

3/24/87
Am

PERMIT

P 39095

SEWAGE DISPOSAL SYSTEM

A REPAIR

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT _____

HOWARD COUNTY

DATE 4/9/87

BUREAU OF ENVIRONMENTAL HEALTH

DATE SYSTEM APPROVED 3/24/87

461-9933

INDEXED

INSPECTOR RH

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE 988-9270

SUBDIVISION Woodmark ROAD 12115 Mt. Albert Road LOT 4 B.K.D. Section 10

PROPERTY OWNER Mr. Chaney

ADDRESS _____

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

GARBAGE GRINDER? YES X NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS 3

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

160 SQ FT PER BED ROOM
75 FT LONG WITH 7 FT STONE
& INLET AT 2 FT BELOW GRADE
RUN TRENCH OFF TANK & RUN ALONG
LEVEL GROUND. HOME OWNER TO LEAVE NOTE

PLANS APPROVED BY C. Williams DATE 3/16/87

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.

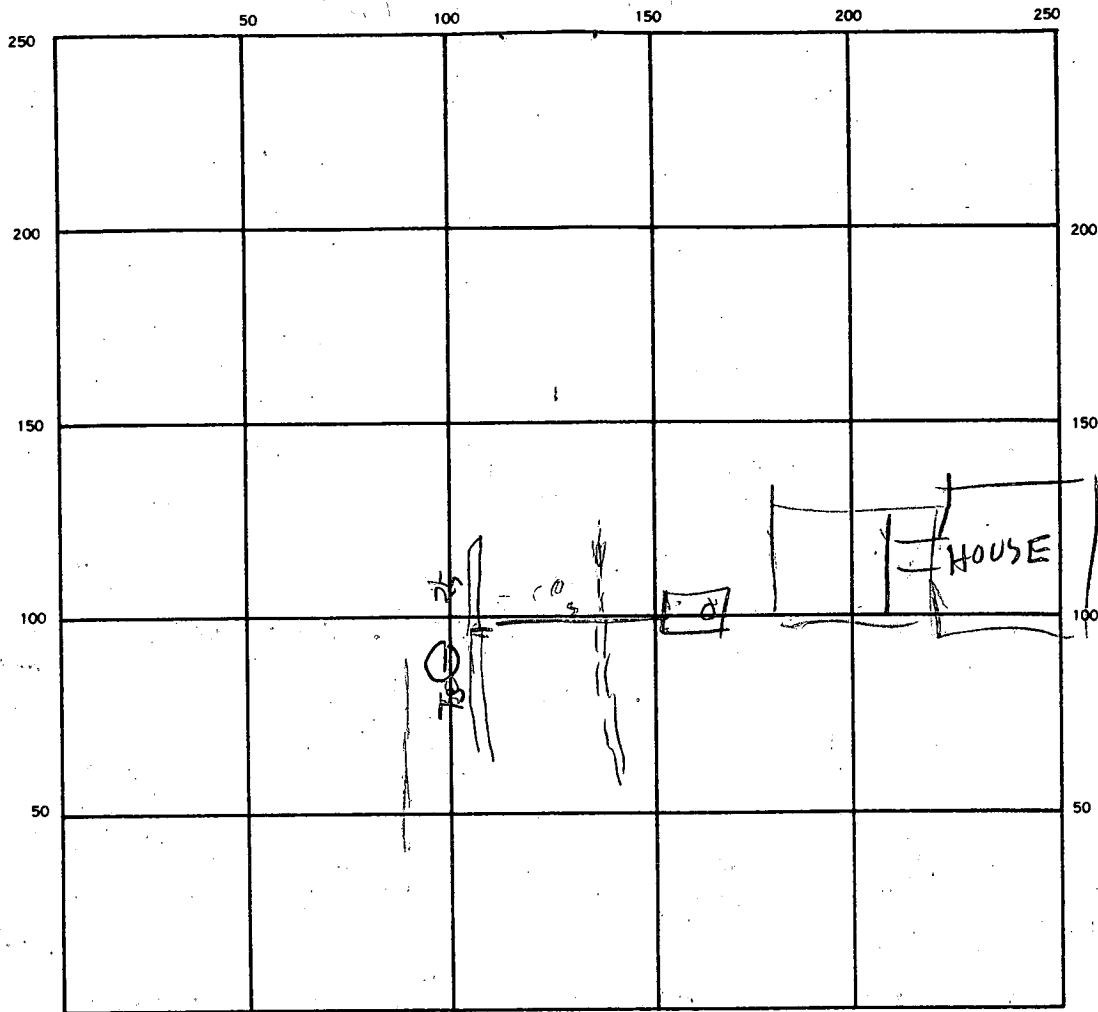
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

P.A. 39095



INDICATE NORTH, NAME ADJOINING ROADWAY AS BASE LINE.
 MT ALBERT RD

SEPTIC TANK. LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX. LEVEL _____

DRAIN FIELD/TILE FIELD. DEPTH 9 FT. TRENCH WIDTH 2 FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH 78 FT.

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

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 3/24/07 - HOME OWNER TO MEASURE LENGTH
IF TRENCH HOME OWNER ALREADY
MEASURED VISUAL HOLE 15 FT DEEP NO WATER.
3/24/07 PM - TRENCH FINISHED AS SHOWN BY RH.

DATE SYSTEM APPROVED 3/24/07 INSPECTOR Raymond Hoopes

4/30/75
after 1:00 p.m. if possible

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

P 21408

A 16161

ELLICOTT CITY

DISTRICT 3

DATE 4/28/75

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS Ten Oaks Road, Glenelg, Md. PHONE 286-2939

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Woodmark, Inc. ROAD ¹²¹¹⁵ Mt. Albert Road LOT 4, Blk. D,

Sec. 10

PROPERTY OWNER Harry Chaney

ADDRESS

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1,000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Trench 75 ft. long with 7 1/2 ft. stone - inlet no deeper than 3 ft. max. 10 1/2 ft to 11 ft. Location: starting near corner of carport and running more or less parallel with driveway.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK. STAND PIPE MUST BE 6" IN DIA., CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

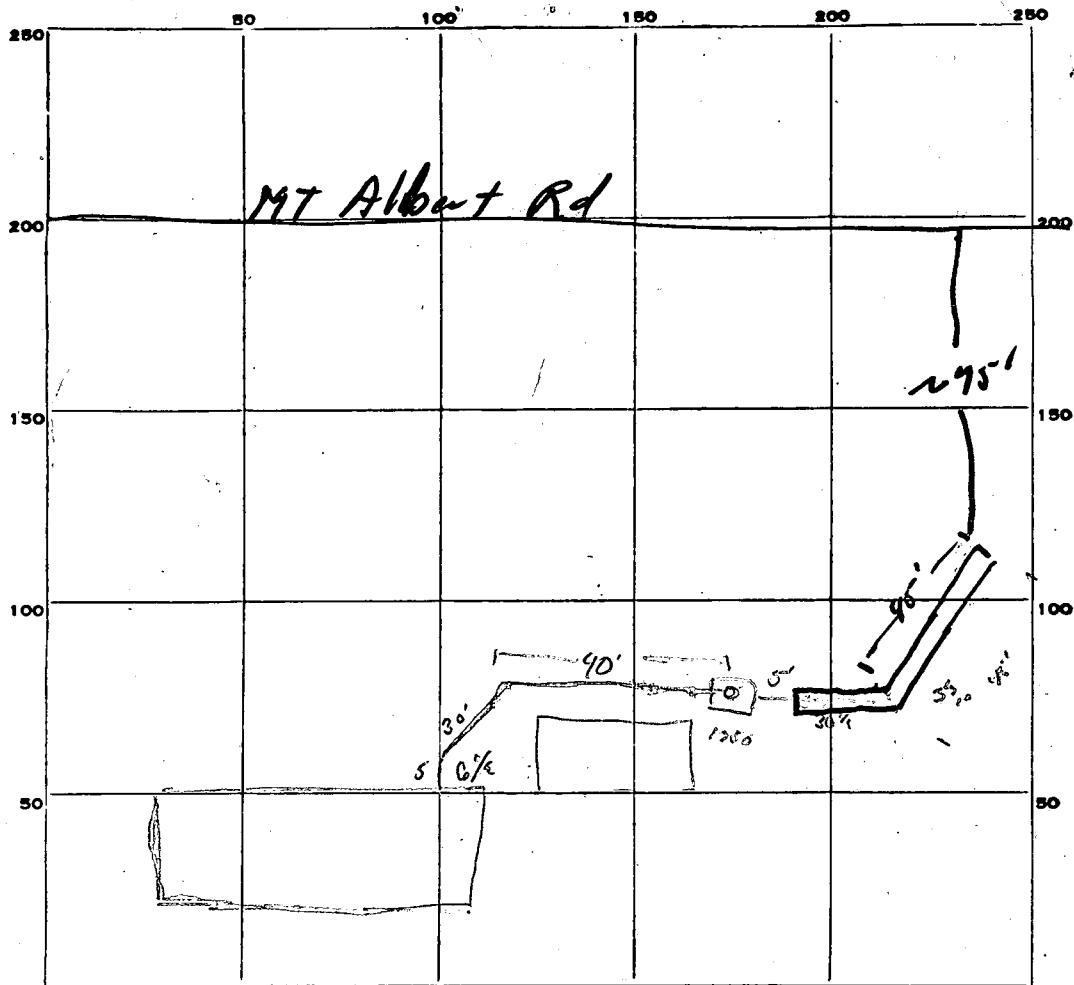
PLANS APPROVED BY F. F. Frommelt DATE 4/28/75

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NOTE: TWO INSPECTIONS NEEDED: ONE WHEN GROUND IS OPENED UP BEFORE ANY GRAVEL IS INSTALLED NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

AND THE NEXT AFTER GRAVEL IS INSTALLED.

A 16161



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD Signed

SEPTIC TANK, LEVEL

CLEANOUTS

DISTRIBUTION BOX, LEVEL N/A

TILE FIELD, DEPTH 9 1/2' FT. TRENCH WIDTH 2 FT. 2' below ground.

GRAVEL DEPTH 2 1/2 2 1/2' IN. TOTAL LENGTH 66 1/2 95 FT. - will go to 95'

NUMBER OF TRENCHES 1 One Sidewall
TOTAL BOTTOM AREA 562.5

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 4/30/95

INSPECTOR B/04.

APPLICATION

A 16161

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 3 Bedrooms 1000 gallons
Drywell 4 Bedrooms 1200 gallons

ELLICOTT CITY

DISTRICT 3

DATE 7/26/71

448 sq. ft. of absorbent side
well area below inlet pipe, inlet pipe
to start at 2' below original grade. Location of dry
well 97 ft. from front property line and 144 ft. from left
property line as seen from 47. Albert Road.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Woodmark, Inc.

ADDRESS Mark Wakefield, Jr., Ellicott City, Md. PHONE 531-5072

PROPERTY LOCATION:

SUBDIVISION Woodmark, Inc. LOT NO. 4, Sec. 1

ROAD AND DESCRIPTION Carroll Mill Road

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 162,800 sq. ft. TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Mark Wakefield, Jr.

APPROVED BY C. Straka FOR Dry Well under condition DATE 12/21/71
(KIND OF SYSTEM)

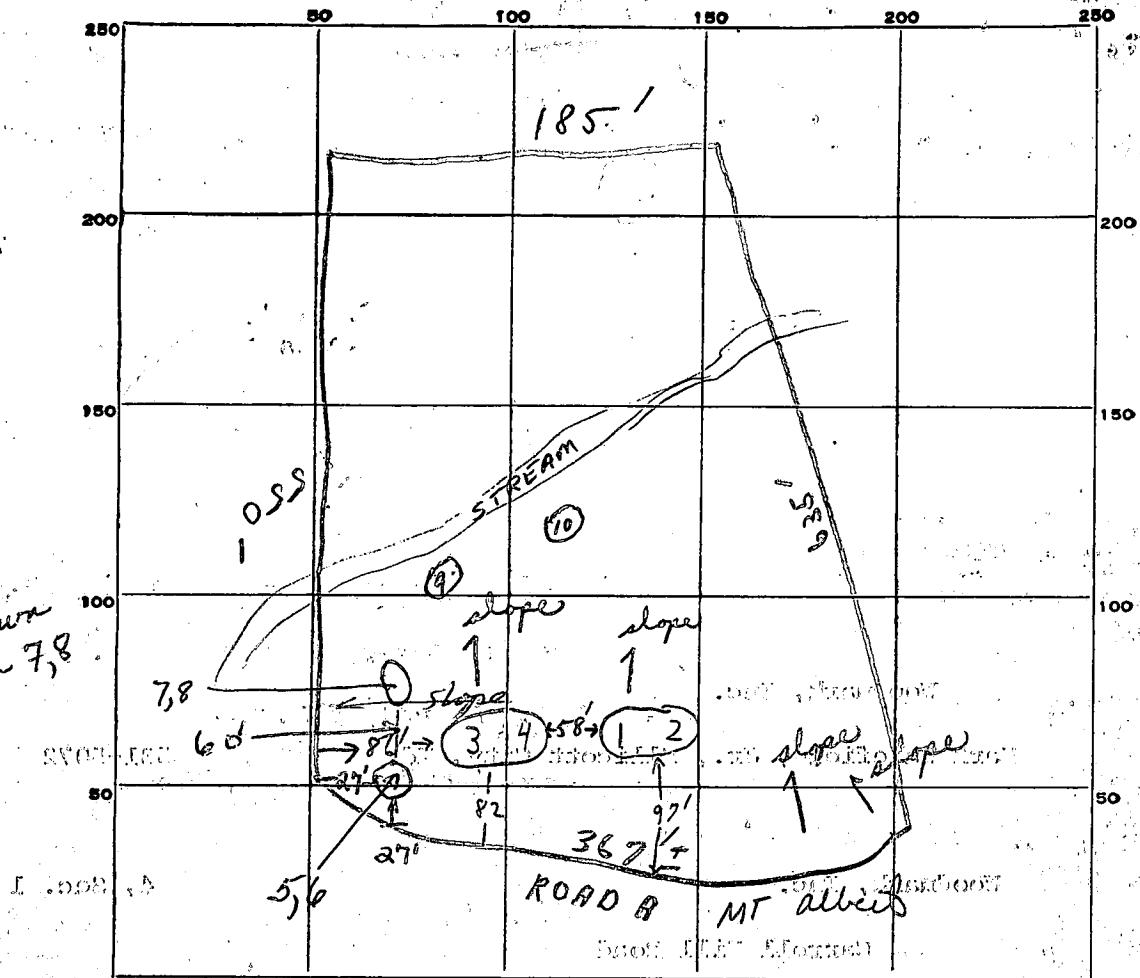
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

system in before house is designated
OK'D on 1/12/72 CBS + R.T.

THIS IS NOT A PERMIT



distance between holes 3,4 and 7,8 is ~ 66'

Hole #4

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/10/71	1	9'	10:35	10:45	10:45	10:07	22 min	
8/10/71	2	3'	10:35	10:37	10:37	10:40	3 min	
8/10/71	2	10 1/2'	10:46	10:48	10:48	10:51	3 min	
8/10/71	4	3'	10:47	10:55	10:55	10:07	12 min	
1/17/74	5	3'	9:50	9:51	9:51	9:53	2	
	6	11'	9:50	9:58	9:58	10:22	24	
	7	3'	9:53	9:55	9:55	9:58	3	
	8	11'	10:00	2 gal	—	10:08	8	
	9	6'	Sandy, going to rock					
	10	6'	Water, Hits rock 9'					

Planned finished }
roughly }
22 min }
3 min }
3 min } 10 min
12 min }

8/77

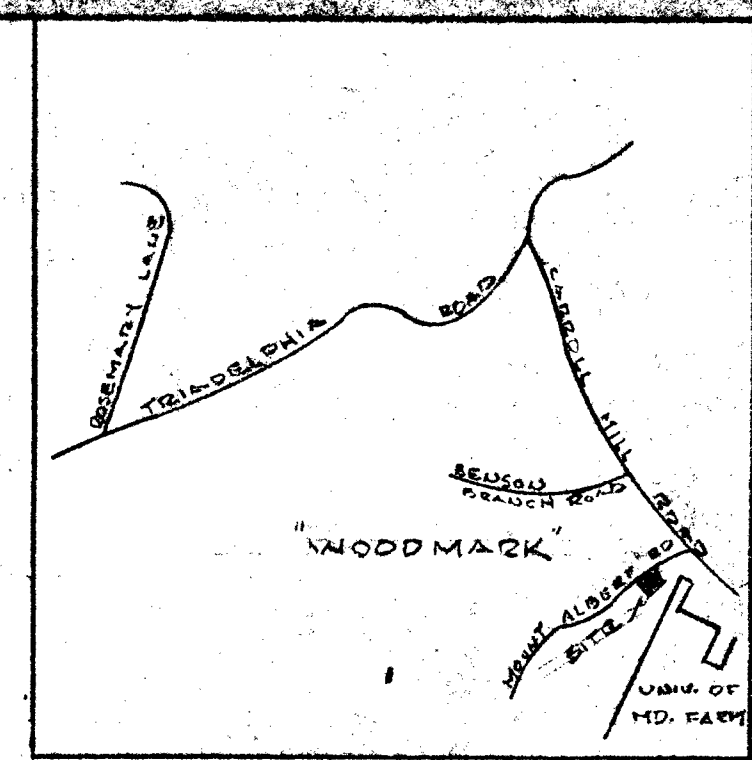
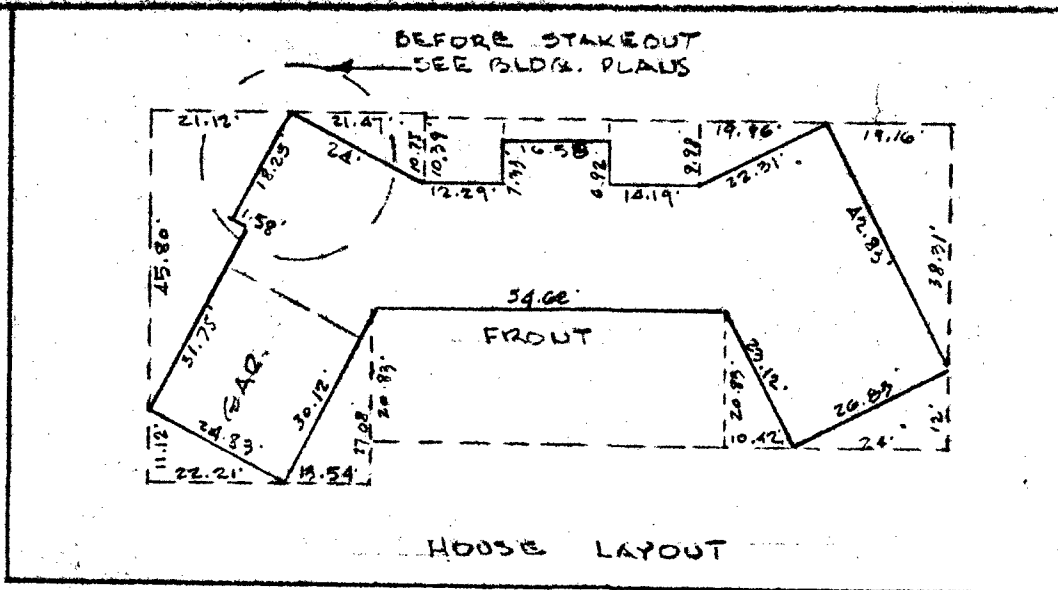
NWZ

SOIL AUGER FINDING

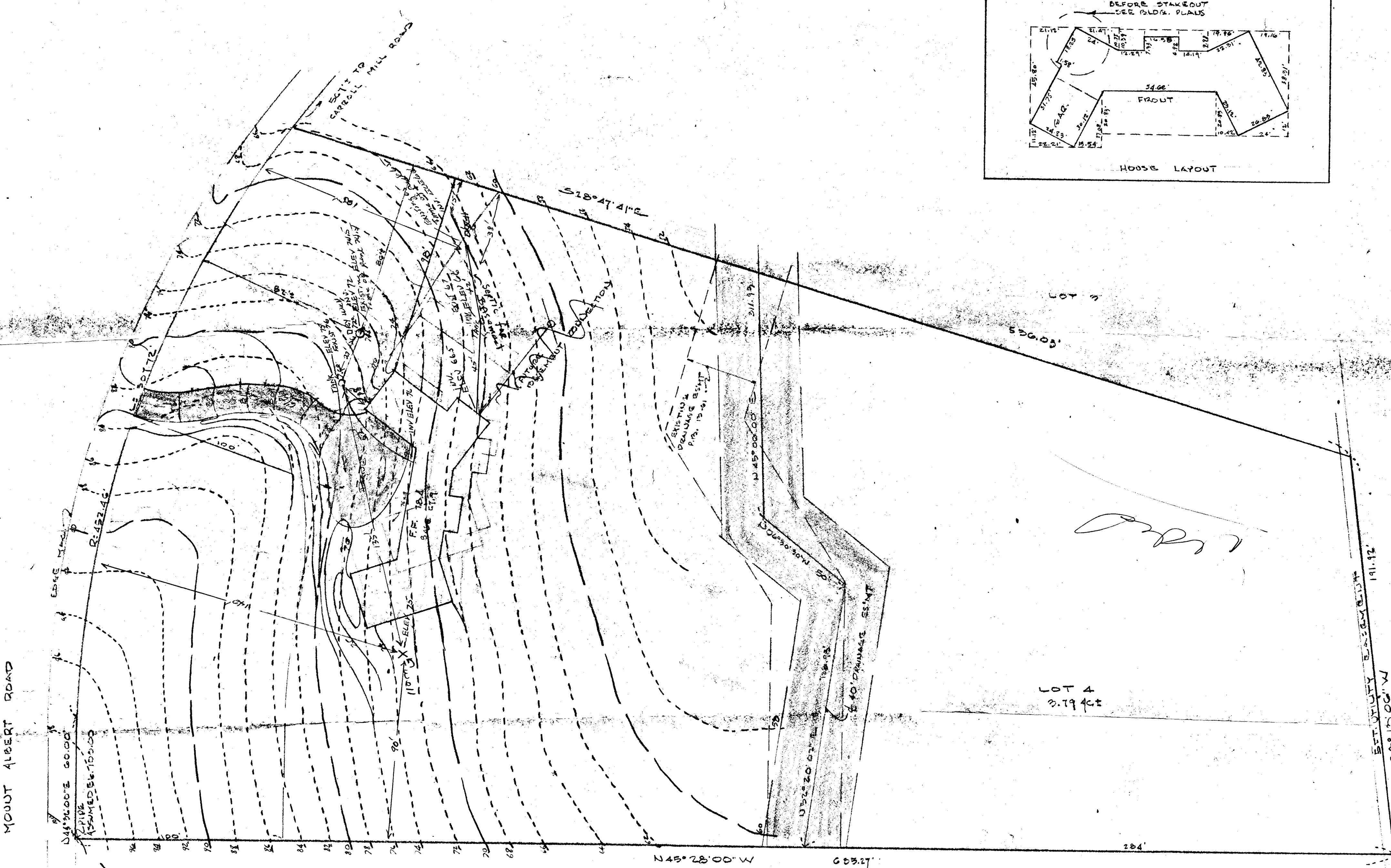
R.T. + 85. Put system in before house (use Hole 1+2)
TESTED BY

REMARKS: Hole 1+2 { 97' from property line }
2/1/74. acceptable plan (Jan 74)

7,8 - loose dirt in hollow of hole 3 ~ 1' higher than 5,6



VICINITY MAP



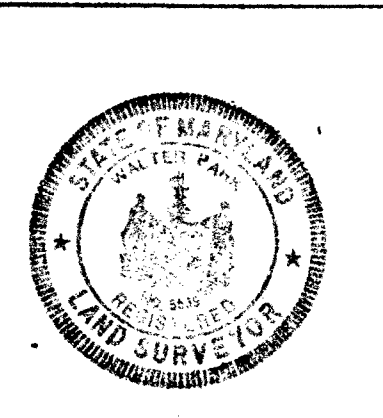
SECTION ONE PART 'A'
LOT 3 P.D. 13-61

SITE PLAN
LOT 4 BLOCK D SECTION 10
WOODMARK PLAT BOOK 28-69
3RD ELECT. DIST. HOWARD CO, MD
SCALE 1"=30' JAN. 20, 1974

I certify that elevations
shown herein are true.
Shawn R. Chang
442-2044

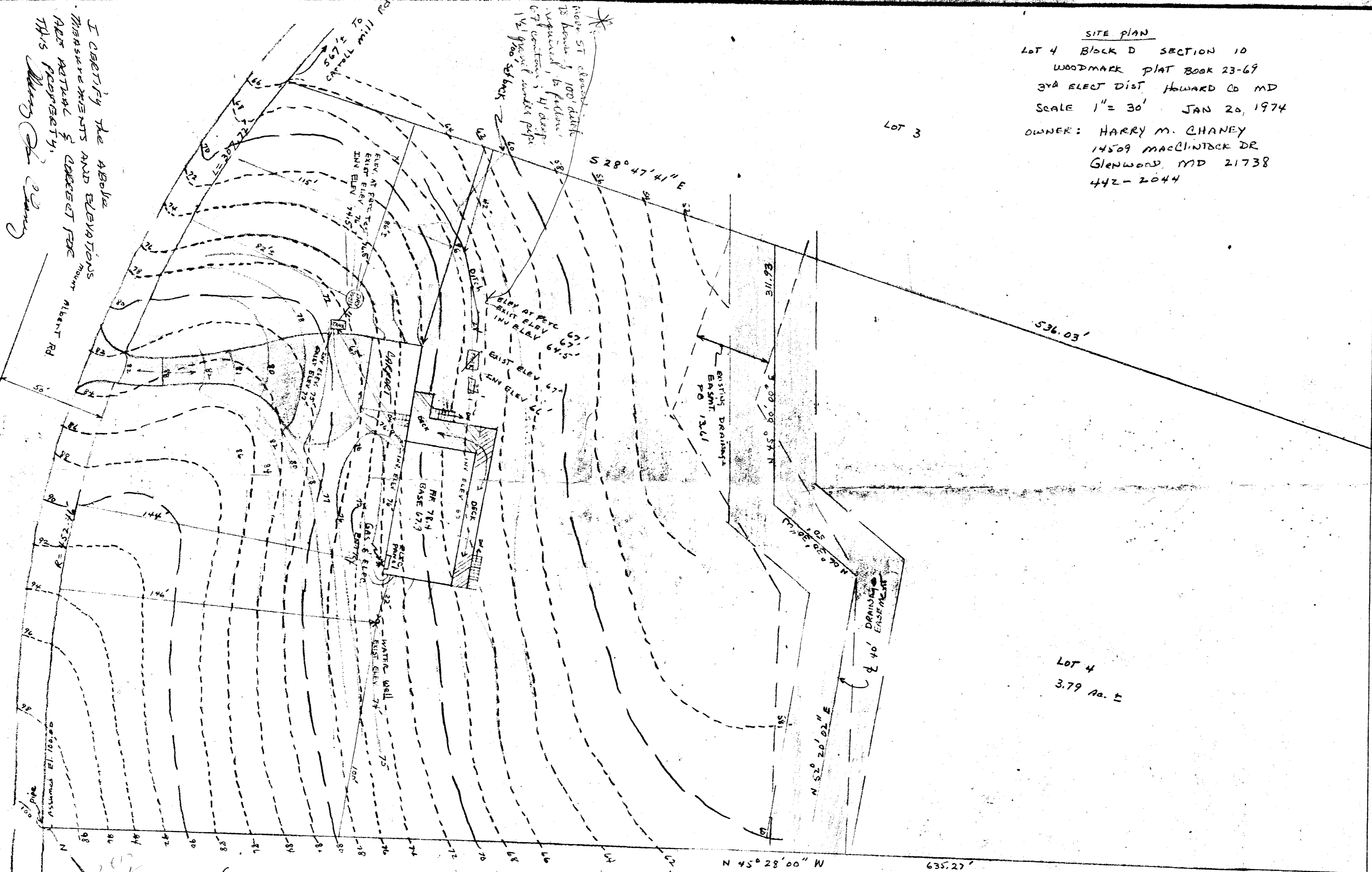
OWNER: MR. HARRY M. CHAUVET
14509 McCLINTOCK DR.
GLENWOOD, MD 21738
442-2044

HUDKINS ASSOCIATES
ENGINEERS & SURVEYORS
231 JOSEPH SQUARE
COLUMBIA, MD



REVISION AND DISTRIBUTION RECORD			
NO.	DATE	PR.	DISTRIBUTION

SITE PLAN
 LOT 4 BLOCK D SECTION 10
 WOODMARK PLAT BOOK 23-69
 3RD ELECT DIST HOWARD CO MD
 SCALE 1" = 30' JAN 20, 1974
 OWNER: HARRY M. CHANEY
 14509 MACCLINTOCK DR
 GLENWOOD MD 21738
 442-2044



I CERTIFY the ABOVE
 MEASUREMENTS AND ELEVATIONS
 ARE ACCURATE & CORRECT FOR
 THIS PROPERTY.
 Harry M. Chaney

These 51' shown
 to be a 100' driveway
 as shown in plan
 is a 100' driveway
 as shown in plan
 is a 100' driveway
 as shown in plan

11/26/74
 H. Chaney
 513

11/11/74
 Chaney

Remove CR
 from plan
 and replace with
 on page 11. 11/11/74

LOT 5

C 1 - 1702
 SEQUENCE NO. (WRA USE ONLY)
 1 2 3 (SEQ. NO.) 4 5 6
 THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

STATE OF MARYLAND
 WATER RESOURCES ADMINISTRATION
 TAWES STATE OFFICE BLDG, ANNAPOLIS, MD. 21401
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION
 FILL IN THIS FORM COMPLETELY
 COUNTY NUMBER

DATE RECEIVED (WRA USE ONLY) _____ DATE WELL COMPLETED 2-4-75 DEPTH OF WELL 120 (TO NEAREST FOOT) 22 _____ 26
 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-0920 28 29 30 31 32 33 34 35 36 37
 DRILLERS IDENTIFICATION NO. 42

OWNER Phoney Morin LAST NAME FIRST NAME
 STREET OR RFD 17509 Assoc. Planters Dr. POST OFFICE Ellenwood Md.

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Top Soil	0	2	
Shaley	2	10	
Shale	10	20	
Blue Slate	30	50	
Granite	50	120	

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE "BOX")
 CEMENT BENTONITE CLAY

NO. OF BAGS 6 NO. OF POUNDS 600

GALLONS OF WATER 30

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 20 FT.
 (ENTER 0 IF FROM SURFACE)

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 1

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 5

METHOD USED TO MEASURE PUMPING RATE DOCKET

WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 45 (NEAREST FOOT)
 WHEN PUMPING 120 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL CONCRETE
 ELASTIC OTHER

MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 27

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35
 PUMP HORSE POWER 37 41
 PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE } LAND SURFACE (NEAREST FOOT) 2
 BELOW }

OTHER CASING (IF USED)

EACH CASING	DIAMETER (INCH)	DEPTH (FEET) FROM	TO

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL BRASS OR BRONZE OPEN HOLE
 PLASTIC OTHER

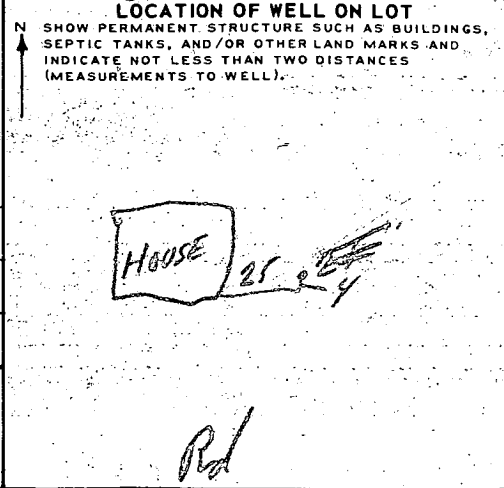
SCREEN TYPE OR OPEN HOLE

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM _____ TO _____

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX: 68 F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER):
 TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE



CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME
 (PLEASE PRINT) LFEastendaw
 SIGNATURE P. Eastendaw