

05-403405

PERMIT

WASTE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

MARYLAND

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 42308

A 38949

DISTRICT 5th

DATE 8/9/87

DATE SYSTEM APPROVED 6-22-88

INSPECTOR JEN

6-27-88
12 noon or after
6-22-88
1 PM

Fyock IS PERMITTED TO INSTALL ALTER

Jack

PHONE 988-9270

ADDRESS _____

SUBDIVISION Oakwood Overlook ROAD 4418 Oakwood Court LOT 25

PROPERTY OWNER James Myers

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

180
4720
180

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATIONS - Beginning from the juncture of the 303.08'/395.90' lot lines, place the distribution box 10 feet down the right (395.90') lot line and 80 feet off the right line as seen when facing property from Oakwood Overlook Court. Run trenches along contour towards the right (395.90'/303.08') lines.

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

PLANS APPROVED BY Bert Nixon DATE 12/01/87

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.

BUILDING PERMIT SIGNED AND RETURNED

2 CAR GARAGE (UNDERGROUND) 1128103 B00140030 FINISH BASEMENT

2/26/87 B001400301 SCHEDULED BLDG. PERMIT SIGNED

AND RETURNED 11/3/93

Serial # 57291 - approved

BLDG. PERMIT SIGNED AND RETURNED 4/18/90

Serial # 32075 - prd

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 38949

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

38 919

Howard County Health Department
 Bureau of Environmental Health
 3525-H Ellicott Mills Drive
 Court House Square
 Ellicott City, Md. 21043
 461-9933

New Installation
 Replacement

Receipt # 41962
 Date 6/15/88

Name of Installer C. S. Zabel

Telephone 875-2964

License number _____
 Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner James Myers Telephone 969-1903

Subdivision Oakwood Overlook Lot # 25 Well tag # _____

Site Address 4418 Oakwood Overlook
Dayton

Pump

1. Type
 - a. Deep well jet
 - b. Shallow well jet
 - c. Submersible

Motor

1. Horsepower _____
2. RPM _____
3. Voltage _____
 - a. 110 _____
 - b. 220 _____

Pitless Adapter

1. Make _____
2. Model # _____
3. Depth _____

2. Make _____
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 _____

Tank

1. Capacity 40 equivalent
2. Pressure relief valve? RV-52

Piping

1. Type Plastic
2. Size 1"
3. NSF and/or BOCA Code approved _____
4. Depth of supply line 42"

Well data

1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? _____

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: C. Stephen Zabel

Date: _____

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

2095 SEQUENCE NO. (OEP USE ONLY)
THIS NUMBER IS TO BE PUNCHED COLS. 3-6 ON ALL CARDS

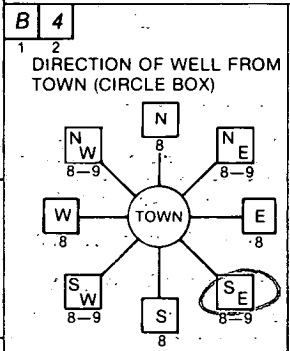
STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

OEP PERMIT NUMBER
HO-81-2098
fill in this form completely

Date Received *4/17/87 - 12:00*
OWNER INFORMATION
Last Name: **MAYERS** Owner: **JAMES** First Name: **JAMES**
Street or RFD: **118 GERALD RD**
Town: **SEVERN** State: **MD** Zip: **21144**

LOCATION OF WELL
COUNTY: **HOWARD**
SUBDIVISION: **OAKWOOD OVERLOOK**
SECTION: **25** LOT: **25**
NEAREST TOWN: **GLENELG**
MILES FROM TOWN: **1** MI

DRILLER INFORMATION
Driller's Name: **Ralph Mayne** License No. **203**
Firm Name: **Ralph Mayne (well Driller)**
Address: **9120 Brown Church Rd. Mt. Airy**
Signature: *Ralph Mayne* Date: **2/24/87**



OAKWOOD OVERLOOK CT.
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): **WEST**
DISTANCE FROM ROAD: **350** FT
ENTER FT or MI: **FT**

WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.): **5**
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): **500**

USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
COUNTY NAME: **HOWARD** COUNTY NO. **A 38949**
OEP SIGNATURE: *J. Stover* STATE HEALTH INSERT S
DATE ISSUED: **06/18/87** EXP. DATE: **12/1/87**
NORTH GRID: **515000** EAST GRID: **0803000**

APPROXIMATE DEPTH OF WELL: **150** FEET

APPROXIMATE DIAMETER OF WELL: **6"** NEAREST INCH

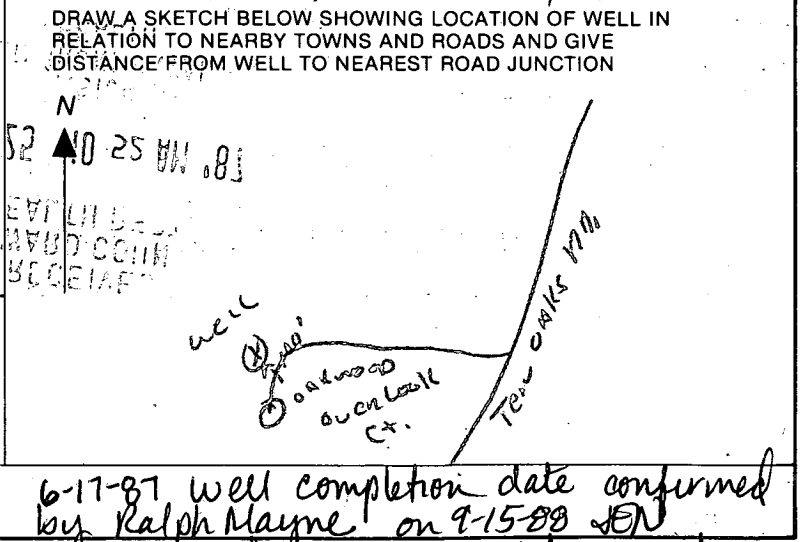
METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT
other: _____

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:
E: **8023**
N: **5105**
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
6/17/87
LOCATION OK
62' CASING
2' ABOVE GROUND
NOT PRESENT FOR GRWT
DRUG INDICATES
30' OPEN HOLES
10 BAGS CEMENT
6/18/87 CW

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 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: **1** WRITE INITIALS IN BOX: **MS** PERMIT NO.: **HO-81-2098**

SPECIAL CONDITIONS: **4/12-2337**



Date: **6-17-87** well completion date confirmed by **Ralph Mayne** on **9-15-88** JEN
Will send copy of completion report.

C1 9357 SEQUENCE NO. (MDE USE ONLY)
 12-17-98 ok

STATE OF MARYLAND
 WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE TYPE

THIS REPORT MUST BE SUBMITTED AFTER
 WELL IS COMPLETED.
 COUNTY NUMBER A-38949

ST/CO USE ONLY-
 DATE Received
 MM DD YY
 8 13

DATE WELL COMPLETED
 MM DD YY
 12 7 98
 Depth of Well
 22 440' 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
 HO-94-1983
 28 29 30 31 32 33 34 35 36 37

OWNER Myers
 STREET OR RFD 4418 Oakwood Overlook Jim
 TOWN Dayton
 SUBDIVISION Oakwood Overlook SECTION LOT 25

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	0	50	
Gray Mica Rock	50	440	✓

Dry well backfilled
 440-40 drilling materials
 40-0 Cement

GROUTING RECORD
 WELL HAS BEEN GROUTED. (Circle Appropriate Box) Y N
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 19 NO. OF POUNDS 1786
 GALLONS OF WATER 114
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 50 ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch)! Total depth of main casing (nearest foot)
 ST 6 54
 60 61 63 64 66 70

OTHER CASING (if used)
 diameter depth (feet)
 inch from to
 E A C H C A S I N G

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

NUMBER OF UNSUCCESSFUL WELLS: 1
 WELL HYDROFRACTURED Y N

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 LIC. NO. 1 MSD024
 DRILLERS SIGNATURE Joseph L. Mayne
 (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. 1 MSD027
 DRILLERS SIGNATURE Larry Mayne

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

C 2 DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
E																					
A																					
C																					
H																					
S																					
R																					
E																					
N																					

SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from 56 to 60

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE 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

C 3 PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min.) 6
 METHOD USED TO MEASURE PUMPING RATE Air
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 56 ft.
 WHEN PUMPING 320 ft.
 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 INSTALLED PUMP (CIRCLE) (YES OR NO) YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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 } 1 (nearest foot)

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
 See Attached location
 Water

SITE INSPECTION SHEET

11/23/98 : 11am
met driller
OWNER: _____

DATE REQUESTED: 11/23/98

ADDRESS: 4418 Oakwood Overlook

DRILLER: Joseph Mayne

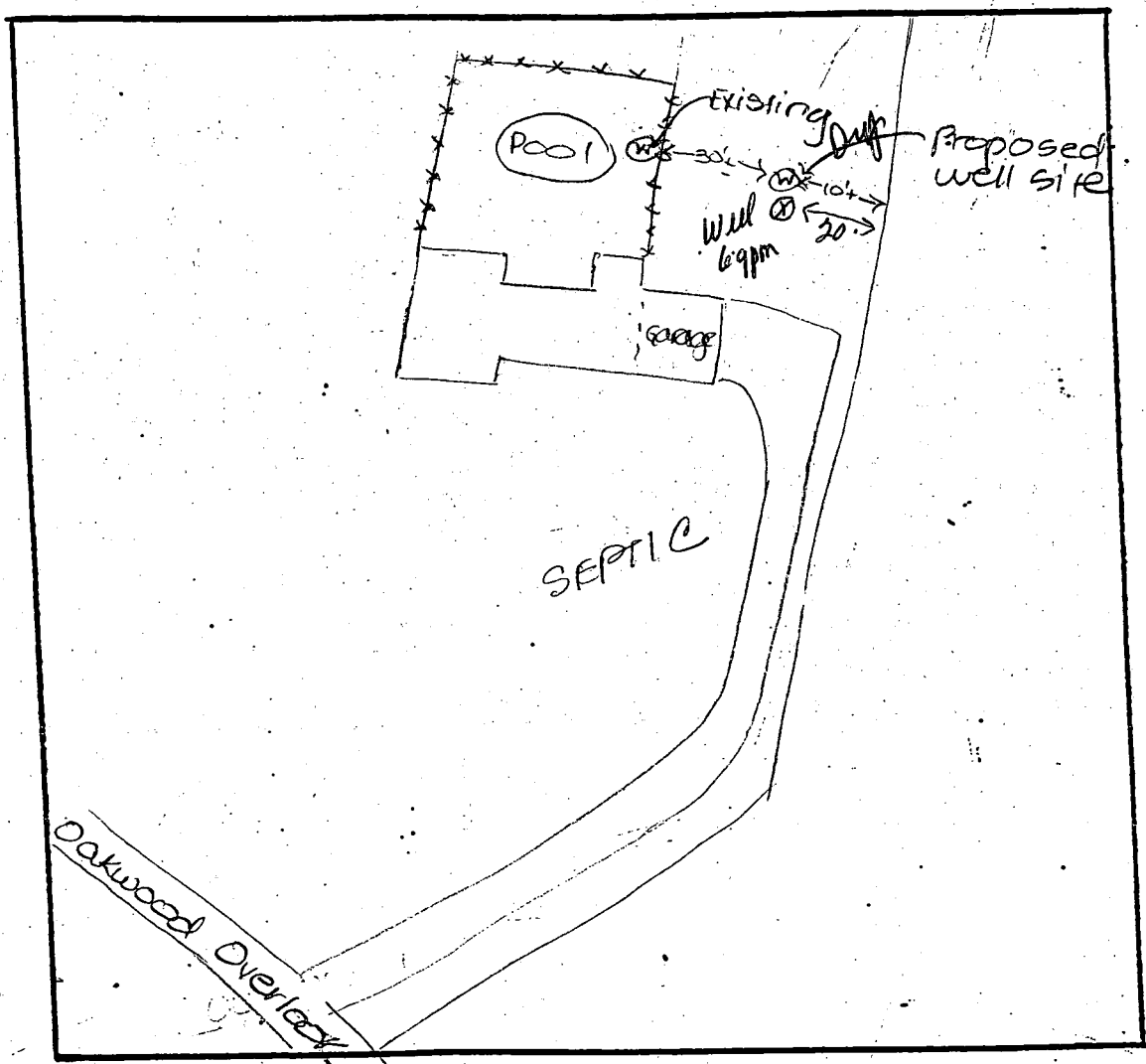
Oakwood Overlook, Lot #25

WELL TAG # HO-81-2098

COUNTY # Howard (13)

PROPOSAL: Replacement Well Site

LOCATION DIAGRAM



COMMENTS: Site inspection performed - replacement well site
OK as stated - Owner intends to abandon low yield well
providing acceptable yield is obtained from repl. well.

DATE: 11/23/98

INSPECTOR: [Signature]

B 1 0359

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

Ho - 94 - 1983 fill in this form completely

Date Received (ABA) 11/23/98

OWNER INFORMATION

Muirs Jim 4478 Oakwood Overlook Ct. Dayton Md.

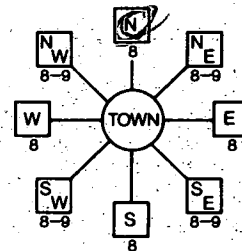
B 3 LOCATION OF WELL

Howard County Oakwood Overlook Dayton MD

DRILLER INFORMATION

Joseph E. Magna M-S D 24 Joseph E. Magna Well Drilling 5512 Ridge Rd. Mt. Airy Md 21777

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



4418 Oakwood Overlook NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 34 340 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

TAX MAP: BLK: PARCEL

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION (circled) FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) INDUSTRIAL, COMMERCIAL, DEWATERING PUBLIC WATER SUPPLY WELL TEST, OBSERVATION, MONITORING GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD A 38949 COUNTY NAME COUNTY NO. STATE SIGNATURE INSERT S DATE ISSUED 11/24/98 CO SIGNATURE EXP. DATE NORTH GRID 515 000 EAST GRID 0803 000

APPROXIMATE DEPTH OF WELL 300 FEET APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

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)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS 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 (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER G A P 54 63

PERMIT No. 10-94-1983

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

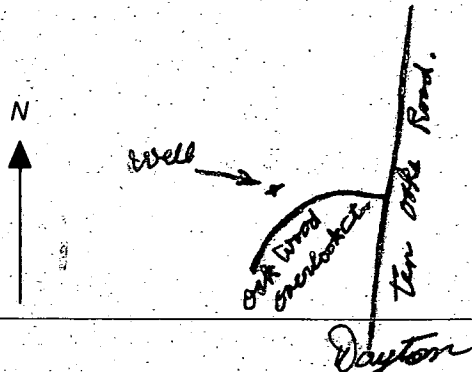
SOURCES OF DRILLING WATER 1. Well 2. 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

E 8003 N 5105

12/7/98 GROUT 9:00 Well appears ok - missed location of well

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

11/23/98 : 11am meet driller

OWNER: _____

DATE REQUESTED: 11/23/98

ADDRESS: 4418 Oakwood Overlook

DRILLER: Joseph Mayne

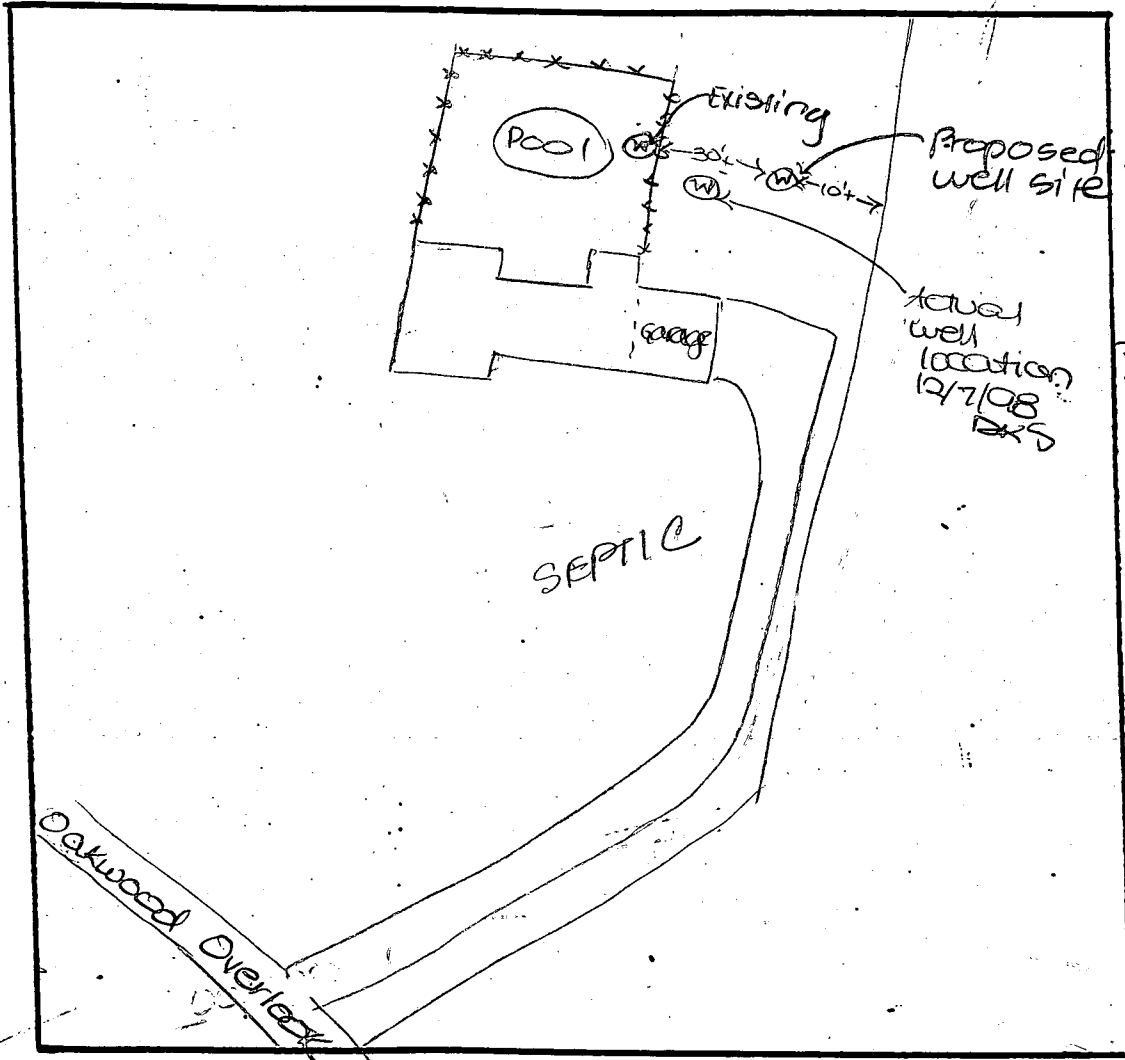
Oakwood Overlook, Lot #25

WELL TAG # HO-81-2098

COUNTY # Howard (13)

PROPOSAL: Replacement Well Site

LOCATION DIAGRAM



Original site dry - I approved a "well zone" from ex. well back to rear lot line.
DKS

COMMENTS: Site inspection performed - replacement well site

OK as stated - Owner intends to abandon low yield well providing acceptable yield is obtained from repl. well.

DATE: 11/23/98

INSPECTOR: [Signature]

APPLICATION

PERCOLATION TESTING

A 38949

P _____

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

DISTRICT 5th

DATE 3-19-87

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 KENNARD WARFIELD JR. JAMES MYERS

ADDRESS 14663 TRIADELPHIA Rd Glenely Md 21737 PHONE 489-7132

PROSPECTIVE BUYER James Myers

ADDRESS Severn, Md PHONE 969-1903

PROPERTY LOCATION:

SUBDIVISION OAKWOOD Overlook LOT NO. #25

ROAD AND DESCRIPTION TEN OAKS Rd (Close to 4478)
4418 OAKWOOD Overlook Ct.

TAX MAP 22428 PARCEL # 2

SIZE OF LOT 3.1488 TYPE BLDG. Single Family Dwelling
(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.

Shirley D. Richardson
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 7-17-87 Perc Satisfactory - hold for PCAT. SATU

BLDG. PERMIT SIGNED
AND RETURNED 8/31/87
BP #14187
SK

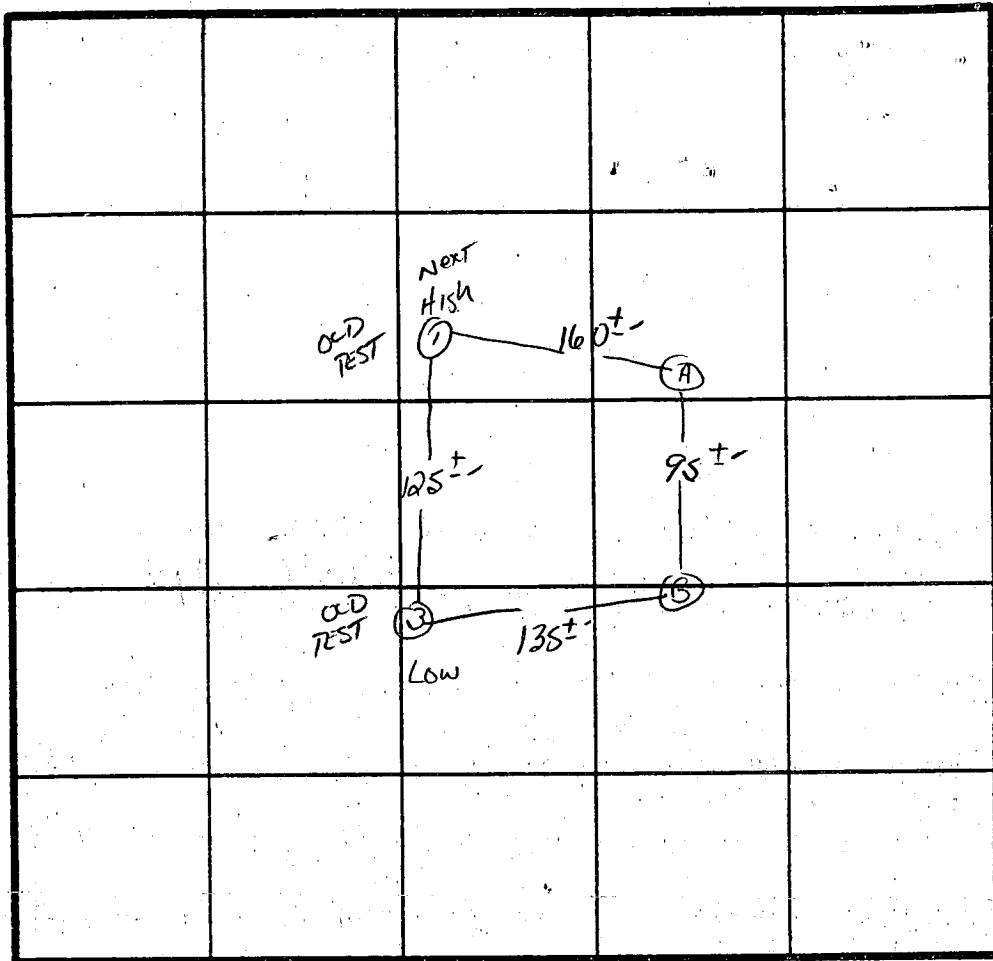
THIS IS NOT A PERMIT

SOIL PROFILE

0"
 10"
 3.5'
 12.5'

AP 14x
 Yellow BR
 Silty CLAY
 20MM
 10-15% QUARTZ
 FRAGS

TAN/BK
 MICACEOUS
 SILT LOAM
 15-25%
 SCHIST FRAGS
 ↑ing to
 35-40% AT
 BOTTOM



X Perc 6 min

170 φ 1 BR

Inlet 4'
 Bottom 8'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

6
 12"
 4.5'
 12"

AP 14x
 Yellow BR
 Silty Clay Lm.
 MANY QUARTZ
 FRAGS
 25-35%
 Yellow BR.
 MICACEOUS
 SILT LOAM
 15-20%
 FRAGS

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/17/87	A S	4.0' 12.5'	11:27 UNIFORM	11:29 SOIL below	11:29 3.5-4.0'	11:32	3 min
	B S	5' 12'	11:39 UNIFORM	11:45 SOIL below	11:45 4.5'	11:55	10 min
	1	Sm 4mm 12" DEEP					
	3	Fr 12" DEEP					

REMARKS (1) STAKE IN Field + 1 dus AT SA request.

TYPE OF SOIL Chester Hole B + Hole A

TESTED BY S. Abel

MARK; O. KOPPELMAN

ALSO PRESENT

APPLICATION

PERCOLATION TESTING

A 3649P

P _____

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

DISTRICT 5

DATE 1-24-86

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 Kennard Warfield, Jr.

ADDRESS 14663 Tridelphia Rd. Co. NCL5 PHONE 465-5855

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Resub Lots 1 & 2 Warfield Property LOT NO. 13

ROAD AND DESCRIPTION Tex Oaks Rd - 1/2 mile south of Tex Oaks + Tridelphia intersection

TAX MAP 22 & 28 PARCEL # 2

SIZE OF LOT 3.0 acres 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

George L. Beach for K. Warfield
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

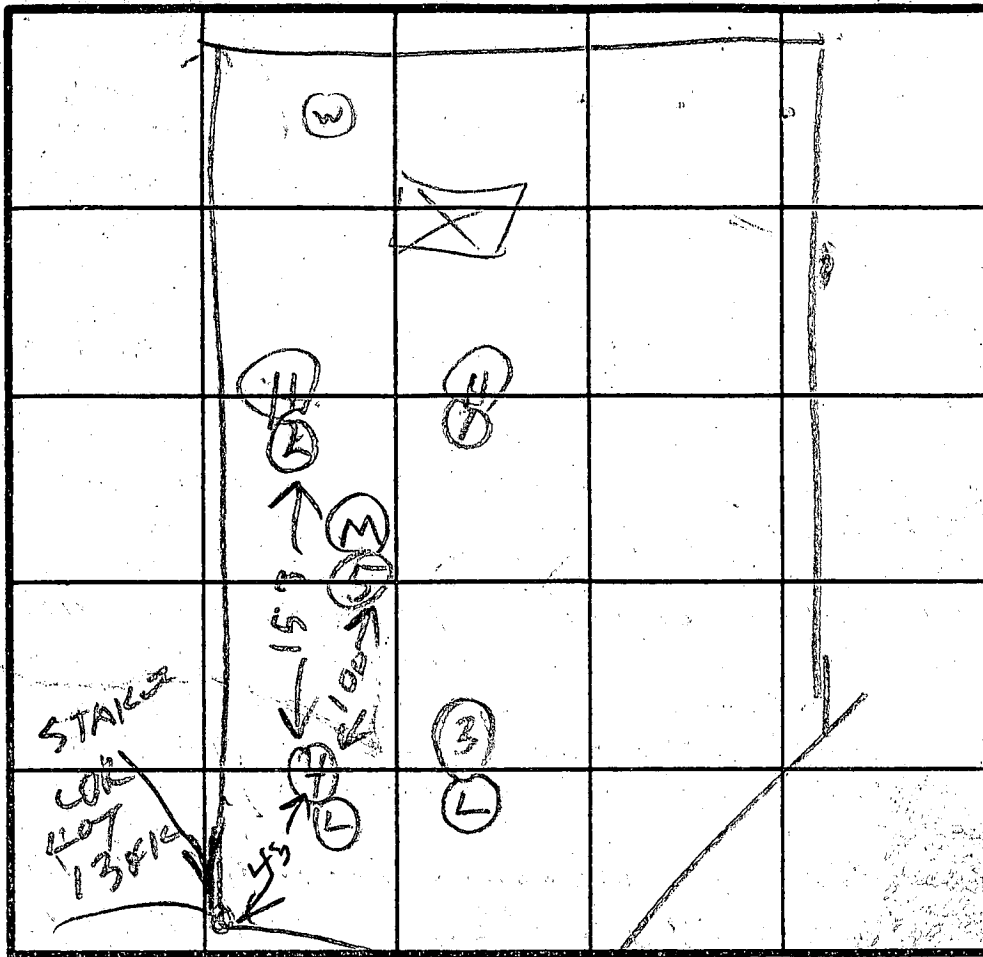
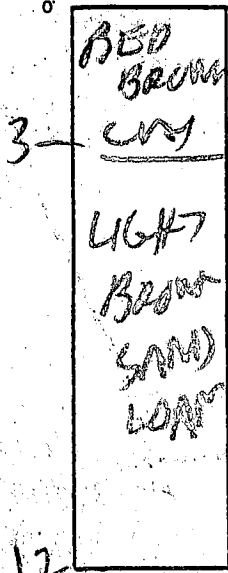
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

50

SOIL PROFILE



HOLE ELEV

① ② HIGH
③ ④ LOW
⑤ MED

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
STREET

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/13/82	I S	4.5	242	245	245	250	5
	I D	8	244	246	246	250	4
L	IV	12	LOOKS OK		OK		
	2 S	4	245	247	247	250	3
	2 V	11	LOOKS OK				
	3 S	3.5	301	307	307	314	7
	3 V	12	LOOKS OK		OK		
	4 S	7	305	309	309	315	6
4 V	13	LOOKS OK		OK			
	5 V	12	LOOKS OK				

2 Perc
5 MIN
INLET
3.5
BOTTOM
5"
158 HBR

REMARKS

Hole dug for Surveyor Plot Enept ⑤

TYPE OF SOIL

TESTED BY

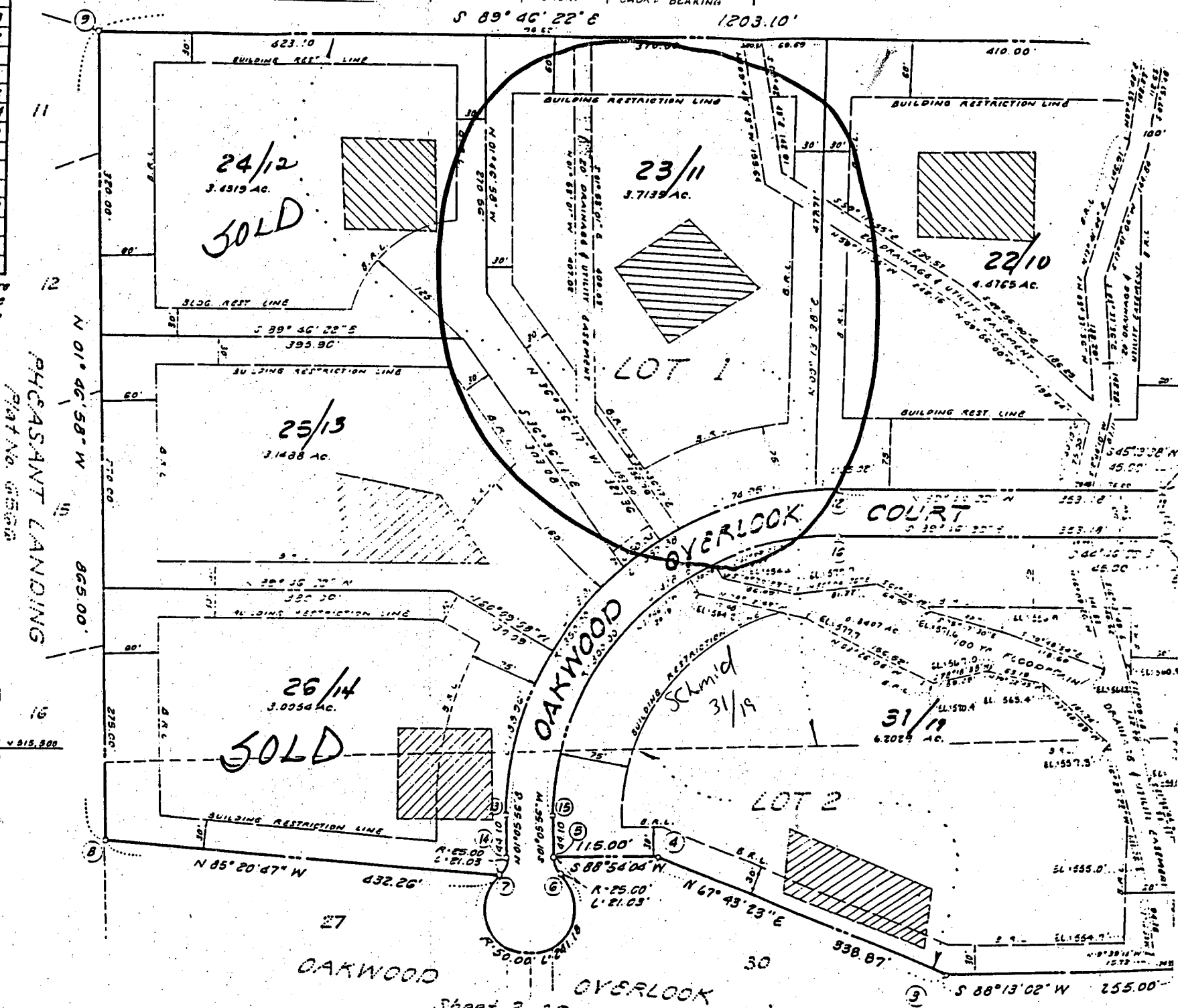
B. Hodges

ALSO PRESENT

KETTERMAN, J.P.

803,858.23
803,866.82
803,800.26
803,369.43
808,342.52
804,543.84
804,511.89
804,158.72
803,807.39
803,808.24
803,857.38
804,158.52
804,511.70
804,543.39

As shown hereon are the Maryland State Coordinate Grid System used by Howard Co. Station Nos. 2934001 4.



Sheet 2 of 2

ANNULATION OF FINAL PLAT (this sheet only)

Final numbers of lots to be recorded

PHEASANT LANDING
726 / 730

WATER HOLES

LOT 19

LOT 16

LOT 15

LOT 12

LOT 11

LIMIT OF SUBMISSION
1534.95'

N 01° 40' 07" E

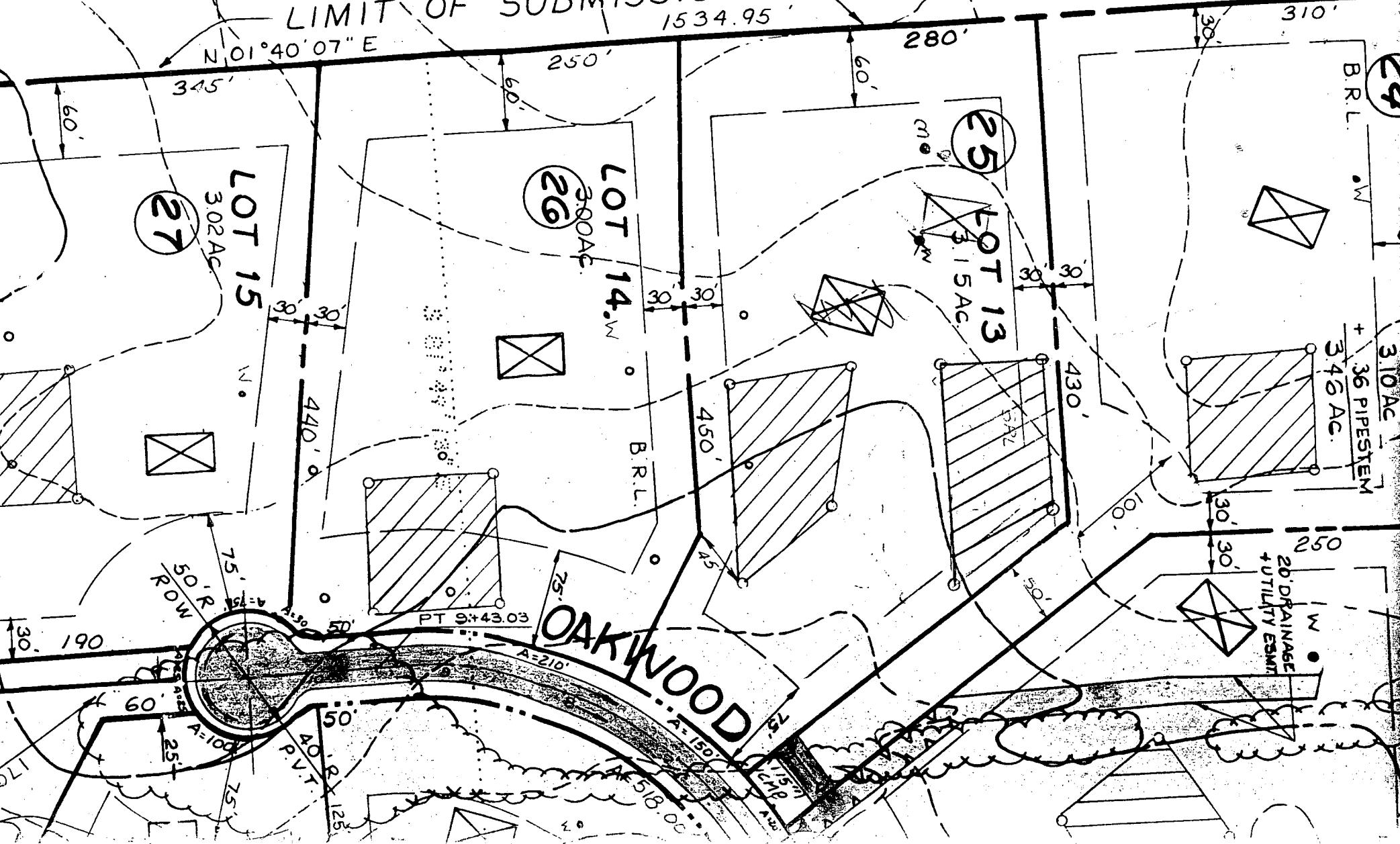
LOT 15
302 AC
(27)

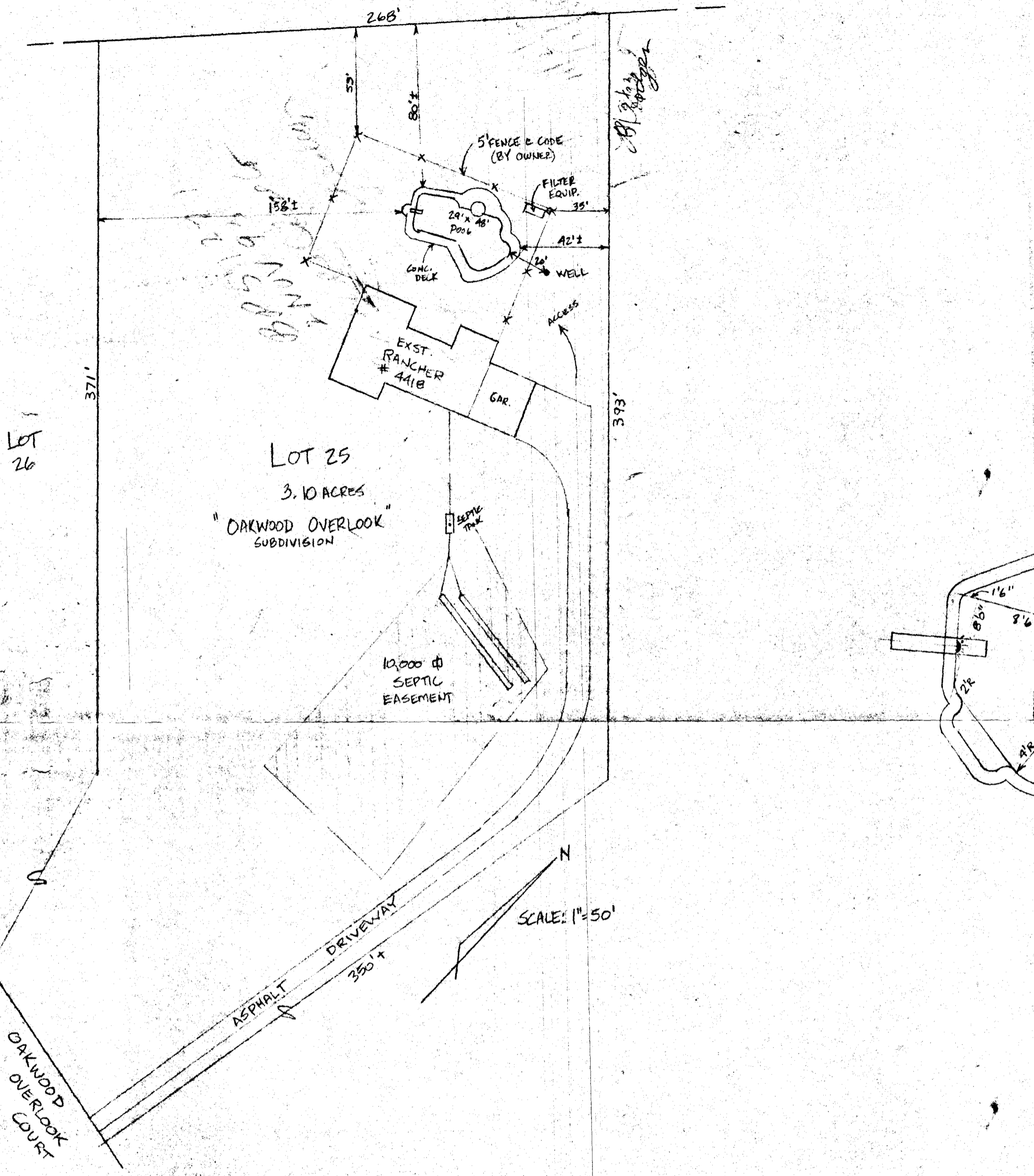
LOT 14
300 AC
(26)

LOT 13
315 AC
(25)

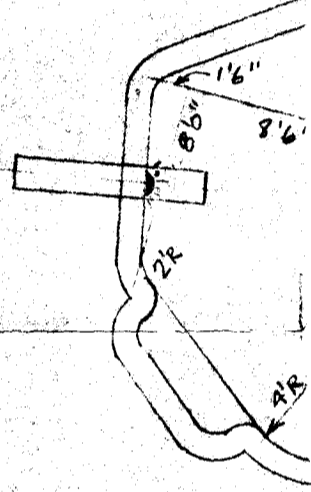
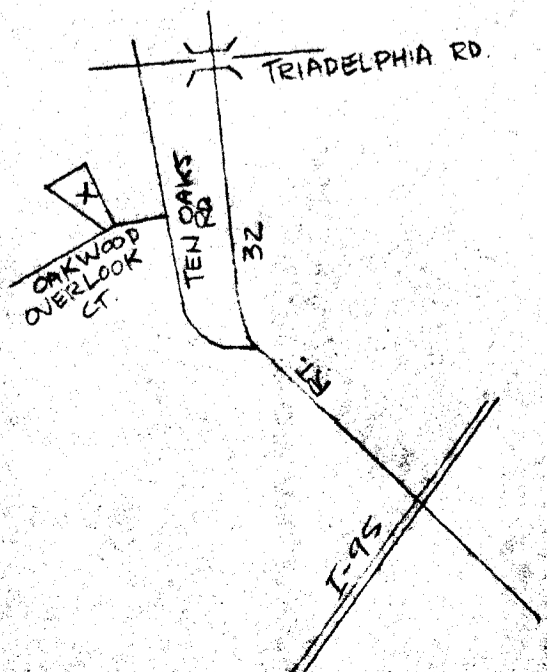
310 AC
+ 36 PIPESTEM
346 AC

OAKWOOD



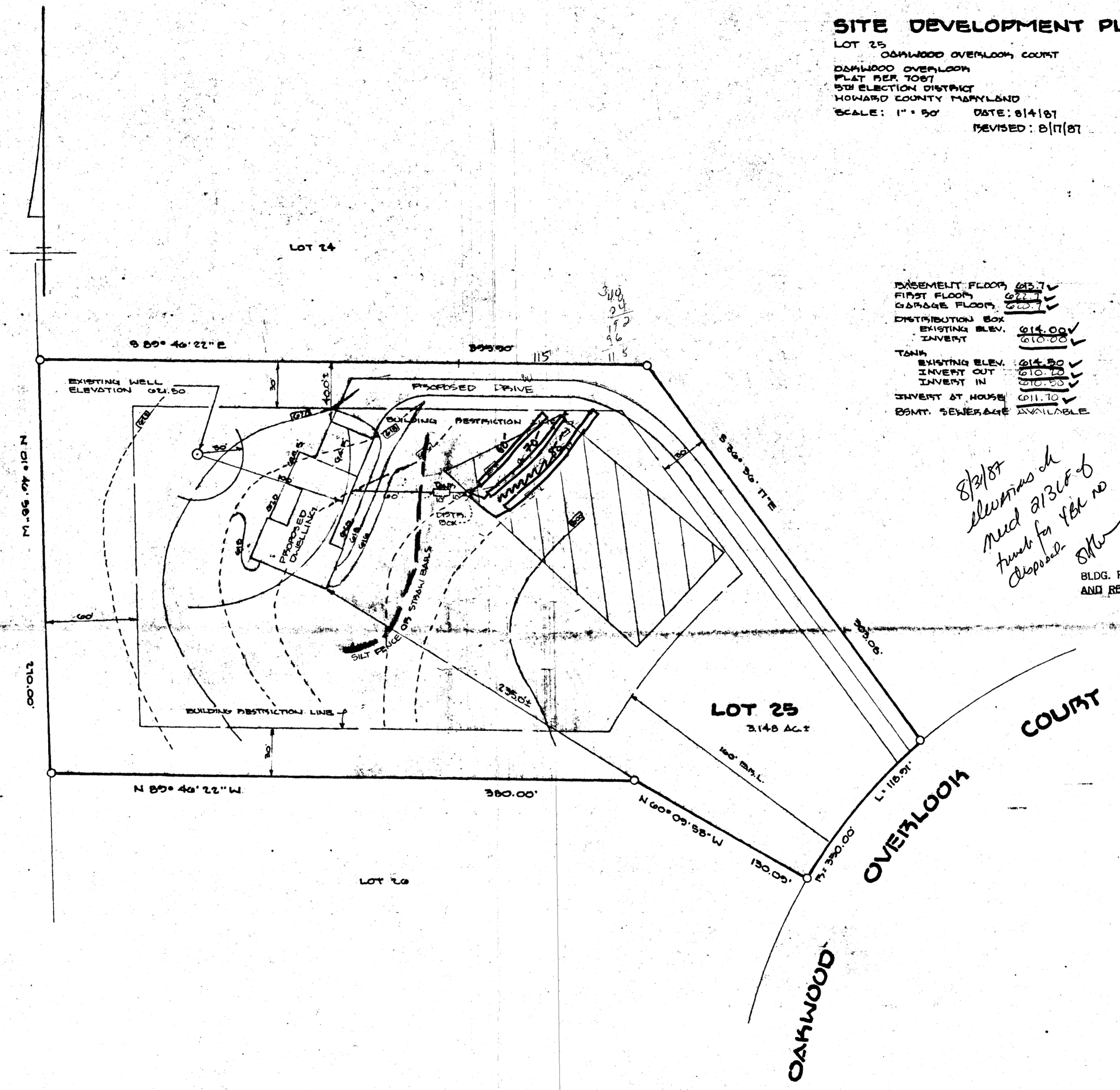


VICINITY MAP



SITE DEVELOPMENT PLAN

LOT 25
 OAKWOOD OVERLOOK COURT
 OAKWOOD OVERLOOK
 PLAT PER 7087
 5TH ELECTION DISTRICT
 HOWARD COUNTY MARYLAND
 SCALE: 1" = 50' DATE: 8/4/87
 REVISED: 8/17/87



BASEMENT FLOOR	613.7	✓
FIRST FLOOR	622.7	✓
GARAGE FLOOR	620.7	✓
DISTRIBUTION BOX		
EXISTING ELEV.	614.00	✓
INVERT	610.00	✓
TANK		
EXISTING ELEV.	614.50	✓
INVERT OUT	610.00	✓
INVERT IN	610.50	✓
INVERT AT HOUSE	611.70	✓
BENT SEWERAGE AVAILABLE		

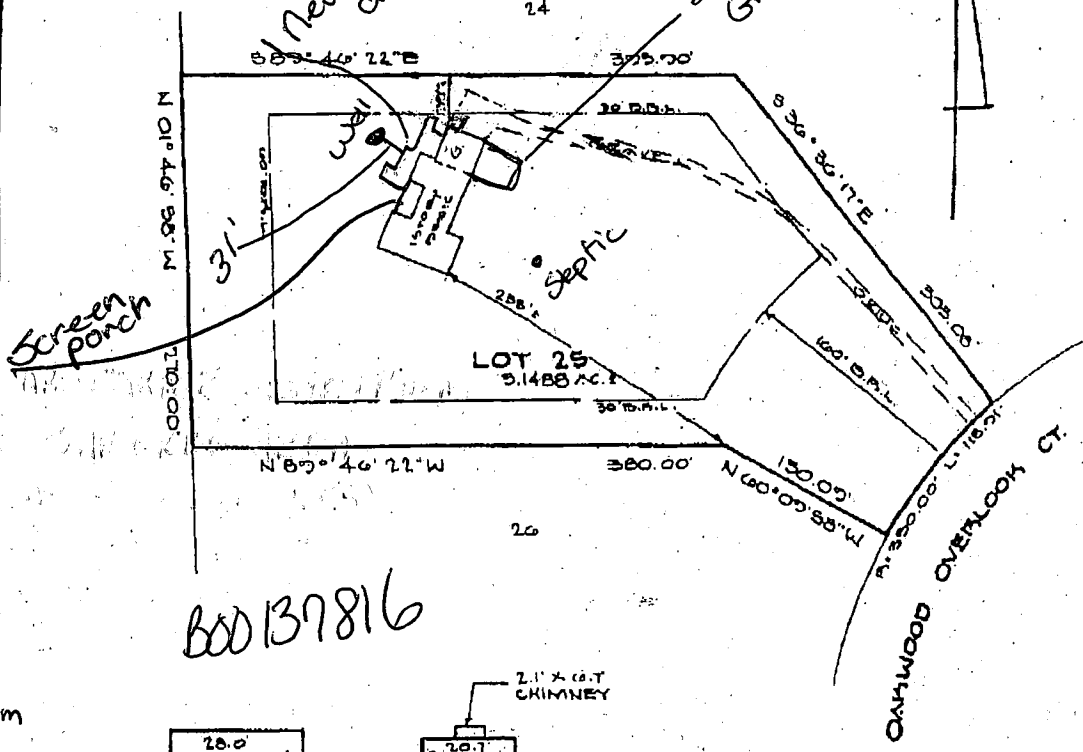
*8/31/87
 elevations ok
 need 2136F of
 funds for 48K no
 disposal. JMW*

BLDG. PERMIT SIGNED
 AND RETURNED 8/31/87
 BP # 14187
 JMW

ENCLOSURE ON CDEP - OK
REQ'D 3 BDRY

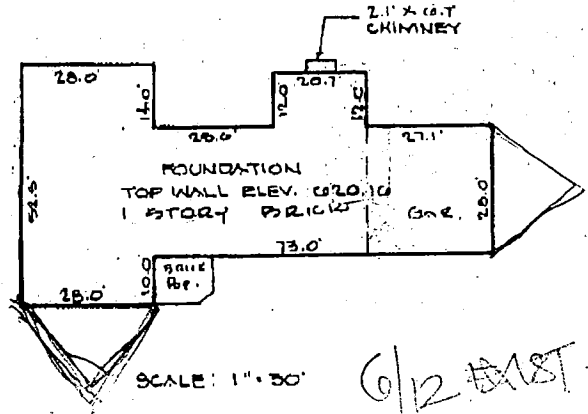
Property known as:
 LOT 25
 4418 OAKWOOD OVERLOOK COURT
 OAKWOOD OVERLOOK
 LOTS 22 thru 31
 PLAT FEB. 1981
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

THIS PLAT CAN NOT BE USED TO ESTABLISH PROPERTY LINES OR CORNERS.

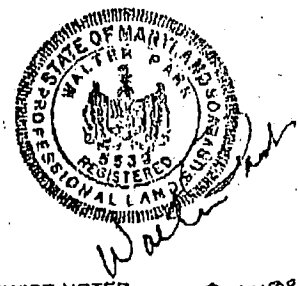


8/14/02 =
 Existing ST.
 8' to prop.
 garage.
 Site insp.
 reveals it's
 OK.
 Proposed 1 bedroom
 addition has
 little impact on
 ex. system

B00137816

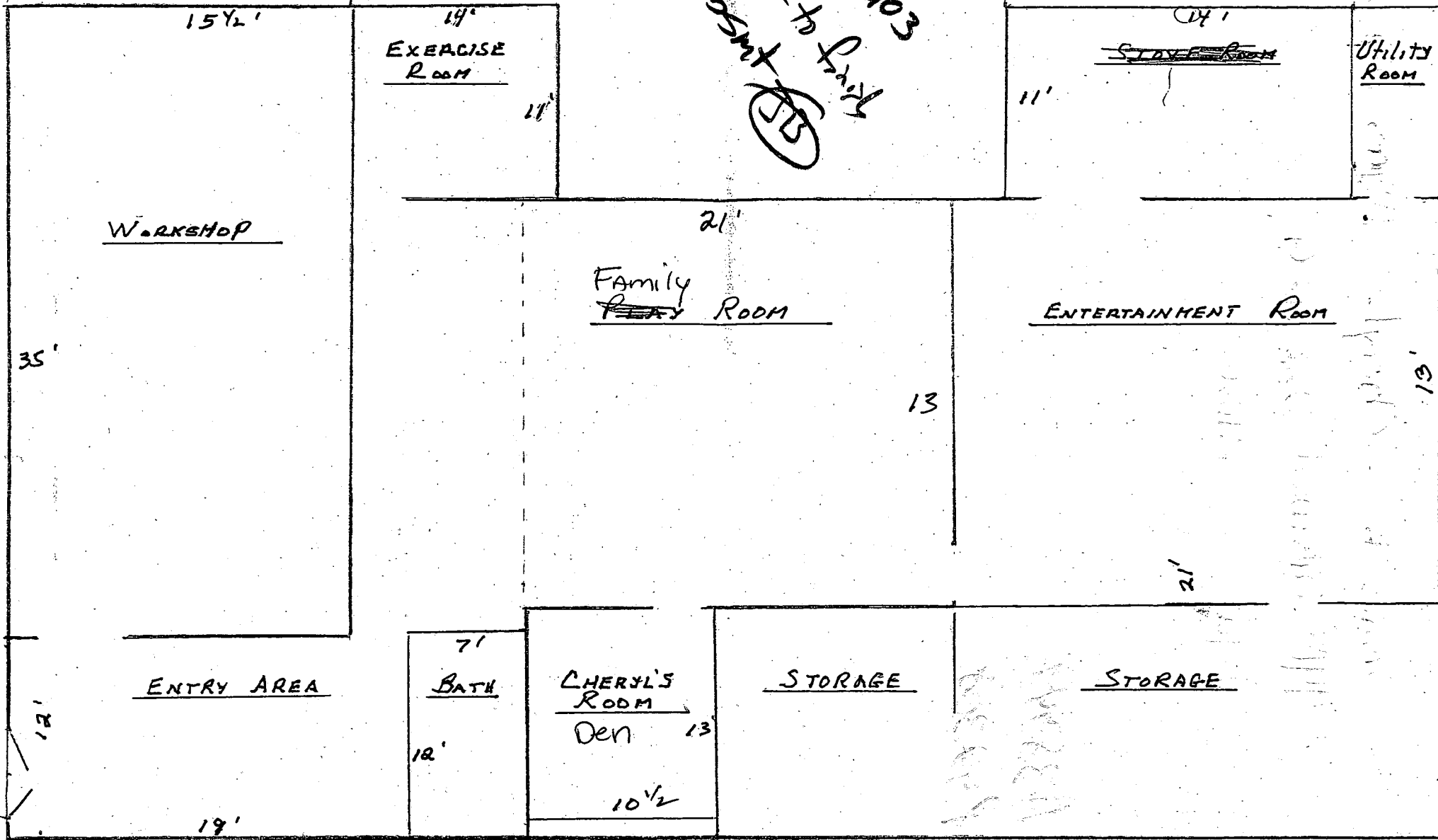


This bldg permit
 was cancelled due
 to time limitation
 of application.
 per DHP 2/25/03



LOCATION SURVEY PLAT
 SUBJECT PROPERTY NOT LOCATED IN A FLOOD PLAIN AREA UNLESS OTHERWISE NOTED 2-1-2088

CERTIFICATION	SEAL	SCALE 1" = 100' DATE 1-6-98
This is to certify that I have surveyed the property known as: <u>LOT 25</u> <u>4418 OAKWOOD OVERLOOK CT.</u> for the purpose of locating the im- provements thereon, and the improvements are located as shown.		Columbia: 730-8060 Towson: 828-9080 M & H DEVELOPMENT ENGINEERS, INC. Surveyors and Subdivision Designers 231 Harpers Choice Village Center 8485 Harpers Farm Road Columbia, Md. 21044 WALTER PARK REG. L.S. 6539



James F. Cheryl Myers ~~AA~~
4418' Oakwood Oakwood Ct
Dayton 21036

A38949

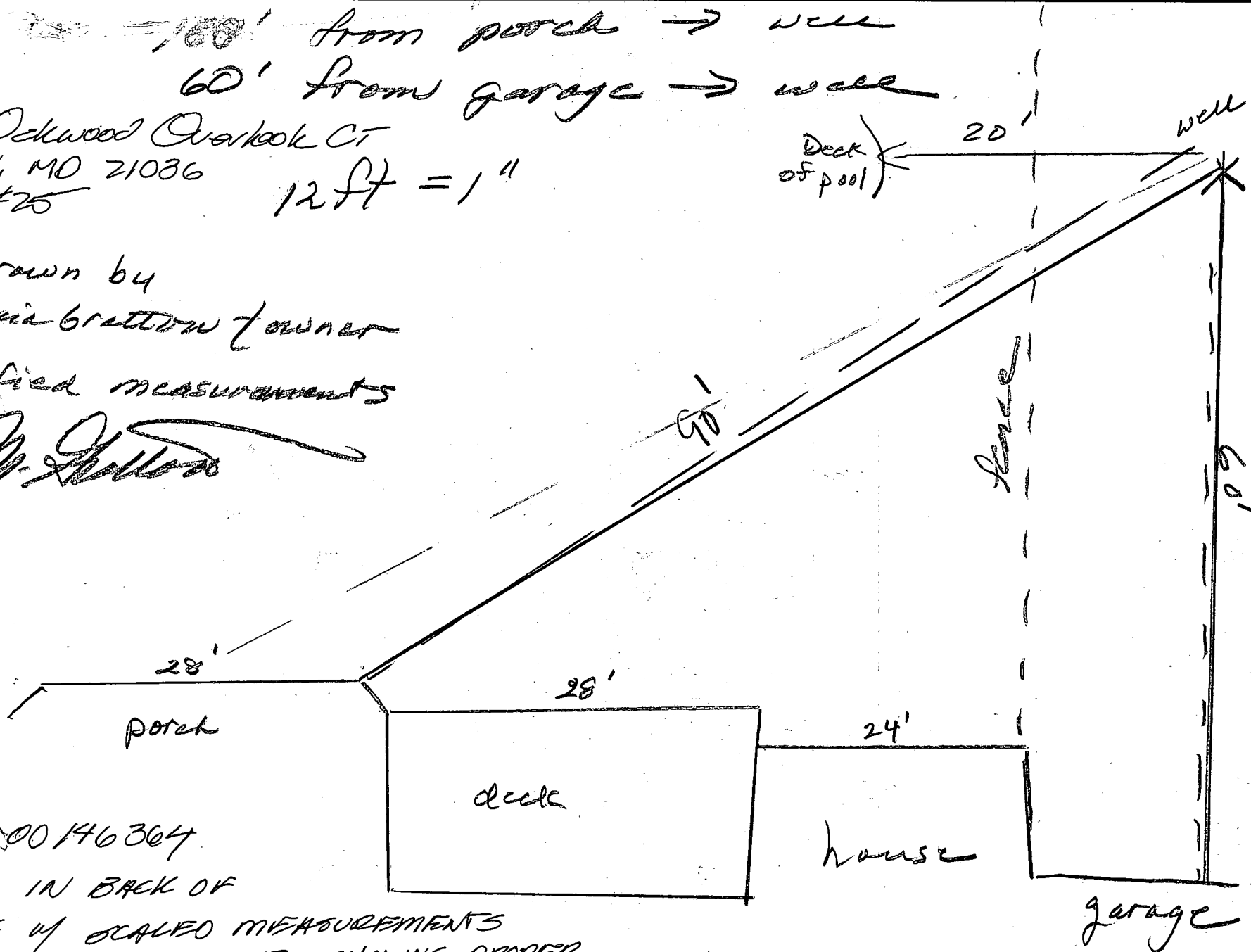
P42308

RECEIVED
FORWARD SOUTH EASTERN DISTRICT
ENVIRONMENTAL HEALTH
2003 JA 22 PM 4:20

100' from porch → well
60' from garage → well
4418 Oakwood Overlook Ct
DAYTON, MO 21036
LOT #25
12 ft = 1"

Drawn by
Marian Bratton / owner
Verified measurements

M. Bratton



2/26/04
3/2/04
3/6/04
FOIL BP 00146364

DECK IN BACK OF
HOUSE W/ SCALED MEASUREMENTS
MADE BY THE OWNER SHOWING PROPER
SETBACKS TO WELL. NO CONFLICT W/ SEPTIC EASEMENT
WHICH IS LOCATED ON THE OPPOSITE SIDE OF THE HOUSE

APPROVED BY FA 2/26/04