

6-6-91  
1:00 pm  
6/7/91 AM

# PERMIT

Tax ID - 04-352726

P 46936

## SEWAGE DISPOSAL SYSTEM

A 46218

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4th

### INDEXED

DATE 3/25/91

#### HOWARD COUNTY HEALTH DEPARTMENT

DATE SYSTEM APPROVED 6/7/91

BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

INSPECTOR RH

David Bullock IS PERMITTED TO INSTALL  ALTER

ADDRESS 417 Clear Ridge Road, Linwood, Maryland 21764 PHONE 848-1524

SUBDIVISION Streaker Property LOT 1 ROAD 13972 Frederick Road

PROPERTY OWNER \_\_\_\_\_

ADDRESS Herbert & Dorothy Streaker

SEPTIC TANK CAPACITY 1000 GALLONS (1250)

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM 540-3BR<sup>135</sup>

LINEAR FEET OF TRENCH REQUIRED 135

TRENCHES - 180 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 7 1/2 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Beginning at the front left lot corner, when facing the lot from Route 144, place the distribution box 160 ft. down the left (176.4') lot line and 55 ft. off the left lot line. Run trenches along contour toward the left lot line. Maintain a minimum of 100 feet to all wells.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 3/22/91 RH

PLANS APPROVED BY Jane E. Nadeau cm DATE 03/14/91

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, 90° ELBOWS NOT ACCEPTABLE.

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 TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

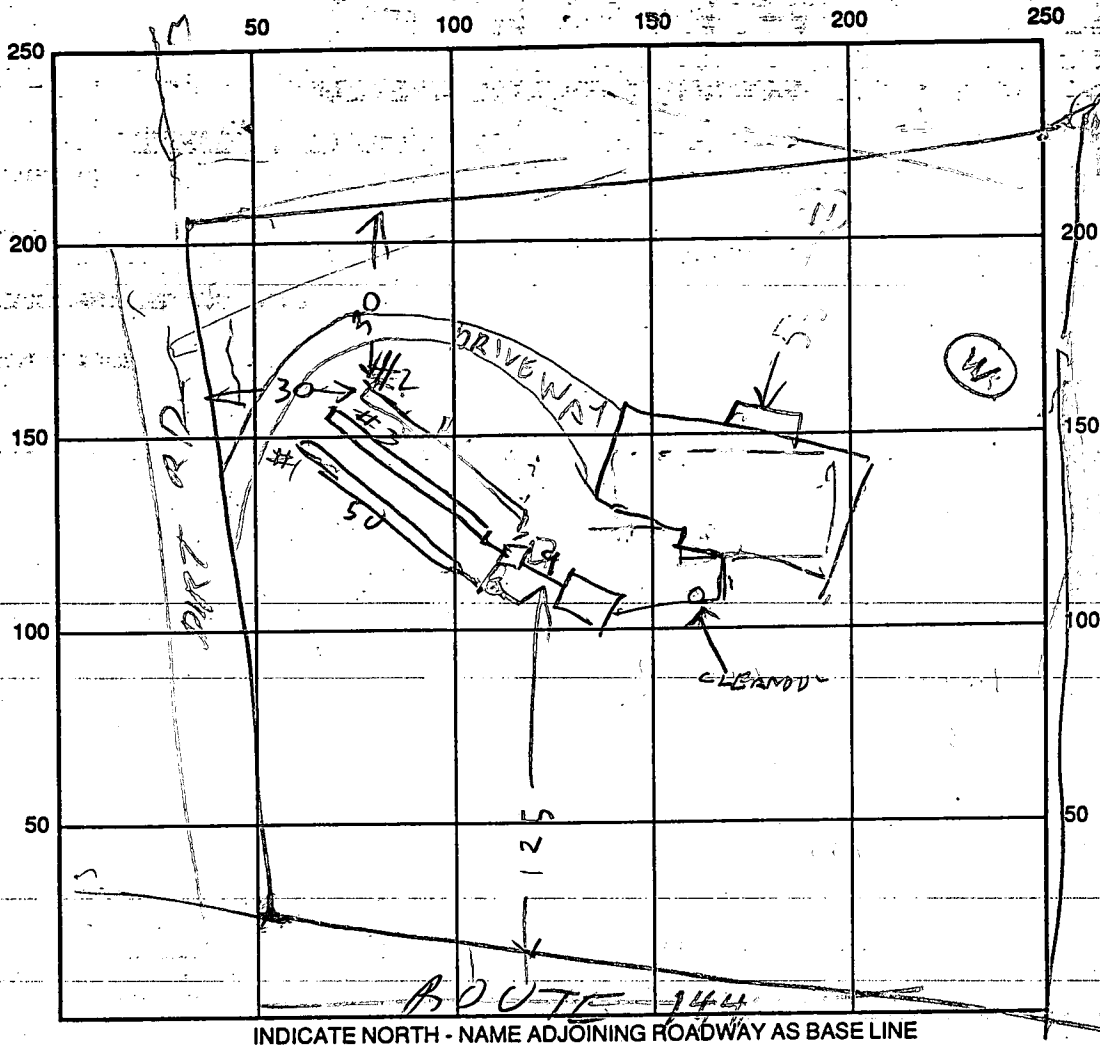
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

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

A-46218



46  
46  
50  
192  
  
46  
9

SEPTIC TANK LEVEL 1250 CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 

1	2	3
7.5	7.5	7.5

 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 

4	4	3
4	4	3

 FT. TOTAL LENGTH 

50	46	46
----	----	----

 FT. 142

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 568 SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: 6/6/91<sup>1:00</sup> - ADD STONE TO TRENCH #1 & #2. 7/2/6/91<sup>2:30</sup>  
TRENCH #1 FINISHED ADD STONE TO TRENCH #2 & DIG TRENCH  
#3 RH 6/7/91<sup>10:00 AM</sup> COVER TRENCH #2 ADD STONE  
TO TRENCH #3 RH 6/7/91<sup>11:00 AM</sup> COVER TRENCH #3 RH

DATE SYSTEM APPROVED 6/7/91 INSPECTOR Raymond Hoelger

# APPLICATION

PERCOLATION TESTING

A 46218

P \_\_\_\_\_

DISTRICT 4th

DATE 8/7/90

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE 461-9933

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 Herbert & Dorothy Streaker

ADDRESS 14000 Route 144 - W. Friendship, Md. 21794 PHONE (301) 442-2255-2180

PROSPECTIVE BUYER Unknown

ADDRESS N/A PHONE N/A

PROPERTY LOCATION:

SUBDIVISION Streaker Property LOT NO. Lot 1

ROAD AND DESCRIPTION 13972 ~~Old~~ Frederick Road

TAX MAP 23 PARCEL # 100

SIZE OF LOT 1.00 Acre TYPE BLDG Single Family Dwelling  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

John M. Rush  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

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

REASONS FOR REJECTION OR HOLDING 8/30/90 Perc OK. Hold for Plat B97

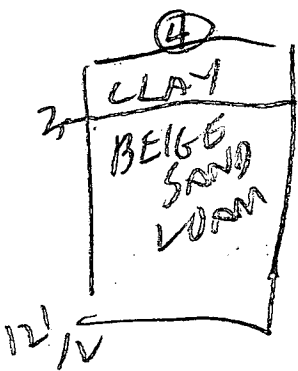
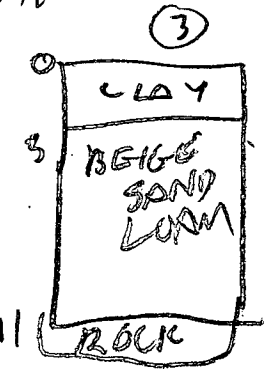
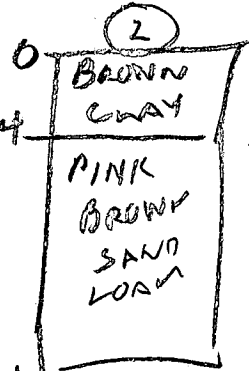
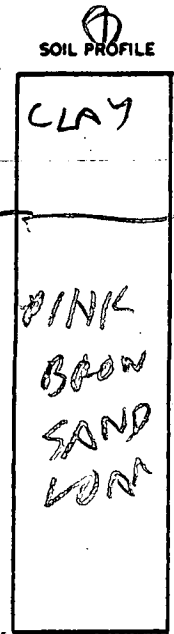
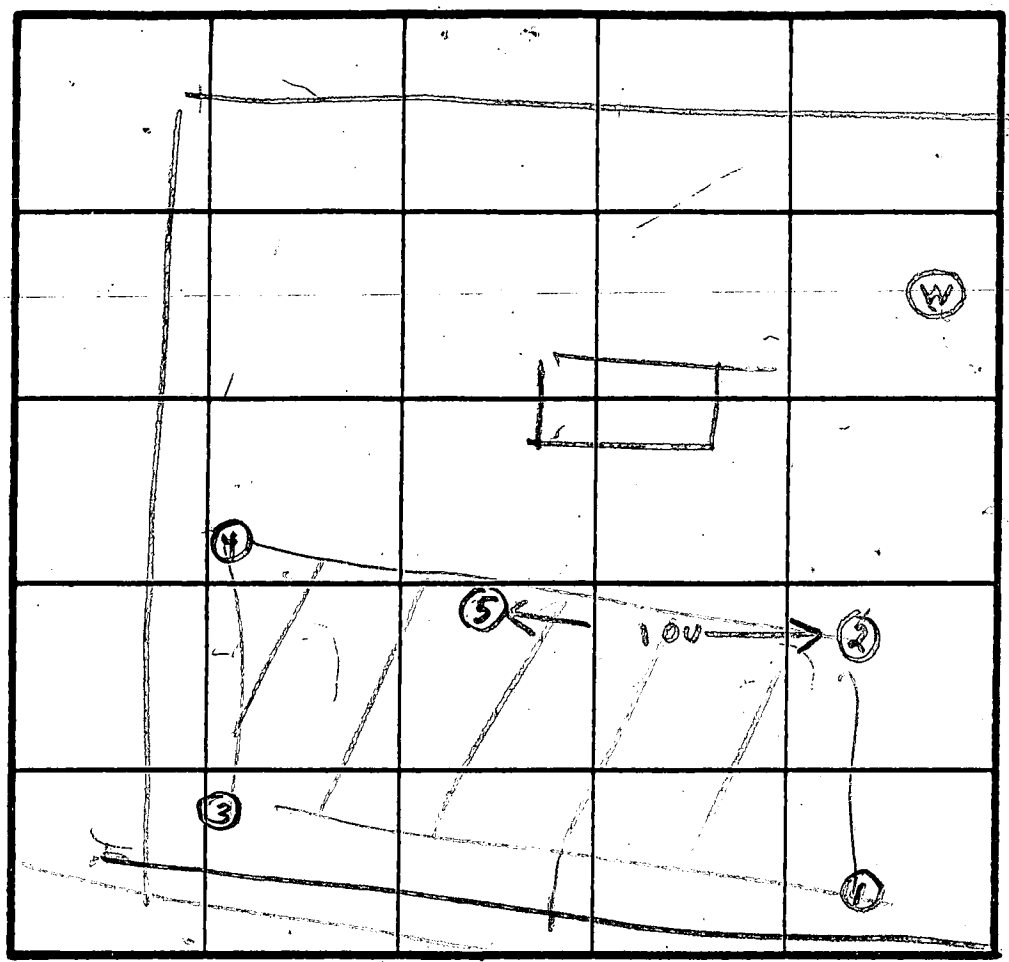
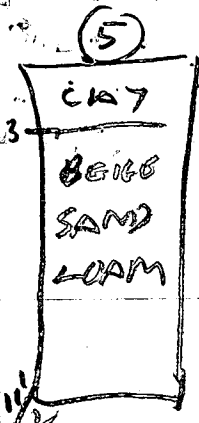
FILED PERMIT BUREAU  
AND RETURNED 3/19/91

Serial # 36894-SKD

# THIS IS NOT A PERMIT

HD-216

Lot 1  
A46218

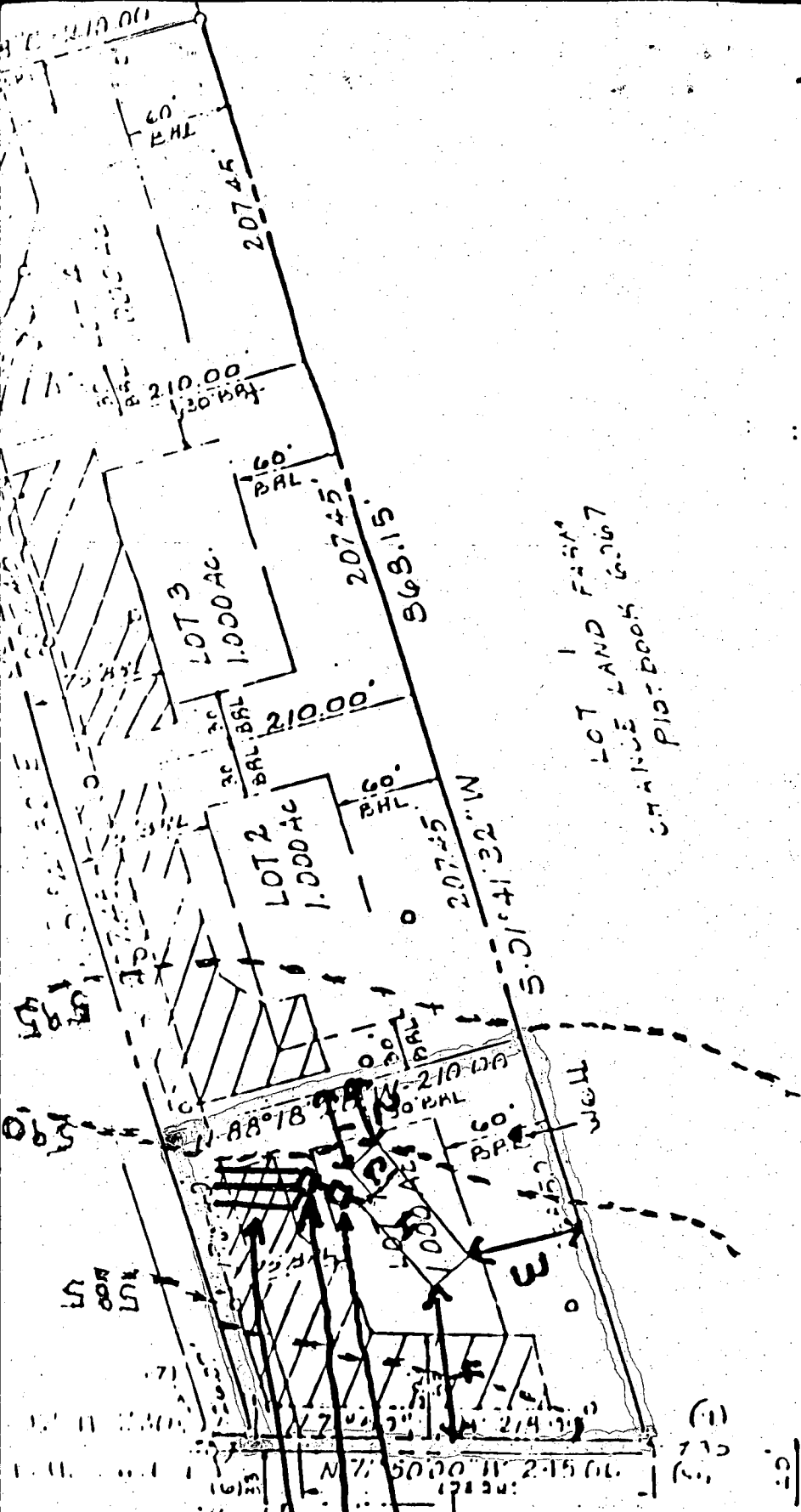


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
ROUTE 144

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
ehdro	1S	6	1016	1028	1029	1040	12
	1V	12 1/2		LL			
	2S	6	1018	1021	1021	1024	3
	2V	12.5					
	3S	4	1029	1031	1031	1034	3
	3V	11	OK				
	4S	4	1030	1032	1032	1036	4
	4V	12.5	OK				
	2D	8	1126	1127	1127	1129	2
	5V	11 1/2	OK				

REMARKS: Holes ①②③④ dug per test plat Hole ⑤ dug differently

TYPE OF SOIL \_\_\_\_\_  
 TESTED BY Raymond Hodges ALSO PRESENT FYOCK CO KENNY & Mr Steuber



LOT 1 LAND FARM  
 CHARGE LAND BOOK 62067  
 PLOT BOOK

58  
 55  
 33  
 45  
 85  
 57

3-14-91  
 Drawing not to scale,  
 stretched during  
 photocopy process.  
 Use for approximate  
 locations. JEN

*[Handwritten signature]*

MARYLAND ROUTE 144

1250 G.  
 SUP TRAIL  
 Dis. Bar  
 (3) 45'  
 Tracks

1250 G.  
 SUP TRAIL  
 Dis. Bar  
 (3) 45'  
 Tracks

# HERBERT STRECKER PROPERTY

## ROUTE 144

WELL STAKES ON  
 LOT 1, 2, 3, 4 OK  
 STICKERS APPLIED  
 11123190  
 R HODGES

Residue of  
 Herbert A. Streaker  
 211/203

50 Ft. Wide Use In Common  
 Easement for Ingress and  
 Egress To and From Lots  
 1, 2, 3+4 and the Residue of  
 Herbert A. Streaker and MD. RT. 144

Land Dedicated To Howard  
 County For The  
 Purpose of a Public  
 Road (0.039 Ac.)

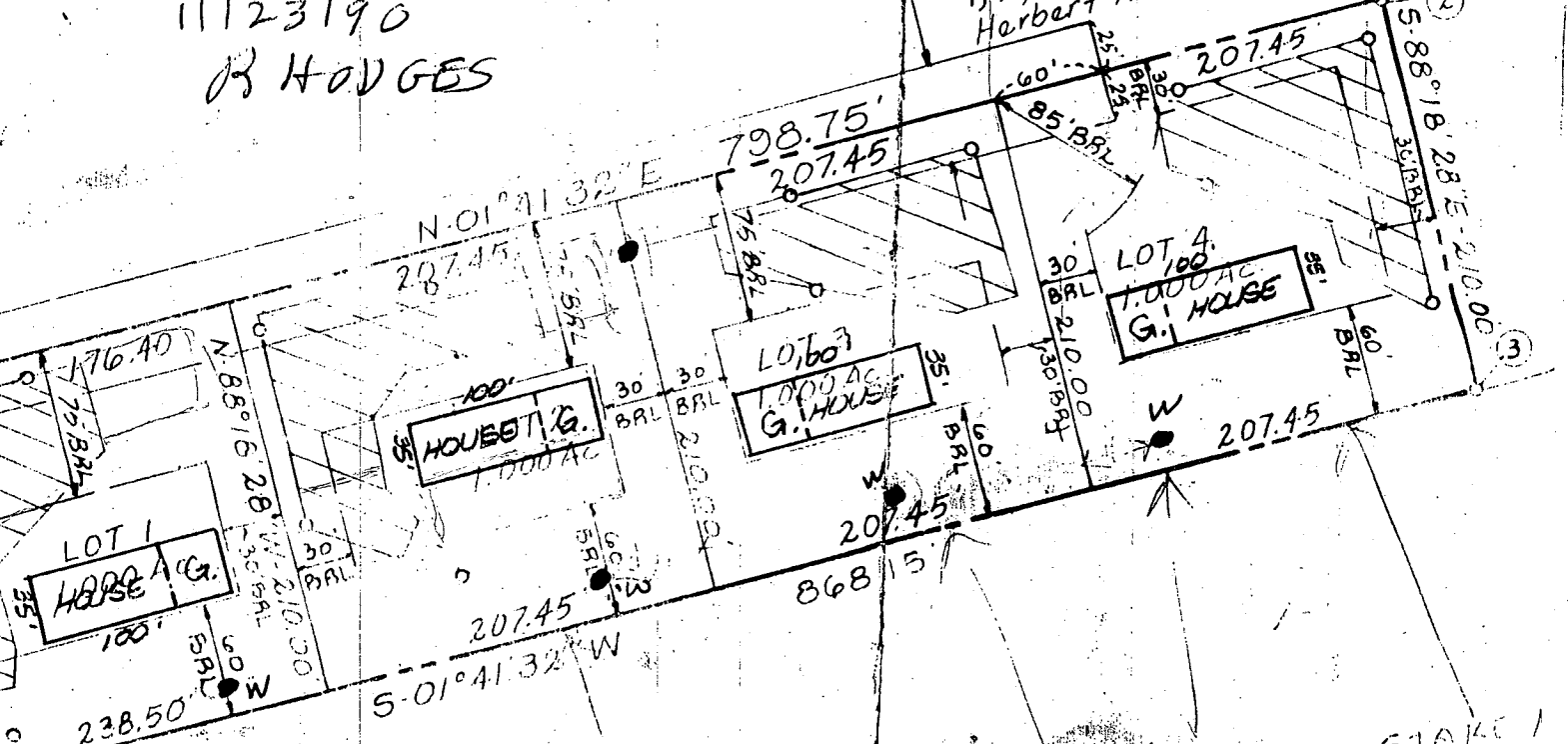
MARYLAND R.  
 Vehicle

N-01°41'32"W 730'  
 N-71°50'00"W 218.99'  
 N-71°50'00"W 245'  
 N-88°16'28"W 210.00'

N-01°41'32"E

26.07'

N-71°50'00"W 218.99'



STAKE 1  
 STAKE 2

B 1 **0900** SEQUENCE NO. (DP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

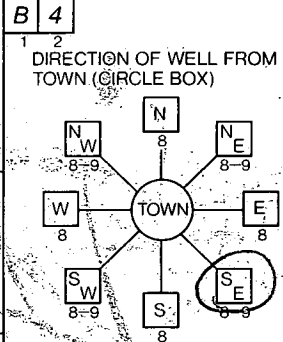
STATE OF MARYLAND  
 APPLICATION FOR PERMIT TO DRILL WELL  
 please print or type


STATE PERMIT NUMBER  
**HO-28-1639**  
 fill in this form completely

Date Received (APA) **111490**  
 OWNER INFORMATION  
**STREAKER HERBERT A**  
 Last Name Owner First Name  
**14000 RT 144**  
 Street or RFD  
**W FRIENDSHIP MD 21794**  
 Town State Zip

B 3 LOCATION OF WELL  
**HOWARD** COUNTY  
**STREAKER PROP** SUBDIVISION  
 SECTION **44** LOT **48**  
**COOKSVILLE** NEAREST TOWN  
 MILES FROM TOWN (enter 0 if in town) **1** MI

DRILLER INFORMATION  
**George F. Easterday**  
 Driller's Name  
**L. Franklin Easterday, Inc.**  
 Firm Name  
**9265 Brown Church Rd. Mt. Airy, Md. 21771**  
 Address  
**George F. Easterday** 11/7/90  
 Signature Date



**RT 144** NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
  
 DISTANCE FROM ROAD **200** FT  
 ENTER FT OR MI **FT**

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5**  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
**HOWARD** COUNTY NAME  
**A46218** COUNTY NO.  
 STATE SIGNATURE \_\_\_\_\_ DATE ISSUED \_\_\_\_\_  
**112690** CO SIGNATURE **Raymond Lodge** 3/26/91  
 NORTH GRID **539000** EAST GRID **0799000**

USE FOR WATER (CIRCLE APPROPRIATE BOX)  
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)  
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)  
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)  
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)  
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

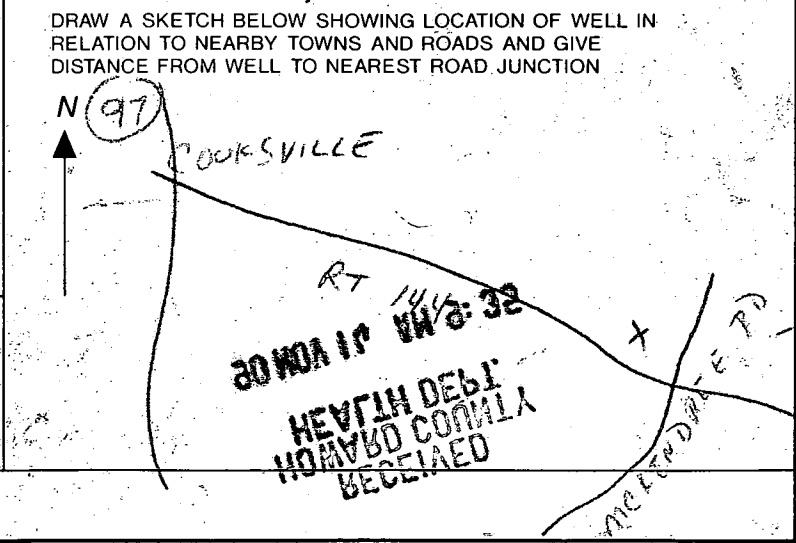
APPROXIMATE DEPTH OF WELL **200** FEET

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER  
 1. well  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
 E **7909**  
 N **5309**

APPROXIMATE DIAMETER OF WELL **6** INCH

METHOD OF DRILLING (circle one)  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)  
 CABLE REVerse-ROTary Drive-POINT  
 other \_\_\_\_\_

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
 THIS WELL WILL NOT REPLACE AN EXISTING WELL  
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 THIS WELL WILL DEEPEM AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) \_\_\_\_\_



Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_  
 FORCE **KL** WRITE INITIALS IN BOX PERMIT No. **HO-28-1639**

SPECIAL CONDITIONS **4472-2180**

**C1** 0976 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 40218**

ST/CO USE ONLY  
 DATE Received [ ] [ ] [ ] [ ] [ ] [ ]  
 DATE WELL COMPLETED **1 20 7 9 0**

Depth of Well **200**  
 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"  
**HO-08-1639**

OWNER **STARKER HERBERT**  
 STREET OR RD **ROUTE 144** TOWN **W. FRIENDSHIP**  
 SUBDIVISION **HEARST STARKER** SECTION **1** LOT **1**

**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	
Clay	2	5	
Shaley	5	20	
Sand Stone	20	50	
Mica	50	60	
Sand Stone	60	65	✓
Mica	65	80	
Sand Stone	80	85	
Mica	85	130	
Sand Stone	130	132	✓
Mica	132	180	
Sand Stone	180	182	✓
Mica	182	200	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **15** NO. OF POUNDS **1500**  
 GALLONS OF WATER **75**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **30** ft.  
 (enter 0 if from surface)

**CASING RECORD**  
 casing types insert appropriate code below  
**ST CO** STEEL CONCRETE  
**PL OT** PLASTIC OTHER  
 MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)  
**ST 6 55**

**OTHER CASING (if used)**  
 diameter inch depth (feet) from to

**SCREEN RECORD**  
 screen type, or open hole insert appropriate code below  
**ST BR HO** STEEL BRASS OPEN HOLE  
**PL OT** PLASTIC OTHER

**C2**  
 DEPTH (nearest ft.)  
 EACH SCREEN 1 **40** 2 **53** 3 **200**  
 SLOT SIZE 1 2 3  
 DIAMETER OF SCREEN (NEAREST INCH)  
 from to

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 26.04.04 "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. **41**  
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
 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.)  
 TELESCOPE CASING LOG INDICATOR  
 OTHER DATA

**C3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **10**  
 METHOD USED TO MEASURE PUMPING RATE **10-17**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING **74**  
 WHEN PUMPING **52**  
 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:  
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) **31** **35**  
 PUMP HORSE POWER **37** **41**  
 PUMP COLUMN LENGTH (nearest ft.) **43** **47**  
 CASING HEIGHT (circle appropriate box and enter casing height)  
 (+) above } LAND SURFACE (nearest foot) **2**  
 (-) below }

LOCATION OF WELL ON LOT  
 SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)

well 30  
 X  
 20  
 RT. 144  
 20 DEC 51  
 W.C. 74 75 76  
 100% COMPLIANCE  
 208