

04-338804

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 39595

A 26565

DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

DATE 7/8/87

DATE SYSTEM APPROVED 7/14/87

INSPECTOR RH

Frances Bollinger

IS PERMITTED TO INSTALL ALTER

ADDRESS Westminster, Md PHONE _____

SUBDIVISION Westcliffe Manor ROAD 13721 Barberrry Way LOT 5

PROPERTY OWNER Thomas Will

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 168 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.

LOCATION - Start the trench 100 feet from the 140 ft. lot line and 10 feet from the 354.93' lot line. Run trench(s) on level ground toward the left lot line as seen when facing lot from Barberrry Way.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

Handwritten initials/signature

162
672

PLANS APPROVED BY F. Frommelt & S. Abel DATE 8/28/85

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED).

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES).

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 TWO 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.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

BUILDING PERMIT SIGNED AND RETURNED

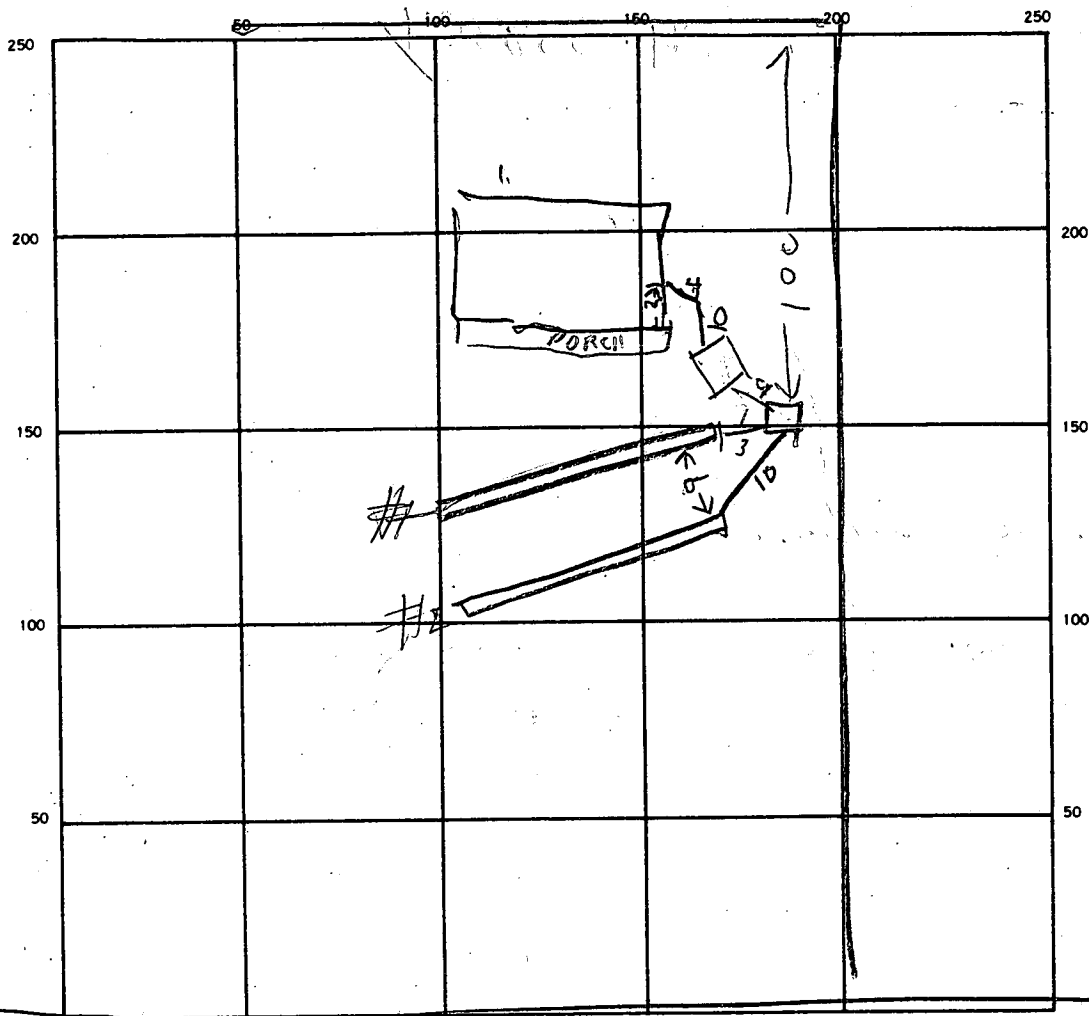
1-7-85 800145670 - Family Room

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A-26565



INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE

← TO UNDERWOOD RD

BAR BERRY WAY

SEPTIC TANK. LEVEL OIL 1250 TANK CLEANOUTS ST OK

DISTRIBUTION BOX. LEVEL OIL

DRAIN FIELD/TILE FIELD. DEPTH #1 9'9" FT. TRENCH WIDTH #1 2' FT. INLET DEPTH #1 3.5' FT.

EFFECTIVE GRAVEL DEPTH #1 5' #2 5' FT. TOTAL LENGTH #1 71' #2 5' FT.

NUMBER OF TRENCHES	ONE SIDEWALL/BOTTOM AREA	TOTAL REQUIRED
<u>2</u>	<u>#1 355 #2 350</u> SQ. FT.	<u>705</u> <u>672</u>

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 7/13/87 LOCATION OK ADD STONE TO TRENCH #1 DIG

TRENCH #2 & CALL RH 7/13/87 3:01 PM - OK TO COVER

TRENCH #1 ADD STONE TO TRENCH #2 & CALL RH

7/14/87 - TRENCH #2 OK

DATE SYSTEM APPROVED 7/14/87

INSPECTOR Raymond Hodger

SUBDIVISION: WESTCLIFFE MANOR

LOT NUMBER: 5

DRY WELL OR DRY WELL AND TRENCH

	<u>Septic Tank</u>	<u>Minimum Total square Feet</u>
3 bedroom	1000 gallon	_____ sq. ft./bedroom
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet _____ feet below original grade.
 Bottom maximum depth _____ feet below original grade.
 Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES

168 sq. ft./bedroom

Trench to be 2 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.

4 BR.
 1 35"
 5 6 7 2 #

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: START THE TRENCH 100 FT FROM THE 140 FT LOT LINE AND 10 FT FROM THE 354.93 FT LOT LINE. RUN TRENCH (S) ON LEVEL GROUND TOWARD THE LEFT LOT LINE AS SEEN WHEN FACING LOT FROM BARBERRY WAY.

B.P. # 66657

BLDG. PERMIT GRANTED
 AND RETURNED 8-28-65

PRELIMINARY

APPLICATION

A 26565

SEWAGE DISPOSAL TESTING

P _____

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

Septic Tank { 1-3 Bedrooms 1000 gallon
4 Bedrooms 1250 gallon }
DATE 8/15/77
DISTRICT 1000 4th

or up
Dig well to have 120 sq ft effective
absorbent sidewall area per bedroom below inlet. Inlet
to be 4' below original grade and maximum depth 12' location:
~~_____~~ 90' from rear property line being 140'
in length and in 45' from [right property line] when facing
lot from Barbary Way. being 360' in length

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

or up
Dig well + trench used - need:
① 5' earth buffer
between ~~dry well~~ dry well
& trench

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE
DISPOSAL SYSTEM.

PROPERTY OWNER J & B Partnership Thomas Will ③ 2 inspections

ADDRESS 5632 Stevens Forest Rd., Apt. 254, Columbia 21045 Any questions call
PHONE _____ Ron Carter - 837-0194

PROPERTY LOCATION:

SUBDIVISION Westcliffe Manor LOT NO. 5 *in. New 5 #5*

ROAD AND DESCRIPTION off Underwood Road 1372¹ Barbary Rd

SIZE OF LOT 50,500 sq. ft. TYPE BLDG. 3 or 4 bedrooms

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT /s/ Ron Carter

APPROVED BY C.B. Steakes *S.S.* FOR Dry well + trench DATE 11/13/78
(KIND OF SYSTEM)

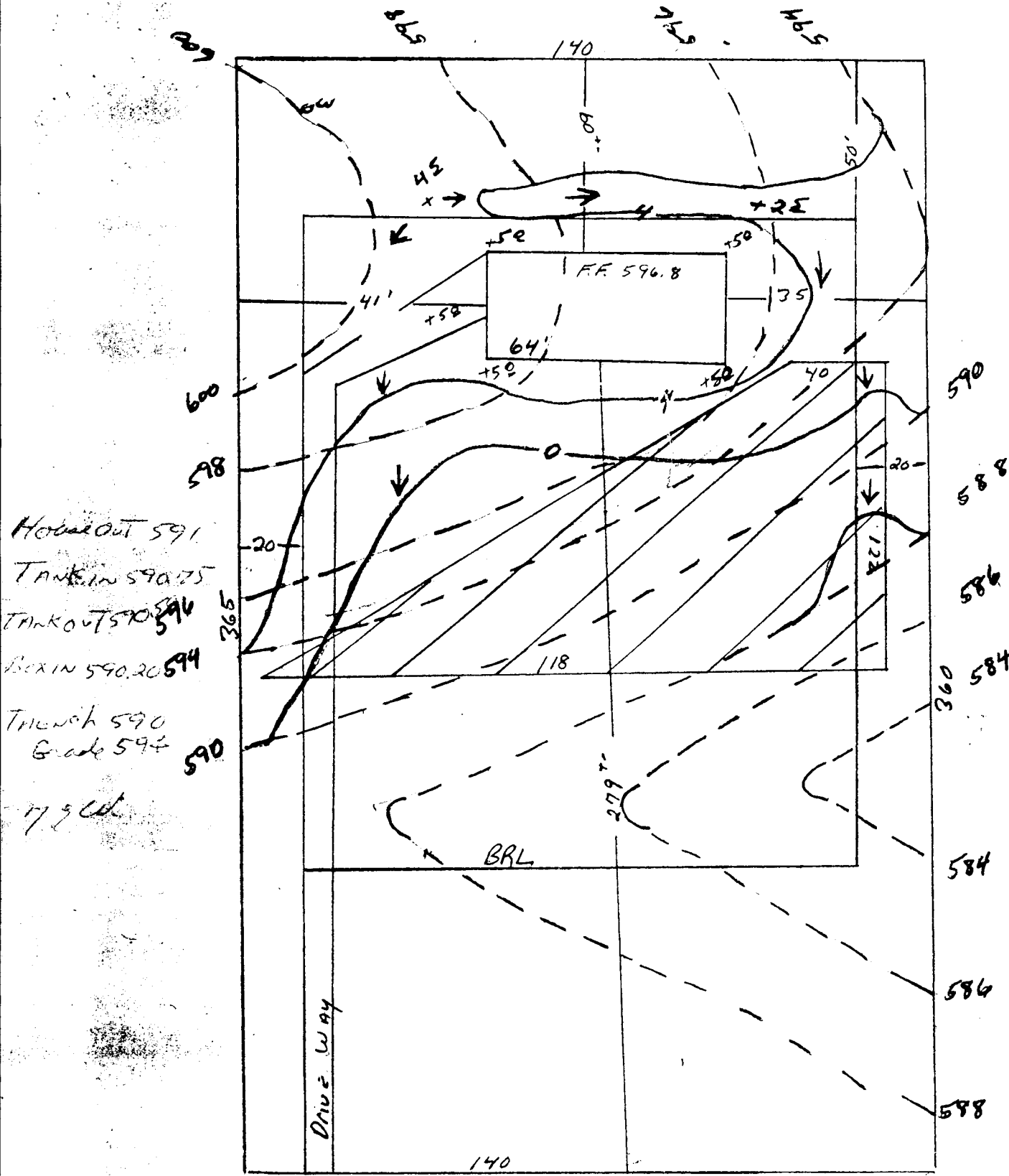
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____ B.P. 66657

BLDG. PERMIT SIGNED
AND RETURNED 8-28-85

THIS IS NOT A PERMIT



BARBERRY WAY

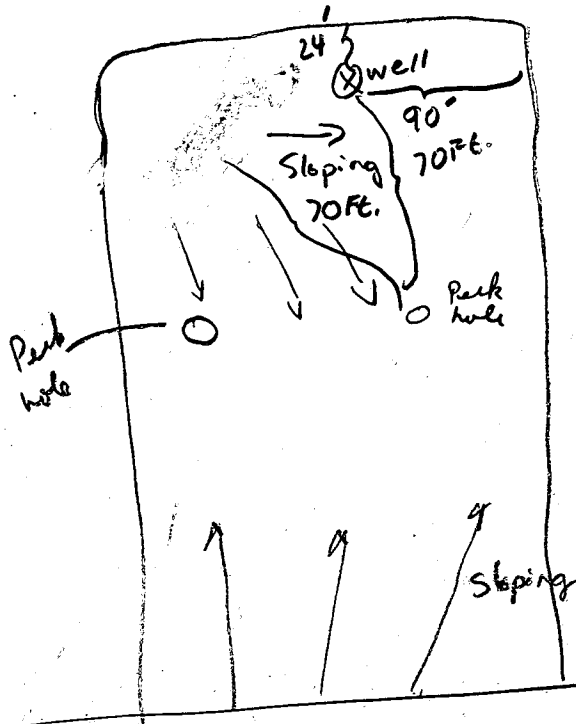
LOT #5

THOMAS E. WILL

620 OAK TREE RD

WESTMINSTER 21157

Lot 5



4/ Barberay Rd.

- 39 Ft casing
- 36 Ft open hole
- 26 Bags Grout
- 1 Dry Bag
- Grouted to within 2 Ft of Surface. Ran out of Grout. OK as per Mr. Wine to add additional Grout and level off even with Grout the following morning.
- location OK
- Grout OK

4/26/78 OMB.

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
MAY 27 3 36 PM '78
DIVISION OF
ENVIRONMENTAL
HEALTH

SEQUENCE NO. (WRA USE ONLY) **4895**

DATE RECEIVED (WRA USE ONLY) **Mar 28**

DATE WELL COMPLETED **Mar 28**

8-13 15 20

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 IS COMPLETE

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER **LG-27409**

PERMIT NO. FROM "PERMIT TO DRILL WELL"
NO-23-2529

28 29 30 31 32 33 34 35 36 37

DRILLER'S IDENTIFICATION NO. **216**

OWNER **Hobson, Fred + Sarah**

STREET OR RFD **3606 Oxwood Ct**

POST OFFICE **WESTMINSTER, MD**

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	
Over 100 ft			
2-3 ft			

GROUTING RECORD YES NO

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) **Y**

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
 CEMENT **C** BENTONITE CLAY **B**

NO. OF BAGS **25** NO. OF POUNDS **1125**

GALLONS OF WATER **150**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **35** FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW **S**

STEEL CONCRETE
 PLASTIC OTHER

MAIN CASING TYPE **ST** NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **40**

OTHER CASING (IF USED)

DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW **S**

STEEL BRASS OR COPPER OPEN HOLE OR BRONZE
 PLASTIC OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM	TO
10	80

SLOT SIZE 1, 2, 3

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **1**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **11**

METHOD USED TO MEASURE PUMPING RATE **Direct Meas**

WATER LEVEL (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING **42** (NEAREST FOOT)
 WHEN PUMPING **55** (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)
S SUBMERSIBLE

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)

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

PUMP HORSE POWER **37**

PUMP COLUMN LENGTH (NEAREST FOOT) **43**

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
+ ABOVE LAND SURFACE **50** (NEAREST FOOT)
- BELOW **49**

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

95-70

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.

DRILLER'S NAME **Keith**

(PLEASE PRINT) **Keith**

SIGNATURE **Keith**

DIAMETER OF SCREEN **56** (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX **F**

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

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

No fee
Wells?

New Installation
Replacement

Receipt # 40169
Date 9/29/87

Name of Installer Kastner Plumbing & Htg

Telephone 725-5000

License number 1862

Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Thomas E. Will Telephone 795-9210
Subdivision West Cliff Manor Lot # 5 Well tag # -B-2524
Site Address 13721 W. Boshers Way
West Friendship, Md 21094

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible
- 2. Make Grundfos
- 3. Model # SES
- 4. Capacity 5 GPM

Motor

- 1. Horsepower
- 2. RPM
- 3. Voltage
 - a. 110
 - b. 220

Pitless Adapter

- 1. Make Hannwald
- 2. Model #
- 3. Depth 3 Ft.

- 5. Pump exceeds well capacity Yes No
- 6. If Yes, is low pressure cutoff switch installed? Yes No
- 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards Other

Tank

- 1. Capacity 42
- 2. Pressure relief valve? Yes

Piping

- 1. Type #160 lb
- 2. Size 1"
- 3. NSF and/or BOCA Code approved Yes
- 4. Depth of supply line 3 Ft.

Well data

- 1. Depth 3 Ft. ft.
- 2. Yield GPM
- 3. Static water level ft.
- 4. Will water supply be disinfected by installer? No

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]

Date: 7-10-87

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HEALTH DEPT
11 10
10/10/87

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B00145670

Building Address 13721 BARBERRY WAY
SYKEVILLE MD 21784

Property Owner's Name BEIAN & JOAN WALTER
 Address 13721 BARBERRY WAY

Suite/Apt. #: _____ SDP/WP/Petition #: _____

City SYKEVILLE State MD Zip Code 21784

Census Tract 100000 Subdivision WESLEYAN

Home Phone (410) 487-4301 Work Phone _____

Section _____ Area _____ Lot 5

Applicant's Name & Mailing Address, (if other than stated hereon):
Potts Construction, Inc.

Tax Map 7 Parcel 301 Grid 7

6542 MINK HOLLOW ROAD, HIGHLAND

Zoning R10 Map Coordinates 4H9 Lot size 2230 SF

Phone (410) 531-6050 Fax _____

Existing Use RESIDENTIAL Home

Contractor Company Potts Construction, Inc.

Proposed Use RESIDENTIAL Single w/Hel

Contact Person Jim Potts

Estimated Construction Cost \$ 10000

Address 6542 MINK HOLLOW RD

Description of Work 400 SQ FT USE FL

City HIGHLAND State MD Zip Code 20777

ADDITION family room

License No. 5711

Phone 410 531-6050 Fax _____

Occupant or Tenant Homeowner

Engineer or Architect Company Simon Design

Contact Name BEIAN WALTER

Contact Person Steve Simon

Address 13721 BARBERRY WAY

Address BLUE POND

City SYKEVILLE State MD Zip Code 21784

City COLUMBIA State MD Zip Code 21046

Phone (410) 487-4301 Fax _____

Phone (410) 964-2554 Fax _____

*1/7/04
 Kacie Moran
 EJB via phone
 convers.*

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Building Characteristics

Utilities

Height: _____
 No. of stories: _____
 Gross area, sq. ft. per floor: _____
 Use group: _____

Water Supply:
 Public _____
 Private _____
 Sewage Disposal:
 Public _____
 Private _____
 Electric Yes No
 Gas Yes No

Construction type:
 Reinforced Concrete _____
 Structural Steel _____
 Masonry _____
 Wood Frame _____

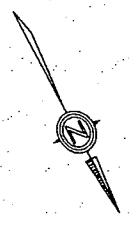
Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A

SF Dwelling SF Townhouse
 Depth _____ Width _____
 1st floor: 28 _____
 2nd floor: _____ 38
 Basement: _____
 Finished Basement Unfinished Basement
 Crawl space Slab on Grade
 No. of Bedrooms: _____
 Multi-family dwellings:
 No. of efficiency units: _____
 No. of 1 BR units: _____
 No. of 2 BR units: _____
 No. of 3 BR units: _____
 Other Structure: _____
 Dimensions: _____

Water Supply:
 Public _____
 Private
 Sewage Disposal:
 Public _____
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 NFPA #13D

YP

3T INTO
IDTN-TYP



BARBERRY WAY
R: 1050.00 L: 55.81

N 20 00' 00" W 85.11'

N 62 21' 34" W 354.93'

20' BRL

15' BRL

25' DRAINAGE & UTILITY EASEMENT

266'

20' BRL

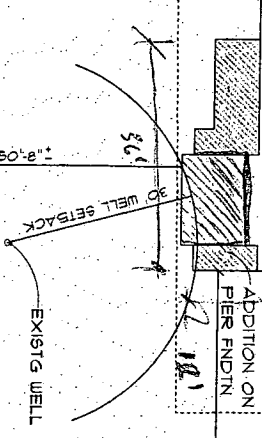
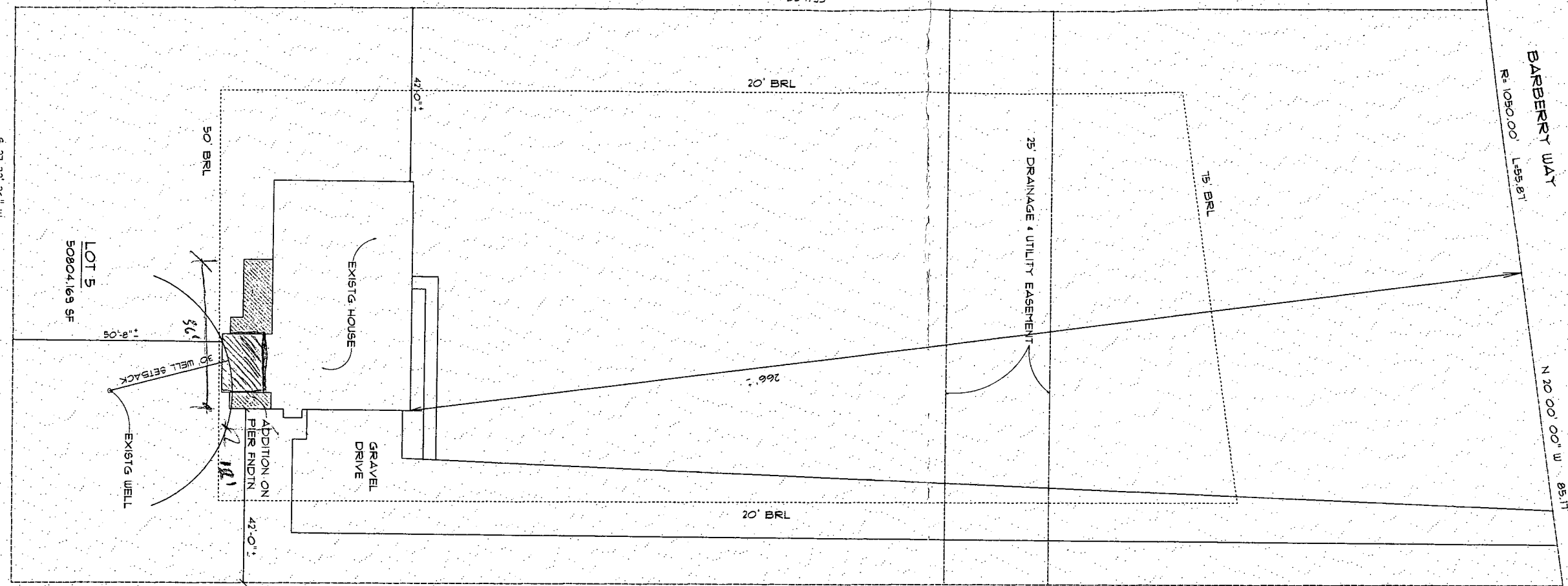
S 62 21' 34" E 371.96'

LOT 6

ADDITIONS
350 SF ±
1%

EXIST'G HOUSE
1870 SF ±
4%

TOTAL LOT
COVERAGE
2220 SF ±
5%



LOT 4

SITES NOTES

LOCATION:
13721 BARBERRY WAY
SYKESVILLE, MD 21784

LOT 5
WESTCLIFFE MANOR
LOTS 1 THRU 18 AND
PARCEL 'A'
PLAT #3836
4TH ELECTION DISTRICT
HOWARD COUNTY, MD

PREPARED BY:
LAND DESIGN ENGINEERING, INC
8335 COLUMBIA 100 PARKWAY
UNIT N
COLUMBIA, MD 21045
410-715-1070
301-596-3424
410-715-0681 FAX

B000145620
1-7-04 OK'D BY
JB + KC

410-489-4301

John Boris Jr. OK'd Health Dept

SITE PLAN
SCALE: 1"=30'-0"

031301
SHEET
1
OF 6
12/30/03

ADDITIONS AND ALTERATIONS TO THE
WALTER RESIDENCE
13721 BARBERRY WAY, SYKESVILLE, MD 21784

**POTTS CONSTRUCTION
COMPANY, INC.**

6542 MINK HOLLOW RD. HIGHLAND, MD (410)531-6050

REVISIONS