

2/11/88 ASAT

2/8/88 117

05-398800

2/16/88  
House inspection  
needed

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

P 40931

A 35435

DISTRICT 5th

DATE 2/9/88

DATE SYSTEM APPROVED 5-4-88

INSPECTOR S. Allen

**INDEXED**

Paul Schissler

IS PERMITTED TO INSTALL  ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Lime Kiln Valley ROAD 7622 Green Dell Lane LOT 15, Section 2

PROPERTY OWNER McCoy

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 - 180 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 120 feet from the back lot line and 110 feet from the left side of the lot as seen when facing the lot from Green Dell Lane. Run the trenches toward the right side of the lot as seen when facing the lot from Green Dell Lane.

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

**\*** LOCATION TO BE ADJUSTED WHEN HOUSE INVERT IS EXCAVATED, 1/14/88 CW.

PLANS APPROVED BY R. Hodges (see over) DATE 7/24/86

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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.

40931

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

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

EH - 2-1186

A 35435



# 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 35435

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. NEW 15

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

SIZE OF LOT 3.185 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.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY Raymond Hodges FOR TRENCH DATE 7/24/86

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

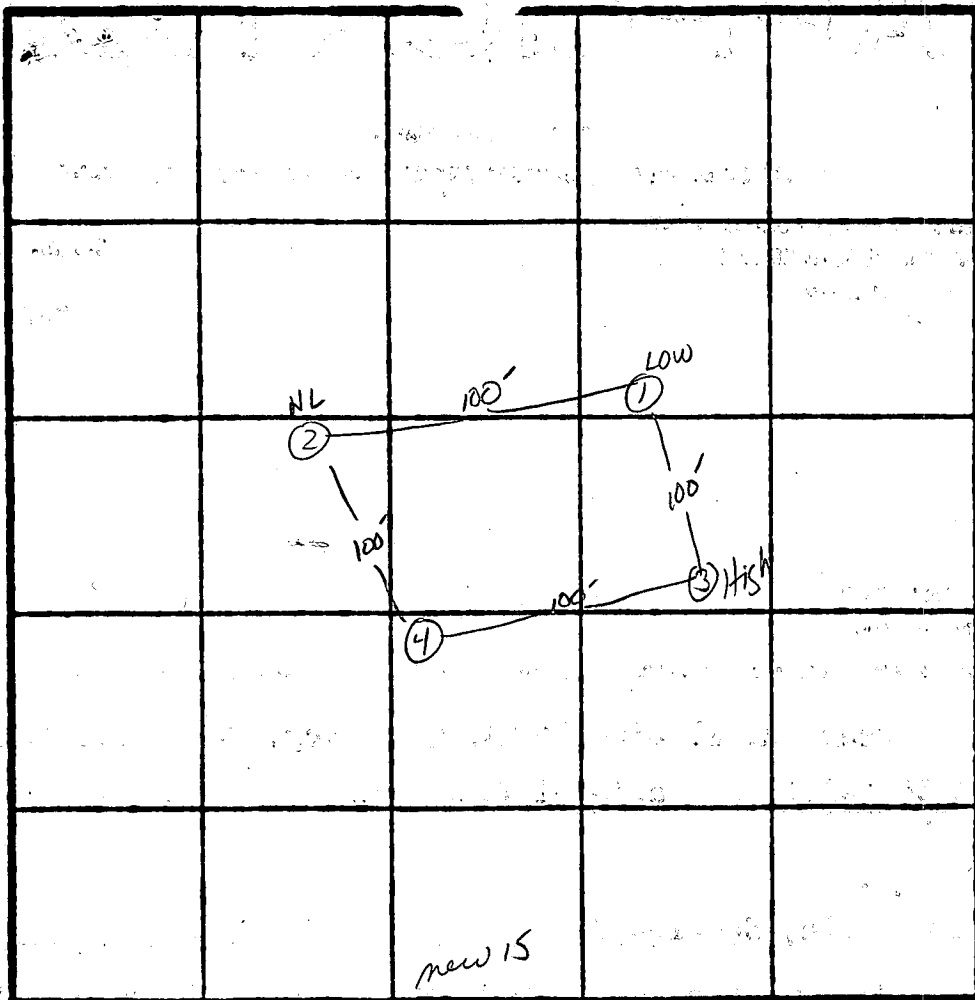
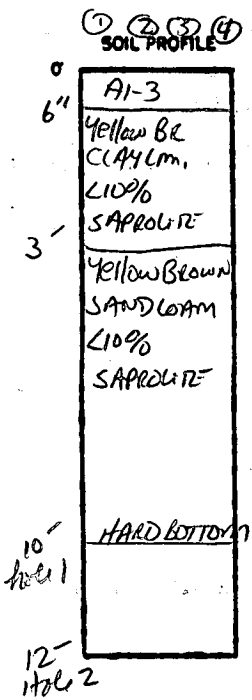
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 62005 loc. Ent. Inter. - hold for certified Subdivision Plat 8/10  
7/24/86 Spear/Wittler R/V

BLDG. PERMITS SIGNED AND RETURNED 4-7-87

BP# 10120  
840

# THIS IS NOT A PERMIT



$\bar{x} = 7 \text{ min}$   
INLET 3'  
BOTTOM 8'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
PROPOSED Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/24/85	1 S ✓	3" 10"	2:48 HARD BOTTOM	2:50 See Profile	2:50 2:53	3 min	
	2 S ✓	3.5" 12"	2:53 See Profile	2:58	2:58 3:10	12 min	
	3 S ✓	3" 12"	3:04 See Profile	3:06	3:06 3:11	5 min	
	4 S ✓	3" 12"	3:09 See Profile	3:12	3:12 3:17	5 min	

EH-12-1079

REMARKS NO VISIBLE LOT LINES OR CORN MARKERS NOTED - LOT IN WOODS

TYPE OF SOIL

TESTED BY

Sabel

ALSO PRESENT

Kenny Hatfield, SPEAR  
Developer



B 1 2171 SEQUENCE NO. (OEP USE ONLY)  
1 2 3 6  
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

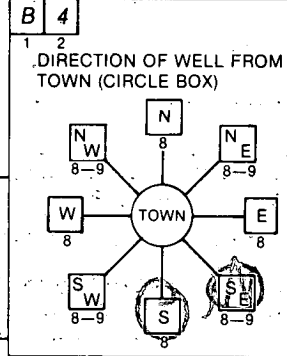
STATE OF MARYLAND  
PERMIT TO DRILL WELL  
please print or type

OEP PERMIT NUMBER  
NO-81-1835  
fill in this form completely

Date Received  
OWNER INFORMATION  
8 13  
Mc COY LARRY  
15 Last Name 8 Owner 13 First Name 34  
1913 STOWEHEARTH CT  
36 Street or RFD 55  
SERVERN MD 21144  
57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL  
1 2  
HOWARD  
8 COUNTY 21  
LIME KILN VALLEY  
23 SUBDIVISION 42  
SECTION 44-46 LOT 15  
48 50  
HIGHLAND  
52 NEAREST TOWN 71  
MILES FROM TOWN (enter 0 if in town) 3 73 76 77 78

DRILLER INFORMATION  
Ralph Mayne 273  
Driller's Name 77 License No. 80  
Ralph Mayne (well drilling)  
Firm Name  
5120 Brown Church Rd. Mt. Airy  
Address  
Ralph Mayne 12/1/86  
Signature Date



Green Dell Ct.  
11 NEAR WHAT ROAD 30  
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
NORTH  
W 32 E  
WEST SOUTH EAST  
34 35 37  
DISTANCE FROM ROAD  
ENTER FT or MI 47  
38 39

B 2 WELL INFORMATION  
1 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)
- D 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  
HOWARD A35435  
COUNTY NAME COUNTY NO.  
OEP SIGNATURE STATE HEALTH INSERT S. 41  
DATE ISSUED  
10287 B. Nixon 07/02/87  
43 48 CO SIGNATURE EXP. DATE  
NORTH GRID: 483 0 0 0 50 55  
EAST GRID: 3813 0 0 0 57 63

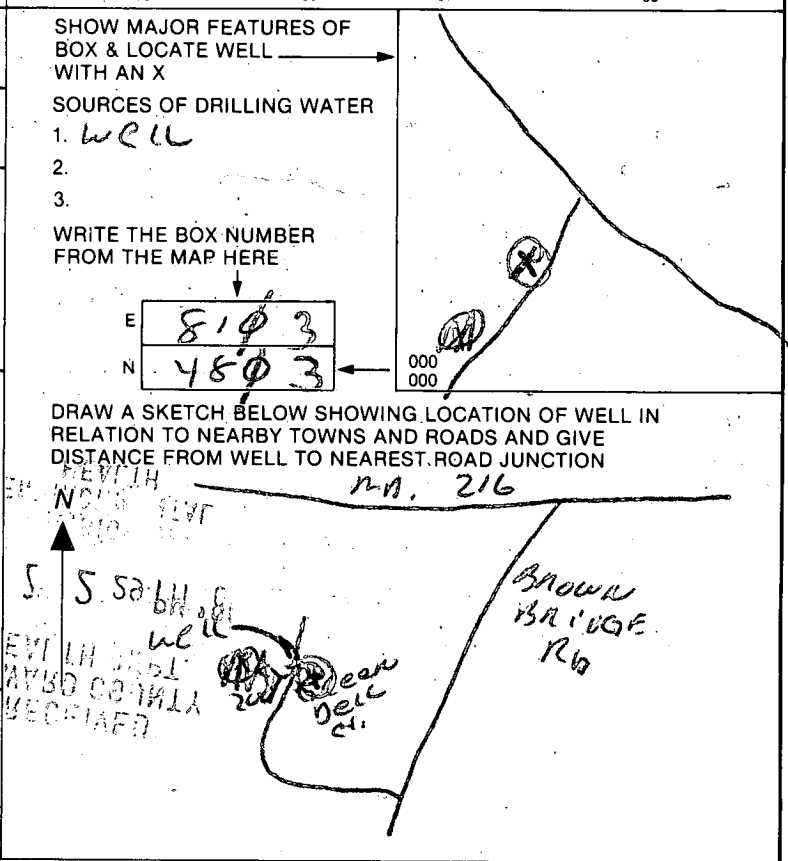
APPROXIMATE DEPTH OF WELL 150 24 28 FEET

APPROXIMATE DIAMETER OF WELL 6" NEAREST INCH

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 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  
39  S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY  
 D THIS WELL WILL DEEPEN AN EXISTING WELL  
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41

Not to be filled in by driller (OEP USE ONLY)  
APPROP. PERMIT NUMBER GAP 54 63  
FORCE  WRITE INITIALS IN BOX PERMIT No. NO-81-1835  
67 68 70 71 72 73 74 75 76 77 78 79





C1 3780

SEQUENCE NO. (OEP 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-35435

DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED grid

Depth of Well grid

PERMIT NO. grid

OWNER: Mc Coy LARRY; STREET OR RFD: GREENDELL LANE; TOWN: HIGHLAND; SUBDIVISION: LIME KILN VALLEY; SECTION: 2; 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. Rows include: Top Soil, Sandy, Sand Stone, Mica, Sand Stone, Mica.

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N); TYPE OF GROUTING MATERIAL: CEMENT (CM), BENTONITE CLAY (BC); NO. OF BAGS: 11; NO. OF POUNDS: 1100; GALLONS OF WATER: 66; DEPTH OF GROUT SEAL: from 0 to 15 ft.

CASING RECORD: MAIN CASING TYPE: PL (60-61); Nominal diameter: 6; Total depth of main casing: 50; OTHER CASING: none.

SCREEN RECORD: screen type: HO (OPEN HOLE); SLOT SIZE: 1; DIAMETER OF SCREEN: 6; DEPTH OF SCREEN: 15.

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

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER): TELESCOPE CASING, LOG INDICATOR, OTHER DATA.

PUMPING TEST

HOURS PUMPED: 3; PUMPING RATE: 10 gal. per min.; MEASURED USING: Bucket; WATER LEVEL: BEFORE PUMPING 30, WHEN PUMPING 15; TYPE OF PUMP USED: S (submersible).

PUMP INSTALLED

DRILLER WILL INSTALL PUMP: YES (NO); CAPACITY: GALLONS PER MINUTE; PUMP HORSE POWER; PUMP COLUMN LENGTH; CASING HEIGHT: above/below land surface.

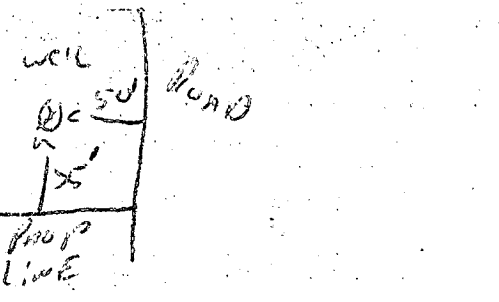
LOCATION OF WELL ON LOT: SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

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. 273; DRILLERS SIGNATURE: Ralph Wayne

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



2/22/88

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

ck # 881

New Installation   
Replacement

Receipt # 40110  
Date 9/15/87

Name of Installer ART B. CROUSE

Telephone 876-8316

License Number 6248  
Certified Well Pump Installer

Well Driller

Registered Plumber

Name of Property Owner Mr & Mrs McCoy  
Subdivision LIME KILN VALLEY Lot # 15  
Site Address 7122 GREEN DELL LANE Highland Md.

Telephone \_\_\_\_\_  
Well Tag # HO-81-1835

Pump

- 1. Type
  - a. Deep well jet
  - b. Shallow well jet
  - c. Submersible
- 2. Make TAIT
- 3. Model # \_\_\_\_\_
- 4. Capacity 7 GPM

Motor

- 1. Horsepower 1/2
- 2. RPM \_\_\_\_\_
- 3. Voltage \_\_\_\_\_
  - a. 110 \_\_\_\_\_
  - b. 220

Pitless Adapter

- 1. Make Cambell
- 2. Model # R-10-X
- 3. Depth 48"

To be installed at later date

- 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 112 gal
- 2. Pressure relief valve? RV-50 75 PSI

Piping

- 1. Type 180 PSI Polyethylene
- 2. Size 1"
- 3. NSF and/or BOCA Code approved YES
- Depth of supply line 145

Well data

- 1. Depth 165 ft.
- 2. Yield 10 GPM
- 3. Static water level \_\_\_\_\_ ft.
- 4. Will water supply be disinfected by installer? NO

2/7/88  
lines installed + covered  
OK to cover

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.

2-22-88 Pitless adaptor Signature of Applicant: Art B. Crouse  
at 42 inches, OK to cover all of trench. Pump installed. Date: 9/15/87

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