

2/26/97
ANYTIME

Tag ID - 05-415489

2/4/97 needs house connection
house connection letter sent 2/4/97

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57652

A 42230

DISTRICT 5th

DATE 1/28/97

DATE SYSTEM APPROVED 2-26-97

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 313-2640

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Adam's Reach LOT 13 ROAD 5490 Adam's Ridge Road

PROPERTY OWNER Patriot Homes, Inc. (Ho Choi)

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

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 the distribution box 480 feet down the left (895.87') lot line and 90 feet off this same lot line as seen when facing the lot from Adam's Ridge Road. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 1/20/96 DKS

PLANS APPROVED BY Donna K. Soe DATE 10/15/96

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

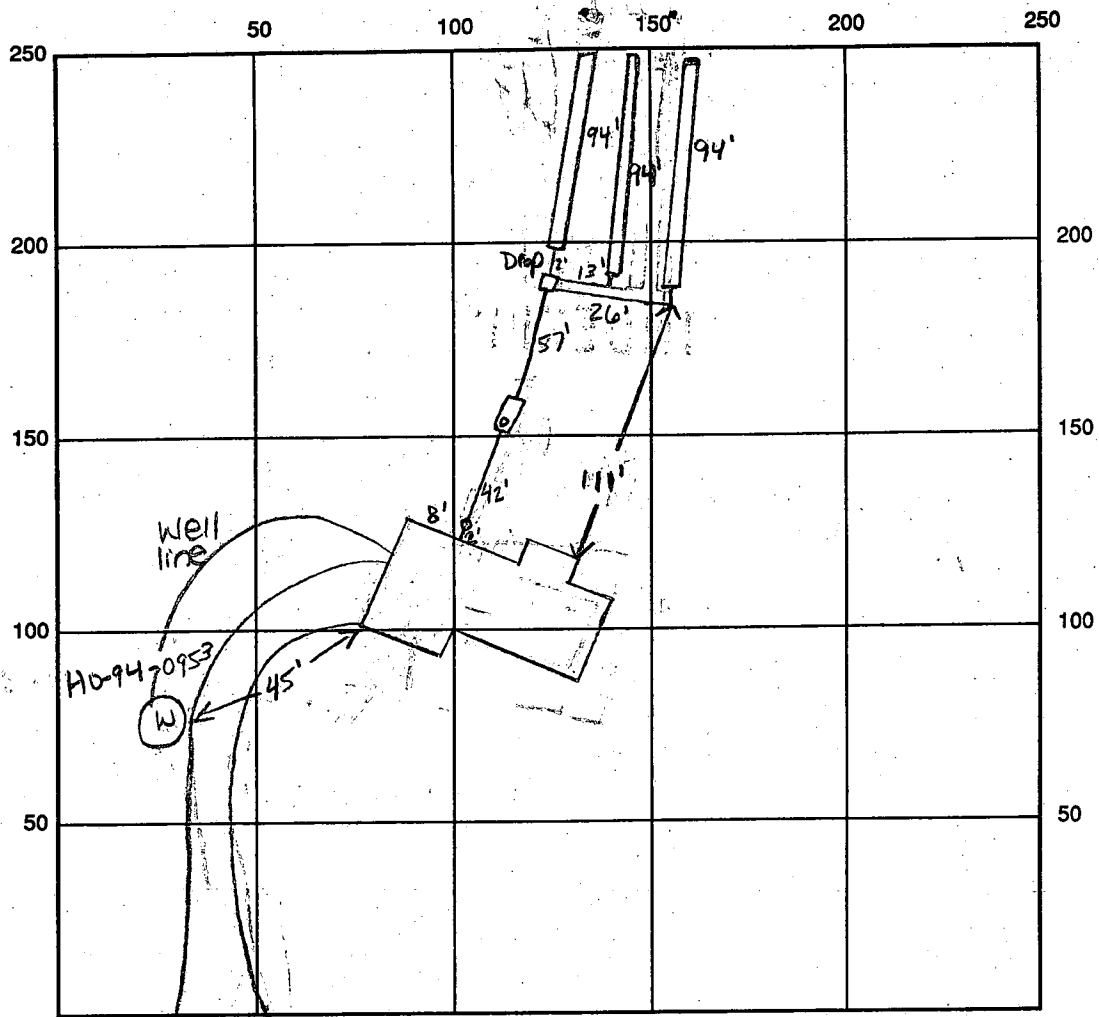
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMIT SIGNED
AND RETURNED 2/4/97
Serial # 103857
1-1000 gal purple tank

A
412230



Ten Oaks Road

Adams Ridge Rd.

SEPTIC TANK LEVEL ok, 1250 gallons CLEANOUTS 1 at house, 1 on tank
 DISTRIBUTION BOX LEVEL ok, baffle in
 DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 94 x 3 FT. → 282
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 846 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA — SQ. FT.

REMARKS: 2-3-97 no house connection made, ok to cover last two trenches and up to distribution box, leave ends of first trench open KM
2-4-97 ok to cover first trench, no house connection made KM
2-20-97 FINAL INSP- house connection made. DKS

DATE SYSTEM APPROVED 2/20/97 INSPECTOR Donna K. Gail

APPLICATION

PERCOLATION TESTING

A 42230
P _____

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

DISTRICT SDH
DATE MAY 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 ~~BAC - HAR DEVELOPMENT LIMITED PARTNERSHIP~~
PATRIOT HOMES, INC

ADDRESS C/O H.P. ASSOCIATES
3901 NATIONAL DRIVE SUITE 100 PHONE 421-1700
BURTONSVILLE, MARYLAND 20866

PROSPECTIVE BUYER _____
ADDRESS _____ PHONE _____

PROPERTY LOCATION:
SUBDIVISION ADAMS REACH Sec. 2 LOT NO. LOT 13 Prelim. 17

ROAD AND DESCRIPTION LOCATED ON THE NORTH AND SOUTH SIDES OF
5490 Adams Ridge Road
MD. ROUTE 32, WEST OF RTE 108, NORTH OF TEA OAKS ROAD

TAX MAP 28 PARCEL # 240
SIZE OF LOT ± 3.0 AC. TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 11/8/94
Serial # BPD 103987
SFD-4/Benn

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 9-22-88 Perc Satisfactory - Hold for Plat, if Adjust-
ment cannot be made until by 3' elevation minimum Hold until
next season. S. Hall

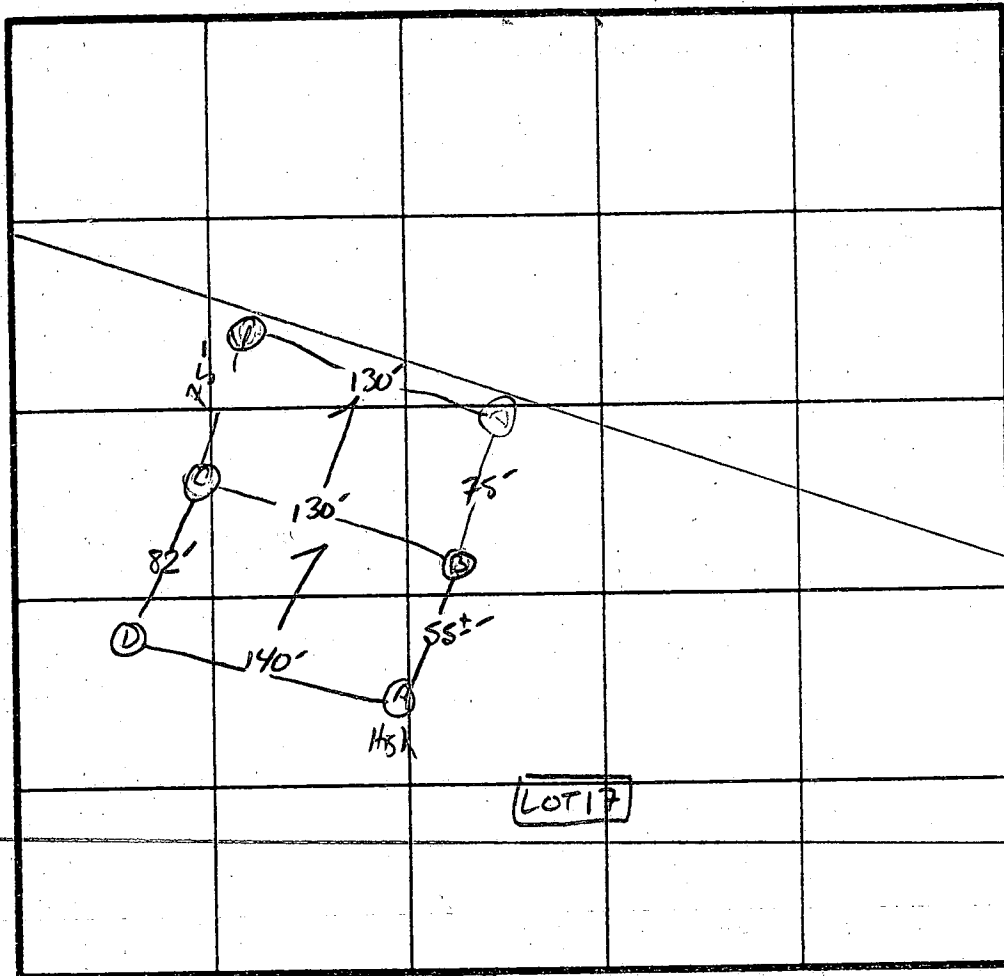
THIS IS NOT A PERMIT

A-47230

LOT 17

⑦ - ①
SOIL PROFILE

0"	AP
6"	RED BROWN LOAMY CLAY QUARTZITE 20-25%
3.0"	Yellow Br Silt, loam MICACEOUS 10-20% FRAGS
3.5"	
11"	△ Hole C
12"	



̄ Perc 11 min
210 ϕ BR
Inlet 3.5
Bottom 5.5

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
TEN OAKS Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/22/88	A S	3.5	10:32	10:38	10:38	10:49	11 MIN
		8.0	10:32	10:35	10:35	10:41	6 MIN
	A V	13"	UNIFORM soil below 3.5'				
	B S	3.0"	10:39	10:41	10:41	10:48	7 MIN
		12"	UNIFORM soil below 2.5'				
	C S	4"	10:28	10:40	10:40	11:00	20 MIN
		12"	WATER AT 11" WET FROM 10' DOWN				
	D V	12"	UNIFORM soil below 3.0'				
	I V	WATER AT 7"					

REMARKS Holes DIFF THAN PLAN - MOVED UP 1/4" MAX / SHALLOW SYSTEM ONLY (H₂O)
Holding for wis. OR Redesign
 TYPE OF SOIL Chester loam
 TESTED BY S. Abel ALSO PRESENT Fyach + Co Wayne

EH-12-1079

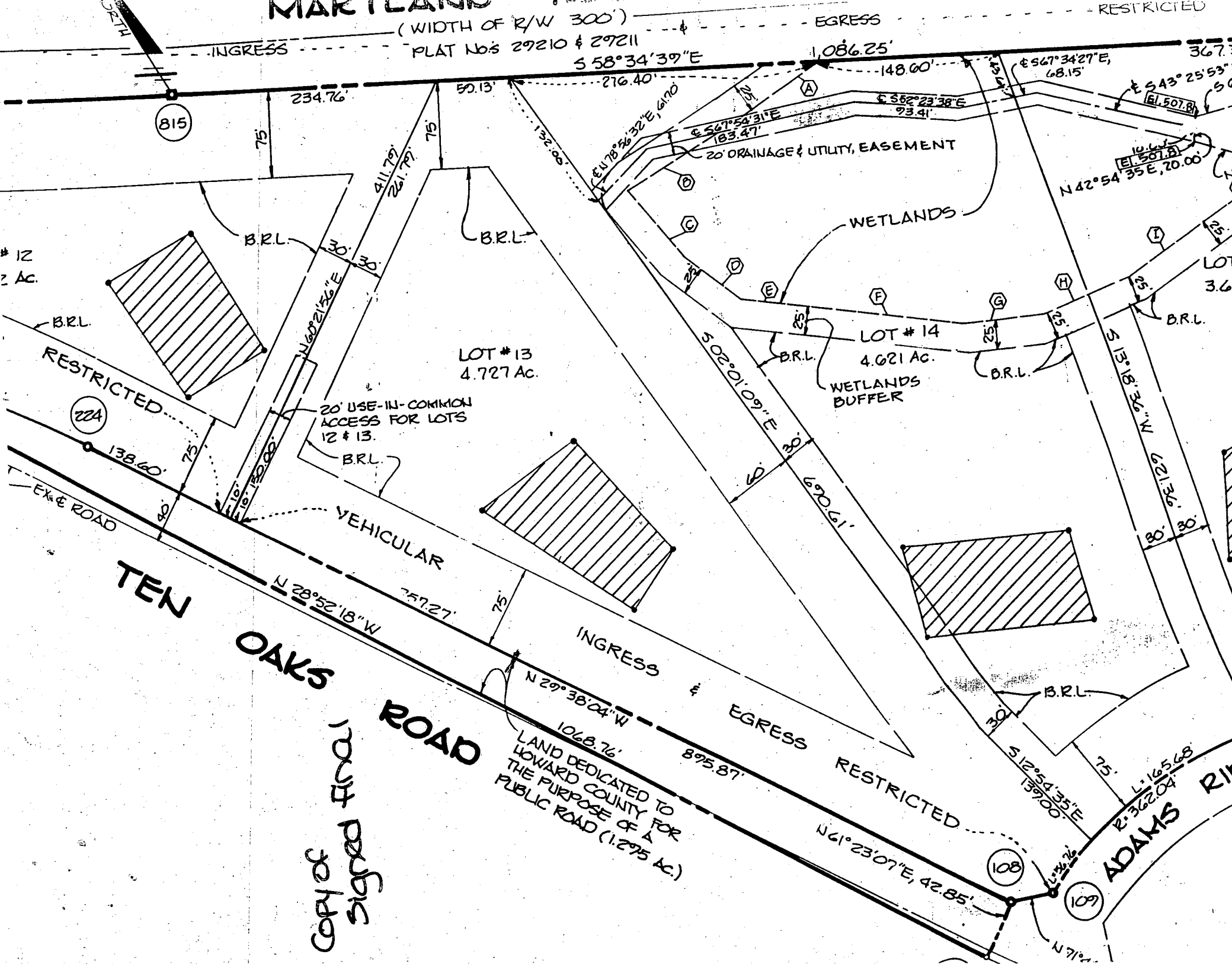
MARYLAND

(WIDTH OF R/W 300')

PLAT No's 29210 & 29211

EGRESS

RESTRICTED



12
2 AC

LOT # 13
4.727 AC.

LOT # 14
4.021 AC.

TEN
OAKS
ROAD

ADAMS ROAD

COPY of
signed final

LAND DEDICATED TO
HOWARD COUNTY FOR
THE PURPOSE OF A
PUBLIC ROAD (1.275 AC.)

815

22A

108

109

LOT
3.60

LOT 14

LOT 13
4.73 ± Ac.

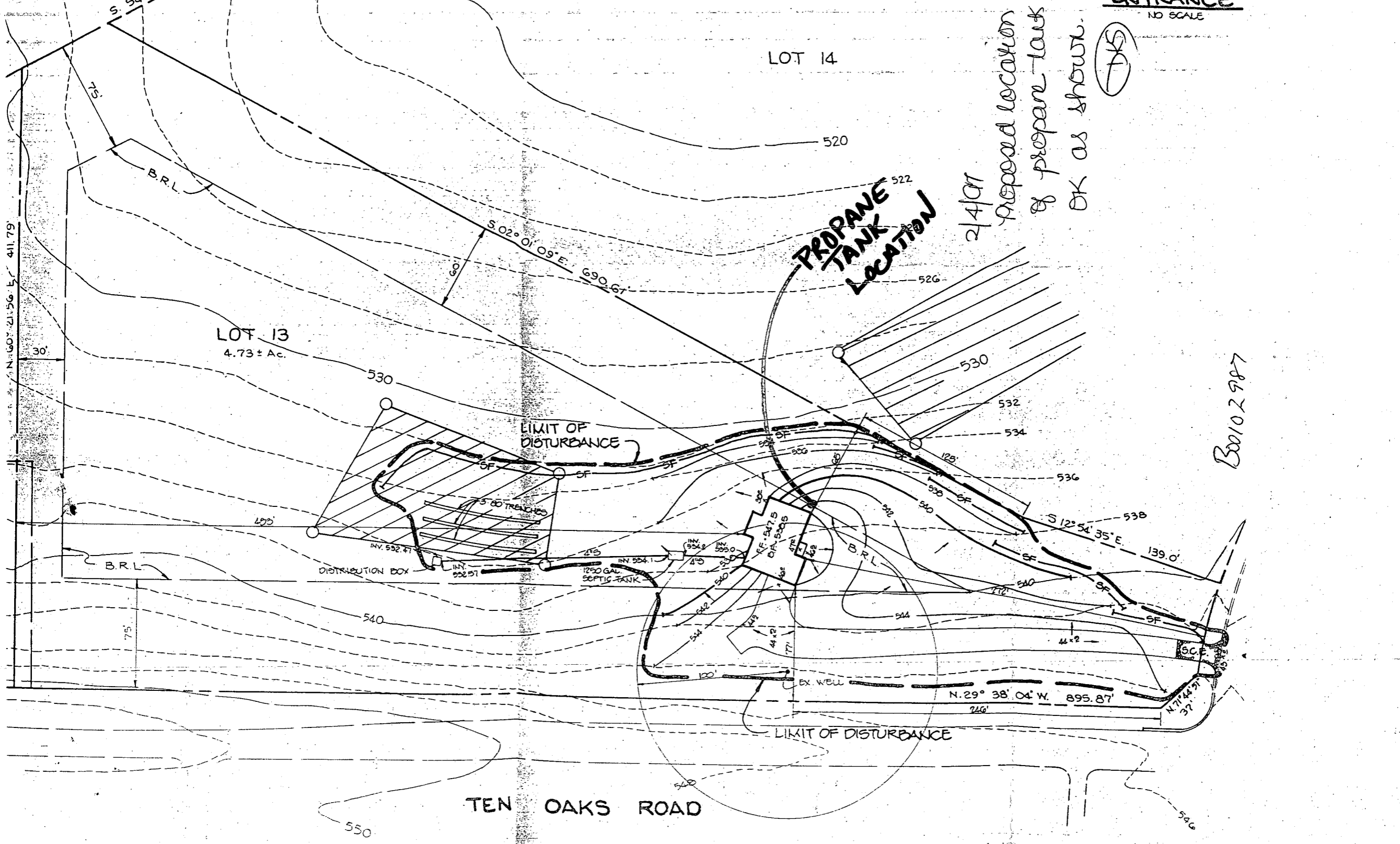
**PROPANE
TANK
LOCATION**

2/4/07

Proposed location
of propane tank
OK as shown.



B00102987



TEN OAKS ROAD

N. 60° 21' 56" E. 411.79'

N. 29° 38' 04" W. 895.87'

N. 71° 44' 21" E. 37'

LIMIT OF DISTURBANCE

LIMIT OF DISTURBANCE

DISTRIBUTION BOX

1250 GAL. SEPTIC TANK

EX. WELL

5.00' TRENCHES

B.R.L.

75'

30'

75'

520

522

526

690.67'

S. 02° 01' 05" E.

60'

530

530

532

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536

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539.0'

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N. 60° 21' 56" E. 411.79'

30'

75'

550

TEN OAKS ROAD

N. 29° 38' 04" W. 895.87'

N. 71° 44' 21" E. 37'

LIMIT OF DISTURBANCE

LIMIT OF DISTURBANCE

DISTRIBUTION BOX

1250 GAL. SEPTIC TANK

EX. WELL

5.00' TRENCHES

B.R.L.

75'

30'

75'

520

522

526

690.67'

S. 02° 01' 05" E.

60'

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539.0'

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C1 **7860** SEQUENCE NO. (MODE 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 **A 42230**

ST/CO USE ONLY
 DATE RECEIVED

DATE WELL COMPLETED **10/21/96** Depth of Well **320**
 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"
40-94-0953

OWNER **Williamshurg Builders**
 STREET OR RFD **Adam's Ridge Rd.** TOWN **Clarksville**
 SUBDIVISION **Adam's Beach** SECTION **13** LOT **13**

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	71	
Gray Mica Rock	71	320	

GROUTING RECORD (yes no
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **27** NO. OF POUNDS **2538**
 GALLONS OF WATER **162**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **68** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL **CO** CONCRETE
 PL PLASTIC **OT** OTHER

MAIN CASING TYPE
 Nominal diameter (nearest inch) **6** Total depth of main casing (nearest foot) **75**
 ST **CO** **PL** **OT**

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

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

NUMBER OF UNSUCCESSFUL WELLS: **0**
 WELL HYDROFRACTURED: YES NO

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**
Gary Mayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
Gary Mayne
 LIC. NO. **27**

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

C 2
 DEPTH (nearest ft.)
 A **H 0 74** **3 20**
 C 8 9 11 15 17 21
 S 23 24 26 30 32 36
 R 38 39 41 45 47 51
 E
 N
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

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

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

C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min.) **6**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **20** ft.
 WHEN PUMPING **196** 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 (CIRCLE) (YES or NO) 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
 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 _____ (nearest foot)
 - below }

