

9/28/99 ASAP  
9/30/99 9:30 AM/field  
9/29/99  
10/12/99  
11/10

# PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-421918

Needs Pump Test  
Still Needs Pump Test  
5/17/00 RJP  
P 512039  
A 49406

DISTRICT \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

DATE 7-29-99

BUREAU OF ENVIRONMENTAL HEALTH  
~~XXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 10/13/99

INDEXED

INSPECTOR AB

South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL  ALTER \_\_\_\_\_

ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 410-875-4197

SUBDIVISION Paternal Gift Farm LOT 23 ROAD 7113 Alexander Drive

PROPERTY OWNER Pinecrest Builders, Inc.

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 3.5 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 4.0 feet below original grade. 2.0 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 245.32' and 194.65' lot lines, begin trenches 150 feet down the 194.65' lot line and 10 feet off that 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 to grade or above on septic tank.

PLANS APPROVED BY Amy McMillen DATE 5-19-1999

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.

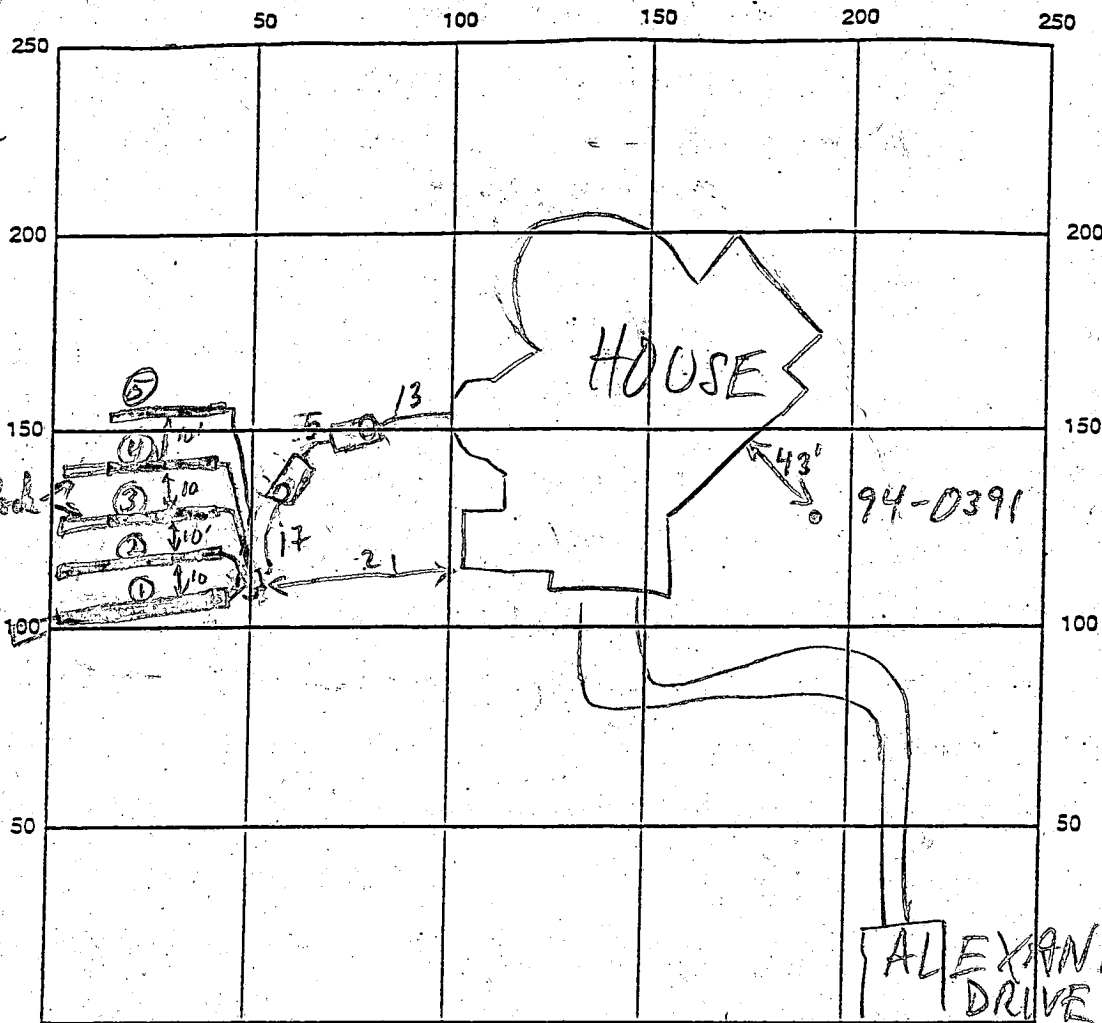
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

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

199406

in trench 3+4  
 back is a slight  
 weathered flat  
 gneiss



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

1500 TOP-SEAMED PUMP PIT

SEPTIC TANK LEVEL 1500 TOP-SEAMED TANK

CLEANOUTS MH @ S.T.

DISTRIBUTION BOX LEVEL has 5 outlets, inlet is down turned 90° el. (No split block) OK level

DRAIN FIELD/TITLE DEPTH 6.5 FT.

TRENCH WIDTH 3.0 FT.

INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT.

TOTAL LENGTH  $\frac{1+2+3+4}{5} = \frac{10}{5} = 2$  FT.  $\frac{20+55+25}{40} = \frac{100}{40} = 2.5$  FT.  $\frac{35}{40} = 0.875$  FT. = 2.35 or 2.40 LF. OK

NUMBER OF TRENCHES 5

ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT.

EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS: 9/17/99 Invert out of house too deep. Will have to change  
 invert elevation or install a pump. (BB)

9/28/99 OK TO CONTINUE, OK TO RUN LAST 10' OF EACH TRENCH

SLIGHTLY OFF CONTOUR TO MAXIMIZE SEPTIC AREA UTILITY (MP)

9/29/99 Trench #2 is OK, Trench #3+4 Too rocky last 20 ft of each trench (old test hole A). Needs 5' trench to take up

work 9/29/99 last trench OK to level 9/29/99 Needs pump test 10/12/99 Well needs 2" pipe cap.

DATE SYSTEM APPROVED 10/13/99

INSPECTOR B. Baker

Alarm O.K. Pump O.K.  
 Will install levelers.

10/13/99 Levelers O.K.  
 System passed. (BB)



4103132648

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-N Ellicott Mills Drive  
Ellicott City, MD 21043

9/21/99

410 313 2640

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X Replacement \_\_\_\_\_  
Receipt # \_\_\_\_\_ Date \_\_\_\_\_  
Name of Installer Ben Lewis Telephone 301 428 3900  
Licence Number 11202 Certified Well Pump Installer \_\_\_\_\_ Well Driller \_\_\_\_\_ Registered Plumber X  
Name of Property Owner Jacobsen Home Telephone 301 953 2083  
Subdivision Katona Park Lot # 23 Well Tag # HO-94-0391  
Site Address 7115 Adelphi Dr

Pump  
1. Type  
a. Deep well jet \_\_\_\_\_  
b. Shallow well jet \_\_\_\_\_  
c. Submersible X  
2. Make Grundfos  
3. Model # 51505 422  
4. Capacity \_\_\_\_\_ GPM  
5. Pump exceeds well capacity Yes \_\_\_\_\_ No \_\_\_\_\_  
6. If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_  
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards \_\_\_\_\_ Other \_\_\_\_\_

Motor  
1. Horsepower 1/3  
2. RPM \_\_\_\_\_  
3. Voltage \_\_\_\_\_  
a. 110 \_\_\_\_\_  
b. 220 \_\_\_\_\_

Pitless Adapter  
1. Make \_\_\_\_\_  
2. Model # \_\_\_\_\_  
3. Depth 42"

Tank  
1. Capacity 180  
2. Pressure relief valve? Yes  
Piping  
1. Type 160  
2. Size 1"  
3. NSF and/or BOCA Code approved Yes  
4. Depth of supply line \_\_\_\_\_  
Well data  
1. Depth 250 ft.  
2. Yield \_\_\_\_\_ GPM  
3. Static water level 30 ft.  
4. Will water supply be disinfected by installer? Yes

9/21/99 Grout O.K. Well #4  
HO-94-0391. Casing 8" above grade.  
Pitless 3 1/2' below grade. Can't pass no cap. (B.B.)

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.  
Signature of Applicant: Ben Lewis  
Date: 9/21/99

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

HD-215

C1 3652

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 49406

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 040793

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. HO-94-0397

OWNER: Schedt Susan; STREET OR RFD: Hall Shop Rd; TOWN: Highland; SUBDIVISION: Paternal Gift; SECTION: ; LOT: 23

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, FEET (FROM, TO), Check if water bearing. Includes entries for Topsoil, Red Clay, Sand Silt Clay, Sandstone, Mica Sandstone, Mica Flint, Mica, Flint, Mica.

GROUTING RECORD WELL HAS BEEN GROUTED (YES Y NO N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC)

CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 24 NO. OF POUNDS 2400 GALLONS OF WATER 120 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 81 ft.

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) 92

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

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

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED. WELL HYDROFRACTURED YES Y NO X

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 IDENT. NO. 40; DRILLERS SIGNATURE: George F. Eberling; SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee): Charles L. Allen

DEPTH (nearest ft.) HO 90 400; SLOT SIZE 2 3; DIAMETER OF SCREEN 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

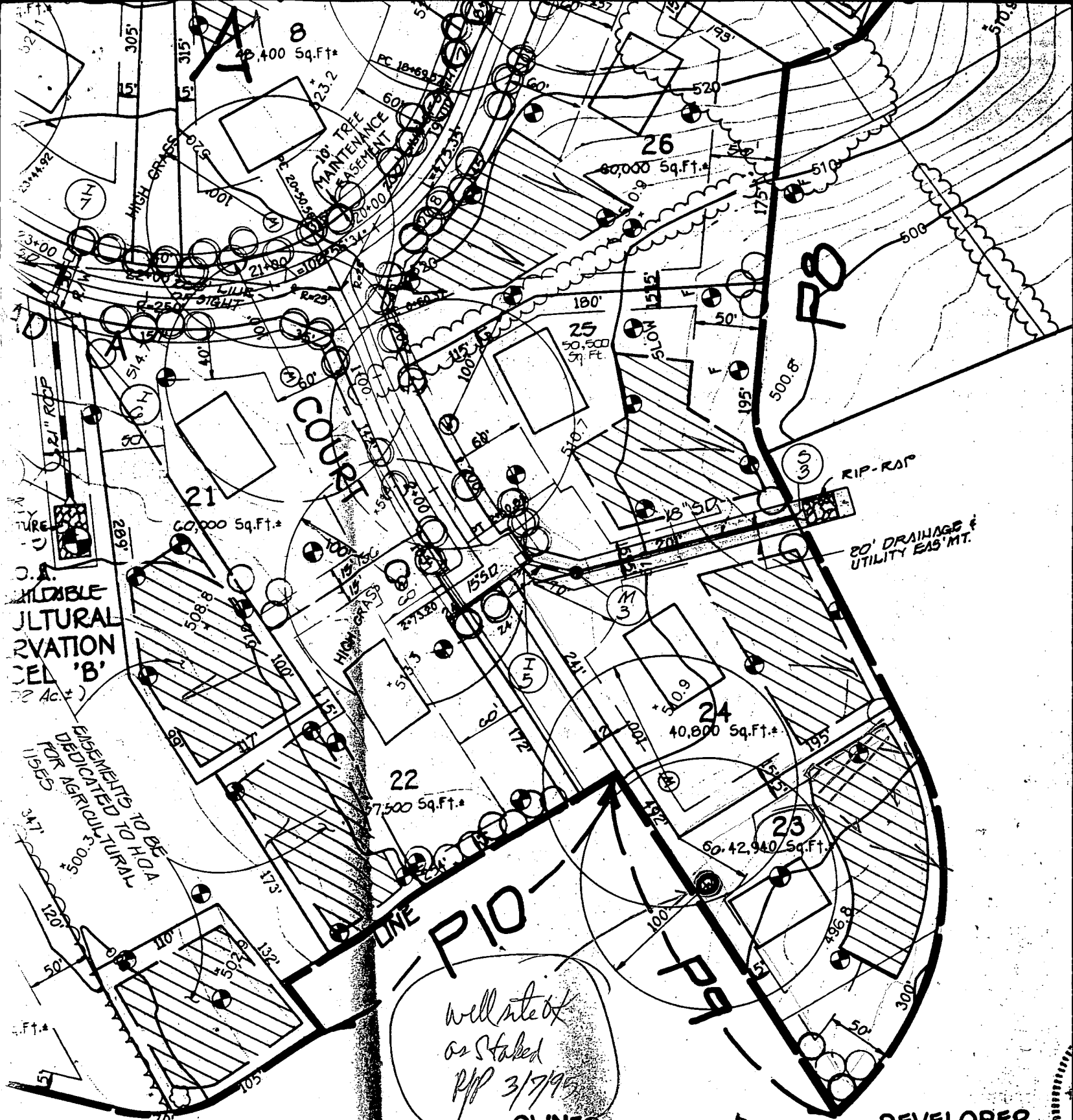
PUMPING TEST HOURS PUMPED (nearest hour) 3; PUMPING RATE (gal. per min. to nearest gal.) 4; METHOD USED TO MEASURE PUMPING RATE Bucket; WATER LEVEL (distance from land surface) BEFORE PUMPING 28 WHEN PUMPING 170; TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or 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 (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE 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) well 100' HALL SHOP RD. Side line





well site ok  
 as stated  
 RPP 3/7/95

**OWNER**

DR. PETER C. SCHEIDT, TRUSTEE  
 12730 HALL'S SHOP ROAD  
 HIGHLAND, MARYLAND 20777

**DEVELOPER**

MRS. SUSAN SCHEIDT  
 12730 HALL'S SHOP ROAD  
 HIGHLAND, MARYLAND 20777

*Paternal Gift Farm  
 Prelim Plan P-94-09*



# APPLICATION

PERCOLATION TESTING

A 49406  
P \_\_\_\_\_

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

DISTRICT \_\_\_\_\_  
DATE 7/7/93

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 SUSAN SCHEIDT Pinecrest Builders, Inc.

ADDRESS 12730 HALLS SHOP ROAD HIGHLAND MD. 20777 PHONE 531-2326

AGENT OR PROSPECTIVE BUYER FISHER COLLINS AND CARTER INC.

ADDRESS 9171 BALTIMORE NATIONAL PIKE SUITE 100 ELLICOTT CITY MD. 21042 PHONE 461-2855

PROPERTY LOCATION:  
SUBDIVISION PATERNAL GIFT LOT NO. 12 23

ROAD AND DESCRIPTION HALLS SHOP ROAD / 216 & 108  
(7113 ALEXANDER DRIVE)

TAX MAP 40 PARCEL # 396, 179 & 90

**BLDG. PERMIT SIGNED  
AND RETURNED 5-5-93**  
*Serial # B10117314*

SIZE OF LOT 1 AC. ± TYPE BLDG. S.F.D. - 4 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. Zacharia Y. Fisch (Agent)  
(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

lot 12 49406 And

COUNTY #

SOIL PROFILE  
585 A

Orange Sandy  
lean - LS  
30-60%  
Stoney

1st  
Brown  
SL-LS

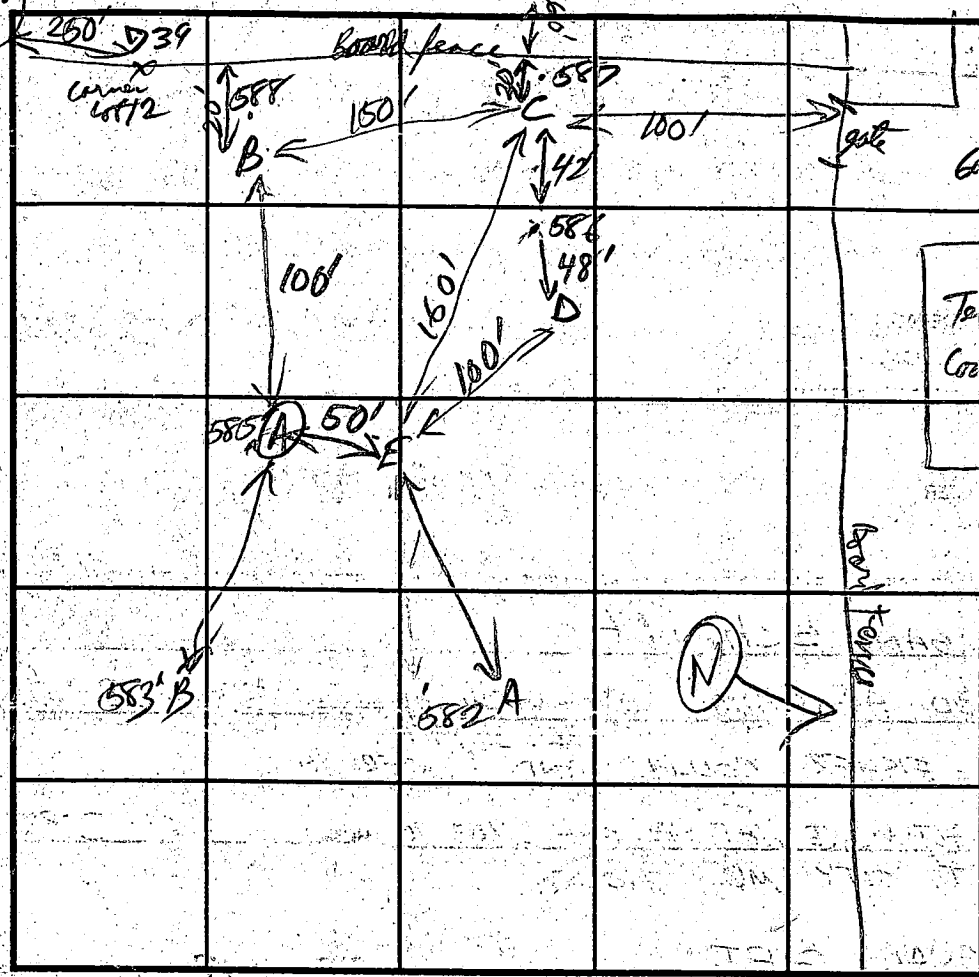
70-80%  
Stoney

SOIL PROFILE  
585 B

Orange  
SL-hsl  
Flat Rock  
@ 1-3' only

Mid Brn  
Orange  
SL-LS

Cream,  
pale orange  
+ tan  
Sand  
-LS



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

587 C

Red Brn  
cl

Brn  
- 1st Brn  
- 2nd Brn  
v. Nic  
Lotion

588 B  
Orange C

Mid Yellow  
- pale yellow Brn  
SL

Mix of above  
E white  
pale purple red  
+ yel  
+ Red Brn  
Nic. Lora  
+ SL

586 D

W Brn  
+ Tan

hsl

Mid Brn  
- Tan  
- Cream  
LS-Sand

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7-9-93	585 A	6'	Too Arduous				Fail
8-4-93	F	OK below 6'	12:40:14	12:49:46	12:49:46	1:09:30	20 min
7-9-93	588 B	6'	11:40:00	11:41:30	11:41:30	1:44:42	3 min
		OK below 4'					
	589 C	6'	11:37:00	11:42:00	11:42:00		
		OK below 4'					
	586 D	2'	12:03:00	12:04:30	12:04:30	12:06:00	1 1/2 min
		OK below 1 1/2'	11:57:40	11:58:40	11:59:40		
7-9-93	E	6'	11:51:00	11:52:30	11:52:30	11:54:30	2 min
		OK below 3'					

REMARKS \_\_\_\_\_

TYPE OF SOIL Charter

TESTED BY R. P. Kelly ALSO PRESENT Don Brady

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME \_\_\_\_\_ TRENCH WIDTH \_\_\_\_\_

INLET DEPTH \_\_\_\_\_ MAXIMUM BOTTOM DEPTH \_\_\_\_\_ SQ. FT./BEDROOM \_\_\_\_\_





Howard County Health Department

To: File

Ron Pinkley recommends that to ensure enough repair area for septic system, an irrigation well (non-potable) is not drilled on the lot. Part of ex. easement (septic) compromised due to unexpected rock where trenches would have gone.

From: SRK

Date: 6/24/02

HD-170



