

02-253097

APPROVED
5-14-86
RH P 36936

PERMIT

A 35178

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
XXXXXX
461-9933

INDEXED

ELLICOTT CITY
DISTRICT _____

DATE 5/14/86

Dave Hopkins IS PERMITTED TO INSTALL ALTER _____

ADDRESS _____ PHONE 489-4711

SUBDIVISION MULLINEAUX Mullinix Heights ROAD 3030 Mullineaux Road LOT 3

PROPERTY OWNER Gerald Martin B.V. BOBNAR

ADDRESS _____

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

GARBAGE GRINDER? YES NO _____

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 220 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4 1/2 feet below original grade. Effective area begins at 4 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Start the first trench 145 feet from the front lot line and 30 feet from the right lot line as seen when facing the property from Mullineaux Road. Run trench(s) along level ground toward left side of lot, being certain that no part of system comes closer than 100 feet to any well.

NOTE - No trench to exceed 100 feet in length. If more than one trench used a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY C. Williams DATE 5/10/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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 THREE 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.

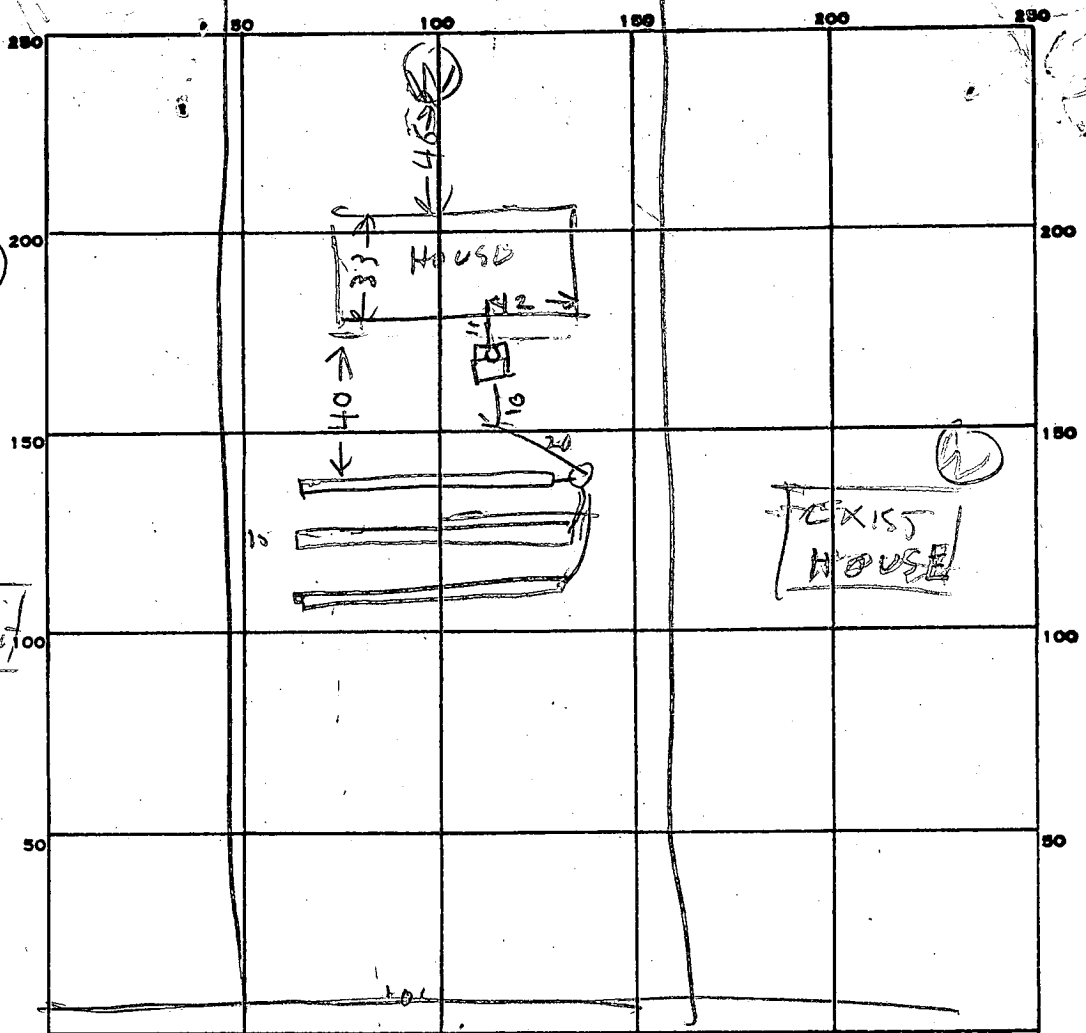
BLDG. PERMIT SIGNED
AND RETURNED 6/28/91
MULLINIX 38774 - Sled

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 35178



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.
 MULLINEUX RD

PERMIT CARD _____

SEPTIC TANK, LEVEL 1500

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH	#1	#2	#3	TRENCH WIDTH	#1	#2	#3
	4	4	4.5		3	3	3

GRAVEL DEPTH	#1	#2	#3	TOTAL LENGTH	#1	#2	#3	TOTAL
	1.5	1.5	1.5		76	76	76	219

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA 657

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 5/14/86 215 OK TO COVER TRENCHES #1 & #2
5/14/86 - TRENCH #3 OK TANK CONNECTED
660 SQ FT REQUIRED

67
 76
 76
 219

DATE SYSTEM APPROVED 5/14/86 INSPECTOR Raymond Hodges

APPLICATION

A 35178

SEWAGE DISPOSAL TESTING

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 _____

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 Richard Allen Winstead

ADDRESS 1312 Daineks Ave 21207 PHONE 747-7968

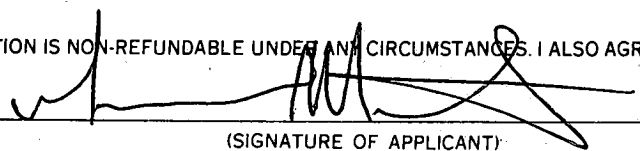
PROPERTY LOCATION:

SUBDIVISION Mullineaux Hts Sect 1 LOT NO. Lot #3

ROAD AND DESCRIPTION Mullineaux Rd

SIZE OF LOT 100' Front 307' left side 310' Rt side TYPE BLDG. 3
(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.


(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

B 1 9833

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

40-81-1053

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

please print or type

fill in this form completely

Date Received 9/28/85 OWNER INFORMATION

MARTIN JERRY, 5546 OAKLAND RD, BALTIMORE MD 21227

LOCATION OF WELL: HOWARD COUNTY, MULLINEAUX HEIGHTS SUBDIVISION, SECTION 44, LOT 3, ELLICOTT CITY

DRILLER INFORMATION: SAUNDY B. COCHRAN, G. ENGAR HARR SONS CORP., 12047 FALLS RD, COCKEYSVILLE 21030

DIRECTION OF WELL FROM TOWN (CIRCLE BOX): TOWN, NEAR WHAT ROAD: MULLINEAUX Lane, DISTANCE FROM ROAD: 240 FT

WELL INFORMATION: APPROX. PUMPING RATE (GAL. PER MIN.) 5, AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: HOWARD COUNTY, DATE ISSUED 060585, COUNTY SIGNATURE, STATE HEALTH SIGNATURE

USE FOR WATER (CIRCLE APPROPRIATE BOX): HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

APPROXIMATE DEPTH OF WELL 200 FEET

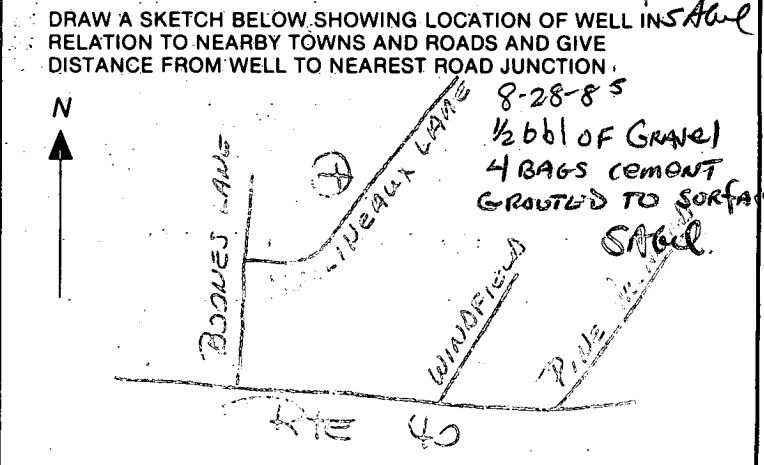
APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one): AIR-PERCussion

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX): THIS WELL WILL NOT REPLACE AN EXISTING WELL

APPROX. PERMIT NUMBER GAP, FORCE PERMIT No. 40-81-1053

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X: Well location OK, 78 FE CASING, 21 BAGS cement, UNABLE TO COMPLETE GROUT - cement being CARRIED OFF BY GULCH, will ADD gravel to STABILIZE cement.



SPECIAL CONDITIONS

C1 2318 SEQUENCE NO. (OEP USE ONLY)
 1 2 3 6
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

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 35178**

DATE RECEIVED: [] [] [] [] [] [] [] []
 DATE WELL COMPLETED: **090385**
 DEPTH OF WELL: **300** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL": **MO-81-1053**

OWNER: **MARTIN JERRY**
 STREET OR RFD: **MULLINEAUX LANE** TOWN: **ELLCOTT CITY**
 SUBDIVISION: **MULLINEAUX HEIGHTS** SECTION: **MAP 17 PARCEL 257** LOT: []

WELL LOG
 Not required for driven wells

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

DESCRIPTION (Use additional sheets if needed)	FEET		Check if water bearing
	FROM	TO	
Mud	0	78	
Gray Rock	78	300	X

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle appropriate box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **23** NO. OF POUNDS **2300**
 GALLONS OF WATER [] [] [] []
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **78** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST CO PL OT
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE: **ST** Nominal diameter (nearest inch): **4** Total depth of main casing (nearest foot): **78**

OTHER CASING (if used)
 diameter inch: [] [] depth (feet) from: [] to: []

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

C2

EACH SCREEN	DEPTH (nearest ft.)		
	1-8	11-15	17-21
1	HO	78	300
2	[]	[]	[]
3	[]	[]	[]

SLOT SIZE 1 [] 2 [] 3 []
 DIAMETER OF SCREEN [] (NEAREST INCH)

C3

PUMPING TEST
 HOURS PUMPED (nearest hour): **6**
 PUMPING RATE (gal. per min. to nearest gal.): **25**
 METHOD USED TO MEASURE PUMPING RATE: **SUBMERSIBLE**
 WATER LEVEL (distance from land surface) BEFORE PUMPING: **10**
 WHEN PUMPING: **239'10"**
 TYPE OF PUMP USED (for test): **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: **S**
 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 } LAND SURFACE (nearest foot): **0**
- below }

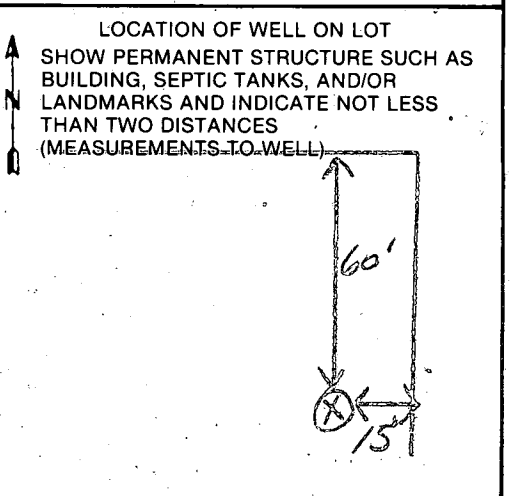
CIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION WELL

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLER'S IDENT. NO. **120**
 DRILLER'S SIGNATURE: *[Signature]*
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee): *[Signature]*

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 [] [] []



AM - 6/10/86

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Court House Square
Ellicott City, Md. 21043
461-9933

New Installation
Replacement

Receipt # 37148
Date 6/9/86

Name of Installer CORNWELL P & H

Telephone _____

License number 3853

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber

Name of Property Owner JERRY MARTIN

Telephone _____

Subdivision Pine Orchard Lot # _____ Well tag # HO-81-1053

Site Address 3030 MILL IN CACKLAND
ELlicott City Md 21043

Pump

- 1. Type
 - a. Deep well jet
 - b. Shallow well jet _____
 - c. Submersible

Motor

- 1. Horsepower _____
- 2. RPM _____
- 3. Voltage _____
 - a. 110 _____
 - b. 220 _____

Pitless Adapter

- 1. Make _____
- 2. Model # _____
- 3. Depth _____

2. Make _____

3. Model # _____

4. Capacity _____ GPM

5. Pump exceeds well capacity Yes _____ No _____

6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Tank

- 1. Capacity 202 x 780L
- 2. Pressure relief valve?

Piping

- 1. Type PLASTIC
- 2. Size 1"
- 3. NSF and/or BOCA Code approved _____
- 4. Depth of supply line 42"

Well data

- 1. Depth 225 ft.
- 2. Yield 3 1/2 GPM
- 3. Static water level _____ ft.
- 4. Will water supply be disinfected by installer? yes

6/10/86 OK to come outside. Pitless at 4 ft below grade

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

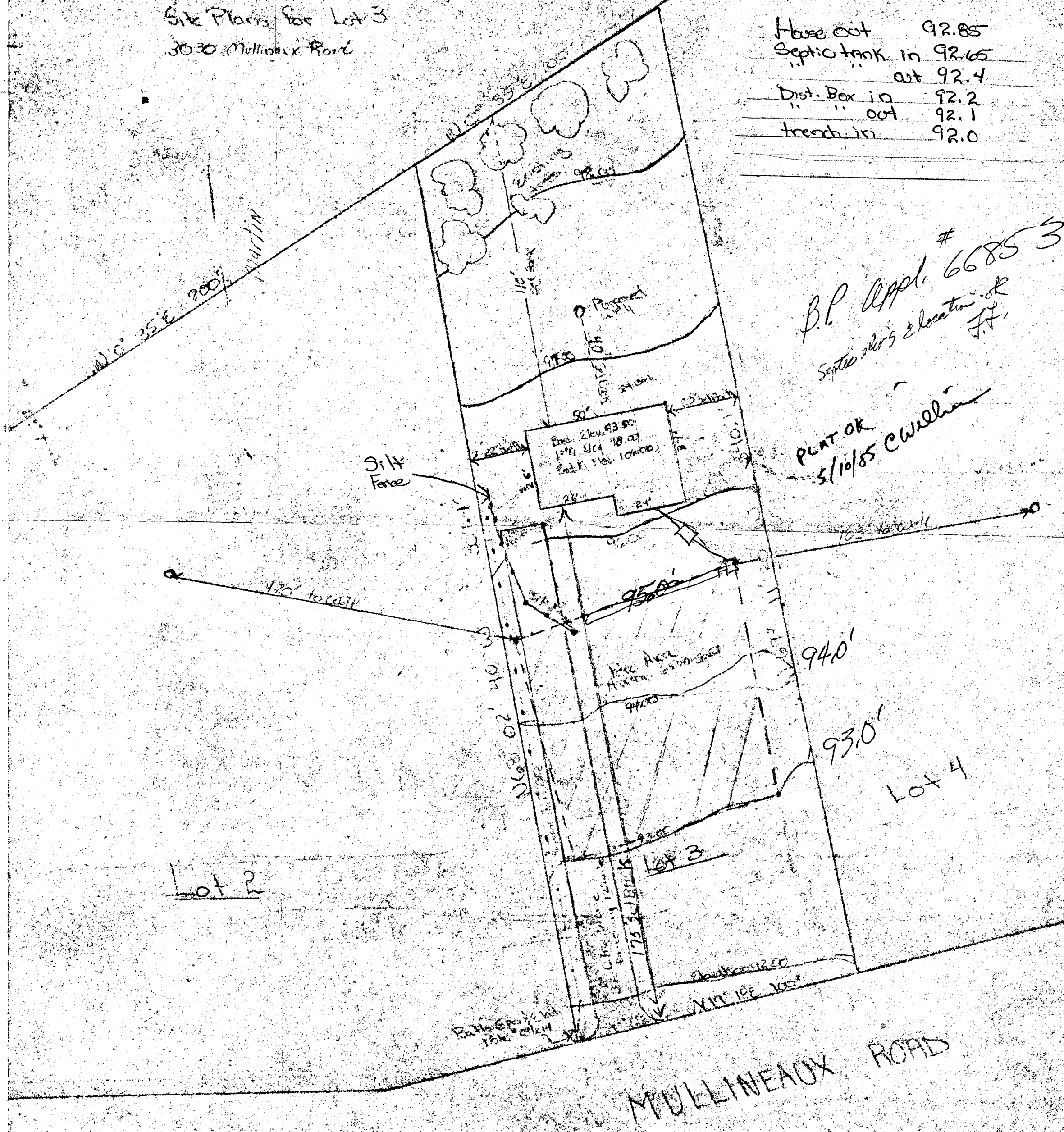
Signature of Applicant: Emmy Cornwell
Date: 6/9/86

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

Site Plans for Lot 3
3030 Mullineaux Road

Prop. Field Elevations

House out	92.85
Septic tank in	92.65
" out	92.4
Dist. Box in	92.2
" out	92.1
trench in	92.0



B.P. Appl. # 66853
Septic tank's elevation OK
FF

PLAN OK
5/10/85 CW/llm

Lot 2

Lot 4

MULLINEAUX ROAD

MARTIN

MAP OF SECTION 1 MULLINEAUX HEIGHTS

PINE ORCHARD
Second Election District, Howard County, Md.
JUNE 1, 1955 SCALE: 1"=50'

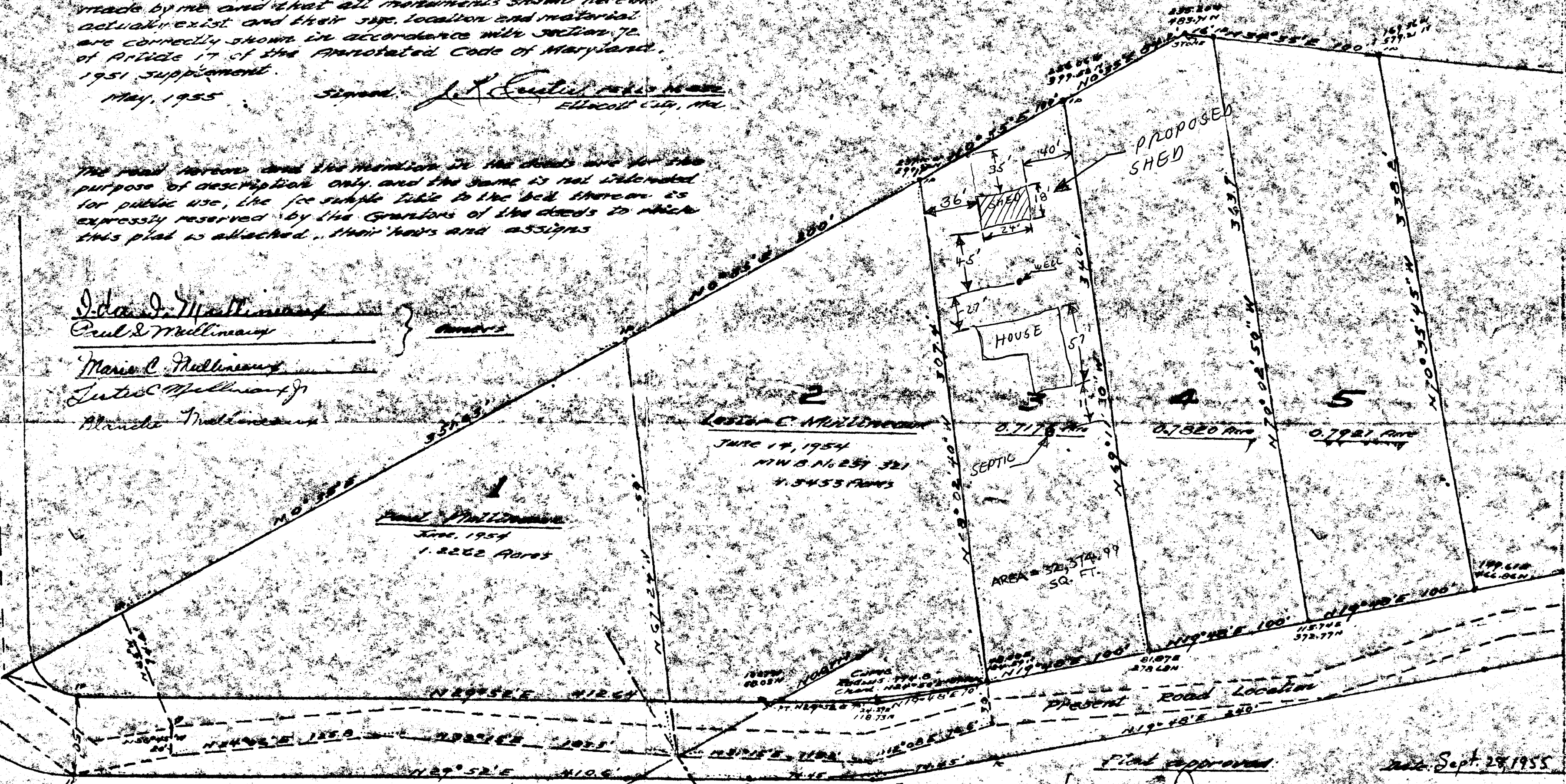
6/28/55
PLANS OF

This is to certify that this is a plat of a survey made by me and that all monuments shown herein actually exist and their size, location and material are correctly shown in accordance with Section 72 of Article 17 of the Annotated Code of Maryland, 1951 Supplement.
May, 1955 Signed: J. J. Gaudin Surveyor
Ellicott City, Md.

The road narrow and the mention in the deeds are for the purpose of description only and the same is not intended for public use, the fee simple title to the bed thereon is expressly reserved by the Grantors of the deeds to which this plat is attached, their heirs and assigns

J. J. Mullineaux
Paul & Mullineaux } Owners
Marie C. Mullineaux
Lutice Mullineaux
Blanche Mullineaux

MULLINEAUX ROAD & DOONES LANE



MULLINEAUX ROAD

Plan approved Date: Sept. 28, 1955
Wilma McLane Chairman of Planning Commission
Ann J. Raphael Planning Commission
Harriette M. Hall Supervisor of County Roads
5 B4W