

5-12-95  
2:00 c/o  
WRI  
6-26-95

TAX # 04353595

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50688

A 42732

DISTRICT 4th

DATE 5-11-95

DATE SYSTEM APPROVED 5/12/95

INSPECTOR GS

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
~~461-9933~~ 313-2640

Fogle's Septic Clean IS PERMITTED TO INSTALL  ALTER

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

SUBDIVISION Chessie Crossing LOT 22 ROAD ~~708~~<sup>718</sup> Chessie Crossing Way

PROPERTY OWNER Timothy B and Rhonda E. Marcoux

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 2 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 160 feet from the front lot line and 115 feet from the left (West) lot line as seen when facing the lot from Chessie Crossing Way.

Run trenches on contour toward the left lot line.  
NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 4/30/95 DKS

PLANS APPROVED BY Ronald J. Pinkley/Amy McMillen REVISED DATE 03/22/95

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.

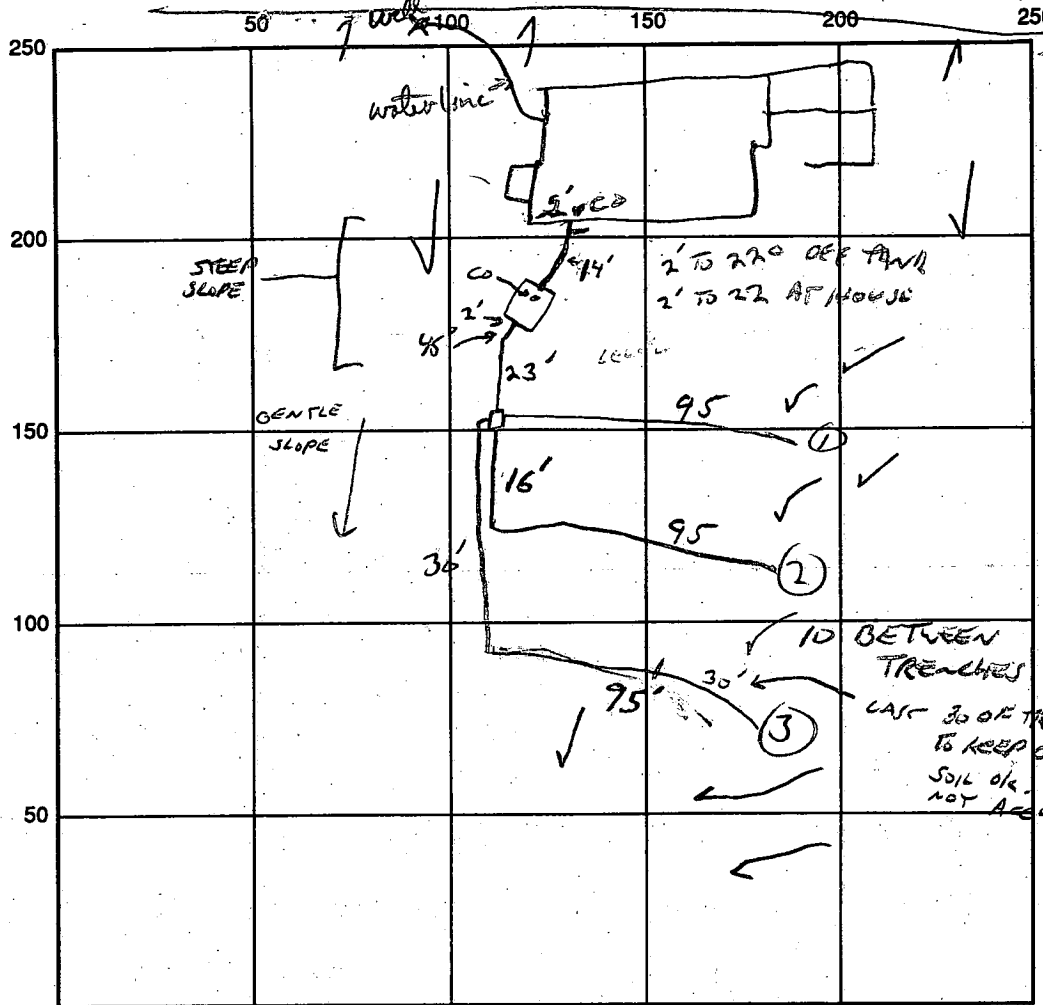
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

OLD PERMIT SIGNED  
AND RETURNED 4-5-95  
Serial # B-0117039  
*Decker*

A  
42732

← TO MORGAN STATION RD HO-92-0119 CHESSIE CROSSING WAY



5/12/95  
200 GRADED LEVEL  
W/FILL TO 50' BEHIND  
HOUSE. GS

1  
95  
3  
285

9

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK CLEANOUTS AT HOUSE, ON TANK

DISTRIBUTION BOX LEVEL OK BAFFLE IN

DRAIN FIELD/TITLE DEPTH \_\_\_\_\_ FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 285 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 285 SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET 2 FT.

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

REMARKS: OK TO CLK LAST 30' OF TRENCH DEEPER - SOIL OK, NOT POSSIBLE TO KEEP CONTAIN  
WITHOUT 90' IN TRENCH 5/12/95 5/12 TRENCH 3 OK. If  
OK TO COVER

WPI filled adaptor + water pipe OK @ 41' RD 6/5/95

DATE SYSTEM APPROVED 5/12/95 INSPECTOR [Signature]

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

P O BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE 992-2330

A 42732

P \_\_\_\_\_

DISTRICT 4

DATE August 2, 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 Paul V. & Bong Cha Brosenne Timothy B & Rhoda E. Marcoux

ADDRESS 694 Morgan Station Road Woodbine, MD 21797 PHONE 489-4052

PROPERTY LOCATION: Prospective Buyer: Lambert Cissell 442-5671  
SE Corner of 3425 Hipsley Mill Rd. Woodbine, MD 21797

SUBDIVISION Chessie Crossing Morgan Woodbine Rd. & Morgan Station Rd. LOT NO. 4

ROAD AND DESCRIPTION New Road = Road A, Tax Map 3, Parcel 4  
(718 Chessie Crossings)

SIZE OF LOT 3 acres +/- TYPE BLDG. single family residence  
(NUMBER OF BEDROOMS)

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. James L Newburn (997-3815)  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
James L. Newburn Agent for Lambert Cissel

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

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

REASONS FOR REJECTION OR HOLDING 12/13/90 Perc OK Hold for plat RW

**TRIG. PERMIT SIGNED**  
AND RETURNED 3/22/95  
Serial # 58573  
SFD - YBm

# THIS IS NOT A PERMIT

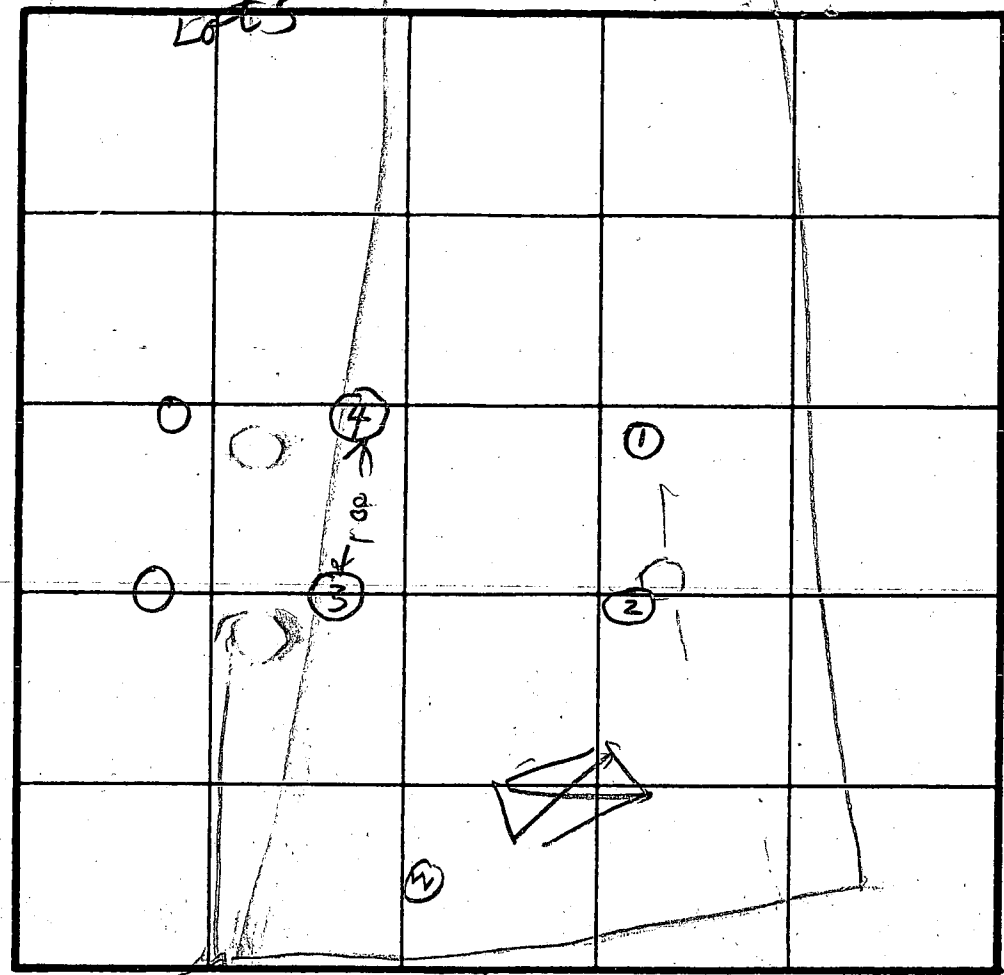
Lot 4  
A 42 + 3 2

Lot 4

Lot 5

SOIL PROFILE

TOP SOIL  
CLOT  
3 1/2  
BROWN  
SAND  
SILT  
LOAM  
1 1/2



AV TIME  
10 MIN  
MAX DEPT  
INLET  
2 1/2

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

PROPOSED RD

(2)  
CLAY TOPS  
BROWN  
SAND  
SILT  
LOAM

(3)  
CLAY  
BROWN  
SAND  
SILT  
LOAM  
FEW  
FRAGS

(4)  
CLAY  
BROWN  
SAND  
SILT  
LOAM

DATE	TEST NO.	DEPTH	PRE WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/13/88	1 S	1.5	1154	1156	1156	1201	5
	1 V	1.65	OK				
	2 V	12	OK				
	3 S	3	1209	1214	1214	1224	10
	3 V	6.5	1209	1214	1214	1224	10
	3 V	11.5	OK				
	4 S	4.5	1229	1236	1236	1246	10
	4 V	12	OK				
			1239	124			

ON LINE  
LOTS 4  
& 5  
ON LINE  
LOTS 4  
& 5

REMARKS ~~SAND~~ ON LINE HOLES HOLE (3) & (4)

TYPE OF SOIL

TESTED BY R. HODGES

ALSO PRESENT OKETTERMAN  
LEISSER

B 1 **1463** SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

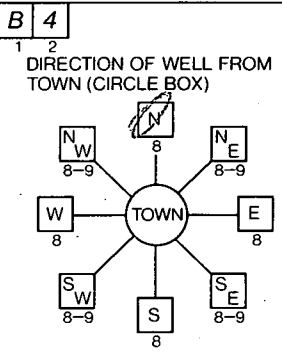
STATE OF MARYLAND  
 APPLICATION FOR PERMIT TO DRILL WELL  
 please print or type

STATE PERMIT NUMBER  
**HO-92-0119**  
 fill in this form completely

Date Received (APA) **062292**  
**OWNER INFORMATION**  
**NEWBORN DEVELOPMENT**  
 15 Last Name Owner First Name 34  
**SSVD STEKRETT PL**  
 36 Street or RFD 55  
**COLUMBIA** **MU21044**  
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL  
**HOWARD**  
 8 COUNTY 21  
**CHESSIE CROSSING**  
 23 SUBDIVISION 42  
 SECTION **22**  
 44 46 48 50  
**WOODBINE**  
 52 NEAREST TOWN 71  
 MILES FROM TOWN (enter 0 if in town) **2 1/2** M I  
 73 76 77 78

**DRILLER INFORMATION**  
**Joseph R. Mayne** **238**  
 Driller's Name 77 License No. 80  
**Joseph R. Mayne Well Drilling**  
 Firm Name  
**5512 Ridge Rd. Mt. Airy, Md 21771**  
 Address  
**Joseph R. Mayne** **6/22/92**  
 Signature Date



**Chessie Crossing Way**  
 11 NEAR WHAT ROAD 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  NORTH   
 WEST  EAST   
 SOUTH  SOUTH   
**42**  
 34 DISTANCE FROM ROAD 37  
 ENTER FT or MI **FT**  
 38 39

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**  
 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**  
 14 20

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** **A 42 732**  
 COUNTY NAME COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_  
 DATE ISSUED **071592** **Thomas Hodges** **01/15/93**  
 43 48 CO SIGNATURE EXP. DATE 41  
 NORTH GRID **553000** EAST GRID **0705000**  
 50 55 57 63

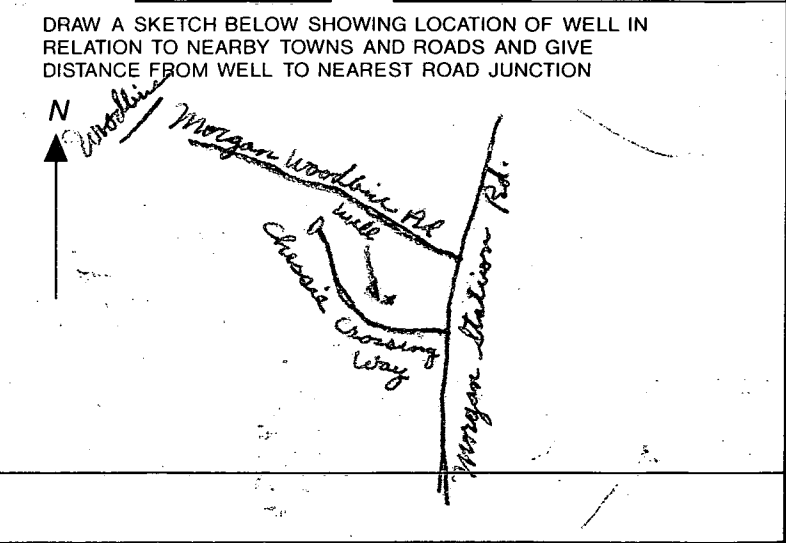
APPROXIMATE DEPTH OF WELL **260** FEET  
 24 28

APPROXIMATE DIAMETER OF WELL **6** INCH  
 NEAREST INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered)  JETTED  Jetted & DRIVEN   
 30 AIR-ROTARY  AIR-PERCussion  ROTARY (Hydraulic Rotary)   
 31 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  
 E **7005**  
 N **5503**  
 000 000  
 7-28-92 10:30 ± Grout #2  
 Location - OK  
 wing - 78  
 pen - 50+  
 grout - 19 bags  
 RP 7/28/92

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 \_\_\_\_\_  
 54 63  
 FORCE **RH** WRITE INITIALS IN BOX PERMIT No. **HO-92-0119**  
 167 168 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

C1 6845 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 42 73 2

ST/CO USE ONLY  
 DATE Received [ ] [ ] [ ] [ ] [ ] [ ]  
 DATE WELL COMPLETED 07 28 92

Depth of Well 225 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-92-0119

OWNER DEVELOPMENT NEW BURN  
 STREET OR RFD CHESSIE CROSSING WAY TOWN WOOD BINE  
 SUBDIVISION CHESSIE CROSSING SECTION LOT 22

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	70	
Blue rock	70	225	

GROUTING RECORD  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES (Y) NO (N)  
 TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC)  
 NO. OF BAGS 19 NO. OF POUNDS 1756  
 GALLONS OF WATER 114  
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 50 ft.

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

MAIN CASING TYPE ST  
 Nominal diameter top (main) casing (nearest inch) 4  
 Total depth of main casing (nearest foot) 75

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 OPEN HOLE PLASTIC OTHER

C2  
 DEPTH (nearest ft.)  
 110 73 225  
 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.) W Q  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

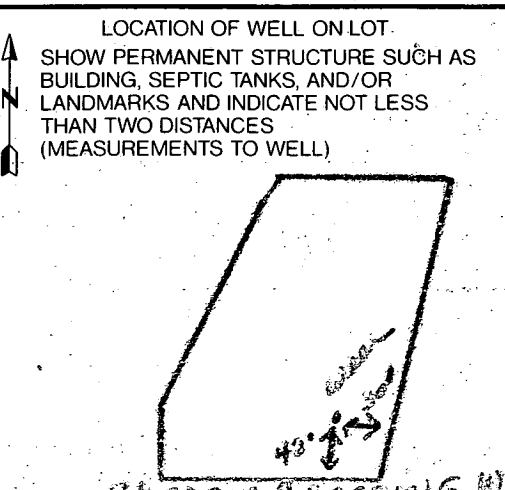
C3  
 PUMPING TEST  
 HOURS PUMPED (nearest hour) 3  
 PUMPING RATE (gal. per min. to nearest gal.) 7.5  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL (distance from land surface) BEFORE PUMPING 35 WHEN PUMPING 114  
 TYPE OF PUMP USED (for test): A air P piston T turbine C centrifugal R rotary O other (describe below) J jet S submersible

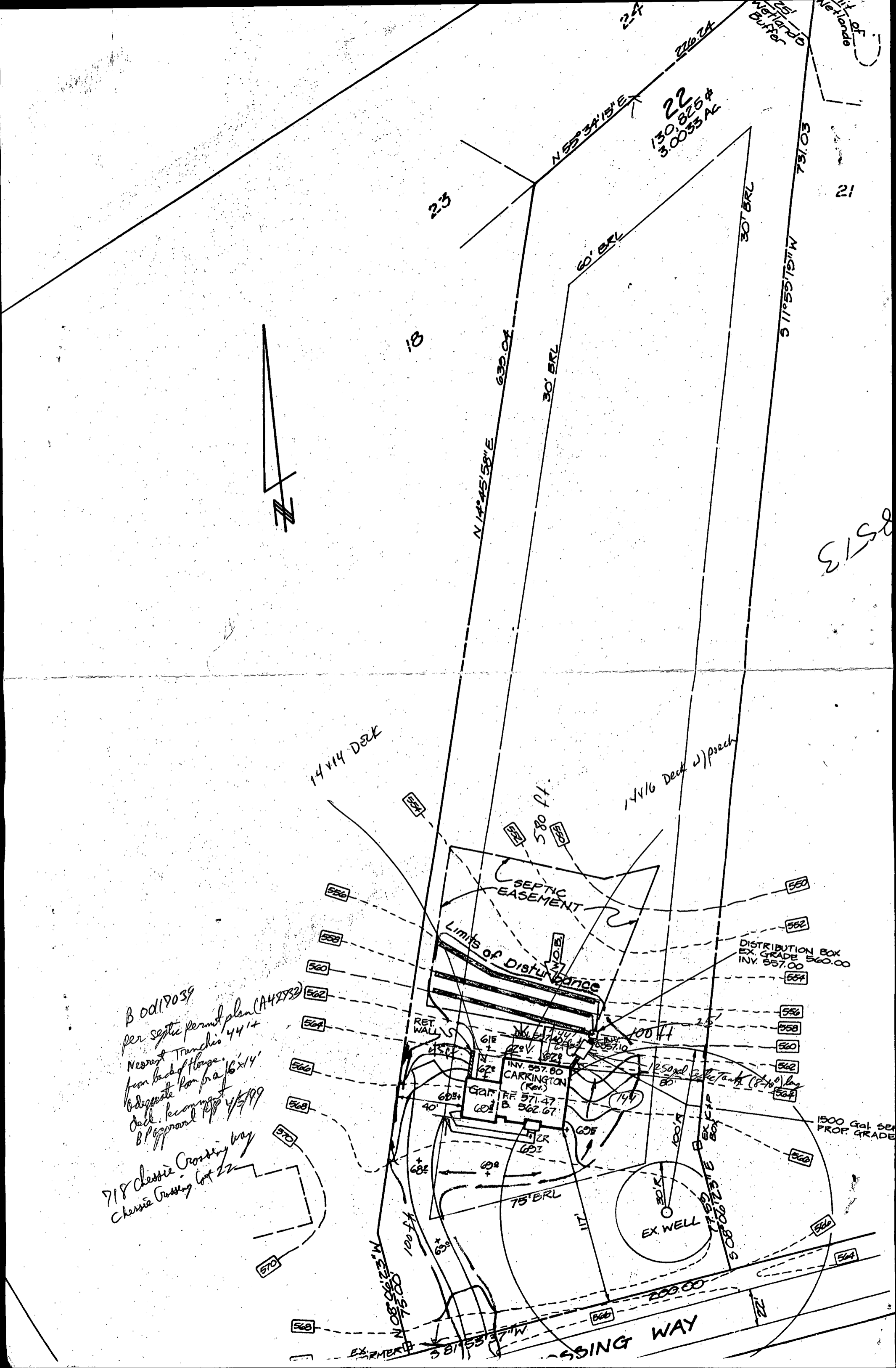
PUMP INSTALLED  
 DRILLER WILL INSTALL PUMP YES (NO)  
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) PUMP HORSE POWER  
 PUMP COLUMN LENGTH (nearest ft.)  
 CASING HEIGHT (circle appropriate box and enter casing height) above below LAND SURFACE (nearest foot)

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

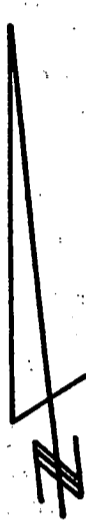
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 238  
 DRILLERS SIGNATURE  
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)





22  
130,826 #  
3.0033 AC



B 0017039  
per septic permit plan (A42732)  
Nearest Trancheis 44' +  
from back of house.  
to dig site for 16' x 14'  
deck. becoming  
B P approval 4/5/99

718 Christie Crossing way  
Christie Crossing lot 22

14' x 14' DECK

14' x 16' Deck w/ porch

SEPTIC EASEMENT  
Limits of Disturbance

RET. WALL  
IN. 557.80  
CARRINGTON (REV.)  
GAP. FF. 571.47  
B. 562.67

DISTRIBUTION BOX  
EX. GRADE 560.00  
INV. 557.00

EX. WELL

1500 Gal. SEP.  
PROP. GRADE

SSING WAY

51513