

05-402557

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

P 59270

A 35412

DISTRICT 5th

DATE 4/29/87

DATE SYSTEM APPROVED 5/12/87

INSPECTOR C. Williams

Herman Sirk IS PERMITTED TO INSTALL  ALTER

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

SUBDIVISION Fox Hall Villas ROAD 13324 Elliott Drive LOT 16 - Sec 2

PROPERTY OWNER Leonard Dolbert P 531-4180

ADDRESS Diana Healy

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

GARBAGE GRINDER? YES  NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box at a point 110 feet from the front lot line and 150 feet from the left side of the lot as seen when facing the lot from Elliott Drive. Run the trenches along level ground toward the rear of the lot.

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

PLANS APPROVED BY R. Hodges DATE 9/18/86

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.

BLDG. PERMIT SIGNED

AND RETURNED 4/29/87

Serial # 4228017

2 deck

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT**

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 35412



# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

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

A 35412

P \_\_\_\_\_

DISTRICT 573

DATE 4-24-85

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 DAVID N. ELLIOTT LEONARD DOLBERT  
ADDRESS 6581 Columbia Pike, Columbia PHONE 997-5833

PROPERTY LOCATION:

SUBDIVISION FOXHALL VILLAS LOT NO. 16  
ROAD AND DESCRIPTION ELLIOTT DRIVE 13324

SIZE OF LOT 3 acre TYPE BLDG. res. 3-4  
(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.

David N. Elliott  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 3-17-86 Perc. satisfactory - adjustment in perc to accommodate well site for lot 9 5400

## THIS IS NOT A PERMIT

SOIL PROFILE

0


INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY \_\_\_\_\_ ALSO PRESENT \_\_\_\_\_

EH-12-1079

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES  
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 354/2

P \_\_\_\_\_

DISTRICT 5TH

DATE 4-24-85

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David N. Elliott  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

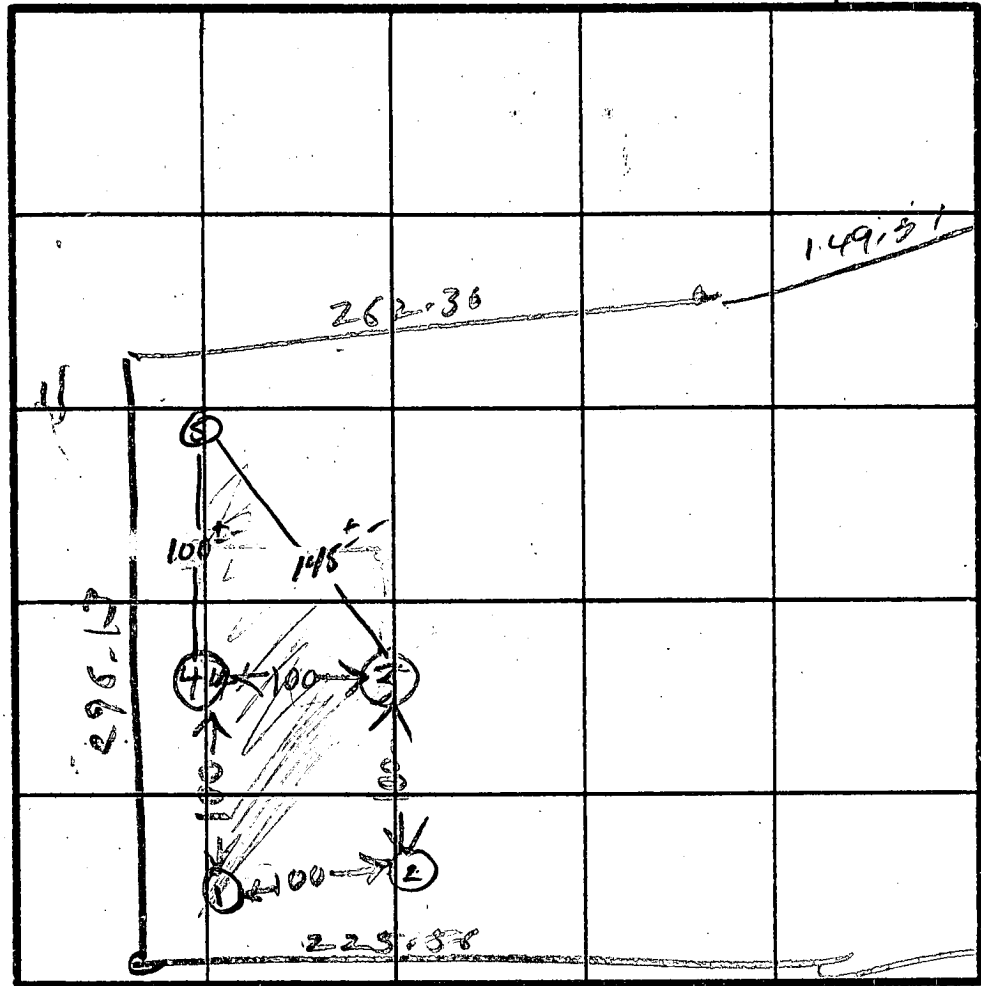
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

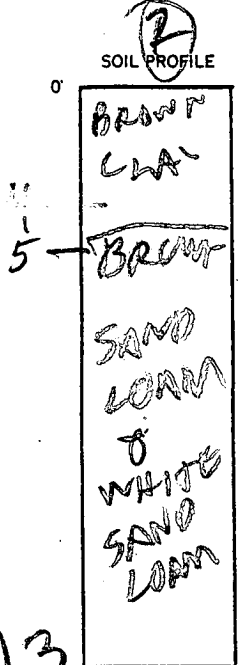
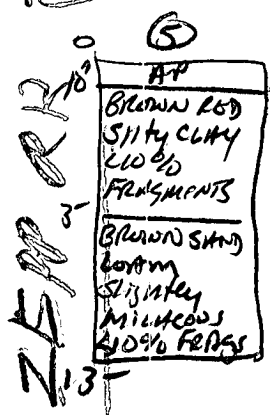
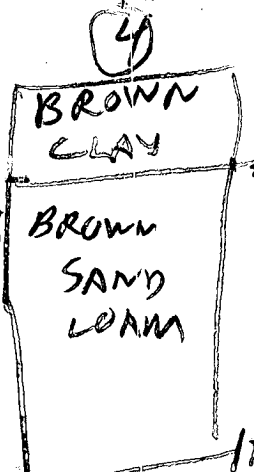
## THIS IS NOT A PERMIT

Lot 16

16



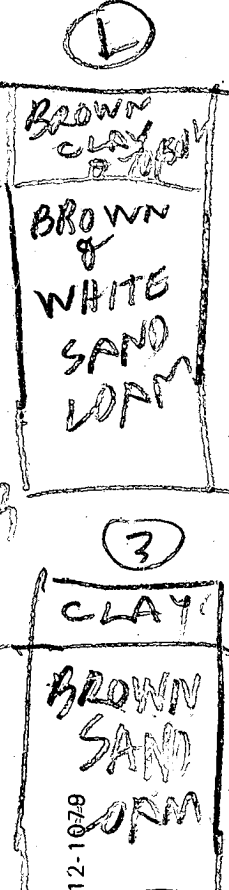
INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.



13

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/1/85	1S	3	144	149	149	151	8
	1V	13	LOOK	OK			
	2S	5	149	200	enum	PERL	
	2V	13	LOOK	OK			
	3S	3	200	203	203	210	7
	3V	12	LOOK	OK			
	4S	3	204	205	205	209	4
	4V	12	LOOK	OK			
	2M	6	211	230	236	300	30
3/1/84	5	4- 13-	1124	1127	1127	1133	6 MIN

HOLE ELEVATION  
 (3) = HIGHEST  
 (2) = MEDIUM  
 (1) = LOWEST  
 av  
 cone  
 11 min  
 max  
 depth  
 3 FT



REMARKS: HOLES DUG PER SURVEYOR PL

TYPE OF SOIL  
 TESTED BY R HODGES

ALSO PRESENT FYOK CO - JEFF PROBERT

EH 12-1078

B 1 1568

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

OEP PERMIT NUMBER

HO-811-1859

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

Grout 1/14/87 10/30

Date Received

8 13

OWNER INFORMATION

15 Last Name: DOLHERT Owner: L. SCHWAB 34 First Name

36 Street or RFD: 6093 MAJOLIS LANE 55

57 Town: COLUMBIA 70 State 72: MD 76 Zip: 21045

B 3

LOCATION OF WELL

8 COUNTY: HOWARD 21

23 SUBDIVISION: FOXHILL VILLAGES 42

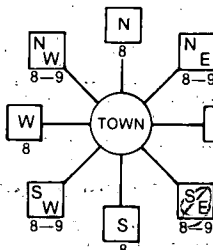
SECTION: 2 44 46 LOT: 16 48 50

52 NEAREST TOWN: DAYTON 71

MILES FROM TOWN (enter 0 if in town) 2 73 76 77 78 MI

B 4

1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



11 NEAR WHAT ROAD: Elliott Drive 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



34 60 37 DISTANCE FROM ROAD ENTER FT or MI AT 38 39

DRILLER INFORMATION

Driller's Name: Joseph P. Mayne 77 License No. 80: 238

Firm Name: Joseph P. Mayne Well Drilling

Address: 5512 Ridge Rd. Mt. Airy, Md. 21771

Signature: Joseph P. Mayne Date: 12/29/86

B 2

WELL INFORMATION

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)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

COUNTY NAME: HOWARD COUNTY NO. A-35412

OEP SIGNATURE: B. Nelson STATE HEALTH INSERT S 41

DATE ISSUED: 07/09/87 CO SIGNATURE: B. Nelson EXP. DATE: 07/09/87

NORTH GRID: 501000 EAST GRID: 0807000

APPROXIMATE DEPTH OF WELL 300 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH

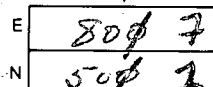
METHOD OF DRILLING (circle one)

- BORED (or Augered)
JETTED
Jetted & DRIVEN
AIR-ROTARY
AIR-PERCussion
ROTARY (Hydraulic Rotary)
CABLE
REVERSE-ROTARY
DRIVE-POINT
other

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

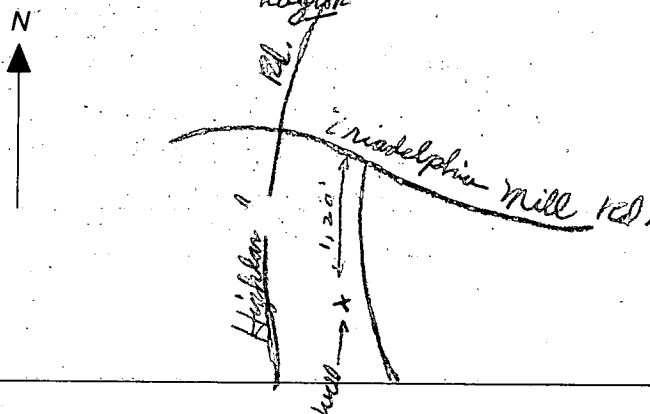
- 1. WELL
2.
3.
WRITE THE BOX NUMBER FROM THE MAP HERE



LOCATION OK DRILLER DID NOT SHOW FOR GROUT 1/13/87 Cavelin

42' casing
1' - above
32' - open
8 - bags cement

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



REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

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

APPROP. PERMIT NUMBER 54 GAP 63

FORCE INITIALS PERMIT No. HO-811-1859 67 68 IN BOX 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

C1 3804

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-35412

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

8 13

15 20

22 26

28 37

OWNER DOZHERI LEONARD last name first name

STREET OR RFD 1011 DRIVE TOWN DAYTON

SUBDIVISION FOX HALL VILLAGES SECTION 2 LOT 16

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 0-36, GRAY MUD ROCK 36-265.

GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 8 NO. OF POUNDS 252

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

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

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

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

DEPTH (nearest ft.) HO 40 26.5

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. 538 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

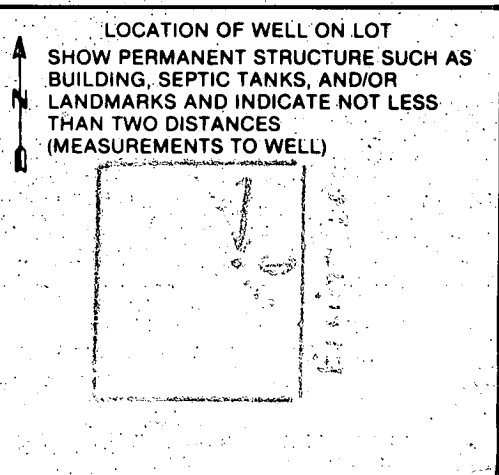
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 45 METHOD USED TO MEASURE PUMPING RATE 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 (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) LAND SURFACE







6-15-87  
AM

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

35412

New Installation   
Replacement

Receipt # 39136  
Date 4/15/87

Name of Installer ROBERT L. FEEDER Co., Inc.

Telephone 781-4655

License number 2120

Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner MR ANDAS LEONARD DOLBERT Telephone 740-2642  
Subdivision Foxhall Villas Lot # 16 Well tag # 40-81-1859  
Site Address 13324 ELLICOTT DRIVE  
CLARKSVILLE, MD. 21029

<b>Pump</b>	<b>Motor</b>	<b>Pitless Adapter</b>
1. Type	1. Horsepower <u>1/2</u>	1. Make <u>MERRILL</u>
a. Deep well jet <input type="checkbox"/>	2. RPM <u>3500</u>	2. Model # <u>M5-II</u>
b. Shallow well jet <input type="checkbox"/>	3. Voltage <input type="checkbox"/>	3. Depth <u>42" +</u>
c. Submersible <input checked="" type="checkbox"/>	a. 110 <input type="checkbox"/>	
2. Make <u>GRISWOOD</u>	b. 220 <input checked="" type="checkbox"/>	
3. Model # <u>3XLN</u>		
4. Capacity <u>5</u> GPM		
5. Pump exceeds well capacity Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
6. If Yes, is low pressure cutoff switch installed? Yes <input type="checkbox"/> No <input type="checkbox"/>		
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors <input type="checkbox"/> Cable guards <input checked="" type="checkbox"/> Other <input type="checkbox"/>		

<b>Tank</b>	<b>Piping</b>	<b>Well data</b>
1. Capacity <u>20 GPM</u> (WELL-X-TROL WK-202 CAPTIV-AIR TYPE)	1. Type <u>PLASTIC</u>	1. Depth <u>265</u> ft.
2. Pressure relief valve? <u>YES</u>	2. Size <u>1 1/2"</u>	2. Yield <u>405</u> GPM
	3. NSF and/or BOCA Code approved <input checked="" type="checkbox"/>	3. Static water level <u>40</u> ft.
	4. Depth of supply line <u>42" +</u>	4. Will water supply be disinfected by installer? <u>YES</u>

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).

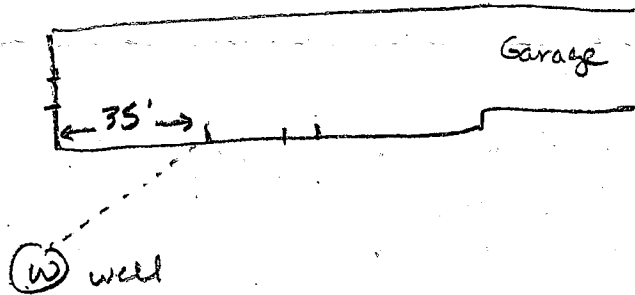
All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]  
Date: 4/9/87

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

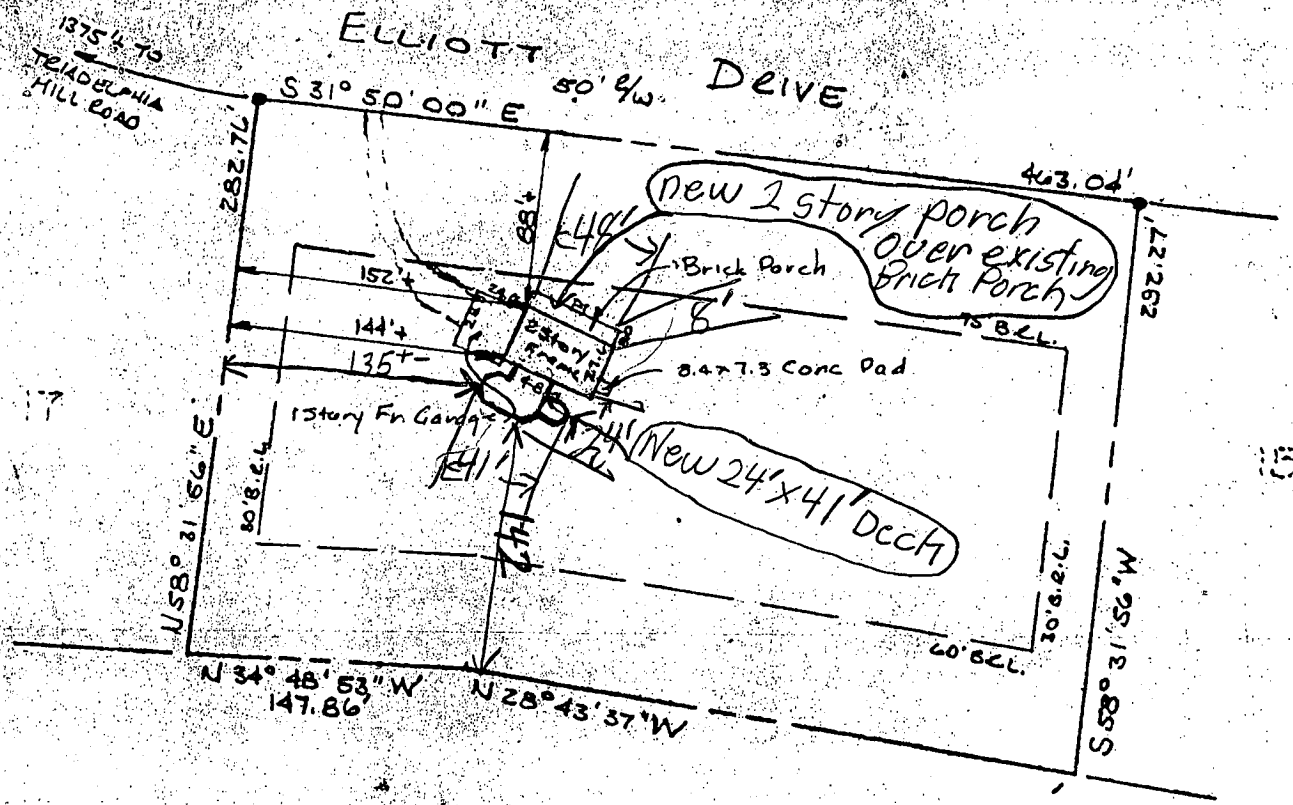
6-15-87

Well completely covered up. Ground wire attached at surface and at basement wall. Well pipe sealed around opening in basement wall and hooked into water tank. Could not see pit around well casing.  
JEN.



Elliott Drive

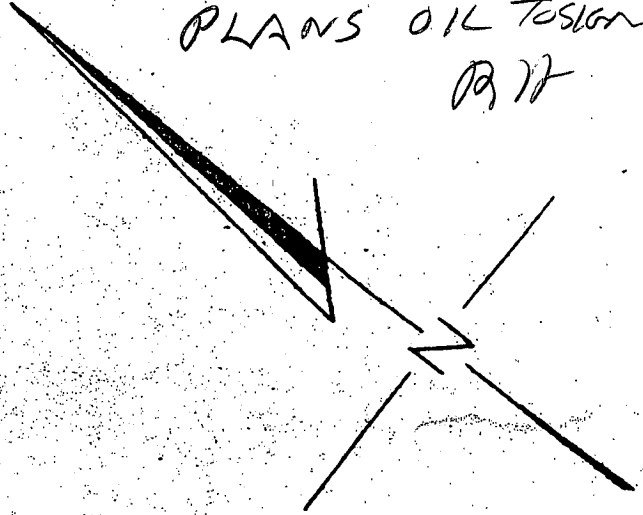
RECEIVED  
HOWARD COUNTY  
HEALTH DEPT.  
APR 13 11 41 AM '87  
DIVISION OF  
ENVIRONMENTAL  
HEALTH



LOT 16  
SECTION 2

FOX HALL VILLAS  
5<sup>TH</sup> ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE 1" = 100' JULY, 1987  
PLOT No. 7019

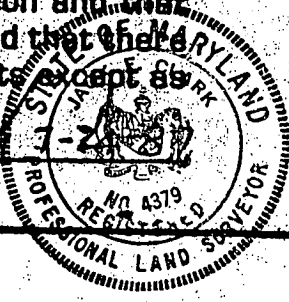
4/22/92  
PLANS OIL DESIGN  
P. 17



**SURVEYORS CERTIFICATE**

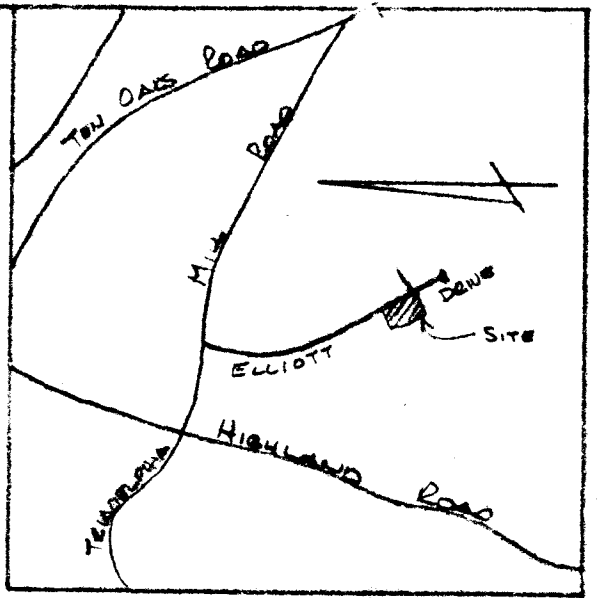
I hereby certify that a careful transit tape survey has been made of the improvements on the property shown hereon and that they are as shown and that there are no encroachments except as shown.

*[Signature]*  
Registered Land Surveyor

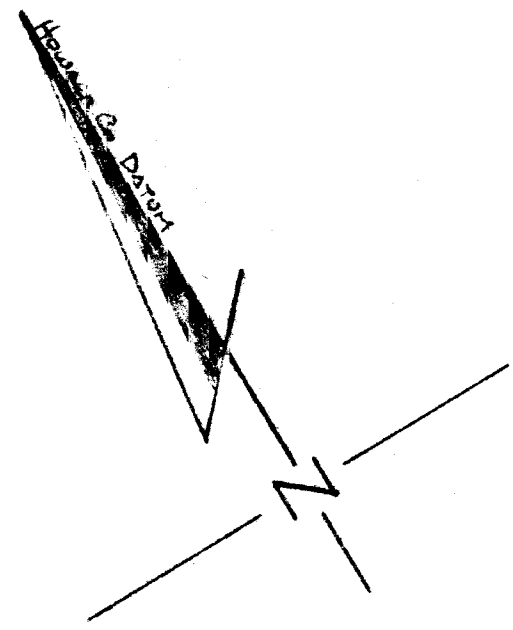


**THE J. E. CLARK COMPANY**  
LAND SURVEYING ENGINEERING

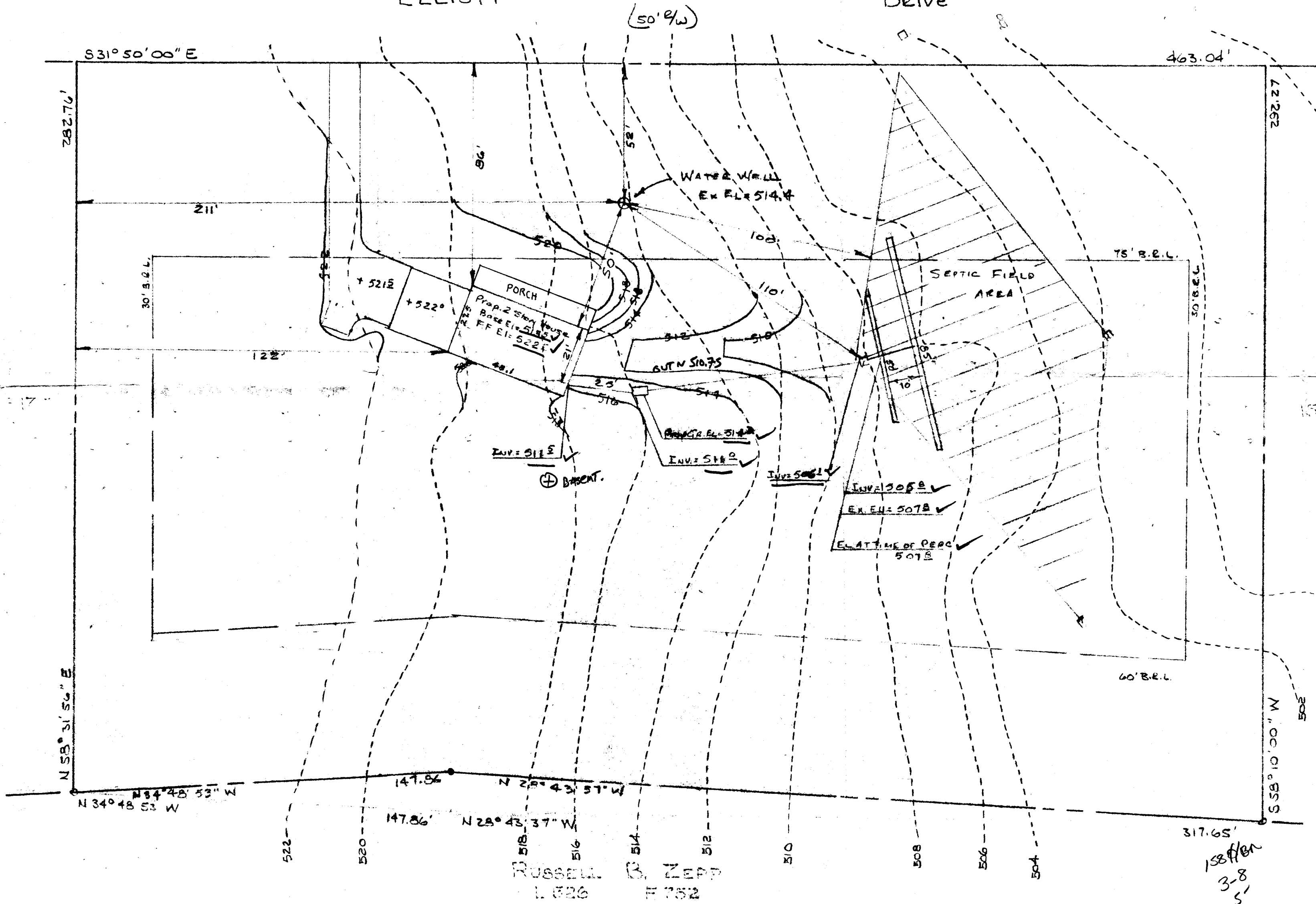
P.O. BOX 147 • LAUREL, MARYLAND 20707



VICINITY MAP  
SCALE 1"=2000'



ELLIOTT DRIVE



PLOT PLAN  
LOT 16  
SECTION 2  
FOXHALL VILLAS  
A RESUBDIVISION OF PART OF PACEER D  
THOMPSON PROPERTY  
5TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND  
SCALE 1"=30' JAN, 1987  
PAT # 7019  
ELEVATIONS SHOWN ARE IN  
HOWARD COUNTY DATUM

Septic trench reqd =  $632 \div 5 = 127'$   
Septic trench provided = 135'  
Trench - Max Depth = 8' Max inlet depth = 8' = 5 #/ft.

2-6-87  
elevation  
up shown for use w/o  
disposal: S. Allen

BLDG. PERMIT SIGNED  
AND RETURNED 2-7-87  
BP # 9956  
S. Allen

RUSSELL B. ZEPP  
L 526 F 752

Surveyors Certificate

I hereby certify that the above measurements and elevations are actual and correct for this property.

*Joel Clark* 2-2-87  
Registered Land Surveyor - Md. 4379

PREPARED BY  
THE J.E. CLARK CO.  
P.O. BOX 147  
LABEL, MARYLAND 20707