

5-30-95
40 12/00

PERMIT

04-350723 ^{5/30 P.C.O.} *CB*

SEWAGE DISPOSAL SYSTEM

P 50716 G

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 41272

DISTRICT 4th

HOWARD COUNTY HEALTH DEPARTMENT

DATE 5/31/95

BUREAU OF ENVIRONMENTAL HEALTH

~~XXX-461-9933~~ 313-2640

DATE SYSTEM APPROVED 5/30/95

INDEXED

INSPECTOR CBA

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Sharp Farms LOT 18 ROAD 3707 Appleby Court

PROPERTY OWNER Mr. and Mrs. Wayne Driver

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 135

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 275 feet up the right lot line (630') and 130 feet off that same lot line as seen when facing the lot from Appleby Court. Run trenches on contour toward the right lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *OK 3/23/95 DKS*

PLANS APPROVED BY Amy McMillen DATE 02/28/95

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

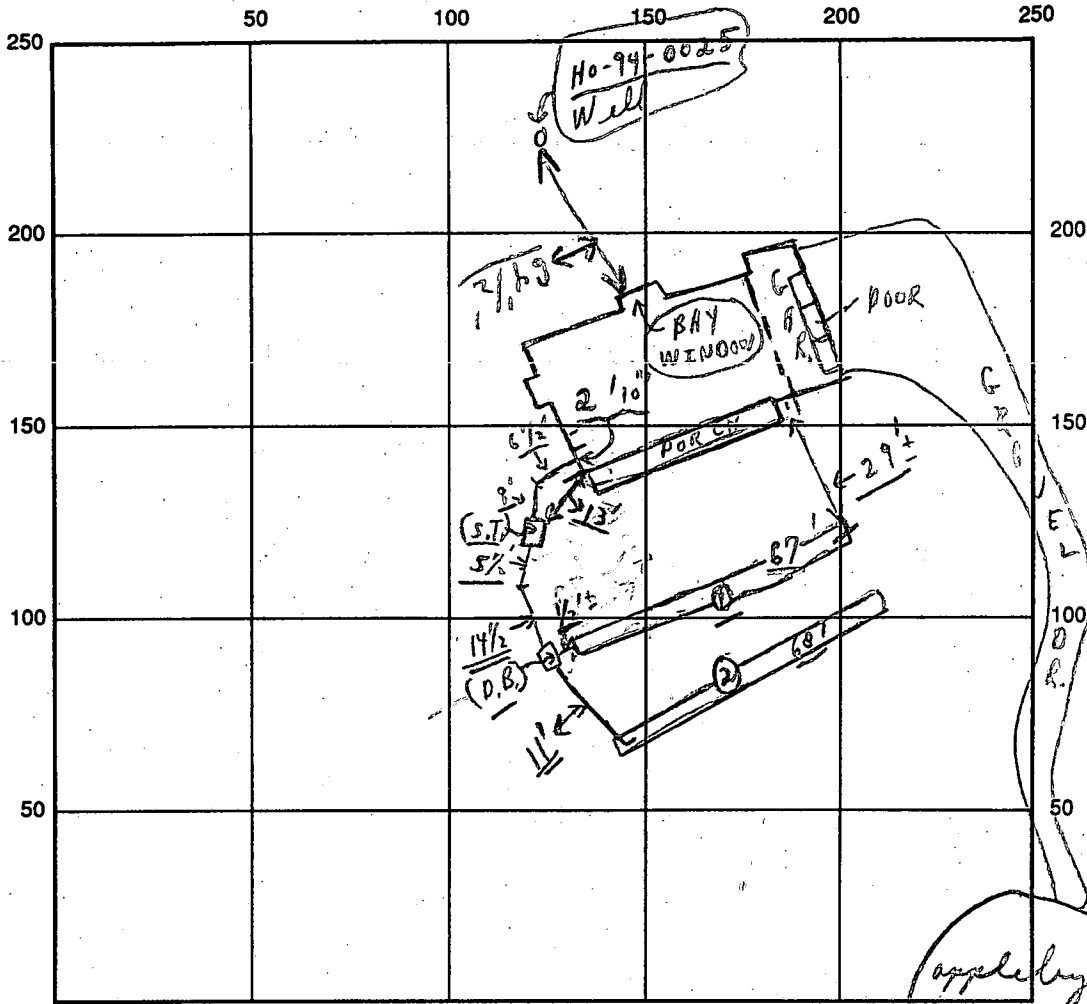
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED. *1-500 gall purpose tank*

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMIT SIGNED
AND RETURNED 6/14/95
Serial # 60194-bury

A
41272



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1000 gallon OK CLEANOUTS S.T. OK

DISTRIBUTION BOX LEVEL OK (Baffle in)

DRAIN FIELD/TITLE DEPTH 8 + FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. { 67'; 68' } TOTAL LENGTH (135) FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 540 + SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 540 + SQ. FT.

REMARKS: 5/30 (12.000) - Partial check out on trenches - ok to cover #1 trench only; and leave ends open on #2 trench; 5/30/95 Fend

Q (P.M.) → #2 trench ok + all done; CBS

5/30 No W.P. I. ← CBS

DATE SYSTEM APPROVED 5/30/95 INSPECTOR Charles Bryan V. Hester

APPLICATION

A 41272

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 3/24/88

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 CHARLES A. SHARP Mr. & Mrs. WAYNE DRIVER

ADDRESS 3779 SHARP ROAD, GLENWOOD, MD. 21738 PHONE 301-776-1740
489-4630

PROPERTY LOCATION:

SUBDIVISION SHARP FARMS, LOTS 1-16 LOT NO. 10 ^{# 2 18 on Final}

ROAD AND DESCRIPTION N.W. OF INTERSECTION BETWEEN SHARP ROAD
AND SHADY LANE (3707 Appleby Court)

SIZE OF LOT 3.40 Ac. + TYPE BLDG. S.F.D. - 4 BEDROOM
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT _____

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

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

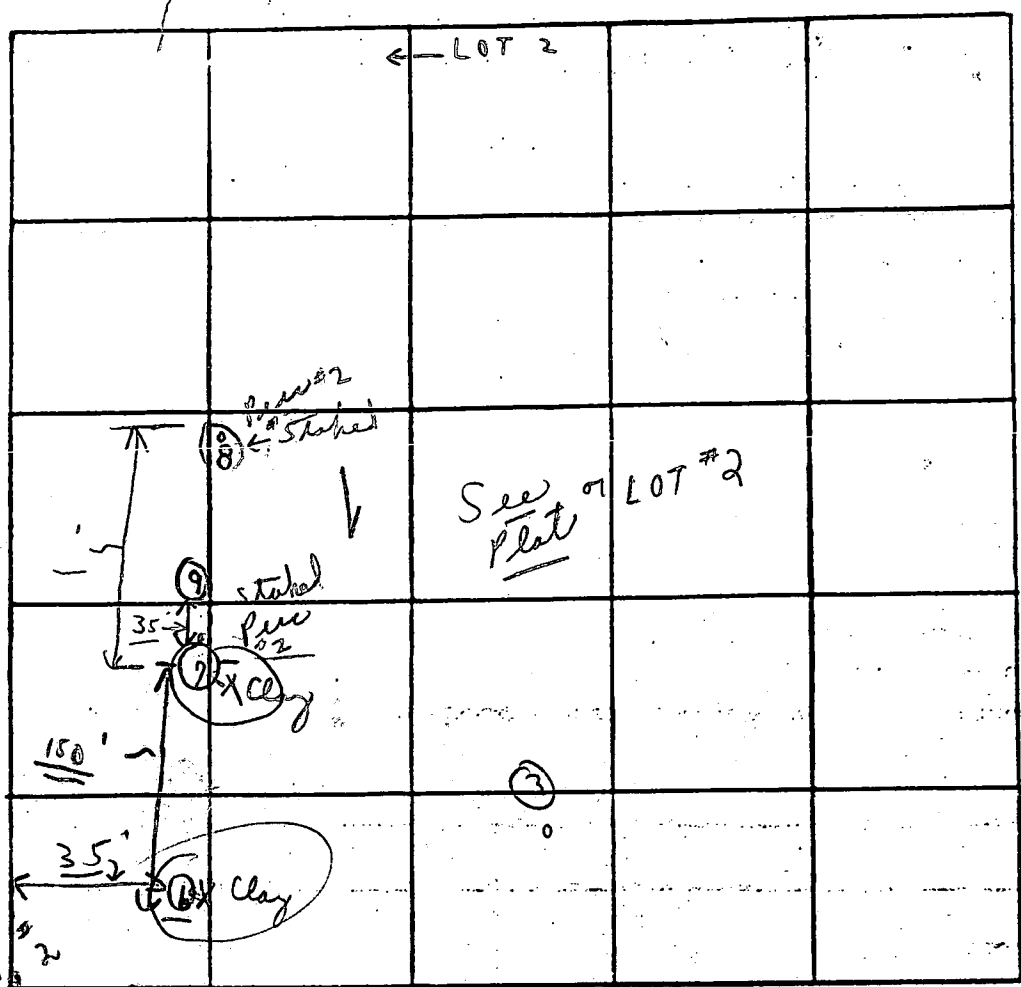
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

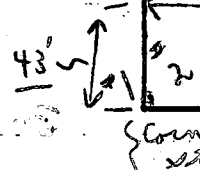
BLDG. PERMIT SIGNED
AND RETURNED 3/13/95
Serial # 58215
SFD-3Bim

THIS IS NOT A PERMIT

LOT #2
A4127a



LOT #3



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Silt Profiles
HOLES
X10; X11
TOO MUCH
CLAY
IN
HOLES
CLAY TO
LOAM
2 HOLES
8, 9
OK

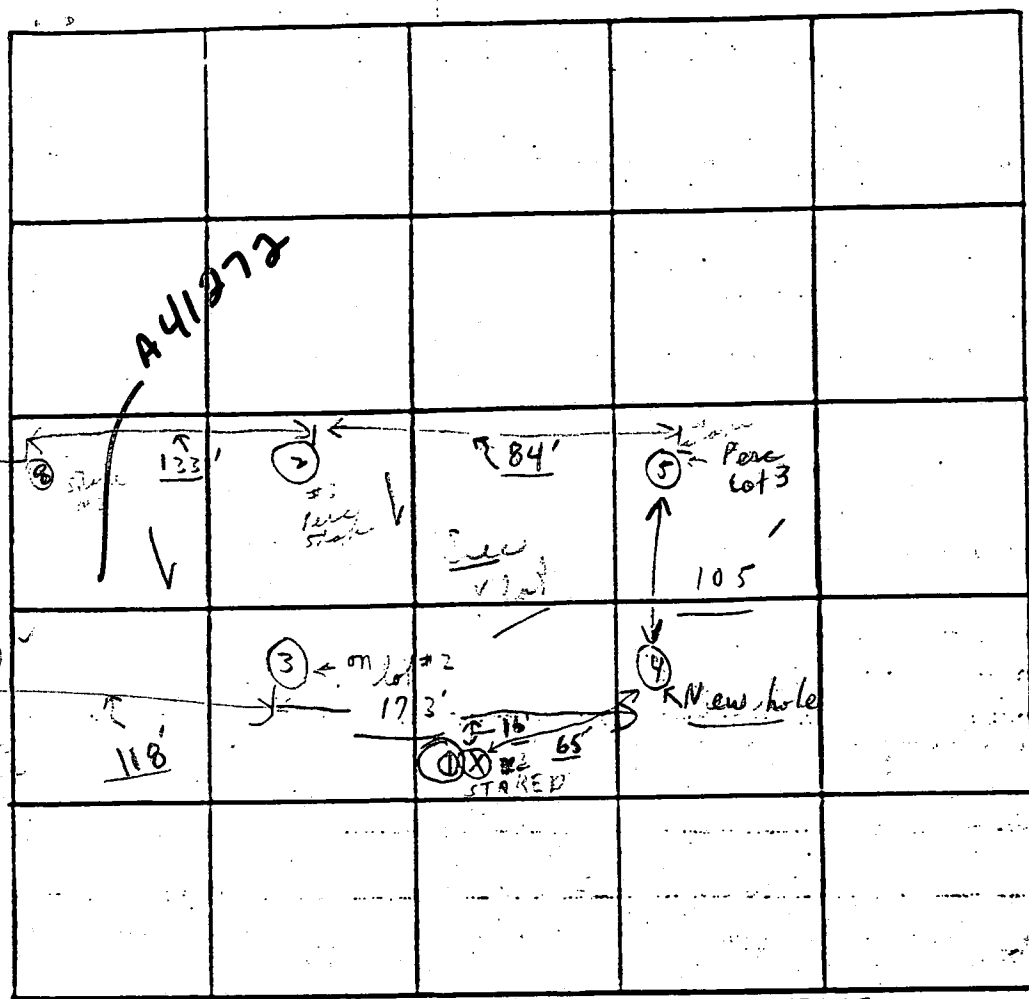
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/27/88	X 6A	X 5 1/2'	12:46	12:	12:16	No perc 12:	X
	X 6B	X 11 1/2'			Clay to bottom		X
	X 7A	X 6'	12:56	1:	(1:27 3/4 perc)		X
	X 7B	15"			Clay in hole		X
	8A	4'	2:06	2:09	2:09	2:16	7min
	8B	12'			Loam below dep!		
	9A	5 1/2"	2:03	2:07	2:07	2:14	7min
	9B	14'			(LOAM)		

REMARKS: NOTE: LOT #2 AND #3 PERC TESTS OVER LOT LINES
 TYPE OF SOIL: Perc. Tests in open; Most tests per stakes - Hold for certified holes.
 TESTED BY: C. Bd
 ALSO PRESENT: WOODY, SKIPPY, C. SHARP

LOT #3
A41273

NOTE
LOT #2
LOT 3
Piers

OVER
LOT LINES



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Soil profile
Top soil
+ clay
TO
LOAM
IN
HOLES
② ③ ④
⑤ ⑧ ⑨
Same
for
Lots
2+3

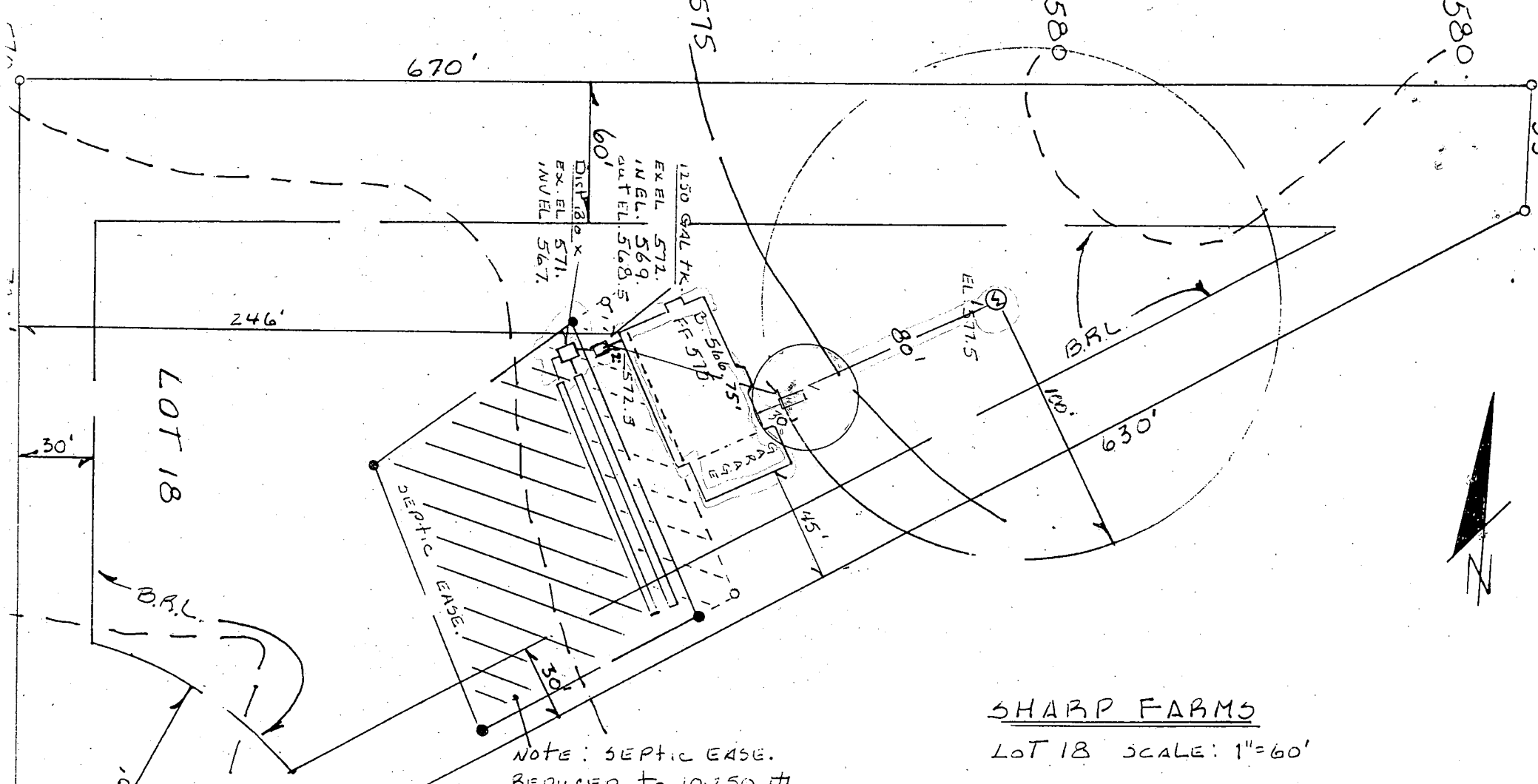
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/27/22	1A						
	X 1B	staked	X	X	8'	ROCK/GR	X
	2A	5'	12:06	12:08	12:08	12:12	4m
	per stake 2B	8'	12:07	12:08	12:08	12:11	3m
	3A	4'	12:15	12:16	12:16	12:20	4m
	per stake 3B	12'	12:20	similar to ②	Visual	loam	
	4A	5'	12:22	12:25	12:25	12:29	4m
	New 4B	13'	similar to ②	Visual	loam		
	none 5A	clay than	loam				
	(Lot 3) 5B	12 1/2'	Visual				

REMARKS: See LOT 3 Tests in own hole staked for ②, ③

TYPE OF SOIL: Hold for certified holes

TESTED BY: [Signature]

ALSO PRESENT: { WOODY, SKIPPY }



NOTE: SEPTIC EASE.
REDUCED TO 101250 #

SHARP FARMS
LOT 18 SCALE: 1"=60'

6/14/95 OK
R.P. # 60194
OK as shown
OK as shown
per 5/30/95 checked.
APPLEBY COURT
OK OK

Since 1960



Gordon F. Walker.
Building and Remodeling

12620 Hall Shop Road
Fulton, MD 20759

(410) 531-2306

SER: 58215

STONE FOUND

794.11'

612.43'

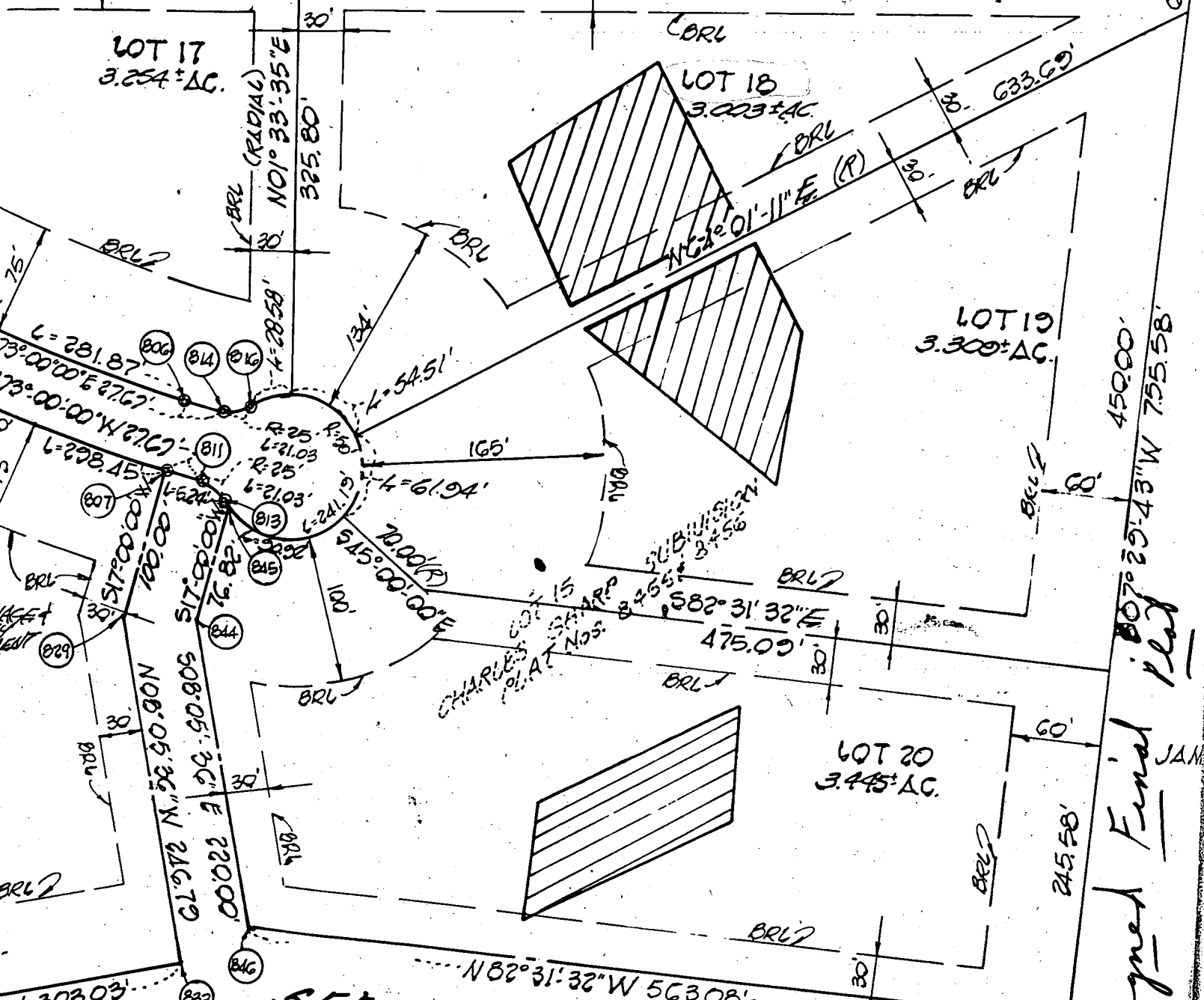
60.00'

LOT 17
3.254± AC.

LOT 18
3.023± AC

LOT 19
3.309± AC.

LOT 20
3.445± AC.



Signed Final Plat
JAN

SEE SHEET 3 OF 4

N 522,000
E 798,000

OWN

NOTE:

LINE W

66.58'

W 303.03'

BRL

BRL

BRL

BRL

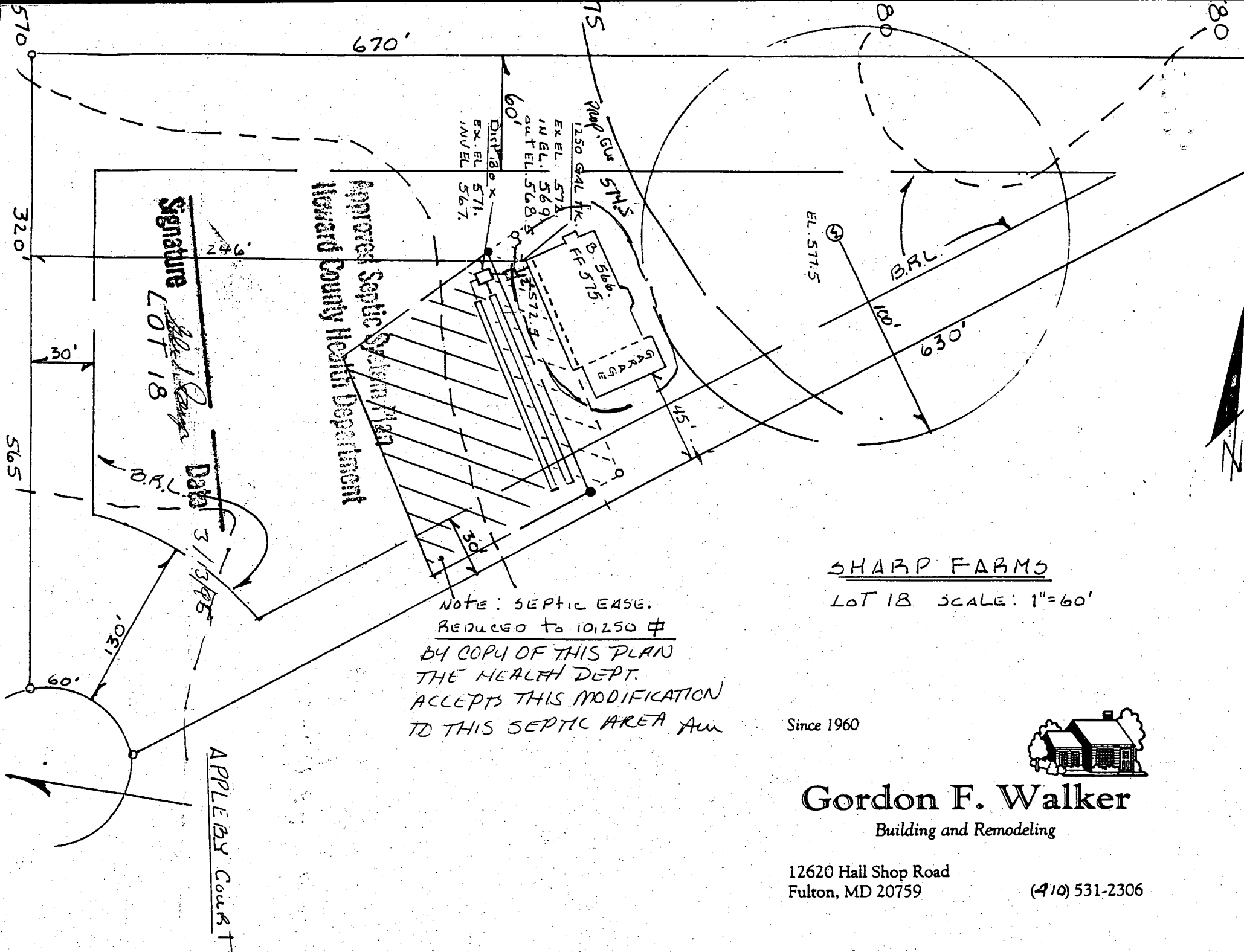
BRL

BRL

BRL

BRL

BRL



NOTE: SEPTIC EASE.
 REDUCED TO 10.250' ϕ
 BY COPY OF THIS PLAN
 THE HEALTH DEPT.
 ACCEPTS THIS MODIFICATION
 TO THIS SEPTIC AREA AND

SHARP FARMS
 LOT 18 SCALE: 1"=60'

Since 1960



Gordon F. Walker
 Building and Remodeling

12620 Hall Shop Road
 Fulton, MD 20759

(410) 531-2306

C1 8760

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A 41272

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

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

Grid for ST/CO USE ONLY DATE RECEIVED

Grid for DATE WELL COMPLETED: 08/15/94

Grid for Depth of Well: 2265

Grid for PERMIT NO.: 40-94-0025

OWNER: Sharp, Charles; STREET OR RFD: Appleby Ct.; TOWN: Glenelig; SUBDIVISION: Sharp Farms; SECTION: ; LOT: 18

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 entries for SAND and Gneiss Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle appropriate box) YES (Y) NO (N); TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC); NO. OF BAGS: 16; NO. OF POUNDS: 1504

DEPTH OF GROUT SEAL (to nearest foot) from 0 to 65 ft.

CASING RECORD: casing types insert appropriate code below; ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER)

MAIN CASING TYPE: ST; Nominal diameter top (main) casing (nearest inch): 6; Total depth of main casing (nearest foot): 84

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

SCREEN RECORD: screen type or open hole; insert appropriate code below; ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER)

Table for SCREEN RECORD showing depth (nearest ft.) for each screen.

CIRCLE APPROPRIATE LETTER 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...

DRILLERS IDENT. NO. 34

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (Sign. of driller or journeyman responsible for sitework if different from permittee)

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.), W Q (74, 75, 76)

TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 3; PUMPING RATE (gal. per min. to nearest gal.) 4.6; METHOD USED TO MEASURE PUMPING RATE: Bucket; WATER LEVEL (distance from land surface) BEFORE PUMPING 45; WHEN PUMPING 193; TYPE OF PUMP USED (for test): S (submersible)

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) 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: S; CAPACITY: GALLONS PER MINUTE (to nearest gallon); PUMP HORSE POWER; PUMP COLUMN LENGTH (nearest ft.); CASING HEIGHT (circle appropriate box and enter casing height) above; LAND SURFACE below 2 (nearest foot)

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)

See Attached Well location

B 1 **8339** SEQUENCE NO. (DP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

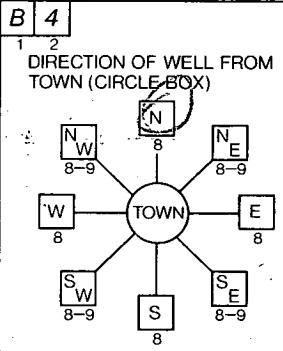
STATE OF MARYLAND
 APPLICATION FOR PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
40-94-0025
 fill in this form completely

Date Received (APA) **020799**
 OWNER INFORMATION
SHARP **CHARLES**
 Last Name Owner First Name
3779 SHARP RD
 Street or RFD
GLENNWOOD **MD21738**
 Town State Zip

B 3 LOCATION OF WELL
HOWARD COUNTY
SHARP FARMS SUBDIVISION
 SECTION **18** LOT **18**
GLENELG NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **6** MI

DRILLER INFORMATION
Joseph L. MAYNE License No. **24**
Joseph L. Mayne Well Drilling Firm Name
5512 Ridge Rd. Mt. Airy 21771 Address
Joseph L. Mayne Signature **1/7/94** Date



Appleby Ct. NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH
 WEST EAST
 SOUTH
425 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) **524**

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
A41272 COUNTY NO.
 STATE SIGNATURE _____ INSERT S
 DATE ISSUED **021099** **Cra Wilton** 2/9/95
 CO SIGNATURE EXP. DATE
 NORTH GRID **522000** EAST GRID **0798000**

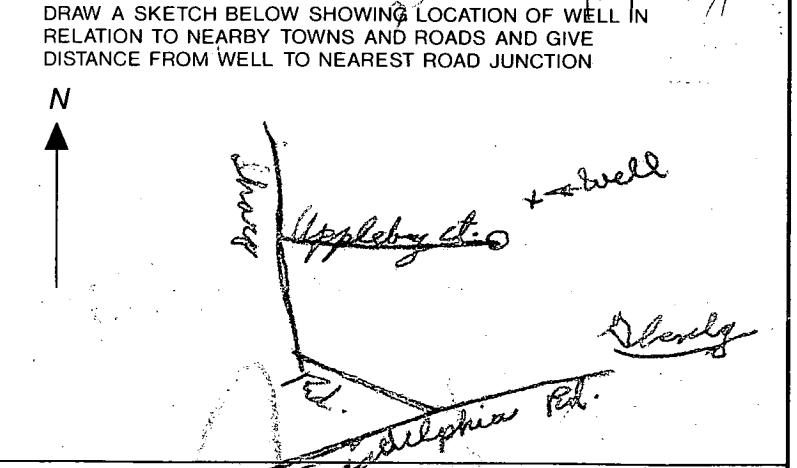
APPROXIMATE DEPTH OF WELL **224** FEET

APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary Drive-POINT

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 **7908**
 N **5202**
 000 000
 LOC 4 BROUT OK
 84' CASING
 65' OPEN
 16 BAGS
 DKS/MR
 2/15/94

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 **CU** WRITE INITIALS IN BOX PERMIT No. **40-94-0025**

SPECIAL CONDITIONS