

8/30/00  
12:1 layout  
11/16/00  
11:00

# PERMIT

P 514207

## SEWAGE DISPOSAL SYSTEM

A 48818

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

ISSUE DATE 8/24/2000

410-313-2640

**INDEXED**

APPROVAL DATE 11/16/00

PUMPED SEPTIC SYSTEM PROPOSED

Fogle's Septic Clean, Inc.

sub: Ronnie Heaps cell 410-215-1330

IS PERMITTED TO INSTALL X ALTER

ADDRESS 580 Obrecht Road, Sykesville, MD 21784 PHONE 410-795-5670

SUBDIVISION Quarterfield LOT NUMBER 40 ADDRESS 11605 Quarterfield Drive

PROPERTY OWNER Dale Thompson Builders PROPERTY OWNER'S ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1500 GALLONS TOP SEAMED TANK REQUIRED

PUMP CHAMBER CAPACITY 1500 GALLONS TOP SEAMED PUMP CHAMBER

NUMBER OF BEDROOMS 5

SQUARE FEET PER BEDROOM 180

LINEAR FEET OF TRENCH REQUIRED 225

TRENCHES: Trenches to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 7.5 feet below original grade. 4.0 feet of stone below distribution box.

LOCATION: Place the distribution box 40 feet off the rear (113.59') lot line and 35 feet off the left (209.26') lot line as viewed from Quarterfield Drive. Run trenches on contour toward the left lot line.

NOTES: - Septic pump detail to be provided by installer prior to issuance of septic perm. - Pump performance test is necessary prior to Health Department approval of pump septic system. 3/1/00 O.Z. (BP)

PLANS APPROVED Mark E. Rifkin/Ronald J. Pinkley REVISED \_\_\_\_\_ DATE 1/10/2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

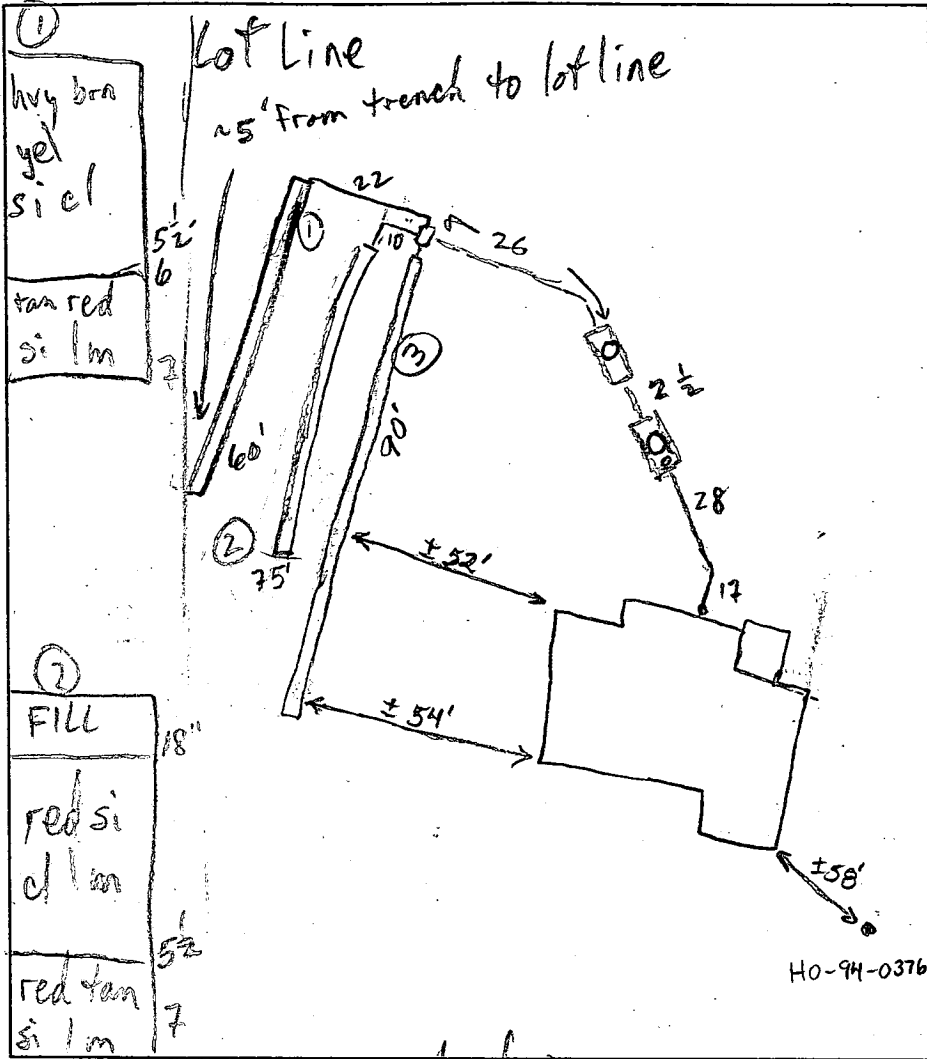
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

48818

NOT TO SCALE



**TRENCH DATA**

TRENCH WIDTH 2  
 TRENCH INLET DEPTH 

1	2	3
3.5	4.5	3.5

  
 TRENCH BOTTOM DEPTH 

1	2	3
7.5	8.0	7.5

  
 DEPTH OF STONE 4  
 NUMBER OF TRENCHES 3  
 TOTAL TRENCH LENGTH 225'  
 ABSORBENT AREA 900 sq ft  
 DISTRIBUTION BOX LEVEL OK  
 BAFFLE IN DISTRIBUTION BOX

**SEPTIC TANK DATA**

SEPTIC TANK 1500 TS GALLONS  
 MANHOLE RISER   
 6 INCH INSPECTION PORT

**PUMP CHAMBER DATA**

PUMP CHAMBER GALLONS 1500 TS  
 MANHOLE RISER   
 ALARM \_\_\_\_\_  
 PUMP PERFORMANCE TEST \_\_\_\_\_

PRE-CONSTRUCTION INSPECTION:

8/30/00 70' DEEP TRENCH INSTALLED. - CLAY DEEPER THAN ANTICIPATED, WALL CHECK NOT TO SCALE, SEPTIC AREA/LOT LINE NOT STAKED.

INSPECTION COMMENTS:

STOP WORK ORDER ISSUED. CONTRACTOR & PRINCIPAL TO SCHEDULE SITE VISIT WITH SANITARIAN MAX RIFKIN TO RESOLVE ISSUES.

9/5/00 EST 1 1/2' CUT @ REAR OF SRA, 1 1/2' FILL @ FRONT OF SRA. INSTALL HIGH TRENCH 5-9' (MR) 9/5/00 O.K. to cover everything. Final approval pending pump and alarm performance. (BB)  
11/16/00 PUMP & ALARM OK (MR)

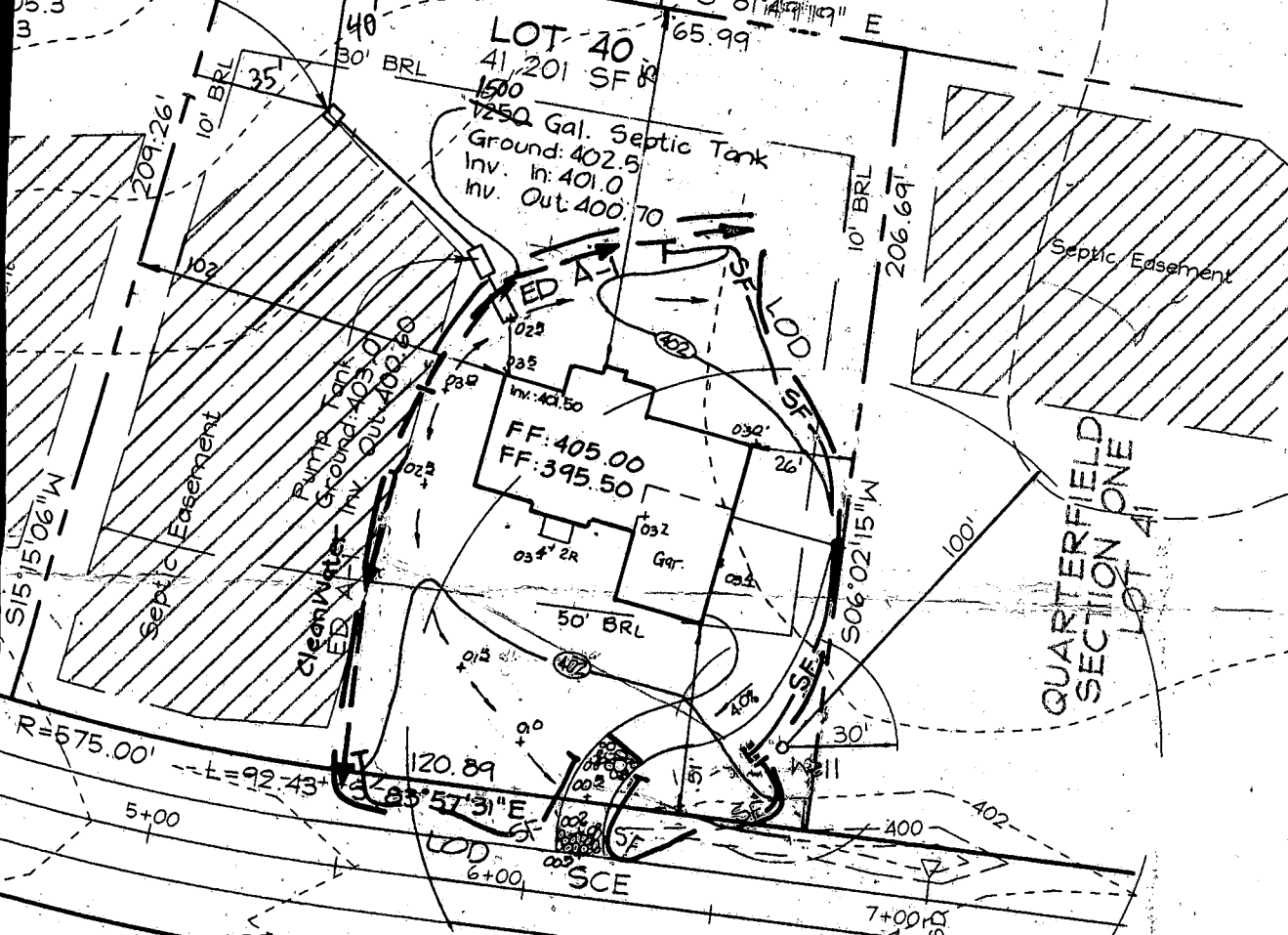
INSPECTOR M. Rifkin

DATE SYSTEM APPROVED 11/16/00

HENRY L. MAYER  
P. 68

LAWRENCE R. HYMAN  
P. 111

tion Box  
05.3  
3



Total linear feet of trench  
 QUARTERFIELD required 225 feet  
 (PUBLIC ROAD)  
 Width of trench (es) 2 feet  
 Depth of trench (es) 7 1/2 feet  
 Depth of stone required below  
 inlet pipe 4 ft

Approved Septic System Plan  
 Howard County Health Department

*Frank Pinkley*  
 Signature \_\_\_\_\_ Date 1/10/00

NO.	1	Fliped House	REVISION

LOT PLAN

# APPLICATION

PERCOLATION TESTING

A 48818

P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_

DATE 1/7/93

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 Joseph M. Zoller, III DALE Thompson Builders  
11696 Carroll Mill Road  
ADDRESS Ellicott City, Maryland 21043 PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER SDC Group, Inc.  
ADDRESS P.O. Box 417, Ellicott City, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. 2  
(11605 Quaker Field Road)  
ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road  
intersection.

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family - 5 Bed  
(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.

SDC Group Inc.  
By: [Signature]  
(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

A48818

COUNTY #

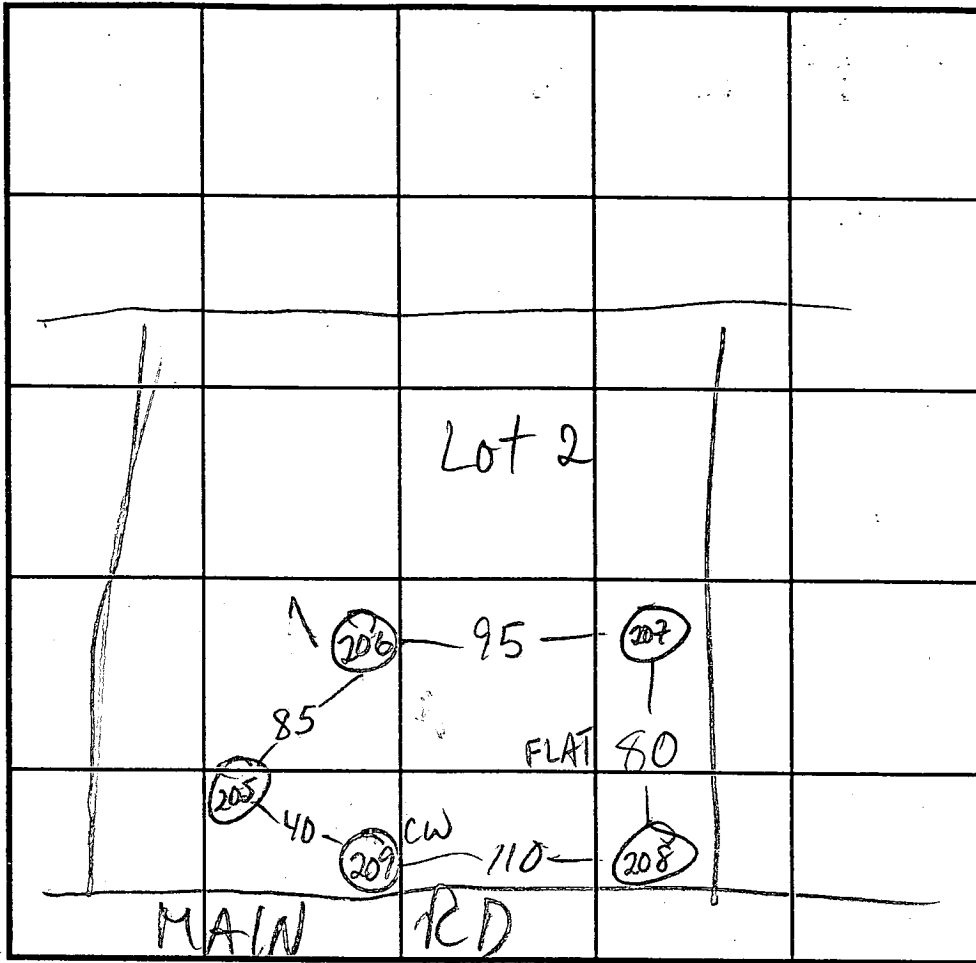
SOIL PROFILE  
205-209

red  
brn  
cl 1m

tan  
org  
si sa  
1m

520 frags

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/20/94	205	4 1/2	10:19:45	10:20:50	10:20:50	10:24	3+
	205	11'9"					
	206	4'2"	10:24	10:27	10:27	10:30	3
	206	12'2"					
	207	4 1/2	10:35	10:38	10:38	10:41	3
	207	12					
	208	4'3"	10:37	10:40	10:40	10:44	4
	208	12					
7/19/94	209	4	4:59	5:05	5:05	5:15	10
	209	12					

REMARKS

TYPE OF SOIL

TESTED BY M. Rifkin

ALSO PRESENT Hatfield crew

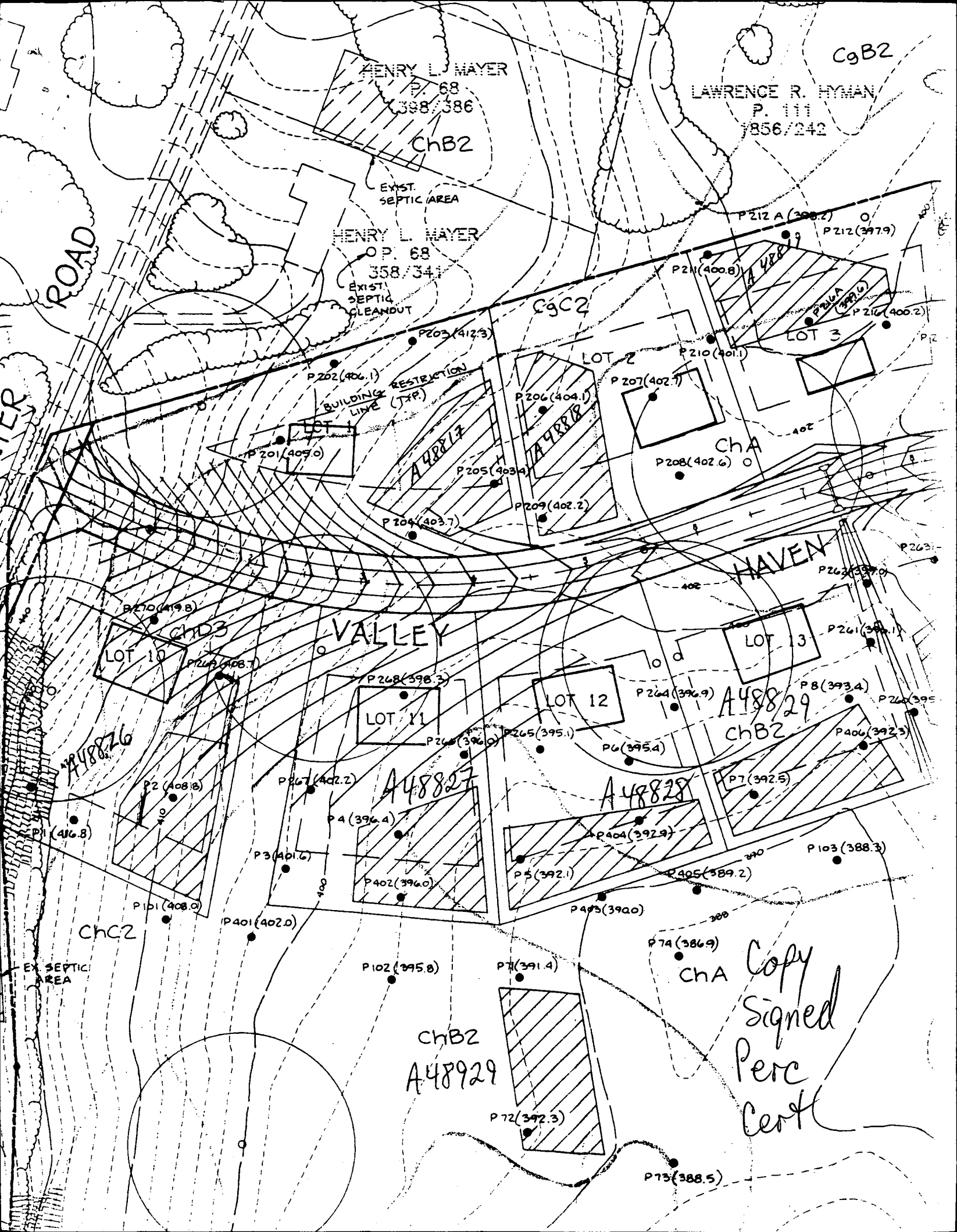
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5

TRENCH WIDTH 2

INLET DEPTH 3 1/2

MAXIMUM BOTTOM DEPTH 7 1/2

SQ. FT./BEDROOM 180



CgB2

LAWRENCE R. HYMAN  
P. 111  
3856/242

HENRY L. MAYER  
P. 68  
338/386  
ChB2

HENRY L. MAYER  
O.P. 68  
338/341  
EXIST. SEPTIC CLEANDUT

ROAD

CgC2

ChA

BUILDING RESTRICTION  
LINE (TYP.)

HAVEN

VALLEY

ChD3

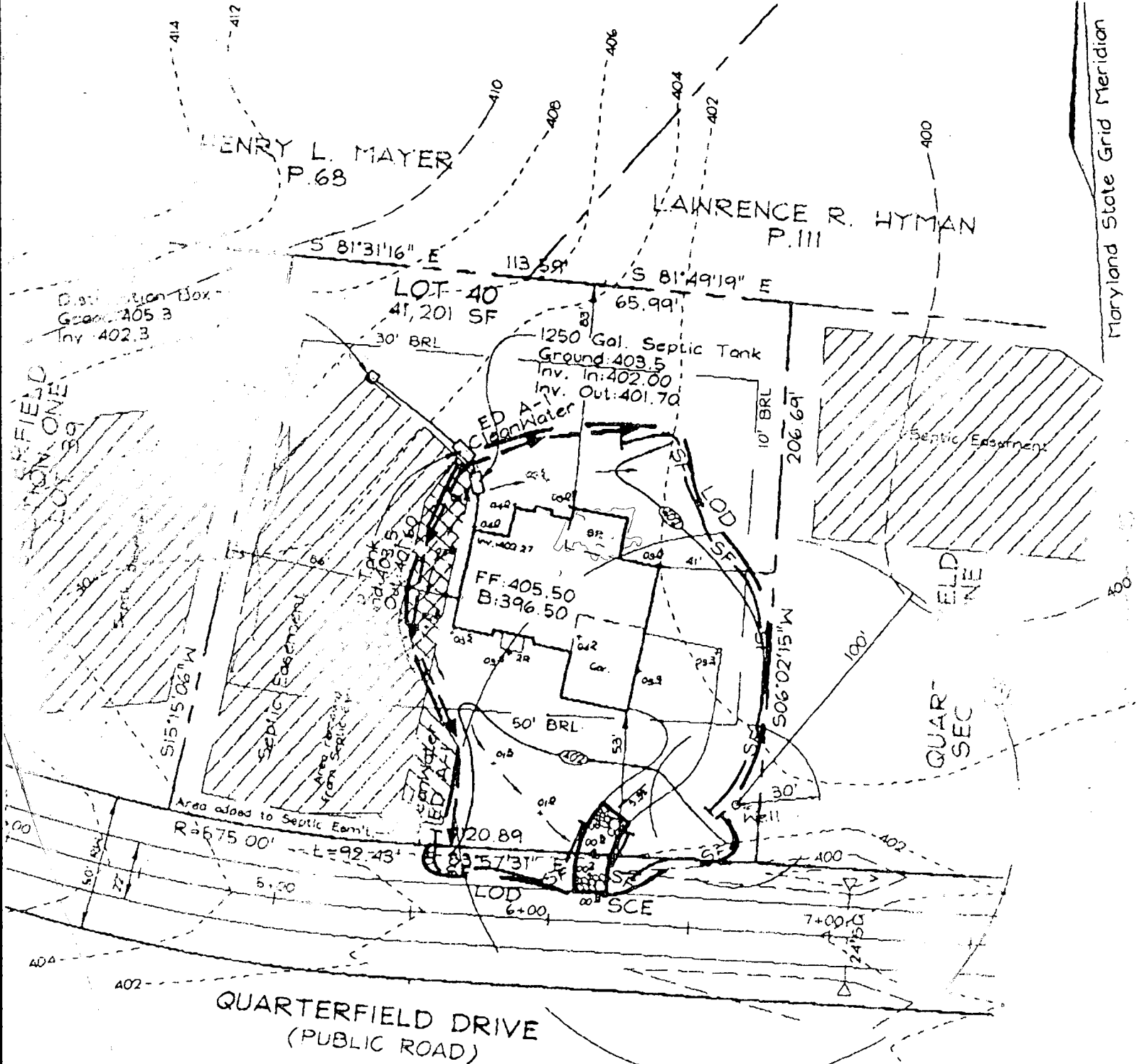
chB2

ChC2

ChB2  
A48929

Copy  
Signed  
Perc  
Cert

EX. SEPTIC  
AREA



B00121892

REVISED

1" = 50'

SUNROOM OK

Date: 5-23-00

MR

Comments: Relocated sunroom 6/10/00

Post-It® Fax Note 7671		Date: 5/5	# of pages: 1
To: DALE	From: CHRIS		
Co./Dept	Co.		
Phone #	Phone # 410 461-5828		
Fax #	Fax #		

C1 3577

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 A48818

SI/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received grid

DATE WELL COMPLETED 042095

Depth of Well 420 (TO NEAREST FOOT)

PERMIT NO. HO-94-0376

OWNER SDC Group last name Valley Haven Dr first name TOWN West Friendship SUBDIVISION ZOLLER PROP SECTION LOT 2

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes entries for SAND Stone and GRAY mica Rock.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY, NO. OF BAGS 6, NO. OF POUNDS 364, GALLONS OF WATER 36, DEPTH OF GROUT SEAL from 0 to 19 ft.

CASING RECORD: casing types insert appropriate code below, MAIN CASING TYPE ST, Nominal diameter top (main) casing 6, Total depth of main casing 21.

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

SCREEN RECORD: screen type or open hole insert appropriate code below, SCREEN RECORD ST BR HO, PL OT, SLOT SIZE 1, 2, 3, DIAMETER OF SCREEN 19, DEPTH (nearest ft.) 420.

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

CIRCLE APPROPRIATE LETTER: A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED, E ELECTRIC LOG OBTAINED, P TEST WELL CONVERTED TO PRODUCTION WELL

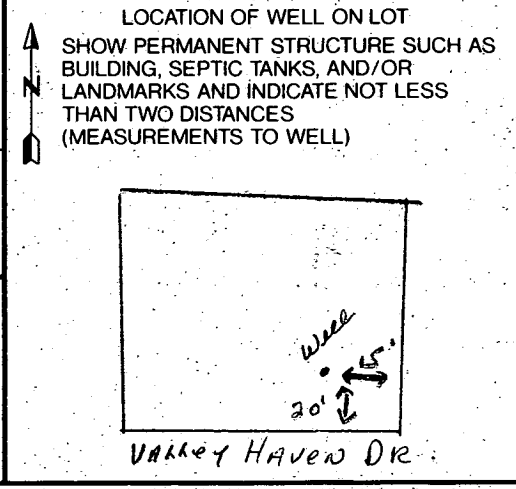
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 24, DRILLERS SIGNATURE Larry Mays, 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, MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER), T (E.R.O.S.), W Q, TELESCOPE CASING, LOG INDICATOR, OTHER DATA

PUMPING TEST: HOURS PUMPED (nearest hour) 6, PUMPING RATE (gal. per min. to nearest gal.) 103, METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL (distance from land surface) BEFORE PUMPING 40, WHEN PUMPING 380, TYPE OF PUMP USED (for test) 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, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT (circle appropriate box and enter casing height) above below, LAND SURFACE 2 (nearest foot)



B 1 4417  
SEQUENCE NO. (DP USE ONLY)  
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

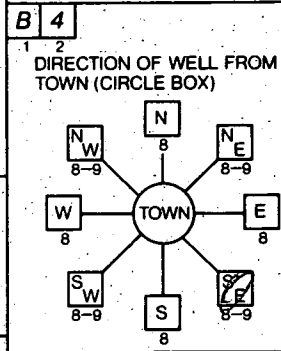
STATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL  
please print or type

STATE PERMIT NUMBER  
40-94-0376  
fill in this form completely

Date Received (APA) 020995  
OWNER INFORMATION  
SDC GROUP INC  
PO BOX 417  
ELKICOTT CITY MD 21041

B 3 LOCATION OF WELL  
Howard  
8 COUNTY  
ZOLLER PROPERTIES  
23 SUBDIVISION  
SECTION 44 46 LOT 2 48 50  
West Friendship  
52 NEAREST TOWN  
MILES FROM TOWN (enter 0 if in town) 4 MI

DRILLER INFORMATION  
Joseph E. Mayne  
Joseph E. Mayne Well Drilling  
5512 Ridge Rd. Mt. Airy, Md. 21771  
Joseph E. Mayne 2/8/95



B 4 Valley Haven Drive  
NEAR WHAT ROAD  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) 20  
DISTANCE FROM ROAD  
ENTER FT OR MI FT  
TAX MAP: \_\_\_\_\_ BLK: \_\_\_\_\_ PARCEL \_\_\_\_\_

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

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
Howard A 48818  
COUNTY NAME COUNTY NO.  
STATE SIGNATURE DATE ISSUED 0330295 Mark E. Kilkin 3/2/96  
NORTH GRID 523000 EAST GRID 0823000

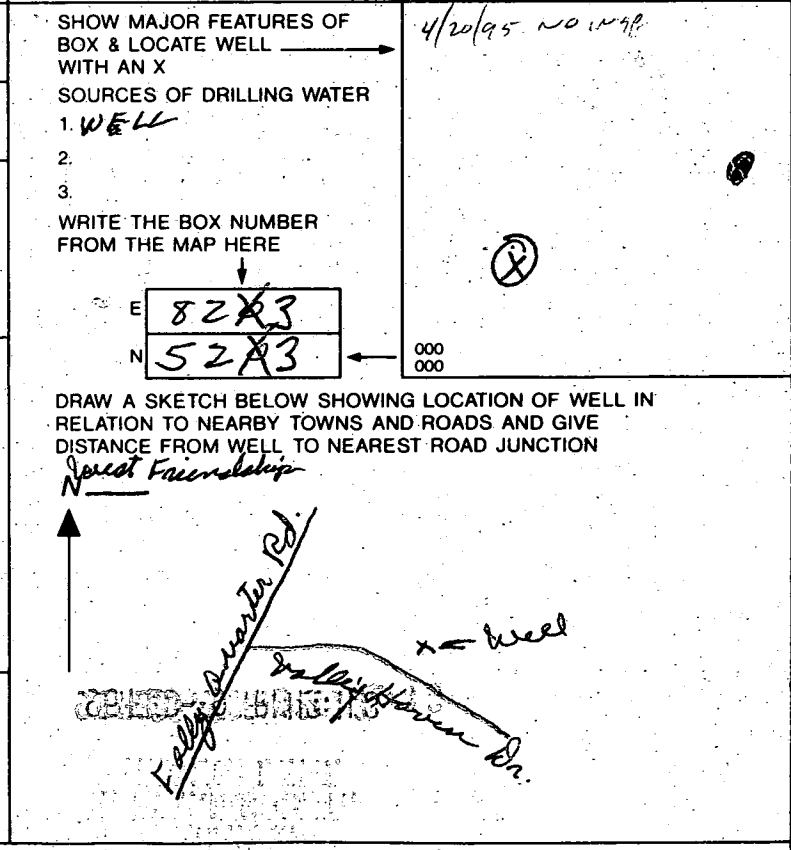
APPROXIMATE DEPTH OF WELL 280 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

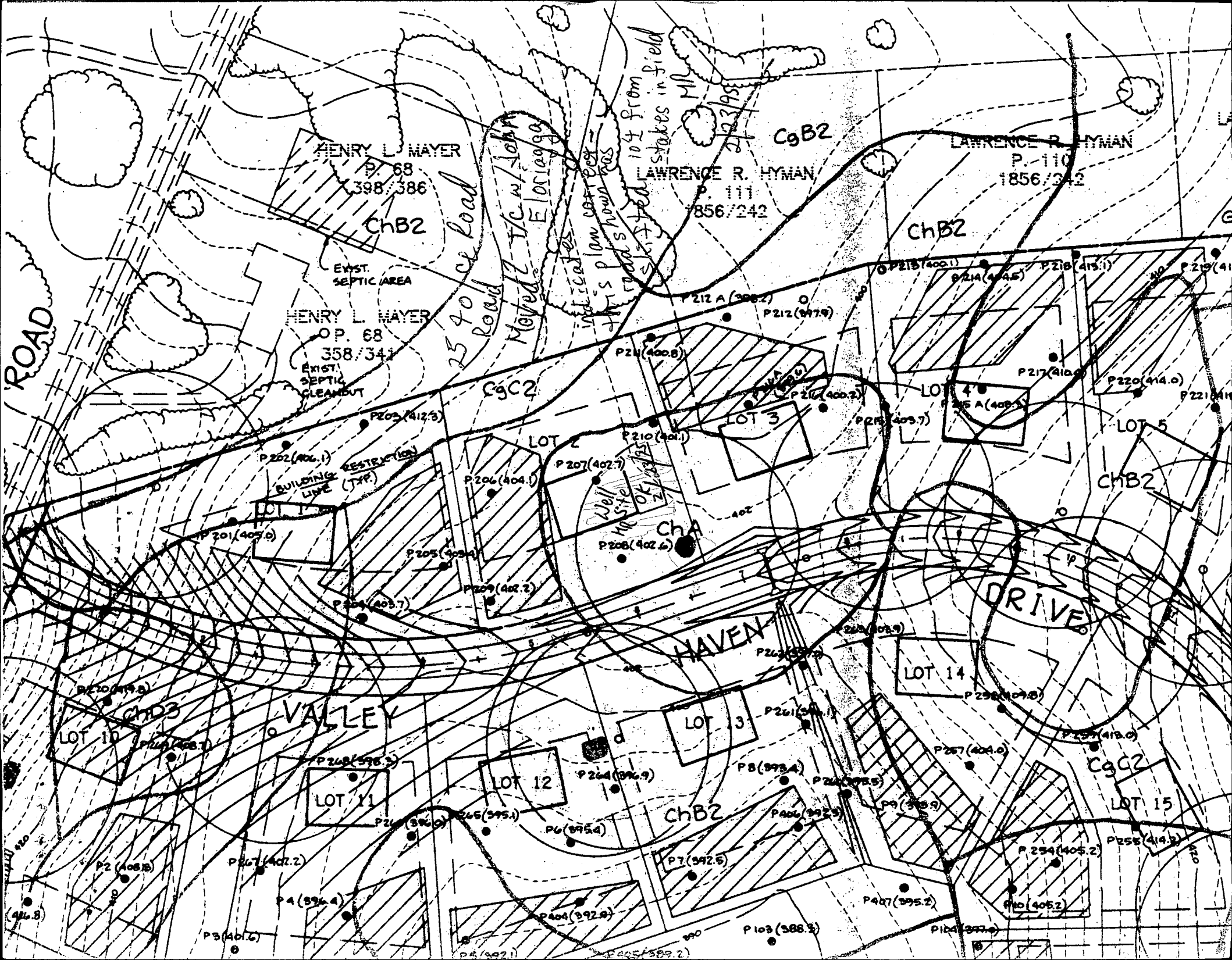
METHOD OF DRILLING (circle one)  
BORED (or Augered) JETTED Jetted & DRIVEN  
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)  
CABLE REVerse-ROTary Drive-POINT  
other \_\_\_\_\_

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)  
N THIS WELL WILL NOT REPLACE AN EXISTING WELL  
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED  
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS  
D 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)  
APPROX. PERMIT NUMBER GAP  
FORCE MR PERMIT No. 40-94-0376



SPECIAL CONDITIONS  
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =  
COUNTY



HENRY L. MAYER  
P. 68  
398/386

LAWRENCE R. HYMAN  
P. 111  
1856/242

LAWRENCE R. HYMAN  
P. 110  
1856/242

ChB2

CgB2

ChB2

HENRY L. MAYER  
P. 68  
358/341  
EXIST. SEPTIC CLEANOUT

CgC2

LOT 3

LOT 4

LOT 5

LOT 1  
RESTRICTION  
BUILDING LINE (TYP.)

LOT 2

ChA

ChB2

DRIVE

HAVEN

LOT 14

VALLEY

LOT 10

ChD3

LOT 11

LOT 12

LOT 13

ChB2

CgC2

LOT 15

P3(401.6)

P4(396.4)

P7(392.5)

P103(388.3)

P104(397.9)

P110(405.2)

P125(414.5)

P167(407.2)

P2(408.8)

P4(392.1)

P404(392.9)

P405(399.2)

P406(392.3)

P407(395.2)

P408(395.9)

P409(395.4)

P410(405.2)

P411(395.5)

P412(405.2)

P413(405.2)

P210(414.8)

P211(408.7)

P240(395.3)

P241(396.0)

P242(396.9)

P243(395.4)

P244(396.9)

P245(395.1)

P246(395.7)

P247(395.9)

P248(395.9)

P249(395.9)

P250(395.9)

P251(395.9)

P201(405.0)

P202(406.1)

P203(412.5)

P204(405.7)

P205(405.4)

P206(404.1)

P207(402.7)

P208(402.4)

P209(402.2)

P210(401.1)

P211(400.8)

P212(400.2)

EXIST. SEPTIC AREA

EXIST. SEPTIC CLEANOUT

WELL SITE

25 40' ce road  
Mowed 2 TC w/ John E. Dorigo  
This plan correct - indicates road shown as started 104 from stakes in field

104 from stakes in field

104 from stakes in field

ROAD

DRIVE