

8-28-95  
12:00 clo

10x IO - 05 - 414822

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50967 A

A 43094

DISTRICT 5th

DATE 4/25/93

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

DATE SYSTEM APPROVED 8/28/95

INSPECTOR M. Rifkin

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL X ALTER

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

SUBDIVISION Brierly LOT 21 ROAD 13710 Highland Road

PROPERTY OWNER Lovena Smith

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 7½ feet below original grade. Effective area begins at 3½ feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Starting from the last breakpoint in the left lot line (172.90'/391.84' intersection), start the first trench 50 feet up the 172.90' lot line and 90 feet off this same lot line. Run trenches on contour to left side of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OR 5/4/95 DKS

PLANS APPROVED BY Mark Rifkin DATE 06/25/93

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

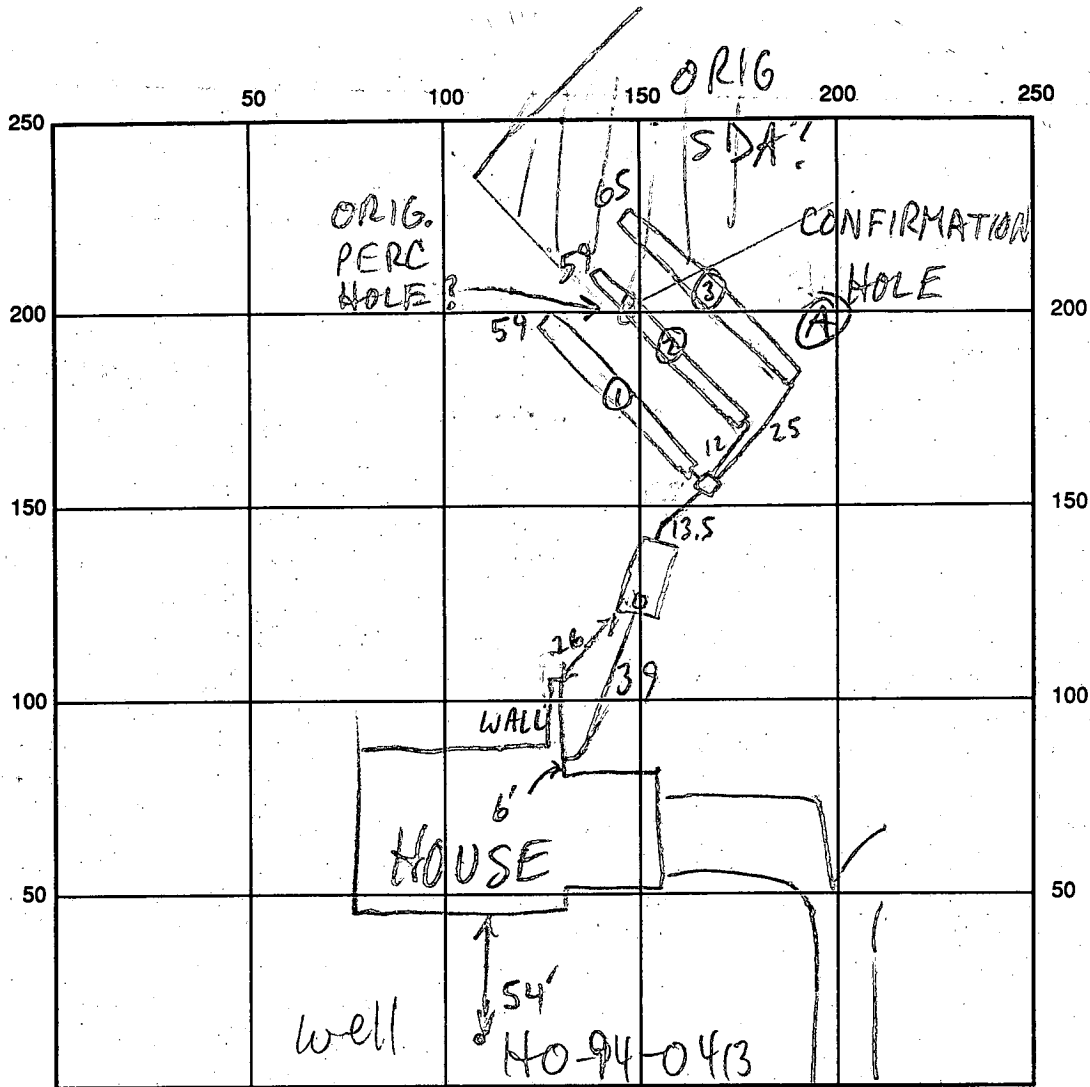
PERMIT VOID AFTER TWO YEARS

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  
43094



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL CLEANOUTS S.T. - OK

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH  $\frac{11213}{57.5}$  FT. TRENCH WIDTH 2 FT. INLET DEPTH  $\frac{11213}{3.5}$  FT.

EFFECTIVE GRAVEL DEPTH  $\frac{11213}{4}$  FT. TOTAL LENGTH  $\frac{11213}{59}$  FT.  $\frac{11213}{65}$  FT.  $\frac{11213}{26}$  FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA  $\frac{11213}{236}$  SQ. FT.  $\frac{11213}{260}$  SQ. FT.

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA 732 SQ. FT.

REMARKS: 8/28/95 #1 SYSTEM MOVED 40-50' CLOSER TO HOUSE BY INSTALLER; REQUESTED ADD'L PERC HOLE TO CONFIRM

SOILS MR  
8/28/95 #2 ADD'L PERC HOLE DUG TO 12' - OK  
FINAL - OK TO COVER MR

DATE SYSTEM APPROVED 8/28/95 INSPECTOR M. Ripkin

# APPLICATION

PERCOLATION TESTING

A 43084

P \_\_\_\_\_

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

DISTRICT 5TH

DATE 9-20-88

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 RUSSELL ZEPPE LOUENA Smith

ADDRESS 13790 HIGHLAND RD PHONE ~~854-2797~~  
301-725-7974

PROSPECTIVE BUYER HENRY L. BLEVINS

ADDRESS 3600 WATERSVILLE RD PHONE 795-2337  
MT. AIRY, MD 21771

PROPERTY LOCATION:  
SUBDIVISION ZEPPE SUBDIVISION LOT NO. 23 21 on final

ROAD AND DESCRIPTION 13710 HIGHLAND ROAD HOWARD CO  
ZIP: 21029

TAX MAP 34 PARCEL # 7  
SIZE OF LOT 3.00 AC ± TYPE BLDG. SINGLE FAMILY  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED  
AND RETURNED 4/12/95  
Serial # 58816 - 4 Boms

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

[Signature]  
(SIGNATURE OF APPLICANT)

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

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

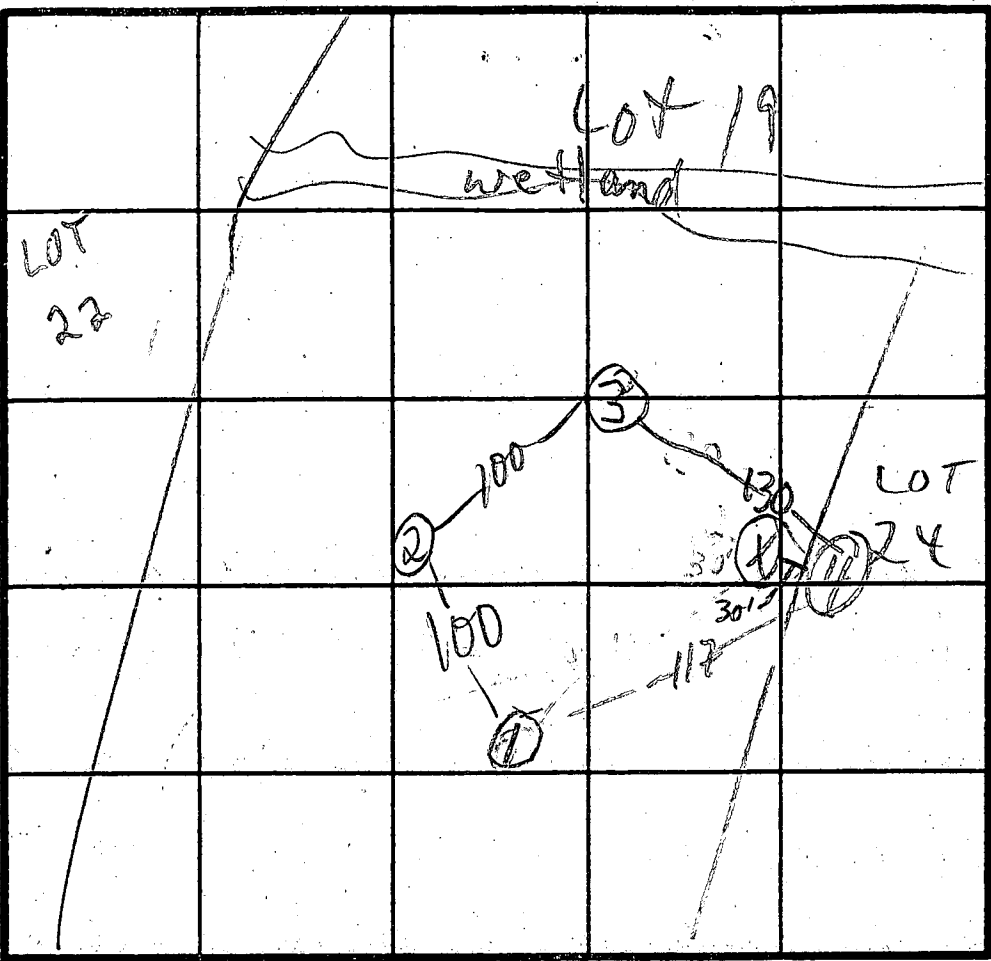
HOLD PENDING FURTHER TESTS HOLD FOR PLAT - PERC OR DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HD-216

# THIS IS NOT A PERMIT

Lot 2321 on  
A43094 prelim



① HI  
②④ MED HI  
③ LO  
 $\bar{x} = 4$   
180 BR  
Inlet 4  
Bottom 6

SOIL PROFILE  
①  
6" topsoil  
yel red  
org.  
silt clay  
loam  
v. high mica  
3-4'  
lt. tan  
loam  
silt loam  
10-15% frags  
high mica

HIGHLAND RD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
3/8/89	1 M	5	2:42	2:44	2:44	2:47	3	
		9	2:42	2:44	2:44	2:48	4	
	1 N	1 1/2	as profiled					
	2 S	5	2:45	2:47	2:47	2:50	3	
	2 V	12	10-15% frags	clay to	2 1/2 - 3 1/2'			
	3 S	5	2:05	3:07	3:07	3:09	2	
	3 V	13	clay to	2-3'	frags 10-15%			
	4 S	4	3:11	3:16	3:16	3:27	9	
	4 M	8	3:11	3:12	3:12	3:14	2	
	4 V	1 1/2	clay to	3-3 1/2'	frags 10%			

REMARKS HOLES ①②+③ DIG PER PLAT

TYPE OF SOIL M. Rifkin  
TESTED BY M. Rifkin ALSO PRESENT D Hopkins

276.00'	102.16'	21° 29' 53"	295.28'	52.19'	523.81'	102.95'	9.16° 50' 18" W	9.53° 9' 17" E	GROSS LOT AREA 3.00	100 YR FLOOD PLAIN 0.00	NET LOT AREA 2.96	
									LOT 20	GROSS LOT AREA 3.00	100 YR FLOOD PLAIN 0.00	NET LOT AREA 2.90

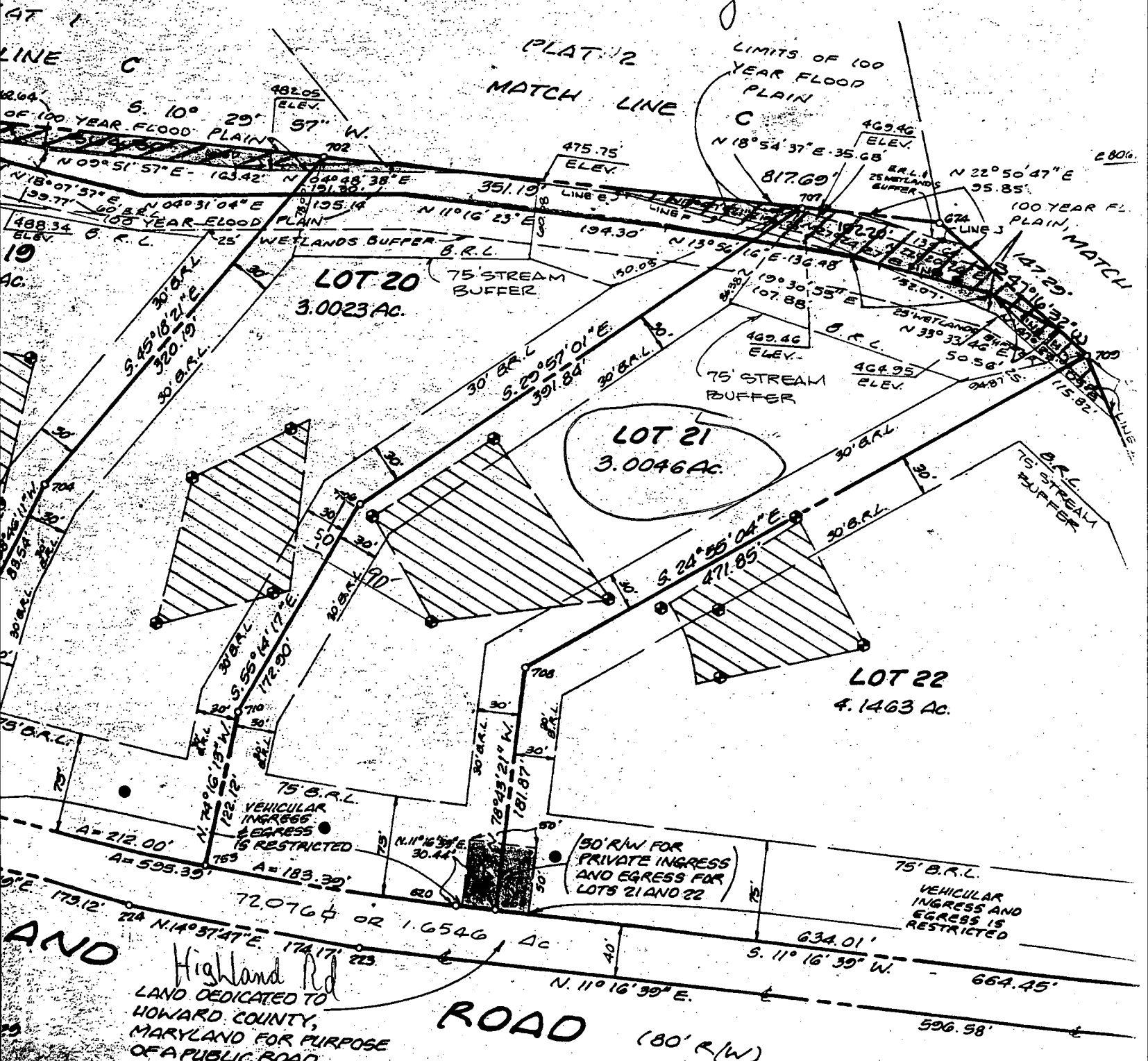
"NO CLEARING, GRADING OR CONSTRUCTION IS PERMITTED WITHIN WETLAND OR STREAM BUFFERS", EXCEPT AS ALLOWED PER WP-89-119.

30' DRAINAGE & UTILITY EASEMENT

LINE A S 47° 13' 29" W	97.97	LINE H S 47° 43' 41" W	80.35
LINE B S 21° 39' 53" W	223.80	LINE I S 47° 21' 53" W	37.90
LINE C S 10° 34' 36" W	303.95	LINE J N 20° 13' 53" E	91.47
LINE D S 02° 31' 06" W	170.44		
LINE E S 11° 56' 31" W	168.00		
LINE F S 20° 08' 50" W	161.56		
LINE G S 20° 29' 29" W	113.87		

Copy of Signed Final

WP-89-119 TO ALLOW HIGHLAND EXCEED 1. GRADING V.

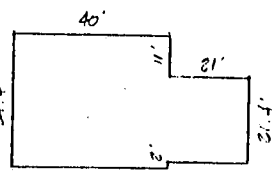
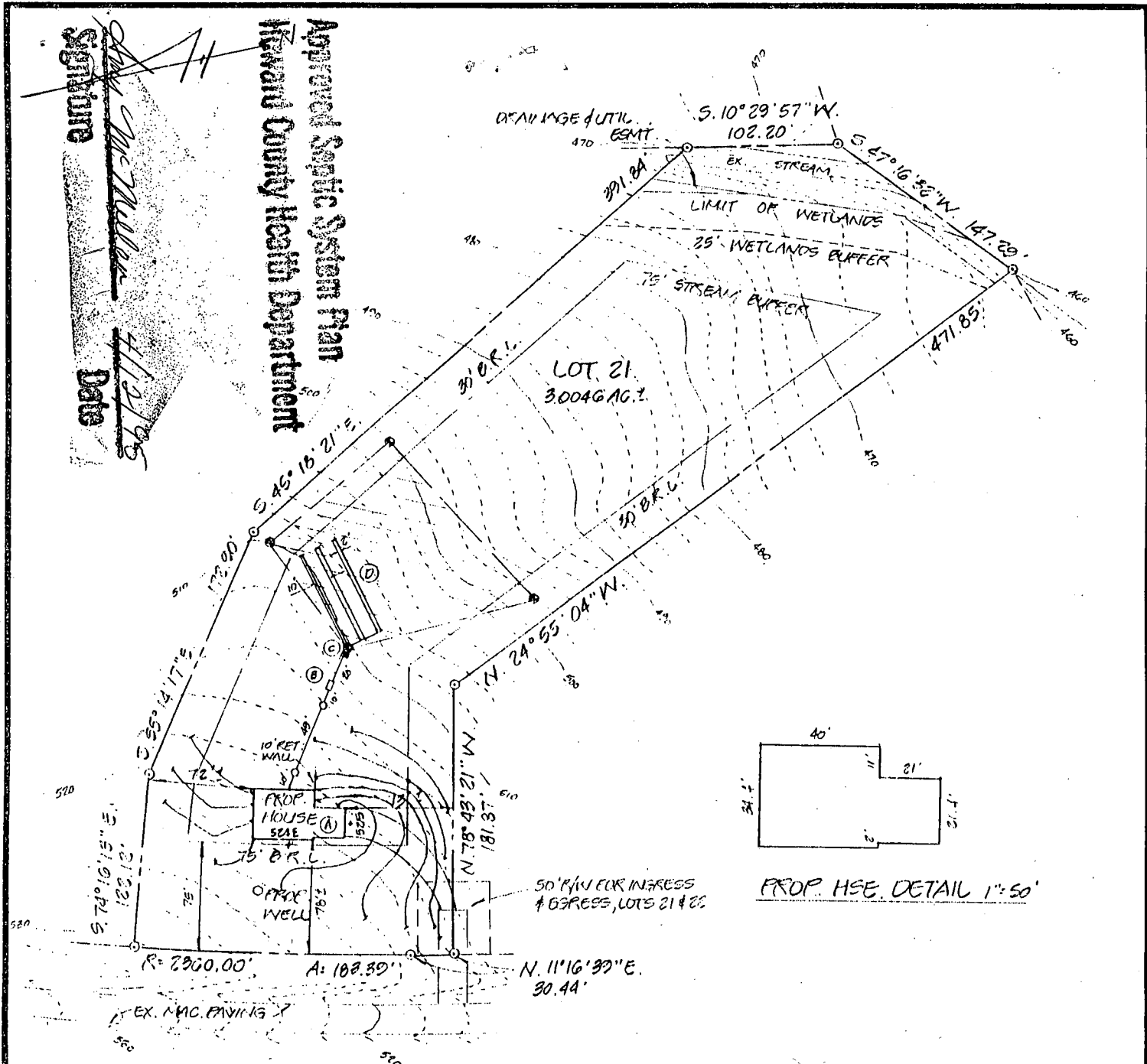


AND Highland Rd  
LAND DEDICATED TO  
HOWARD COUNTY,  
MARYLAND FOR PURPOSE  
OF A PUBLIC ROAD

ROAD (80' R/W)

Signature *[Signature]*  
Date *4/12/95*

Approved Septic System Plan  
Howard County Health Department



PROP. HSE. DETAIL 1"=50'

HIGHLAND ROAD  
(80' R/W)

- Ⓐ PROP. HSE.  
F.F. ELEV.: 525.50'  
BMT. ELEV.: 517.00'  
INV. OUT: ~~516.50~~ 515.50
- Ⓑ PROP. SEPTIC TANK  
EX. ELEV. = 512.90'  
INV. IN = ~~507.30~~ 513.00'  
INV. OUT = ~~507.00~~ 512.70
- Ⓒ PROP. DIST. BOX  
EX. ELEV. = 510.80'  
INV. IN = ~~506.60~~ 510.00
- Ⓓ PROP. TRENCHES  
3 @ 10'  
4" STONE  
8" MAX DEPTH  
EX. ELEV. = 510.40'  
INV. IN = ~~506.40~~ 507.9'

*Maintain 1-2% GRADE  
10' prior to septic tank*

SITE PLAN  
LOT 21, SECTION I  
BRIEFLY  
SITUATED ON HIGHLAND ROAD  
FIFTH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND.  
SCALE: 1"=100' MARCH 1995



3/31/95

I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.



**VANMAR ASSOCIATES INC.**  
Engineers • Surveyors • Planners  
310 South Main Street, Mount Airy, Maryland 21771  
(301) 829-2890 (301) 831-5015

REFERENCE	JOB NO.
PLAT 10009	25-3873



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HOWARD COUNTY HEALTH DEPARTMENT

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*Joyce M. Boyd, M.D., County Health Officer*

February 8, 1996

Ms. Lovena Smith  
13710 Highland Road  
Highland, Maryland 20777

RE: Brierly, Lot #21  
13710 Highland Road  
Well Permit #HO-94-0413  
**U.V. LIGHT TREATMENT SYSTEM**

Dear Ms. Smith:

This is to advise you that the septic system for the above referenced property was installed, inspected, and approved on August 28, 1995.

The treated water sample recently submitted for testing was free of coliform and fecal coliform bacteria at the time of sampling and is bacteriologically safe for drinking.

COMAR 26.04.04.09 prohibits approval of any water supply with bacteriological contamination. This department hereby grants a Permanent Deviation to that section of the regulation of the condition the ultra violet light disinfection system effectively maintains the required bacteriologically free condition of the well water supply.

Furthermore, it will be necessary for you to comply with the following conditions:

1. The system should be properly operated and maintained continuously in accordance with the service contract for the life of the residence.
2. A yearly bacteriological analysis be performed by a private laboratory certified for water testing.
3. Notification of the above condition should be given to any potential buyer/tenant if you decide to sell or rent your home in the future.

Ms. Smith

Brierly, Lot #21

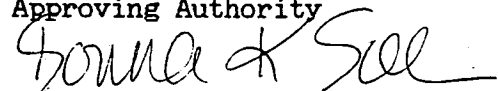
**FINAL CERTIFICATE OF POTABILITY**

Based upon installation of an ultra violet light disinfection system, this certifies that all sampling requirements of COMAR 26.04.04 "Well Regulations" have met for the water supply system installed under permit #HO-94-0413. No guarantee can be given for health protection beyond this date of issue. Based upon satisfactory investigation and evaluation by the Howard County Health Department, the Maryland Department of the Environment accepts this water well system as required by COMAR 26.04.04.09.

Dates of Treated Water Samples: October 27, 1995  
January 30, 1996

Date of Well Completion: April 12, 1995

Approving Authority



Donna K. Soe, Sanitarian  
Water and Sewerage Program

DKS

**1** **6204** SEQUENCE NO. (DP USE ONLY) STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER **HO-94-0413**  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) 70 fill in this form completely

**8** **031795** **13** **OWNER INFORMATION**  
**Weston Matthews Inc**  
15 Last Name Owner First Name 34  
**P O Box 213**  
36 Street or RFD 55  
**West River MD 20778**  
57 Town 70 State 72 Zip 76

**DRILLER INFORMATION** MSD/MGD/MWD  
**Paul M. Fabiszak** **300**  
Driller's Name 77 License No. 80  
**G. Edgar Harr Sons' Corp.**  
Firm Name  
**12047 Falls Rd cockeysville 21030**  
Address  
**F.M.F.** **3/15/95**  
Signature Date

**2** **WELL INFORMATION**  
**5** **150**  
APPROX. PUMPING RATE (GAL. PER MIN.) 8 12  
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 14 20

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

APPROXIMATE DEPTH OF WELL **200** 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)  
37 CABLE REVerse-ROTary Drive-POINT  
 other \_\_\_\_\_

**REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)**  
 **N** THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 **Y** THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 **S** THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY - CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
 **D** THIS WELL WILL DEEPEM AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) **41** \_\_\_\_\_ **52**

**Not to be filled in by driller (OEP USE ONLY)**  
 APPROX. PERMIT NUMBER \_\_\_\_\_ **GAP** \_\_\_\_\_  
54 63  
 FORCE **DS** WRITE INITIALS IN BOX PERMIT No. **HO-94-0413**  
67 68 70 71 72 73 74 75 76 77 78 79

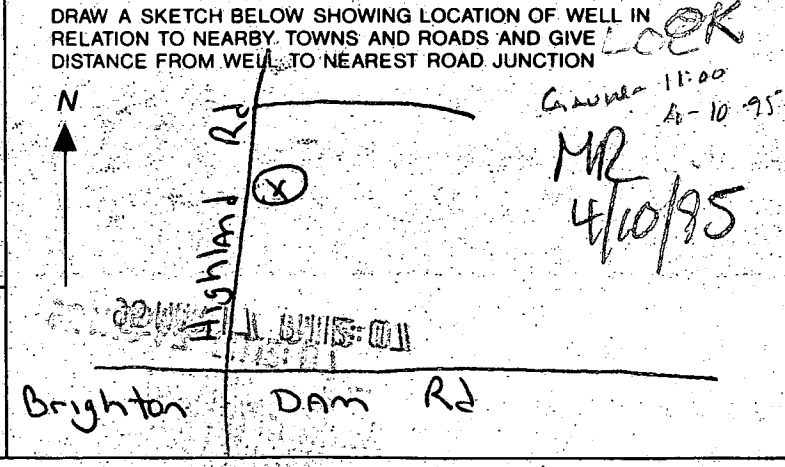
**SPECIAL CONDITIONS**  
 NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED = **Tom Frutchey 301-261-9954**

**3** **LOCATION OF WELL**  
**Howard**  
8 COUNTY 21  
**Spring Hill**  
23 SUBDIVISION 42  
 SECTION \_\_\_\_\_ LOT **21**  
44 46 48 50  
**Clarksville**  
52 NEAREST TOWN 71  
 MILES FROM TOWN (enter 0 if in town) **2** **M** **1**  
73 76 77 78

**4** **Highland Road**  
11 NEAR WHAT ROAD 30  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 **S**  **N**  **E**  **W**  
34 37  
 DISTANCE FROM ROAD **50** FT  
ENTER FT OR MI 38 39  
 TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

**NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL**  
**Howard** **A43094**  
COUNTY NAME COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ INSERT S \_\_\_\_\_  
 DATE ISSUED **032495** **Tom Frutchey** **03/24/95**  
43 48 CO SIGNATURE EXP. DATE 41  
 NORTH GRID **501000** EAST GRID **0806000**  
50 55 57 63

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. **4/10/95 11-15 GROUT**  
 2. **60" CASING JUST OPEN STARTING**  
 3. **BAGS**  
**2' CASING A.G.**  
**TAG OR LOC SEBENS**  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
**8006**  
**3001**



C1 3667

SEQUENCE NO. (DENV USE ONLY)

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 43094

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

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO FROM "PERMIT TO DRILL WELL"

04/29/94

041295

300 (TO NEAREST FOOT)

H0-94-0413

OWNER Weston Matthews, Inc. last name Highland Rd. first name TOWN Clarksville SUBDIVISION Brierly SECTION LOT 21

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes entries for Overburden, Soft Shale, Gray Rock, and water encountered at 190".

GROUTING RECORD form including: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CEMENT CM, BENTONITE CLAY BC), NO. OF BAGS (12), NO. OF BOUNDS (200), GALLONS OF WATER (12), DEPTH OF GROUT SEAL (ft).

CASING RECORD form including: casing types (ST, CO, PL, OT), MAIN CASING TYPE (PL), Nominal diameter (6), Total depth (60).

OTHER CASING (if used) form including: diameter, depth, and screen type (ST, BR, HO, PL, OT).

SCREEN RECORD form including: screen type (ST, BR, HO, PL, OT), DEPTH (nearest ft.) (60, 300), SLOT SIZE, DIAMETER OF SCREEN.

GRAVEL PACK form including: GRAVEL PACK, IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68.

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. WELL HYDROFRACTURED (Y).

Circle appropriate letter: A (well abandoned), 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...

DRILLERS IDENT NO. 399, DRILLERS SIGNATURE (Allen Compton), SITE SUPERVISOR (sign of driller or journeyman).

DEPTH (nearest ft.) table with handwritten values: 60, 300.

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.

PUMPING TEST form including: HOURS PUMPED (6), PUMPING RATE (2), METHOD USED TO MEASURE PUMPING RATE (Submersible), WATER LEVEL (23), WHEN PUMPING (280), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED form including: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY (GALLONS PER MINUTE), PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.

