

14/190 }  
1/190 }  
9/11/90 SAT

05-411769

File

7/14 0 P.C.O.-ONLY  
C.B.J.

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

P 46257

A 40515

DISTRICT 5th

DATE 8/14/90

DATE SYSTEM APPROVED 9/12/90

INSPECTOR C.B.J.

INDEXED

James Rushe/Wesmar

IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE 531-2166

SUBDIVISION Hedgerow ROAD 13681 Gilbride Lane LOT 15

PROPERTY OWNER James Rushe

ADDRESS \_\_\_\_\_

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 90% AND XESCHOPX XEX BY X~~

~~GARBAGE GRINDER XXX YES XXXXXXXXXXXXXXXX NO XXXXXX~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 4 1/2 feet of stone below distribution pipe.

LOCATION - Starting from intersection of 319.84 and 285.00' lot lines, place distribution box 100' down right (319.84') lot line and 100' off this same lot line. Run trenches on contour toward 264.05 feet lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 6-7-90 JEN

PLANS APPROVED BY Raymond Hodges cm DATE 05/29/90

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

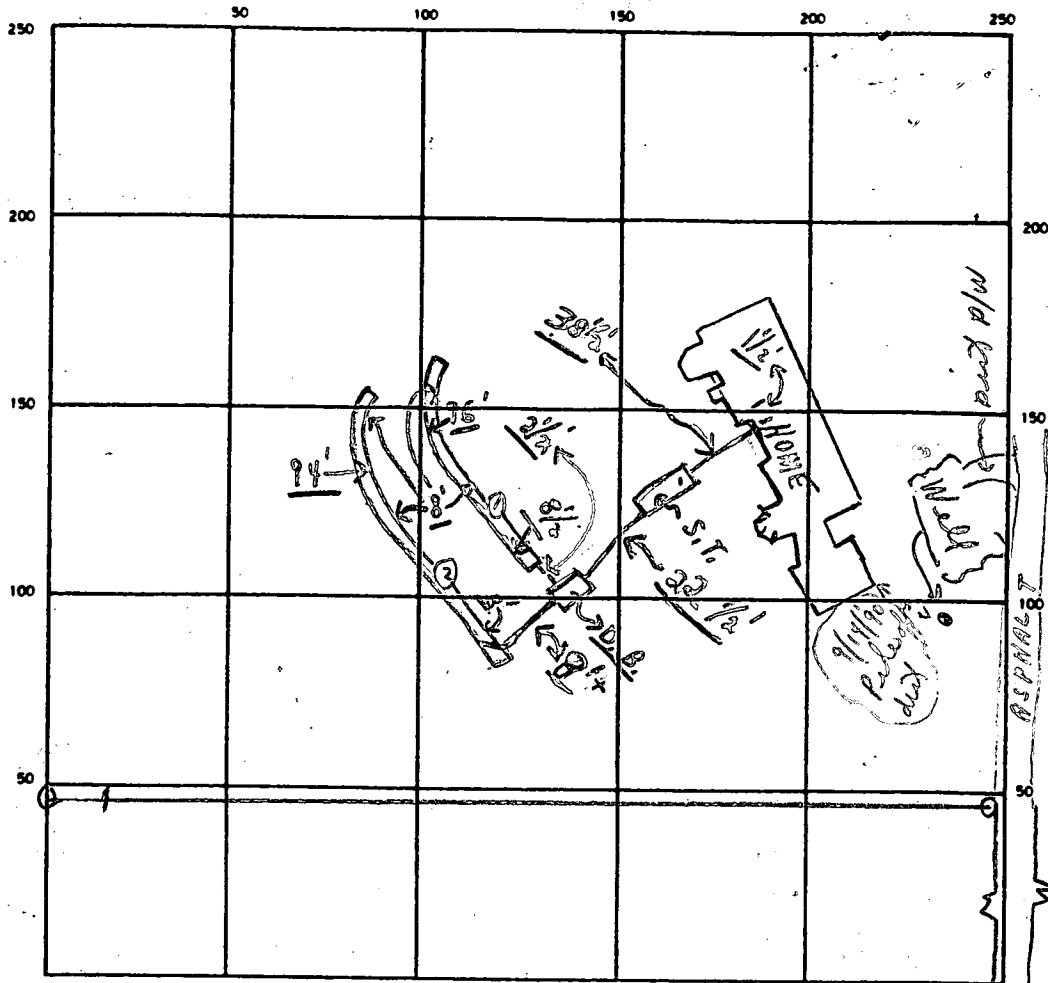
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

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 40515



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

S.T. MANNHOLE OK (TO BE CEMENTED) GILBRIDE LANE

SEPTIC TANK. LEVEL OK CLEANOUTS OK (TO BE CEMENTED)  
 DISTRIBUTION BOX. LEVEL OK (Baffles is in)  
 DRAIN FIELD/TILE FIELD. DEPTH 8' avg FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 FT.  
 EFFECTIVE GRAVEL DEPTH 4 1/2 FT. TOTAL LENGTH 95 3/4 FT.  
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 855 SQ. FT.  
 DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.  
 ABSORBENT AREA 855 SQ. FT.

REMARKS 9/14/90 P.M. → Partial OK FOR STONE IN TRENCHES AND TO COVER FROM HOUSE TO DIST. BOX ONLY; AFTER CEMENTING D.B. BOX & S.T. AREAS. C.B.  
9/17/90 OK TO COVER ALL WORK - FINAL. C.B.

(9/14/90 NO. W.P.I.) C.B.  
 (9/17/90 NO. W.P.I.) 9/17/90  
 DATE SYSTEM APPROVED \_\_\_\_\_ INSPECTOR Charles Bryan, Streets

# APPLICATION

PERCOLATION TESTING

A 40515  
P \_\_\_\_\_

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

*1/19/88  
perc OK'd pending  
plot @*

DISTRICT 5TH  
DATE 10-29-87

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 LOWRIE SARGENT

ADDRESS 13243 WESTHEATH LANE PHONE 498-4334  
CLARKSVILLE, MARYLAND 21029

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION: Hedgecove - lot # 15 13681 Gilbride Lane

SUBDIVISION TEN OAKS LOT NO. 46 15 on Prelim

ROAD AND DESCRIPTION WEST OF HIGHLAND ROAD, NORTH OF TRIADDELPHIA ROAD

TAX MAP 28+34 PARCEL # 60,59  
30+64

SIZE OF LOT 3.0 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]*

(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING

*for field located holes on 5th plot*

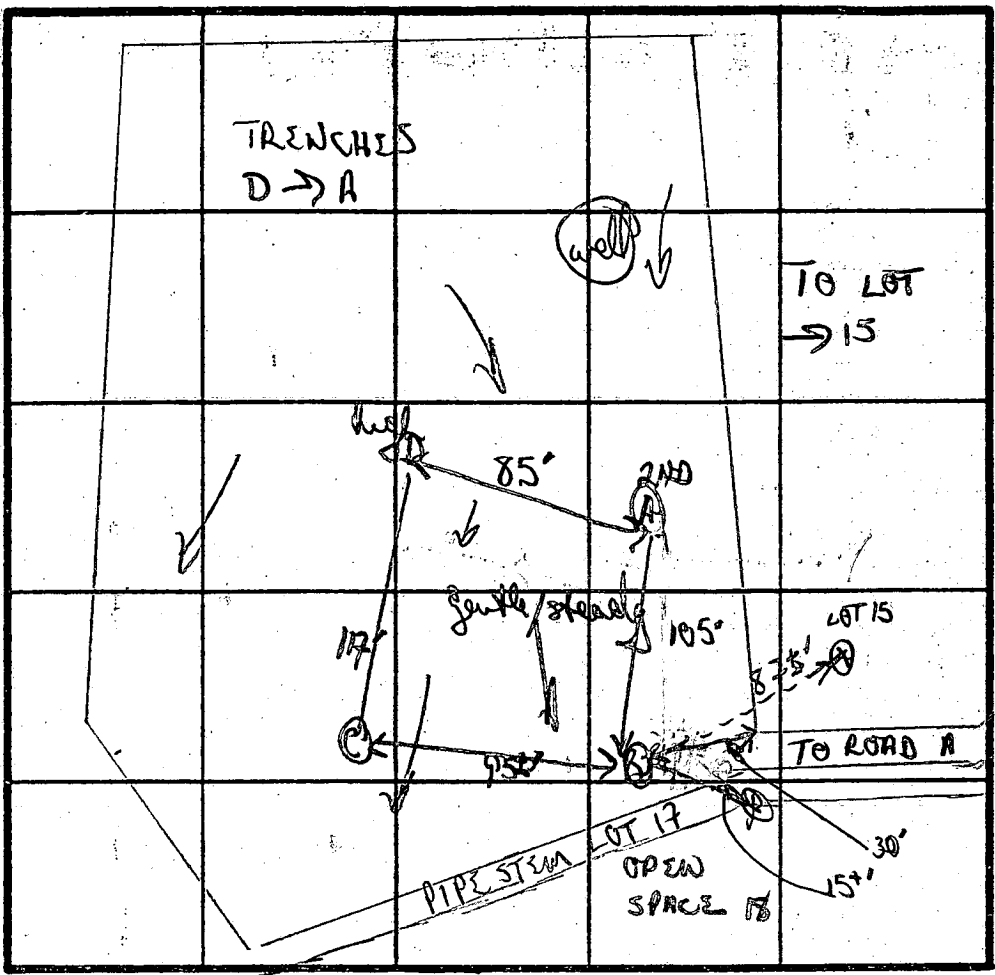
BDDG. PERMIT SIGNED  
AND RETURNED 05/29/88  
Serial # 32501

# THIS IS NOT A PERMIT

**B**  
SOIL PROFILE

clumpy orange clay/clay loam 4' 1/2'  
to patchy orange gritty to tan grey silty clay mix

12' D



**D**  
orange/purple clay 2 1/2'  
to mostly purple/yellow silty loam w/ patches of layered frags (10-15%) 5 1/2'

12' D

**A**  
similar to B w/ scattered small/med frags 7' 1/2'

11 1/2' D

**C**  
orange/brown clay 3 1/2'  
clay/tan clay silt loam w/ patches small weathered frags 4-7'

+10-12  
12' D

INLET 3 1/2'  
MAX D 8'  
X = 14 1/2' MIN

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

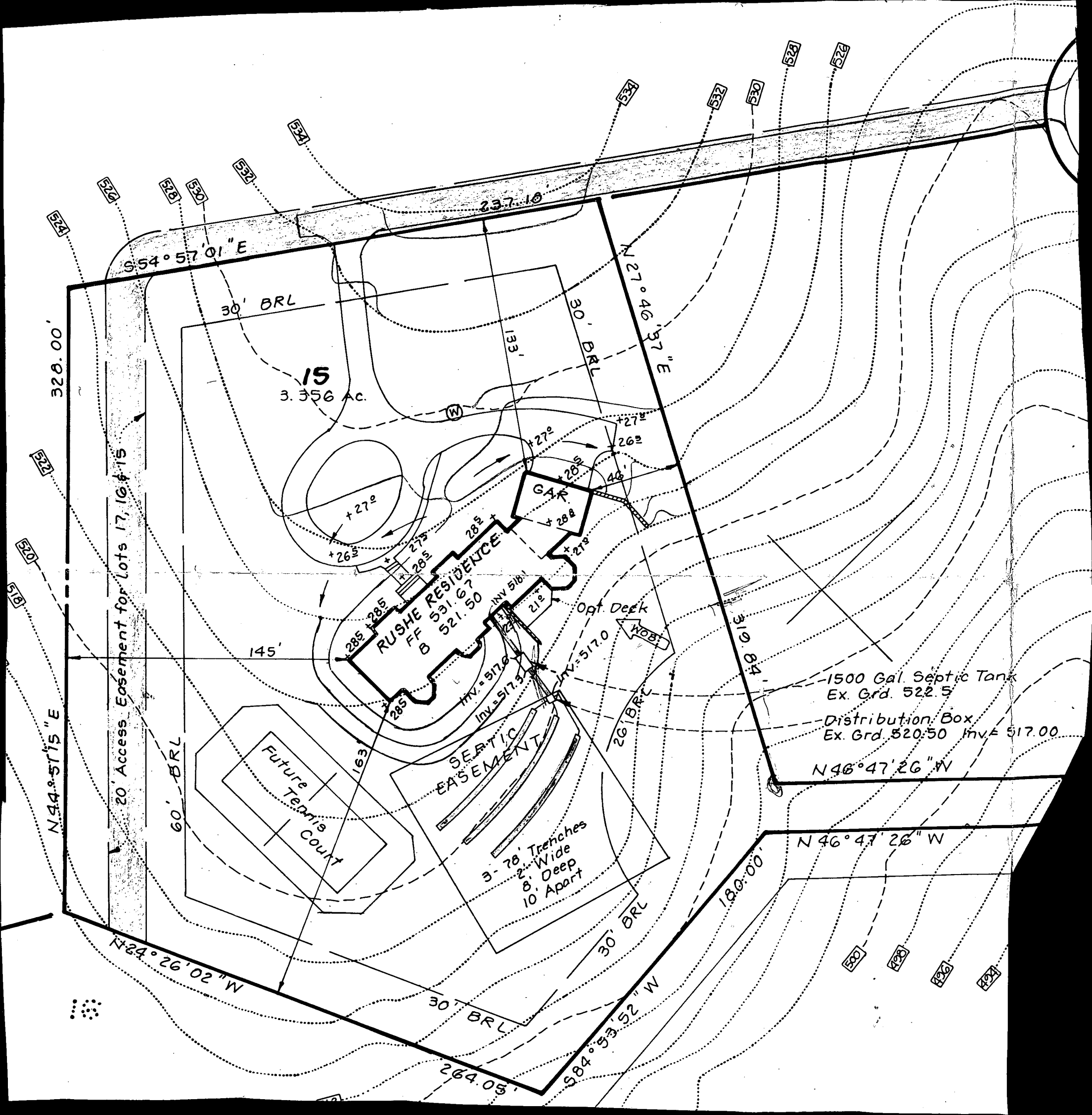
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
11/19/88	B	3' S	1034	1043	1043	1054	11min	
		6 1/2' M	1034	1036	1036	1040	6min	
		12' D	bottom (see profile)					
	A	3 1/2' S	1047	1055	1055	1120	25min	
		7' M	1046	1053	1053	1106	13min	
		11 1/2' D	bottom (see profile)					
	D	4' S	1049	1054	1054	1102	8min	
		12' D	bottom (see profile)					
	C	4 1/2' S	1057	1112	1112	1138	26min	
		12' D	bottom (see profile)					

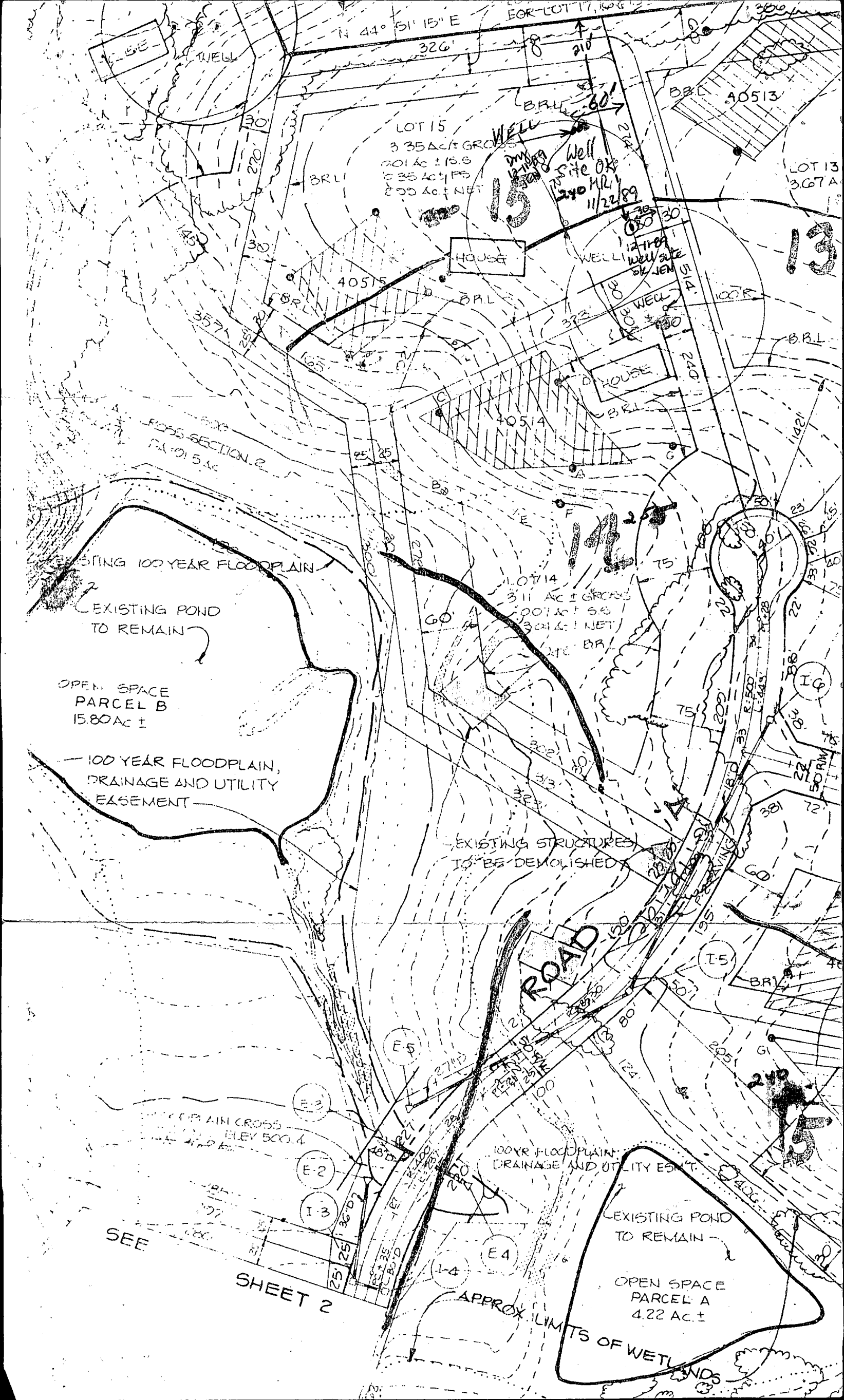
2100/80

REMARKS: perc field shifted closer to lot lines. Hole B appears to be in pipe system of lot 12.

TYPE OF SOIL: fairly uniform - orange clays 3-4'; orange/purple silty loam

TESTED BY: B Nijman ALSO PRESENT: Keith, Brian





N 44° 51' 15" E  
326'

FOR LOT 17, 18, 19

LOT 15  
3.35 AC ± GROSS  
2.01 AC ± FS  
2.35 AC ± FS  
8.00 AC ± NET

BRL 40513

LOT 13  
3.67 A

HOUSE

WELL

Well site OK  
1240 MR  
11/22/89

13

40515

BRL

WELL

Well site OK  
12118A  
OK JEN

WELL

WELL

D HOUSE

40514

BRL

CROSS-SECTION 2  
TA: 015.50

EXISTING 100 YEAR FLOODPLAIN

EXISTING POND  
TO REMAIN

OPEN SPACE  
PARCEL B  
15.80 AC ±

100 YEAR FLOODPLAIN,  
DRAINAGE AND UTILITY  
EASEMENT

LOT 14  
3.11 AC ± GROSS  
2.00 AC ± FS  
3.01 AC ± NET

EXISTING STRUCTURES  
TO BE DEMOLISHED

ROAD

FLOODPLAIN CROSS  
SECTION  
ELEV 500.4

100YR FLOODPLAIN  
DRAINAGE AND UTILITY ESMT.

EXISTING POND  
TO REMAIN

OPEN SPACE  
PARCEL A  
4.22 AC ±

SEE

SHEET 2

APPROX. LIMITS OF WETLANDS

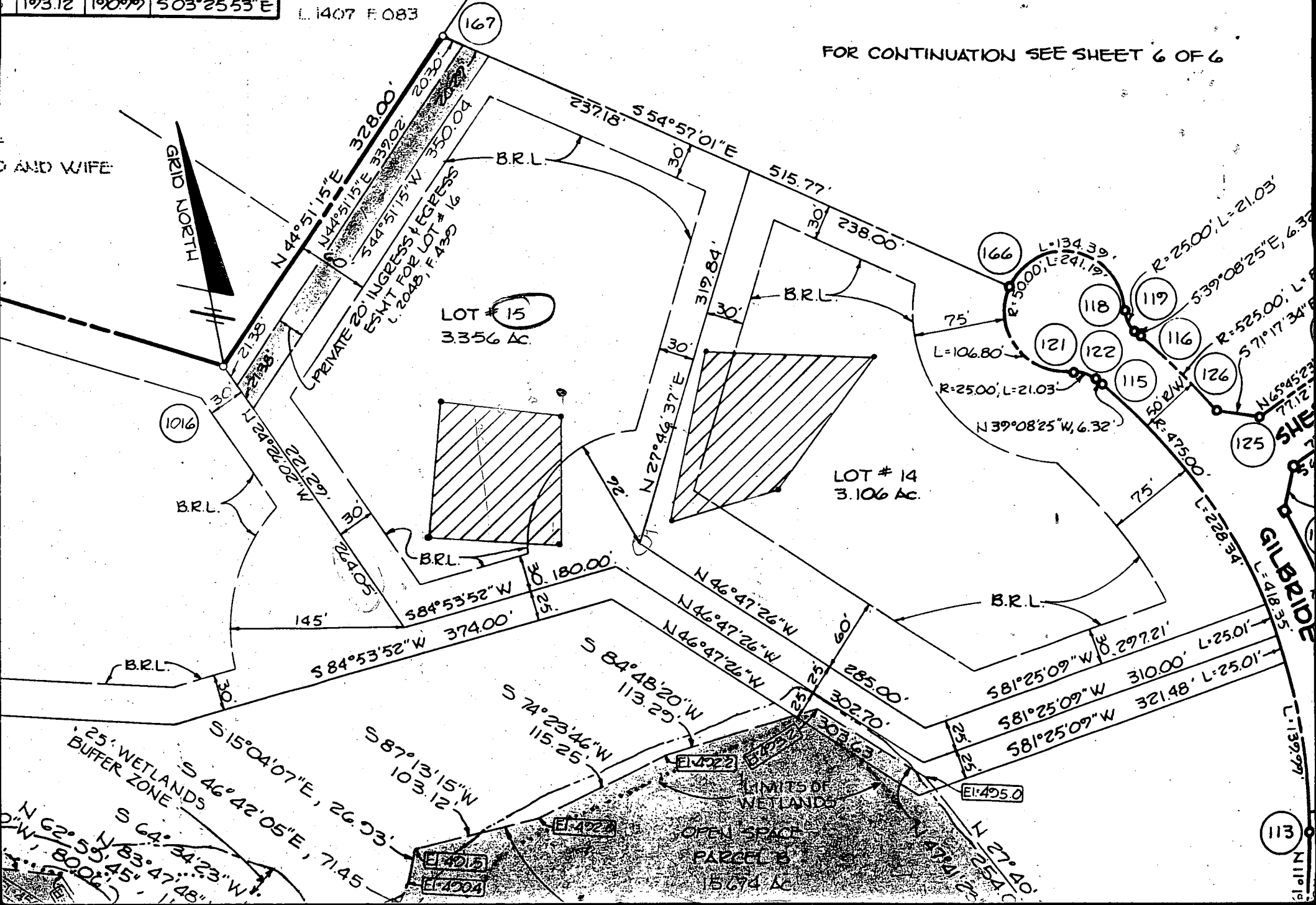
ARC	CHD.	L.C.B.
161.21'	157.79'	S 45°13'49"W
275.88'	272.71'	S 03°43'55"E
193.12'	190.99'	S 03°25'53"E

PROPERTY OF  
ANTHONY MAIONE  
L1407 F083

Hedgerow

FOR CONTINUATION SEE SHEET 6 OF 6

AND WIFE



B 1 **2045** SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

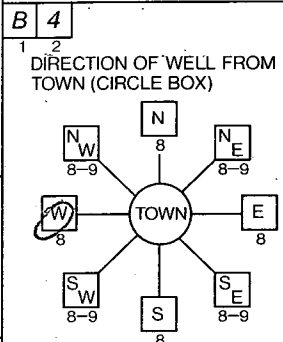
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
**HD-88-1120**  
 fill in this form completely

Date Received (APA) **111689**  
 OWNER INFORMATION  
**RUSH E. JAMES**  
 Last Name Owner First Name  
**12486 Lime KILN RD.**  
 Street or RFD  
**Elkton** **11020759**  
 Town State Zip

B 3 LOCATION OF WELL  
**HOWARD** COUNTY  
**HEADCREW** SUBDIVISION  
 SECTION **15** LOT **15**  
**CLARKSVILLE** NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **3** MI

DRILLER INFORMATION  
**Joseph L. Wayne** Driller's Name  
**238** License No. 80  
**Joseph L. Wayne Well Drilling** Firm Name  
**5512 KILNE RD. INT. AIN 21771** Address  
**Joseph L. Wayne** Signature **11/15/89** Date



**GILBRIDE Lane** NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  WEST  EAST  SOUTH   
**330** 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)  
 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  
**440515** COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ DATE ISSUED \_\_\_\_\_ INSERT S \_\_\_\_\_  
**120589** DATE ISSUED **Mark E. Reppin** CO SIGNATURE **6/5/90** EXP. DATE  
 NORTH GRID **507000** EAST GRID **0803000**

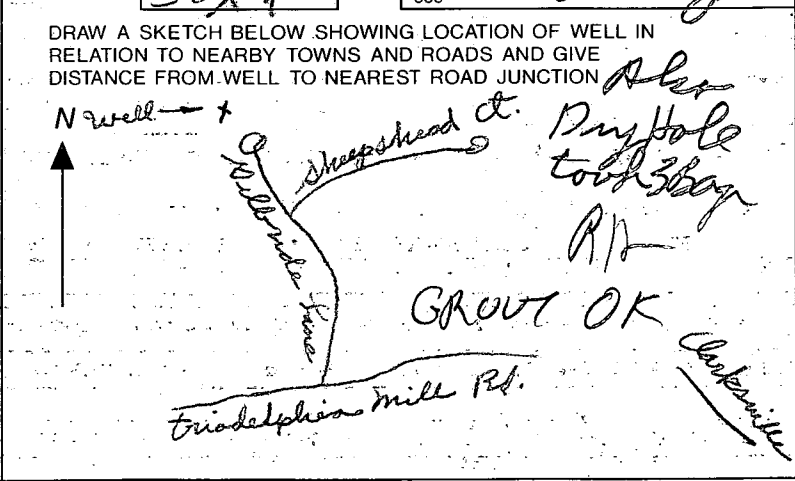
APPROXIMATE DEPTH OF WELL **300** FEET  
 APPROXIMATE DIAMETER OF WELL **6** INCH

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  
 E **80X3**  
 N **50X7**

12/14/89 9:30  
 well 32 FT casing  
 X 25 ft open hole  
 8 Bugs  
 arrived after  
 court informed  
 by Johnny

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)  
 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 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)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_  
 FORCE **MR** WRITE INITIALS IN BOX PERMIT No. **HD-88-1120**

SPECIAL CONDITIONS

C1 1257 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 PUNCHED IN COLS. 3-6 ON CARDS)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A40515

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well 365 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-1120

OWNER Pushe, last name Gilbride La James first name TOWN Clarksville SUBDIVISION HEDGE ROW SECTION LOT 15

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. Includes handwritten entries: SANDstone, GRAY mica Rock, and a note: 'Dry well 365' filled in with cement & drilling materials.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC NO. OF BAGS 8 NO. OF POUNDS 752 GALLONS OF WATER 48 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 28 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE S-T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 32

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

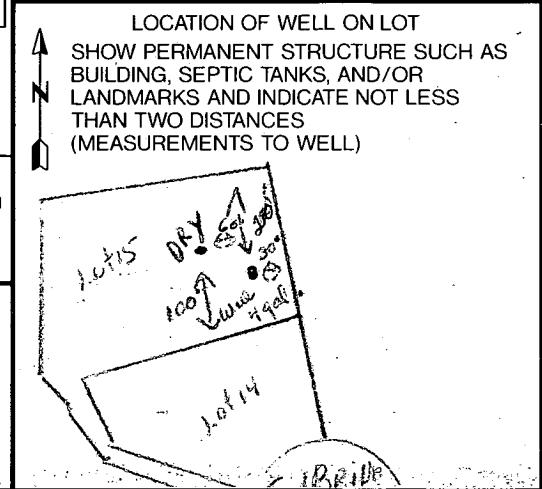
SCREEN RECORD screen type or open hole insert appropriate code below DEPTH (nearest ft.)

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

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

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 4 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 37 WHEN PUMPING 233 TYPE OF PUMP USED (for test) S submersible

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) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)



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

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, 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

5/7/91

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 # 47026  
Date 5/2/91

Name of Installer John M. Maske III

Telephone 247-6963

License Number #3189

Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber

Name of Property Owner G.Y.C. Builders Telephone 750-0800

Subdivision CLARKSVILLE 21209 Lot # 15 Well Tag # HO - 8 - 1120

Site Address 13681 Gil Bridge Lane

Pump

- 1. Type
  - a. Deep well jet X
  - b. Shallow well jet \_\_\_\_\_
  - c. Submersible \_\_\_\_\_
- 2. Make Goulds
- 3. Model # \_\_\_\_\_
- 4. Capacity \_\_\_\_\_ 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 1
- 2. RPM \_\_\_\_\_
- 3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220 X

Pitless Adapter

- 1. Make \_\_\_\_\_
- 2. Model # \_\_\_\_\_
- 3. Depth 42"

Tank

- 1. Capacity \_\_\_\_\_
- 2. Pressure relief valve? 75lb.

Piping

- 1. Type 1" BigBlue
- 2. Size 1"
- 3. NSF and/or BOCA Code approved \_\_\_\_\_
- 4. Depth of supply line 349'

Well data

- 1. Depth 369' ft.
- 2. Yield 5 GPM
- 3. Static water level 339' 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 Maske

Date: 5-1-91

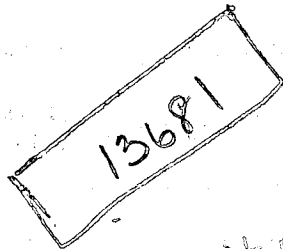
Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

5-9-91

WPI

Pitless adaptor <sup>OK</sup>  
Line depth - 4' below grade

OK to backfill exposed  
well area  
Di. Bugs



±97' (dirt pile between)

#0-88-1120