

DY -348621

12/20/89 ASAP

PERMIT

P 45227

SEWAGE DISPOSAL SYSTEM

A 39227

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 5th

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 11/16/89

DATE SYSTEM APPROVED 12/21/89

INDEXED

INSPECTOR H. Rifkin

Full Septic Service IS PERMITTED TO INSTALL ALTER

ADDRESS P.O. Box 659 Mt. Airy, Maryland 21771 PHONE (201) 795-5674

SUBDIVISION Foxport Plantation ROAD 15534 Foxpaw Trail LOT 14

PROPERTY OWNER The Bryant Group

ADDRESS _____

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

GARBAGE GRINDER? YES NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - With Disposal 220 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. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 120 ft. from the back lot line and 70 ft. from the right side of the lot as seen when facing the lot from Foxpaw Trail. Run the trenches toward both side lines.

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

PLANS APPROVED BY Craig Williams DATE 11/13/89

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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

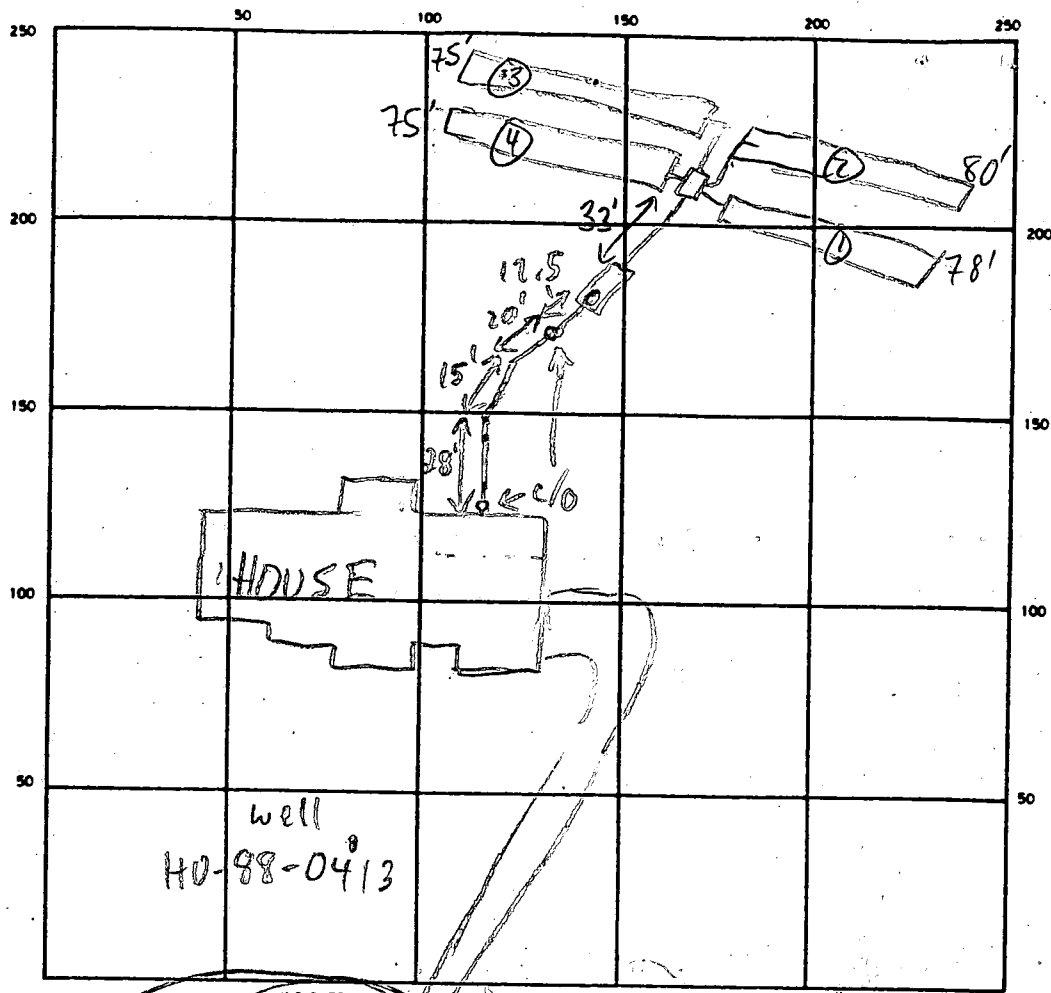
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 39227



FOXPAW TRAIL

INDICATE NORTH NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 2000 GAL - OK CLEANOUTS S.T. & 2 INLINE - OK

DISTRIBUTION BOX LEVEL OK - Baffle in

DRAIN FIELD/TILE FIELD DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 78 75 80 75 FT. 308

NUMBER OF TRENCHES 4 ~~ONE SIDEWALL~~ BOTTOM AREA 924 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS 12/21/89 OK TO COVER ALL MR

DATE SYSTEM APPROVED 12/21/89 INSPECTOR M. Ripkin

APPLICATION

PERCOLATION TESTING

A 39227

P _____

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

DISTRICT 4TH

DATE 4-29-87

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 - J B + Sons, Inc

ADDRESS 15474 BUSHY PARK RD PHONE 384-9257

PROSPECTIVE BUYER UNITED GENERAL CONTRACTORS

ADDRESS 8370 COURT AVE, ELLICOTT CITY PHONE 461-2227

PROPERTY LOCATION: FOXPORT PLANTATION
SUBDIVISION RIPPEON PROPERTY LOT NO. 14

ROAD AND DESCRIPTION CORNER OF CARR'S MILL & BUSHY PARK ROAD, WOODINE,
15534 Fox paw Trail
HOWARD COUNTY

TAX MAP 14 & 8 PARCEL # 9 & 12

SIZE OF LOT @ 3 acre lot 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.

Donald Rippeon
(SIGNATURE OF APPLICANT)

APPROVED BY [Signature] FOR Shallow Trench DATE 2/3/89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6/19/87 Perc OK Hold for Plant BH
SHALLOW SYSTEM ONLY

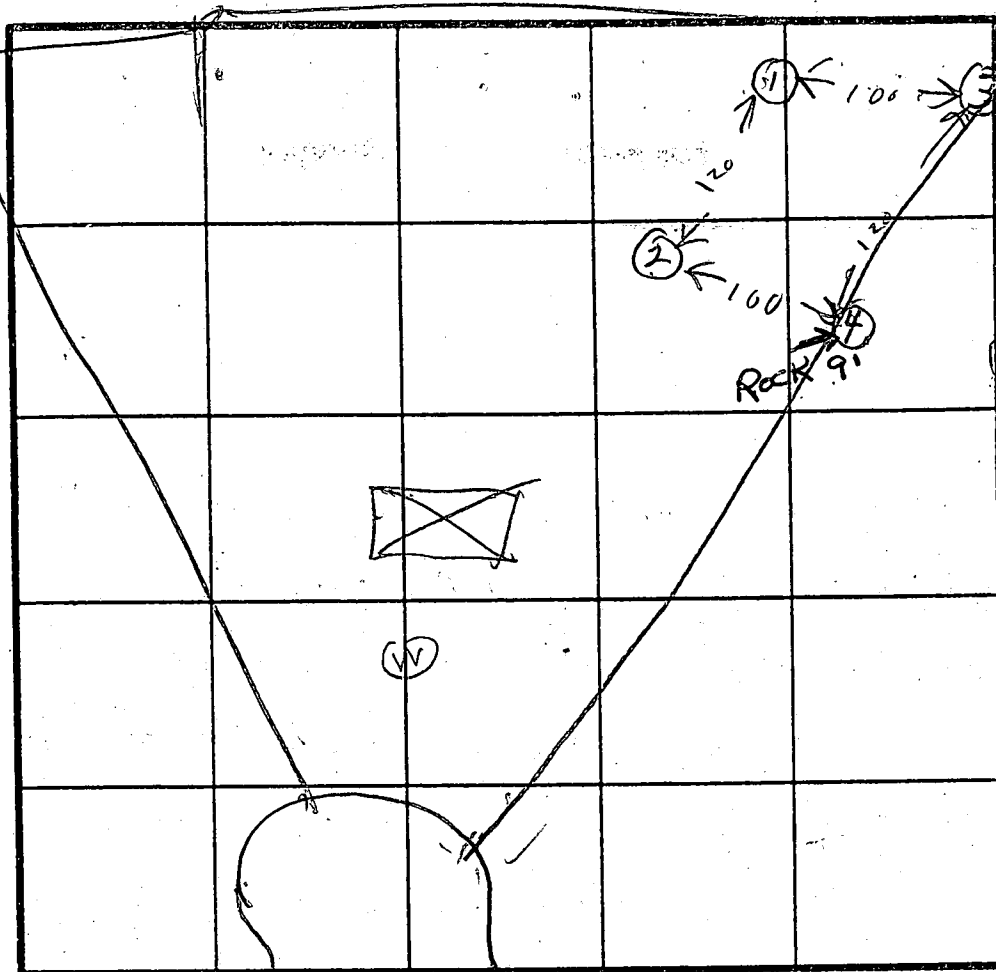
2/3/89 - spec written BH

BUDG. PERMIT SIGNED AND RETURNED [Signature]
Serial # 22969

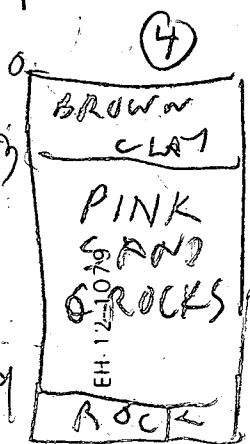
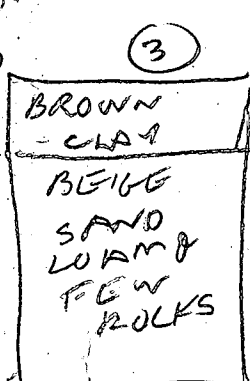
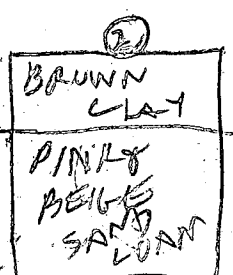
THIS IS NOT A PERMIT

SFD-4 Bedrooms

Lot 14



max depth 4' 4"
 av time MAX 10
 HOLE 6 1/2'
 ELEVATION HIGH 29
 LOW 13
 5' 10"



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
6/18/81	13	4.5	136	137	137	138	1
	17	10.5	OK				
	23	4.5	142	146	146	154	9
	27	13.5	OK				
	35	4	1230	1231	1231	1233	2
	37	8	1230	1234	1234	1240	6
	3V	12	OK				
	45	3	1243	1243 1/2	1243 1/2	1244	1/2
	(47)	9	OK	BUT	ROCK	BOTTOM	

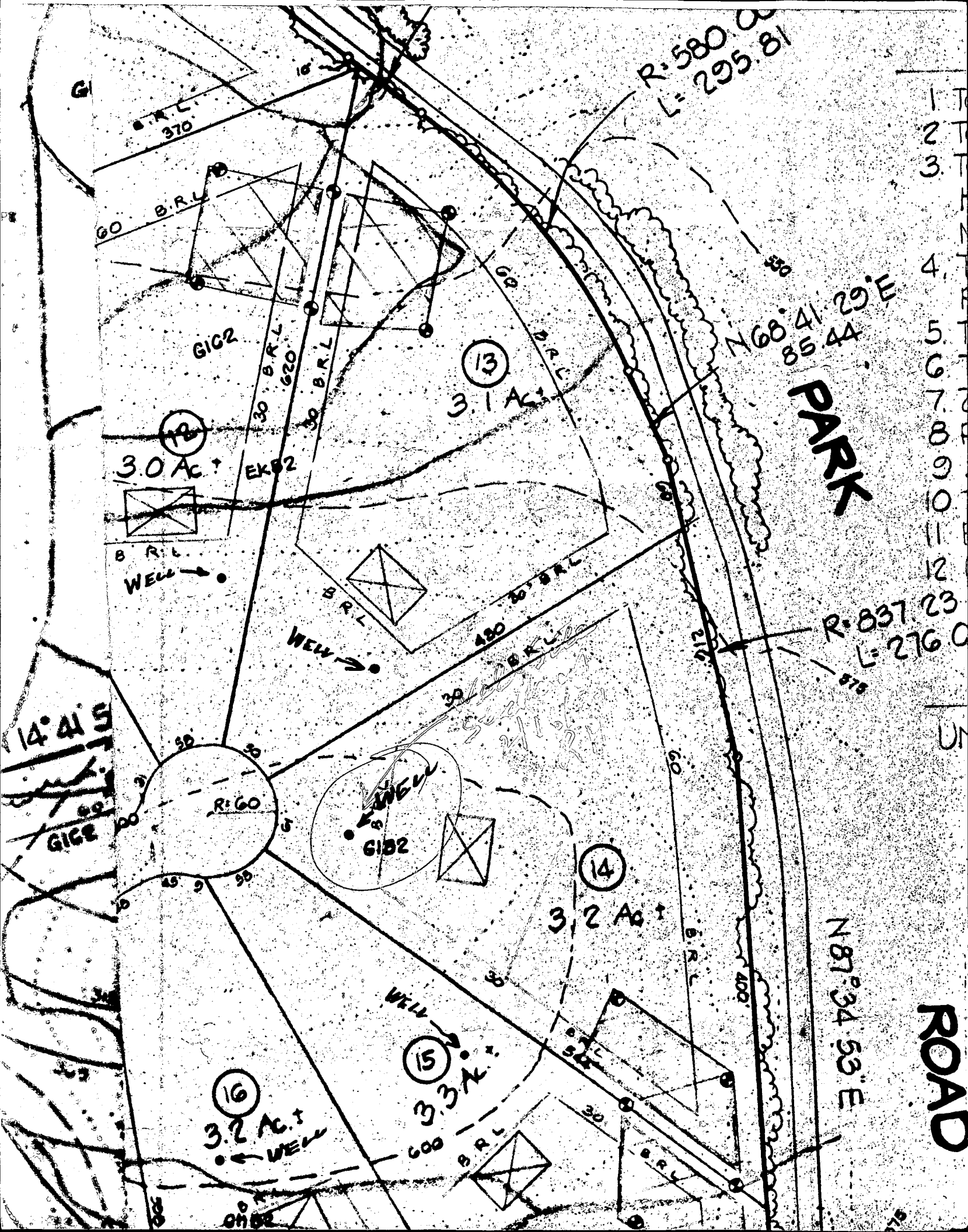
ON LINE HOLES LOT 15814
 ON LINE HOLES LOT 14815

SHALLOW SYSTEM ONLY

REMARKS Holes dug per Test Plan

TYPE OF SOIL
 TESTED BY R. HODGES

Backhoe { DONNY BROWN
 ALSO PRESENT { JEFF ALLEN
 Contractor { KYLE NICHOLS
 DAVE KINNAMAN



R. 580.00
L. 295.81

N 68° 41' 29" E
85.44'

PARK

R. 837.23
L. 276.0

N 87° 34' 53" E

ROAD

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12

B.R.L. 370

60 B.R.L.

GIC2

3.0 Ac. †

B.R.L.

WELL →

EXB2

30 B.R.L. 620

30 B.R.L.

3.1 Ac. †

B.R.L.

WELL →

420 B.R.L.

14° 41' S

GIC2

R. 60

GIC2

14

3.2 Ac. †

WELL →

15

3.3 Ac. †

16

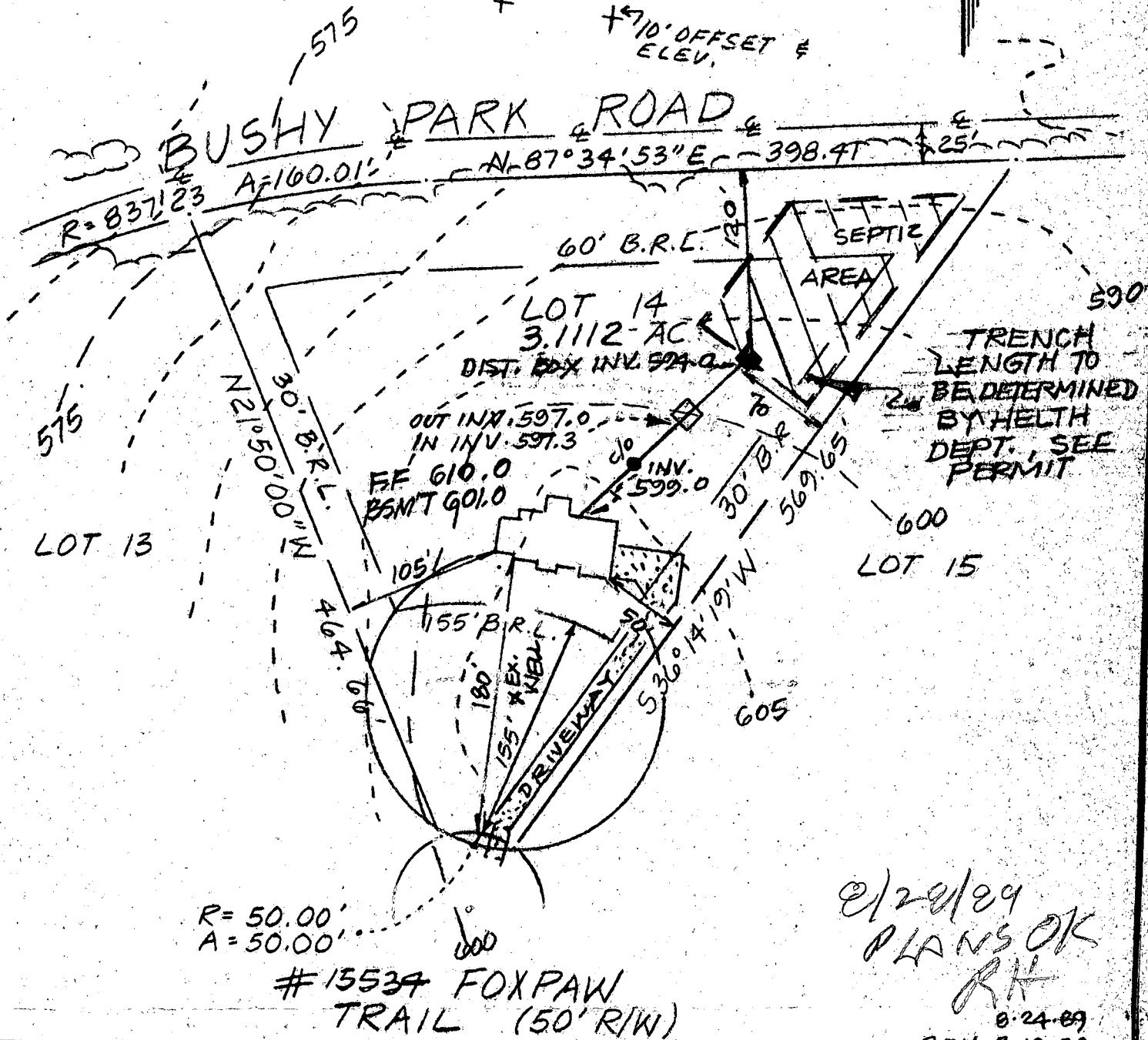
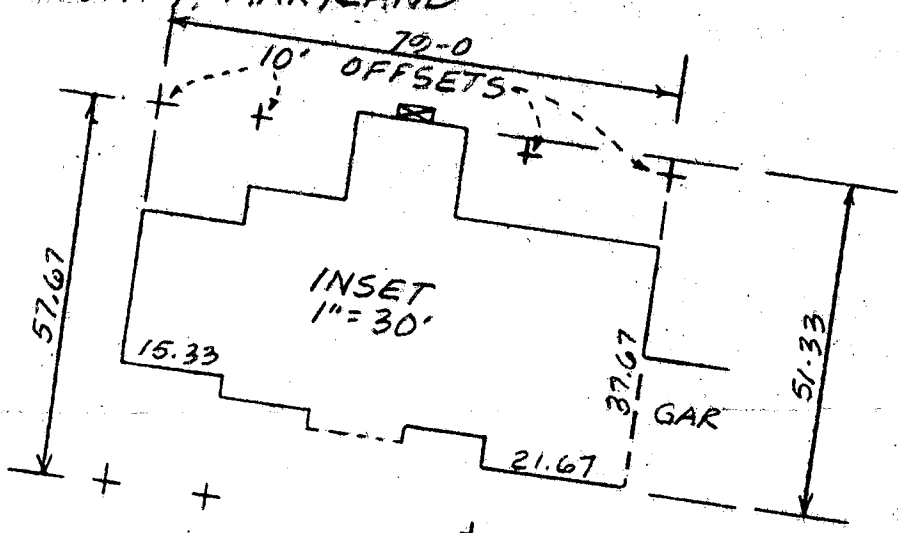
3.2 Ac. †

WELL →

600 B.R.L.

CHB2

PLOT PLAN
LOT 14
FOXPORT PLANTATION
4TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND



01/29/89
 PLANS OK
 RK
 8-24-89
 REV. 8-12-89

Tri - County Surveys, Inc. BOX 55 • DAMASCUS, MARYLAND 20872 • (301) 831-3655 LAND PLANNING CONSULTANTS • SUBDIVISIONS • LOTS & BOUNDARIES	REFERENCE Plat Book - Plat No. 8430	COUNTY OF HOWARD	Drawn by: CLW
	SURVEYOR'S CERTIFICATION I hereby certify that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This Plat is not for determining property lines, but prepared for exclusive use of present owners of property and also those who purchase, mortgage, or guarantee the title thereto, within six months from date hereof, and as to them I warrant the accuracy of this Plat. No title report furnished.		Checked by: Job No.: Scale: 1"=100' DATES PLOT PLAN: 7-1-89 Well Ck.: Final Loc.: Recert.:
WILLIAM L. WIRTS - Registered Land Surveyor - Maryland No. 10721		Note: House does not lie within a flood hazard area	

NOTE: This drawing is not intended or represented to be a lot stake out survey; no lot corners were set; and is not to be used, or relied upon, for the establishment of any fence, building or other improvements. No responsibility is extended herein to future purchasers.

B 1 7966

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER

40-88-0413

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

please print or type

fill in this form completely

Date Received (APA) 3/20/89

OWNER INFORMATION

FHE BRYANT GROUP
2815 HARTLAND ROAD
FALLS CHURCH VA 22043

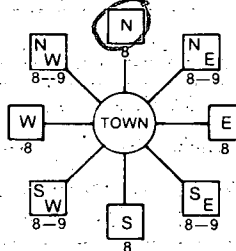
B 3 LOCATION OF WELL

HOWARD COUNTY
ECKHART PLANTATION
SECTION 44 LOT 14
GLWOOD NEAREST TOWN
2 1/2 MILES FROM TOWN

DRILLER INFORMATION

Joseph L. Mayne
Joseph L. Mayne Well Drilling
5512 PINE RD. Mt. Holly MD. 21771
1/9/89

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Foppas trail NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 60 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)
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

HOWARD COUNTY NAME
A39227 COUNTY NO.
STATE SIGNATURE
DATE ISSUED 021789
CO SIGNATURE Raymond W. Hodges
EXP. DATE 8/17/89
NORTH GRID 540000 EAST GRID 0785000

APPROXIMATE DEPTH OF WELL 220 FEET
APPROXIMATE DIAMETER OF WELL 6 INCH

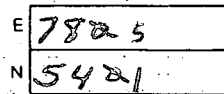
METHOD OF DRILLING (circle one)

- BORED (or Augered)
JETTED
Jetted & DRIVEN
AIR-ROTary
AIR-PERCussion
ROTARY (Hydraulic Rotary)
CABLE
REVERSE-ROTary
DRIVE-POINT

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)

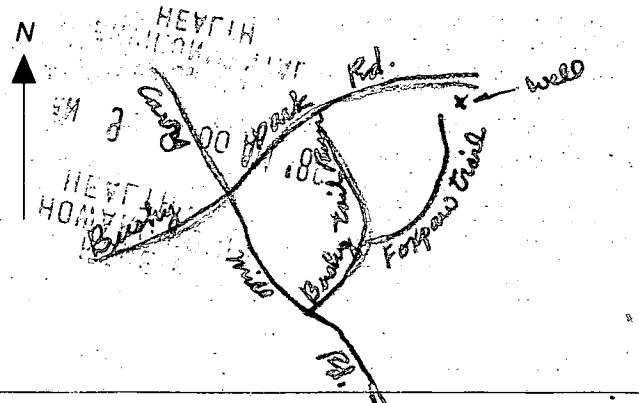
- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEIN AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

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



9 BAGS GROUT NOT OBS'D
40' CASING
34' OPEN
1' CASING A.G.
MR JAC 3/20/89

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 RII PERMIT No. 40-88-0413

SPECIAL CONDITIONS

C1 6750

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 A39227

DATE RECEIVED

DATE WELL COMPLETED

DEPTH OF WELL

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED grid: 032089

DEPTH OF WELL grid: 145

PERMIT NO. grid: 40-88-0413

OWNER

GROUP

BRYANT

STREET OR RFD

FOX PAW TRAIL

TOWN

GLENWOOD

SUBDIVISION FOXPORT PLANTATION

SECTION

LOT 14

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

Brown shale 0-25
Blue rock 25-145

FROM TO

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

Yes/No boxes: Y (45), N (44)

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 34 ft.

CASING RECORD

casing types insert appropriate code below

ST CO PL OT STEEL CONCRETE PLASTIC OTHER

MAIN CASING Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

ST 6 40

OTHER CASING (if used)

diagram for other casing with diameter and depth fields

SCREEN RECORD

screen type or open hole insert appropriate code below

ST BR HO PL OT STEEL BRASS OPEN HOLE PLASTIC OTHER

C2

DEPTH (nearest ft.) grid: H0 39 145

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

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 LOG INDICATOR OTHER DATA

C3

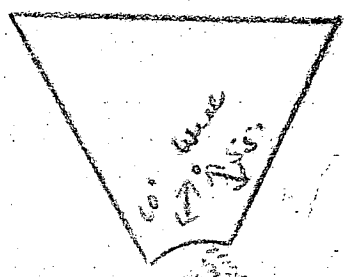
PUMPING TEST

HOURS PUMPED 2 PUMPING RATE 15 METHOD USED TO MEASURE PUMPING RATE Bucket

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

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)



- 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. 238
DRILLERS SIGNATURE (Must match signature on application)
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

COUNTY

12/20/89

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 X
Replacement _____

Receipt # 45328
Date 12/07/89

Name of Installer Maximo P.H. Dine

Telephone 747-5615

License Number m-3095

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner J+B Builders

Telephone _____

Subdivision FOX PORT PLANTATION Lot # 14 Well Tag # HO 88 0413

Site Address 15534 FOX PAW TRAIL

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible X
- Make Douglas
- Model # 10EJ10412
- Capacity 15 GPM
- Pump exceeds well capacity Yes _____ No X
- If Yes, is low pressure cutoff switch installed? Yes X No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors X Cable guards X Other _____

Motor

- Horsepower 1"
- RPM _____
- Voltage _____
 - 110 _____
 - 220 ✓

Pitless Adapter

- Make Brass
- Model # _____
- Depth 42"

Tank

- Capacity WX250
- Pressure relief valve? YES

Piping

- Type 160LB
- Size 1"
- NSF and/or BOCA Code approved _____
- Depth of supply line 42"

Well data

- Depth 145 ft.
- Yield 15 GPM
- Static water level 68 ft.
- Will water supply be disinfected by installer? Builder

P.A. OK @ 3.5'
MR 12/20/89 B.G.

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: Joseph O. Maximo

Date: 12/6/89

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