

6/30/86  
12  
6/25/86  
A

6/20/86  
Septic OK'd  
Pa

# PERMIT

P 35576

A 35576

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH

05-344069

ELLICOTT CITY

DISTRICT \_\_\_\_\_

DATE 6/9/86

461-9933

INDEXED

Pat Lendrim IS PERMITTED TO INSTALL  ALTER \_\_\_\_\_

ADDRESS 14010 Forsythe Road, Sykesville, MD 21784 PHONE 442-2416

SUBDIVISION \_\_\_\_\_ ROAD 13191 Highland Road LOT \_\_\_\_\_

PROPERTY OWNER Evelyn Easter Brian  
13191 Highland Road

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Place the distribution box or start the trench 170 feet off E650.10 line and 210 feet off 273.04 line (area of high perc hole). Run trench along contour towards corner of 650.10 and 273.04 lines.

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. *OK/CW*

PLANS APPROVED BY S. Abel DATE 6/19/86

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: 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.

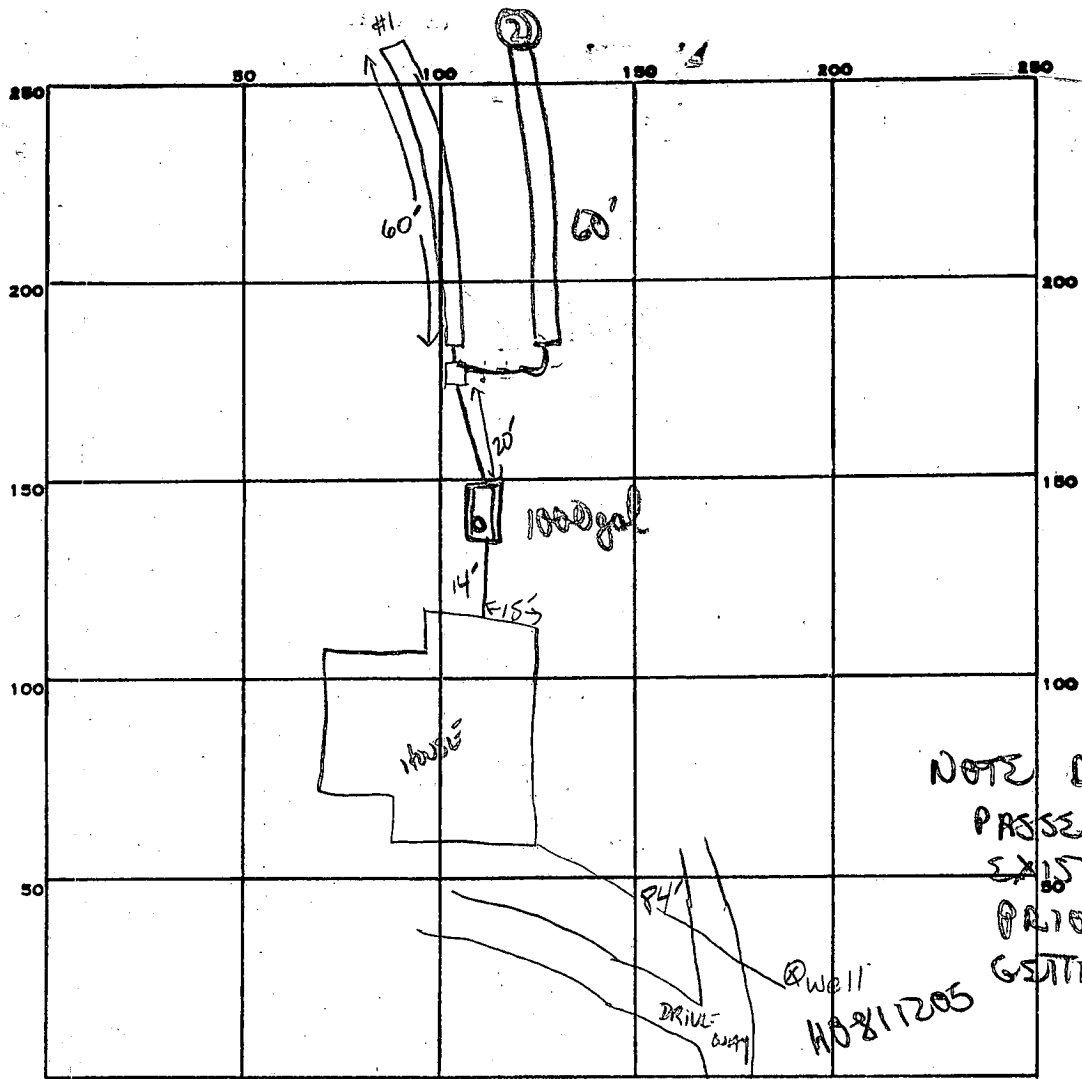
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 35576



1.23  
5/1600  
M

NOTE DRIVEWAY  
PASSES 3-4  
EXISTING HOUSES  
PRIOR TO  
GETTING HERE

600 mm

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

PERMIT CARD ✓ final

SEPTIC TANK, LEVEL ✓ 1000gal CLEANOUTS 1 S.T.

DISTRIBUTION BOX, LEVEL 9 + 9

TILE FIELD, DEPTH 9 + 9 FT. TRENCH WIDTH 2 FT. INLET 4

GRAVEL DEPTH 5 FT. IN. TOTAL LENGTH 60' 60'

NUMBER OF TRENCHES 2 1 SIDE WALL TOTAL BOTTOM AREA 300 +

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

ABSORBENT AREA — SQ. FT.

REMARKS 6/25/86 OK TO ADD SIDING, PIPE & PAPER TO TRENCH #1 S. Abol.

6/26/86 OK to cover from house to dist box. OK to lay paper in trench #1 & cover. OK to start trench #2

6/30/86 OK to finish adding stone pipe paper to trench #2

6/30/86 OK to cover trench #2 & all work

DATE SYSTEM APPROVED 6/30/86 INSPECTOR B Nixson

A# 35576 Brian 4 Bed room  
B.P.# 68176

Drywell - 2 - 15 ft. sq.

or 1 drywell & 60 ft trench

@ disposal 2 - 15 ft. sq. drywells &  
25' trench

Trench only system

2 - 75' trenches

@ disposal 2 - 90 ft. trenches

---

3 B.R. 1 - 15' sq drywell & 30 ft. trench

@ disposal 2 drywells

1 - 13' sq. & 1 - 14' sq.

or 1 - 15' sq @ 50' trench

6/13/85

# APPLICATION

151

A 35576

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 May 20, 1985

*Dry well - 300 sq. ft. (15' x 15' effective)  
INLET 4 ft. max. below orig. grade  
maximum total depth 9' below orig. grade*

*located 210' from the 273' lot line and 170' from the  
650' lot line*

**FORM**

TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

*if trench only start 210' from the 273' lot line and 210'  
from 650' lot line & run toward corner of 273' &  
650' lot lines*

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

*Sandra & Garland*

PROPERTY OWNER Evelyn Esther Brian

ADDRESS 12871 Highland Rd., Highland, Md. 20777 PHONE ~~531-5519~~ 854-2794

2161

PROPERTY LOCATION:

SUBDIVISION NA LOT NO. NA

ROAD AND DESCRIPTION 13191 *One mile from the intersection of Rt. 108 and Highland Rd. (west) turn  
left on dirt lane (seven pieces of property use this lane). This property is the  
second right of way on the right being mostly in the woods. Stop at 1st house  
on the right for directions.*

SIZE OF LOT 4.707 acres TYPE BLDG. 3-4 bedrooms  
(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. E. Esther Brian  
(SIGNATURE OF APPLICANT)

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

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

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

REASONS FOR REJECTION OR HOLDING 6-13-85- Perc results satisfactory; Hold for certified hole  
location - 8th Ave B.P. 68176

BLDG. PERMIT SIGNED  
AND RETURNED 12-16-85

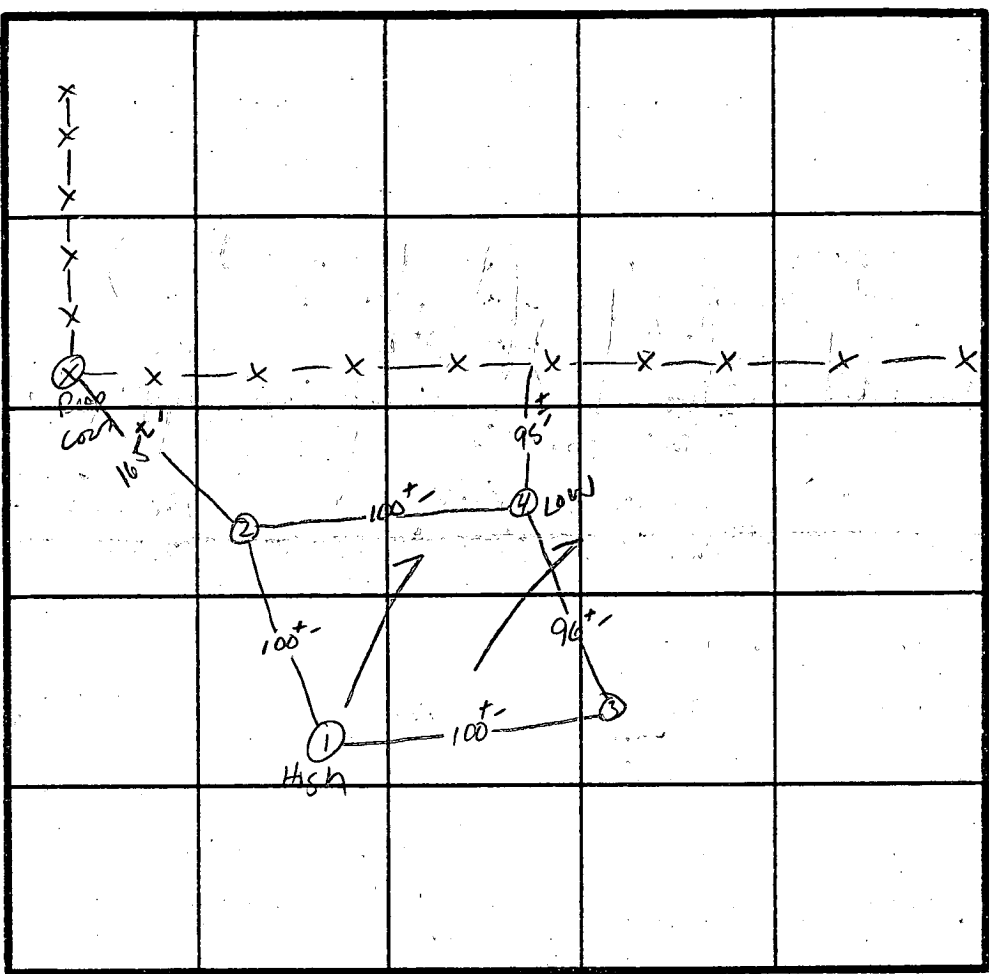
# THIS IS NOT A PERMIT

132  
3/3  
1/5

①

SOIL PROFILE

0" A1-3  
6" Yellow Red LOAM CLAY <10% SAPROLITE  
4.5 Yellow Red SAND LOAM <10% SAPROLITE  
9' High



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

② ④  
0" A1-3  
8" Yellow Red LOAM CLAY <10% SAPROLITE  
3.5 Yellow Red SAND LOAM 10-20% SAPROLITE  
8'

③  
0" A1-3  
6" Yellow BR. LOAM/CLAY <10% SAPROLITE  
3' Yellow BR. SAND LOAM 10-20% SAPROLITE  
13'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6/13/85	1 S	5"	10:34	10:41	10:41	10:55	14min	
	1 M	9"	10:17	10:19	10:19	10:23	4min	
	2 S	4"	10:26	10:29	10:29	10:34	5min	
	2 M	8"	10:25	10:30	10:30	10:37	7min	
	3 S	4"	10:46	10:58	10:58	11:22	24min	
	3 V	13"	UNIFORM SOIL STRUCTURE Below 3"					
	4 S	4"	10:51	10:56	10:56	11:08	12min	
	4 M	8"	11:01	11:08	11:08	11:22	14min	

REMARKS Perc As Per PLAT / Preference for Dry Well to Preserve Woods

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

TESTED BY S Abel

FAT LINDERMAN

ALSO PRESENT \_\_\_\_\_

EM 12-1079

B 1 **7095** SEQUENCE NO. (OEP USE ONLY)

(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-81-1205**

fill in this form completely

Date Received **11/20/85**

**7007265** OWNER INFORMATION

**KALAN GOLIAND** Last Name Owner First Name

**13193 Highland Rd** Street or RFD

**Highland** Town **MD 20777** State Zip

B 3 LOCATION OF WELL

**HOWARD** COUNTY

**PARCEL 281 MAP 34** SUBDIVISION

SECTION **44** LOT **48**

**Highland** NEAREST TOWN

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

DRILLER INFORMATION

**George F. Custard** Driller's Name **40** License No. 80

**L. Franklin Custard Inc** Firm Name

**9245 Brown Church Rd Mt Airy Md** Address

**Ray F. Postley** Signature **10-7-85** Date

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

**1319 Highland Rd** NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

**1200** DISTANCE FROM ROAD

ENTER FT or MI **7**

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 **A-35576** COUNTY NO.

OEP SIGNATURE \_\_\_\_\_ STATE HEALTH INSERT S \_\_\_\_\_

DATE ISSUED **10/17/85** CO SIGNATURE \_\_\_\_\_ EXP. DATE **11/17/86**

NORTH GRID **493000** EAST GRID **020000**

APPROXIMATE DEPTH OF WELL **150** FEET

APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

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

**8007** **4903**

000 000

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

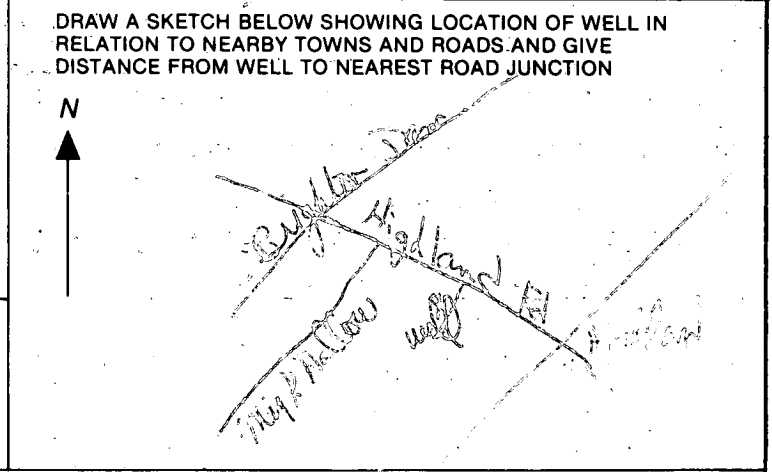
THIS WELL WILL NOT REPLACE AN EXISTING WELL

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) \_\_\_\_\_

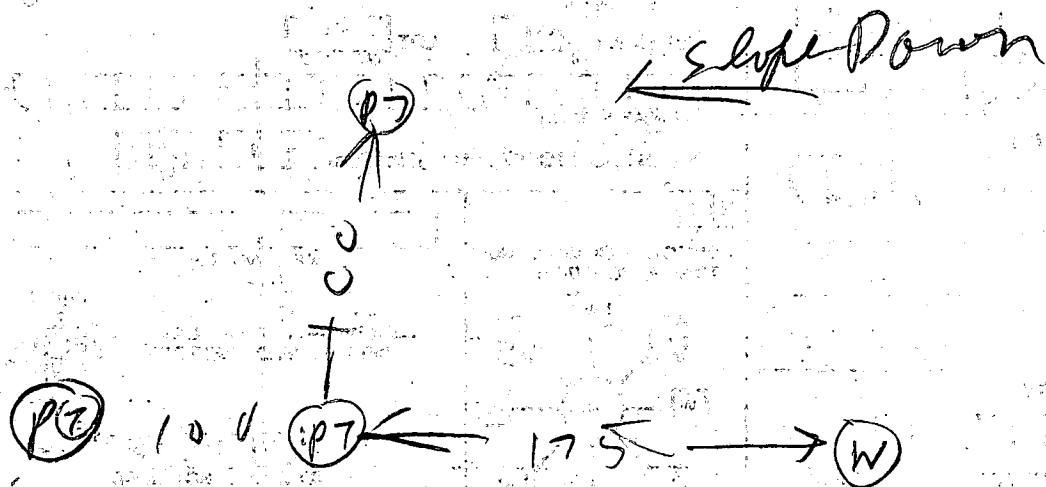


Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER \_\_\_\_\_ GAP \_\_\_\_\_

FORCE **20** INITIALS IN BOX PERMIT No. **NO-81-1205**

SPECIAL CONDITIONS



- ① 20 FT CASING 1 FT OUT OF GROUND
- ② 18 FT OPEN HOLE MEASURED WITH A STRING
- ③ LOCATION PROBABLY OR DUG IN WOODS BUT FOUND MERC HOLES
- ④ 5 BAGS

11/20/85

B. Hodger



*Wednesday*  
*8:00 11-20-85*  
*LHT*

**Pump Set AT**  
**290 FT**

**FIELD DATA SHEET**  
**HOWARD COUNTY WELL YIELD TEST**

Well Permit No. HO - 81 1205  
Location of property (road) 13191 HIGHLAND RD (PARCEL 281 T.MAR 24)  
Subdivision \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Plat \_\_\_\_\_ Sec. \_\_\_\_\_  
Well Driller GEORGE SARTER DAY Owner BRIAN GARLAND

Depth of well 300 - 1 1/2 GPM  
Distance of measuring point (M.P.) above ground 1 FT  
Static water level (S.W.L.) below M.P. 52 FT

**I. High rate pumping -- reservoir drawdown**

Time pump started 9:30 Pumping rate 8 GPM  
Total time 10:15 to reach pumping water level 151 ft. below M.P.  
*4 1/2 min*

**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 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:15	151 FT	30 SEC		2 GPM
10:30	151	30		2
10:45	151	30		2
11:00	150	25		2 1/2
11:15	151	30		2
11:30	151	30		2
11:45	151	30		2
12:00	151	30		2
12:15	151	30		2
12:30	151	30		2
12:45	151	30		2
1:00	151	30		2
1:15	151	30		2
1:30	151	30		2
1:45	151	30		2
2:00	151	30		2
2:15	151	30		2
2:30	151	30		2
2:45	151	30		2
3:00	151	30		2
3:15	151	30		2
3:30	151	30		2
3:45	151	30		2
4:00	151	30		2
4:15	151	30		2

7/8/86  
city

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

7/8/86  
partial (outside only)  
done + OK  
sticker attached

New Installation   
Replacement

Receipt # 36572  
Date 7/25/86

Name of Installer Crouse P+H Inc

Telephone 977-4164

License number 2356

Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner Janice + Garland Brian Telephone 854-2794

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ Well tag # NO-81-1203

Site Address 1312 Highland Road

- Pump
- Type
    - Deep well jet \_\_\_\_\_
    - Shallow well jet
    - Submersible
  - Make Coulters
  - Model # \_\_\_\_\_
  - Capacity \_\_\_\_\_ GPM
  - Pump exceeds well capacity Yes \_\_\_\_\_ No \_\_\_\_\_
  - If Yes, is low pressure cutoff switch installed? Yes \_\_\_\_\_ No \_\_\_\_\_
  - What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards \_\_\_\_\_ Other \_\_\_\_\_

- Motor
- Horsepower \_\_\_\_\_
  - RPM \_\_\_\_\_
  - Voltage \_\_\_\_\_
    - 110 \_\_\_\_\_
    - 220

- Pitless Adapter OR
- Make \_\_\_\_\_
  - Model # \_\_\_\_\_
  - Depth = 42"

pump, power lines in OK  
ground in (not mounted)  
OK

- Tank
- Capacity \_\_\_\_\_
  - Pressure relief valve? \_\_\_\_\_

still needs to be installed

- Piping
- Type \_\_\_\_\_
  - Size 1 1/2"
  - NSF and/or BOCA Code approved \_\_\_\_\_
  - Depth of supply line 42"

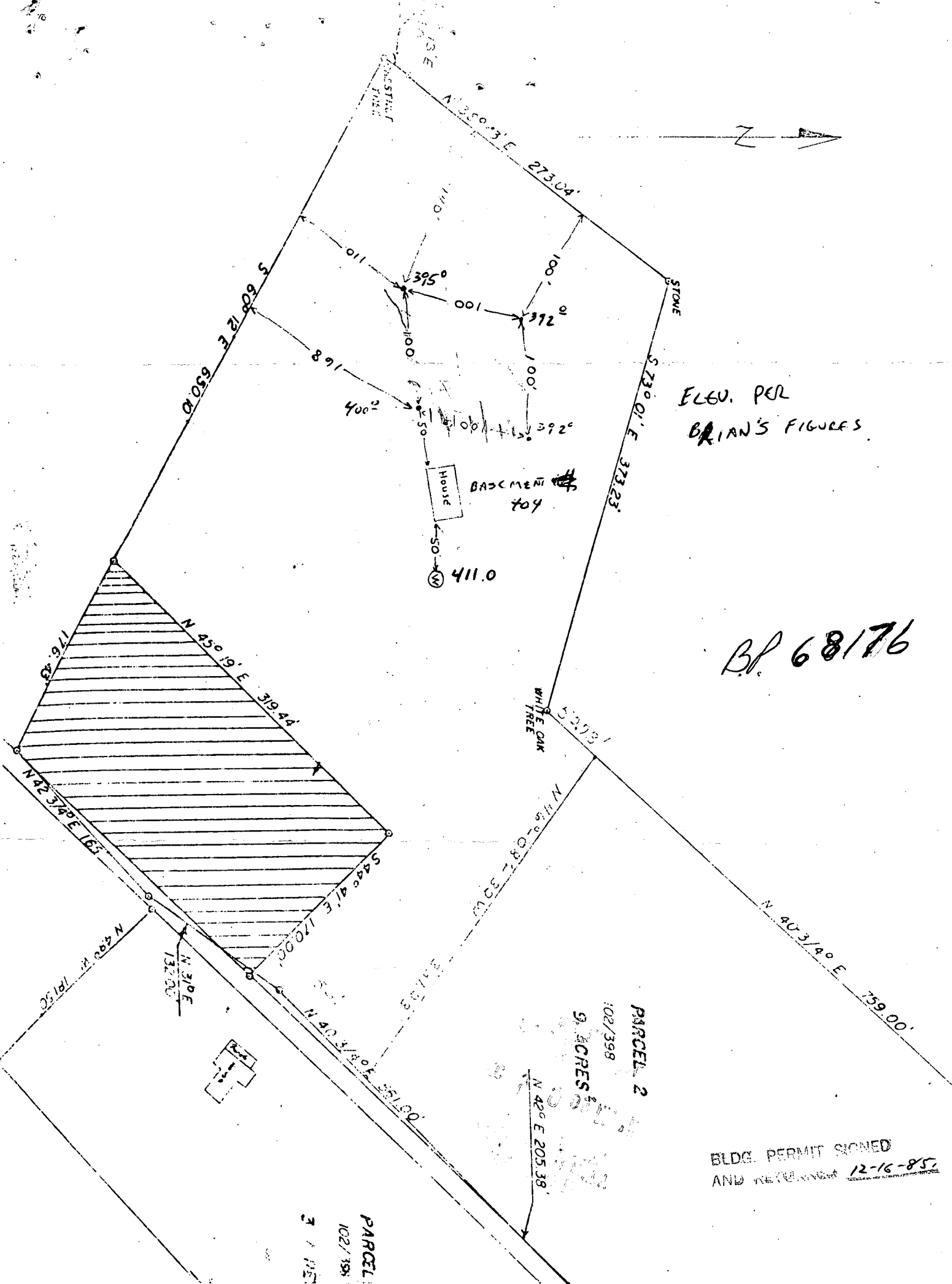
- Well data
- Depth \_\_\_\_\_ ft.
  - Yield \_\_\_\_\_ GPM
  - Static water level \_\_\_\_\_ ft.
  - Will water supply be disinfected by installer? yes

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: Charles J. Crouse  
Date: 7-21-86

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



Elev. per  
BRIAN'S FIGURES.

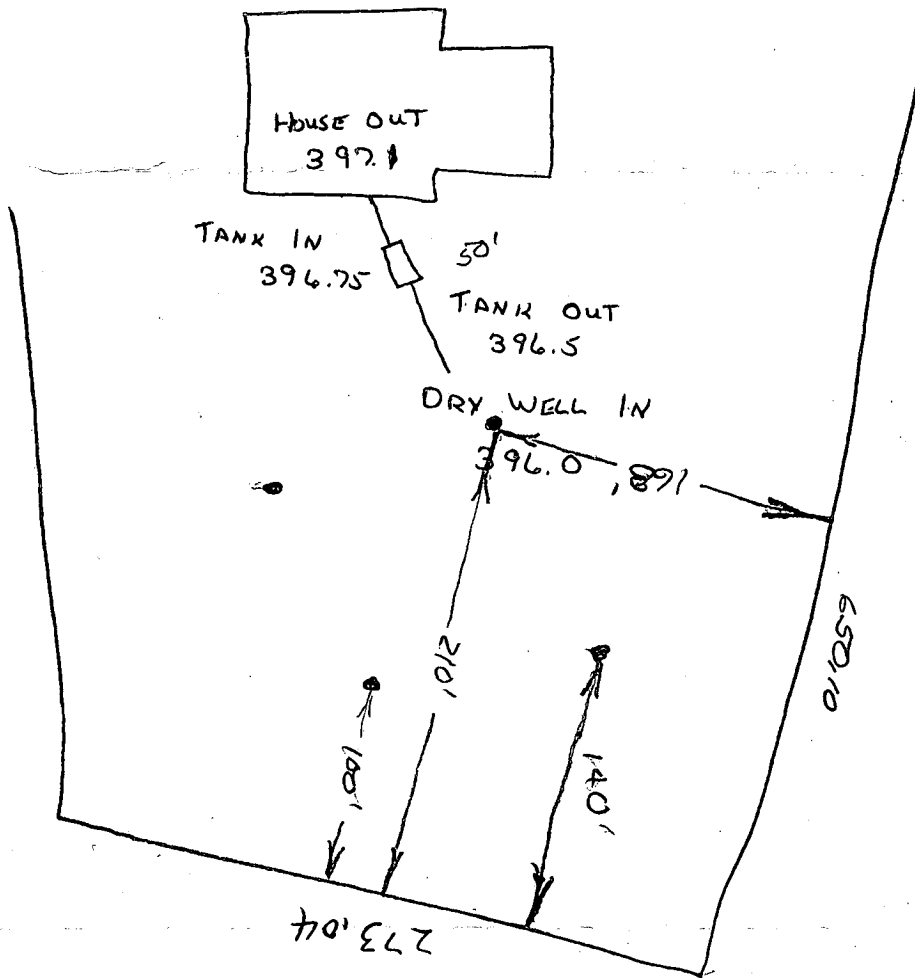
BP 68176

PARCEL 2  
102/398  
9.4 ACRES

BLDG. PERMIT SIGNED  
AND RETURNED 12-16-85

PARCEL  
102/398

BRIAN RESIDENTS  
Permitt # 68176



Septic tank's location etc  
J.H. 12/16/85.

