

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

03-312542

INDEXED

P 45120

A 38469

DISTRICT 3rd

DATE 10/26/89

DATE SYSTEM APPROVED 11/6/89

INSPECTOR M.R.

David Hopkins & Son

IS PERMITTED TO INSTALL  ALTER

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

SUBDIVISION Triadelphia Woods ROAD 12625 Golden Oak Drive LOT 23

PROPERTY OWNER Daivd McIntyre

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 4 per builder

TRENCHES - 190 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 - As seen from entrance at flagstem, and starting from front right lot corner, place first trench 125 feet down the right lot line and 55 feet off the same lot line. Run trenches on contour toward the left lot lines.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *o.c(w)*

PLANS APPROVED BY Mark Rifkin DATE 12/05/88

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

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

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

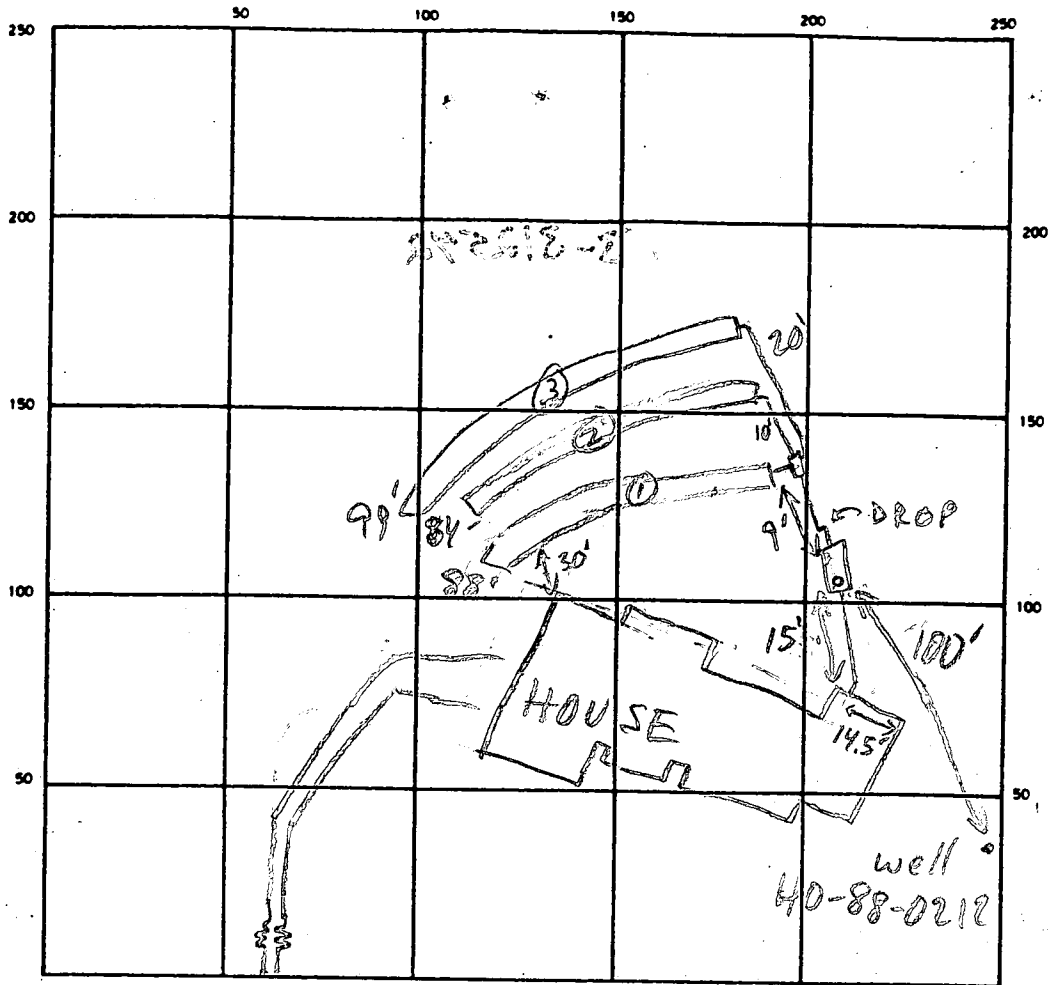
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

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

38469



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

GOLDEN OAK DR

SEPTIC TANK. LEVEL OK 1500 GAL CLEANOUTS OK

DISTRIBUTION BOX. LEVEL OK BAFFLE IN

DRAIN FIELD/TILE FIELD. DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT. NEEDS

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 284 FT. 284 299 271

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 813 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS 11/6/89 ALL WORK OK TO COVER MR

DATE SYSTEM APPROVED 11/6/89 INSPECTOR M. Rifkin

# APPLICATION

PERCOLATION TESTING

A 384/88

P \_\_\_\_\_

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

DISTRICT 3

DATE 10/20/86

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 ~~Potomac Land Co. Inc.~~

ADDRESS DAVID MCINTYRE PHONE 531-5539

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION Triadelphia Woods LOT NO. 573 <sup>LOT 23 Prelim.</sup> 6/29

ROAD AND DESCRIPTION Triadelphia Rd. on right 1/2 mile  
west of Carroll mill Rd.

TAX MAP 02 PARCEL # 528 12625 Golden Oak Dr.

SIZE OF LOT 37 Acre TYPE BLDG. \_\_\_\_\_  
(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.

Richard J. Donnell  
(SIGNATURE OF APPLICANT)

APPROVED BY Sally Allen FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR Standard form DATE 6-2-87

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

REASONS FOR REJECTION OR HOLDING 2-10-87 Perc Satisfactory; hold for subdivision plat. 5/1/87

LOG. PERMIT SIGNED  
AND RETURNED 6-2-87  
BP 26531 8A

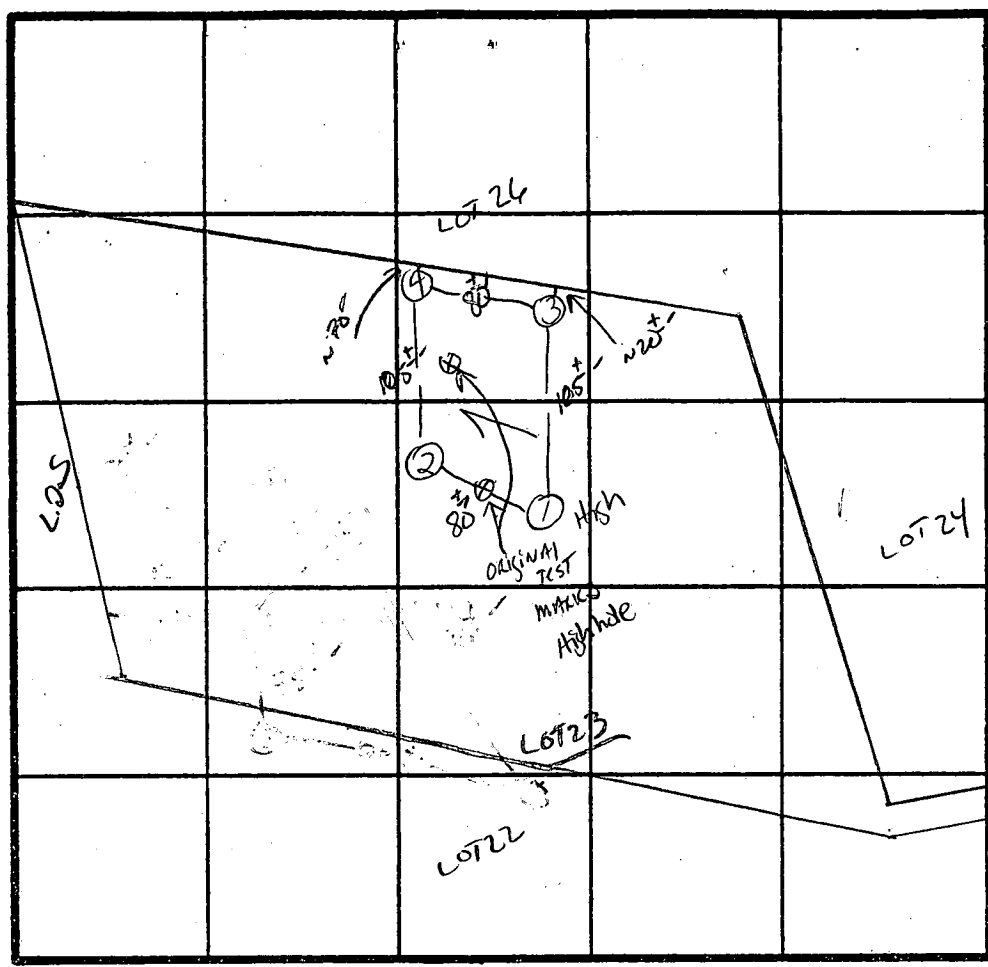
# THIS IS NOT A PERMIT

① SOIL PROFILE

0'  
4" 41-3  
Yellow BK  
Silt loam  
9-12% CLAY  
10-15%  
FRASS

3.5'  
Tan/Brown  
Silty SAND  
loam highly  
micaceous  
25-35%  
NO STRUCTURE

12-13'



X PERC 12 MIN  
190 AIR  
4" INLET  
6" BOTTOM

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
↓ TO TRIADOLPHIA Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/10/87	1 S	4.0	2:06	2:10	2:10	2:18	8 min
	1 M	8.5	2:06	2:07	2:07	2:10	3 min
	1 V	12.5	UNIFORM soil below 4.0'				
	2 S	4.5	2:19	2:26	2:26	2:44	18 min
	2 V	12.0	UNIFORM soil below 4.0'				
	3 S	4.0	2:38	2:48	2:48	3:13	25 min
	3 V	12-	UNIFORM soil below 4'				
	4 S	4.0	2:48	2:51	2:51	2:56	5 min
	4 V	12.5	UNIFORM soil below 4.0'				

REMARKS Holes Diff Than PCAT - Shallow Sqst. only

TYPE OF SOIL MANOR / Chester

TESTED BY S. Abei ALSO PRESENT R. Demit, Jim Adair  
Alan Dackha

EH-12-1079

125P  
11/6/89

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    
Replacement

Receipt # \_\_\_\_\_  
Date \_\_\_\_\_

Name of Installer EICHENBERG

Telephone \_\_\_\_\_

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

Name of Property Owner \_\_\_\_\_ Telephone \_\_\_\_\_  
Subdivision TRIADOLPHIA WOODS Lot # 23 Well Tag # HO-88-0212  
Site Address 17625 GOLDEN OAKS DR

<b>Pump</b>	<b>Motor</b>	<b>Pitless Adapter</b>
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
2. Make _____	b. 220 _____	
3. Model # _____		
4. Capacity _____ GPM		
5. Pump exceeds well capacity Yes _____ No _____		
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 _____ Other _____		

<b>Tank</b>	<b>Piping</b>	<b>Well data</b>
1. Capacity _____	1. Type _____	1. Depth <u>400</u> ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield <u>234</u> GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level <u>25</u> ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? _____

P.A. OK @ 3.5'  
B.G. MR 11/6/89

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: \_\_\_\_\_

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

C1 0550 SEQUENCE NO. (DENV USE ONLY)  
1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS: 3-3 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<sup>2</sup> 38469

DATE Received  
8 13

DATE WELL COMPLETED  
10/10/88  
15 20

Depth of Well  
22 400 26  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
A0-88-0212  
28 29 30 31 32 33 34 35 36 37

OWNER MC INTYRE DAVID  
last name first name  
STREET OR RFD GOLDEN OAK DRIVE TOWN GLENELL  
SUBDIVISION TREELINE WOODSECTION LOT 23

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 FROM TO Check if water bearing  
Sand 42 400  
Conyria Hack

GROUTING RECORD  
WELL HAS BEEN GROUTED (Circle Appropriate Box)  Y  N  
TYPE OF GROUTING MATERIAL  
CEMENT  CM BENTONITE CLAY  BC  
NO. OF BAGS 9 NO. OF POUNDS 846  
GALLONS OF WATER 54  
DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 42 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 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)  
ST 42 50

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  
1 110 42 400  
2  
3  
SLOT SIZE 1 2 3  
DIAMETER OF SCREEN (NEAREST INCH)  
56 60

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. 235  
DRILLERS SIGNATURE David J. McIntyre  
(MUST MATCH SIGNATURE ON APPLICATION)

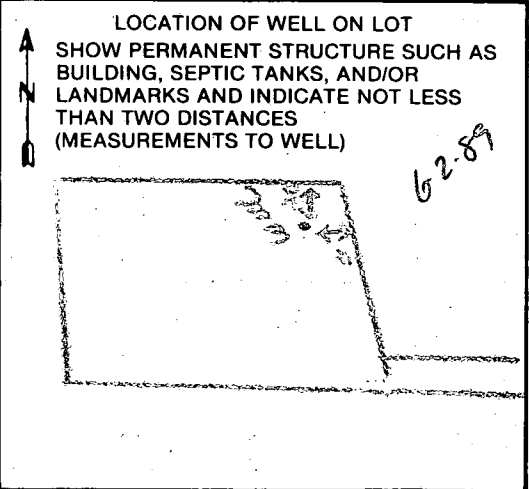
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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  
70 72 74 75 76  
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST  
HOURS PUMPED (nearest hour) 6  
PUMPING RATE (gal. per min. to nearest gal.) 28  
METHOD USED TO MEASURE PUMPING RATE pu pit  
WATER LEVEL (distance from land surface) BEFORE PUMPING 25 WHEN PUMPING 743  
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: 29  
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35  
PUMP HORSE POWER 37 41  
PUMP COLUMN LENGTH (nearest ft.) 43 47  
CASING HEIGHT (circle appropriate box and enter casing height)  + above } LAND SURFACE  - below } 2 (nearest foot)



COUNTY

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

Well Permit No. HO - 88-0212  
 Location of property (road) GOLDEN OAK DRIVE  
 Subdivision TRIANGLE PHIA Woods Lot 23 Block - Plat - Sec. -  
 Well Driller JOSEPH L. MAYNE Owner D. M<sup>c</sup> INTYRE

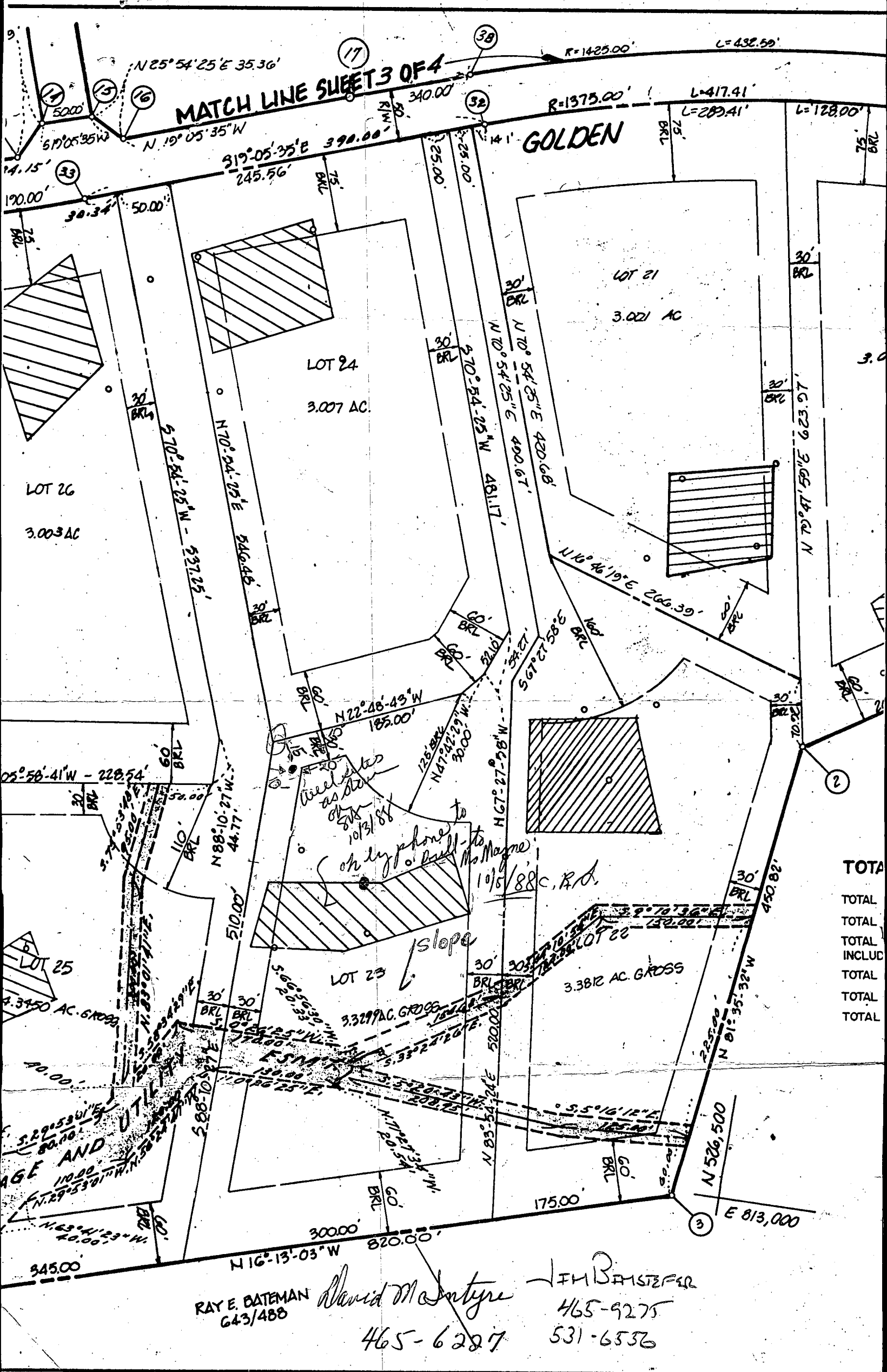
Depth of well 400"  
 Distance of measuring point (M.P.) above ground 2'  
 Static water level (S.W.L.) below M.P. 25'

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

Time pump started 7:30 Pumping rate 15 G.P.M.  
 Total time 45 min. to reach pumping water level 240 ft. below M.P.

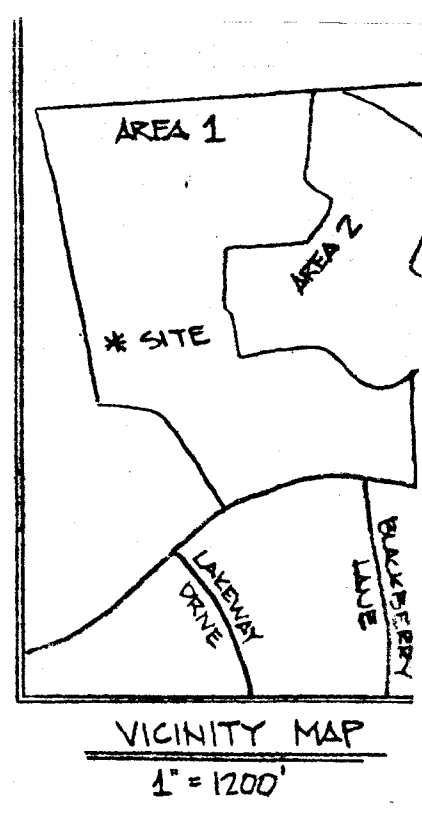
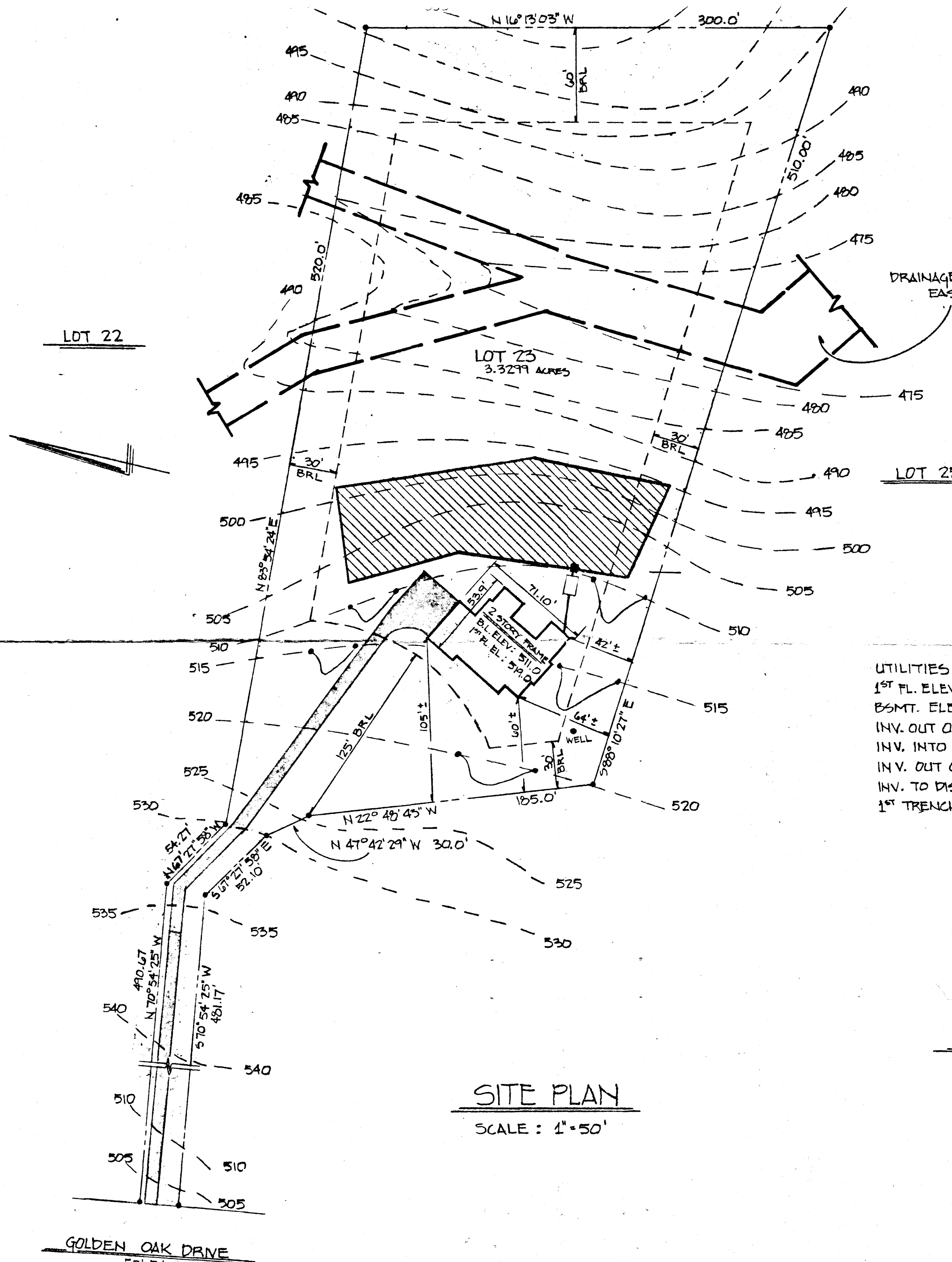
**II. Recovery pump test data - observations to be recorded every 15 minutes**

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE / time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	145	4	N/A	15
8:00	243	4		15
8:15	240	22		2 3/4
8:30	240	22		2 3/4
8:45	240	22		2 3/4
9:00	240	22		2 3/4
9:15	240	22		2 3/4
9:30	240	22		2 3/4
9:45	240	22		2 3/4
10:00	240	22		2 3/4
10:15	240	22		2 3/4
10:30	240	22		2 3/4
10:45	240	22		2 3/4
11:00	240	22		2 3/4
11:15	240	22		2 3/4
11:30	240	22		2 3/4
11:45	240	22		2 3/4
12:00	240	22		2 3/4
12:15	240	22		2 3/4
12:30	240	22		2 3/4
12:45	240	22		2 3/4
1:00	240	22		2 3/4
1:15	240	22		2 3/4
1:30	240	22		2 3/4
HD-224 1:45	240	22		2 3/4
2:00	240	22		2 3/4



**OWNER'S STATEMENT**

**SURV**



UTILITIES: WELL & SEPTIC  
 1<sup>ST</sup> FL. ELEV.: 519.00 ✓  
 BSMT. ELEV.: 511.00 ✓  
 INV. OUT OF HOUSE: 510.00 ✓ + BSMT  
 INV. INTO TANK: 509.50 ✓  
 INV. OUT OF TANK: 509.25 ✓  
 INV. TO DIST. BOX: 508.25 ✓  
 1<sup>ST</sup> TRENCH ELEV.: 507.25 ✓  
*1.25' shallow ch 812*

BUDG. PERMIT SIGNED  
 AND RETURNED 6-2-89  
 BP 26531  
 SA

SITE PLAN  
 SCALE: 1" = 50'

SINGLE FAMILY RESIDENCE

LOT 23 TRIADDELPHIA WOODS  
 SECTION 1, AREA 1  
 3 RD ELECTION DISTRICT  
 HOWARD COUNTY, MARYLAND  
 MAY, 1989

BEHK CONSTRUCTION COMPANY, INC.  
 17791 SHAFFERS MILL RD.  
 MT. AIRY, MD. 21771