

2-1-95
10:11:00
2/2/95
10:30

Tax ID 05-413958

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50500

A 37784

DISTRICT 5th

DATE 01/31/95

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

DATE SYSTEM APPROVED 2/2/95

INSPECTOR DKS

INDEXED

WCC, Ltd. Plumbing & Heating, Inc. IS PERMITTED TO INSTALL X ALTER

ADDRESS 1807 Gillis Farms Road, Narbonne, Maryland 21797 PHONE 489-4873

SUBDIVISION Clearview Estates LOT 28 ROAD 12106 Duskview Court

PROPERTY OWNER Scott Development Harry & Deborah

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 100 feet from right lot line and 170 feet from front lot line (Cul-de-Sac) as viewed when standing at front lot line. Install trenches on contour in both directions from distribution box (i.e. toward right and toward left lot lines).

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 8/3/94 DKS

PLANS APPROVED BY Ronald J. Pinkley DATE 5/26/92

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

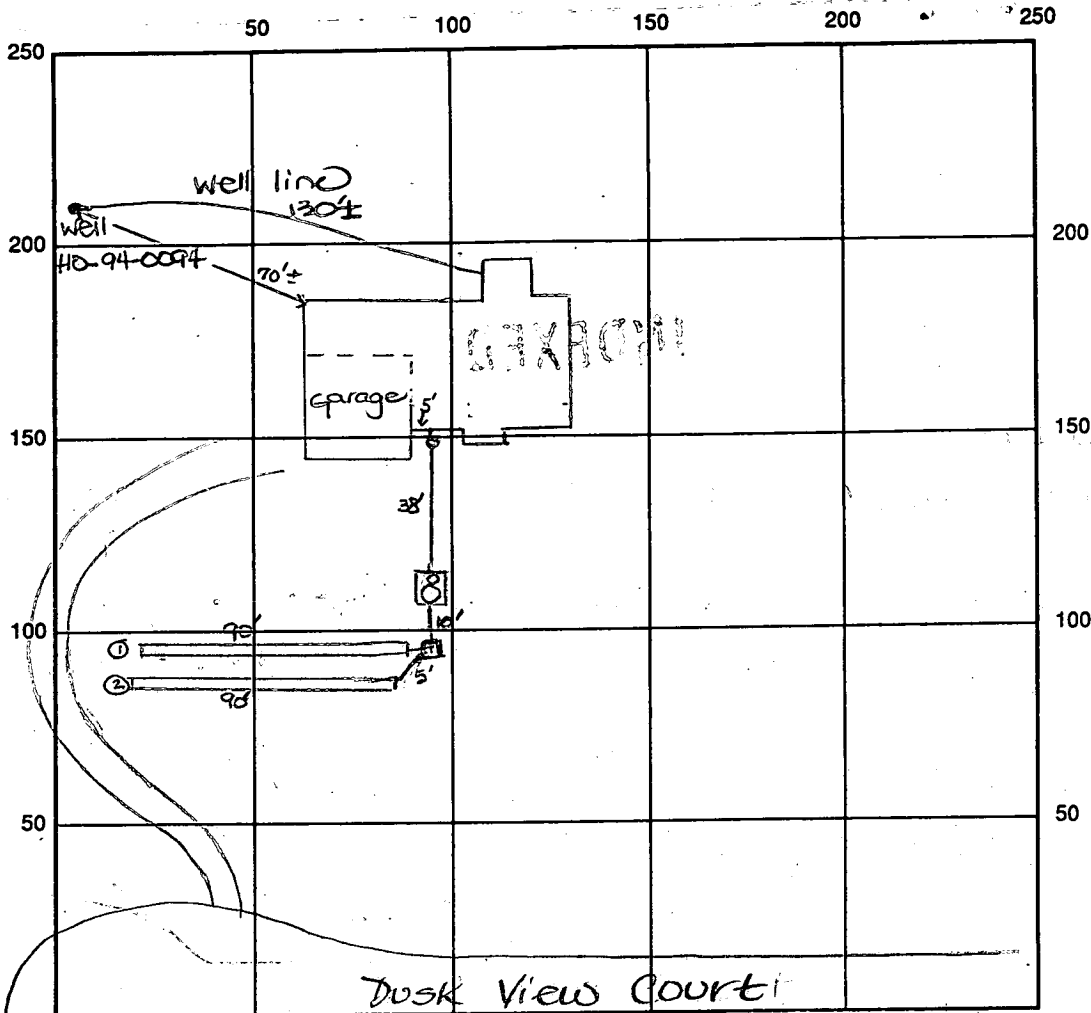
PERMIT VOID AFTER TWO YEARS

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**

A 37784



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one at house, manhole on st

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH ① 90 FT. ② 90 FT. → 180' total

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS: 2/1/95 A.M. OK to cover from house to s.t.
and stone trenches. DKS

2/2/95 Final - OK to cover all work. DKS

DATE SYSTEM APPROVED 2/2/95 INSPECTOR [Signature]

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 37784
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 473 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____
DATE 10/10/86
June 30, 1986

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Scott Development Conrad J. and Patricia Langenfelder Martha V. Langenfelder
ADDRESS 11904 Clarksville Road 5511 Hamilton Avenue
Clarksville, Maryland 21029 PHONE Baltimore, Maryland 21206

PROPERTY LOCATION:

SUBDIVISION Langenfelder Farm Clearview Est Sec 2 LOT NO. 11 New Lot - #28
ROAD AND DESCRIPTION Maryland Route 108 and Shepherd Lane (12106 DUSKVIEW COURT)

SIZE OF LOT 3.0 AC. TYPE BLDG. Residential
(NUMBER OF BEDROOMS) _____

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 NOT REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Steven P. Murray
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10-24-86 Rec. Satisfactory, Hold For Subdivision Plat. S. Add

BLDG. PERMIT SIGNED
AND RETURNED 7/29/86
Serial # 54376-
ST-D. G. Bedorn

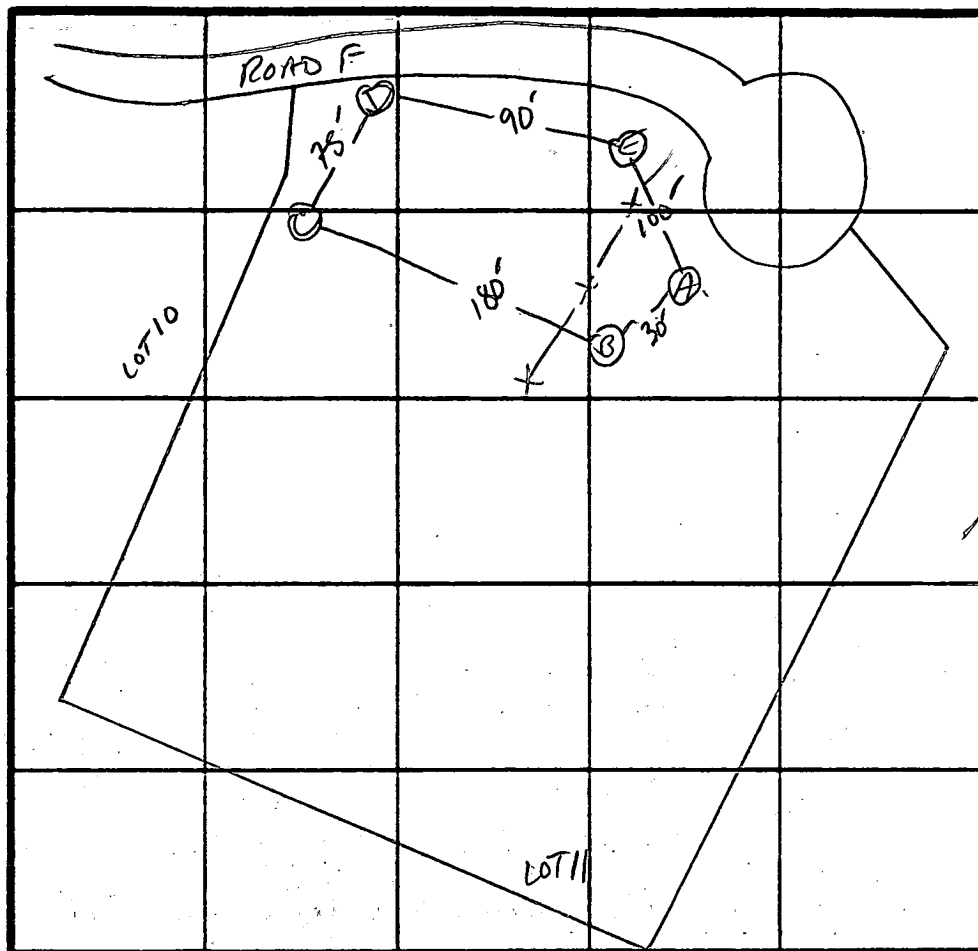
THIS IS NOT A PERMIT

A 37784

Ⓢ Ⓣ Ⓤ

SOIL PROFILE

0	AP
10"	Yellow Bk to orange B1. silt loam 9-12% clay 10-15% FRSP.
4'	TAN to yel. GR. SAND loam highly infusible 10-15% FRSP.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

V:TD 108

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
10/24/86	C V	5' 13.5	10:52 Uniform	10:54 Soil below 4"	10:54	11:00	6min	
	D V	13	same as C	w/ more yellow			BR. Sand Lm.	
	E V	12	same as C					
	A V	5' 12"	11:09 SIMILAR TO B	11:14	11:14	11:25	11 min	
	B _M	5.5' 8'	11:03 11:03	11:05 11:04	11:05 11:04	11:09 11:07	4 min 3 min	
	B V	12	SIMILAR TO ABOVE w/ MORE CLAY VS 5"					

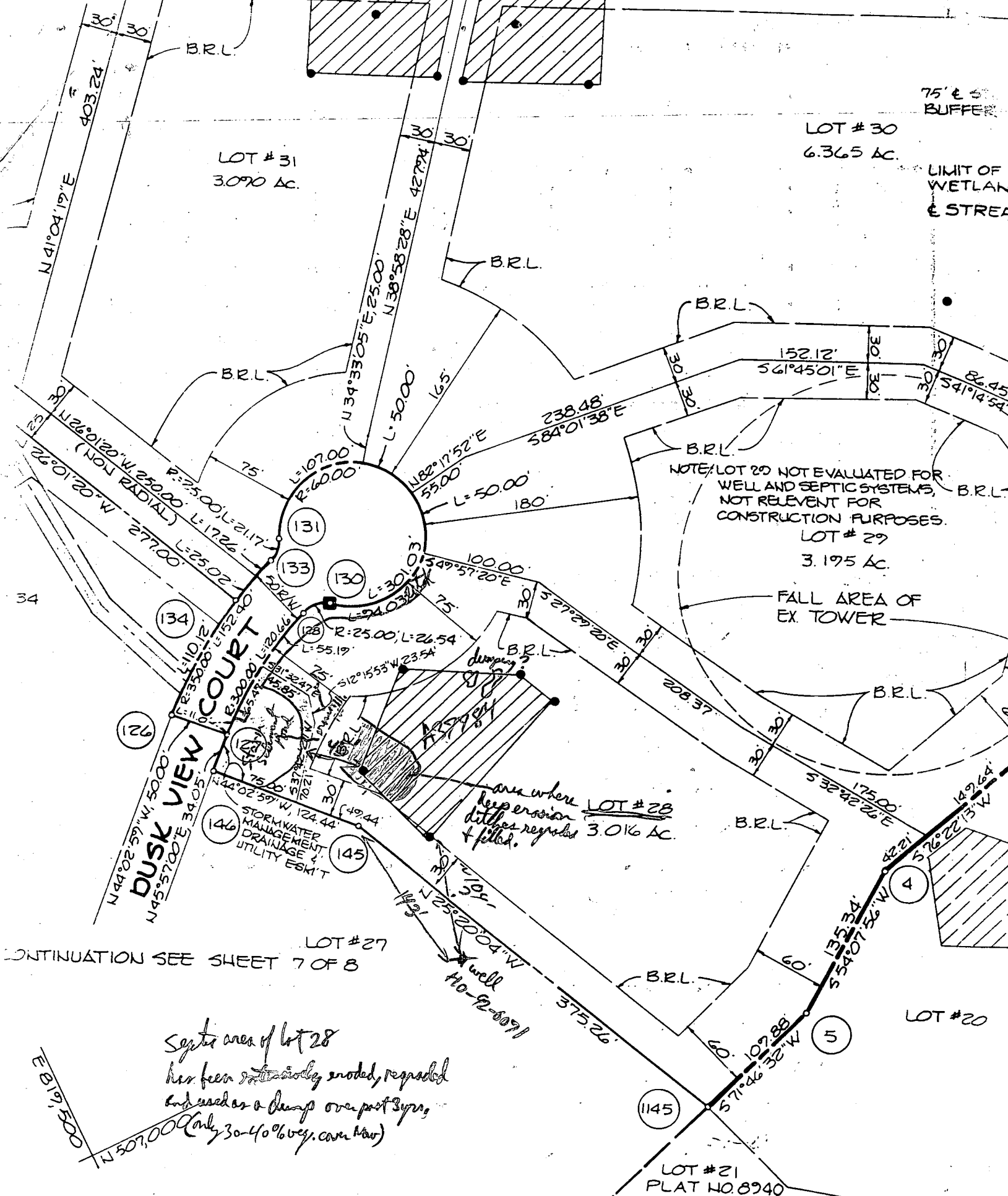
REMARKS Holes per Plat - Slightly diff than Plat

TYPE OF SOIL Glenelg Chert

TESTED BY S. Abel

ALSO PRESENT GAMP NADUP
Allen B. Miller

EHS 12 10/89

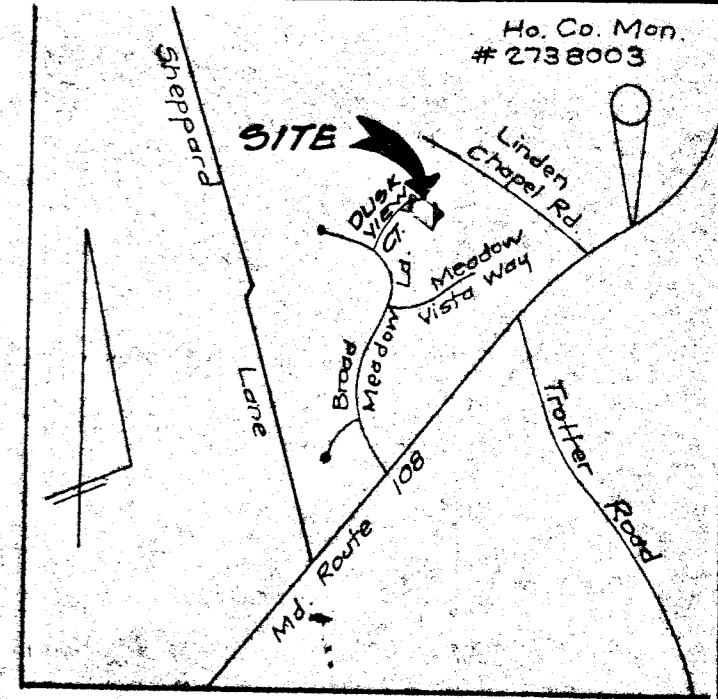


CONTINUATION SEE SHEET 7 OF 8

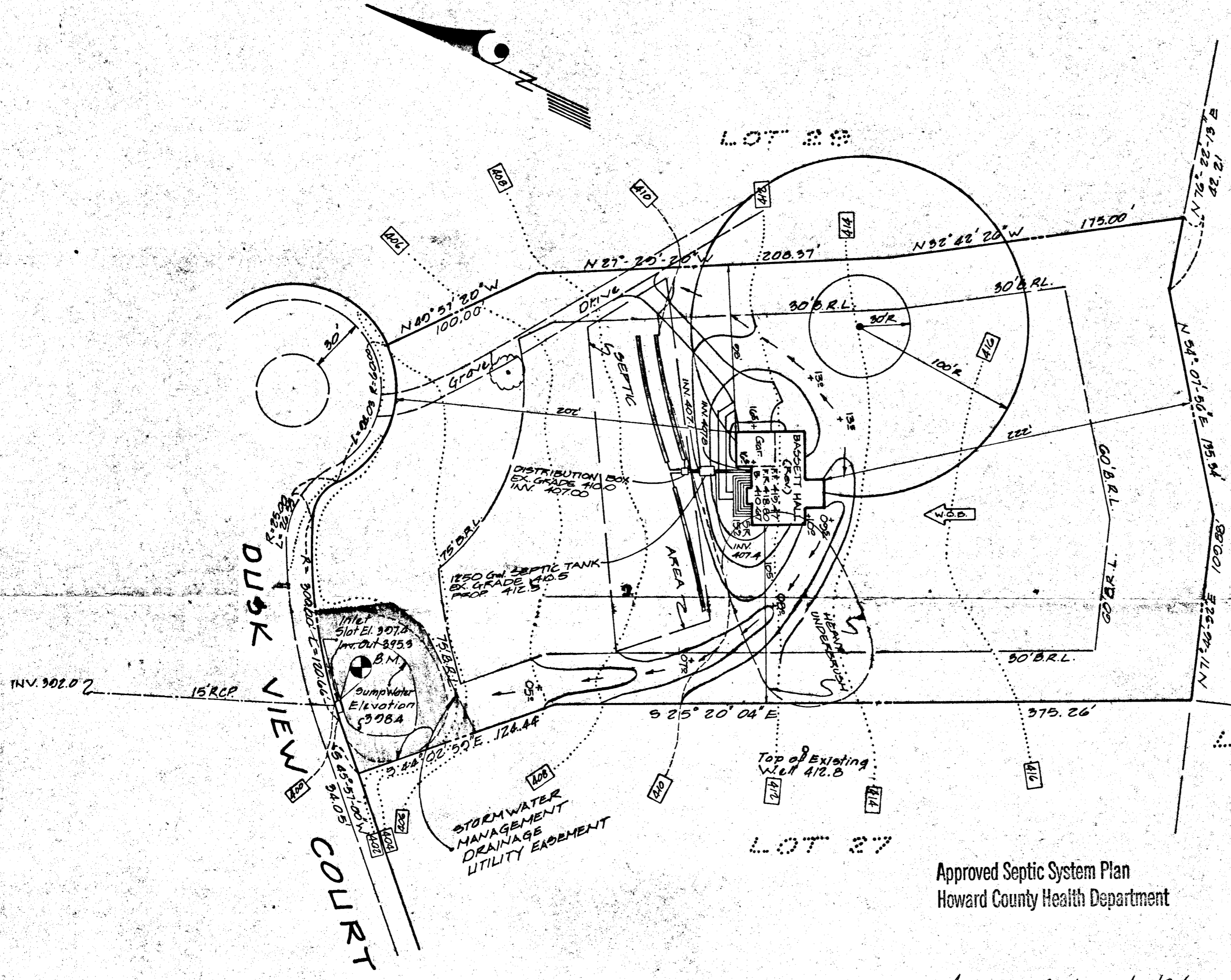
*Septic area of lot 28
has been extensively eroded, regraded
and used as a dump over past 3 yrs,
(only 30-40% veg. cover now)*

- DENOTES 4" x 4" x 36" CONCRETE MONUMENT
- DENOTES 1/2" Ø PIPE OR IRON PIN SET

ENGINEER
RIEMER MUEGGER
3105 NORTH
ELLCOTT CITY, MD



VICINITY MAP
Scale: 1" = 2000'



LEGEND

- Contour Interval 2 FT.
- Existing Contour
- Proposed Contour
- Spot Elevation +84.5
- Direction of Drainage

GENERAL NOTES

1. Existing topography was field run by CLARK • FINEFROCK & SACKETT, INC.
2. Plat reference number 9711.
3. Bench Mark (B.M.) Left Right Corner Inlet Assumed Elevation 400.00
4. Length of trenches to be determined at time of Permit Issuance.

Approved Septic System Plan
Howard County Health Department

Amy McMillen 7/20/94
Signature Date

CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS <small>705 MINISTREL WAY • COLUMBIA, MD 21046 • (410) 991-7500 • BALTO • CROFTON • WASH</small>		
DESIGNED J.M.E.	SITE DEVELOPMENT PLAN LOT 28 CLEARVIEW ESTATES SECTION TWO 5TH ELECTION DISTRICT HOWARD COUNTY MARYLAND	SCALE 1" = 50'
DRAWN C.A.F.		DRAWING 10F1
CHECKED J.M.E.		JOB NO. 92-078
DATE 4-14-94		FILE NO. 92-078X
FOR: 6007 DEVELOPMENT P.O. Box 8607 Gaithersburg, Md. 20898		

1	Move House location; Rev. Septic system; Rev. Drainage per H.C. Health Dept. Comments	5-17-94
NO.	REVISIONS	DATE

B 1 00615

SEQUENCE NO. (DP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER

HO-94-0094 fill in this form completely

THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS

Date Received (APA)

040794

OWNER INFORMATION

SCOTT DEVELOPMENT

MOR 8607

SMITHERSBURG MD 20898

B 3

LOCATION OF WELL

HOWARD

8 COUNTY

CLARKSVILLE

SECTION 2 LOT 28

CLARKSVILLE

52 NEAREST TOWN

MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION

George F. Easterday

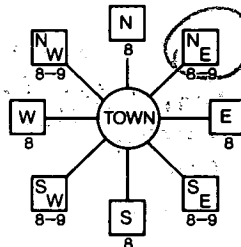
Franklin Easterday, Inc.

265 Brown Church Rd., Mt. Airy, Md. 21771

Signature: George F. Easterday Date: 4/7/94

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Duque View Ct NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD ENTER FT or MI 50 FT

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

Howard Co. A37784 COUNTY NAME COUNTY NO.

STATE SIGNATURE DATE ISSUED 060294 A. McMillen 6/2/95

CO SIGNATURE EXP. DATE

NORTH GRID 507000 EAST GRID 0820000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

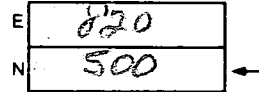
METHOD OF DRILLING (circle one)

- Bored (or Augered) Jetted Jetted & Driven
Air-Rotary Air-PerCussion Rotary (Hydraulic Rotary)
Cable Reverse-Rotary Drive-Point

- SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER wells

Handwritten notes: 6/16/94 2:00 location - OK using 48" x open 34" joint - 10 bags RP 6/16/94

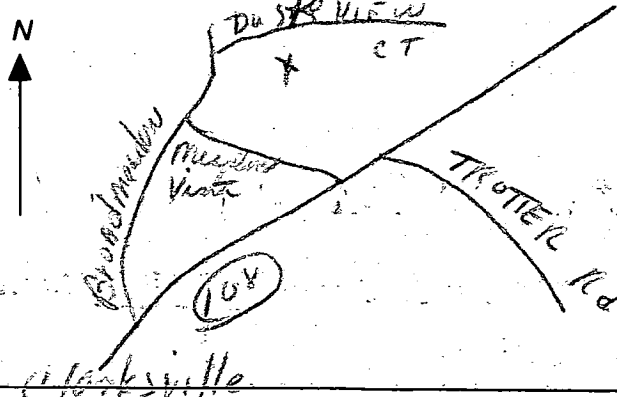
WRITE THE BOX NUMBER FROM THE MAP HERE



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
This well will deepen an existing well

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



Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE 4 M PERMIT No. HO-94-0094

SPECIAL CONDITIONS

C-1 5163

SEQUENCE NO. (DENV 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 A37784

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

ST/CO USE ONLY DATE RECEIVED 040794

DATE WELL COMPLETED 061799

Depth of Well 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-94-0094

OWNER Scott Development last name Duskview Ct. first name TOWN Clarksville SUBDIVISION Clarkview Est. SECTION LOT 28

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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Topsoil, Sandy clay, Br. micaceous sandstone, Tan sandstone, Granite, Tan sandstone, Granite, Tan sandstone, Granite.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 10 NO. OF POUNDS 4000 GALLONS OF WATER 50 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 34 ft.

CASING RECORD casing types insert appropriate code below ST CO STEEL CONCRETE PL OT PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) ST 6 40

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 OPEN HOLE PL OT PLASTIC OTHER

DEPTH (nearest ft.) 112 40 400

CIRCLE APPROPRIATE LETTER 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. 40

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q 70 72 74 75 76

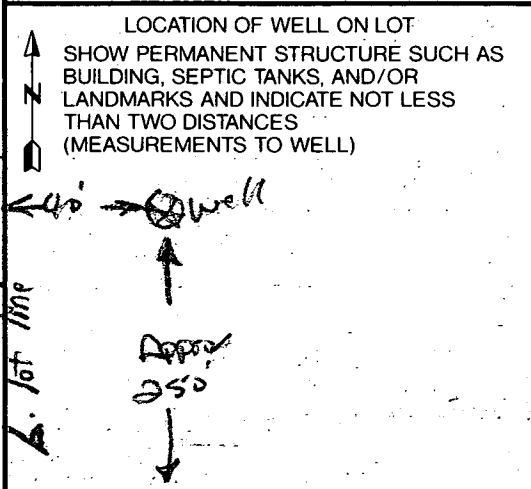
TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 6 METHOD USED TO MEASURE PUMPING RATE PUMP TEST WATER LEVEL (distance from land surface) BEFORE PUMPING 34 WHEN PUMPING 122 TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other (describe below) J jet 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 (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)



COUNTY