

12/13/88
461-9933

File

12/13 A.M. ① P.C.O. c.B. ✓
P.O. ② P.C.O. c.B. ✓

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

05-391660

P 43584

A 36145

DISTRICT 5th

DATE 1/6/89

DATE SYSTEM APPROVED 12/13/88

INSPECTOR C.B. ✓

UNINDEXED

Jack Fyock

IS PERMITTED TO INSTALL X ALTER

ADDRESS _____ PHONE 988-9270

SUBDIVISION Triadelphia Mill Farms ROAD 13942 Hallowell Ct. LOT 15

PROPERTY OWNER William and Sarah Eichhorn

ADDRESS _____

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 2000 GALLONS ✓ NUMBER OF BEDROOMS 5 ✓

TRENCHES - ~~100~~¹⁶³ feet of trench needed. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3 feet below original grade. 6 feet of stone below distribution pipe.

LOCATION - Place the first trench 230 feet down the left (384.91') lot line and 140 feet off the same lot line as seen when facing the lot from Right-of-way off Hallowell Court. Run trench(s) on contour toward front right side of lot.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. AK/CW

PLANS APPROVED BY Sid Abel/C. Williams DATE 1/26/88

COVER NO WORK UNTIL INSPECTED AND APPROVED

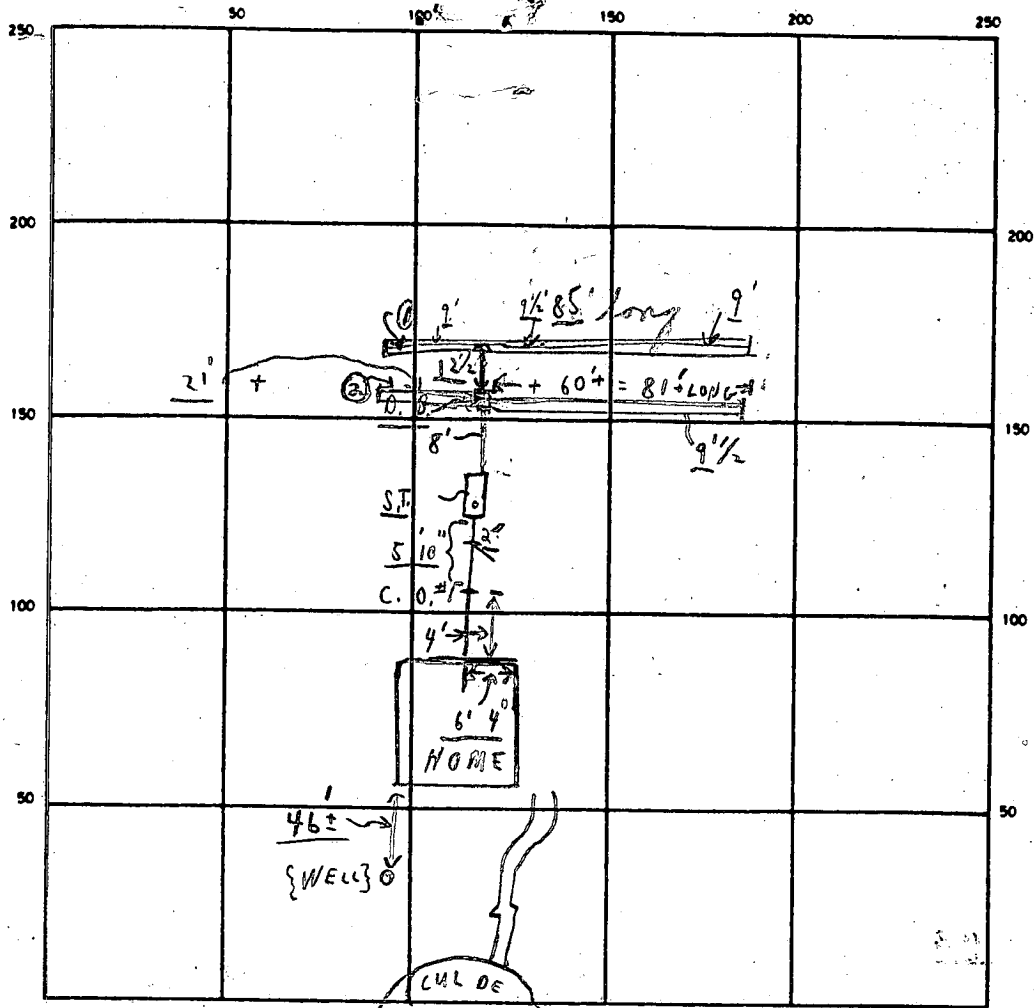
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

- NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS
- 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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES
- 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 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 PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED
- NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

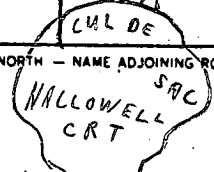
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A36145



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE



SEPTIC TANK LEVEL OK CLEANOUTS OK C.O.#1 OK

DISTRIBUTION BOX LEVEL OK (Baffles in)

DRAIN FIELD/TILE FIELD DEPTH 9 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 6 FT. TOTAL LENGTH 166 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 996 SQ. FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 996 SQ. FT.

REMARKS 12/13/89 Partial - ok to continue, stickers left on 1/2 unit. ^① Partial - trench ^② ok for rest of stones. ^③ Moved to S.T. C.O. Final - OK
TO COVER ALL WORK. C.O. Permit signed and stickers
also on S.T. C.O. - MR FYOCK ADDING MORE TRENCH TO FINISH
STONE AT SITE.

DATE SYSTEM APPROVED 12/13/88 INSPECTOR Charles Bryan Stecker

C1 5372

SEQUENCE NO. (OEP 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 A 36145

DATE RECEIVED

8 9 10 11 12 13

DATE WELL COMPLETED

15 16 17 18 19 20 032387

Depth of Well

22 23 24 25 26 400 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL"

28 29 30 31 32 33 34 35 36 37 H2-B1-1740

OWNER S. K. HORN (last name) WILLIAM (first name) TOWN DAYTON

STREET OR RFD HOLLOWELL CT. SUBDIVISION TRIADELPHIA MILL FARM SECTION LOT 15

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. Includes handwritten entries: Sand 0-52, 91.74 mica rock 52-400.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC NO. OF BAGS 13 NO. OF POUNDS 1222 GALLONS OF WATER 78 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 54 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) SH 6 60

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.) 40 50 400 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

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 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

DRILLERS IDENT. NO. 738

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

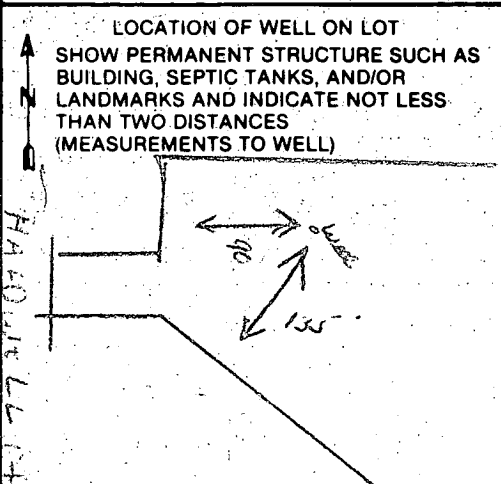
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min. to nearest gal.) 1 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING 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) (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 (to nearest gallon) PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height) above below LAND SURFACE (nearest foot)



FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1740
 Location of property (road) HALLOWELL CT.
 Subdivision TRJADOLPHIA MILL FARM Lot 15 Block Plat Sec.
 Well Driller JESSEPH MAYNE Owner EICHORN, WILLIAM

Depth of well 400'
 Distance of measuring point (M.P.) above ground 1 1/2
 Static water level (S.W.L.) below M.P. 28'

I. High rate pumping -- reservoir drawdown

Time pump started 8:15 Pumping rate 12 gal.
 Total time 45 min to reach pumping water level 240 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 8 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	991	5 min.		12
8:45	165	5		12
9:00	240	6		10
9:15	240	54		1 1/10
9:30	241	54		1 1/10
9:45	243	54		1 1/10
10:00	246	60		1
10:15	245	60		1
10:30	245	60		1
10:45	245	60		1
11:00	245	60		1
11:15	245	60		1
11:30	245	60		1
11:45	245	60		1
12:00	245	60		1
12:15	245	60		1
12:30	245	60		1
12:45	245	60		1
1:00	245	60		1
1:15	245	60		1
1:30	245	60		1
1:45	245	60		1
2:00	245	60		1
2:15	245	60		1
2:30	245	60		1
2:45	245	60		1

B 1 5269

SEQUENCE NO. (OEP USE ONLY)

3/23/87
WAM
Gest

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

MD-81-1740

fill in this form completely

Date Received

8 13

OWNER INFORMATION

15 Last Name: PICHORW Owner First Name: WILLIAM

36 Street or RFD: 2400 MEMORIAL RD

57 Town: MD State 72 Zip: 20770

B 3

LOCATION OF WELL

8 COUNTY: 21

23 SUBDIVISION: 42

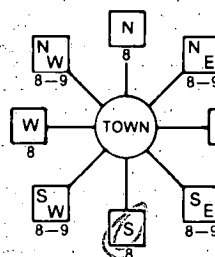
SECTION: 44 46 LOT: 15 48 50

52 NEAREST TOWN: 71

MILES FROM TOWN (enter 0 if in town): 3 73 76 77 78

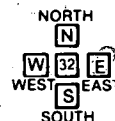
B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD: Halowell Court 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 490 37 DISTANCE FROM ROAD

ENTER FT or MI 38 39

B 2 WELL INFORMATION

2 APPROX. PUMPING RATE (GAL. PER MIN.): 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 500 14 20

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: HANOVER COUNTY NO: A-36145

OEP SIGNATURE: DATE ISSUED: STATE HEALTH INSERT S.

102086 B Nuyon 04/30/87

NORTH GRID: 504000 EAST GRID: 0799000

APPROXIMATE DEPTH OF WELL: 300 24 28 FEET

APPROXIMATE DIAMETER OF WELL: 6 INCH NEAREST

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
CABLE REVerse-ROTary DRive-POINT
other

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 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)

APPROP. PERMIT NUMBER: GAP

FORCE INITIALS IN BOX: PERMIT NO. MD-81-1740

SPECIAL CONDITIONS

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
Sketch showing location of well in relation to nearby towns and roads.

- ① 54 FT OPEN HOLE
- ② 60 FT CASING 2 FT OUT OF GROUND
- ③ LOCATION PROBABLY OK BUT
CANNOT TELL FOR SURE (IN WOODS)
- ④ 13 BAGS

5

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 36/45

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: ~~903-8880~~ 461-9933

DISTRICT _____

DATE 10/28/65

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 William & SARAH EICHMAN
ADDRESS 9390 Edmonston Rd #302 GREENBELT, MD PHONE 474-4843

PROPERTY LOCATION:

SUBDIVISION TRIDELPHIA MILL FARMS LOT NO. 15

ROAD AND DESCRIPTION Hallowell Ct, Dayton, MD. Flag lot in woods 400'
off circle at end of Hallowell Ct.

SIZE OF LOT 3.85 ± TYPE BLDG. 4 Bedrooms
(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 NON-REFUNDABLE UNDER ANY CIRCUMSTANCES. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT. Which

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

APPLICATION

A 29062

P _____

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 5th

DATE 10/16/78

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

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 Tridelpha Mill Farms Partnership

ADDRESS 90 R. Hallwood PHONE 286-2988

PROPERTY LOCATION: Sandy Spring, Md 20860 Final # 15

SUBDIVISION Tridelpha Mill Farms LOT NO. 15-Sheet 1

ROAD AND DESCRIPTION S. side of Tridelpha Mill Rd 1,500' E. of

Shanbridge Rd, Dayton

SIZE OF LOT 3.1 acres TYPE BLDG. 4 bed - single family dwg
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE ---

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE

SIGNATURE OF APPLICANT Richard Hallwood

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

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

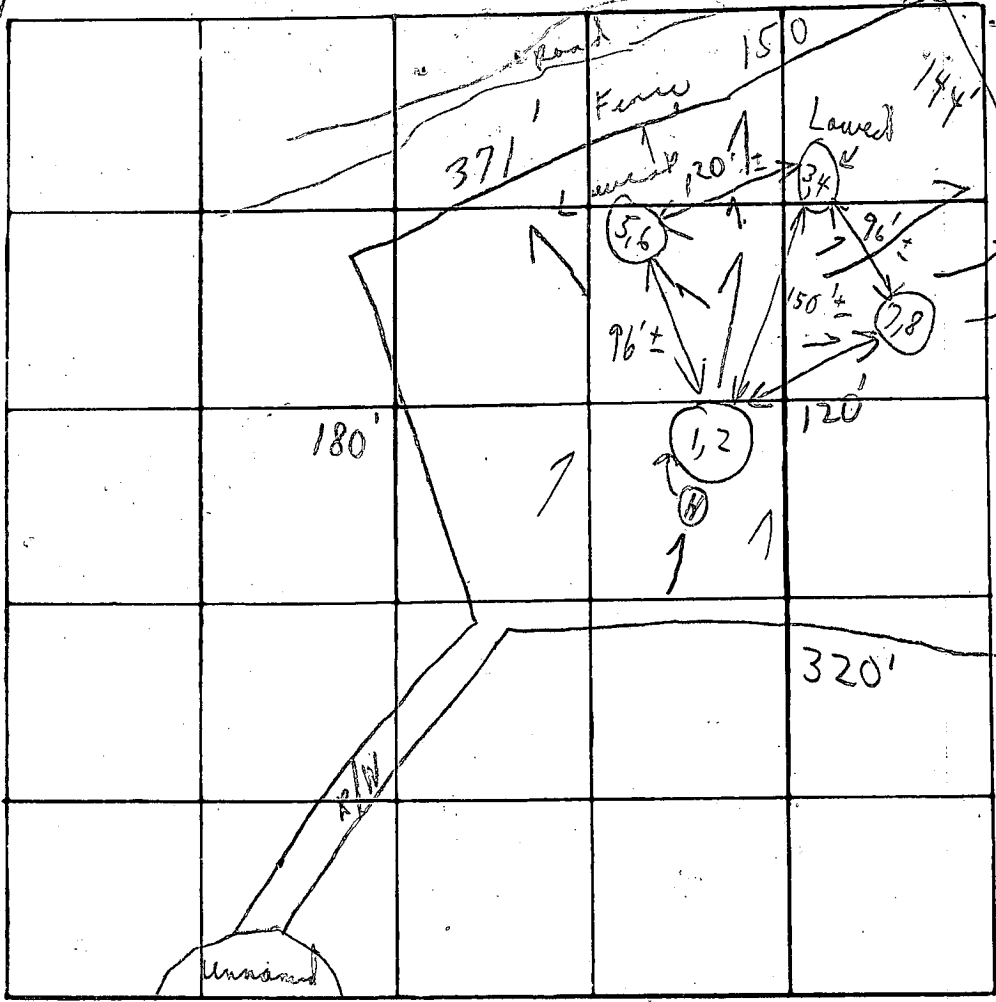
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

15 sheet 1

Field sheet
 Test per
 stake
 #14



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Soil Profile
 Below
 clay
 sandy
 loam

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/14/78	1	3 1/2'	2:52	2:53	2:53	2:54	1 m
	① 2	11 1/2'	2:52	2:55	2:55	3:01	6 m
	3	4'	2:13	2:14	2:14	2:16	2 m
	4	11'	2:13	2:14	2:14	2:16	2 m
	5	4 1/2'	2:35	2:37	2:37	2:49	12 m
	6	11 1/2'	2:35	2:36	2:36	2:38	2 m
	7	3 1/2'	2:19	2:22	2:22	2:26	4 m
	8	11'	2:21	2:23	2:23	2:27	4 m
							8 33

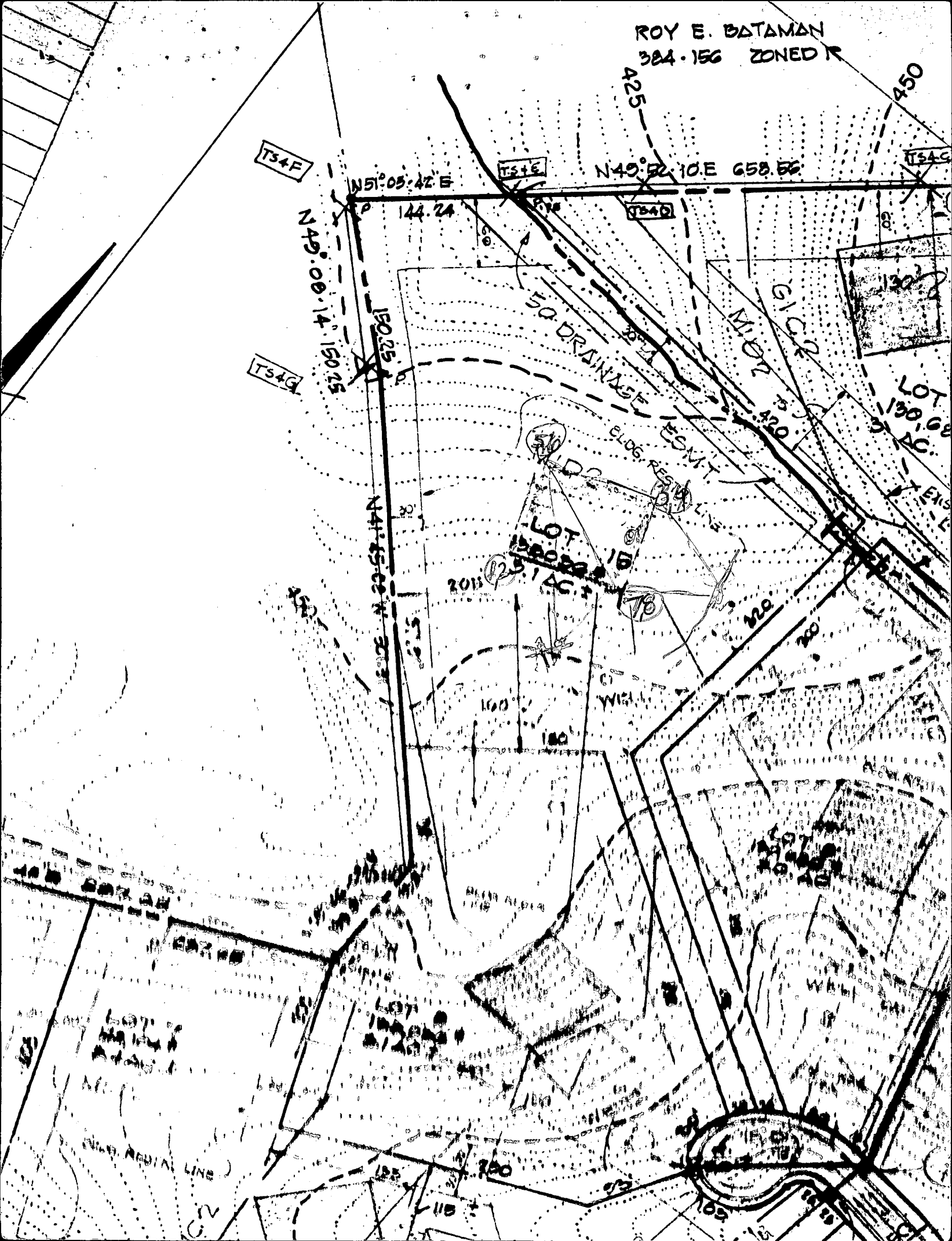
} Some
 sediment
 when out
 Sample 3 1/2'
 5 min
 120 #/B.R.

REMARKS Tests in woods { Hold for certified holes }

TYPE OF SOIL C.O.L.D

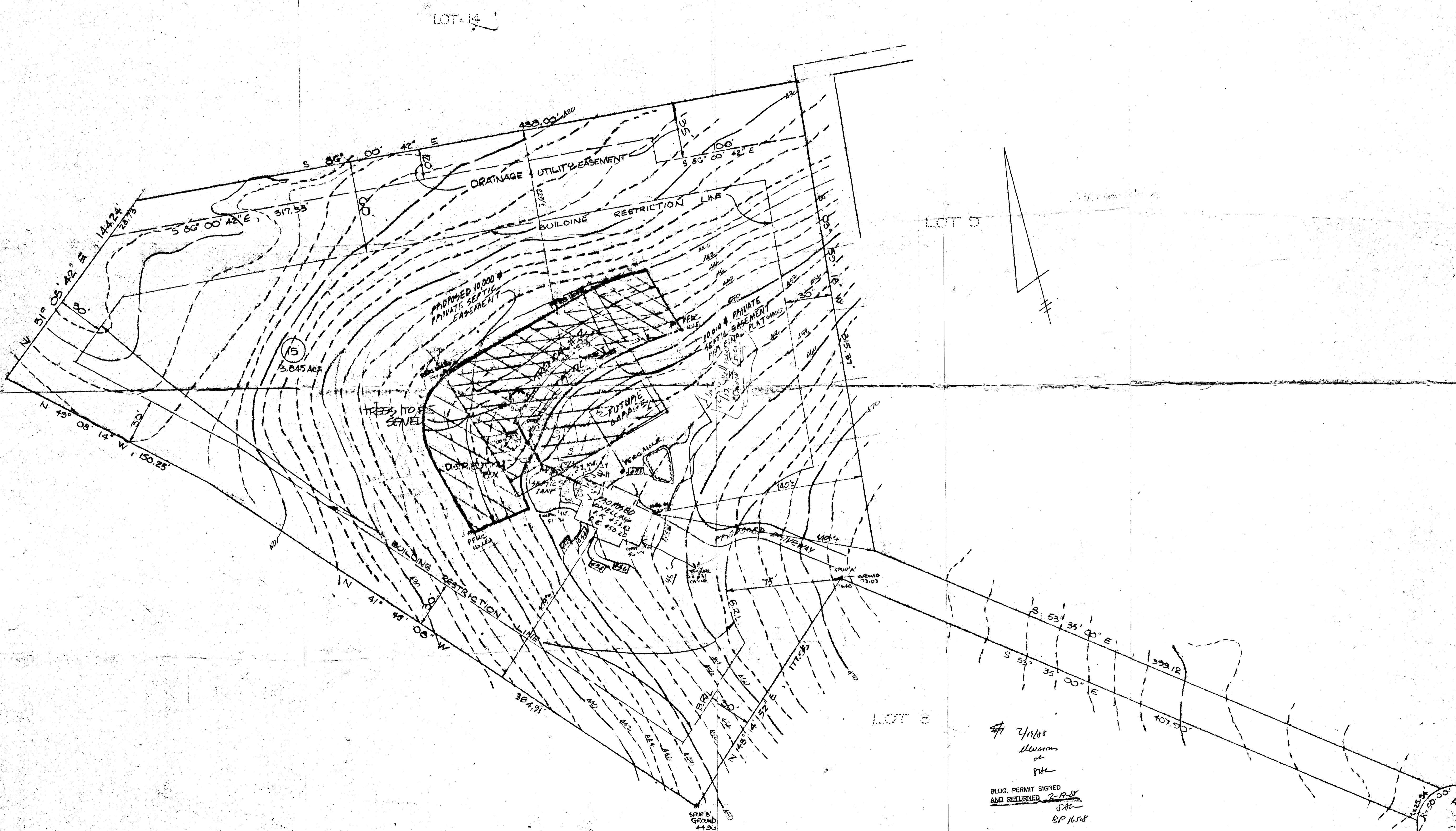
TESTED BY C.B.V ALSO PRESENT: R. Schuler & son

ROY E. BATAMAN
384.156 ZONED R



SEPTIC SYSTEM DATA

SEPTIC TANK	DISTRIEN BOX	TRENCH #1 (1" x 6")	TRENCH #2 (2" x 6")
INV. @ HOUSE: 441.20	EX. & FIN. GR. 440.0	EX. & FIN. GR. 440.0	EX. & FIN. GR. 447.0
EX. GR. 451.0	INV. IN. 446.35	INV. IN. 446.0	INV. IN. 448.0
FIN. GR. 451.0	INV. OUT. 446.1	BOTTOM 440.0	BOTTOM 439.0
INV. IN. 446.80			
INV. OUT. 446.55			



#1 2/15/88
 Drawing
 of
 BK
 BLDG. PERMIT SIGNED
 AND RETURNED 2-19-88
 SAK
 BP 1658

HALLOWELL
 COOPT
 50' RW

TRIADELPHIA MILL FARMS
 LOT # 15
 SECT. 1 AREA 2
 5TH ELECTION DISTRICT

REV 7/15/87

QUALIFIED PLAN