

4/28/89 11 AM
1:30

03-312976

PERMIT

P 43852

A 38003

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 3/31/89

INDEXED

DATE SYSTEM APPROVED 5-1-89

INSPECTOR JEN

Dave Hopkins IS PERMITTED TO INSTALL ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Mathis Property ROAD 12450 Barnard Way LOT 11

PROPERTY OWNER Willard and Quinnie Mathis David Tilley

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

3
180
51720
144 ft trench

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 180 sq. ft. per bedroom. 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. 5 feet of stone below distribution pipe.

LOCATION - Start the first trench 175 feet from the front lot line and 80 feet from the right lot line. Run trench(s) along contour toward front lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

PLANS APPROVED BY C. Williams DATE 3/01/89

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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 TWO YEARS

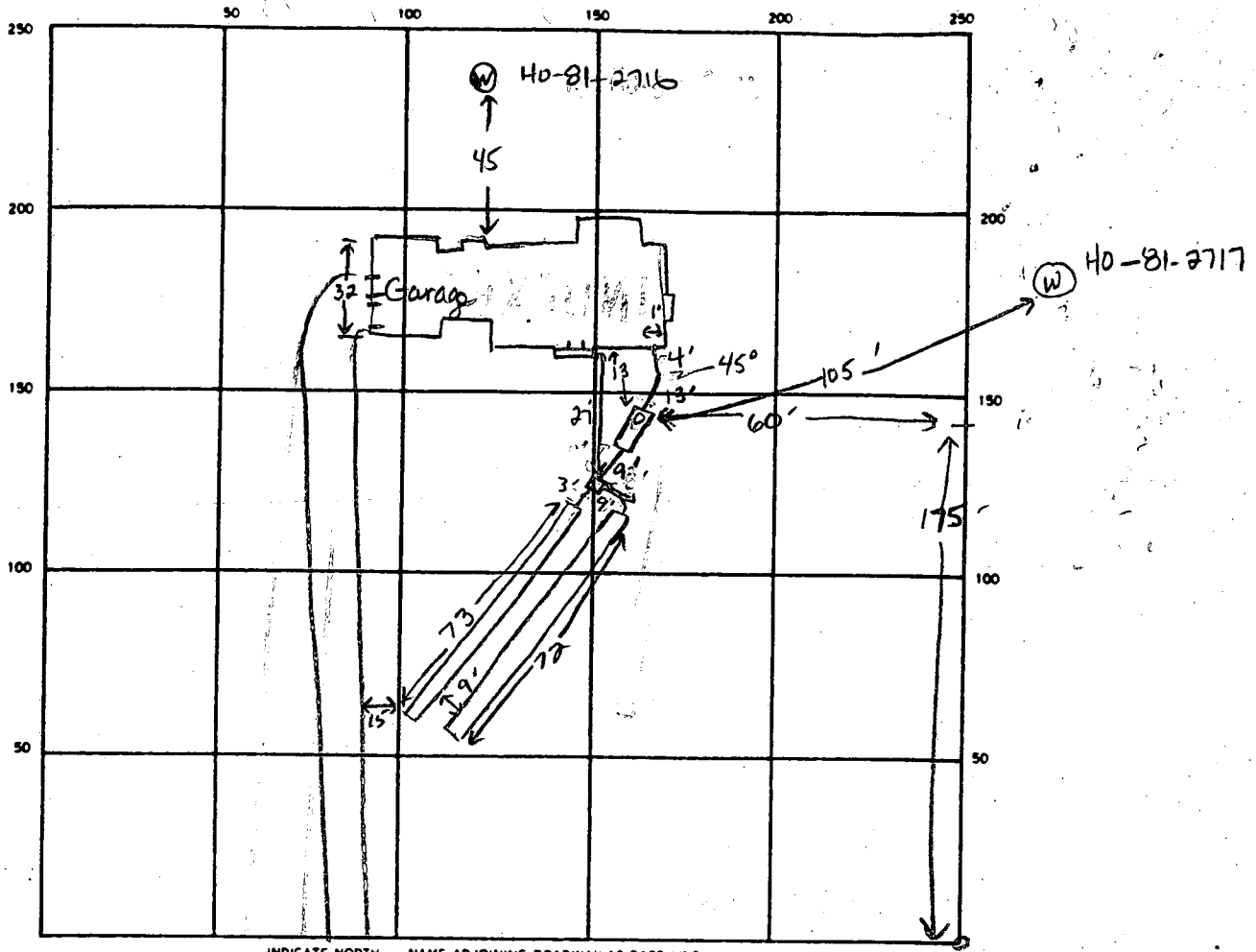
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A
38003



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
Barnard Way

SEPTIC TANK LEVEL 1250 gal CLEANOUTS 1 on septic tank

DISTRIBUTION BOX LEVEL ok w/ baffle

DRAIN FIELD/TILE FIELD DEPTH 9 9.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 3.5 FT.

EFFECTIVE GRAVEL DEPTH 5.5 6.0 FT. TOTAL LENGTH 72 73 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL BOTTOM AREA 396 438 SQ FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 834 1/2 SQ FT.

REMARKS 4-28-89 OK to stone trench #1 JEN 4-28-89 OK to stone trench #2 and cover leaving ends open. OK to cover from house to trench JEN.
5-1-89 OK to cover all work, JEN

DATE SYSTEM APPROVED 5-1-89 INSPECTOR Jane E Madean

APPLICATION

PERCOLATION TESTING

A 38003

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

DISTRICT 3rd

DATE Oct. 20, 1986

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 Willard and Quinnie Mathis Sr

ADDRESS 12392-A Frederick Road
West Friendship, Md. 21794 PHONE 489-4024

PROSPECTIVE BUYER Garry M. Barnard Sr. Owner

ADDRESS 1035 St. Michael Rd. Mt. Airy, Md. 21771 PHONE 489-7621

PROPERTY LOCATION:

SUBDIVISION Mathis Property Sec. II LOT NO. 11

ROAD AND DESCRIPTION At the end of Barnard Way
12450

TAX MAP #15 PARCEL # 15

SIZE OF LOT 3.20 Ac TYPE BLDG. SFO
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Garry M. Barnard
(SIGNATURE OF APPLICANT)

APPROVED BY [Signature] FOR Deputy DATE 3-1-89

REJECTED BY _____ FOR _____ DATE _____

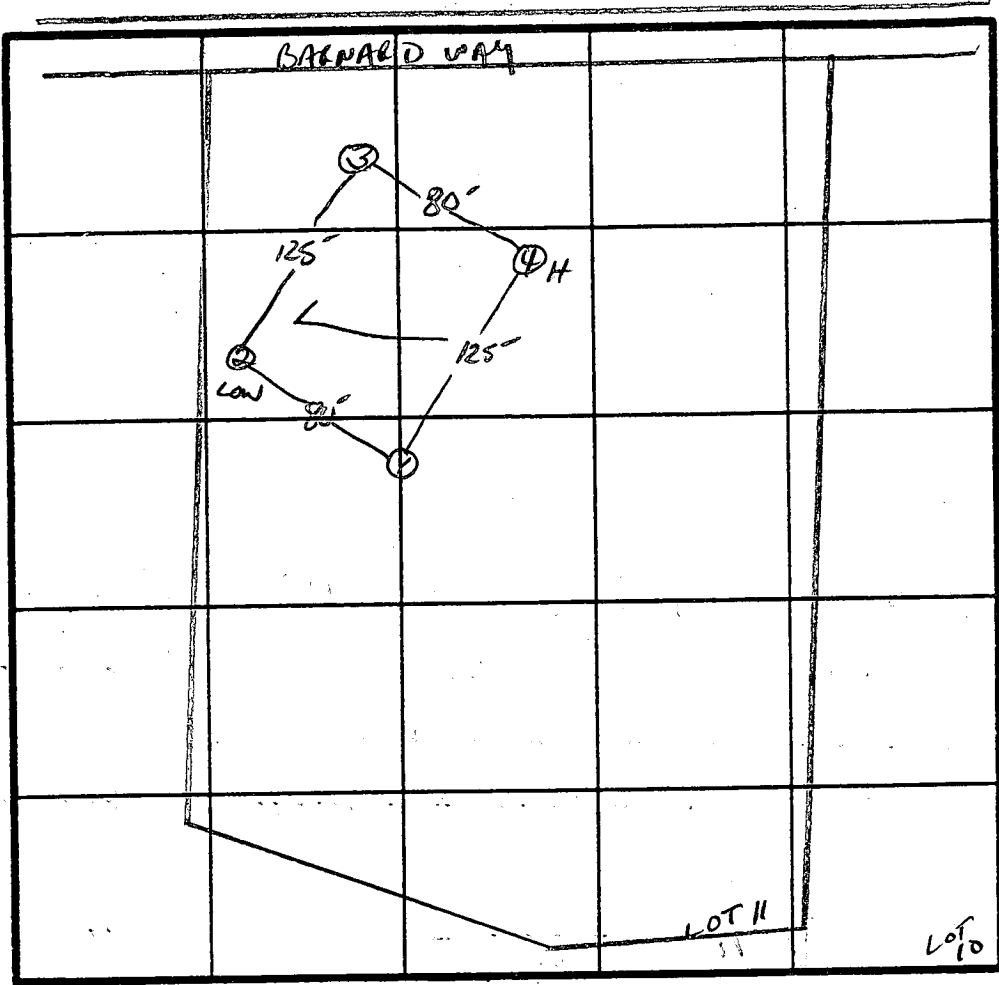
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 11/18/86 Perc satisfactory; Hold for subdivision plat. V. Abel

BLDG. PERMIT SIGNED
AND RETURNED 3-1-89
BP23820 SA

THIS IS NOT A PERMIT

A 38003



①
SOIL PROFILE

0
12"
AD
Strong Yell
Br. silt
LOAM
9-12% CLAY
70% FRAGS

4.5'
Yellow Br
Silt LOAM
micaceous
15%
FRAGMENTS

Chester
LOAM

X Perc
9min
180 #/BR
INLET 4.5'
BOTTOM 9'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

RE 70

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/18/86	S	4.5'	11:03	11:05	11:05	11:08	3 min
	M	8'	10:58	11:00	11:00	11:02	2 min
	S	3.5'	11:11	11:12	11:12	11:16	4 min
	V	8'	UNIFORM SOIL below		3.5' Chester LOAM		
	S	3.0'	11:13	11:30	11:30	11:58	28 min
	V	14'	UNIFORM SOIL below		3.5-4'		
	S	3.5'	11:20	11:25	11:25	11:33	8 min
	V	10'	SAME AS OTHER HOLES				

REMARKS HOLES PER PLAT

TYPE OF SOIL CHESTER

TESTED BY S. Abel ALSO PRESENT BARNARD BROTHERS

DAVE HOPKIN

EH-12-1079

INTERSTATE ROUTE 70

S. 82°03'18" E. VEHICULAR INGRESS AND EGRESS IS DENIED

PROP. 2-Story Hse:
 F.F. Elev.=590.0 ✓
 Bsmt.Elev.=581.5 ✓
 Inv.Out. =581.4 ✓

BSMT

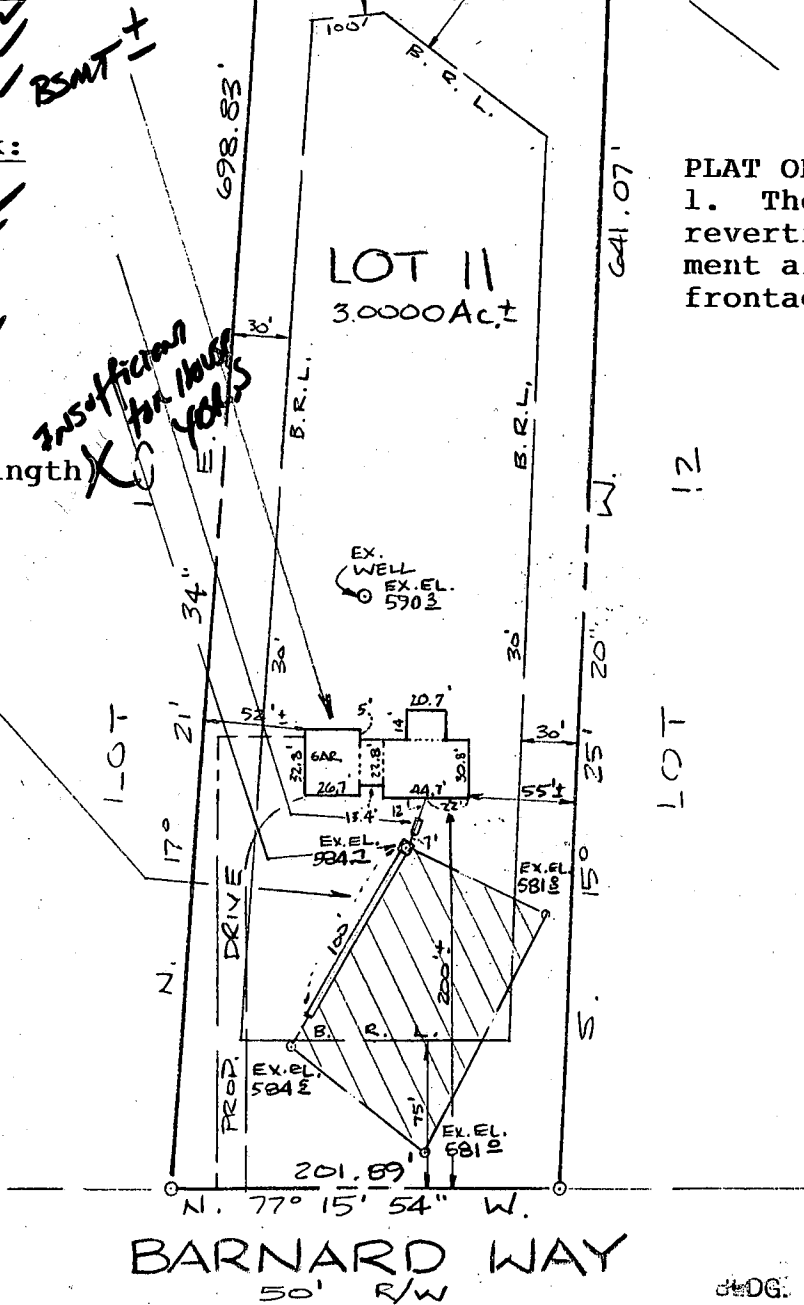
PROP. Septic Tank:
 Ex. Elev.=584.9 ✓
 Inv.In =581.3 ✓
 Inv.Out =581.0 ✓

PROP. Dist. Box:
 Ex. Elev.=584.7 ✓
 Inv. In =580.9 ✓

PROP. Trenches:
 1 @ 100' Trench (lnth) ✓
 Inv. El.=580.7 ✓
 9' Bottom Max ✓
 5' of stone ✓

375' offset for house
400' S

PLAT OF RECORD NOTES:
 1. There is a 10' wide revertible slope easement along all road frontage lot lines.



BARNARD WAY
 50' R/W

LOG. PERMIT SIGNED
 AND RETURNED 3-7-89
 BP23820
 SK

PLOT PLAN
 LOT II, SECTION II
MATHIS PROPERTY
 #12450 BARNARD WAY
 THIRD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

SCALE: 1"=100'
 FEBRUARY, 1989

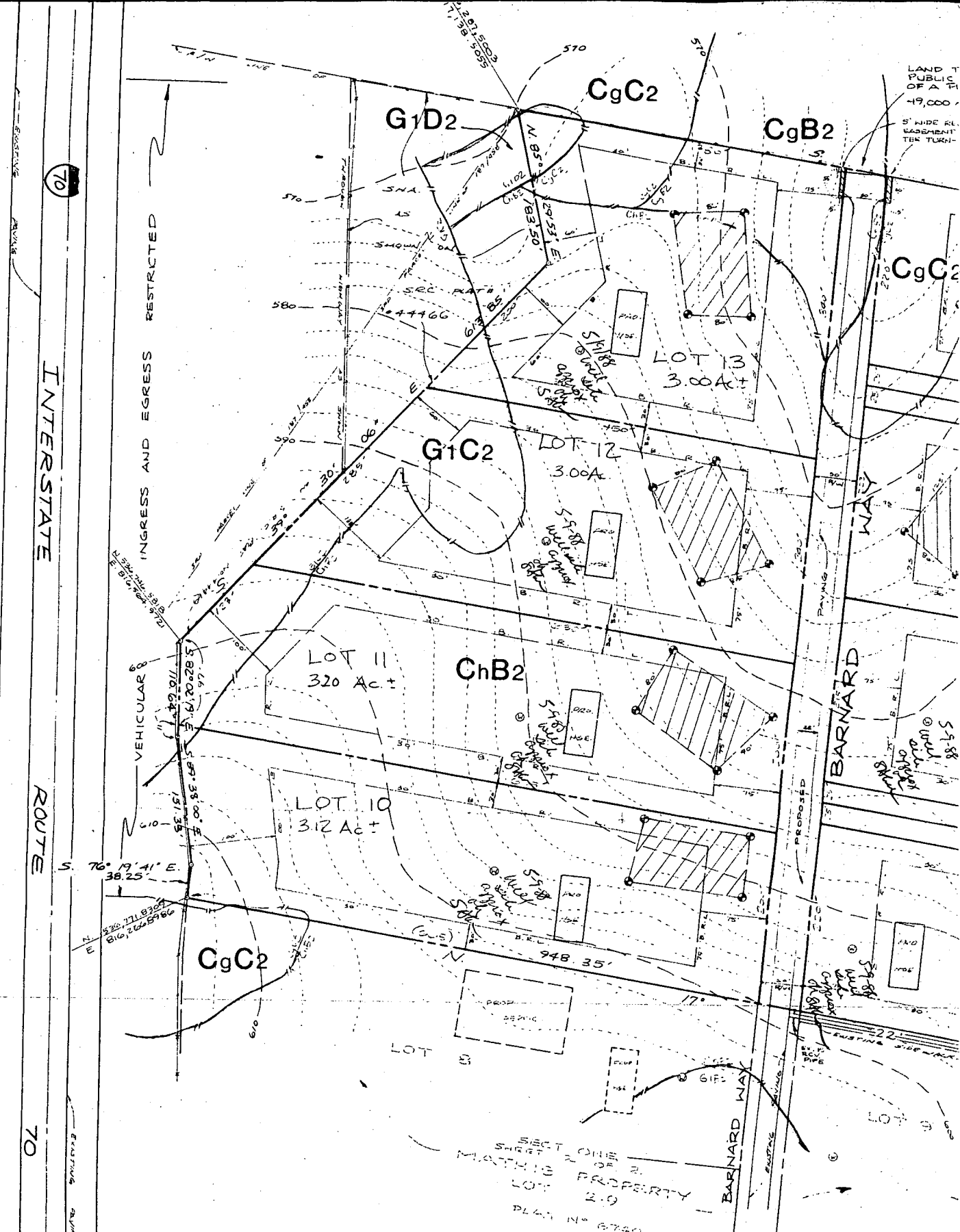


I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.



VANMAR ASSOCIATES INC.
 Engineers • Surveyors • Planners
 310 South Main Street, Mount Airy, Maryland 21771
 (301) 829-2890 (301) 831-5015

REFERENCE	JOB NO.
PLAT # 7867	251-379



LAND T
PUBLIC
OF A T
-19,000
5' WIDE RL
BASEMENT
THE TURN-

70

INTERSTATE

ROUTE

70

INGRESS AND EGRESS RESTRICTED

BARNARD WAY

BARNARD WAY

SECT ONE
STREET 2 OF 2
MORTGAGE PROPERTY
LOT 2-9
PLAN N° 6750

NOTES: (CONT.)

- 8. ALL CONSTRUCTION SHALL BE DONE CONFORMING TO THE SPECIFICATIONS AND STANDARDS FOR SEDIMENT AND EROSION CONTROL.
- 9. AREA TABULATION :

TOTAL AREA OF LOTS :	2,133,095 ± or 48.969 Ac ±
TOTAL AREA OF PUBLIC DEDICATION :	49,000 ± or 1.125 Ac ±
TOTAL AREA OF SUBDIVISION :	2,182,095 ± or 50.094 Ac ±

LEGEND

- - IRON PIN
- - CONC. MON.
- ⊙ - PROP PERC TEST SITE (UNLESS OTHERWISE NOTED)
- ⊙ - PROP WELL SITE

PERCOLATION TEST RESULTS			
LOT #	AVE. PERC	INLET	BOTTOM MAX

B 1 **7069** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

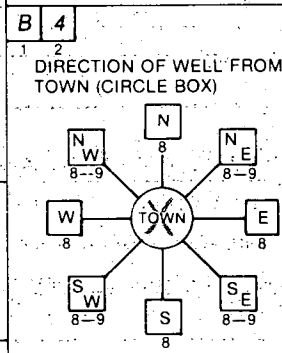
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
40-81-2716
 fill in this form completely

Date Received (APA) _____
 OWNER INFORMATION
BARBARA D CONST CO
 15 Last Name 34 Owner First Name
1035 ST MICHAELS RD
 36 Street or RFD 55
MT AIRY MD 21221
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL
HOWARD COUNTY
MATHIS PROOP SUBDIVISION
 SECTION **2** LOT **11**
WEST FRIENDSHIP NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **0** M I

DRILLER INFORMATION
Ralph Mayne License No. **273**
Ralph Mayne Well Drilling Firm Name
9120 Brown Church Rd. Mt Airy Address
Ralph Mayne 4/17/88 Signature Date



RAILROAD WAY NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH (N) WEST (W) EAST (E) SOUTH (S)
 DISTANCE FROM ROAD **300** ENTER 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 **A38003** COUNTY NO.
 STATE SIGNATURE _____ DATE ISSUED _____
051188 CO SIGNATURE **Car Williams** EXP. DATE **11/1/88**
 NORTH GRID **536000** EAST GRID **0816000**

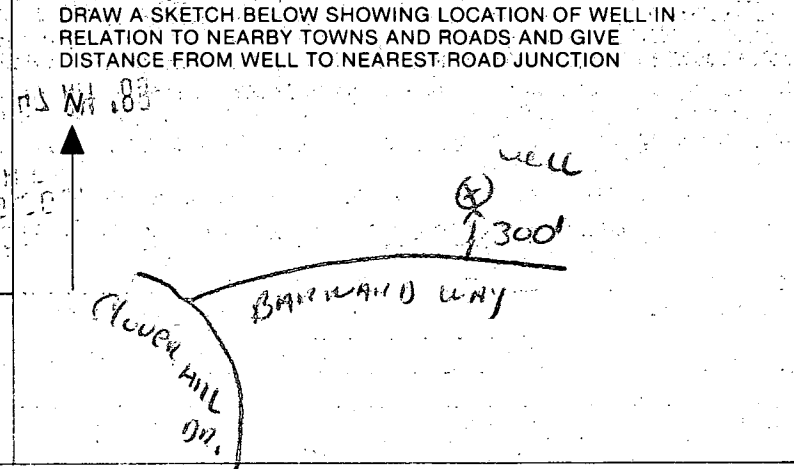
APPROXIMATE DEPTH OF WELL **150** FEET

APPROXIMATE DIAMETER OF WELL **6"** NEAREST 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 **5/13/88 No Insp**
 SOURCES OF DRILLING WATER
 1. well **(X)**
 2. _____
 3. _____
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E **8106**
 N **5306**

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 _____
 FORCE **CW** WRITE INITIALS IN BOX PERMIT No. **40-81-2716**

SPECIAL CONDITIONS

4/17/89
35203

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement _____

Receipt # 43936
Date 4/5/89

Name of Installer J. Joseph Gartland, Inc.

Telephone 875-2400

License Number 1713

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner Barnard Brothers Const. Telephone 489-7621

Subdivision Mathis Property Lot # 11 Well Tag # HO-88-2716

Site Address 12450 Barnard Way.

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible X
- Make Goulds
- Model # 10EJO5422
- Capacity 10 GPM
- Pump exceeds well capacity Yes X No _____
- If Yes, is low pressure cutoff switch installed? Yes X No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor

- Horsepower 1/2
- RPM _____
- Voltage _____
 - 110 _____
 - 220 X

Pitless Adapter

- Make Harvard.
- Model # PT-800
- Depth 42"

Tank

- Capacity 42gal.
- Pressure relief valve? 75psi.

Piping

- Type Plastic
- Size 1"
- NSF and/or BOCA Code approved Yes
- Depth of supply line 42"

Well data

- Depth _____ ft.
- Yield _____ GPM
- Static water level _____ ft.
- Will water supply be disinfected by installer? _____

P.A. 3 1/2 FT B.G.
MR 4/17/89 NOTANK

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: _____

Date: 3/28/89

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

HEALTH DEPARTMENT
APR 30 5 21 PM '89