

10/22/88 noon
10/28/88 noon
10/30/88
10/31/88 AM

11/1/88

10-31-88 Needs house connection

0 Teacher left
10/27 P.C.O.
10/28 P.C.O.
P 42509
A 35428
10/31 P.C.O.
(ALL COVERED)

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

DISTRICT 5th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

05-398878
INDEXED

DATE 9/1/88

DATE SYSTEM APPROVED 1/26/89

INSPECTOR R.H.

Horizon Builders

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 721-4847

SUBDIVISION Lime Kiln Valley ROAD 7658 Green Dell Lane LOT 21 ✓

PROPERTY OWNER HARRY HARTMAN Horizon Builders 10/31

ADDRESS _____

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 - 174 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet maximum 3 1/2 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 3 1/2 feet below original grade. 4 1/2 feet of stone below distribution pipe.

LOCATION - Place the distribution box at a point 250 feet from the back lot line and 100 feet from the right side of the lot as seen when facing the lot from Green Dell Lane. Run the trenches on level ground toward both the back and the front 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.

155 FT OF TRENCHES

PLANS APPROVED BY Ray Hodges DATE 8/07/86

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 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 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.

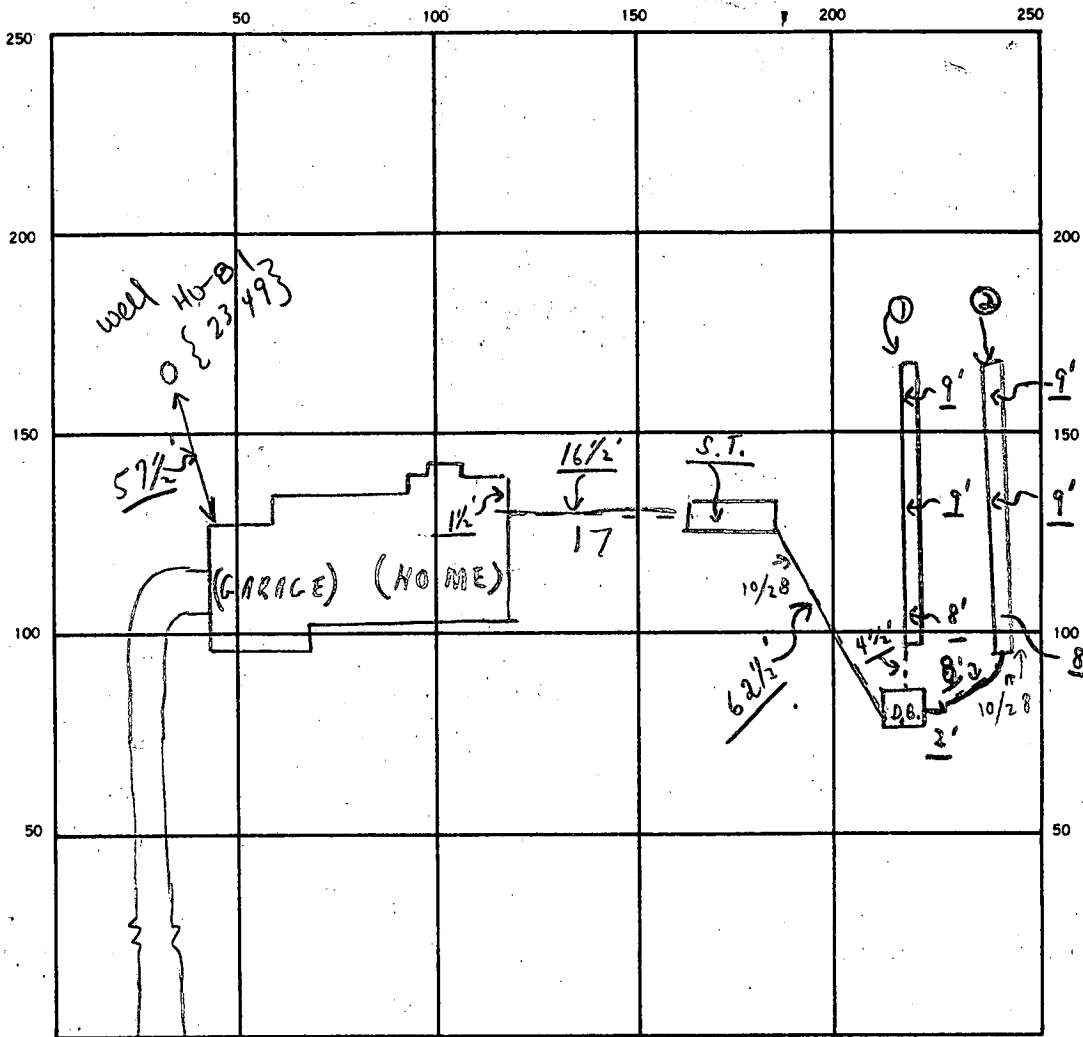
LOG. PERMIT SIGNED AND RETURNED 1/24/89
Small #31091 - Port

LOG. PERMIT SIGNED AND RETURNED 3/6/89
addition done

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

A-35428



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

GREEN DELL LAVE

SEPTIC TANK LEVEL OK CLEANOUTS OK (10/31)

DISTRIBUTION BOX LEVEL OK (Baffle needed)

DRAIN FIELD/TILE FIELD DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4.5 FT. TOTAL LENGTH 155 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 69.7 SQ. FT.

DRYWELL INSIDE DIAMETER 2 FT. EFFECTIVE DEPTH BELOW INLET 6 FT.

ABSORBENT AREA 69.7 SQ. FT.

REMARKS 10/27/88 OK TO ADD STONE TO 2 TRENCHES; NO PIPE YET;

D. BOX NEEDS BAFFLE. C.B.S. - PARTIAL; 10/28 OK TO COVER 2 TRENCH;
PARTIAL. C.B.S.; 10/28/88 3 NO CHANGE; HOLD FOR CALL-FOR-FINAL;

10/31 ALL COVERED 1 MACHINE ON JOB - LEFT RED STICKER

HOLD FOR ACALL! C.B.S.

10/31/88 DISTR. BOX & TRENCH REOPENED. OK TO COVER. HOUSE SEWER LINE TO BE INSPECTED BEFORE FINAL. C.W.

1/26/89 HOUSE SEWER OK

DATE SYSTEM APPROVED 1/26/89

INSPECTOR R. HODGES

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 35428

P _____

DISTRICT 5th

DATE April 3, 1985

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 Grace A. E. Eisenhardt c/o Tracy, Schulte & Associates, Inc
ADDRESS 8450 Baltimore National Pike, Suite 34 PHONE 465-6105

PROPERTY LOCATION:

SUBDIVISION Lime Kiln, Section 2 LOT NO 22

ROAD AND DESCRIPTION Southwest of Green Dell Lane; West of Brown's Bridge Road

SIZE OF LOT 3.062 Ac TYPE BLDG N/A
(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.M.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

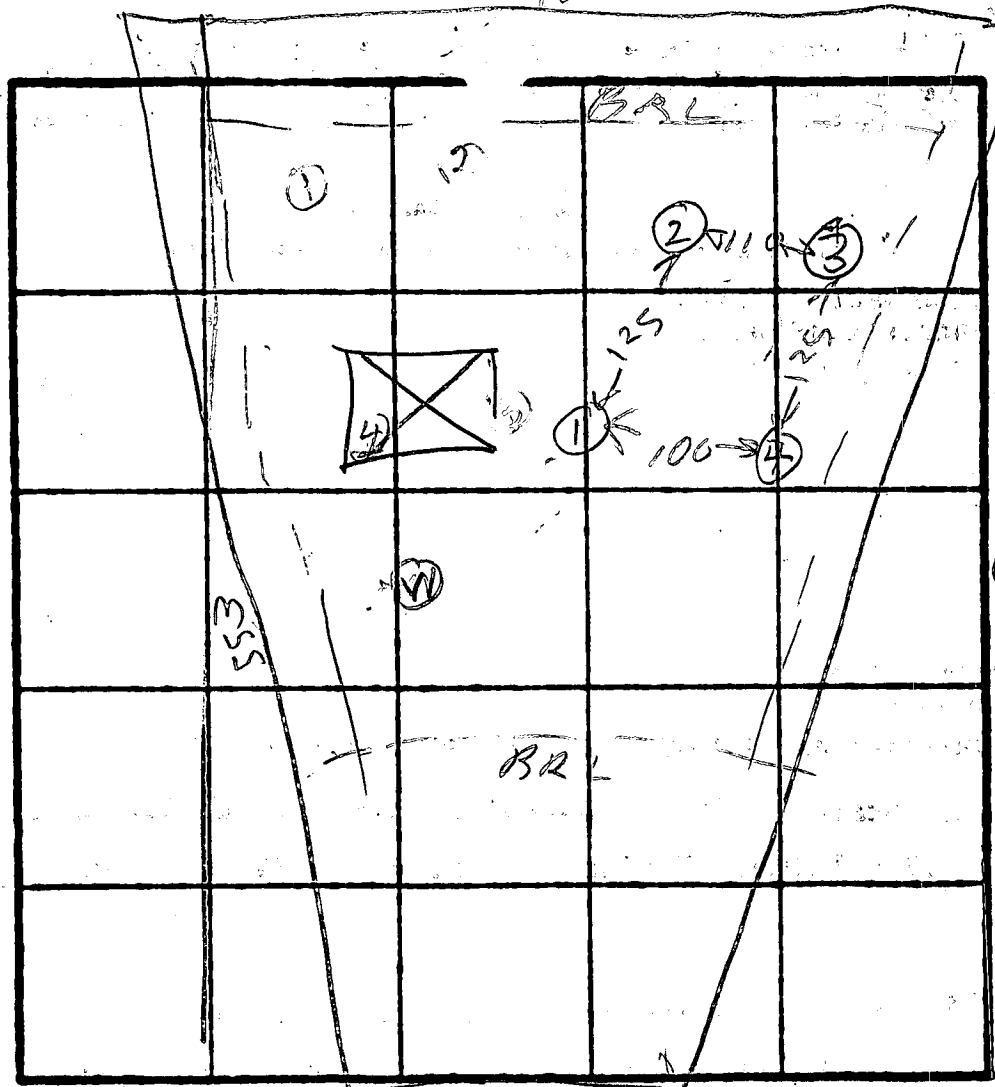
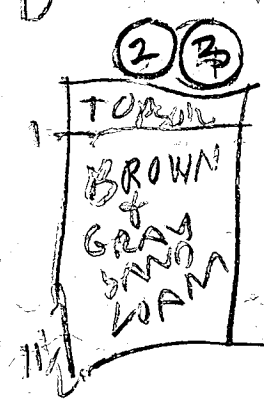
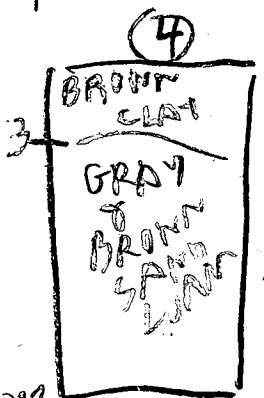
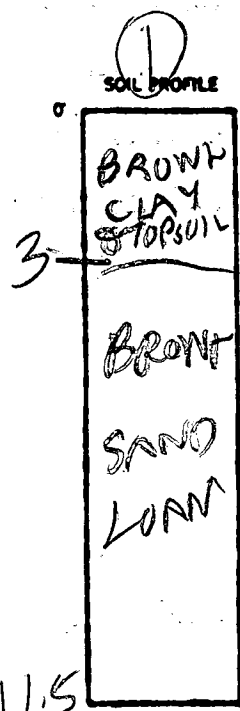
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

LOT 1



HOLE ELEVATION
 (1)(2) = HIGH
 (3)(4) = LOW
 250
 310
 $\bar{x} = 4 \text{ min}$
 INLET 3 FE
 BOTTOM 9 FE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/10/55	1 S	3.5	159	210	210	221	11
	1 V	11.5					
5/20/55	2 S	3.5	204	206	206	208	2
	2 V	11	LOOKS OK		OK		
	3 S	3 1/2	213	214	214	215	2
	3 V	11 1/2	LOOKS OK				
	4 S	3	125	135	135	146	1
	4 V	13	LOOKS OK				

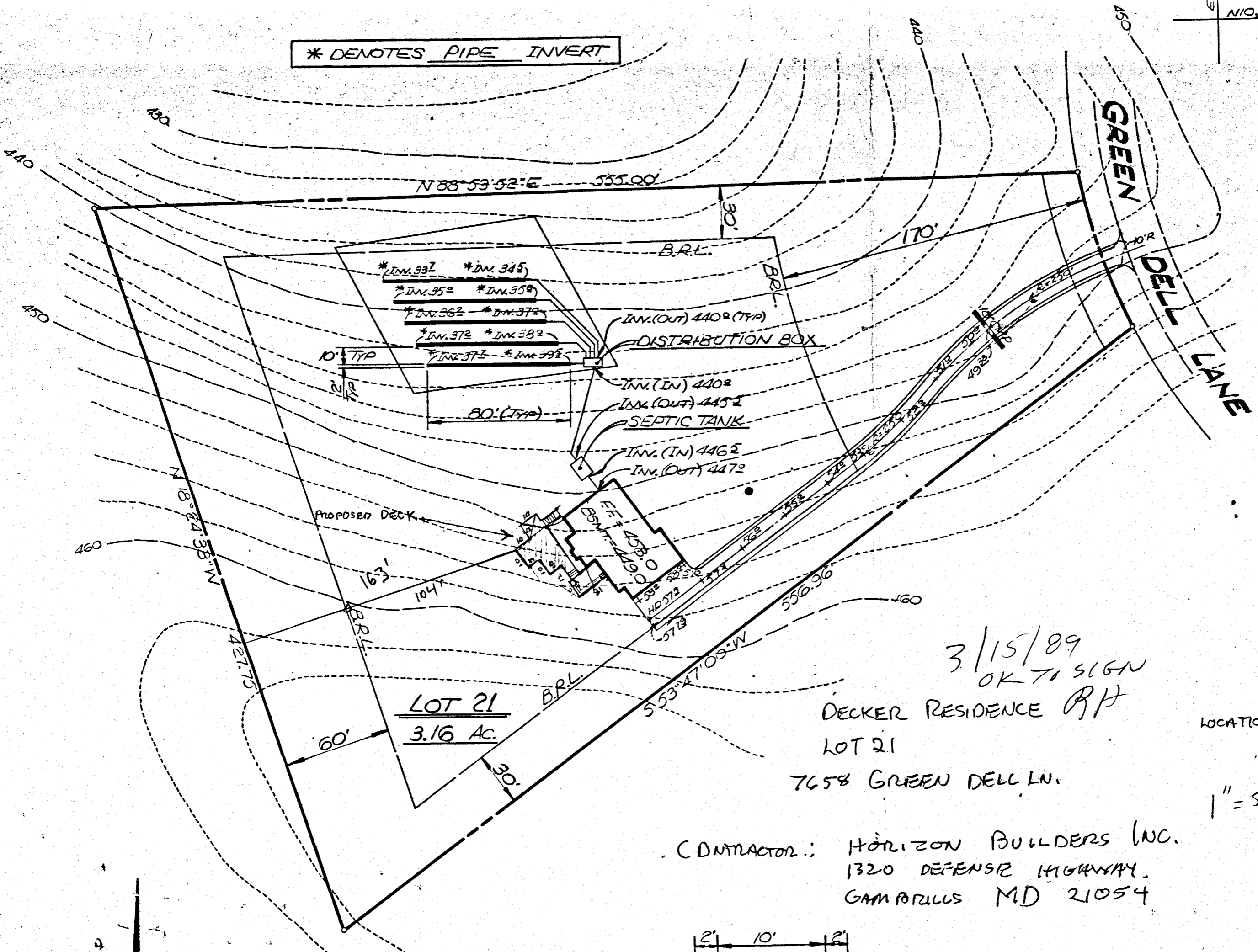
175
 60
 1050
 175
 20
 10450
 175
 10000
 61055

EH-12-1079

REMARKS HOLES DUG PER SURVEY OR PLAT (B)
 TYPE OF SOIL _____
 TESTED BY B. HODGES ALSO PRESENT K HATFIELD

* DENOTES PIPE INVERT

N10,500



GENERAL NOTE

1. TRENCHES 7'
2. INLET 3.5' L BEGINS AT 7'
3. BOTTOM OF T ORIGINAL G
4. 4.5' OF STC
5. TRENCHES
6. CALL FOR 11 IS INSTALL
7. PROVIDE 6 GRADE OR.

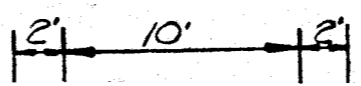
3/15/89
OK TO SIGN

DECKER RESIDENCE RH
LOT 21
7658 GREEN DELL LN.

LOCATION OF DECK

1" = 50'

CONTRACTOR: HORIZON BUILDERS INC.
1320 DEFENSE HIGHWAY.
GAMBRILL MD 21054

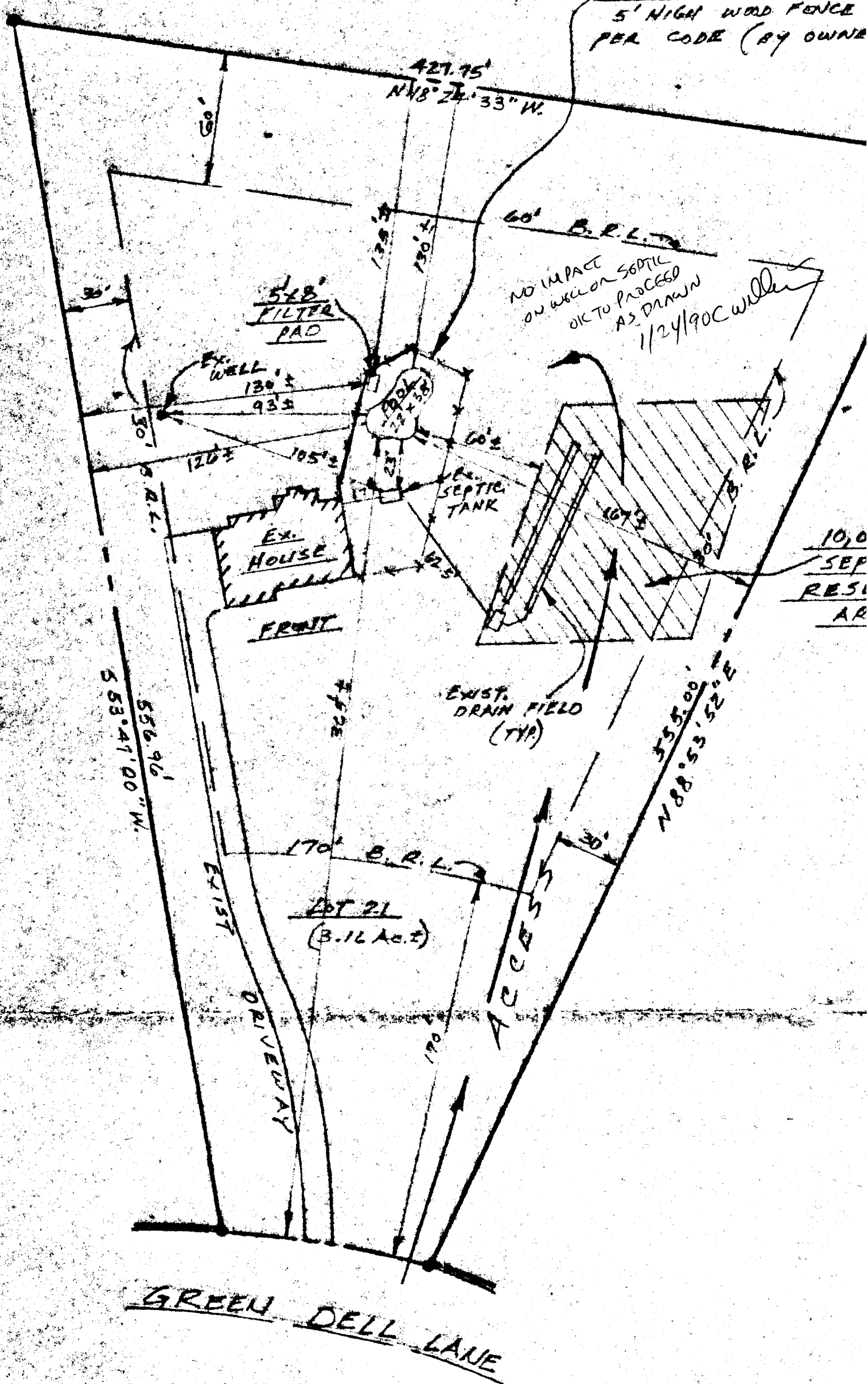


T BACKS	
AR PL	10'
DE PL	30'
USE	10'
PTIC	20'
LL	10'

PRIVATE WELL & SEPTIC

NOTE:
A VACUUM BRKR. WILL BE
INSTALLED AS PER CODE.

FENCE DATA:
5' HIGH WOOD FENCE
PER CODE (BY OWNER)



SITE PLAN
SCALE: 1"=50'

7658 GREEN DELL LANE
HOWARD COUNTY, MD. 20777

CUSTOMER APPROVAL _____ DATE _____

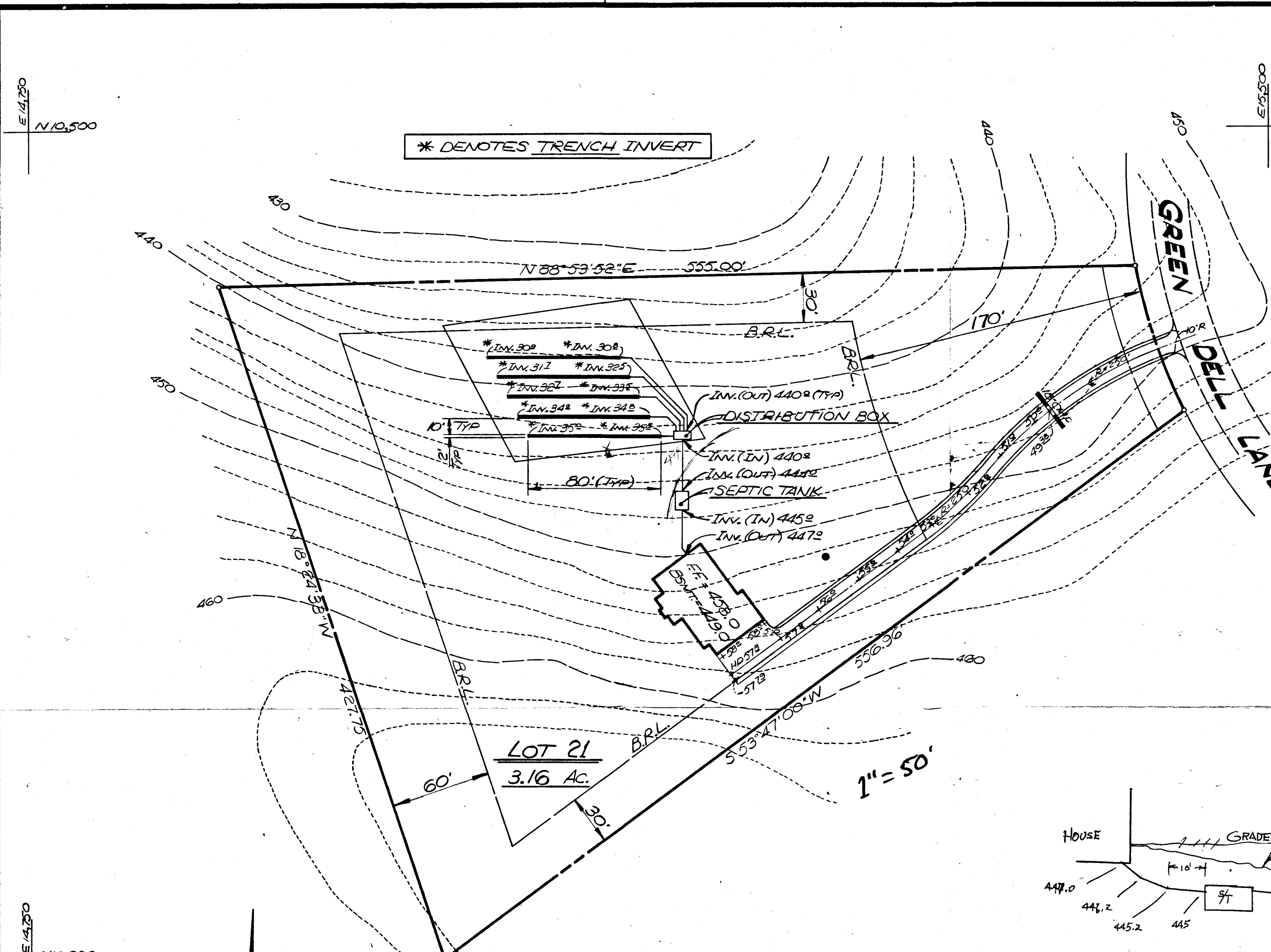
CHECKED BY - SALESMAN _____

CHECKED BY - DRAFTSMAN _____

DIRECTIONS	RTE.
_____	(WEST)
_____	RIGHT
_____	BRIDGE
_____	RIGHT
_____	CONT.

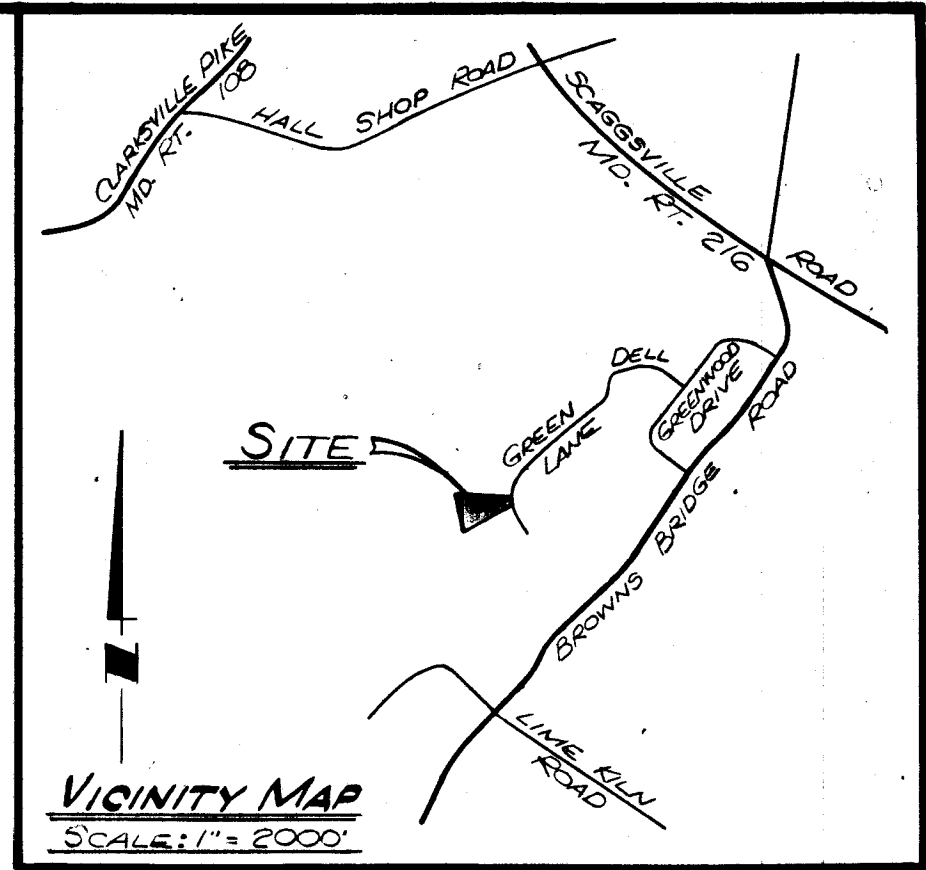
MPM CONSTRUCTION CO. INC. BUILDERS OF

MARYLAND POOLS INC.



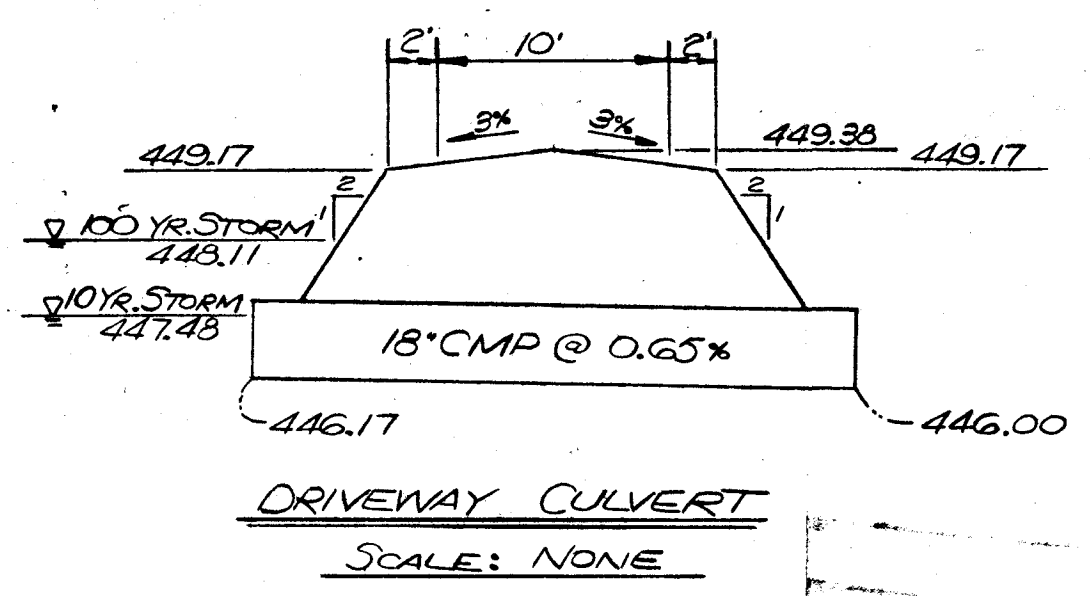
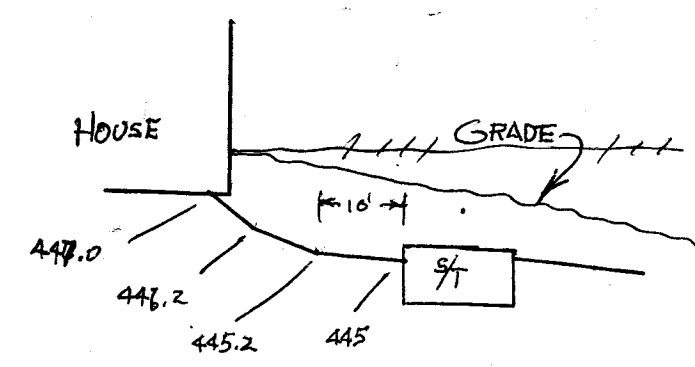
GENERAL NOTES:

1. TRENCHES TO BE 2' WIDE.
2. INLET 3.5' BELOW ORIGINAL GRADE. EFFECTIVE AREA BEGINS AT THIS DEPTH.
3. BOTTOM OF TRENCH MAXIMUM DEPTH IS 8' BELOW ORIGINAL GRADE.
4. 4.5' OF STONE BELOW DISTRIBUTION PIPE.
5. TRENCHES TO BE INSTALLED ON LEVEL GROUND.
6. CALL FOR INSPECTION OF TRENCHES BEFORE STONE IS INSTALLED.
7. PROVIDE 6"-8" DIAMETER CLEANOUT AND CAP TO GRADE OR ABOVE ON SEPTIC TANK.



RECEIVED
HOWARD COUNTY
HEALTH DEPT.
MAR 9 9 52 AM '88
PUBLIC HEALTH

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD.
MAR 7 11 37 AM '88

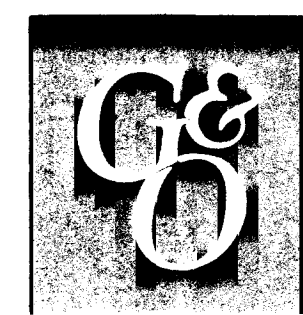


B.P. # 16196

PRINTED
FEB 25 1988
GREENHORNE & O'MARA, INC
BALTIMORE OFFICE

APPROVED: FOR PUBLIC WATER & PUBLIC SEWERAGE SYSTEMS HOWARD COUNTY HEALTH DEPARTMENT	
COUNTY HEALTH OFFICER _____	DATE _____
APPROVED: FOR PUBLIC WORKS, PUBLIC SEWERAGE, STORM DRAINAGE SYSTEMS & PUBLIC ROADS HOWARD CO. DEPT. OF PUBLIC WORKS	
DIRECTOR _____	DATE _____
CHIEF, BUREAU OF ENGINEERING _____	DATE _____
APPROVED: HOWARD COUNTY OFFICE OF PLANNING & ZONING	
PLANNING DIRECTOR _____	DATE _____
CHIEF, DIV. OF COMMUNITY PLANNING & LAND DEVELOPMENT _____ DATE _____	

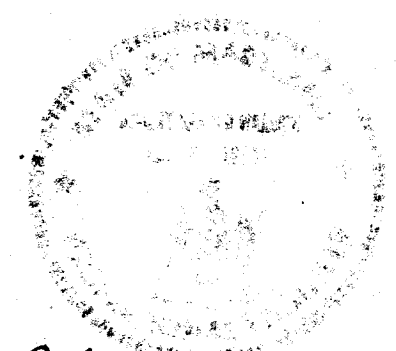
OWNER:
HORIZON BUILDERS
1320 DEFENSE HIGHWAY
GAMBRILLS, MARYLAND 21054
(301) 721-4877



ENGINEERS • ARCHITECTS • PLANNERS • SCIENTISTS • SURVEYORS • PHOTOGRAMMETRISTS
GREENHORNE & O'MARA, INC.
113 WEST ROAD, SUITE 208, BALTIMORE, MARYLAND 21204
(301) 296-4100
ANNAPOLIS, MD • ATLANTA, GA • AURORA, CO • CULPEPER, VA • EXPORT, PA • FAIRFAX, VA
GREENBELT, MD • MANASSAS, VA • MONROE, MI • RALEIGH, NC • ROCKVILLE, MD • TAMPA, FL

**SITE DEVELOPMENT PLAN - Lot 21
LIME KILN VALLEY
SECTION 2. AREA 2
TAX MAP 40 PARCEL 490 PLAT 6653
5TH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND**

DESIGN	SCALE 1" = 50'
JDP DRAWN	1 OF 1
RHM CHECKED	
FEB., '88 DATE	JOB No.
	B-1012-P FILE No.



Robert H. Mannon

B 7 9326

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

please print or type

OEP PERMIT NUMBER

HC-81-2349

fill in this form completely

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

Date Received

8 13

OWNER INFORMATION

HORIZON BULLOCKS

1370 DEFENSE HIGHWAY

GAMMILLS MOWICSA

B 3

LOCATION OF WELL

HOWARD

LIME KILN VALLEY

SECTION 2 LOT 21

HIGHLAND

MILES FROM TOWN (enter 0 if in town) 2 1/2 MI

DRILLER INFORMATION

Joseph H. Wayne 238

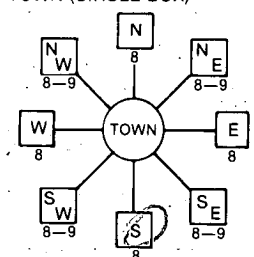
Joseph H. Wayne Well Drilling

5512 Ridge Rd. Mt. Airy, Md. 21771

Joseph H. Wayne 9/18/87

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Broadell Lane

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



DISTANCE FROM ROAD 225

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 A35428

COUNTY NAME COUNTY NO. OEP SIGNATURE STATE HEALTH INSERT S

DATE ISSUED 10/13/87 B. Nipon 04/13/88

NORTH GRID 483000 EAST GRID 0813000

APPROXIMATE DEPTH OF WELL 300 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

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 PERMIT No. HC-81-2349

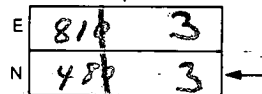
SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

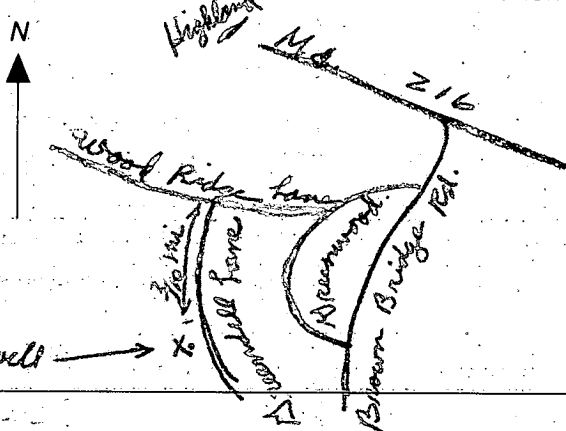
SOURCES OF DRILLING WATER

- 1. WELL
2.
3.

WRITE THE BOX NUMBER FROM THE MAP HERE



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



Page of
 Date 10/20/89

Review 12/30/89
42 open
12 logs
SMW

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2349
 Location of property (road) GREENDELL LANE
 Subdivision LIME KILN VALLEY Lot 21 Block Plat Sec. 2
 Well Driller JOSEPH MAYNE Owner BUILDERS, HORIZONS

Depth of well 345'
 Distance of measuring point (M.P.) above ground, 1'
 Static water level (S.W.L.) below M.P. 40'

I. High rate pumping -- reservoir drawdown

Time pump started 7:30 Pumping rate 12 gal
 Total time 45 min to reach pumping water level 177 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 \$ gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
7:45	93'	5 sec		12
8:00	120	5		12
8:15	177	6		10
8:30	177	23		2.6
8:45	177	23		2.6
9:00	177	23		2.6
9:15	177	23		2.6
9:30	177	23		2.6
9:45	177	23		2.6
10:00	177	23		2.6
10:15	175	23		2.6
10:30	175	20		3
10:45	175	20		3
11:00	175	20		3
11:15	175	20		3
11:30	175	20		3
11:45	175	20		3
12:00	175	20		3
12:15	175	20		3
12:30	175	20		3
12:45	175	20		3
1:00	175	20		3
1:15	175	20		3
1:30	175	20		3
HD-224: 45	175	20		3
2:00	175	20		3

Water Level

Pumping rate

Flow

2:15

175

20

3

RECEIVED
HOWARD COUNTY
HEALTH DEPARTMENT

NOV 23 4 11 PM '87

HEALTH DEPARTMENT
HOWARD COUNTY

1/13/89
12 noon

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation Replacement _____ Receipt # 434100
Date 1/11/89

Name of Installer Wolford's Well & Pump Service Inc. Telephone 437-3957

License Number _____ Certified Well Pump Installer Well Driller _____ Registered Plumber _____

Name of Property Owner Horizon Builders Telephone _____
Subdivision ~~Limekiln Valley~~ Lot # 21 Well Tag # HD-91-2349
Site Address 7650 Green Bell Road

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
2. Make _____	b. 220 _____	
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	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? _____

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: *Robert J. Wolford*
Date: 1-11-89

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

HD-215 1-13-89 11:00 pm Just starting to dig trench. JEN