

6-29-95
12:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50748

A 48720

DISTRICT 3rd

DATE 6-23-95

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED 6/29/95

INSPECTOR M. Rifkin

INDEXED

Farm & Home Excavating IS PERMITTED TO INSTALL X ALTER

ADDRESS 901 Driver Road, Marriottsville, MD 21104 PHONE 442-2139

SUBDIVISION Dickey Farms LOT 22 ROAD 1023 Day Road

PROPERTY OWNER Russel & Debbie Zile

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 2½ feet below original grade. Bottom maximum depth 4½ feet below original grade. Effective area begins at 2½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 337.58' and 411.94' lot lines, place the distribution box 260 feet down the 411.94' lot line and 25 feet off that same lot line. Run two 120 foot trenches on contour toward the 169.59' lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter clenout and cap to grade or above on septic tank. OK 5/4/95 DRS

PLANS APPROVED BY Amy McMillen DATE 04/17/95

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

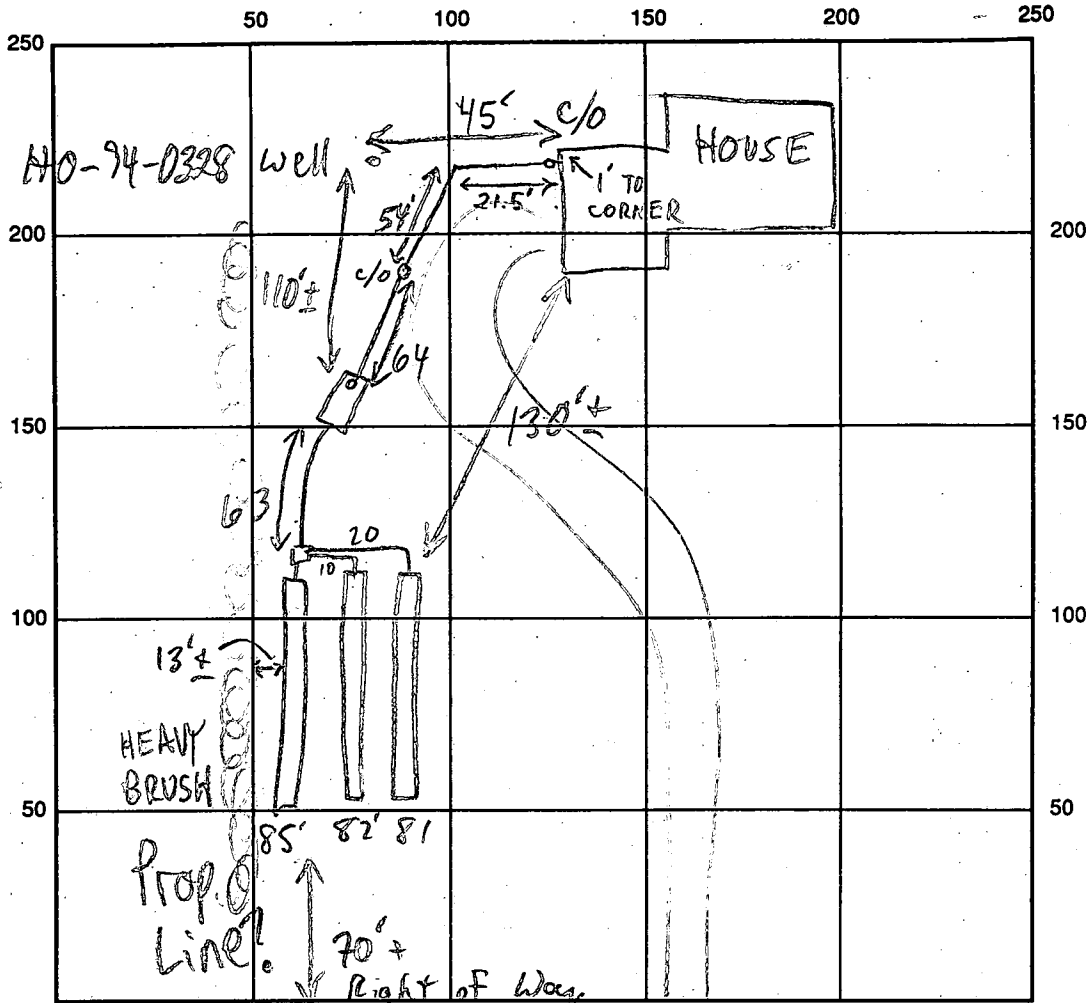
PERMIT VOID AFTER TWO YEARS

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**

A
48720



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DAYLORD (JIM'S WAY)

SEPTIC TANK LEVEL 1250 GAL? CLEANOUTS 2 IN LINE 45.0. - OK
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN
 DRAIN FIELD/TITLE DEPTH 4 1/2 FT. TRENCH WIDTH 3 1/2 FT. INLET DEPTH 2 1/2 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 085 081 FT.
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 0255 0243 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA 744 SQ. FT.

REMARKS: 6/29/95 LAYOUT NOT AS PER DISCUSSION W/OWNER
(2-120' TRENCHES), BUT ACCEPTABLE; TRENCH EXTENSIONS
MAY BE NECESSARY @ REPAIR; OK TO COVER MR

DATE SYSTEM APPROVED 6/29/95 INSPECTOR M. Ripkin

APPLICATION

12/18/92

PERCOLATION TESTING

A 4872D
P _____

PROBABLE OR
RE-TEST OF PREVIOUSLY FAILED LOT
CHANGE OF LOCATION?

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

PROBABLE NOT SEASON
CONFIRMATION TO BE REQ'D.
CW,

DISTRICT _____
DATE 12/3/92

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER JEAN R. Dickey Russell + Debbie Zile

ADDRESS Forsythe Rd Sykesville PHONE 531-3999 513-4406

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Dickey Farms LOT NO. 22

ROAD AND DESCRIPTION 1023 Day Rd (Jim's Way)
3rd Election District

TAX MAP _____ PARCEL # 276

SIZE OF LOT 2.66 ACRES TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED
AND RETURNED 4/17/95
Appl # 5884-SFD-3Bm
SFD

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.

Charles K. Mendenhall
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

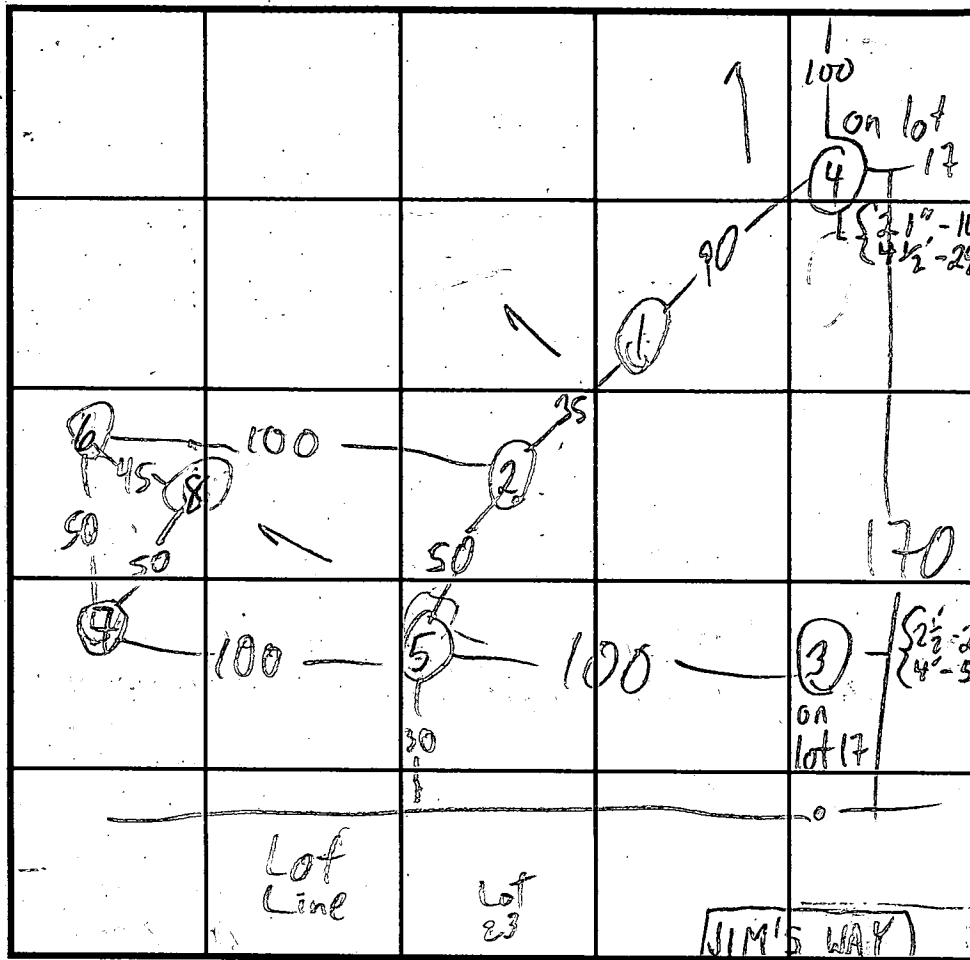
A48720

Lot 22
SOIL PROFILE

0' ①
org sa
clay &
cl lm
4
brn
sa lm
25-40%
frags ↑
w/depth
HARD BOT

②⑤
org red
cl lm
2
tan brn
gray sa
lm
15-20%
Frag

③
brn sa
cl lm
10% frags
4
brn
sa lm
25%
hard
sandstone
9
↓



SOIL PROFILE ⑦⑧
0' red +
org clay 3 1/2
yel
clay 5 1/2
tan
sa lm
mottles in ⑧
soil wet
from 5'
9
15-20%
Frag
③⑤⑥
X=17
240 d BR
Inlet 2 1/2
Bottom 7 1/2

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/18/92	1 S	2 1/2	10:32	10:52	10:52	11:27	3 1/4" 35 min
	1 S ₂	4	12:07	4 1/4" 15 min			
	1 V	9	see profile				
	2 S ₂	2 1/2 4	12:44 4:18	12:59 4:30	12:59 4:30	1:37 4:48	38 18
	2 V	11	see profile				
	5 S	3 1/4	4:15	4:23	4:23	4:45	22
	5 V	10	see profile				
	6 V	10 ±	H ₂ O per contr. NOT SEEN				
	7 V	9'	mottles @ 5 1/2		see profile		
	1 S ₃	5	4:19	4:19	4:19	4:29	10
	8 V	8	soil wet from 5'		see profile		

REMARKS 12/9/92 3 S 2 1/2 3:46 3:57 3:57 4:21 24
3 V 4 3:46 3:49 3:49 3:54 5
TYPE OF SOIL 3 V 9 see profile
TESTED BY M. Rifkin ALSO PRESENT Russ Marshall
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT/BEDROOM _____

Prel.

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 30940

P _____

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

DISTRICT 3rd.

DATE 6/30/80 9/18/80

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 James W. Dickey CHARLES WEBBLAND

ADDRESS 6154 Clearsmoke Court, Columbia, Md. 21045 PHONE 489-7148

PROPERTY LOCATION:

SUBDIVISION Dickey Farms LOT NO. # 22

ROAD AND DESCRIPTION Day Road

SIZE OF LOT 4.7 Acres TYPE BLDG. 3 or 4 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.

SIGNATURE OF APPLICANT _____

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/10/80 MORE TESTS ROCK & WATER 11/13/80
CALLED J. DICKEY NOT HOME 11/14/80 TOLD C WEBBLAND
LOT FAILED Q1D

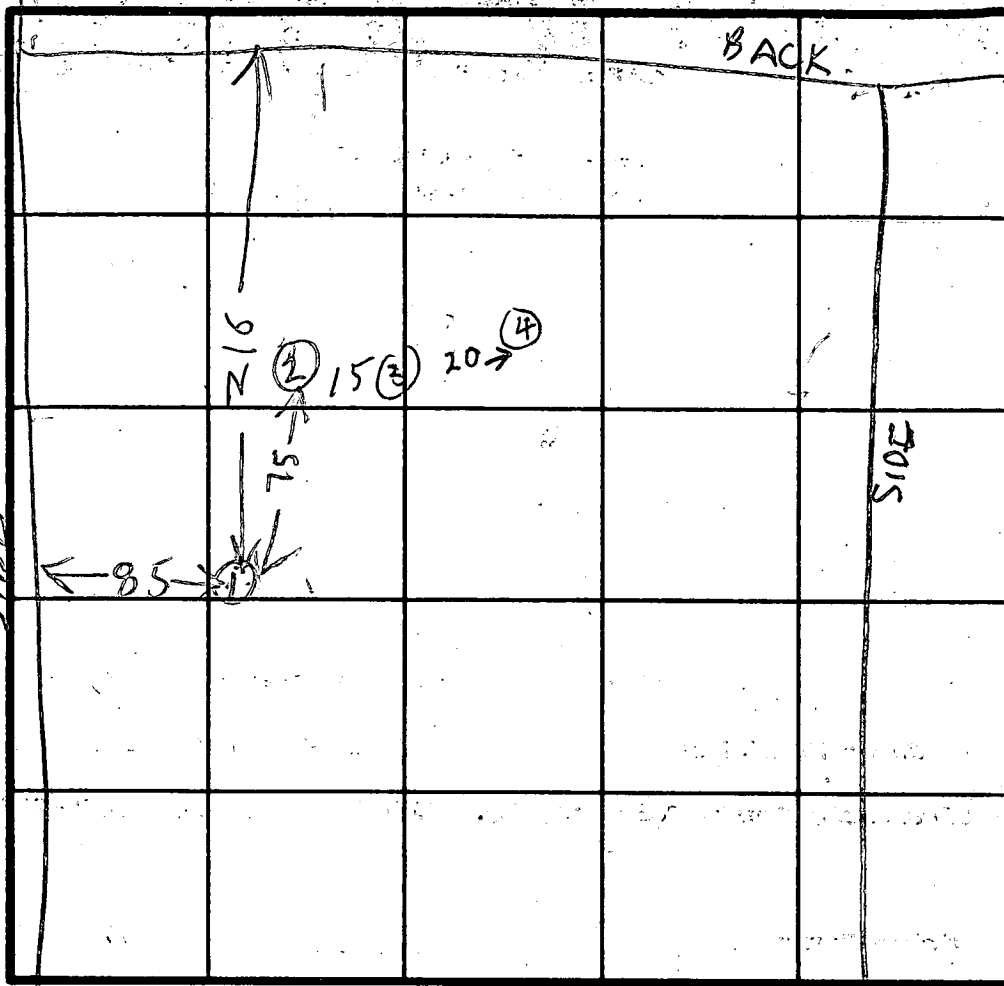
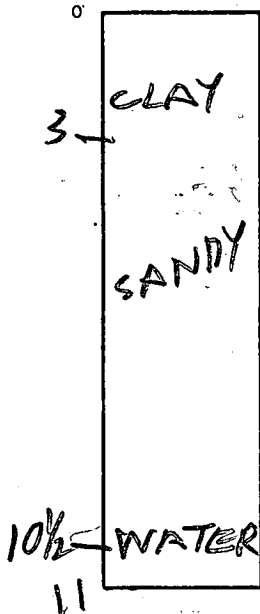
THIS IS NOT A PERMIT

Lot-22
A 30940

172
136

①

SOIL PROFILE



Hole Elevation
① Low
②③④ High
about same

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/10/80	1 V	11	TOP 3 FT CLAY WATER	CLAY BOT 8 FT SAND 10 1/2			
10/10/80	2 V	3	ROCK	'BOT TOM			
	3 V	3	"	"	"		
	4 V	3	"	"	"		

REMARKS

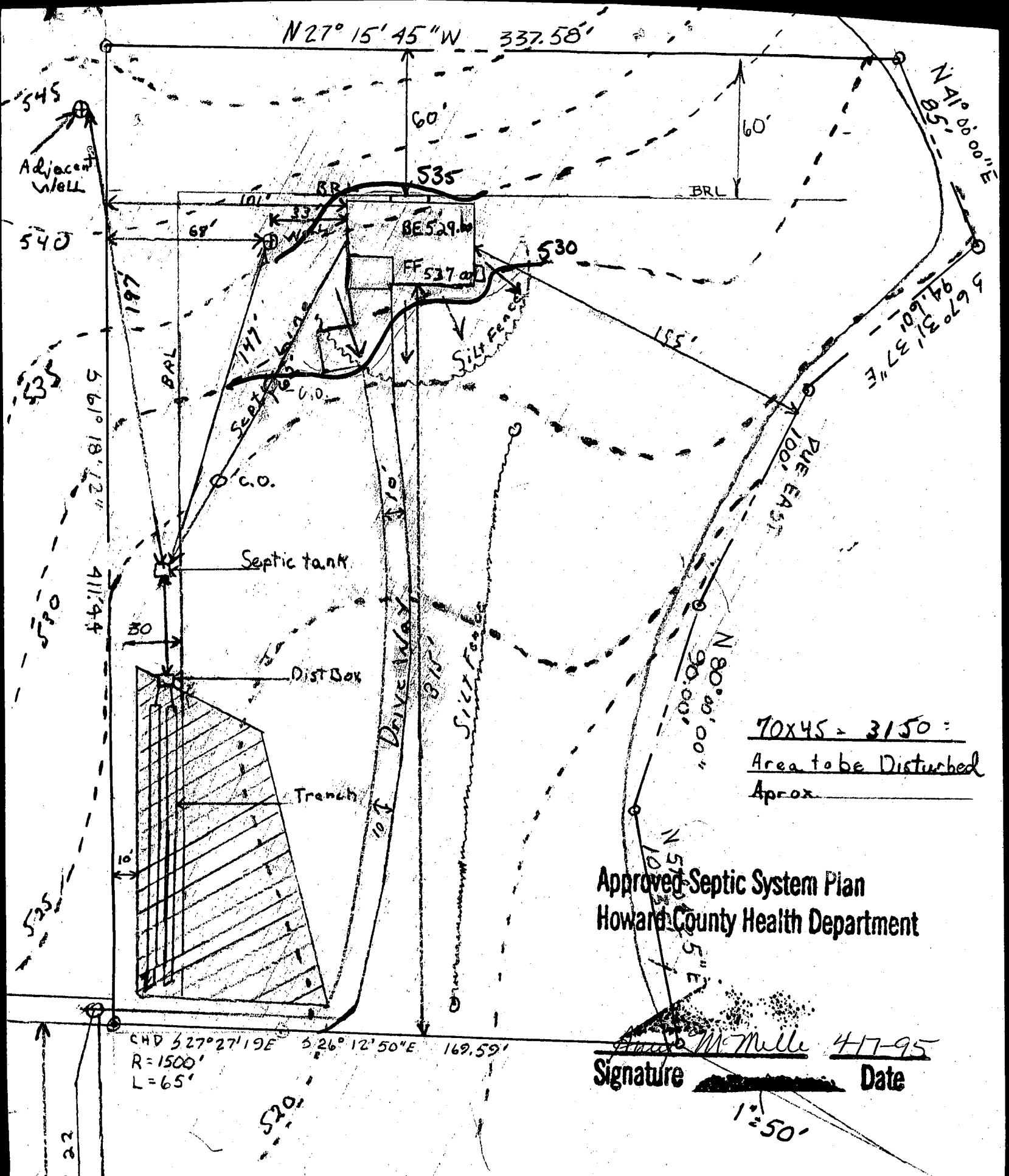
TYPE OF SOIL

TESTED BY

R. HODGES

ALSO PRESENT

O. KETTERMAN



70x45 = 3150 =
 Area to be Disturbed
 Approx

Approved Septic System Plan
 Howard County Health Department

Anne McMillen 4-7-95
 Signature Date

Entrance From Day Rd.
 Common Drive Way For Lot 22
 + Combined Lots 16 + 17

Lot 22 2,6103 AC
 Tax Map 9 Parcel 276

Septic Tank 200' From
 Adjacent Well

- FF Elev. 537.00
- BE Elev 529.00
- Inv Elev out of House 527.00
- Exist Elev at Septic Tank 524.00
- Inv Elev Into Septic Tank 522.00
- Inv Elev Out of Septic Tank 521.50
- Exist Elev at Dist. Box 523.00
- Inv Elev Into Dist Box 521.00
- Inv Elev Out of Dist Box Into Trench 520.50
- Exist Elev at Trench 523.00

- C.O. Clean out
- Well 30' From House
- Well Elev. 536.00

Date: April 7, 1995

C1 3520

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A 48720

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED 030695

Depth of Well 125 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-99-0328

OWNER Dickey last name Day Rd first name TOWN Sykesville SUBDIVISION DICKEY FARMS SECTION LOT 22

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes entries for Overburden, Soft Shale, Gray Rock, and water encountered at 95 & 105'.

GROUTING RECORD form including: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CEMENT CM, BENTONITE CLAY BC), NO. OF BAGS (10), NO. OF POUNDS (1000), GALLONS OF WATER (60), DEPTH OF GROUT SEAL (0 to 40 ft).

CASING RECORD form including: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter (6), Total depth (40).

OTHER CASING (if used) form with fields for diameter and depth.

SCREEN RECORD form including: screen type or open hole insert appropriate code below (ST, BR, HO, PL, OT), DEPTH (nearest ft.) table.

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. WELL HYDROFRACTURED (Y).

CIRCLE APPROPRIATE LETTER: A (WELL ABANDONED AND SEALED), 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...

DRILLERS IDENT NO. 399, DRILLERS SIGNATURE (Allan Cook)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

GRAVEL PACK form including: GRAVEL PACK, IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68, MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER).

TELESCOPE CASING, LOG INDICATOR, OTHER DATA form.

PUMPING TEST form including: HOURS PUMPED (3), PUMPING RATE (13 gal. per min. to nearest gal.), METHOD USED TO MEASURE PUMPING RATE (Submersible), WATER LEVEL (distance from land surface) BEFORE PUMPING (21), WHEN PUMPING (82), TYPE OF PUMP USED (S submersible).

PUMP INSTALLED form including: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (+ above, - 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). MAP to be supplied by Developer.