

6-1-93  
2-10 ascp  
6/2/93  
9-27-94  
2:00  
11/100  
1/8

04-345681

House connection 066080  
ok 9/27 cbs  
P 49278

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 38357

DISTRICT 4th

DATE 5-26-93

DATE SYSTEM APPROVED 9/27/94

INSPECTOR CBS

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

X461-9933 313-2640

INDEXED

Jack Leigh

IS PERMITTED TO INSTALL  ALTER

ADDRESS 15619 Norman Drive, Gaithersburg, Maryland 20878 PHONE 301-963-9399

SUBDIVISION Hubbard Property LOT 4 ROAD 2950 Hobbs Road

PROPERTY OWNER Yan Lin Kianet Henry Wang

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

SHALLOW SYSTEM ONLY

200 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 268

3-90'

TRENCHES - 200 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the left front lot corner, start the first trench 110' down the left (527.38') lot line and 130' off the line as seen when facing property from Hobbs Road. Run trenches along contour towards the front (L = 304.90') line. Maintain minimum 100' from well to septic.

NOTE - PERC FIELD UNADJUSTABLE. No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 2/26/91

OK RA changed based new permit

PLANS APPROVED BY Bert Nixon cm DATE 01/26/88

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

BLDG. PERMIT SIGNED AND RETURNED 8/10/95 Serial # 50036

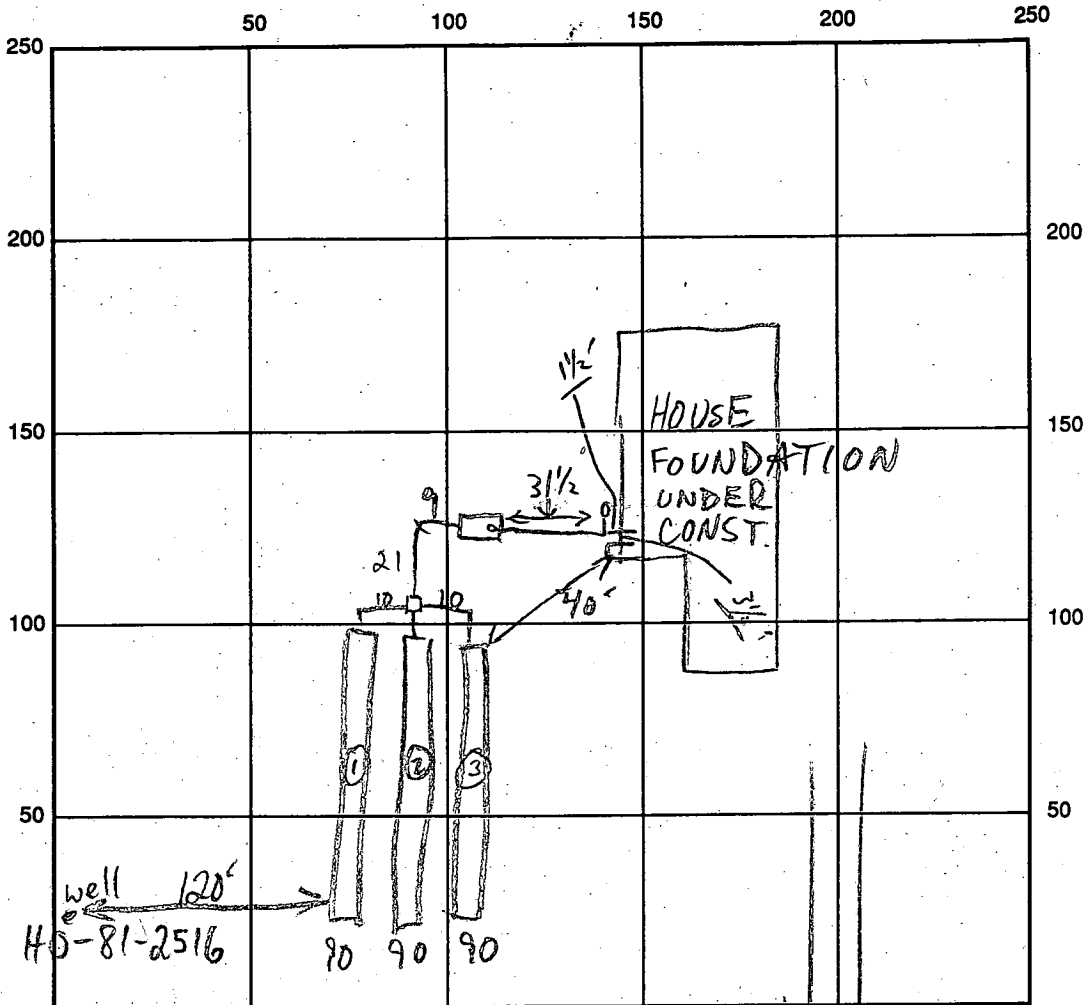
PERMIT VOID AFTER TWO YEARS

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. House inground pool

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 58957



HOBBS RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL-OK CLEANOUTS OK  
 DISTRIBUTION BOX LEVEL OK-BAFFLE IN  
 DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.  
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3@90 FT.  
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 3@270 SQ. FT.  
 DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.  
 ABSORBENT AREA 810 SQ. FT.

REMARKS: 6/1/93 VERIFIED STARTING LOC. W/CONTRACTOR MR  
6/7/93 OK TO COVER TANK & TRENCHES; HOLD FOR  
HOUSE CONN MR  
9/27/94 Water test from home to septic tank-ok

DATE SYSTEM APPROVED 8/29/94 INSPECTOR Ch. [Signature]

# APPLICATION

PERCOLATION TESTING

A 38357  
P \_\_\_\_\_

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

*12/8/86  
request on wet season  
(initials)*

DISTRICT \_\_\_\_\_  
DATE 10-14-86

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 Glenwood Springs Partnership YAN HIN KIAN ET

ADDRESS \_\_\_\_\_ PHONE 442-1045

PROSPECTIVE BUYER Ronald Carter

ADDRESS 8388 Court Ave., Ellicott City, Md. 21043 PHONE 461-2855

PROPERTY LOCATION: DENNIS HUBBARD PROP

SUBDIVISION Hakes Property LOT NO. TEN (4) MINI SUB PART

ROAD AND DESCRIPTION 2950 Hobbs Road

TAX MAP 14 PARCEL 83,87,202

SIZE OF LOT 3+ acres TYPE BLDG. SFD - 4 Bedroom  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED  
AND RETURNED 2/22/91  
Serial # 35679  
SFD - 4 Bedroom

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.

*Ronald J. Carter*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_  
BLDG. PERMIT SIGNED AND RETURNED 5/6/93  
Serial # 47922 - SFD  
4 Bedrooms

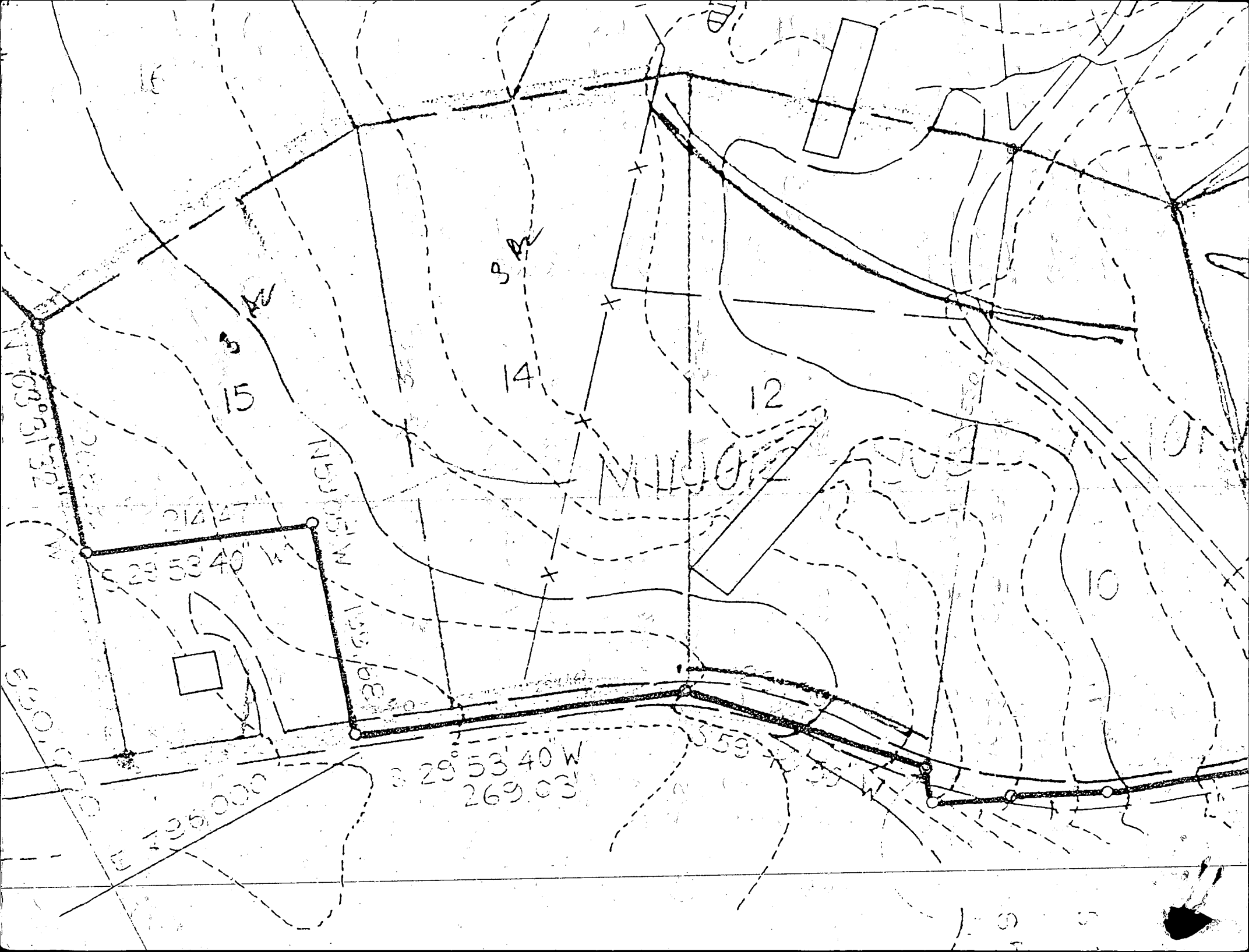
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS OK PENDING PLAT c/w/on DATE 3/2/87

REASONS FOR REJECTION OR HOLDING that season interest of house hold  
not OK in hold - go forward  
include

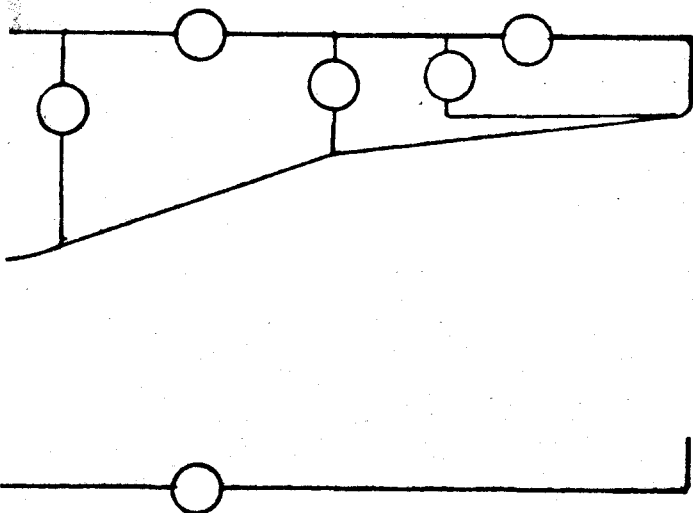
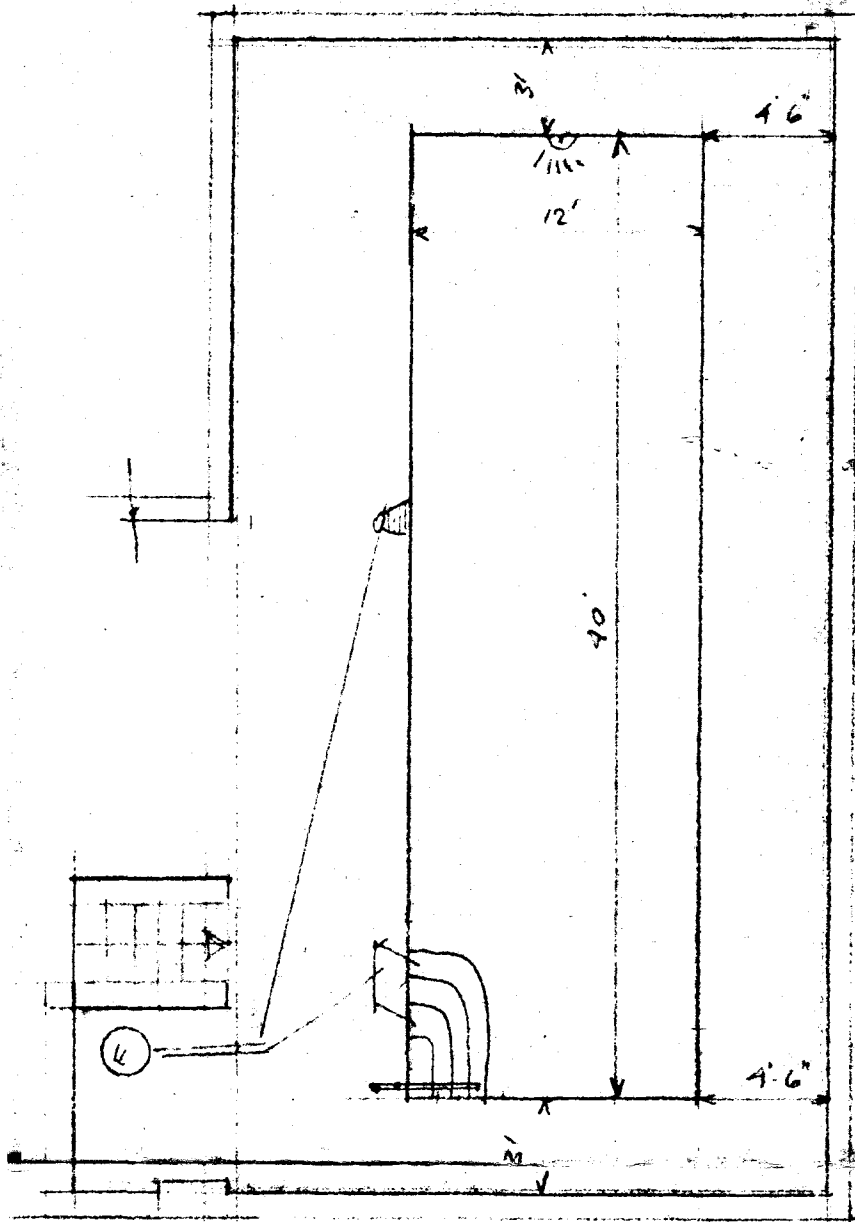
# THIS IS NOT A PERMIT











DECK	8	
STEPS	9	
AQUA DECK	10	
RET. WALL	11	
W. DECK	12	
ELECTRIC	13	BA AU
FENCE	14	
WATER FALL	15	

by owner

**BUYER:**

TO DETERMINE APPROXIMATE ELEVATION OF POOL ON DAY OF EXCAVATION.

**BUYER:**

POOL AREA TO BE FENCED, PER COUNTY OR CITY ORDINANCE. GATES TO BE SELF CLOSING AND SELF LATCHING.  
BY BUYER

**BUYER:**

WET DOWN CONCRETE SHELL AT LEAST TWICE DAILY FOR 7 DAYS. DO NOT TURN ON POOL LIGHT WHEN POOL IS EMPTY.

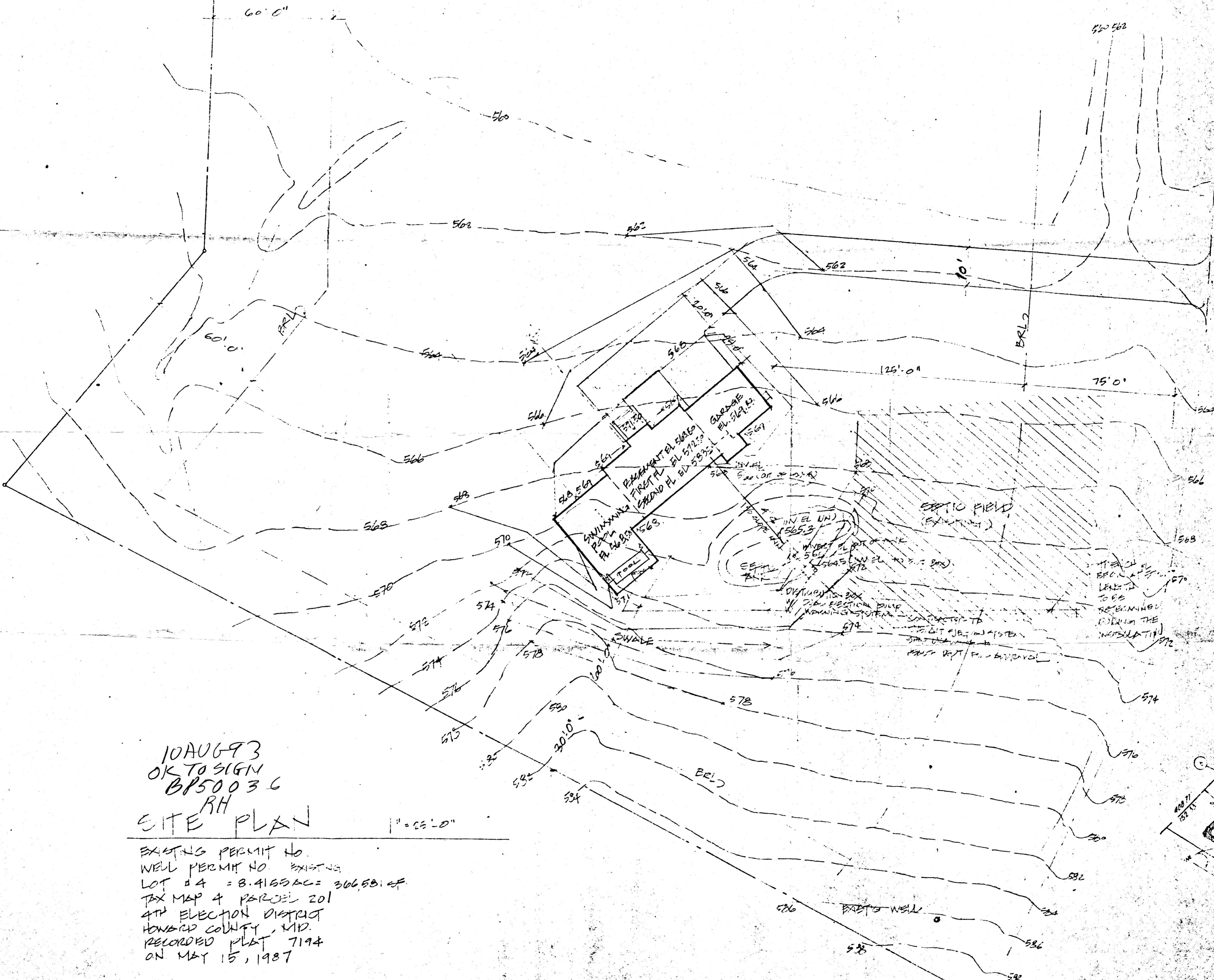
**NOTE**

Ho

66

TO

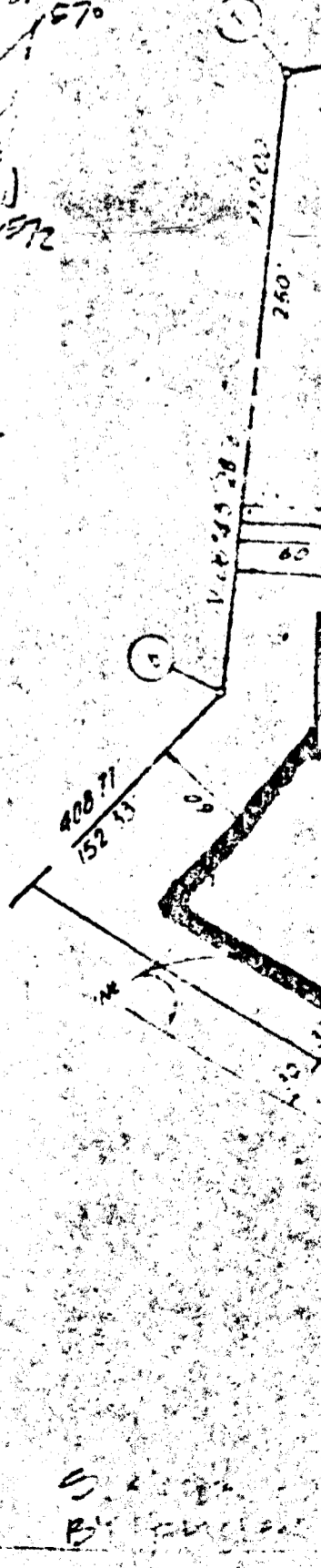
NO2



10AUG93  
 OK TO SIGN  
 BP5003C  
 RH  
 SITE PLAN

1" = 25'-0"

EXISTING PERMIT NO.  
 WELL PERMIT NO. EXISTING  
 LOT # 4 = 8.4165 AC = 366,581 SF  
 TAX MAP 4 PARCEL 201  
 4TH ELECTION DISTRICT  
 HOWARD COUNTY, MD.  
 RECORDED PLAT 7194  
 ON MAY 15, 1987



B 1 3630 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  
HD-81-2516  
fill in this form completely

Date Received (APA): 072288  
OWNER INFORMATION  
MARSHALL REALTY  
7020 GARDNER LANE  
HIGHLAND MD 20727

B 3 LOCATION OF WELL  
HOWARD COUNTY  
HUBBARDA PROPERTY  
SECTION 44 LOT 4 (MAP 14 P/O P. 201)  
GLENWOOD  
MILES FROM TOWN (enter 0 if in town) 1/2 MI

DRILLER INFORMATION  
Joseph L. Mayne 238  
Joseph L. Mayne Well Drilling  
5512 Ridge Rd. Mt. Airy 21771  
Joseph L. Mayne 1/19/88

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  
NEAR WHAT ROAD: Hobbs RD.  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
DISTANCE FROM ROAD 3.5 FT  
ENTER FT. or MI FF

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 COUNTY NAME A38357 COUNTY NO.  
STATE SIGNATURE DATE ISSUED 072688 R. N. Wilson 072688  
NORTH GRID 535 0 0 0 EAST GRID 0795 0 0 0

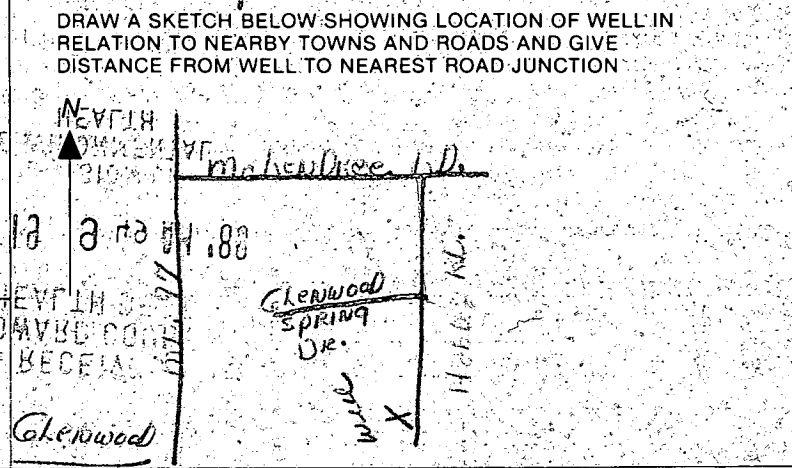
APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH 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  
SOURCES OF DRILLING WATER  
1. Well  
2.  
3.  
WRITE THE BOX NUMBER FROM THE MAP HERE  
790 5  
530 0

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)  
APPROP. PERMIT NUMBER GAP  
FORCE INITIALS IN BOX PERMIT No. HD-81-2516

SPECIAL CONDITIONS  
COUNTY

2/17/85

- ① 22 FT of Pipe
- ② LOCATION LOOKS OK
- ③ 12 FT open hole measured with a weighted string
- ④ 19 FT open hole obtained by using a jet pump
- ⑤ 5 bag used

BH

HEALTH  
ENVIRONMENTAL  
DIVISION

R. J. Dodger

88 AM 6 61

Judy & Johnny  
also present

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT

C1 2129  
 (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 38357

DATE Received [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
 DATE WELL COMPLETED 021788  
 Depth of Well 305 (TO NEAREST FOOT)  
 PERMIT NO. HO-81-2516

OWNER DEALTY MARSHALL (IED)  
 STREET OR RFD HOBBS ROAD first name  
 TOWN GLEADOWOOD  
 SUBDIVISION DEWIS HUBBARD PROP SECTION MAP 14 P/O P201 LOT 4

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	
SAND Stone	0	13	
GRAY Mica Rock	13	305	✓

GROUTING RECORD  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  Y  N  
 TYPE OF GROUTING MATERIAL  
 CEMENT  CM BENTONITE CLAY  BC  
 NO. OF BAGS 5 NO. OF POUNDS 470  
 GALLONS OF WATER 30  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from 0 ft. to 19 ft.  
 (enter 0 if from surface)

CASING RECORD  
 casing types insert appropriate code below  
 ST  CO  
 STEEL CONCRETE  
 PL  OT  
 PLASTIC OTHER  
 MAIN CASING TYPE  ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 22

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.)

EACH SCREEN	1	2	3
1	HO	20	305
2			
3			

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

C 3  
 PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 82  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING 45  
 WHEN PUMPING 83  
 TYPE OF PUMP USED (for test)  
 S submersible  
 A air  P piston  T turbine  
 C centrifugal  R rotary  O other (describe below)  
 J jet

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 } LAND SURFACE (nearest foot) 2  
 - below }

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

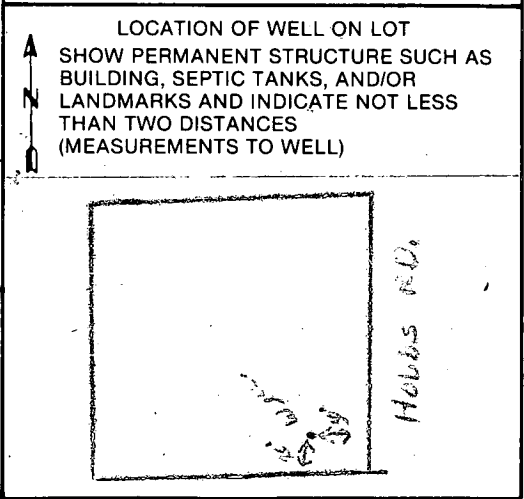
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10:17:13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 238  
 DRILLERS SIGNATURE Joseph L. Mayne  
 (MUST MATCH SIGNATURE ON APPLICATION)

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  
 TELESCOPE CASING LOG INDICATOR OTHER DATA







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## HOWARD COUNTY HEALTH DEPARTMENT

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*Joyce M. Boyd, M.D., County Health Officer*

February 14, 1995

Mr. Henry Wang  
2950 Hobbs Road  
Glenwood, MD 21737

RE: Hubbard Property, Lot #4  
2950 Hobbs Road  
Well Tag #HO-81-2516  
**U.V. LIGHT TREATMENT SYSTEM**

Dear Mr. Wang:

This is to advise you that the septic system was installed, inspected, and approved on September 27, 1994.

The **treated** water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

COMAR 26.04.04.09 prohibits approval of any water supply with bacteriological contamination. This department hereby grants a Permanent Deviation to that section of the regulation of the condition the ultra violet light disinfection system effectively maintains the required bacteriologically free condition of the well water supply.

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system must be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. It is recommended that a yearly bacteriological analysis be performed.
3. If you decide to sell or rent your home in the future, you must notify any potential buyer/tenant of the above condition.

