

10/30/89 AM
10/31/89
11/1/89
10/31/89 NOW

Tax ID - 03-301206

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 45042
45042
A 24138

DATE 11/11/89

DATE SYSTEM APPROVED 10/31/89

INSPECTOR RH

COVEY CONSTRUCTION

Sam Lyons / I. & F. Company

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 725-3392

SUBDIVISION Weisensel Property ROAD 12372 Howard Lodge Rd LOT 4C

PROPERTY OWNER Mark Tucker PHONE: 596-5408

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

BLDG. PERMIT SIGNED
AND RETURNED 2-8-89
Serial # 23466-23467

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 240 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the first trench 135 feet from the front (1304') lot line and 55 feet from the left (337.64') lot line as seen when facing the lot from Common Use Right-of-Way. Run trenches along contours toward left and right lot line.

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

PLANS APPROVED BY Sid Abel DATE 2/08/89

COVER NO WORK UNTIL INSPECTED AND APPROVED

BLDG. PERMIT SIGNED
AND RETURNED

BLDG. PERMIT SIGNED
AND RETURNED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF _____

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

BLDG. PERMIT SIGNED
AND RETURNED 7-1-98

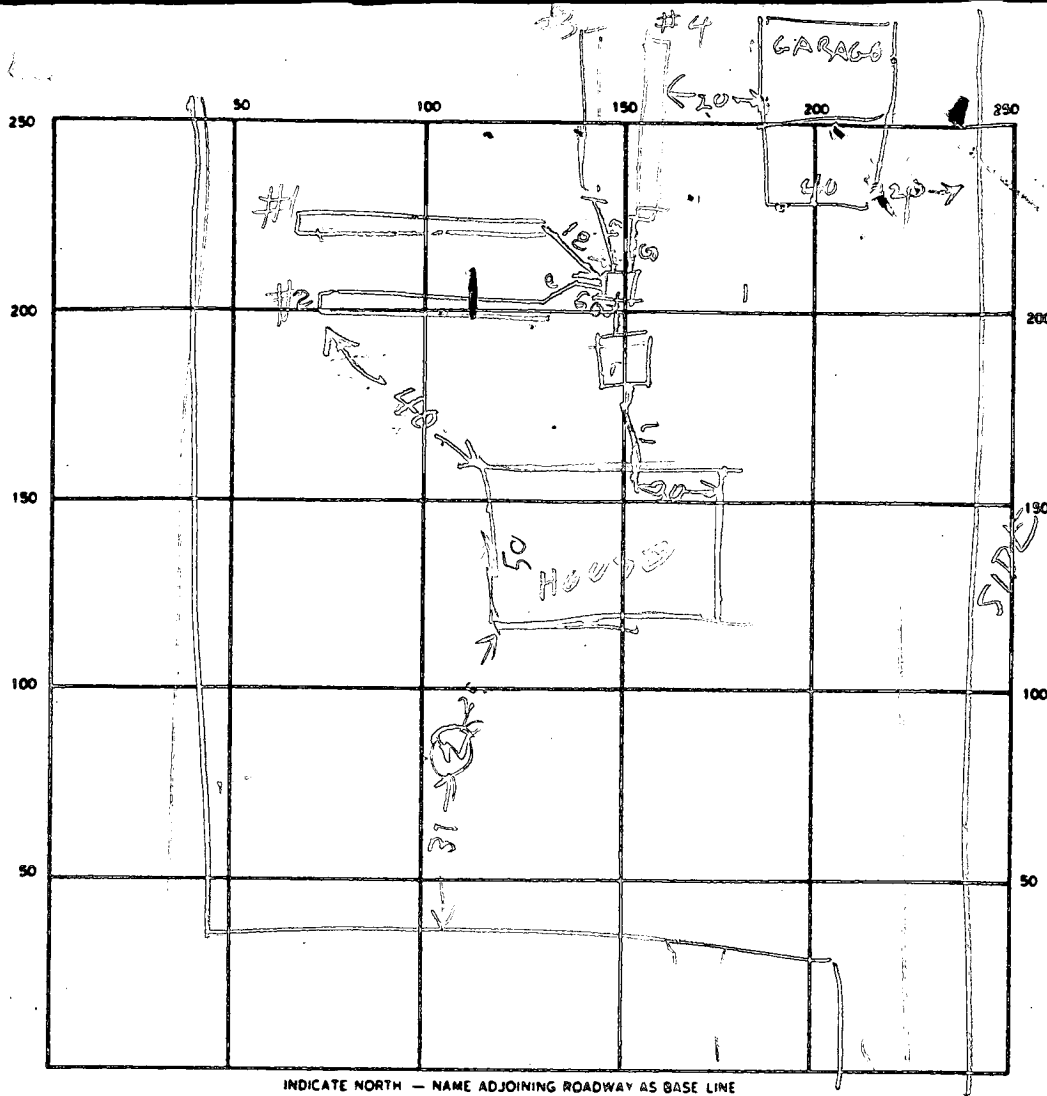
Serial # BM 112246
attached Breezeway to garage

10/17/01
000132859
Masonry barn
1st story tractor

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A 45042
24138



SEPTIC TANK LEVEL 2-250

CLEANOUTS ST OK

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD DEPTH

1	2	3	4
7.5	7.5	8	8

 FT. TRENCH WIDTH

1	2
2	2

 FT. INLET DEPTH

1	2	3	4
3	3	3	3

 FT.

EFFECTIVE GRAVEL DEPTH

1	2	3	4
4.5	4.5	5	5

 FT. TOTAL LENGTH

1	2	3	4
60	62	35	32

 FT. TOTAL 189

NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA 884 (720 REQUIRED)

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 10/30/89 - LOCATION OK - TRENCHES DUG. ADD STONE TO TRENCHES & CALL A.I. 1
10/31/89 - 1200 STONE ADDED TO TRENCHES R.H.

DATE SYSTEM APPROVED 10/31/89

INSPECTOR Raymond Hodges

APPLICATION

A 24138

P. _____

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: 465-5000, EXT. 356

DISTRICT Third

DATE Sept. 7, 1976

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 Donald J. Weisense
ADDRESS 41 N. Prospect Ave. PHONE Any Questions Call:
Catonsville, MD Mr. Lighte - 730-7950

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 4C

ROAD AND DESCRIPTION Off Howard Lodge Road

SIZE OF LOT 1.478 Ac. TYPE BLDG. 3 or 4 bedroom
NUMBER OF BEDROOMS _____

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John Bettaliata

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

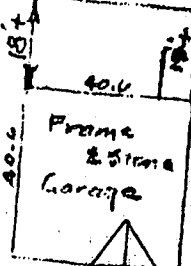
THIS IS NOT A PERMIT

LOT 42

N 24° 50' 30" E

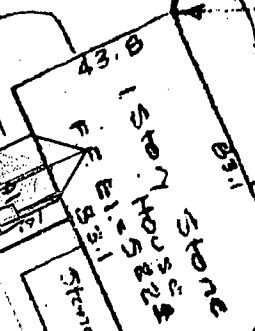
S 50° 03' 46" E

12.5' Wide Mac



Macadam

Pavement



Stone Walk

Marble Porch

Stone Path

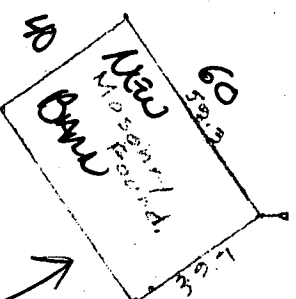
S 35° 25' 42" W 130.40

1.3	52.7
1.3	51.00

324.00

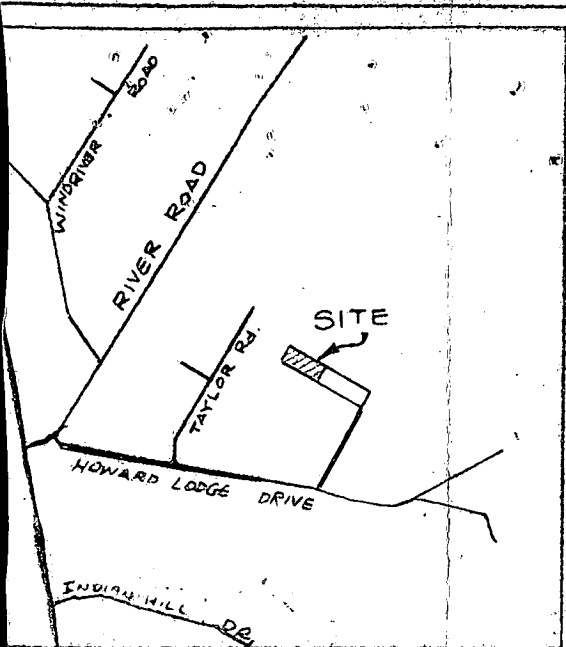
10/17/01
New barn on
SRV

Operate
Elev. 515
10-17-01



Macadam

170ft



PLOT PLAN
 12372 Howard Lodge Dr LOT 4-C
HOWARD LODGE ESTATE
WEST FRIENDSHIP
 HOWARD COUNTY, MARYLAND
 SCALE: 1" = 30' JANUARY, 1989
 L.978 F.001

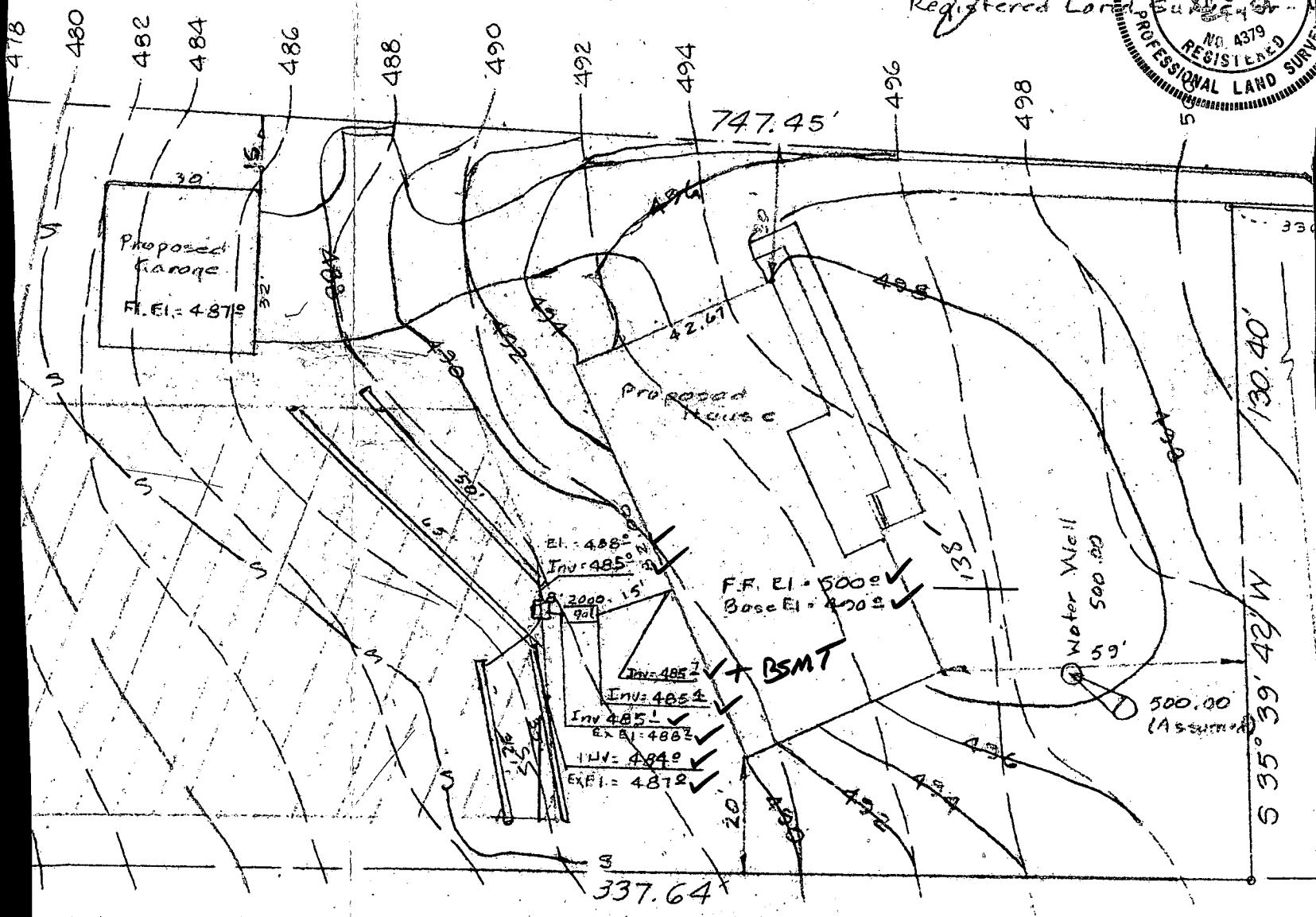
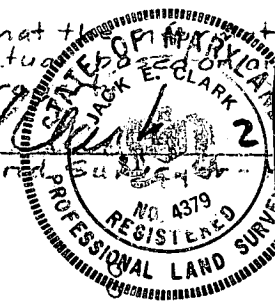
12372 Howard Lodge Dr Surveyors Certificate

MAP 1" = 2000'

Existing Grade ----- 486
 Proposed Grade ----- 488
 Assumed Datum

I hereby certify that the
 shown hereon are actual
 and correct for this project.

Jack E. Clark
 Registered Land Surveyor



OWNER:

Donald Weisensel
41 N. Prospect Ave.
Catonsville, Md

The lot shown hereon complies with the minimum ownership
and lot area as required by the Md State Dept of Health
and Mental Hygiene.

APPROVED: Private Water and Private Sewer

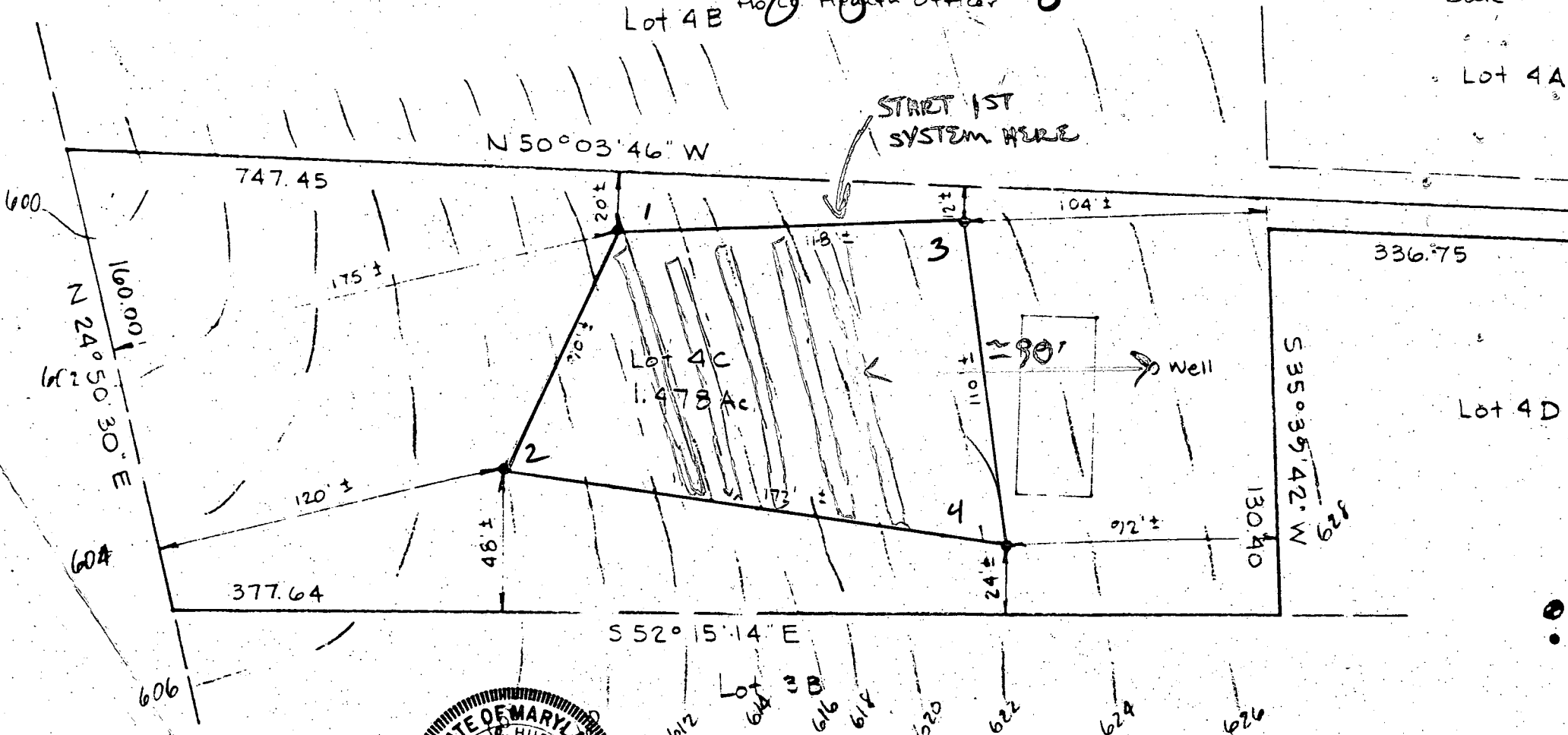
Joyce M. Boyles
Ho Co Health Officer

4-20-77

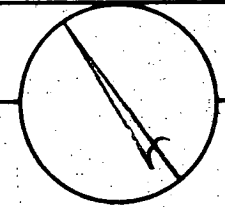
Date

Lot 4A

Lot 4D



REFERENCE



MERIDIAN

MAP OF PROPERTY
Donald J. WEISENS

SITUATED IN

3rd Election District Howard

SCALE: 1" = 50'

DATE:

RICHARD P. BROWNE ASSOCIATES

CONSULTING ENGINEERS, PLANNERS
WAYNE, N.J. COLUMBIA, MD.

DRAWN MK CHECKED _____

PROJECT No. 3575 W. O. No. 262B

J. Carl Hudgins
J. Carl Hudgins

No. 96

96 APR 24 PM 3:20

267.29

LOT 4A

513.73

N 50° 03' 46" W

OF OEL M. 24 GE. SES

Norway Spruce Grows To 80'

VEGETABLE GARDEN

60'

30'

Holly Tree 30'

Stone Wall

Water well

Dogwood

White Birch

Grinko Tree 50-70'

Stone House

Stone Patio

Macadam

3 Rhododendron

White Birch

3 Holly

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

30'

WOODS AREA

Stream

Stream

POND

POND

324.00

N 24° 51' 30" E

N 53° 50' 31" W

LOT 3

Parking 6809 square feet on DESS

513.73

513.73

513.73

513.73

513.73

513.73

513.73

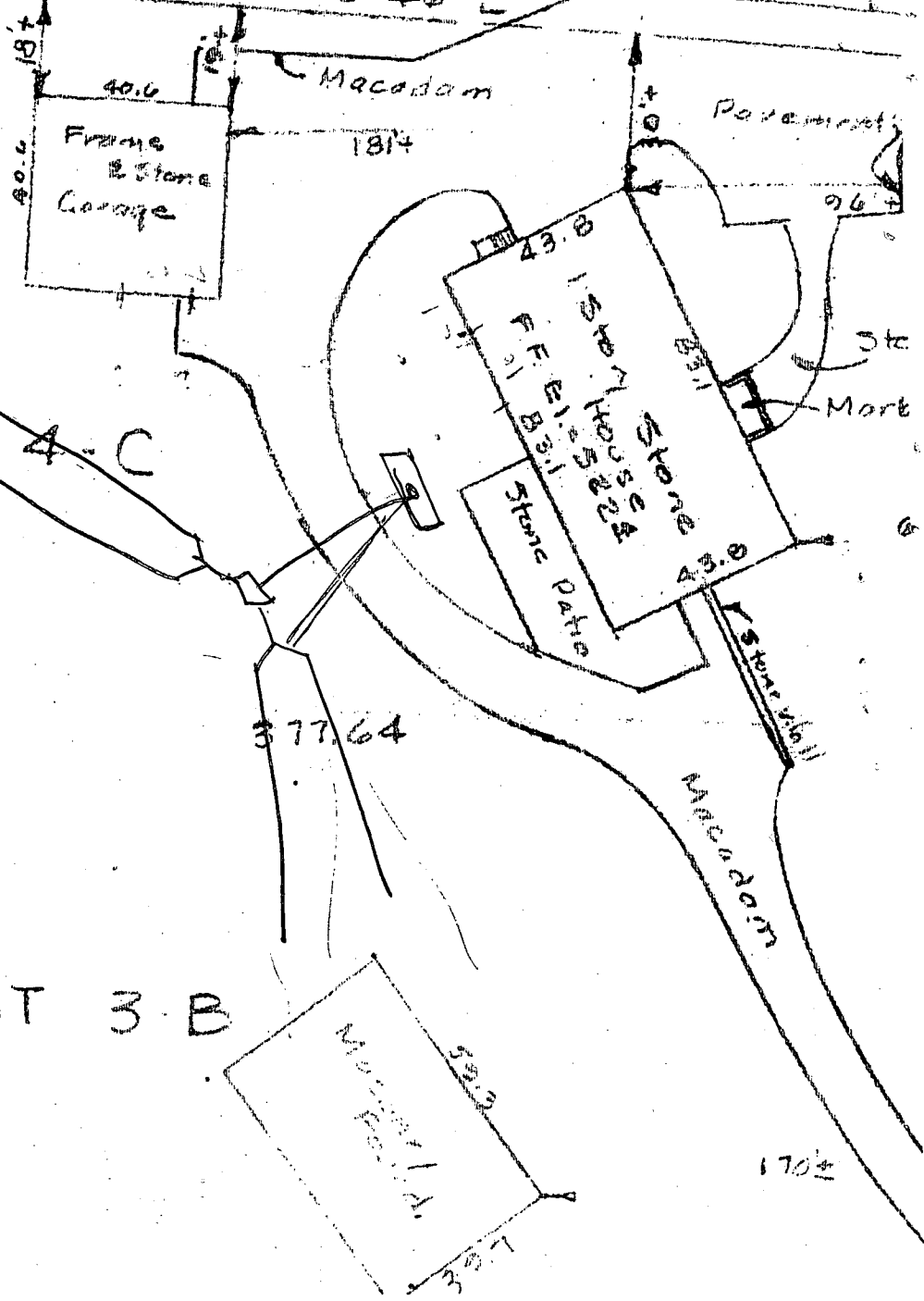
513.73

513.73

513.73

513.73

S 50° 03' 46" E



This is ACCURATE
 Description
 To the
 Best of my
 knowledge
 Signed
 MARK A. TUCKER

T 52° 14' 15" W

377.64

LOT 3 B

11/1/08
 Proposed addition
 per plan
 (AMS)

N 24° 50' 30" E

324.00

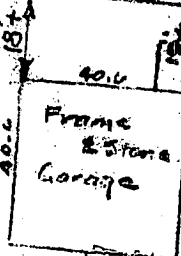
*addition required
 by planning zoning
 per survey
 AMS

MARK A. TUCKER 0-7-1-98

LOT 4 B

N 24° 50' 30" E

S 50° 03' 46" E

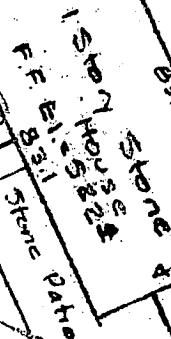


Macadam

Pavements

17.5' Wid.

LOT A



Stone Wall

Marble Parch

N 52° 14' 15" W 377.64

S 35° 59' 42" W 130.40

S 52° 14' 15" W 51.00

1000000000

C1 9696 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 24138**

DATE Received: [] [] [] [] [] [] DATE WELL COMPLETED: **07/19/88** Depth of Well: **205** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL": **HC-88-0091**

OWNER: **TUC KEAR MARK** STREET OR RFD: **HOWARD LODGE ROAD** TOWN: **SVKESVILLE** SUBDIVISION: **RIVER PARK EST. (WEISSENSESECTION)** LOT: **4C**

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	
Top Soil	0	2	
Sandy	2	25	
Sand Stone	25	35	✓
MICKA	35	50	
Sand Stone	50	55	✓
MICKA	55	205	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT: **CM** BENTONITE CLAY: **BC**
 NO. OF BAGS: **6** NO. OF POUNDS: **800**
 GALLONS OF WATER: **48**
 DEPTH OF GROUT SEAL (to nearest foot) from **0** ft. to **39** ft.

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE: **PL** Nominal diameter (nearest inch): **4** Total depth of main casing (nearest foot): **38**

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 BRONZE PLASTIC OPEN HOLE OTHER

C2
 DEPTH (nearest ft.)
 EACH SCREEN: **HO** **36** **205**
 SLOT SIZE 1: [] 2: [] 3: []
 DIAMETER OF SCREEN (NEAREST INCH): [] [] []

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 10.17.13 "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. **273**
 DRILLERS SIGNATURE: *Frank Mayers*
 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.): [] [] WQ: [] [] []
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3
PUMPING TEST
 HOURS PUMPED (nearest hour): **3**
 PUMPING RATE (gal. per min. to nearest gal.): **8**
 METHOD USED TO MEASURE PUMPING RATE: **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING: **30** WHEN PUMPING: **40**
 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: **29**
 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)

