

11/9/94 ✓
c/o ASAP 12:30 Late
11/10/95
AM House Connection

Tax # 03317366

Late Needs
Spelling House
Connection
11/9/94 3 P.C.O.'s
= 300
P 50370 D

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

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

A 44147

DISTRICT 3rd

DATE 11/2/94

DATE SYSTEM APPROVED 11/11/95

INSPECTOR *[Signature]*

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION Rebecca's Delight LOT 2 ROAD 3076 Pfefferkorn Road

PROPERTY OWNER Art Simpson
ADDRESS 3076 Pfefferkorn Road
West Friendship, Maryland

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 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start trenches 90 feet in from right property line (490+ & 623+ etc. in length) and up 180 feet from corner of front & rear lot lines along right lot line (490' & 623'+ in length) when facing lot from Right-Of-Way into lot. Run trenches on contour. KEEP TRENCHES 100 FEET FROM ANY WATER WELL.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 9/1/94 DKS

PLANS APPROVED BY C. B. Streaker DATE 12/17/89

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

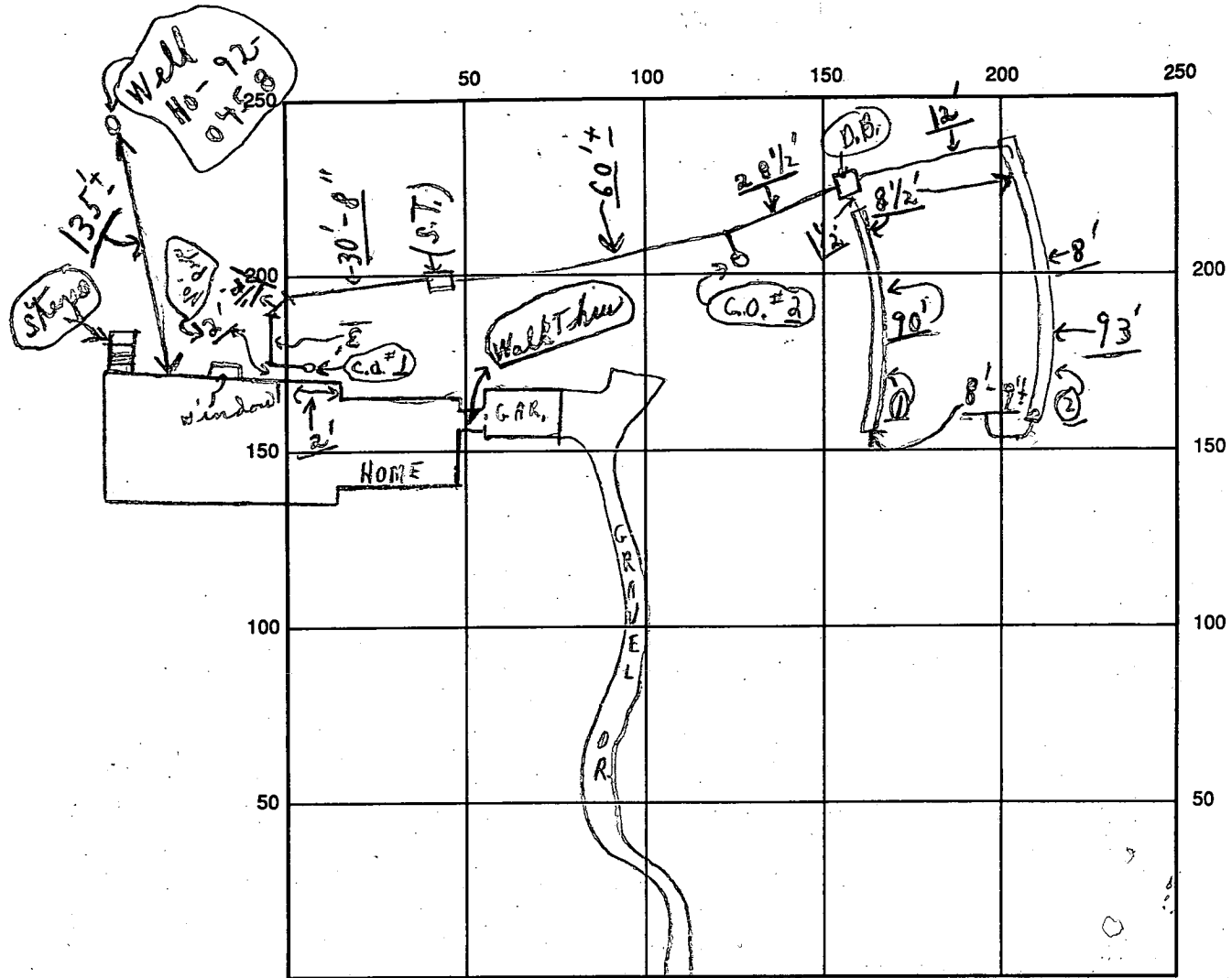
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BLDG. PERMIT SIGNED AND RETURNED 12/12/94
Seal # 57531
per septic tank

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

A 44147



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK CLEANOUTS S.T. OK | C.O.#1 OK | C.O.#2 OK

DISTRIBUTION BOX LEVEL OK (Boyle's in)

DRAIN FIELD/TITLE DEPTH 8 1/2 + average 8 + 3 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. { TOTAL LENGTH 90' + 93' = 183 FT. }

NUMBER OF TRENCHES 2 ONE SIDEWALL/~~TOP~~ AREA 732 SQ. FT.

DRYWALL INSIDE DIAMETER ~ FT. EFFECTIVE DEPTH BELOW INLET ~ FT.

ABSORBENT AREA 732 SQ. FT.

REMARKS: (Early P.M.) 11/9/94 OK for stone in trenches only, partial "1/9" connection. No house
ALSO OK to cover from home to road block and to cover all of trenches
but ends + middle, chd: "1/9 (P.M.) No change, partial chd
"1/9 Late P.M. - Final - saw ends of trenches only; except
Houses connection; chd left business card @ C.O. near dist
"1/9 Early → W.P.T. - ok to cover - Final chd. House Connection OK 11/11/95

DATE SYSTEM APPROVED 11/11/95 INSPECTOR Ronald P. Boyle

C1 0586

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 44197

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 10/14/99

Depth of Well 185 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 44-197-0452

OWNER last-name first-name TOWN SUBDIVISION SECTION LOT

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. Includes handwritten entries: SAND Stone, GRAY MICA ROCK, 0-64, 64-185.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 24 NO. OF POUNDS 4926

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

MAIN CASING TYPE Nominal diameter of main casing Total depth of main casing

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

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

Table for screen depth with columns for depth (nearest ft.) and rows for each screen.

CIRCLE APPROPRIATE LETTER 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...

DRILLERS IDENT. NO.

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) T (E.R.O.S.) W Q 74 75. 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 15 METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or 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) LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

See Attached location

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 44147
P _____

DISTRICT 5TH
DATE 5-4-89

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 CYNTHIA KOONCE MILLER Mr. + Mrs. Art Simpson
ADDRESS 3080 PFEFFERKORN RD. W. FRIENDSHIP MD, 21794 PHONE 301-424-3340
730-7373

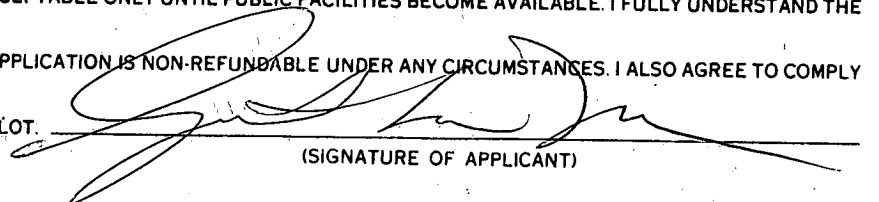
PROPERTY LOCATION:

SUBDIVISION PROP. SUBDIVISION - MILLER PROPT. LOT NO. 2 on prelim

ROAD AND DESCRIPTION ROSCOMMON DRIVE 3076 Pfefferkorn Road

SIZE OF LOT 3.4 ± TYPE BLDG. 4 BEDROOMS
(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.


(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

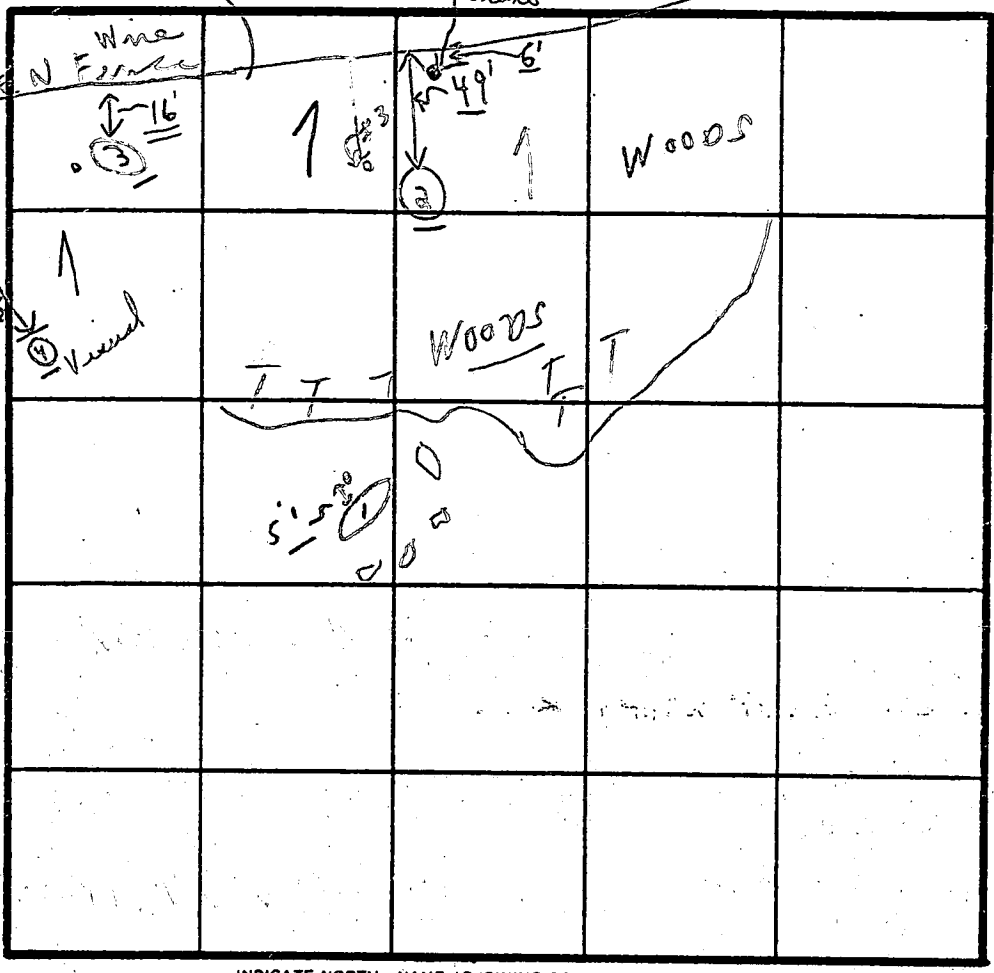
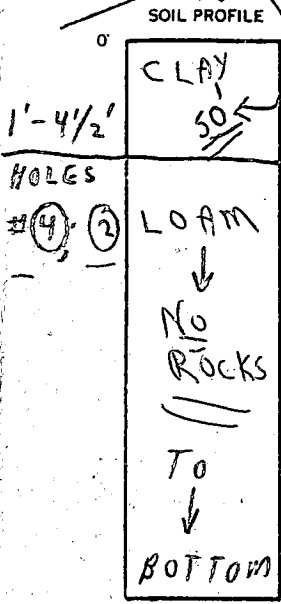
BLDG. PERMIT SIGNED
AND RETURNED 7/22/94
Serial # 53315
SFD-4Bum

THIS IS NOT A PERMIT

A 44147

POND OPEN

#3
#2
Corner stake



X=3
180' BR
Inlet 4'
Bot 8'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Phalshon Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
6/13/89	④	4 1/2'	7:13	LOAM			
3/4	③	5 1/2'	11:15	11:19	11:19	11:23	4m
	③	11 1/2'		LOAM			
	②	4 1/2'	11:13	11:15	11:15	11:18	3m
	②	13 1/2'	LOAM		4'		
	①	3 1/2'	11:09	11:09	11:09	11:11	2m
	①	7'	11:07	11:09	11:09	11:11	2m
		12' 8"		Loam			

Clay 1'-4 1/2'

SOIL PROFILE

NOLE #3

③

1'-5 1/2' CLAY

5 1/2' - 11 1/2'

LOAM

(IN WOODS)

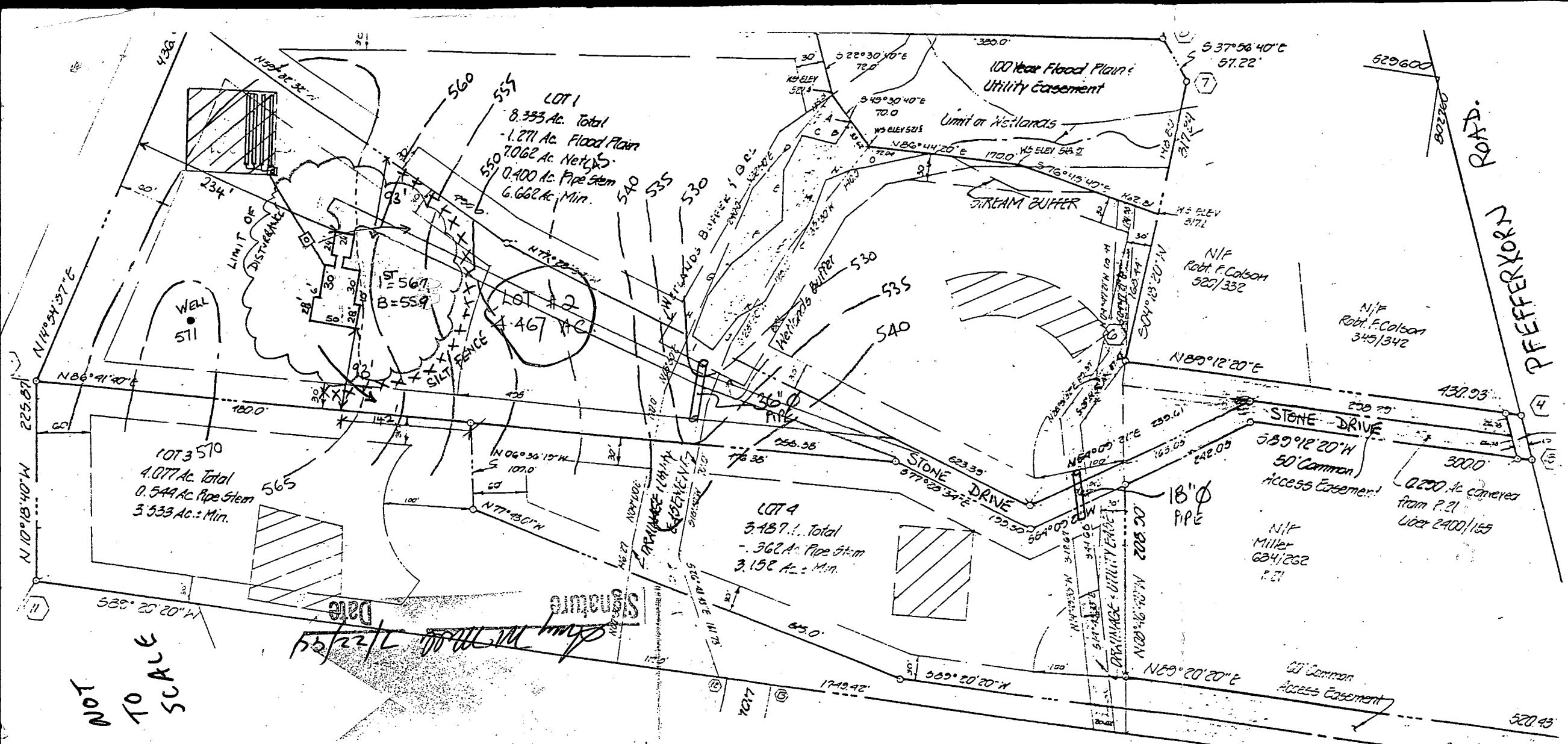
REMARKS Tests in open ① ; Tests in woods ②, ③, ④

TYPE OF SOIL Tests per stake

TESTED BY C. Bel

ALSO PRESENT { Engineers } { Fuchsman }

EH-12-1079



NOT TO SCALE

Date 7/22/22
 Signature [Handwritten Signature]

Approved Septic System Plan
 Howard County Health Department

SCALE 1" = 128'
 LOT #2 REBECCA'S DELIGHT
 3RD ELECTION DISTRICT, TAX MAP 15
 PARCEL 197

DRAIN FIELD
 4 TRENCHES 90' LONG, 2'0" WIDE.
 GRAVITY FEED FROM BELOW 1ST FLOOR, FUTURE BASEMENT
 POWDER ROOM TO HAVE EJECTOR PUMP.

(SEE OVER)

INVERT INTO TRENCH.	562.00
EXISTING ELEV. @ TRENCH	566.00
INVERT INTO DISTRIBUTION BOX	562.73
EXISTING ELEV. @ DIST. BOX	566.00
INVERT ELEV. OUT OF SEPTIC TANK	563.5
INVERT ELEV. INTO SEPTIC TANK.	563.75
EXISTING ELEV. @ SEPTIC TANK	565.50
INVERT ELEV. OUT OF HOUSE	564.0

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
94 JUL 20 PM 2:44