

9/16/92 ASJ

03-312216

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48584

A 38174

DISTRICT 3rd

DATE 10/8/92

DATE SYSTEM APPROVED 9/16/92

INSPECTOR RH

# INDEXED

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

Jack Fyock Septic Service \_\_\_\_\_ IS PERMITTED TO INSTALL  ALTER \_\_\_\_\_

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Meadowood Sec. 1 LOT 6 ROAD 1214 Shady Creek Road

PROPERTY OWNER Edward & Kim Hartman

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1500 ~~1250~~ GALLONS

5 BA SYSTEM TO BE INSTALLED

NUMBER OF BEDROOMS 5

180 ~~210~~ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280 300

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6½ feet below original grade. Effective area begins at 4 feet below original grade. 2½ feet of stone below distribution pipe.

LOCATION - SHALLOW SYSTEM ONLY. Beginning from the junction of the left (239.39'/496.60') lot corner, place the 1st trench 260 feet down the left (496.60') lot line and 80 feet off the left line as seen when facing property from Shady Creek Court. Run trenches on contour towards the right (301.73') line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 8/26/92 RH

PLANS APPROVED BY Bert Nixon DATE 12/29/84

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

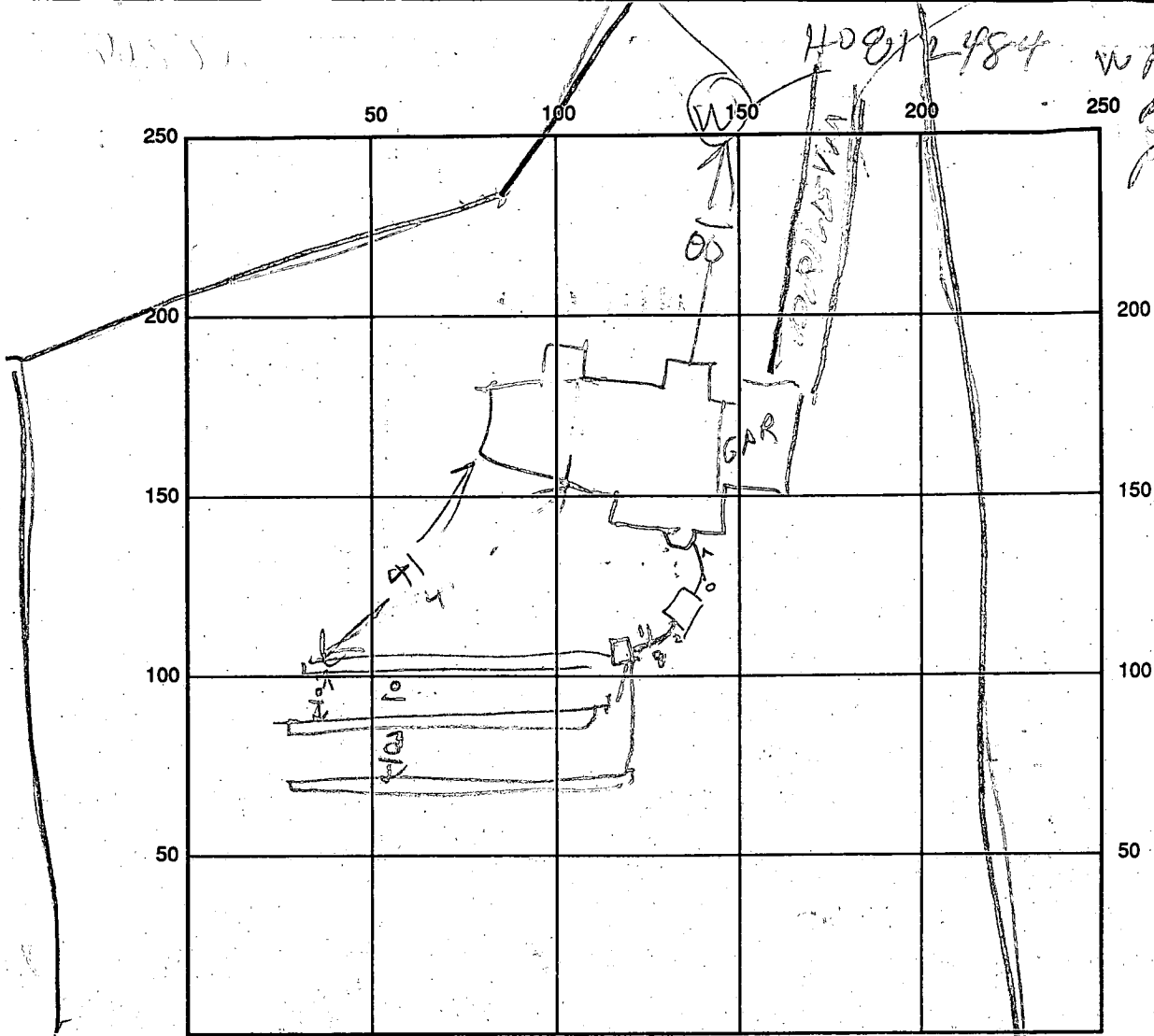
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

**\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.**

A  
38174



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 CLEANOUTS \_\_\_\_\_

DISTRIBUTION BOX LEVEL 010

DRAIN FIELD/TITLE DEPTH 6 1/2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 1/2 FT. TOTAL LENGTH 367 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 912 SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE SYSTEM APPROVED 9/16/92 INSPECTOR Raymond Hodges

# APPLICATION

PERCOLATION TESTING

A 38174  
P \_\_\_\_\_

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

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 Edward & Kim Hartman  
~~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. 6T 6

ROAD AND DESCRIPTION Henryton Road - approximately 4000' north of Tunnel Road  
Howard County, Maryland (1214 Shady Creek Rd)

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 Sedgwick  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING 12/3/86 PERC SATISFACTORY; HOLD FOR SUBDIVISION PLAT. SAMP

BLDG. PERMIT SIGNED

AND RETURNED 8/5/92  
Serial # 44787-SFD  
4 Bedrooms

# THIS IS NOT A PERMIT

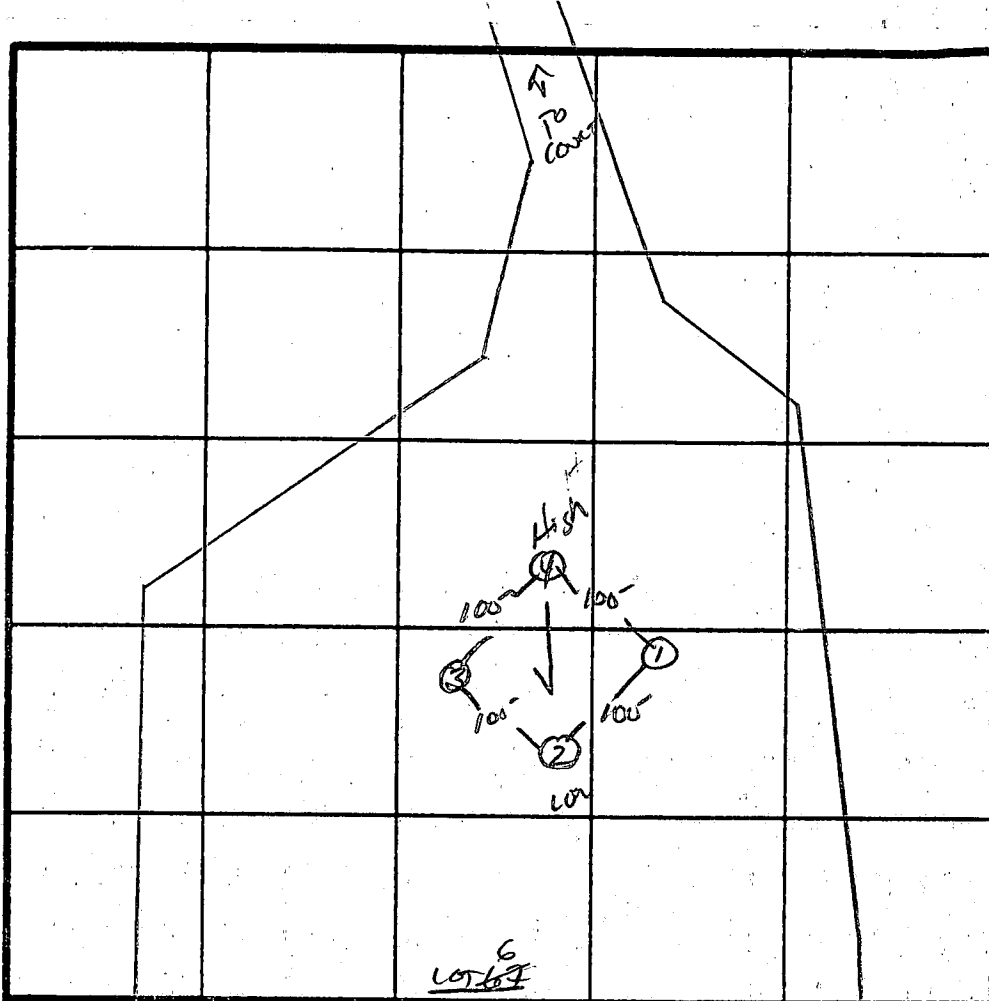


SOIL PROFILE

0  
4"  
4'  
12'

A1-3  
Yellow Br to  
Sandy Br.  
Silt loam  
9-12% clay  
small vein  
of stone  
at 3.5'

TAN/BR.  
SAND LOAM  
Slightly  
micaceous  
10-15%  
FRAGS



X Perc  
6 min  
INLET 4'  
BOTTOM 6 1/2'  
187 A/BR

0  
4"  
3'  
11"

A1-3  
Yellow Br  
Silt loam  
9% clay  
10% FRAGS

TAN/BR.  
Highly  
micaceous  
SAND LOAM  
30% FRAGS  
(Schist)  
increasing  
to 50%

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Henryton Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/3/84	1V	12"	uniform soil	below	4"		
	2S	4"	2:34	2:37	2:37	2:43	6 min
	2V	11"	uniform soil	below	3'		
	3S	4"	2:46	2:50	2:50	2:58	8 min
	3V	12"	same as #1				
	4S	4"	2:57	2:59	2:59	3:06	6 min
	4M	7.5"	3:02	3:05	3:05	3:09	4 min
	4V	12"	same as #1	#103	clay to 4"		

REMARKS HOLES PER PLAT

TYPE OF SOIL MAJOR Lm. / Glevely

TESTED BY S. Abel

ALSO PRESENT Spack & Co. DWNET



B 7. 2285 SEQUENCE NO. (OEP USE ONLY)  
1 2 3 4 5 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HO-81-2484  
70 fill in this form completely 79

Date Received 07 14 87  
OWNER INFORMATION  
15 Last Name SPRING HILL ASSOC  
Owner First Name  
36 Street or RFD 1423 RT 33  
55  
57 Town W FRIENDSHIP MD 21794  
70 State 72 Zip 76

B 3 LOCATION OF WELL R-39634  
1 2 HOWARD  
8 COUNTY 21  
23 SUBDIVISION MEADOWOOD  
42  
SECTION 1 44 46 LOT 6 48 50  
52 NEAREST TOWN SYLVANICORNER  
71  
MILES FROM TOWN (enter 0 if in town) 4 73 76 77 78 MI

DRILLER INFORMATION  
George F. Easterday 40  
Driller's Name 77 License No. 80  
L. Franklin Easterday, Inc.  
Firm Name  
9265 Br. Ch. Rd., Mt. Airy, Md. 21771  
Address  
Signature George F. Easterday 7/1/87  
Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
1 2  
NEAR WHAT ROAD SHADY CREEK CT  
30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH N  
WEST W  
EAST E  
SOUTH S  
34 DISTANCE FROM ROAD 200 37  
ENTER FT. or MI 200 38 39

B 2 WELL INFORMATION  
1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
22  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  
COUNTY NAME HOWARD A 28174  
COUNTY NO.  
OEP SIGNATURE R. Wilson 06/29/88  
DATE ISSUED  
43 48 CO-SIGNATURE  
NORTH GRID 549000 55 EAST GRID 0821000 63

APPROXIMATE DEPTH OF WELL 300 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH

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

REPLACEMENT OR DEEPEINED 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  
39  S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 D THIS WELL WILL DEEPEIN AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41

Not to be filled in by driller (OEP USE ONLY)  
APPROP. PERMIT NUMBER 54 GAP 63  
FORCE 67 WRITE INITIALS IN BOX PERMIT No. HO-81-2484 68 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS BEEN ON HOLD PENDING SUITABLE ROAD ACCESS 99

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 820 1  
N 540 8  
000  
000

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  
N  
4-13-88  
No one at grout  
4-15-88  
Grouted  
32 bags cement  
2 ft above ground  
JENADLAN  
EVERLEAD TUNNEL LTD  
HENRY TOWN  
HEVIL HOWARD CORNER  
50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79

**2093**  
 (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 38174**

DATE RECEIVED: [ ] [ ] [ ] [ ] [ ] [ ]  
 DATE WELL COMPLETED: **04 12 88**  
 DEPTH OF WELL (TO NEAREST FOOT): **300**  
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **HO-81-2484**

OWNER: **ASSOCIATES SPRING HILL**  
 STREET OR RD: **HENRYTON RD / SHADY CREEK CT.** TOWN: **SYKESVILLE**  
 SUBDIVISION: **MEADOWOOD** SECTION: **1** LOT: **6**

**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	
Slate	2	45	
Soft Brown mica	45	53	
Brown mica	53	80	<input checked="" type="checkbox"/>
Gray mica	80	107	
Brown mica	107	110	
GRAY mica	110	300	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **16** NO. OF POUNDS **1000**  
 GALLONS OF WATER **80**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **48** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** **PL** **OT**  
 STEEL CONCRETE PLASTIC OTHER  
 MAIN CASING TYPE: **ST** **L** **ST**  
 Nominal diameter top (main casing): **5** **7**  
 Total depth of main casing (nearest foot): **57**  
 OTHER CASING (if used) diameter inch depth (feet) from to

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
**ST** **BR** **HO**  
 STEEL BRASS OPEN HOLE  
**PL** **OT**  
 PLASTIC OTHER  
 DEPTH (nearest ft.): **HO** **55** **300**

**SCREEN**  
 SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_  
 DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)  
 GRAVEL PACK \_\_\_\_\_  
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

**C 3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **6**  
 PUMPING RATE (gal. per min. to nearest gal.) **2**  
 METHOD USED TO MEASURE PUMPING RATE: **Bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **53** WHEN PUMPING **161**  
 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) \_\_\_\_\_  
 PUMP HORSE POWER \_\_\_\_\_  
 PUMP COLUMN LENGTH (nearest ft.) \_\_\_\_\_  
 CASING HEIGHT (circle appropriate box and enter casing height) **+** above **-** below  
 LAND SURFACE (nearest foot) **2**

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 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. **40**  
 DRILLERS SIGNATURE: *Herv A. Easton*  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee): *[Signature]*

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) **WQ**  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

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 plat plan*

*mm*  
8:00 4-25

**FIELD DATA SHEET**  
**HOWARD COUNTY WELL YIELD TEST**

Well Permit No. HO - 81-2484  
Location of property (road) HENRYTON RD / SHADY CREEK CT.  
Subdivision MEADOWOOD Lot 6 Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. 1  
Well Driller GEORGE EASTRDAY Owner ASSOCIATES, SPRING HILL

Depth of well 300 26 ft.  
Distance of measuring point (M.P.) above ground 1 ft.  
Static water level (S.W.L.) below M.P. 53 ft.

**I. High rate pumping -- reservoir drawdown**

Time pump started 8:00 Pumping rate 12 gpm.  
Total time 30 min. to reach pumping water level 155' ft. below M.P.

**II. Recovery pump test data - observations to be recorded every 15 minutes**

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill <del>X</del> 1 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	155'	28 Sec.	N/A	2.1
8:45	154'	28	pump at 260' R. Hanan	2.1
9:00	155'	28		2.1
9:15	154'	28		2.1
9:30	155'	28		2.1
9:45	155'	28		2.1
10:00	156'	28		2.1
10:15	157'	28		2.1
10:30	160'	30		2
10:45	160'	30		2
11:00	160'	30		2
11:15	160'	30		2
11:30	160'	30		2
11:45	160'	30		2
12:00	160'	30		2
12:15	160'	30		2
12:30	160'	30		2
12:45	160'	30		2
1:00	160'	30		2
1:15	161'	30		2
1:30	160'	30		2
1:45	161'	30		2
2:00	161'	30		2
2:15	161'	30		2
HD-224 230	161'	30		2

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 # 48485  
Date 9/18/92

Name of Installer John M. GASKE III

Telephone 247-6963

License Number #3189

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner EDWARD HARTMAN

Telephone 531-61

Subdivision MEADOWOOD Lot # 6

Well Tag # HO 81 - 2484

Site Address 1214 SHADY CREEK ROAD

Pump

- Type
  - Deep well jet \_\_\_\_\_
  - Shallow well jet \_\_\_\_\_
  - Submersible X
- Make Goulds
- Model # 5ESS7
- Capacity 5 GPM
- Pump exceeds well capacity Yes  No
- If Yes, is low pressure cutoff switch installed? Yes  No \_\_\_\_\_
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors  Cable guards  Other TAPE

Motor

- Horsepower 3/4
- RPM \_\_\_\_\_
- Voltage \_\_\_\_\_
  - 110 \_\_\_\_\_
  - 220 X

Pitless Adapter

- Make Goulds
- Model # \_\_\_\_\_
- Depth 42"

Tank

- Capacity 80
- Pressure relief valve? \_\_\_\_\_

Piping

- Type Big Blue
- Size 1"
- NSF and/or BOCA Code approved \_\_\_\_\_
- Depth of supply line 280'  
80' to House

Well data

- Depth 300 ft.
- Yield 2 GPM
- Static water level \_\_\_\_\_ ft.
- Will water supply be disinfected by installer? NO

*INSP OK 9/16/92 RA*

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: John Gaske

Date: 9-3-92

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