

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 47123

A REPAIR

DISTRICT _____

DATE 5/20/91

DATE SYSTEM APPROVED 5/28/91

INSPECTOR RJL

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

316630

INDEXED

Jack Fyock Septic Service IS PERMITTED TO INSTALL _____ ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION WALFIELD ESTATES LOT 24A SECT 5 ROAD 3305 Stapleton Drive

PROPERTY OWNER Warren Halle

ADDRESS _____

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

_____ SQUARE FEET PER BEDROOM 4 BR

LINEAR FEET OF TRENCH REQUIRED _____

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

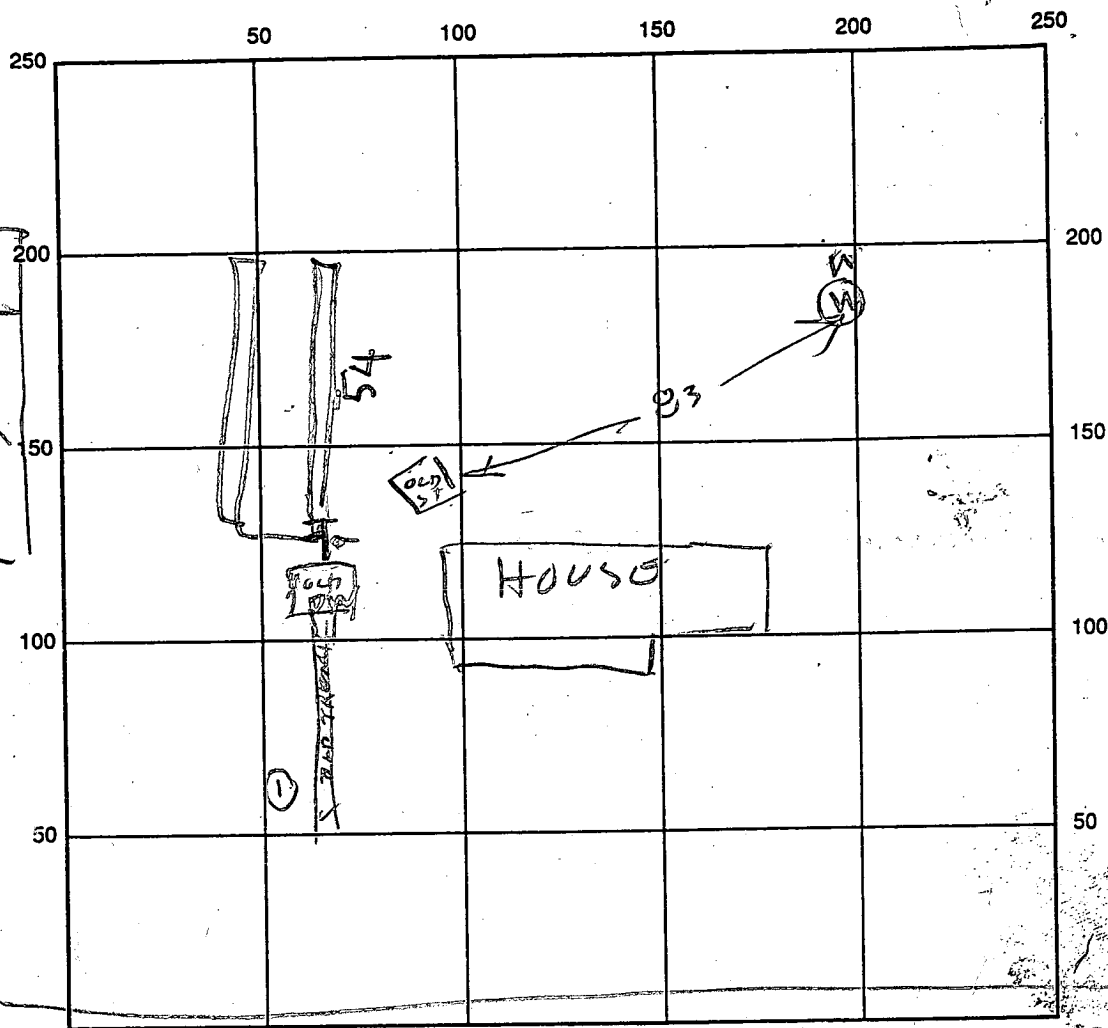
5/20/91 TRENCH OFF OLD DRY
WELL 500 SQ FT 10 FT DEEP
5 FT STONE. RUN TOWARD BACK LANE
BJ

PLANS APPROVED BY Craig Williams cm DATE 05/20/91

- 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**

47123



①
CLAY
BROWN
SAND
LOAM

125
4
500

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
STAPLE TOWN DR

SEPTIC TANK LEVEL _____ CLEANOUTS _____
 DISTRIBUTION BOX LEVEL _____
 DRAIN FIELD/TITLE DEPTH 10 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 FT.
 EFFECTIVE GRAVEL DEPTH _____ FT. TOTAL LENGTH 108 FT.
 NUMBER OF TRENCHES _____ ONE SIDEWALL/BOTTOM AREA 540 SQ. FT.
 DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.
 ABSORBENT AREA 540 SQ. FT.

REMARKS: 5/28/91^{AM} SOIL GOOD TRENCH #1 ALMOST FINISHED TRENCH #2 STARTED BK
5/28/91^{PM} - TRENCH #1 FINISHED TRENCH #2 FINISHED TRENCH TO BE MADE A LITTLE LONGER TO USE UP STONE BK

DATE SYSTEM APPROVED 5/28/91 INSPECTOR B. Hodge

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 4th

DATE 5/24/73

File Final
P 18523 *C.R.S.*
A 14805

Howard Pickett

IS PERMITTED TO INSTALL ALTER

ADDRESS Watersville Road, Mt. Airy, Maryland PHONE 829-0543

A SEWAGE DISPOSAL-SYSTEM LOCATED AT _____

SUBDIVISION Warfield Estates ROAD Stapleton Drive LOT 24A, Sec. 5

PROPERTY OWNER Maple Hill Farm Associates

ADDRESS 9300 Fontana Avenue, Seabrook, Md. 20801

SPECIFICATIONS 4 bedrooms

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

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

SEPTIC TANK CAPACITY 1250 GALLONS

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

OTHER DRY WELL - 138 sq. ft. of absorbent sidewall area per bedroom to begin below the first 4 1/2 ft. of non-porous soil. Maximum depth permitted for dry well is 9 1/2 ft. below original grade. Locate dry well 70 ft. from front lot line and 30 ft. from left side line as seen from Stapleton Drive. Use a 50 ft. trench off dry well - 9 1/2 ft. deep - 5 ft. of gravel { 1 1/2 ft. wide. } Trench to start 5 ft. off dry well - run parallel with road. *Call for insp of trench before gravel is installed.*

NOTE: ALL PIPE FROM HOUSE TO DRY WELL MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

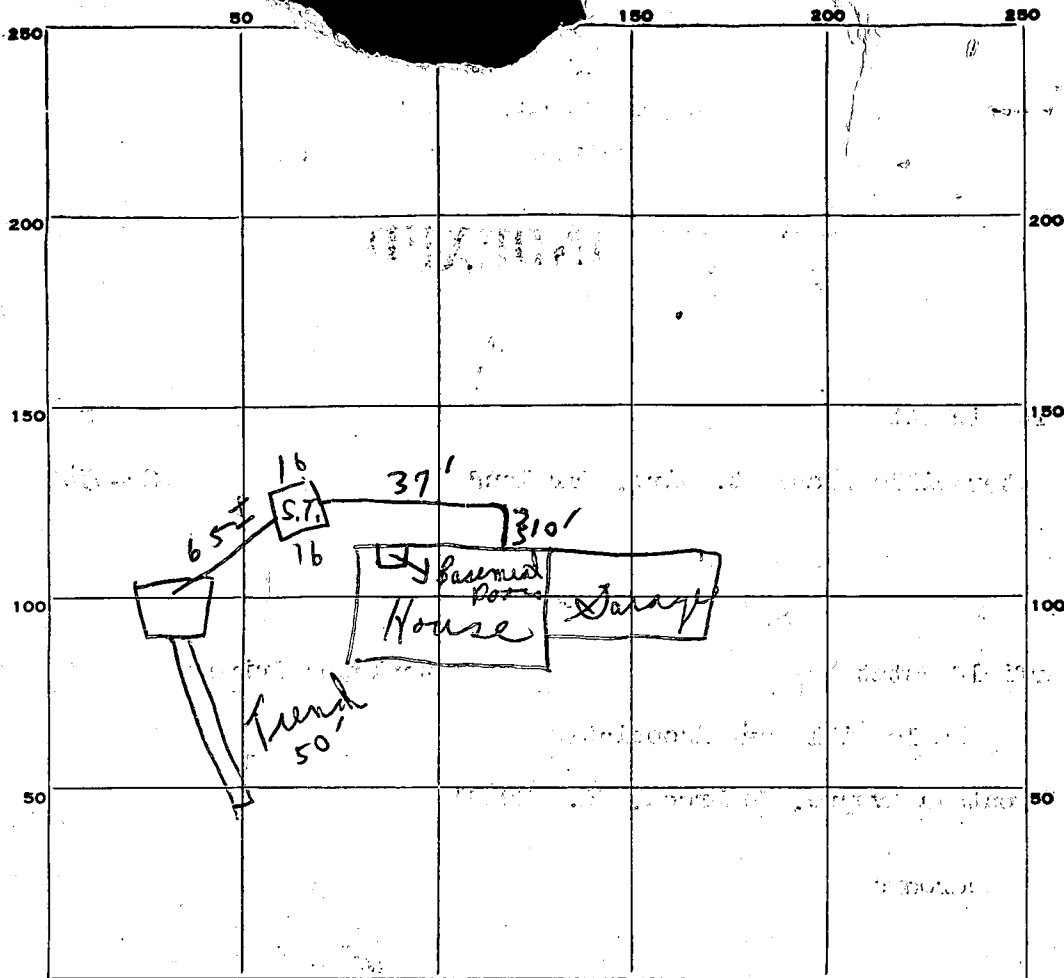
PLANS APPROVED BY J. T. Wright & Robert Torre DATE 1023/69 & 3/28/73

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.

140
4
360

A 14805



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD

7/5/73 ⁽²⁾ Signed

S.T. | D.W.
OK | OK

SEPTIC TANK, LEVEL

CLEANOUTS

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH

FT.

TRENCH WIDTH

FT.

GRAVEL DEPTH

5 1/2'

TOTAL LENGTH

50

FT.

NUMBER OF TRENCHES

1

TOTAL BOTTOM AREA

384
275
659 Trench
9 1/2'
3 1/2'
50 5 1/2'
295

SEEPAGE PITS, INSIDE DIAMETER

64

FT.

DEPTH BELOW INLET

6'

FT.

ABSORBENT AREA

659 ±

SQ. FT.

REMARKS

7/5/73 ↔ 7/3/73 Trench checked by Mr. Monaghan per Mr. Pickett's discussion on site at 7/5/73 inspection

Also per yellow card 7/5/73 (1) Trench

in - cast iron needed from S.T. to D. Well. & Cleanout needed. (2) System ok'd for back filling except

for cleanout on Dry Well - needs this (3) Cleanout

DATE SYSTEM APPROVED

7/5/73 per specs of D.W.M. etc.

INSPECTOR

C. Stecker

25.00'

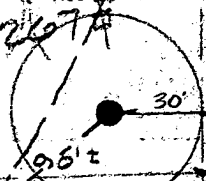
77.00'

Drywell
Ex El. 565'
Inv El. 560'

40,267

87'±

87'±



A
FF. 65
BAS. 57

7.6'±

55'
Inv 561'
89'±
No 561.2

40,267

Well
Ex El 566'

232

93'

3.65

92.00'

7/3/73 inspection
trench
Part of job done

PERMIT

P 18523
A 14805

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 4th

DATE 5/24/73

Howard Pickett IS PERMITTED TO INSTALL ALTER

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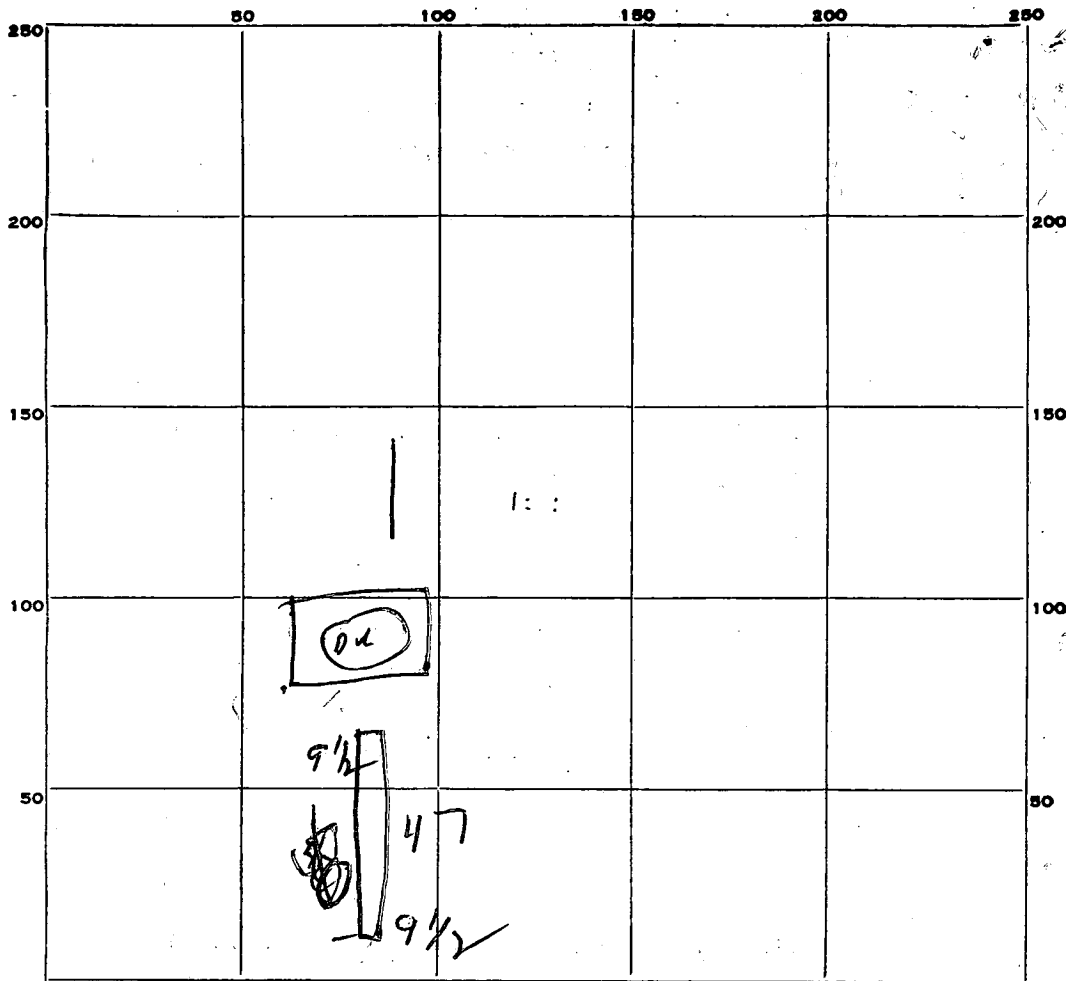
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INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

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

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS ~~7-3-73 OK trench was to be 11' with sed mat.~~
 7-3-73 OK to put gravel in trench - but must 3 ft to trench
 to make 50'

DATE SYSTEM APPROVED _____ INSPECTOR _____

APPLICATION

A 14805

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY *Septic Tank - 3 bedroom - 1000 sq ft* ELLICOTT CITY
1250 sq ft

Dry Well - 130 sq ft of chambered interwall area DISTRICT 4

per bedroom to begin below the first DATE 9/16/69

4 1/2 ft of non porous soil. Maximum depth permitted for dry well is 11 ft. below original grade. Locate dry well 70 ft from front lot line and 30 ft from left side line as seen from

TO: THE COUNTY HEALTH OFFICER *Stapleton Drive*
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Maple Hill Farms Associates

ADDRESS 9300 Fontana Ave., Seabrook, Md. 20801 PHONE Mr. Silbermann
243-2584 Any questions call:

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 58, Sec. 1

ROAD AND DESCRIPTION Shady Lane Circle 4

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 174' x 222' x 192' x 232' TYPE BLDG. 3 or 4
160' x 228' x 160' x 224' NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ MacClintock & Huster

APPROVED BY Tested by J. Wright FOR Dry Well DATE 10/23/69
(KIND OF SYSTEM)

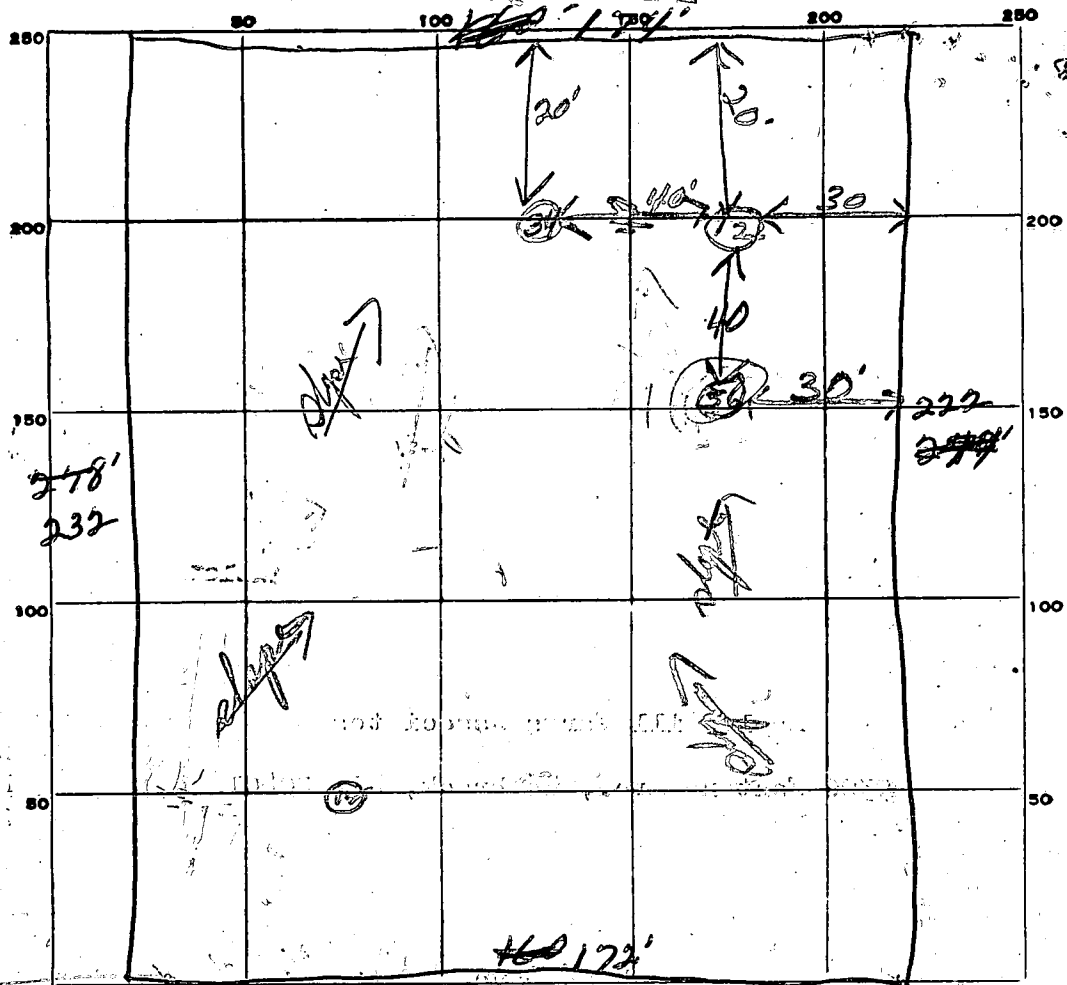
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Unmarked Same



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|-------------------------|----------|--------|------------------|------------------|------------------|------------------|----------|
| | | | START | STOP | START | STOP | |
| 10/23/69 | 1 | 10' | 10 ¹⁸ | 10 ²⁶ | 10 ²⁶ | 10 ³⁸ | 12 min |
| per on high part of lot | 2 | 5' | 10 ¹⁹ | 10 ³¹ | 10 ³¹ | 10 ⁵⁰ | 19 min |
| | 3 | 10' | 11 ⁵¹ | 11 ⁵⁵ | 11 ⁵⁵ | 12 ⁰⁰ | 7 min 58 |
| | 4 | 5' | 11 ⁵¹ | 11 ⁵⁵ | 11 ⁵⁵ | 12 ¹⁴ | 18 min |
| | 5 | 10' | 11 ⁵⁹ | 12 ¹⁰ | 12 ¹⁰ | 12 ¹⁰ | 30 min |
| | 6 | 4' | 11 ⁵⁹ | 12 ¹⁰ | 12 ¹⁰ | 12 ¹⁰ | 30 min |
| | 7 | 11' | 1 ⁴⁵ | 1 ⁴⁸ | 1 ⁴⁸ | 1 ⁵⁵ | 7 min |
| | 8 | 4 1/2' | 1 ⁴⁵ | 1 ⁴⁹ | 1 ⁴⁹ | 2 ¹⁰ | 2 min |

per on high part of lot

14 min
Cover
4 ft

SOIL AUGER FINDING _____

TESTED BY [Signature]

REMARKS _____

SEQUENCE NO. (DWR USE ONLY) **2459**

1 2 3 (SEQ. NO.) 6
 THIS NUMBER IS TO BE PUNCHED IN COLS. 3-5 ON ALL CARDS

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 COMPLETION

FILL IN THIS FORM COMPLETELY

COUNTY NUMBER

DATE RECEIVED (DWR USE ONLY) **8-13**

DATE WELL COMPLETED **8-18-73**

15 20

DEPTH OF WELL **120**

22 (TO NEAREST FOOT) 26

PERMIT NO. FROM "PERMIT TO DRILL WELL" **40-73-0253**

28 29 30 31 32 33 34 35 36 37

DRILLERS IDENTIFICATION NO. **42**

OWNER **Hallie Tubert** LAST NAME FIRST NAME

STREET OR RFD POST OFFICE **San Juan, Md.**

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 | |
| <i>top soil</i> | 0 | 2 | |
| <i>sandy</i> | 2 | 40 | |
| <i>sand stone</i> | 40 | 80 | ✓ |
| <i>granite</i> | 80 | 120 | ✓ |

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO

TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT BENTONITE CLAY

NO. OF BAGS **6** NO. OF POUNDS **600**

GALLONS OF WATER **36**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)

FROM **0** FT. TO **25** FT. (ENTER 0 IF FROM SURFACE)

CASING RECORD

INSERT APPROPRIATE CODE BELOW

STEEL CONCRETE PLASTIC OTHER

MAIN CASING TYPE **S.T.** NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) **6** TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) **47**

OTHER CASING (IF USED)

| EACH CASING | DIAMETER (INCH) | | DEPTH (FEET) | |
|-------------|-----------------|--|--------------|----|
| | | | FROM | TO |
| 1 | | | | |
| 2 | | | | |

SCREEN RECORD

INSERT APPROPRIATE CODE BELOW

STEEL BRASS OR BRONZE OPEN HOLE PLASTIC OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM TO

1 2 3 (SEQ. NO.) 6

8 9 11 15 17 21

23 24 26 30 32 36

38 39 41 45 47 51

SLOT SIZE, 1. _____ 2. _____ 3. _____

DIAMETER OF SCREEN **56** (NEAREST INCH) FROM TO

GRAVEL PACK _____

IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F

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

TELESCOPE CASING LOG INDICATOR OTHER DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **10**

METHOD USED TO MEASURE PUMPING RATE **hand test**

WATER LEVEL: (DISTANCE FROM LAND SURFACE)

BEFORE PUMPING **98** (NEAREST FOOT)

WHEN PUMPING **150** (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)

AIR PISTON TURBINE

CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)

JET 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 NO

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

PUMP HORSE POWER **37** **41**

PUMP COLUMN LENGTH (NEAREST FOOT) **43** **47**

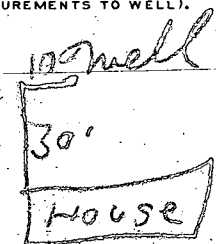
CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

ABOVE BELOW

LAND SURFACE **9** (NEAREST FOOT)

LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO 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 **J. H. Estabrook**

(PLEASE PRINT) SIGNATURE **J. H. Estabrook**