

8/25/92 CATG

TAK# 04322398

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 47285
A 44439
DATE 07/09/91
DATE SYSTEM APPROVED 8/25/92
INSPECTOR M. Riskin

Jim Boone IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE _____

SUBDIVISION Poplar Heights ROAD 1110 St. Michaels Road LOT 1

PROPERTY OWNER Mr. Richard R. Howard
1110 St. Michaels Road
ADDRESS Mt. Airy, Maryland 21771

~~WASTEWATER TREATMENT SYSTEMS USED INCREASED SEWER TANK CAPACITY BY 50% AND ABSORPTION AREA BY 10%~~

~~EXCESSIVE GROUNDWATER~~

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 5

265 FT LONG - 5 BED ROOM

TRENCHES - 200 sq. ft. per bedroom. 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 - Place the distribution box 290 ft from the front lot line and 80 ft from the left side of the lot as seen when facing the lot from St. Michaels Rd. Trenches to be not over 60ft long running toward the back line. The trenches to be 10ft apart edge to edge. Several trenches needed, put cleanout on sewer line every 70 ft.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 8-2-92 JEN

PLANS APPROVED BY Raymond Hodges cm DATE 07/16/90

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

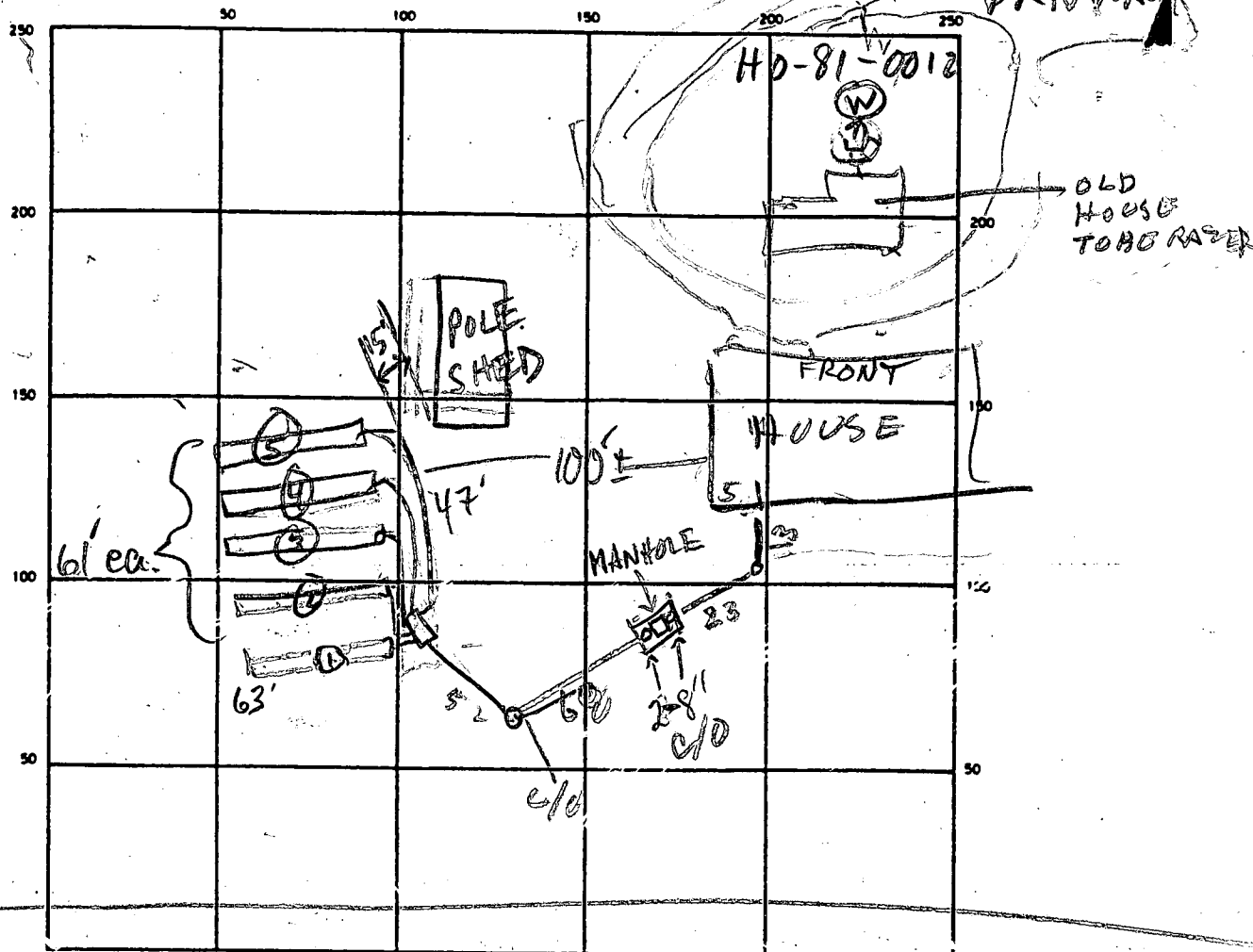
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 4439

SEE
PLAN 7



INDICATE NORTH — NAME ADJOINING ROADWAY #5 BASE LINE

~~TANK~~ | ~~SEWER~~

SEPTIC TANK LEVEL 1500 GAL-OK CLEANOUTS (2) 8", 1 MANHOLE | OK 13' FROM HOUSE

DISTRIBUTION BOX LEVEL OK-BAFFLE IN

DRAIN FIELD/TILE FIELD. DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 63/61/61/61/5 FT. } 307

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 1228 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 1228 SQ. FT.

REMARKS 8/24/92 - 2 1/2 TRENCHES DUG. TANK SET

FINISH DIGGING TRENCHES, ADD STONE, INSTALL CLEANOUTS

& MANHOLE & CALL RH

8/25/92 OK TO COVER ALL MR

DATE SYSTEM APPROVED 8/25/92

INSPECTOR M. Ripkin

APPLICATION

6/14/89

10:00 AM

PERCOLATION TESTING

A 444/39
P _____

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

REPAIR -

DISTRICT _____

APPLICANT WISHES TO

DATE 6/1/89

BUILD RE-PLACEMENT HOUSE IN NEW LOCATION; LIVE IN EXISTING UNTIL COMPLETE; THEN DEMOLISH.

REPAIR PERCOLATION TEST REQUIRED.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

MUST PROVIDE SUFFICIENT GUARANTEES TO THIS OFFICE AND TO ZONING TO SHOW THAT ORIGINAL HOUSE WILL BE ABANDONED.

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

5/26/89
C. Williams

PROPERTY OWNER PHILIP R. HOWARD

ADDRESS 1110 ST. MICHAELS RD. PHONE 301-489-4711
Mt AIRY, MD. 21771

PROSPECTIVE BUYER _____
ADDRESS _____ PHONE _____

PROPERTY LOCATION:
SUBDIVISION POPULAR HEIGHTS LOT NO. 7

ROAD AND DESCRIPTION 1110 ST. MICHAELS RD.
Mt AIRY, MD. 21771

TAX MAP _____ PARCEL # _____
SIZE OF LOT 3.2 ACRES TYPE BLDG. SFD REPLACEMENT
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6-14-89 perc oh. Plat to be supplied by owner

ASAP. S. Alford
BUDG. PERMIT, SIGNED AND RETURNED 7/16/90
Serial # 33541-SFD

HD-216

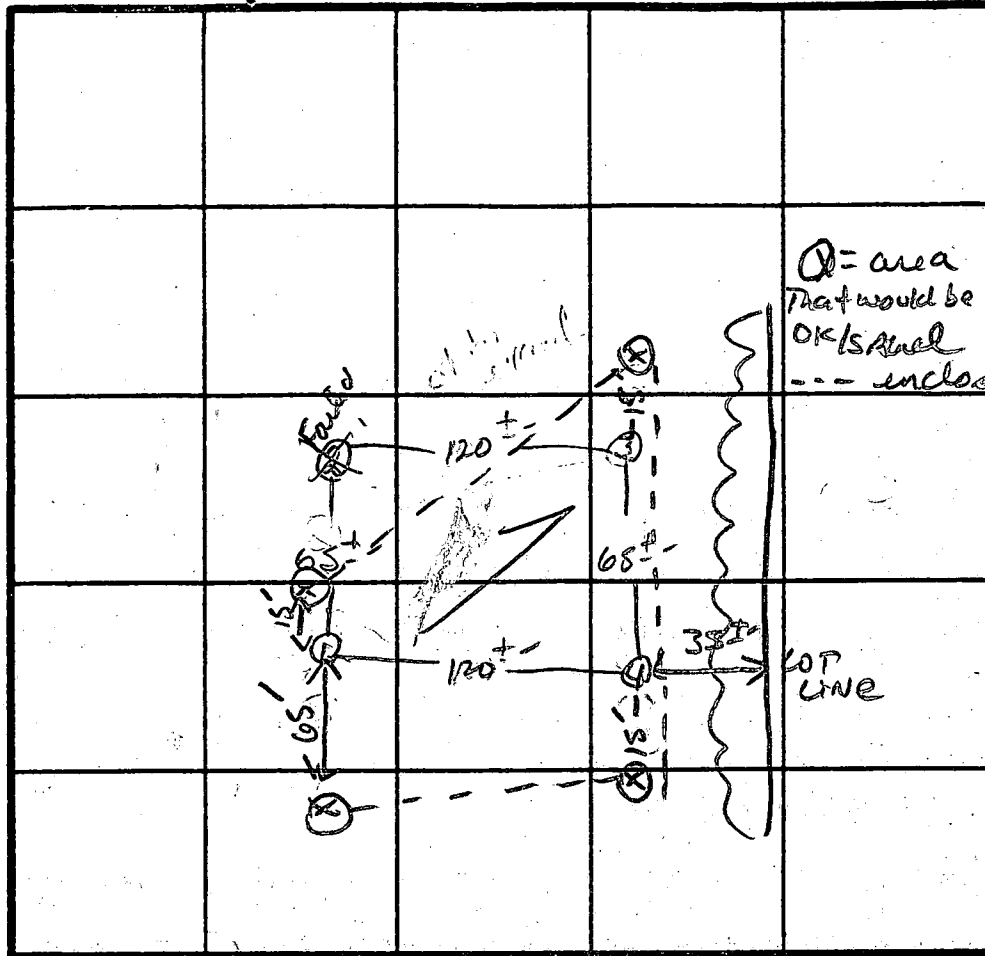
THIS IS NOT A PERMIT

①
SOIL PROFILE

6" AP Hx
Strong yellow br Clay loam
10-15% Shale Frag

4" yellow br s/pink casts
20-30% FRAG

12"



X PERC 12min
210 φ/BA
INITIAL Syst
Inlet 4.0
Bottom 8.0
Requires Shallowon

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
St Michaels Rd.

②
AP Hx
6" yellow br Clay loam
10-20% FRAG

5" yellow br silt loam
Frag 40%
TO 7-8'
STRUCTURED
Shale 8'
Fail

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/14/87	1S	4'	10:33	10:37	10:37	10:48	11 min
	1M	8'	10:33	10:35	10:35	10:38	3 min
	1V	12.5'	As provided				
	2S	4'	10:45	NO MOVEMENT		20 min	Fail
	2M	8'	10:46	10:47	10:47	10:48	
	2V	12'	See profile				
	3S	4'	10:56	11:10	11:10	11:35	25 min
	3M	8'	10:56	11:12	11:12	11:30	18 min
	3V	12'	Similar to #1		w/ Clay TO 4.5"		
	4V	12'	Similar to #1		Clay TO 3.5"		
	2S ₁	4.5'	10:56	11:45	less than 1/4" movement		

REMARKS _____

TYPE OF SOIL minor/mt. Airy TRANSITION

TESTED BY S. Abel ALSO PRESENT owner/jim

app 11-8-78
D

H 12/78
9-30 A.M.
11/8/78

PERMIT

P 28547
A Repair

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY

DISTRICT _____

DATE 7/27/78

INDEXED

Bud Arnold

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS _____ PHONE _____

SUBDIVISION _____ ROAD 1110 St. Michaels Road LOT _____

PROPERTY OWNER Mae Mathis

ADDRESS 1110 St. Michaels Road

SPECIFICATIONS 2 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN FACING LOT FROM

BLDG. PERMIT SIGNED
AND RETURNED 7/27/78
Serial No. 36477

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND

REPAIR. Dry Well - 360 sqft absorbent and wall area to be gun

below the first 4ft of orig. grade. Max depth of DW is 12' below orig. grade
tank to be 50' away from well - sewer lines to be 30' away from well.
Locate 100ft from well + 15' from fence line

PLANS APPROVED BY Palmer F. Wine DATE 7/27/78

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

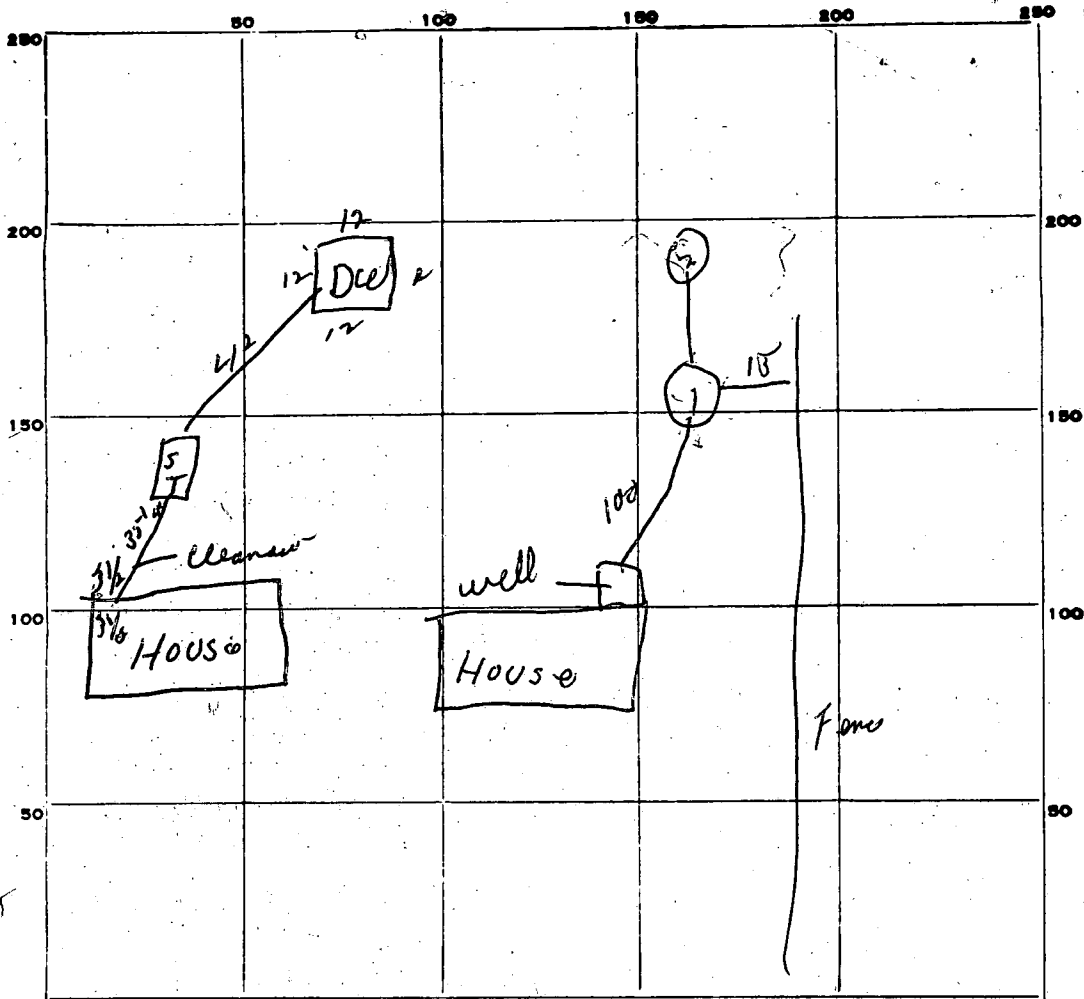
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

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

P
28547



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD OK

SEPTIC TANK, LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER Perimeter 48' FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA 364 SQ. FT.

REMARKS hole 1 & 2 good soil - sand - shale

DATE SYSTEM APPROVED 11-8-78 INSPECTOR W.W. Monaghan

C 1 7660 SEQUENCE NO. (OEP USE ONLY)

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

Date Received (OEP use only)

DATE WELL COMPLETED 030883

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED

COUNTY NUMBER P 28547Z

Depth of Well 100 ft (TO NEAREST FOOT)

PERMIT NO. FROM PERMIT TO DRILL WELL HC-81-0012

OWNER Mathis Mae last name first name STREET OR RFD 1110 St. Michaels Road TOWN Poplar Springs SUBDIVISION tax map 7, Parcel 28 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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows: Top Soil (0-2), Brown Shale (2-50), Brown Slade (50-65), Blue Slade (65-100).

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 13 NO. OF POUNDS 1300 GALLONS OF WATER 78 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 33+ ft.

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

MAIN CASING TYPE (PL) Nominal diameter (nearest inch) 6 Total depth of main casing (nearest foot) 60

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

SCREEN RECORD screen type or openhole insert appropriate code below: (HO) OPEN HOLE, (ST) STEEL, (BR) BRASS BRONZE, (PL) PLASTIC, (OT) OTHER

DEPTH (nearest ft.) 58 100

- CIRCLE APPROPRIATE BOX [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...

DRILLERS IDENT. NO. 223 DRILLERS SIGNATURE Ralph Wayne

SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX [F]

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 (seq. no.)

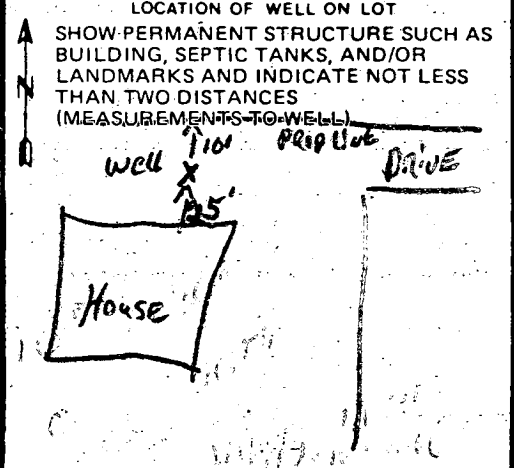
PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 15 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 35 WHEN PUMPING 100 TYPE OF PUMP USED (for test) [A] air, [P] piston, [T] turbine, [C] centrifugal, [R] rotary, [O] other, [J] jet, [S] submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) [Y] [N]

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O)) 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 2 (nearest foot)



REPLACEMENT WELL SITE INSPECTION

ABANDONMENT

OWNER PHIL HOWARD

DATE REQUESTED 6/9/93 1:00

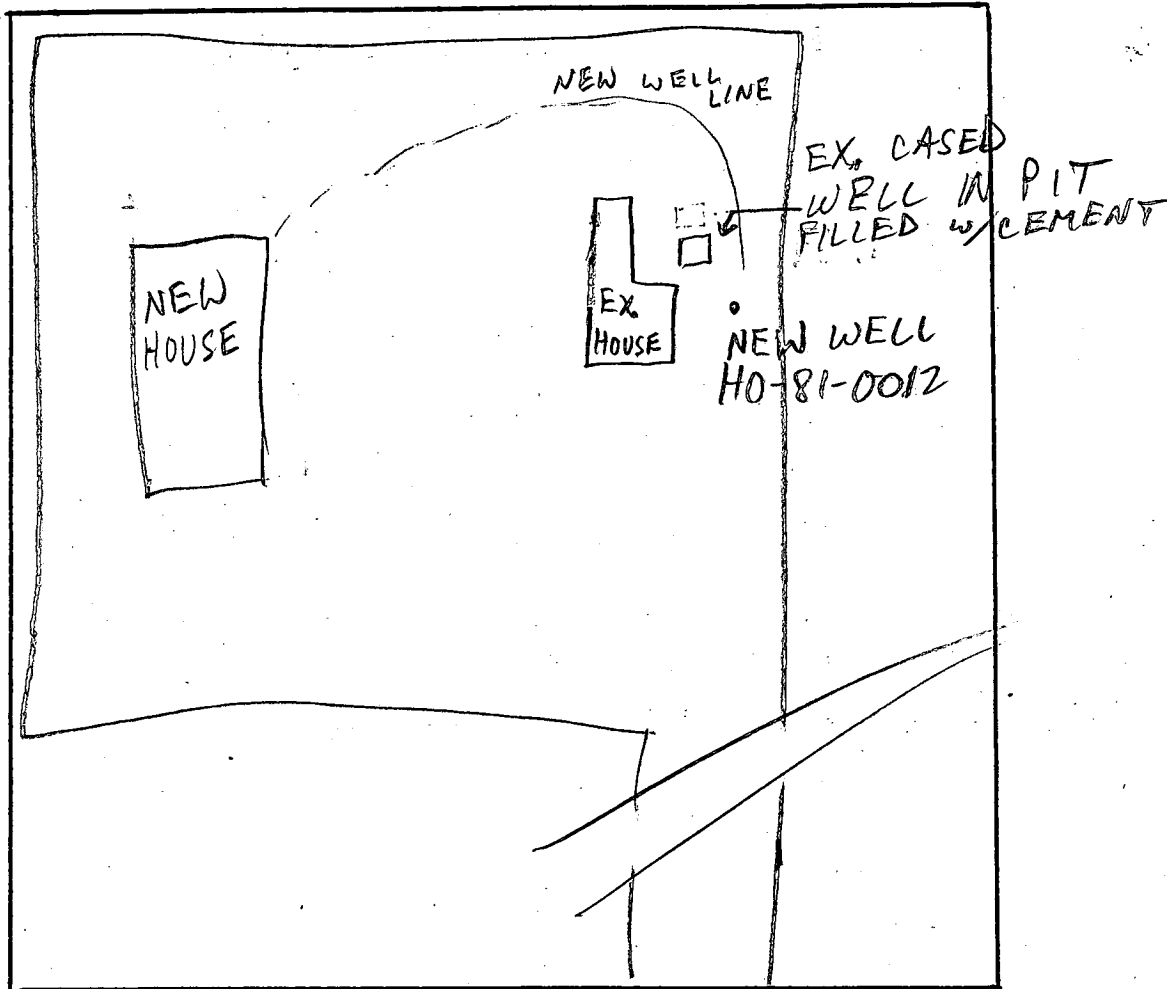
ADDRESS 1110 ST MICHAELS RD

DRILLER _____

WELL TAG# _____

COUNTY# _____

LOCATION DIAGRAM



COMMENTS: SEPTIC DONE 8/25/92 A44439 NEW WELL HO-81-0012

EX. WELL FILLED 8" PEA GRAVEL, 11/4" TYPE I CEMENT - OK MR 6/9/93

PIT STILL IN USE (TANK, ELECTRIC HOOK-UP, ETC.); WILL BE COLLAPSED WHEN NEW WELL CONN. TO HOUSE MR

B 2325 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER HD-81-0012

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

please print or type

fill in this form completely

Date/Received 3/19/83 10:30 AM
OWNER INFORMATION
Last Name MAITNIS Owner MAE
Street or RFD 11101 ST MICHAELS RD
Town Mt Airy Md 21177 State Zip

LOCATION OF WELL
COUNTY Howard
SUBDIVISION Tax map 7, parcel 28
SECTION 23 LOT 48
NEAREST TOWN Poplar Springs
MILES FROM TOWN 1

DRILLER INFORMATION
Driller's Name RALPH H MAYNE 77 License No. 80
Firm Name Ralph Mayne Well Drilling
Address 11101 St Michaels Rd
Signature Date 3/13/83

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NEAR WHAT ROAD S.E. Michael Rd
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST
DISTANCE FROM ROAD 500

WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

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
7609
5408

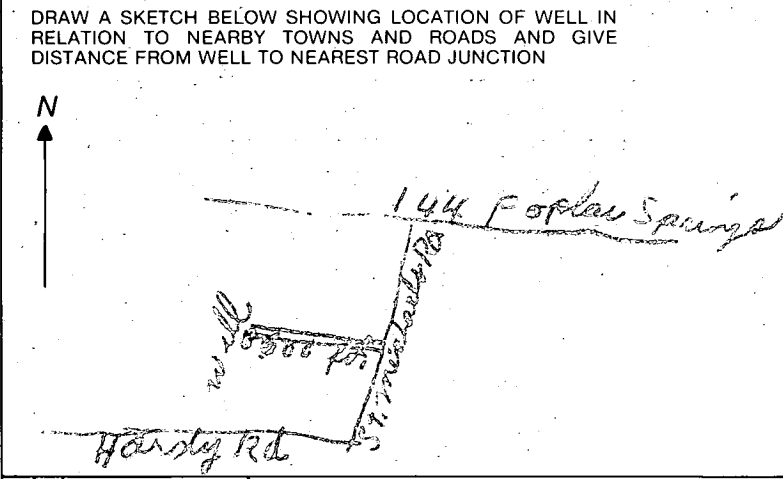
USE FOR WATER (CIRCLE APPROPRIATE BOX)
HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH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

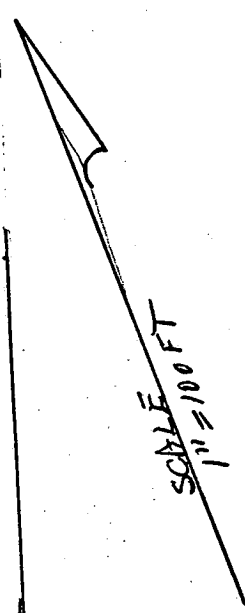
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
THIS WELL WILL DEEPEAN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE FS INITIALS IN BOX PERMIT No. HD-81-0012



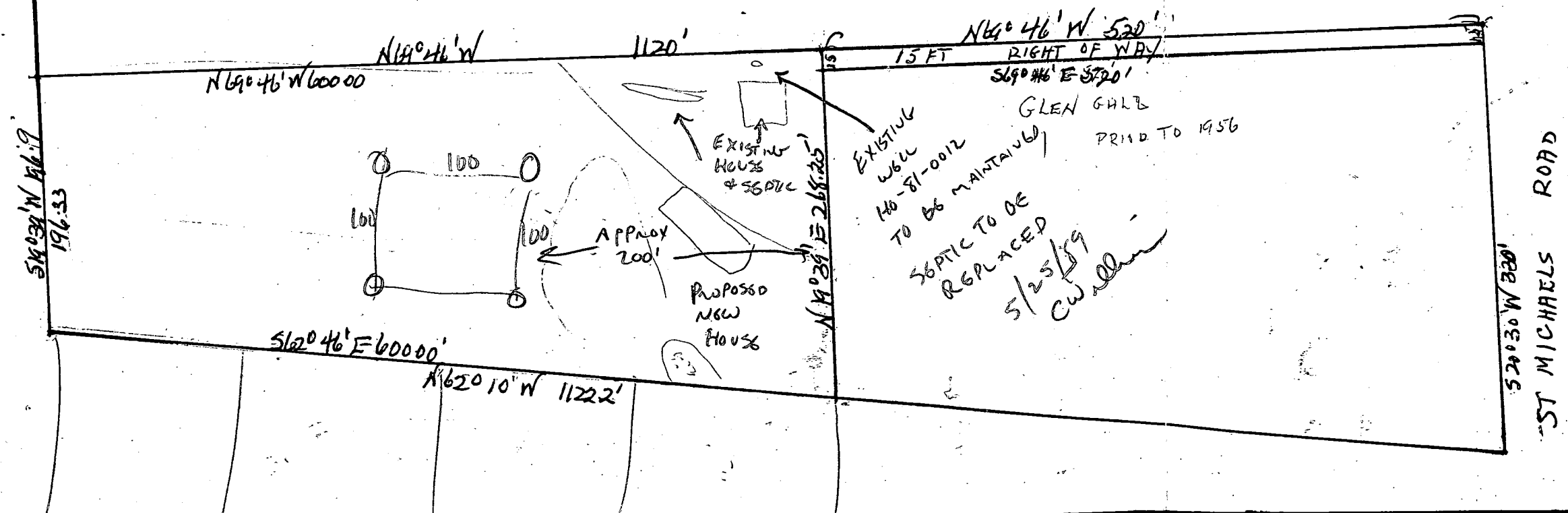
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
COUNTY NAME HOWARD COUNTY NO. P285472
OEP SIGNATURE DATE ISSUED 030383 CO SIGNATURE Frank Sherrin
NORTH GRID 549 EAST GRID 0769 EXPIRES 090383

SPECIAL CONDITIONS 8-63



3' below
grade at highest
point for septic

PLAT BOOK No 350/1026
LOT I (EYE) POPLAR HEIGHTS



N 19° 39' 00" E 196.38'

P. 28
3.3 ACRES

S 69° 46' 00" W 600.00'

36' C.I.C.O. S.T.

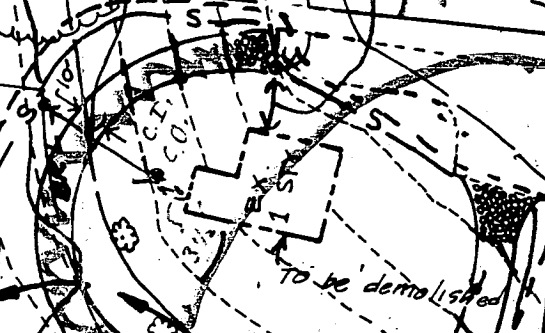
EXISTING WELL



METAL FRAME STORAGE

DISTRIBUTION BOX

SEPTIC TANK



PORCH

N 19° 39' 00" E 268.25'

P. 31

N 62° 46' 00" W 693.00'

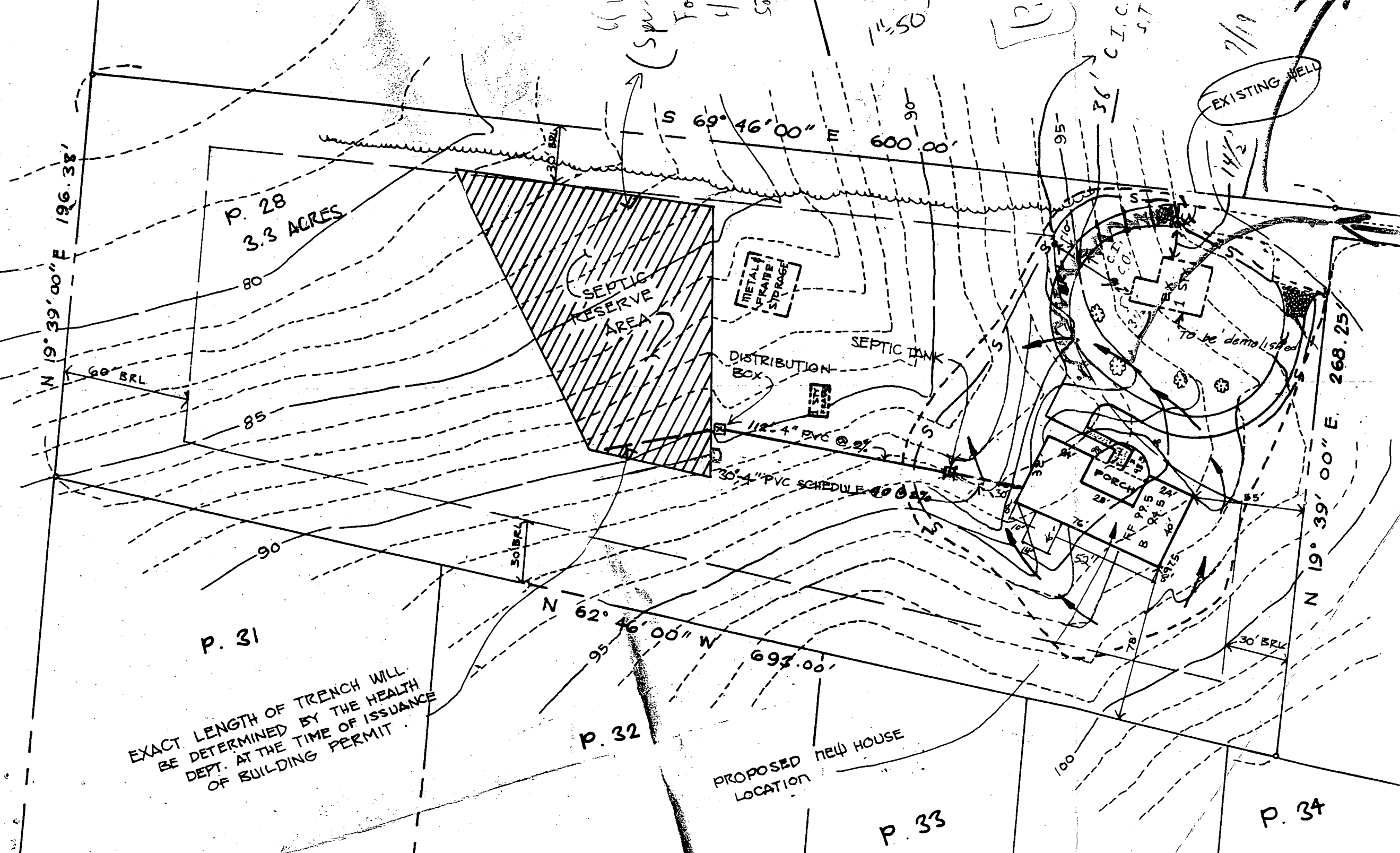
EXACT LENGTH OF TRENCH WILL BE DETERMINED BY THE HEALTH DEPT. AT THE TIME OF ISSUANCE OF BUILDING PERMIT

P. 32

PROPOSED NEW HOUSE LOCATION

P. 33

P. 34

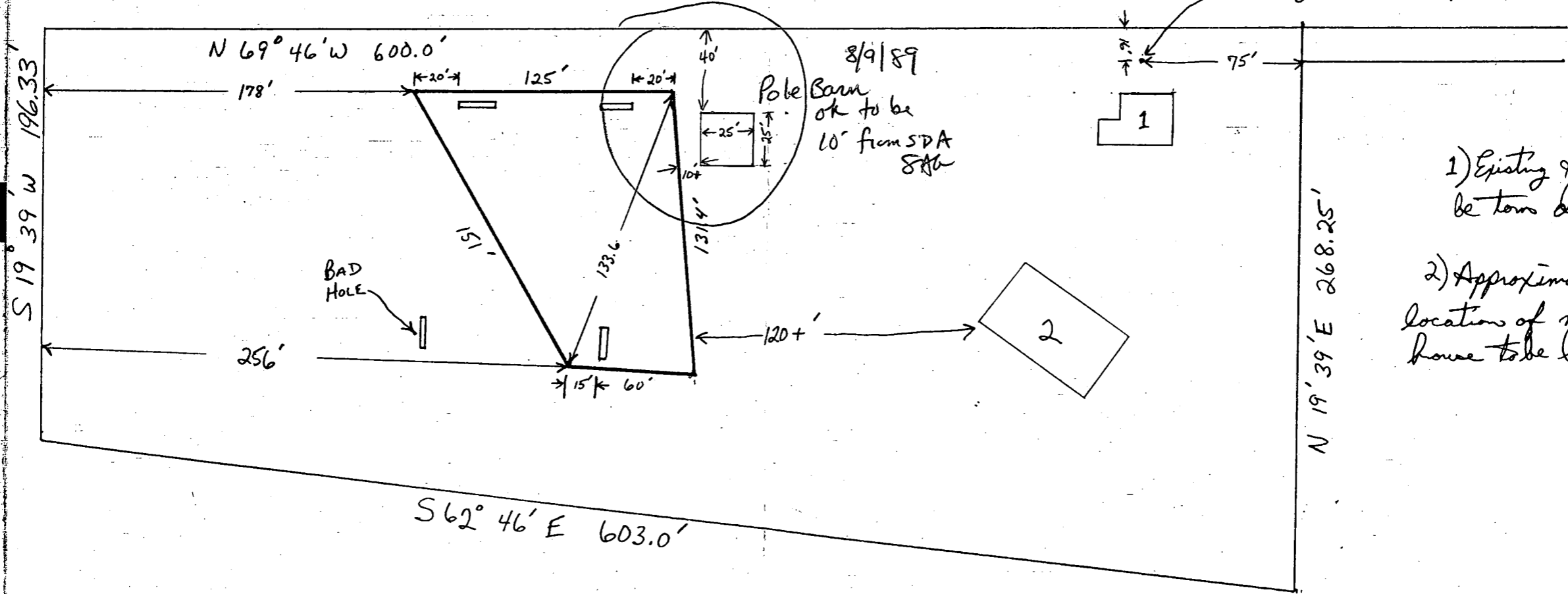


PHILIP HOWARD
 1110 ST. MICHAELS RD.
 Mt. AIRY, MD. 21771
 301-489-4711

SCALE
 1" = 60'

Drain Field Area in Red

Existing Well - we plan to use



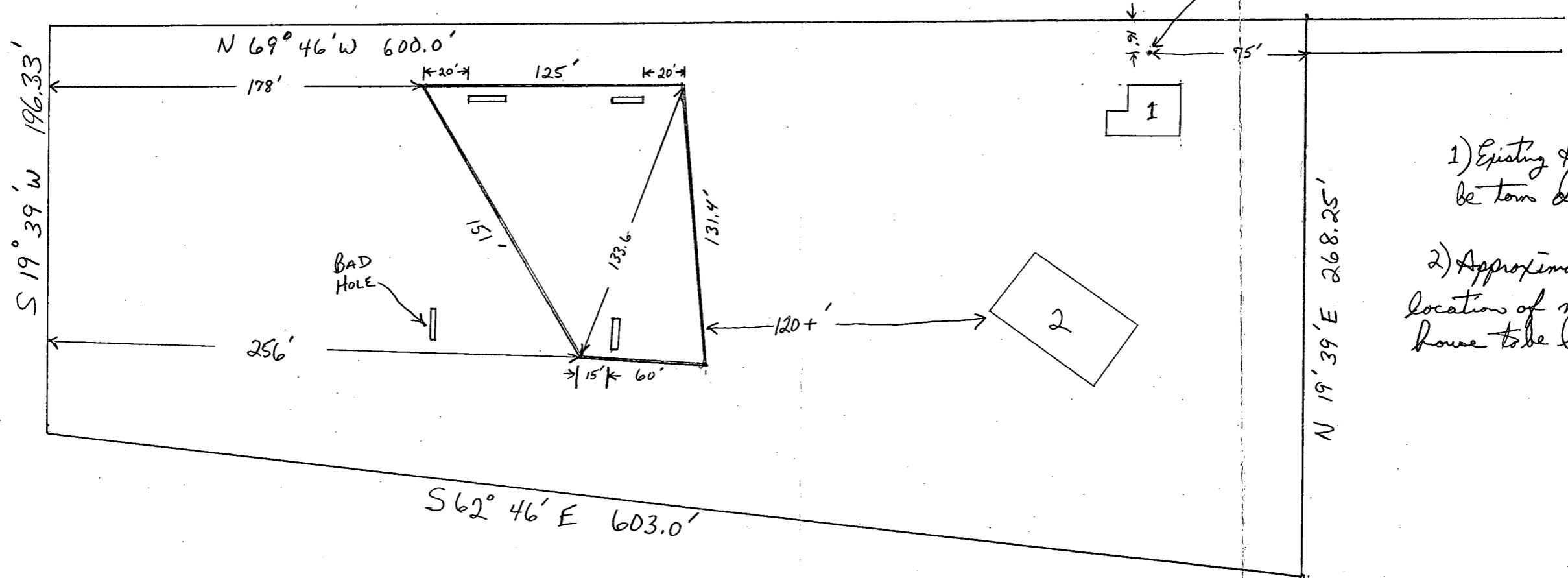
8/9/89
 Pole Barn
 ok to be
 10' from SDA
 SAG

- 1) Existing House to be torn down
- 2) Approximate location of new house to be built

SCALE
1" = 60'

PHILIP HOWARD
1110 ST. MICHAELS RD.
MT. AIRY, MD. 21771
301-489-4711

Drain Field Area in Red



Existing Well - we plan to use

- 1) Existing house to be torn down.
- 2) Approximate location of new house to be built

8/22/89

SDA shown in Red
Approved Site Plan