

03-314138

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48243

A 40591

DISTRICT 6th

DATE 9/6/92

DATE SYSTEM APPROVED 9/3/92

INSPECTOR M. Rifkin

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION Roscommon Estates LOT 15 ROAD 3219 Rosway Court

PROPERTY OWNER Randal and Holly Gaskin *Castelli*

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS Install: 2 - 1500 Gal. Top Seamed Septic Tanks in Series

NUMBER OF BEDROOMS 4 NOTE: Applicant's request to install initial trenches in middle portion of sewage easement has been accepted contingent upon agreement to install 2 tank system to facilitate future conversion to pumped system.
210 SQUARE FEET PER BEDROOM
LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - 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 distribution box 40 feet from the right-rear (289') lot line and 130 feet from right-front (461') lot line. Run trenches along contour toward right side of property.

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 6/05/92

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

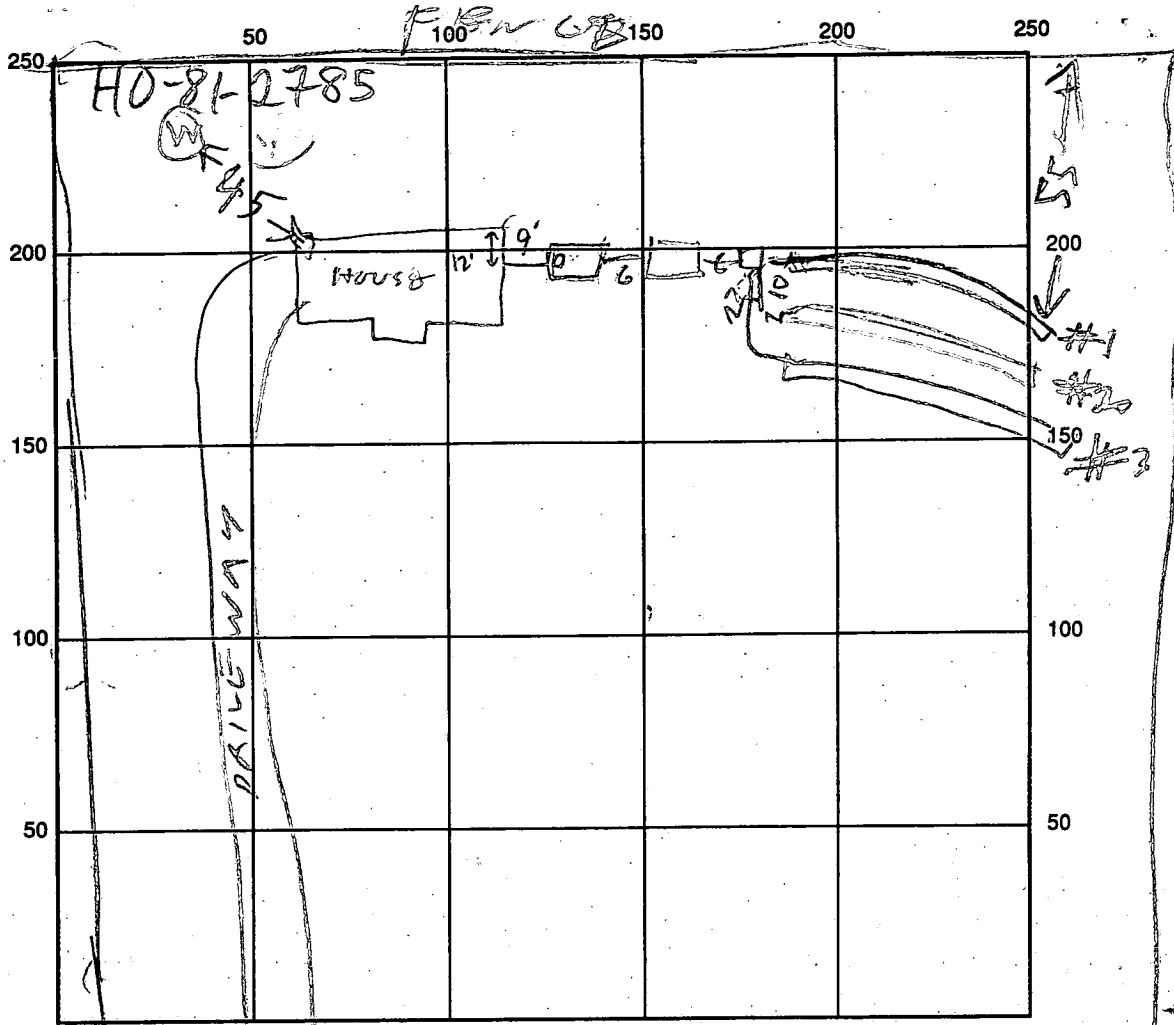
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A 40591

*6/25/92 pm
3/10
6/29/92 1:30*



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1520 / 1500 PUMP PIT CLEANOUTS 1/2 / 2 MANHOLES

DISTRIBUTION BOX LEVEL OK

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

EFFECTIVE GRAVEL DEPTH 12 FT. TOTAL LENGTH 92/95 FT. / 207

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 861 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 6/25/92 - TWO TOPSEAM TANKS & BOX INSTALLED & TRENCH DUG
ADD STONE TO TRENCH #1 DIG TRENCH #2 RB
6/29/92 OK TRENCH #3 & TANK CALL FOR
INSPECTION OF HOUSE HOOKUP R.H.
9/3/92 HOUSE CONN OK MR

DATE SYSTEM APPROVED 9/3/92 INSPECTOR M. Ripkin

APPLICATION

PERCOLATION TESTING

A 40591

P _____

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

VERIFY IF SWAIL IS IN THE
PERC AREA.
SA

DISTRICT 6th

DATE 11-3-87

TO: THE COUNTY HEALTH OFFICER
ELLCOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM Ranch 1 & Holly Castell

PROPERTY OWNER Barbara Jurgis S.F. CONTRACTORS

ADDRESS Christopher Rd, Cecilton, MD 21913 PHONE 275-2233

PROSPECTIVE BUYER Clayton Kemp

ADDRESS 8307 main St, Ellicott City PHONE 465-4920

PROPERTY LOCATION: Roscommon EST

SUBDIVISION _____ LOT NO. 15

ROAD AND DESCRIPTION ~~5100 Pfefferman Rd.~~ 3219 Rosway Ct.

TAX MAP 15 PARCEL # 170+177

SIZE OF LOT 3.0+ 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. Christine A. Richards
(SIGNATURE OF APPLICANT)

APPROVED BY Sally Abel FOR Standard Pumps DATE 6-7-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS SOILS OK, PLAT REQ'D. PLAT REQ'D CW DATE 1/27/88

REASONS FOR REJECTION OR HOLDING 3/16/88 Peric hold for plat showing all detail on
revised plat 3/16/88 1420 in all holes unsatisfactory low original holes
are probably groundwater penetrating at 9-11" SW BOG. PERMIT SIGNED
AND RETURNED 4/5/92

THIS IS NOT A PERMIT

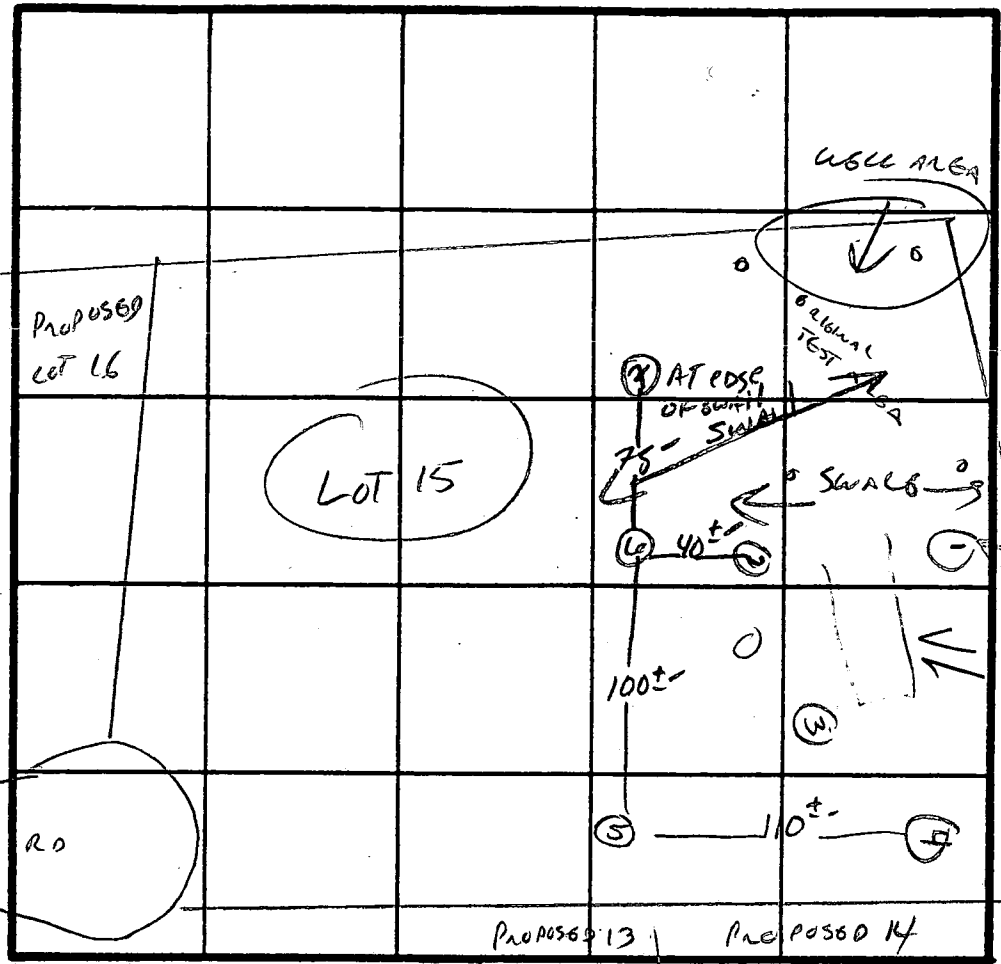
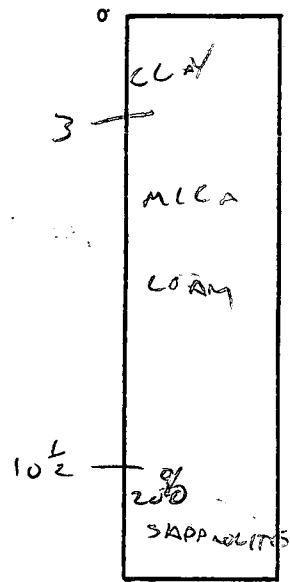
Serial # 45029-SFD

HD-216

A 40591
LOT 15

TOPO IN QUESTION

ALL HOLES
SOIL PROFILE



110-81-2001
Dwell House

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

HOLE 2
WAS MINOR
VEIN OF
FRACTURED
ROCK 7-10'

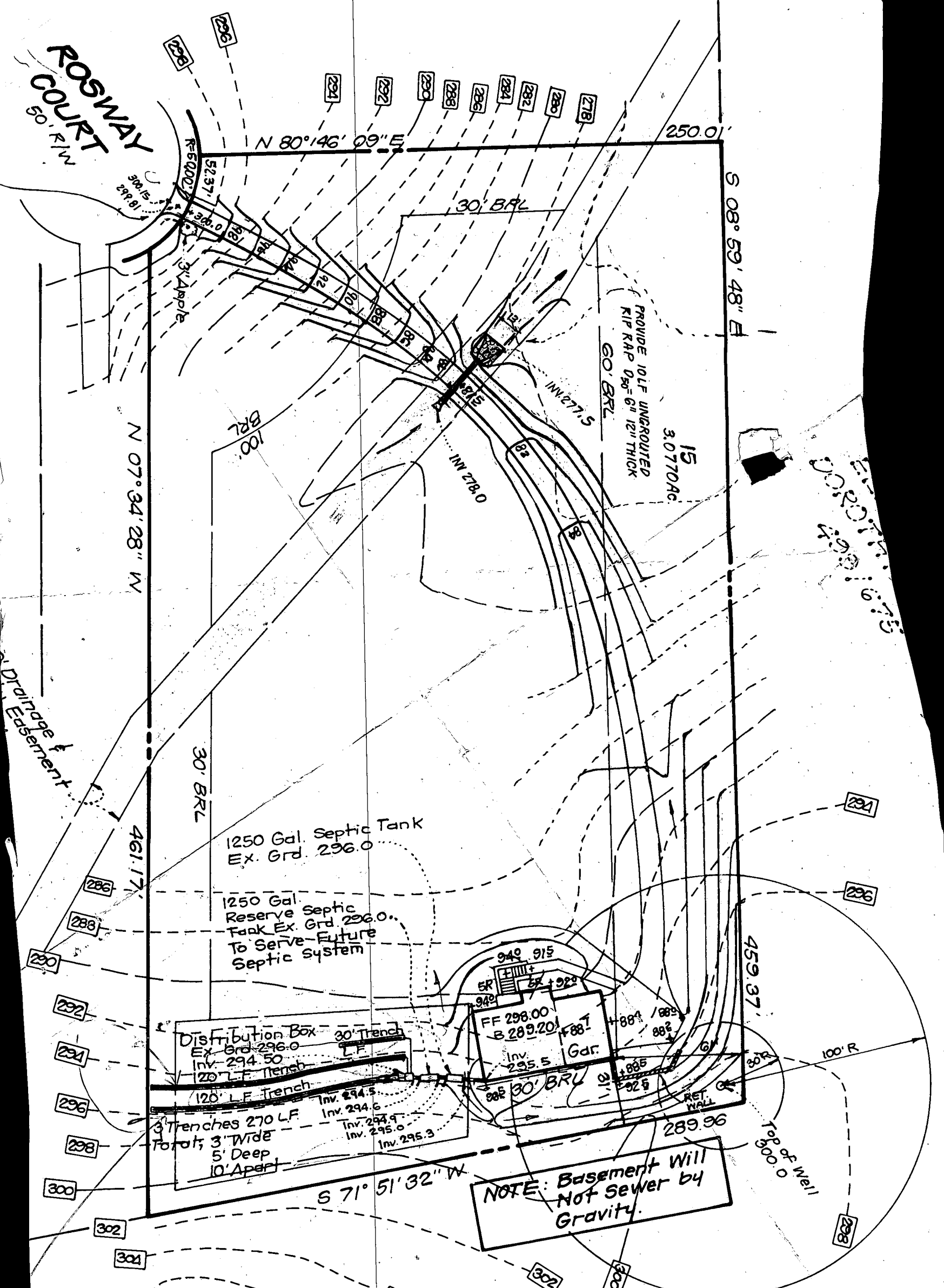
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/27/88	1	3	3:08	3:11	3:11	3:15	4 MIN
		7	3:08	3:11	3:12	3:16	4 MIN
		10 1/2	VLS OK				
1/27/88	2	3'	3:17	3:20	3:20	3:25	5 MIN
		7' 10"	SILT DOWN WITH DIAGONAL VEIN		UP TO 50% FRACTURED ROCK		
1/27/88	3	3	VLS OK				
		7	UP TO 28% SAPPAULITES 10 1/2-11'				
1/27/88	4	3	VLS OK				
		10 1/2	VLS OK				
3/16/88	5V	CLAY TO 5.5'	WATER ENTERING HOLE AT 8.0'				
	6V	CLAY TO 3.0'	WATER ENTERING HOLE AT 7.0'				
	7V	7.5' CLAY	WATER ENTERING AT 10'				

200' #
IN LOT 3'
BOTTOM 6'

KEEP APPROVED
SEPTIC AREA
ABOVE & RIGHT
OF HOLES # 2

REMARKS SEPTIC ON ADJACENT PROPERTY REQUIRES WELL SITE MEANS BACK/LEFT PART OF PROPERTY. ELEVATIONS + SWALS LIMIT HOUSE SITE.
TYPE OF SOIL MICA LOAM
TESTED BY CW [Signature] ALSO PRESENT KOTTGEMAN

ROSWAY COURT
50' R.M.



1250 Gal. Septic Tank
Ex. Grd. 296.0

1250 Gal. Reserve Septic Tank
Ex. Grd. 296.0
To Serve Future Septic System

Distribution Box
Ex. Grd. 296.0
Inv. 294.50

3 Trenches 270 LF
Total; 3' Wide
5' Deep
10' Apart

NOTE: Basement Will Not Sewer by Gravity.

296.0
294.5

ELEVATIONS OK FOR 2 TANK SYSTEM
SUBJECT TO ALLOW FUTURE CONVERSION TO PUMPED SEPTIC SYSTEM
6/5/22

NOTE: Septic System to be installed prior to Construction of house. Septic System to be installed prior to Grading Plan. Requires Careful Review.

Plot Reference No. 8259

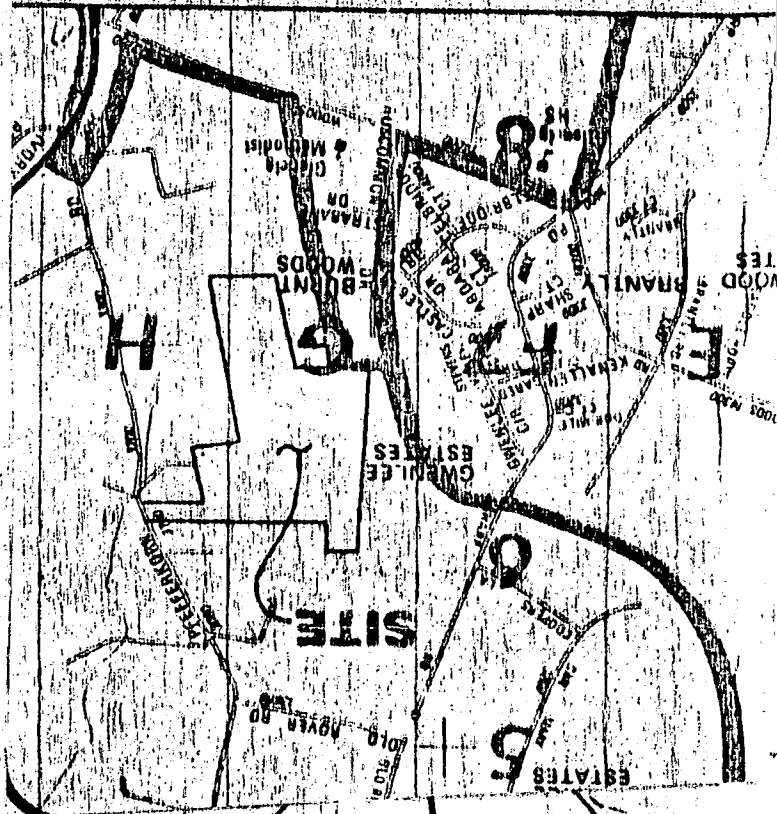
CLARK • FINEER
ENGINEERS

7135 MINSTREL WAY • COLUMBIA, MD

DESIGNED BY **UME**
DRAWN BY **BAL**
CHECKED

ROSWAY COURT

VICINITY MAP



Elmer M. Miles &
Dorothy M. Miles
499/675

S08°59'48"E

784.20'

304.83'

459.37'

15

134,034.12 sq. ft.
3.08 acres

N60°46'09"E
250.00'

30'

30'

L = 41.85'

L = 21.03'

L = 62.37'

82.38'

S07°34'28"E

226.74'

S07°34'28"E

461.17'

14

141,795.14 sq. ft.
3.26 gross acres
Pondhead 0.26 acres
3.00 NET ACRES

13

131,172.29 sq. ft.
3.01 acres

S81°05'13"

of PLS
level with
skid

S71°51'32"E

Registered Property
46-92

775.0

570

540

525

50'

43

N81°

B 1 7079 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

HO-81-2785 fill in this form completely

OWNER INFORMATION: Date Received (APA) 042880, Last Name: HAY, First Name: PROPERTY, Street: MAIN STREET, Town: ELLICOTT CITY, State: MD, Zip: 21043

DRILLER INFORMATION: Driller's Name: RALPH MAYNE, License No. 80: 273, Firm Name: RALPH MAYNE (WELL DRILLING), Address: 1170 KENNEDY CHASE RD. W. MT DIXIE, Signature: Ralph Mayne, Date: 4/10/88

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) [D], FARMING [F], INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER [I], PUBLIC OR PRIVATE WATER COMPANY [P], TEST, OBSERVATION, MONITORING [T]

APPROXIMATE DEPTH OF WELL: 150 FEET

APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

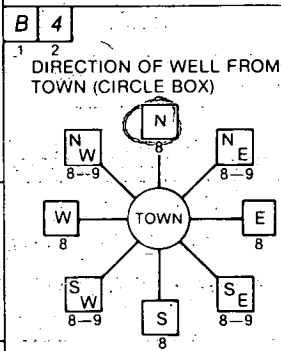
METHOD OF DRILLING (circle one): BORED (or Augered) [AIR-ROtary], JETTED, Jetted & DRIVEN, CABLE, REVerse-ROtary, DRive-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): THIS WELL WILL NOT REPLACE AN EXISTING WELL [N], THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED [Y], THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY [S], THIS WELL WILL DEEPEAN AN EXISTING WELL [D], PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):

Not to be filled in by driller (OEP USE ONLY): APPROP. PERMIT NUMBER: FORCE INITIALS IN BOX: PERMIT No. HO-81-2785

SPECIAL CONDITIONS: Mark Reich 465-5655

LOCATION OF WELL: HOWARD COUNTY, ROSCOMMON EST, SECTION 15, LOT 15, GLENELG, MILES FROM TOWN: 1 MI

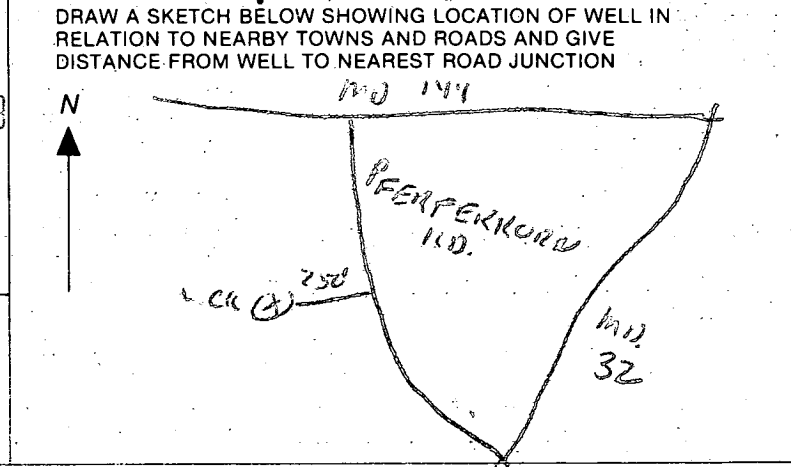


NEAR WHAT ROAD: PFERFERKORN RD., ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): WEST [W], EAST [E], DISTANCE FROM ROAD: 250 FT or MI

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: COUNTY NAME: HOWARD, COUNTY NO.: A-40591, STATE SIGNATURE, DATE ISSUED: 060888, CO SIGNATURE: Sidney Abel, EXP. DATE: 12-08-88, NORTH GRID: 538000, EAST GRID: 0801000

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 8041, N 5388

Great not witnessed, # bags of cement: 8, depth: 40, approx: 37, Above ground: 1', SB, 7-1-88



COUNTY

9-3-92
am asap

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 Replacement
Receipt # 48427
Date 8/11/92
Name of Installer Robert Hofstetter Telephone 531-3311
License Number 4450
Certified Well Pump Installer Well Driller Registered Plumber
Name of Property Owner RANDALL CASTELLI Telephone _____
Subdivision Roscommon Est Lot # 15 Well Tag # HO-81-2785
Site Address 3219 ROSWAY CT

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible
2. Make GOULDS
3. Model # _____
4. Capacity 7 GPM
5. Pump exceeds well capacity Yes _____ No
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 _____ Cable guards _____ Other

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

Pitless Adapter
1. Make _____
2. Model # _____
3. Depth _____

Tank
1. Capacity 100
2. Pressure relief valve? yes
P.A. OK 3'-3 1/2" B-G.
MR 9/3/92

Piping
1. Type plastic
2. Size 1"
3. NSF and/or BOCA Code approved
4. Depth of supply line 42"

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? _____

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: Robert Hofstetter

Date: 8-11-92

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