

SEE A48769, 43376, 43378
P-43372 F 93-19
FOR RELATED SUBDIVISION

Approved 5/21/85
Staged

P 35471
A 34032

5/21/85
anytime

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

04-33983
INDEXED

ELLICOTT CITY
DISTRICT 4th
DATE 5/9/85

Van Sant Plumbing and Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS _____ PHONE 795-6566

SUBDIVISION Woodcamp Farms ROAD 17655 Hardy Road LOT 1

PROPERTY OWNER Richard M. Hough, D.V.M.

ADDRESS 17591 Frederick Road
Mt. Airy, Maryland 21771

lot #2705 (F-86-67) #17
new plat fine 1992 #27
will be

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 2

SHALLOW TRENCHES - 168 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3¹/₂ feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3³/₄ feet below original grade. 1¹/₂ feet of stone below distribution pipe.

LOCATION: Place the tile field between perc hole (1) & (2) as shown on the plot plan. Perc hole (1) is located 280 feet from the front lot line and 960 feet from the left side of the lot as seen when facing the lot from Hardy Road. Perc hole (2) is located 260 feet from the front lot line 1060 ft. from the left side of the lot as seen when facing the lot from Hardy Road.

NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution is required. Call for inspection of trench(s) before gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

7-11-85 SS Insp. No evidence of failure.

PLANS APPROVED BY Raymond Hodges DATE 10/4/84

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 34032

Paul
9:30 AM
8/21/84

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34032

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 4th

DATE 6/25/84

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 RICHARD M. HOUGH, D.V.M.

ADDRESS 17591 FREDERICK ROAD MT. AIRY, MD 21771 PHONE 301-829-2083

PROPERTY LOCATION:

SUBDIVISION Tax map 6 Parcel 485 Woodcamp Farms LOT NO. 1
17653-

ROAD AND DESCRIPTION HARDY ROAD ELECTION DISTRICT 4

SIZE OF LOT 59+ ACRES TYPE BLDG. Minimum size for 3 bedroom
2 BEDROOM HOME
(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. Richard M. Hough
(SIGNATURE OF APPLICANT)

APPROVED BY Frank Shinn FOR tile field DATE 8/24/84

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 10/4/8

BLDG. PERMIT SIGNED
AND RETURNED 10/3/84
Serial # 61043 SF19

THIS IS NOT A PERMIT

141
7/25
1972

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

A 34032

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 4th

DATE 9/25/84

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 Richard M. Hough, D.V.M.
17591 Frederick Road
ADDRESS Mt. Airy, Maryland 21771 PHONE 301-829-2083

PROPERTY LOCATION:

SUBDIVISION Woodcamp Farms LOT NO. 1

ROAD AND DESCRIPTION Hardy Road

SIZE OF LOT 59+ acres TYPE BLDG. 2 bedroom home
(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 Frank Skinner FOR tile field DATE 8/24/84

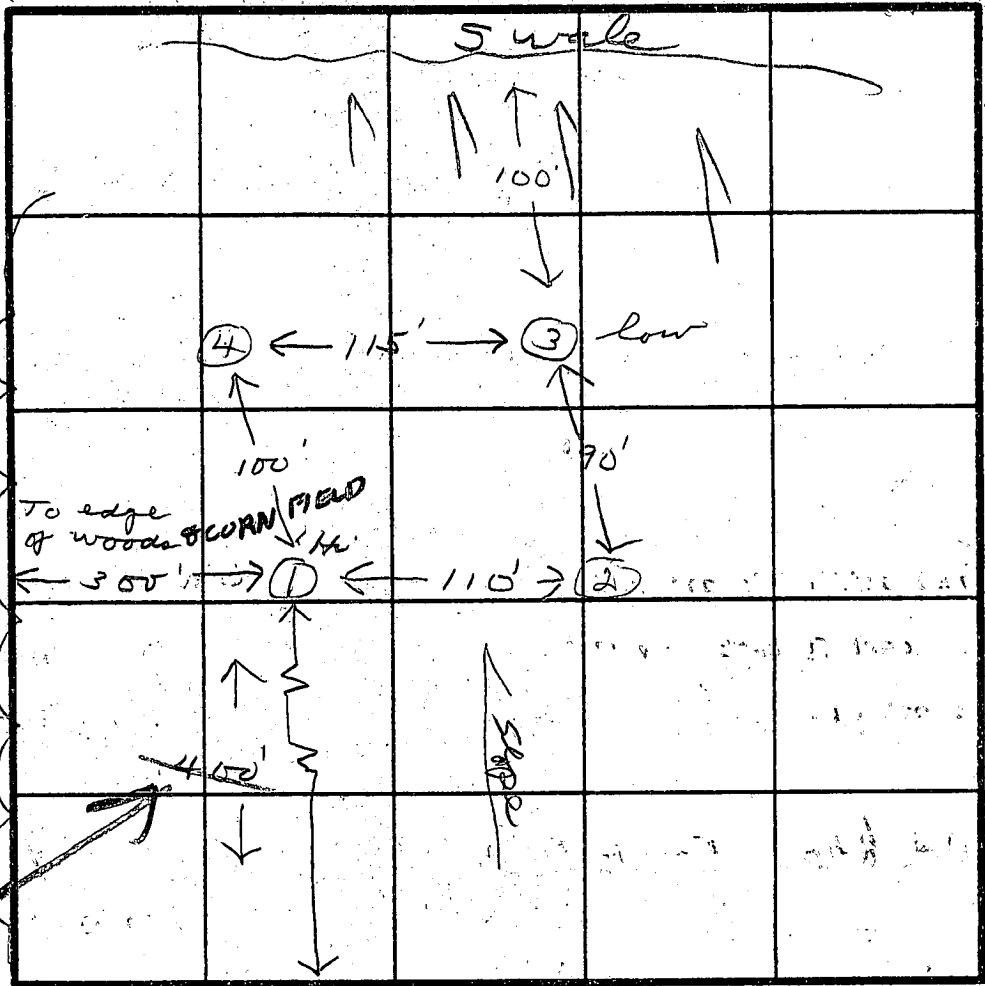
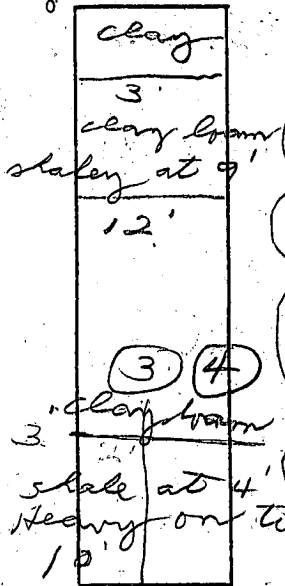
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING Hold for certified holes of 8/21/84

THIS IS NOT A PERMIT

① ②
SOIL PROFILE



280
PER PLAT

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Hardy Rd

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
8/21/84	1 S	2 1/2'	10:45	10:51	10:51	11:10	19
	1 M V10	8'	10:46	10:49	10:49	10:59	10
	2 V	12'					
	3 S	3 1/2'	11:35	11:39	11:39	11:50	11
	3 M V10	8'	11:38	11:46	11:40	11:44	4
	4 S	3 1/2'	11:56	11:59	11:59	12:10	11
	4 M V10	8'	11:58	12:02	12:02	12:09	7

REMARKS Lot in woods - no property stake
Hold for certified holes

TESTED BY JS ALSO PRESENT

EH-12-1079

B 1 **2756** 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

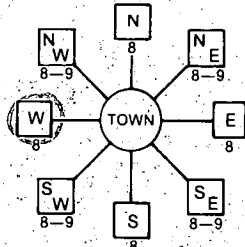
OEP PERMIT NUMBER
HO-81-0706
 fill in this form completely

Date Received **9/14/84**

OWNER INFORMATION
 15 Last Name **HOLSH RICHARD M**
 Owner First Name
 36 Street or RFD **17951 FREDERICK RD**
 57 Town **MT AIRY** 70 State **MD** 72 Zip **21221** 76

B 3 LOCATION OF WELL
 1 **HOWARD** 21
 8 COUNTY
 23 SUBDIVISION **WOODCAMP FARM** 42
 SECTION **---** 44 46 LOT **I** 48 50
 52 NEAREST TOWN **POPLAR SPRINGS** 71
 MILES FROM TOWN (enter 0 if in town) **2** 73 **M I** 76 77 78

DRILLER INFORMATION
 Driller's Name **Raish Mayne** 77 License No. **80**
 Firm Name **Raish Mayne (Well Drilling)**
 Address **7120 Brown Church Rd. Mt. Airy**
 Signature **Raish Mayne** Date **8/22/84**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 11 **HARDY RD.** 30
 NEAR WHAT ROAD
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 NORTH N 32 E
 WEST W 32 EAST
 SOUTH S
 34 **150** 37
 DISTANCE FROM ROAD
 ENTER FT or MI **F** 38 **+** 39

B 2 WELL INFORMATION
 1 APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 14 20

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 COUNTY NAME **HOWARD** COUNTY NO. **A 34032**
 OEP SIGNATURE **Frank Sh...** STATE HEALTH INSERT S 41
 DATE ISSUED **090684** CO SIGNATURE **Frank Sh...** EXP. DATE **7/6/85**
 NORTH GRID **550000** 50 55 EAST GRID **0763000** 57 63

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** 24 FEET 28

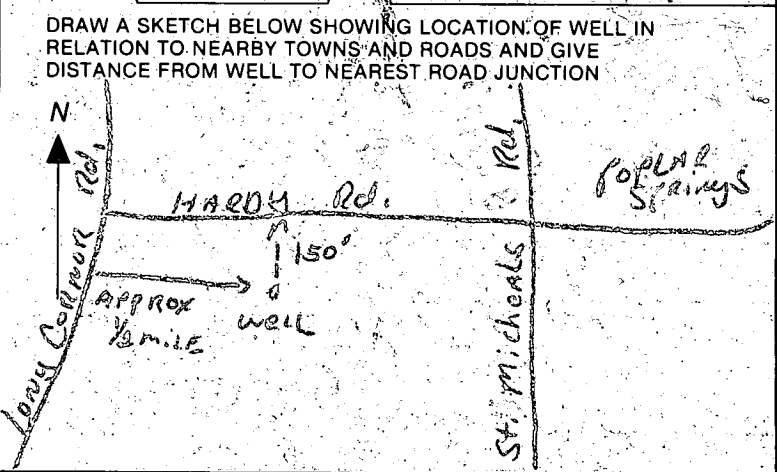
APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

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 DEEPEM AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____ 52

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ 54 **G A P** 63
 FORCE **FS** WRITE INITIALS IN BOX PERMIT No. **HO-81-0706** 70 71 72 73 74 75 76 77 78 79

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
 E **760 3**
 N **550 0**
 000 000



SPECIAL CONDITIONS

9/14/84

- ① 60 FT PLASTIC CASING
- ② Over 30 FT OPEN HOLE PER WELL
GROUTER
- ③ Arrived 1030 AM WELL
GROUT FINISHED Late Start
Hard to find site
- ④ LOCATION OK PERCHORES
FOUND
- ⑤ 13 BAGS
- ⑥ Well OK

B. Hodges

C1 2906 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 34032

DATE Received DATE WELL COMPLETED 09/14/84 Depth of Well 260 (TO NEAREST FOOT) PERMIT NO. HC-81-0706

OWNER Hough last name Richard M. first name TOWN Poplar Springs

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, FEET (FROM, TO), Check if water bearing. Rows include Top Soil, Brown Shale, Brown Slate, Blue Slate, Brown Slate, Blue Slate.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS 13 NO. OF POUNDS 1380

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE PL Nominal diameter 6 Total depth 60

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

SCREEN RECORD screen type or open hole insert appropriate code below HO OPEN HOLE

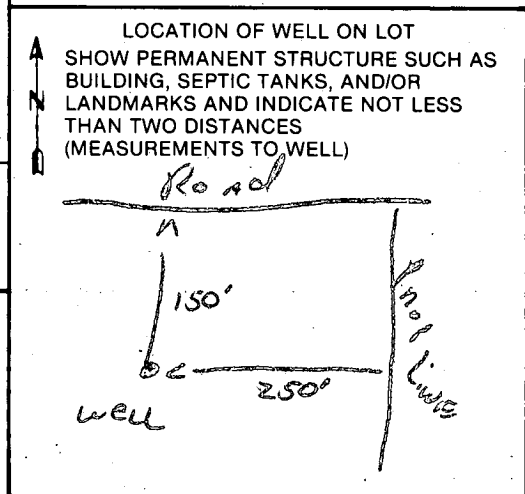
DEPTH (nearest ft.) HO 58 260 SLOT SIZE DIAMETER OF SCREEN

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 LOG INDICATOR OTHER DATA

C3 PUMPING TEST HOURS PUMPED 3 PUMPING RATE 5 METHOD USED TO MEASURE PUMPING RATE Bucket

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)



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"

DRILLERS IDENT. NO. 253 Ralph Wayne

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Ralph E. Wayne

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

