

7/29/98
10:00
8-10-98
WPI am

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510554

A 49049

DISTRICT 4th

DATE 7-9-98

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 7/20/98

INSPECTOR DLS

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

ADDRESS 5800 Obrecht Rd, Sykesville, MD 21784 PHONE 410-795-5674

SUBDIVISION Walnut Springs LOT 6 ROAD 1228 Emmaus Road

PROPERTY OWNER Charles & Carol Schroyer DAVID DAILEY

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

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 - Start the first trench 135 feet up the left lot line and 30 feet off this same lot line. Run trenches on contour to front of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanouts and cap to grade or above on septic permit. *OK 6-15-98*

PLANS APPROVED BY Mark Rifkin/Donna K. Soe DATE 06/08/98

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 ANY PROPERTY LINE UNLESS OTHERWISE 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.

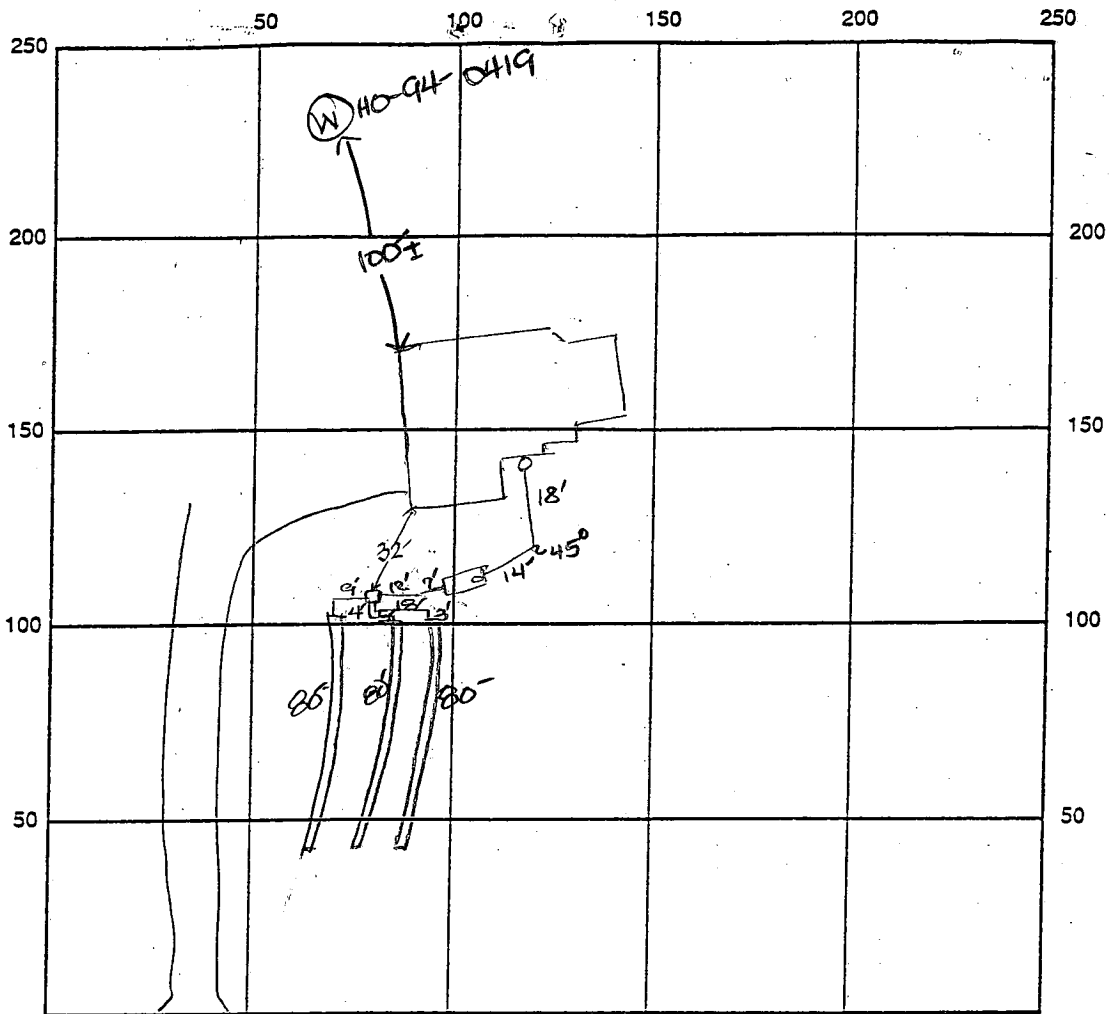
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BUILDING PERMIT SIGNED AND RETURNED

2/13/03 B00140327 SUNROOM
6/1/03 B00142250 - HOT TUB

104049



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK CLEANOUTS one at house, one on St.
 DISTRIBUTION BOX LEVEL OK
 DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3x80 FT. → 240
 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA _____ SQ. FT.
 DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA _____ SQ. FT.

REMARKS: 8/20/98 OK to cover all work (RM)
8/10/98 OK to cover, P.A. 3.5" below grade, casing 8" above grade,
 needs 2 piece cap, line sleeved, needs WPI info sheet (RM)
8/11/98 water in ditch for well line from last night's rain, unable
 to see pitless or house connection today (RM)

DATE SYSTEM APPROVED 7/20/98 INSPECTOR [Signature]

C1 3673

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 49049

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE Received grid

DATE WELL COMPLETED 060895

Depth of Well 500 (TO NEAREST FOOT)

PERMIT NO. MO-94-0419

OWNER Schroyer Charles last name first name STREET OR RFD Emmaus Rd TOWN Lisbon SUBDIVISION WALNUT SPRINGS SECTION LOT 6

WELL LOG table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes entries for Brown Shale and Blue Rock.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 17, NO. OF POUNDS 1598.

CASING RECORD: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (SF), Nominal diameter top (main) casing 6, Total depth of main casing 69.

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

SCREEN RECORD: screen type or open hole insert appropriate code below (ST, BR, HO, PL, OT).

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. 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...

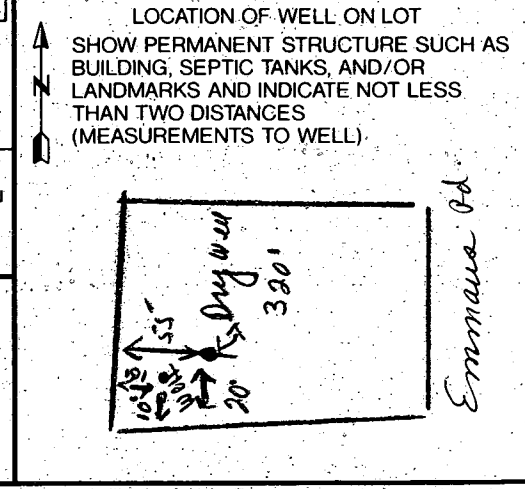
DRILLERS IDENT. NO. 24, DRILLERS SIGNATURE Joseph T. Mayne, SITE SUPERVISOR responsible for sitework if different from permittee.

DEPTH (nearest ft.) 68, 500; 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); TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST: HOURS PUMPED (nearest hour) 3, PUMPING RATE (gal. per min. to nearest gal.) 405, METHOD USED TO MEASURE PUMPING RATE Bucket, WATER LEVEL (distance from land surface) BEFORE PUMPING 45, WHEN PUMPING 337, 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 7 (nearest foot).



EMERGENCY/TEMP NO. IF ANY

B 1 **4447**
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

SEQUENCE NO. (DP USE ONLY)

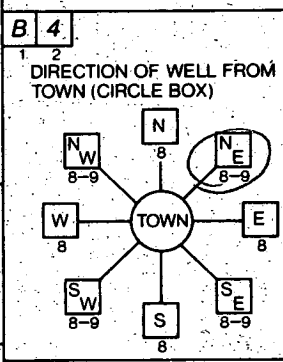
STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
40-94-0419
fill in this form completely

Date Received (APA) **03/16/95**
OWNER INFORMATION
Last Name: **SCHROVER** Owner: **CHARLES**
Street or RFD: **1245 MORGAN STATION RD**
Town: **WOBDOBINE** State: **MD** Zip: **21797**

B 3 LOCATION OF WELL
County: **HOWARD**
Subdivision: **WALNUT SPRINGS**
Section: **6** Lot: **6**
Nearest Town: **Lisbon**
Miles from town: **1** MI

DRILLER INFORMATION
MSD/MGD/MWD
Driller's Name: **Joseph L. Mayne** License No. **24**
Firm Name: **Joseph L. Mayne Well Drilling**
Address: **5512 Ridge Rd. Mt. Airy MD. 21771**
Signature: *Joseph L. Mayne* Date: **3/15/95**



B 4 NEAR WHAT ROAD: **Emmatus Rd.**
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): **WEST**
DISTANCE FROM ROAD: **218** FT
TAX: MAP: **8** BLK: **8** PARCEL: **313**

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)

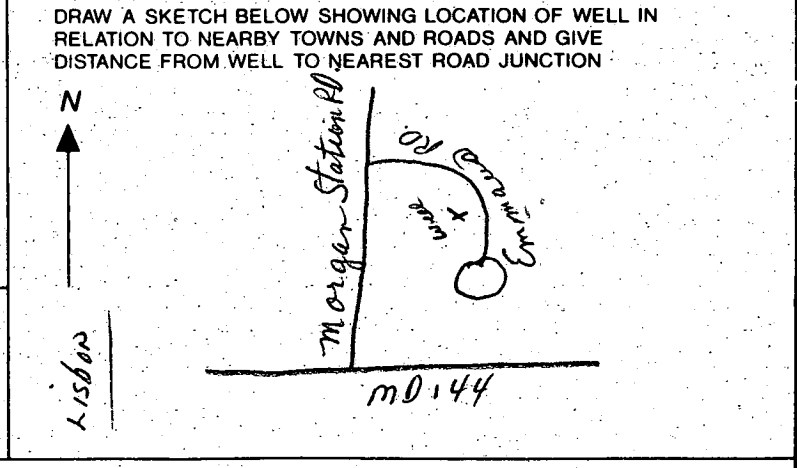
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
County Name: **Howard** County No. **A49049**
STATE SIGNATURE: **Mark E. Kiffin** DATE ISSUED: **03/30/95**
NORTH GRID: **547000** EAST GRID: **0786000**

APPROXIMATE DEPTH OF WELL: **260** FEET
APPROXIMATE DIAMETER OF WELL: **6** INCH NEAREST

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:
7866
5477

METHOD OF DRILLING (circle one)
BORED (or Augered) AIR-ROTARY
JETTED AIR-PERCussion
ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT

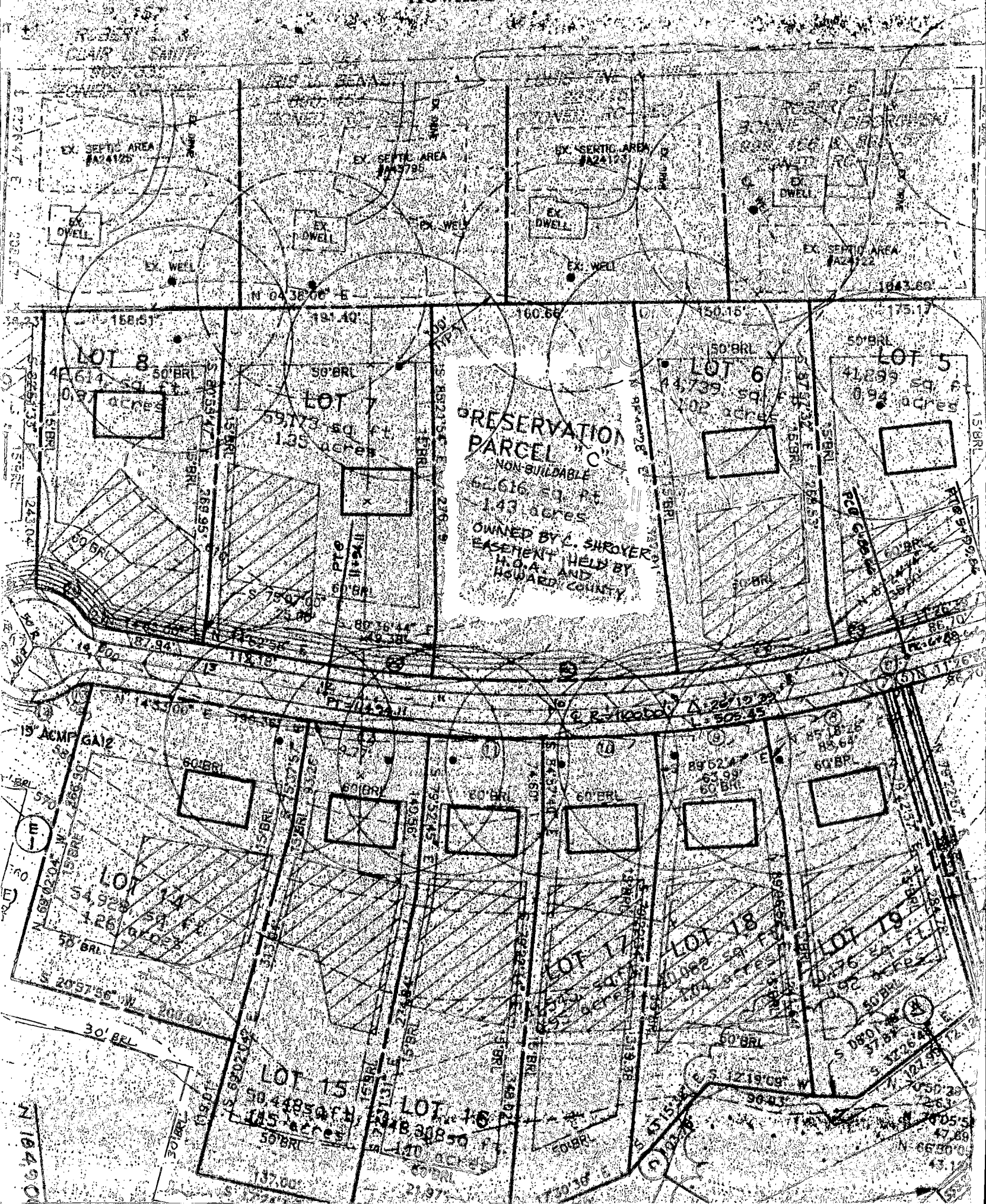
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE):

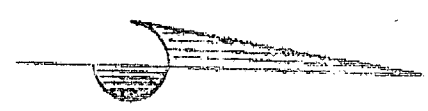
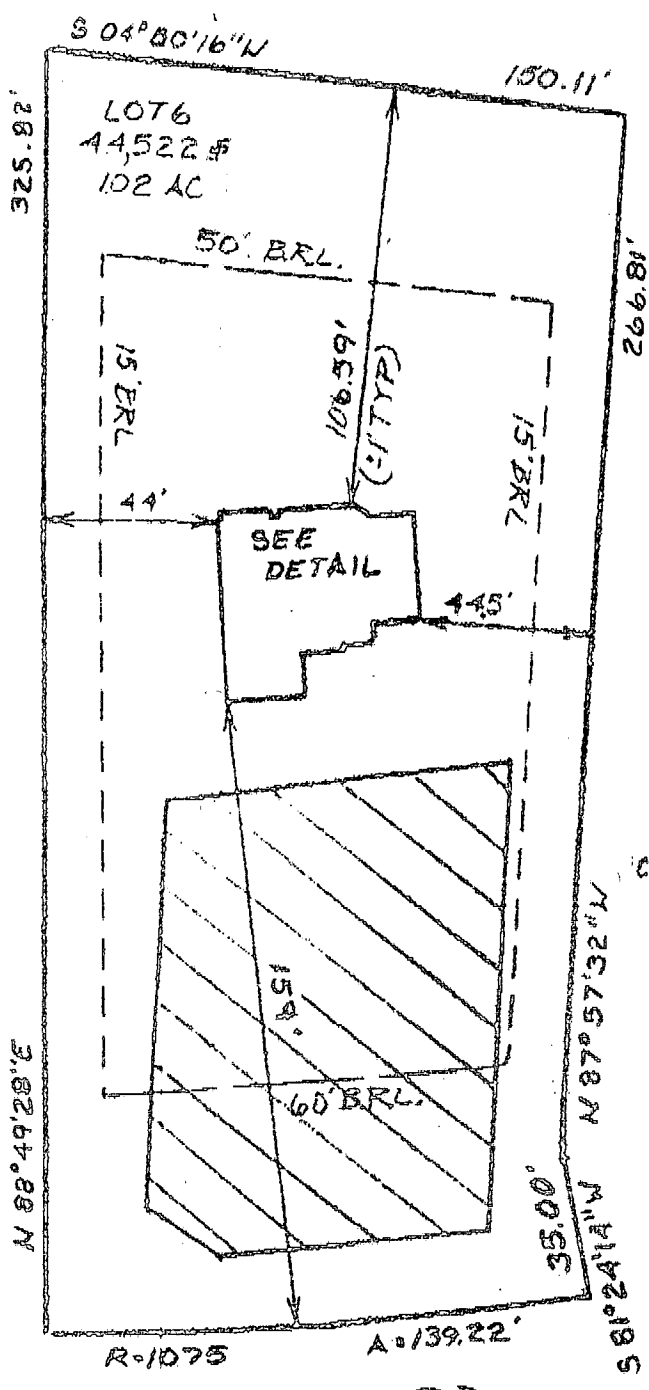


Not to be filled in by driller (OEP USE ONLY)
APPROX. PERMIT NUMBER: **GAP**
FORCE **MR** WRITE INITIALS IN BOX PERMIT No. **40-94-0419**

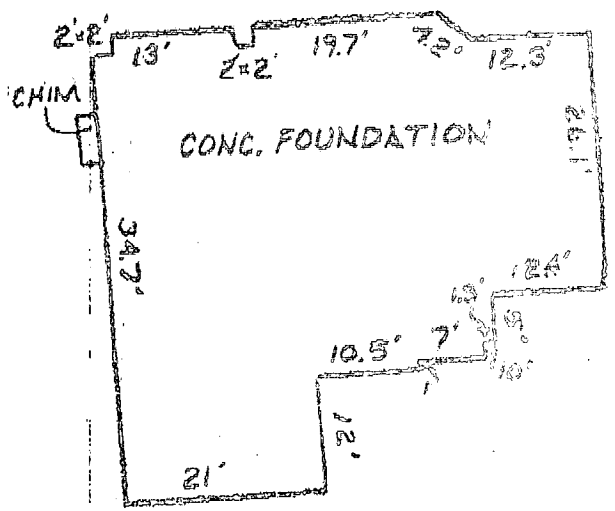
SPECIAL CONDITIONS
NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =
COUNTY

HOWARD COUNTY MINOR COLLECTOR





DETAIL SCALE
1" = 20'



PRESERVATION PARCEL "C"

EMMAUS RD.



LOCATION DRAWING
LOT 6
WALNUT SPRINGS
4TH ELECTION DIST. HOWARD CO. MD

I hereby certify that I have surveyed the property shown hereon for the sole purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By Dennis E. Meckley Date 6/29/98
Dennis E. Meckley Property L^{td}
Surveyor No. 10044

The improvements shown hereon lie within Flood Hazard Zone "C", (area of minimal flooding), as designated on National Flood Insurance Program, Flood Insurance Rate Map, Panel 9 of 45 Community Panel Number 24044/00085 prepared by the Federal Emergency Management Agency.

CLSI
Carroll Land Services
Incorporated
Engineers • Surveyors • Land Development Consultants
Landscape Architects • Environmental Specialists
439 East Main Street Westminster, MD 21157-5529
(410) 875-2017 FAX (410) 875-0988

BY: DENNIS E. MECKLEY
DATE: 6/29/98
SCALE: 1" = 20'
JOB NO: 98-114
PROJECT:

APPLICATION

PERCOLATION TESTING

A 490⁴⁹
P _____

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

DISTRICT _____
DATE 3/16/93

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 CHARLES + CAROL SCHROYER
ADDRESS 1245 MORGAN STATION RD PHONE 301 854 6217
AGENT OR PROSPECTIVE BUYER N/A
ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION NONE LOT NO. 6 Mon signed plat
ROAD AND DESCRIPTION EAST OF MORGAN STATION RD. SOUTH OF RT. 76
(1228 EMMAUS ROAD)
TAX MAP 8 PARCEL # 313
SIZE OF LOT ± 41,000 TYPE BLDG. SINGLE FAMILY DWELLING OR COMMERCIAL
BLDG PERMIT SIG. AND RETURNED 6-8-98
Serial # B10112096
SINGLE FAMILY DWELLING - 4 BR

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] (Blender Assoc.)
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING HOLD FOR PLAT - PERC OK MR 6/3/93

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

A 49049

COUNTY #

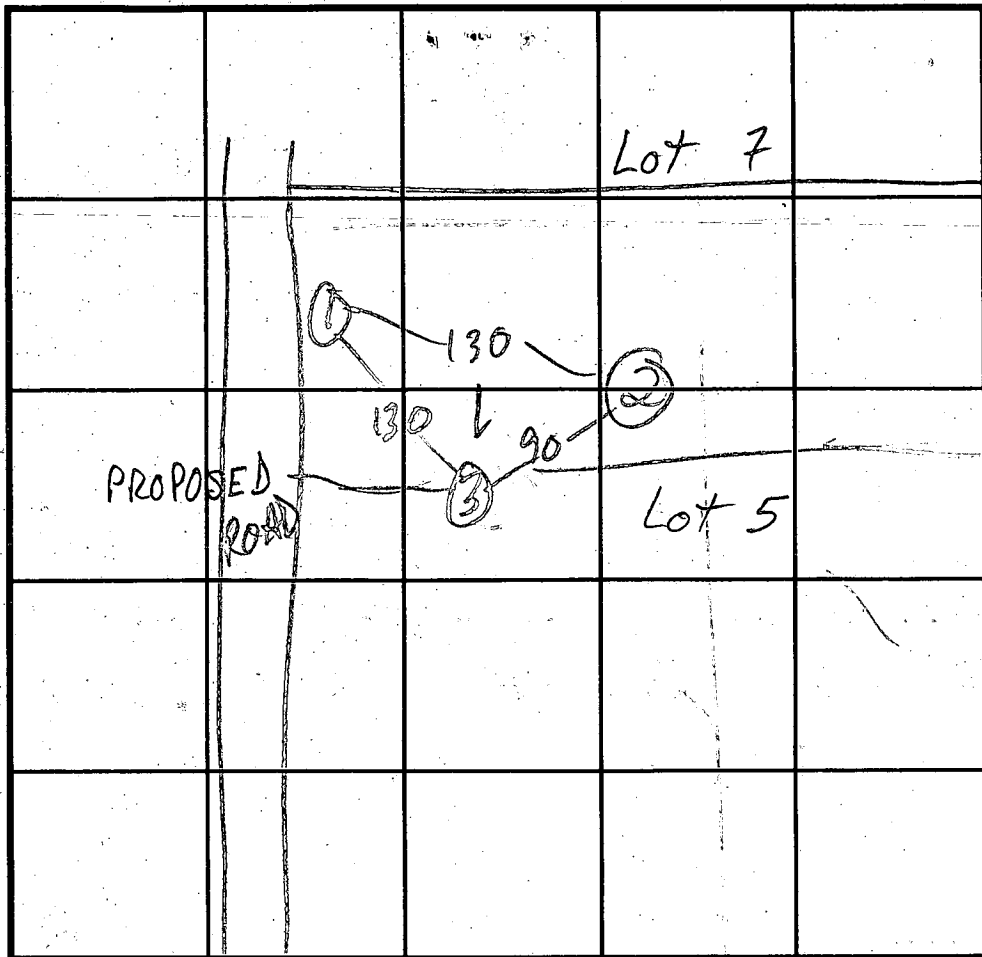
Lot 6

SOIL PROFILE

0' ①
 brn
 sil cl/m
 30-40%
 frags
 4 1/2
 brn
 red
 sa/m
 20%
 saprolite
 frags
 12 1/2

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

②③
 brn pink
 arg
 sa cl/m
 1 3/4 - 4
 brn
 sa/m
 30-35%
 black
 structured
 frags
 w/ saprolite
 12 1/2

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/4/93	1 M	5 1/2 7 1/2	2:14 2:15	2:15 2:17	2:15 2:17	2:19 2:21	4 4
	1 V	12 1/2	see profile				
	2 M	5 7 1/2	2:24 2:24	2:27 2:26	2:27 2:26	2:32 2:29	5 3
	2 V	12 1/2	see profile				
	3 M	4 1/2 2	2:32 2:33	2:38 2:34	2:38 2:34	2:45 2:38	2 4
	3 V	12 1/2	see profile				

REMARKS ALL HOLES PER PLAN

TYPE OF SOIL _____

TESTED BY M. Rifkin ALSO PRESENT Fyock crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 1/2 TRENCH WIDTH 3

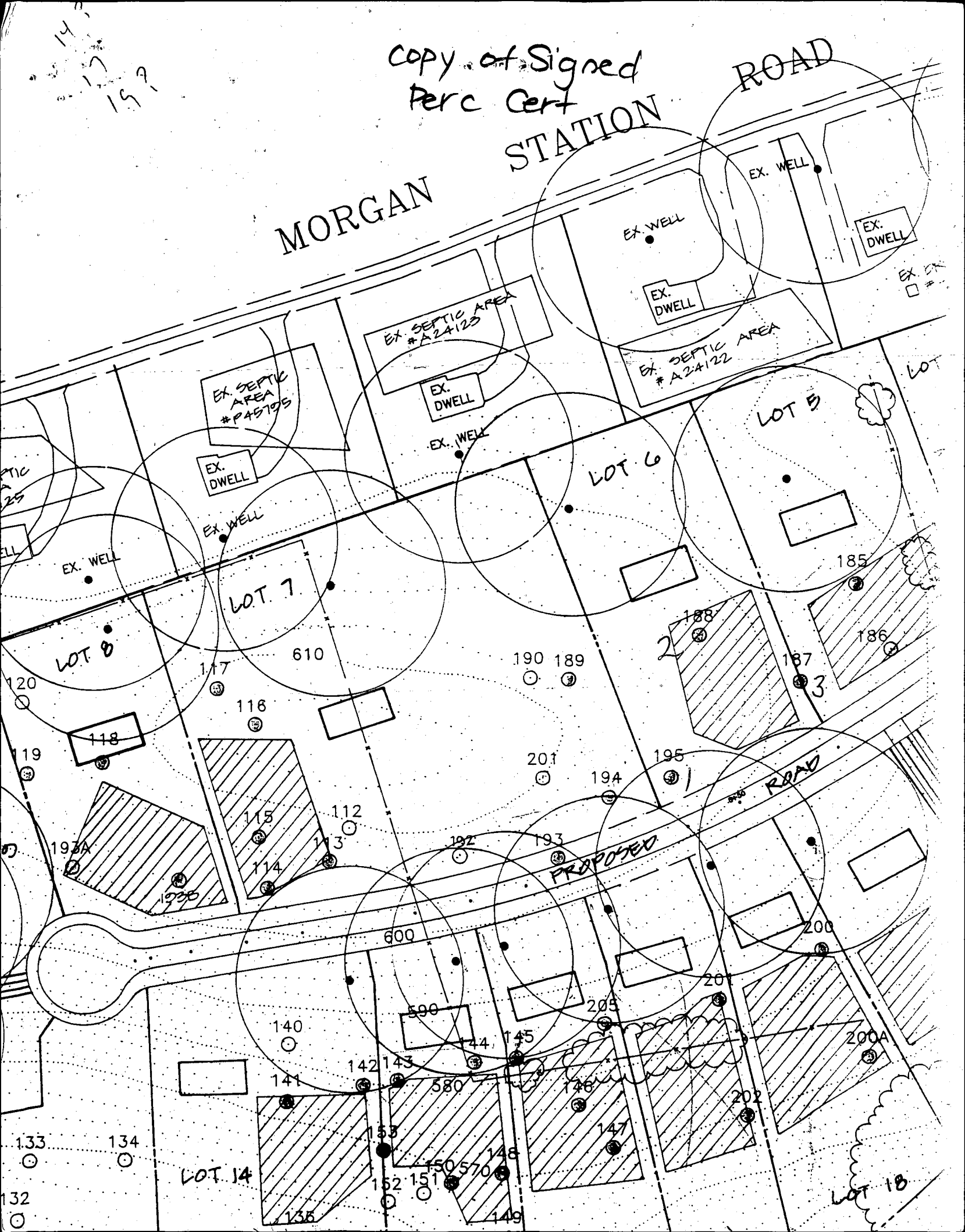
INLET DEPTH 4 MAXIMUM BOTTOM DEPTH 6 SQ. FT./BEDROOM 180

14
17
19
Copy of Signed
Perc Cert

MORGAN

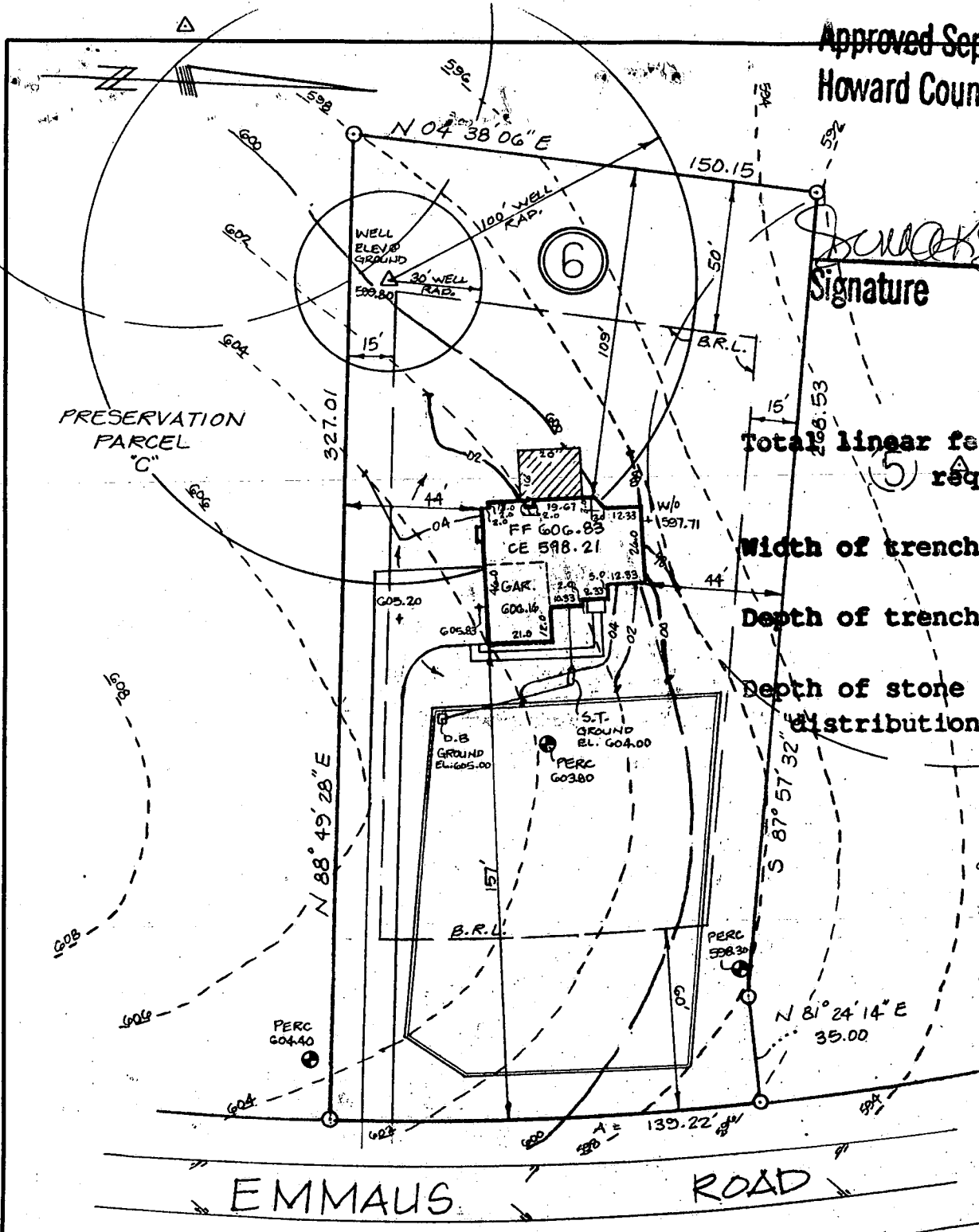
STATION

ROAD



Approved Septic System Plan
Howard County Health Department

[Signature]
Signature 6/8/98
Date



Total linear feet of trench 240 feet
 Width of trench(es) 3 feet
 Depth of trench(es) 6 feet
 Depth of stone required below distribution pipe 2 feet

SEPTIC SYSTEM ELEVATIONS

OUT OF HOUSE	602.70
SEPTIC TANK	
INV. IN	602.30
INV. OUT	602.10
DISTRIBUTION BOX	
INV. IN	601.20
INV. OUT	601.00

EMMAUS ROAD

LOT 6

44,522 S.F.
1.02 AC.

PLOT PLAN
FOR
LOT 6
WALNUT SPRINGS
ELECTION DISTRICT 4
HOWARD CO., MARYLAND

CLSI

Carroll Land Services
Incorporated
Engineers • Surveyors • Land Development Consultants
Landscape Architects • Environmental Specialists
439 East Main Street Westminster, MD 21157-5539
(410) 876-2017 FAX (410) 876-0009

DRAWN BY:	JA
DESIGN BY:	JA
REVIEW BY:	
DATE:	5/29/98
SCALE:	1" = 50'
JOB NO:	98114
SHEET:	1 OF 1

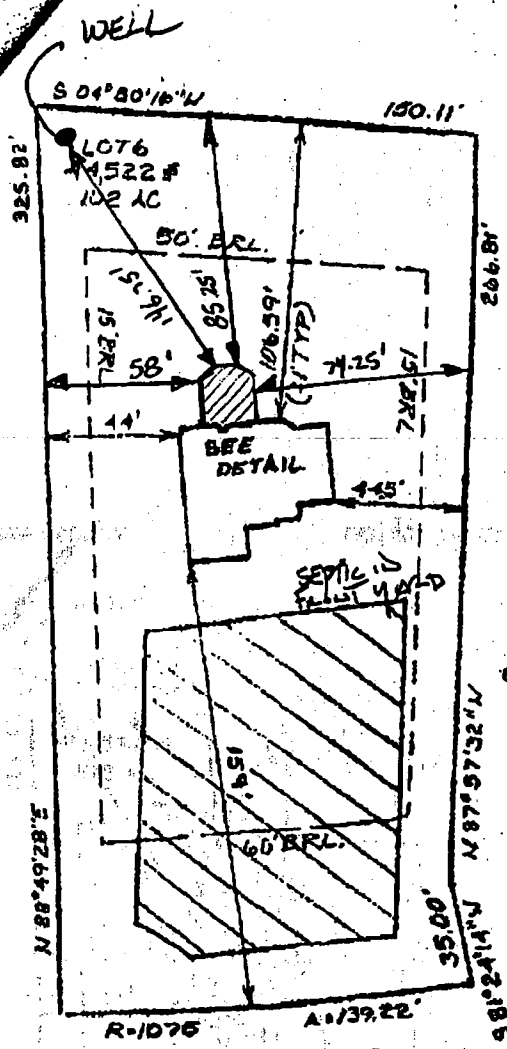
087744

FROM : HOWARD COUNTY

FAX NO. : 4183133322

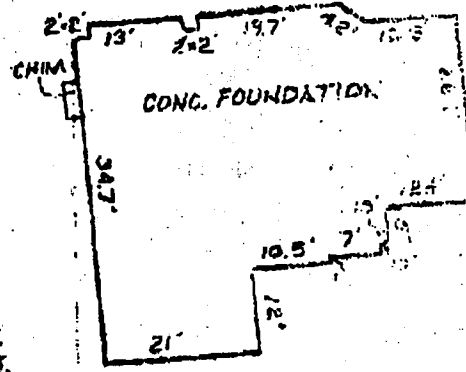
Feb. 13, 2003 04:07PM P1

Plot:
Doiley



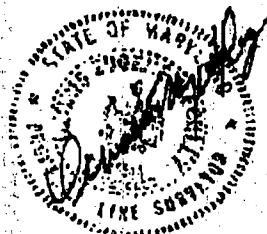
/// = 16' x 19'-6"
PRE-ENGINEERED
CONSERVATORY ADDON

DETAIL SCALE
1" = 20'



PRESERVATION PARCEL C

EMMAUS RD



I hereby certify that I have surveyed the property shown herein for the sole purpose of locating the improvements. This plan is a benefit to the consumer only in so far as it is required by a lender or a life insurance company or its agent in connection with a loan or insurance policy. Planning or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements.

By James Doiley Date 2/13/03
 James S. Muckley Property Ltd.
 Surveyor No. 10044

The improvements shown herein lie within Flood Hazard Zone "C" (area of minimal flooding), as designated on National Flood Insurance Program Flood Insurance Rate Map, Panel B of 45 Community Panel Number MAA420088 prepared by the Federal Emergency Management Agency.

LOCATION DRAWING
 LOT 6
 WALNUT SPRINGS
 AN ELECTION DIST. HOWARD COUNTY, MARYLAND

2/13/03
 SURVEYOR TO CHECK
 SB

CLSI

Professional Land Development Consultants
 Landscape Architects • Estimators • Planners
 450 Lee Way • Hunt Green • MD 21784
 (410) 375-8077 FAX (410) 375-8397

DATE	2/13/03
PROJECT	LOT 6
SCALE	1" = 20'
DRAWN BY	JD
CHECKED BY	JD
DATE	2/13/03