

APPROVED  
8/13/84

RH

P 33984  
27952  
A 27452

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

8/13/84  
8/10/84  
9:00 AM

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330

## INDEX

103-295796

ELLICOTT CITY

DISTRICT 3rd

DATE 6/11/84

Michael Pich

IS PERMITTED TO INSTALL X ALTER

ADDRESS 5840 Morningstar Drive, Columbia, MD. 21043 PHONE \_\_\_\_\_

SUBDIVISION Messinger Property ROAD 13200 SkyWay LOT 147

PROPERTY OWNER Michael Pich

ADDRESS 5840 Morningstar  
Columbia, Maryland 21043

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

GARBAGE GRINDER? YES X NO \_\_\_\_\_

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 5

TRENCHES - 200 sq. ft per bedroom with garbage grinder. 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 with 5 feet of stone below distribution pipe.  
LOCATION: Start the first trench 300 feet from the right (439.37 ft. long) sideline and 140 feet from the front (661.99 ft. long) lot line, as seen when facing the lot from SkyWay. Continue to dig the trench on level ground, running towards the right side line, the necessary distances. Place successive trenches parallel to and downhill of the first trench and 10 feet away from first trench. NOTES: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspections of trench before and after stone is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

12' HOLE 30' 50' HIGHER THAN ORIGINALLY APPROVED AREA. OK TO START SYSTEM AT ANY INTERMEDIATE POINT THAT IS SERVICEABLE BY HOUSE SEWER THAT IS 11' BELOW GRADE AT HOUSE SITE.

PLANS APPROVED BY Frank Skinner DATE 6/11/84

8/8/84  
CW

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE YEARS.

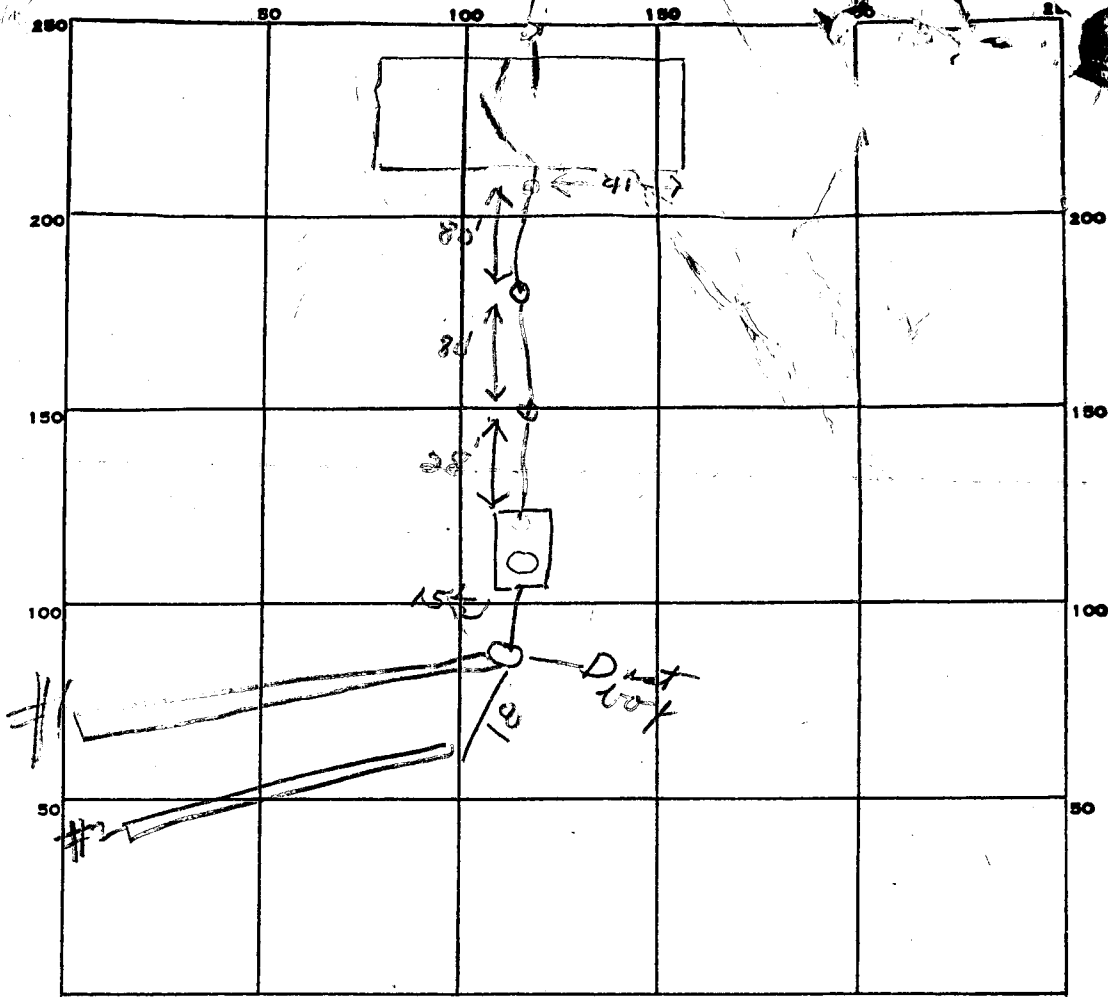
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A  
8/14/84  
27952



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD NO

SEPTIC TANK, LEVEL 2000 gal CLEANOUTS ST

DISTRIBUTION BOX, LEVEL #1 Man hole

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH 2 FT. #2

|                    |                |                   |                |            |                   |
|--------------------|----------------|-------------------|----------------|------------|-------------------|
| GRAVEL DEPTH       | <u>5.5</u> IN. | TOTAL LENGTH      | <u>100</u> FT. | #2         |                   |
| NUMBER OF TRENCHES | <u>2</u>       | TOTAL BOTTOM AREA | <u>500</u>     | <u>580</u> | <u>TOTAL 1080</u> |

SEE PAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 8/9/84 JS. LOOKED AT 1ST DITCH 8/10/84 COVER

ALL BUT 2ND TRENCH R -

8/13/84 - 2ND TRENCH FINISHED

DATE SYSTEM APPROVED 8/13/84 INSPECTOR Parmerel Hodges

# APPLICATION

A 27952

~~5/24/78~~ 5/11/78  
9:30am. 9:30 A.M.

SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 3rd

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

DATE 4/25/78

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 ~~Samuel Messinger~~ Michael W. Pick

ADDRESS 5840 Morningbird Lane PHONE 997-4861  
~~11140 Powder Horn Drive, Potomac, Md.~~ ~~301-299-8070~~

PROPERTY LOCATION: Columbia, Md. 21045

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION 13200  
Sky Way

SIZE OF LOT 13.3144 acres 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 Samuel Messinger

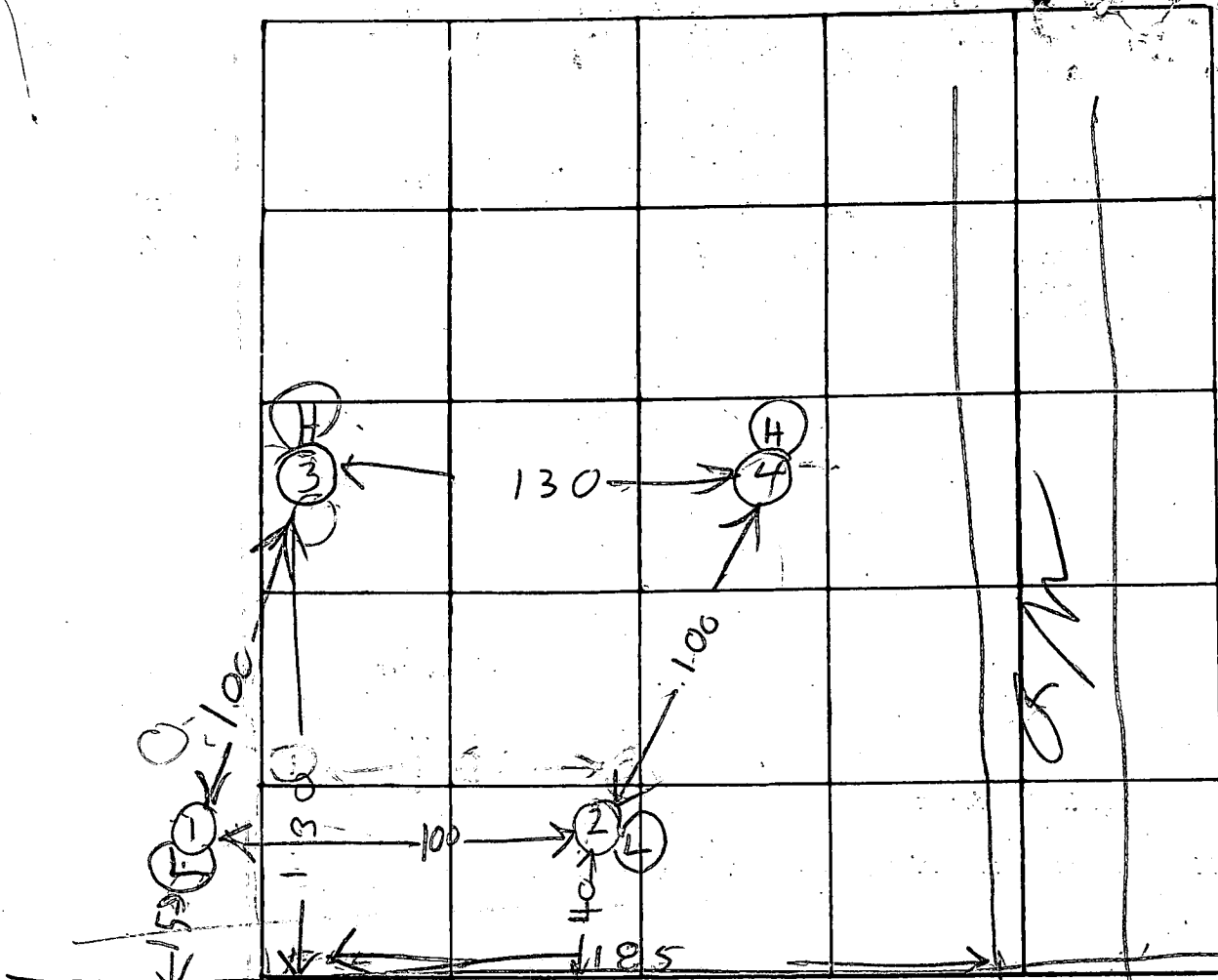
APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

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

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

REASONS FOR REJECTION OR HOLDING 5/11/78 - PERC OIL HOLD FOR  
PLAT R H

# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

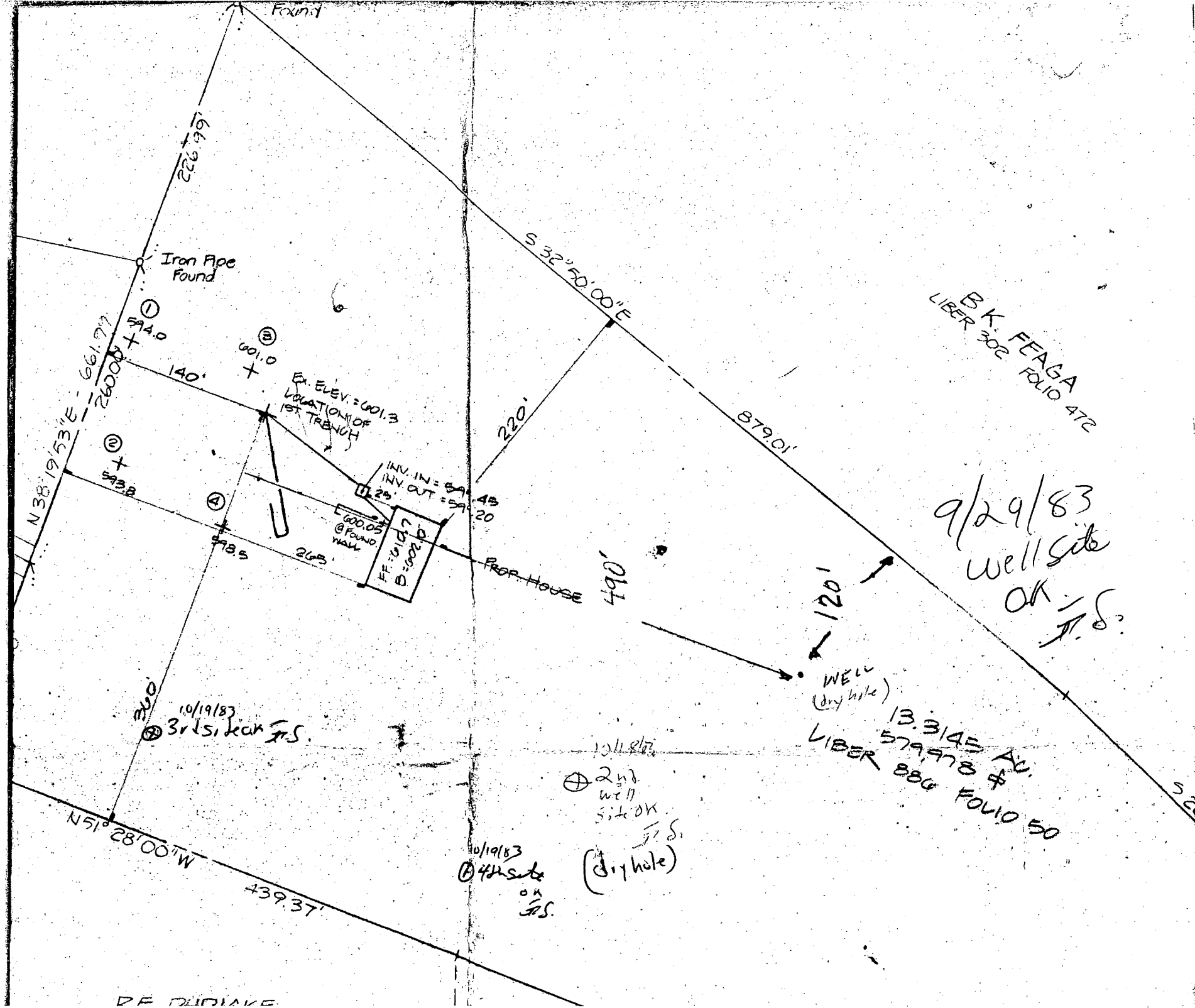
| DATE    | TEST NO. | DEPTH | PRE-WET   |          | TEST - 1" DROP |      | TIME |
|---------|----------|-------|-----------|----------|----------------|------|------|
|         |          |       | START     | STOP     | START          | STOP |      |
| 5/11/78 | 1D       | 12    | 1005      | 1009     | 1008           | 1011 | 3    |
|         | 1S       | 4 1/2 | 1007      | 1008     | 1013           | 1014 | 1    |
|         | 2D       | 12    | 1009      | 1011     | 1011           | 1013 | 2    |
|         | 2S       | 4 1/2 | 1009      | 1010     | 1010           | 1013 | 3    |
|         | 3S       | 4 1/2 | 1015      | 1016     | 1016           | 1017 | 1    |
|         | 3D       | 13    | 1015      | 1017     | 1017           | 1022 | 5    |
|         | 4V       | 12    | TOP 4 1/2 | CLAY     |                |      |      |
|         |          |       | BOT 7 1/2 | SANDY    |                |      |      |
| 5/11/78 | 1-ED     | 14    | TOP 4 1/2 | CLAY/SIL |                |      |      |
|         |          |       | BOT 7 1/2 | SAND     |                |      |      |

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY BIT

ALSO PRESENT: FYOCK & CO  
D. RUSH



B 7329 SEQUENCE NO. (OEP PERMIT ONLY)  
(THIS NUMBER IS TO BE PUNCHED IN C.O.L.S. 3-6 ON ALL CARDS)

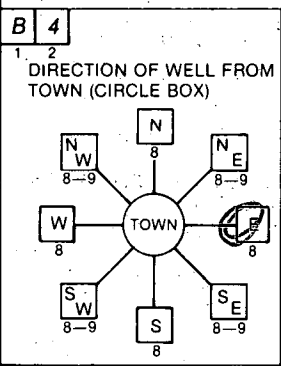
STATE OF MARYLAND  
PERMIT TO DRILL WELL  
please print or type

OEP PERMIT NUMBER  
H0-81-0283  
fill in this form completely

Date Received 9:30 AM 10/28/83  
OWNER INFORMATION  
PICH MICHAEL  
5840 MORNUNSTAR  
COLUMBIA MD 21045

LOCATION OF WELL  
HOWARD  
MESSINGER PROPERTY  
SECTION RR LOT 147  
GLENELG  
MILES FROM TOWN (enter 0 if in town) 1 1/10 MI

DRILLER INFORMATION  
Joseph Wayne  
551 1/2 Ridge Rd Mt Airy Md.  
Joseph Wayne 9/26/83



Skylway Drive  
NEAR WHAT ROAD  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
DISTANCE FROM ROAD 1100 FT

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 A27952  
COUNTY NAME COUNTY NO.  
OEP SIGNATURE STATE HEALTH INSERT S  
DATE ISSUED 092983 Frank Skinn 3/29/84  
CO SIGNATURE EXP. DATE  
NORTH GRID 520 000 EAST GRID 0809 000

APPROXIMATE DEPTH OF WELL 260 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. WEL  
2.  
3.  
WRITE THE BOX NUMBER FROM THE MAP HERE  
Sketch showing location of well in relation to nearby towns and roads. Includes labels for 'Howard', 'Skylway Drive', and '1100'.

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)  
APPROP. PERMIT NUMBER GAP  
FORCE FS WRITE INITIALS IN BOX PERMIT No. H0-81-0283

SPECIAL CONDITIONS

C1 0804 SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**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 27952**

DATE Received [ ] DATE WELL COMPLETED **102883** Depth of Well **500** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-81-0283**

OWNER **Pich Michael W.** last name first name  
 STREET OR RFD **Skyway Drive** TOWN **Glennlg**  
 SUBDIVISION **Messinger Property** SECTION **map 2a** LOT **parcel 147**

**WELL LOG**  
 Not required for driven wells  
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

| DESCRIPTION (Use additional sheets if needed) | FEET |     | Check if water bearing |
|---|------|-----|------------------------|
|   | FROM | TO  |                        |
| Brown shale                                   | 0    | 42  |                        |
| Gray mica rock                                | 42   | 500 |                        |

*Drilled in with cement & casing materials*  
*Any wells 1-320*  
*2-260*  
*3-260*

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **12** NO. OF POUNDS **1128**  
 GALLONS OF WATER **72**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **70** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** **PL** **OT**  
 STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE  
 Nominal diameter (nearest inch) **57**  
 Total depth of main casing (nearest foot) **45**

OTHER CASING (if used)  
 diameter inch depth (feet) from to

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
**ST** **BR** **HO** **PL** **OT**  
 STEEL BRASS BRONZE PLASTIC OPEN HOLE OTHER

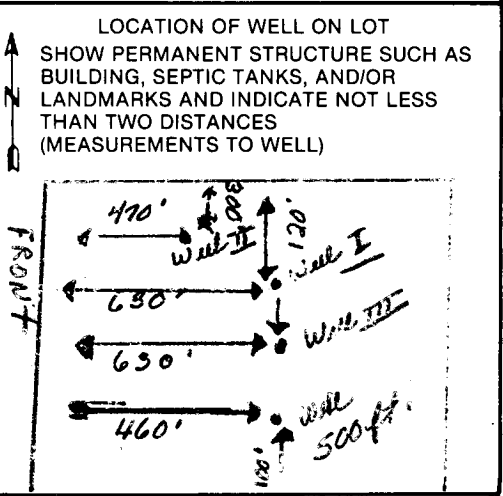
**C2**  
 DEPTH (nearest ft.)  
 1 **H0** **44** **500**  
 2  
 3  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH) from to

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

**C3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **6**  
 PUMPING RATE (gal. per min. to nearest gal.) **1 1/4**  
 METHOD USED TO MEASURE PUMPING RATE **bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **35** WHEN PUMPING **173**  
 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)  
 + above } LAND SURFACE (nearest foot)  
 - below }



CIRCLE APPROPRIATE LETTER  
**A** 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. **238**  
 DRILLERS SIGNATURE **J. M. M...**  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)