

5/24/90 10:00

03-288838

8/8/91 noon
8/12/91 10:30

PERMIT

P 45815
A10603
REPAIR

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 3rd

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH
461-9933

DATE 4/23/90

DATE SYSTEM APPROVED 8-12-91

INSPECTOR RJ Butley

INDEXED

62
8 | 500
48
20

Robert Buettner IS PERMITTED TO INSTALL ALTER

ADDRESS 12515 Howard Lodge Drive, Sykesville, MD PHONE _____

SUBDIVISION Indian Hill ROAD 12515 Howard Lodge Dr. LOT 41, Blk. D., Sec. 1

PROPERTY OWNER Robert Buettner

ADDRESS 12515 Howard Lodge Drive
Sykesville, Maryland 21784

~~IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 25%~~

GARBAGE GRINDER ~~YES~~ ~~NO~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

125' to
x4
500' BDRM

REPAIR - PURPOSE - TO ENLARGE THE SEPTIC SYSTEM RELATIVE TO THE PROPOSED EXPANSION TO THE NUMBER OF BEDROOMS. Building Permit Number: 32304
CALL FOR INSPECTION WHEN GROUND IS OPENED SO SANITARIAN CAN RECOMMEND REPAIR.

Contractor proposal one trench 72ft long by 10ft deep (7ft stone depth) ← Approved RJP 8/18/91 or If provide 8ft stone
RECOMMEND DRYWELL - MAXIMUM 10' DEEP Home owned electric place a ball run valve on line
OR EQUIVALENT AS SWITCH BOX TO SET UP ALTERNATING SYSTEM. RJP 8/18/91

(TRENCH POSSIBLE) Trench preferable with front of lot graded steeply toward road 5/22/90 CW.

PLANS APPROVED BY C. Williams DATE 4/23/90

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

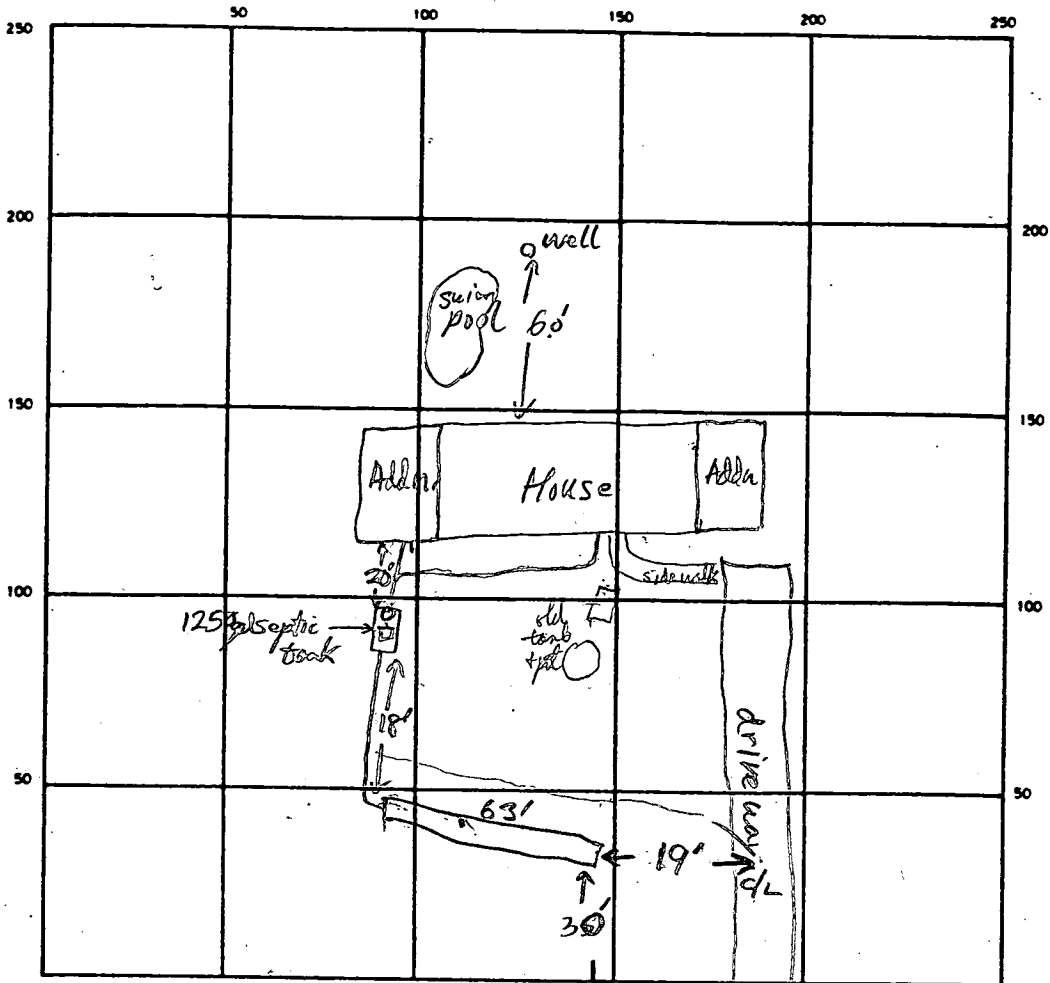
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

BUDG. PERMIT SIGNED
AND RETURNED 5/22/90
Serial # 32304 - addition

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

45815



ST hole

reddish brown
SCL to 3ft
light reddish brown SL loam
3 to 9ft
gray brown loam SL below 10ft
few stones encountered

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

$$22 \times 24 = 5640$$

$$\div 125 = 4$$

SEPTIC TANK LEVEL

CLEANOUTS ST (4' Riser overtrankhole)

DISTRIBUTION BOX LEVEL NA

DRAIN FIELD/TILE FIELD. DEPTH 12 FT. TRENCH WIDTH 2 FT. INLET DEPTH 41 FT.

EFFECTIVE GRAVEL DEPTH 8 FT. TOTAL LENGTH 63 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL/BOTTOM AREA 504 SQ FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS Owner elected to install a ball run valve R/P 8/12/90 tying old + new systems together - House pipe outlet is 5ft below grade
8/12/91 OK TO GRAVE TRENCH, CW. 8" gravel fill over dist. pipe. OK to cover R/P 8/12-91

DATE SYSTEM APPROVED

8-12-91

INSPECTOR

[Signature]

8/23/68
Before noon
if possible

PERMIT

P 13834

A 10603

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 3

DATE 8/13/68

Installed but not approved

Richard Lowe IS PERMITTED TO INSTALL ALTER

ADDRESS Ilchester Road, Ellicott City, Md. PHONE RI 7-7598

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Indian Hill ROAD Indian Way LOT 41, Blk. D,
(Apparently renamed Howard Lodge Rd.) Sec. 1

PROPERTY OWNER Country Homes, Ltd.

ADDRESS _____

SPECIFICATIONS - 3 or 4 bedrooms

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

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

SEPTIC TANK CAPACITY 750 GALLONS for 3 bedrooms.
1,000 " 4 "

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 100 sq. ft. absorbent sidewall area below inlet pipe per
bedroom. Inlet pipe to be no deeper than 4 ft. below original grade. Locate
dry well 50 ft. from front lot line and 60 ft. from left side line as lot is seen
when facing it from Indian Way. (Howard Lodge Rd.)

MAXIMUM DEPTH PERMITTED 12' below original grade.

PERMIT VOID AFTER THREE YEARS.

PLANS APPROVED BY R. D. Fletcher DATE 9/21/65

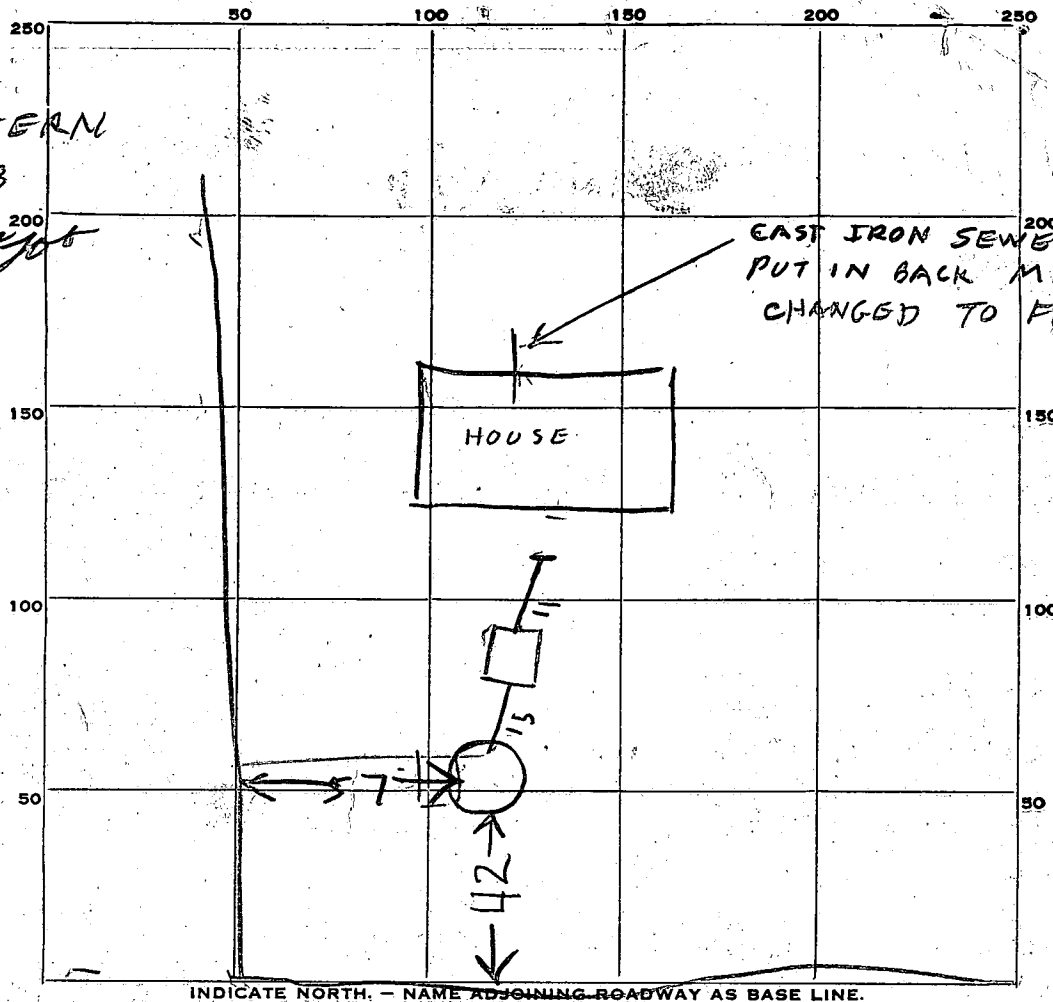
FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

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

NOTIFY THE HEALTH DEPARTMENT 48 HOURS BEFORE EXCAVATIONS ARE TO BE BACK FILLED.

10603

STAR BUILDERS
 GEORGE STERN
 7523828
 are doing things



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

19
 27

PERMIT CARD

SEPTIC TANK, LEVEL OK concrete 750
Top is 2 FT below grade
 DISTRIBUTION BOX, LEVEL _____

CLEANOUTS 0/2

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 9 FT. DEPTH BELOW INLET 10 FT.

ABSORBENT AREA 340 SQ. FT. counting stone
270 SQ. FT. not counting stone

REMARKS plumbing going out of rear of house - to be changed to front DW
do not give final approval until plumbing is changed. PMW

23 AUG 68 - Dry Well Inlet 3 FT below grade
About 1 FT stone around dry 340 sq ft subsoil area with stone
OK TO cover Tank & Dry Well BUT call for
Reinspection when broken sewer is OK

DATE SYSTEM APPROVED _____ INSPECTOR J. M. Morgan

APPLICATION

A 10603

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 750 gal. for 3 bedrooms
Septic tank 1,000 " " 4 " "

ELLICOTT CITY

DISTRICT 3

DATE 7/16/65

Drywell - 100 sq. ft. absorbent sidewall
area below inlet pipe per bedroom. Inlet
pipe to be no deeper than 4 ft. below original grade.
Locate drywell 50 ft. from front lot line and 60 ft.
from left side line on lot in seen when facing it
from Indian Way.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER COUNTRY HOMES LTD.

ADDRESS 925 Rambling Drive, Baltimore 21228 PHONE _____

PROPERTY LOCATION:

SUBDIVISION INDIAN HILL LOT NO. Forty-one, Block D

ROAD AND DESCRIPTION Indian Way

OCCUPANT Vacant PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 1-1/2 A. TYPE BLDG. 3-4 B.R.

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT COUNTRY HOMES LTD.
R. C. Canada
925 RAMBLING DRIVE

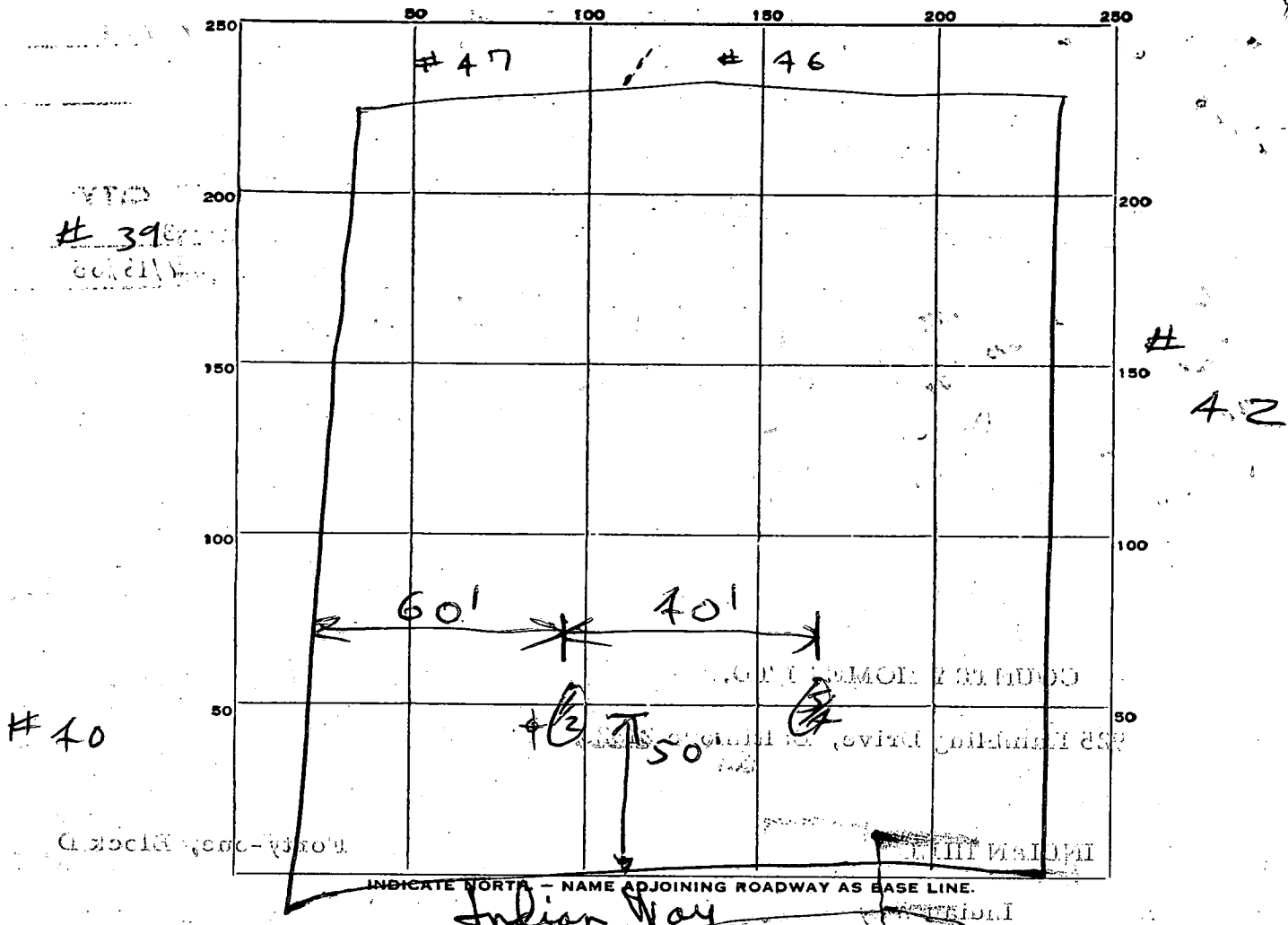
APPROVED BY R. D. [Signature] DATE 9-21-65

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/30/65	1	4 ft	1046	1049	1049	1057	38 min.
	2	9 ft	1047	1048	1048	1051	3 min
	3	4 ft	Same type soil		Not tested		
	4	9 ft					

SOIL AUGER FINDING

TESTED BY P.R.F. D.A.M. 7/30/65

REMARKS

LOT 41, Blk. D.

State Office Building
ANNAPOLIS, MARYLAND 21401

DEPARTMENT OF
WATER RESOURCES

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

A 10663

APPLICATION FOR PERMIT TO DRILL WELL

700. 4157

Owner Star Builders
Street or R. F. D. 309 Woodley Mill Rd
Post Office _____

Driller J. Hartman License Number 70
Street or R. F. D. _____
Post Office not using
Date aug 6-68

Quantity of Water to be Produced 5 Gallons Per Minute
Total Quantity Needed For Use 800 Gallons Per Day
Use for Water House
Approximate Depth of Well (feet) 100
Method of Drilling to be used Rotary

Location of Well _____ County Howard
Subdivision Indian Hills
Section _____ Lot 41
Nearest Town Dyersville
Distance from Town 2 1/2 mile
Direction from Town S

Is this a Replacement Well? Yes - No ✓
If YES, indicate date abandoned well is to be sealed: _____
and by whom: _____

Description of Location of Well.
(This information MUST BE ACCURATE, and should be definite enough to permit locating well on a county map).
Near what road Howard Lodge Rd.
On which side of road _____
(North, East, South, West) ✓
Distance from road 100ft

PERMIT TO DRILL WELL
(Not To Be Filled In By Driller)

Well Permit No. Ho-19-W-24

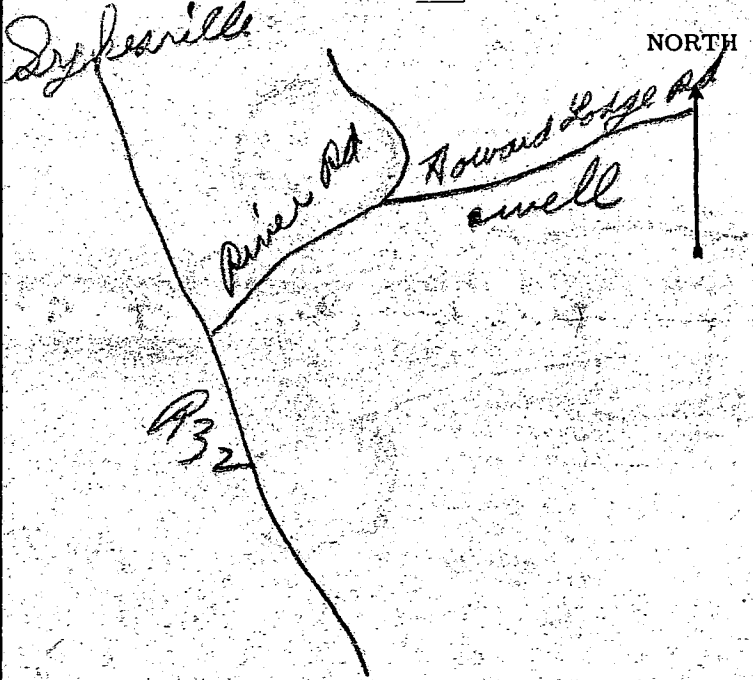
Samples of Cuttings Required by Department: Yes No
Owner Requires Permit to Appropriate Water: Yes No
Owner Has Permit to Appropriate Water: Yes No

Appropriation Permit No. _____
The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.
Basil W. Miller Aug. 8-8-68
Director Date

THIS PERMIT IS NOT TRANSFERABLE
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT
Special conditions that must be observed: _____

County Permit No. _____
Health Department Approval of Application
Howard County Department of Health
or State Department of Health
Approved by John F. Ward
Title Director, Environmental Health
Date 8/7/68

Draw a sketch below showing location of well in relation to nearby towns, roads and streams with NORTH in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch. Distances may be approximate, but must be indicated.



**THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL**

WELL COMPLETION REPORT

WELL DESCRIPTION

A WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

	FEET from ___ to ___
Top Soil	0-3
Shaly	3-30
Brown Slate	30-100
Gray Rock	100-140

B CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well):

DIAM. (inches)	FEET from ___ to ___
Steel 6 1/2"	0-40

water 90

HEALTH DEPARTMENT
ANNAPOLIS, MARYLAND
JAN 11 1967

Permit Number H0-69-424
 Owner Star Builders
 Address 8110 H. City Rd
 Subdivision Indian Hills
 Section _____ Lot 41
 County Permit Number _____
PUMPING TEST
 Hours Pumped 2
 Type of Pump Used air
 Pumping Rate 7.6 GPM
 Gallons per Minute _____

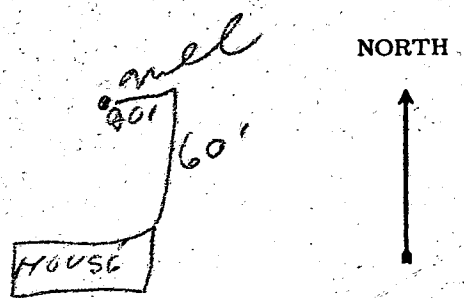
WATER LEVEL
 (Distance from land surface to water)
 Before Pumping 50 Ft.
 When Pumping 140 Ft.

APPEARANCE OF WATER
 Clear _____ Cloudy _____
 Taste _____
 Odor _____

Height of Casing Above Land Surface 7 above Ft.

PUMP INSTALLED
 Type _____
 Capacity _____
 Gallons per Minute _____
 Gallons per Hour _____
 Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT
 Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE WELL WAS COMPLETED

I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

Morgan F. Eastbedy, Well Driller

8-27-66 Well Driller License No.: 71

Rd.