

10/9/86
10/16/86
ANYTIME

11/10/86
ANYTIME 04-336275

~~House Connected to Road~~

PERMIT

P 37523
A 23904

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
~~X 992-2330 X~~
461-9933

ELLICOTT CITY
DISTRICT 4th
DATE 8/27/86

INDEXED

Ralph Jones IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE _____

SUBDIVISION Robert Warfield Property ROAD 2980 Duvall Road LOT 3

PROPERTY OWNER Ralph Jones

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 187 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 187 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the first trench 380 feet down left (547.24') lot line and 30 feet off left (547.24') lot line as seen when facing property from Ed. Warfield Road. Run trench(es) along level contour towards right (432.09') and/or back (400.00') lot lines.

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

11/10/86 WPI; Pitress 40' below grade; well line 36-42" below grade; NO INSIDE WORK DONE NO PERMITS
S.H.A.

PLANS APPROVED BY Bert Nixon DATE 2/11/86

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: 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

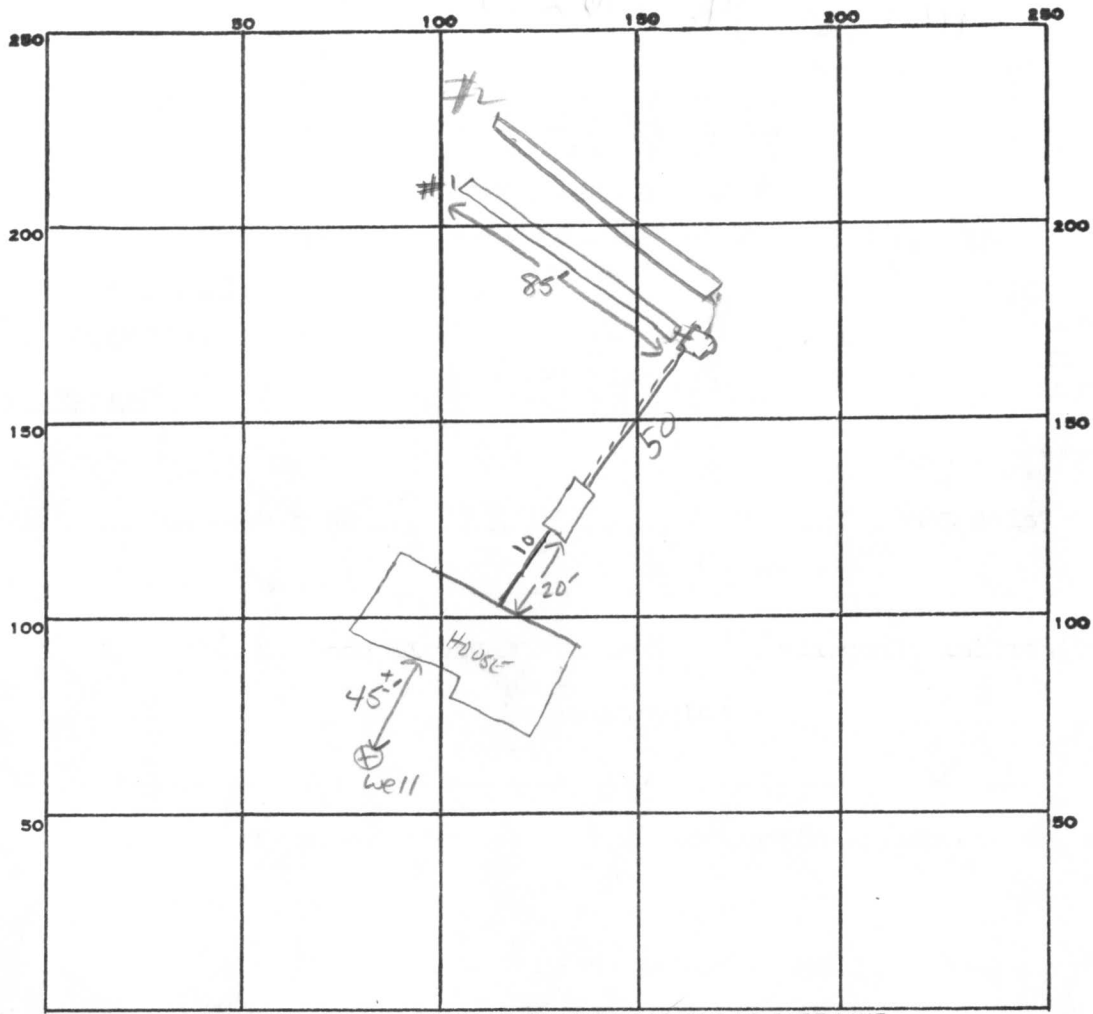
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 23904

23904



187 LF REQUIRED
2(94')

ED WATERING REL.

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Duvall Rd.

PERMIT CARD

SK

SEPTIC TANK, LEVEL 1500 GAL

CLEANOUTS O/K

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH

① 3.5-8'	② 8'
----------	------

 FT. TRENCH WIDTH 2 FT. INLET 3.5'-4" #1

GRAVEL DEPTH

① 4-4 1/2"	② 4"
------------	------

 IN. TOTAL LENGTH

① 85'	② 109'
-------	--------

 FT.

NUMBER OF TRENCHES 2 ONE SIDE WALL TOTAL BOTTOM AREA

① 340	② 436
-------	-------

 TOTAL 776

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 776 SQ. FT.

REMARKS 10/9/86 OK TO ADD STONE: 70#1 - NEED ALL PIPE WORK C/O ST + 102' ADDITIONAL TRENCH SA

10/16/86 - FIRST TRENCH O.K. - FILL 2ND TRENCH WITH STONE

& CALL COVER TANK R.I.T.

10/20/86 NO HOUSE CONNECTION S. HW

DATE SYSTEM APPROVED 11/10/86

INSPECTOR S. Abel

Fill out in triplicate.
Make \$30.00 check payable:
Howard County Health Dept. - Sanitation

4-13'
Laney

APPLICATION

A 23904

SEWAGE DISPOSAL TESTING

P _____

481/286

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT 3 B.R. 4 B.R. DISTRICT 4
ENVIRONMENTAL HEALTH SERVICES 1000 gal. septotank / 1250 gal. septotank
P O BOX 476, ELLICOTT CITY, MARYLAND 21043 DATE 9/9/76
TELEPHONE: 465-5000, EXT. 356

11/4/76
9:30

*Side wall absorption test per well system to have 140 SQ. FT. effective
3 ft. of non-porous soil. Maximum depth permitted for drywell or trench
is 9 ft. below original grade. Place the drywell 385 ft. from the front
lot line and 180 ft. from the right side line as seen when facing the
property from DUVALL ROAD. Come off drywell with cast iron pipe about 20 ft.
long and 3 ft. below grade, running towards the back part of lot, install a
"tee" to connect trench which must be placed by level ground. Call for
inspection of trench before gravel is installed.*

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 ROBERT McLANE WARFIELD

(CONTRACT PURCHASERS) BETTY AND ASBY JACKSON MILEY
ADDRESS A-E. MULLINIX RD - DAISY MD. PHONE 301-924-2102

PROPERTY LOCATION: C/O - ED WARFIELD & DUVALL RDS. - DAISY, MD.

SUBDIVISION _____ LOT NO. 3

ROAD AND DESCRIPTION _____

SIZE OF LOT 5A. TYPE BLDG. RESIDENCE
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 Robert M. Warfield

APPROVED BY Frank Skinner FOR Drywell & trench DATE 11/30/76
(KIND OF SYSTEM)

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

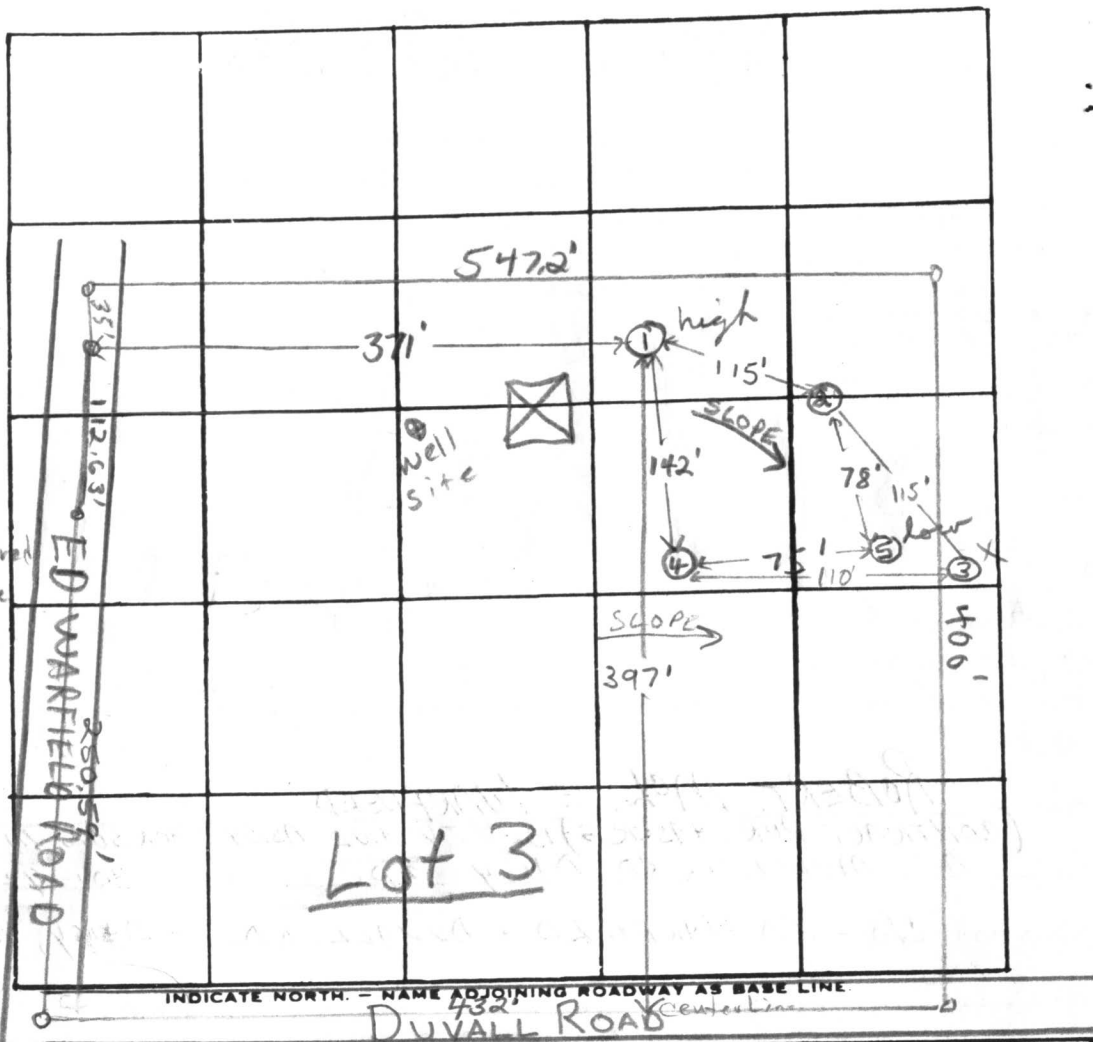
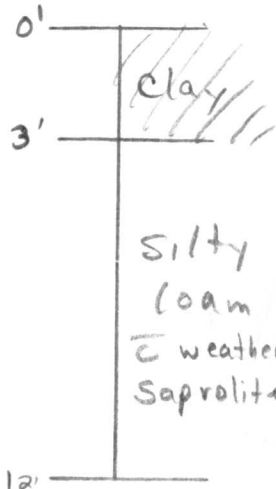
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

23904

all holes



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/4/76	1 high	4'	10:08	10:12	10:12	10:21	9min	
	1A	12'	10:09	10:10	10:10	10:14	4min	
	2	3'	10:11	10:13	10:13	10:17	4min	
	2A	12'	10:16	10:23	10:23	10:42	19min	
	3 low	3'	10:18	10:19	10:19	10:21	2min	
	3A	11 1/2'	10:24	10:49	10:49	11:20	pulled peg 11:20 3/4" drop FAILED	
	4	12'	Clay to 3' silty loam & weathered saprolite below					
	5 low	3'	11:43	11:45	11:45	11:50	5min	
	5A	11 1/2'	11:41	11:44	11:44	11:54	10min	

REMARKS ~6' gap between D#(3). System 3' → 9'

TYPE OF SOIL clay to 3' silty loam & weathered saprolite below

TESTED BY F.S. ALSO PRESENT: H. Sirk Jr.

C1 00805

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 23904

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

DATE RECEIVED

DATE WELL COMPLETED 010286

DEPTH OF WELL 240 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-1265

OWNER JONES RALPH S. last name first name STREET OR RFD DOVALL RD. TOWN DAISY SUBDIVISION WARFIELD ESTATES SECTION LOT 3

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, Brown Shale, Blue Slate, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 27 NO. OF POUNDS 2700 GALLONS OF WATER 162 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 50 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE PL Nominal diameter 6 Total depth 240

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

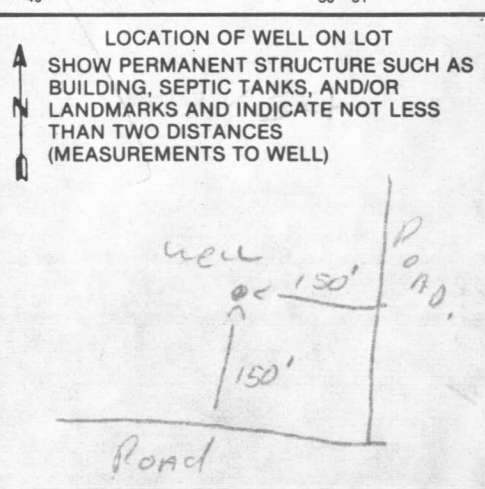
DEPTH (nearest ft.) 1 70 2 68 3 240 SLOT SIZE 1 2 3 DIAMETER OF SCREEN 56 (NEAREST INCH)

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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 6 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 53 WHEN PUMPING 160 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 (CIRCLE) 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 - below LAND SURFACE 2 (nearest foot)



- A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

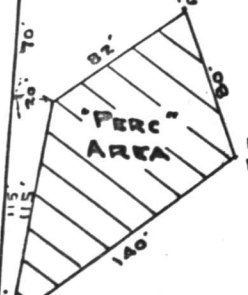
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 253 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

23904

649/66 Iron pipe found S 83°08'25"E 400.00'

B.M. Warfield 679/50



5.023 ACRES

N 04°35'E 547.74'

S 06°52'W 151.60' DUVALL ROAD S 04°46'W 432.09'

11-4-85
NEED well side inspection
When permit comes in
S. Atch

Iron pipe set

S 84°44'W 35.00'

112.63' N 81°30'W

ED WARFIELD ROAD N 73°48'W 250.89'

PLAT OF SURVEY FOR ROBERT M. WARFIELD FOURTH ELECTION DIST, HOWARD COUNTY, WOODBINE, MARYLAND. SCALE: 1IN.=100FT. Nov. 17, 1976

Note: The "perc" test area is as field located. The lot shown hereon complies with the minimum ownership and lot area as required by the Maryland State Dept. of Health & Mental Hygiene.

Approved: Private Water & Private Sewer
[Signature]
Howard County Health Officer
11-22-76
Date

[Signature]

SEYBOLT, GORE, NEWQUIST & BERLINSKY
 Civil Engineers & Land Surveyors
 1111 Bonifant St
 Silver Spring, Md. 20910

L. 648 / F. 66

23904

B.M. WARFIELD
 L. 679 / F. 50



- First Floor = 567.0 ✓
- Bsmt Floor = 558.0 ✓
- Inv. out of house = 561.0 ✓
- Inv. in septic tank = 559.3 ✓
- Inv. out septic tank = 559.0 ✓
- Inv. in septic field = 558.0 ✓

B.P. # 70834
 ELLIOTT SIGNED
 AND RETURNED 6-9-86

PLAT FOR
 LOT 3
 Me. & Mrs. RALPH E. JONES
 4TH. ELECTION DISTRICT HOWARD CO., MD.
 MARCH 26, 1986 SCALE: 1"=100'

INLET 3
 BOTTOM 7
 3BR w/ DISPOSAL 141 Ft
 4BR w/ DISPOSAL 187 Ft

Approved for Private
 Water & Private Sewer

Date _____
 HOWARD COUNTY HEALTH OFFICER

I certify that the measurements & elevations
 hereon are actual & correct.

[Handwritten Signature]

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

MAY 28 9 12 AM '86

DIVISION OF
ENVIRONMENTAL
HEALTH

