

8/21/98
CO. Open Trench
Early PH
B-24-98
Co. open trench
12 of Jan.
10-2-98
meet installer
2/23/99 AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510617

A 48831

DISTRICT _____

DATE 8-13-98

DATE SYSTEM APPROVED 2/23/99

INSPECTOR CW

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL ALTER _____

ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 PHONE 410-795-5674

SUBDIVISION Quarterfield LOT 15 ROAD 11624 Quarterfield Drive

PROPERTY OWNER Dale Thompson

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS ***SEPTIC SYSTEM TO BE INSTALLED PRIOR TO BUILDING PERMIT APPROVAL.***

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 190 feet down the left lot line and 90 feet off this same lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap grade or above on septic tank. OK/MP

PLANS APPROVED BY Mark Rifkin DATE 05/15/96

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

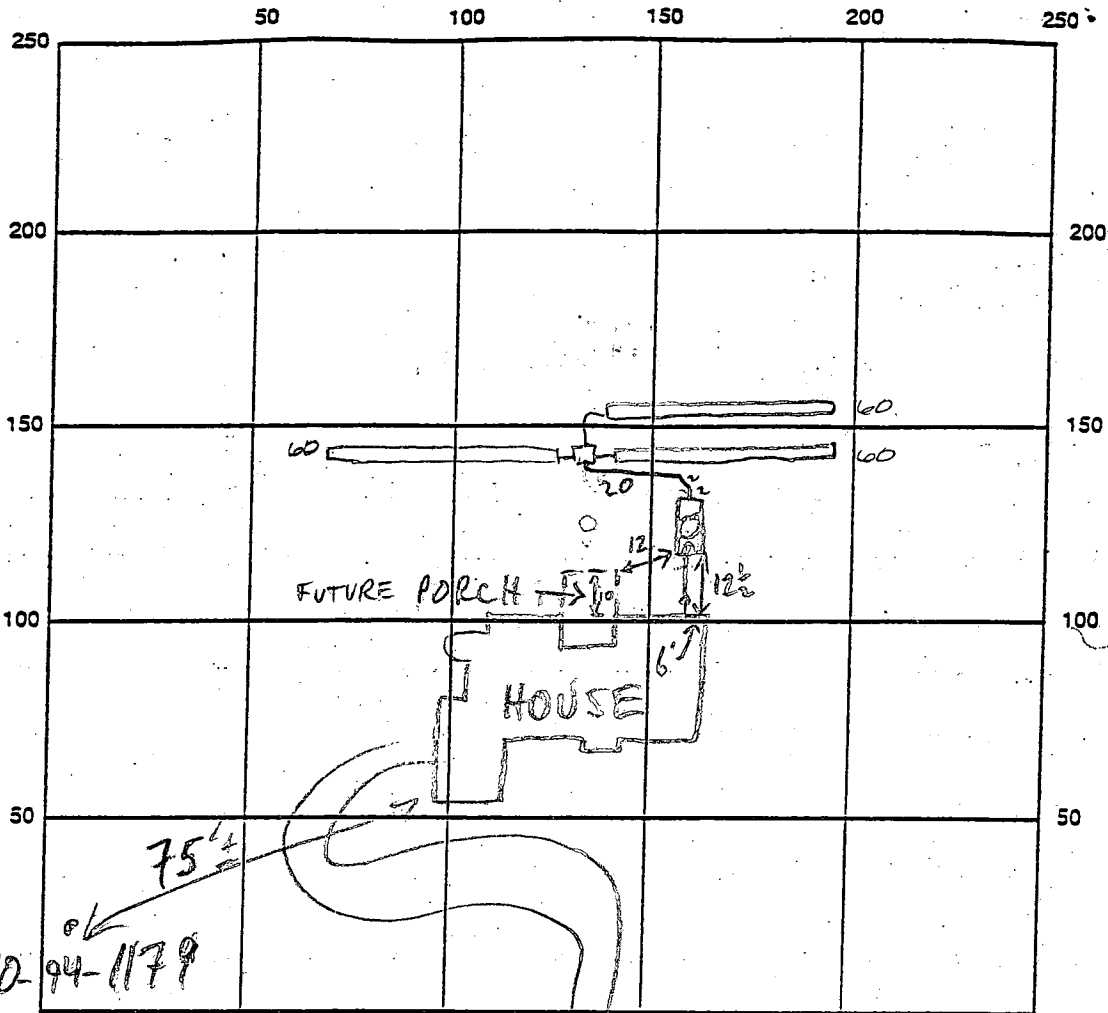
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

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

15887



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK 1250 gal CLEANOUTS manhole
 DISTRIBUTION BOX LEVEL OK bath is in
 DRAIN FIELD/TITLE DEPTH 8.0 FT. TRENCH WIDTH 2.0 FT. INLET DEPTH 4.0 FT.
 EFFECTIVE GRAVEL DEPTH 4.0 FT. TOTAL LENGTH 180 FT. 180
4
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 4.0 FT.
 ABSORBENT AREA — SQ. FT.

REMARKS: 8/21/98 - NO Inspection - site Not Ready for MR (Had to remove dirt stock pile from site)
8/24/98 Because there is 3.0' of fill over top 2 trenches & 1 1/2 - 2' over the
bottom trenches - trenches were installed 8' below original grade - not
below existing grade - OK to cover - house connection needed &
1/6/99 #1 D.B. LOCATED - S.T. LOC. TO BE ADJUSTED 10' OFF FUTURE PORCH (MR)
1/6/99 #2 S.T. OK TO COVER; HOLD FOR HOUSE CONN. (MR) - COMPLETE 2/23/99 CW

DATE SYSTEM APPROVED 2/23/99 INSPECTOR C. Williams

APPLICATION

PERCOLATION TESTING

A 31
408 MR
P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____
DATE 4/7/93

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. 20 15

ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road intersection. (11624 Quarterfield Drive)

TAX MAP 23 PARCEL # 8,82 & 101
SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family - 4 Bm
(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: Ash Pugh VP
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING PERC OK - HOLD FOR PLAT MR 7/22/93

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

A48849

COUNTY #

Lot 33

SOIL PROFILE

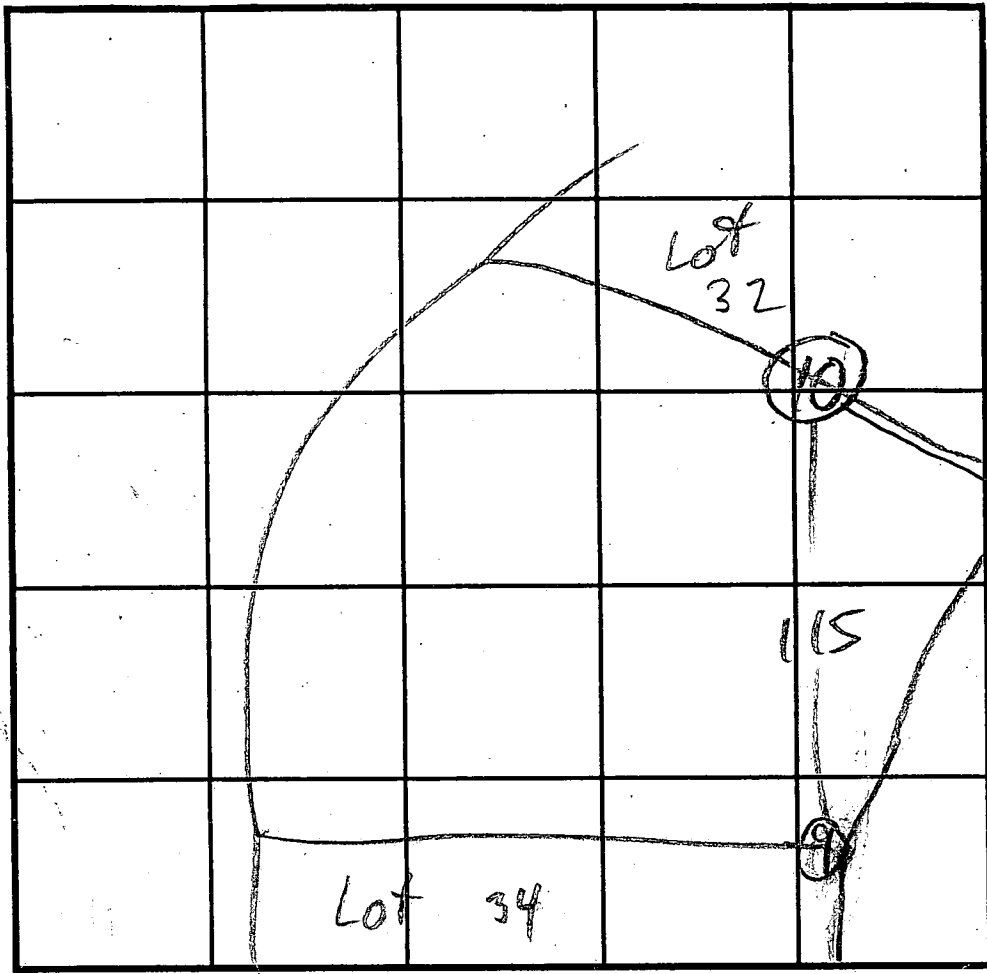
0'
 (10)
 brn. silty cl mica lm
 4'
 tan sa lm
 10% frags
 12'

(104)

4-4 1/2'
 org brn silty cl lm
 tan sa lm
 10% frags

(9)

13 1/2'
 2 1/2'
 4 1/2'
 12'
 org brn silty cl lm
 40-50% quartz cr cl lm
 beige tan sa lm
 10% frags



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
2/2/93	105	4 1/2	3:00	3:04	3:04	3:19	15	
	10 M	8	3:02	3:06	3:06	3:10	4	
	10 V	12						
	9 S	5	2:44	2:46	2:46	2:49	3	
	9 M	8 1/2	2:50:30	2:51:30	2:51:30	2:53:30	2	
	9 V	12						
2/10/93	104 S	5 1/2	3:37:00	3:39:30	3:39:30	3:48:00	8 1/2 min	
	104 M	9	3:38:00	3:39:15	3:39:15	3:42:15	3 min	
	104 V	13 1/2	see profile					

REMARKS _____

TYPE OF SOIL _____

TESTED BY M. Ripkin ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 6 TRENCH WIDTH 2

INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 8 SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A _____

P _____

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

DISTRICT _____

DATE _____

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
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. 2015

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
(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

COUNTY #

SOIL PROFILE

254

tan sa
cl lm

3' tan sa
lm

15-20%

frags

259

red
orge
lm

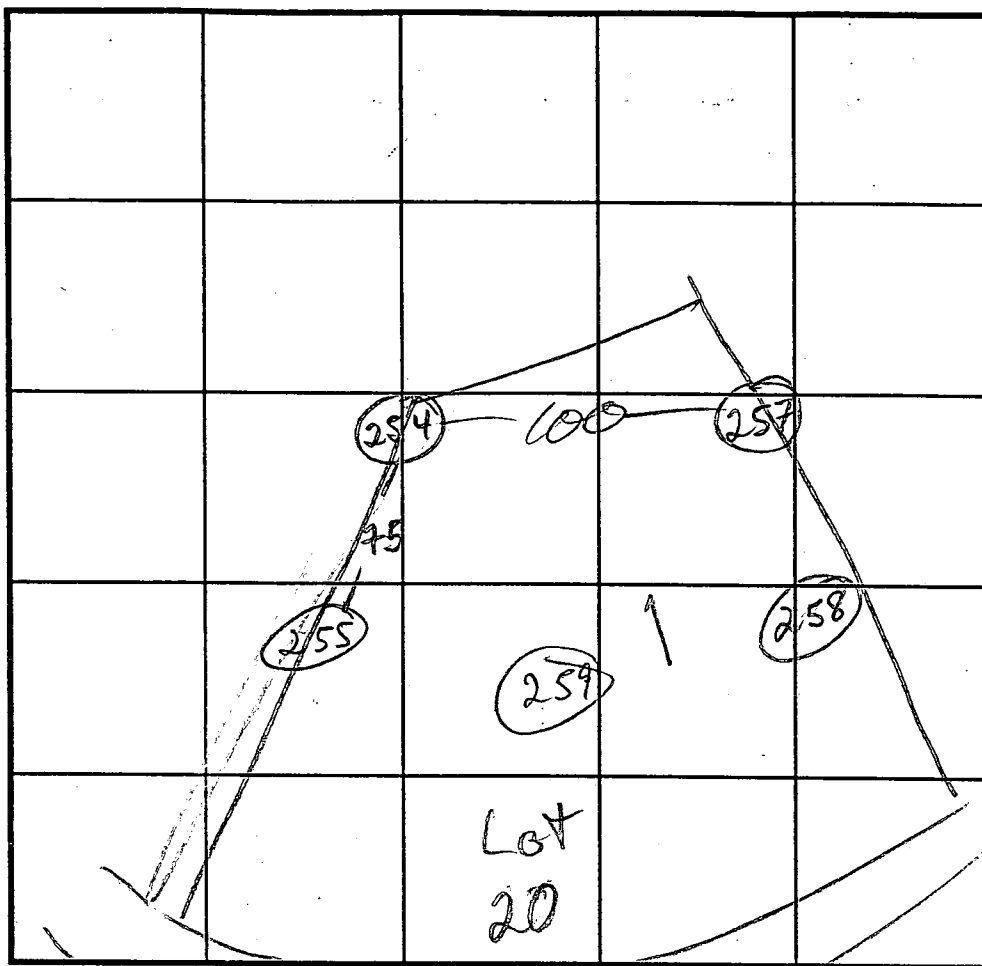
4' mica lam
thin vein
horiz. rock
vein @
6-7'

not
problematic
per CW

255

beige
purple
si.
mica lm

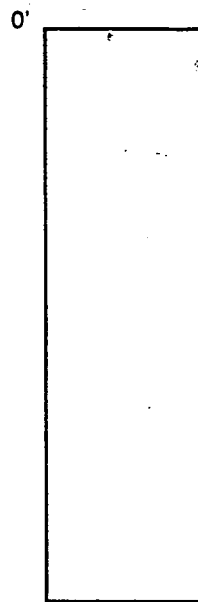
minor
rock
pocket
6'-9'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

MAIN RD

SOIL PROFILE



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/26/94	254 S	4 1/2	1:31	1:31:20	1:31:20	1:35	4
	254 V	12					
7/19/94	259 S	4 1/2	4:19	4:25	4:25	4:35	10
	259 V	12 1/2	4 1/2 - 12 1/2	VIS	OK	per CW	
7/19/94	255	5 12 1/2	4:04	4:06	4:06	4:09	3 per CW
	257	no	test	notes	located		
7/19/94	258	5	4:26	4:30	4:30	4:34	4
	258	12 1/2	VIS OK	4 1/2 - 12 1/2		per CW	

REMARKS

TYPE OF SOIL

TESTED BY

M.R. CW

ALSO PRESENT

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

USE 254-255-259-9-10-257

TRENCH WIDTH

2'

INLET DEPTH

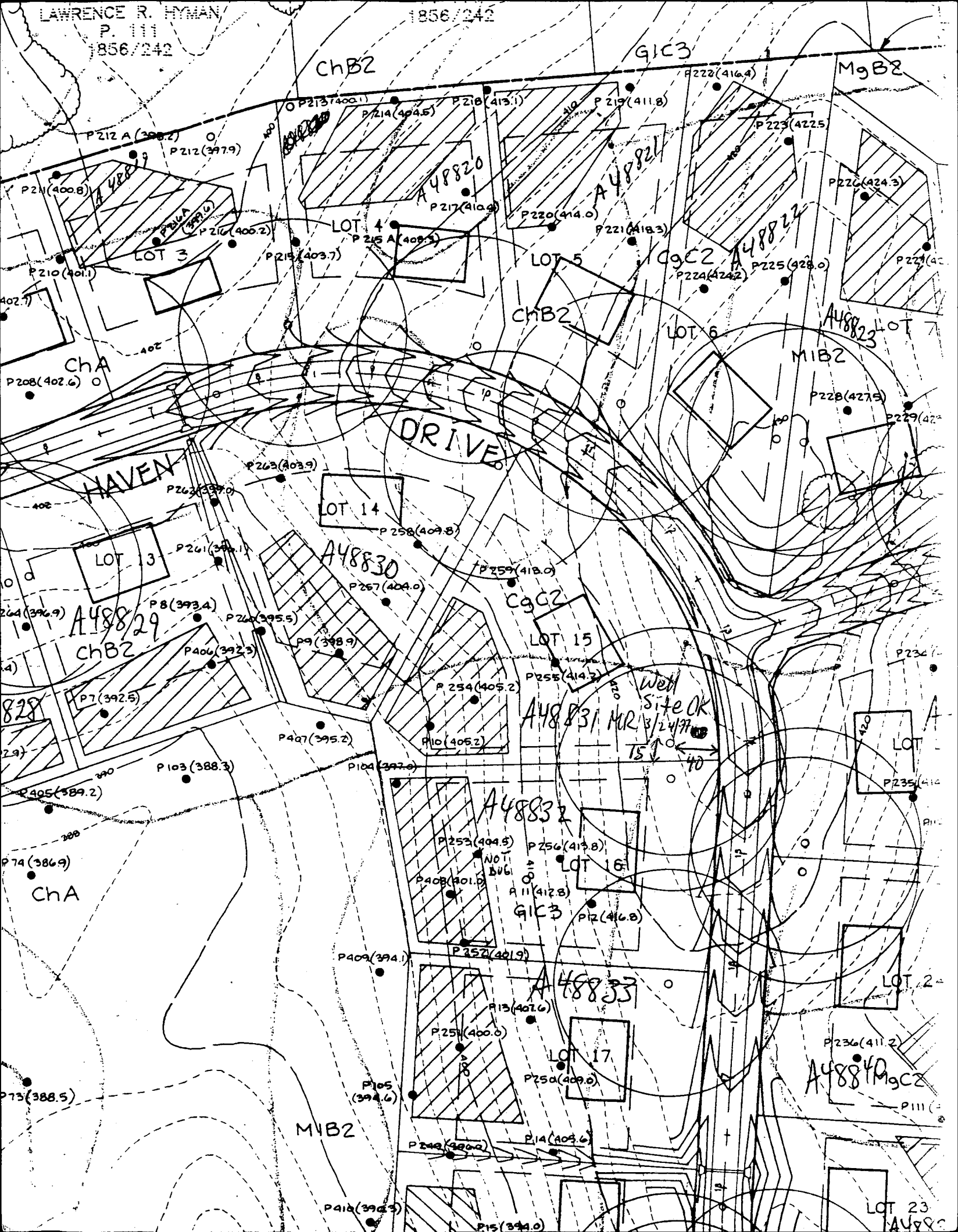
4'

MAXIMUM BOTTOM DEPTH

8'

SQ. FT/BEDROOM

180



Septic System Plan
Howard County Health Department

Shawn McMillan 8/19/98
Signature Date

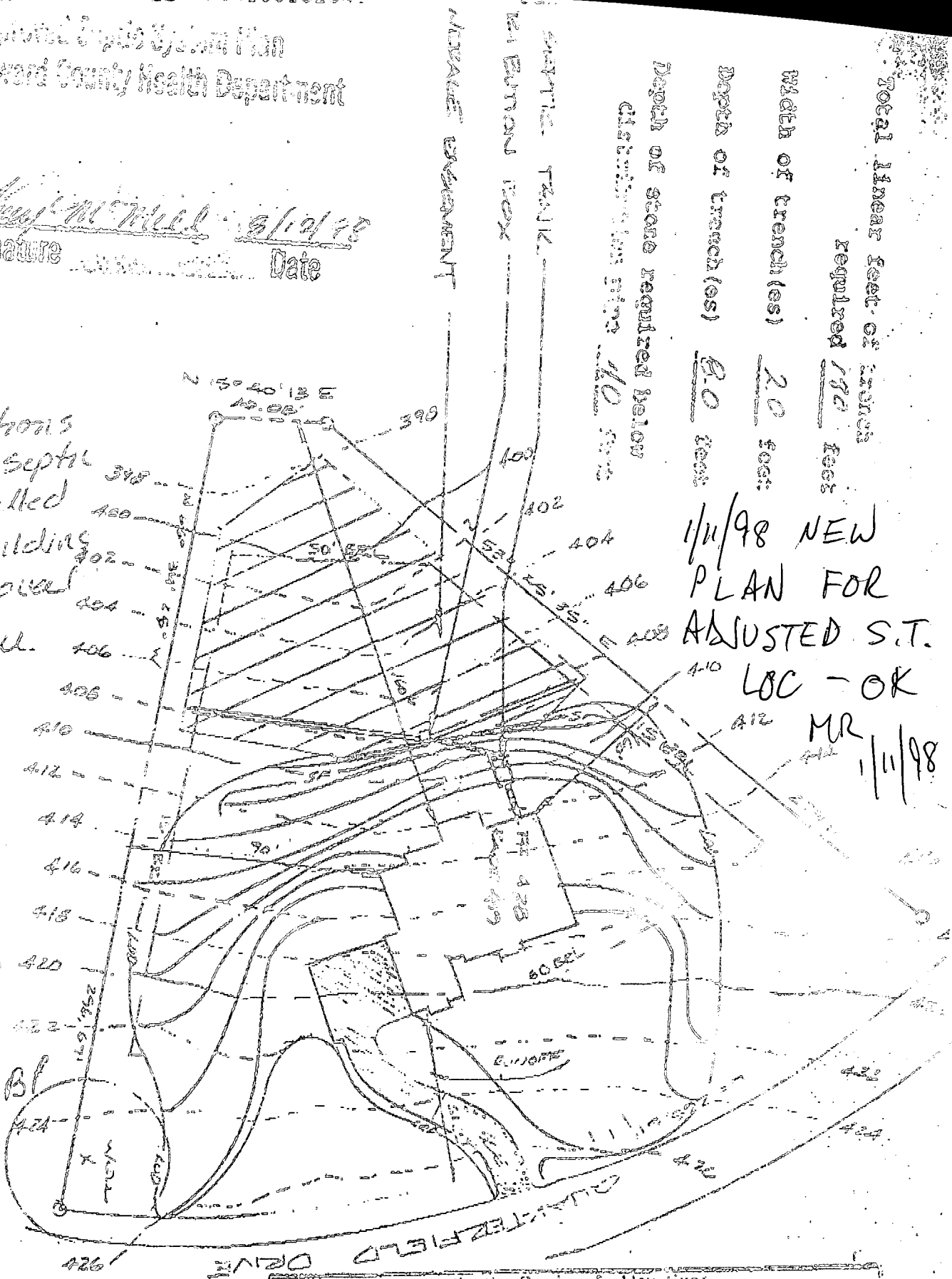
Total linear feet of trench required 130 feet
Width of trench(es) 20 feet
Depth of trench(es) 8.0 feet
Depth of stone required below distribution line 110 feet

1/11/98 NEW
PLAN FOR
ADJUSTED S.T.
LOC - OK
MR 1/11/98

8/12/98
No elevations
provided - septic
to be installed
prior to building
permit approval

BP000114429
Approved
8/15/98

THIS PLAN
IDENTICAL TO
OFFICIAL
SITE PLAN
COMPANYING BP



GRAVITY
SERVICE TO
INSTALLED SYS.
DRIVING

Septic Grades & Elevations		
	Invert	Grade
INVERT @ HOUSE	417.0	422.0
INVERT @ ENTRANCE TO TANK	411.25	
INVERT @ EXIT TO TANK	411.0	
INVERT @ DISTRIBUTION BOX	406.0	408

C 1 6078 SEQUENCE NO. (MDE USE ONLY)

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 A48831

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

ST/CO USE ONLY DATE RECEIVED MM DD YY

DATE WELL COMPLETED MM DD YY 6 23 97 Depth of Well 22 245 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1179

OWNER Thompson last name DATE Charterfield first name TOWN W Friendship SUBDIVISION QUARTERFIELD SECTION LOT 15

WELL LOG Not required for driven wells

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), check if water bearing. Rows: Sand (0-68), Gray Mica Rock (68-245)

GROUTING RECORD (Yes/No) WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL (Circle one) CEMENT CM BENTONITE CLAY BC NO. OF BAGS 15 NO. OF POUNDS 1410 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 to 60

CASING RECORD casing types insert appropriate code below ST STEEL CO CONCRETE PL PLASTIC OT OTHER

MAIN CASING TYPE ST Nominal diameter top (main) casing (nearest inch)! 6 Total depth of main casing (nearest foot) 72

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

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

DEPTH (nearest ft.) HO 70 245

SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

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 70 72 74 75 76 TELESCOPE CASING LOG INDICATOR OTHER DATA

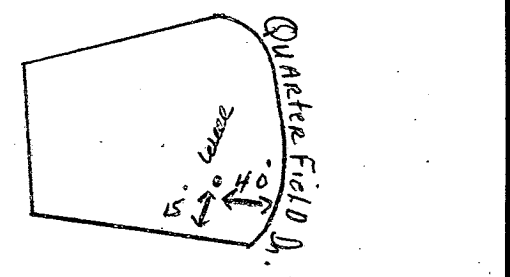
PUMPING TEST

HOURS PUMPED (nearest hour) 3/8 9 PUMPING RATE (gal. per min.) 12 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 63 ft WHEN PUMPING 111 ft TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (YES or NO) YES IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29 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 - below 2 (nearest foot)

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)



NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED YES Y NO N

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 LIC. NO. 1 MSD024 DRILLERS SIGNATURE Joseph L. Mayne (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 MSD027 DRILLERS SIGNATURE Romy Mayne

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

B 1 **1920** SEQUENCE NO. (MDE USE ONLY)

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

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-94-1179
fill in this form completely

Date Received (APA) **020/196**

OWNER INFORMATION

HAOMASON **DALE**
Last Name Owner First Name

100050LDCOLUMBIA RD
Street or RFD

COLUMBIA MD 21046
Town State Zip

B 3 LOCATION OF WELL

HOWARD COUNTY

QUARTERFIELD SUBDIVISION

SECTION **15** LOT **15**

WESTFRIENDSHIA NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) **4 MI**

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD

Joseph L. Mayne Driller's Name License No. **24**

Joseph L. Mayne Well Drilling Firm Name

5512 RIDGE RD. Mt. Airy 21771 Address

Joseph L. Mayne 2/1/96 Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD **QUARTERFIELD DR.**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

AC DISTANCE FROM ROAD

ENTER FT OR MI **AA**

TAX MAP: **23** BLK: **14** PARCEL **8**

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)

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)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME

A48831 COUNTY NO.

STATE SIGNATURE **Mark E. Riffin** DATE ISSUED **5/27/98**

NORTH GRID **522000** EAST GRID **0824000**

APPROXIMATE DEPTH OF WELL **220** 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)

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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS

THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

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

8284
5282

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROX. PERMIT NUMBER **GAP**

FORCE **MIR** WRITE INITIALS IN BOX PERMIT No. **40-94-1179**

