

Tax ID - 04-319737

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT \_\_\_\_\_

**HOWARD COUNTY**

BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

P 45125

A REPAIR

DATE 10/27/89

DATE SYSTEM APPROVED 11/27/89

INSPECTOR M. Rifkin

INDEXED

Arnold's Backhoe & Septic Service, Inc.

IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER

ADDRESS 7110 Woodbine Road, Woodbine, Maryland 21797

PHONE 795-7873

SUBDIVISION \_\_\_\_\_

ROAD 14795 Addison Way ~~Old Frederick Rd~~ LOT \_\_\_\_\_

PROPERTY OWNER Harriett Jackson

14795 Old Frederick Road

ADDRESS \_\_\_\_\_

Woodbine, Maryland

*Addison Way*

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS NUMBER OF BEDROOMS 3

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

125 BR COMING OFF D/W, USE A "T" TO  
CONNECT TWO 40' TRENCHES, STONE 7'-12' MR

PLANS APPROVED BY \_\_\_\_\_

C. Williams

DATE 10/27/89

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

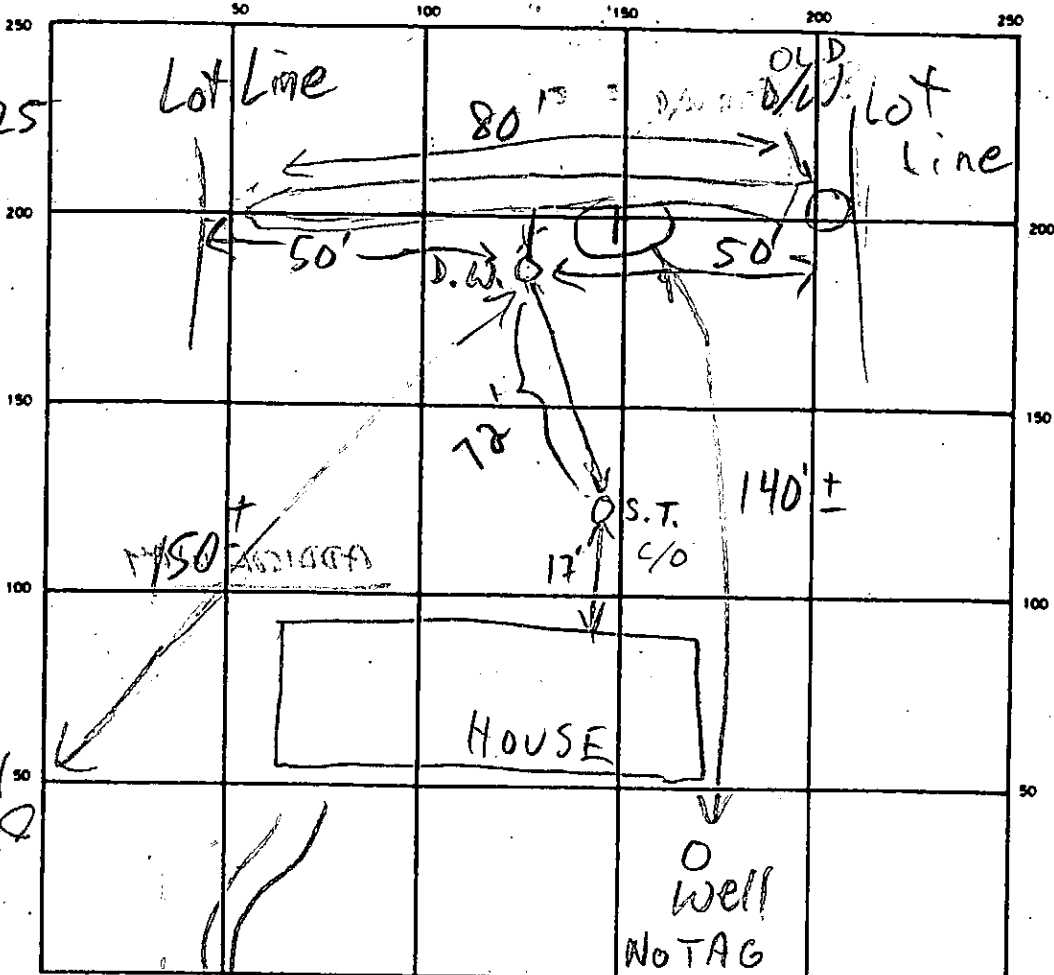
**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

*45125*

① 7'  
 10:35 10:55  
 10:55 11:25  
 ① 30 min perc

6'  
 org. clay loam  
 org + yel silt loam  
 10-15% frags. some lg. frags  
 16 1/2' frags  
 Well 50  
 adj. lot



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

OLD FRED. RD

SEPTIC TANK LEVEL OK CLEANOUTS OK

DISTRIBUTION BOX LEVEL                     

DRAIN FIELD/TILE FIELD DEPTH 12' FT. TRENCH WIDTH 2 FT. INLET DEPTH 7 FT.

EFFECTIVE GRAVEL DEPTH 5 FT. TOTAL LENGTH 80 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 400 SQ FT.

DRYWELL INSIDE DIAMETER                      FT. EFFECTIVE DEPTH BELOW INLET                      FT.

ABSORBENT AREA                      SQ. FT.

REMARKS 11/27/89 #1 OK TO CONTINUE; CAVE-IN IN TRENCH AT DRYWELL; 2nd OLD D/W ~~AT~~ AT RIGHT LOT LINE MR 11/27/89 #2 OK TO FINISH CONN. TO S.T. & COVER ALL WORK

DATE SYSTEM APPROVED 11/27/89 INSPECTOR M. Rifkin

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY *Septic tank to be 1200 gallon* MELLICOTT CITY

USE *Dry Well to be 400 sq ft of absorption* DISTRICT 4  
DATE 7/29/70

*Sidewalk area below the inlet pipe main. Depth of dry well to be 13 1/2 ft below grade. Inlet pipe to be 8 1/2 ft below grade. Inlet pipe from old Frederick Rd and 20 ft is now standing. Inlet pipe to be 20 ft from left side of sidewalk.*

TO THE COUNTY ENGINEER  
MELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Harrist Elizabeth Jackson

ADDRESS Woodridge, Maryland PHONE \_\_\_\_\_

PROPERTY LOCATION: \_\_\_\_\_

SUBDIVISION \_\_\_\_\_ LOT NO. 3

ROAD AND DESCRIPTION Old Frederick Road - between Route 40 and Route 144 - turn left off Route 40 - 2nd lot on right - wooded area

OCCUPANT \_\_\_\_\_ PHONE \_\_\_\_\_

PERSON TO CONSTRUCT SYSTEM \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SIZE OF LOT 1.2 ACRES TYPE BLDG. 4

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_ (Single Family Dwellg.)

SIGNATURE OF APPLICANT Robert Brown

APPROVED BY James T. Wright FOR Dry Well DATE 7/29/70

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

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

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

FOR A REPER ENGINEER  
TEST

**THIS IS NOT A PERMIT**



SEWAGE DISPOSAL SYSTEM  
MARYLAND STATE DEPARTMENT OF HEALTH

15711 HOWARD COUNTY

INDEXED

ELLICOTT CITY  
DISTRICT 4

DATE 2/29/70

Special Permit IS PERMITTED TO INSTALL 2<sup>nd</sup> ALTER

ADDRESS Woodsville Road, Rt. 117, Md. PHONE 829-8543

A SEWAGE DISPOSAL SYSTEM

SUBDIVISION \_\_\_\_\_ ROAD Old Frederick Rd. LOT A

PROPERTY OWNER Harriet Elizabeth Jackson (see application for better directions)

ADDRESS \_\_\_\_\_

SPECIFICATIONS - 4 bedrooms

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

SEEPAGE PITS \_\_\_\_\_ ABSORBENT SIDE-WALL AREA \_\_\_\_\_ SQ. FT.

SEPTIC TANK CAPACITY 1,200 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 25% & TANK CAPACITY 50%

OTHER Dry wall to be 400 sq. ft. of absorbent sidewall area below the inlet pipe.

Maximum depth of dry wall to be 12 ft. below grade. Inlet pipe to begin 21 ft.

below grade. Locate system 220 ft. from Old Frederick Rd., and 24 ft. from left side

line as lot is seen standing on Old Frederick Rd., facing lot.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

PLANS APPROVED BY James T. Wright DATE 2/29/70

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

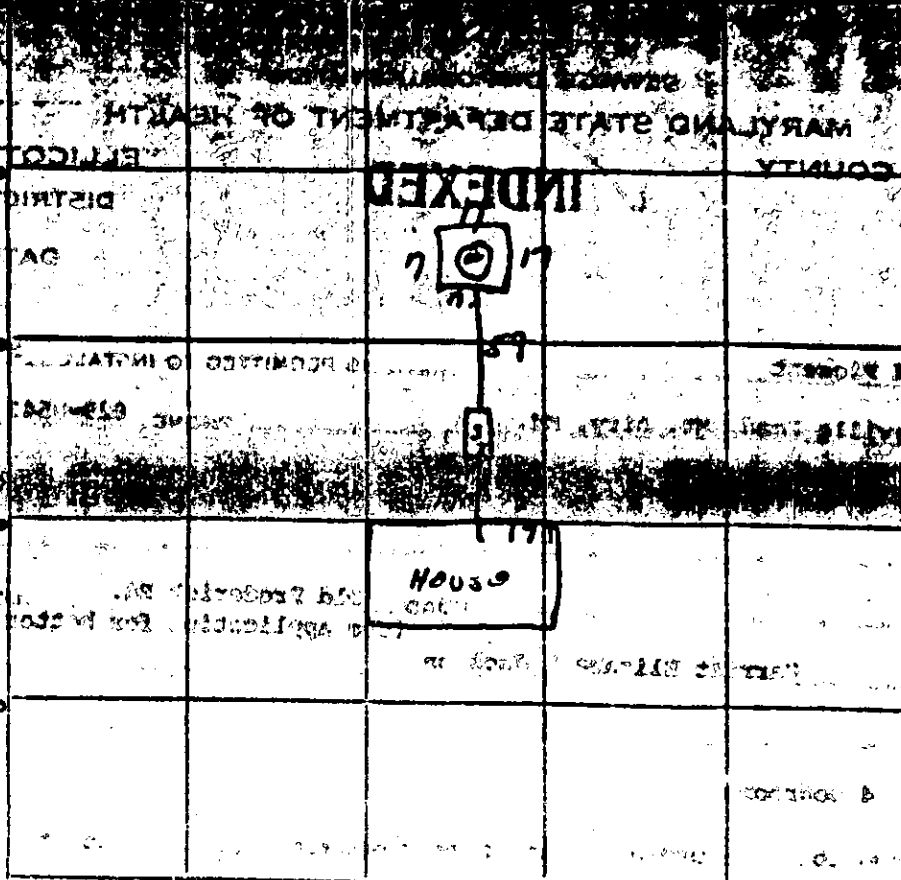
NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

BLDG. PERMIT SIGNED  
AND RETURNED 2/26/70  
Serial # 4757  
addition room

15711

1/20/51

*[Handwritten scribble]*



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 \_\_\_\_\_ SQ. FT.

SEEPADE PITS, INSIDE-DIAMETER 168 IN. DEPTH BELOW INLET 4 FT.

ABSORBENT AREA 408 SQ. FT.

REMARKS \_\_\_\_\_

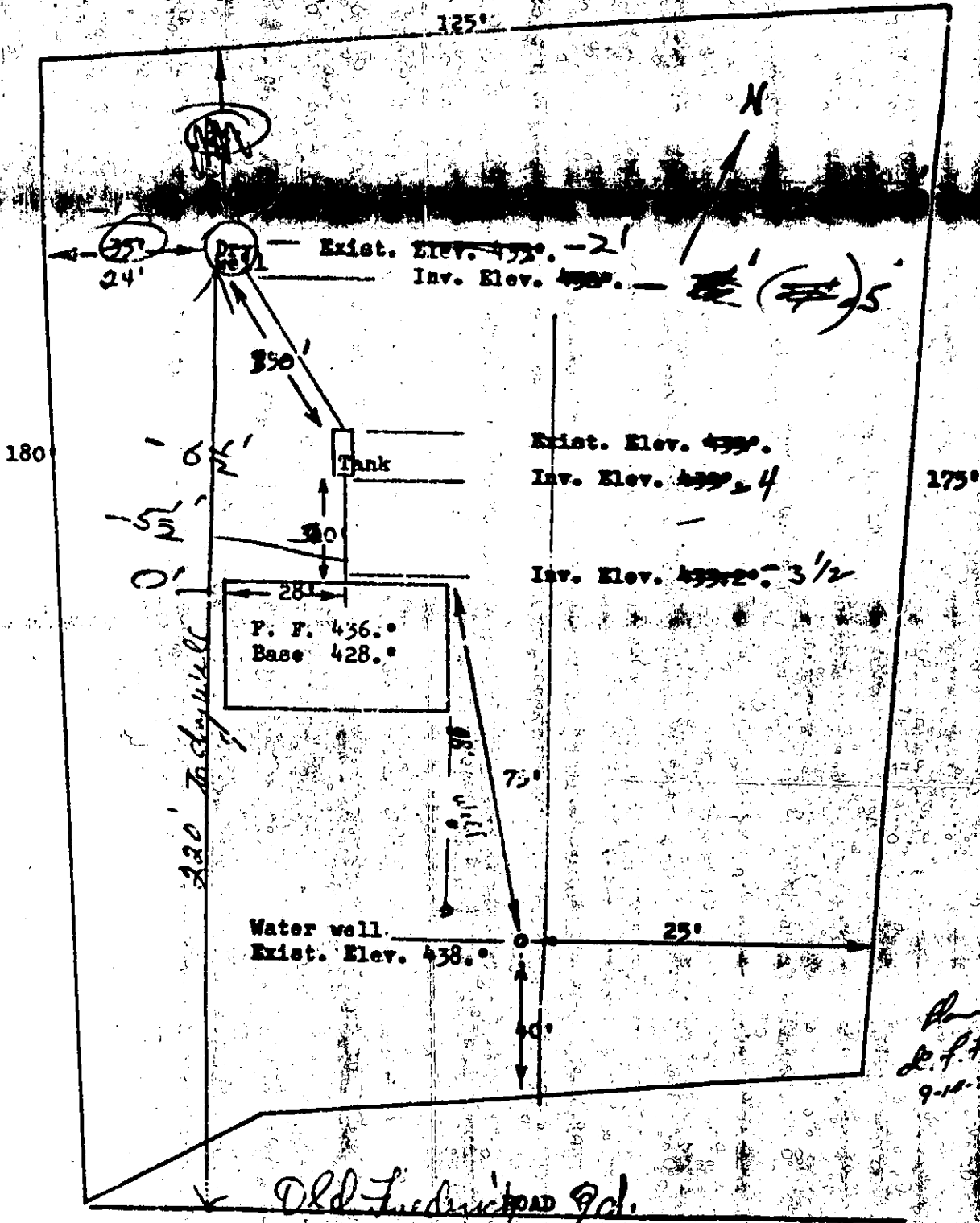
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE SYSTEM APPROVED 5-25-51 INSPECTOR [Signature]

SAMPLE - NO SCALE  
 Submit 3 copies



*Handwritten signature*  
 9-14-70

I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATION DIFFERENCES ARE ACTUAL AND CORRECT FOR THIS PROPERTY.

SIGNED:

*Handwritten signature*

STATE OF MARYLAND  
 HEALTH DEPARTMENT  
 WELL DRILLING PERMIT NO. 1206-20174  
 DATE WELL COMPLETED 1/15/74  
 OWNER John D. Harriet  
 STREET OR RFD. Old Frederick Rd. 20065, LRP, MD

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE APPROPRIATE SHEETS IF NECESSARY)	FEET		WATER BEARING
	FROM	TO	
Shale		30	
Gray rock	30	60	
	60	125	

**GROUT RECORD**  
 WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  
 TYPE (CIRCLE TWO MATERIAL CIRCLE BOX)  
 CONCRETE (CM) BENTONITE CLAY (BC)  
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)  
 FROM 0 FT. TO 20 FT.  
 (ENTER C IF FROM SURFACE)

**CASING RECORD**  
 CASING TYPES (CIRCLE APPROPRIATE CODE BELOW)  
 (BT) STEEL (CO) CONCRETE (PL) PLASTIC (OT) OTHER  
 MAIN CASING TYPE (BT) NOMINAL DIAMETER TOP END (INCHES) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 70

**OTHER CASING (IF USED)**  
 DIAMETER (INCHES) DEPTH (FEET) FROM TO

**SCREEN RECORD**  
 SCREEN TYPE OR OPEN HOLE (CIRCLE APPROPRIATE CODE BELOW)  
 (ST) STEEL (BR) BRASS OR BRONZE (HC) HOLLOW CORE (PL) PLASTIC (OT) OTHER  
 DEPTH (NEAREST WHOLE FOOT) 10 TO 105

**SCREENS**  
 (SEQ. NO.)  
 1 10 20 30 40 50  
 2 20 30 40 50 60  
 3 30 40 50 60 70  
 SLOT SIZE 1. 2. 3.

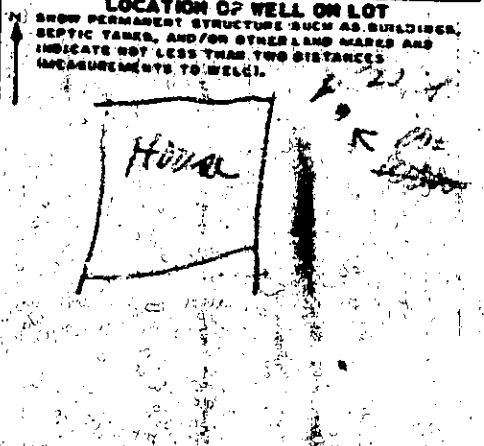
DIAMETER OF SCREEN 20 (NEAREST INCH) FROM TO  
 GRAVEL FACE FROM TO  
 IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX (F)  
 OWNER USE ONLY (NOT TO BE FILLED IN BY DRILLER)  
 TELEPHONE CASING LOG INDICATOR

**PUMPING TEST**  
 PUMP TEST (CIRCLE NO.)  
 PUMP USED TO NEAREST FEET  
 METHOD USED TO MEASURE PUMPING RATE  
 WATER LEVEL (DISTANCE FROM LAND SURFACE)  
 BEFORE PUMPING 50 (NEAREST FOOT)  
 WHILE PUMPING 100 (NEAREST FOOT)

**TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX)**  
 (A) AIR LIFT (P) PISTON (T) TORQUE  
 (C) CENTRIFUGAL (R) ROTARY (O) OTHER (NEAREST BELOW)  
 (J) JET (S) SUBMERSIBLE

**PUMP INSTALLED**  
 TYPE OF PUMP (CIRCLE APPROPRIATE LETTER OR BOX - SEE ABOVE: A, C, P, R, S, T, O)  
 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)  
 CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) PUMP HORSE POWER  
 PUMP COLUMN LENGTH (NEAREST FOOT)

**CASING HEIGHT** (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)  
 (+) ABOVE (-) BELOW  
 LAND SURFACE (NEAREST FOOT) 2



**CIRCLE APPROPRIATE BOXES**  
 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  
 E ELECTRIC LOG OBTAINED  
 C COPY OF ELECTRIC LOG ATTACHED  
 I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL" AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.  
 DRILLER'S NAME  
 (PLEASE PRINT) John D. Harriet  
 SIGNATURE John D. Harriet