

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 49728

A REPAIR

DISTRICT 3rd

DATE 11/2/93

DATE SYSTEM APPROVED 9/27/93

INSPECTOR C.B.A.

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

03-282252  
INDEXED

Jack Fyock

IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER

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

SUBDIVISION Evergreen Valley Estates LOT 24, Sec. 4 ROAD 3009 Evergreen Way

PROPERTY OWNER John R. Coates

ADDRESS 3009 Evergreen Way, Ellicott City, Maryland 21042 Phone: 531-2475

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS

NUMBER OF BEDROOMS \_\_\_\_\_

\_\_\_\_\_ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED \_\_\_\_\_

REPAIR: To repair failing septic system.

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

REPAIR SYSTEM.

Please see A# 09652

C.B.A.

PLANS APPROVED BY Craig D. Williams

C.D.W.

DATE 9/27/93

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

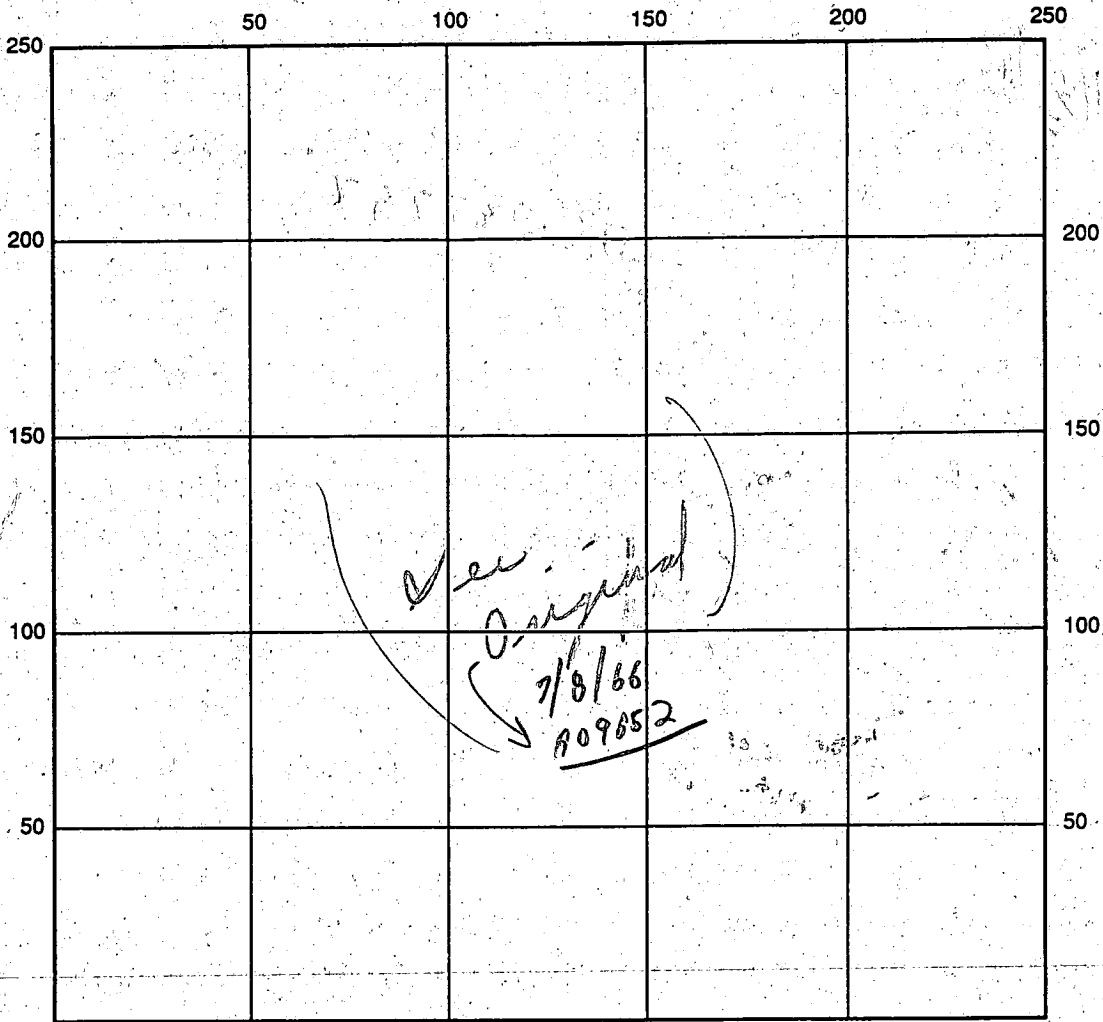
PERMIT VOID AFTER TWO YEARS

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**

49728



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL Erection Eves CLEANOUTS Erection

DISTRIBUTION BOX LEVEL OK (New - Badder is in)

DRAIN FIELD/TITLE DEPTH 10 <sup>+ average</sup> FT. TRENCH WIDTH 2 FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 7'+ FT. TOTAL LENGTH 0 35; 2 35 = 70+ FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 490 SQ. FT. (plus old system)

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA 490 <sup>+ old system</sup> SQ. FT.

REMARKS: 9/27 A.M. - Partial - ok to stone # (2) trench as go; ok to cover # (1) trench + up to # (2) trench; C.R.S.; P.M. Final - ok to cover; C.R.S.

DATE SYSTEM APPROVED 9/27/93 INSPECTOR Charles Bryan Theobald

7/8/66

# PERMIT

P 11646

A 09652

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

ELLICOTT CITY

DISTRICT 3

DATE 3/30/66

Hudson Construction Co. IS PERMITTED TO INSTALL  ALTER

ADDRESS 363 Chapel Avenue, Ellicott City, Md. PHONE HO 5-2205

A SEWAGE DISPOSAL SYSTEM LOCATED AT \_\_\_\_\_

SUBDIVISION John R. Coates Evergreen Valley Estates ROAD 3009 Evergreen Way LOT 24, Sec. 4

PROPERTY OWNER same as above

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%.

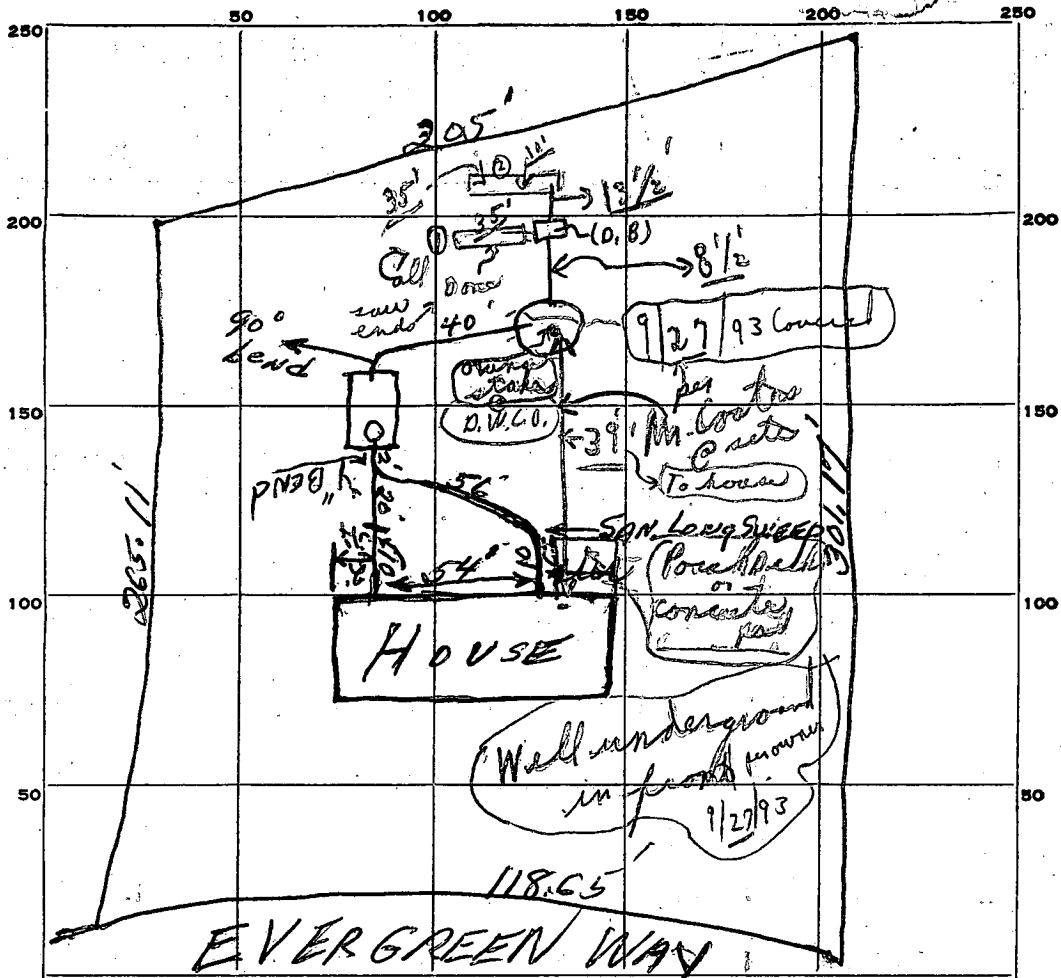
OTHER Dry well - 100 sq. ft. sidewall area below inlet pipe per bedroom.  
Inlet 4 ft. below grade.  
Place dry well 116 ft. from front lot line and 80 ft. from left side line  
as seen when facing lot from Evergreen Way.

PLANS APPROVED BY J. Kilmore DATE 6/2/65

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 096521



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD yes

SEPTIC TANK, LEVEL 1000 gal. concrete CLEANOUTS 8" Stand pipe

DISTRIBUTION BOX, LEVEL None

TILE FIELD, DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ IN. TOTAL LENGTH \_\_\_\_\_ FT. (See next page)  
{ for trench info. / C.R.F. }

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET 9 FT.

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

16  
9  
14

REMARKS 16 ft long each side by 9 ft. deep below the inlet -  
For side 576 sq. Ft. 4 bedrooms. J.H.

DATE SYSTEM APPROVED July 8, 1966 INSPECTOR J. Hennigan

*Preliminary*

# APPLICATION

A 09652

P \_\_\_\_\_

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

*Septic Tank - 3 bedrooms 750 gal  
4 bedrooms 1000 gal*

DISTRICT 3

DATE 2/17/65

*Dry Well - 100 ft sidewalk area below inlet pipe per bedroom. Inlet 2 ft below grade  
Place Dry Well. 116 ft from front lot line and 80 ft from left sideline as  
seen when facing lot from Evergreen Way.*

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 Hudson Construction Company, Inc.

ADDRESS 363 Chapel Avenue, Ellicott City, Md. PHONE HO 5-2205

PROPERTY LOCATION:

SUBDIVISION Evergreen Valley Estates LOT NO. 24 Sec. 4

ROAD AND DESCRIPTION Evergreen Way

OCCUPANT \_\_\_\_\_ PHONE \_\_\_\_\_

PERSON TO CONSTRUCT SYSTEM \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SIZE OF LOT 44,923 sq. ft. TYPE BLDG. 3 or 4  
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

SIGNATURE OF APPLICANT /s/ Madeline Leonardi

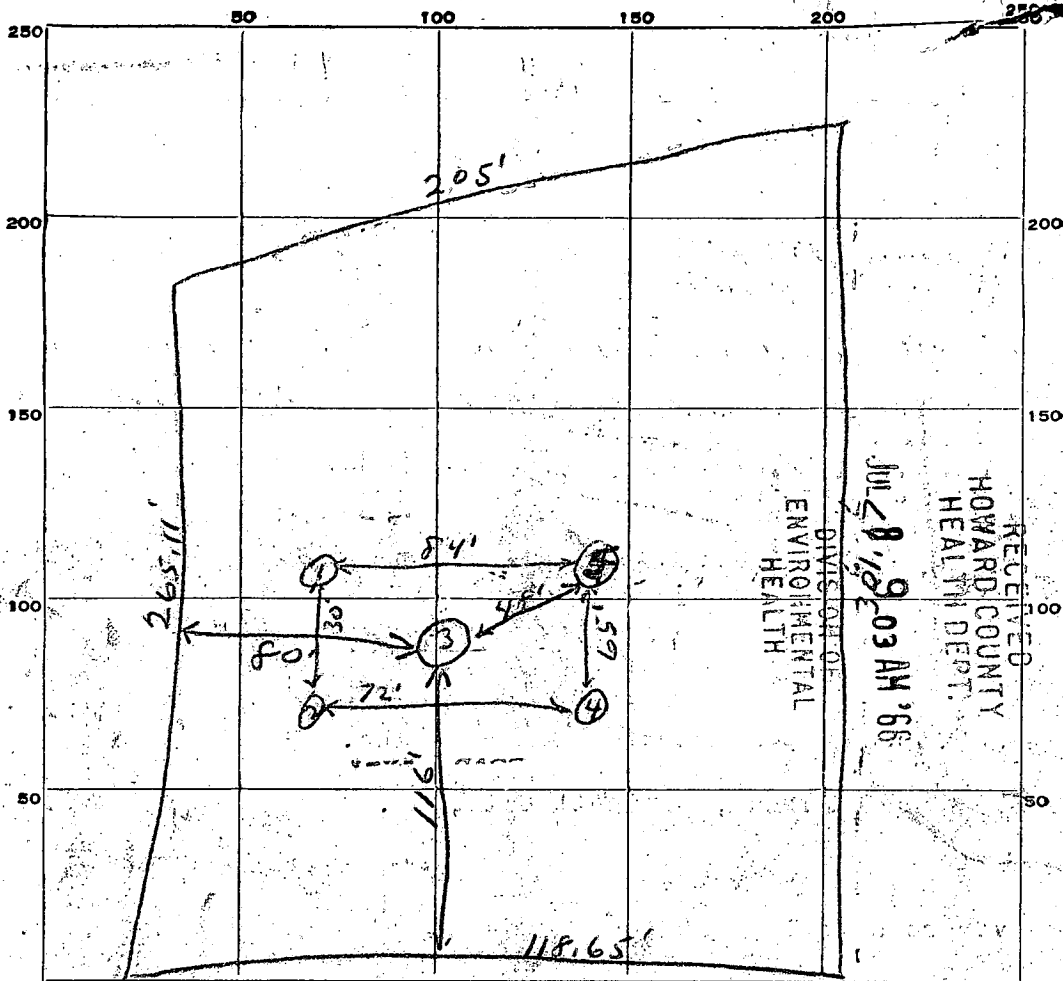
APPROVED BY J. Kalman FOR Drucill DATE 2-2-65  
(KIND OF SYSTEM)

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.

EVERGREEN WAY

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/14/65	1	5	10:00	10:12	10:12	10:22	10 min
"	2	5	10:02	Overtime			
"	3	10	10:07	10:10	10:10	10:14	4 min
"	4	5	10:10	10:18	10:18	10:35	17 min
"	5	5	10:12	10:13	10:13	10:15	2 min

SOIL AUGER FINDING \_\_\_\_\_

TESTED BY *JHK*

REMARKS \_\_\_\_\_

ALSO PRESENT \_\_\_\_\_

LOT NO. 24 Sec 4

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

APPLICATION FOR PERMIT TO DRILL WELL

*70.650*  
*A 09653*

Owner Hudson Const. Co  
Street or R. F. D. 8  
Post Office Ellicott City

Driller Ed. Brown License Number 388  
Street or R. F. D. R 3 Mt. Airy  
Post Office R 3 Mt. Airy  
Date 5/15/66

Quantity of Water to be Produced 3 G.P.M.  
Total Quantity Needed For Use 300 G.P.D.  
Use for Water Home  
Approximate Depth of Well (feet) 100  
Method of Drilling to be used Rotary

Location of Well  
Subdivision Evergreen Dalloy Estates  
Section 3 Lot 24  
County Howard  
Nearest Town Mayfield  
Distance from Town 1 1/2 mile  
Direction from Town South East

Is this a Replacement Well? Yes - No  
If YES, indicate date abandoned well is to be sealed: \_\_\_\_\_  
and by whom: \_\_\_\_\_

Description of Location of Well  
(This information should be definite enough to permit locating well on a county map).  
Near what road Evergreen Way  
On which side of road North  
(North, East, South, West).  
Distance from road 5ft

PERMIT TO DRILL WELL  
(Not To Be Filled In By Driller)

Well Permit No. Ho-66-W-325

Samples of Cuttings Required by Department:  Yes  No  
Owner Requires Permit to Appropriate Water:  Yes  No  
Owner Has Permit to Appropriate Water:  Yes  No

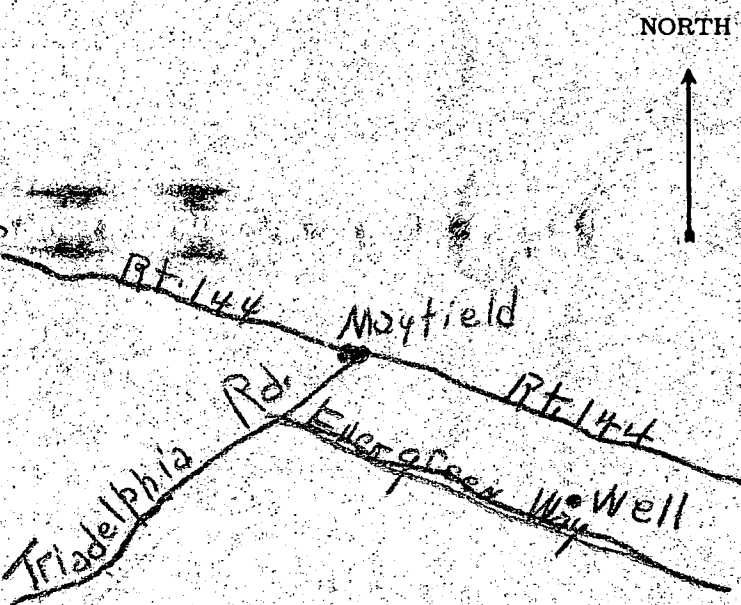
Appropriation Permit No. \_\_\_\_\_  
The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.

Basil W. Meier Director May 19 1966 Date

THIS PERMIT IS NOT TRANSFERABLE WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT  
Special conditions that must be observed:

Health Department Approval of Application  
Howard County Department of Health  
or  State Department of Health  
Approved by Palmer F. Wins  
Title Director  
Date 5/18/66

Draw a sketch below showing location of well in relation to nearby towns, roads and streams with north in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch.



**THIS REPORT  
MUST BE SUBMITTED  
WITHIN 30 DAYS  
AFTER COMPLETION  
OF THE WELL**

**WELL COMPLETION REPORT**

**WELL DESCRIPTION**

**WELL LOG**

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

**CASING AND SCREEN RECORD**

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

	FEET from ___ to ___		DIAM. (inches)	FEET from ___ to ___
	4 clay			
	30 Sand + gravel		6 1/4"	34
	25 Shale Rock		Pipe	
	16 Slate + mica Rock			
WELL	225			

Permit Number Ho-66-W-325  
Owner Hudson Const. Co.  
Address Edgewood City  
Subdivision Emeraldgreen Estates  
Section 3 Lot 24

**PUMPING TEST**

Hours Pumped 2  
Type of Pump Used air  
Pumping Rate \_\_\_\_\_  
Gallons per Minute 4

**WATER LEVEL**

(Distance from land surface to water)  
Before Pumping 30 Ft.  
When Pumping \_\_\_\_\_ Ft.

**APPEARANCE OF WATER**

Clear X Cloudy \_\_\_\_\_  
Taste \_\_\_\_\_  
Odor None

Height of Casing Above Land Surface 2 Ft.

**PUMP INSTALLED**

Type \_\_\_\_\_  
Capacity \_\_\_\_\_  
Gallons per Minute \_\_\_\_\_  
Gallons per Hour \_\_\_\_\_  
Pump Column Length \_\_\_\_\_ Ft.

**LOCATION OF WELL ON LOT**

Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.

NORTH



DATE WELL WAS COMPLETED

I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

Ed. Brown, Well Driller

Well Driller License No.: 81

8/20/66

HOWARD COUNTY  
MARYLAND STATE DEPARTMENT OF HEALTH  
8 Church Road  
ELLCOTT CITY, MARYLAND  
WELL COMPLETION REPORT

This report must be submitted within 10 days after completion of the well.

This is to certify that the well which has been completed on the below property has been constructed and disinfected in compliance with the regulations and specifications of the State Board of Health.

The following construction and performance characteristics were noted:

1. Type, diameter and length of casing 1/4" Pipe 34 ft
2. Total depth of well 225 ft
3. Type, diameter and length of strainer none. Size of screen openings \_\_\_\_\_
4. Method of sealing top and bottom of screen \_\_\_\_\_
5. Method of grouting Cement. Quantity, cement used 188 lbs. Gals. water 10
6. Standing water level (depth below ground surface when not pumping) 30 ft
7. Yield of well in gallons per minute 4; elevation of water surface when pumped at the designated rate. \_\_\_\_\_
8. Number of hours pump operated at stipulated rate during pumping test 2
9. Record of any other pumping performance none
10. Log of materials encountered during drilling 4 ft. Clay 30, Sand + gravel 25 ft. Shale Rock 166 ft. Slate + mica Rock
11. Physical appearance of water at end of final pumping test clear
12. Variation in vertical alignment (how much the well casing varies from a truly plumb line) throughout its depth ✓
13. Disinfected by 1/2 ounces of gab. Clorox % Chlorine (Brand name \_\_\_\_\_)

Property Owner Hudson Const. Co. Address Ellicott City, Md  
Location of property Evergreen Estates Mayfield  
Health Department Number \_\_\_\_\_ Dept. of Water Resources Permit No. Ho-66-W325

Date: 8/20/66, 1966. Ed. Brown  
Signature of Well Driller

INSTRUCTIONS: This form is to be completed in duplicate and certified by the well driller upon completion of each drilled well. One copy will be forwarded to the property owner by the Health Department along with the final approval of the well.