

5/20/93 LAB
5/20/93

PERMIT

File

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

01-352815

P 49143

A 27375

DISTRICT 4th

DATE 4/15/93

DATE SYSTEM APPROVED 5/21/93

INSPECTOR C. Boh

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-3938~~ 313-2640

INDEXED

Paul Leahy IS PERMITTED TO INSTALL ALTER

ADDRESS 7 Hutton Street, Gaithersburg, Maryland 20877 PHONE 301-869-8036

SUBDIVISION Kogan Trust LOT 9 ROAD 1880 Florence Road

PROPERTY OWNER Paul and Loretta Leahy

ADDRESS

SEPTIC TANK CAPACITY 1000 GALLONS TOP SEAMED SEPTIC TANK REQUIRED

NUMBER OF BEDROOMS 3

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - 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 - Place the distribution box 140 feet from the front lot line and 125 feet from the right lot line as seen when facing the property from Florence Road. Run trenches along contour toward right side of property.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *OK 4/16/93 RH*

PLANS APPROVED BY C. Williams DATE 6/23/92

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

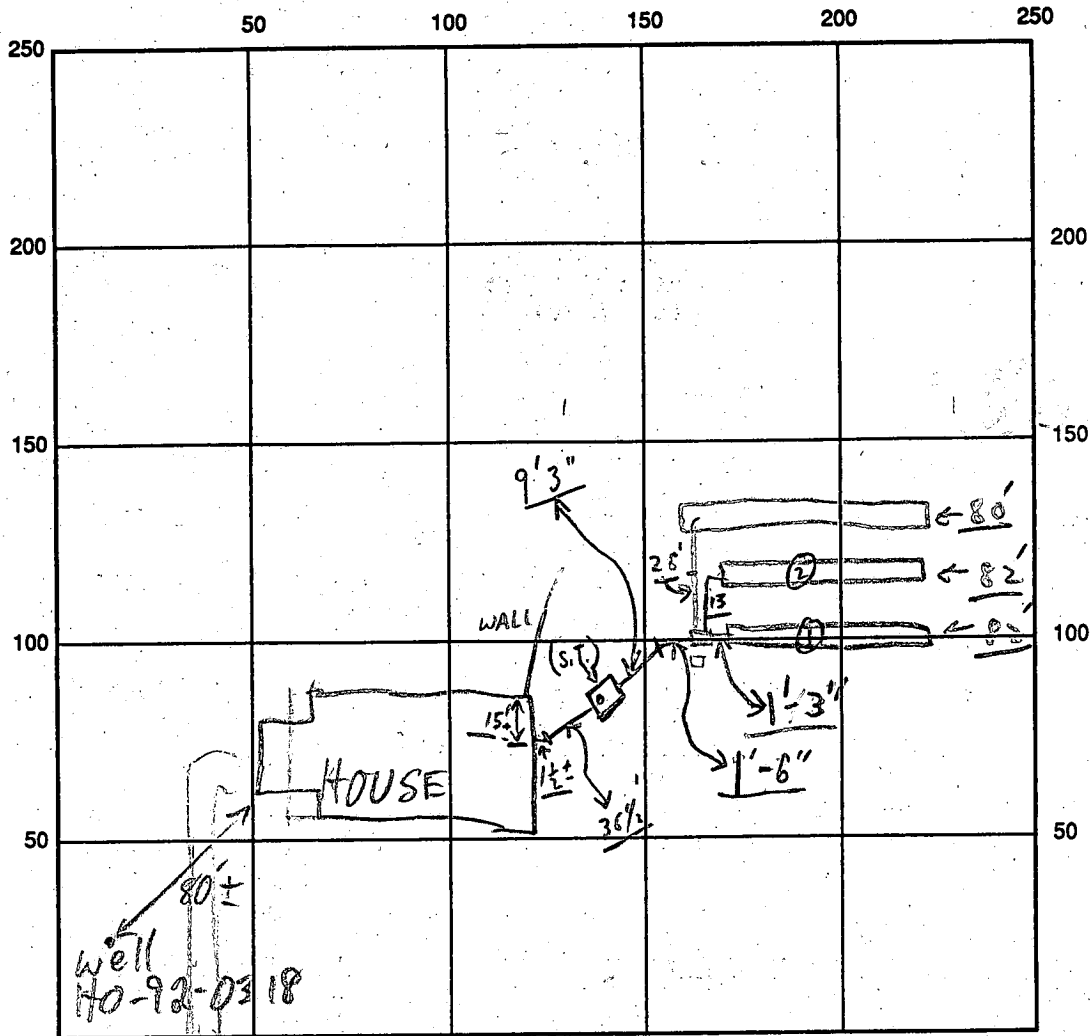
PERMIT VOID AFTER TWO YEARS

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 PVA 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**

A 27375



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

FLORENCE RD

SEPTIC TANK LEVEL OK CLEANOUTS (Needs S.T. to two part on)

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 80' 82' 82' } FT. 244

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 732 SQ. FT.

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

ABSORBENT AREA 732 SQ. FT.

REMARKS: 5/20/93 OK TO CONTINUE MR 5/21/93 Finish - all work done; C.R.S. [ON (C.T.O.) needs to be installed.] (C.R.S.)

5/20 No. W.P.I. C.R.S.

DATE SYSTEM APPROVED 5/21/93 INSPECTOR Charles Bryan Street

APPLICATION

A 27375

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4th Election

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

DATE 12-21-77

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 ~~Leonard Kogan and Nancy Kogan~~ Paul and Loretha Leahy

ADDRESS 8630 Fenton Street, Silver Spring, Md. 20910 PHONE 301-869-8034
(301)565-0222

PROPERTY LOCATION:

SUBDIVISION Kogan KOGAN TRUST LOT NO. 26 Lot 3 (9)

ROAD AND DESCRIPTION The property is located on southeast side of intersection of
New Cut Road and Long Corner Road. (1880 Florence Road)

SIZE OF LOT 3 acres TYPE BLDG. Residential
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 [Signature] BLDG. PERMIT SIGNED AND RETURNED 4/12/95
Small # 47537 - SFD

APPROVED BY P. Fromholt (CW) FOR SHALLOW TRENCHES DATE 7-18-91
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6/20/78 - DIG MORE & HOLD FOR REVIEW STATE R11

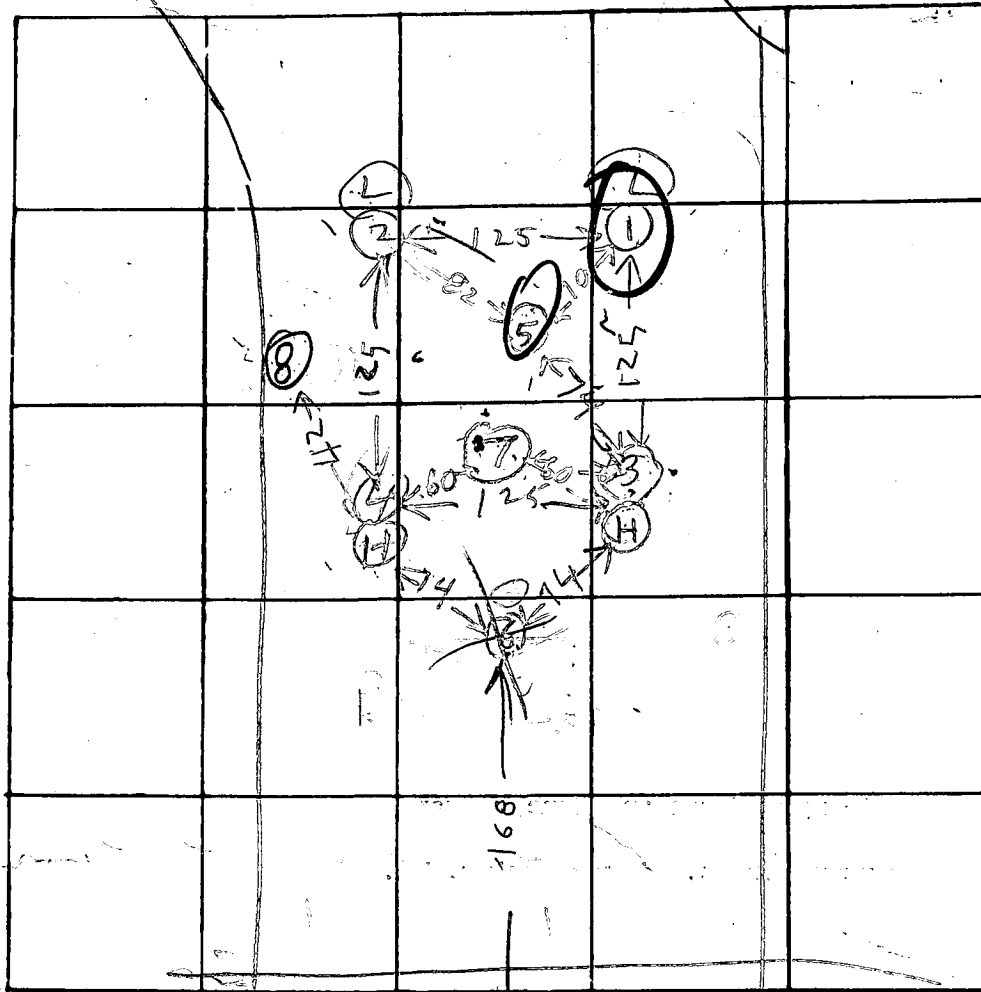
6/21/78 PERC OK BUT HOLD FOR REVIEW R11

RE SUBDIVISION - RECORD PLAT F89-83 SIGNATURE DATE 7-18-91

THIS IS NOT A PERMIT

lot # 26
 NSGJ LOT 9
 SUBDIVISION PLAT
 F 89-83

Lot 26



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

FLORENCE CENTER LAND CO. ROAD

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|-------|---------|---------|----------------|---------|--------|
| | | | START | STOP | START | STOP | |
| 6/20/78 | D 1 S | 3 1/2 | 132 | 143 | 143 | 220 | FAILED |
| 6/20/78 | D 1 D | 10 | 132 | 132 1/2 | 132 1/2 | 133 1/2 | 1 |
| 21 | C 2 D | 12 | 144 | 152 | 152 | 202 | 10 |
| | C 2 S | 3 1/2 | 152 | 154 | 154 | 158 | 4 |
| | A 3 D | 12 | 213 | 219 | 219 | 223 | 4 |
| | A 3 S | 4 | 216 | 225 | 225 | 236 | 11 |
| | B 4 D | 12 | 231 | 232 | 232 | 236 | 5 |
| 6/21/78 | D 5 D | 10 | 138 | 139 | 139 | 141 | 2 |
| 11 | D 5 S | 4 | 144 1/4 | 144 1/4 | 144 1/4 | 144 3/4 | 1/2 |
| 6/21/78 | B 4 S | 4 1/2 | 208 | 210 | 210 | 214 | 4 |
| 6/21/78 | 6 D | 11 | 222 | 224 | 224 | 228 | 4 |
| 6/21/78 | 6 S | 11 | 226 | 228 | 228 | 234 | 6 |

TOO FAST

TOO FAST

TYPE OF SOIL

TESTED BY B. H. W. S. 6/20
 R. H. S. J. S. 6/21

ALSO PRESENT: BOVE... C
 ... C S
 MIL...

KOGAN

| Date | Start | Stop | Start | Stop | Time |
|--------|-------|------|-------|------|----------|
| 8/3/70 | 7D | 12 | 1149 | 1157 | 12:00 23 |
| | 7S | 4 | 1152 | 1156 | 12:02 6 |

Soil Profile
 1 Hole
 0 - 2 Clay
 2 - 10 Sand
 10 - 12 Sand & Shale

8/4/70
 31 MAY 79

| | 17 | | | | | |
|----|--------|-----|-----|-----|-----|----|
| 8S | 4 | 335 | 341 | 341 | 401 | 20 |
| 8D | 12 1/2 | 337 | 341 | 341 | 357 | 10 |

92961-93024

B 1. **00218** SEQUENCE NO. (DP USE ONLY)
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type.

STATE PERMIT NUMBER
H0-92-0318
fill in this form completely

Date Received (APA) **021993**
OWNER INFORMATION
LEAHY PAUL B LORETTA
2 HUTTON STREET
GAITHERSBURG MD 20877

B 3 LOCATION OF WELL
HOWARD
KOGAN TRUST
SECTION **11** LOT **9**
LONG CORNER
MILES FROM TOWN (enter 0 if in town) **2** MI

DRILLER INFORMATION
Ralph MAYNE
Ralph MAYNE well Drilling
9120 Brown Church Rd Mt Airy
North Myer 2/18/93

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
TOWN
NEAR WHAT ROAD
Florence Rd
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD **80** FT or MI **FT**

B 2 WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) **5**
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED
030993 B. Hodges 09/03/93
NORTH GRID **540000** EAST GRID **0758000**

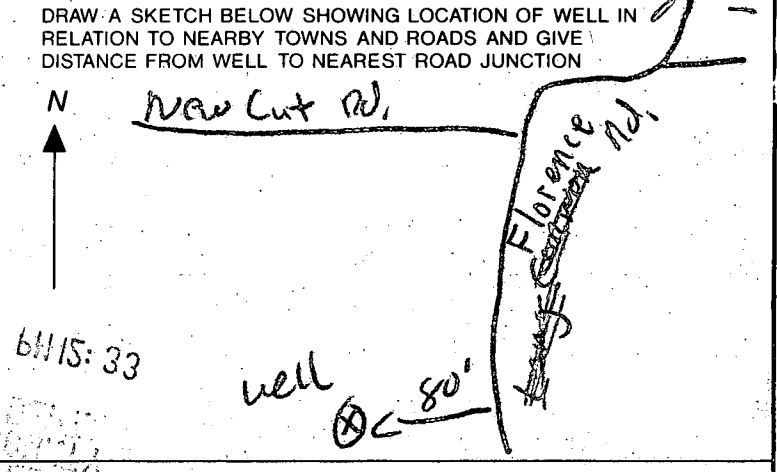
APPROXIMATE DEPTH OF WELL **150** FEET

APPROXIMATE DIAMETER OF WELL **6"** INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY Drive-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
2. **Trench Street (No house)**
3. **9:50 Ground 3/22/93/Well**
WRITE THE BOX NUMBER FROM THE MAP HERE
E **7508**
N **540**
000 above ground C.B. on site Trench OK

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



Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER **G A P**
FORCE **40-92-0318** PERMIT No. **40-92-0318**

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

6/8/93
Final
ok
CBS

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # -0-
Date 6/7/93

Name of Installer James E Johnson Jr

Telephone 801-253-2243

License Number 16800
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner Paula & Loretta Leahy Telephone 869-8086
Subdivision Kogan Trust Lot # 9 Well Tag # HO-92-0318
Site Address 1880 Florence Road

Pump
1. Type
a. Deep well jet
b. Shallow well jet
c. Submersible
2. Make _____
3. Model # _____
4. Capacity 8 GPM
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

Motor
1. Horsepower 1/2
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth 4'

Tank
1. Capacity _____
2. Pressure relief valve?

Piping
1. Type 1" mws
2. Size _____
3. NSF and/or BOCA Code approved
4. Depth of supply line 4'

Well data
1. Depth 300 ft.
2. Yield 10 GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? yes

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: 6-7-93





✓ card 6/8/93 CBS

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

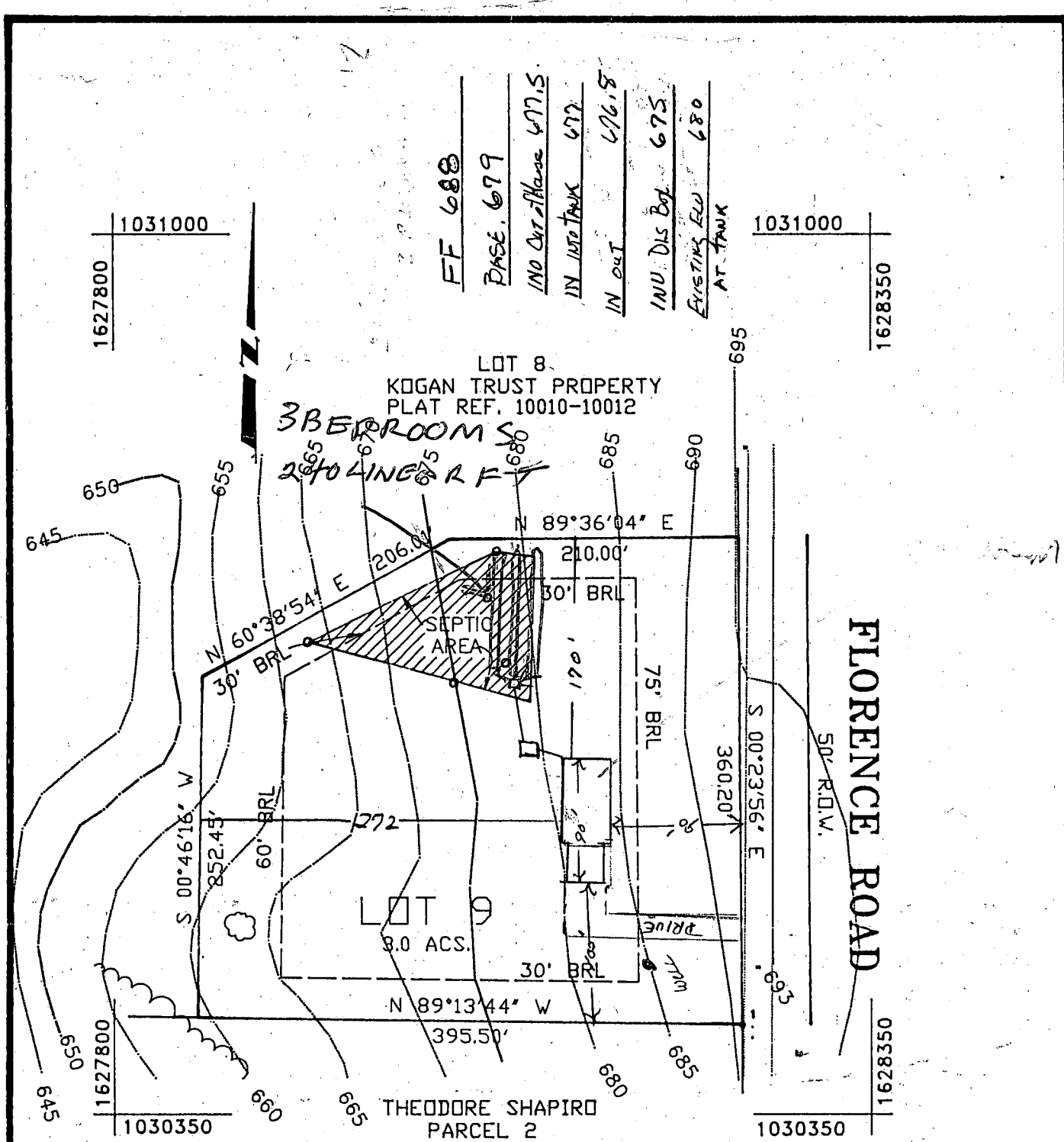
GENERAL NOTES

1. Property shown is on Tax Map @ Parcel 12 Parcel 9.
2. Present Zoning - R.
3. Minimum allowable lot size is 3.00
4. Number of proposed lots shown : 4
5. Total area of parcel is : 153.84 A
6. Private Water and Sewer System
7. Proposed Subdivision name : KOGAN
8. Topography shown was obtained from Survey.

LEGEND

1.  This area designates a private of approximate 10,000 sq. ft. the Maryland State Health Dept. for Sewage Disposal. Improvements in this area are restricted. is available and servicing any res structure constructed on these building s ensement shall become null and v rection to a public sewage system.
2.  Denotes Location of Perculation
3.  Approximate Location of Dwelling
4.  Denotes Approximate Location





FF 688
PASE. 679
1NO OUT-Flow 477.5
IN INTAKE 672
IN OUT 676.8
INU. DIS. Box 675
EXISTING ELO 680
AT. FLOW

4/12/93
PLANS OK AFTER REDLINE ADDITION
BP47850
R. HODGES OWNER

NOTE: TOPOGRAPHY IS BASED ON HOWARD COUNTY AERIAL PHOTOGRAMMETRIC MAPS.

PAUL LEAHY
27 HUTTON STREET
GAITHERSBURG, MD 20760
Phone:

| | | | | |
|---|---------------------|------------------|--------------------|--------------|
| TITLE: KOGAN TRUST | | | | |
| PROJECT: PLOT PLAN | | | | |
| LOCATION: 4TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND | | | | |
| SCALE: 1"=100' | DESIGNED BY: *** | DRAWN BY: *** | CHECKED BY: *** | DATE: *** |
| FIELD BOOK: *** | PAGE No.: | JOB No.: | DRAWING No.: | |
| | *** | 93020 | 1 OF 1 | |

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