

5-22-96 12 PM  
+ 3 PM  
6/5/96  
1100 House com. (postponed)  
6/25/96  
10:00 House com.

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56545B

A 41965

DISTRICT 4th

DATE 4-8-96

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED 6/25/96

10 #

INSPECTOR M. Ripkin

INDEXED

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 875-4197

SUBDIVISION Choi Property LOT 2 ROAD 3369 Danmark Drive

PROPERTY OWNER Jacobsen Homes, LLC / Boyd

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 144

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 135 feet up the right lot line and 170 feet off this same lot line as seen when facing the lot from Danmark Drive. Run trenches on contour.

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 Donna K. Soe DATE 07/07/95

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

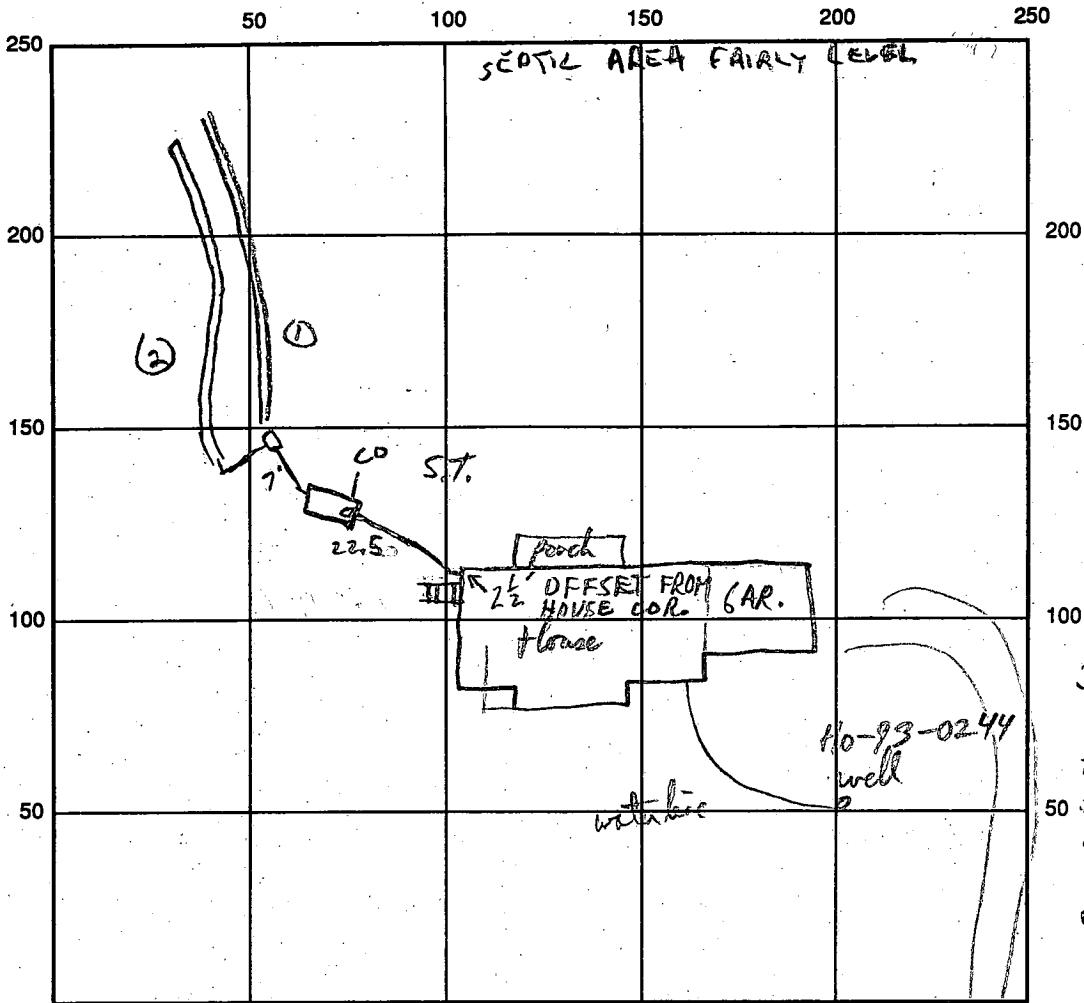
PERMIT VOID AFTER TWO YEARS

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.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A  
41965



5/22/96  
 WRE OK  
 TO COVER LINE  
 = WIRE CASING  
 RECD TO SEAL  
 CAP. ~~ALL~~  
 NO SLEEVE THRU  
 WALL.

SEPTIC TANK LEVEL OK CLEANOUTS on tank - ok  
 DISTRIBUTION BOX LEVEL OK - NO BARE CE OR CEMENT AS PER 5/22 PM - OK  
 DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.  
 EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH  $\frac{12}{72} / 93$  FT. = 165  
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA \_\_\_\_\_ SQ. FT.  
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.  
 ABSORBENT AREA — SQ. FT.

REMARKS: ST. set - nothing done 5/21/96 5/22/96 TANK OK TO COVER  
NEEDS HOUSE CONNECTION, PM - TRENCH 3 COMPLETE EXCEPT LAST  
30' (READY TO STONE) OK TO COVER SYSTEM AS COMPLETED EXCEPT  
HOUSE CONN. ~~ok~~

6/25/96 HOUSE CONN OK TO COVER MR

DATE SYSTEM APPROVED 6/25/96 INSPECTOR M. Ripkin

# APPLICATION

PERCOLATION TESTING

A 41965

P \_\_\_\_\_

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

DISTRICT 4TH

DATE March 10, 1988

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 ~~Song Ho Company, Inc.~~ JACOBSEN HOMES, LLC

ADDRESS 8106 Cooper Street, Alexandria, Va. 22309 PHONE (703) 239-7541

PROSPECTIVE BUYER Unknown

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

PROPERTY LOCATION:

SUBDIVISION Choi Property LOT NO. 2

ROAD AND DESCRIPTION ~~North side of Burkswood Rd.~~ 1890' East of Hobbs Road.  
(3369 DANMARK DRIVE)

TAX MAP 14 PARCEL # 106

SIZE OF LOT 3.00 Acre Minimum

**BLDG. PERMIT SIGNED**  
**AND RETURNED 3-15-96**  
Serial # 63769  
S.F.D. - 4 BRMS  
(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.

Dennis M. Bush  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

HD-216

# THIS IS NOT A PERMIT



# APPLICATION

PERCOLATION TESTING

A 41965

P \_\_\_\_\_

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

DISTRICT 4TH

DATE March 10, 1988

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 Sang Ho Company, Inc.

ADDRESS 8100 Cooper Street, Alexandria, Va. 22309 PHONE (703) 239-7641

PROSPECTIVE BUYER Unknown

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

PROPERTY LOCATION:

SUBDIVISION Choi Property LOT NO. 2

ROAD AND DESCRIPTION North side of Barkswood Rd., 1890+ East of Hedges Road.

TAX MAP 14 PARCEL # 106

SIZE OF LOT 3.00 Acre Minimum TYPE BLDG S.F.O.  
(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.

Dennis M. Ryals  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING 9/1/88 Perc OK Hold for Plat A/H

HD-216

# THIS IS NOT A PERMIT

SOIL PROFILE

0


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

C1 **0219** SEQUENCE NO. (MDE USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

**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 **A41965**

ST/CO USE ONLY DATE Received: **03/14/96** DATE WELL COMPLETED: **02/12/96** Depth of Well: **280** (TO NEAREST FOOT)  
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **H0-93-0244**

OWNER: **Jacobson Homes** (last name) **Danmark Drive** (first name) TOWN: **Glenwood**  
 STREET OR RFD: SUBDIVISION: **Choi Property** SECTION: LOT: **2**

**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
	FROM	TO	
Sand	0	66	
Gray Mica Rock	66	280	✓

**GROUTING RECORD** (yes/no) **(Y/N)**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box)  
 TYPE OF GROUTING MATERIAL (Circle one)  
 CEMENT **(CM)** BENTONITE CLAY **(BC)**  
 NO. OF BAGS: **25** NO. OF POUNDS: **2350**  
 GALLONS OF WATER: **150**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **63** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**(S)** STEEL **(C)** CONCRETE  
**(P)** PLASTIC **(O)** OTHER

MAIN CASING TYPE: **(S)** Nominal diameter top (main) casing (nearest inch): **6** Total depth of main casing (nearest foot): **70**

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

**SCREEN RECORD**  
 screen type or open hole insert appropriate code below  
**(S)** STEEL **(BR)** BRASS BRONZE **(HO)** OPEN HOLE  
**(PL)** PLASTIC **(OT)** OTHER

NUMBER OF UNSUCCESSFUL WELLS: **0**  
 WELL HYDROFRACTURED: **(Y)** **(N)**

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.

TYPE: MWD/MSD/MGD  
 DRILLERS LIC. NO. **24**

DRILLERS SIGNATURE: *[Signature]*  
 (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **24**  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

**C2**

E A C H S C R E E N	DEPTH (nearest ft.)	
	1	2
1	<b>H0</b>	<b>68</b> <b>280</b>
2		
3		

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

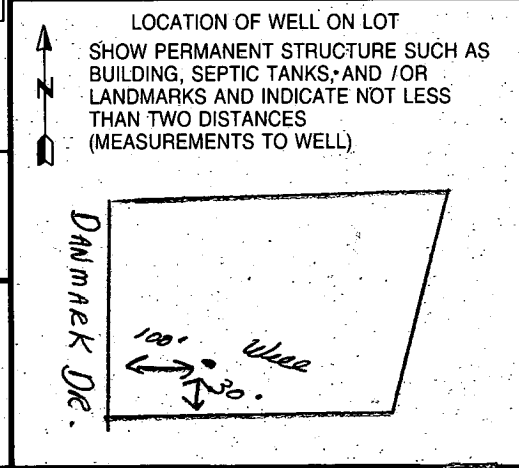
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

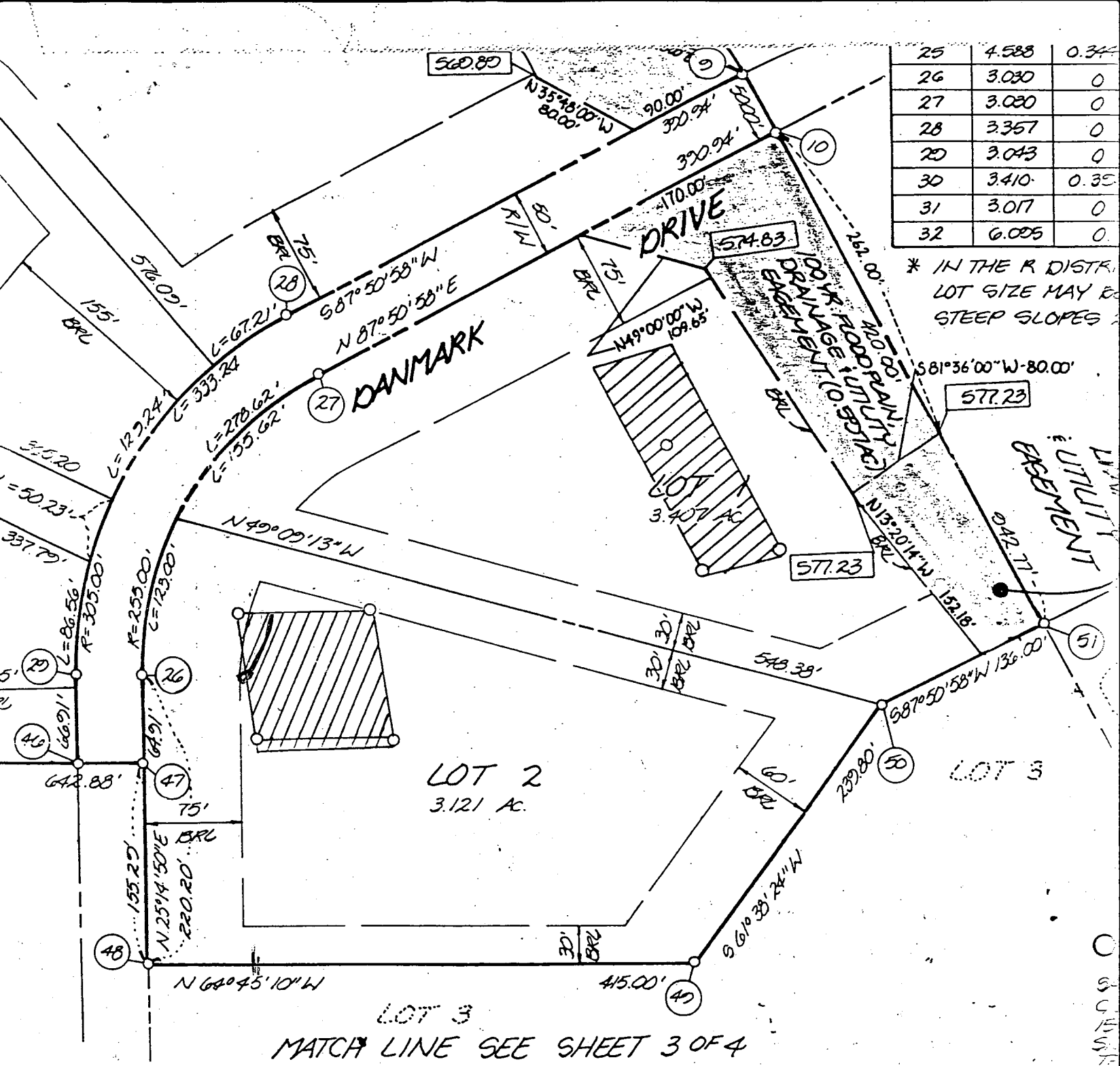
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) W Q  
 70 \_\_\_\_\_ 72 \_\_\_\_\_ 74 75 76  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3**

**PUMPING TEST**  
 HOURS PUMPED (nearest hour): **3**  
 PUMPING RATE (gal. per min.): **007.5**  
 METHOD USED TO MEASURE PUMPING RATE: **Bucket**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING: **47** ft.  
 WHEN PUMPING: **139** ft.  
 TYPE OF PUMP USED (for test)  
**(A)** air **(P)** piston **(T)** turbine  
**(C)** centrifugal **(R)** rotary **(O)** other (describe below)  
**(J)** jet **(S)** submersible

**PUMP INSTALLED**  
 DRILLER WILL INSTALL PUMP YES **(NO)**  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29: **(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)





25	4.588	0.34
26	3.030	0
27	3.020	0
28	3.357	0
29	3.043	0
30	3.410	0.35
31	3.017	0
32	6.005	0

\* IN THE R DISTRICT LOT SIZE MAY VARY ON STEEP SLOPES

## SURVEYOR'S CERTIFICATE

I hereby certify that the final plat shown hereon is correct, that it is a SUBDIVISION of ALL of the lands conveyed by STANLEY E SULLIVAN AND MARY A. SULLIVAN, HIS WIFE, TO THE S.O. CORPORATION, INC. by deed dated MAY 3, 1988 and recorded in the Land Records of Howard County, Maryland in Liber 1345 at Folio 123 and that all monuments are in place as shown in accordance with the Annotated Code of Maryland, as amended.

William G. Hartel      12-9-88  
 William G Hartel, Professional Land Surveyor, MD. No. 9436      Date

RECORDED AS PLAT 1063A 1063B

CHC

TAX MAP - 14  
 TAX MAP PARCEL NO. - 106  
 EX ZONING - R