

5/25/93
11 AM

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

05-408318

P 48312

A 34817

DISTRICT 5th

DATE 4/30/92

DATE SYSTEM APPROVED 5/25/93

INSPECTOR M. Riskin

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

Jack Fyock 

Dave Cornwell Construction IS PERMITTED TO INSTALL ALTER

ADDRESS 13775 Triadelphia Road, Glenelg, MD 21737 PHONE 804-435-6584 988-9270

SUBDIVISION Chapel Woods, Sec. II LOT 22, Area 3 ROAD 11821 Chapel Woods Court

PROPERTY OWNER Bruce Conger

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 212

TRENCHES - Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 330 feet from the front lot line and 110 feet from the right lot line as seen when facing the property from the end of the Court.

NOTES - Run trenches along contour towards the rear.
- No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 3/2-6/29/92 JF

PLANS APPROVED BY C. Williams/Raymond Hodges REVISED _____ DATE 6/16/92

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

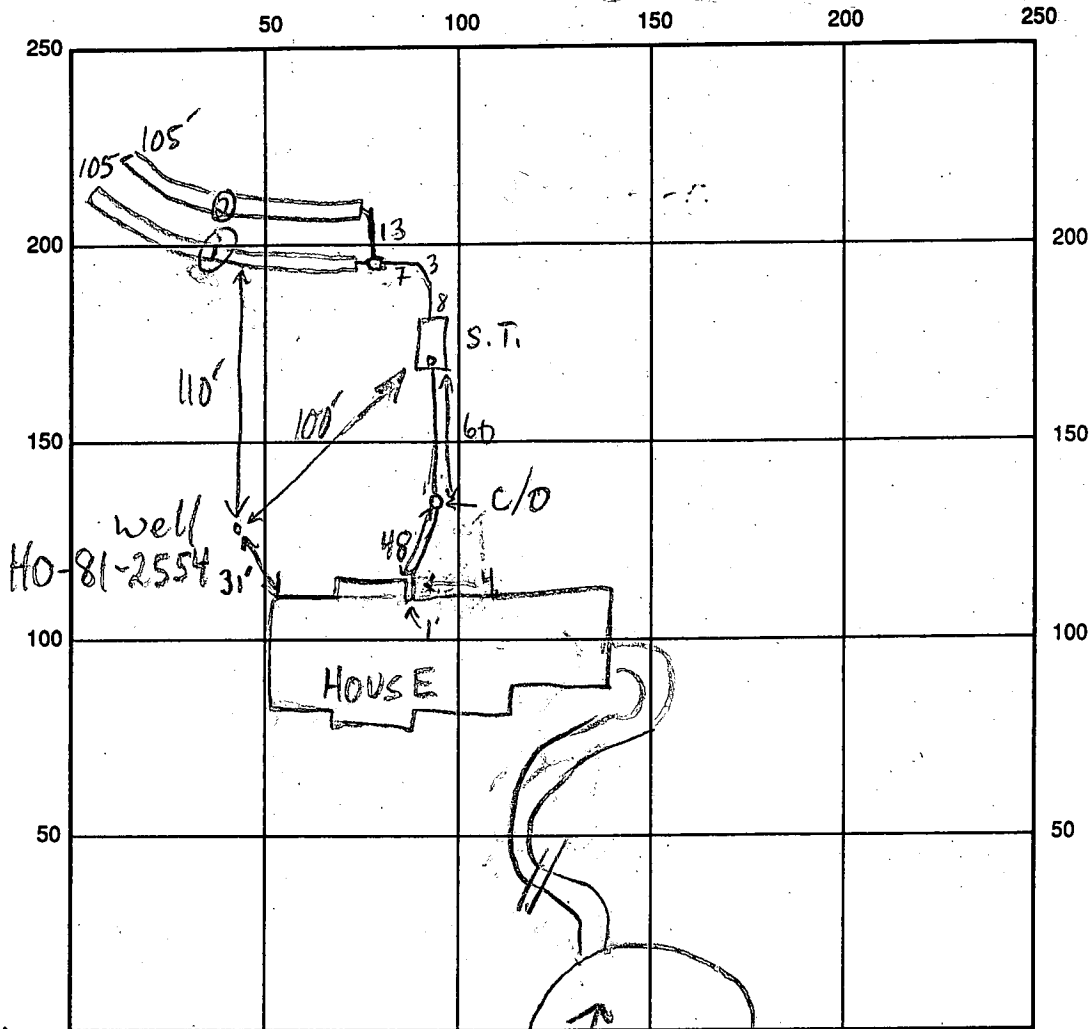
PERMIT VOID AFTER TWO YEARS

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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

A
34812



CHAPEL WOODS CT INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL-OK CLEANOUTS OK-S.T. + INLINE

DISTRIBUTION BOX LEVEL OK-BAFFLE IN

DRAIN FIELD/TITLE DEPTH $\frac{11}{8}$ FT. TRENCH WIDTH 2 FT. INLET DEPTH $\frac{11}{4}$ FT.

EFFECTIVE GRAVEL DEPTH $\frac{7}{4}$ FT. TOTAL LENGTH 2 @ 105 FT.

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 2 @ 420 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 840 SQ. FT.

REMARKS: 5/24/93 OK TO COVER 1ST TRENCH, CONTINUE MR
5/25/93 OK TO FINISH + COVER ALL MR

DATE SYSTEM APPROVED 5/25/93 INSPECTOR M. Riskin

APPLICATION

A. 34817

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 5
DATE Jan. 8 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: Newburn Development Corporation
Suite 201, 5570 Sterrett Place
Columbia, Maryland 21044
ADDRESS 997-3815 596-3877 PHONE _____

PROPERTY LOCATION

SUBDIVISION Chapel Woods, Section 2 LOT NO. 16

ROAD AND DESCRIPTION Linden Chapel Road

SIZE OF LOT 3-acre TYPE BLDG. single family residence
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 James I. Newburn

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

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

CRAIG WILLIAMS

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement _____

Receipt # 0
Date _____

Name of Installer Don C. Marshall

Telephone 924-5336

License Number 19178
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber X

Name of Property Owner Price Smith / Conner Telephone _____
Subdivision Chapel Woods Lot # 22 Well Tag # HO-81-2554
Site Address 11821 Chapel Woods Ct

Pump
1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible X
2. Make JACUZZI
3. Model # T7B54712-52
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 X Cable guards X Other _____

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

Pitless Adapter
1. Make HARVARD
2. Model # _____
3. Depth 42"

Tank ?
1. Capacity _____
2. Pressure relief valve? _____
Pitless adapter valve, line at 36" 461-21-93

Piping
1. Type Poly
2. Size 1"
3. NSF and/or BOCA Code approved X
4. Depth of supply line 40"

Well data
1. Depth _____ ft.
2. Yield _____ GPM
3. Static water level _____ ft.
4. Will water supply be disinfected by installer? NO

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: [Signature]
Date: 1-21-93

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

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2554
 Location of property (road) CHARLES WOODS COURT
 Subdivision CHAPER WOODS Lot 22 Block Plat Sec. 2 AREA 3
 Well Driller JOSEPH MAYNE Owner DEVELOPMENT, NEWBURN

Depth of well 400'
 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 20 gpm.
 Total time 30 min to reach pumping water level 275' 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	153	3 sec.		20
8:00	275	3		20
8:15	273	22		2 3/4
8:30	271	22		2 3/4
8:45	271	20		3
9:00	271	20		3
9:15	271	20		3
9:30	271	20		3
9:45	271	20		3
10:00	271	20		3
10:15	271	20		3
10:30	269	20		3
10:45	269	18		3 1/4
11:00	269	18		3 1/4
11:15	269	18		3 1/4
11:30	269	18		3 1/4
11:45	269	18		3 1/4
12:00	269	18		3 1/4
12:15	269	18		3 1/4
12:30	269	18		3 1/4
12:45	269	18		3 1/4
1:00	269	18		3 1/4
1:15	269	18		3 1/4
1:30	269	18		3 1/4
1:45	269	18		3 1/4
2:00	269	18		2 1/4

B 1 **3604** SEQUENCE NO. (DP 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

STATE PERMIT NUMBER
40-81-2554
 fill in this form completely

Date Received (APA) **02/16/88**
 OWNER INFORMATION
 NEUBURV DEVELOPMENT
 5570 FLECKLETT PLACE
 CLARKSVILLE MD 21031

B 3 LOCATION OF WELL
 HOWARD COUNTY
 CHAPEL WOODS SUBDIVISION
 SECTION 2 LOT 22 (Area 3)
 CLARKSVILLE
 MILES FROM TOWN (enter 0 if in town) **1 3/8** MI

DRILLER INFORMATION
 Joseph L. Magee
 238 License No. 80
 Joseph L. Magee Well Drilling
 5512 Ridge Rd. Vest. Arvy, Md. 21771
 Joseph L. Magee 12/7/87

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 NEAR WHAT ROAD: CHAPEL WOODS CT. Road A
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX): WEST
 DISTANCE FROM ROAD: **560** FT

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

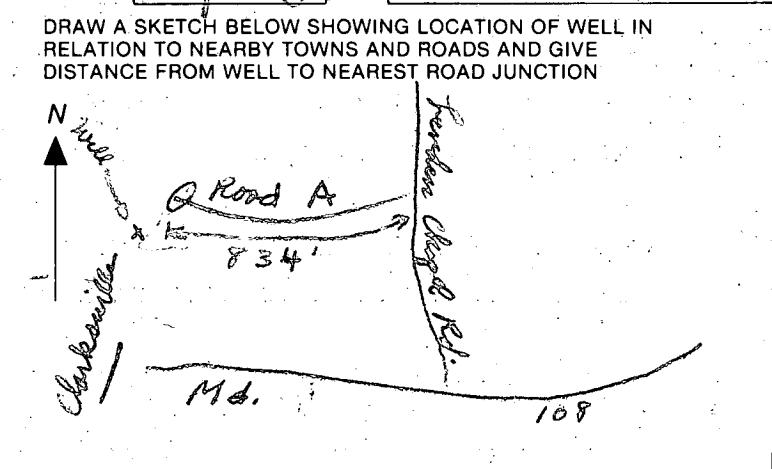
USE FOR WATER (CIRCLE APPROPRIATE BOX)
 HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
 FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
 PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
 HOWARD COUNTY NAME
 R34817 COUNTY NO.
 STATE SIGNATURE _____ INSERT S
 DATE ISSUED **02/16/88** CO SIGNATURE **B. Nilon** EXP. DATE **08/16/88**
 NORTH GRID **508000** EAST GRID **0819000**

APPROXIMATE DEPTH OF WELL **300** FEET
 APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

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 **878 19**
 N **504 8**

METHOD OF DRILLING (circle one)
 BORED (or Augered) JETTED Jetted & DRIVEN
 AIR-ROTary AIR-PERcussion ROTARY (Hydraulic Rotary)
 CABLE REVerse-ROTary Drive-POINT
 other _____



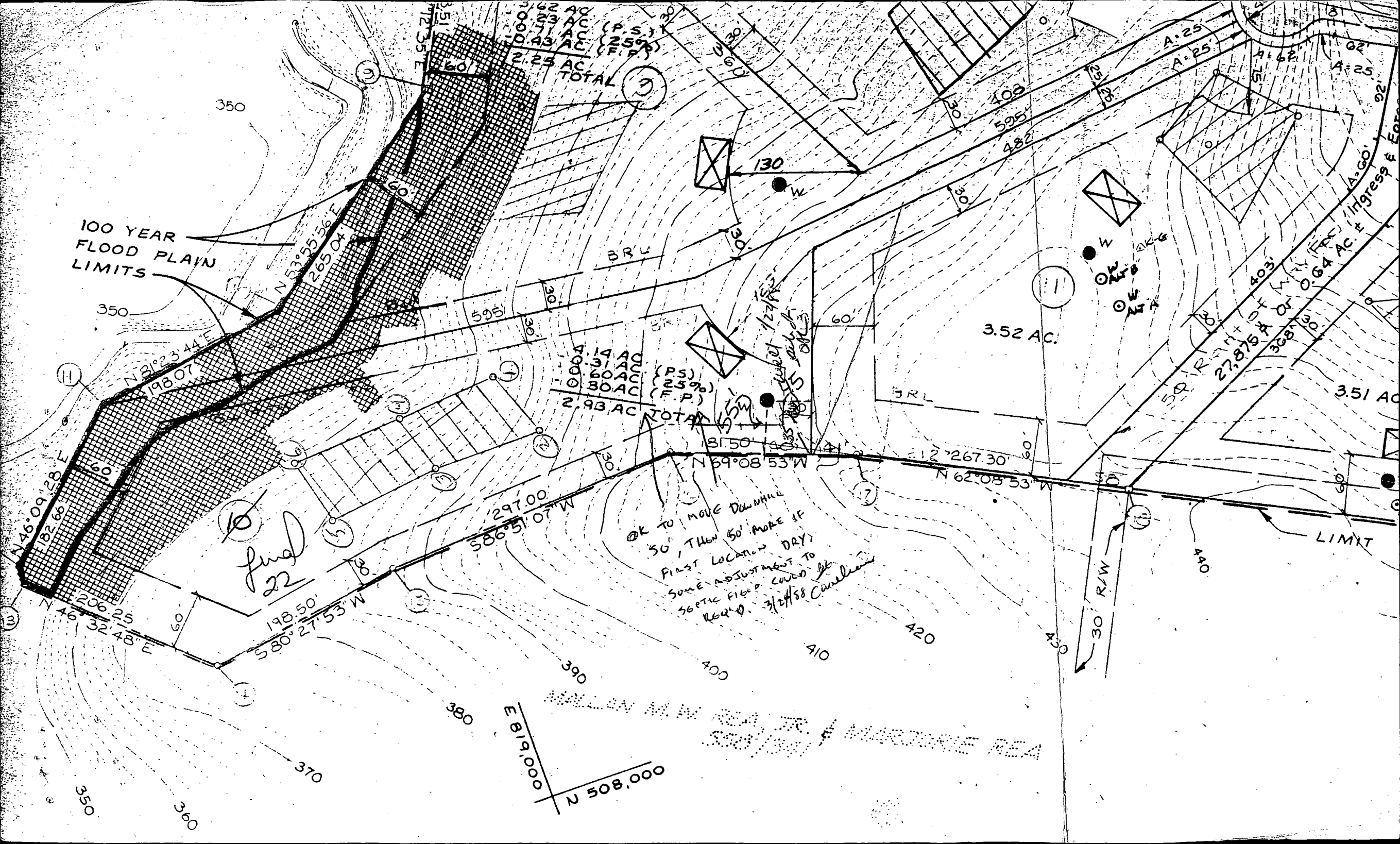
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
 THIS WELL WILL NOT REPLACE AN EXISTING WELL
 THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
 THIS WELL WILL DEEPEN AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____

Not to be filled in by driller (OEP USE ONLY)
 APPROP. PERMIT NUMBER _____ GAP _____
 FORCE **120** WRITE INITIALS IN BOX PERMIT No. **40-81-2554**

SPECIAL CONDITIONS **TO BE CONVERTED TO DRINKING WELL UPON FINAL PLAT APPROVAL**
 COUNTY

3/29/88

- ① 52 ft pipe
- ② 45 ft open Hole
- ③ Arrived 1100 for 1030 well Govt already started
- ④ 14 Bags
- ⑤ Middle of woods not sure of location
- ⑥ Dry hole already filled
- ⑦ Work



100 YEAR
FLOOD PLAIN
LIMITS

350

350

final
22

OK TO MOVE DOWNHILL
50, THEN 50 MORE IF
FIRST LOCATION DRY!
SOME ADJUSTMENT TO
SEPTIC FIELD COULD
BE REQUIRED. 3/24/88 C. Sullivan

E 819,000
N 508,000

2.25 AC TOTAL
(P.S.)
(255%)
(F.P.)

2.98 AC TOTAL
(P.S.)
(259%)
(F.P.)

3.52 AC.

3.51 AC

27.875 AC
0.64 AC. Egress & Eor

N 46° 09' 28" E
182.66'

N 21° 23' 44" E
198.07'

N 53° 55' 36" E
265.04'

N 46° 32' 48" E
206.25'

S 80° 27' 53" W
198.50'

S 86° 51' 07" W
297.00'

N 69° 08' 53" W
315.00'

N 62° 05' 53" W
1226.30'

BRL

BRL

LIMIT

30' RAW

130

30

60

108

595'

482'

A=25

A=25

A=25

A=25

A=25

A=25

A=25

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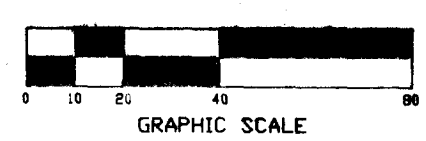
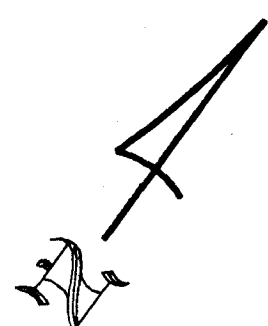
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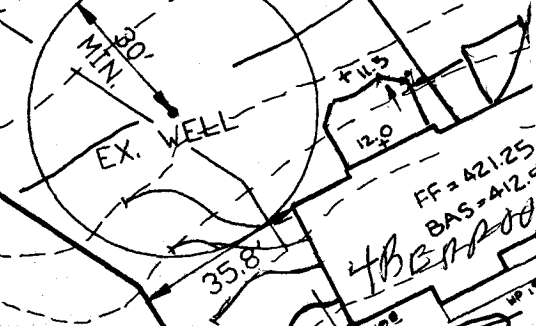
N01°30'27"E. 16.12'
N.46°03'40"E. 182.55'
N.46°28'56"W. 206.15'
S.80°25'22"W. 198.61'

LOT 22
4.27 ACRES



4 BEDROOMS
212 LINEAR FT NEEDED

SEPTIC AREA



OWNERS:
GARY SMITH & BRUCE CONGER
COLUMBIA, MARYLAND