

Layout 1/8/03 10:30AM

1/15/03 12 noon

1-22-03 1:30-2pm Final

03-315304

ISSUE DATE: 1/6/2003

P 518504

APPROVAL DATE: 1/22/03

A 38130

PERMIT INDEXED

ON-SITE SEWAGE DISPOSAL SYSTEM HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

Jeff Harman Builders IS PERMITTED TO INSTALL ALTER

ADDRESS: 13319 Elliott Drive, Clarksville PHONE NUMBER: 410-531-3007

SUBDIVISION: Meadowood LOT NUMBER: 40

ADDRESS: 1296 Crows Foot Road PROPERTY OWNER: Scott Bannar

SEPTIC TANK CAPACITY (GALLONS): 1500 ^{COMPARTMENTED} (Builder elects to install compartmented tank w/ outlet baffle effluent filter)

PUMP CHAMBER CAPACITY (GALLONS): N/A

NUMBER OF BEDROOMS: 5

SQUARE FEET PER BEDROOM: 180

LINEAR FEET OF TRENCH REQUIRED: 225

TRENCHES:	Trench to be 2.0 feet wide. Inlet 4.0 feet below original grade. Bottom maximum depth 8.0 feet below original grade. Effective area begins at 4.0 feet below original grade. 4.0 feet of stone below distribution pipe.
LOCATION:	Starting from the bend in the right lot line, place the distribution box 55' down the right (233.40') lot line and 90° off this same lot line. Run (3) trenches on contour toward front of lot.
NOTES:	OK to place tank in revised location but maintain 3' of cover OK to place distribution box in revised location & run both ways.

PLANS APPROVED: MER OK SRK 12/11/02 DATE: 9/14/01

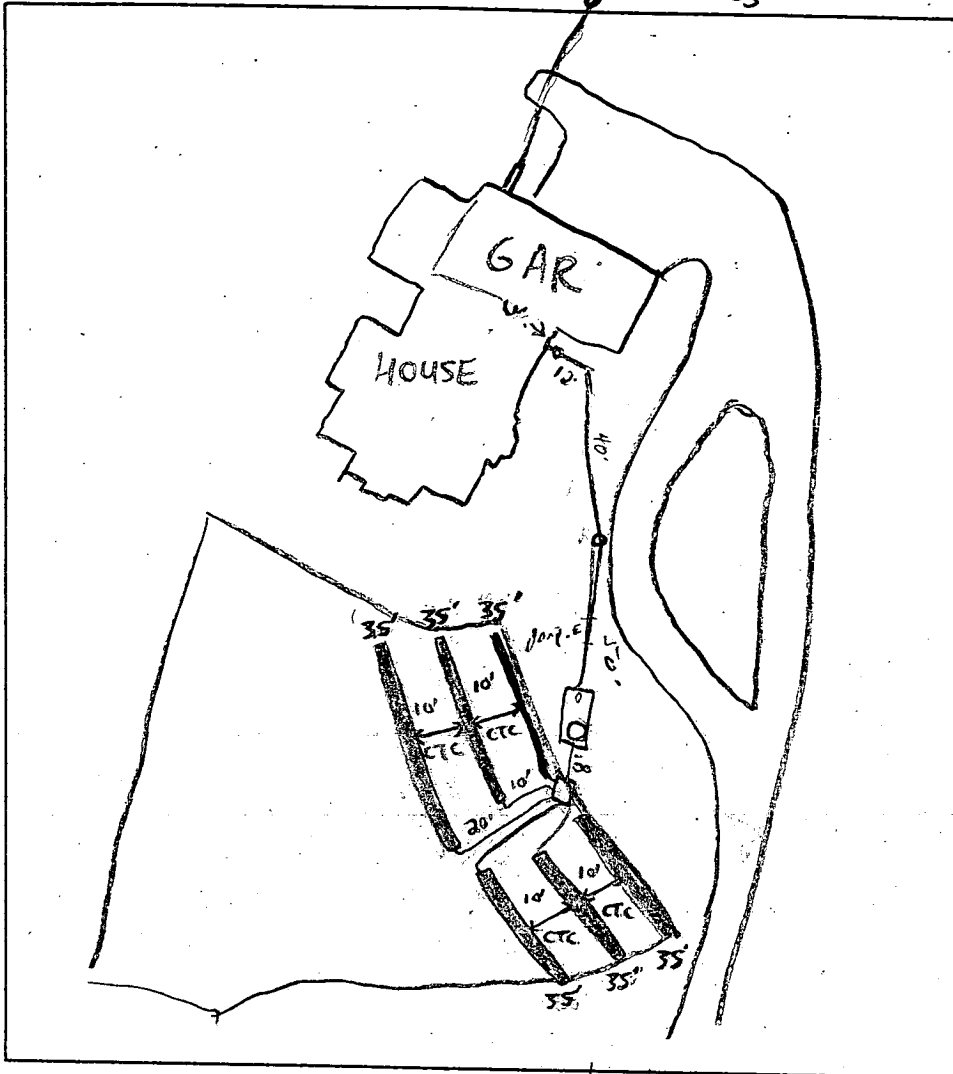
- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A 38130

NOT TO SCALE

HO-88-0883



TRENCH DATA

TRENCH WIDTH 2'
 TRENCH INLET DEPTH 4'
 TRENCH BOTTOM DEPTH 8'
 DEPTH OF STONE 4'
 NUMBER OF TRENCHES 6'
 TOTAL TRENCH LENGTH 210'±
 ABSORBENT AREA 840ft²
 DISTRIBUTION BOX LEVEL
 BAFFLE IN DISTRIBUTION BOX

SEPTIC TANK DATA *Compartmented*

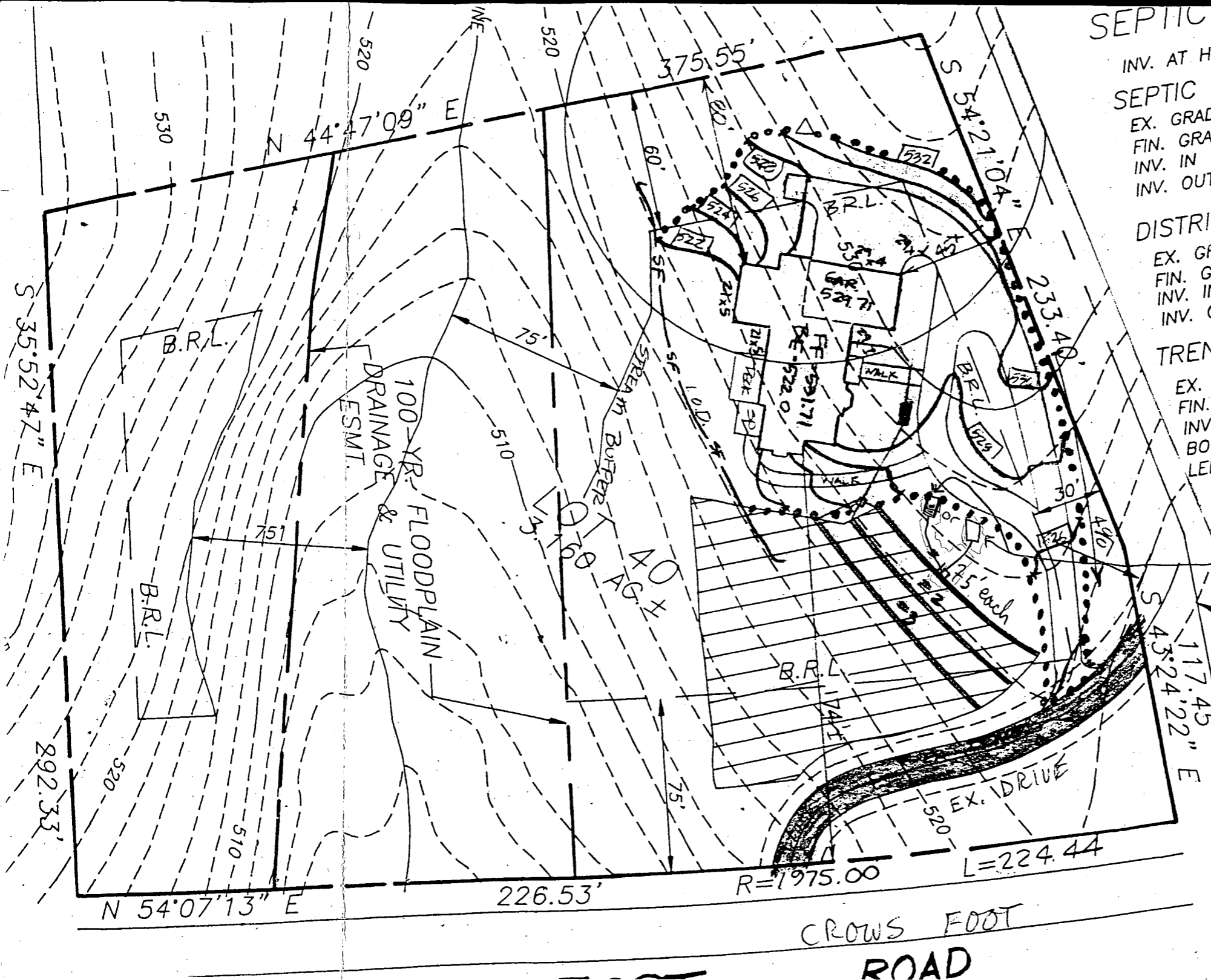
SEPTIC TANK 1500 TS GALLONS
 MANHOLE RISER Rear
 6 INCH INSPECTION PORT Front
 w/ outlet baffle filter
PUMP CHAMBER DATA

PUMP CHAMBER GALLONS NA
 MANHOLE RISER NA
 ALARM NA
 PUMP PERFORMANCE TEST NA

PRE-CONSTRUCTION INSPECTION: 1/8/03 Lot staked, contour appears accurate, layout per B.P. (SO)

INSPECTION COMMENTS: 1/15/03 - Tank set, OK to cover up to ST. 1st trench installed (SO) 1/22/03 - OK TO COVER ALL WORK (SRIC)

INSPECTOR Steven R. Krieg DATE SYSTEM APPROVED 1/22/03



PLAN BY
 SHANABERGER
 & LANE

1:50

Approved Septic System
 Howard County Health Department
 Revised Tank Locations 12/11/02
 & dbox location

Mark Telfer 9/14/01

Total linear foot of trench
 required 225 feet

Width of trench(es) 2 feet

Depth of trench(es) 8 feet

Depth of stone required below
 distribution pipe 4 feet

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: DAVID THADEN Telephone #: 410-439-3257
 Address: 5503 EMMA LANE
VASADENA, MD 21122

(Must circle one) Licensed Plumber Licensed Well Driller Licensed Well Pump Installer
 License # and name of individual responsible for the field installation:

Name (Prim): DAVID THADEN License# 10582

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property Owner: Hagan Builders Telephone #: 410-707-0133
 Subdivision: HEADOW WOODS Lot #: 40 Well Tag #: HO-62880883
 Site Address: 1296 Crows Foot RD
HARRIOTTSVILLE, R.O. 21104 88-

Submersible Pump Data	Pitless Adapter	Well Cap and Electric Conduit
Make: <u>Rain + Wind</u>	Make: <u>Archie Granby</u>	Two piece watertight cap: <u>X</u>
Model #: <u>4F07507301</u>	Model #: <u>PT300</u>	Screened, vented well cap: _____
Pump Capacity: <u>7</u> GPM	Depth: <u>48"</u> (36" min)	Cap secured to casing: <u>X</u>
Well Yield: <u>6</u> GPM	NSF/WSC approved: <u>X</u>	Conduit min 18" B.G.:
Depth of well encountered at time of pump installation: <u>300</u> (feet)		Conduit secured to well cap: <u>X</u>

If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4

Torque arrestors Cable guards or other acceptable method used- Must circle one
 Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing

Piping to house	House Connection
Type: <u>Polyethylene</u>	PVC sleeve to undisturbed soil at wall penetration: <u>Yes</u>
PSI: <u>160</u> (160 psi min)	Approximate length of sleeve: <u>6 foot</u>
Depth of supply line: <u>48"</u> (36" min)	Sleeve caulked and sealed properly: <u>Yes</u>

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, drainfields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation: [Signature] date: 10-27-03

For Health Department Use Only - Not to be completed by Installer

Date Insp. Requested: 8/18/03 Date Insp. Approved: 8/18/03 Inspector: (SO) SRK

Inspection Data: Pitless adapter watertight & water supply line at least 36" below grade	<input checked="" type="checkbox"/>
Two piece cap installed and attached to casing securely	<input checked="" type="checkbox"/>
Elec. conduit extends at least 18" below grade/attached to cap properly	<input checked="" type="checkbox"/>
Safety rope not seen outside of well cap/casing	<input checked="" type="checkbox"/>
Correct well tag attached properly and casing 8" above finished grade	<input checked="" type="checkbox"/>
Water supply line sleeved adequately at house connection	<input checked="" type="checkbox"/>
Adequate grout observed below pitless adapter	<input checked="" type="checkbox"/>

C1 1018 SEQUENCE NO. (DENV USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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-38130

ST/CO USE ONLY
 DATE Received

DATE WELL COMPLETED
 03 22 90

Depth of Well
 300 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
 40-88-0883

OWNER Spencer H.A. Associates
 STREET OR RFD last name Thomas Foot Rd first name Thomas TOWN SYKESVILLE
 SUBDIVISION 2 SECTION 2 LOT 40

WELL LOG
 Not required for driven wells
 STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Topsoil	0	2	
Br. mica	2	24	
Tan mica	24	54	
Gray mica	54	61	
Br. mica	61	64	
Gray mica	64	225	
Flint	225	230	
Gray mica	230	300	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N
 TYPE OF GROUTING MATERIAL
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 10 NO. OF POUNDS 1000
 GALLONS OF WATER 50
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 35 ft.

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

MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch) 6
 Total depth of main casing (nearest foot) 40

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
 STEEL BRASS OPEN HOLE
 PLASTIC OTHER

DEPTH (nearest ft.)
 1 40 2 80 3 300

CIRCLE APPROPRIATE LETTER
 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 26.04.04 "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. 40
 DRILLERS SIGNATURE Thomas J. Gault
 SITE SUPERVISOR (sign. of driller or journeyman responsible for site work if different from permittee) William H. R...

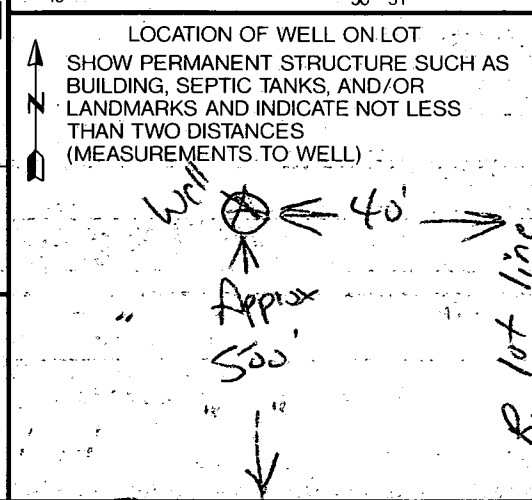
SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH) 6

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.) W Q
 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 31
 WHEN PUMPING 29
 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
 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) 31
 PUMP HORSE POWER 37
 PUMP COLUMN LENGTH (nearest ft.) 43
 CASING HEIGHT (circle appropriate box and enter casing height).
 + above } LAND SURFACE 2 (nearest foot)
 - below }



COUNTY Gauss Foot

B 1 9171 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
#0-88-0883
fill in this form completely

Date Received (APA) 06/13/89
OWNER INFORMATION
SPRING HILL ASSOC
1423 RT 32
W FRIENDSHIP MD 21794

B 3 LOCATION OF WELL 40.00
HOWARD
MADDOOOD
LOT 40
SYKESVILLE
MILES FROM TOWN (enter 0 if in town) 4 MI

DRILLER INFORMATION
George F. Easterday
L. Franklin Easterday, Inc.
2655 Brown Church Rd., Mt Airy, Md. 21771
George F. Easterday 6/18/89

B 4 CROWS FOOT RD
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
TOWN
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 300 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)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A. 38130
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED 7/16/90
071789 Sidney Abel CO SIGNATURE
NORTH GRID 548000 EAST GRID 0818000
EXP. DATE 3/16/89

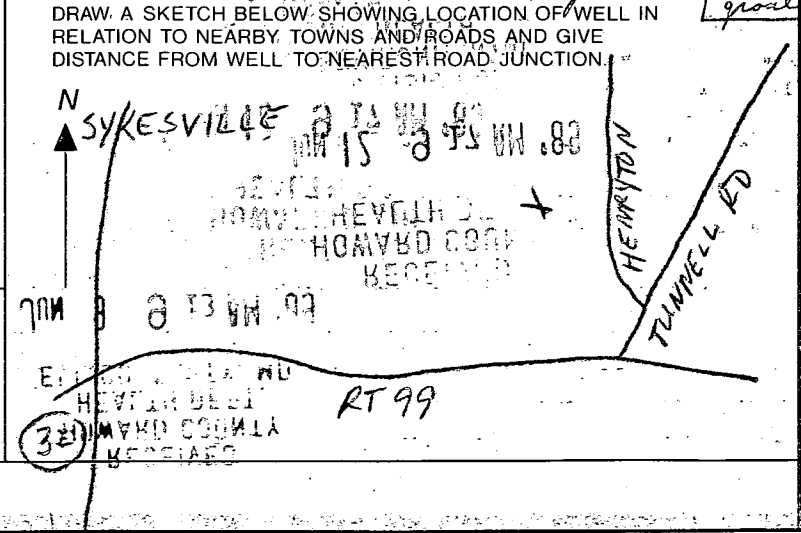
APPROXIMATE DEPTH OF WELL 300 FEET

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
1. well
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE
E 82618
N 5408

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY Drive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D 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)
APPROX. PERMIT NUMBER GAP
FORCE SA WRITE INITIALS IN BOX PERMIT No. #0-88-0883

SPECIAL CONDITIONS

APPLICATION

PERCOLATION TESTING

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

*11/2/87
perc oxid pending
approved plan*

A 38/130

P _____

DISTRICT _____

DATE 11/28/86

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 Springhill Associates - c/o D.S. Thaler & Associates, Inc.

ADDRESS 11 Warren Road, Baltimore, MD 21208 PHONE (301) 484-4100

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Meadowood LOT NO. _____

*LOT 40 on PRELIM
23 sec 2 phase 2*

ROAD AND DESCRIPTION Henryton Road - approximately 4000' north of Tunnel Road
Howard County, Maryland

TAX MAP 10 PARCEL # 139

SIZE OF LOT 3+ Acres TYPE BLDG. Single Family
(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.

*Mike S...
(SIGNATURE OF APPLICANT)*

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for field located holes & sub: plan

THIS IS NOT A PERMIT

174 4/BDRM

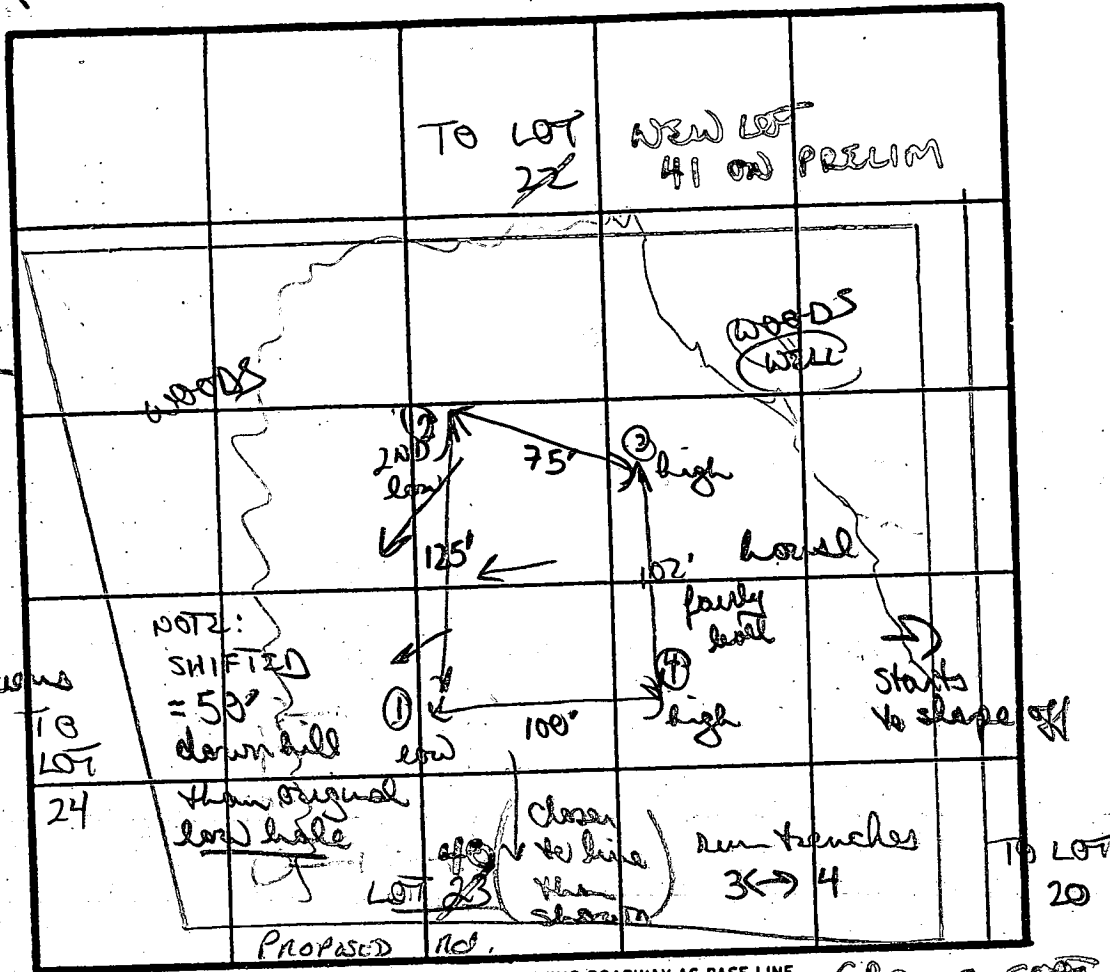
INLET 4'

MAX 8' Dsep
 $\Sigma = 3 \text{ MIN}$

SOIL PROFILE

orange/brown clay 3'
 to clay loam
 to silty
 micaceous brown tan loam w/ 5% small frags micaceous silty weathered
 13'D

②



INDICATE NORTH-NAME-ADJOINING-ROADWAY AS BASE LINE.

CROSS FOOT RD

1/10 HENKERTON Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/6/87	①	4 1/2 S	1113	1115	1115	1118	3 MIN	
		13' 0	bottom (see profile)					
	②	4 1/2 S	1128	1132	1132	1138	6 MIN	
		8' M	1123	1124	1124	1126	2 MIN	
		11 1/2 D	bottom (see profile)					
	③	4 1/2 S	1134	1136	1136	1138	2 MIN	
		12' D	bottom (see profile)					
	④	3 1/2	1147	1149	1149	1151	2 MIN	
		6 1/2 M	1144	1145	1145	1147	2 MIN	
		12' D	bottom					

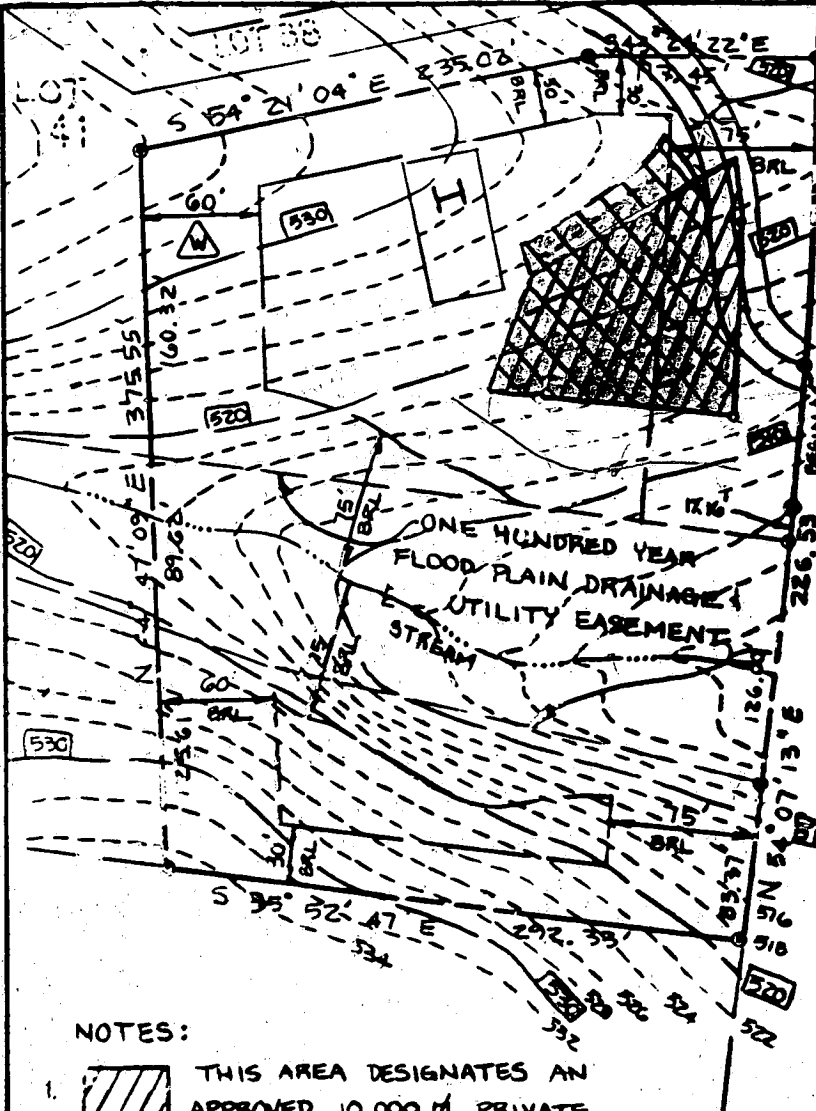
REMARKS Will adjust perc field to hopefully allow adjustment in perc field & well site for lot 20. Also better house site on lot 23

TYPE OF SOIL generally similar in all orange clay loam 4', below silty micaceous loam

TESTED BY B. Weyen ALSO PRESENT Ed, rocky

orange yellow clay / clay loam
 to soft sandy silty micaceous loam w/ 5% small frags micaceous weathered
 10% ↓
 11 1/2'D

③
 Similar soils as #2 but 10% micaceous weathered frags 5'
 12'



CROWS FOOT ROAD
(50' R/W)

25' EASEMENT FOR INGRESS, EGRESS & MAINTENANCE FOR LOTS 38, 39, 40, & 41





APPROVED: FOR PRIVATE WATER & SEWER SYSTEMS
HOWARD COUNTY HEALTH DEPT.

John B.
COUNTY HEALTH OFFICER DATE



G. Scott Shanabarger

NOTES:

1.  THIS AREA DESIGNATES AN APPROVED 10,000 sq ft PRIVATE SEWAGE EASEMENT PER PLAT # 8953
2.  DESIGNATES REVISED 10,000 sq ft PRIVATE SEWAGE EASEMENT AS REQUIRED BY THE MD STATE DEPT. OF HEALTH & MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED. THE EASEMENT SHALL BECOME NULL & VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT PLAT SHALL NOT BE NECESSARY.
3. SUBJECT PROPERTY ZONED 'R' PER 8-2-85 COMPREHENSIVE ZONING PLAN.
4.  DESIGNATES WELL LOCATION
5.  DESIGNATES PROPOSED HOUSE LOCATION.

SHANABERGER & LANE
8726 TOWN & COUNTRY BLVD.
SUITES 106 & 107
ELLCOTT CITY, MD 21043
(301) 461-9563


REVISED PERC AREA PLAT
LOT 40
MEADOWOOD
SEC. 2 AREA 2
PLAT # 8953
ZONING: 'R'
3RD ELECTION DISTRICT, HOWARD CO., MD
SCALE: 1" = 100'
DATE: 4/30/90

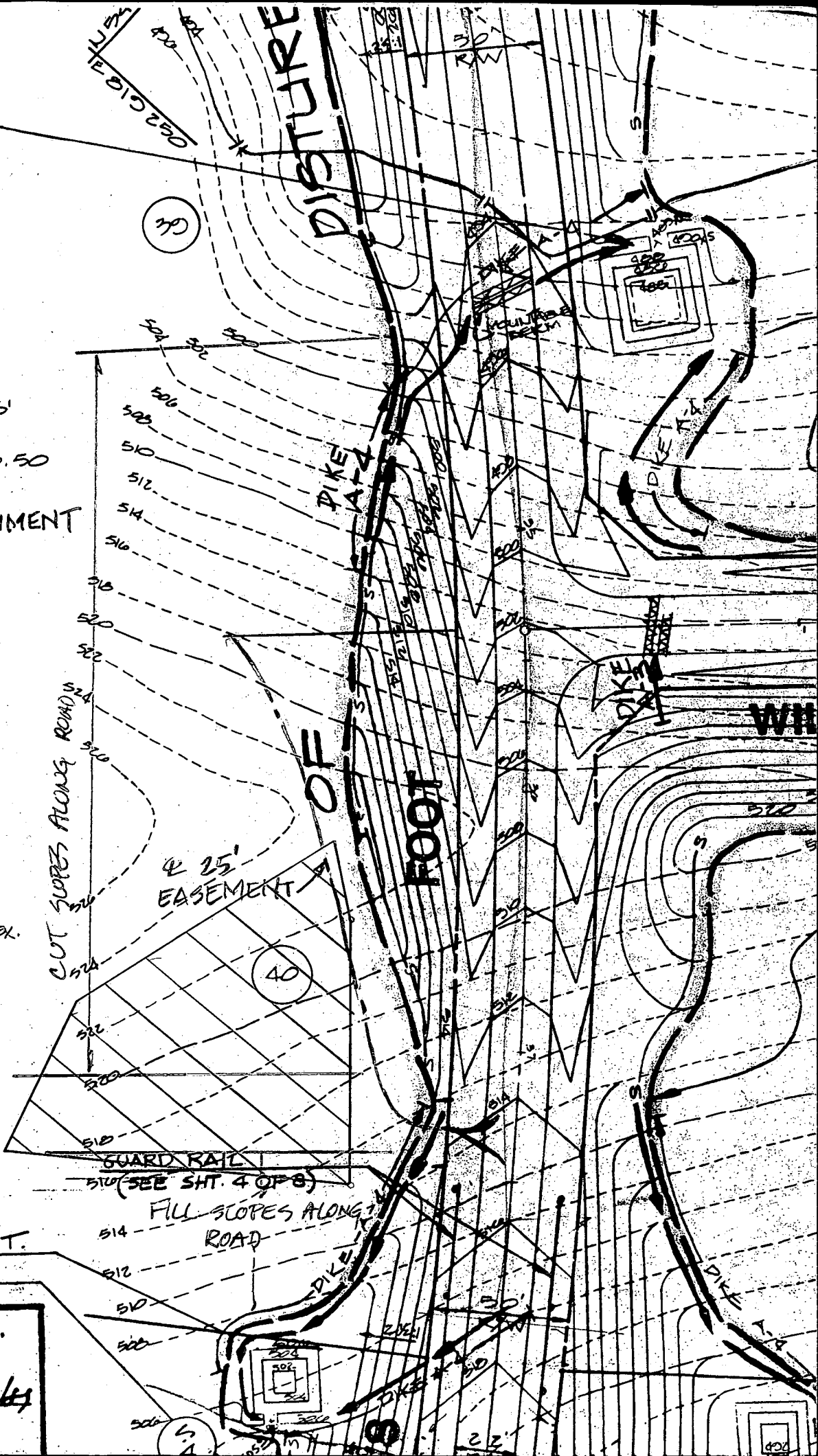
OUTLET TRAP #1

= 0.46 AC ±
 = 0.82 AC ±

(6' x 67') = 54.04 C.Y.
 = 57.77 C.Y.
 NS = 16' x 16'
 N = 485.00
 = 480.00
 ON = 486.50
 (0.82 x 4 = 3.21') USES
 = 2:1
 INT ELEVATION = 400.50

GRADING & SEDIMENT CONTROL PLAN MEADOWOOD SEC. 2 AREA 2 SCALE: 1" = 50'

 DENOTES EX. 10,000 lb PERCU AREA



S.O.S.T. # 6

A7823.007
 18887.156

PLANNING AND ZONING.

W. Langli 7/27/89
 Community Planning Date

SHANABERGER & LANE

Surveying • Land Planning • Construction Stakeout

May 3, 1990

Howard County Department of Health and Mental Hygiene
Court House Square
Ellicott City, Maryland 21043

ATTENTION: Craig Williams

RE: Revised Perc Area Plat, Meadowood, Lot 40


Dear Mr. Williams:

A revised perc area location for Lot 40 at Meadowood is necessary due to the placement of the 25-foot easement for ingress, egress, and maintenance for Lots 38, 39, 40, and 41. Area lost from the southeast side of the perc area is to be added to the north side of perc field to maintain the 10,000 square foot area as required by the Health Department regulations.

Placement of the 25-foot easement for ingress, egress, and maintenance for Lots 38, 39, 40, and 41 through the perc area was necessary because of the reasons stated below: The area to the left of the proposed entrance from Crows Foot Road is in excessive amounts of fill, making a drive in this area unfeasible. Running a drive through the right is not possible without running up and around the cut slopes in excess of 40% on the north side of Crows Foot Road. A copy of this area from the grading and sediment control plan for Meadowood is attached for review.

If there are any questions regarding this matter, please feel free to call me at 461-9563.

Sincerely,


G. Scott Shanabergen
President

GSS:kas
Enc.