

179  
12/13/79  
please

approved  
3-3-83  
C. W. [unclear]

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

P 30422

A 28958

HOWARD COUNTY

03-302008

ELLICOTT CITY

DISTRICT 3rd.

INDEX

DATE 12/13/79

Bud Arnold Septic Tank Service

IS PERMITTED TO INSTALL  ALTER

ADDRESS Woodbine, Maryland 21797 PHONE 795-1285

SUBDIVISION Triadelphia Farms, Section 11 ROAD ~~13310 Triadelphia Road~~ LOT 3-C

PROPERTY OWNER JOYCE + DANIEL CHRISTIANSON James Alexander (13312 Hunt Ridge Road)

ADDRESS 7910 James Avenue, Ellicott City, Md. 21043

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 125 SQ. FT. per bedroom

INLET PIPE 3 1/2 FT. BELOW ORIGINAL GRADE, MAXIMUM DEPTH 10 1/2 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 130 FT. FROM rear LOT LINE AND 45 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM

Minimum absorbent side-wall area is 375 sq. ft. for system.

NOTE: OKAY TO USE TRENCH OFF DRY WELL TO MAKE UP ABSORBENT SIDEWALL AREA IN SYSTEM LEAVE 5 FT. EARTH BUFFER BETWEEN TRENCH AND DRY WELL. TRENCH TO FOLLOW CONTOUR OF THE LAND.

PLANS APPROVED BY Fred Frommelt DATE 12/13/79

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

**BUILDING PERMIT SIGNED AND RETURNED**

INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

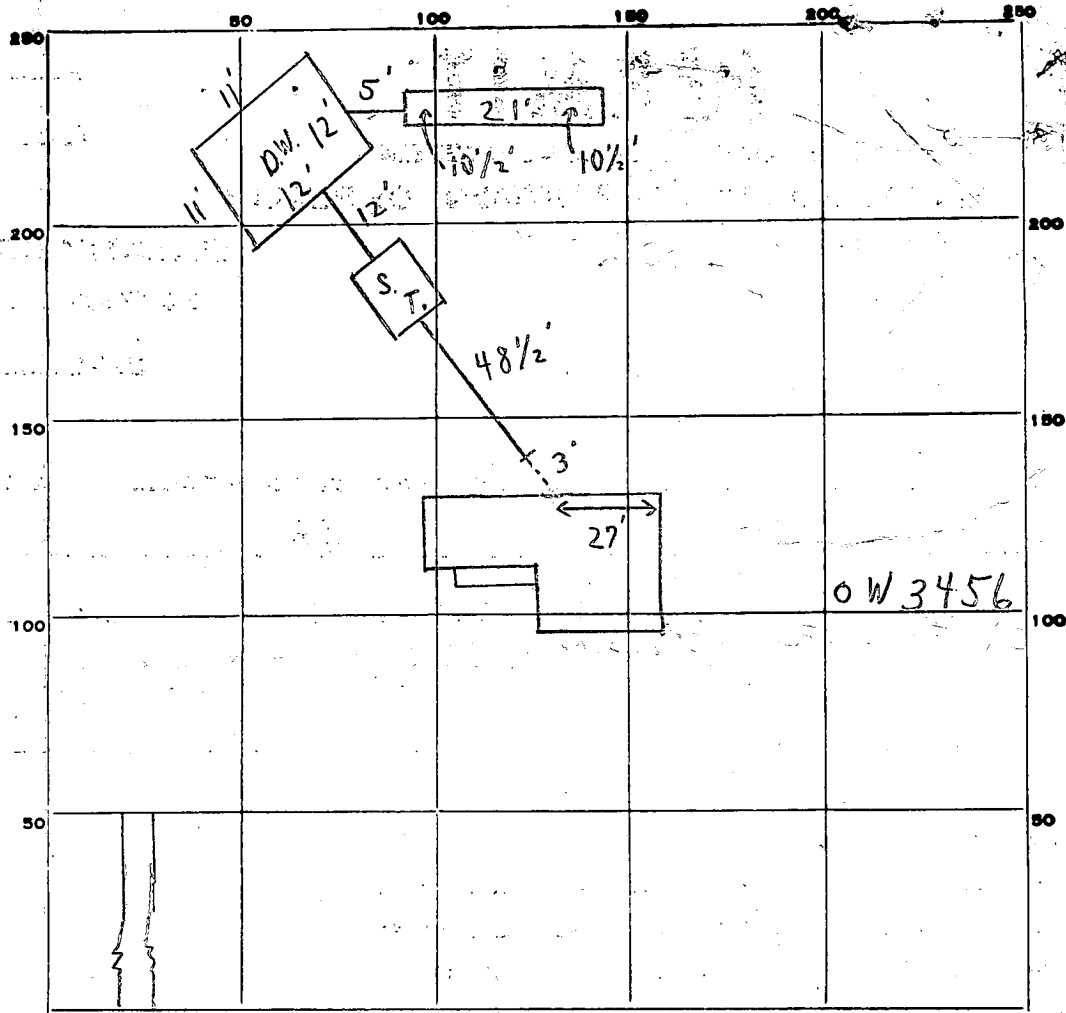
HD - 23  
5-29-03 800142145 - DECK  
4-29-04 800147630 - KITCHEN EXT.

BLD AND RETURNED SIGNED  
Serial # 16344  
Garage

28958

Date: \_\_\_\_\_

From: \_\_\_\_\_



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

UNNAMED ROAD

PERMIT CARD

S.T. | D.W.

SEPTIC TANK, LEVEL

CLEANOUTS  |

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH 10 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 7 1/2 IN. TOTAL LENGTH 21 FT. 158'

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, INSIDE DIAMETER 46 FT. DEPTH BELOW INLET 7 FT. 32 2'

ABSORBENT AREA 469 SQ. FT. OF DRY WELL 10 1/2'

REMARKS 12/18/79 OK TO COVER 5' FROM HOUSE TO 5' OF DRY WELL; OK FOR STONE IN TRENCH; DRY WELL NOT FINISHED.

12/21/79 NEED HOUSE CONNECTION; OK TO COVER TO 5' OF HOUSE FROM TRENCH.

AND RETURNED  
BUILDING PERMIT DIVISION

3-3-83 HOUSE CONNECTION FUNCTIONAL C.W.

DATE SYSTEM APPROVED 3-3-83

INSPECTOR C. Williams

# APPLICATION

3C

A 28958

## SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE 3rd

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

DISTRICT 10/2/78

DATE \_\_\_\_\_

*Septic tank 3-1000 gal.  
4-1250 gal.*

*drywell  
locate 130' from rear & 45' from left*

*inlet max. depth 3 1/2' below orig. grade  
total max. depth 10 1/2' " " "*

*125 # per bedroom @ min. 375 # for system*

*F.F.*

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 ~~Dr. Richard Hemphill~~ James Alexander

ADDRESS c/o Boender Associates, Inc., Town & Country Prof. Bldg. 7910 James Ave., E.C. 21043 PHONE 465-7777 461-1536

PROPERTY LOCATION: Triadelphia Farms, Section II LOT NO. 3-C

SUBDIVISION 13310 Triadelphia Road

ROAD AND DESCRIPTION \_\_\_\_\_

SIZE OF LOT 1 acre TYPE BLDG. SFD 3 or 4 NUMBER OF BEDROOMS \_\_\_\_\_

IF NOT SINGLE RESIDENCE DESCRIBE NA

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

SIGNATURE OF APPLICANT /s/ Jack Boender

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

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

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

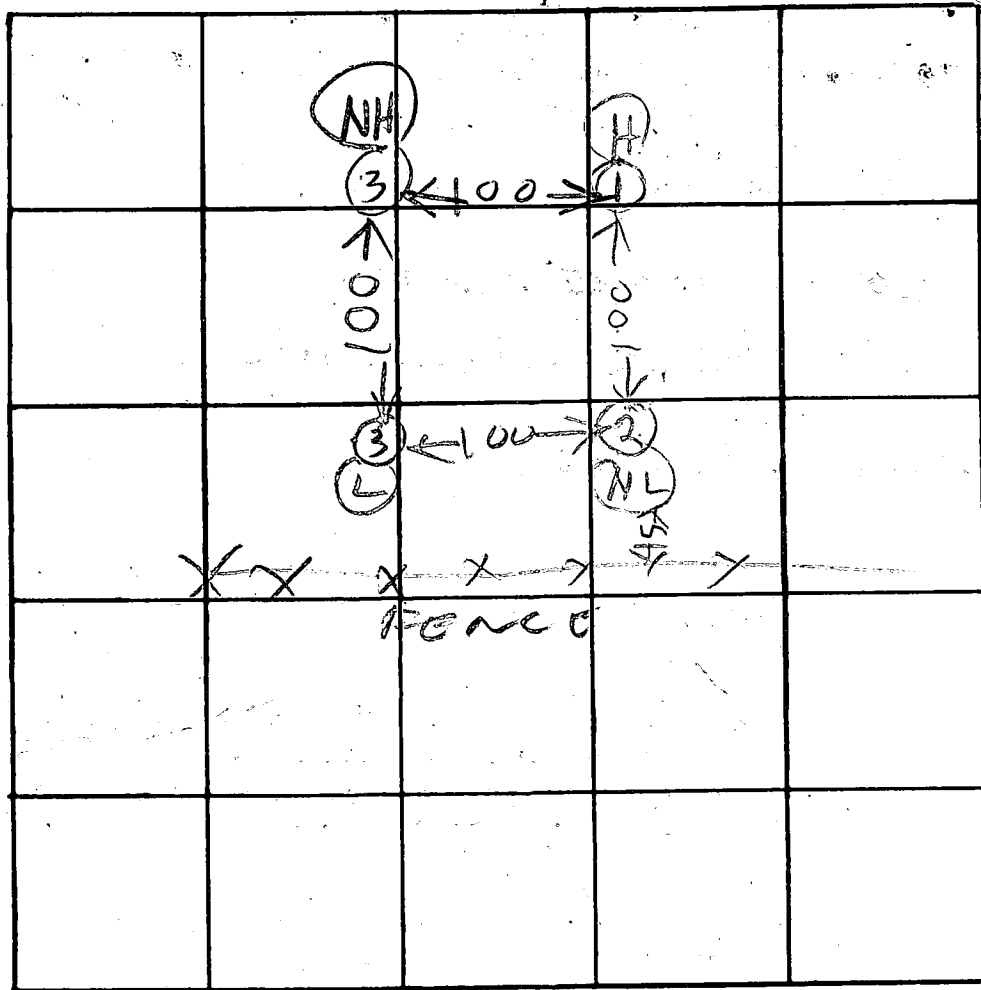
REASONS FOR REJECTION OR HOLDING 10/10/78 PERC OK HOLD PER

CERTIFIED WORK MEET ORU

BLDG. PERMIT SIGNED AND RETURNED 11/20/79 serial # 42006

# THIS IS NOT A PERMIT

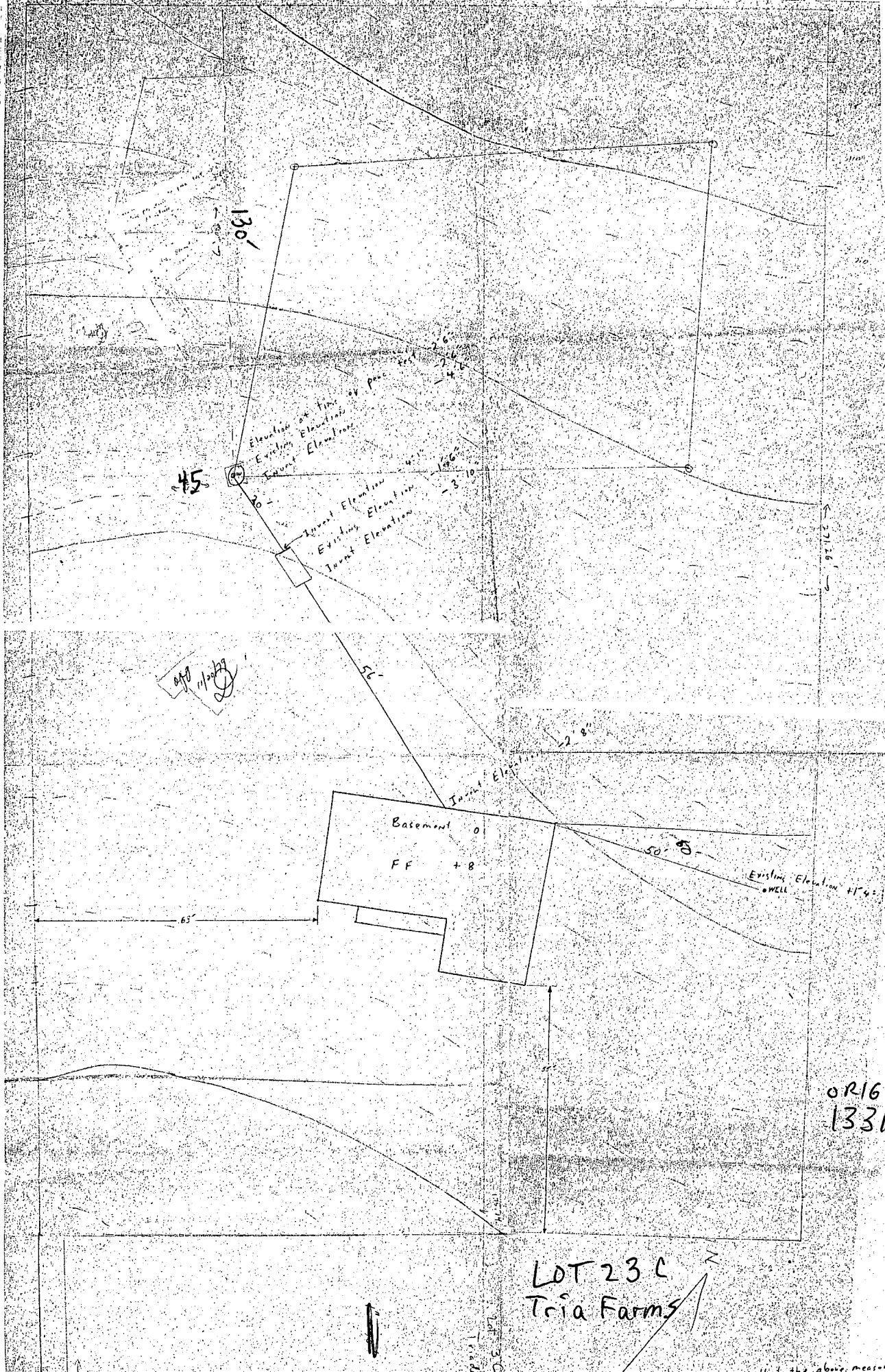
3c



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE     | TEST NO. | DEPTH | PRE-WET  |      | TEST - 1" DROP |      | TIME |
|----------|----------|-------|----------|------|----------------|------|------|
|          |          |       | START    | STOP | START          | STOP |      |
| 10/10/78 | 1 S      | 4     | 222      | 224  | 224            | 227  | 3    |
| 10/10/78 | 1 D      | 12    | 222      | 229  | 227            | 234  | 7    |
| 10/10/78 | 2 S      | 3     | 224      | 226  | 226            | 230  |      |
|          | 2 D      | 1 1/2 | 224      | 230  | 230            | 234  |      |
|          | 3 S      | 4 1/2 | 238      | 239  | 239            | 240  | 1    |
|          | 3 D      | 12    | 239      | 241  | 241            | 243  | 2    |
|          | 4 V      | 11    | ALL SAND |      |                |      |      |
|          |          |       |          |      |                |      |      |
|          |          |       |          |      |                |      |      |
|          |          |       |          |      |                |      |      |

REMARKS BACK HOE BROKE & COULD NOT DIG 14 1/2  
 TYPE OF SOIL RHODGES  
 D BLAKE  
 JORSEY  
 NEBBIE



45

130'

Elevation at time of purchase  
 Existing Elevations  
 Source Elevations

Inward Elevation 4.11"  
 Existing Elevation 1.96"  
 Turnout Elevation -3.10"

off 11/10/17

Basement 0  
 FF + 8

Existing Elevation +1.4"  
 WELL

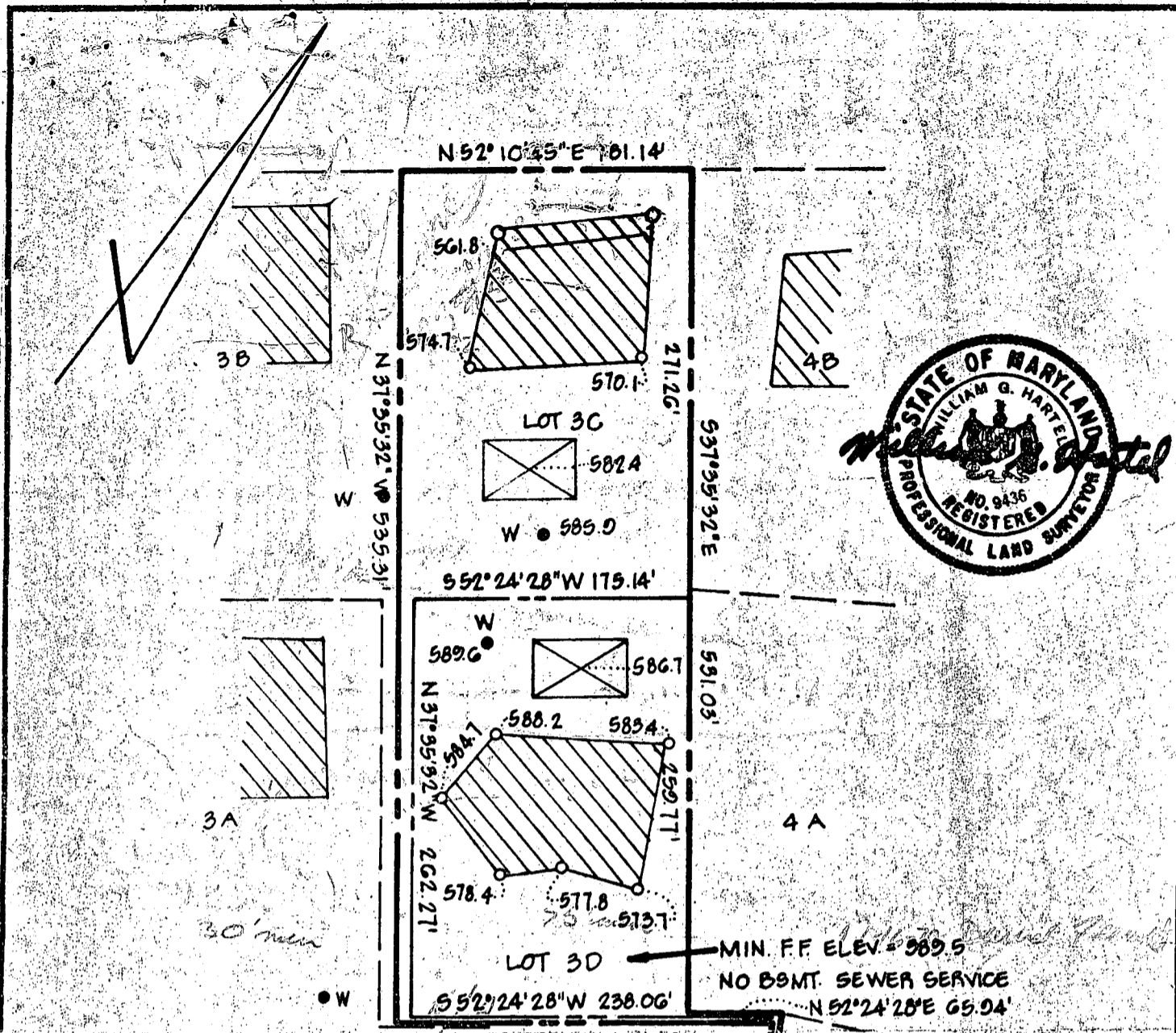
1-30

ORIG ADDR:  
 13310 Tria. Rd

LOT 23 C  
 Tria Farms

I certify that the above measurements  
 and elevations are actual and  
 correct for this property

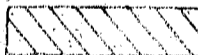
1-30



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.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS.  
HOWARD COUNTY HEALTH DEPARTMENT

*Joseph E. Blum* 8-20-79  
COUNTY HEALTH OFFICER DATE

 THIS AREA INDICATES A PRIVATE SEWAGE EASEMENT OF APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES; THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM.

NOTES:

1. PERCOLATION TEST HOLES SHOWN HEREON AND INDICATED THUS (O) HAVE BEEN FIELD LOCATED BY TRANSIT STADIA METHOD BASED ON STAKE OUT OF PROPERTY CORNERS BY TRANSIT STADIA METHOD AT THE TIME OF TESTS.
2. VERTICAL DATUM IS ASSUMED.

TITLE: **PERCOLATION TEST PLAT**

PROJECT: **LOTS 3C AND 3D TRIADELPHIA FARMS II**

LOCATION: **38D ELECTION DISTRICT HOWARD COUNTY, MD.**

DATE: **AUG. 1979** DESIGN BY: **J.B.** DRAWN BY: **J.B.** CHECKED BY: **W.G.H.**

SCALE: **1" = 100'** JOB NO.: **77228** DRAWING NO.: **1 OF 1**

**boenden associates**

**engineers  
surveyors  
planners**

C 1 5576 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

DATE RECEIVED (WRA USE ONLY)

DATE WELL COMPLETED 11/9/79

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 COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DEPTH OF WELL 200

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-3456

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 40

OWNER Alexander LAST NAME James FIRST NAME

STREET OR RFD 710 James Ave. POST OFFICE Ellicott City

WELL DESCRIPTION

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  |                        |
| Topsoil  | 0    | 2   |                        |
| Shaley   | 2    | 22  |                        |
| Brown Slate                                      | 22   | 28  |                        |
| Shaley   | 28   | 30  |                        |
| Brown Slate                                      | 30   | 36  |                        |
| Blue Slate                                       | 46   | 53  | ✓                      |
| Brown Slate                                      | 53   | 57  |                        |
| Blue Slate                                       | 57   | 200 |                        |

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  YES  NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX)

CEMENT  M BENTONITE CLAY  B  C

NO. OF BAGS 12 NO. OF POUNDS 1200

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM 0 FT. TO 39 FT.

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL  S  T CONCRETE  C  O

PLASTIC  P  L OTHER  O  T

MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 45

OTHER CASING (IF USED)

DIAMETER (INCH) DEPTH (FEET) FROM TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL  S  T BRASS OR BRONZE  B  R OPEN HOLE  H  O

PLASTIC  P  L OTHER  O  T

DEPTH (NEAREST WHOLE FOOT)

1 HO 43 FROM TO 200

2

3

SLOT SIZE 1. 2. 3.

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)

TELESCOPE CASING LOG INDICATOR

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 2

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 3

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 40 (NEAREST FOOT)

WHEN PUMPING 200 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)

AIR  A PISTON  P TURBINE  T

CENTRIFUGAL  C ROTARY  R OTHER (DESCRIBE BELOW)  O

JET  J SUBMERSIBLE  S

PUMP INSTALLED

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

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)  YES  NO

CAPACITY:

GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE  + BELOW  -

LAND SURFACE (NEAREST FOOT) 2

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).

CIRCLE APPROPRIATE BOXES

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 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.

DRILLERS NAME

(PLEASE PRINT) George F. Eastwood

SIGNATURE George F. Eastwood

**B 1** 3739 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**  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) **FILL IN THIS FORM COMPLETELY**

**DATE RECEIVED (WRA USE ONLY)** 11/9/79  
**OWNER** Howard COL 15 LAST NAME FIRST NAME COL. 34  
**STREET OR RFD** 7910 COL 36 COL. 55  
**POST OFFICE** Howard COL 57 COL. 76

**B 1 CONTINUED DRILLER INFORMATION**  
**DATE** 9/26/79 **LICENSE NUMBER** 040  
**George F. Foxworth** FIRST NAME DRILLER LAST NAME  
**Signature:** George F. Foxworth

**B 3 LOCATION OF WELL**  
**COUNTY** Howard (DO NOT ABBREVIATE COUNTY NAME) 21  
**SUBDIVISION** Trindell Farm, II 42  
**SECTION** C **LOT** 2 50  
**NEAREST TOWN** Howard 71  
**MILES FROM TOWN (ENTER 0 IF IN TOWN)** 2 73 76 77 78

**B 2 WELL INFORMATION**  
**MAXIMUM PUMPING RATE (GALLONS PER MINUTE)** 5  
**AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)** 600  
**USE FOR WATER (CIRCLE APPROPRIATE BOX)**  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING, AGRICULTURE, IRRIGATION  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.  
 MUNICIPAL WATER SUPPLY } MUST HAVE STATE HEALTH DEPT. APPROVAL  
 PRIVATE WATER COMPANY  
 TEST

**B 4 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)**  
 NORTH  EAST  NORTHWEST  SOUTHWEST  
 SOUTH  WEST  NORTHWEST  SOUTHWEST  
**NEAR WHAT ROAD** Trindell Farm Rd  
**ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)**  NORTH  SOUTH  EAST  WEST  
**DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX)** 500 34 37 38 39

**APPROXIMATE DEPTH OF WELL** 150 FEET  
**APPROXIMATE DIAMETER OF WELL** 6 (NEAREST INCH)  
**METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)**  
 BORED (OR AUGERED)  JETTED  DRIVEN  
 AIR-ROTARY  AIR-PERCUSSION  ROTARY (HYDRAULIC ROTARY)  
 CABLE  REVERSE-ROTARY  DRIVE-POINT  
**OTHER (DESCRIBE)**

**DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.**

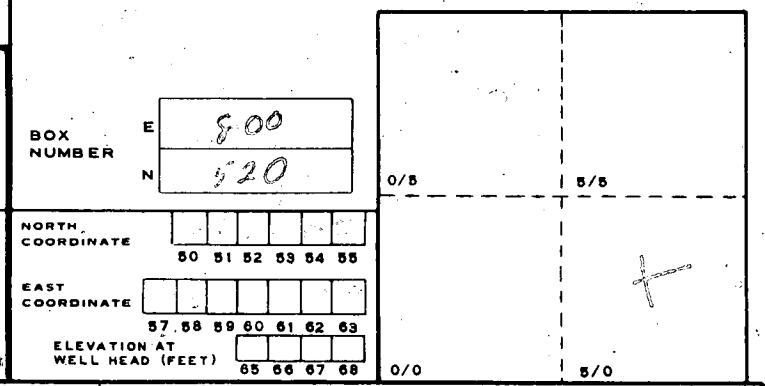
**N**  
45' CASING  
2' ABOVE GR.  
39' OPEN  
12 BAGS CEMENT

11/9/79  
Filled dry hole (1)

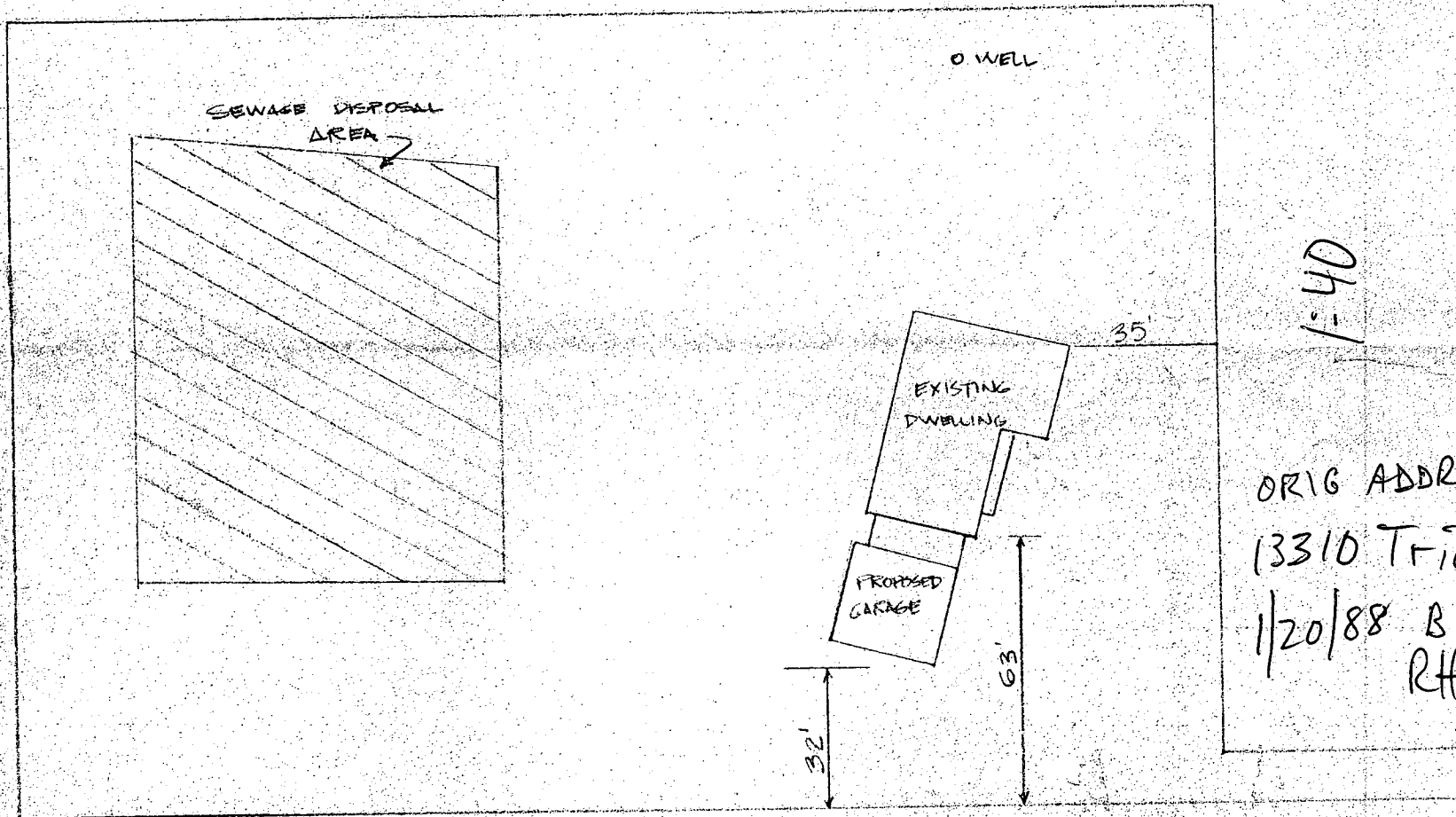
**REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL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

**NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)**  
**APPROPRIATION PERMIT NUMBER** 800 **ENGINEER REVIEW DISTRICT NO.** 520  
**FORCE** 800 **WRITE INITIALS IN BOX** **CONDITIONS** 800  
**APPROPRIATION PERMIT NUMBER** 800 **ENGINEER REVIEW DISTRICT NO.** 520

**B 4 CONTINUED HEALTH DEPARTMENT APPROVAL**  
**STATE HEALTH (CIRCLE BOX)** S **COUNTY NAME** Howard **COUNTY NO.** A28958  
**DATE** 9 28 79  
**APPROVED BY** Donald W. Monaghan, Sanitarian



**B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)**



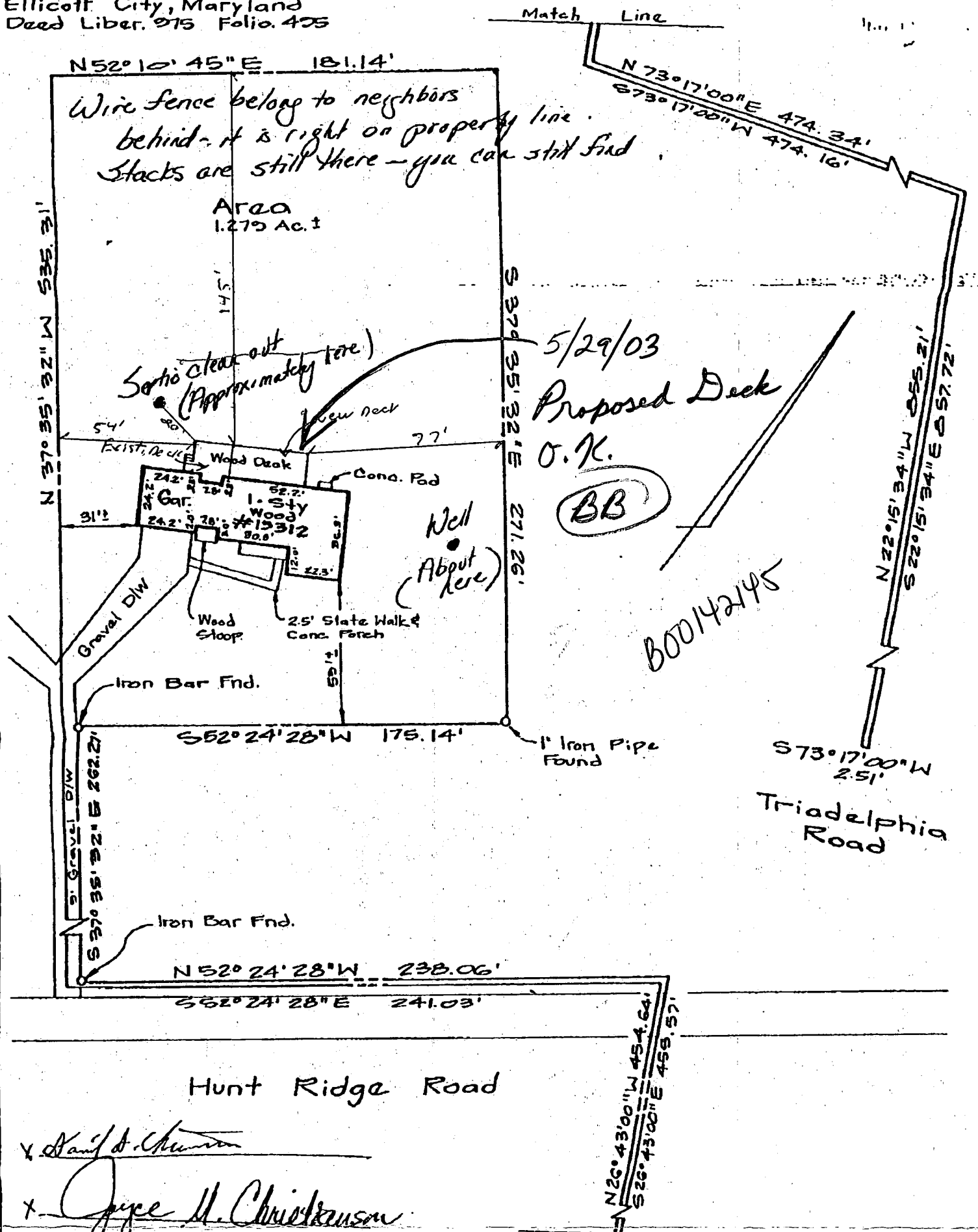
ORIG ADDR  
13310 Triad Rd  
1/20/88 BP OK  
RH

# WELL LOCATION / CLEAN OUT SEPTIC / FENCE - LAND BEYOND?

PROPERTY KNOWN AS: Property of

THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

Jaines Craw Alexander &  
Rosemary Keene Alexander.  
Ellicott City, Maryland  
Deed Liber. 075 Folio. 405



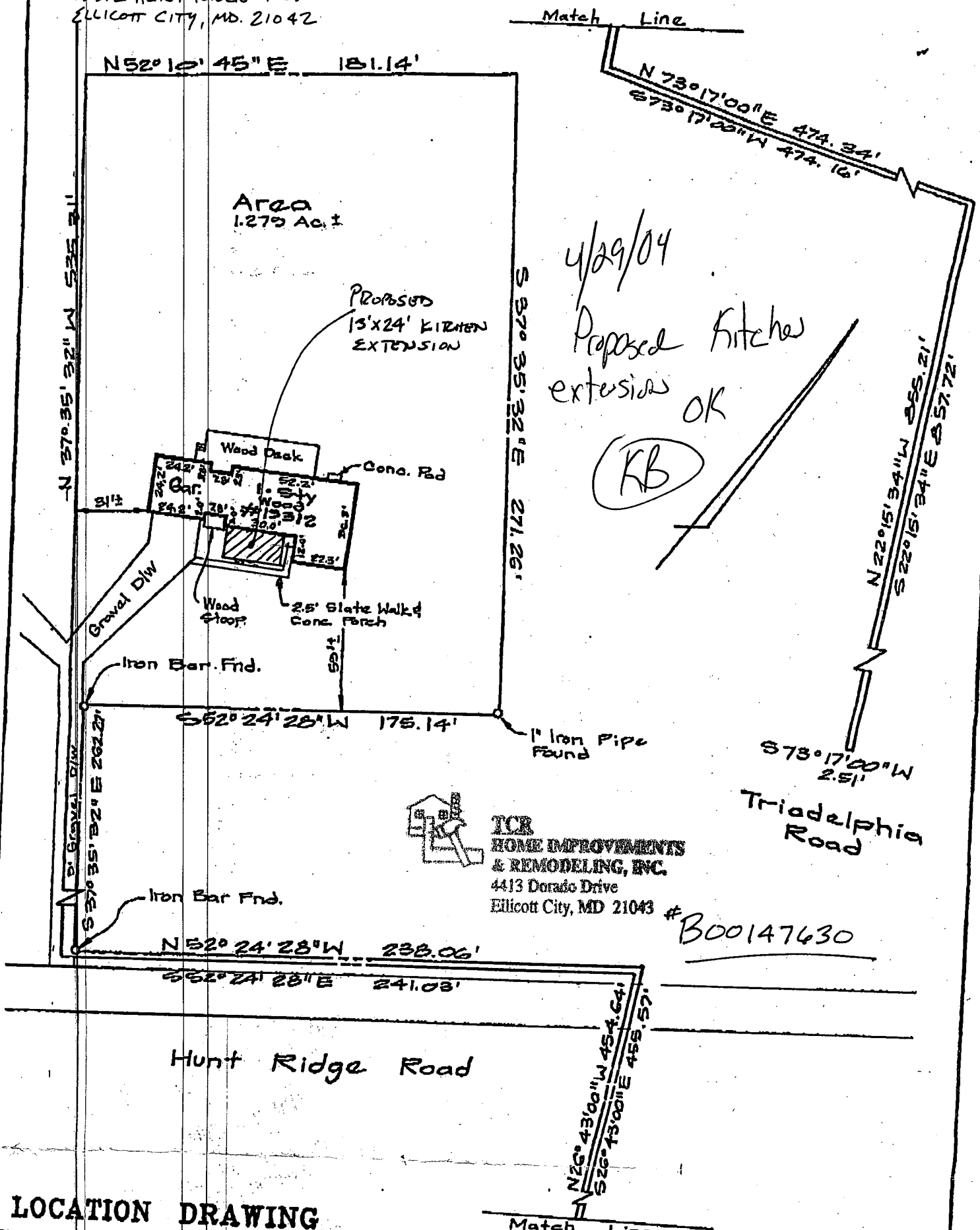
x *Kauf & Christianson*

x *Clyde H. Christianson*

PROPERTY KNOWN AS: Property of

THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

DANIEL & JOYCE CHRISTIANSON  
13312 HUNT RIDGE RD.  
ELlicott CITY, MD. 21042



ICR HOME IMPROVEMENTS & REMODELING, INC.  
4413 Dorado Drive  
Ellicott City, MD 21043

# B00147630

### LOCATION DRAWING

#### CERTIFICATION

This is to certify that I have surveyed the property known as: 13312 Hunt Ridge Road

The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.

#### SEAL



SCALE: 1"=50' DATE: 7/27/99

LDE Inc.

9250 Rumsey Road Suite 106  
Columbia, Maryland 21045

(410) 715-1070 (Balt.)  
(301) 596-3424 (Wash.)  
(410) 715-9540 (Fax)