

Tax ID 03-314995

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50038A

A 39066B

DISTRICT 2nd

DATE 05/18/94

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 313-2640

DATE SYSTEM APPROVED 6/24/94

INSPECTOR *[Signature]*

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Amberwoods LOT 27 ROAD 12839 Forest Creek Court

PROPERTY OWNER Grayson Homes, Inc. *Kevin Smith George Quick*

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS TOP SEAMED TANK

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

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

LOCATION - Place the distribution box 145 feet from the right (515') lot line and 135 feet from the right-rear (812') lot line. Run trenches along contour in both directions.

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

PLANS APPROVED BY C. Williams DATE 09/15/89

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)

GLOBAL PERMITS SIGNED AND RETURNED

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

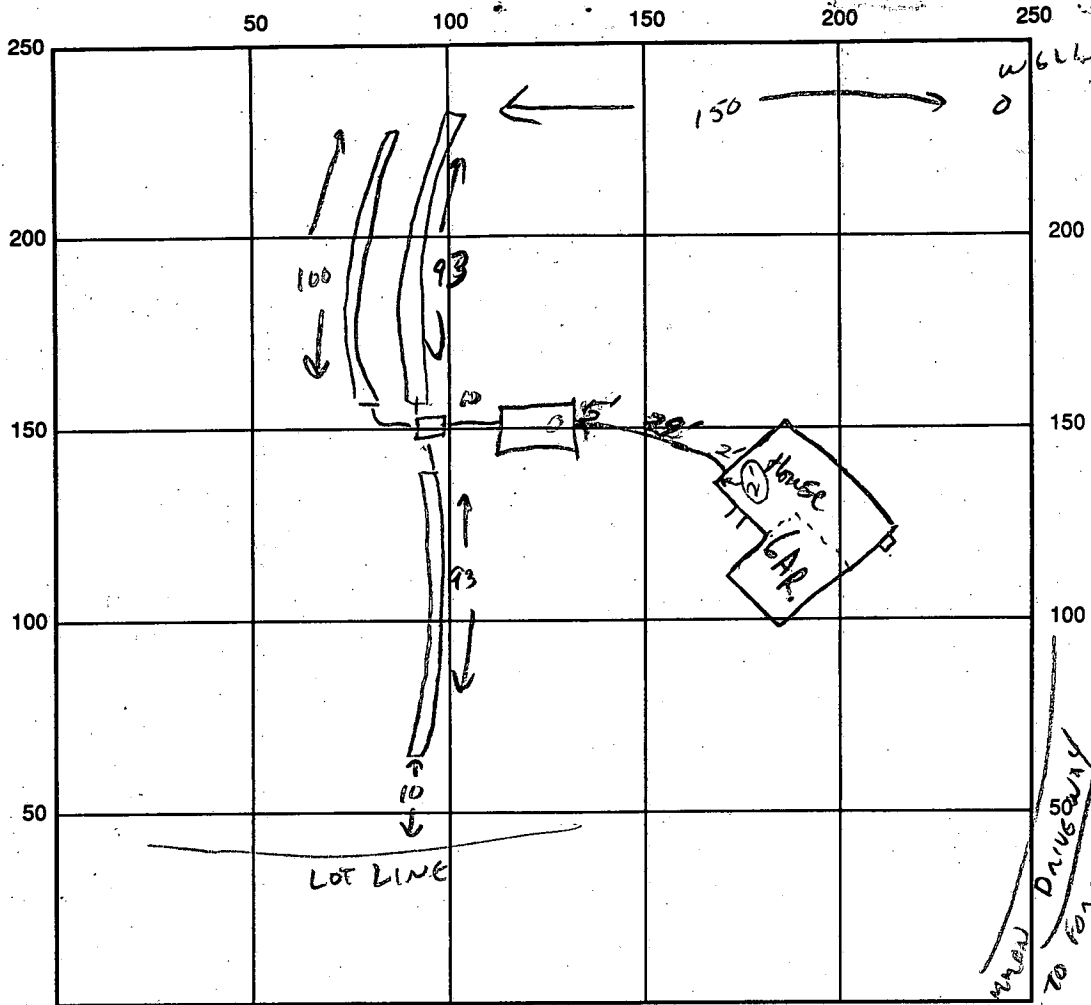
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 39066B

E-0
2:30
6/24/94
6-24-94
12 noon



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 ✓ CLEANOUTS ST ✓

DISTRIBUTION BOX LEVEL _____

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

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 286 FT.

NUMBER OF TRENCHES 3(93+93+100) ONE SIDEWALL/BOTTOM AREA 858 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: TANK-DIST-TRENCHES OK TO COVER.
HOUSE SEWER NEEDED FOR FINAL APPROVAL 6/9/94 CW/elia
House Connection to Basement Foundation OK 6/24/94

DATE SYSTEM APPROVED 6/24/94 INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 39066-B
P _____

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

DISTRICT 3
DATE 3/4/87

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 Richard Arrington Grayson Home

ADDRESS 1050 Sykesville Rd. West Friendship MD PHONE 301-776-7454
461-5900

PROSPECTIVE BUYER Amberwood Limited Part.

ADDRESS 1420 Fenwick Lane Silver Spring PHONE 301-587-5455

PROPERTY LOCATION:

SUBDIVISION Amberwoods (5-87-42) LOT NO. 33 26827

ROAD AND DESCRIPTION Rt 32 north of Rt 99
12839 Forest Creek Court - 21784

TAX MAP 9 PARCEL # 4

SIZE OF LOT 3.04 Ac 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. San Negable
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

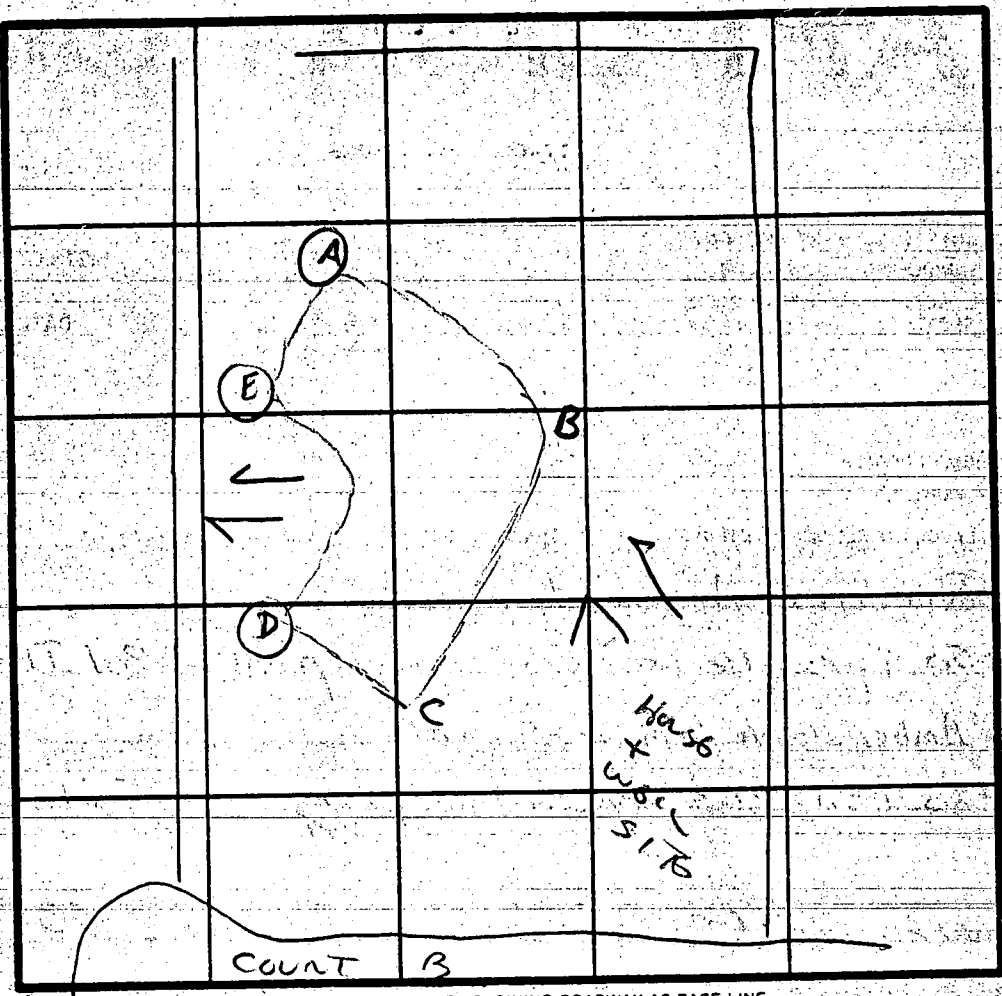
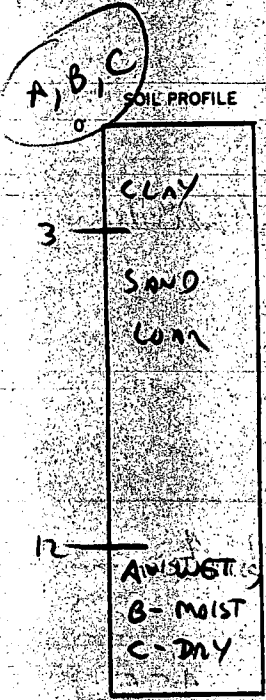
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

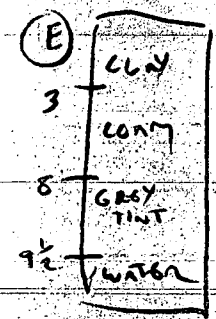
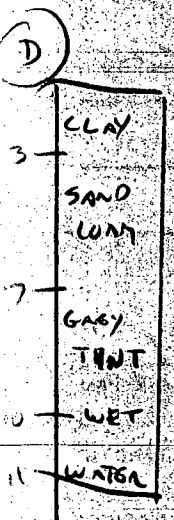
REASONS FOR REJECTION OR HOLDING _____

PERC PERMIT SIGNED
AND RETURNED 5-26-97
Serial # 54121
SFD-4/Bin

THIS IS NOT A PERMIT



SHALLOW SYSTEM
180 FT
X = 5 MIN
INLET 2' BOTTOM 3 1/2'



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
4/24/67	A	3	VIS	OK	LOAM		
		8					
		12	WET	AT 12'			
	B	3	4:17	4:19	4:19	4:22	3 MIN
		8	4:17	4:19	4:19	4:21	2 MIN
		12	MOIST	AT 12'			
	C	3	4:18	4:20	4:20	4:22	2 MIN
		7	4:18	4:19	4:19	4:21	2 MIN
		12	DRY	AT 12'			
	D	3					
		7					
		11	WET AT	10'	WATER AT 11'		
	E	3	4:26	4:29	4:29	4:34	5 MIN

REMARKS: WET 9' ON LOW HILLS, DAMP AT 12' HIGH HILLS } IMOV AREA HIGHER IF POSSIBLE.
 * WILL BE USED FOR TWO LOTS ON FINAL PLAT

TYPE OF SOIL: well

TESTED BY: will ALSO PRESENT: MAGADHAN

EH 12-1079

B 1 1231 SEQUENCE NO. (DP USE ONLY)
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

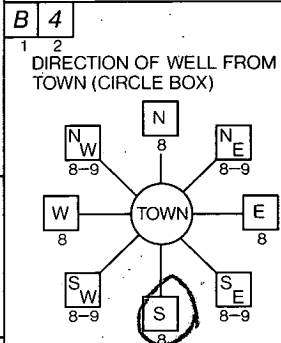
STATE OF MARYLAND PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
#0-88-0700
fill in this form completely

Date Received (APA) 04 27 89
OWNER INFORMATION
KOREN DEVELOPMENT
1 CENTRE PARK DR
COLUMBIA MD 21045

B 3 LOCATION OF WELL R-44067
HOWARD
AMBERWOODS
SECTION LOT 27
SYKESVILLE
MILES FROM TOWN 2 MI

DRILLER INFORMATION
George F. Easterday
L. Franklin Easterday, Inc.
9265 Brown Church Rd., Mt. Airy, Md. 21771
Signature: George F. Easterday Date: 3-31-89



B 4 (RT 32) Rochester Ct.
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
450
DISTANCE FROM ROAD
ENTER FT OR MI FT

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

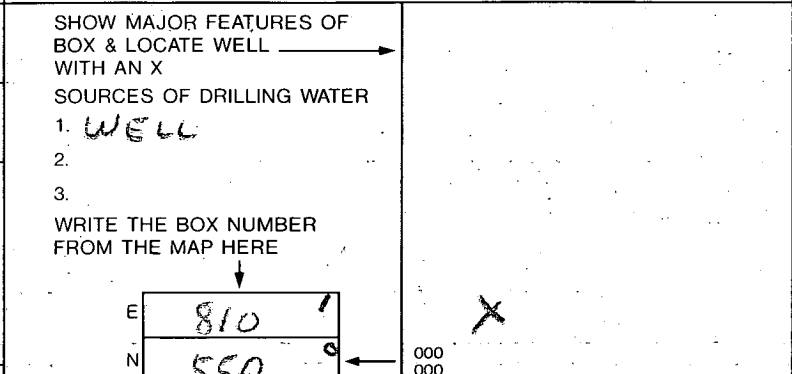
USE FOR WATER (CIRCLE APPROPRIATE BOX)
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard A 39066-B
COUNTY NAME COUNTY NO.
STATE SIGNATURE DATE ISSUED 0100289
CO. SIGNATURE EXP. DATE
NORTH GRID 550000 EAST GRID 0811000

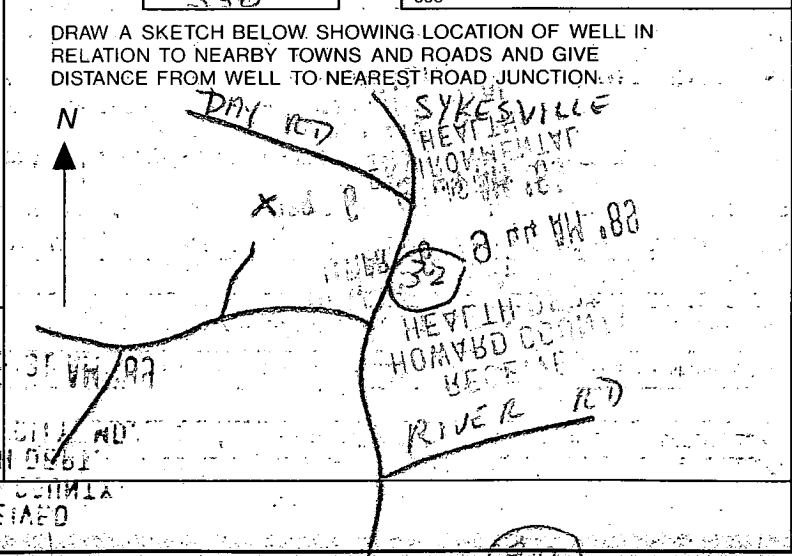
APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 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



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)
APPROX. PERMIT NUMBER GAP 108 2
FORCE PERMIT No. #0-88-0700
SPECIAL CONDITIONS

C1 0023 SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

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

COUNTY NUMBER A39066B

ST/CO-USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-88-0700

OWNER: Karen Development last name, first name, TOWN: Sykesville, SUBDIVISION: Amherst, SECTION, LOT: 27

WELL LOG Not required for driven wells. STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Topsoil, Slate, Soft Brown Mica, Grey Mica, Brown Mica, Grey Mica, Brown Mica, Grey Mica.

GROUTING RECORD. WELL HAS BEEN GROUTED. (Circle Appropriate Box) TYPE OF GROUTING MATERIAL: CEMENT CM, BENTONITE CLAY BC. NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD. casing types insert appropriate code below: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER). MAIN CASING TYPE, Nominal diameter top (main) casing, Total depth of main casing.

OTHER CASING (if used) diameter inch, depth (feet) from to.

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

DEPTH (nearest ft.) table with rows for EACH CASING and SCREEN. SLOT SIZE, DIAMETER OF SCREEN (NEAREST INCH).

CIRCLE APPROPRIATE LETTER: 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...

DRILLERS IDENT. NO., DRILLERS SIGNATURE, SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee).

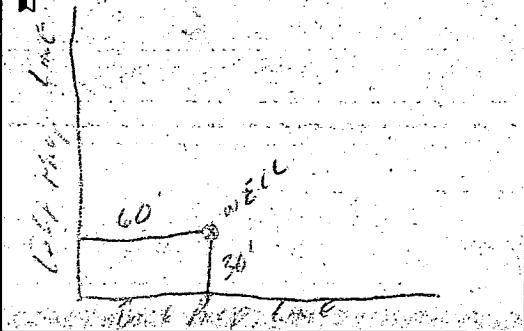
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68.

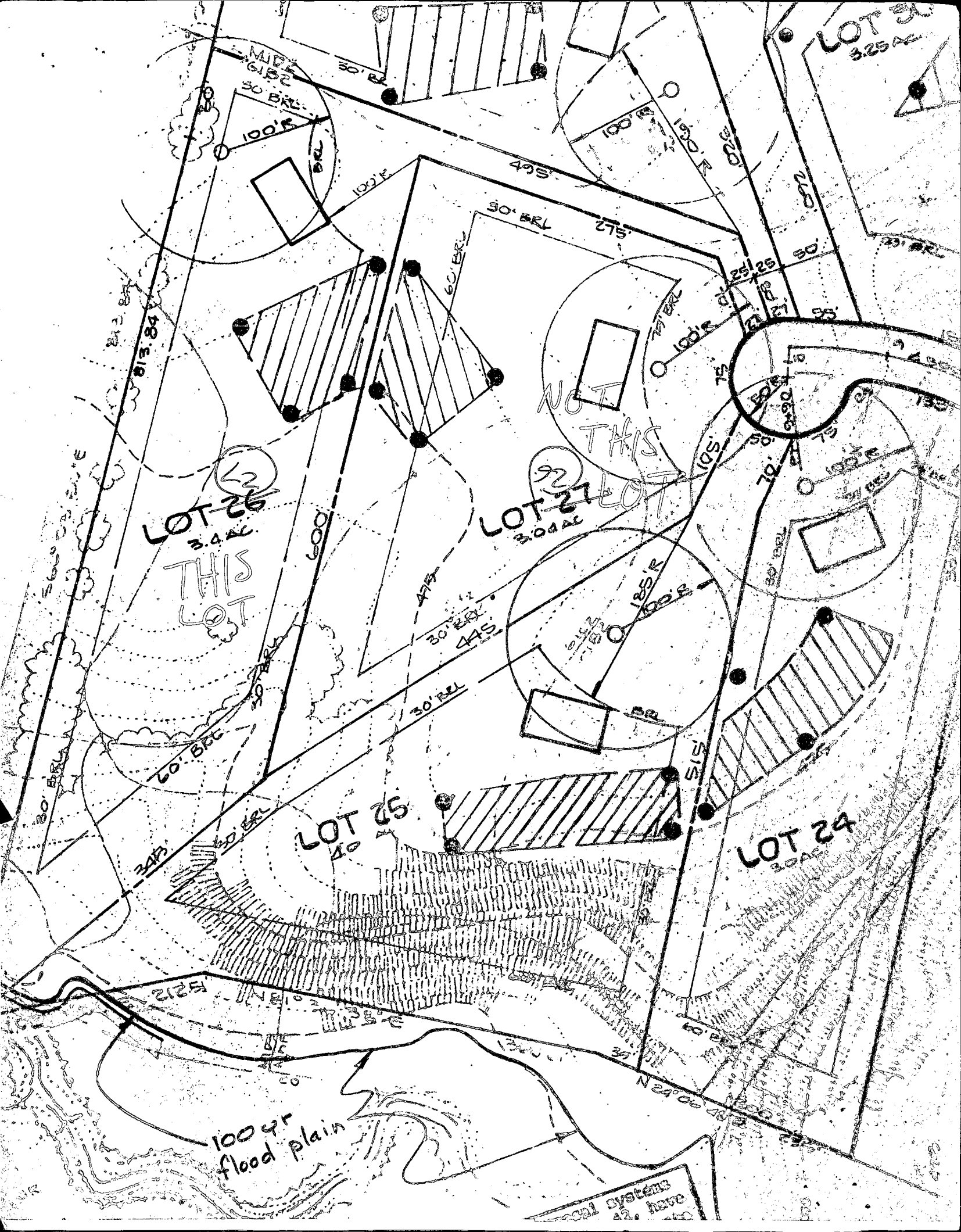
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.), W Q, TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

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

PUMP INSTALLED. DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or 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).

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).





LOT 30
3.25 AC

LOT 26
3.4 AC

LOT 27
3.04 AC

LOT 25
10

LOT 24
3.0 AC

NOT
THIS
LOT

100 yr
flood plain

sewer systems
42. have

9/15/89
 APPROVED
 PLAN

LOUIS A. SCHOLZ
 983/272

ELEVATIONS REQUIRED

# 26	# 27	# 28	LOT NUMBER
483.00	484.00	483.00	BASEMENT ELEVATION (if applicable)
491.45	492.45	491.45	FIRST FLOOR ELEVATION
480.00	481.00	481.00	INVERT INTO SEPTIC TANK
479.65	479.75	480.50	INVERT INTO SEPTIC TANK
479.40	479.50	480.55	INVERT INTO SEPTIC TANK
479.30	479.30	480.15	INVERT INTO SEPTIC TANK
479.0	479.0	480.0	INVERT INTO TRENCH(S)
482.2	482.0	484.2	EXISTING GRADE AT SEPTIC TANK
481.5	481.5	484.4	EXISTING GRADE AT DISTRIBUTION BOX (if applicable)
487.0	489.8	491.7	ELEVATION OF WELL AT GRADE

