

5-10-95
pm 6/0
5/11/95
H. M. Slader

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-355210

5/11/95
Needs
House
connection
ONLY

5/10 (2) P.C.O.
5/11 (2) P.C.O.
P 50623
A 41986

DISTRICT 4th

DATE 4-4-95

DATE SYSTEM APPROVED 5/17/95

INSPECTOR G. SAVAGE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

313-2640

INDEXED

Paul Schissler/South Carroll Backhoe IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION Choi Property LOT 23 ROAD 3316 Danmark Drive

PROPERTY OWNER Sang Oh and Company, Inc.

ADDRESS

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 225

Screen pack
BLDG. PERMIT SIGNED
AND RETURNED 8-9-95
Serial # 61226

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 210 feet up the right lot line (520.00') and 70 feet off that same lot line as seen when facing the lot from Danmark Drive. Run trenches on contour in both directions.

NOTES - MAINTAIN 100 FEET SEPARATION DISTANCE BETWEEN WELL AND ANY PART OF SEPTIC SYSTEM. No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 2/24/95 DKS

PLANS APPROVED BY Amy McMillen DATE 02/14/95

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.

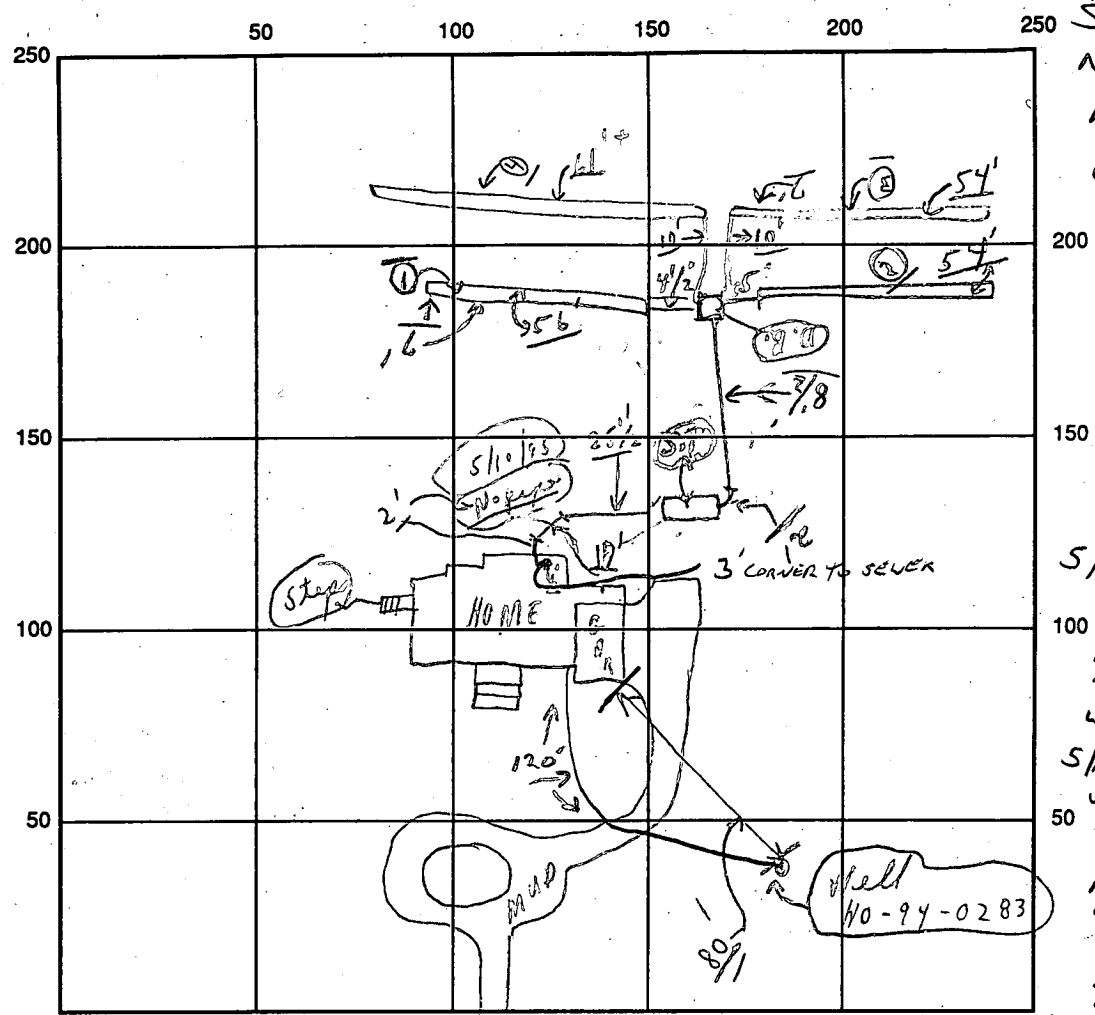
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

Add-on Deck
BLDG. PERMIT SIGNED
AND RETURNED 3-28-96
Serial # 64191

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

A 41986

5/16/95
SEPTIC
NEEDS
HOUSE
CONNECTION



W.P.I.
5/15/95
TRENCH DUG
HOWEVER WELL,
NOTHING INSTALLED YET.
WELL LINE 4.5 FEET
5/16/95
WELL LINE IN
SLEED + GROUDED
THRU WALL.
PIELESS ADAPTER
OK, 2 CLAMPS
OK TO COVER LINES.
NEED 2 PIECE 4" ID
WIRE HOOK UP.

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

← Denmark Dr. S.T. →

SEPTIC TANK LEVEL OK CLEANOUTS S.T. OK

DISTRIBUTION BOX LEVEL OK (Baffles in)

DRAIN FIELD/TITLE DEPTH 7 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4+ FT. { 0.56' ; 0.54' = 1.10' } = (225')

NUMBER OF TRENCHES 4 { 0.54' ; 0.61' = 1.15' } ONE SIDEWALL/BOTTOM AREA 900 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 900 SQ. FT.

REMARKS: (P.M.) 5/10/95 Partial - Just setting S. tank; No house connection. Partial - covered (No trenches dug at this stop); CBS (P.M.) 5/10/95 Later partial - ok to cover 3'± from house to septic tank - ok. CBS 5/11/95 3 trenches - ok for gravel & ok to cover from S.T. to D.Box + #2 Trench job; CBS 5/11/95 (NOON) ok to cover as finished (5/10 W.P.I. - None CBS) 5/11/95 No W.P.I. - NOT IN A.M. CBS 5/17/95 House connection.

DATE SYSTEM APPROVED 5/17/95 INSPECTOR [Signature]

last 2 trenches - material on site; partial - note → needs house connection; CBS

APPLICATION

PERCOLATION TESTING

A 41986

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) 239-7541

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Choi Property LOT NO. 23

ROAD AND DESCRIPTION North side of Burrowswood Rd., 1890' East of Hobbs 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. Bush
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

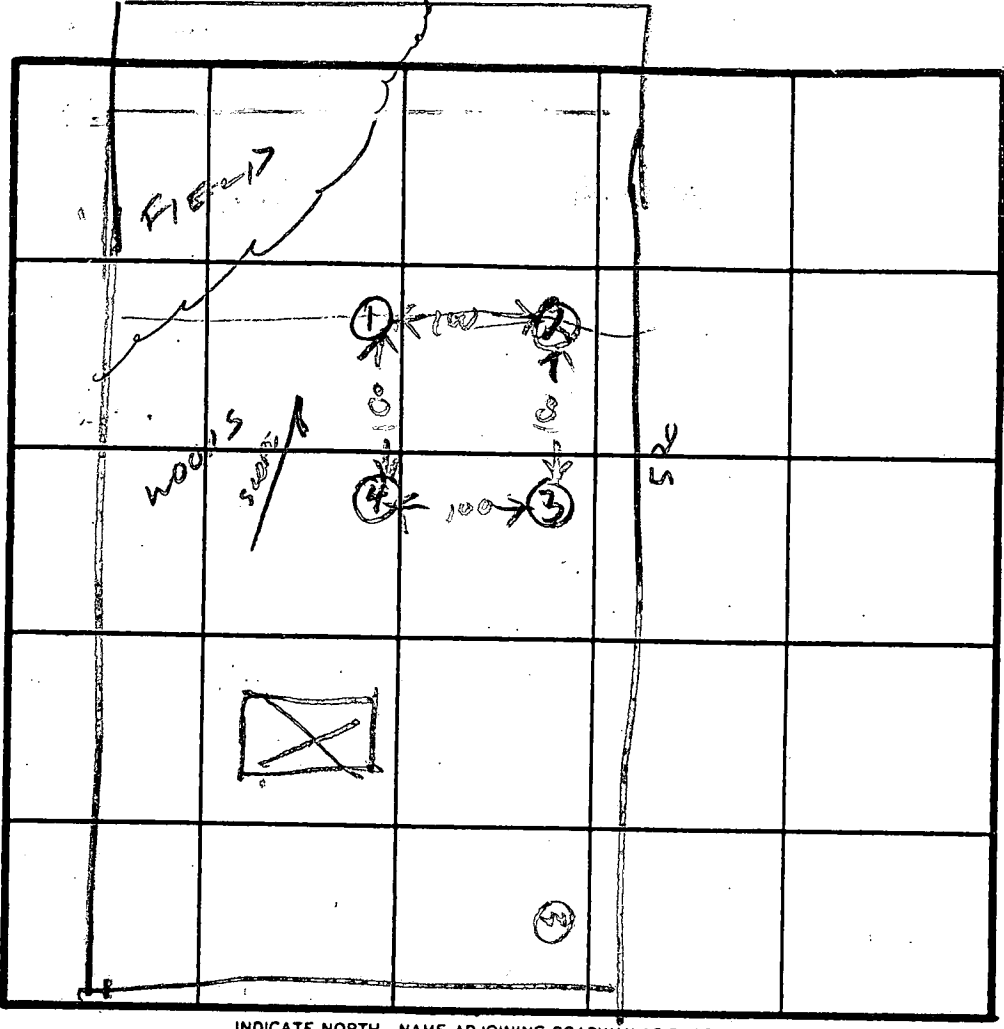
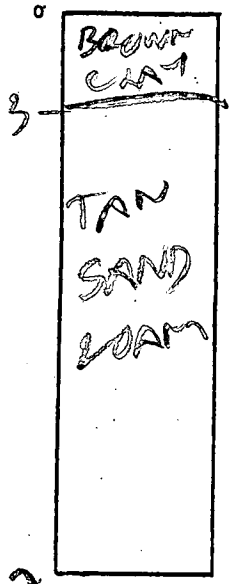
REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

Lot 23
A 41986

(1) SOIL PROFILE



X 5 MIN
180 A/BR
INLET 3'
BOTTOM 7'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DAN MARR DA

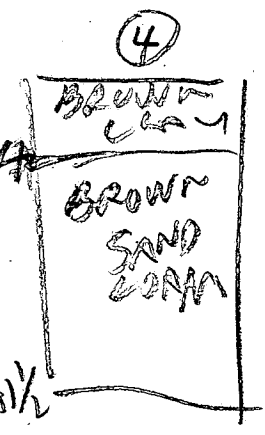
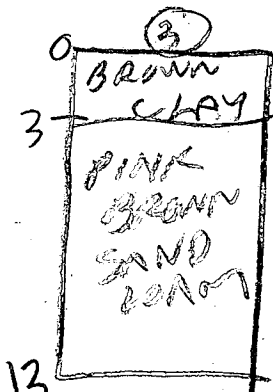
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/3/86	13	4	228	232	232	242	10
	14	12	OK				
	25	5	232	233	233	236	3
	26	12	OK				
	35	5	246	248	248	250	2
	36	8	246	248	248	250	2
	37	13	OK				
8/3/86	4V	11.5					

REMARKS: 1 Hole Dug Per Surveyor Stake

TYPE OF SOIL:

TESTED BY: Raymond Hodges

ALSO PRESENT: WOODY SKIP OF FENCE



APPLICATION

PERCOLATION TESTING

A 41986

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

PROSPECTIVE BUYER Unknown

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Choi Property LOT NO. NEW 23

ROAD AND DESCRIPTION North side of Burtonswood Rd., 1890' East of Hobbs Road.
(3316 Danmark Drive)

TAX MAP 14 PARCEL # 106

SIZE OF LOT 3.00 Acre Minimum

BLDG. PERMIT SIGNED
AND RETURNED 2/14/95
Serial # 58031
S.P.O. - 5 Bin
(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 _____

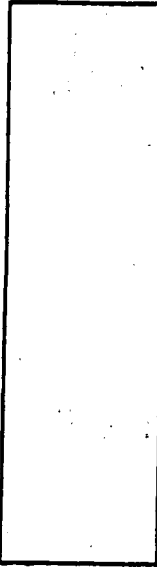
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 8/31/88 - Per OK Hold for Plat B/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	

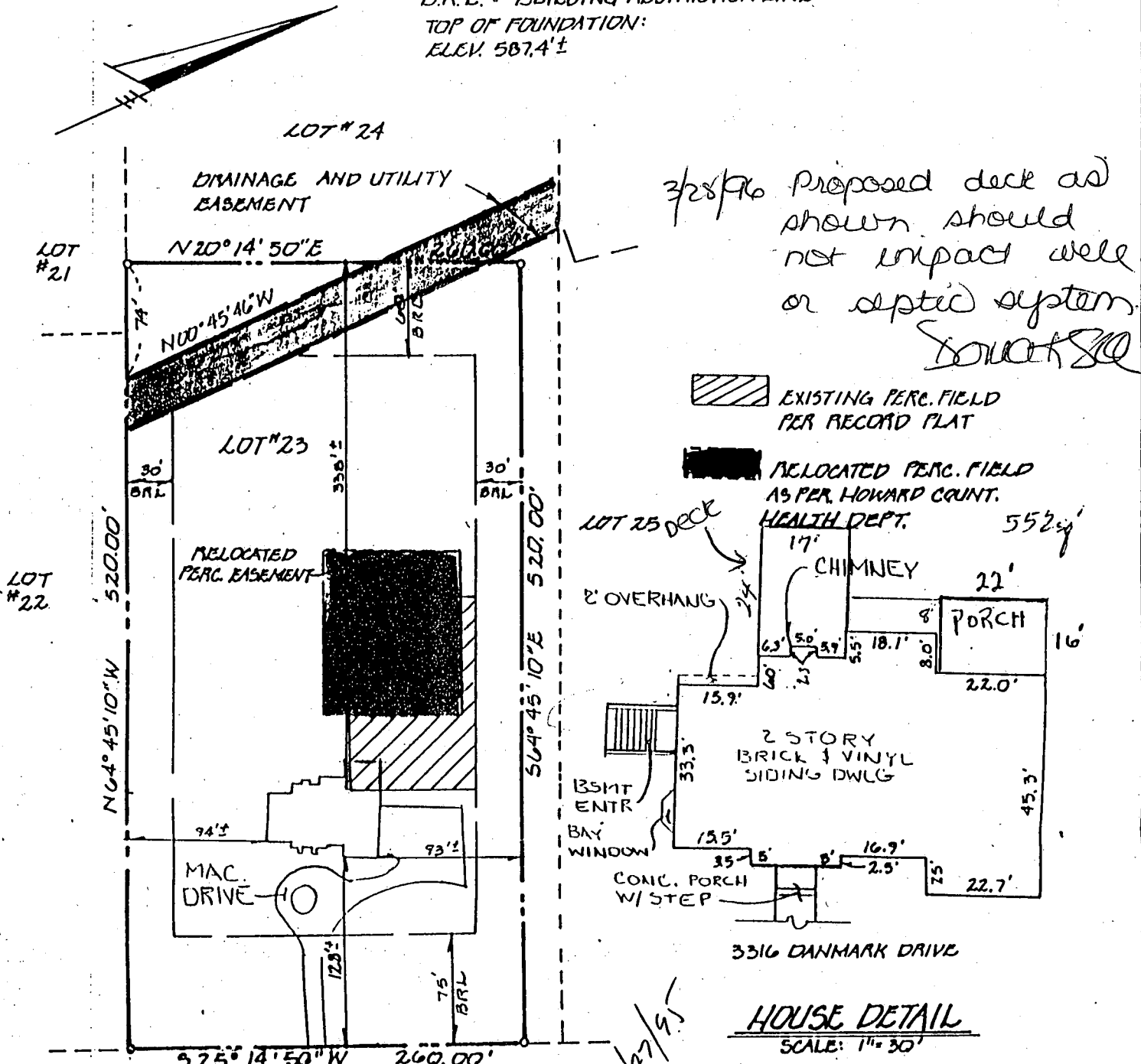
REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

AS A RESULT, THIS PLAT DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
 2) SUBJECT PROPERTY IS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 240040014B, EFFECTIVE DATE: DECEMBER 4, 1986.

B.R.L. = BUILDING RESTRICTION LINE
 TOP OF FOUNDATION:
 ELEV. 587.4'±



3/28/96 Proposed deck as shown should not impact well or septic system.
 SOUTHERN

DANMARK DRIVE
 (50' R/W)

LOT #23
 CHOI PROPERTY
 PARCEL 106
 4TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 PLAT No. 10633

7/27/95
 7/27/95

FISHER, COLLINS & CARTER, INC.
 CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
 9171 BALTIMORE NATIONAL PKE, SUITE 100
 ELLICOTT CITY, MARYLAND 21042
 (410) 461-2855



[Signature]
 PROFESSIONAL LAND SURVEYOR
 REG. # 10763
 7/28/95
 DATE

HOUSE LOCATION DRAWING

FOUNDATION LOCATION:
 FINAL LOCATION:
 BOUNDARY SURVEY:
 SCALE: 1" = 100'
 DATE: 7-21-95
 DRAWN BY: MLP
 CHECKED BY: MLR
 PROJECT No.: 60838

C1 5993

SEQUENCE NO. (DENY USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

(THIS NUMBER IS TO BE PUNCHED IN CQLS. 3-8 ON ALL CARDS)

COUNTY NUMBER A41986

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 020195

Depth of Well 305 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-99-0283

OWNER Jacobsen Homes last name Danmark Drive first name TOWN Glenwood SUBDIVISION Choi Property SECTION LOT 23

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes entries for SAND Stone and GRAY MICHA ROCK.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY, NO. OF BAGS 15, NO. OF POUNDS 1410, GALLONS OF WATER 90, DEPTH OF GROUT SEAL from 0 to 53 ft.

CASING RECORD: casing types insert appropriate code below, MAIN CASING TYPE S7, Nominal diameter top (main) casing 6, Total depth of main casing 69.

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

SCREEN RECORD: screen type or open hole insert appropriate code below, SCREEN TYPE ST, BR, HO, PL, OT.

DEPTH (nearest ft.) table with rows for casing height and screen depth. Includes slot size and diameter of screen information.

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

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

PUMPING TEST: HOURS PUMPED 3, PUMPING RATE 505 gal. per min. to nearest gal., METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL 26, BEFORE PUMPING 148, WHEN PUMPING 148, 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, CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (circle appropriate box and enter casing height) above, LAND SURFACE 2 (nearest foot) below.

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 location

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. 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.

DRILLERS IDENT. NO. 24, DRILLERS SIGNATURE Larry Mayne 24, SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

5/11/95
5-15-95
11-12
No. Bright light scaffolding
No. 105

5/11/95
No. 105
C.B.S.

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 # _____ Date _____
Name of Installer _____ Telephone _____
License Number _____ Certified Well Pump Installer _____ Well Driller _____ Registered Plumber _____
Name of Property Owner _____ Telephone _____
Subdivision Choi Property Lot # 23 Well Tag # _____
Site Address 3316 Danrhack Drive

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible _____
2. Make _____
3. Model # _____
4. Capacity _____ 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 _____
2. Pressure relief valve? _____

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

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

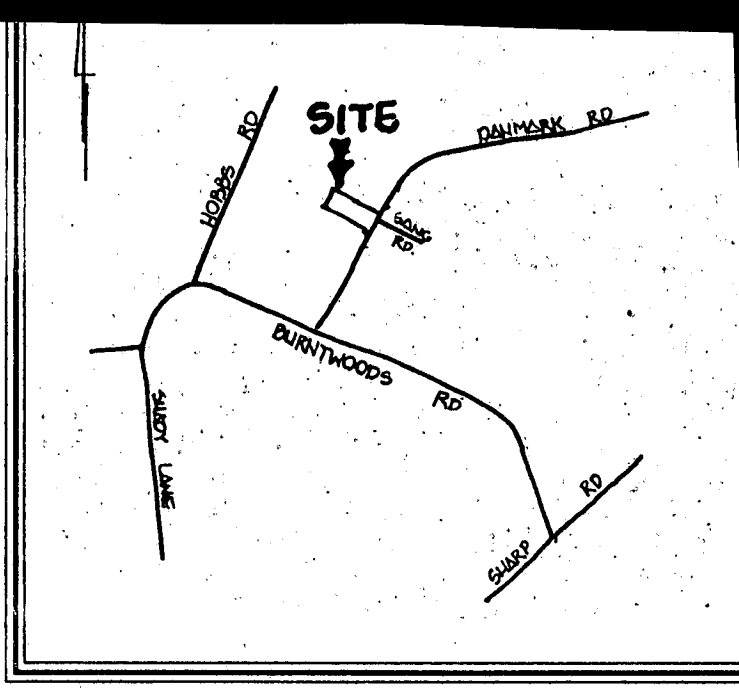
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: _____

Date: _____

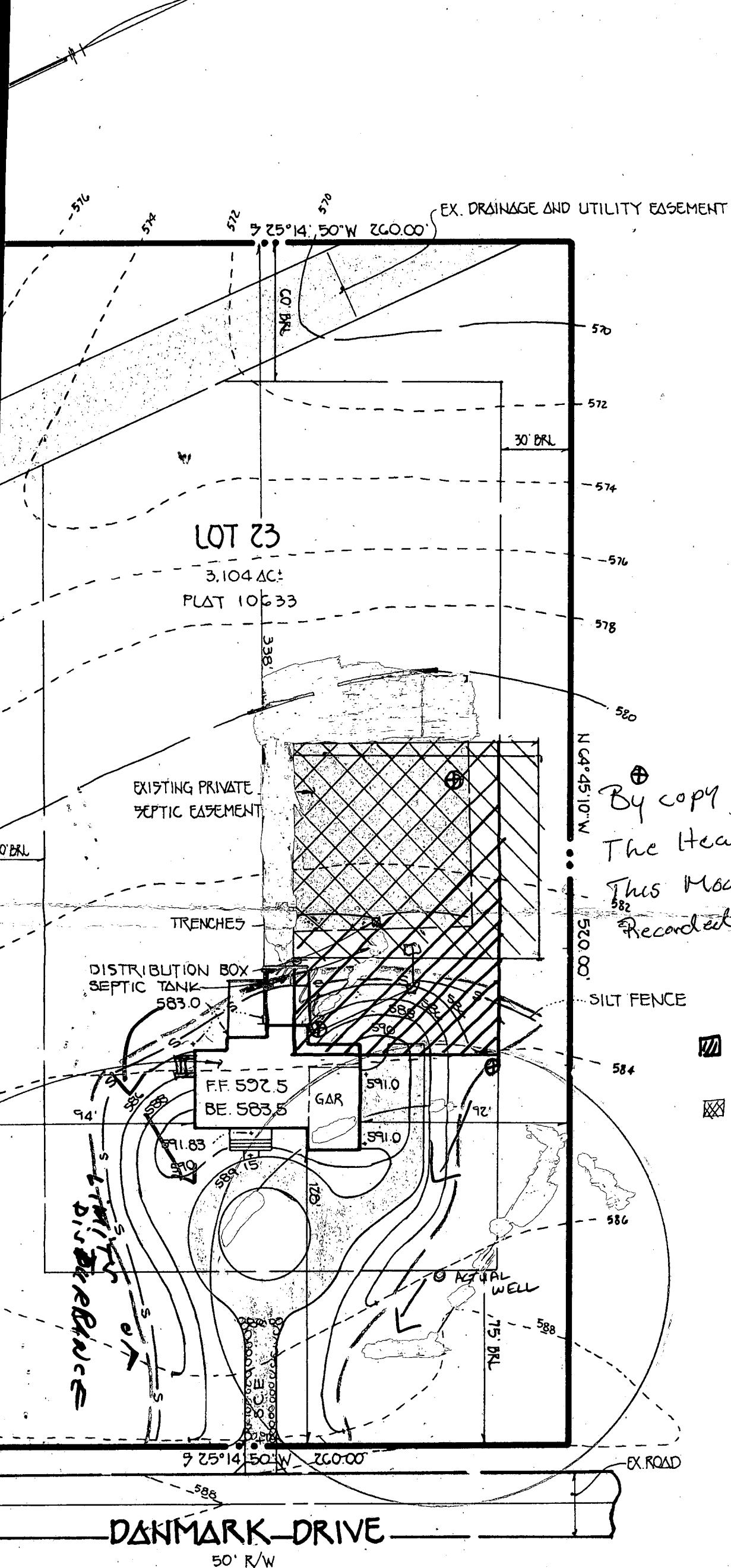
Note: A ^{No} _(green) sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



VICINITY MAP
SCALE: 1"=2000'

GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK.
3. A. FIRST FLOOR ELEVATION: 592.5
B. BASEMENT ELEVATION: 583.5
C. INVERT OF SEPTIC SYSTEM AT HOUSE: 581.3
D. INVERT IN AT SEPTIC TANK: 580.5
E. INVERT OUT AT SEPTIC TANK: 580.2
F. PROPOSED GRADE OVER SEPTIC TANK: 583.0
G. INVERT AT DISTRIBUTION BOX: 580.0
H. EXISTING GROUND OVER DISTRIBUTION BOX: 583.0
4. LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
5. CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.



By copy of this plan
The Health Dept. Accepts
This Modification to the
Recorded Sewage Disposal easement,
OR *Amey Miller*
2/14/95

- EXISTING RECORDED SEWAGE DISPOSAL EASEMENT
- Revised SDA

Approved Septic System Plan
Howard County Health Department

Amey Miller
Signature 2/14/95
Date

PLAN TO ACCOMPANY APPLICATION
FOR BUILDING PERMIT
CHOI PROPERTY

LOT 23
TAX MAP 14 EX. ZONING: R PARCEL 106
4TH ELECTION DIST. HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' DATE: JANUARY 11, 1995