

4/17/84
4/17/84 after lunch
to [unclear] lot

05-374383

Approved 4/17/84
Stayer

PERMIT

P 33771
A 33163

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEX

ELLICOTT CITY
DISTRICT 4th.

DATE 4/12/84

Ashby Building Company IS PERMITTED TO INSTALL ALTER

ADDRESS 5755 Oklahoma Road, Sykesville, Maryland 21784 PHONE 781-6075

SUBDIVISION Glenelg Manor II ROAD 12753 Folly Quarter LOT 10A

PROPERTY OWNER Richard Crutchfield

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1200 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide, Inlet 4 feet below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 4 feet below original grade. 6 feet of stone below distribution pipe. LOCATION: Start first trench 170 feet from the front lot line and 20 feet from the left lot line as seen when facing the property from the Development Road. Run trench(s) along level ground toward right side of lot. One trench 105' long with 6' stone is acceptable. Call for two inspections - before and after stone is installed. NOTE: If more than one trench used, a distribution box is required. Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.

PLANS APPROVED BY C. Williams DATE 11/28/83

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.

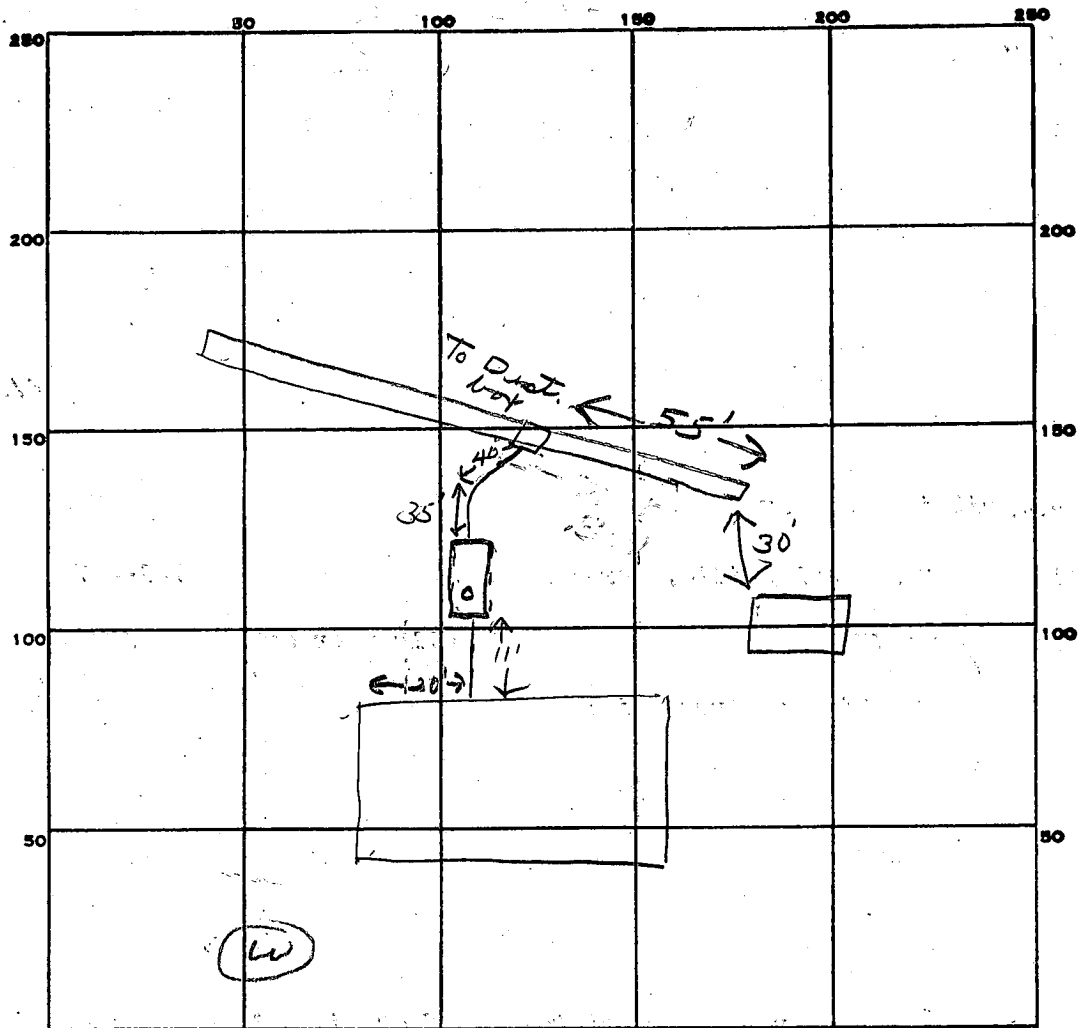
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 33163



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Unnamed Rd

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1500 gal CLEANOUTS ST

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 108 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 648

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

ABSORBENT AREA 648 SQ. FT.

REMARKS 4/13/84 OK to add stone in trench
4/17/84 OK to cover all work

DATE SYSTEM APPROVED 4/17/84 INSPECTOR Stayer

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33163

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 4th

DATE 9-23-83

Retest
9/27/83
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 HOWCO CONSTRUCTION CO. INC.

ADDRESS 12228 MT. ALBERT RD. 21043 PHONE 988-9217

PROPERTY LOCATION:

SUBDIVISION GLEN ELG MANOR II LOT NO. 10A

ROAD AND DESCRIPTION PLEASANT PROSPECT LANE

SIZE OF LOT 1 ACRE + TYPE BLDG. 4 BEDROOM - 2 STORY
(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.

Robert E. Gosselin
(SIGNATURE OF APPLICANT)

APPROVED BY CW [Signature] FOR TRENCHES DATE 9-27-83

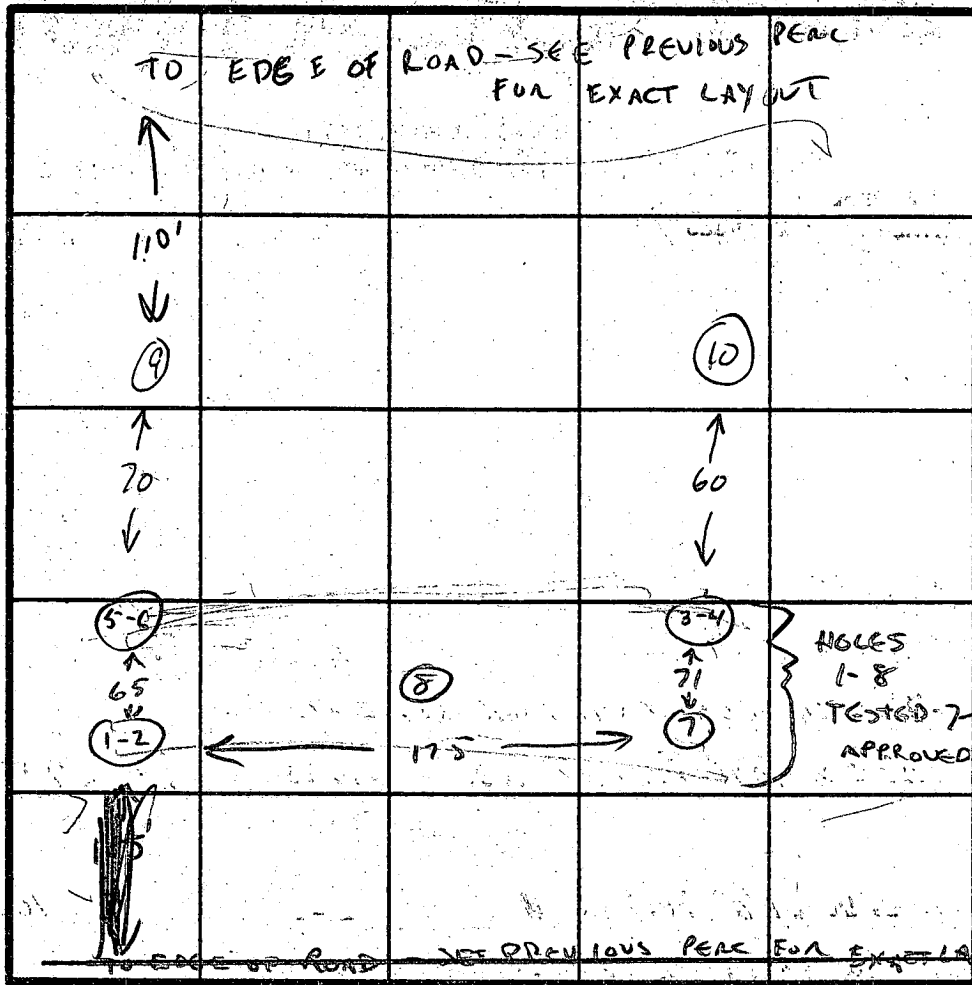
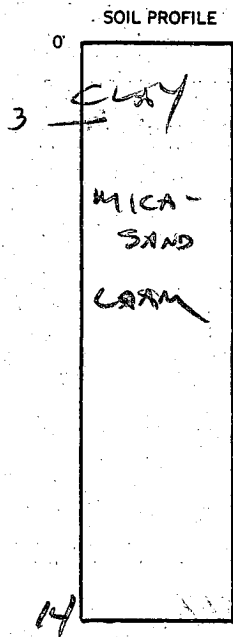
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED
AND RETURNED 10/17/83
Serial No. 55996

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		
	9	4	9:39	9:42	9:42	9:45	3min	
		9	9:39	9:42	9:42	9:45	3min	
		14						
	10	4	9:51	9:53	9:53	9:55	2min	
		9	9:51	9:54	9:54	9:57	3min	
		14						
	COMBINE WITH APPROVED PERM AREA							BY RB 2-16-83

REMARKS START SYSTEM 174' FROM FRONT LOT LINE. DEPTH 4-9'
5' STONE.


TYPE OF SOIL SAND w/ MICA TO 14'

TESTED BY C. Williams ALSO PRESENT BOB GOSLIN


EH-12-1079

A & D
Signed

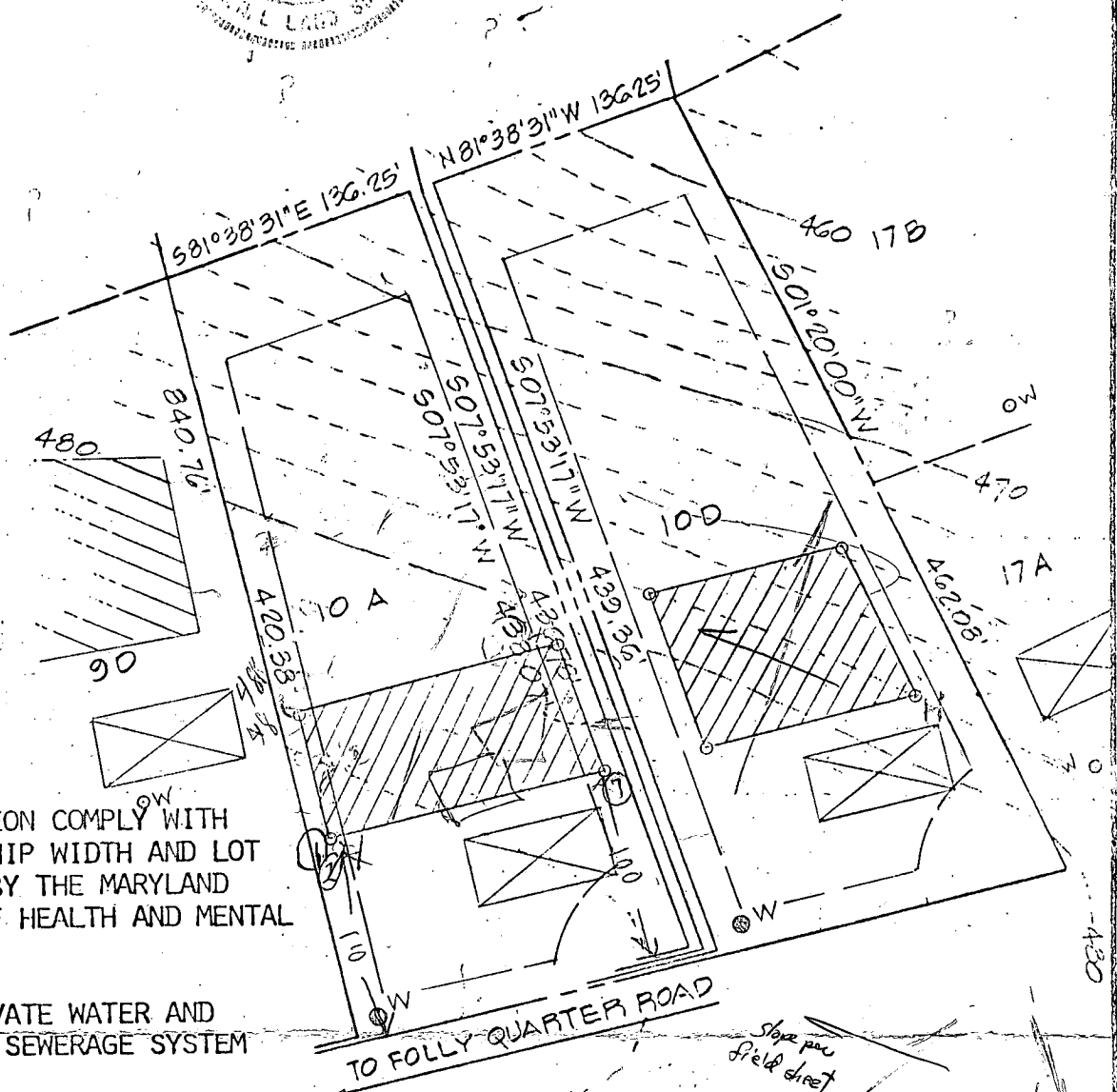
10

 This area indicates a private sewage easement of approximately 10,000 square feet, as required by the Maryland State Department of Health and Mental Hygiene for individual disposal. Improvements of any kind in this area are restricted until public sewage is available and servicing any residential structures constructed in this area. This easement shall become null and void upon connection to a public sewage system.

Percolation test holes have been field located, AND ARE INDICATED BY "o"


William H. Martel
1-18-79

TOSO



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.

APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEM

Joseph B. ...
HOWARD COUNTY HEALTH OFFICER 3-20-79
DATE

Slope per field sheet
Slope per plat

PERCOLATION TEST PLAT

PROJECT: GLENELG MANOR - SECTION 2 - LOTS 10A, B, C AND D

LOCATION: THIRD ELECTION DISTRICT - HOWARD COUNTY, MARYLAND

DATE: DEC., 1977	DESIGN BY: _____	DRAWN BY: DMR	CHECKED BY: DMR
SCALE: 1"=100'	JOB NO.: 7778	DRAWING NO.: 1 OF 1	

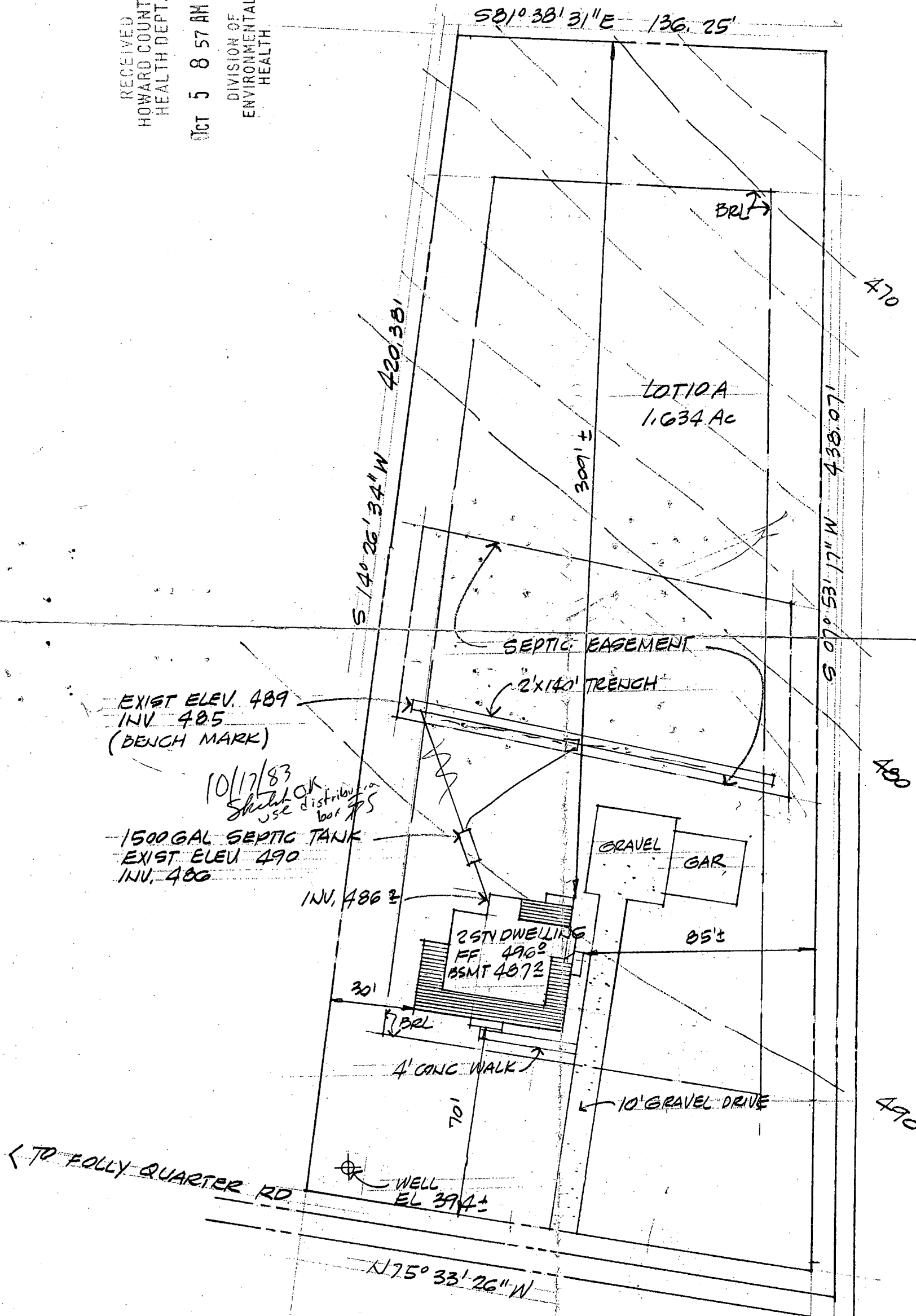
boender associates

engineers
surveyors
planners

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

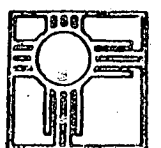
OCT 5 8 57 AM '83

DIVISION OF
ENVIRONMENTAL
HEALTH



LOT 10 A 1" = 40'
GREENGLASS MAJOR SECTION TWO
5TH ELECTION DISTRICT, HOWARD CO.

CRAIG L STEWART
ARCHITECT PA
8289 MAIN STREET, SECOND FLOOR
ELICOTT CITY, MARYLAND 21043 (301) 461-2666



3 OCT 83

B 1 6897 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

40-81-0266

(THIS NUMBER IS TO BE PUNCHED IN COLS 3-5 ON ALL CARDS)

please print or type

fill in this form completely

Date Received

0603

OWNER INFORMATION

KEWNER DONALD R.

10194 BALT. MATL PIKE

ELLICOTT CITY MD 21043

DRILLER INFORMATION

Ralph Mayne 223

Ralph Mayne (well Drilling)

9120 Brown Church Rd Mt Airy Md

Ralph Mayne 8/30/83

LOCATION OF WELL

HOWARD

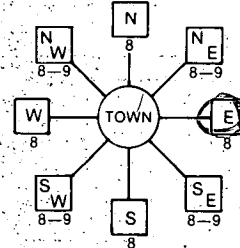
GLEWELG MAROR

SECTION 2 LOT 10A

GLEWELG

MILES FROM TOWN (enter 0 if in town) 3 MI

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Folley Quarter Rd.

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD 2000

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD

A33163

COUNTY NAME, OEP SIGNATURE, DATE ISSUED, CO SIGNATURE, EXP. DATE

NORTH GRID 515000, EAST GRID 082000

APPROXIMATE DEPTH OF WELL 150 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

AIR-ROTARY, AIR-PERCUSsion, ROTARY, CABLE, REVERSE-ROTARY, DRIVE-POINT

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

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

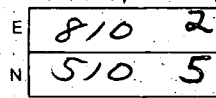
APPROP. PERMIT NUMBER GAP

FORCE FS WRITE INITIALS IN BOX PERMIT NO. 40-81-0266

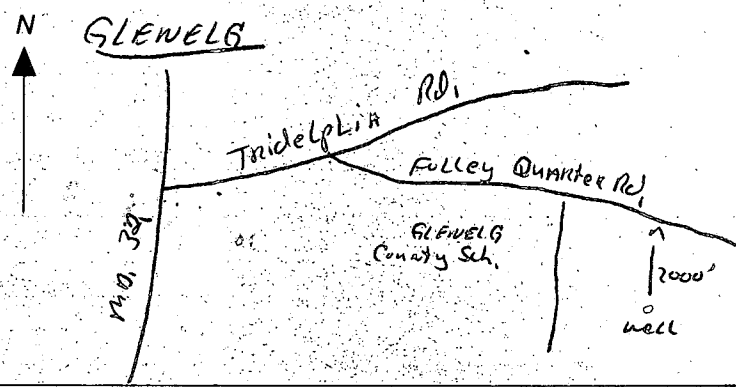
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER 1. well

WRITE THE BOX NUMBER FROM THE MAP HERE



DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



C-1 0806 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 3-8 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 33163**

DATE RECEIVED: [] [] [] [] [] [] DATE WELL COMPLETED: **09/16/83** DEPTH OF WELL: **160** (TO NEAREST FOOT) PERMIT NO. FROM "PERMIT TO DRILL WELL": **H0-81-0266**

OWNER: **Reuwer Donald**
 STREET OR RFD: **Folly Quarter Road** TOWN: **Glenelg**
 SUBDIVISION: **Glenelg Manor** SECTION: **2** LOT: **10A**

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	
sandy	2	28	
Sand Stone	28	35	<input checked="" type="checkbox"/>
Mic KA	35	40	
Sand Stone	40	50	<input checked="" type="checkbox"/>
Mic KA	50	160	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **8** NO. OF POUNDS **800**
 GALLONS OF WATER **48**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **30** ft.
 (enter 0 if from surface)

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

MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch) **6**
 Total depth of main casing (nearest foot) **38**

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

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

DEPTH (nearest ft.)

EACH SCREEN	DEPTH (nearest ft.)		
	1	2	3
1	40	36	160
2			
3			

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**
 DRILLERS SIGNATURE **Rabah Mayne**
 (MUST MATCH SIGNATURE ON APPLICATION)
 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 [] [] [] [] [] []
 TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **6**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **28** WHEN PUMPING **160**
 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 (nearest foot) **2**
 below }

