

04-351290  
**PERMIT**

**SEWAGE DISPOSAL SYSTEM**

**DEPARTMENT OF HEALTH AND MENTAL HYGIENE**

P 50625C

A 38020

DISTRICT 4th

DATE 4/4/95

**HOWARD COUNTY HEALTH DEPARTMENT**

**BUREAU OF ENVIRONMENTAL HEALTH**

~~XXXXXXXXXX~~ 313-2640

DATE SYSTEM APPROVED M. Ripkin

INSPECTOR 3/30/95

**INDEXED**

Jack Fyock Septic Service

IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 988-9270

SUBDIVISION SHARP FARM LOT 9 ROAD 3694 Appleby Court

PROPERTY OWNER Michael Berzonsky

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES - Trench to be 3 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 5½ feet below original grade. Effective area begins at 3½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 200 feet down the left lot line (432.53') and 85 feet off that same lot line when facing the lot from Appleby Court. Run trenches on contour toward the left lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 11/5/94 DICS

PLANS APPROVED BY Amy McMillen DATE 11/04/94

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, 90° ELBOWS NOT ACCEPTABLE.

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

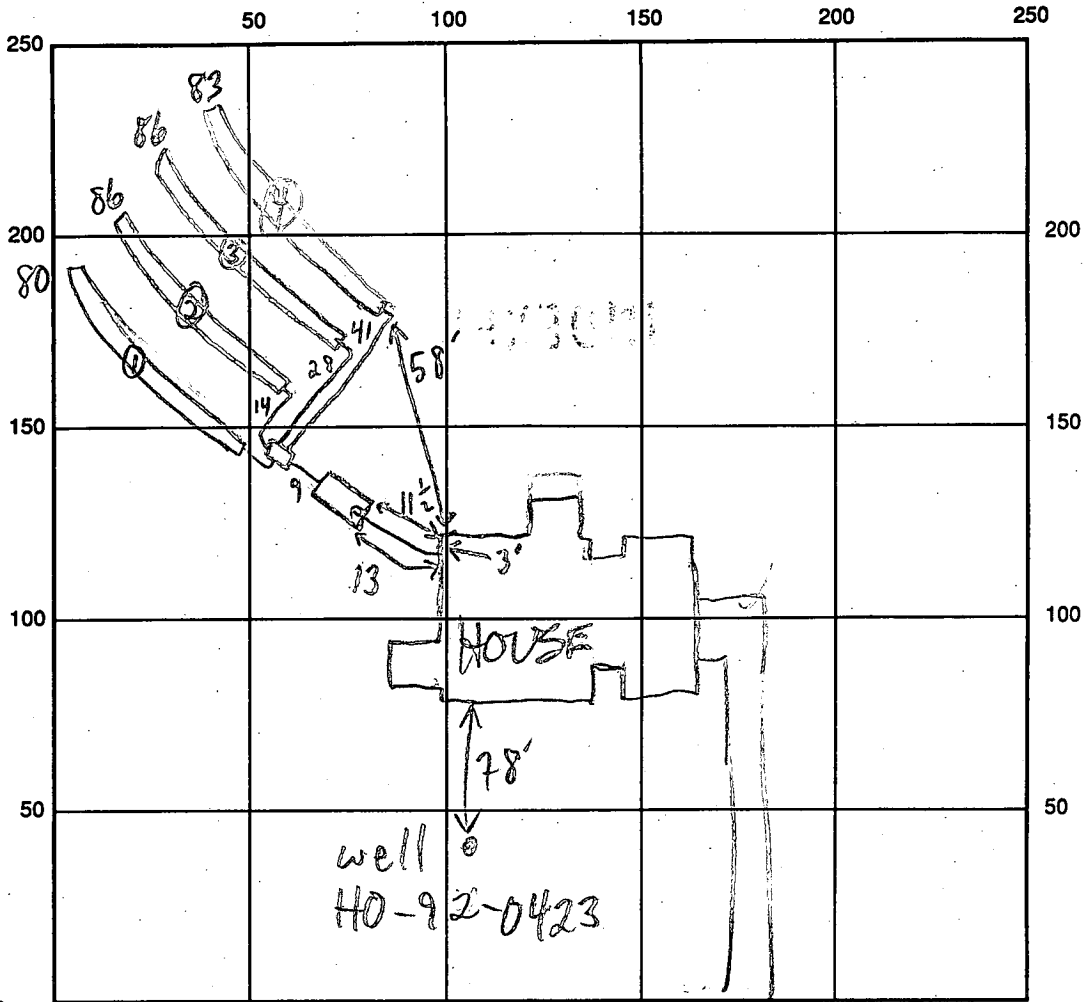
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A  
38020

3/30/95  
3 P.M.  
M. Ripkin



APPLEBY CT INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL-OK CLEANOUTS S.T.-OK

DISTRIBUTION BOX LEVEL OK-BAFFLE IN

DRAIN FIELD/TITLE DEPTH 5 1/2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 1780 @ 86 386 @ 83 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 1240 @ 258 3258 @ 249 SQ. FT.

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA 1005 SQ. FT.

REMARKS: 3/30/95 OK TO COVER MR

3/30/95 Pitless Adaptor OK 4 1/2' B.G. MR

DATE SYSTEM APPROVED 3/30/95 INSPECTOR M.R. Skinn

# APPLICATION

*Permitting  
11/19/86  
1:30*

PERCOLATION TESTING

*11/19/86  
perc OK'd pending  
approved plan  
(initials)*

A 38020  
P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_  
DATE 11/7/86

*Reviewed 11/5/86  
OK to process SA*

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 ~~CHARLES A SHARP~~ Mr. & Mrs. Michael Berzonsky

ADDRESS 3779 SHARP RD GLENWOOD PHONE 4894630

PROSPECTIVE BUYER N/A

ADDRESS N/A PHONE N/A

PROPERTY LOCATION:  
SUBDIVISION CHARLES A SHARP PROP. LOT NO. # 2 Lot-9 F-88-104

ROAD AND DESCRIPTION ~~SHARP ROAD~~ 3694 Appleby Court

TAX MAP 21 PARCEL # 86

BLDG. PERMIT SIGNED  
AND RETURNED 11/4/86  
Serial # 5775 - SFD - 4Bm  
SINGLE FAMILY  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

SIZE OF LOT 3AC+ TYPE BLDG. \_\_\_\_\_

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.

*Charles A Sharp*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING for field located vertical holes

# THIS IS NOT A PERMIT

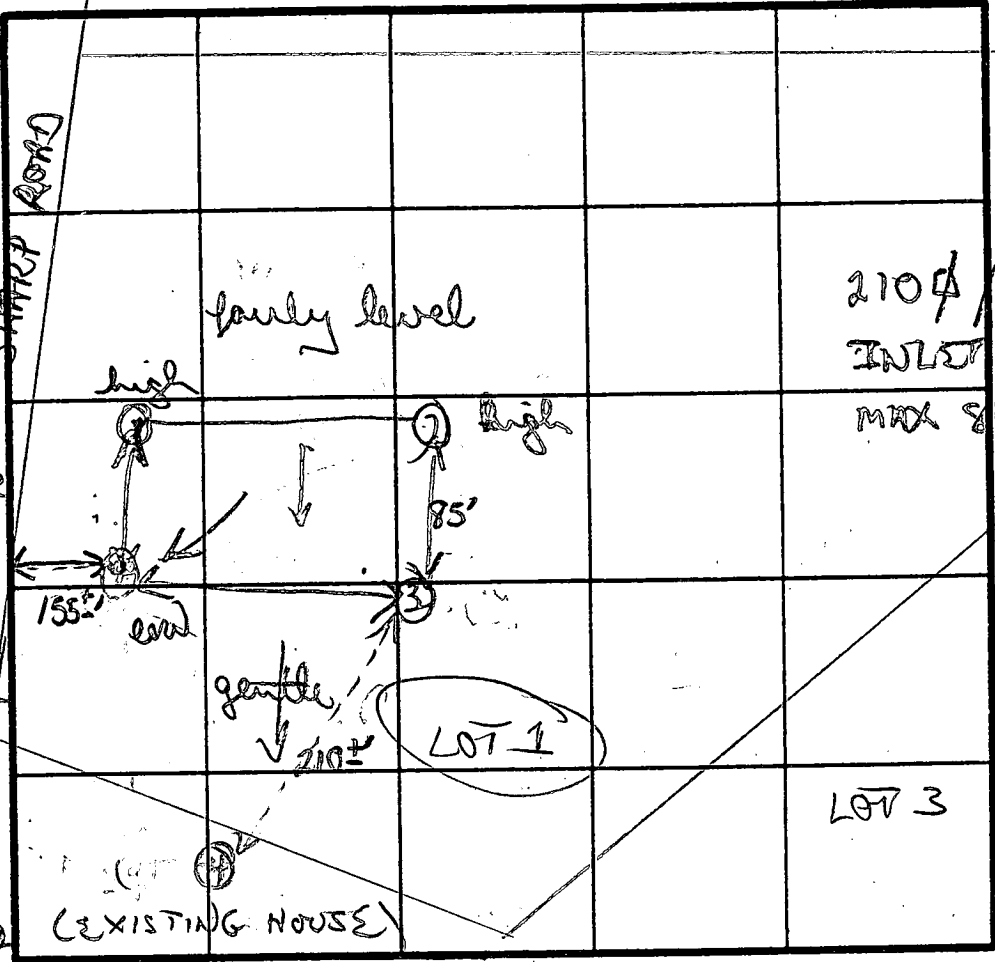
SHALLOW SYSTEM ONLY

200 Ø / BORM  
INLET 3½'  
MAX D. 5½'

TO LOT 6 →

SOIL PROFILE

AP 202 8"  
brown red clay soil  
lean  
small gravel/puck frags 4½'  
brown yellow silty/mic  
lean



fairly cross  
uniform clay  
brown/yellow  
silty/clay  
meas loc

brown clay LOT 2  
to clay/sand  
lean 4'  
brown silty  
mic lean  
w/10% small  
red frags  
mic shal  
settled  
11½'

brown yellow  
clay to clay  
lean 4½'  
sandy silty  
red lean

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/1/76	②	4'5"	320	328	328	342	14 min	
		12'0"	bottom (see profile)					
	③	54'5"	324	341	341	411	20 min	
		11½'0"	bottom (see profile)					
	④	3½'	343	403	403	427	28 min	
		11½'0"	bottom (see profile)					
	⑤	3½'5"	407	415	415	428	13 min	
		8'11"	411	418	418	428	10 min	
		11'0"	bottom (see profile)					

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

REMARKS

moved perc uphill than originally planned due  
to red table issues  
brown + red clays, 4½', mostly sandy/silty lean

TYPE OF SOIL

TESTED BY

B. Noyon

ALSO PRESENT

Chuck Sharp

possible water  
11½'0"

C1 0477

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A 38020

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 081293

Depth of Well 195 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-92-0423

OWNER Gavin last name, Kevin first name, STREET OR RFD Appleby Ct, TOWN Glenwood, SUBDIVISION Sleep Farm, SECTION, LOT 9

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for SAND Stone and Green Mica Rock.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL: CEMENT CM, BENTONITE CLAY BC, NO. OF BAGS 14, NO. OF POUNDS 1316

CASING RECORD: casing types insert appropriate code below, ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER)

MAIN CASING TYPE: ST, Nominal diameter top (main) casing 6, Total depth of main casing 76

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

SCREEN RECORD: screen type or open hole insert appropriate code below, ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER)

SCREEN DEPTH (nearest ft.) table with columns 1-51 and rows 1-3. Includes slot size and diameter of screen information.

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

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. 24, DRILLERS SIGNATURE

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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 (74, 75, 76), TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: HOURS PUMPED 2, PUMPING RATE 15, METHOD USED TO MEASURE PUMPING RATE Ruckert, WATER LEVEL BEFORE PUMPING 70, WHEN PUMPING 25, TYPE OF PUMP USED 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

LOCATION OF WELL ON LOT: SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

See attached location

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 # - 0 -  
Date 3/29/95  
Name of Installer GREG C. FRYFOGLE PLUMBING INC. Telephone 526-0003  
License Number 9081  
Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber X  
Name of Property Owner MIKE BERZONSKY Telephone 498-7212  
Subdivision CHARLES SHARP SUB Lot # 9 Well Tag # \_\_\_\_\_  
Site Address 3694 APPLEBY CT. (GLENWOOD)

Pump  
1. Type  
a. Deep well jet \_\_\_\_\_  
b. Shallow well jet \_\_\_\_\_  
c. Submersible X  
2. Make JACUZZI  
3. Model # SANDHANDLER  
4. Capacity 10 GPM  
5. Pump exceeds well capacity Yes \_\_\_\_\_ No X  
6. If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_  
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards X Other \_\_\_\_\_  
Motor  
1. Horsepower 1/2  
2. RPM \_\_\_\_\_  
3. Voltage \_\_\_\_\_  
a. 110 \_\_\_\_\_  
b. 220 X  
Pitless Adapter  
1. Make HARVARD  
2. Model # PT800  
3. Depth 42"  
Tank  
1. Capacity WX 203  
2. Pressure relief valve? YES  
Piping  
1. Type POLYETHYLENE  
2. Size 1"  
3. NSF and/or BOCA Code approved ✓  
4. Depth of supply line 42"  
Well data  
1. Depth 127 ft.  
2. Yield 15 GPM  
3. Static water level \_\_\_\_\_ ft.  
4. Will water supply be disinfected by installer? NO

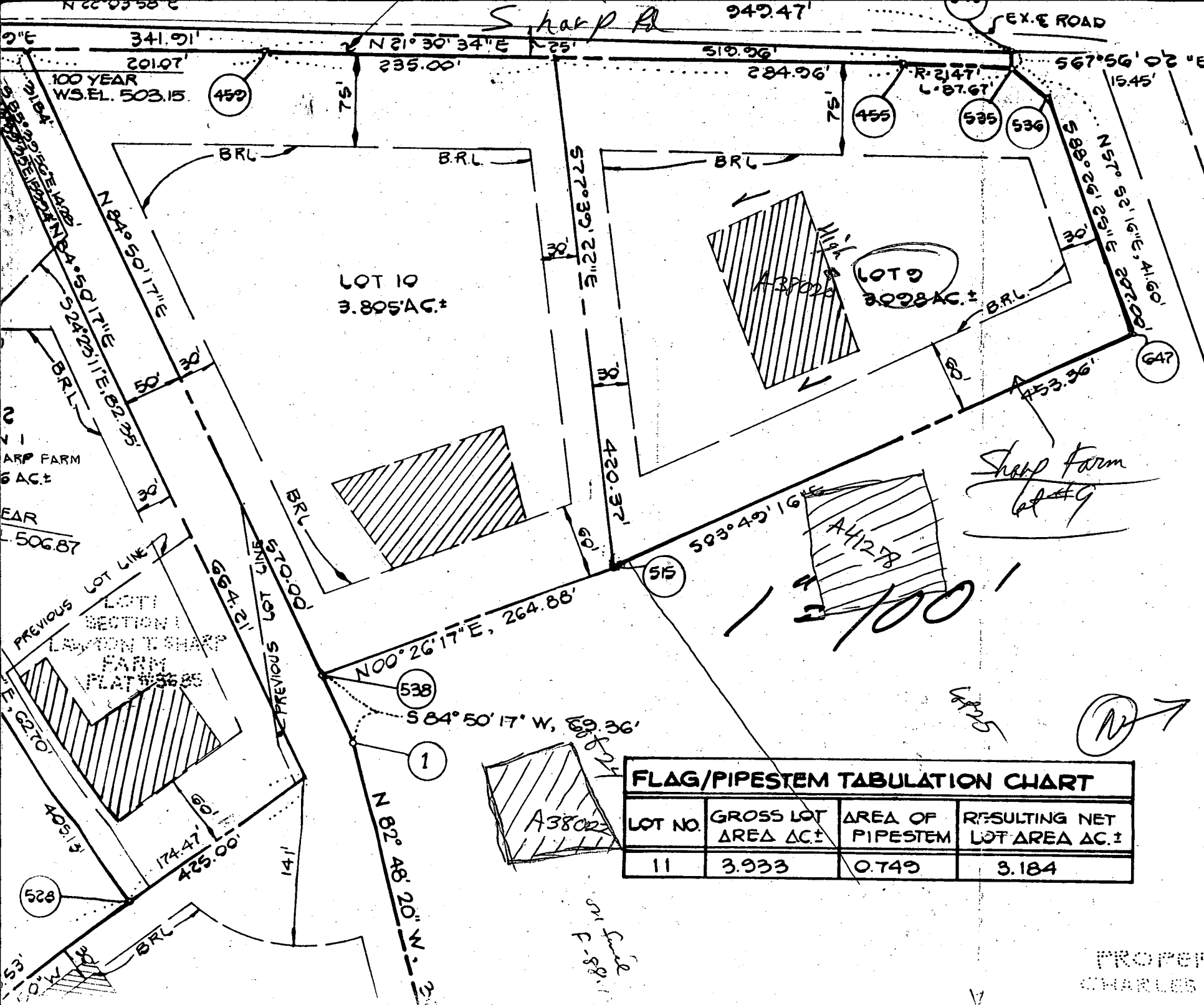
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Greg Fryfogel  
Date: 3/29/95

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

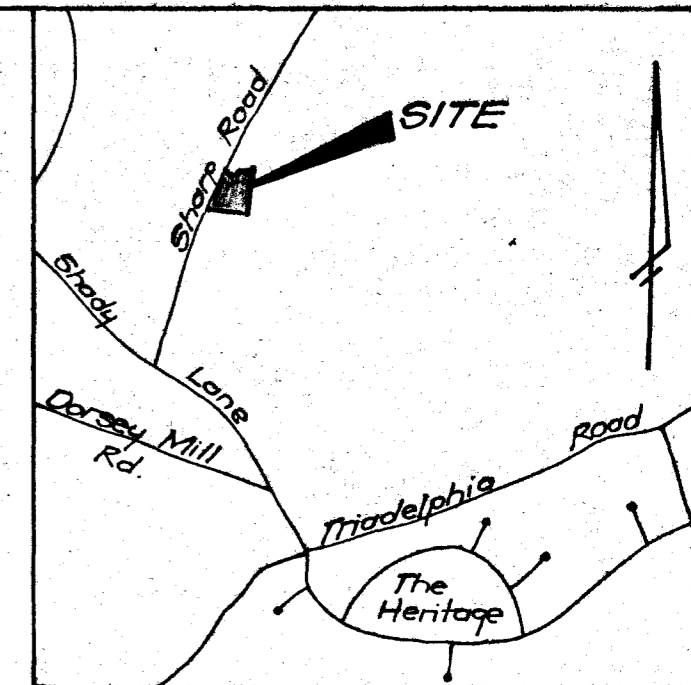




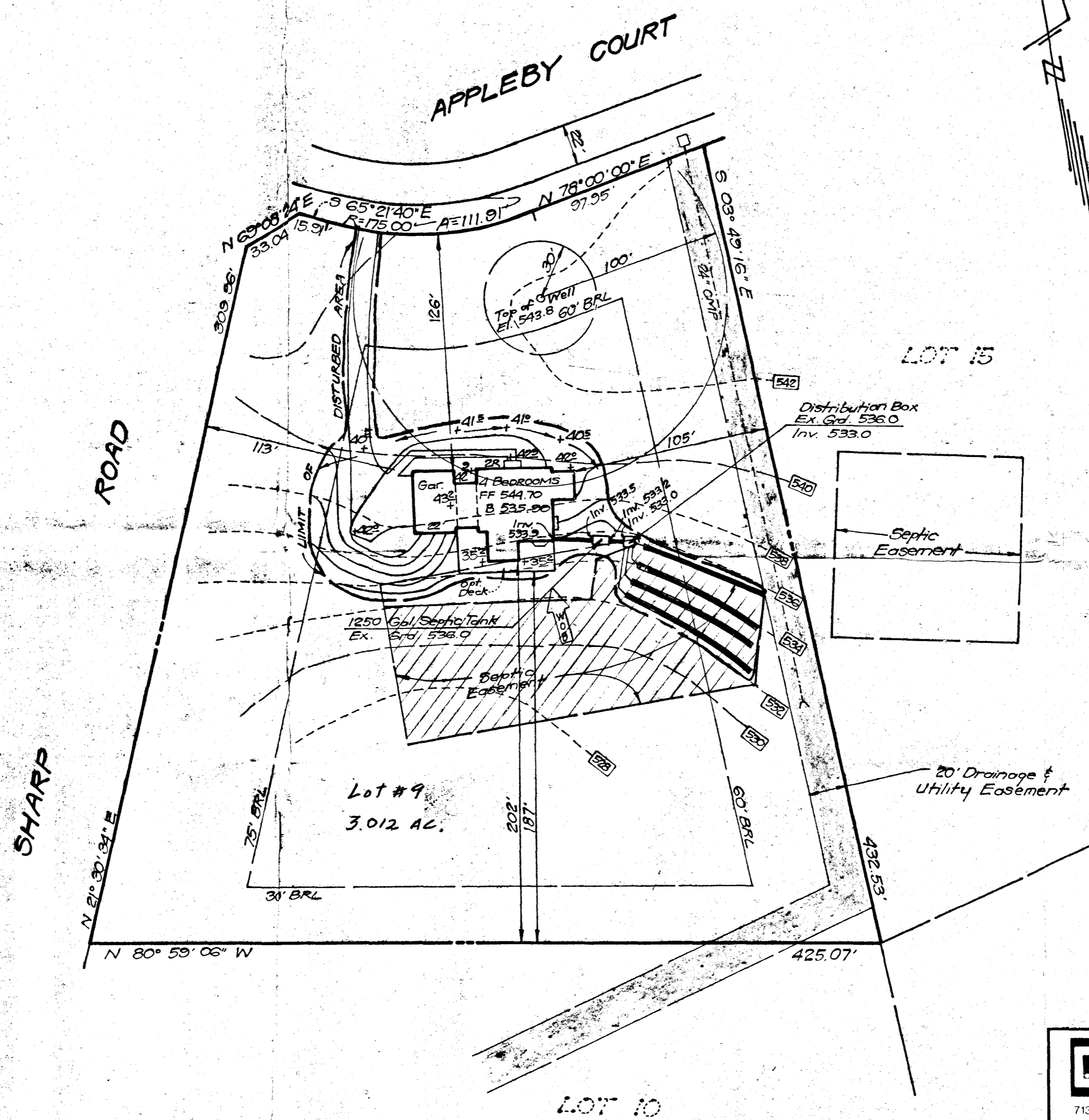
**FLAG/PIPESTEM TABULATION CHART**

LOT NO.	GROSS LOT AREA AC±	AREA OF PIPESTEM	RESULTING NET LOT AREA AC±
11	3.933	0.749	3.184

PROPERTY OF CHARLES A. SHARP



VICINITY MAP  
Scale: 1" = 200'



**LEGEND**

- Contour Interval 2 Ft.
- Proposed Contour ——— 530
- Existing Contour - - - - - 530
- Spot Elevation 530
- Direction of Drainage  $\rightarrow$
- Walk out Basement WOB

**GENERAL NOTES**

1. Reference Plot Number 9520
2. Subject Property Zoned R
3. Existing Topography was field run by CLARK FINEFROCK & SACKETT, INC. in Sept. 1994.
4. Length of trenches to be determined at time of permit issuance.
5. By Approval of this Site Plan, The Health Dept. approves the modified sewage easement as shown.
6. Limit of Disturbed Area 18,900 sq. ft. ±

Approved Septic System Plan  
Howard County Health Department

*Amy McMilli* 11-4-94  
Signature Date

11-4-94 Amy M. Miller

<b>CLARK • FINEFROCK &amp; SACKETT, INC.</b> ENGINEERS • PLANNERS • SURVEYORS <small>7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (301) 621-8100 - WASH.</small>		
DESIGNED JME	<b>SITE DEVELOPMENT PLAN</b> <b>LOT 9</b> <b>CHARLES SHARP</b> <b>SUBDIVISION</b> FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND	SCALE 1" = 50'
DRAWN BAL		DRAWING 1 OF 1
CHECKED JME		JOB NO. 93-237
DATE 9-30-94	For: Don Crozen 3775 Shady Lane Glenwood, Md. 21738	FILE NO. 93-237x

