

Tax ID → 03316602

3/7/92 - one permit to go (SIRK)
3/18/92 AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
INDEX - TIME EXPIRED FOR F.C.O.P.

P 47910

A 36259

DISTRICT 3rd

DATE 3/11/92

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

COMPLIANCE

DATE SYSTEM APPROVED 3-18-92

461-9933

INDEXED

2/15/93
C. Williams / C. B. S.

INSPECTOR AP

Herman C. Sirk & Son IS PERMITTED TO INSTALL X ALTER

ADDRESS 2555 Jennings Chapel Road, Woodbine, Maryland 21797 PHONE 489-4724

SUBDIVISION River Downs LOT 10 ROAD 953 High Stepper Trail

PROPERTY OWNER Carl and Anne Canterbury

ADDRESS _____

SEPTIC TANK CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED _____

TRENCHES - Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 135 feet from the left (280.00') lot line and 200' from the rear (370.00') lot line as seen when facing the lot from right of way. Run trenches on contour toward left lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 1024191 RH

REVISED: 3/9/92 OK TO RUN STRAIGHT TRENCHES MR

PLANS APPROVED BY Sid Abel/Mark Rifkin cm DATE 8/1/91

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

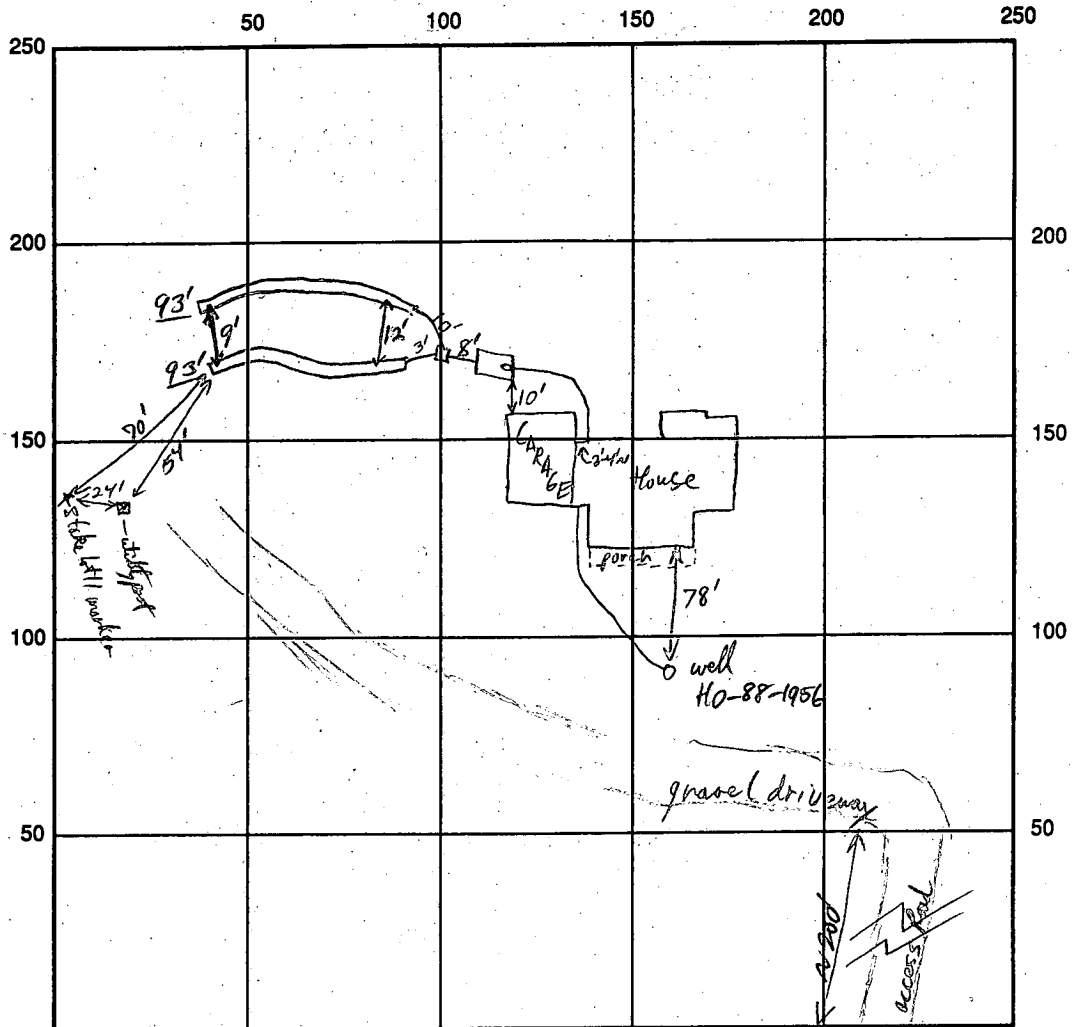
PERMIT VOID AFTER TWO YEARS

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 36259



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
High Steeper Rd

SEPTIC TANK LEVEL 1250 oad CLEANOUTS Von S.T. inlet

DISTRIBUTION BOX LEVEL _____

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 1 1/2 FT. TOTAL LENGTH 186 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 228 SQ. FT.

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

ABSORBENT AREA 558 SQ. FT.

REMARKS: OK to owner R/P 3-18-92

DATE SYSTEM APPROVED 3-18-92 INSPECTOR Ronald Pinsky

APPLICATION

SEWAGE DISPOSAL TESTING

A 36259

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 11/20/85

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 ~~Chase Development Corporation~~ Carl + Anne Canterbury

ADDRESS P.O. Box 5780 Pikesville, Maryland 21208 PHONE 854-0176
(301) 484-3100

PROPERTY LOCATION:

LOT 8 Prelimin. 11/86

SUBDIVISION River Downs LOT NO. 8

ROAD AND DESCRIPTION River Road 2800' Northeasterly From Route 32
(953 High Stepper Trail)

SIZE OF LOT 3 Ac. TYPE BLDG. Not Known
(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.

William Karch Purdum & Jeschke
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 12-5-85 Perc. SATISFACTORY; Hold For Certified Subdivision

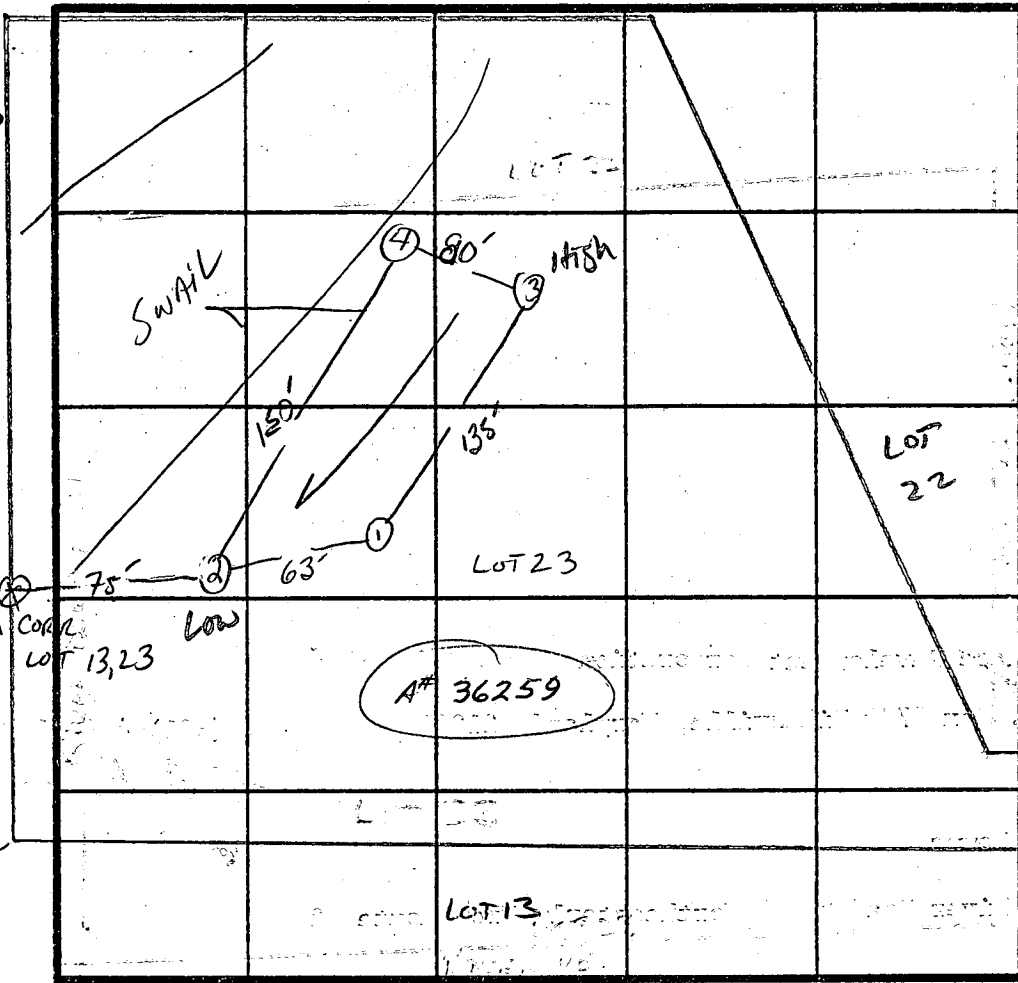
PLAT. 5 A.C.P. Shallow System S.M.H. BLDG. PERMIT SIGNED
AND RETURNED 10/18/91
Serial # 39947 - SFD

THIS IS NOT A PERMIT

L.O.S.

① ② L.O.S.
SOIL PROFILE

0"	A1-3
9"	Yellow Br. SAND CLAY LOAM L10% SAPROLITE
4"	Yellow Br. SAND LOAM L10% SAPROLITE
12"	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

↓ TO RIVER Rd.

X Perc. Time
2 min
INLET 35"

BOTTOM 5.0'
170 Φ/BR
CONSIDER
SHALLOW
SYS.

③ ④

0"	A1-3
9"	Yellow Br. SAND CLAY LOAM L10% SAPROLITE
5"	Yellow Brown SAND LOAM L10% SAPROLITE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
12/5/85	1 ✓	4"	1:48	1:49	1:49	1:50	1 min	
		12"	UNIFORM SOIL STRUCTURE Below 4"					
	2 ✓	4"	1:52:30	1:53:30	1:53:30	1:55	1.5 min	
		12"	UNIFORM SOIL STRUCTURE Below 4"					
	3 ✓	5"	1:58	1:59	1:59	2:01	2 min	
		18.5"	UNIFORM SOIL STRUCTURE Below 5"					
	4 ✓	5"	2:15	2:16	2:16	2:17	1 min	
		12"	UNIFORM SOIL STRUCTURE Below 5"					

REMARKS Perc Field. cliff. Draw Plans.

TYPE OF SOIL Glenelg Sand Loam

TESTED BY S. Abel

Jeff, John,
ALSO PRESENT CURTIS

B 1 **0100** SEQUENCE NO. (DP USE ONLY)
2 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

STATE PERMIT NUMBER
HD-88-1956
70 fill in this form completely 79

Date Received (APA) **071691**
OWNER INFORMATION
PANIS HAROLD
PO Box 1422
FILLICOTT CITY MD 21043

B 3 LOCATION OF WELL
1 **HOWARD** COUNTY
21 RIVER DOWNS SUBDIVISION
23 SECTION **2** LOT **10**
52 SYKESVILLE NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) **2** MI

DRILLER INFORMATION
Joseph L. Mayne 238 License No. 80
Firm Name **Joseph L. Mayne Well Drilling**
Address **5512 Ridge Rd. Mt. Airy 2177**
Signature **Joseph Mayne** Date **7/15/91**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NORTH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
High Stepper trail NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
34 **425** DISTANCE FROM ROAD
ENTER FT or MI **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 COUNTY NAME
A36259 COUNTY NO.
STATE SIGNATURE **Mark E. Paffin** INSERT S
DATE ISSUED **082191**
43 NORTH GRID **551000** 48 CO SIGNATURE **Mark E. Paffin** 55 EAST GRID **0817000** 57 EXP. DATE **2/21/92** 63

APPROXIMATE DEPTH OF WELL **200** FEET

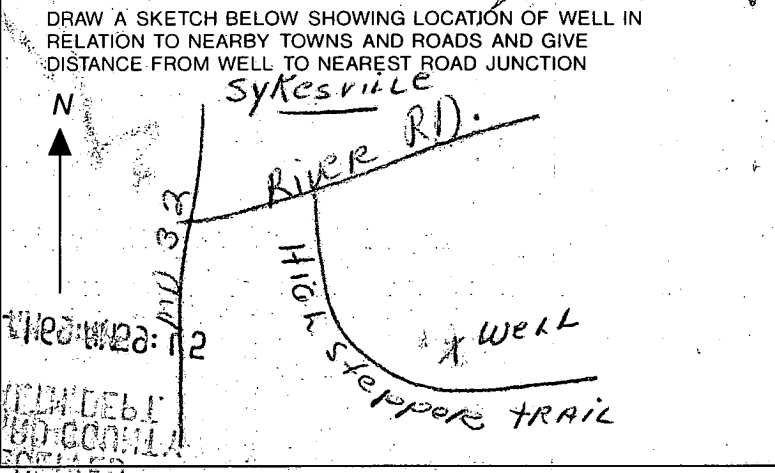
APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

METHOD OF DRILLING (circle one)
BORED (or Augered) JETTED Jetted & DRIVEN
30 AIR-ROtary AIR-PERcussion ROTARY (Hydraulic Rotary)
37 CABLE REVerse-ROtary DRive-POINT
other _____

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
39 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 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 (OEP USE ONLY)
APPROP. PERMIT NUMBER _____ GAP _____
FORCE **MD** WRITE INITIALS IN BOX PERMIT No. **HD-88-1956**

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
E **817**
N **5501**



SPECIAL CONDITIONS _____
COUNTY _____

C1 4619

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 36 259

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 090591

Depth of Well 245 (TO NEAREST FOOT)

PERMIT NO. H0-88-1956

OWNER Paris last name, Harold first name, High Stepper TOWN Sykesville, RIVER DOWNS SECTION, LOT 10

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC)

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 505 METHOD USED TO MEASURE PUMPING RATE Bucket

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Includes handwritten entries: SAND, GRAY MICA, ROCK, 0 55, 55 245.

NO. OF BAGS 11 NO. OF POUNDS 1034 GALLONS OF WATER 66 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 44 ft.

BEFORE PUMPING 30 WHEN PUMPING 112 TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

CASING RECORD casing types insert appropriate code below: ST STEEL, CO CONCRETE, PL PLASTIC, OT OTHER. MAIN CASING TYPE ST, Nominal diameter 6, Total depth 60.

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

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

TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon)

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

PUMP HORSE POWER PUMP COLUMN LENGTH (nearest ft.) CASING HEIGHT (circle appropriate box and enter casing height)

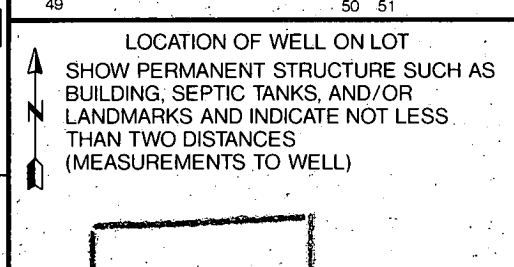
CIRCLE APPROPRIATE LETTER. A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED. E ELECTRIC LOG OBTAINED. P TEST WELL CONVERTED TO PRODUCTION WELL.

DEPTH (nearest ft.) H0 58 245. SLOT SIZE 1 2 3. DIAMETER OF SCREEN (NEAREST INCH) 4 5 6

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)

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.

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



DRILLERS IDENT. NO. 238 DRILLERS SIGNATURE Joseph M...

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

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

TELESCOPE CASING LOG INDICATOR OTHER DATA

COUNTY