

1/10/68

app. 6-10-68
D.W.M.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 3

DATE 5/23/68

P 13619
48864
A 13339

Calvin C. Miles IS PERMITTED TO INSTALL ALTER

ADDRESS Carroll Mill Road, Ellicott City, Maryland PHONE 725-5311

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION _____ ROAD 11696 Carroll Mill Rd LOT _____

PROPERTY OWNER Joseph M. Zeller, III Parcel 88

ADDRESS _____

SPECIFICATIONS - 4 bedrooms

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

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

SEPTIC TANK CAPACITY 1,000 GALLONS

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

OTHER Dry well - 480 sq. ft. absorbent sidewall area to begin below inlet pipe. Inlet pipe 4 ft. below original grade. Maximum depth below original grade for dry well is 13 ft. Place dry well about 60 ft. from rear lot line and about 111 ft. from left side line as seen when facing lot from front (private driveway) the

PERMIT VOID AFTER THREE YEARS.

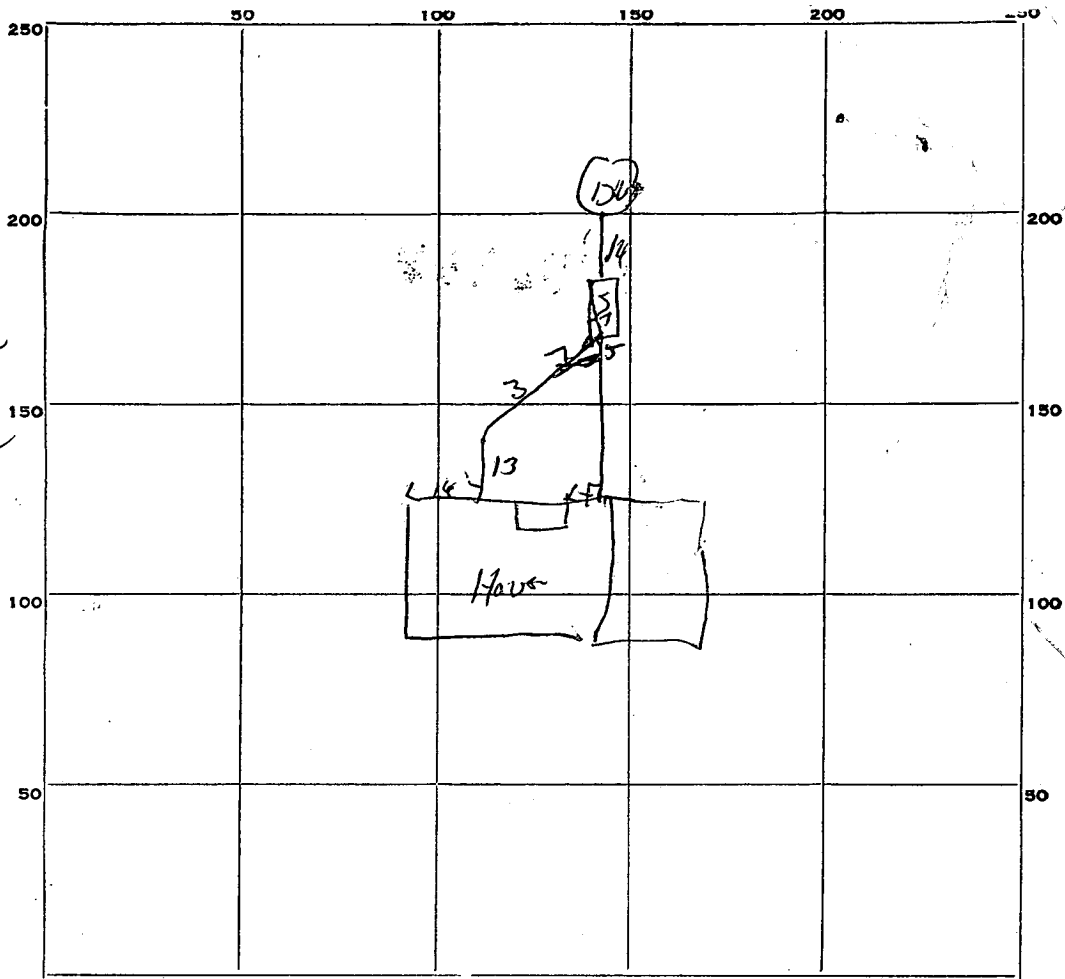
PLANS APPROVED BY D. W. Monaghan DATE 2/2/68

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.

NOTIFY THE HEALTH DEPARTMENT 48 HOURS BEFORE EXCAVATIONS ARE TO BE BACK FILLED.

P 48804
A 13339



$$\begin{array}{r} 14 \\ 13 \\ \hline 54 \\ 94 \\ \hline 13 \\ 486 \end{array}$$

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD OK
 SEPTIC TANK, LEVEL 072 CLEANOUTS OK
 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 Permits 54 FT. DEPTH BELOW INLET 9'4 FT.
 ABSORBENT AREA 496 SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 6-10-69 INSPECTOR DW McConighan

570
14
4396
8
3-12
43-16

APPLICATION

A 13339

P

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 1/30/68

Septic Tank - 1000
480 75 gal.

Dry Well - 360 sq ft absorbent sidewall area to begin below inlet pipe. Inlet pipe 4 ft below orig. grade. Maximum depth below original grade for Dry Well is 13 ft. Place Dry Well about 60 ft from rear lot line and about 111 ft from left sideline as shown when facing lot from the front (Private Driveway)

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND.

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

PROPERTY OWNER Joseph M. Zoller, III

ADDRESS Carroll Mill Rd., Ellicott City, Md. PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION Carroll Mill Road - Use Holly Quarter Rd. turn left on Carroll Mill - first farm on left - Mr. Scaggs will meet you at Carroll Mill Road.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 1.00 TYPE BLDG. 3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT Donald W. Manoghan

APPROVED BY Donald W. Manoghan FOR Dry Well DATE 2-2-68
(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

APPLICATION

PERCOLATION TESTING

A 488614

P _____

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

DISTRICT _____

DATE 1/4/93

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 ~~Silas & Betsy Ayer~~ Jos. Zoller III
ADDRESS 11696 Carroll Mill Road 11696 Carroll Mill
Ellicott City, Maryland 21043 PHONE _____

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

PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. Existing Parcel B
ROAD AND DESCRIPTION 11696 Carroll Mill Road

TAX MAP 23 PARCEL # 1688

SIZE OF LOT 1 Acre TYPE BLDG. Existing 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
BT: [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

48865
COUNTY #

SOIL PROFILE

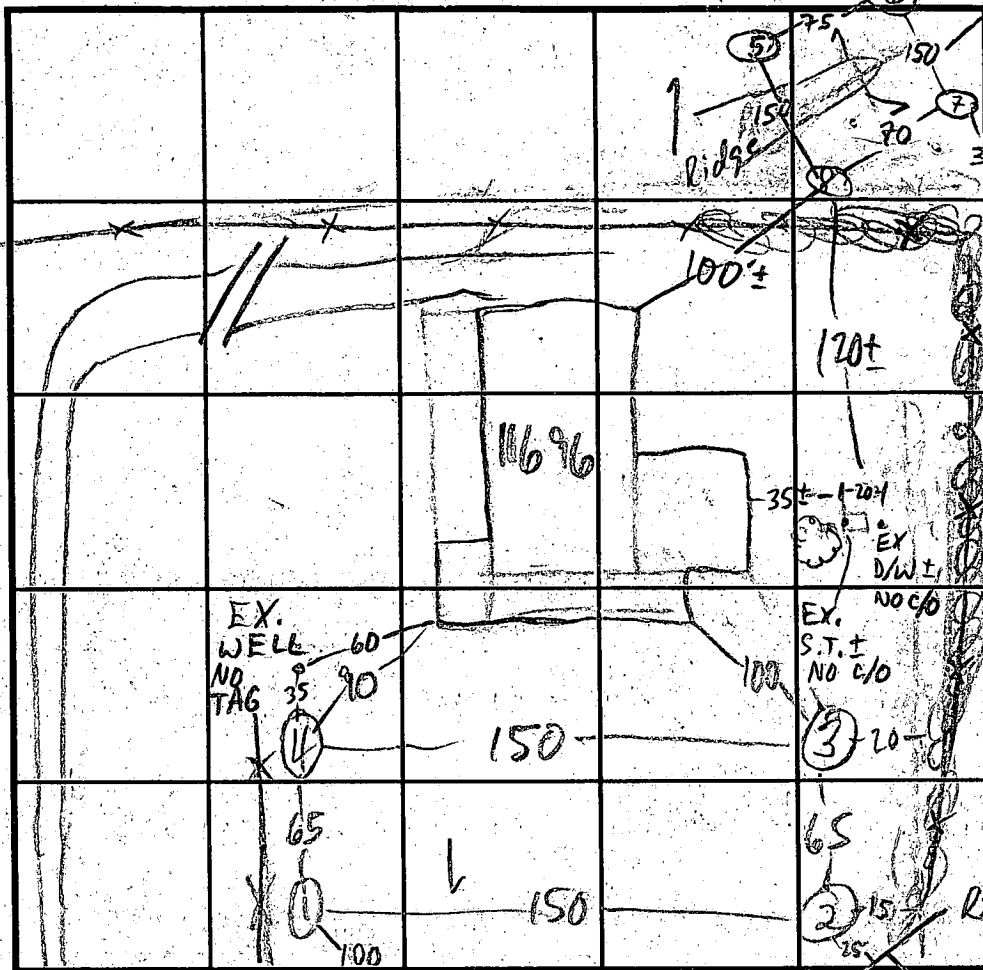
0'
1 3/2'
13 1/2'

(1) (4)
brn red
sa cl/m
brn org
tan
sa lm
25%
saprolite
other
frags

SOIL PROFILE

0'
3 1/2'
13

(6) (7)
brn org
sa cl/m
wh. gray
tan brn
sa
quartz lm
10%-20%
saprolite
& other
frags



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
CARROLL MILL RD @ 11670 ADJ. HOUSE

(2) (3)
brn red
sa cl/m
15-20%
frags
brn tan
sa mic
lm
15-30% hard
saprolite
& other
frags

(5) (8)
brn org
sa cl
lm
tan org
gray
sa mic
lm
10% frags

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/9/93	1 S	4 1/2	11:25:30	11:32:30	11:33:30	11:35:00	FAST 1 1/2 min
	1 V	7	11:27:00	11:27:30	11:27:30	11:28:30	1 min
	2 S	4 1/2	11:47:00	11:47:30	11:47:30	11:48:30	1 min
	2 M	8 1/2	11:51:45	11:54	11:54	12:01	7 min
	2 V	12 1/2	see profile				
	3 S	4 1/2	12:05	12:08	12:08	12:11	3 min
	3 M	8 1/2	12:06:00	12:06:45	12:06:45	12:07:45	1 min
	3 V	12	sim to (2) 15% frags				
	4 S	4 1/2	12:18:15	12:19:30	12:19:30	12:20:30	1 min
	4 M	9	12:20:15	12:24	12:24	12:24	5 min
	4 S	4 1/2	12:21:15	12:23:30	12:23:30	12:25:15	1 min
	4 V	13 1/2	sim to (1)				45 sec
2/10/93	5 S	4 1/2	11:54:30	11:55:30	11:55:30	?	?
	5 M	8	11:55:30	11:56:45	11:56:15	11:57:15	1 min
	5 V	12 1/2	see profile				

REMARKS USE (5)-(6)-(7)-(8) SEE SHEET 2

TYPE OF SOIL _____

TESTED BY M. Rifkin ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 TRENCH WIDTH 2

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 7 SQ. FT./BEDROOM 180

APPLICATION

PERCOLATION TESTING

A _____

P. _____

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

DISTRICT _____

DATE _____

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 _____

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG _____
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

SOIL PROFILE

0

		SEE ATTACHED			
		SHEET			
		11696			
		CARROLL MILL			

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/10/93	6 S M	4 1/2	12:04:45	12:05:15	12:05:15	12:06:15	1 min
		8	12:05:30	12:06:15	12:06:15	12:08:00	1 3/4 min
	6 V	13	see profile				
	7 S M	5	12:11:00	12:12:30	12:12:30	12:14:30	2 min
		8 1/2	12:13:00	12:13:45	12:13:45	12:14:30	45 sec
	7 M V	8 1/2	12:15:00	12:16:45	12:16:45	12:19:00	2 + min
		12 1/2	see profile				
	8 S M	4	12:22:45	12:25:00	12:25:00	12:28:00	3 min
		9	12:23:45	12:24:30	12:24:30	12:26:30	2 min
	8 V	13 1/2	see profile				

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____