

7-28-86  
ASAP

approved 8/8/86

C. Williams

# PERMIT

8/4/86

P 37343

A 35745

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH

TAX ID # 04-332008

ELLICOTT CITY

X 992-2330 X

461-9933

DISTRICT 4th

INDEXED

DATE 7/11/86

Dave Hopkins

IS PERMITTED TO INSTALL  ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Middle Trail ROAD 16523 Old Frederick LOT 7 ABCD

PROPERTY OWNER ~~William Fortin, Jr.~~ Catherman

ADDRESS \_\_\_\_\_ BUILDING PERMIT SIGNED

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.  
AND RETURNED 1-18-86  
10/20/04 BOD 150840 BDRKMN

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

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 2 BED ROOMS

TRENCHES - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 2 1/2 feet below original grade. Bottom maximum depth 4 feet below original grade. Effective area begins at 2 1/2 feet below original grade. 1 1/2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 65 feet from the rear (153') lot line and 70 feet from the left (599') lot line as seen when facing the property from the Right-of-Way. Run trench(s) along contour toward right lot line. All parts of septic system must be at least 100 feet from 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. BN - 7/11/86

7/25/86 OK to cover center of trench closest to house to access next trench. S. Abel.

NOTE: Rear (153') lot line not to scale though all locations are O.K.

PLANS APPROVED BY C. Williams DATE 7/14/86

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.

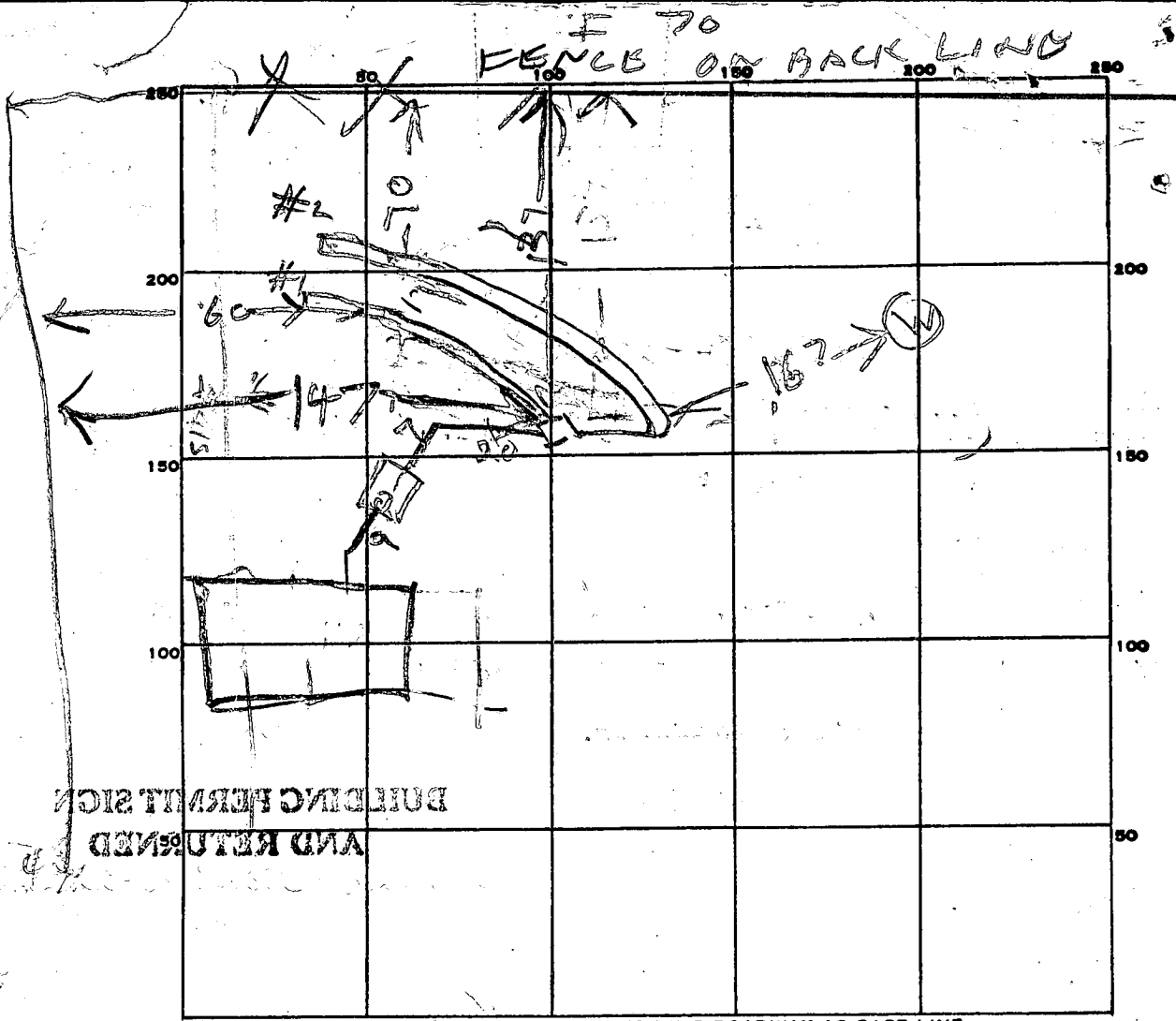
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET-MANHOLE TO GRADE REQUIRED.

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

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 35745



INDICATE NORTH: - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD \_\_\_\_\_

SEPTIC TANK, LEVEL 1000 CLEANOUTS OK

DISTRIBUTION BOX, LEVEL \_\_\_\_\_

TILE FIELD, DEPTH 4 1/2 FT. TRENCH WIDTH 3 FT.

GRAVEL DEPTH 1 1/2 IN. TOTAL LENGTH 261 FT. 102

NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA 546

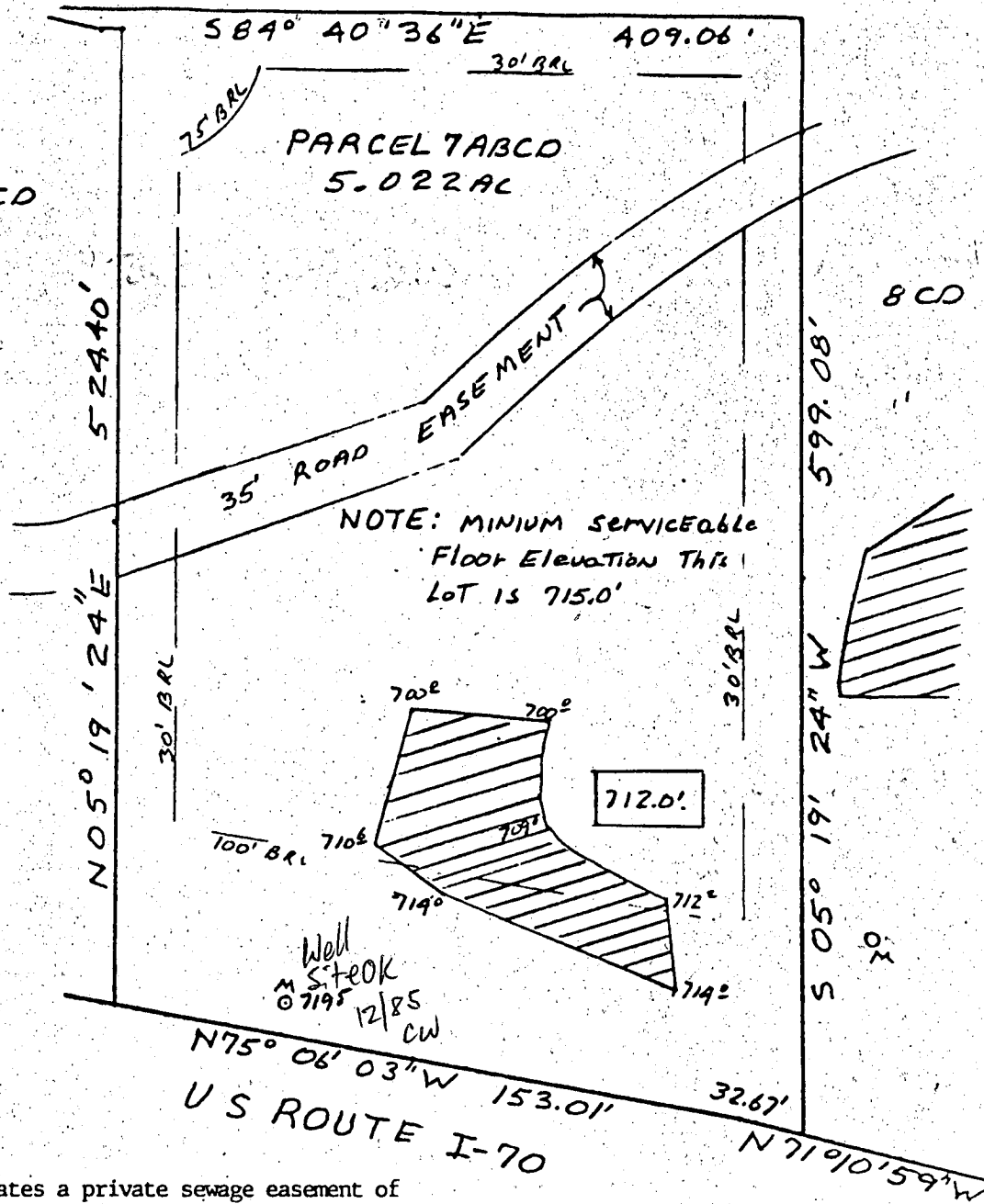
SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.


ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 7/29/86 BOX NOT PERMIT BUT TRENCHES  
AREA IN CORRECT AREA LOCATION  
OK TO COVER SYSTEM CALL FOR INSPECTION  
OF HOUSE HOOK UP RH  
8/8/86 HOUSE CONNECTION COMPLETE CW

DATE SYSTEM APPROVED 8/8/86 INSPECTOR C. Miller

NOTE: Only one home may be erected on the land contained by the group of parcels conveyed by the instant deed until such time that public sewer and water is available to this land, or other changes occur obviating the need to so limit building.



 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "⊕":

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

*James C. Hudgins*  
County Health Officer

12-18-85  
Date

PERCOLATION TEST PLAT

PARCEL 7ABCD

MIDDLE TRAIL PROPERTY

HOWARD ASSOCIATES

4th Election District  
Howard County, Maryland  
Scale 1"=100'  
Date 12/9/85

NTT Associates, Inc.  
16205 Old Frederick Road  
Mt. Airy, MD 21771  
(301) 442-2031

PRELIMINARY

# APPLICATION

A 32463

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 4th

DATE 2/7/83

8/23/83  
9:30 A.M.

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 Howard Associates

ADDRESS 10194 Baltimore National Pike, Ellicott City, Md. PHONE 465-4920

PROPERTY LOCATION:

SUBDIVISION Middle Trail LOT NO. 7B

ROAD AND DESCRIPTION Old Frederick Road

SIZE OF LOT (?) TYPE BLDG. 3 or 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. /s/ Don Reuwer for Howard Associates

(SIGNATURE OF APPLICANT)

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

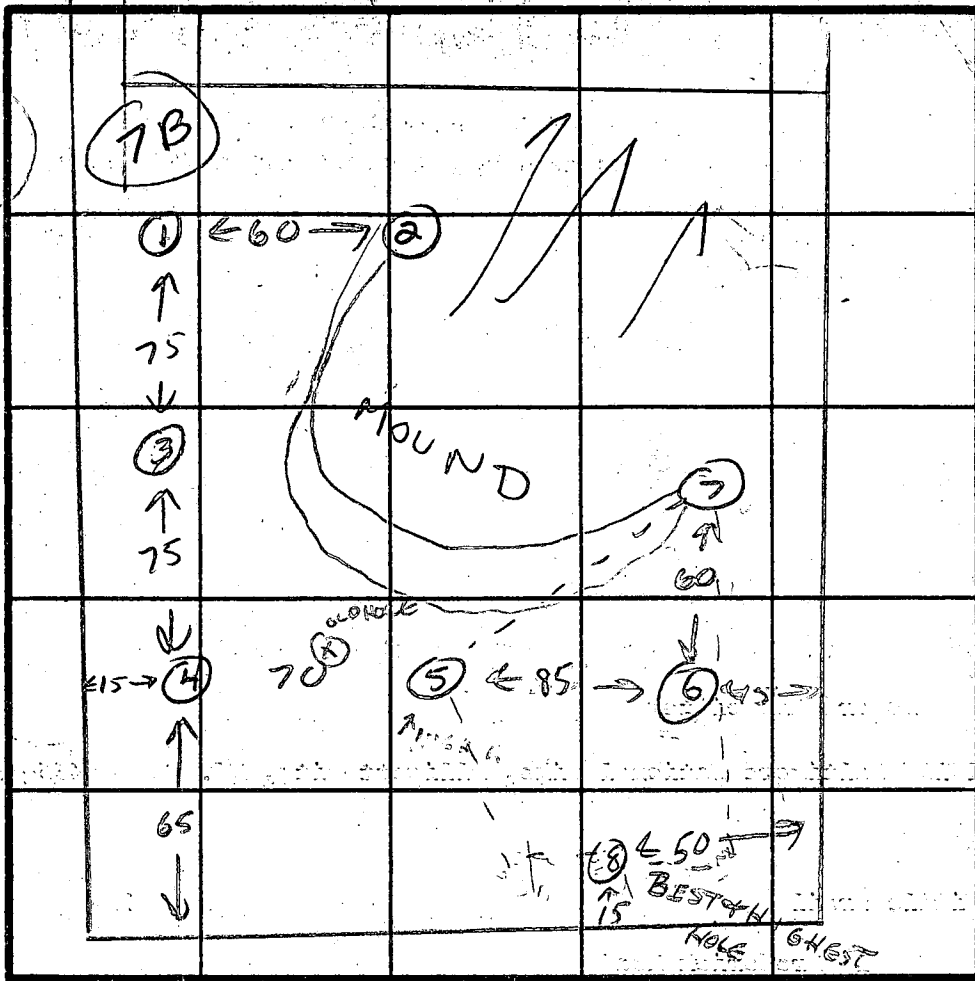
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS Craig Williams DATE 8-29-83

REASONS FOR REJECTION OR HOLDING NEED CERTIFIED LOCATIONS & HOUSE SITE

Hold #6 For Review

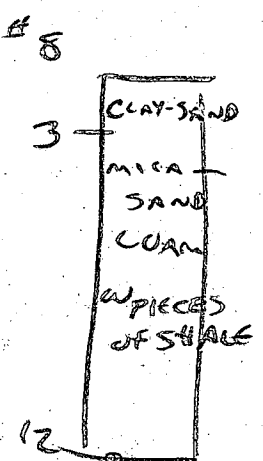
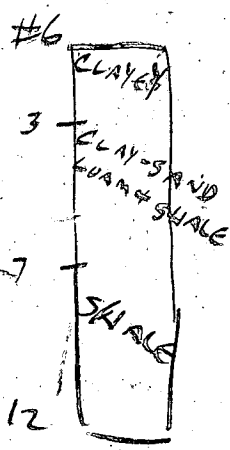
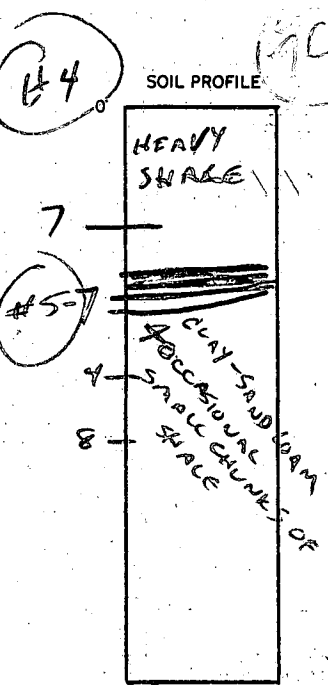
# THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8-29-83	4	7'	HEAVY SHALE				
	5	4' 8' 12'	11:26:20 11:26:40	11:28:28 11:28:10	11:28:10 11:28:10	11:30:40 11:30:40	3 1/2 MIN 2 1/2 MIN SHALE CHUNKS
	7	4' 8' 12'	11:47:30 11:52:40	11:55	11:55	11:59 11:59	4 MIN 2 1/2 MIN CLAY-SAND LOAM SMALL AMTS SHALE CHUNKS
	6	7' 12'	12:11:8 12:11:8	12:19:20 12:19:10	12:19:20 12:19:10	12:21:50 12:21:50	2 1/2 MIN 2 MIN TOO SHALTY BELOW 7'
	8	4' 8' 12'	12:43 12:43	12:46 12:45:40	12:46 12:45:40	12:50 12:48:40	4 MIN 3 MIN MICA-SAND LOAM VERY LITTLE SHALE
	1-2-3		NOT TESTED				

STILL HOLDING WATER IN TEST WAYS UNTIL 12:00



REMARKS \_\_\_\_\_  
 TYPE OF SOIL CLAY SAND LOAM SMALL AMOUNTS WEATHERED SHALE  
 TESTED BY Craig Williams ALSO PRESENT DON KELLER  
040 KETTERMAN

158  
BD.  
INLET  
3' B.G.

EH-12-1079

# APPLICATION

A 24641

SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

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: 465-5000, EXT. 356

DISTRICT 4th

DATE 11/10/76

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 Howard Associates

ADDRESS Old Frederick Road PHONE Joel Abramson 730-7733

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 7B

ROAD AND DESCRIPTION Old Frederick Road

SIZE OF LOT 1.315 Acres TYPE BLDG. 3 or 4  
NUMBER OF BEDROOMS \_\_\_\_\_

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Joel Abramson

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

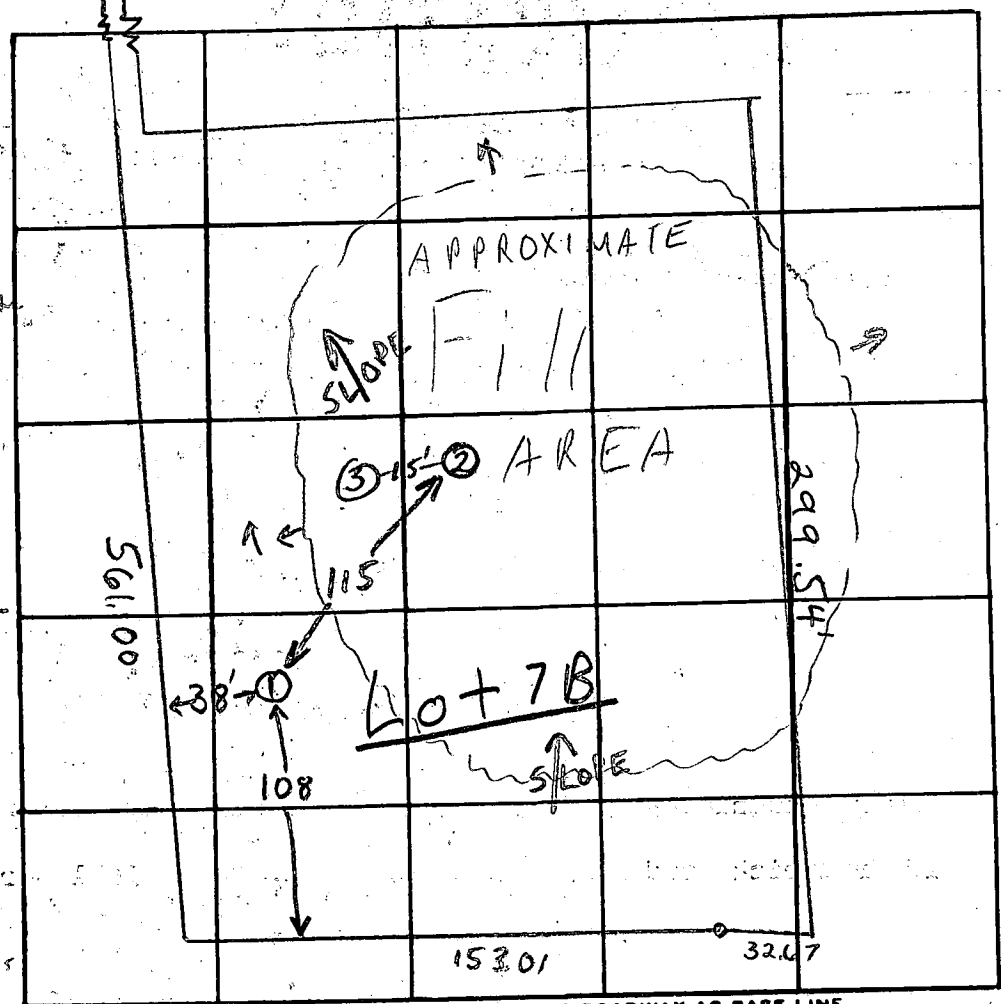
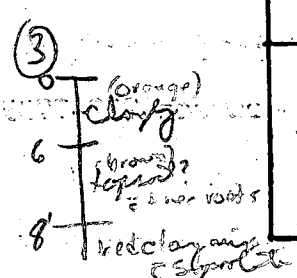
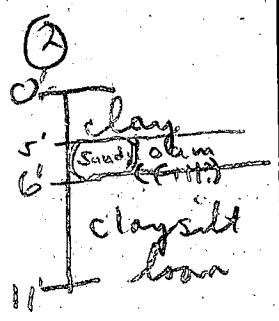
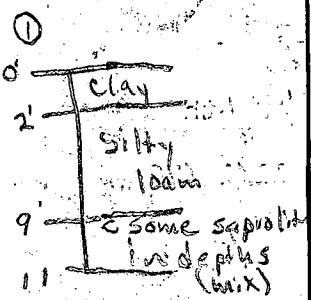
REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS F. Skinn DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 26' FILL ON LOT

# THIS IS NOT A PERMIT

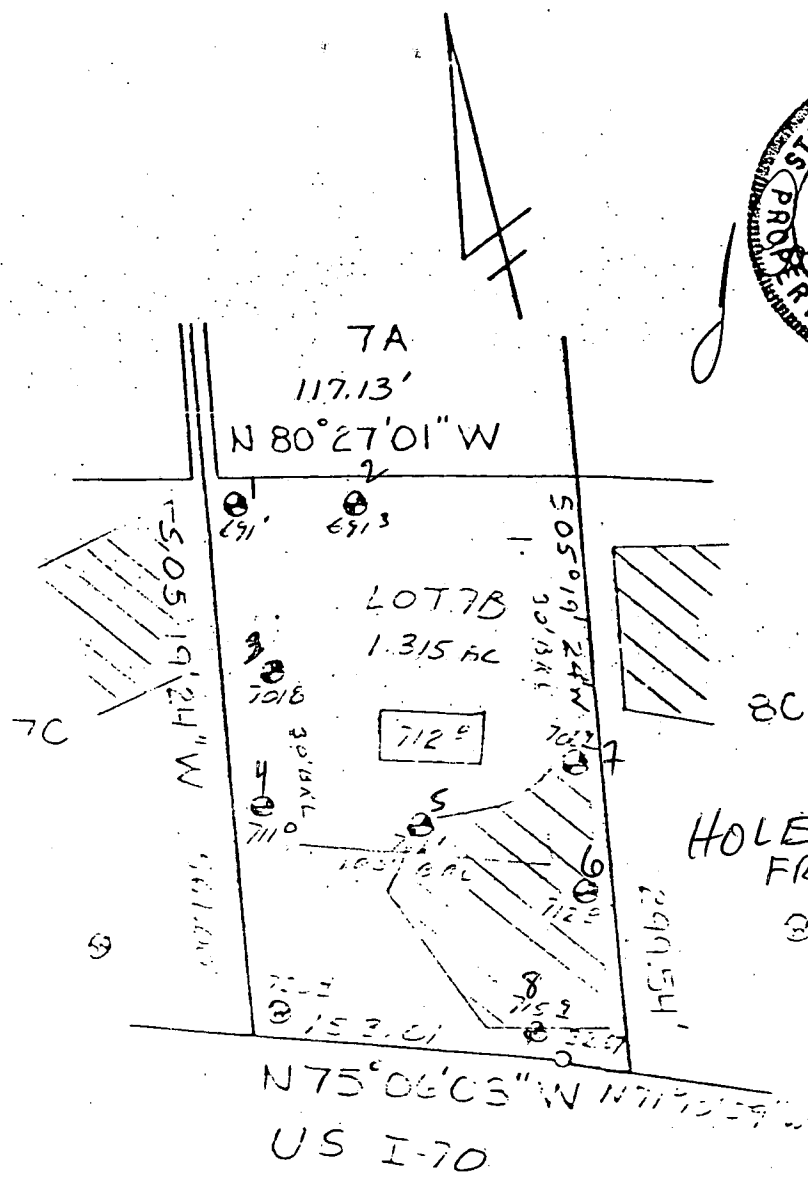
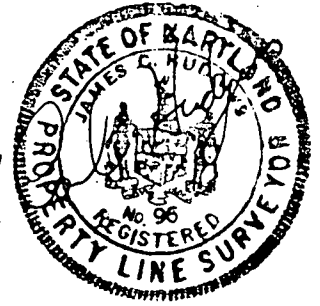
OLD FREQ. NO.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
I-70

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/26/76	1	2 1/2'	1:14	1:17	1:17	1:21	4 hrs	
	1A	11'	1:14	1:20	1:20	1:27	7 min	
	2	3'	1:40				pull at 2:00 1/2" drop in 20 min	
	2A	11'	1:40				pull at 2:00 no movement	
	3	8 1/2'	Clayey to 6' same soil as in (2) below					old roots at 11'

REMARKS 1/2 of lot is under 6' fill  
 TYPE OF SOIL (appears to have 6' fill (clayey))  
 TESTED BY F.S. ALSO PRESENT: Leidenscow



HOLES 1-8  
FROM 8/83

This area designates a private sewage easement of the property shown hereby the Maryland State Department of Health for the purpose of sewage disposal. Improvements shall be made by the owner until public sewage disposal is available. The owner shall install and maintain a private sewage disposal system. The owner shall install a private sewage disposal system which shall be approved by the State Department of Health. The owner shall maintain the system in good working order and shall be responsible for the cost of maintenance and repair.

REPLICATION TEST PLAT  
LOT 7B  
MIDDLE TRAIL LISBON  
Property of  
Howard Associates  
4th Election District  
Howard County, Maryland  
Scale 1"=100'  
Date 9-26-83

The location between back lot field located and as shown on the plan.

The plan shall comply with the minimum ownership width and depth as required by the Maryland State Department of Health for private sewage disposal.

SENT FOR SIGNATURE 1-31-85 CW  
Date

Howard Associates  
101 Sterrett Place  
Columbia, MD 21044  
410-0307

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 32464  
P \_\_\_\_\_

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

DISTRICT 4th

DATE 2/7/83

*Preel*  
*8/22/83*  
*9:30 A.M.*

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 Howard Associates

ADDRESS 10194 Baltimore National Pike, Ellicott City, Md PHONE 465-4920

PROPERTY LOCATION:

SUBDIVISION Middle Trail LOT NO. 7C

ROAD AND DESCRIPTION Old Frederick Rd.

SIZE OF LOT (?) TYPE BLDG. 3 or 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. /s/ Don Reuwer for Howard Associates  
(SIGNATURE OF APPLICANT)

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

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

HOLD PENDING FURTHER TESTS Craig Wilkins DATE 8-29-83

REASONS FOR REJECTION OR HOLDING NEED CERTIFIED LOCATIONS.

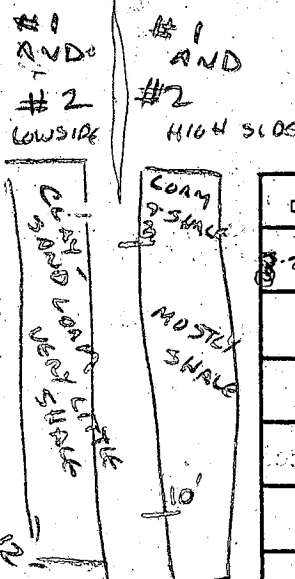
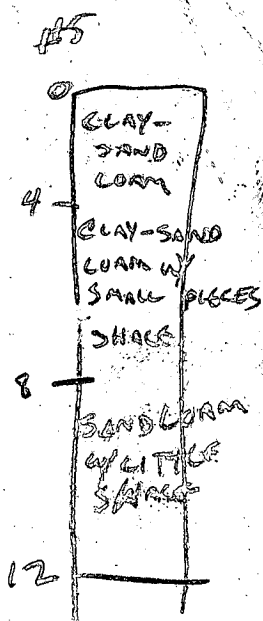
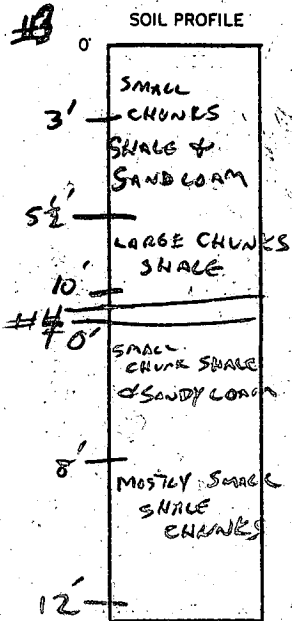
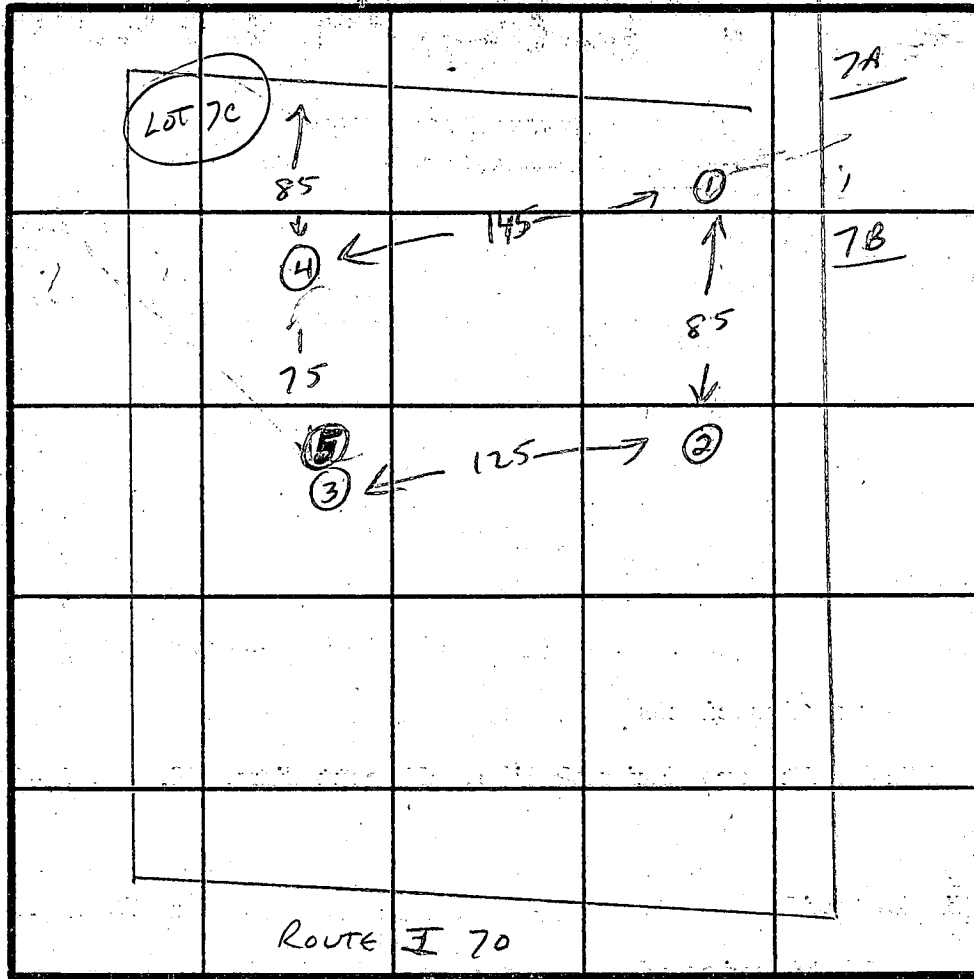
REVIEW - FAST TIMES.

REVIEW - FAILS - ① SOME HOLES HAD TO BE REPOURED TO MEET MINIMUM TIME  
② TESTED AREA INCLUDED SOME PREVIOUSLY  
DISAPPROVED TEST HOLES.

1-31-85 CW100

# THIS IS NOT A PERMIT

LOT 7D



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
29-83	3	3	11:08:50	11:10	11:10	11:16:40	1 MIN 50 SEC	
		3 (2 <sup>ND</sup> POUR)	11:12:15	11:14	11:14	11:16:30	2 1/2 MIN	
		9	BELOW 5' MEDIUM TO LARGE CHUNKS SHALE - CHART DIG					
	4	2	10:36:30	10:37:30	10:37:30	10:39:30	2 MIN	
		7 1/2	10:47:50	10:48:30	10:48:30	10:49:30	1 MIN	
		7 1/2 (3 <sup>RD</sup> POUR)	10:58	10:59:50	10:59:50	11:03:20	3 1/2 MIN	
		12	TOO SHALEY TO HOLD WATER AT BOTTOM					
	5	4	1:52	1:55:10	1:55:10	1:58:50	3 1/2 MIN	
		8	1:52	1:55	1:55	1:58	3 MIN	
	1	3	1:35:30	1:39:30	1:39:30	1:45:30	6 MIN	
		8	1:35	1:38	1:38	1:42	4 MIN	
		12						
	2	3 <sup>RD</sup> POUR	1:20:30	1:22:40	1:22:40	1:25:10	2 1/2 MIN	
		8	1:20:20	1:22:20	1:22:20	1:24:40	2 MIN 20 SEC	
		12						
		HIGH SIDE OF HOLE 2 HAS TOO MUCH SHALE LOW SIDE OF HOLE 2 IS GOOD SAND						

OK (SHALE HOLDING WATER TIL 10:53)

REMARKS 1<sup>ST</sup> POUR TOO FAST - VERY DRY SOIL - 2<sup>ND</sup> OR 3<sup>RD</sup> POURS OK

TYPE OF SOIL CLAY-SAND LOAM W/ SMALL AMOUNTS WEATHERED SHALE

TESTED BY Craig Williams ALSO PRESENT DON REUWER GUN LETTAMAN

EH-12-1079

# APPLICATION

A 24642

SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

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: 465-5000, EXT. 356

DISTRICT 4th

DATE 11/10/76

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 Howard Associates

ADDRESS Old Frederick Road PHONE Joel Abramson 730-7733

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. 7C

ROAD AND DESCRIPTION Old Frederick Road

SIZE OF LOT 1.269 Acres TYPE BLDG. 3 or 4  
NUMBER OF BEDROOMS \_\_\_\_\_

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Joel Abramson

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY [Signature] FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

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

REASONS FOR REJECTION OR HOLDING lock

# THIS IS NOT A PERMIT


INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8/26/76	7	8'	Clay to 3; harder shale at 8ft.					

REMARKS Lot 7C

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

TESTED BY F.S. ALSO PRESENT: \_\_\_\_\_

# APPLICATION

A 24642

SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

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: 465-5000, EXT. 356

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 \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION \_\_\_\_\_ LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION \_\_\_\_\_

SIZE OF LOT \_\_\_\_\_ TYPE BLDG. \_\_\_\_\_  
NUMBER OF BEDROOMS \_\_\_\_\_

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT \_\_\_\_\_

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

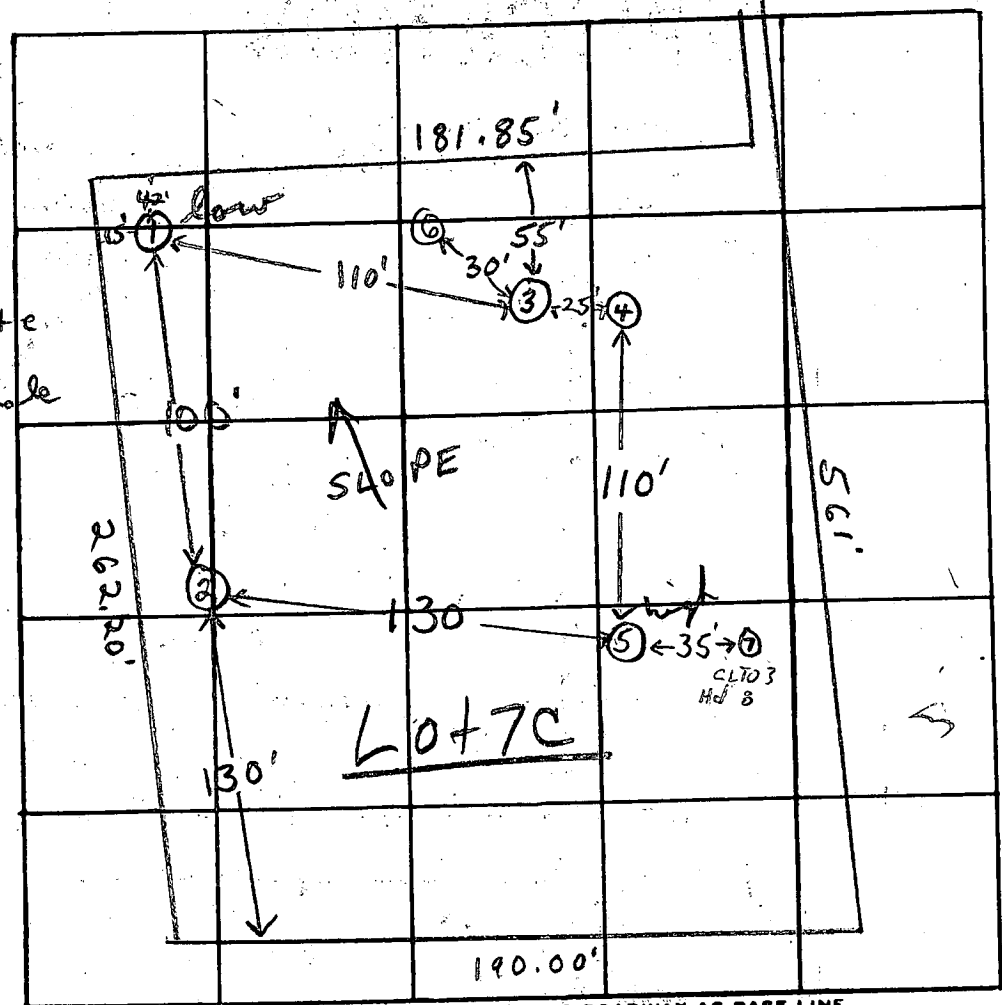
REJECTED BY F. Sk... FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

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

REASONS FOR REJECTION OR HOLDING Rock

# THIS IS NOT A PERMIT

②, ⑤, ⑦  
①, ③, ④, ⑥



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

I-70

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/26/76	1 low	3'	10:30	10:30	10:30	10:31	1 min
	1A	10 1/2'	10:31	10:31	10:31	10:31	~15 sec / 2 in.
	2	9 1/2'	Clay to 1 1/2' sapro-shale, min below				
	3	8'	Clay to 2' sapro-shale, min below				
	4	10'	Clay to 1' sapro-shale, min below				
	5	10 1/2'	Clay to 3' silty loam 3' to 7' hard shale below				
	4	10'	11:01	11:31	puffed pop 3/4' long in 30 sec hard packed		
	5	10 1/2'	11:20	11:30	11:30	11:41	11 min
	5A	3 1/2'	11:32	11:33	11:33	11:34	1 min
	6	8 1/2'	Clay to 2' sapro-shale, min below to rock				

REMARKS: Fails standard perc test.

TYPE OF SOIL: hard shale mixed saporolite indurated

TESTED BY: F. S. ALSO PRESENT: Lendrims crew

*Per.*

# APPLICATION

A 32465

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT  
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4th

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

DATE 2/7/83

*NOT TESTED THIS DATE  
DON REUWER S DATES TO BE COMBINED  
WITH LOT 7C 8-26-83 CW*

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 Howard Associates

ADDRESS 10194 Baltimore National Pike, Ellicott City, Md. PHONE 465-4920

PROPERTY LOCATION:

SUBDIVISION Middle Trail LOT NO. 7D

ROAD AND DESCRIPTION Old Frederick Road

SIZE OF LOT (?) TYPE BLDG. 3 or 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. /s/ Don Reuwer for Howard Associates  
(SIGNATURE OF APPLICANT)

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

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

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

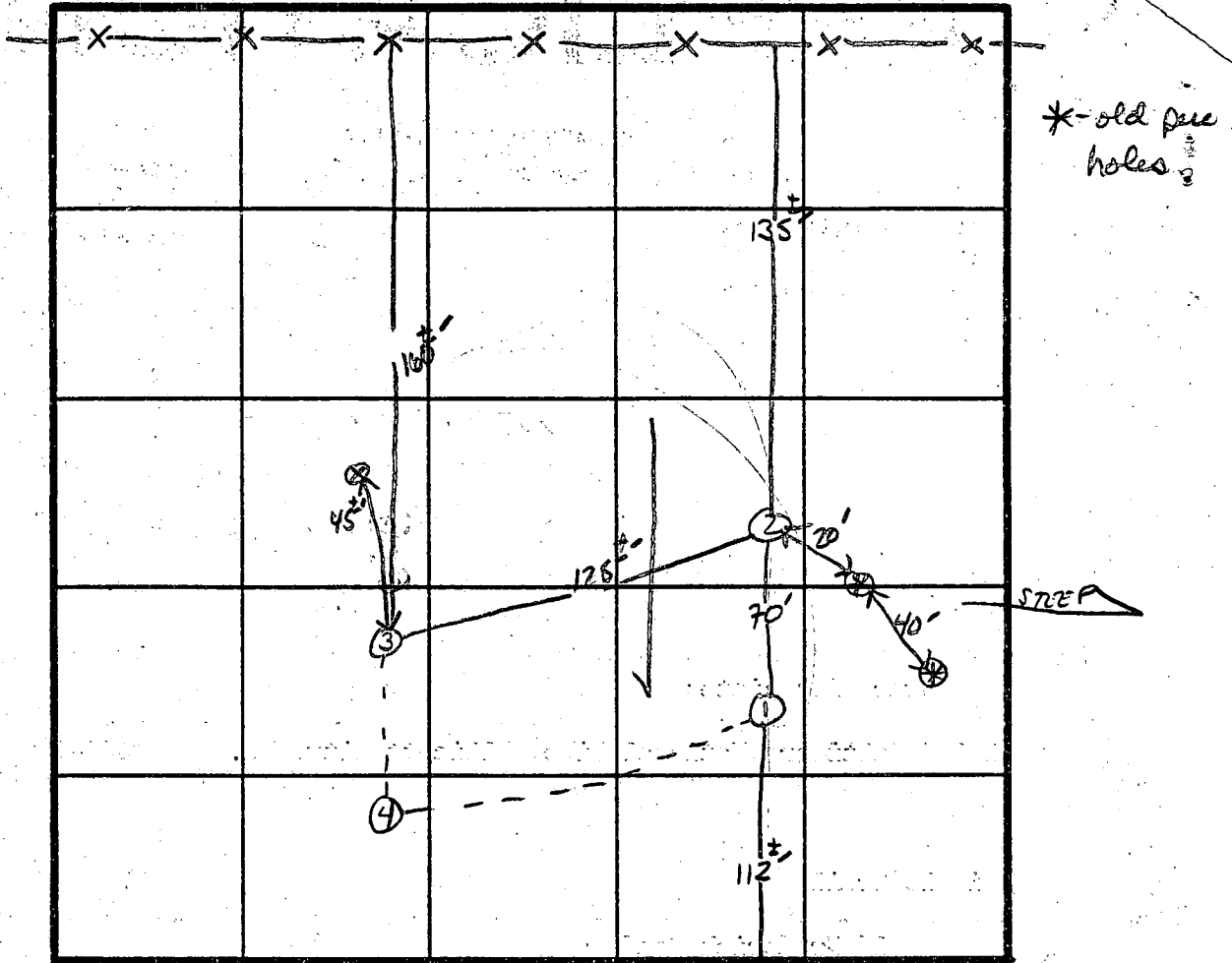
REASONS FOR REJECTION OR HOLDING 8-12-85 Perc. UNSATISFACTORY, STRUCTURED SAPROLITE AT 2.5' FEASIBLE

# THIS IS NOT A PERMIT

I-70

SOIL PROFILE

0	A 1-3
4"	BROWN SHALE/SAND LOAM - >50% SAPROLITE
2'	BROWN/BLUE MASSIVE SAPROLITE >50% SLIGHT SAND LOAM MIX
7'	STRUCTURED SAPROLITE
10'	



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.  
R.O.W.

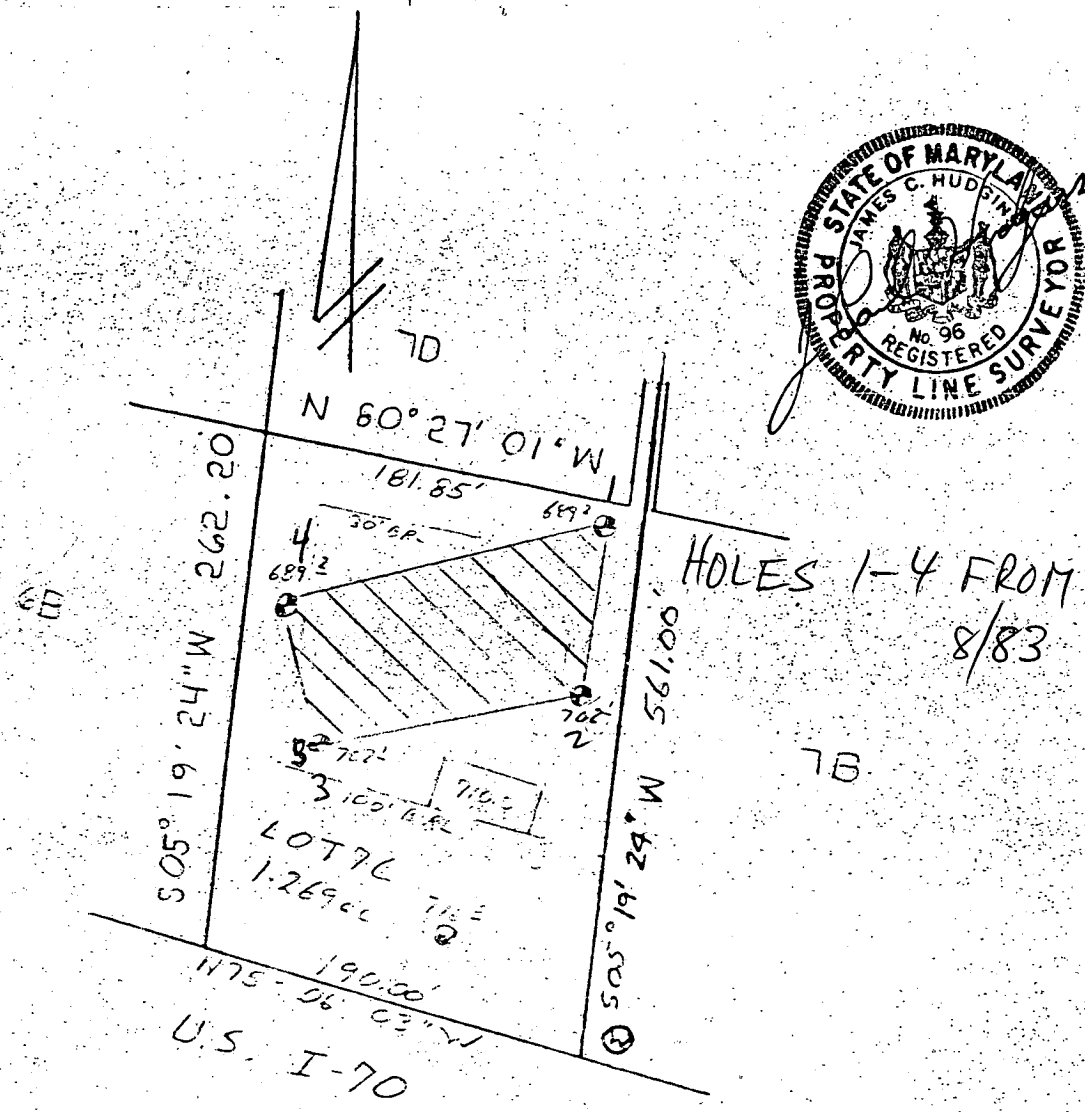
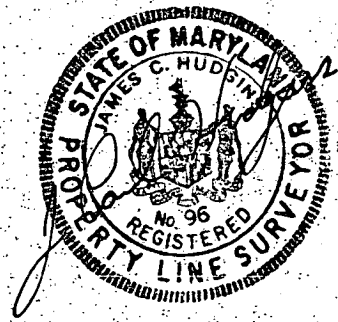
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/12/85	1 V	7' STRUCTURED SAPROLITE AT 3.5'			MASSIVE SAPROLITE ABOVE		
	2 S	3'	1:24:30	1:24:55	1:24:55	1:25:50	55 sec
	2 V	second area	1:25:15	1:25:40	1:25:40	1:26:30	50 sec
	3 V	STRUCTURED SAPROLITE AT 2.5'					
	4 -	NOT TESTED OR DUG. BOXED OUT OF PATTERN.					

REMARKS: Numerous old pie holes FOUND THROUGHOUT AREA IN PROPOSED Pore. AREA


TYPE OF SOIL: Mt Airy Poorly developed soil Regolith

TESTED BY: S. ABEL ALSO PRESENT: O-KETTERMAN

EH-12-1079



HOLES 1-4 FROM  
8/83

 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "⊙".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

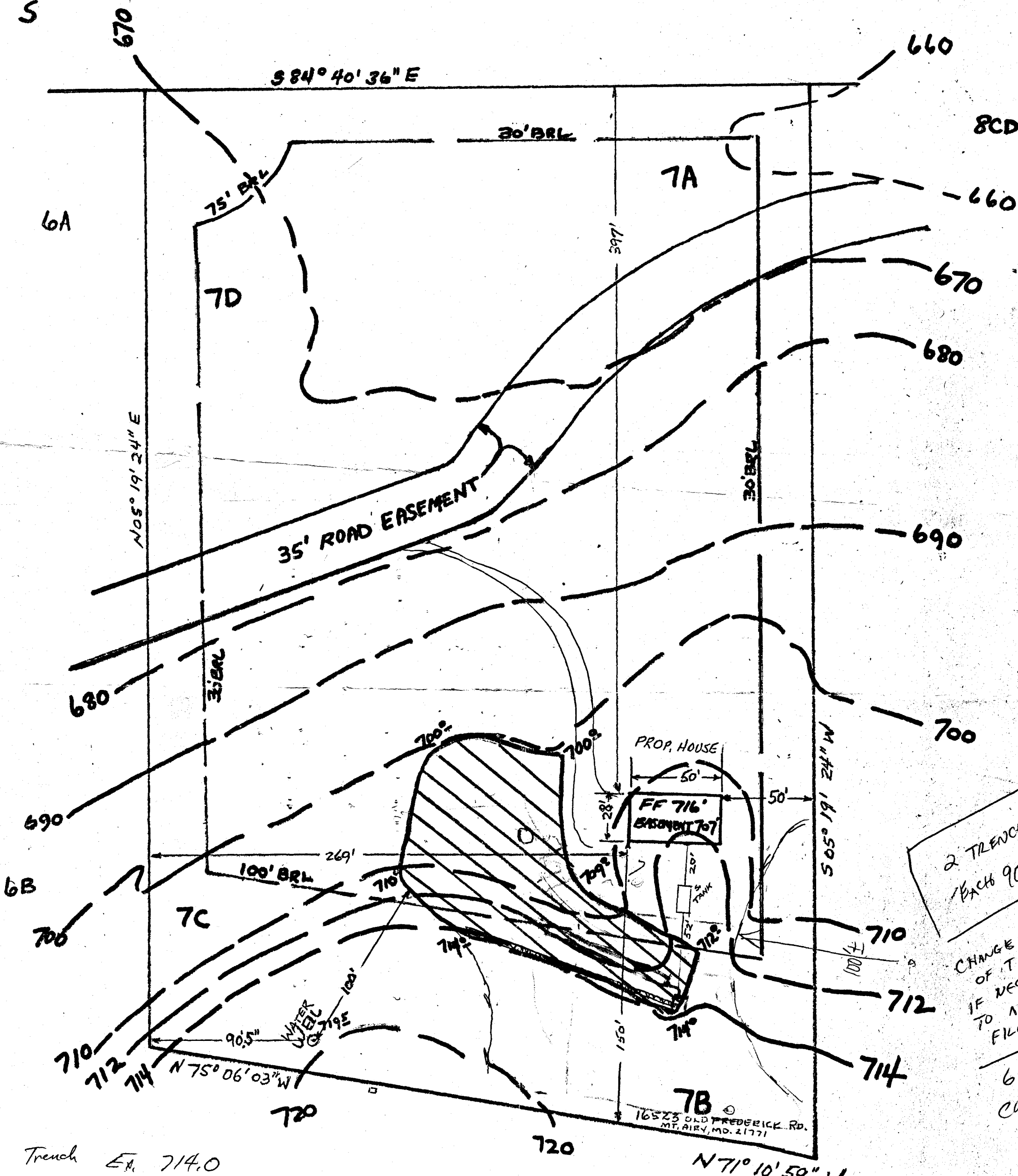
County Health Officer \_\_\_\_\_ Date \_\_\_\_\_

PERCOLATION TEST PLAT  
LOT 7C  
MIDDLE TRAIL LISBON  
Property of  
Howard Associates

4th Election District  
Howard County, Maryland  
Scale 1"=100'  
Date 9-26-83

NTI Associates  
101 Sterrett Place  
Columbia, MD 21044  
321-0307

**PARCEL 7 ABCD**  
**MIDDLE TRAIL PROPERTY**  
 WILLIAM J. FORTIN, JR. & DOROTHY S. FORTIN  
 4TH ELECTION DISTRICT  
 HOWARD COUNTY MARYLAND  
 SCALE 1" = 50'  
 DATE 12-9-85  
 3-6-86



2 TRENCH(S)  
 EACH 90' LONG  
 CHANGE LOCATION  
 OF TANK  
 IF NECESSARY  
 TO AVOID  
 FILL DIRT AREA.  
 6/12/86  
 Curlier

Trench Elev. 714.0  
 " INV. 711.15  
 52' @ 1/8" ft.  
 Tank in 712.29  
 " out 712.04  
 " exit elev 713.0  
 " proposed elev. 714.2  
 House inv. 712.71

from other sheet

Septic elev. & location of  
 4.2286 ft.

US ROUTE I-70

B.P. # 69682

NTT ASSOCIATES INC.  
 16205 OLD FREDERICK RD.  
 MT. AIRY, MD. 21771  
 (301) 442-2031

C1 00806 SEQUENCE NO. (OEP USE ONLY)  
 (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-35745**

DATE RECEIVED  
 [ ] [ ] [ ] [ ] [ ] [ ]

DATE WELL COMPLETED  
**123085**

Depth of Well  
**200**  
 (TO NEAREST FOOT)

PERMIT NO.  
 FROM "PERMIT TO DRILL WELL"  
**HO-81-1289**

OWNER **FORTIN** **WILLIAM**  
 STREET OR RFD **INTERSTATE 70** TOWN **LISBON**  
 SUBDIVISION **MIDDLS TRAIL** SECTION \_\_\_\_\_ LOT **7ARCD**

**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	
Top Soil	0	2	
Brown Shale	2	10	
Brown Slate	10	20	
Blue Slate	20	60	
Brown Slate	60	65	✓
Blue Slate	65	200	

**GROUTING RECORD**  
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**  
 TYPE OF GROUTING MATERIAL  
 CEMENT **CM** BENTONITE CLAY **BC**  
 NO. OF BAGS **5** NO. OF POUNDS **300**  
 GALLONS OF WATER **80**  
 DEPTH OF GROUT SEAL (to nearest foot)  
 from **0** ft. to **20** ft.

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

**MAIN CASING** Nominal diameter Total depth  
 TYPE (nearest inch) (nearest foot)  
**PL** **6** **200**

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

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

**C2**  
 DEPTH (nearest ft.)  
**40** **18** **200**

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.

DRILLERS IDENT. NO. **273**  
**Rajesh Mayne**

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)  
**Rajesh S. Mayne**

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

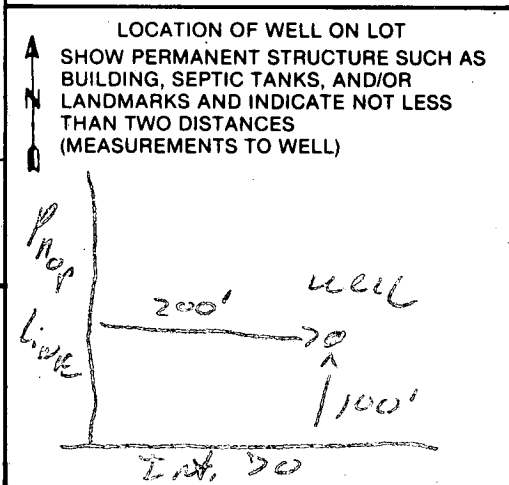
SLOT SIZE 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_  
 DIAMETER OF SCREEN \_\_\_\_\_ (NEAREST INCH)

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  
 70  72  74 75 76  
 TELESCOPE CASING LOG INDICATOR OTHER DATA

**C3**  
**PUMPING TEST**  
 HOURS PUMPED (nearest hour) **3**  
 PUMPING RATE (gal. per min. to nearest gal.) **10**  
 METHOD USED TO MEASURE PUMPING RATE **Bucket**  
 WATER LEVEL (distance from land surface)  
 BEFORE PUMPING **63**  
 WHEN PUMPING **63**  
 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 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: \_\_\_\_\_  
 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  
 below } **2** (nearest foot)



**B 1** 2271 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

40-21-1280  
 fill in this form completely

**B 3** DATE RECEIVED 12/30/85  
**OWNER INFORMATION**  
 15 Last Name: BORTIA 16-20 Owner: WILLIAM 21-25 First Name: ABO  
 36 Street or RFD: 174 BALTIMORE DR 35  
 57 Town: FREDERICK 70 State 72: MD 74-75 Zip: 21201 76

**B 3** LOCATION OF WELL  
 1 2 HOWNAN 8 COUNTY: 21  
 23 SUBDIVISION: MILDRED TRAIL 42  
 SECTION: 44-46 LOT: 48-50 430  
 52 NEAREST TOWN: JISACON 71  
 MILES FROM TOWN (enter 0 if in town) 73-78: 1 MI

**DRILLER INFORMATION**  
 Driller's Name: Ralph Mays 77 License No. 80: 2972  
 Firm Name: Ralph Mays Well Drilling  
 Address: 920 Ravenwood Rd. Mt. Airy  
 Signature: Ralph Mays Date: 11/2/85

**B 4** DIRECTION OF WELL FROM TOWN (CIRCLE BOX): NW  
 NEAR WHAT ROAD: Rte 40  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): WEST  
 DISTANCE FROM ROAD: 100 FT  
 ENTER FT or MI: 100

**B 2** WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.): 5  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY): 4000

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL  
 COUNTY NAME: Howard COUNTY NO.: A-35745  
 OEP SIGNATURE: DATE ISSUED: 12/22/85  
 CO-SIGNATURE: EXP. DATE: 6/2/86  
 NORTH GRID: 551000 EAST GRID: 033000

**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)

APPROXIMATE DEPTH OF WELL: 150 FEET

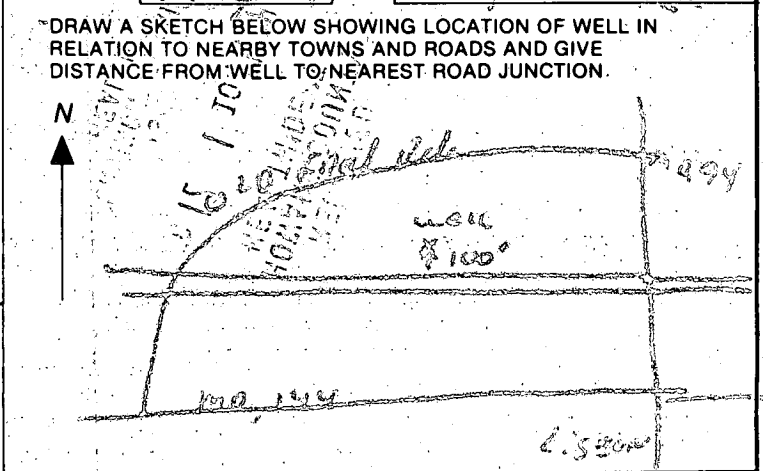
APPROXIMATE DIAMETER OF WELL: 6" NEAREST INCH

**METHOD OF DRILLING (circle one)**  
 BORED (or Augered) JETTED Jetted & DRIVEN  
 AIR-ROtary  AIR-PERcussion  ROTARY (Hydraulic Rotary)  
 CABLE  REVerse-ROtary  Drive-POINT  
 other: \_\_\_\_\_

**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 DEEPEN 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: \_\_\_\_\_ PERMIT No.: 40-21-1280

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER:  
 1. well  
 2. well  
 3. well  
 WRITE THE BOX NUMBER FROM THE MAP HERE:  
 E 770 6  
 N 550 1



8/8/86 9/10/86

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

9/10/86  
Completed  
WPS ORD  
BN

NO TAG

still making  
HO 811289

New Installation   
Replacement

Receipt # 37449  
Date 8/1/86

Name of Installer George Baker

Telephone 788-3080

License number 2214

Certified Well Pump Installer  Well Driller  Registered Plumber

Name of Property Owner William Fortin

Telephone 442-2374

Subdivision Middle Trail Lot #     

Well tag #     

Site Address 16523 Old Fredrick Rd  
MT Airy 21771

Pump  
1. Type  
a. Deep well jet       
b. Shallow well jet       
c. Submersible       
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     

Motor  
1. Horsepower       
2. RPM       
3. Voltage       
a. 110       
b. 220     

Pitless Adapter  
1. Make       
2. Model #       
3. Depth     

Tank  
1. Capacity 42  
2. Pressure relief valve? 7516

Piping  
1. Type Poly Blue  
2. Size 1"  
3. NSF and/or BOCA Code approved       
4. Depth of supply line 48"

Well data  
1. Depth      ft.  
2. Yield      GPM  
3. Static water level      ft.  
4. Will water supply be disinfected by installer?     

9/10/86  
↓

WELL X TROZ TANK  
pressure gauge w/ OR

WELL LINE & PITLESS OK NO ACCESS TO INSIDE 8/8/86 CW

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).

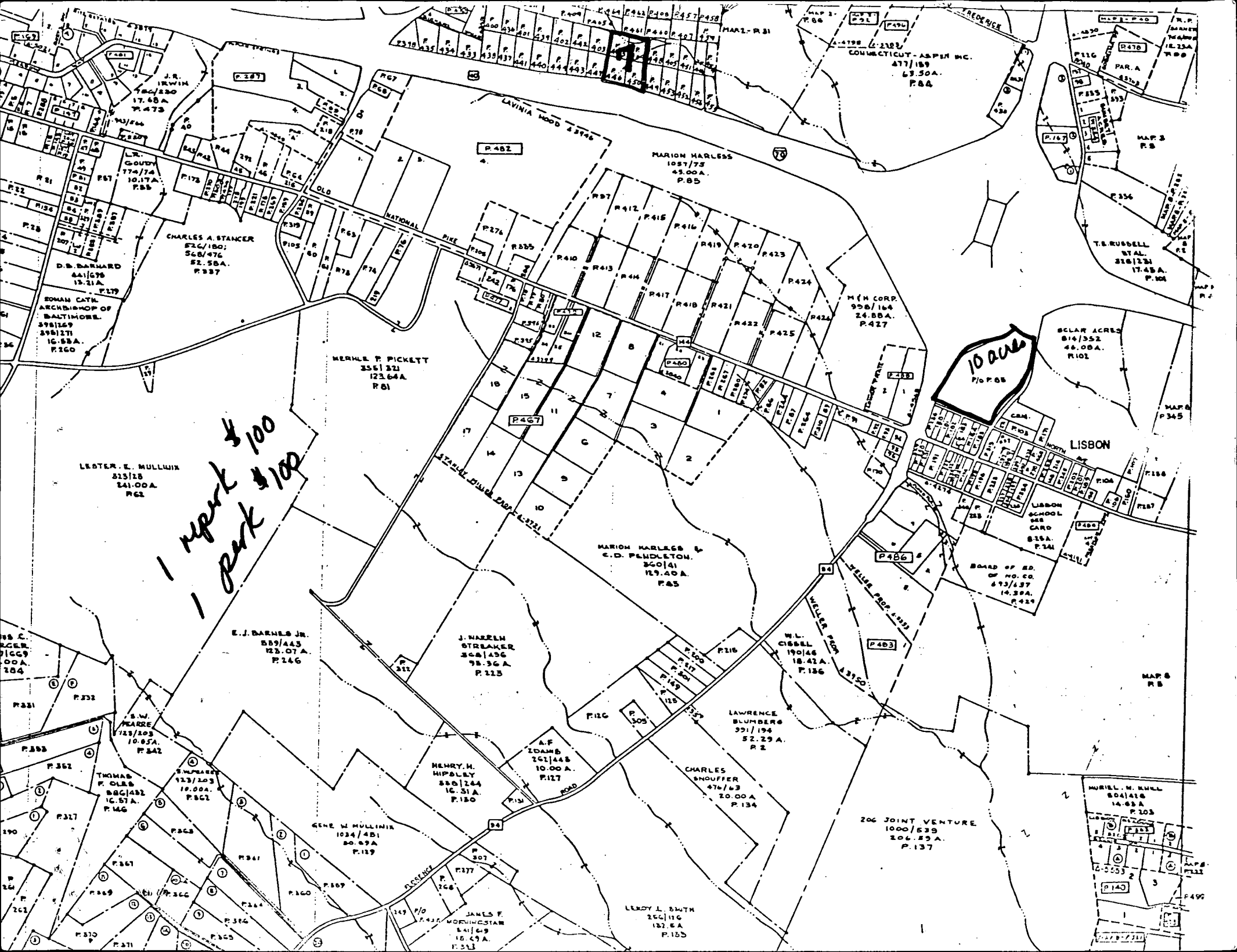
All information given above is true to the best of my knowledge.

Signature of Applicant: George Baker

Date: 7-22-86

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

HO being  
chronic  
Case Belmont  
for 17 sample



1 park \$100  
1 park \$100

10 acre  
P. 408

LESTER E. MULLIK  
52512  
241.00A  
P. 62

CHARLES A. STANCER  
526/180;  
568/476  
52.50A.  
P. 337

MERLE P. PICKETT  
3561321  
123.64A  
P. 81

E. J. BARNES JR.  
559/443  
125.07A  
P. 246

J. HAZELN  
STREAKER  
368/456  
98.36A  
P. 123

MARION HARLESS &  
C. D. PENDLETON.  
360/41  
129.40A.  
P. 85

W. L. CIBBEL  
190/46  
18.42A  
P. 136

LAWRENCE  
BLUMBERG  
301/194  
52.29A.  
P. 2

HENRY H.  
HIPPLEY  
580/244  
16.31A.  
P. 180

A. F.  
IDAMS  
261/448  
10.00A.  
P. 127

CHARLES  
SHOFFER  
476/63  
20.00A  
P. 134

GENE W. MULLIK  
1024/481  
80.69A  
P. 129

206 JOINT VENTURE  
1000/639  
206.89A.  
P. 137

JAMES F.  
MORNINGSTAR  
541/69  
18.49A.  
P. 133

LEROY L. SMITH  
266/116  
187.6A  
P. 135

SELAN ACRES  
814/352  
48.08A.  
P. 101

LISBON

LISBON SCHOOL  
SIS  
CARD  
816A.  
P. 341

BOARD OF ED.  
OF NO. CO.  
673/437  
14.30A.  
P. 429

MURIEL M. HULL  
504/48  
14.63A  
P. 203

P. 140

P. 499

MAP 6  
P. 8

MAP 6  
P. 345

MAP 3  
P. 8

MAP 2  
P. 8

MAP 1  
P. 8

June 15, 2004

MEMORANDUM

TO: File  
16523 Old Frederick Road  
A35745

FROM: Mark Rifkin  
Well and Septic Program

RE: Proposed 1-2 BR addition  
Middle Trail, Lot: 7ABCD

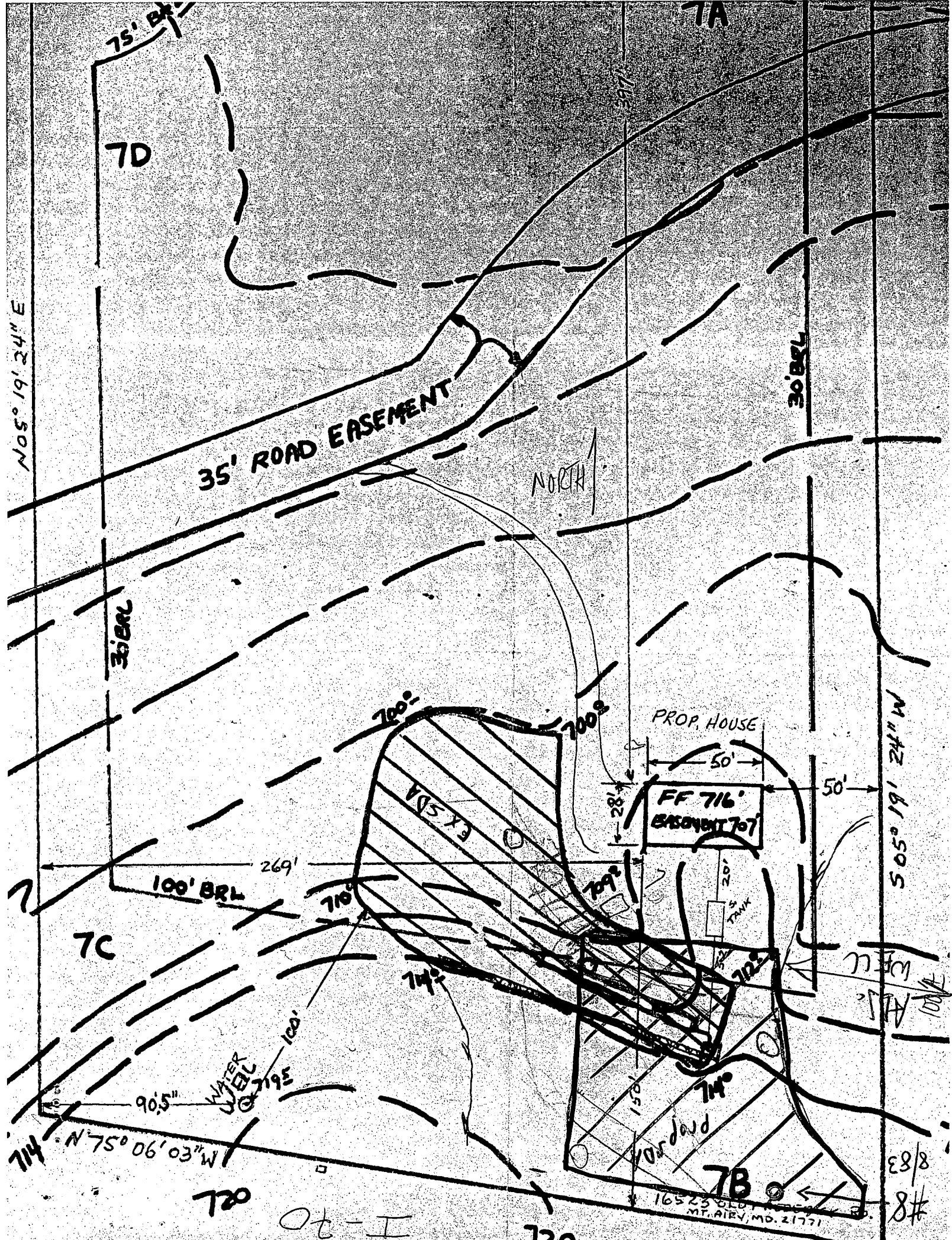
Walk-in discussion with owner who is proposing a 1-2 BR addition to ex. 2BR house. Combination of four lots has had numerous perc tests, only some of which were the subject of a perc cert. Numerous tests show marginal to heavy shale.

I advised him that western portion of approved SDA (where a portion of ex. trenches are installed) is believed to be compromised due to heavy shale observed at previous perc tests. Recommend re-perc to confirm soils at ex. SDA and/or move SDA uphill and to east to avoid shale. IF percs are done, expect a pumped replacement system to be required.

SEE DWG ON REVERSE

MR

File



N 05° 19' 24" E

7D

7A

35' ROAD EASEMENT

30' BRL

NORTH

30' BRL

700'

700'

PROP. HOUSE

FF 716' EASEMENT 707'

50'

M 11/2 181 50 S

100' BRL

269'

710'

7C

709'

714'

712'

WATER WELL

7195'

90.5"

N 75° 06' 03" W

714'

7B

16523 OLD MOUNTAIN RD. MT. AIRY, MD. 21771

720

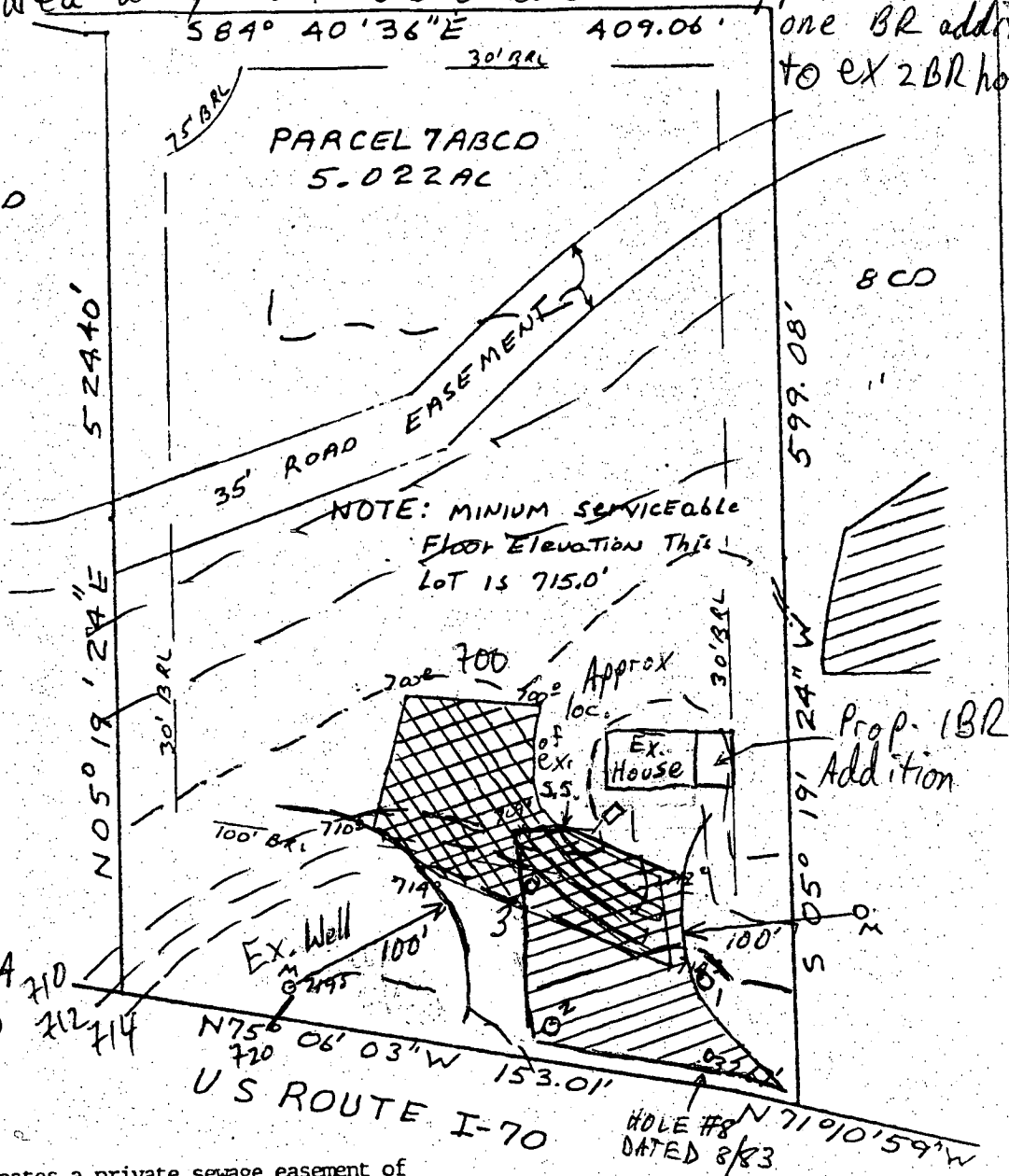
06-I

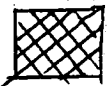
720

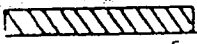
8/8  
8#

The purpose of this plan is to approve a new sewage reserve area away from soils of concern in support of a one BR addition to ex 2BR house

NOTE: Only one home may be erected on the land contained by the group of parcels conveyed by the instant deed until such time that public sewer water is available to this land, or other changes occur obviating the need to so limit building.



 PORTION OF ORIGINAL 1985 RESERVE AREA TO BE ABANDONED

 This area designates a private sewage easement of 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual sewage disposal. Improvements of any nature in this area are restricted until public sewage is available. These easements shall become null and void upon connection to a public sewage system. The County Health Officer shall have the authority to grant variances for encroachments into the private sewage easement. Recordation of a modified sewage easement shall not be necessary.

Percolation test holes shown hereon have been field located and shown as "O".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene.

Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

Robert J. Wade  
for Ho. Co. Health Officer  
7/29/04  
DATE

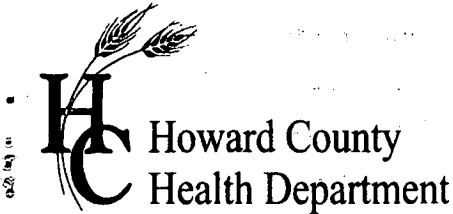
PERCOLATION TEST PLAT  
Prop. of Mr. & Mrs. Catherman  
PARCEL 7ABCD

MIDDLE TRAIL PROPERTY  
16523 Old Fred Road  
HOWARD ASSOCIATES

4th Election District  
Howard County, Maryland  
Scale 1"=100'  
Date 7/28/04

PC 520789

ORIGINAL PLAN BY  
NTT Associates, Inc.  
16205 Old Frederick Road  
Mt. Airy, MD 21771  
(301) 442-2031



# APPLICATION

## FOR PERCOLATION TESTING AND SITE EVALUATION

TEST DATE(S) 7/28/04 TEST TIME 9:00 Am AP 520789

AGENCY REVIEW: \_\_\_\_\_ DATE 7/28/04

DO NOT WRITE ABOVE THIS LINE

I HEREBY APPLY FOR THE NECESSARY TESTING/EVALUATION PRIOR TO ISSUANCE OF SEWAGE DISPOSAL SYSTEM PERMIT(S) TO:

CHECK AS NEEDED:

- CONSTRUCT NEW SEPTIC SYSTEM(S)
- ~~REPAIR~~ EVALUATION AN EXISTING SEPTIC SYSTEM
- REPLACE AN EXISTING SEPTIC SYSTEM

CHECK AS NEEDED:

- NEW STRUCTURE(S)
- ADDITION TO AN EXISTING STRUCTURE
- REPLACE AN EXISTING STRUCTURE

CHECK ONE:

- CREATE NEW LOT(S)
- BUILD ON AN EXISTING LOT IN A SUBDIVISION
- BUILD ON AN EXISTING PARCEL OF RECORD

IS THE PROPERTY WITHIN 2500' OF ANY RESERVOIR?

- YES
- NO

THE TYPE OF STRUCTURE IS:

- RESIDENTIAL WITH 3 PROPOSED BEDROOMS IN THE COMPLETED STRUCTURE (NOTE **UNKNOWN** IF APPROPRIATE)
- COMMERCIAL (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/ CUSTOMERS ON ACCOMPANYING PLAN)
- INSTITUTIONAL/GOVERNMENT (PROVIDE DETAIL OF NUMBERS AND TYPES OF EMPLOYEES/USERS ON ACCOMPANYING PLAN)

PROPERTY OWNER(S) DOUG & GINGER CATHERMAN

DAYTIME PHONE 410-489-6665 CELL 443-398-0624 FAX \_\_\_\_\_

MAILING ADDRESS 16523 OLD FREDERICK RD MT. AIRY MD 21771  
STREET CITY/TOWN STATE ZIP

APPLICANT DOUG CATHERMAN

DAYTIME PHONE 410-489-6665 CELL 443-398-0624 FAX \_\_\_\_\_

MAILING ADDRESS 16523 OLD FREDERICK RD MT AIRY MD 21771  
STREET CITY/TOWN STATE ZIP

APPLICANT'S ROLE: DEVELOPER BUILDER BUYER RELATIVE/FRIEND REALTOR CONSULTANT

PROPERTY LOCATION  
SUBDIVISION/PROPERTY NAME MIDDLE TRAIL LOT NO. 7ABCD

PROPERTY ADDRESS 16523 OLD FREDERICK RD MT AIRY  
STREET TOWN/POST OFFICE

TAX MAP PAGE(S) 7 GRID 5 PARCEL(S) 404, 445, 446, 450 PROPOSED LOT SIZE EX. Parcel

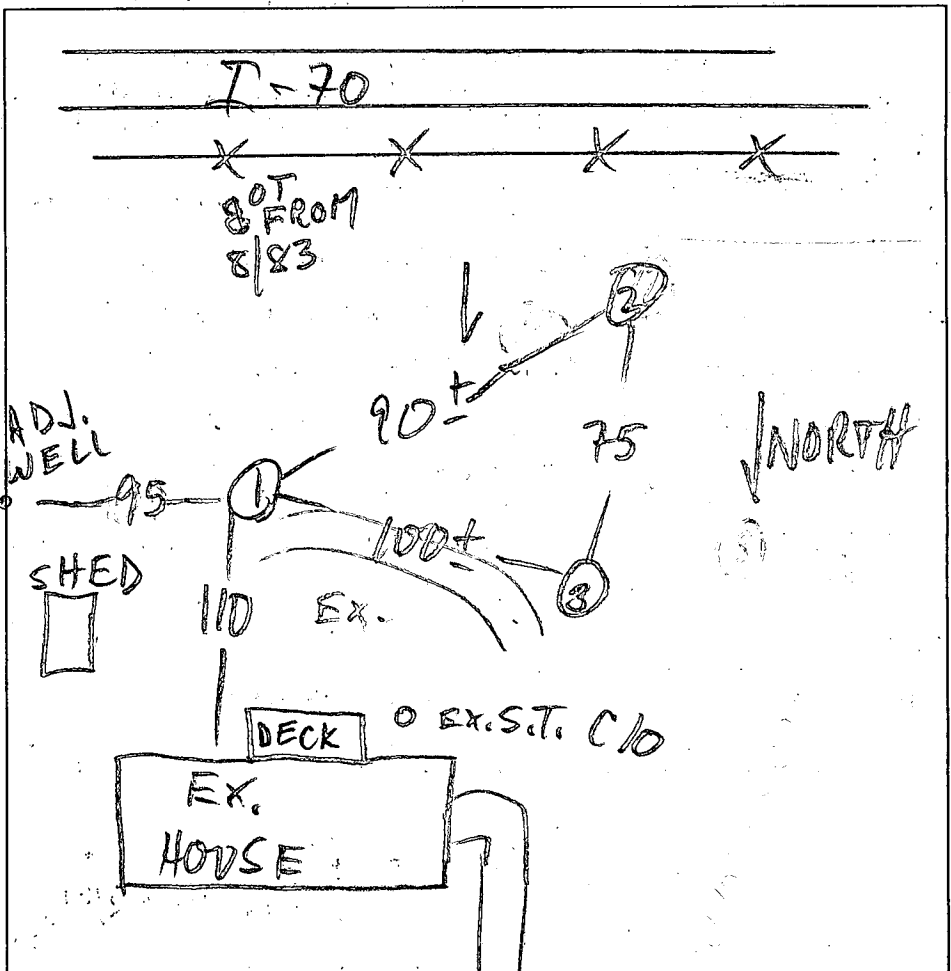
AS APPLICANT, I UNDERSTAND THE FOLLOWING: THE SYSTEM INSTALLED SUBSEQUENT TO THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC SEWERAGE IS AVAILABLE. THIS APPLICATION IS COMPLETE WHEN ALL APPLICABLE FEES AND A SUITABLE SITE PLAN HAVE BEEN RECEIVED. I ACCEPT THE RESPONSIBILITY FOR COMPLIANCE WITH ALL M.O.S.H.A. AND "MISS UTILITY" REQUIREMENTS. APPROVAL IS BASED UPON SATISFACTORY REVIEW OF A PERC CERTIFICATION PLAN.

TEST RESULTS WILL BE MAILED TO APPLICANT. \_\_\_\_\_  
SIGNATURE OF APPLICANT

HOWARD COUNTY HEALTH DEPARTMENT, BUREAU OF ENVIRONMENTAL HEALTH, WELL AND SEPTIC PROGRAM  
3525-H ELLICOTT MILLS DRIVE, ELLICOTT CITY, MARYLAND 21043-4544 (410) 313-1771 FAX (410) 313-2648  
TDD (410) 313-2323 TOLL FREE 1-877-4MD-DHMH

A/P

1  
brn  
hvy  
lm  
3-4  
tan  
sa lm  
10% frags  
7  
tan red  
sa lm  
15-20%  
frags  
11/2



2  
brn  
hvy lm  
3/2  
gray  
tan  
sa lm  
15-20%  
shale  
12

DATE	TEST #	DEPTH	START	BREAK 1" DROP	STOP 2" DROP	TIME OF 2nd INCH	P/F/H
7/28/04	1 V	1 1/2					P
	2 V	12					P
	3 M	7	10:08:45	10:11	10:18	7	P
	3 V	11					

3  
tan  
lt. brn  
hvy lm  
3  
gray  
tan sand  
30% 20%  
shale shale  
WEST  
35% 30- EAST  
shale 35% shale  
11

REMARKS \_\_\_\_\_

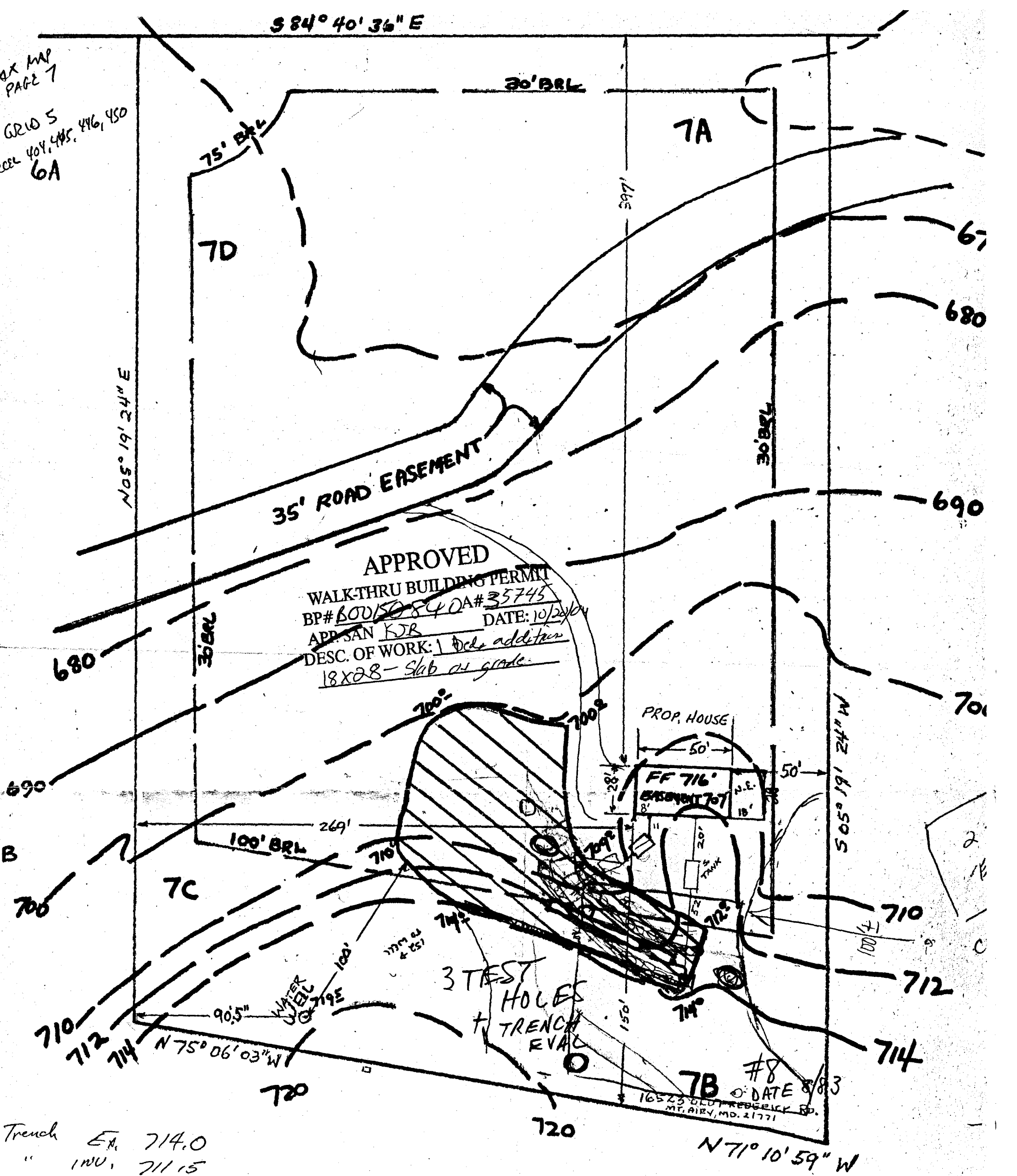
SANITARIAN M. BACKHOE \_\_\_\_\_ OTHERS \_\_\_\_\_

TEST HOLES USED IN SDA \_\_\_\_\_ AVG. PERC TIME \_\_\_\_\_ SQ. FT/BR \_\_\_\_\_

TRENCH WIDTH 3 INLET DEPTH 2 MAX. BOT DEPTH 4 EFFECTIVE SW \_\_\_\_\_

SK MAP  
PAGE 7  
GRD 5  
CEL 404, 445, 446, 450  
6A

S 84° 40' 36" E



APPROVED  
WALK-THRU BUILDING PERMIT  
BP# 6005084 DA# 35745  
APP. SAN KJB DATE: 10/22/04  
DESC. OF WORK: 1 Dec addition  
18x28 - Slab on grade.

PROP. HOUSE  
50'  
FF 716  
ELEVATION 707

3 TEST HOLES  
+ TRENCH EVAL

7B #8  
DATE 8/83  
16525 OLD REDBERRY RD.  
MT. AIRY, MD. 21771

Trench Elev. 714.0  
" 1NW, 711.15  
52' @ 1/8" ft.  
Tank in 712.29  
" out 712.04  
" sept. elev. 713.0  
" prop. elev. 714.2  
House in, 712.71

\$225 (PERC)  
\$180 (PERMIT TO INSTALL)

from other sheet 1.50

Septic elev's & location of 4.2286 ft.

US ROUTE I-70

B.P. # 69682

- 1) ADD PROP. ADDITION
- 2) ADD/VERIFY LOC OF EX. S.T. AND WELLS
- 3) SPECIFY TYPE OF USE
- 4) SPECIFY TOPO NOT CORRECT
- 5) SPECIFY PURPOSE: TO VERIFY SOILS IN SEWAGE RESERVE AREA & IN VICINITY OF EX. SYS. FOR BP PROPOSED

NTT ASSO.  
16205 OLD F  
MT. AIRY, N  
(301) 442-