

9/22/00  
ASPP -  
water @ tank  
hole

# 352327

# PERMIT

**SEWAGE DISPOSAL SYSTEM**  
HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
410-313-2640

P 513642

A 42613

ISSUE DATE 6/20/2000

APPROVAL DATE 8/8/00

**INDEXED**

C & C Utility Services, Inc. IS PERMITTED TO INSTALL  ALTER

ADDRESS 7398 Gaither Road, Sykesville, MD 21784 PHONE 410-549-4987

SUBDIVISION Warfields Grant I LOT NUMBER 9 ADDRESS 16024 Pheasant Ridge Court

PROPERTY OWNER Stephen & Nicole Stickey PROPERTY OWNER'S ADDRESS 3208 St Augustine Court

SEPTIC TANK CAPACITY 1250 GALLONS

PUMP CHAMBER CAPACITY N/A GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 240 180

TRENCHES: Trenches to be 3.0 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 6.5 feet below original grade. ~~1.5~~ 3 feet of stone below distribution box.

LOCATION: Starting from the intersection of the 463.00' and the 433.79' lot lines, place the distribution box 140 feet down the 433.79' lot line and 145 feet off that same lot line. Run trenches on contour in both directions.

6/27/00 INSTALL 3,600' trenches all

4/22/00 8:15 a.m. spoke to Mr. Lepp - he reports water in septic tank hole. He will dig perc hole and wait for inspector. DIS

PLANS APPROVED Amy Mc Millen OK 4/24/00 OLS DATE 3/6/00

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

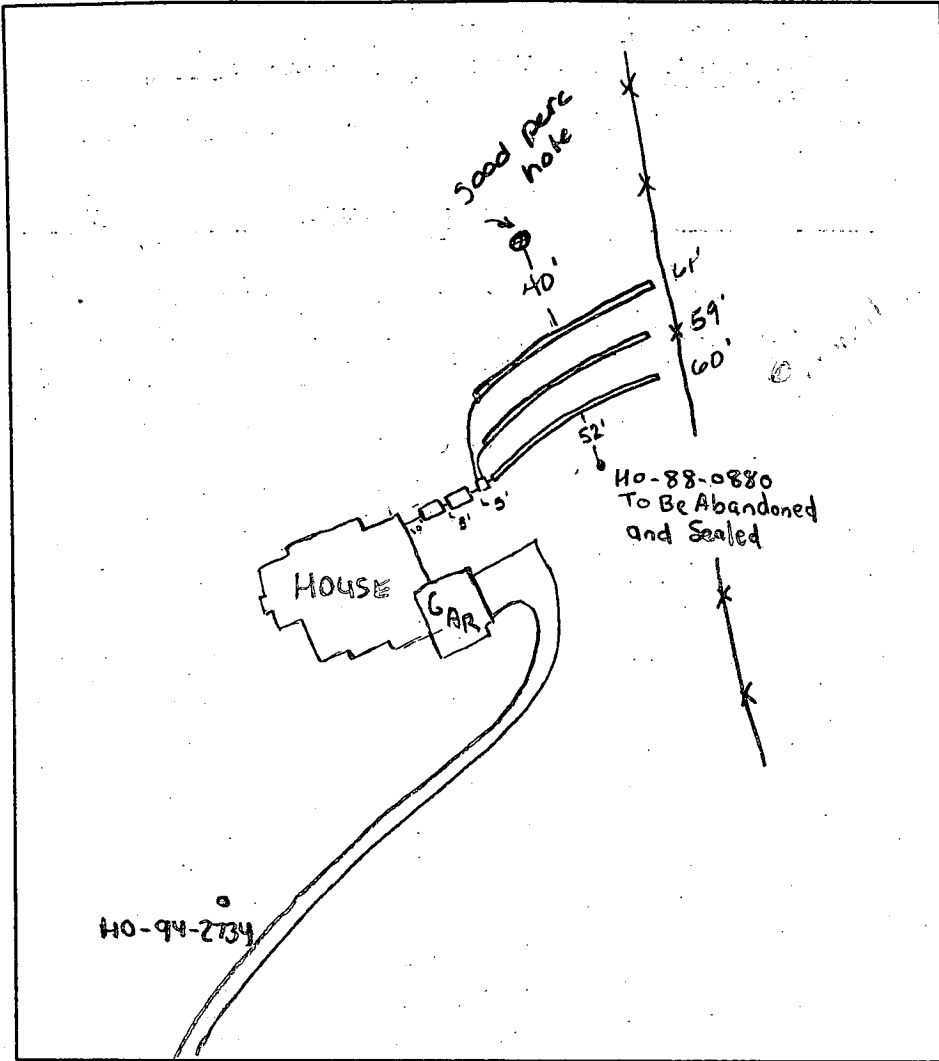
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM  
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT  
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

42613

NOT TO SCALE



**TRENCH DATA**

TRENCH WIDTH 3.0  
 TRENCH INLET DEPTH 3.5  
 TRENCH BOTTOM DEPTH 6.5  
 DEPTH OF STONE 3.0  
 NUMBER OF TRENCHES 3  
 TOTAL TRENCH LENGTH 180  
 ABSORBENT AREA 720  
 DISTRIBUTION BOX LEVEL OK  
 BAFFLE IN DISTRIBUTION BOX

**SEPTIC TANK DATA**

SEPTIC TANK 1250 GALLONS  
 MANHOLE RISER   
 6 INCH INSPECTION PORT

**PUMP CHAMBER DATA**

PUMP CHAMBER GALLONS 1250  
 MANHOLE RISER   
 ALARM N/A  
 PUMP PERFORMANCE TEST N/A

PRE-CONSTRUCTION INSPECTION: \_\_\_\_\_

INSPECTION COMMENTS: 6/27/00 Recorded SAA has H<sub>2</sub>O at high end @ 6.0' Percs higher on lot OK but well needs to be moved. Install septic trenches at high end of new SAA or 2nd highest area if a future pump chamber is installed maintain 25' off abandoned well site 8/8/00 Trenches OK - Repair area is below OK. System & future pump above all

INSPECTOR A McMill DATE SYSTEM APPROVED 8/8/00

MARYLAND DEPARTMENT OF THE ENVIRONMENT, WATER MANAGEMENT ADMINISTRATION  
 2500 BROENING HIGHWAY, BALTIMORE, MARYLAND 21224, (410) 631-3784

\*\*\*\*\*  
 WATER WELL ABANDONMENT-SEALING REPORT FORM  
 \*\*\*\*\*

SUBMIT COPIES OF COMPLETED FORM TO:

- \* COUNTY ENVIRONMENT AGENCY (contact MDE, WMA if address needed)
- \* WELL OWNER
- \* MDE, WATER MANAGEMENT ADMINISTRATION, WELL PROGRAM

DATE WELL ABANDONED: October 3, 2000 (month/day/year)

\* PERMIT NUMBER OF ABANDONED WELL (if any) HO — 88 — 0880

\* PERMIT NUMBER OF REPLACEMENT WELL \_\_\_\_\_

\* PERSON ABANDONING WELL: Ronald Kyker

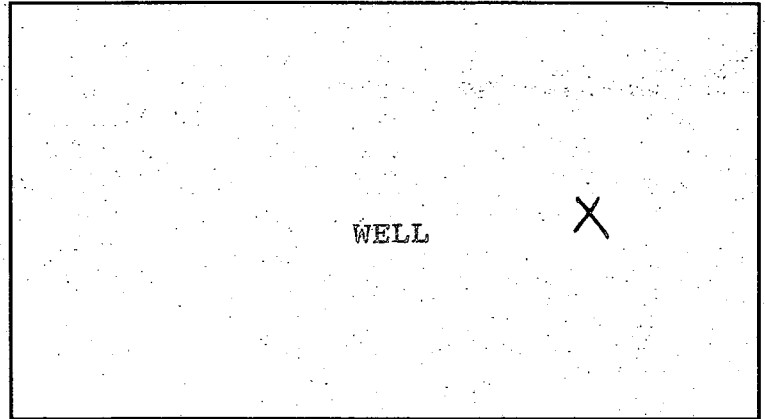
WELL DRILLERS LICENSE NUMBER: MWD296

CIRCLE: MWD/MSD/MGD

\* OWNER'S NAME: Steve Stickle

SITE LOCATION MAP

\* WELL LOCATION:  
 COUNTY: Howard  
 NEAREST TOWN: LISBON  
 TAX MAP \_\_\_\_\_ BLOCK: \_\_\_\_\_ PARCEL \_\_\_\_\_  
 SUBDIVISION: Warfields Grant  
 SECTION: \_\_\_\_\_ LOT: 9  
 NEAREST ROAD: Pheasant Ridge



\* TYPE OF WELL BEING ABANDONED:

- DRILLED \_\_\_\_\_ JETTED
- \_\_\_\_\_ BORED/AUGERED \_\_\_\_\_ HAND DUG
- \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

\* USE CODE:

- DOMESTIC \_\_\_\_\_ MUNICIPAL/PUBLIC
- \_\_\_\_\_ IRRIGATION \_\_\_\_\_ INDUSTRIAL
- \_\_\_\_\_ TEST/OBSERVATION \_\_\_\_\_ GEOTHERMAL

\* TYPE OF CASING:

- STEEL \_\_\_\_\_ PLASTIC
- \_\_\_\_\_ CONCRETE \_\_\_\_\_ OTHER (specify) \_\_\_\_\_

\* SIZE OF CASING: 6 INCHES IN DIAMETER

\* DEPTH OF WELL: 205 FEET DEEP

\* WAS ANY CASING REMOVED? \_\_\_\_\_ YES  NO  
 if yes, length removed, in feet: \_\_\_\_\_

\* WAS CASING RIPPED OR PERFORATED? \_\_\_\_\_ YES  NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Cement (3yards)	0	205
VOLUME OF MATERIAL USED		

SIGNATURE Ronald Kyker  
 \_\_\_\_\_  
 SIGNATURE - MASTER WELL DRILLER OR SUPERVISING SANITARIAN

MWD296  
 \_\_\_\_\_  
 LICENSE #

MWD/MSD/MGD  
 \_\_\_\_\_  
 CIRCLE ONE

Oct 10 - 2000  
 \_\_\_\_\_  
 DATE

Approved Septic System Plan  
Howard County Health Department

Total linear feet of trench required 240 feet  
Width of trench(es) 3.0 feet  
Depth of trench(es) 5.0 feet

Depth of stone required below distribution pipe 1.5 feet

Andrew Miller 3/6/00  
Signature Date

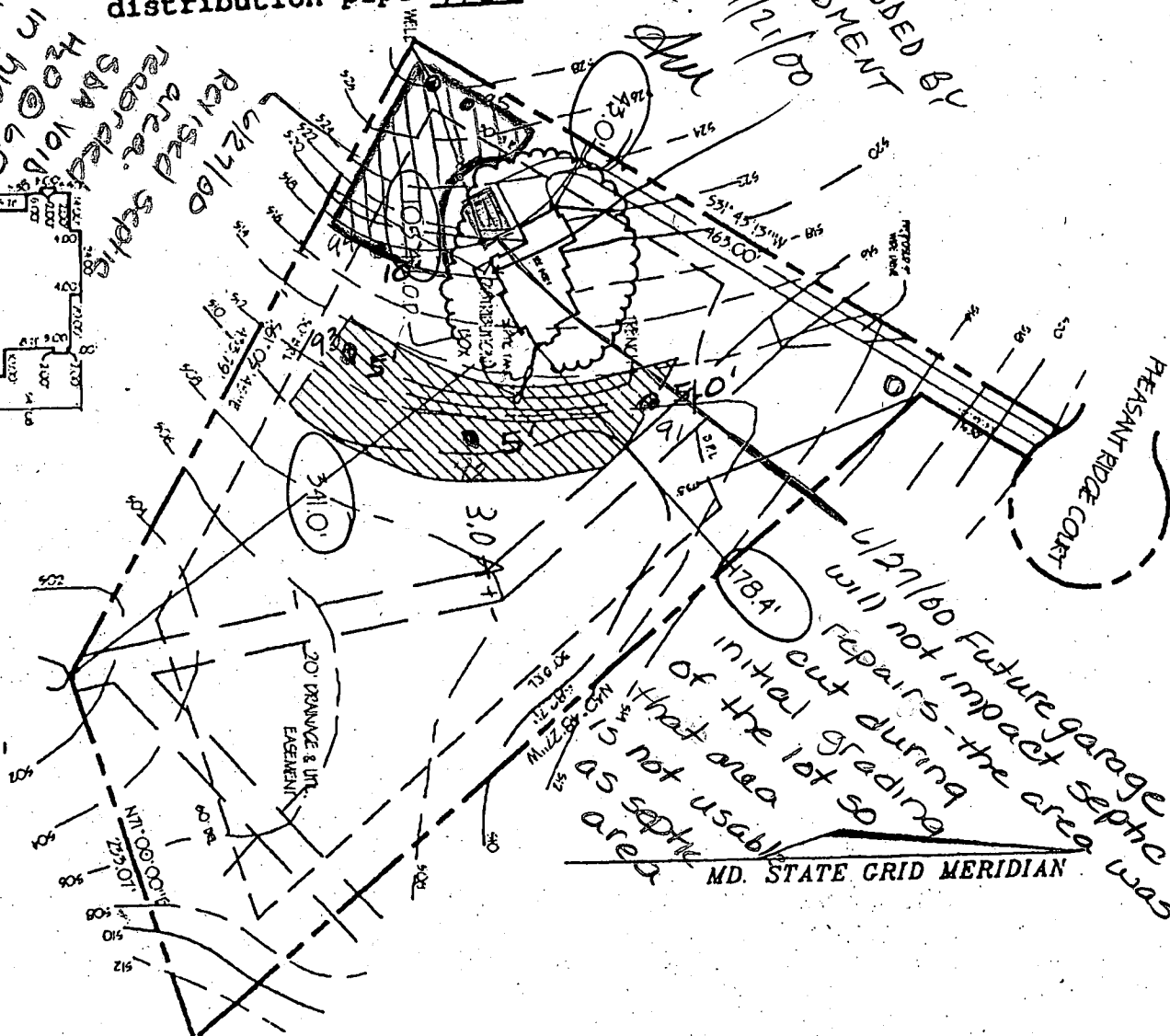
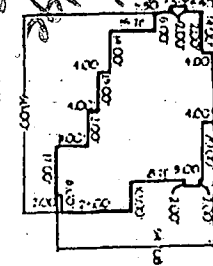
10/10/00  
If it looks like the parking pad can come 35' out from the edge of the garage & not encroach on septic area. 4/21/00  
DECK ADDED BY AMENDMENT

There is room for repairs -  
See repairs -  
permits

GENERAL NOTES

1. ELEVATIONS
- A. BASEMENT: 616.0
- B. FIRST FLOOR: 623.0
- C. INVERT OUT OF HOUSE: 610.7
- D. INVERT INTO SEPTIC TANK: 610.6
- E. INVERT OUT OF SEPTIC TANK: 610.2
- F. INVERT INTO DISTRIBUTION BOX: 610.0
- G. INTERIOR INTO TRENCH: 609.5
- H. EXISTING GRADE AT SEPTIC TANK: 614.0
- I. EXISTING GRADE AT DISTRIBUTION BOX: 613.0
- J. EXISTING GRADE AT TRENCH: 613.0
- K. ELEVATION AT WELL AT GRADE: 686.7

6/27/00  
REVISOR  
AREA REPAIRED FOR 504 VOID IN HIGH EDGE AREA FOR AN INITIAL SURVEY



PROPERTY INFO: WYRPLEY'S GRANT LOT 9  
PLAT NO. 8802

PLOT PLAN FOR PROPOSED  
SINGLE FAMILY DWELLING

DATE: 2/16/00  
SCALE: AS SHOWN

BUILDER: TRADITION HOME BUILDERS INC.  
4640 TEN OAKS ROAD  
DAYTON, MARYLAND, 21098  
(410) 631-9203

PREPARED BY:  
MARKS & ASSOCIATES L.L.C.  
4531 COLLEGE AVENUE  
ELICOTT CITY, MARYLAND 21043  
(410) 747-8798

PLAN SCALE: 1" = 20'

11/3/00 FF ELEV. RAISED TO 52.5.0

OK (MR)

6/27/00 Future garage or future repairs - the area will not impact during initial grading of the lot so that area is not usable as septic area  
MD. STATE GRID MERIDIAN

LOT 20  
3.05 Ac. ±  
COPY OF  
SIGNED  
PRELIMINARY

LOT 19  
3.44 Ac. ±

LOT 16  
3.63 Ac. ±

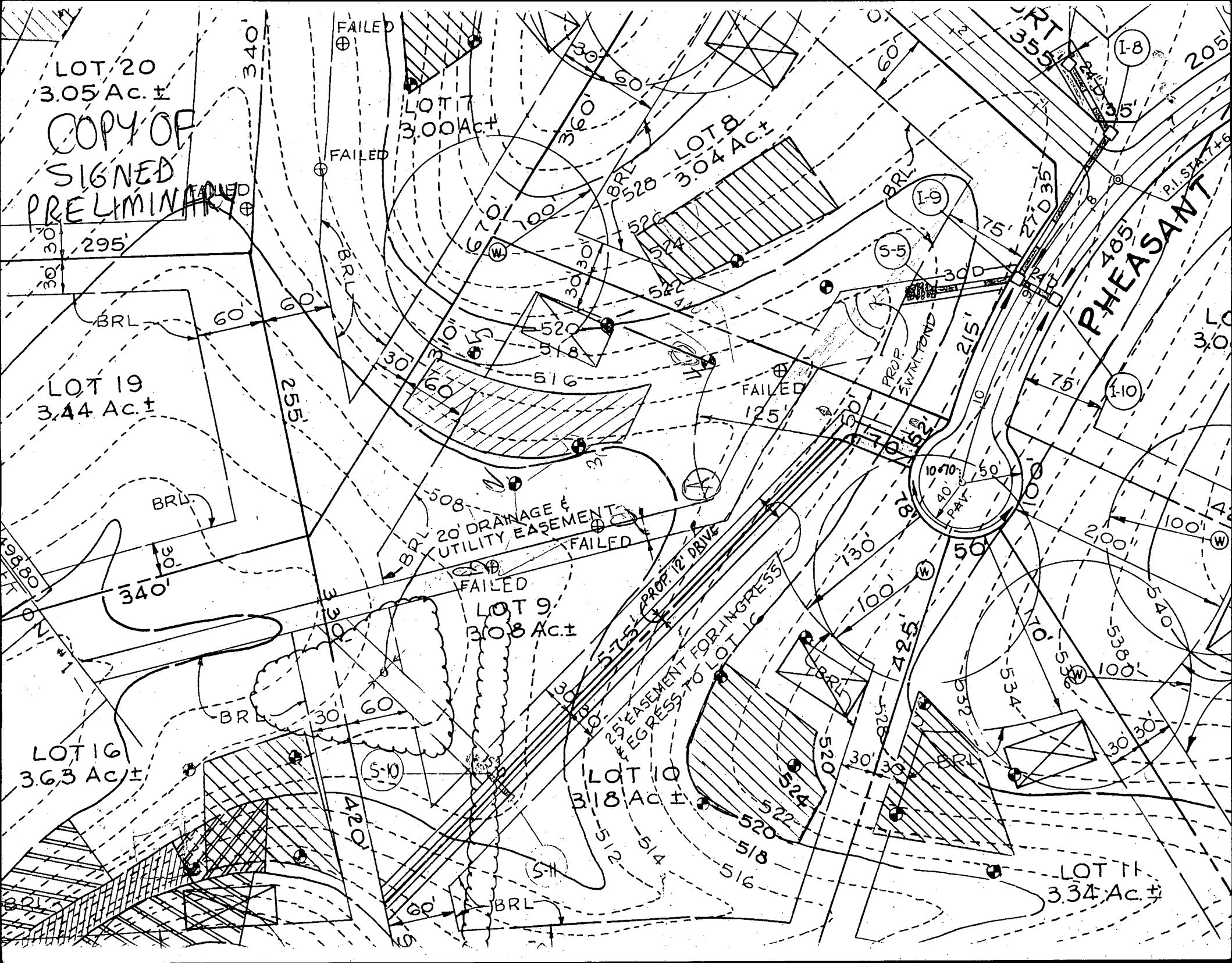
LOT 17  
3.00 Ac. ±

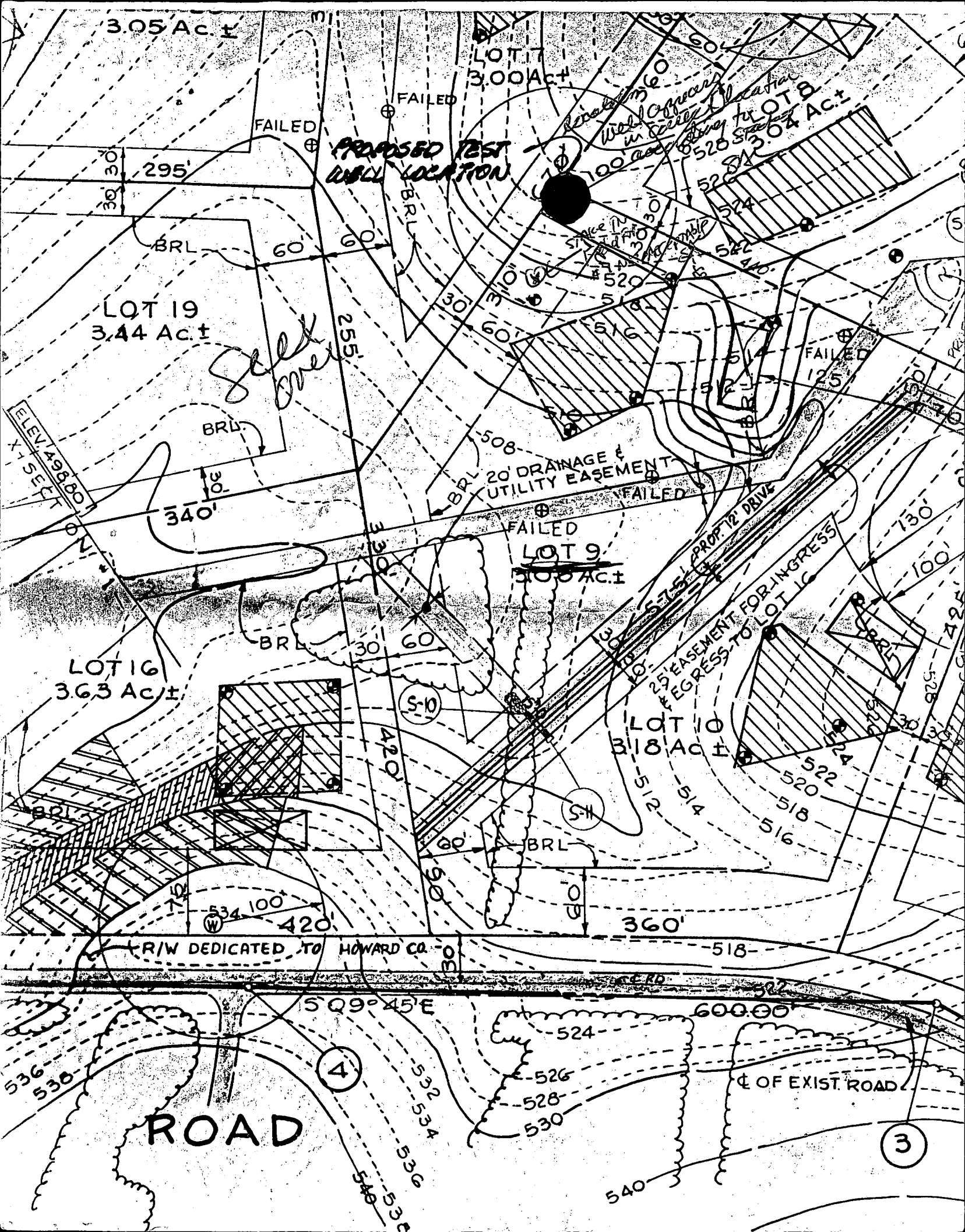
LOT 8  
3.04 Ac. ±

LOT 9  
3.08 Ac. ±

LOT 10  
3.18 Ac. ±

LOT 11  
3.34 Ac. ±





3.05 Ac. ±

LOT 17  
3.00 Ac. ±

LOT 18  
3.04 Ac. ±

**PROPOSED TEST  
WELL LOCATION**

LOT 19  
3.44 Ac. ±

LOT 9  
3.08 Ac. ±

LOT 16  
3.63 Ac. ±

LOT 10  
3.18 Ac. ±

ELEV. 498.00  
X-SECT

295'

BRL

340'

FAILED

FAILED

FAILED

FAILED

BRL 20' DRAINAGE &  
UTILITY EASEMENT

PROP. 12' DRIVE  
& EGRESS TO LOT 16

R/W DEDICATED TO HOWARD CO.

ROAD

☐ OF EXIST. ROAD

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7/14/89

all corners located  
well appears to be in correct  
place according to these lot corners.  
pic area regularly located and is  
approx 100' away

AK

copy

copy

C1 07818

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED. 8/2/00 O.K. (BB)

COUNTY NUMBER 42613

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-2734

OWNER Stickleby last name Phasant Ridge CT first name TOWN Daisy

STREET OR RFD SUBDIVISION Wantfields Grant SECTION I LOT 9

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 Dirt, Clay & Br. Schist, Soft Br. Schist, etc.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (CM, BC) NO. OF BAGS 25 NO. OF POUNDS 2350

CASING RECORD

MAIN CASING TYPE (S, T) Nominal diameter 6 Total depth 78

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

SCREEN RECORD

screen type or open hole (S, BR, HO) insert appropriate code below

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 8.5 METHOD USED TO MEASURE PUMPING RATE submersible

PUMP INSTALLED

DRILLER INSTALLED PUMP (YES/NO) TYPE OF PUMP INSTALLED (S) CAPACITY: GALLONS PER MINUTE 31

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED: (Y/N)

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION"

DRILLERS LIC. NO. 1 M W D 2 9 6 1 Ronald Kyker

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 JWD 334

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

DEPTH (nearest ft.)

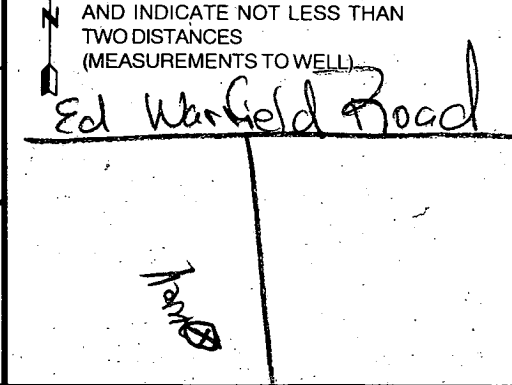
Table with columns: H, O, 78, 505. Rows 1-6 for casing depth.

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

LOCATION OF WELL ON LOT



B 1 4227 SEQUENCE NO. (MDE USE ONLY)  
 1 2 3 6

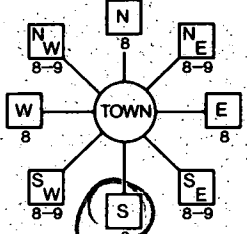
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
HO-94-2734  
 70 fill in this form completely 79

Date Received (APA) 07/12/00  
 8 MM DD YY 13  
 OWNER INFORMATION  
 15 Last Name Stickley 34 First Name Stephen  
 36 Street or RFD 3208 Saint Augustine Court 55  
 57 Town Olney 70 State MD 72 Zip 20832 76

B 3 LOCATION OF WELL  
 8 COUNTY Howard 21  
 23 SUBDIVISION Warfields Grant 42  
 SECTION 44 46 LOT 9 48 50  
Lisbon 52 NEAREST TOWN 71  
 MILES FROM TOWN (enter 0 if in town) 3 M I  
 73 76 77 78

DRILLER INFORMATION  
 76 Driller's Name Ronald Kyker 81 License No. MWD 296  
 Firm Name Westminster Rotary Well Drilling  
 Address P.O. Box 861 Westminster, Md 20838  
 Signature Ronald Kyker Date 7/8/00

B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  


Pheasant Ridge Ct  
 11 NEAR WHAT ROAD 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 34 80 37 DISTANCE FROM ROAD FT 38 39  
 ENTER FT OR MI  
 TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

B 2 WELL INFORMATION  
 7 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
Howard Co. A42613  
 COUNTY NAME COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ INSERT S →  
 DATE ISSUED 07/12/00 45 MCM/LL 7/12/01  
 43 MM DD YY 48 CO SIGNATURE EXP. DATE  
 NORTH GRID 530 000 EAST GRID 770 000  
 50 55 57 63

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 22  INDUSTRIAL, COMMERCIAL, DEWATERING  
 PUBLIC WATER SUPPLY WELL  
 TEST, OBSERVATION, MONITORING  
 GEO-THERMAL

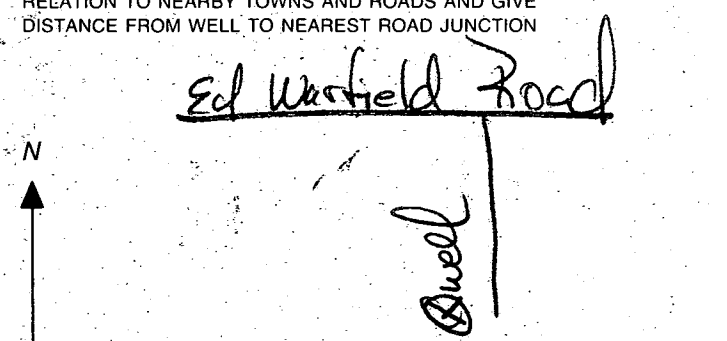
APPROXIMATE DEPTH OF WELL 200 FEET 24 28  
 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST

METHOD OF DRILLING (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 30 ROT-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)  
 37 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  
 39  THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 THIS WELL WILL DEEPEAN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 \_\_\_\_\_ 52

Not to be filled in by driller (MDE OR COUNTY USE ONLY)  
 APPROP. PERMIT NUMBER 54 \_\_\_\_\_ 63  
 PERMIT No. HO-94-2734  
 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. City  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E 770  
 N 530  
 7/14/00 11:00  
 21 bags as of 12pm  
 80' casing  
 Type of Grout Portland Cement Type II  
 Openhole = 69-70'  
 500' Deep (Well)  
 Grout didnt appear to sink  
 (SRM)

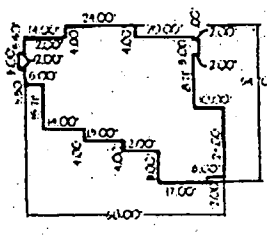
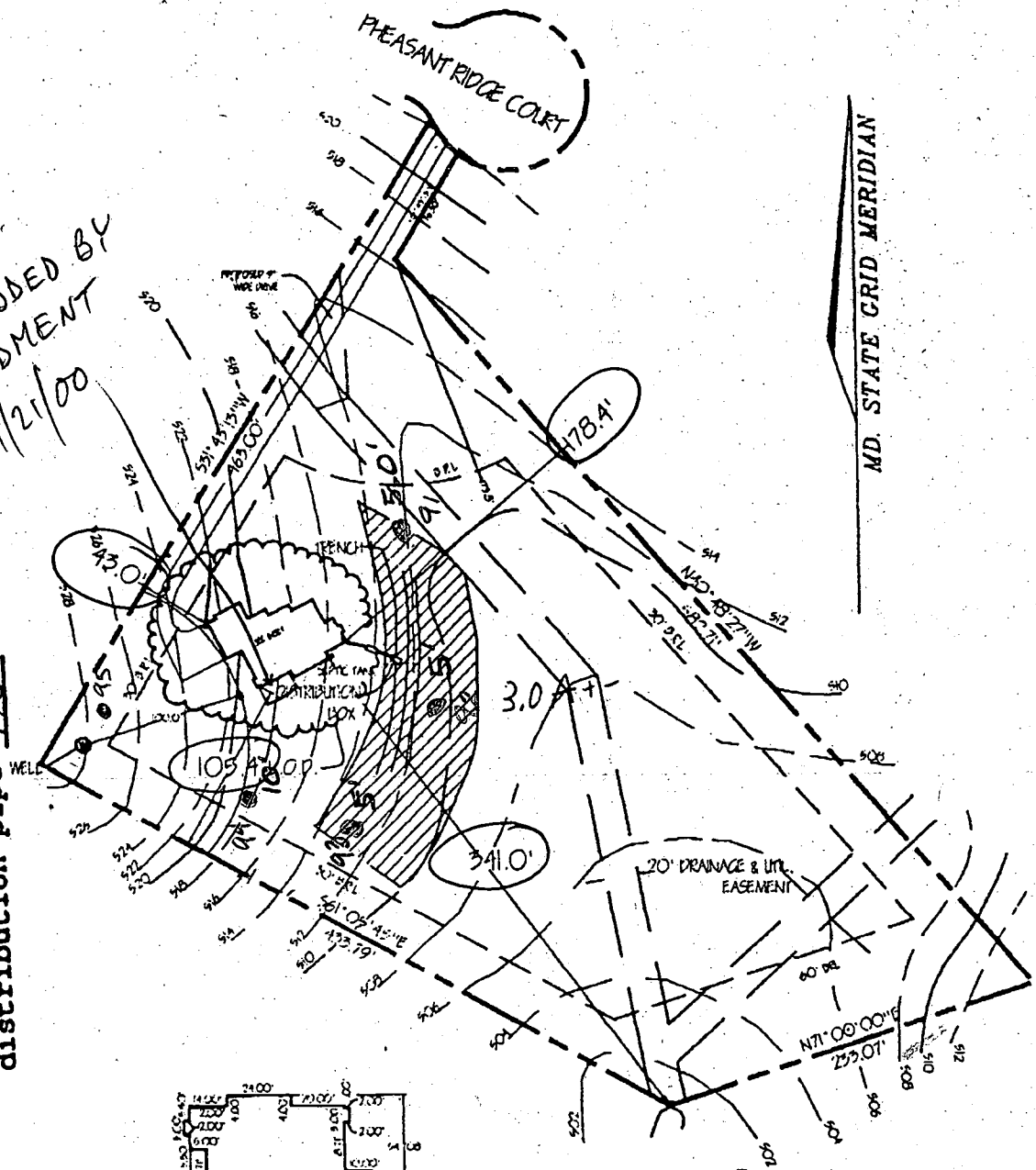
DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION  


Approved Septic System Plan  
Howard County Health Department

Total linear feet of trench required 270 feet  
 Width of trench(es) 3.0 feet  
 Depth of trench(es) 5.0 feet  
 Depth of stone required below distribution pipe 1.5 feet

DECK ADDED BY AMENDMENT  
 MR OK 4/21/00

*[Signature]*  
 Signature Date



**PLOT PLAN FOR PROPOSED SINGLE FAMILY DWELLING**  
 DATE: 2/16/00  
 SCALE: AS SHOWN

BUILDER: TRADITION HOME BUILDERS INC.  
 4540 TEN OAKS ROAD  
 DAYTON, MARYLAND, 21038  
 (410) 631-9203  
 PREPARED BY:  
 MARKS & ASSOCIATES L.L.C.  
 4531 COLLEGE AVENUE  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 747-8738

**GENERAL NOTES**

1. ELEVATIONS
  - A. BASEMENT: 615.0
  - B. FIRST FLOOR 623.0
  - C. INVERT OUT OF HOUSE: 610.7
  - D. INVERT INTO SEPTIC TANK: 610.6
  - E. INVERT OUT OF SEPTIC TANK: 610.2
  - F. INVERT INTO DISTRIBUTION BOX: 610.0
  - G. INVERT INTO TRENCH: 608.5
  - H. EXISTING GRADE AT SEPTIC TANK: 614.0
  - I. EXISTING GRADE AT DISTRIBUTION BOX: 613.0
  - J. EXISTING GRADE AT TRENCH: 613.0
  - K. ELEVATION AT WELL AT GRADE: 626.7
2. PROPERTY INFO.: WARFIELDS GRANT LOT 9  
 PLAT NO. 9802

PLAN SCALE; 1" = 30'  
 100' ±

# APPLICATION

PERCOLATION TESTING

A 13  
4206

P \_\_\_\_\_

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

DISTRICT 4<sup>TH</sup>

8-05-88 DATE \_\_\_\_\_

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 Mr. Robert M. Warfield

ADDRESS 2425 Daisy Road, Woodbine, Md. 21797 PHONE \_\_\_\_\_

PROSPECTIVE BUYER Carman Associates

ADDRESS P.O. Box 122, Ellicott City, Md. PHONE 854-6797

PROPERTY LOCATION:

SUBDIVISION Warfields Grant LOT NO. 89

ROAD AND DESCRIPTION West Side Daisy Road

TAX MAP 13 PARCEL # 128

SIZE OF LOT 3 acres TYPE 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.

*Philip A. Mangley*  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

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

REASONS FOR REJECTION OR HOLDING 10-27-88 Per Satisfactory - Hold for REAT. same

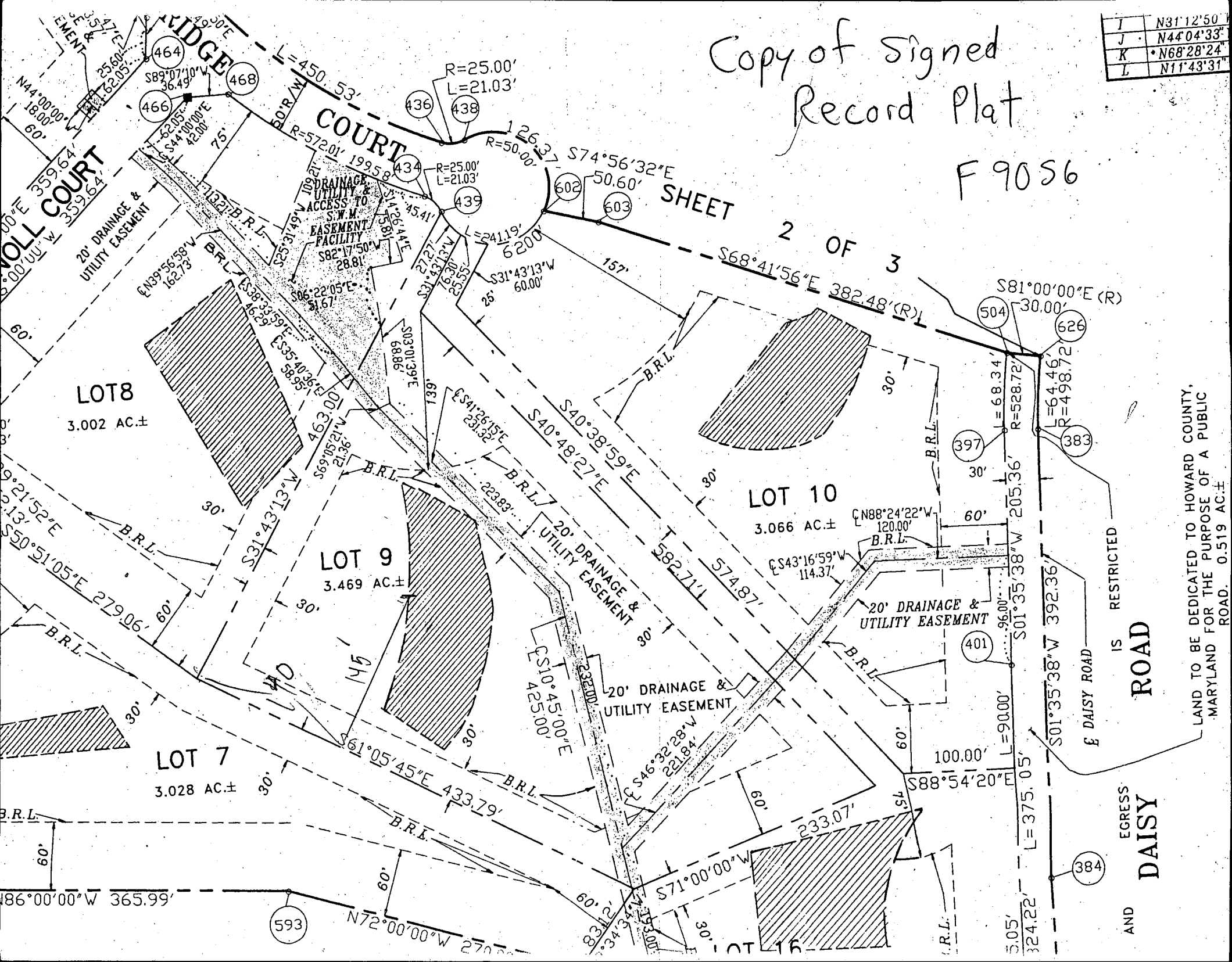
HD-216

# THIS IS NOT A PERMIT



Copy of signed  
Record Plat  
F 9056

I	N31°12'50"
J	N44°04'33"
K	N68°28'24"
L	N11°43'31"



LAND TO BE DEDICATED TO HOWARD COUNTY,  
MARYLAND FOR THE PURPOSE OF A PUBLIC  
ROAD. 0.519 AC±

AND EGRESS  
**DAISY ROAD**  
IS RESTRICTED

SHEET  
2 OF 3

COURT

LOT 8  
3.002 AC±

LOT 9  
3.469 AC±

LOT 10  
3.066 AC±

LOT 7  
3.028 AC±

20' DRAINAGE &  
UTILITY EASEMENT

20' DRAINAGE &  
UTILITY EASEMENT

20' DRAINAGE &  
UTILITY EASEMENT

DRAINAGE  
UTILITY  
ACCESS TO  
S.W.M.  
BASEMENT  
FACILITY

E DAISY ROAD

N86°00'00"W 365.99'

N72°00'00"W 270.00'

S01°35'38"W 392.36'

S01°35'38"W 205.36'

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HOWARD COUNTY HEALTH DEPARTMENT

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*Diane L. Matuszak, M.D., M.P.H., County Health Officer*

June 23, 2000

Stephen & Nicole Stickley  
3208 St. Augustine Ct.  
Olney, Maryland 20832

Re: Revised Septic Area  
16024 Pheasant Ridge Ct.  
Warfield's Grant I, lot 9

Dear Mr. & Mrs. Stickley:

Our office was contacted by your septic system contractor the morning of June 22, 2000 concerning shallow depth to water table in the freshly excavated septic tank hole. We evaluated several additional soil excavations and performed several percolation tests later that day to better determine what options were available to remedy this problem. Generally, throughout the uppermost boundary of the staked Sewage Disposal Area, we encountered seasonally high water tables at 4 1/2 to 5 feet below grade and very slow percolation rates in the upper 2 1/2 ft. soil horizon. Copies of the test results are enclosed. Such soil conditions are unsuitable for the installation of conventional subsurface septic systems.

Within the 100-ft. radius of the existing well (HO-88-0880) we did encounter satisfactory percolation rates and limiting conditions (Rock or water at 10-1/2 ft.) compatible with a conventional septic system. However, use of this area would require:

- Abandonment and sealing of the existing well
- Drilling a replacement well in a different but acceptable site (the access right-of-way near Pheasant Ridge Ct. is suggested)
- Installing a pumped septic system
- Installing antifloatation devices on the septic tank and pump chamber if installed wherever high water tables are encountered
- Provide a revised Percolation Certification Plan showing this new SDA

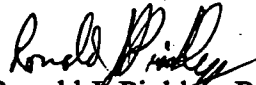
This plan should be prepared by an engineer or similarly qualified person and submitted to this office for review and approval within 60 days. As well as the change in SDAs, the plan should include both new and abandoned wells, existing buildings,

elevation contours, swales, wetlands, most recent test locations, and any other pertinent information similar to that provided on the original building permit plan.

The above recommendation is only one of several possible solutions to the current problem. Other alternatives include sand mounds, drip irrigation or holding tank systems. Each type of system has advantages and disadvantages. The above recommendation was, in our opinion, the most suitable for this property.

If you have any questions or wish more information on alternatives, please call me at 410-313-2640.

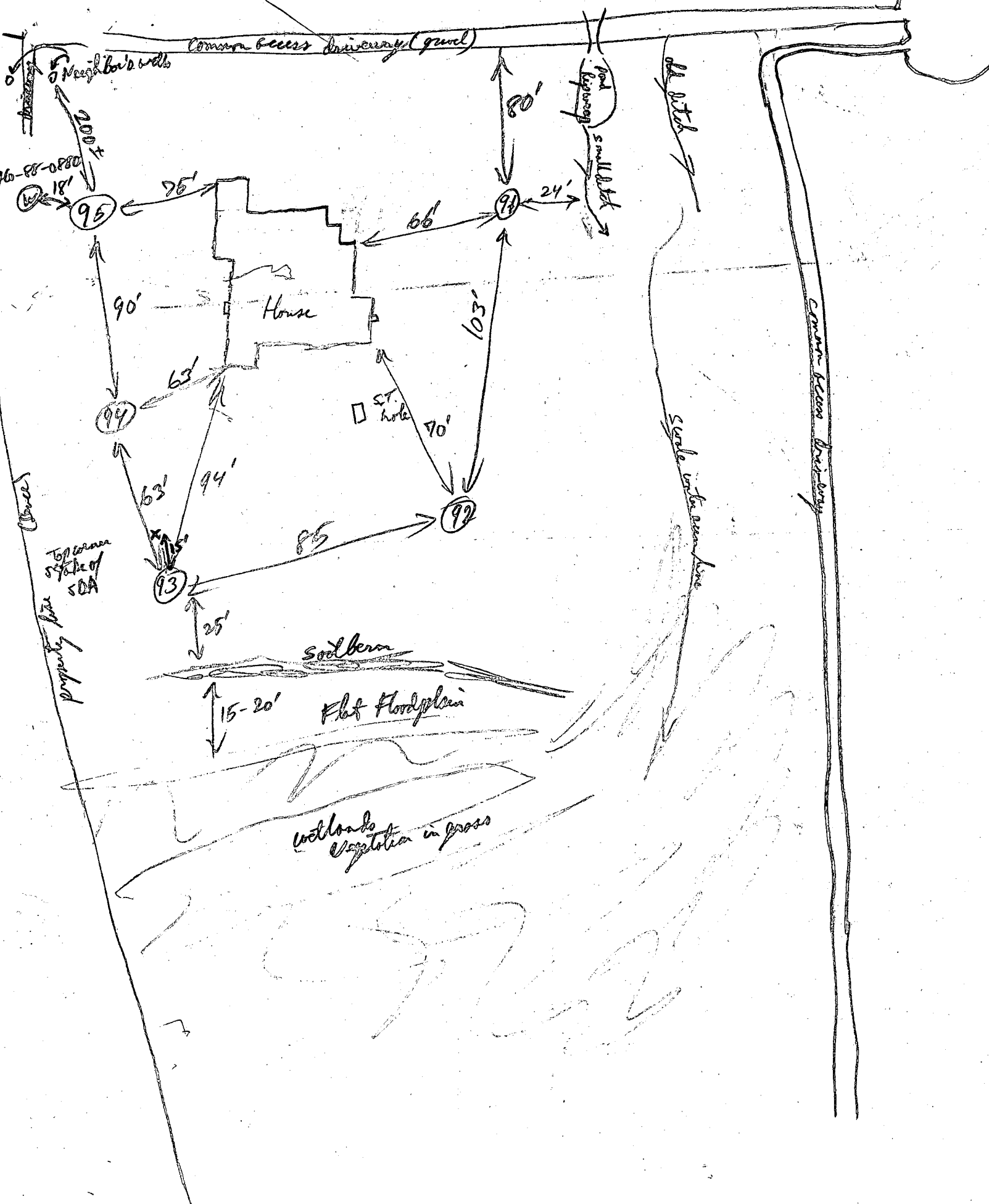
Respectfully yours,



Ronald J. Pinkley, R.S.  
Water and Sewer Program

Cc: Traditional Home Builders  
File

Neighbor's plot









TEST DATA

NAME Stephen + Nicole Stickley FILE NO 42613  
 LOCATION Warfield's Grant Sect 1 649 COUNTY Howard  
16024 Pheasant Ridge Ct DATE 6/22/00  
 GRID \_\_\_\_\_ E \_\_\_\_\_  
 RECORDED BY RPPalley N \_\_\_\_\_

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
95	5	0-6"	Loch Ben	L Loam		
		-2 1/2'	Red	ch Clay loam	10% channels small	
		-3 1/2-4'	Red Ben	LSL-SCL	dense	
		4'-10' inside	mid Red Ben 2.5YR 7/9	ch Micro loam	25% Mid Hard Strat. Spherulite	
		4-10 1/2'	Mix Colored over Red Ben gray loam	ch Sandy Loam	15-25% Str Spherulite some very fine - like dust	
		shallow system Hard Bottom 10 1/2'				
94	4	-3 1/2'	Mid Ben Red Ben	ch h.b. LSL	25% v small channels	
		3 1/2 - (1 1/2)	dark gray Red Ben	ch L	25-40% channels (Structural Spherulite 80% water from exp. friable (very sandy, broken - crushed) to hard brittle material (20%))	
		water @ 10ft in this hole seepage				
93	Fail	0-8"	Topsoil	brn ch L		
		8"-3 1/2'	yellow	ch CL		
		3 1/2-5 1/2'	dark gray Red Ben	ch L	very friable - easily broken - hard Spherulite	
		water @ 5' ± 3'				
92	Fail	0-6"	Topsoil	brn ch L		
		6"-18"	yellow Red Ben ch CL	ch CL		
		1 1/2-5 1/2'	dark gray Red Ben	ch L		
		water @ 5' ± 3'				
91	Fail					
		water @ 56" (4' 18") seepage				

MARYLAND DEPT. OF THE ENVIRONMENT  
 ONSITE SEWAGE DISPOSAL PERMIT  
 SITE EVALUATION REPORT  
 PERCOLATION TEST DATA

FILE NO. *A 42613*  
 MD GRID:  
 COUNTY: *H*  
 TAX MAP/B/P:  
 SUBDIVISION:

LOT *9* SECTION *Warfield's Grant Sect I*

METHOD	<i>Standard punch hole</i>			BY:	<i>R.P. Public</i>
DATE	<i>6/22/00</i>	SOIL -		WEATHER:	<i>Sunny</i>
DEPTH	<i>3 1/4'</i>	HOLE DIA. (in.)		CONV. FACTOR	

TEST NO.	ELAPSED TIME	TIME INTERVAL (min.)	WATER LEVEL (in.)	DROP IN WATER LEVEL (in.)	RATE (min/in.)	REMARKS
<i>(94)</i>	<i>Start 11:47</i>		<i>Top Nail</i>			
	<i>Missed 12:00</i>		<i>Bottom Nail</i>			

*pass*

*(21 mpa ave)*

TEST RATE

METHOD	<i>Standard punch hole</i>			BY:	<i>R.P. Public</i>
DATE	<i>6/22/00</i>	SOIL -		WEATHER:	<i>Sunny</i>
DEPTH	<i>4 1/2'</i>	HOLE DIA. (in.)		CONV. FACTOR	

TEST NO.	ELAPSED TIME	TIME INTERVAL (min.)	WATER LEVEL (in.)	DROP IN WATER LEVEL (in.)	RATE (min/in.)	REMARKS
<i>(95)</i>	<i>@ 4 1/2' 12:04</i>		<i>still on Top Nail pulled</i>	<i>Too Slow</i>		
	<i>12:20</i>					
<i>@ 5'</i>	<i>12:27</i>		<i>top</i>			
	<i>12:30</i>		<i>1 1/2"</i>			
	<i>12:40</i>		<i>Bottom Nail</i>			

*pass*

*(10 mpa)*

TEST RATE

METHOD				BY:	
DATE		SOIL -		WEATHER:	
DEPTH		HOLE DIA. (in.)		CONV. FACTOR	

TEST NO.	ELAPSED TIME	TIME INTERVAL (min.)	WATER LEVEL (in.)	DROP IN WATER LEVEL (in.)	RATE (min/in.)	REMARKS

TEST RATE

AVE. RATE

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B00122519

Building Address 16024 Pheasant Ridge Ct  
Woodbine, MD

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract 60046 Subdivision (2) WYF - 2 GRAN

Section 1 Area 1 Lot 7

Tax Map 13 Parcel 128 Grid 18

Zoning R-1C Map Coordinates 8 F 5 Lot size 3.0 +

Property Owner's Name Stephonia Nicole Stickley

Address 3208 St Augustine Ct

City Olney State MD Zip Code 20832

Home Phone \_\_\_\_\_ Work Phone 301-960-1111

Applicant's Name & Mailing Address, (if other than stated hereon):  
n/a

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use unimproved lot

Proposed Use single family home

Estimated Construction Cost \$ 420,000

Description of Work 4 BR/3.5 Bath/EF1 + stone  
asphalt roof/full masonry garage  
two story

Contractor Company Tradition Home Builders

Contact Person Steven Leaf

Address 4540 Ten Oaks Rd

City Dorton State MD Zip Code 21036

License No. \_\_\_\_\_

Phone 4105319203 Fax 4105319203

Occupant or Tenant Stephen + Nicole Stickley

Contact Name Stephen Stickley

Address 3208 St Augustine Ct

City Olney State MD Zip Code 20832

Phone 4105319203 Fax 4105319203

Engineer or Architect Company W. Kowrek

Contact Person Steven Leaf

Address 4540 Ten Oaks Rd

City Dorton State MD Zip Code 21036

Phone 4105319203 Fax 4105319203

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____
State Certified Modular _____	

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private well <input checked="" type="checkbox"/>
1st floor: <u>54</u> Depth <u>68</u> Width <u>68</u>	Sewage Disposal: _____ Public _____ Private septic <input checked="" type="checkbox"/>
2nd floor: <u>54</u> Depth <u>68</u> Width <u>68</u>	Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>45</u> Depth <u>68</u> Width <u>68</u>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms <u>4</u>	
Multi-family dwellings: _____	
No. of efficiency units: _____	
No. of 1 BR units: _____	
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: <u> poured concrete</u>	
Roof: <u> asphalt shingles</u>	
State Certified Modular _____	
Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Ann M. Leaf  
Applicant's Signature  
Tradition Home Builders, Inc.  
Title/Company

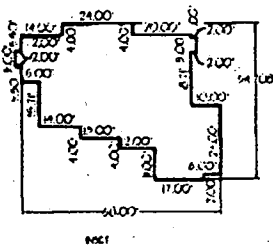
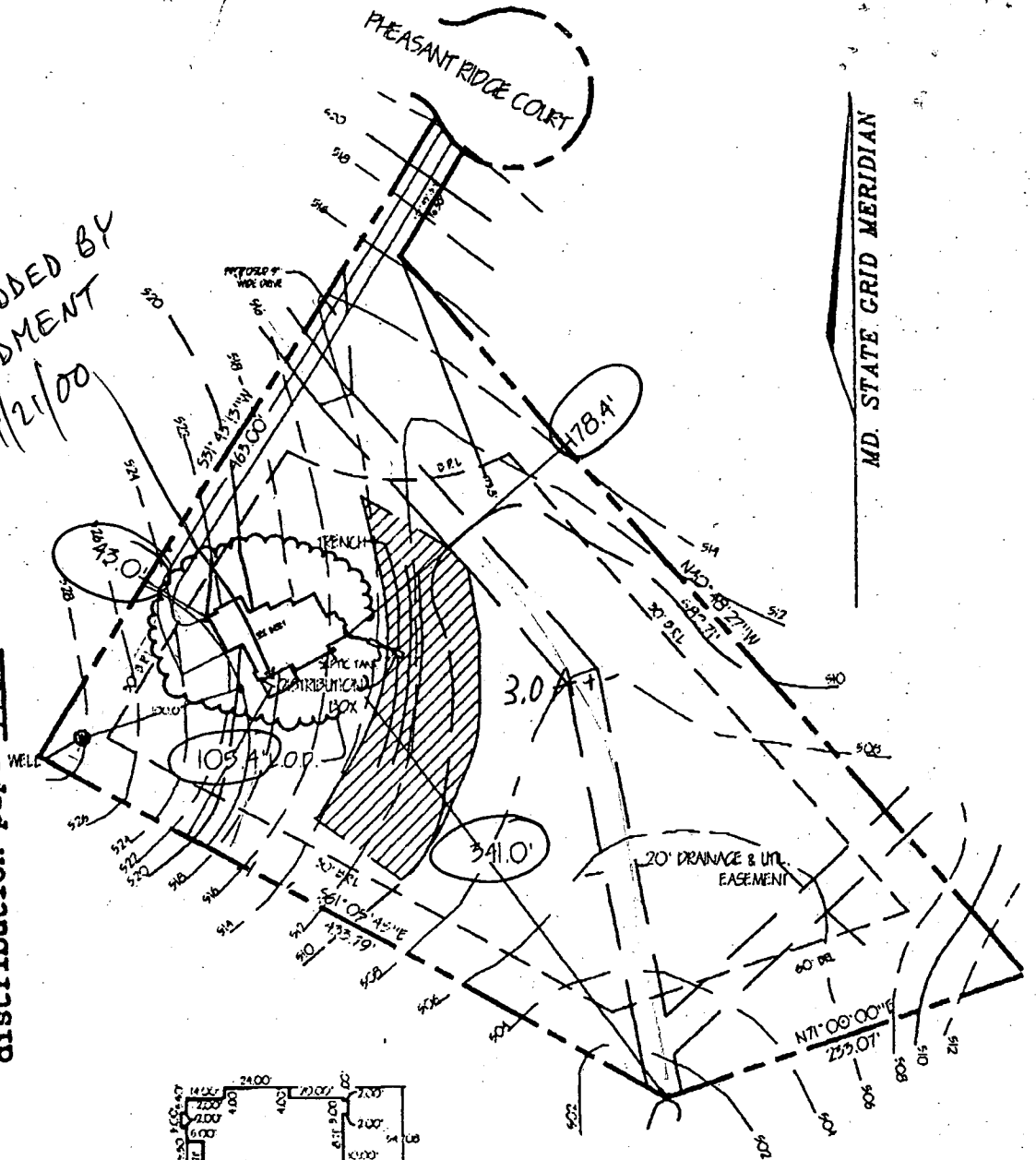
Ann M. Leaf  
Print Name  
2-23-00  
Date

Approved Septic System Plan  
Howard County Health Department

Total linear feet of trench required 240 feet  
 Width of trench(es) 3.0 feet  
 Depth of trench(es) 5.0 feet  
 Depth of stone required below distribution pipe 1.5 feet

MR OK 4/21/00  
 DECK ADDED BY AMENDMENT

*[Signature]*  
 Signature Date 3/6/00



PLOT PLAN FOR PROPOSED SINGLE FAMILY DWELLING

DATE: 2/16/00  
 SCALE: AS SHOWN

BUILDER: TRADITION HOME BUILDERS INC.  
 4540 TEN OAKS ROAD  
 DAYTON, MARYLAND, 21038  
 (410) 631-9203

PREPARED BY:  
 MARKS & ASSOCIATES L.L.C.  
 4531 COLLEGE AVENUE  
 ELLICOTT CITY, MARYLAND 21043  
 (410) 747-8738

PLAN SCALE: 1" = 30'  
 100'

GENERAL NOTES

1. ELEVATIONS
  - A. BASEMENT: 616.0
  - B. FIRST FLOOR 623.0
  - C. INVERT OUT OF HOUSE: 610.7
  - D. INVERT INTO SEPTIC TANK: 610.5
  - E. INVERT OUT OF SEPTIC TANK: 610.2
  - F. INVERT INTO DISTRIBUTION BOX: 610.0
  - G. INVERT INTO TRENCH: 609.5
  - H. EXISTING GRADE AT SEPTIC TANK: 614.0
  - I. EXISTING GRADE AT DISTRIBUTION BOX: 613.0
  - J. EXISTING GRADE AT TRENCH: 613.0
  - K. ELEVATION AT WELL AT GRADE: 628.7
2. PROPERTY INFO.: WARFIELDS GRANT LOT 9  
 PLAT NO. 8802

B 1 **2300** SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

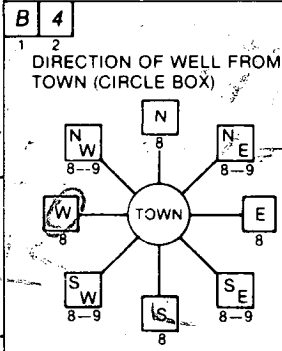
STATE OF MARYLAND  
**PERMIT TO DRILL WELL**  
 please print or type

STATE PERMIT NUMBER  
**HO-88-0880**  
 fill in this form completely

Date Received (APA) **012489**  
**OWNER INFORMATION**  
 CARMAN ASSOCIATES  
 PO BOX 122  
 ELHICOTT CITY MD 21043

B 3 LOCATION OF WELL  
 HOWARD COUNTY  
 WARFIELD'S GRANT  
 SECTION 9 LOT 7  
 GLENWOOD  
 MILES FROM TOWN (enter 0 if in town) **4** MI

DRILLER INFORMATION  
 Driller's Name **Wm. L. Wayne** License No. **238**  
 Firm Name **Wayne Well Drilling**  
 Address **5512 Ridge Rd. Mt. Airy, Md. 21771**  
 Signature **Wm. L. Wayne** Date **1/23/89**



**Pleasant Ridge Ct.**  
 NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 DISTANCE FROM ROAD **425** 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**

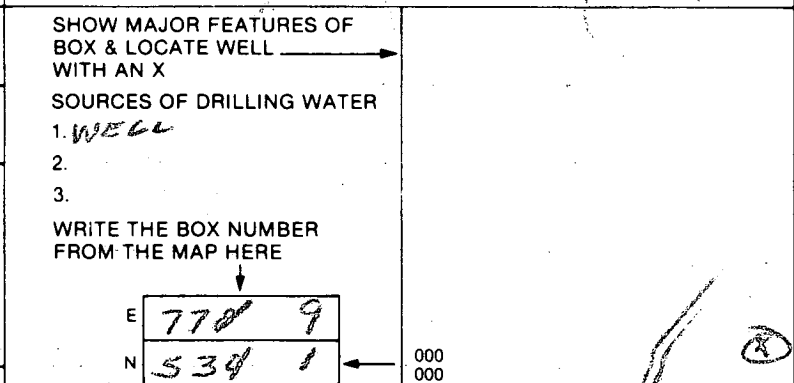
USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 COUNTY NAME **HOWARD** COUNTY NO. **A# 42613**  
 STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_  
 DATE ISSUED **071789** CO SIGNATURE **J. S. [Signature]** EXP. DATE **01/16/90**  
 NORTH GRID **531000** EAST GRID **0779000**

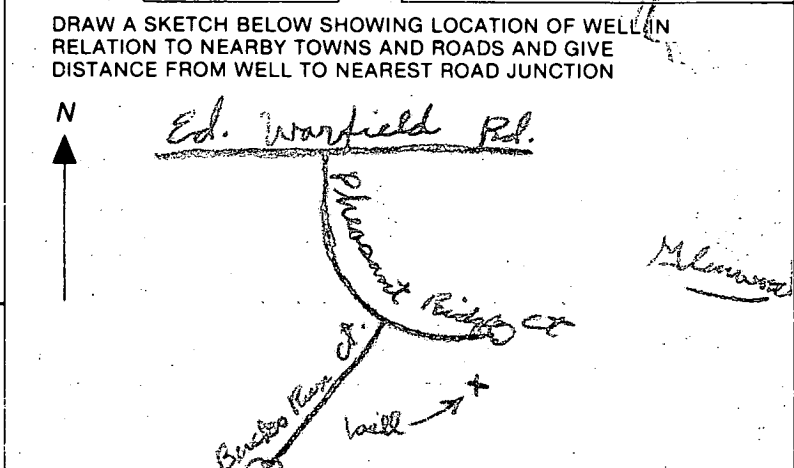
APPROXIMATE DEPTH OF WELL **200** FEET

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 **50** WRITE INITIALS IN BOX **SA** PERMIT NO. **HO-88-0880**

SPECIAL CONDITIONS

C1 6790

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 9 42613

DATE RECEIVED

DATE WELL COMPLETED 100489

DEPTH OF WELL 205 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 10-88-0880

OWNER CARMAN ASSOC. STREET OR RFD PHEASANT RIDGE EXT. TOWN GLENWOOD SUBDIVISION WARFIELD'S GRANT SECTION LOT 9

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes handwritten entries: Brown sand, Blue rock.

GROUTING RECORD form: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 22, NO. OF POUNDS 2065.

CASING RECORD form: casing types insert appropriate code below. Includes codes: ST (STEEL), CO (CONCRETE), PL (PLASTIC), OT (OTHER).

OTHER CASING (if used) form: diameter, depth (feet) from, to.

SCREEN RECORD form: screen type or open hole insert appropriate code below. Includes codes: ST (STEEL), BR (BRASS), HO (OPEN HOLE), PL (PLASTIC), OT (OTHER).

DEPTH (nearest ft.) form: grid for recording depth measurements.

- 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. 239

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) form: T (TELESCOPE CASING), LOG INDICATOR, WQ (OTHER DATA).

PUMPING TEST form: HOURS PUMPED (3), PUMPING RATE (605), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (17), WHEN PUMPING (104), TYPE OF PUMP USED (S - submersible).

PUMP INSTALLED form: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE, PUMP HORSEPOWER, PUMP COLUMN LENGTH, CASING HEIGHT (+ above, - below).

