

11/15/99
11/23/99 ASAP

Tax ID-04-351681

1/18/00 Needs 4" cleanout
between tank and box.
Check 2-piece well cap. PBA 42461

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 410-313-2640

DATE 11/10/1999
DATE SYSTEM APPROVED 1/21/00
INSPECTOR DLS

INDEXED

WTC III Plumbing & Heating IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 1820 Gillis Falls Road, Woodbine, MD 21797 PHONE 410-489-4457

SUBDIVISION Country Springs LOT 8 ROAD 15025 Bushy Park Road

PROPERTY OWNER Deanne & Eric Reese

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 $3\frac{1}{2}$ feet below original grade. Bottom maximum depth $5\frac{1}{2}$ feet below original grade. Effective area begins at $3\frac{1}{2}$ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 360 feet down the right lot line and 60 feet off this same lot line as seen from Bushy Park Road. Run trenches along 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 8/3/00 DLS

PLANS APPROVED BY Donna K. Soe DATE 7-13-1999

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)

000119095 SFD
7/13/99

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.

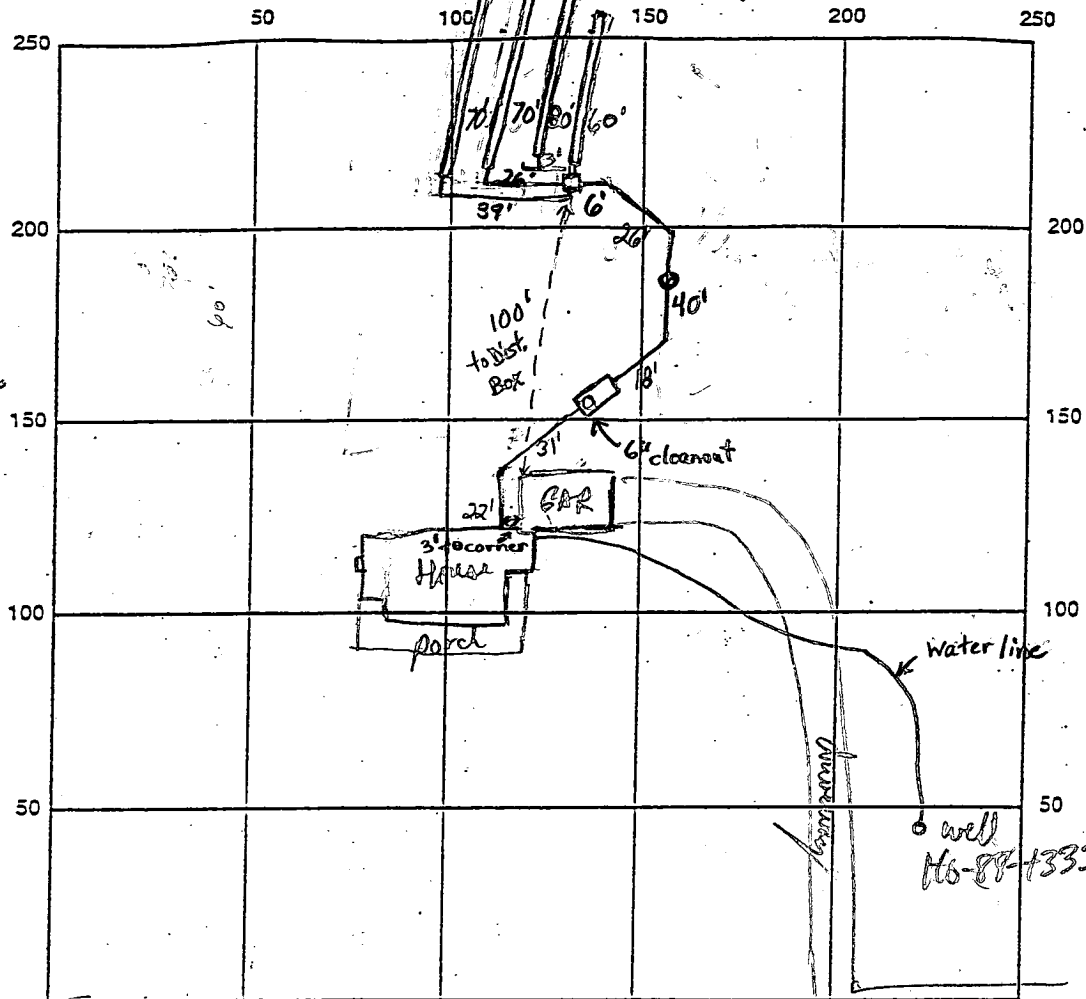
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

42461

CONF HOLE
DUG 11/15

①
20% shale 2 1/2
10% shale 5 1/2



Bushy Park Rd

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1-1250 gallon CLEANOUTS 1-6" tank

DISTRIBUTION BOX LEVEL O.K.

DRAIN FIELD/TITLE DEPTH 5.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 2x70', 1-80', 1-60' (280' total)

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 840 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 11/15/99 60% ROCK IN FIRST TRENCH; STARTING LOCATION
ADJUSTED 25' DOWNHILL TO GOOD SOILS; CONTINUE (MR) 11/21/99 House
connection made. O.K. to cover trenches. Need 4" cleanout between tank and
distribution box. Soils less rocky than in abandoned trench. Well needs a 2-piece cap. (BB)

11/21/00 ALL SEPTIC WORK OK - FINAL. (BVS)

WPI - pit hole depth & cap OK - Need a 2-piece cap. WIP 11/2/99

DATE SYSTEM APPROVED 1/21/00 INSPECTOR [Signature]

APPLICATION

PERCOLATION TESTING

A 42461

P _____

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

DISTRICT 4

DATE July 5, 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 Erall Developers, Inc.

ADDRESS P. O. Box 659 Mount Airy, MD 21771 PHONE (301) 795-1866

ENGINEER OR CONTACT PERSON
PROSPECTIVE BUYER VANMAR ASSOCIATES INC. / Mike VanSant

ADDRESS 310 South Main Street Mount Airy, MD 21771 PHONE (301) 829-2890

PROPERTY LOCATION:

SUBDIVISION RIPPEON PROPERTY - COUNTRY SPRINGS LOT NO. 8
15025

ROAD AND DESCRIPTION Bushy Park Road

TAX MAP 14 PARCEL # 12

SIZE OF LOT 3.0 ac ± TYPE BLDG. SFD - 4 Bed
(SINGLE FAMILY DWELLING OR COMMERCIAL)

THIS PERMIT SIGNED

AND RETURNED 7-13-88

Serial # Z310119095

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.

Luanne Jennings
(SIGNATURE OF APPLICANT)

Agent

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 11-14-88 / 11-22-88 / True Satisfactory - Hold for Per. S. Muhl

HD-216

THIS IS NOT A PERMIT

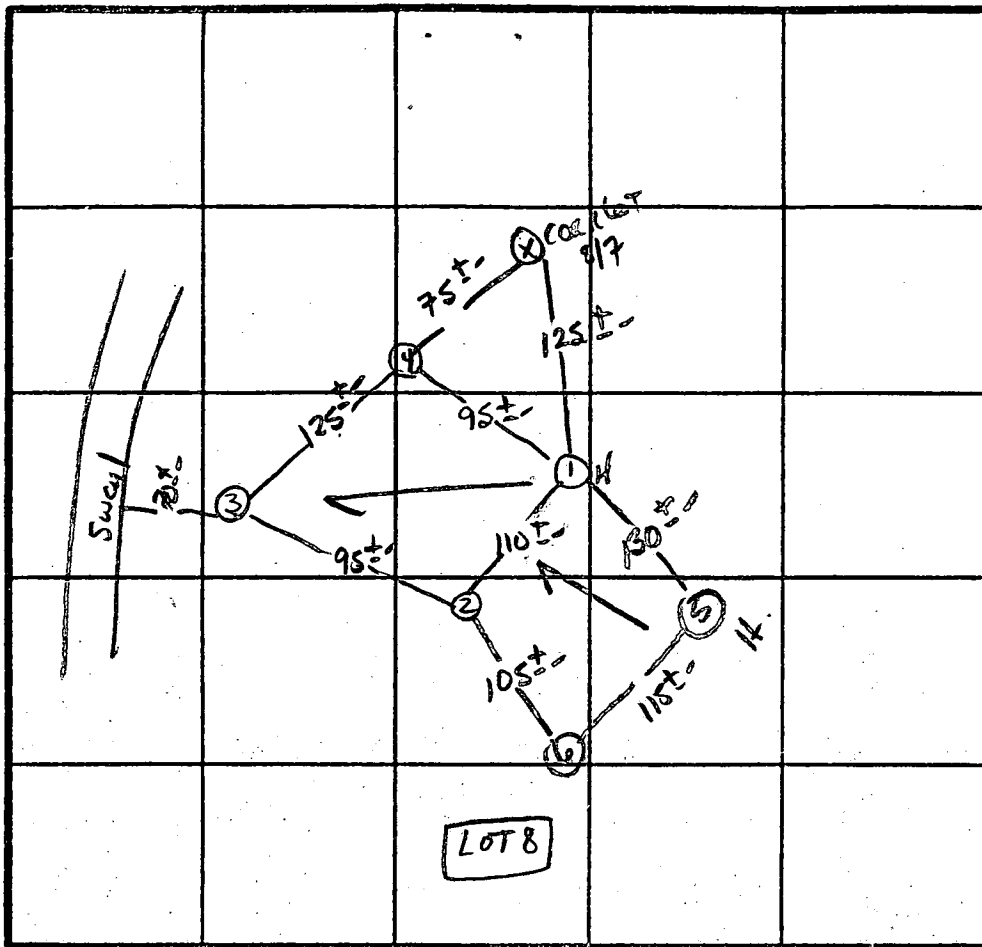
SOIL PROFILE

AP

8" 11
RED BR.
SILTY CLAY
LOAM
<10% FRAG

3.5'
YELLOW RED
YELLOW BR
SILTY LOAM
15-20%
FRAG

13"



X PERC
10 MIN
210 #1 BR
INLET 3.5"
BOTTOM 5.5"

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BUSH PARK Rd.

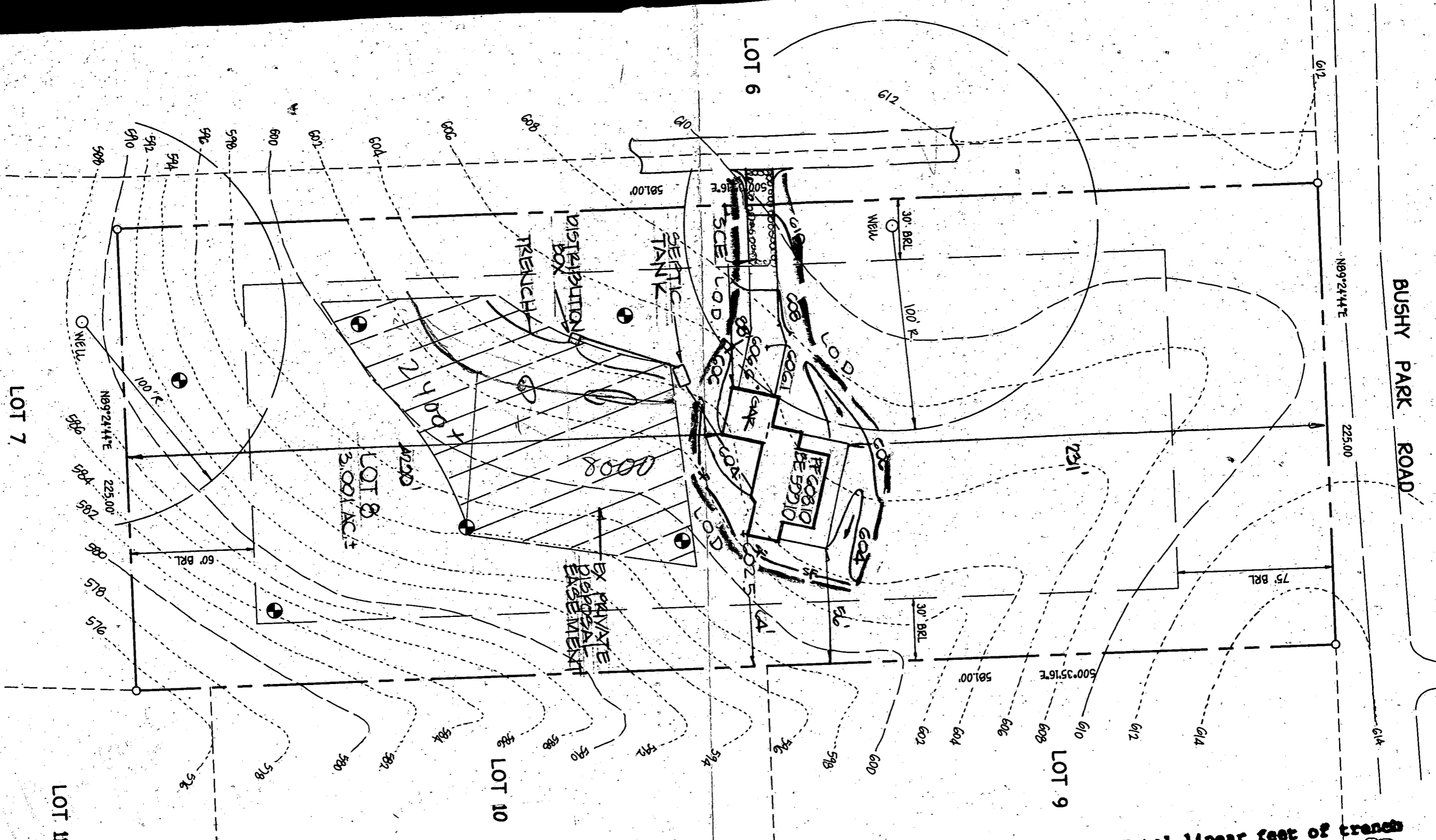
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DRIP		TIME
			START	STOP	START	STOP	
1/14/88	1 S	4"	11:33	11:45	11:45	12:10	25 min
		8.5"	11:32	11:33	11:33	11:36	3 min
	1 V	13"	see profile				
	2 S	3.5"	11:35	11:37	11:37	11:40	3 min
		13"	SAME AS PM FILE				
	3 S	3.5"	11:39	11:40	11:40	11:42	2 min
		13"	SAME AS PM FILE				
	4 S	3.5"	11:35	11:36	11:36	11:39	3 min
		13"	SIMILAR TO PROFILE		(yellow) RED color		MATRIX + (red) clay
1/22/88	5 S	5"	12:28	12:46	12:46	1:18	32 min
		12.5"	Frag exceeded 40% AT 9.5"				
	6 S	4.5"	12:29	12:30	12:30	12:32	2 min
		13"	SIMILAR TO PROFILE				

REMARKS: KEEP 10Kb area DOWN Holes 3-2-6 BETTER SOIL LESS ROCKY. Holes DIFF than PMT / REPAIR SHALLOW-SHALLOW ALL 545T.

TYPE OF SOIL: Glenelg Loam

TESTED BY: S. Abel

ALSO PRESENT: Dnl M. J. ANDREWS
C. Cisse



GENERAL NOTES

1. SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT No.
2. PROPOSED 1500 GALLON SEPTIC TANK
3. A. FIRST FLOOR ELEVATION: 608.10
 B. BASEMENT ELEVATION: 599.10
 C. INVERT OF SEPTIC SYSTEM AT HOUSE: 602.10
 D. INVERT IN AT SEPTIC TANK: 601.4
 E. INVERT OUT AT SEPTIC TANK: 604.20
 F. PROPOSED GRADE OVER SEPTIC TANK: 604.20
 G. INVERT AT DISTRIBUTION BOX: 600.7
 H. EXISTING GROUND OVER DISTRIBUTION BOX: 604.20
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.
6. THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM.

**Approved Septic System Plan
 Howard County Health Department**

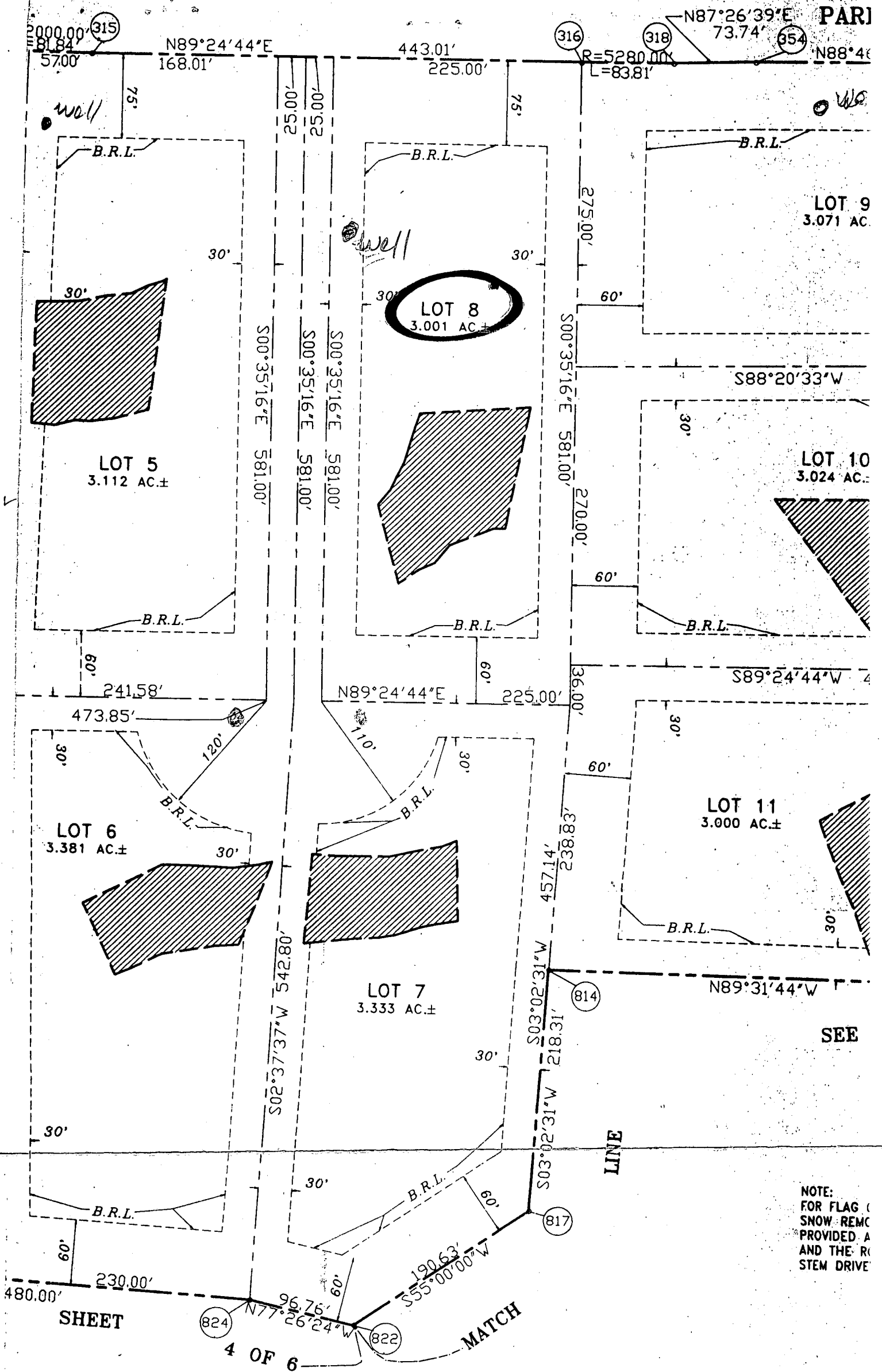
Donald S. [Signature]
Signature
 7/12/89
Date

Total linear feet of trench required 280 feet

Width of trench(es) 3 feet

Depth of trench(es) 5.5 feet

Depth of stone required around distribution pipe 2 feet



PART

OWNER AND DEVELOPER
 CARMAN ASSOCIATES
 P.O. BOX 122
 ELLICOTT CITY, MARYLAND 21043

OWNER'S CERTIFICATE

IRYLAND GENERAL PARTNERSHIP, BY RONALD B. CARTER, GENERAL PARTNER, AND PHILIP MANGLITZ, THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION AND...

I HEREBY CERTIFY THAT THE SUBDIVISION OF (1) ALL OF

C1 1570 SEQUENCE NO. (DENV 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 42461

ST/CO USE ONLY
 DATE RECEIVED

DATE WELL COMPLETED
 080390

Depth of Well
 345 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
 HC-88-1333

OWNER CARNEY ASSOCIATES
 STREET OR RFD. last name BUSHY PARK RD. TOWN GLENWOOD
 SUBDIVISION COUNTRY SPACES SECTION LOT 8

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 Stone	0	66	
GRAY MICH Red	66	345	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle, Appropriate Box) YES NO
 TYPE OF GROUTING MATERIAL
 CEMENT BENTONITE CLAY
 NO. OF BAGS 20 NO. OF POUNDS 180
 GALLONS OF WATER 120
 DEPTH OF GROUT SEAL (to nearest foot)
 from 0 ft. to 50 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 ST Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 345

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

DEPTH (nearest ft.)
 1 HO 129 345
 2 _____
 3 _____
 SLOT SIZE _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

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 _____
 70 _____ 72 _____ 74 75 76 _____
 TELESCOPE CASING LOG INDICATOR OTHER DATA

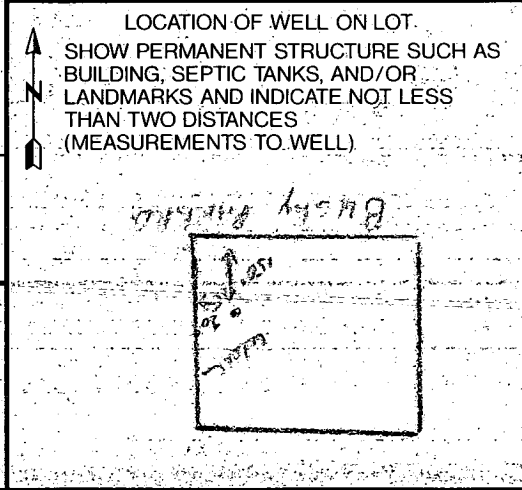
C 3
PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min. to nearest gal.) 45
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING 53
 WHEN PUMPING 215
 TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES
 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,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 } LAND SURFACE _____ (nearest foot)
 below }

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. 238
 DRILLERS SIGNATURE Joseph S. Marple
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



B 1 5727

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

STATE PERMIT NUMBER 10-88-1333

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

please print or type

fill in this form completely

Date Received (APA)

01 29 90

OWNER INFORMATION

CARMAN ASSOCIATES, 10 BOX 102, ELLICOTT CITY MD 21043

B 3

LOCATION OF WELL

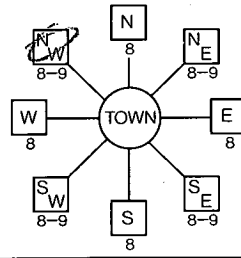
HOWARD COUNTY, COUNTRY SPRINGS SUBDIVISION, LOT 8, GLENWOOD, 2 MILES FROM TOWN

DRILLER INFORMATION

Joseph R. Mayne, 238, Joseph R. Mayne WELL DRILLING, 5512 Ridge Rd. Mt. Airy Md. 21771, 1/29/90

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Bushy park Road NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



155 DISTANCE FROM ROAD, ENTER FT or MI FT

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, A42461 COUNTY NO., STATE SIGNATURE, DATE ISSUED 050990, CO SIGNATURE Craig William, EXP. DATE 11/9/90, NORTH GRID 540000, EAST GRID 0790000

APPROXIMATE DEPTH OF WELL 260 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered), JETTED, Jetted & DRIVEN, AIR-ROTary, AIR-PERCussion, ROTARY (Hydraulic Rotary), CABLE, REVerse-ROTary, DRIVE-POINT

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)

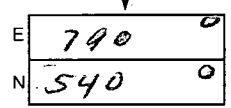
Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE CW PERMIT No. 10-88-1333

SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X, SOURCES OF DRILLING WATER 1. WELL, WRITE THE BOX NUMBER FROM THE MAP HERE



9:30 Grout 8/3/90, 20 bags cement, 71 ft casing, 50+ ft open hole, 3 ft stick up, location ok, JE Nadeau

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

