

1ax ID-05-411343

PERMIT

File

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 46891

A 42240

DISTRICT 5th

DATE 3/7/91

DATE SYSTEM APPROVED 11/21/90

INSPECTOR C.B.C.

11/21/90
LATE 4:30 PM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Adams Reach LOT 3 ROAD 5569 Broadwater Lane

PROPERTY OWNER GARDNER RESIDENCE

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Start the first trench 135 feet from the front (512.47') lot line and 185 feet from the left (325') lot line as seen when facing the lot from Broadwater Lane. Run trenches on contour toward the front of lot.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *10/19/90 OK Rjt*

PLANS APPROVED BY Side Abel cm DATE 06/09/89

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

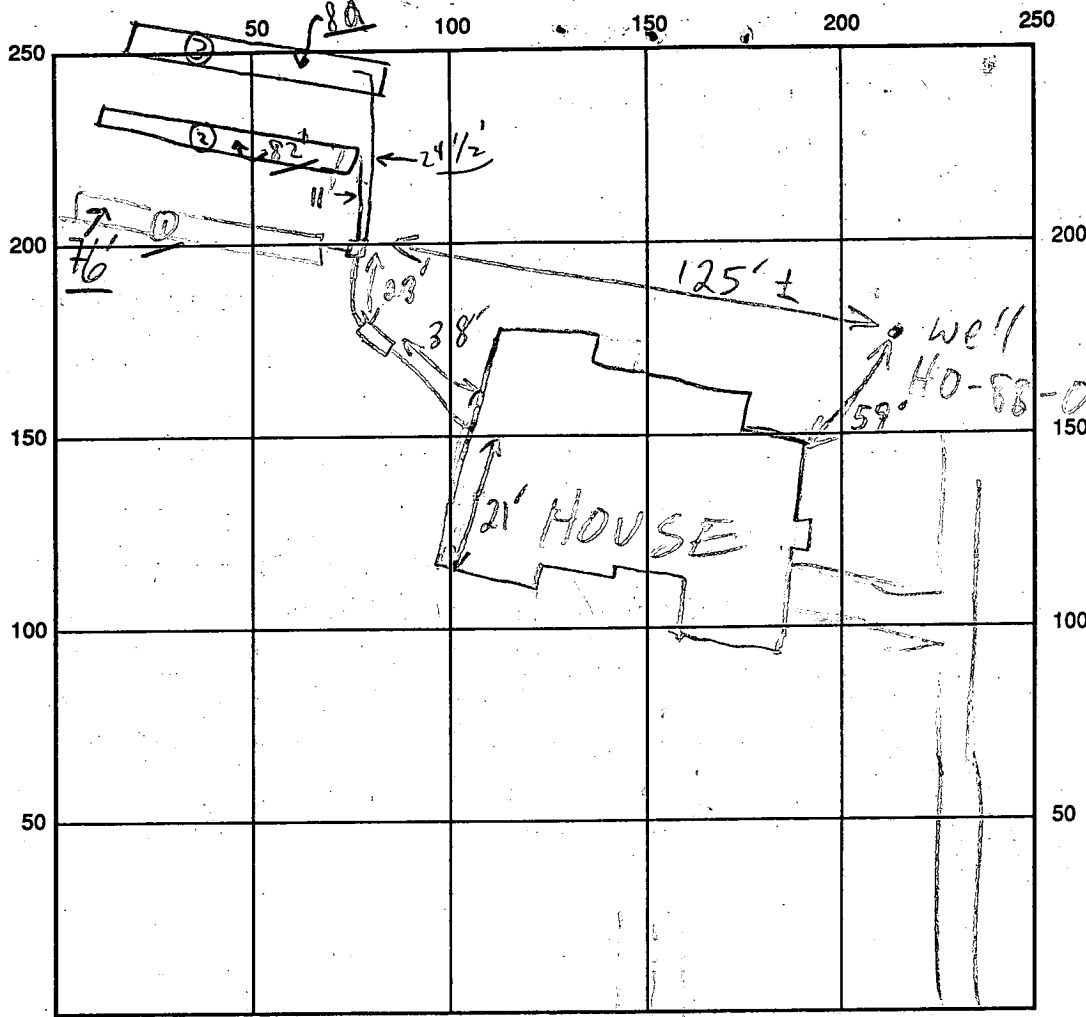
PERMIT VOID AFTER TWO YEARS

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 42240



38'
3'
20'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

BROADWATER LANE S.T.

SEPTIC TANK LEVEL 1250 GAL CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 240 TOTAL

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 720+ SQ. FT.

REMARKS: 11/21/90 OK TO COVER ①, DIG & STONE ② & ③ MR

11/21/90 P.M. LAST (2) TWO TRENCHES - OK TO COVER; SOME STONE OVER D. BOX AT THIS INSPECTION. FINAL - OK TO COVER ALL WORK.
C.B.P.

Late P.M. They are to bring paperwork in to office W.P.I. (Left card - ok to cover with lines & pitless adapters.)

DATE SYSTEM APPROVED (FINISHING HOLE AT HOME) 11/21/90 INSPECTOR Charles Bryan Stecker

APPLICATION

PERCOLATION TESTING

A 42240

P _____

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

DISTRICT 5 DL

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 - HP DEVELOPMENT LIMITED PARTNERSHIP

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. 1 LOT NO. LOT 3 Preliminary

ROAD AND DESCRIPTION LOCATED ON THE NORTH AND SOUTH SIDES OF
MD. ROUTE 32, WEST OF RTE 108, NORTH OF TEN OAKS ROAD
(5569 Broadwater Lane)

TAX MAP 28 PARCEL # 240

SIZE OF LOT ± 3.2 AC. TYPE BLDG. SFD
(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.

RAK JIP
(SIGNATURE OF APPLICANT)

APPROVED BY Sid Abel FOR Standard trench DATE 6-9-89

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 9-13-88 Res. Satisfactory - Hold for Subel. Plat. Subel

BLDG. PERMIT SIGNED
AND RETURNED 9/15/89
Serial # 28688
SFD - 4 Bedrooms

THIS IS NOT A PERMIT

A-42240

LOT 27

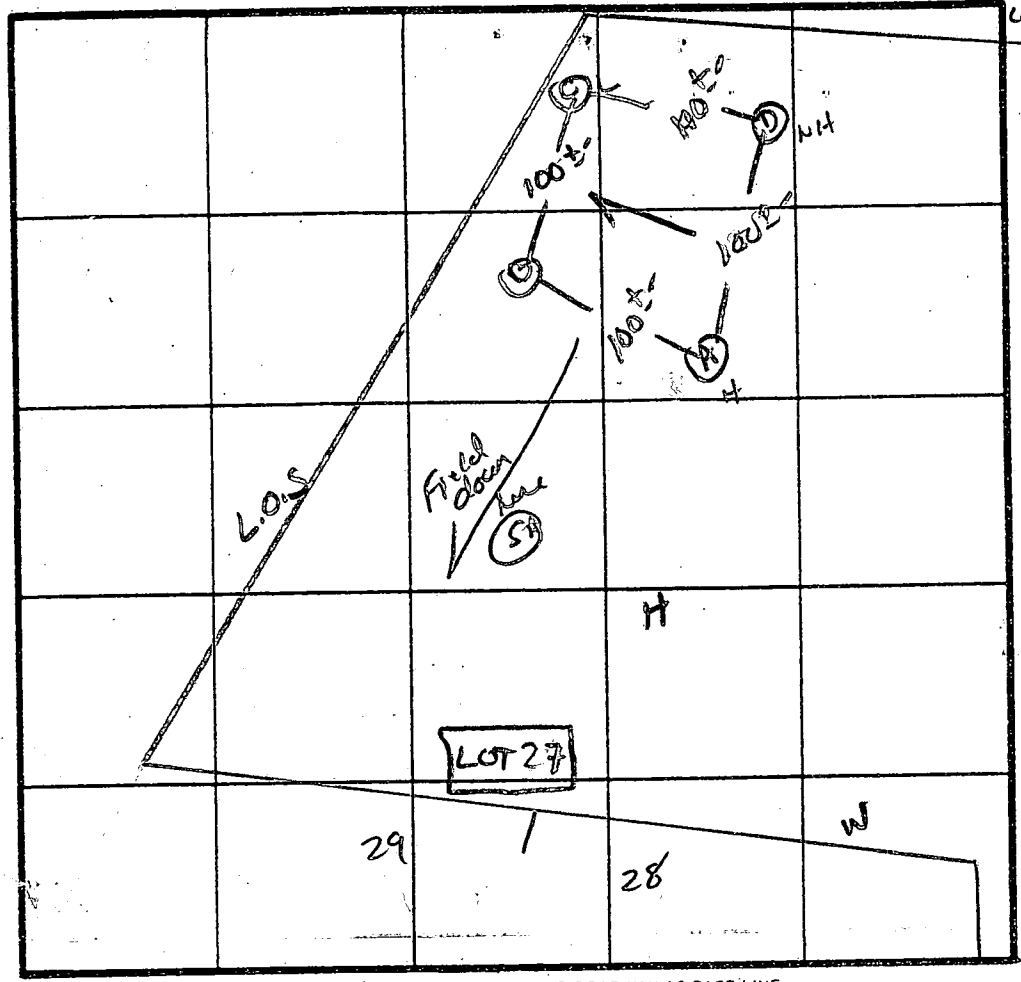
LOT 24

SOIL PROFILE

0
10"
3-3.5
12+

AP
Yellow Red
Silt CLAY
LOAM
<10% FRAGS

RED Brown
(Pink)
TO yellow
Brown
Highly
Micaeous
Silt LOAM
15-20%
COARSE
FRAGS



X Perc 3 min
180 # 182
Inlet 30"
Bottom 4.5'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Broadwater Lane

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
9/13/88	AS	3.5	7:54	7:55	7:55	7:57	2 min	
		9.0	7:53	7:54	7:54	7:56	2 min	
	AV	12.5	UNIFORM Soil below 3.0'					
	BS	4.5	7:57	7:59	7:59	8:02	3 min	
		12.5	UNIFORM Soil below 3.5'					
	CS	4.5	8:03	8:05	8:05	8:10	5 min	
		13	UNIFORM soil below 3.5'					
	DV	12.0	UNIFORM soil					
			ALL Holes Similar in Appearance					

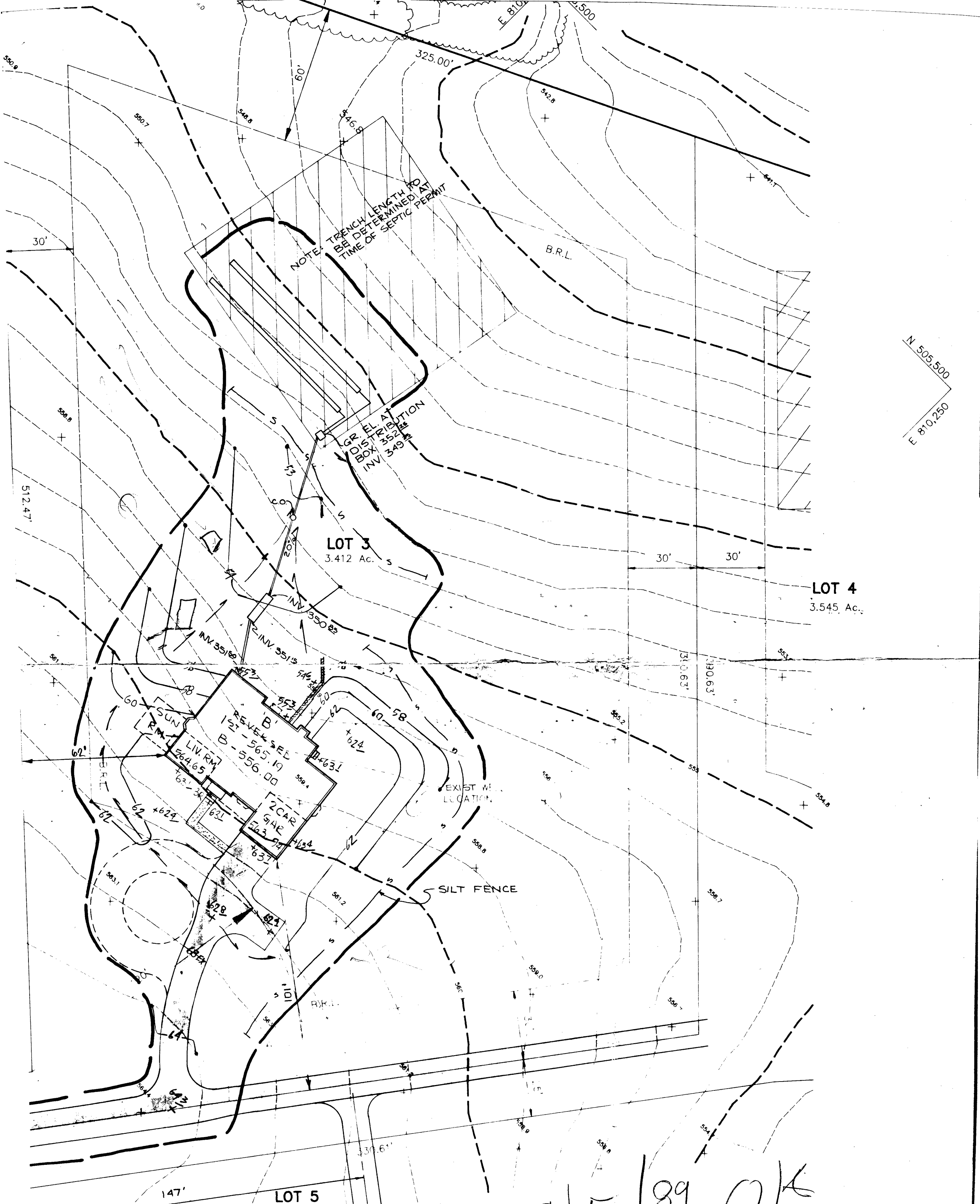
REMARKS: Holes Approx. PLAT/LANDSCAPE POSITION suggest shallow Syst.

TYPE OF SOIL: Chester LOAM

TESTED BY: S. Abel

ALSO PRESENT: Leung
Frank & Co.

EH-12-1079



N 505,500
E 810,250

9/5/89 OK
Revised plan
RM

RIEMER MUEG
A Land Planning,
3105 North Ridge F
301-461-269

B 1 **9157** 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
40-88-0719
 fill in this form completely

Date Received (APA) **05/28/89**
 OWNER INFORMATION
KOREN DEVELOPMENT
 Last Name Owner First Name
DAVE CENTRE PARK DR
 Street or RFD
COLUMBIA MD 21045
 Town State Zip

B 3 LOCATION OF WELL **12-44285**
HOWARD COUNTY
ADAMS REACH SUBDIVISION
 SECTION **3** LOT **3**
CLARKSVILLE NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **1** MI

DRILLER INFORMATION
George f. Easterday
 Driller's Name License No. **40**
L. Franklin Easterday, Inc.
 Firm Name
9265 Brown Church Rd., Mt. Airy, Md. 21771
 Address
George F. Easterday **5/14/89**
 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

BROADWATER LANE NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

 DISTANCE FROM ROAD **1000** FT
 ENTER FT OR MI **FT**

B 2 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)
 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
A-42240 COUNTY NO.
 STATE SIGNATURE _____ INSERT S
 DATE ISSUED **06/12/89** **Sally Cehl** **12-11-89**
 CO SIGNATURE EXP. DATE
 NORTH GRID **5050000** EAST GRID **0810000**
 GRID 50 55 57 63

APPROXIMATE DEPTH OF WELL **200** 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
 other _____

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

 GROUT NOT OBS'D
 53' CASING
 50' OPEN
 13 BAGS
 1/2" CASING A.G.
 MR
 TAG OK 7/24/89

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) _____

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

 HEALTH DEPARTMENT
 HOWARD COUNTY
 MARYLAND
 CLARKSVILLE

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 FORCE **SA** WRITE INITIALS IN BOX PERMIT No. **40-88-0719**

SPECIAL CONDITIONS
 COUNTY

0043

SEQUENCE NO. (DENV 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 COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A 72240

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

072489

22 16 6 26 (TO NEAREST FOOT)

10-88-0219

OWNER KAREN DOWNING last name first name TOWN FRANKSVILLE STREET OR RFD Adams Reach SECTION 1 LOT 3 (27)

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, FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Red clay, Red mica, Br. mica, Gray mica.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 13 NO. OF POUNDS 1300

CASING RECORD casing types insert appropriate code below (S) (T) (C) (O) (P) (L) (O) (T)

MAIN CASING TYPE (S) Nominal diameter top (main) casing (nearest inch) (6) Total depth of main casing (nearest foot) (53)

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

SCREEN RECORD screen type or open hole insert appropriate code below (S) (T) (B) (R) (H) (O) (P) (L) (O) (T)

DEPTH (nearest ft.) (H) (0) (5) (2) (10) (0) SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING 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 PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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 (-) below LAND SURFACE (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 p. 17 plan

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. 46 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)