

8-21-93
cum
9/14/93
9/14/93 PM
ASAP

PERMIT

05-375010

SEWAGE DISPOSAL SYSTEM DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49431
A 38971
DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
313-2640

DATE 07/12/93

DATE SYSTEM APPROVED 9/15/93

INSPECTOR RH

INDEXED

Charles A. Klein & Sons, Inc. IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 5220 Klees Mill Road, Sykesville, Maryland 21784 PHONE 922-4468

SUBDIVISION Gleneig Manor II LOT 24A ROAD 12851 Folly Quarter Road

PROPERTY OWNER T & E Homes, Inc. Peter Bethwell

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 265

TRENCHES - 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.

LOCATION - Beginning from the right front lot corner, place 1st trench 310 feet down the front (707.43') lot line and 60 feet off the front line as seen when facing property from right of way. Run trenches along contour towards the front (707.43') lot line. MAINTAIN MINIMUM OF 100 FEET FROM WELL TO SEPTIC.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/MR 7/12/93

OK TO HAVE 1ST TRENCH WITH INLET AT BF 78 DEPTH OF STONE 4 FT

PLANS APPROVED BY Bert Nixon/Mark Rifkin REVISED DATE 6/28/93

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

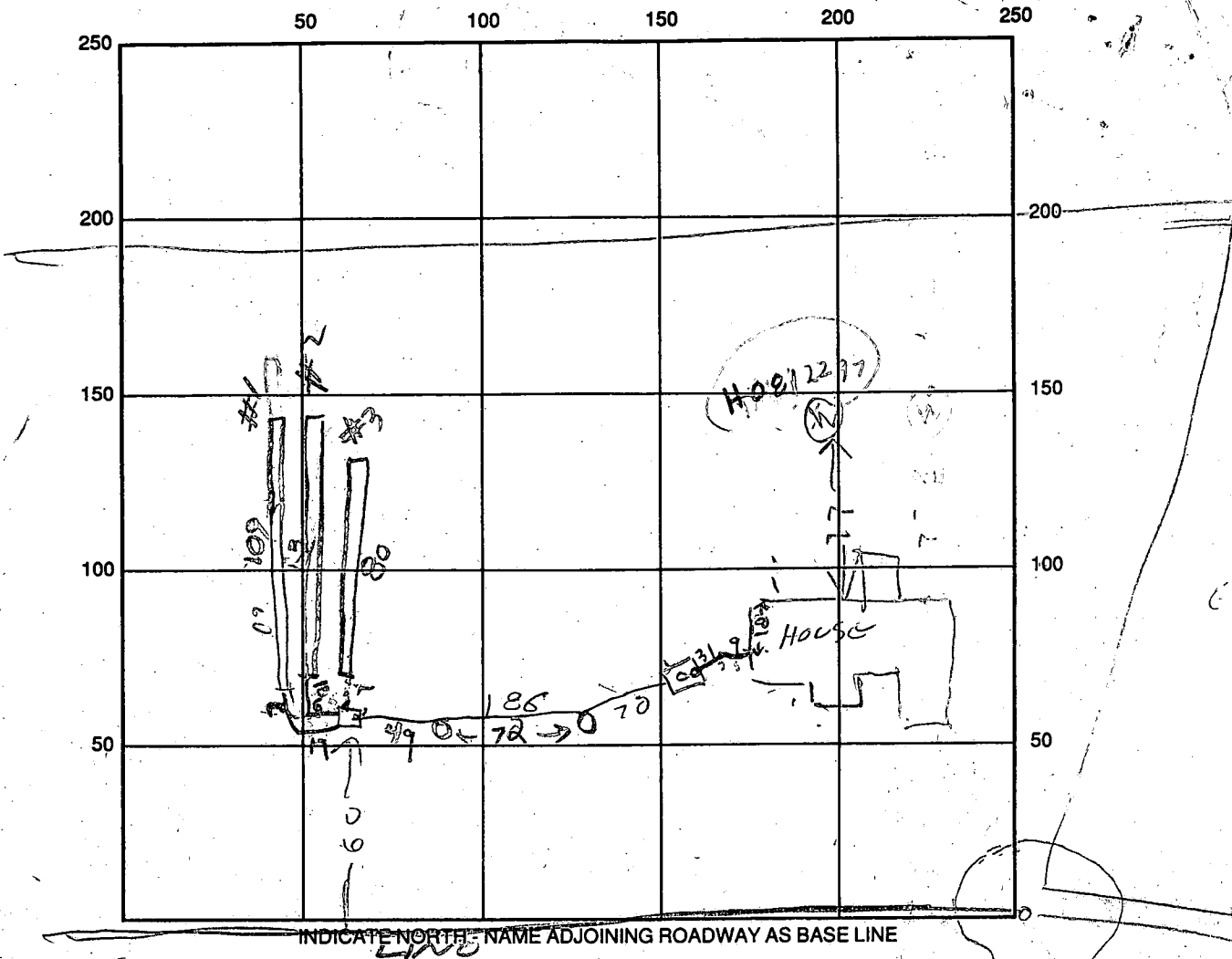
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED. 500 gal. purple tank

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMIT SIGNED
AND RETURNED 10/26/93
Serial # 57200

A 38971



SEPTIC TANK LEVEL 1500 CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 7-8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2-4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 109 | 103 | 90 FT.

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

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: 8/31/93 TANK SET TRENCH NOT DUG MUST GET SURVEYOR
TO LOCATE PROPERTY LINE (WOODEN LOT) RH 9/13/93 LOCATION OK
9/13/93 10PM TRENCH #1 STARTED FINISH #1 AND ADD ALL STONE. DIG #2 & #3 &
PARTLY FILL WITH STONE. 9/13/93 1PM TRENCH #1 DUG OUT ADD STONE RH
9/14/93 4PM TRENCH #1 & #2 OK. TRENCH #3 DUG. ADD STONE & CALL RH
9/15/93 9:30AM NOTHING DONE 9/15/93 130 JOB FINISHED

DATE SYSTEM APPROVED 9/15/93 INSPECTOR Raymond Hodges

APPLICATION

PERCOLATION TESTING

A 38971

P _____

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

DISTRICT sth

DATE 3/24/87

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 Dale Maisel T&E HOMES INC

ADDRESS 12789 Folly Quarter Rd PHONE 437-3640
531-5252

PROSPECTIVE BUYER N/A

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Glenely Manor II LOT NO. 24A
12857

ROAD AND DESCRIPTION Folly Quarter Rd

TAX MAP 28 PARCEL # 367

SIZE OF LOT 3.821 AC TYPE BLDG. SFD
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

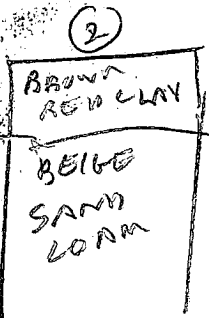
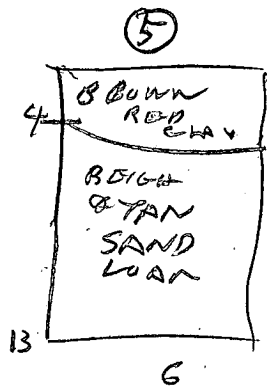
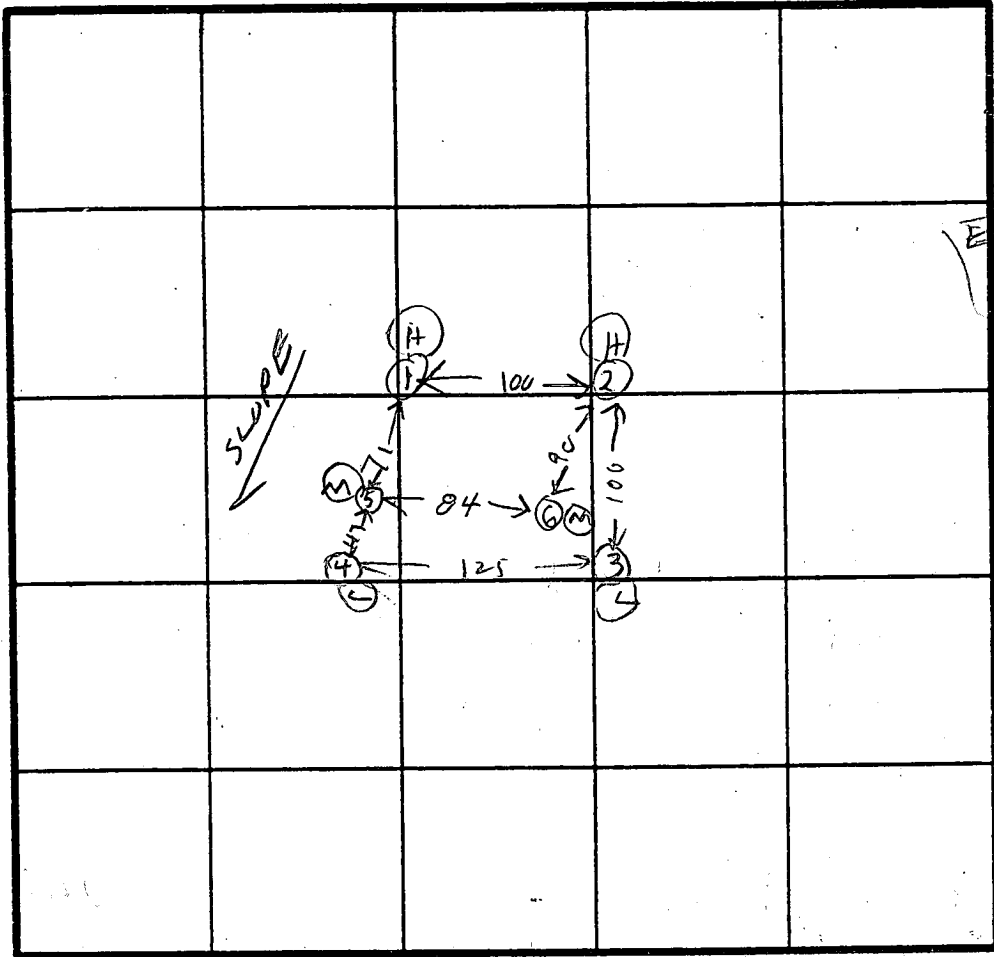
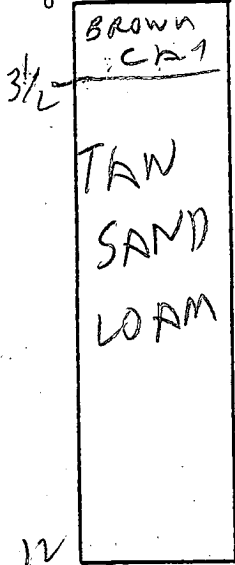
REASONS FOR REJECTION OR HOLDING 3/21/87 - PERC OK HOLD FOR PLAT RA

BLDG. PERMIT SIGNED
AND RETURNED 6/30/83
Sub# 49200-SFD

THIS IS NOT A PERMIT

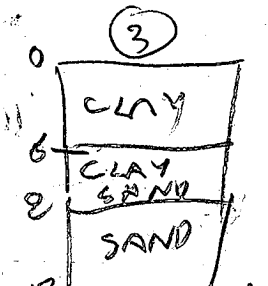
24A

SOIL PROFILE

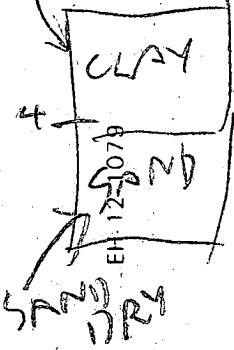


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3/31/87	1S	4"	210	239	239	246	30	
	1V	12	OK					
3/31/87	2D	8	225	227	227	231	4	
	2S	5	226	231	231	243	12	
3/31/87	2V	11	OK					
	3S	6	235	312	water present			
	3V	13	PROBABLY OK BELOW EFF					
3/31/87	4V	7	WATER COMEN IN TOP RAIN THIS AM					
	5S	5	303	315	315	329	14	
	5V	13	OK					
3/31/87	6S	6	320	326	326	338	12	
	6V	13	OK					



WATER IN CLAY LAYER



RAIN THIS MORNING

REMARKS: HOLES (1) (2) (3) (4) DUG PER SURVEYOR STAKES IN WOODS
 HOLES (5) (6) DUG DIFFERENTLY
 TYPE OF SOIL: MAKE SEWAGE AREA EXTEND UP HILL FROM HOLES (1) (2) FOR A DISTANCE OF 30 FT. OK ETTERMAN & TAYLOR
 TESTED BY: R. HODGES TO MAKE 10000 SQ FT AREA ALSO PRESENT G. RISH

B 5710

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

40-81-2297

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

Date Received

8 13

OWNER INFORMATION

PAULEY GLENN... 12755 FOLLEY QUARTER

B 3

LOCATION OF WELL

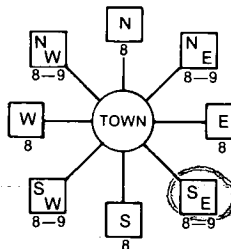
HOWARD... GLENELG MANOR 2... SECTION 44-46 LOT 24A... GLENELG... MILES FROM TOWN 1 MI

DRILLER INFORMATION

Ralph MAYNE... 223... 9170 Brown Church Pl. N. Arlington

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Folley Quarter Rd. NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



2000 DISTANCE FROM ROAD

ENTER FT or MI

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

County Name Howard County No. A38971... DATE ISSUED 09/17/87... CO SIGNATURE Craig W. ... EXP. DATE 3/17/88... NORTH GRID 514000 EAST GRID 0809000

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

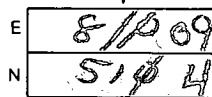
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- 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)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

WRITE THE BOX NUMBER FROM THE MAP HERE



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



Not to be filled in by driller (OEP USE ONLY)

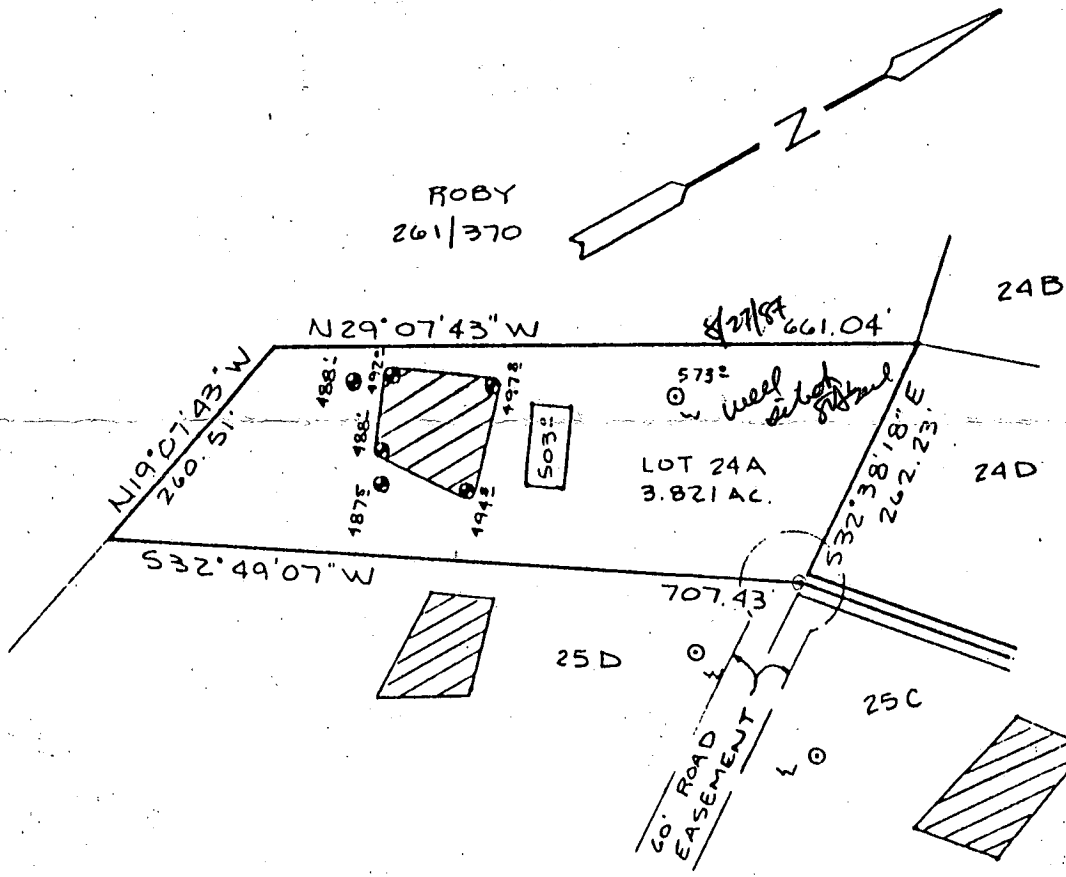
APPROP. PERMIT NUMBER GAP

FORCE CU WRITE INITIALS IN BOX PERMIT No. 40-81-2297

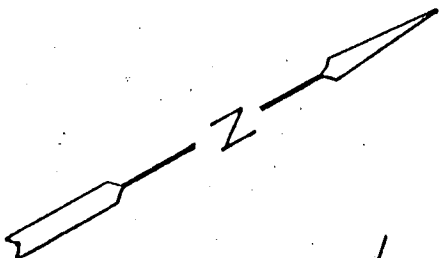
SPECIAL CONDITIONS 988-9183-H-392-9471

9/18/87 1015AM

- ① LOCATION OK
- ② CASING 50 FT
- ③ 45 OPEN HOLE
- ④ TOOK 13 BAGS CEMENT
- ⑤ GOT INFORMATION FROM FRANK
THE NEW GROUNDER BYHONGER



ROBY
261/370



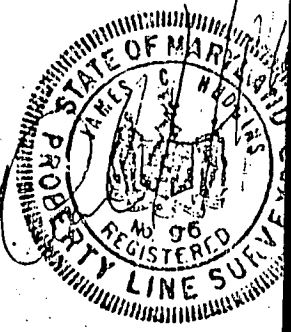
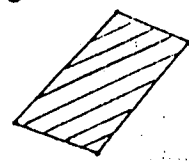
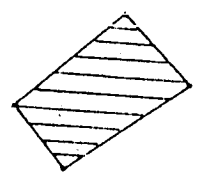
24B


LOT 24A
3.821 AC.

24D

25D

25C



 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and 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 shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "⊙".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

James C. Howells 7-7-87
County Health Officer Date

PERCOLATION TEST PLAT
PARCEL 24A
GLENELG MANOR II
PROPERTY OF
DALE Z. MAISEL

5th Election District
Howard County, Maryland
Scale 1"=200'
Date JUNE 22, 1987

NTT Associates, Inc.
16205 Old Frederick Road
Mt. Airy, MD 21771
(301) 442-2031

C1 1904
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO. (OEP USE ONLY)

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 38971**

DATE RECEIVED
 8 13

DATE WELL COMPLETED
 15 **091897** 20

DEPTH OF WELL
 22 **265** 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
110-81-229
 28 29 30 31 32 33 34 35 36

OWNER **PAULEY GLENN**
 STREET OR RFD **1377 1/2 QUARTER ROAD** first name TOWN **GLENELG**
 SUBDIVISION **GLENELG MANOR II** SECTION LOT **24A**

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	
Top Soil	0	2	
Sandy	2	40	
Sand Stone	40	50	✓
Micka	50	60	
Sand Stone	60	65	✓
Micka	65	90	
Sand Stone	90	95	✓
Micka	95	265	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **13** NO. OF POUNDS **1300**
 GALLONS OF WATER **36**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **45** ft.
 (enter 0 if from surface)

C 3

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **7**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **50**
 WHEN PUMPING **85**
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
C centrifugal **R** rotary **O** other (describe below)
J jet **S** submersible

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **PL** **6** **50**
 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)
 60 61 63 64 66 70

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** **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 **2** (nearest foot)
- below }

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

C 2

DEPTH (nearest ft.)
 EACH SCREEN
 1 **HO** **48** **265**
 8 9 11 15 17 21
 2
 23 24 26 30 32 36
 3
 38 39 41 45 47 51

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

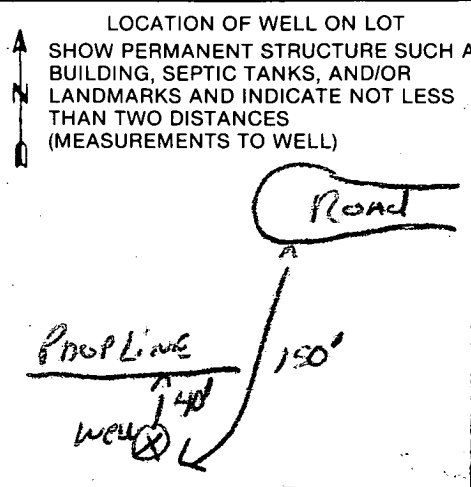
SLOT SIZE 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 56 60

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.

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

DRILLERS IDENT. NO. **273**
 DRILLERS SIGNATURE **Nath Moore**
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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



8-31-93
am

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

B06 PERMIT
49260

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation
Replacement

Receipt # -0-
Date 7/8/93

Name of Installer CHARLES A KLEIN & SONS INC. Telephone 549-6960

License Number 6521
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner T & E HOMES INC. Telephone _____
Subdivision GLENELG MANOR II Lot # 24A Well Tag # HO-81-2297
Site Address 12851 FULLY QUARTER ROAD

Pump

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

Motor

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

Pitless Adapter

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

Tank

- 1. Capacity _____
- 2. Pressure relief valve? YES

Piping

- 1. Type PLASTIC
- 2. Size 1"
- 3. NSF and/or BOCA Code approved YES
- 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? YES

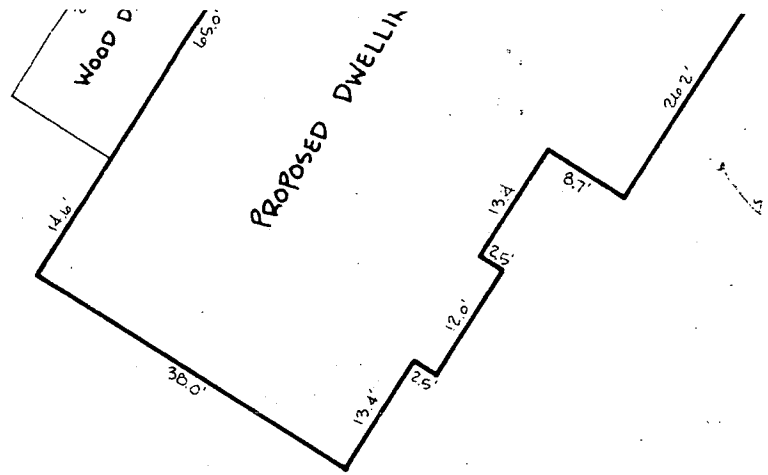
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Charles A Klein Jr

Date: 7-12-93

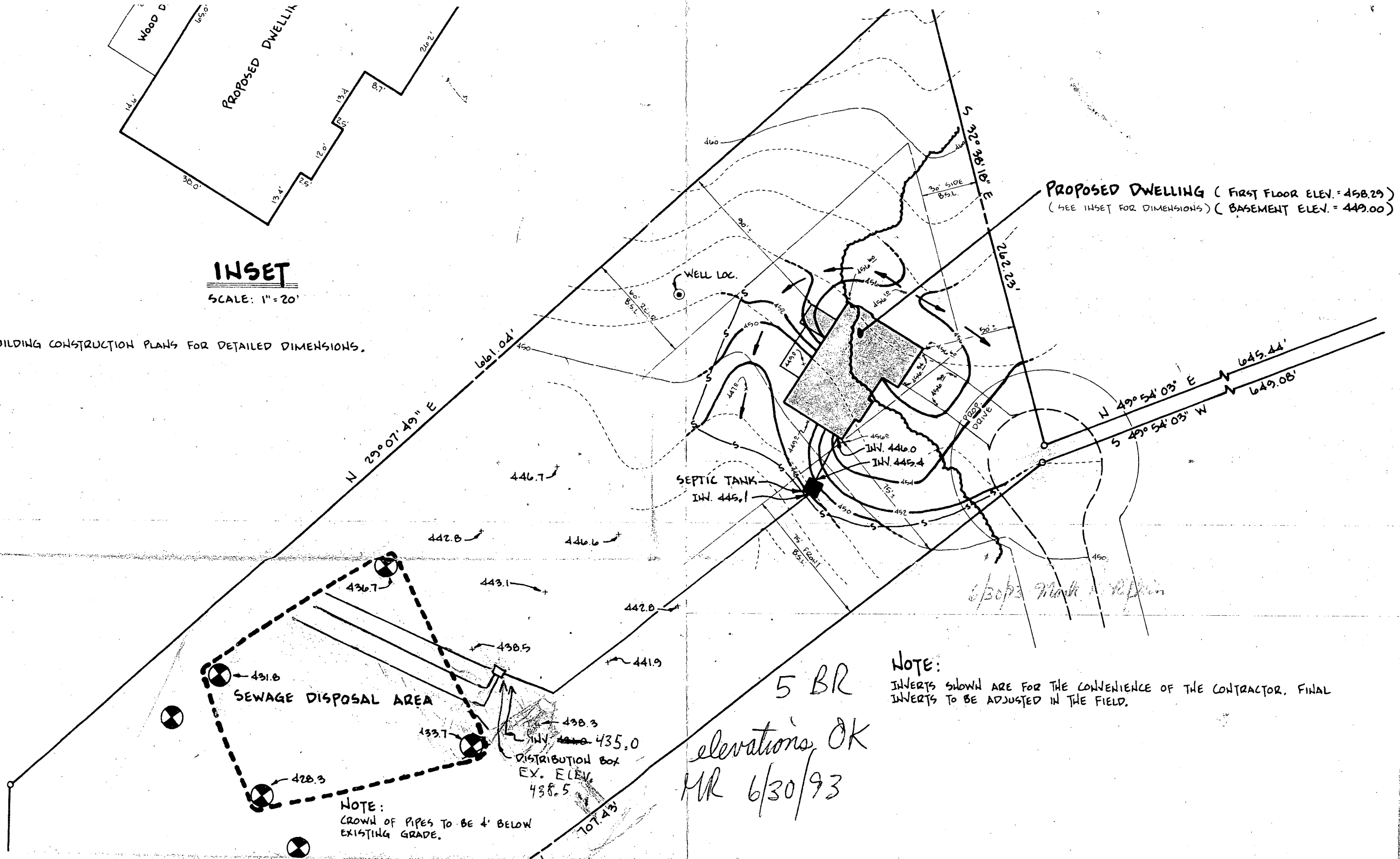
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



INSET

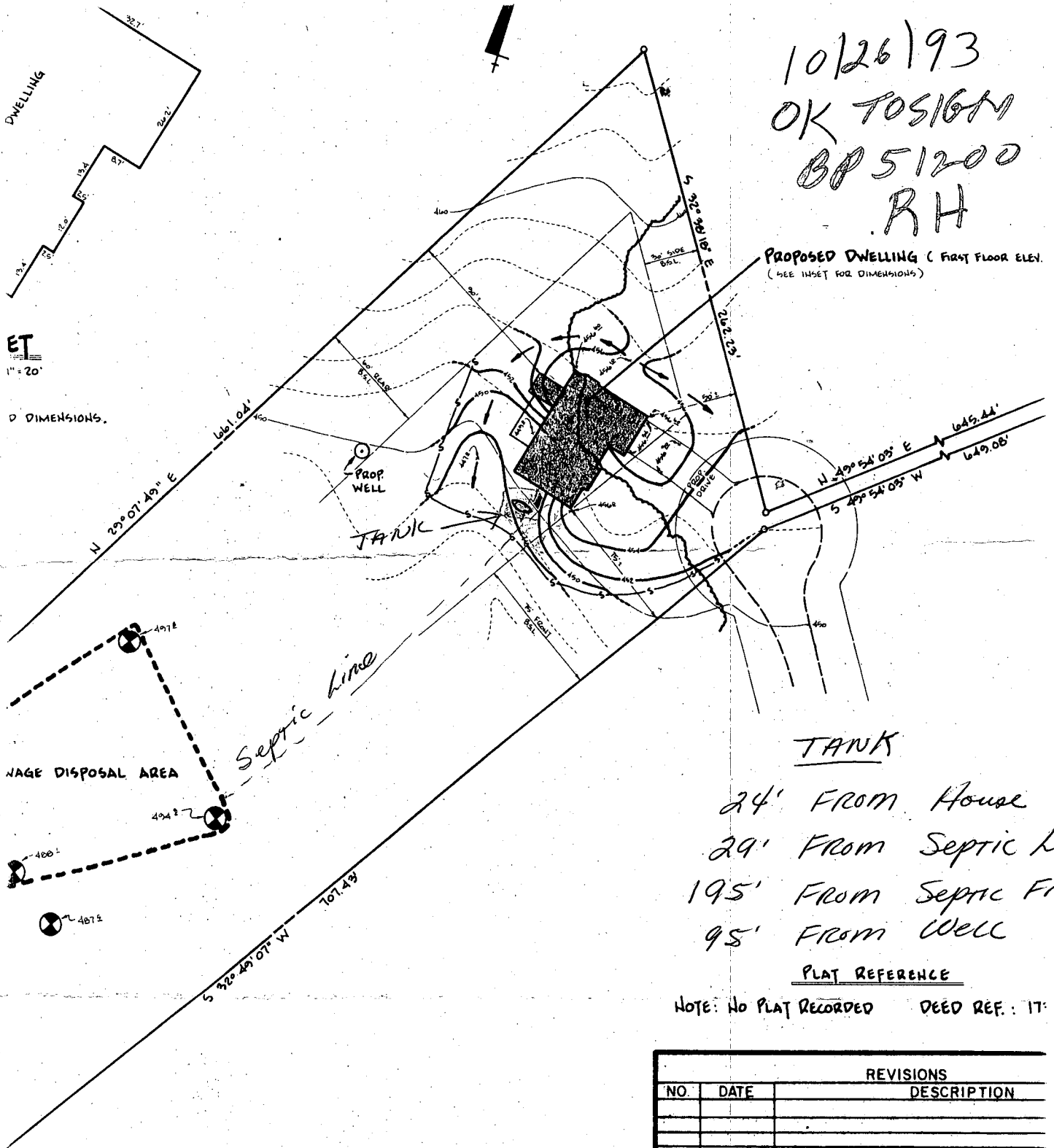
SCALE: 1" = 20'

NOTE: REFER TO BUILDING CONSTRUCTION PLANS FOR DETAILED DIMENSIONS.



10/26/93
 OK TO SIGN
 BP 51200
 RH

PROPOSED DWELLING (FIRST FLOOR ELEV.
 (SEE INSET FOR DIMENSIONS))



ET
 1" = 20'
 DIMENSIONS.

SEWAGE DISPOSAL AREA

Septic line

TANK

- 24' FROM House
- 29' FROM Septic line
- 195' FROM Septic Field
- 95' FROM Well

PLAT REFERENCE

NOTE: NO PLAT RECORDED DEED REF.: 17

REVISIONS		
NO.	DATE	DESCRIPTION

SPELLMAN, LARS & ASSOCIATES, INC.
 CIVIL ENGINEERS AND LAND SURVEYORS
 SUITE 109, JEFFERSON BLDG., TOWSON, MD.
 PHONE: 823-3535

4751

PLAT TO ACCOMPANY BUILDING PERM.

12851 FOLLEY QUARTER

GENERAL NOTES:

SITE AREA: 3.021 AC ±
 EXIST. ZONING: RR
 PROPOSED UTILITIES: PRIVATE SEWAGE DISPOSAL AREA
 PRIVATE WELL
 DISTURBED AREA: 21,000 SQ. FT.
 PROPOSED USE: RESIDENTIAL SINGLE FAMILY DWELLING

GRADING NOTES:

CONTRACTOR IS TO PROVIDE POSITIVE DRAINAGE AWAY FROM FOUNDATION AT ALL TIMES.
 THERE WILL BE NO OVERALL GRADING OF THE LOT. THE ONLY GRADING PROPOSED WILL BE THAT GRADING INCIDENTAL TO THE BUILDING CONSTRUCTION.