

Approved 7/26/79

J. Stayer

P 29961

A 28909

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

02-265432

ELLICOTT CITY

DISTRICT 2nd

DATE 7/3/79

INDEXED

7/26/79
awarded
10:30-11:00

Roland Barth

IS PERMITTED TO INSTALL ALTER

ADDRESS Clarksville Pike, Ellicott City, Md. 21043 PHONE 730-8495

SUBDIVISION _____ ROAD 8320 Old Frederick Road LOT _____

PROPERTY OWNER ~~Thomas E. Donaldson~~ Estornin, Steven

ADDRESS 8316 Old Frederick Road, Ellicott City, Md. 21043 Phone: 465-4623

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

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.

INLET PIPE 3 1/2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 13 FT. BELOW ORIGINAL GRADE.

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 156 FT. FROM front LOT LINE AND 94 FT. FROM left LOT LINE AS SEEN WHEN

BUILDING PERMIT SIGNED Old Frederick Road.

AND RETURNED

8-20-03 B 00143682-DECK

PLANS APPROVED BY Raymond Hodges DATE 10/27/78

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 PLACING GRAVEL IN TRENCH.

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

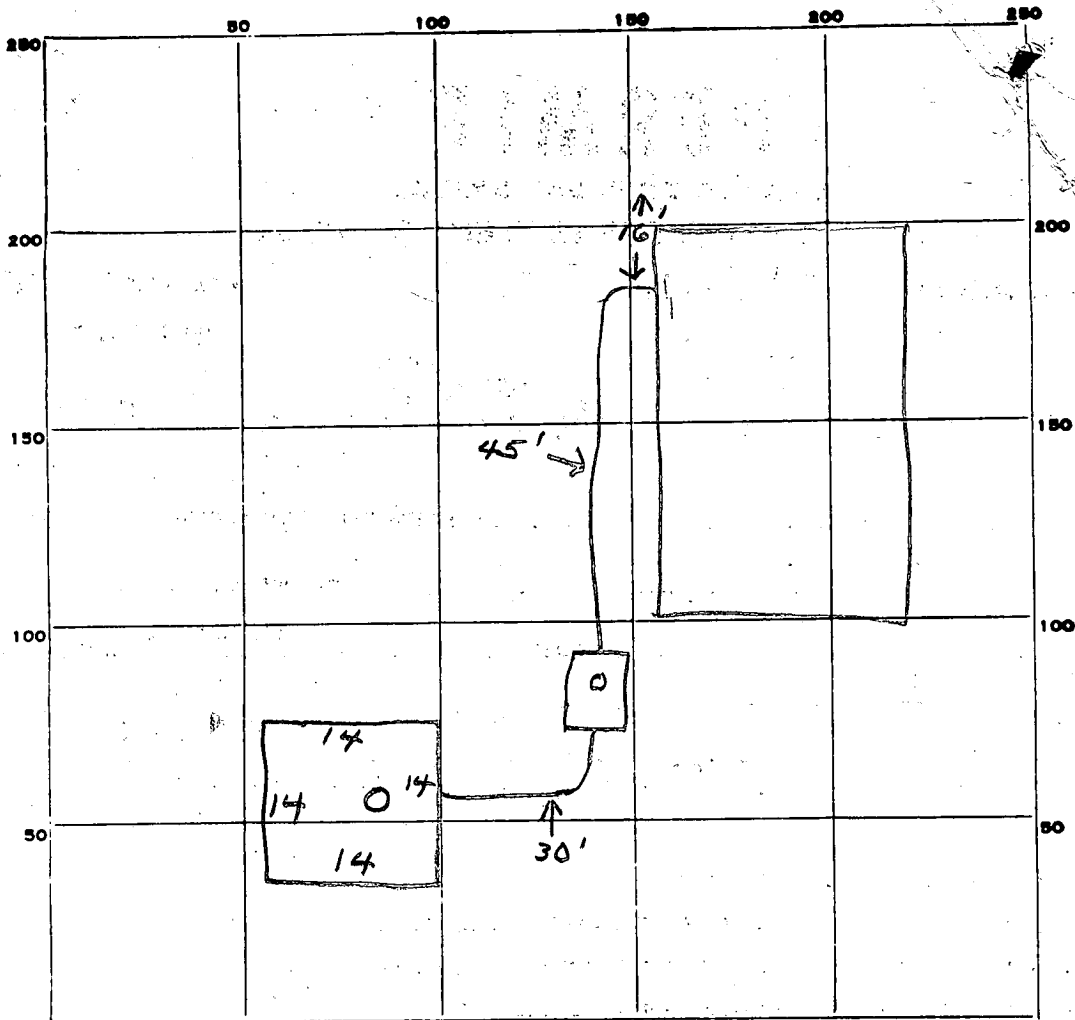
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

A 28909



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ ✓

CLEANOUTS _____

ST / DW
~~AND RETURNED~~ *temporarily*
~~BUILDING PERMITTED~~

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 56 FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA 448 SQ. FT.

REMARKS

7/26/79 OK to cover all work. J

DATE SYSTEM APPROVED

7/26/79

INSPECTOR

J. Stayer

APPLICATION

A 28909

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 2nd

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DATE 9/21/78

P.O. BOX 476, ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 465-5000, EXT. 356

SEE ATTACHED PAPER FOR SPECIFICATIONS

Preled
10/10/78 cancelled
10/27/78 9:30 A.M.
10/27/78 1:30 P.M.

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 Thomas E. Donaldson

ADDRESS 8316 Old Frederick Rd., Ellicott City PHONE 465-4623

PROPERTY LOCATION:

SUBDIVISION n/a LOT NO. n/a

ROAD AND DESCRIPTION 8320 Old Frederick Road, Ellicott City, Md. 21043

SIZE OF LOT 3.42 acres TYPE BLDG. Residential, 3
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 Thomas E. Donaldson

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

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/27/78 PERC OK HOLD FOR PLAT

12/1/78 DM said OK for H.O. to sign plat

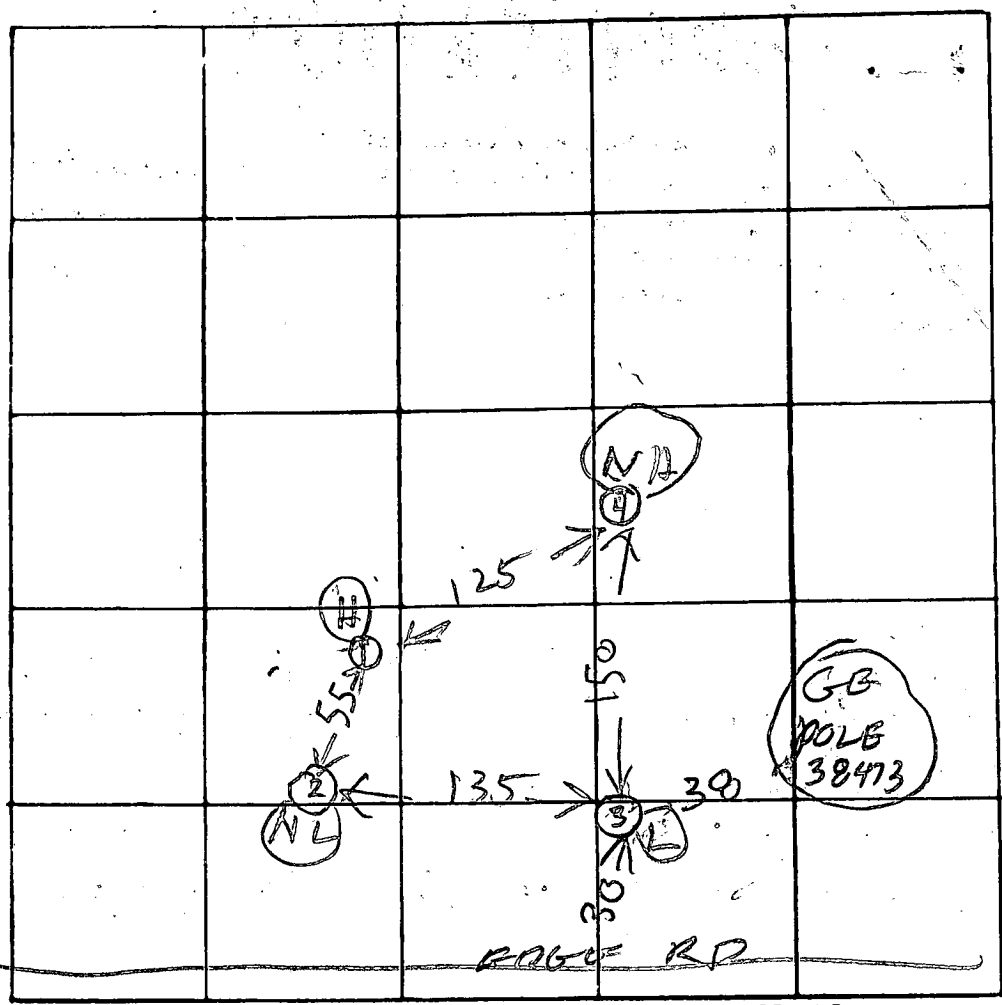
THIS IS NOT A PERMIT

①
ALL SAND

②
ALL SAND

③
ALL SAND

④
ALL SAND



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

ROAD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/27/78	1D	13	150	151	151	152	1	HIGHEST
	1S	3 1/2	148	150	150	154	4	
	2S	3 1/2	155	156	156	157	1	NEXT LOW
	2D	12	156	157	157	159	2	
	3S	3 1/2	202	204	204	210	6	LOWEST
10/27/78	3D	12 1/2	204	206	206	210	4	
	4V	12	ALL SAND					NEXT HIGHER

REMARKS Center Location & Elevation of Hole

TYPE OF SOIL _____
TESTED BY R HODGES

ALSO PRESENT: R BARTHA & CO
TOM DONALDSON OWNER

B 1	5785	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL	WRA PERMIT NUMBER 40753133 FILL IN THIS FORM COMPLETELY
-----	-------------	-----------------------------	--	---

DATE RECEIVED (WRA USE ONLY) 3/30/79 1:30 P.M.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">OWNER</td> <td style="width:40%; text-align:center;"><u>DODALDSON</u></td> <td style="width:40%; text-align:center;"><u>THOMAS F</u></td> </tr> <tr> <td></td> <td style="font-size: 8pt;">COL 15 LAST NAME</td> <td style="font-size: 8pt;">FIRST NAME COL. 34</td> </tr> <tr> <td>STREET OR RFD</td> <td colspan="2" style="text-align:center;"><u>105 FITE CT APT 202</u></td> </tr> <tr> <td></td> <td style="font-size: 8pt;">COL 36</td> <td style="font-size: 8pt;">COL. 55</td> </tr> <tr> <td>POST OFFICE</td> <td colspan="2" style="text-align:center;"><u>REISTERSTOWN MD 21136</u></td> </tr> <tr> <td></td> <td style="font-size: 8pt;">COL 57</td> <td style="font-size: 8pt;">COL. 76</td> </tr> </table>	OWNER	<u>DODALDSON</u>	<u>THOMAS F</u>		COL 15 LAST NAME	FIRST NAME COL. 34	STREET OR RFD	<u>105 FITE CT APT 202</u>			COL 36	COL. 55	POST OFFICE	<u>REISTERSTOWN MD 21136</u>			COL 57	COL. 76
OWNER	<u>DODALDSON</u>	<u>THOMAS F</u>																	
	COL 15 LAST NAME	FIRST NAME COL. 34																	
STREET OR RFD	<u>105 FITE CT APT 202</u>																		
	COL 36	COL. 55																	
POST OFFICE	<u>REISTERSTOWN MD 21136</u>																		
	COL 57	COL. 76																	

B 1	CONTINUED	DRILLER INFORMATION
1 2 3 (SEQ. NO.) 6		
DATE	<u>1/31/79</u>	LICENSE NUMBER
	77	<u>209</u>
	80	
FIRST NAME	<u>HOWARD</u>	DRILLER LAST NAME
SIGNATURE	<i>Howard D. Hood</i>	

B 3	LOCATION OF WELL
1 2 3 (SEQ. NO.) 6	
COUNTY	<u>HOWARD</u>
	DO NOT ABBREVIATE COUNTY NAME
SUBDIVISION	<u>4443</u>
SECTION	<u>46</u>
LOT	<u>48</u>
NEAREST TOWN	<u>Hollofield</u>
	M I
MILES FROM TOWN (ENTER 0 IF IN TOWN)	<u>2</u>
	78 77 76

B 2	WELL INFORMATION
1 2 3 (SEQ. NO.) 6	
MAXIMUM PUMPING RATE (GALLONS PER MINUTE)	<u>5</u>
	8 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)	<u>300</u>
	14 20
USE FOR WATER (CIRCLE APPROPRIATE BOX)	
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	
<input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION	
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.	
<input type="checkbox"/> MUNICIPAL WATER SUPPLY	} MUST HAVE STATE HEALTH DEPT. APPROVAL
<input type="checkbox"/> PRIVATE WATER COMPANY	
<input type="checkbox"/> TEST	

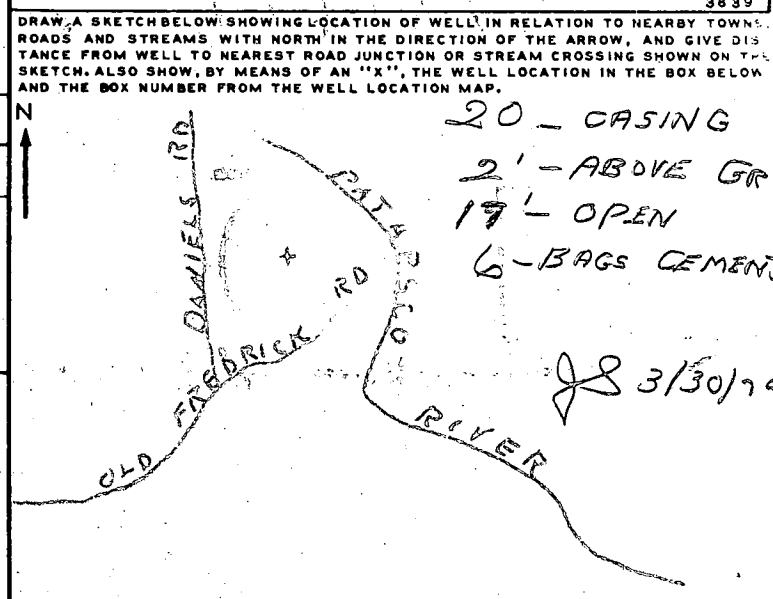
B 4	DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)		
1 2 3 (SEQ. NO.) 6			
<input type="checkbox"/> NORTH	<input type="checkbox"/> EAST	<input type="checkbox"/> NE NORTHEAST	<input type="checkbox"/> SE SOUTHEAST
<input checked="" type="checkbox"/> SOUTH	<input type="checkbox"/> WEST	<input type="checkbox"/> NW NORTHWEST	<input type="checkbox"/> SW SOUTHWEST
NEAR ROAD	<u>320-OLD FREDERICK</u>		
	NORTH	SOUTH	EAST
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)	<input checked="" type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> E
	32	32	32
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)	<u>200</u>		
	34	37	38 39

APPROXIMATE DEPTH OF WELL	<u>300</u>	24 28 FEET
APPROXIMATE DIAMETER OF WELL	<u>6</u>	(NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)		
<input checked="" type="checkbox"/> BORED (OR AUGERED)	<input type="checkbox"/> JETTED	<input type="checkbox"/> DRIVEN
<input type="checkbox"/> AIR-ROTARY	<input type="checkbox"/> AIR-PERCUSSION	<input type="checkbox"/> ROTARY (HYDRAULIC ROTARY)
<input type="checkbox"/> CABLE	<input type="checkbox"/> REVERSE-ROTARY	<input type="checkbox"/> DRIVE-POINT
OTHER (DESCRIBE)		

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)	
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY	
<input type="checkbox"/> 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	ENGINEER REVIEW DISTRICT NO.
54	63
FORCE	CONDITIONS
67 68	70 71 72 73 74 75 76 77 78 79



B 4	CONTINUED	HEALTH DEPARTMENT APPROVAL
1 2 3 (SEQ. NO.) 6		
STATE HEALTH (CIRCLE BOX)	<u>Howard</u>	<u>MD20005</u>
	COUNTY NAME	COUNTY NO.
DATE	<u>02 05 79</u>	
	APPROVED BY	
	<u>Fred Promelt, Sanitarian</u>	

B 5	SPECIAL CONDITIONS 8-63 (WRA USE ONLY)												
1 2 3 (SEQ. NO.) 6													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">NORTH COORDINATE</td> <td style="text-align:center;"><u>523000</u></td> </tr> <tr> <td></td> <td style="font-size: 8pt;">50 51 52 53 54 55</td> </tr> <tr> <td>EAST COORDINATE</td> <td style="text-align:center;"><u>0855000</u></td> </tr> <tr> <td></td> <td style="font-size: 8pt;">57 58 59 60 61 62 63</td> </tr> <tr> <td>ELEVATION AT WELL HEAD (FEET)</td> <td style="text-align:center;"><u> </u></td> </tr> <tr> <td></td> <td style="font-size: 8pt;">65 66 67 68</td> </tr> </table>		NORTH COORDINATE	<u>523000</u>		50 51 52 53 54 55	EAST COORDINATE	<u>0855000</u>		57 58 59 60 61 62 63	ELEVATION AT WELL HEAD (FEET)	<u> </u>		65 66 67 68
NORTH COORDINATE	<u>523000</u>												
	50 51 52 53 54 55												
EAST COORDINATE	<u>0855000</u>												
	57 58 59 60 61 62 63												
ELEVATION AT WELL HEAD (FEET)	<u> </u>												
	65 66 67 68												

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

833-4048 465-4188 HEALTH A28909

44
25 B

3.42 AC. ±

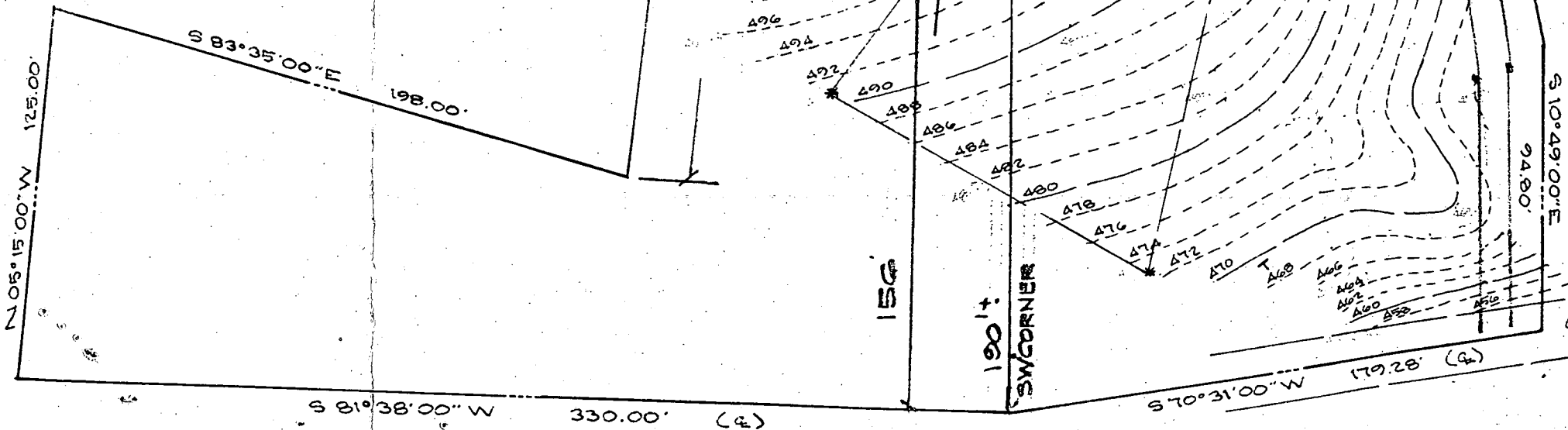
1 STORY - FULL BSMT.
BRICK & FRAME

NO SCALE

DRY WELL DATA
EX. GR. 498.00
FIN. GR. 498.00
INV. IN. - 3.5' = 494.50

SEPTIC TANK DATA
EX. GR. 499.00
FIN. GR. 499.00
INV. IN. 495.20
INV. OUT 494.90
INV. OF SEWER FROM HOUSE = 495.80

A-17-79 plan & location 4/16/1979
JF



OLD FREDERICK RD.





1 STORY FULL BENT
WICK & FRAME
NO SCALE

DRY WELL DATA
EX. GR. 498.00
FIN. GR. 498.00
INV. IN 404.00

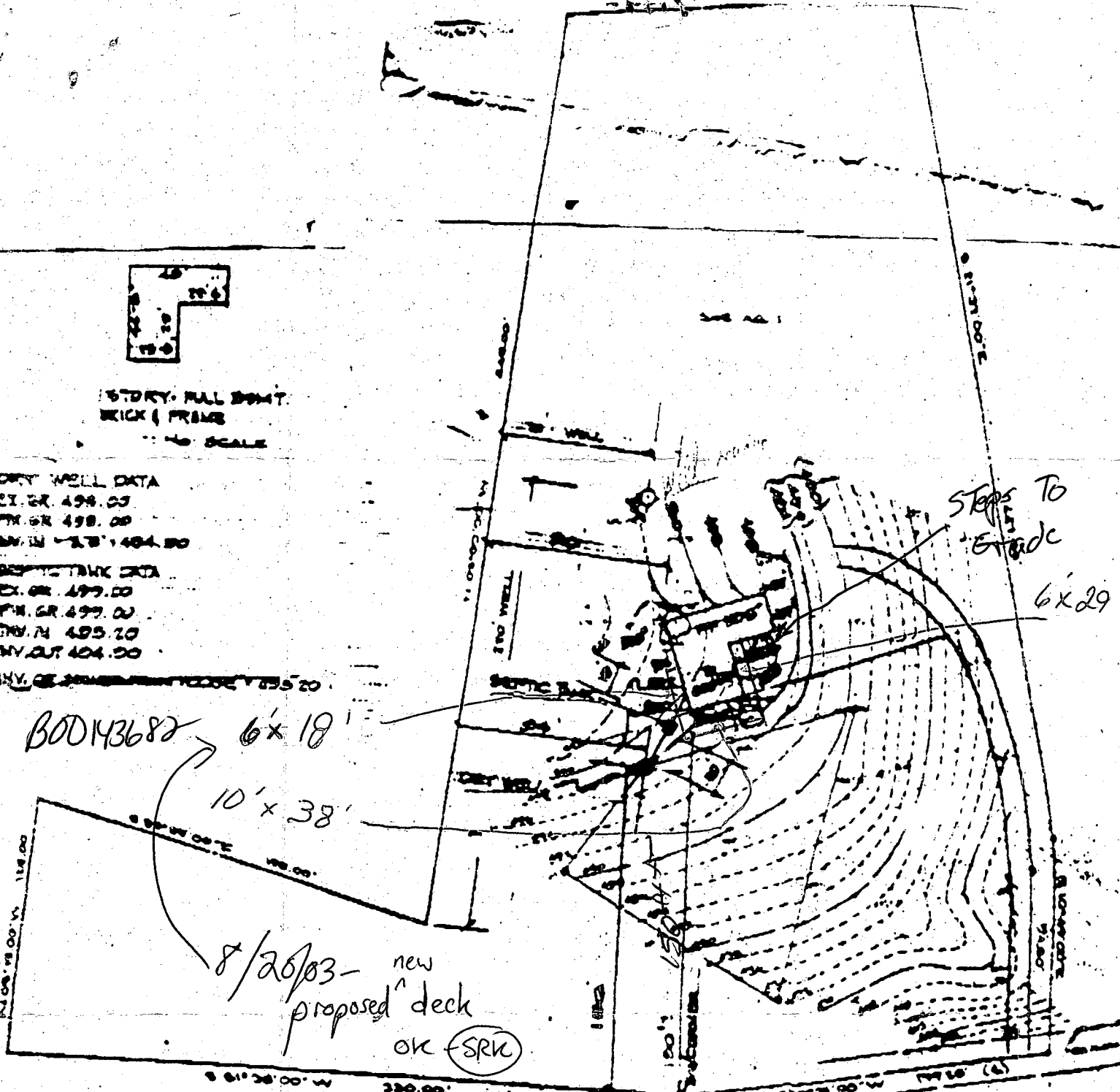
SEPTIC TANK DATA
EX. GR. 499.00
FIN. GR. 499.00
INV. IN 495.20
INV. OUT 404.00

INV. OF SEWER MAIN CODE 495.20

BOD 143682
6' x 18'
10' x 38'

8/20/03 - new
proposed deck
OK (SPK)

Steps To
Staircase
6' x 29'



8 61' 38" 00" W 330.00' (6)
120' 0" 00" W 175.00' (6)

OLD FREDERICK RD



DAVIS ASSOCIATES, INC.
JOSEPH SOLAGE
LARGO, MARYLAND 21044

TOM CONALSON PROPERTY
0910 OLD FREDERICK RD.
2ND ELEC. DIST. HOWARD CO., MD.
7/9/03 SCALE 1" = 20'
DEED. 088/088, TOWN 10, P. 04