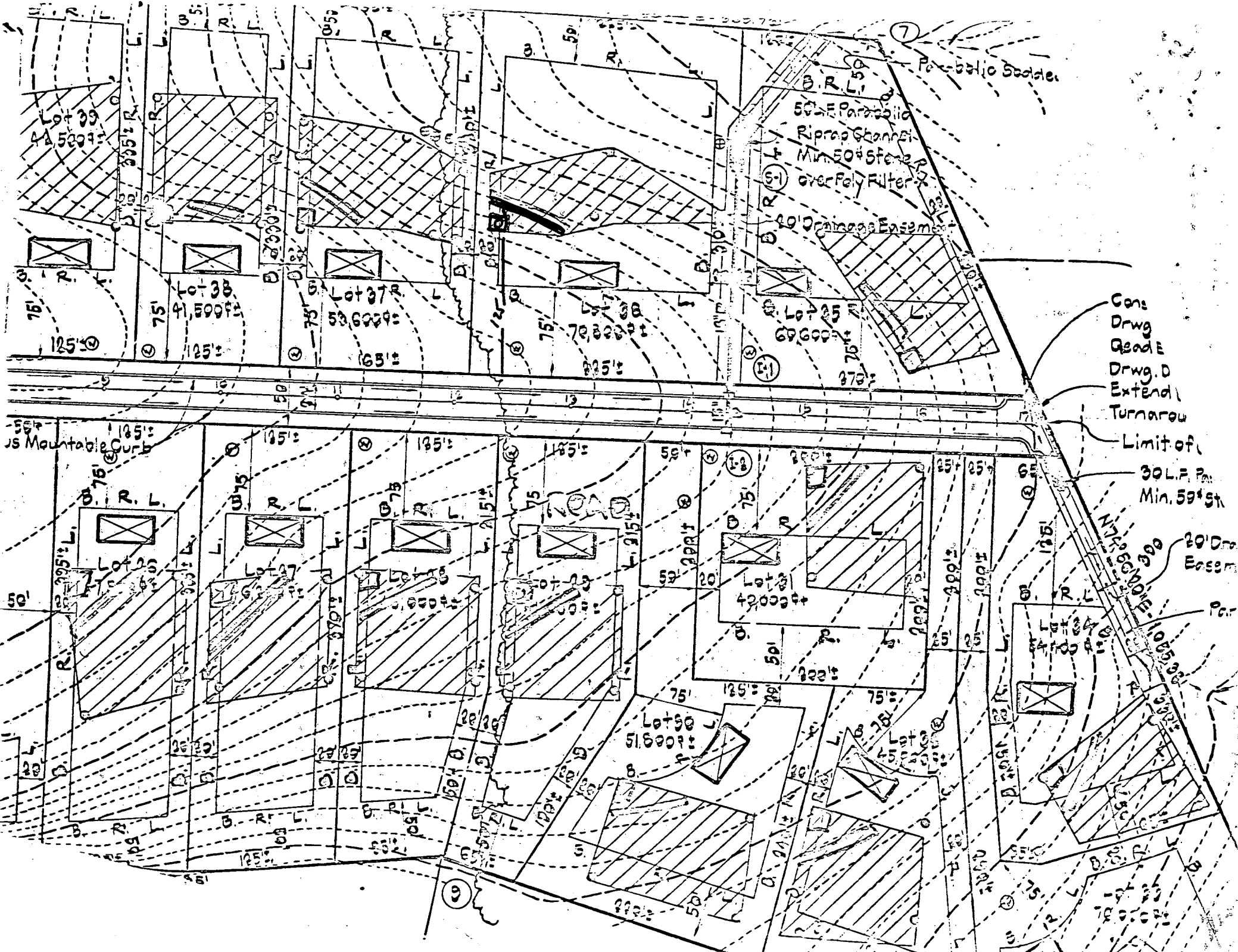
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/28	15	3'	245	250	250	259	9
	2	12'	245	249	249	259	10
	35	3'	249	254	254	304	10
	4	11'	254	256	254	304	8
	4 uc ok	3-12'					
	5	3 1/2'	254	258	258	301	3
		12'	256	258	258	302	4

REMARKS To be combined with 35T 39

TYPE OF SOIL _____

TESTED BY DJ04 ALSO PRESENT: Crowd



7
Parabolic Saddle

50' Parabolic
Riprap Channel
Min. 50' Stone
over Fly Filter

20' Drainage Easement

Cons.
Drwg.
Grade
Drwg. D.
Extend.
Turnarow

Limit of
30' L.P. Par.
Min. 50' St.

20' Drw
Easem.

Lot 39
41,500 sq ft

Lot 38
41,500 sq ft

Lot 37
53,600 sq ft

Lot 36
70,000 sq ft

Lot 35
69,600 sq ft

Lot 34
42,000 sq ft

Lot 30
51,600 sq ft

Lot 24
10,000 sq ft

Lot 23
10,000 sq ft

Lot 22
10,000 sq ft

Lot 21
10,000 sq ft

Lot 20
10,000 sq ft

Lot 19
10,000 sq ft

Lot 18
10,000 sq ft

Lot 17
10,000 sq ft

Lot 16
10,000 sq ft

Lot 15
10,000 sq ft

Lot 14
10,000 sq ft

Lot 13
10,000 sq ft

Lot 12
10,000 sq ft

Lot 11
10,000 sq ft

Lot 10
10,000 sq ft

Lot 9
10,000 sq ft

Lot 8
10,000 sq ft

Lot 7
10,000 sq ft

Lot 6
10,000 sq ft

Lot 5
10,000 sq ft

Lot 4
10,000 sq ft

Lot 3
10,000 sq ft

Lot 2
10,000 sq ft

Lot 1
10,000 sq ft

STATE OF MARYLAND

WATER RESOURCES ADMINISTRATION

TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

HO-73-2716

FILL IN THIS FORM COMPLETELY

B 1 1922 SEQUENCE NO. (WRA USE ONLY)
1 2 3 (SEQ. NO.) 6
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

DATE RECEIVED (WRA USE ONLY)
5/4/78
1:30 P.M.

OWNER: Brantley Management Corporation
COL 15 LAST NAME FIRST NAME COL 34
STREET OR RFD: 218 Hawkins Building
COL 36 COL 55
POST OFFICE: Columbia Md.
COL 57 COL 76

B 1 CONTINUED DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6
DATE: Apr 6, 1978 LICENSE NUMBER: 238
77 80
FIRST NAME: Joseph L. Mayne DRILLER LAST NAME
SIGNATURE: Joseph L. Mayne

B 3 LOCATION OF WELL
1 2 3 (SEQ. NO.) 6
COUNTY: Howard (DO NOT ABBREVIATE COUNTY NAME) 21
SUBDIVISION: Hall Mark
23 42
SECTION: D LOT: 36
44 48 50
NEAREST TOWN: Fulton
52 71
MILES FROM TOWN (ENTER 0 IF IN TOWN): 2 1/2 MI 76 77 78

B 2 WELL INFORMATION
1 2 3 (SEQ. NO.) 6
MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 5
8
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 750
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: Hall Mark Rd
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): W
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 25 FT 34 37 38 39

APPROXIMATE DEPTH OF WELL: 200 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 DEEPEINED 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 DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)
APPROPRIATION PERMIT NUMBER: 54 ENGINEER REVIEW DISTRICT NO.: 63
FORCE: WRITE INITIALS IN BOX CONDITIONS: A E N S G W Q C 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.: W27790
DATE: 04 12 78 APPROVED BY: Donald W. Monaghan, Sanitarian

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.
Sketch showing location of well in relation to John Hopton Rd and Hall Mark Rd. Includes handwritten notes: 66' casing, 2' above ground, 60' open hole, 21 bags cement, 5/4/78, 750.
Well location map showing a grid with 'X' at intersection of Box 820 (E) and 480 (N).
NORTH COORDINATE: 485000 (50 51 52 53 54 55)
EAST COORDINATE: 0805000 (57 58 59 60 61 62 63)
ELEVATION AT WELL HEAD (FEET): 65 66 67 68

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

A 263 78

C 1 9871 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 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) March 1978 DEPTH OF WELL 300 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-2716

DATE WELL COMPLETED 15 20 22 (TO NEAREST FOOT) 26

8-13 15 20 DRILLERS IDENTIFICATION NO. 934

OWNER Board of Members of the Corps FIRST NAME

STREET OR RFD 215 - 7 - ... Building POST OFFICE ...

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>Sand</u>	<u>0</u>	<u>63</u>	
<u>May muck & silt</u>	<u>63</u>	<u>300</u>	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT C M B C BENTONITE CLAY

NO. OF BAGS 21 NO. OF POUNDS 1974

GALLONS OF WATER 126

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 62 FT.

CASING RECORD

CASING TYPES (INSERT APPROPRIATE CODE BELOW)

S STEEL C CONCRETE

P PLASTIC O OTHER

MAIN CASING TYPE S NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 60 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 60

OTHER CASING (IF USED)

C A S I N G	DIAMETER (INCH)	DEPTH (FEET)	
		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

C 2

1 2 3 (SEQ. NO.) 6

DEPTH (NEAREST WHOLE FOOT)

E A C H S C R E E N	FROM		TO	
	8	9	11	17
1	<u>12</u>	<u>15</u>	<u>15</u>	<u>21</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 OTHER DATA AVAILABLE

C 3

1 2 3 (SEQ. NO.) 6

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 2

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING (NEAREST FOOT)

WHEN PUMPING (NEAREST FOOT)

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)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) Y N

CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON)

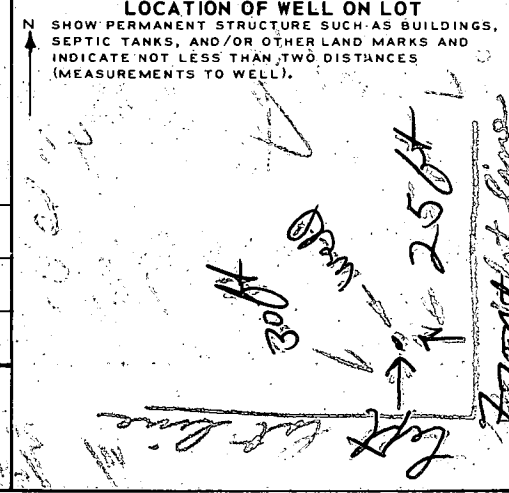
PUMP HORSE POWER

PUMP COLUMN LENGTH (NEAREST FOOT)

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE } LAND SURFACE (NEAREST FOOT)

- BELOW } (NEAREST FOOT)



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

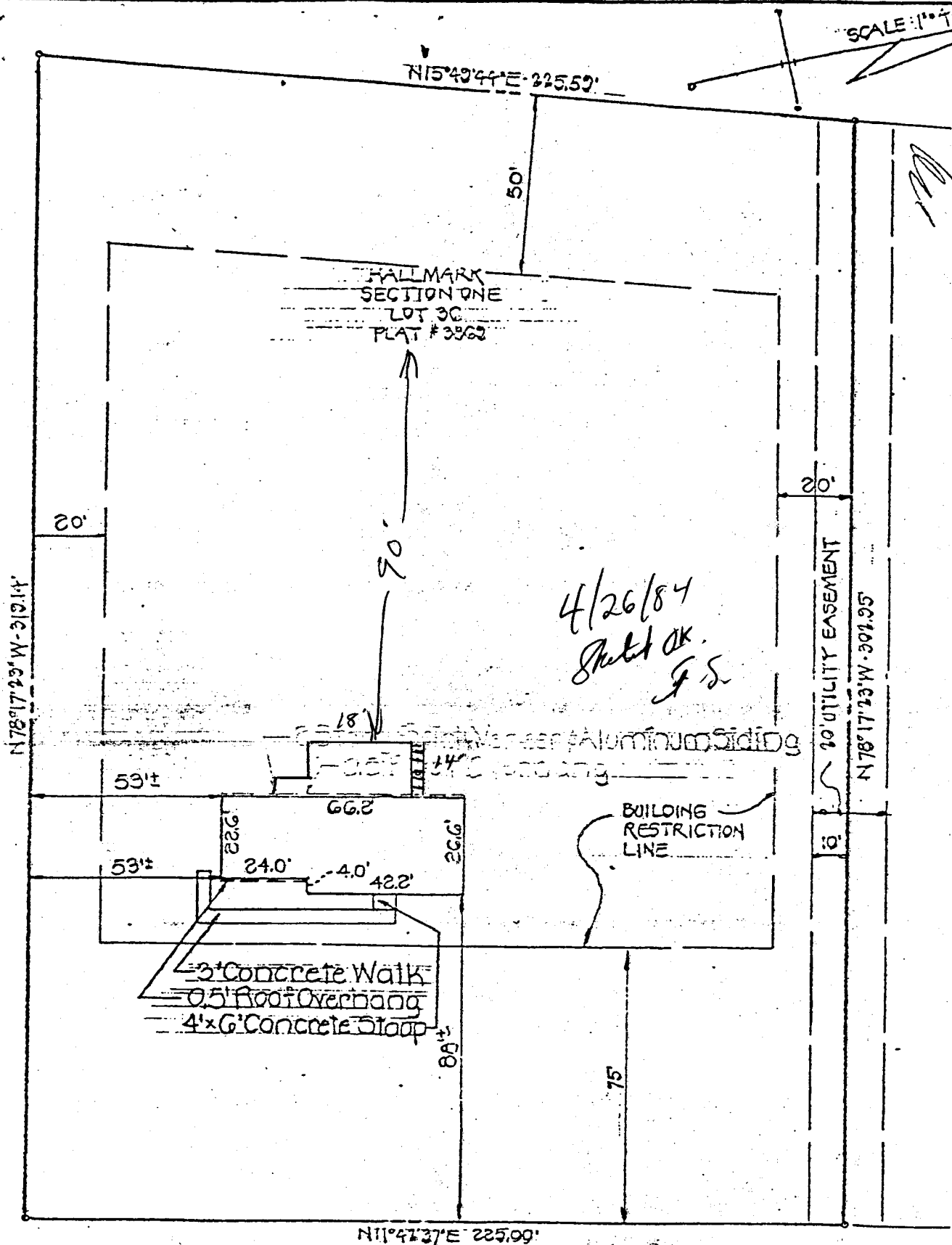
I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME Joseph M. ...

(PLEASE PRINT)

SIGNATURE

SCALE: 1"=4'



HALLMARK ROAD

I HEREBY CERTIFY THAT I HAVE SURVEYED THE PROPERTY KNOWN AS: LOT 36, HALLMARK, SECTION ONE, 5th ELECTION DISTRICT, HOWARD COUNTY, MARYLAND; FOR THE PURPOSE OF LOCATING THE IMPROVEMENTS THEREON AND THE IMPROVEMENTS ARE LOCATED AS SHOWN.