

11/14/89 AM

Tax ID-05-379911

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

P 45288

A Repair

DISTRICT 5th

DATE 11/13/89

DATE SYSTEM APPROVED 11/14/89

INSPECTOR R. Hoopes

INDEXED

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Md. PHONE 988-9270

SUBDIVISION Allnut Farm Estates ROAD 13424 Allnut Lane LOT 11, Sec. 1

PROPERTY OWNER Mr. & Mrs. Sundardson

ADDRESS _____

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 4

PURPOSE - TO REPAIR FAILING SEPTIC SYSTEM.

REPAIR "INSTALL 15' x 15' DRYWELL WITH 5' OF GRAVEL AS SHALLOW AS CAN BE 500
PLUMBED OFF EXISTING DRYWELL." OK(C) TRENCH-OFF OLD DRY

WELL 11 FT DEEP INLET 5 FT DEEP 6 FT
STONE 83 FT LONG 500 SQ FT GRINDER
ABSORBENT AREA.

PLANS APPROVED BY Craig Williams DATE 11/13/89

COVER NO WORK UNTIL INSPECTED AND APPROVED LETTER REQ'D FROM
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM OWNER

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) STAINING

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH GARBAGE

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

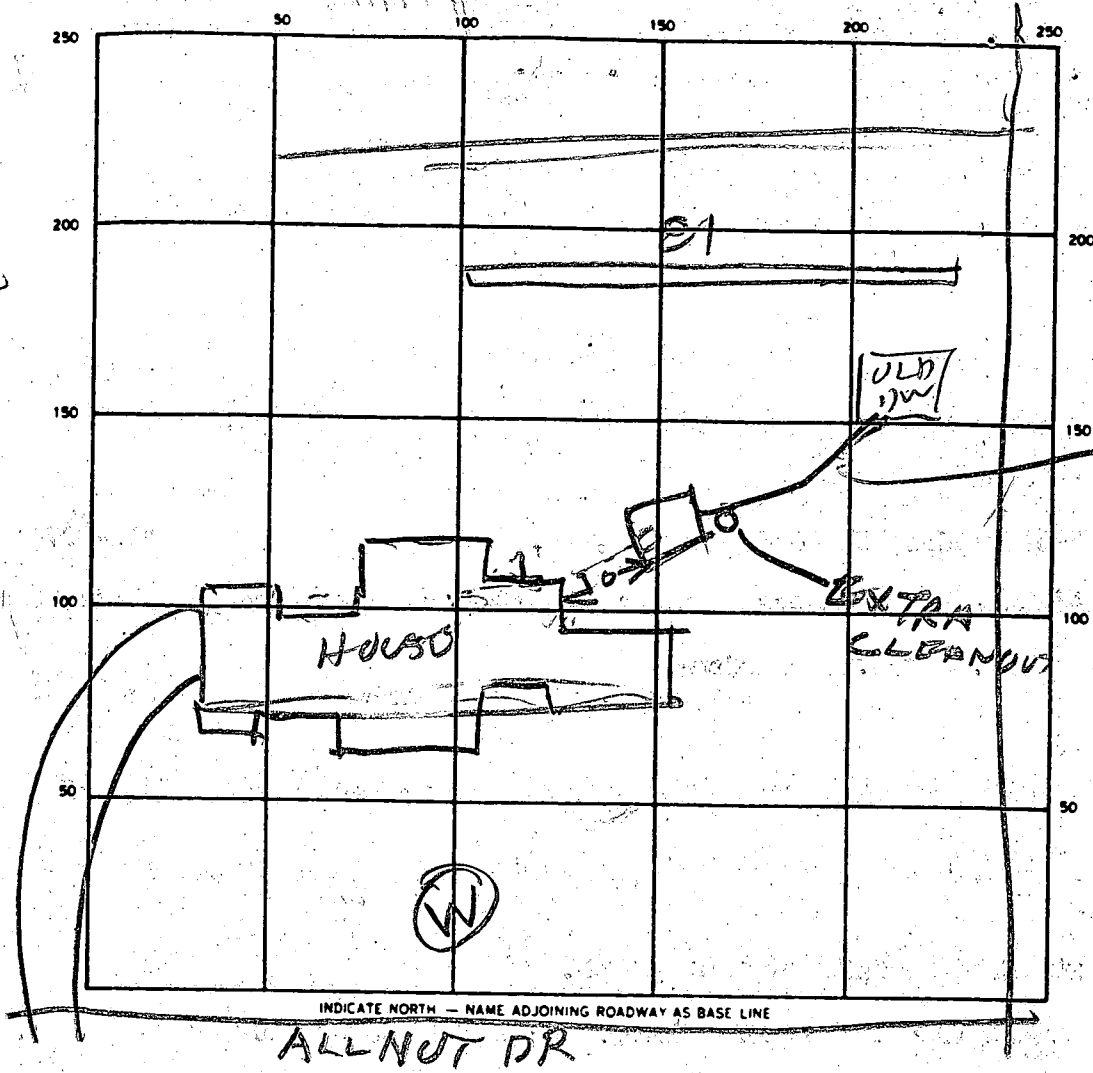
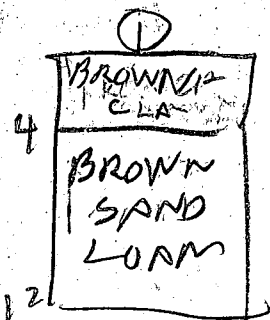
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

P45288



CAST IRON PIPE BEING REPLACED WITH PLASTIC

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TILE FIELD DEPTH 12 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 FT.

EFFECTIVE GRAVEL DEPTH 7 FT. TOTAL LENGTH 81 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 567 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 11/14/89 - PIPE BETWEEN TANK & DRY WELL RUSTED SHUT. REPLACED WITH PLASTIC PIPE B/H

DATE SYSTEM APPROVED 11/14/89 INSPECTOR Raymond Haden

Approved
5/19/78
T.S.D. P 27775

5/18/78
after 5/19/78
1.00 p.m.
~~5/18/78~~
~~5/19/78~~

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

A 24683

HOWARD COUNTY

ELLICOTT CITY
DISTRICT 5th

DATE 4/7/78

INDEXED

Jack Fyock IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Md. PHONE 988-9270

SUBDIVISION Allnutt Farm Estates ROAD Allnutt Lane LOT 11, Sec. 1

PROPERTY OWNER McCuan Associates of Maryland, Columbia, Md.

ADDRESS _____

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 2000 GALLONS

DRAIN FIELD DEPTH FEET. BOTTOM AREA SQ. FT.

DEEP TRENCH 11 DEPTH 25 ft. long FEET. BOTTOM AREA 150 SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA 288 SQ. FT. sidewall area in dry well.

INLET PIPE 5 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 11 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FEET. BELOW ORIGINAL GRADE

LOCATE DISPOSAL AREA 10 FT. FROM Lot 12 Right-of-way AND 130 FT. FROM Allnutt Drive LOT LINE AS SEEN WHEN

FACING LOT FROM

Trench to run across lot parallel to Allnutt Lane.

NOTE: TRENCHES NOT TO BE CONNECTED IN SERIES. MUST USE DISTRIBUTION BOX OR T'S AND CONNECT TO END NEAREST SEPTIC TANK.

PLANS APPROVED BY David J. O'Neill DATE 9/28/77

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 16 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 8 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

A 24683

APPLICATION

A _____

SEWAGE DISPOSAL TESTING

P _____

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 P14th

DATE 9/9/76

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 Mr. and Mrs. Smith W. Allmatt, Jr.

ADDRESS 13289 Highland Road
Highland, Maryland 20777 PHONE 988-9303

PROPERTY LOCATION Allmatt Farm Estates

SUBDIVISION HI Land Farm Estates LOT NO. 12

ROAD AND DESCRIPTION Road "A"

SIZE OF LOT 1.01 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/ Margaret G. Allmatt OLD PERMIT CIVIL
AND RETURNED 2-2-78
Permit # 33415-SFD

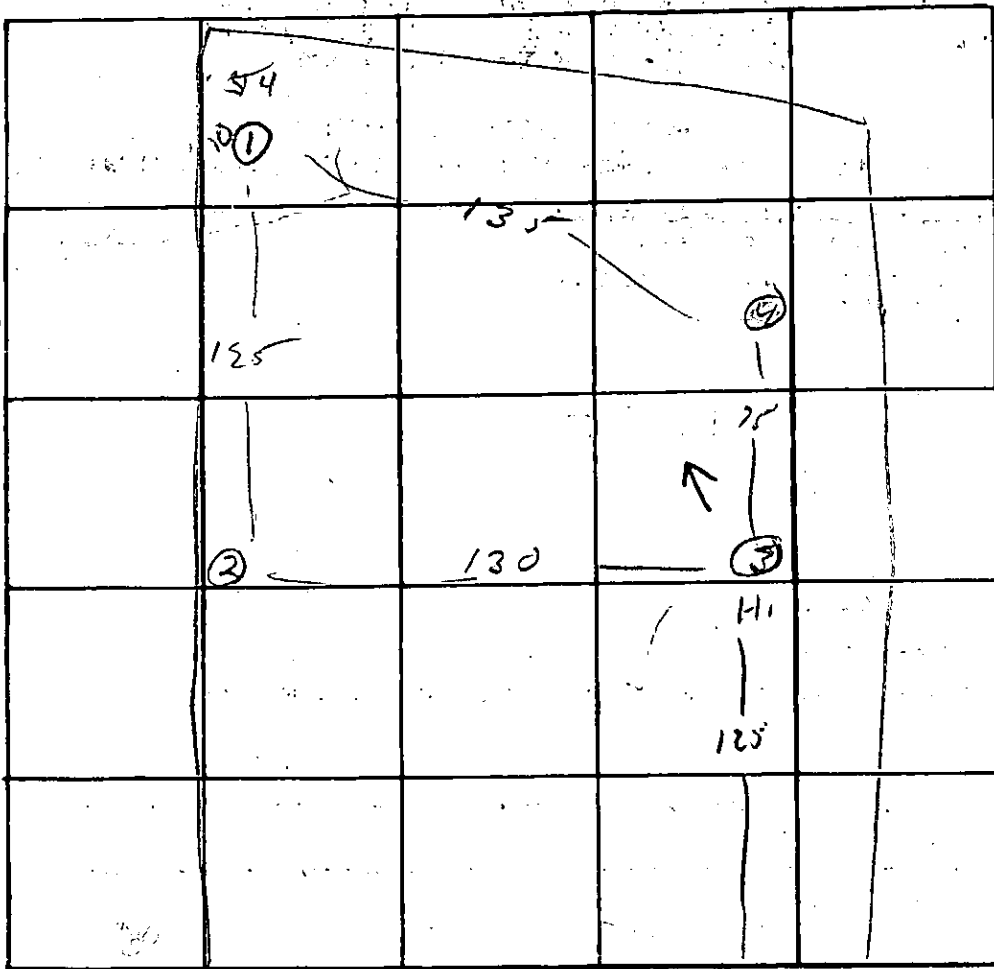
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Road A

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/22	1s	4'	402		402	402	
8.29	2	12'	401	406	406	410	4
	3s	5'	10 ¹⁰	10 ¹⁵	10 ¹⁵	10 ³²	19
	4	13'	10 ¹⁰	10 ¹⁷	10 ¹³	10 ¹⁹	6
	4s	5'	10 ¹³	10 ¹⁴	10 ¹⁴	10 ¹⁸	4
	4	13 1/4'	10 ¹³	10 ²²	10 ²²	10 ³⁶	14
	1s	5'	10 ²⁸	10 ³⁰	10 ³⁰	10 ³⁸	4

dry to 13'6"

REMARKS _____

TYPE OF SOIL _____

TESTED BY

R. P. O'Neil

ALSO PRESENT:

Kottman

Alcott

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 32391
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 4th
DATE 12/30/82

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 FRENIS W. JR. & FAYE A. HOFFMAN

ADDRESS 15932 MEADOW WALK RD, WOODRINE PHONE 831-7734
0-695-8760

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 2555 MULLINIX MILL RD. PARCEL NO. 1

SIZE OF LOT 15.7 ACRES TYPE BLDG. _____
(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. Frenis W. Hoffman Jr
(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 10-31-82
Smith # 21729

THIS IS NOT A PERMIT

INVERT ELEVATION INTO TRENCH 560

EXISTING ELEVATION AT TRENCH ~~560~~ 560

INVERT ELEVATION INTO SEPTIC TANK 567 V

EXISTING ELEVATION AT DISTRIBUTION BOX 560 V

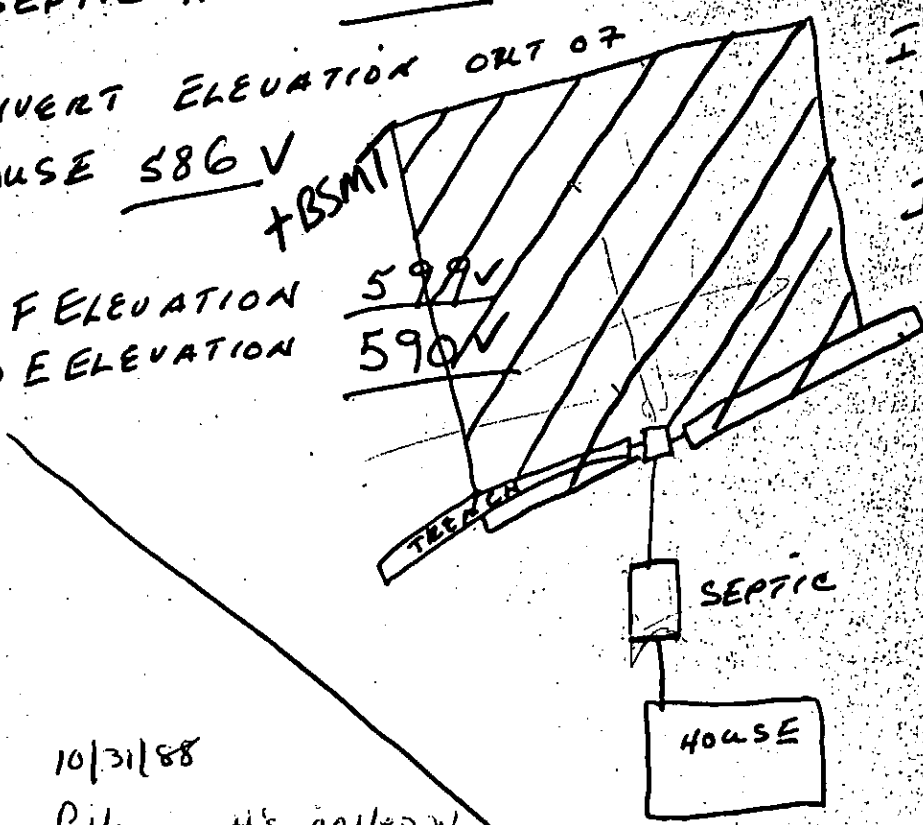
INVERT ELEVATION OUT OF HOUSE 586 V
+ BSMT

INVERT ELEVATION INTO DISTRIBUTION BOX 566 V

FF ELEVATION 599 V
DE ELEVATION 590 V

INVERT ELEVATION OUT OF SEPTIC TANK 566.9 V

EXISTING ELEVATION AT SEPTIC TANK 570 V



10/31/88

Following #'s called in by owner to correct errors in existing elevations

- ① BSMT 590
- ② INV OUT OF HOUSE 586
- ③ INV IN TANK 567.0
- ④ INV OUT TANK 566.9
- ⑤ INV IN BOX 560.5
- ⑥ INV IN Trench 560.0
- ⑦ EXIST. TANK 570
- ⑧ EXIST. BOX 563.5
- ⑨ EXIST. Trench 563.5

WELL ELEVATION 1610

10/31/88

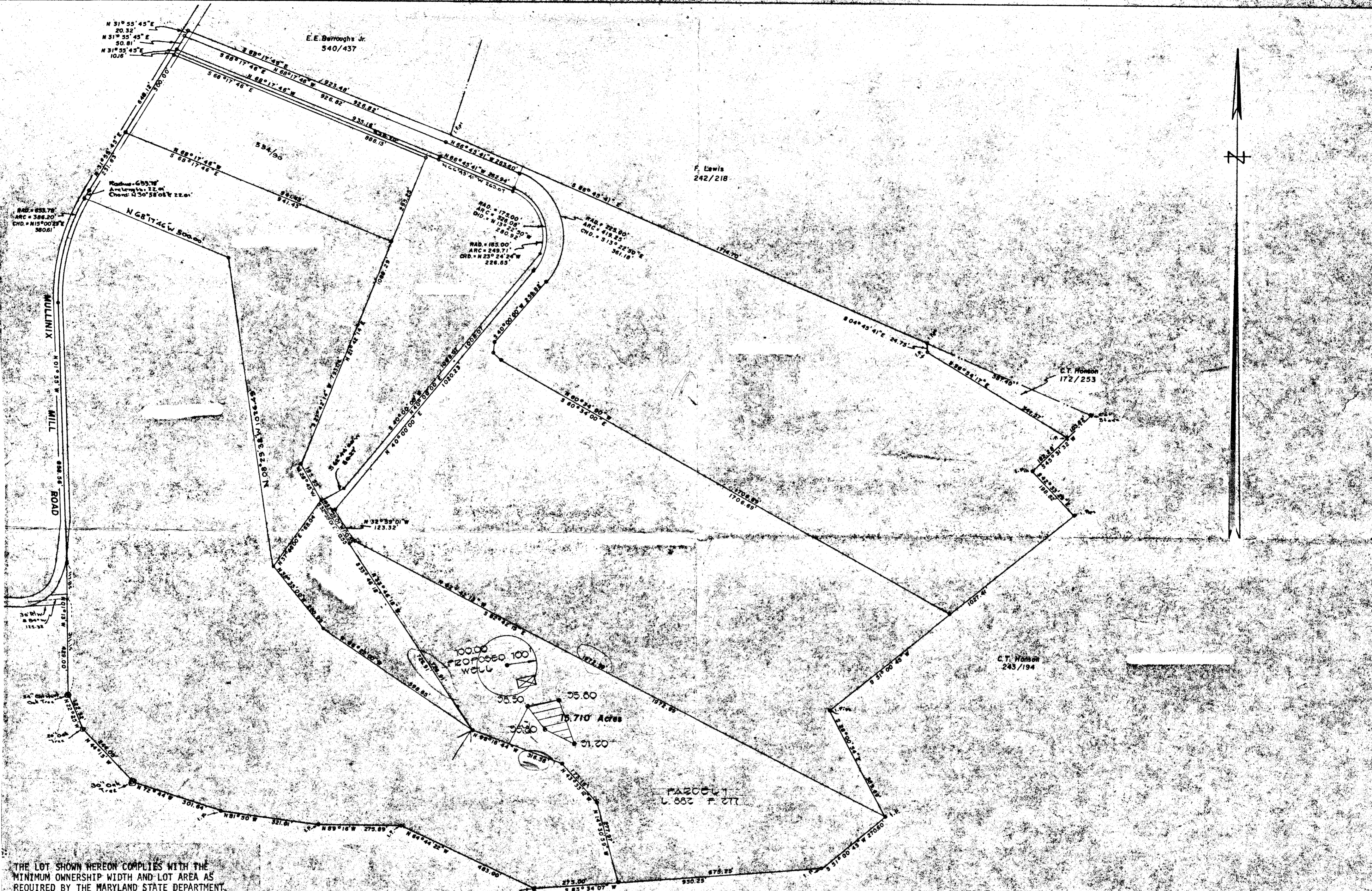
ellevator

BDDG. PERMIT SIGNED AND RETURNED 10/31/88
BP 21727 SA

2555 MULHNIK MILL ROAD

I CERTIFY THAT THE ABOVE MEASUREMENTS ARE ACTUAL AND CORRECT FOR THIS PROPERTY

J.M. van Heest



THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

⊙ DENOTES FIELD LOCATION OF PERC. TEST HOLE. PERCOLATION AREAS AND WATER WELLS FOR ADJOINING LOTS WILL BE SHOWN WHERE PERTINENT.

APPROVED FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS HOWARD COUNTY HEALTH DEPARTMENT

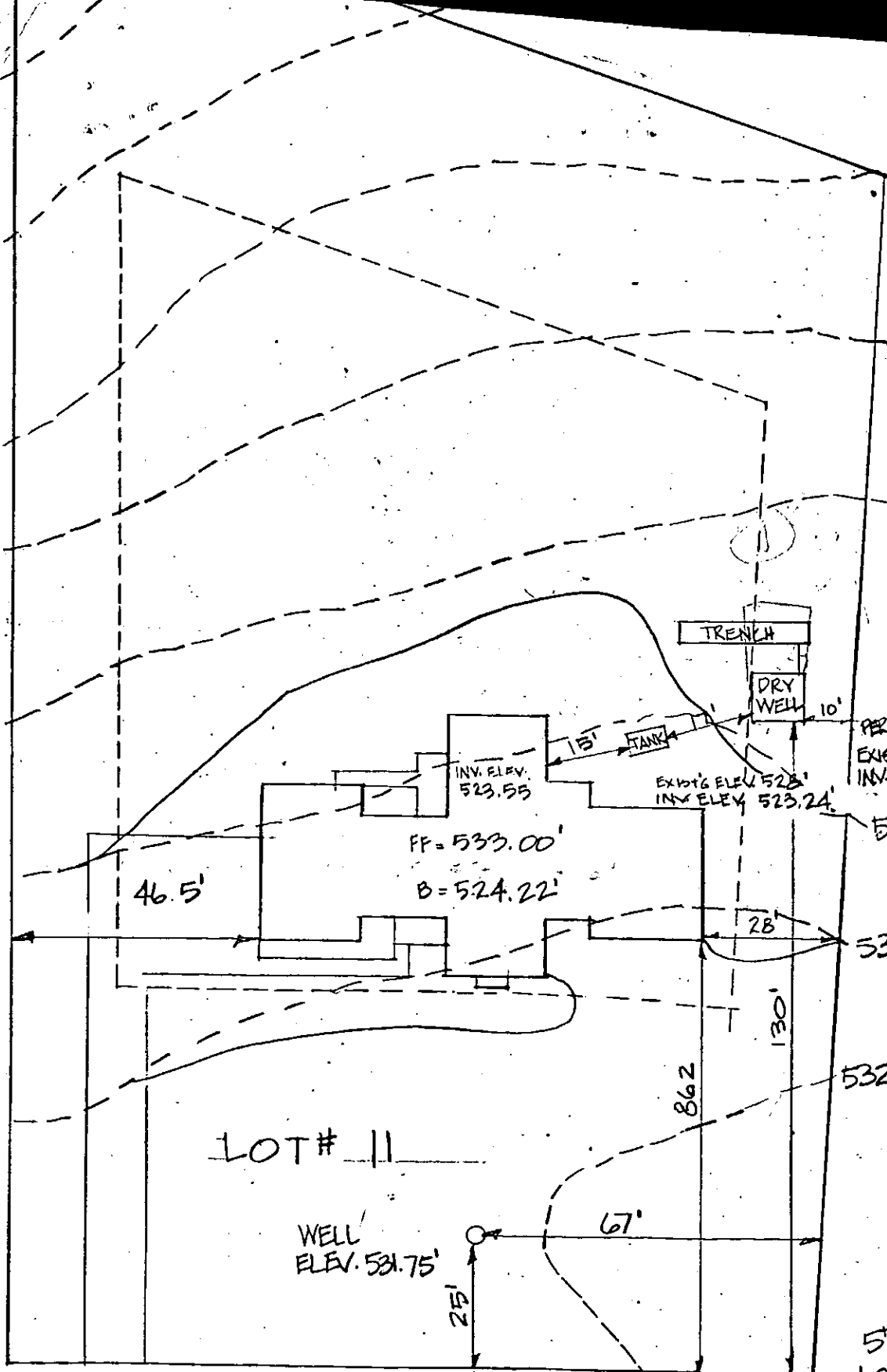
COUNTY HEALTH OFFICER: _____ DATE: _____

- LEGEND
- ⊠ DENOTES LOCATION OF DWELLING
 - DENOTES PROPOSED WELL
 - ⊙ DENOTES FIELD LOCATION OF PERC. HOLES

3/10/83
 PERC CERTIFICATION PLAT
 FRENIS W. & FAYE A. HOFFMAN
 4TH ELECTION DISTRICT HOWARD CO. MD
 SCALE: 1" = 200' FEBRUARY 28, 1983

FISHER, COLLINS AND CARTER
 CONSULTING ENGINEERS AND LAND SURVEYORS
 8388 COURT AVENUE
 BELLGATE CITY, MARYLAND 21043
 401-2855

TERRELL & FISHER



522
524
526
67
11
10
610
50

125
4
500
22
1000
1000
110

ALLNUTT LANE

5th ELECTION DISTRICT
LOT 11 BLOCK 15
ALLNUTT FARM ESTATES
R-40
1" = 30'-0"

10V

610

2-2-78
Lewm

C 1 0707 SEQUENCE NO. (WRA USE ONLY)

1 2 3 (SEQ. NO.) 6
THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-6 ON ALL CARDS

DATE RECEIVED (WRA USE ONLY)

DATE WELL COMPLETED Nov 14, 1972

8-13 15 20

STATE OF MARYLAND
WATER RESOURCES ADMINISTRATION
TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETE

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER W26-843

PERMIT NO. FROM "PERMIT TO DRILL WELL"
41-11-1118

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. 273

OWNER McCanna Assoc of Md.

LAST NAME McCanna FIRST NAME Columbia Md.

STREET OR RFD 6125 OAKLAND MILL RD. POST OFFICE

WELL LOG

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Top Soil	0	2	
Sandy	2	30	✓
Sand Stone	30	40	
Micka	40	50	
Sand Stone	50	55	✓
Micka	55	185	

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES (Y) NO (N)

TYPE OF GROUTING MATERIAL (CIRCLE BOX):
CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 27 NO. OF POUNDS 2700

GALLONS OF WATER 162

DEPTH OF GROUT SEAL (TO NEAREST FOOT) 35 measured

FROM 0 FT. TO 35 FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

CASING TYPES: INSERT APPROPRIATE CODE BELOW

S T STEEL C O CONCRETE
 P L PLASTIC O T OTHER

MAIN CASING TYPE S+ NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 40

OTHER CASING (IF USED)

DIAMETER (INCH) FROM TO

DEPTH (FEET) FROM TO

SCREEN RECORD

SCREEN TYPE OR OPEN HOLE: INSERT APPROPRIATE CODE BELOW

S T STEEL B R BRASS OR BRONZE H O OPEN HOLE
 P L PLASTIC O T OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM TO

1 HO 38 185

2

3

SLOTSIZE 1, 2, 3

DIAMETER OF SCREEN 56 (NEAREST INCH) FROM TO

GRAVEL PACK

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.)

TELESCOPE CASING 70 72 74 75 76 OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 3

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING 25 (NEAREST FOOT)

WHEN PUMPING 185 (NEAREST FOOT)

TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST):
 A AIR P PISTON T TURBINE
 C CENTRIFUGAL R ROTARY O OTHER (DESCRIBE BELOW)
 J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES (Y) NO (N)

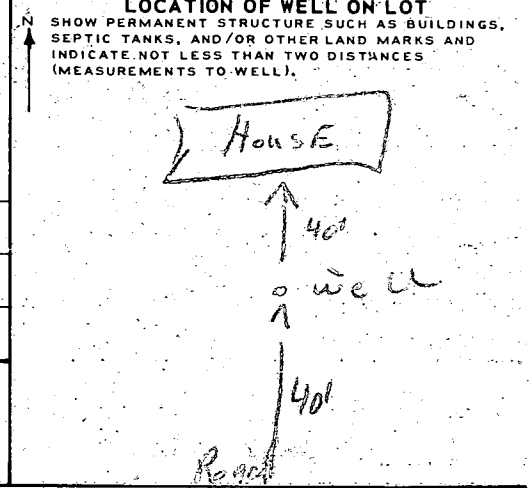
CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) 31 35

PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE } LAND SURFACE } 2 (NEAREST FOOT)
 - BELOW }



CIRCLE APPROPRIATE BOXES

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 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.

DRILLERS NAME Ralph Mayne

(PLEASE PRINT) Ralph Mayne

SIGNATURE Ralph Mayne