

05-374624

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

P 38915

A 26712

DISTRICT 5th

DATE 3/11/87

DATE SYSTEM APPROVED 1/14/87

INSPECTOR C. Willson

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

**INDEXED**

William H. Smith, Jr. IS PERMITTED TO INSTALL X ALTER

ADDRESS P. O. Box 330, Forest Hill, Maryland 21050 PHONE 879-7641

SUBDIVISION Glenelg Manor II ROAD 12761 Folly Quarter LOT 17A

PROPERTY OWNER Henry Myers

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 - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - SPECS REFLECT ADJUSTMENT TO PERC FIELD. SHALLOW SYSTEM ONLY. Three 80' trenches required. Place distribution box 145 feet down the right (253.75') lot line and 90 feet off the right lot line as seen when facing property from common roadway. Run trenches along contour towards the right and left rear (224.88') lot lines. Be sure to maintain minimum 100 feet distance from well (including neighbor) to septic.

NOTE - Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. dk/cw

PLANS APPROVED BY B. Nixon DATE 11/06/86

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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.

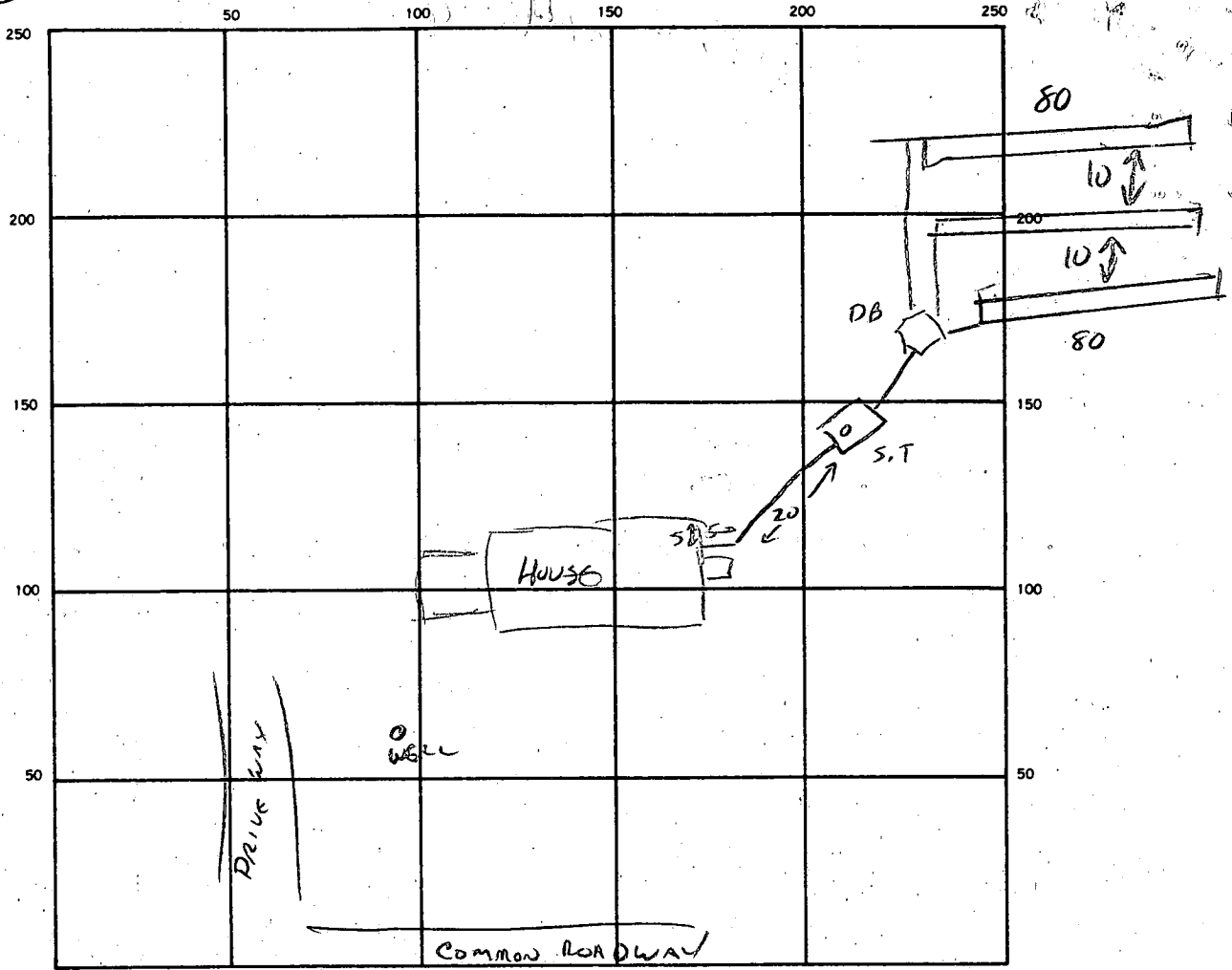
**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 26712

WPT @ ASUGL  
537-Well



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK, LEVEL ✓ CLEANOUTS ST ✓

DISTRIBUTION BOX, LEVEL ✓

DRAIN FIELD/TILE FIELD, DEPTH 2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 3(80+80+80) ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

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

total ABSORBENT AREA 720 SQ. FT.

REMARKS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE SYSTEM APPROVED 4/17/87 INSPECTOR C. Waller

Pre

17A

# APPLICATION

A 26712

## 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

DISTRICT 5th

DATE 8/17/77

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 ~~Howard Associates~~ HENRY MYERS

ADDRESS \_\_\_\_\_ PHONE Rhett Realty 465-4920

PROPERTY LOCATION:

SUBDIVISION Glenelg Manor - Section 2 LOT NO. 17A - Section 2

ROAD AND DESCRIPTION Off Folly Quarter Rd. 12761 F.Q. Rd.

SIZE OF LOT 40,000 square feet ± TYPE BLDG. 3 or 4  
NUMBER OF BEDROOMS \_\_\_\_\_

IF NOT SINGLE RESIDENCE DESCRIBE N/A

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

SIGNATURE OF APPLICANT /s/ Dale Maisel

APPROVED BY P. W. FOR \_\_\_\_\_ DATE 1/18/79  
(KIND OF SYSTEM) \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM) \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

B.P. # 9386

# THIS IS NOT A PERMIT

Lot 17A

FIELD SHEET

GLENELG MANOR FARMS

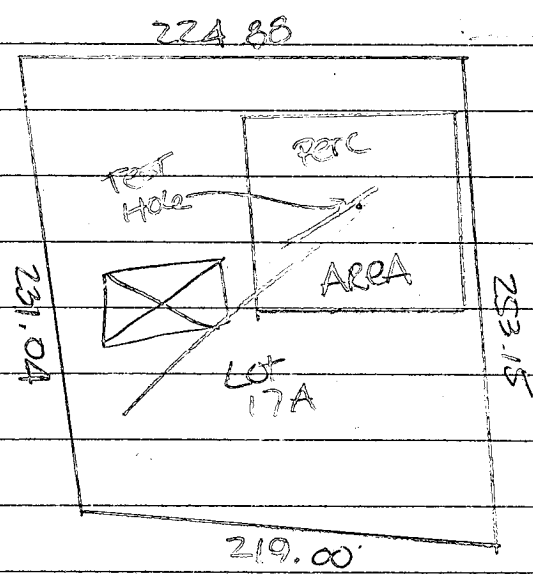
Date	#	Depth	Start	Stop	Start	Stop	
11/3/78	15	05	129	132	132	134	2
	17	12	130	134	134	137	3

Test by B.H.  
 Also Present Deborah & Penny

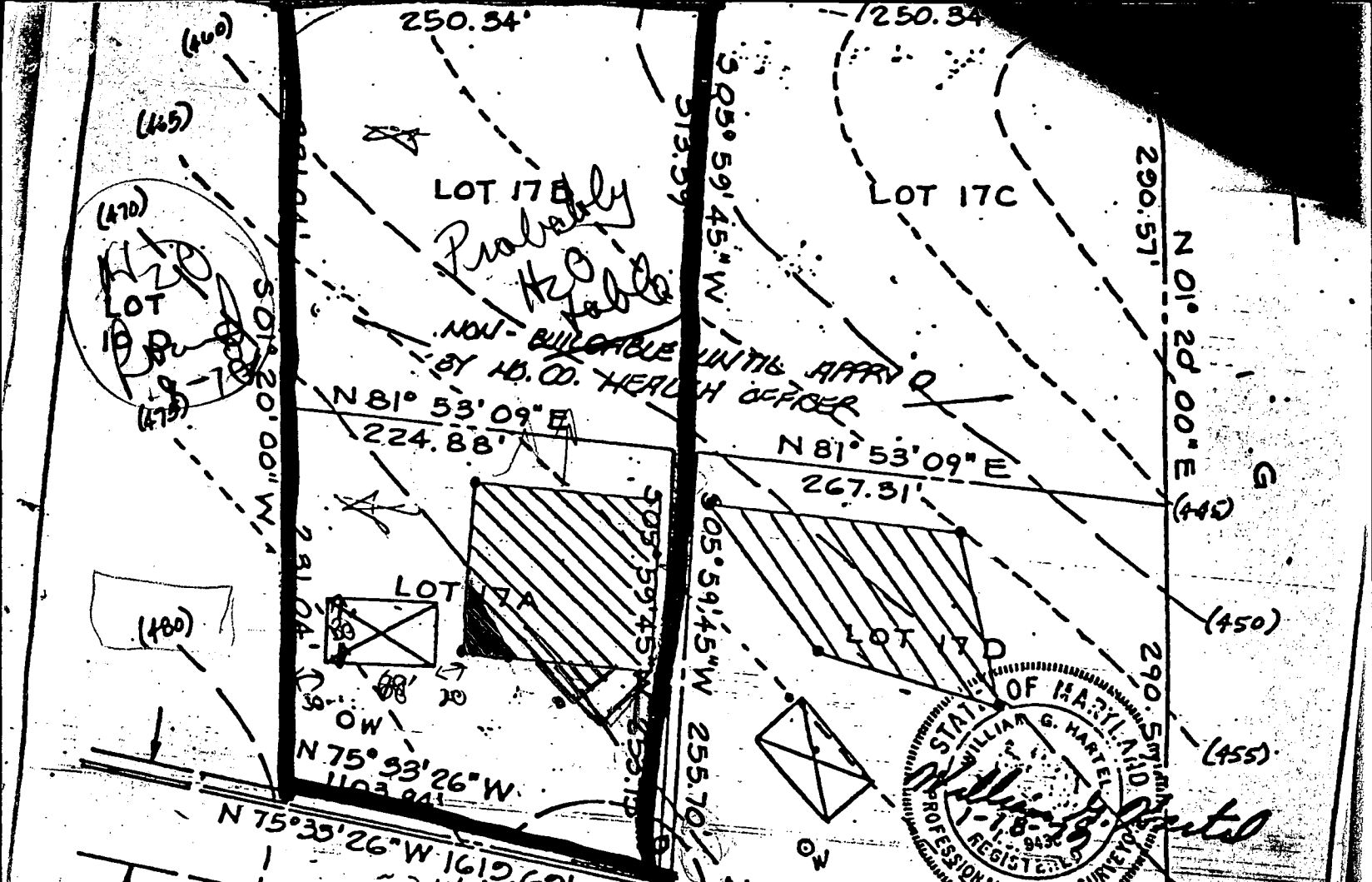
See plan

Lot 17B

Lot 17C



R/W



60' R/W FOR INGRESS & EGRESS  
 11/6/86 Solid red area "adjusted" to allow house site space. Shaded area as shown.

THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

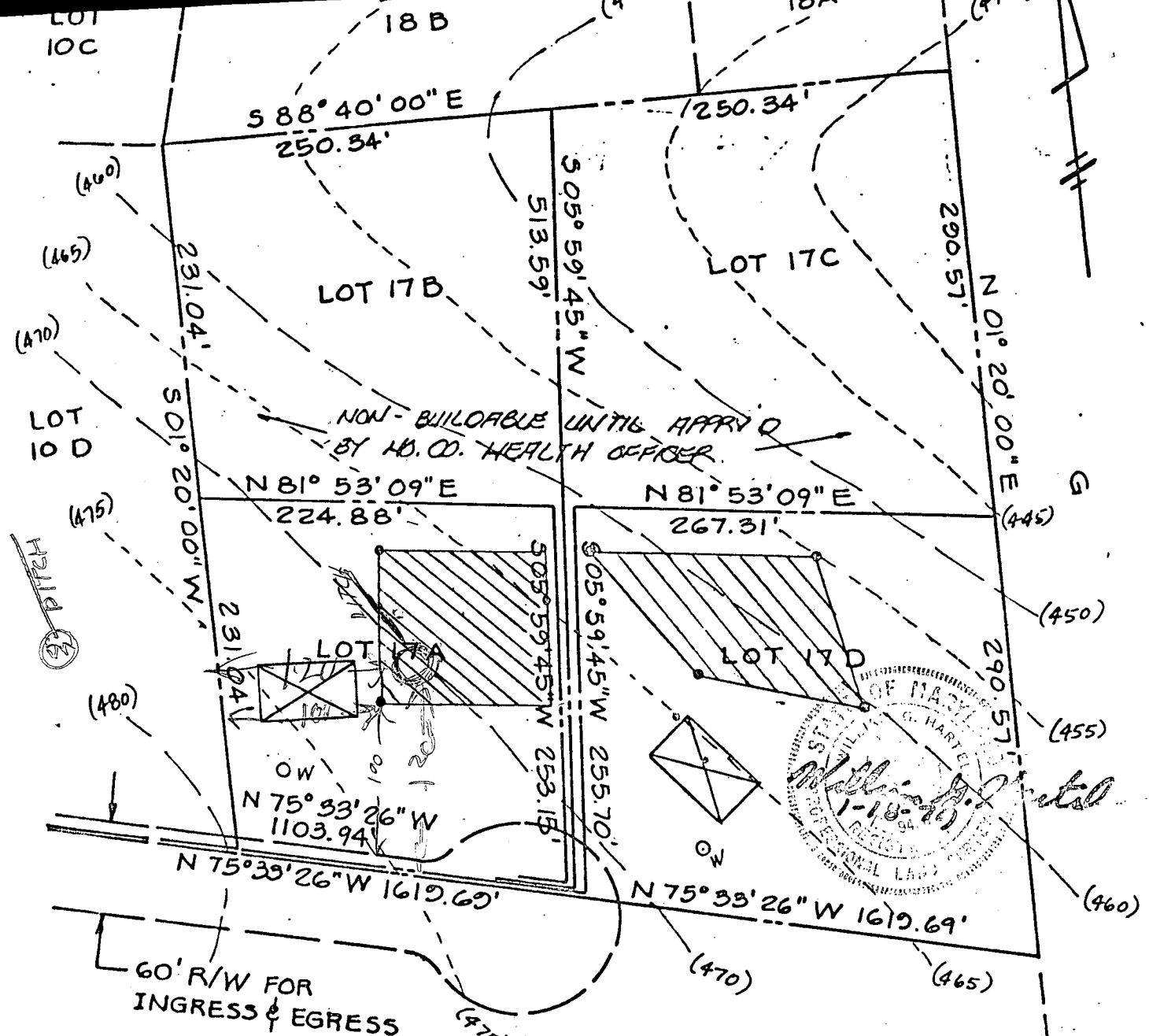
THIS AREA INDICATES A PRIVATE SEWAGE EASE. OF APPROX. 10,000 S.F. IS REQ'D BY MD. STATE DEPT. OF HEALTH & MENTAL HYGIENE FOR INDIVIDUAL DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE & SERVICE ANY RESIDENTIALS STRUCTURES CONST. ON THIS PLOT.

NOTE: PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.  
 HOWARD COUNTY HEALTH DEPARTMENT  
*John D. ...*  
 COUNTY HEALTH OFFICER DATE 3-1-77


# PERCOLATION TEST PLAT

LOT (17A, 17B, 17C & 17D)		SECTION TWO	
GLENELG MANOR		HOWARD COUNTY, MD.	
5TH ELECTION DISTRICT		DESIGN BY: W.H.N.	
6/24/77	JOB NO.:	DRAWN BY: W.H.N.	CHECKED BY:



NON-BUILDABLE UNTIL APPROVED BY MD. CO. HEALTH OFFICER.



 THIS AREA INDICATES A PRIVATE SEWAGE EASE, OF APPROX. 10,000 S.F. AS REQ'D BY MD. STATE DEPT. OF HEALTH & MENTAL HYGIENE FOR INDIVIDUAL DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE & SERVICE OF ANY RESIDENTIALS STRUCTURES CONST. ON THIS PLOT. SITE

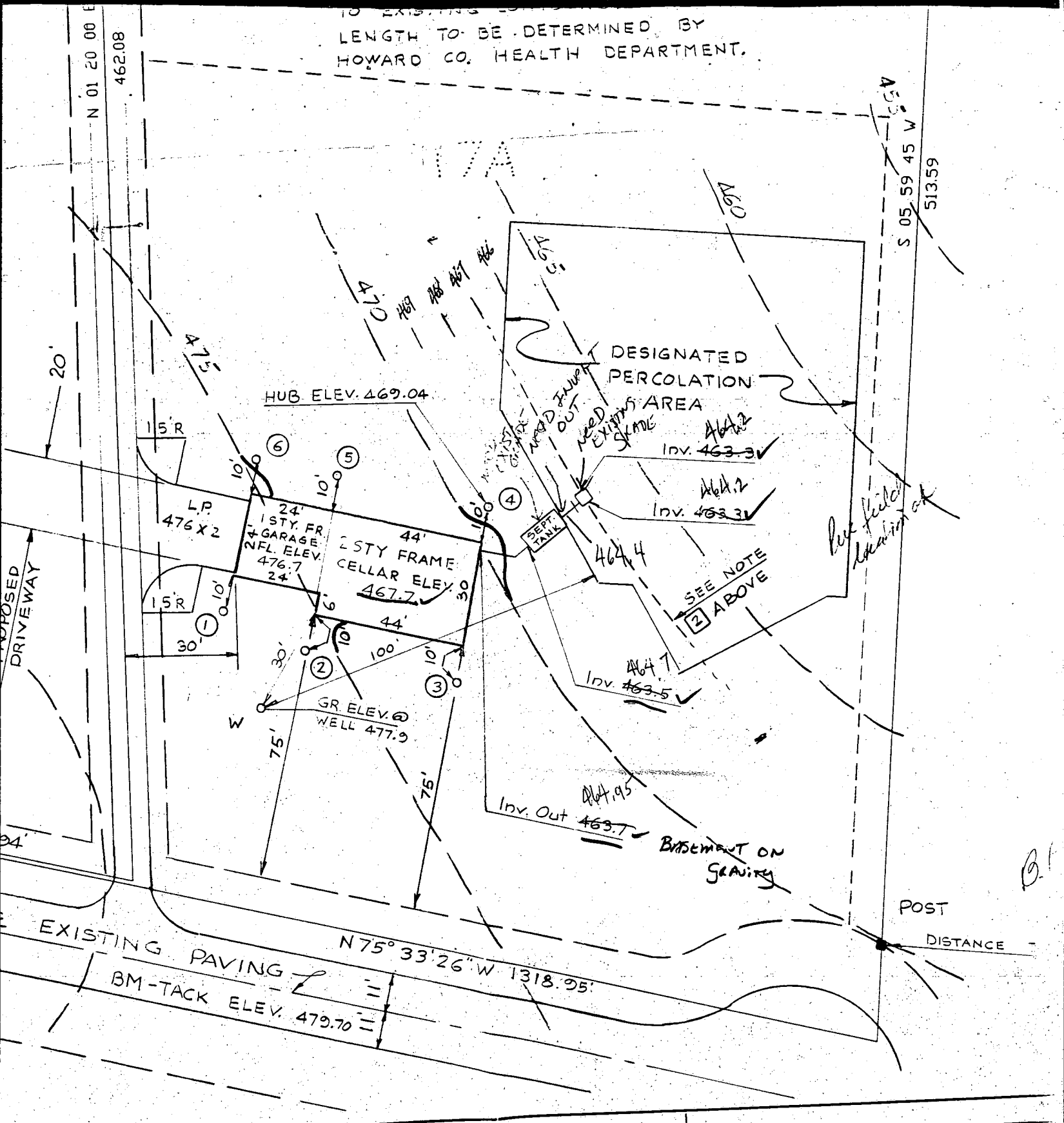
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APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.  
 HOWARD COUNTY HEALTH DEPARTMENT  
*Joseph Bowen* 3-1-77  
 COUNTY HEALTH OFFICER DATE

TITLE PERCOLATION TEST PLAT

LENGTH TO BE DETERMINED BY HOWARD CO. HEALTH DEPARTMENT.



CITE PLAN FOR

PARCEL 17A  
GLENELG MANOR

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1765  
 Location of property (road) FOLLEY QUARTER RD  
 Subdivision GLENSIDE MANOR Lot 17AB Block      Plat      Sec.       
 Well Driller RALPH MAYNEZ Owner MYERS, HENRY

Depth of well 325 ft  
 Distance of measuring point (M.P.) above ground 1 ft  
 Static water level (S.W.L.) below M.P. 25 ft

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 10.6 P.M.  
 Total time 1 hr. 15 min. reach pumping water level 260 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 $\frac{1}{2}$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:45	260 ft	60 sec		1 G.P.M.
9:00	260	60		1
9:15	260	60		1
9:30	260 ft	60 sec		1 G.P.M.
9:45	260	60		1
10:00	260	60		1
10:15	260 ft	60 sec		1 G.P.M.
10:30	260	60		1
10:45	260	60		1
11:00	260 ft	60 sec		1 G.P.M.
11:15	260	60		1
11:30	260	60		1
11:45	260 ft	60 sec		1 G.P.M.
12:00	260	60		1
12:15	260	60		1
12:30	260 ft	60 sec		1 G.P.M.
12:45	260	60		1
1:00	260	60		1
1:15	260 ft	60 sec		1
1:30	260	60		1 G.P.M.
1:45	260	60		1
2:00	260 ft	60 sec		1 G.P.M.
2:15	260	60		1 G.P.M.
2:30	260	60		1
2:45	260 ft	60 sec		1 G.P.M.

20 F.T.P. 18 open 6 days

C1 5400

SEQUENCE NO. (OEP USE ONLY)

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-26712

DATE Received

8 . . . 13

DATE WELL COMPLETED

12 28 86

Depth of Well

22 325 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

NO-21-1765

OWNER

MYERS last name first name

STREET OR RFD

FULLY QUARTER RD

TOWN

GLENSIDE

SUBDIVISION

GLENSIDE MANOR

SECTION

LOT

17AB

WELL LOG

Not required for driven wells

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

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Sandy, Small Stone, Mica, Small Stone, Mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES Y NO N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 6 NO. OF POUNDS 600

GALLONS OF WATER 36

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 18 ft. (enter 0 if from surface)

CASING RECORD

ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING Nominal diameter top (main) casing of main casing TYPE (nearest inch) Total depth of main casing (nearest foot)

PL 6 20

OTHER CASING (if used)

Table for other casing diameter and depth.

SCREEN RECORD

ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER

Table for screen depth (nearest ft.) with rows 1, 2, 3 and columns for depth.

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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) 5

PUMPING RATE (gal. per min. to nearest gal.)

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING 25

WHEN PUMPING 260

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

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)

LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

CIRCLE APPROPRIATE LETTER 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. 972 DRILLERS SIGNATURE SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)