

8/22/89

4158015

PERMIT

P 44914

SEWAGE DISPOSAL SYSTEM

A REPAIR

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 8/31/89

INDEXED

DATE SYSTEM APPROVED 8/22/89

INSPECTOR M. Rifkin

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION _____ ROAD 6061 Old Lawyers Hill LOT _____

PROPERTY OWNER Barr BETH Fox 703-524-8677 AS OF 8/98

ADDRESS 6061 Old Lawyers Hill Road FAX 0293

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES NO _____

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

REPAIR - REPLACEMENT OF SEPTIC TANK.

8-13-98 WELL + SEPTIC ABANDONED - TEL/BETH FOX, SHE SAID THAT ^{8/14/98} THE OLD HOUSE (CAROLINAS COTTAGE) WAS DISCONNECTED FROM THE SEPTIC SYSTEM IN THE 60'S WHEN THE STUDIO WAS BUILT + CONNECTED TO THE SEPTIC SYSTEM. THE PROPERTY IS BEING PURCHASED BY THE NEIGHBORS (DALLAMBER) AND WILL BE PUT IN LAND TRUST. *lf*

NOTE: ALL STRUCTURES TO BE DEMOLISHED

PLANS APPROVED BY C. Williams DATE 8/22/89

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

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

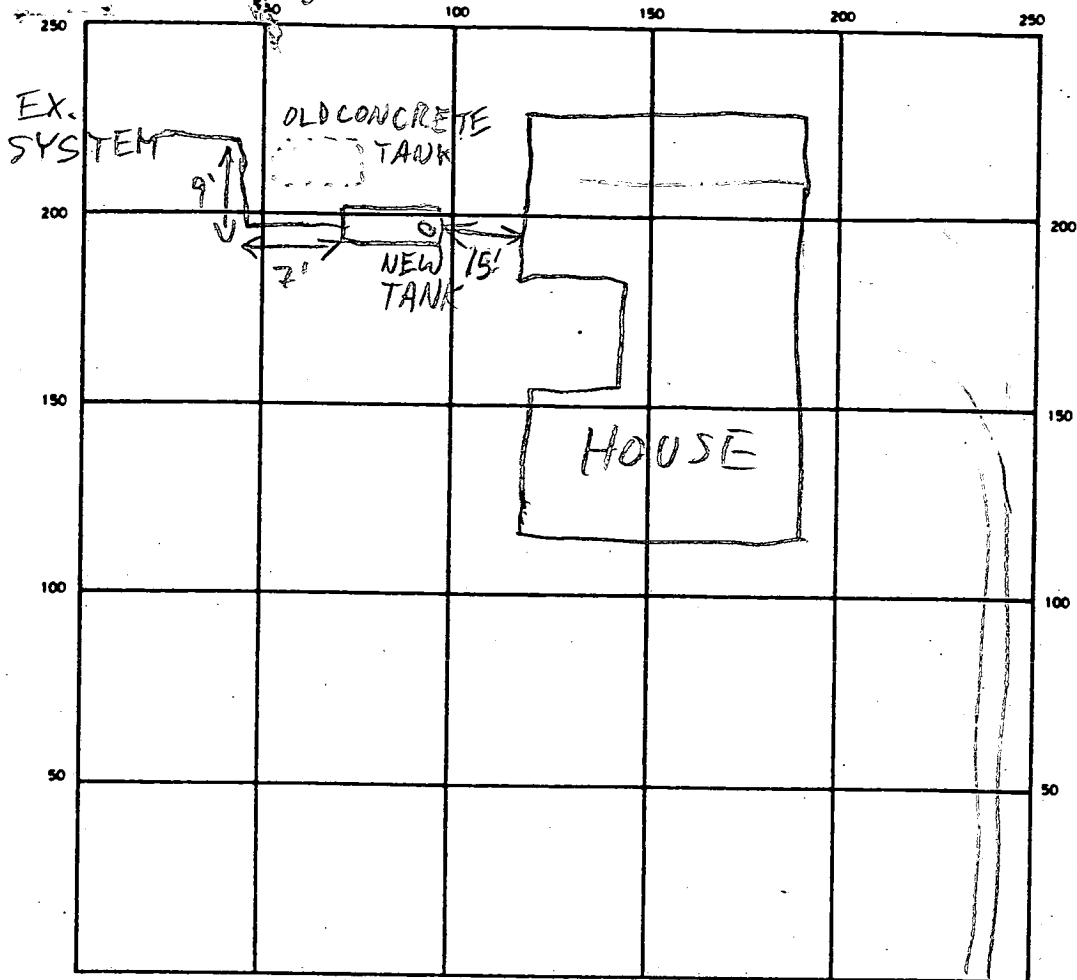
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

44914



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

OLD LAWYERS HILL RD

SEPTIC TANK LEVEL 1000 GAL CLEANOUTS OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD DEPTH _____ FT. TRENCH WIDTH _____ FT. INLET DEPTH _____ FT.

EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 8/22/89 NEW SEPTIC TANK IN - OK TO COVER MR

DATE SYSTEM APPROVED 8/22/89 INSPECTOR M. Riskin



HOWARD COUNTY HEALTH DEPARTMENT

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

August 14, 1998

MEMORANDUM

TO: Ms. Beth Bahr Fox
(Trustee for Florence Bahr Estate)
1609 N. Jackson St.
Arlington, VA 22201

FROM: Glen Savage, R.S. *JS*
Water And Sewerage Program

RE: Demolition Permit
6061 Old Lawyers Hill Road
Elkridge, MD 21227

This is to advise that the Howard County Health Department recommends issuance of the demolition permit for the above referenced property.

The well and septic system which existed on the property have been properly abandoned.

cc: File

LICENSES & PERMITS
TYOCH SEPTIC SERVICE
lawhill.dem

SITE INSPECTION SHEET

OWNER: BETH FOX (BAHR)

DATE REQUESTED: 8/13/98

PHONE #: _____

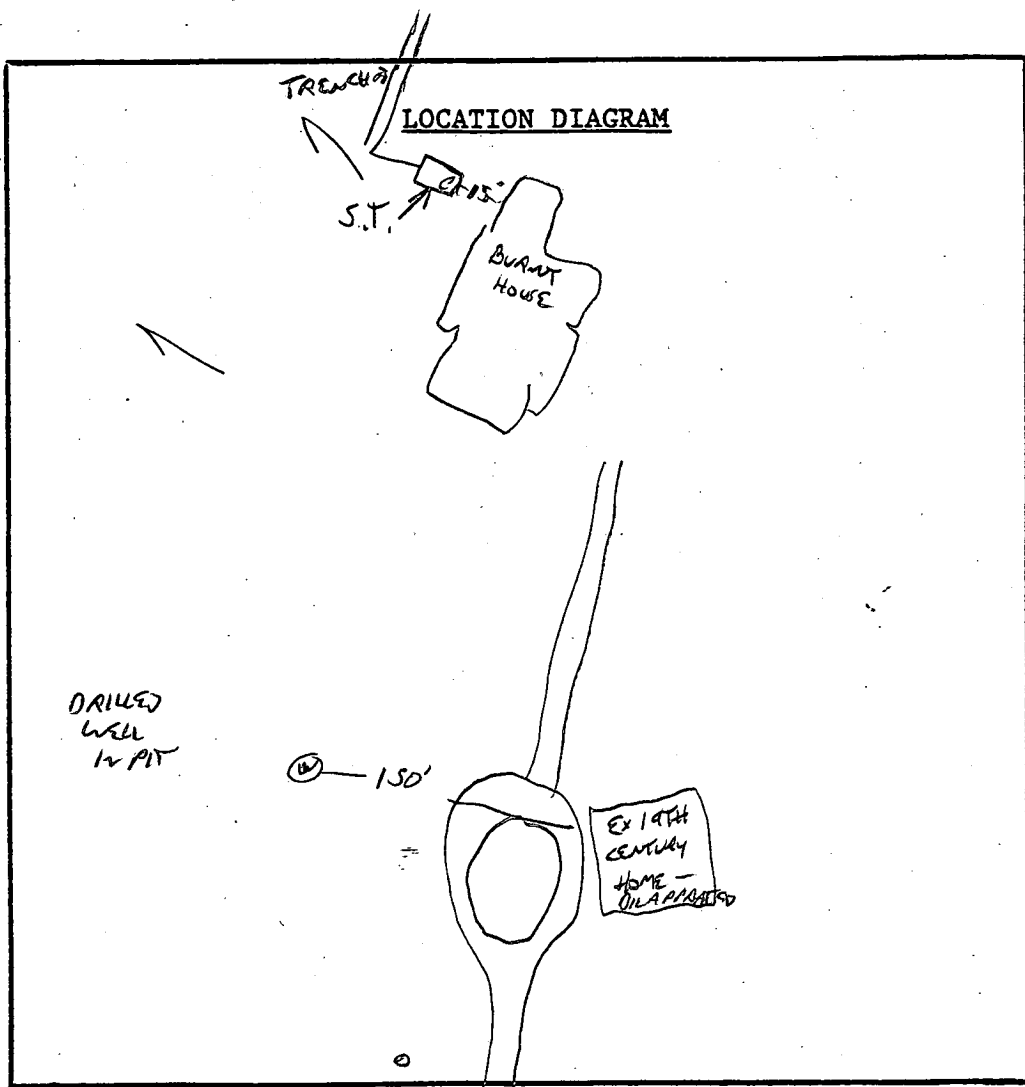
CONTRACTOR: FYOLK

ADDRESS: 6061 OLD LAWYERS HILL RD

WELL TAG #: NA

COUNTY #: P 44914

PROPOSAL: TO ABANDON WELL & SOIL, SERVING THE BURNED HOUSE,
TO RELEASE THE DEMOLITION PERMIT.



COMMENTS: SEPTIC TANK PUMPED & COLLAPSED, WAS CONNECTED TO TRENCHES
WELL ABANDONED (DRILLED).

HISTORIC HOUSE HAS PLUMBING, PROBABLY HAS SEPARATE SEPTIC SYSTEM
ITS LOCATION & DISPOSITION IS UNKNOWN, WILL REQUIRE EXCAVATION TO LOCATE

DATE: 8/13/98

INSPECTOR: [Signature]

AND IS NOT PART OF THIS PROPOSAL.
ISSUE RESOLVED - SEE BETH FOX'S LETTER OF 8/14/98

 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: 8/13/98 (month/day/year)

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* PERMIT NUMBER OF ABANDONED WELL (if any)

* PERMIT NUMBER OF REPLACEMENT WELL

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* PERSON ABANDONING WELL: ROBERT FYOCK
 * OWNER'S NAME: BETH FOX (BANK)
 * WELL LOCATION: 6061 OLD LAWYERS HWY ROAD

WELL DRILLERS LICENSE NUMBER: _____
 CIRCLE: MWD/MSD/MGD

COUNTY: HOWARD
 NEAREST TOWN: _____
 TAX MAP 32 BLOCK _____ PARCEL 17
 SUBDIVISION: _____
 SECTION: _____ LOT: _____

703-524

NOT -2677 AS OF 9/98	
000	000

MARYLAND GRID COORDINATES

BOX NUMBER
 E 880
 N 550 ←

* TYPE OF WELL BEING ABANDONED:

- DRILLED
- BORED/AUGURED
- OTHER (specify) _____
- JETTED
- HAND DUG

SHOW WELL LOCATION
 BY X WITHIN BOX

* USE CODE:

- DOMESTIC
- IRRIGATION
- TEST/OBSERVATION
- MUNICIPAL/PUBLIC
- INDUSTRIAL

* TYPE OF CASING:

- STEEL
- CONCRETE
- PLASTIC
- OTHER (specify) _____

* SIZE OF CASING: 6 INCHES IN DIAMETER

* DEPTH OF WELL: 140 FEET DEEP

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

* WAS CASING RIPPED OR PERFORATED? YES X NO

LOG OF SEALING MATERIAL

MATERIAL	FEET	
	FROM	TO
Concrete	5	0
CONCRETE	23	5
1400 CLEAN STONE	30	23
STONE REINFORCED IN CONCRETE, BELOW 30' BELOW CONCRETE		

SIGNATURE-MASTER WELL DRILLER OR SUPERVISING SANITARIAN ALLAN FOX

LICENSE # 1122

MWD/MSD/MGD

CIRCLE ONE

DATE 8/13/98