

5/12/93

AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49326

A REPAIR

DISTRICT 2nd 3rd

DATE 4/8/93

DATE SYSTEM APPROVED 5/12/93

INSPECTOR M. Riffkin

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

Jack Fyock

IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 13775 Triadelphia Road, Glenelg, Maryland 21737 PHONE 988-9270

SUBDIVISION Woodmark LOT 21, Blk. B, Sec 2 ROAD 12241 Pointer Hill Court

PROPERTY OWNER William Mehlman

ADDRESS 12241 Pointer Hill Court, Ellicott City, Maryland 21042 Phone: 531-2728

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS 4

125 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 70±

REPAIR: PURPOSE - To replace overflowing dry well.

CALL FOR AN INSPECTION WHEN GROUND IS OPENED UP AND SANITARIAN WILL RECOMMEND

REPAIR SYSTEM

INLET 5', BOT 12, 75' TRENCH

PLANS APPROVED BY Craig D. Williams 5-7-93 JEN DATE 5/6/93

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

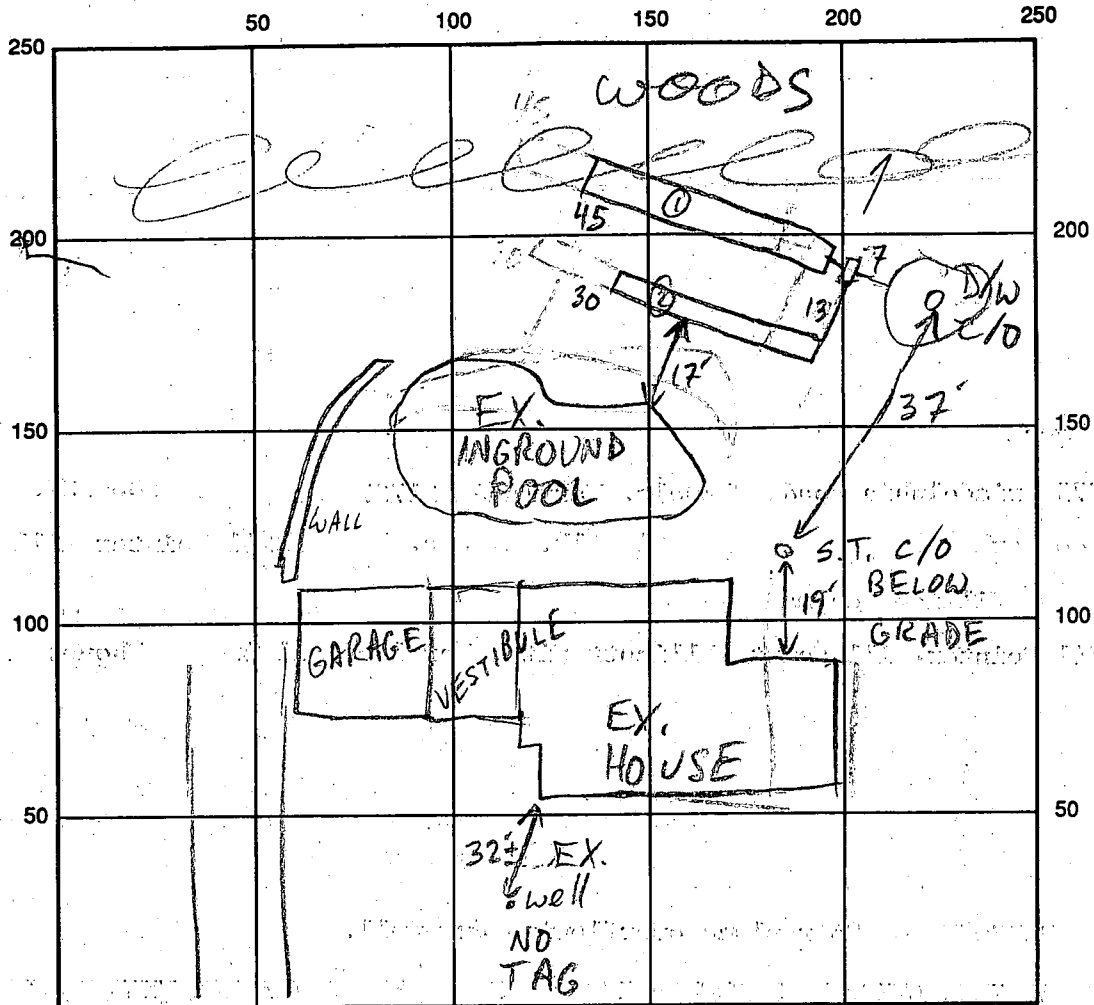
PERMIT VOID AFTER TWO YEARS

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**

P 49326



POINTER HILL CT INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL EX - OK CLEANOUTS S.T. NO C/O D/W'S C/O OK
 DISTRIBUTION BOX LEVEL OK - BAFFLE IN
 DRAIN FIELD/TITLE DEPTH 1 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5 1/2 FT.
 EFFECTIVE GRAVEL DEPTH 7 1/2 FT. TOTAL LENGTH 45 FT. 30 FT.
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 300 SQ. FT. 210 SQ. FT.
 DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.
 ABSORBENT AREA 510 SQ. FT.

REMARKS: 5/12/93 OK TO FINISH & COVER MR

DATE SYSTEM APPROVED 5/12/93 INSPECTOR M. Ripkin

System installed File
but not approved

PERMIT

P 17280
A 13013

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Indicate if house built 12/5/78 complete but not approved RH & DM

DISTRICT 3

DATE 8/2/72

Jack Fyock

INDEXED

IS PERMITTED TO INSTALL ALTER

ADDRESS Ten Oaks Road, Glenelg, Maryland 21737 PHONE 286-2939

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Woodmark, Inc. 12241 (Pointer Hill Court) ROAD Court "C" LOT 21, Blk. E, Sec. 2

PROPERTY OWNER Mark A. Wakefield, Jr. SUSAN GARZINO 531-2992

ADDRESS 231 Chatham Road, Ellicott City, Md. 21043 (AS OF 1/88)

SPECIFICATIONS 4 bedrooms

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

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

SEPTIC TANK CAPACITY 1200 GALLONS

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

OTHER DRY WELL - 100 sq. ft. absorbent sidewall area to begin below inlet pipe per bedroom. Maximum depth permitted for dry well below original gf grade is 12 ft. Inlet pipe 4 ft. below original grade. Place dry well 150 ft. from front lot line and 20 ft. from right sideline as seen when facing from Pointer Hill Court.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

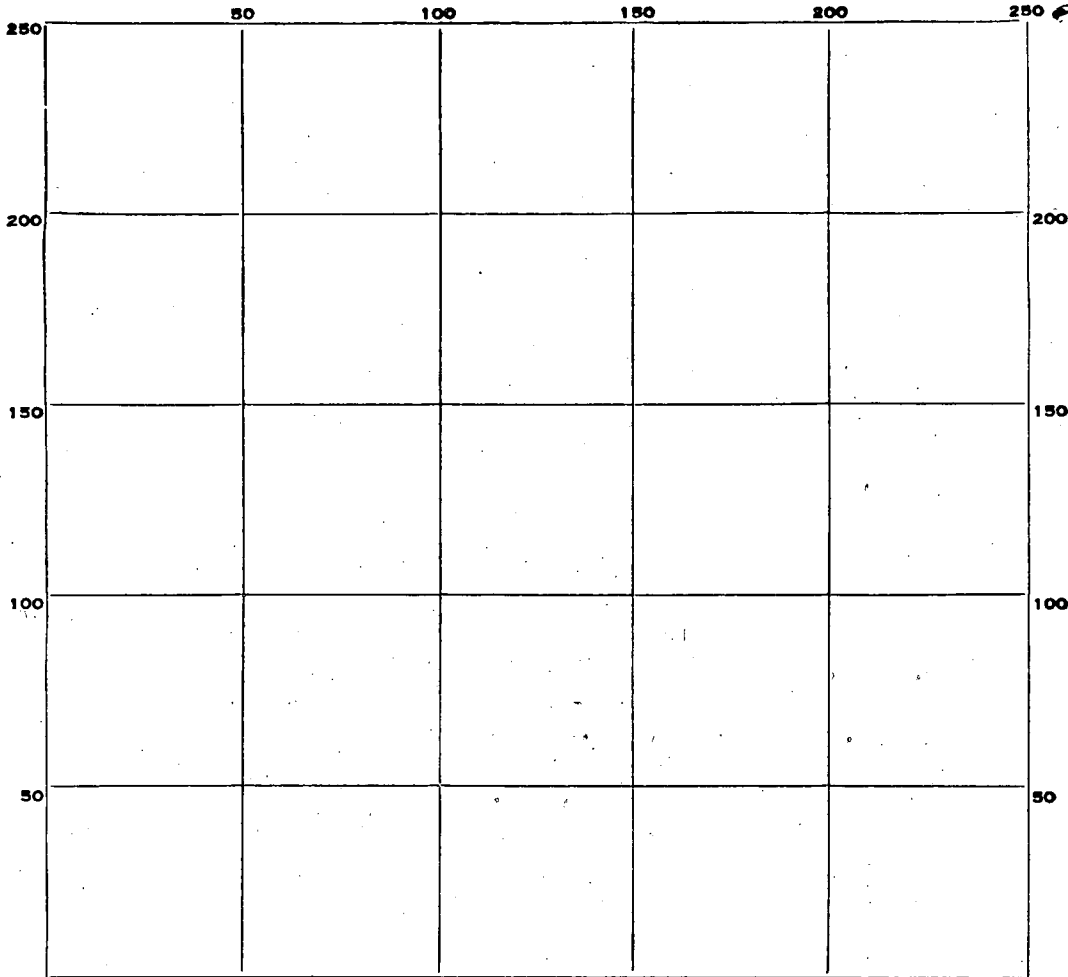
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL.

PLANS APPROVED BY Donald W. Monaghan DATE 3/12/68

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.

A 13013



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL _____ CLEANOUTS _____

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 _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 3/10/78 - HOUSE BUILT & OCCUPIED, 12241
POINTER HILL CT RHT.

DATE SYSTEM APPROVED _____ INSPECTOR _____

APPLICATION

A 13013

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Septic Tank 3 bedroom - ¹⁰⁰⁰ 750 gal.
" " " - 6000 gal.

DISTRICT 3

DATE 8/10/67

Dry Well - 100 sq ft absorbent sidewall once to begin below inlet pipe for bedroom. Max depth permitted for dry well below orig. grade is 12 ft. Inlet pipe 4 ft below orig. grade

Place Dry Well 15 ft from front lot line and 20 ft from right sideline as seen when facing from Cornerhill Rd

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 Woodmark, Inc., Mark A. Wakefield, Jr.

ADDRESS 231 Chatham Rd., Ellicott City, Md. PHONE HO 5-1345

PROPERTY LOCATION:

SUBDIVISION Woodmark, Inc. LOT NO. 21 ~~23~~ Blk. B, Sec. 2

ROAD AND DESCRIPTION Court "C"

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 275' x 200' x 205' x 330' TYPE BLDG: 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Mark A. Wakefield

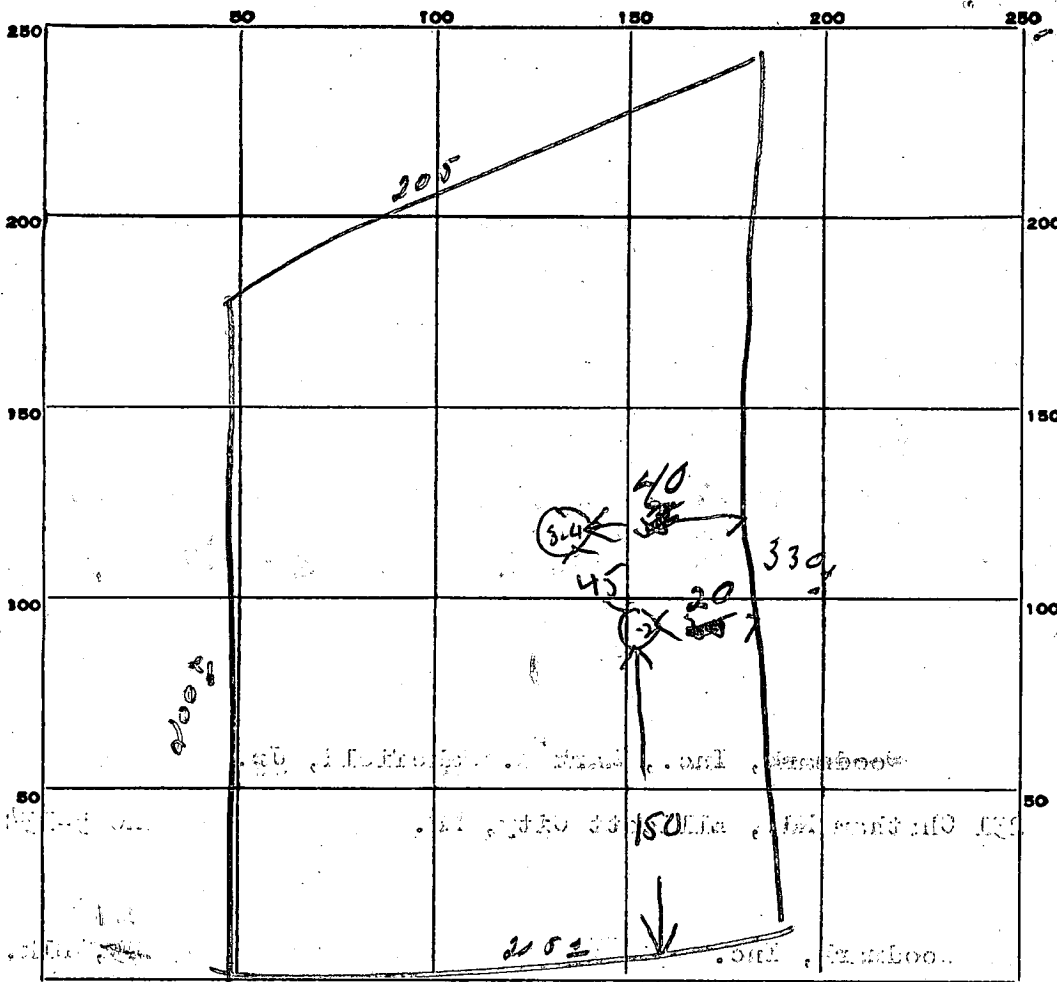
APPROVED BY [Signature] FOR [Signature] DATE 3-12-68
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Count C

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/15/67	1	4ft	10 48	10 53	10 53	11 04	11 min
	2	11ft	10 49	10 51	10 51	10 54	3 min
	3	4ft	10 52	10 55	10 55	11 02	7 min
40 C	4	14ft	10 53	10 54	10 54	10 56	2 min

SOIL AUGER FINDING

TESTED BY

JRM

REMARKS

use pit 1-2 for system

lot 28 B

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 8/10/67

A 13013

P _____

Relinquish

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 Woodmark, Inc., Mark A. Wakefield, Jr.

ADDRESS 231 Chatham Rd., Ellicott City, Md. PHONE HO 5-1345

PROPERTY LOCATION:

SUBDIVISION Woodmark, Inc. LOT NO. 21 ~~27~~ B11, B, Sec. 2

ROAD AND DESCRIPTION Court "C"

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 275' x 200' x 205' x 330' TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Mark A. Wakefield

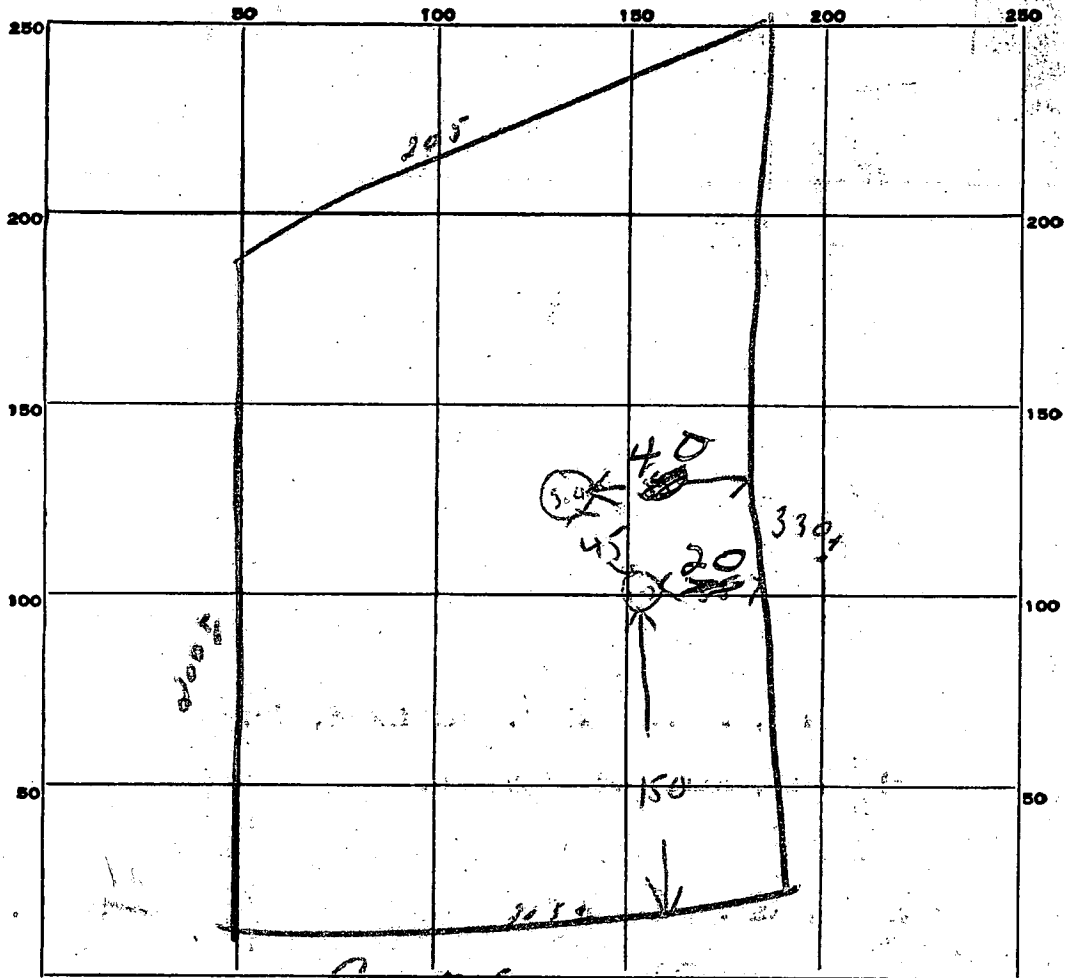
APPROVED BY [Signature] FOR [Signature] DATE 3-12-68
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/15/67	1	4 ft	10	10	10	11	11 min
	2	11 ft	10	10	10	10	3 min
	3	4 ft	10	10	10	11	7 min
	4	1 ft	10	10	10	10	2 min

SOIL AUGER FINDING

TESTED BY

REMARKS

See
use pit 1-2 for system

Lot 24 B

STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL

DWR PERMIT NUMBER

40-72-0221

FILL IN THIS FORM COMPLETELY

1 2 3 4 5 6 (SEQ. NO.) 04410

SEQUENCE NO. (DWR USE ONLY)

DATE RECEIVED (DWR USE ONLY)

OWNER: Robert Donald COL 15 LAST NAME FIRST NAME COL: 34 STREET OR RFD: 11218 Hanson Road COL 36 COL: 55 POST OFFICE: Plover City, Md. 21095 COL 57 COL: 76

DRILLER INFORMATION B 1 CONTINUED: 1 2 3 (SEQ. NO.) 6 DATE: 5-23-72 LICENSE NUMBER: 42 77 80

FIRST NAME: Robert DRILLER LAST NAME: Donald SIGNATURE: [Signature]

LOCATION OF WELL B 3 1 2 3 (SEQ. NO.) 6 COUNTY: Howard 8 9 10 (DO NOT ABBREVIATE COUNTY NAME) 21 SUBDIVISION: 2309119 42

SECTION: 2 44 46 LOT: 21 48 50 NEAREST TOWN: Magnolia 52 71 MILES FROM TOWN (ENTER 0 IF IN TOWN): 3 73 76 77 78

WELL INFORMATION B 2 1 2 3 (SEQ. NO.) 6 MAXIMUM PUMPING RATE (GALLONS PER MINUTE): 6 8 12 AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY): 500 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX) D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) F FARMING, AGRICULTURE, IRRIGATION I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. M MUNICIPAL WATER SUPPLY P PRIVATE WATER COMPANY T TEST MUST HAVE STATE HEALTH DEPT. APPROVAL

DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX) N NORTH E EAST NE NORTHEAST SE SOUTHEAST S SOUTH W WEST NW NORTHWEST SW SOUTHWEST

NEAR WHAT ROAD: Plover Hill Rd 11 NORTH SOUTH EAST WEST 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) N S E W 32 32 DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX): 1000 34 37 38 39

APPROXIMATE DEPTH OF WELL: 100 24 28 FEET

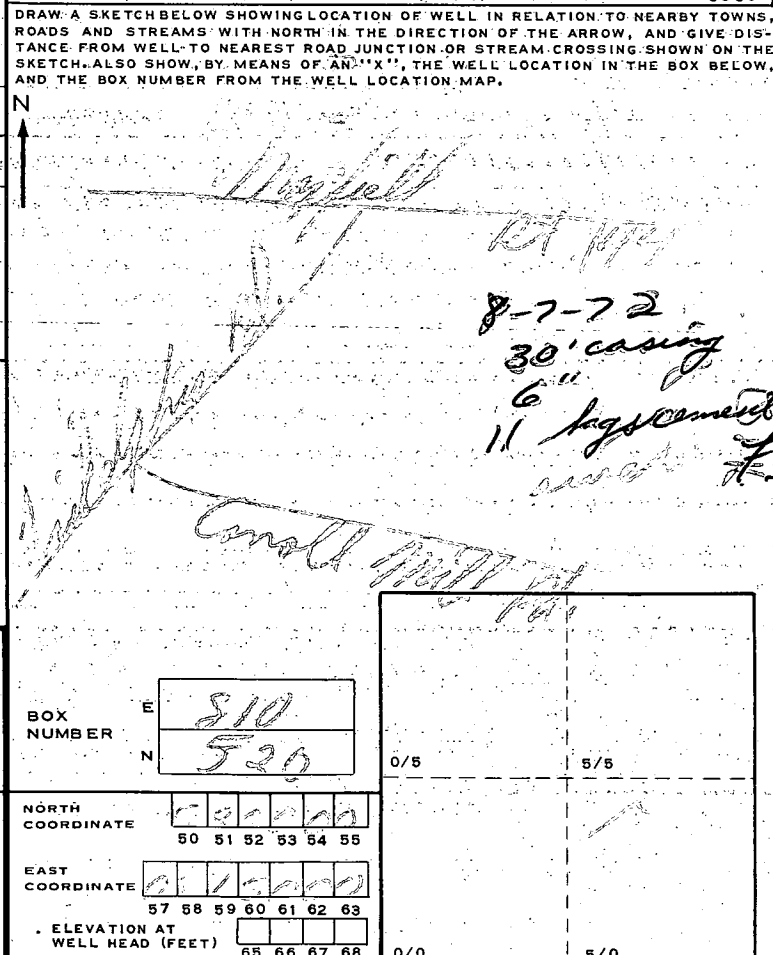
APPROXIMATE DIAMETER OF WELL: 6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) JETTED DRIVEN 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY) CABLE REVERSE-ROTARY DRIVE-POINT OTHER (DESCRIBE)

REPLACEMENT OR DEEPEINED 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 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY D THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)

NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY) APPROPRIATION PERMIT NUMBER: 54 ENGINEER REVIEW DISTRICT NO.: 63 FORCE: WRITE INITIALS IN BOX CONDITIONS: A E N S G W Q C L U 65 67 68 70 71 72 73 74 75 76 77 78 79

HEALTH DEPARTMENT APPROVAL B 4 CONTINUED: 1 2 3 (SEQ. NO.) 6 STATE HEALTH (CIRCLE BOX) S COUNTY NAME: Howard COUNTY NO.: 2907 DATE: 5-24-72 APPROVED BY: [Signature]



SPECIAL CONDITIONS 8-63 (DWR USE ONLY) 1 2 3 (SEQ. NO.) 6

C 1 01186
 SEQUENCE NO. (DWR USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 DEPARTMENT OF WATER RESOURCES
 STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401
WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION
FILL IN THIS FORM COMPLETELY
 COUNTY NUMBER

DATE RECEIVED (DWR USE ONLY) _____
 DATE WELL COMPLETED 09-12
 DEPTH OF WELL 220 (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-72-0221
 DRILLERS IDENTIFICATION NO. 47

OWNER Alaska Parish
 LAST NAME FIRST NAME
 STREET OR RFD 11212 Benson Highway Rd. POST OFFICE Chesold City, Md.

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

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
<u>1/2" Sand</u>	<u>0</u>	<u>3</u>	
<u>Sandy</u>	<u>3</u>	<u>30</u>	
<u>hard rock</u>	<u>30</u>	<u>150</u>	
<u>hard rock</u>	<u>150</u>	<u>220</u>	

GROUTING RECORD
 WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) YES NO
 TYPE OF GROUTING MATERIAL (CIRCLE BOX)
 CEMENT C M BENTONITE CLAY B C
 NO. OF BAGS 11 NO. OF POUNDS 1100
 GALLONS OF WATER 70
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM 0 FT. TO 30 FT.
 (ENTER 0 IF FROM SURFACE)

C 3
 1 2 3 (SEQ. NO.) 6
PUMPING TEST
 HOURS PUMPED (TO NEAREST HOUR) 1
 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 5
 METHOD USED TO MEASURE PUMPING RATE Bucket
 WATER LEVEL: (DISTANCE FROM LAND SURFACE)
 BEFORE PUMPING 35 (NEAREST FOOT)
 WHEN PUMPING 220 (NEAREST FOOT)
 TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX)
 AIR PISTON TURBINE
 CENTRIFUGAL ROTARY OTHER (DESCRIBE BELOW)
 JET SUBMERSIBLE

CASING RECORD
 INSERT APPROPRIATE CODE BELOW
 STEEL CONCRETE
 PLASTIC OTHER
 MAIN CASING TYPE _____
 NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) _____
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) _____

PUMP INSTALLED
 TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O)
 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO
 CAPACITY:
 GALLONS PER MINUTE (TO NEAREST GALLON) _____
 PUMP HORSE POWER _____
 PUMP COLUMN LENGTH (NEAREST FOOT) _____

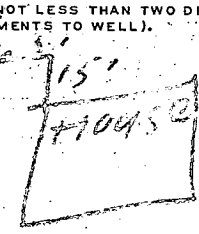
SCREEN RECORD
 INSERT APPROPRIATE CODE BELOW
 STEEL BRASS OR BRONZE OPEN HOLE
 PLASTIC OTHER

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)
 ABOVE LAND SURFACE (NEAREST FOOT)
 BELOW 2 (NEAREST FOOT)

C 2
 1 2 3 (SEQ. NO.) 6
DEPTH (NEAREST WHOLE FOOT)

EACH SCREEN	DEPTH (NEAREST WHOLE FOOT)	
	FROM	TO
1	<u>8</u>	<u>21</u>
2	<u>23</u>	<u>36</u>
3	<u>38</u>	<u>51</u>

SLOT SIZE 1, _____ 2, _____ 3, _____

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).


CIRCLE APPROPRIATE BOXES
 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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME W. J. ...
 (PLEASE PRINT)
 SIGNATURE W. J. ...

DIAMETER OF SCREEN 56 (NEAREST INCH)
 FROM _____ TO _____
 GRAVEL PACK _____
 IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX 68 F
 DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T TELESCOPE CASING W LOG Q OTHER DATA AVAILABLE