

12/30/99 CA
NY

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 513190

A 489055

DISTRICT _____

DATE 12/23/1999

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 12/30/99

INSPECTOR DOS

FREEDOM SEPTIC

Glenn Cote

IS PERMITTED TO INSTALL ALTER _____

ADDRESS 239 W. O. LIBERTY 21784 (SYKESVILLE)
23 Liberty Ridge Court, Owings Mills, MD 21117 PHONE 301-428-6168

SUBDIVISION Dawn's Divide LOT 2 ROAD 14757 Addison Way

PROPERTY OWNER Glenn Cote

ADDRESS _____

BUILDING PERMIT SIGNED

SEPTIC TANK CAPACITY 1250 GALLONS 7-04 BOD 149137 - ROAD DECK CARPENT

AND RETURNED

NUMBER OF BEDROOMS 4

240 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place distribution box 135 feet from the front lot line and 115 feet from the left lot line as seen when facing the property from Old Frederick Road. Run trenches along contour toward front of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 11/9/99 OK ALL

PLANS APPROVED BY C. Williams/Mark E. Rifkin DATE 9-30-1999

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

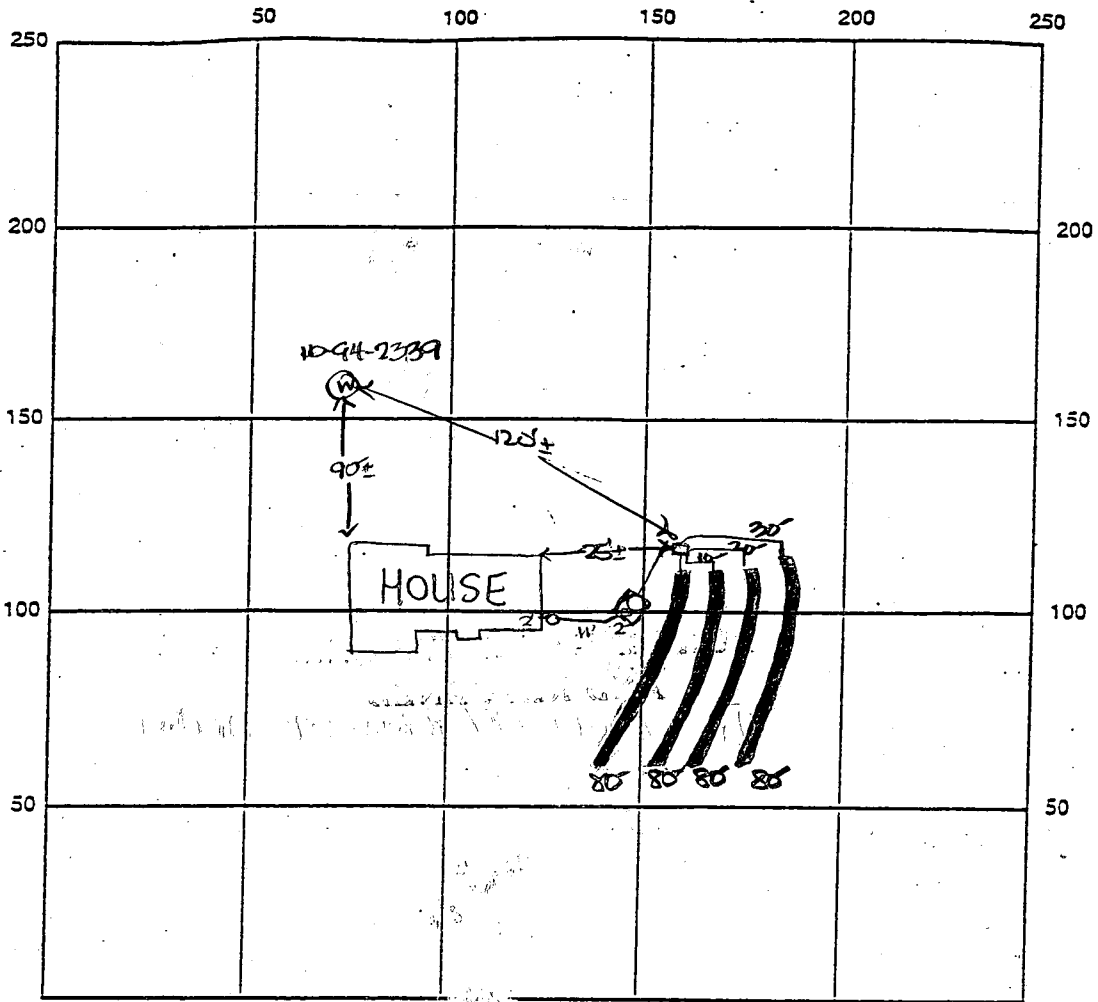
PERMIT VOID AFTER TWO YEARS

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**

48905



INDICATE NORTH ADJOINING ROADWAY AS BASE LINE

Addison Way

SEPTIC TANK LEVEL EL-1250gal CLEANOUTS one on sit, one at house

DISTRIBUTION BOX LEVEL EL-baffle in manhole on sit.

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 4 x 80 FT. → 320

NUMBER OF TRENCHES 4 ONE-SIDEWALL/BOTTOM AREA 1280 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 12/30/99 FINAL INSP-OK to cover all septic work. JCS

DATE SYSTEM APPROVED 12/30/99 INSPECTOR [Signature]

2/24/93
10:00 AM

APPLICATION

PERCOLATION TESTING

A 48905

P _____

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

DISTRICT _____

DATE 2-8-93

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 Zeeger and Dorothy deWilde GLENN COTE

ADDRESS 328 Nicodemus Rd, Westminster, Md 21157 PHONE 876-3213

AGENT OR PROSPECTIVE BUYER DAVID A. SWANN

ADDRESS 14804 Old Fredenck Rd, Woodbine, Md 21797 PHONE 442-5937

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 2

ROAD AND DESCRIPTION 14804 ~~Old Fredenck Rd~~ ^{14757 Addison Way}, Woodbine, Md 21797

1/2 mile West of Rt 97 on Rt 144 across from Bushey Park Rd

TAX MAP _____ PARCEL # _____

SIZE OF LOT 6 AC TYPE BLDG. _____
PERMIT SIGNED AND RETURNED 9-31-93
Serial # 13459
Single family dwelling
(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. David A. Swann
(SIGNATURE OF APPLICANT)

APPROVED BY RHOOGES FOR TRENCHES DATE 12/6/93

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS 2/25/93 PERC OK HOLD FOR PLAT RT

REASONS FOR REJECTION OR HOLDING _____

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

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # DRAWN DIVIAG F 93-129 DATE SIGNED 12/6/93

THIS IS NOT A PERMIT

48905

COUNTY #

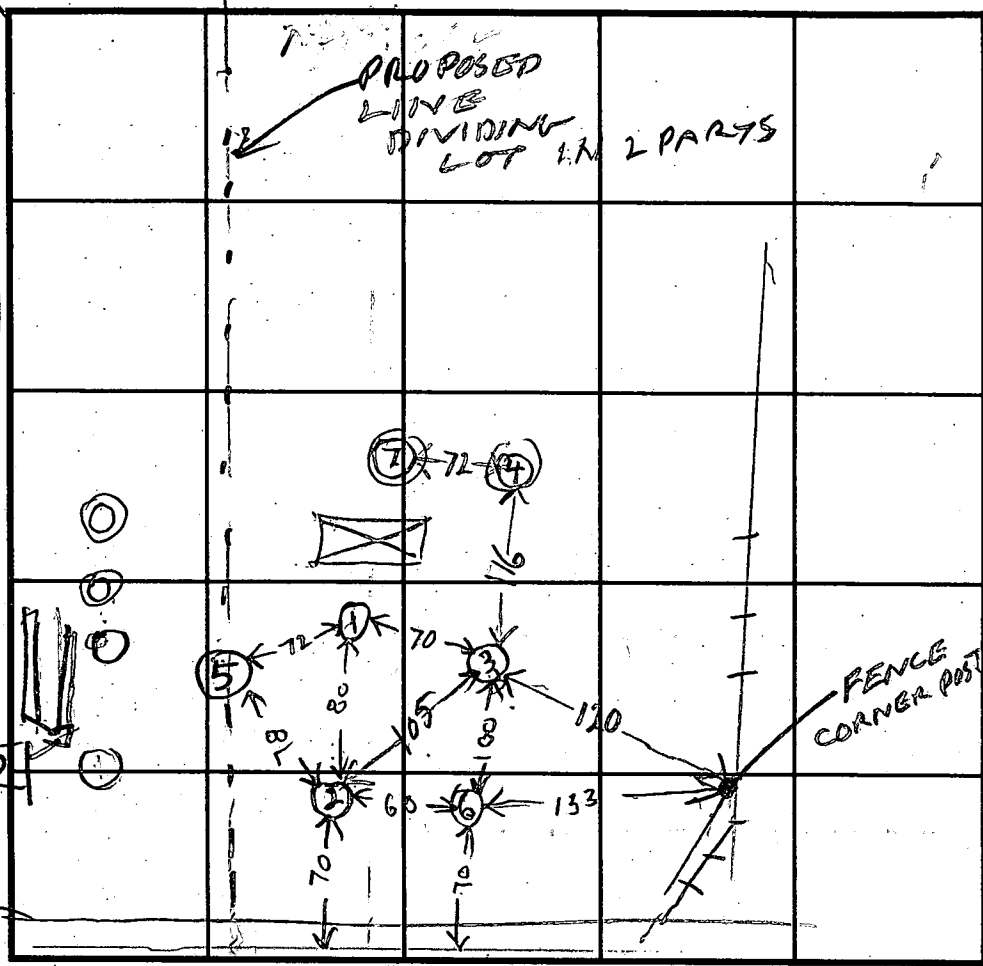
SOIL PROFILE

0' TOP SOIL
CLAY
4' BROWN SAND LOAM FEW BOULDERS

2' BROWN CLAY
3' BEIGE SAND LOAM

3' RED BROWN CLAY
4' BROWN SAND LOAM FEW ROCKS

BOUTWELL



SOIL PROFILE

0' TOP SOIL
CLAY
4' BROWN SAND LOAM FEW ROCKS

5' CLAY
3' BROWN SAND LOAM FEW ROCK

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
OLD FREDERICK RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
2/24/93	1S	4.5	1153	1208	1208	1222	14	
	1V	11	OK					
	2S	4	1153	1203	1203	1208	5	
	2V	11	OK					
	3S	4.5	1200	1214	1214	1225	14	
	3V	11	OK					
	4S	4.5	1219	1246	cobble perc			
	4V	10	OK SHAL					
	5D	9	210	1st med	90sec	2nd med	120sec	
	5S	5	219	225	225	233	8	
	5V	11	OK	SHALLOW	ONLINE HOLE			
2/24/93	6S	6	258	253	253	302		
	6V	12	OK					
	7V	9	NOT TESTED ROCK					

6' CLAY
5' SAND LOAM

REMARKS O = NOT TESTED, ROLL, OR FAIL

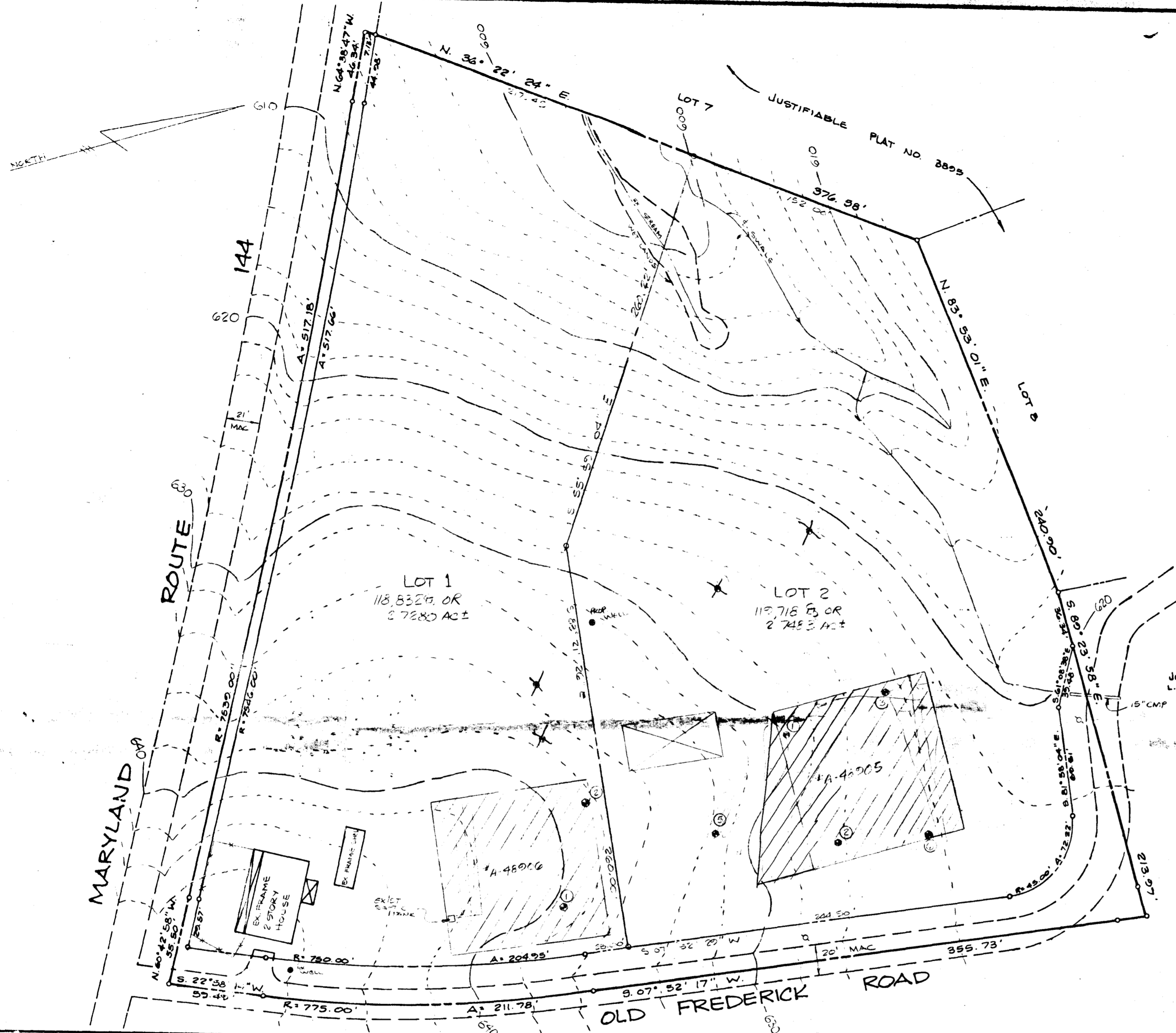
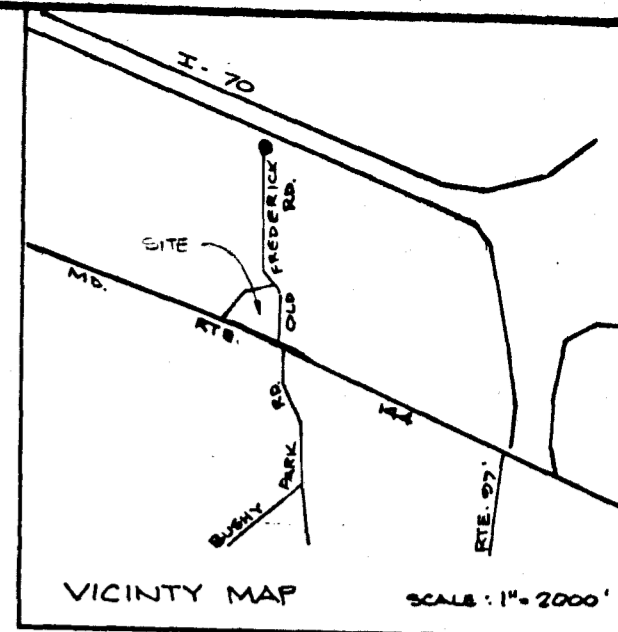
TYPE OF SOIL

TESTED BY R. Hodges ALSO PRESENT SWAN JR & S

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

SV



Joseph B. Berke
L. 247 P. 44

- NOTES:
- = EXISTING PERC HOLE, PASSED
 - = PROPOSED HOUSE SITE
 - ▨ = 10,000% SEWAGE DISPOSAL ENDSMENT MINIMUM.
 - ⊗ = EXISTING PERC HOLE, FAILED

SURVEYOR'S STATEMENT:
ALL WELLS AND EFFTCS WITHIN 100'
OF THIS BOUNDARY ARE SHOWN.

APPROVED: PVT. WATER & PVT. SEWAGE
HOWARD COUNTY HEALTH DEPT.

5/2/93 Joyce M. Boydner
DATE Health Officer, APPROVING AUTHORITY

PERCOLATION TEST PLAT
OF
DAWN'S DIVIDE
LOCATED ON MD RTA 104 & OLD FREDERICK ROAD

REV. 5.3.93
TAX MAP 8
TAX MAP PARCEL N° 83
EX. ZONING 2C
ELECTION DIST. 4th
HOWARD COUNTY, MARYLAND
SCALE: 1"=50'
DATE APRIL, 1998

LIBERTY SURVEY, INC.
4140 RIDGE ROAD
TAYLORSVILLE, MARYLAND 21157

410-875-0722

5-26-93
noted T. Skatford
to Planning app @ Howard
of SBEED as discussed @ D.Son
J.F.

C1 **06648** 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 **A 48905**

1. 2. 3. 6
 (THIS NUMBER IS TO BE PUNCHED
 IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY
 DATE RECEIVED
 MM DD YY
 8 13

DATE WELL COMPLETED
 MM DD YY
 08 05 99

Depth of Well
 22 **230** 26
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
40-94-2339
 28 29 30 31 32 33 34 35 36 37

OWNER **Cote Glenn**
 STREET OR RFD **Addison Way** TOWN **COOKSVILLE**
 SUBDIVISION **Dawns Divide** SECTION **2** LOT **2**

WELL LOG

Not required for driven wells.

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

DESCRIPTION (Use additional sheets if needed)	FEET		check if water bearing
	FROM	TO	
Dirt	0	1	
Clay & Br. mica	1	14	
Soft Br. mica Schist	14	21	
Hard Blue Schist	21	30	
Soft & Hard Blue Schist	30	37	
Hard Blue Schist	37	38	X
Br. Schist	38	58	
Hard Blue Schist	58	59	
Br. Schist	59	94	
Hard Blue Schist	94	75	X
Hard Blue Granite	75	124	
Hard Br. & Blue Granite	124	126	X
Hard Blue Granite	126	230	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **13** NO. OF POUNDS **1222**
 GALLONS OF WATER **78**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **32** ft.
 (enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below
ST **CO**
 STEEL CONCRETE
PL **OT**
 PLASTIC OTHER
 MAIN CASING TYPE **ST** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **34**
 60 61 63 64 66 70

OTHER CASING (if used)

diameter inch depth (feet) from to
 E A C H I N G

SCREEN RECORD

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

C 2 DEPTH (nearest ft.)

HO **34** **230**
 8 9 11 15 17 21
 23 24 26 30 32 36
 38 39 41 45 47 51
 S L O T S I Z E 1 2 3
 DIAMETER OF SCREEN (NEAREST INCH)
 from **1000** to **6115-13**
 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

C 3

PUMPING TEST

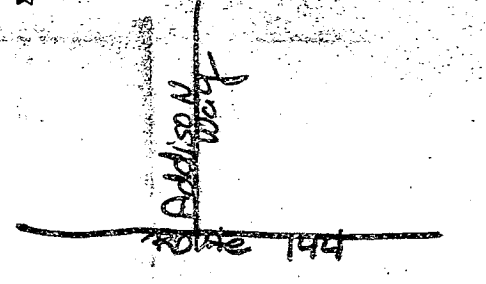
HOURS PUMPED (nearest hour) **3**
 8 9
 PUMPING RATE (gal. per min.) **10**
 11 15
 METHOD USED TO MEASURE PUMPING RATE **Submersible**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **28** ft.
 17 20
 WHEN PUMPING **29** ft.
 22 25
 TYPE OF PUMP USED (for test)
A air **P** piston **T** turbine
 27 27 27
C centrifugal **R** rotary **O** other (describe below)
 27 27 27
J jet **S** submersible
 27 27

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) **NO**
 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)
 49 50 51

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 **Y** **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. **MWD 296**
Ronald Kyker
 DRILLERS SIGNATURE
 (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. **MWD 334**
Dana Kyker
 (MUST MATCH SIGNATURE ON APPLICATION)

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

B 1 2 3 4 5 6
4238

SEQUENCE NO.
(MDE USE ONLY)

STATE OF MARYLAND
PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER

70 HO-94-2339 79
fill in this form completely

Date Received (APA)
072099
8 MM DD YY 13

OWNER INFORMATION

15 Cote Glenn
Last Name Owner First Name 34
36 2908 Mayfield AVE
Street or RFD 55
57 Balto Maryland 21244
Town State Zip 76

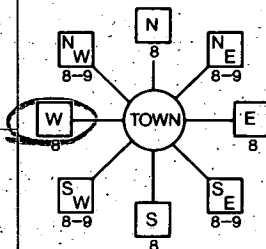
B 3 LOCATION OF WELL

8 COUNTY Howard 21
23 SUBDIVISION Dawns Divide 42
SECTION 44 46 LOT 2 48 50
52 NEAREST TOWN Cooksville 71
MILES FROM TOWN (enter 0 if in town) 1 M I
73 76 77 78

DRILLER INFORMATION

63 Ronald Kyker MW D 296
Driller's Name License No. 81
Westminster Rotary Well Drilling
Firm Name
PO Box 861 Westminster Md 21157
Address
Ronald Kyker July 20 99
Signature Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 ~~RT 144~~ Addison Way 30
NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 400 37 FT
DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: 8 BLK: 4 PARCEL 83

B 2 WELL INFORMATION

7 2 APPROX. PUMPING RATE 5
(GAL. PER MIN.) 8 12
AVERAGE DAILY QUANTITY NEEDED 450
(GAL. PER DAY) 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION
- F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- 22 I INDUSTRIAL, COMMERCIAL, DEWATERING
- P PUBLIC WATER SUPPLY WELL
- T TEST, OBSERVATION, MONITORING
- G GEO-THERMAL

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard Co A48905
COUNTY NAME COUNTY NO.
STATE SIGNATURE _____ INSERT S → 41
DATE ISSUED 072899 A McMill 072800
43 MM DD YY 48 CO-SIGNATURE EXP. DATE
NORTH GRID 540 000 EAST GRID 790 000
50 55 57 63

APPROXIMATE DEPTH OF WELL 250 FEET
24 28

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

METHOD OF DRILLING (circle one)

- BORED (or Augered) JETTED Jetted & DRIVEN
- 30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)
- 37 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
- 39 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) 41 _____ 52

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

APPROP. PERMIT NUMBER 54 _____ 63
PERMIT No. HO-94-2339
70 71 72 73-74 75 76-77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

- SOURCES OF DRILLING WATER
- 1 City
- 2.
- 3.

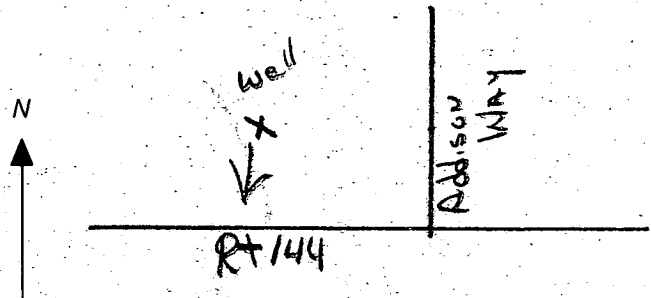
WRITE THE BOX NUMBER FROM THE MAP HERE

E 790
N 540

8/5/99 - location OK
13 Bags
37' casing-SRM

well X

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

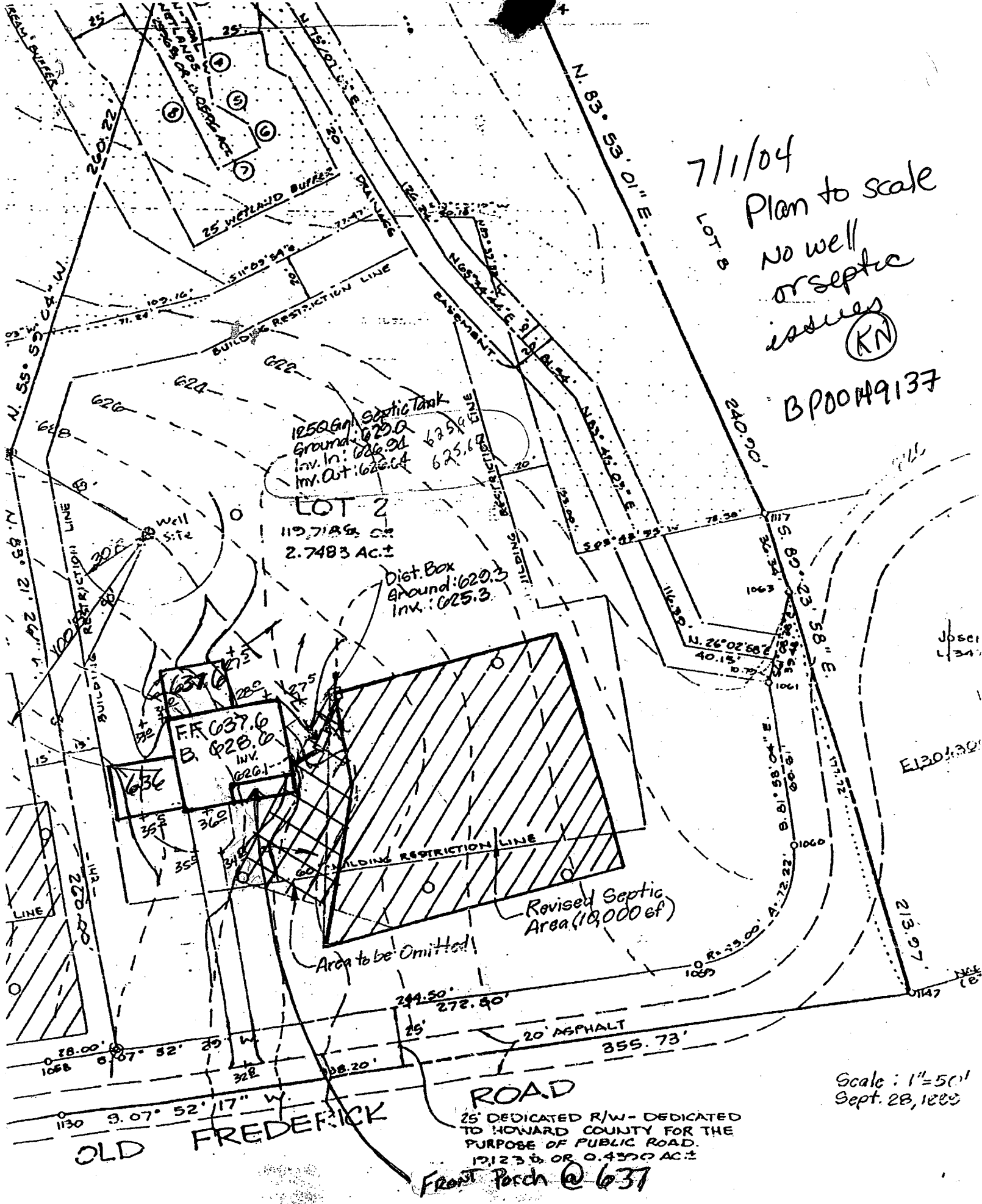


SPECIAL CONDITIONS

NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED

7/1/04
Plan to scale
No well
or septic
issues
(KN)

BPO049137



Scale: 1" = 50'
Sept. 28, 1988