

6/10/91 GATE

04-348516

PERMIT

SEWAGE DISPOSAL SYSTEM DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 87262

A 39216

DISTRICT 4th

DATE 6/25/91

DATE SYSTEM APPROVED 6/11/91

INSPECTOR RJA

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Foxport Plantation LOT 3 ROAD 15513 Bushy Tail Run

PROPERTY OWNER Crosen Development Co., Inc.

ADDRESS Tom Daniels

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM 840 sq. ft. for 4 bedrooms.

LINEAR FEET OF TRENCH REQUIRED 280 Linear feet for 4 bedrooms.

SHALLOW TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 1 1/2 - 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 170 feet from the front lot line and 100 ft. from the right side of the lot as seen when facing the lot from Bushy Tail Run. Run the trenches toward the back lot line.

NOTE - No trench to exceed 100 feet in length. Provide a 6" - 8" diameter cleanout and cap to grade or above on septic tank. O/S 5/14/91 RJA

PLANS APPROVED BY Raymond Hodges cm DATE 1/19/89

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)

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.

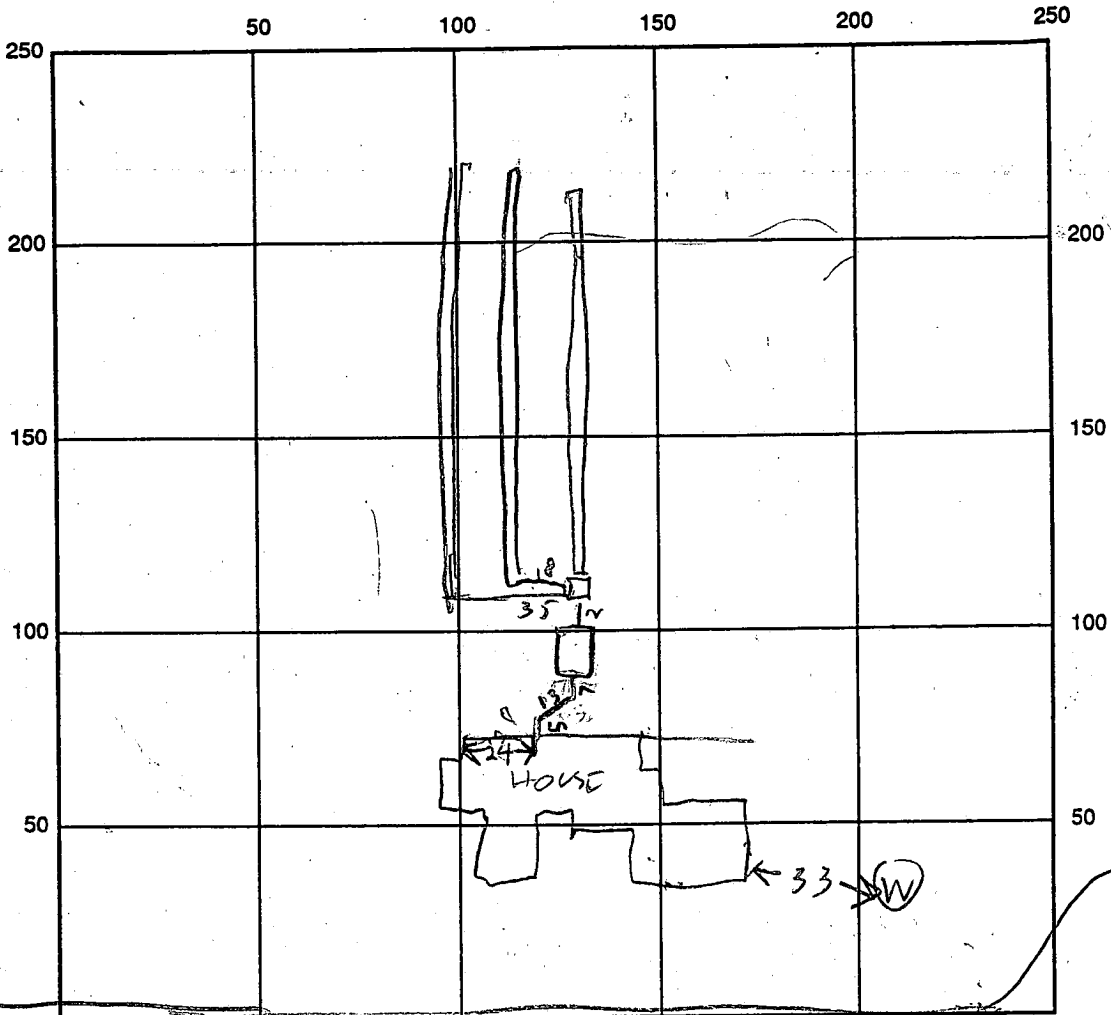
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED AND RETURNED 5/23/90
Serial # 416 97-Per

BLDG. PERMIT SIGNED AND RETURNED 5/15/92
Serial # 42790-deck
BLDG. PERMIT SIGNED AND RETURNED 4/22/92
Serial # 42287-Per

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

A 39216
97262



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

BUSHY TALK R

SEPTIC TANK LEVEL 1250 CLEANOUTS OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2.5 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 90/99/102 FT. 291

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 873 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 6/10/91 350' = COVER TANK & TRENCHES
CALL FOR INSPECTION OF HOUSE SEWER R/H
6/11/91 HOUSE SEWER OK

DATE SYSTEM APPROVED 6/11/91 INSPECTOR Raymond Hodges

1-8

191

102
90
99
291

291
5
73

APPLICATION

PERCOLATION TESTING

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

A 39216
P _____
DISTRICT 4TH
DATE 4-24-87

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 DONALD RIPPEON *Crown Development Co, Inc*

ADDRESS 15474 BUSHY PARK RD PHONE _____

PROSPECTIVE BUYER UNITED GENERAL CONTRACTORS

ADDRESS 8370 COURT AVE, ELLICOTT CITY PHONE 461-2227

PROPERTY LOCATION: FOX PORT PLANTATION
SUBDIVISION RIPPEON PROPERTY LOT NO. 3

ROAD AND DESCRIPTION CORNER OF CARR'S MILL & BUSHY PARK ROAD, WOODINE,
HOWARD COUNTY

TAX MAP 14 & 8 PARCEL # 9 & 12
SIZE OF LOT @ 3 acre lot TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 5/10/91
Serial # 37734-4 Bldg

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.

Donald Rippeon
(SIGNATURE OF APPLICANT)

APPROVED BY BJA FOR Shallow trench DATE 1/19/89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6/17/87-VISUAL HOLD ENBEDDED R/H
6/23/87 DIG MORE VISUAL HOLD ROCK R/H
6/25/87 PERC OK HOLD FOR PLAT R/H

THIS IS NOT A PERMIT

lot 3

see plat

lot 3

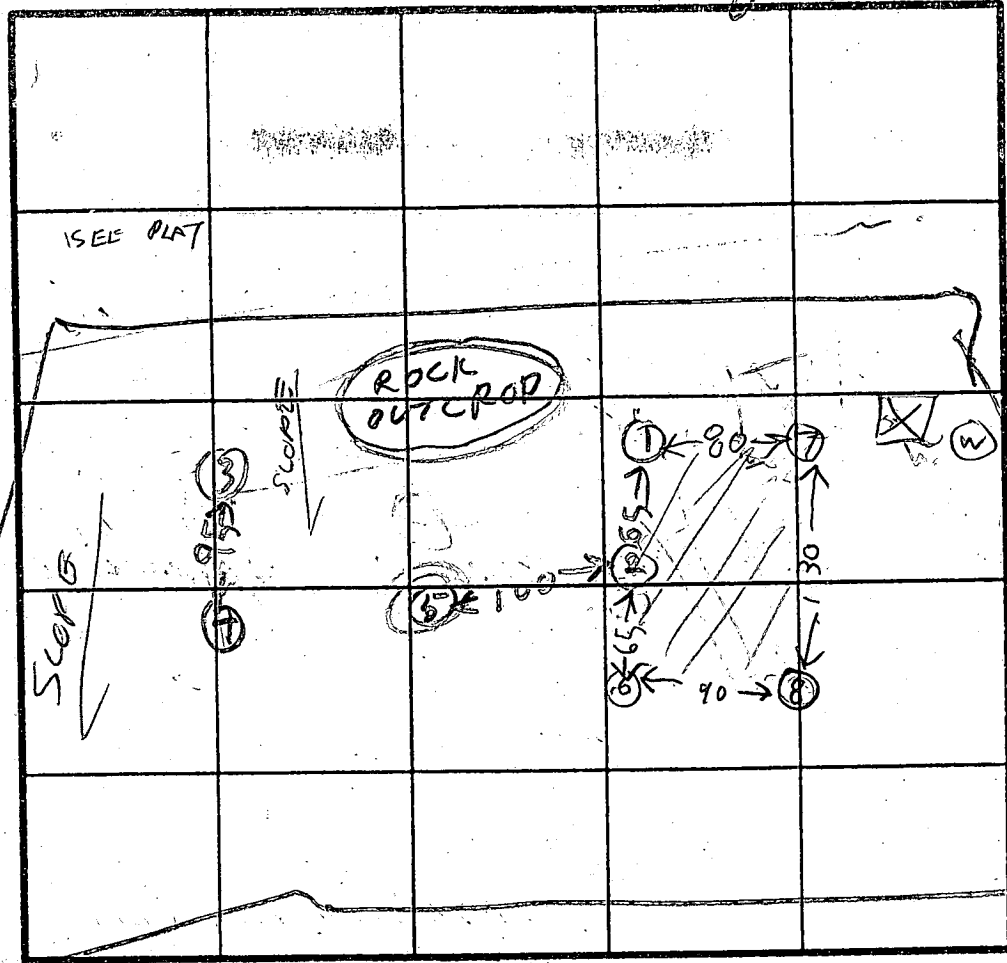
See plat

USE HOLE NO. (1) (2) (3) (4) FOR SYSTEMS

RD

0
3
11.5
BROWN CLAY
BROWN SAND SILT LOAM

SOIL PROFILE
0
2
10
CLAY
BROWN SAND LOAM 15% ROCKS
ROCK



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

0
3
BROWN CLAY
BROWN SAND LOAM
ROCK

0
2
CLAY
BROWN SANDY SILTY LOAM

0
4
BROWN CLAY
BROWN SANDY SILTY LOAM

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/17/87	1S 1D	3.5 7.5	313 311	324 318	324 318	348 321	17 3
6/17/87	1V	10	ROCK BOTTOM				
	2S (2V)	4 11	315 ROCK	325 BOTTOM	325	341	16
	3S 3V	5 12	331 OK	332 OIL	332	334	2
6/17/87	4S 4V	5 12	334 OK	346	346	410	24
6/23/87	5V	6	ROCK BOTTOM		UNSATISFACTORY		
6/25/87	6S 6V	5.5 11	152 OK	200	200	214	14
6/25/87	7S 7V	4 11.05	244 OK	248	248	303	15
	8S 8V	4.5 11.5	323 OK	332	332	345	13

0
3
6
CLAY
SAND & ROCKS
ROCK

0
4
11
BROWN CLAY
BROWN SAND SILTY LOAM

0
2
5
6
CLAY
SAND LOAM WITH PROXIMATE
SAND SILTY LOAM

REMARKS: Holes (1)(2)(3)(4) dug per test plat Holes different

TYPE OF SOIL: DIG VISUAL HOLE IN CENTER

TESTED BY: R. HONICK & R. HONGES

ALSO PRESENT: DONNY BROWN, JEFF ALLEN, STEVE

air lime 13 min
max depth 2 FT

DONNY BROWN
JEFF ALLEN
STEVE

B 1 **7964** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

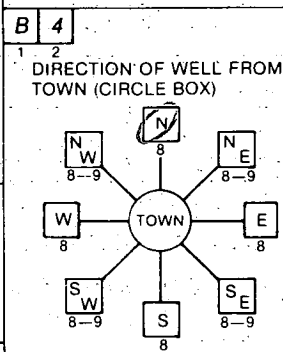
STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HD-08-0473
 fill in this form completely

Date Received (APA) **9/16/89**
 OWNER INFORMATION
FYE BRYANT GROUP
 2815 HARKERWOOD ROAD
 FALLS CHURCH VA 22043

LOCATION OF WELL
HOWARD COUNTY
FOXPORT PLANTATION SUBDIVISION
 SECTION **3** LOT **3**
GLENNWOOD NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **2.2** MI

DRILLER INFORMATION
 Joseph L. Mayne **238** License No. 80
 Joseph L. Mayne WELL DRILLING
 5512 Ridge RD. Mt. Airy MD. 21171
 1/9/89



Buckley Tail Run NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD **60** FT or MI
 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
HOWARD COUNTY NAME **A39216** COUNTY NO.
 STATE SIGNATURE **John E. Nadeau** DATE ISSUED **6-9-89**
 NORTH GRID **539000** EAST GRID **0785000**

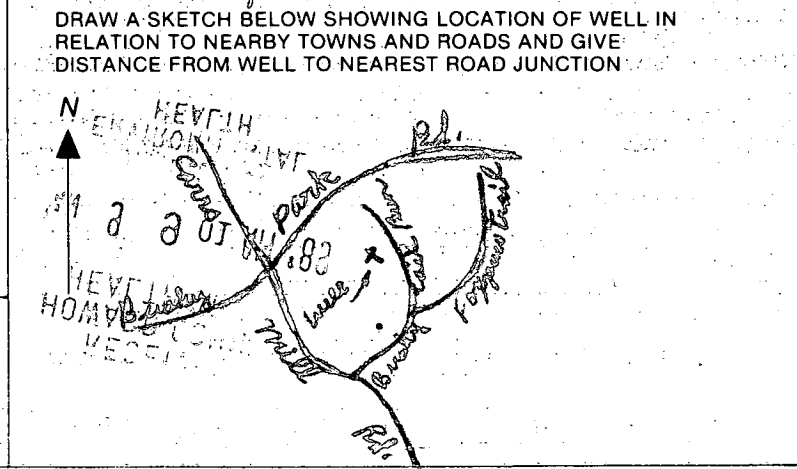
APPROXIMATE DEPTH OF WELL **220** FEET

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 _____

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
 N **5309**
 E **790**
 000
 000
8-23-89 Great 9:30am #1
60 A casing
35 ft open hole
2 ft above grade
Location ok
2 1/2 bags cement
JENadeau

REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____



Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 FORCE **UN** WRITE INITIALS IN BOX PERMIT No. **HD-08-0473**

SPECIAL CONDITIONS _____
 COUNTY _____

5/30/91 AM

OK TO COVER
IF NOT INSPECTED BY Alan
(checked no work)
C.B.D.

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

5/30/91
A.M.
NOT DONE C.B.D.

SEE BELOW
↓

461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement _____

Receipt # 47146
Date 5/28/91

Name of Installer John Gaskie

Telephone 247.6963

License Number 3189

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner Crosen

Telephone _____
Subdivision _____ Lot # 3 Well Tag # HO-88-0473 ✓ on casing

Site Address 15513 Bushong Tail Run

Pump

- 1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible X
- 2. Make Boulders
- 3. Model # 75H05422
- 4. Capacity 9 GPM
- 5. Pump exceeds well capacity Yes _____ No X
- 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 X Cable guards X Other TAPE

Motor

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

Pitless Adapter

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

Tank

- 1. Capacity 82
- 2. Pressure relief valve? RV 50

Piping

- 1. Type Big Blue
- 2. Size 1"
- 3. NSF and/or BOCA Code approved Yes
- 4. Depth of supply line 65'

Well data

- 1. Depth 75 ft.
- 2. Yield 12 GPM
- 3. Static water level 65 ft.
- 4. Will water supply be disinfected by installer? No

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: John Gaskie

Date: 5-28-91

(No 5/30/91)
C.B.D.

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

HD-215

Notes

① A.M. 5/30/91 Well 33' from foundation. Partial
11:00
② No work to 33' to well. C.B.D.
house wall to 3' of foundation (water)

SCALE 1" = 60'

12" DAM



430.00'

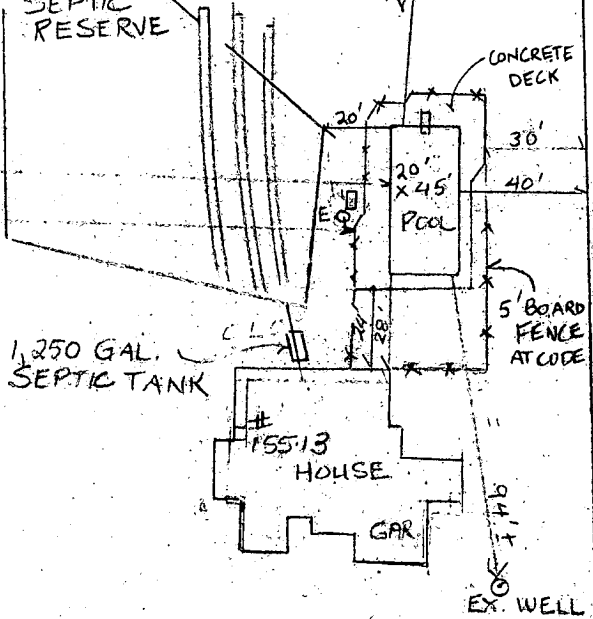
450.00'

N 46° 35' 50" E

280' ± TO REAR P.L.

SEPTIC RESERVE

187'
175'
550° 34' 00" W
307.43'



461.76'

R = 900.00'
A = 245.70

BUSHY TAIL RUN

24" RCP

