

4/14/89  
Info

#313727

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

P 43604  
A 42541  
DISTRICT 3rd  
DATE 2/9/89  
DATE SYSTEM APPROVED 4/14/89  
INSPECTOR RH

Fogle Septic Services  
Arnold Backhoe & Septic Services, Inc. IS PERMITTED TO INSTALL  ALTER   
ADDRESS P.O. Box 15, Woodbine, Maryland 21797 PHONE 795-7873  
SUBDIVISION Bronk Property ROAD 575 Deer Hill Rd LOT \_\_\_\_\_  
PROPERTY OWNER Richard Nieberline PHONE: 465-8390  
ADDRESS \_\_\_\_\_

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3.0 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - ~~Start~~ the first trench 230 feet from the front lot line and 10 feet from the left lot line as seen when facing the lot from Deer Hill Road. Run trenches on contour toward the right lot line.

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

230

PLANS APPROVED BY Sid Abel DATE 11/14/88

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

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES

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 40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

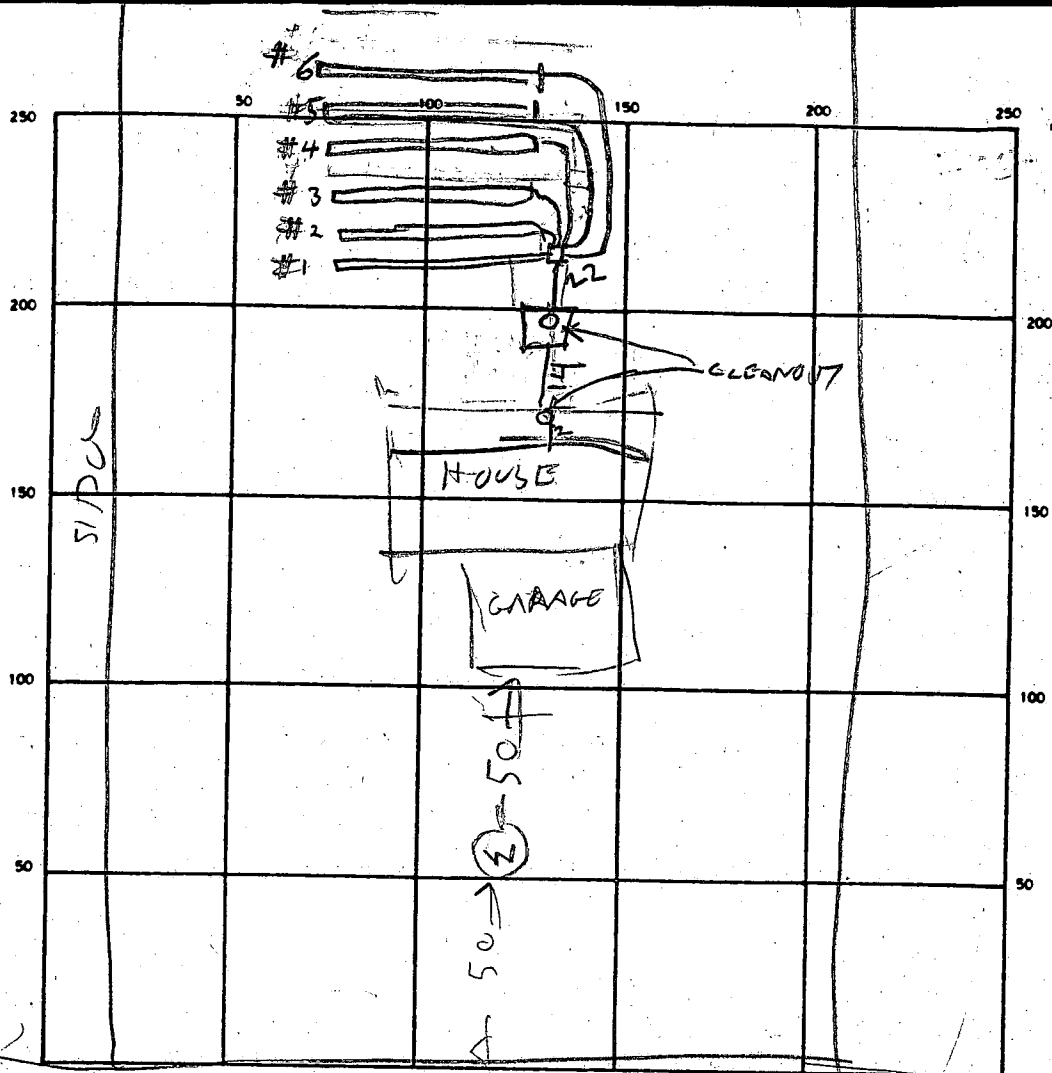
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A  
42541



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK 1250

CLEANOUTS ST  
OK

DISTRIBUTION BOX LEVEL 1 OK

DRAIN FIELD/TILE FIELD DEPTH 

1	2	3	4	5	6
5	5	4	4	4	4

 FT.

TRENCH WIDTH \_\_\_\_\_ FT.

INLET DEPTH \_\_\_\_\_ FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 

1	2	3	4	5	6
45	47	48	46	44	46

 FT. 276

NUMBER OF TRENCHES 6

ONE SIDEWALL/BOTTOM AREA 828 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT.

EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 4/14/89 - LOCATION OK

DATE SYSTEM APPROVED 4/14/89

INSPECTOR Raymond Hodge

9-16-88  
1:30 PM  
AKB

# APPLICATION

PERCOLATION TESTING

A 42541

P \_\_\_\_\_

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

NO RECORD of Previous  
TEST

DISTRICT 3RD

DATE ~~March 19, 1987~~  
Sept 8, 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 CHARLES E. BRONK ✓

ADDRESS 571 DEER HILL RD SYKESVILLE PHONE 442-5767 ✓

PROSPECTIVE BUYER \_\_\_\_\_

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

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION 575 DEER HILL RD (OFF RT. 32 E. SIDE) LOT SOUTH OF  
571

TAX MAP 04 PARCEL # 18

SIZE OF LOT 72 X 423 .69 ACRES TYPE BLDG. SINGLE FAMILY  
(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.

Candace P. Bronk  
(SIGNATURE OF APPLICANT)

APPROVED BY Sidny Abel FOR Standard trench DATE 12-2-88

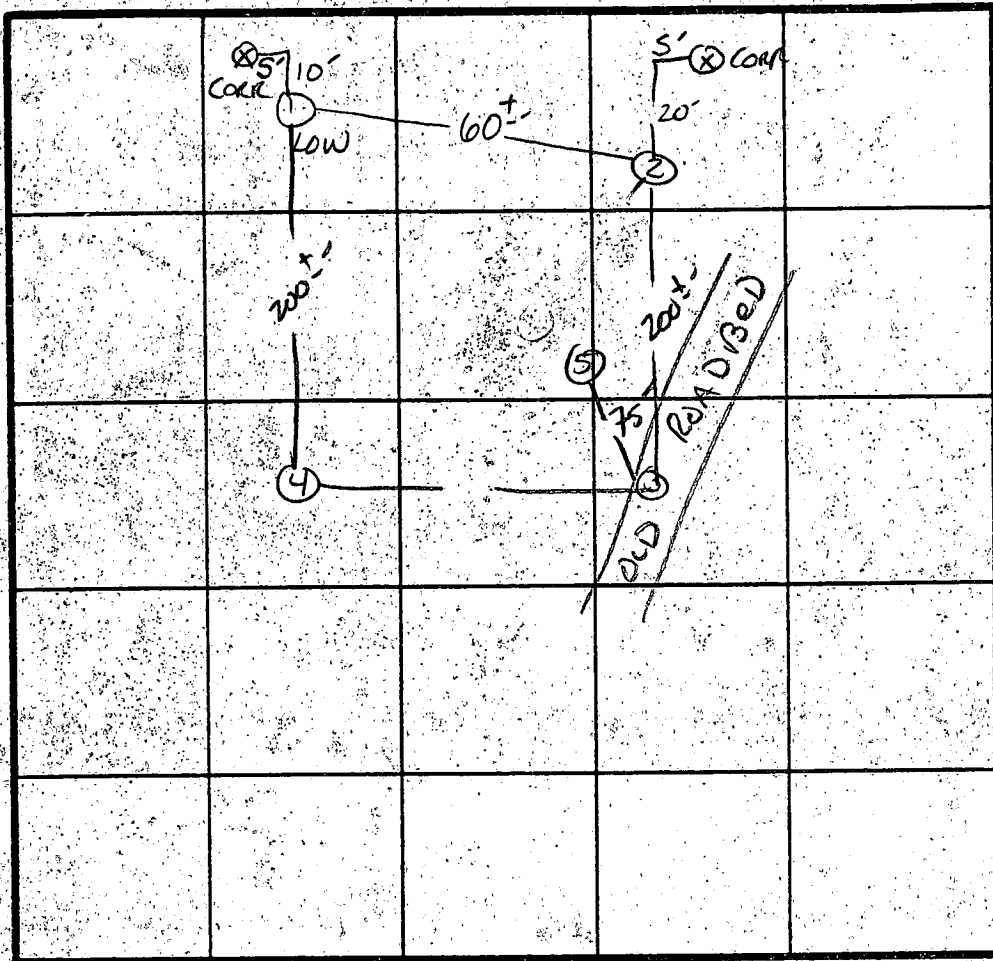
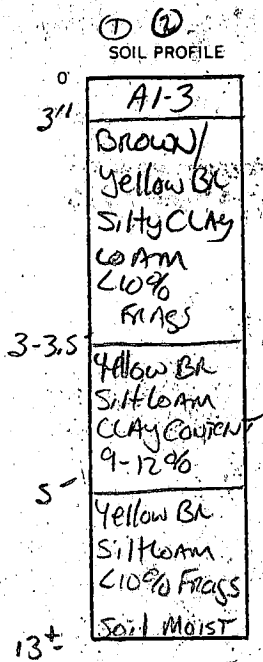
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING 9-16-88 Perce Satisfactory - Hold for Plot & Lot  
Certification S.A.C.

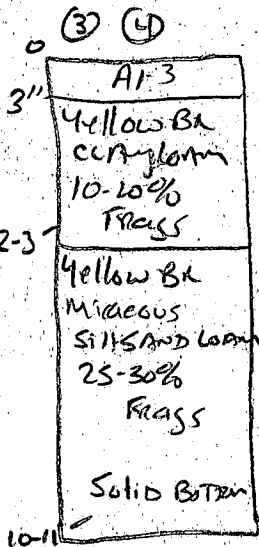
BLDG. PERMIT SIGNED  
AND RETURNED 12-2-88  
BP 22812 88

# THIS IS NOT A PERMIT



7 Perc 10min  
Inlet 3.0  
Bottom 5.0  
210 φ/br

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE:  
Deer Hill Rd.



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/14/88	1 S	3'	2:06	2:19	2:19	2:46	27 min
	1 V	13.5'	Soil Pen Profile		Soil wet AT 13.5'		NO H <sub>2</sub> O
	2 S	3'	2:09	2:13	2:13	2:28	15 min
	2 V	13.0'	Soil Pen Profile				
	3 S	3.5'	2:49	2:50	2:50	2:52	2 min
	3 V	11'	Solid bottom AT 11'				
	4 S	2'	2:46	2:47	2:47	2:49	2 min
	4 M	6'	2:40	2:42	2:42	2:46	4 min
	4 V	10'	Solid bottom - see Profile				
	5 V	12'	similar to #1 & 2 w/ no clay		below 30"		

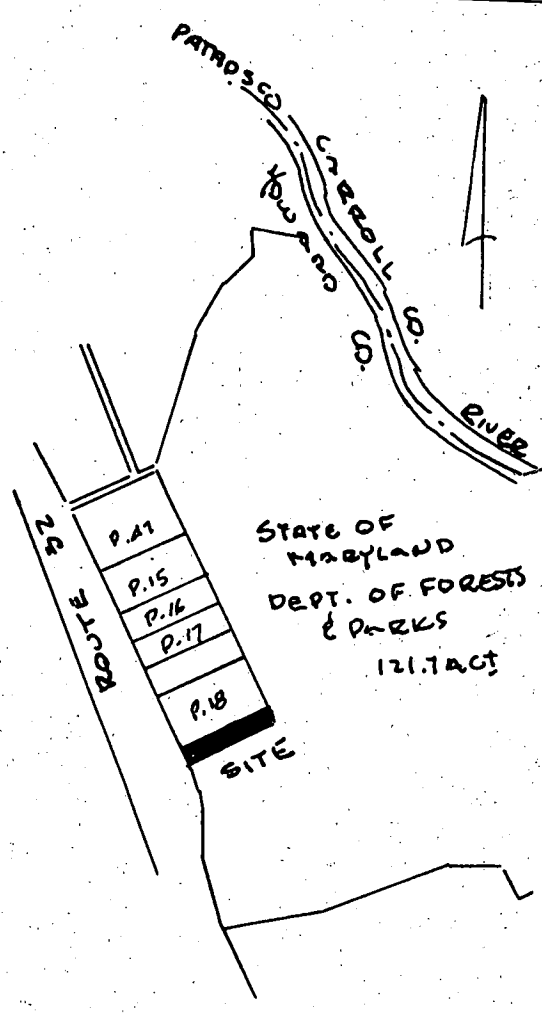
REMARKS Lot Coar. Found / Shallow SYST only

TYPE OF SOIL

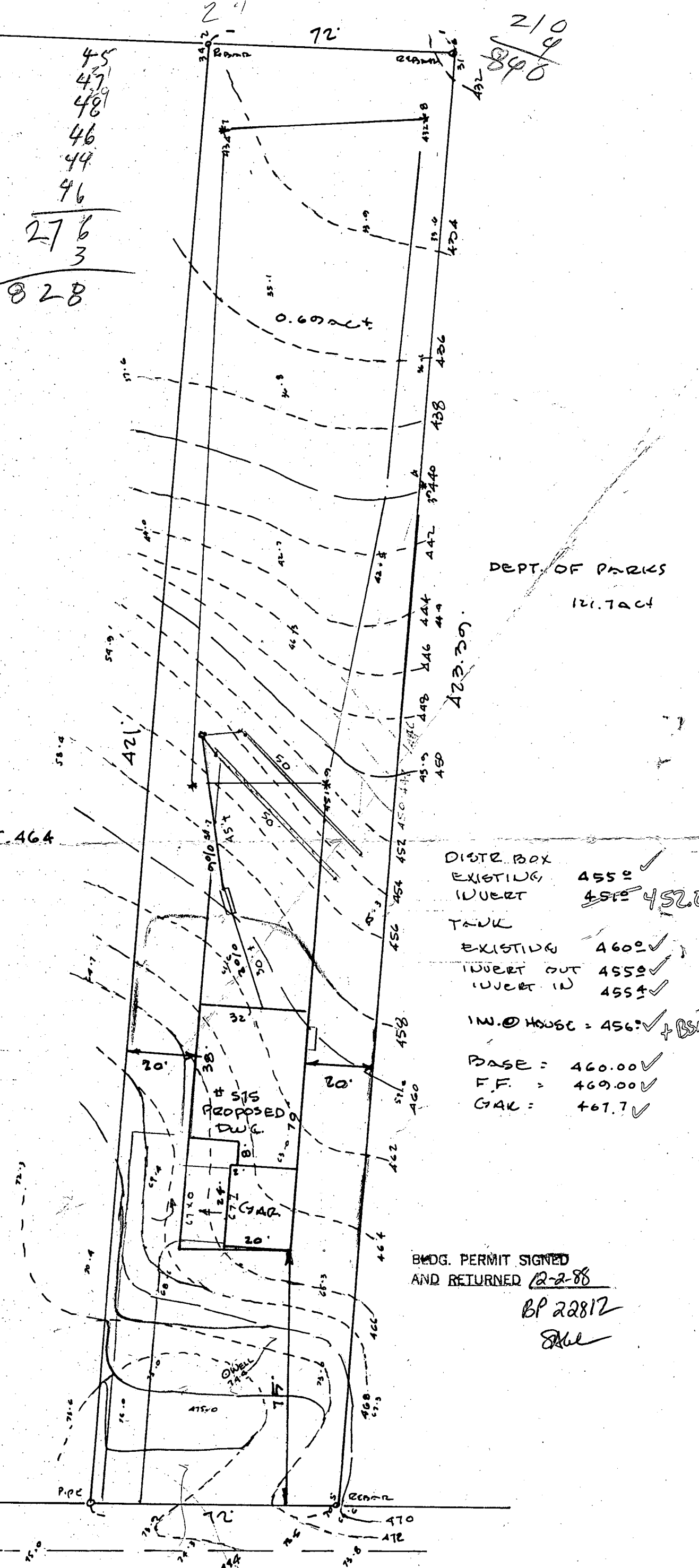
TESTED BY S. Pbol

ALSO PRESENT Mrs. Bronk Skip, Woody

EH 12-1079



TAX MAP 4 PARCEL 2C



PARCEL NO. 2 L. 514 F. 464  
 3RD ELECTION DISTRICT  
 HOWARD CO. MD  
 SCALE 1" = 30' DEC. 1, 1988

45  
 47  
 48  
 46  
 44  
 46  
 ---  
 276  
 3  
 ---  
 828

210  
 4  
 ---  
 840

DISTR. BOX  
 EXISTING 455' ✓  
 INVERT 452' ✓  
 452.0 ✓  
 TANK  
 EXISTING 460' ✓  
 INVERT OUT 455' ✓  
 INVERT IN 455' ✓  
 IN. @ HOUSE = 456' ✓ + BSMT  
 BASE = 460.00 ✓  
 F.F. = 469.00 ✓  
 GAR. = 467.7 ✓

BUDG. PERMIT SIGNED  
 AND RETURNED 12-2-88  
 BP 22812  
 [Signature]

DEER HILL ROAD

B 1 7911 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

40-88-0298  
fill in this form completely

Date Received (APA)

02788

OWNER INFORMATION

NIEBERLYNE RICHARD

BRZYCHURCH LANE

ELIOT CITY MD 21043

DRILLER INFORMATION

Joseph L. Wayne 236  
77 License No. 80

Joseph L. Wayne Well Drilling  
5512 Ridge Rd. Mt. Airy, Md. 21771

Address: 5512 Ridge Rd. Mt. Airy, Md. 21771

Signature: Joseph L. Wayne Date: 10/19/88

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)

APPROXIMATE DEPTH OF WELL 200 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
- other \_\_\_\_\_

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 CM WRITE INITIALS IN BOX PERMIT NO. 40-88-0298

SPECIAL CONDITIONS 465-8390

LOCATION OF WELL

TOWARD

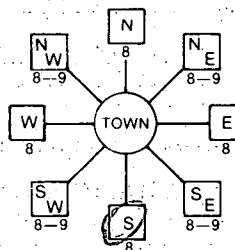
PARCEL 20

SECTION LOT

SVK SVLK

MILES FROM TOWN (enter 0 if in town) 1 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Dear Hill Road NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 35 FT

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard A 42541  
COUNTY NAME COUNTY NO.

STATE SIGNATURE DATE ISSUED INSERT S

111188 Signature Date: 05-13-89  
CO SIGNATURE EXP. DATE

NORTH GRID 553000 EAST GRID 0810000

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

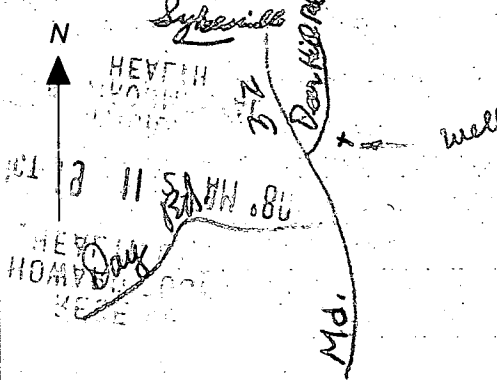
- SOURCES OF DRILLING WATER
- 1. WELL
- 2.
- 3.

WRITE THE BOX NUMBER FROM THE MAP HERE

800 10  
550 3

11/2/88 PER WELL DRILLER  
9 BAGS OF CEMENT  
80 FEET OF CASING  
2 FT OF CASING A.G.  
35 FT OF GROUT  
ALREADY GROUTED  
YAGOK CBS

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



**C1** 6638 SEQUENCE NO. (DENY 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 42541**

DATE RECEIVED [ ] [ ] [ ] [ ] [ ] [ ] DATE WELL COMPLETED **1/22/88** Depth of Well **145** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-88-0298**

OWNER **MICHERLINE RICHARD** last name first name  
 STREET OR RFD **DEER HILL ROAD** TOWN **SYKESVILLE**  
 SUBDIVISION **PARCEL 20** SECTION LOT

**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	
Brown Shale	0	73	
Gray Gneiss	73	145	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **9** NO. OF POUNDS **846**  
 GALLONS OF WATER **54**  
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **35** ft.

**CASING RECORD**  
 casing types insert appropriate code below  
**ST** **CO** **PL** **OT**  
 STEEL CONCRETE PLASTIC OTHER  
 MAIN CASING TYPE Nominal diameter (nearest inch) Total depth of main casing (nearest foot)  
**S7** **6** **80**

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

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

**C2**  
 DEPTH (nearest ft.)  
 E A C H S C R E E N  
 1 **H0** **97** **145**  
 2 [ ] [ ] [ ] [ ] [ ] [ ]  
 3 [ ] [ ] [ ] [ ] [ ] [ ]  
 4 [ ] [ ] [ ] [ ] [ ] [ ]  
 5 [ ] [ ] [ ] [ ] [ ] [ ]

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 10.17.13 "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 *[Signature]*  
 (MUST MATCH SIGNATURE ON APPLICATION)

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

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 T (E.R.O.S.) WQ  
 70 [ ] 72 [ ] 74 [ ] 75 [ ] 76 [ ]  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **85**  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface) BEFORE PUMPING **34** WHEN PUMPING **42**  
 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 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 } LAND SURFACE (nearest foot) **2**  
 (-) below }

