

11/18/88

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

P 42669

A 33653

DISTRICT 5th

DATE 10/3/89

DATE SYSTEM APPROVED 11/2/88

INSPECTOR C. Welch

**HOWARD COUNTY**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

## INDEXED

Paul Schissler/South Carroll Backhoe, Inc. IS PERMITTED TO INSTALL  ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland PHONE 875-4197

SUBDIVISION Buckskin Woods ROAD <sup>4202</sup>~~4218~~ Buckskin Lake Dr LOT 7

PROPERTY OWNER Joseph Irrgang / Signature Homes

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES  NO

193  
14  
5.5 [ 7.2 ]  
140

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 193 sq. ft. per bedroom with garbage disposal. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 8.5 feet below original grade. Effective area begins at 3 feet below original grade. 5.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box or start the trench 10 feet from the front (426.23') lot line and 180 feet from the left (88.52') lot line as seen when facing the lot from Buckskin Lake Drive. Run trenches on contour toward the rear lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

PLANS APPROVED BY Sid Abel DATE 2/11/86

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS.

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

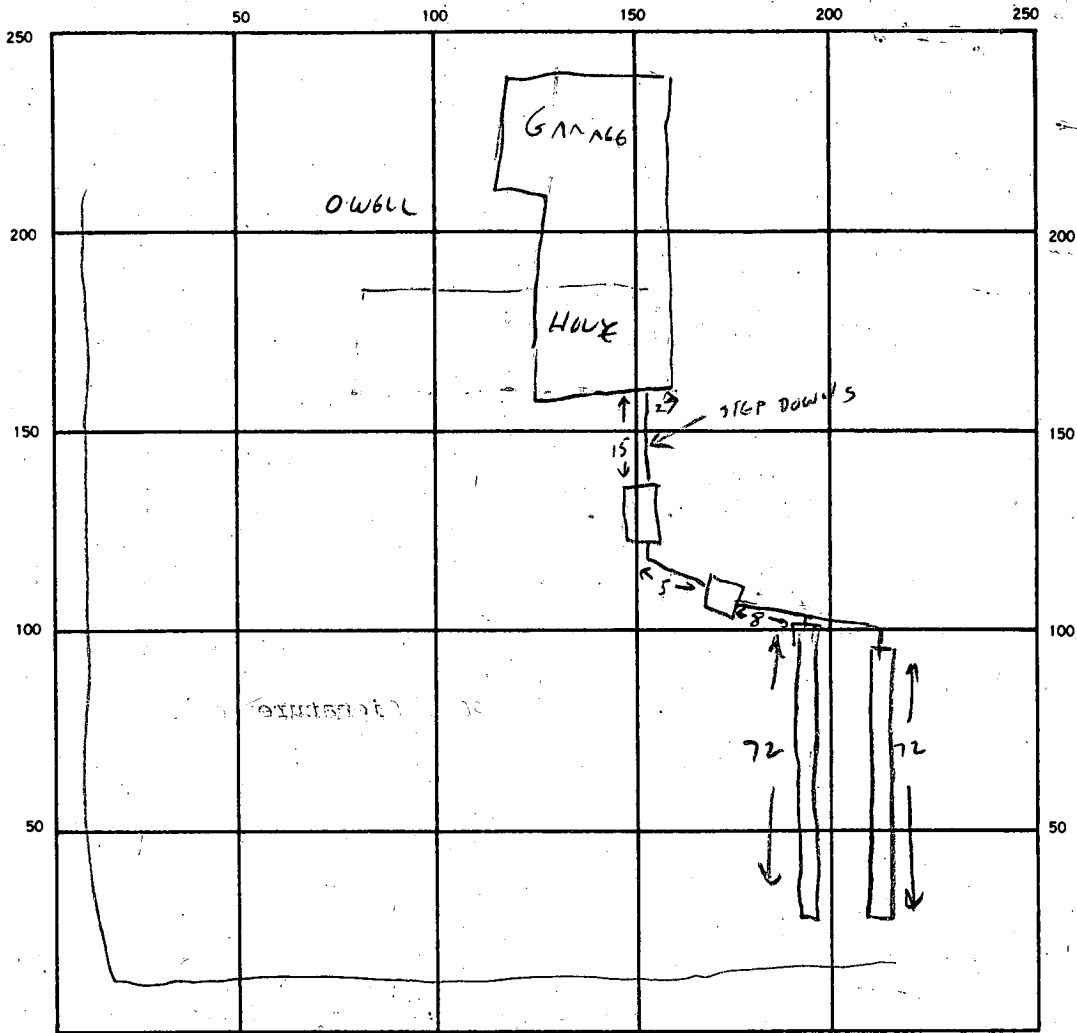
LOG. PERMIT SIGNED  
AND RETURNED 5/10/89  
Serial # 25490

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

propane tank

A 33653



144  
 5  
 720  
 72  
 792

INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

SEPTIC TANK LEVEL ✓ 2000 GAL CLEANOUTS \_\_\_\_\_

DISTRIBUTION BOX LEVEL ✓ \_\_\_\_\_

DRAIN FIELD/TILE FIELD. DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 5 1/2 FT. TOTAL LENGTH 144 FT.

NUMBER OF TRENCHES 2 (72+72) ONE SIDEWALL/BOTTOM AREA 792 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 792 SQ. FT.

REMARKS 11/18/88 1<sup>ST</sup> TRENCH OK TO NOO GRAVEL CW.

CONTRACTOR TO CALL IN WHEN JOB FINISHED.

11/19/88 2<sup>ND</sup> TRENCH COMPLETED W/O INSP. - SATURDAY, CW.

DATE SYSTEM APPROVED 11/21/88 INSPECTOR Craig Walker

# APPLICATION

PRELIMINARY

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 33653  
P \_\_\_\_\_

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

DISTRICT XZH 5th  
DATE 3/14/84

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 Glenelg Manor Associates

ADDRESS 12789 Folly Quarter Road, Ellicott City, Md. 21043 PHONE 531-5252

PROPERTY LOCATION:

SUBDIVISION Buckskin Farms LOT NO. \_\_\_\_\_

ROAD AND DESCRIPTION Folly Quarter Road - use entrance to Glenelg Dehydrators and lots are located behind the old sawmill.

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/ Olen Ketterman for Lois M. Maisel  
(SIGNATURE OF APPLICANT)

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

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

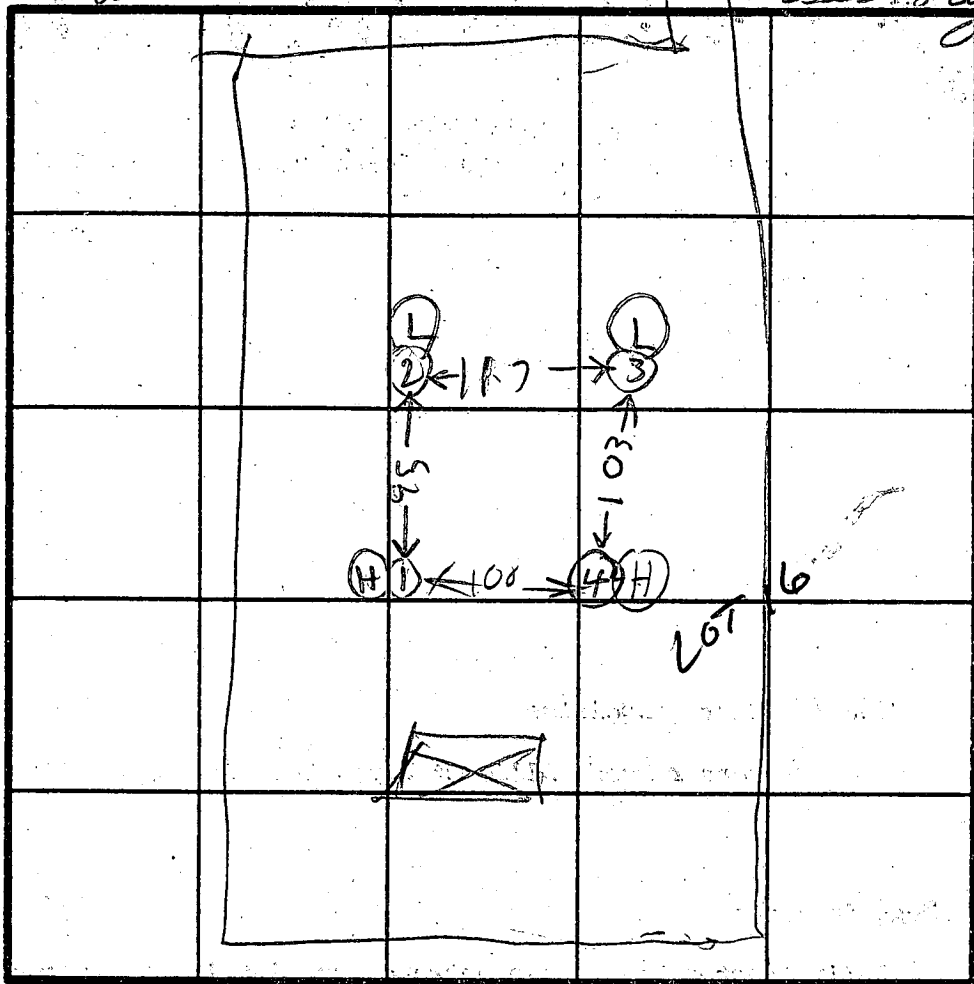
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# THIS IS NOT A PERMIT

See Plat

R/W See *to City Engineer Ref*



HOLE ELEVATIONS

①④ = HIGH

②③ = LOW

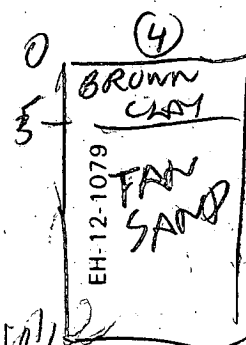
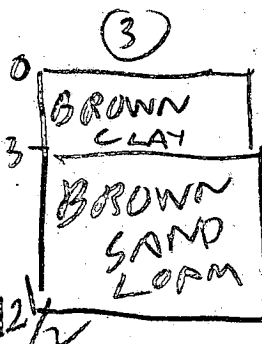
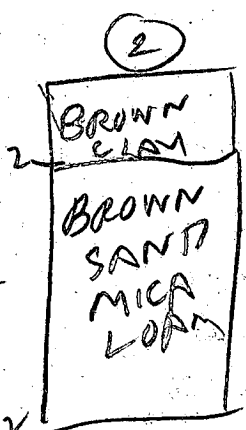
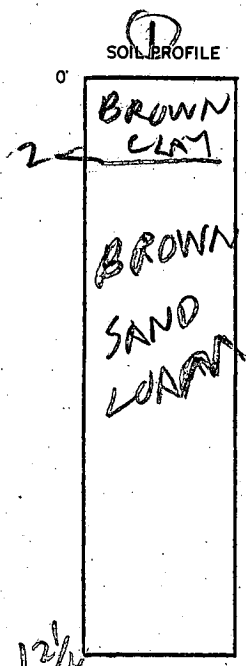
X TIME 4

INLET 3'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

BOTTOM MAX 8.5'

1500/BR



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/16/84	1 S	4	1100	1102	1102	1104	2
	1 V	12 1/2	LOOKS	OK			
	2 S	4	1105	1106	1106	1108	2
	2 V	12	LOOKS	OK			
	3 S	5	1109	1110	1110	1113	3
	3 V	12 1/2	LOOKS	OK			
	4 S	5	1117	1121	1121	1127	6
	4 V	10 1/2	LOOKS	OK			

REMARKS 3/16/84 HOLES DUG PER PLAT

TYPE OF SOIL

TESTED BY R. HODGES

D. REWER

ALSO PRESENT G. KETTERMAN & POP



0769

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

HC-81-1429 fill in this form completely

Date Received

11/13/86

OWNER INFORMATION

AC THOMASICH TOWN... 5829 TAMMUCKER RD... COLUMBIA MD 21046

B 3

LOCATION OF WELL

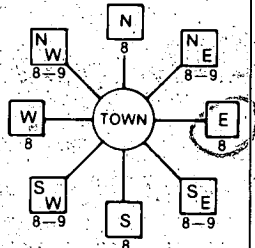
DOWN TOWN... RUCKSWIN LAKE... SECTION 44 46 LOT 48 50... MILES FROM TOWN 3 MI

DRILLER INFORMATION

George P. Rastorday... Rastorday, Inc... 9265 Brown Ch. Rd., Mt. Airy, Md. 21778... Date 2/86

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



EDLY QUANTZ RD... NEAR WHAT ROAD

CN WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)... NORTH, WEST, SOUTH, EAST... DISTANCE FROM ROAD 37 FT

WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5... AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL... 9/29/86... A#... sent as... 33856A A33653... LOT 17

COUNTY NAME... COUNTY NO... OEP SIGNATURE... DATE ISSUED... CO SIGNATURE... EXP. DATE... NORTH GRID... EAST GRID

APPROXIMATE DEPTH OF WELL 100 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

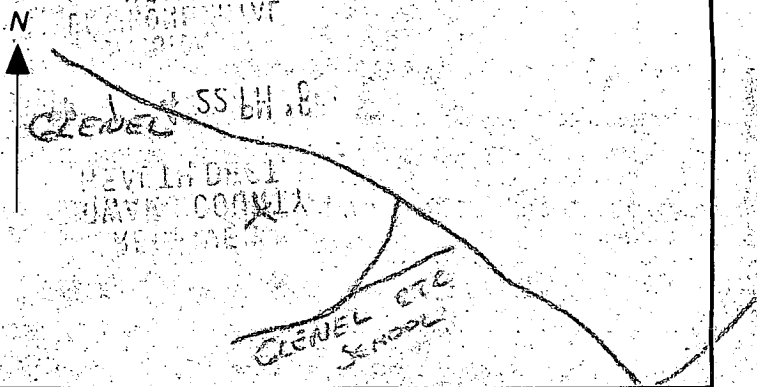
- BORED (or Augered)
JETTED
Jetted & DRIVEN
AIR-ROTary
AIR-PERCussion
ROTARY (Hydraulic Rotary)
CABLE
REVERSE-ROTary
Drive-POINT
other

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

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... Not present at time of print... 6/2/86 JS

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



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

APPROX. PERMIT NUMBER... GAP

FORCE AS... PERMIT NO. HC-81-1429

SPECIAL CONDITIONS

C1 00484

SEQUENCE NO. (OEP USE ONLY)

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 35571

33653

PERMIT NO. FROM "PERMIT TO DRILL WELL"

HO-81-1429

DATE RECEIVED

DATE WELL COMPLETED

060686

DEPTH OF WELL 400 (TO NEAREST FOOT)

OWNER Mc DONOUGH JOHN STREET OR RFD last name JOHN QUATER RD first name TOWN SUBDIVISION BACKSKIN LAKE SECTION LOT 7

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 (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include Top soil, Br. Mica, Tan Mica, Gray Mica, etc.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY NO. OF BAGS NO. OF POUNDS GALLONS OF WATER DEPTH OF GROUT SEAL

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

MAIN CASING TYPE Nominal diameter Top (main) casing (nearest inch) Total depth of main casing (nearest foot)

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 BRONZE HOLE PLASTIC OTHER

DEPTH (nearest ft.) 40 49 400 CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

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) PUMPING RATE (gal. per min. to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface) BEFORE PUMPING WHEN PUMPING TYPE OF PUMP USED (for test)

PUMP INSTALLED DRILLER WILL INSTALL PUMP (CIRCLE) (YES or 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) LAND SURFACE (nearest foot)

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL) Front Prop. line COURT

CIRCLE APPROPRIATE LETTER 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. 40 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

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

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X Replacement \_\_\_\_\_  
Receipt # 43210  
Date 12/1/88  
Name of Installer Cannal Water Systems, Inc. Telephone 876-6880  
License Number PI # 074  
Certified Well Pump Installer X Well Driller \_\_\_\_\_ Registered Plumber \_\_\_\_\_  
Name of Property Owner Robert Florian Telephone 747-3635  
Subdivision BUCKSKIN LAKE Lot # 7 Well Tag # HO-81-1429  
Site Address 4218 BUCKSKIN LAKE DR. ELICOTT CITY

Pump Motor Pitless Adapter  
1. Type 1. Horsepower 3/4 1. Make Hadva 50  
a. Deep well jet \_\_\_\_\_ 2. RPM 3450 2. Model # PT 800  
b. Shallow well jet \_\_\_\_\_ 3. Voltage \_\_\_\_\_ 3. Depth 41  
c. Submersible X a. 110 \_\_\_\_\_  
2. Make Goolds b. 220 X  
3. Model # SES05422  
4. Capacity 5 GPM  
5. Pump exceeds well capacity Yes X No \_\_\_\_\_  
6. If Yes, is low pressure cutoff switch installed? Yes X No \_\_\_\_\_  
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors \_\_\_\_\_ Cable guards X Other \_\_\_\_\_

Tank Piping Well data  
1. Capacity 27 / 80 1. Type Plastic 1. Depth 400 ft.  
2. Pressure relief valve? Yes 2. Size 1" 2. Yield \_\_\_\_\_ GPM  
3. NSF and/or BOCA Code approved Yes 3. Static water level \_\_\_\_\_ ft.  
4. Depth of supply line 380' 4. Will water supply be disinfected by installer? NO

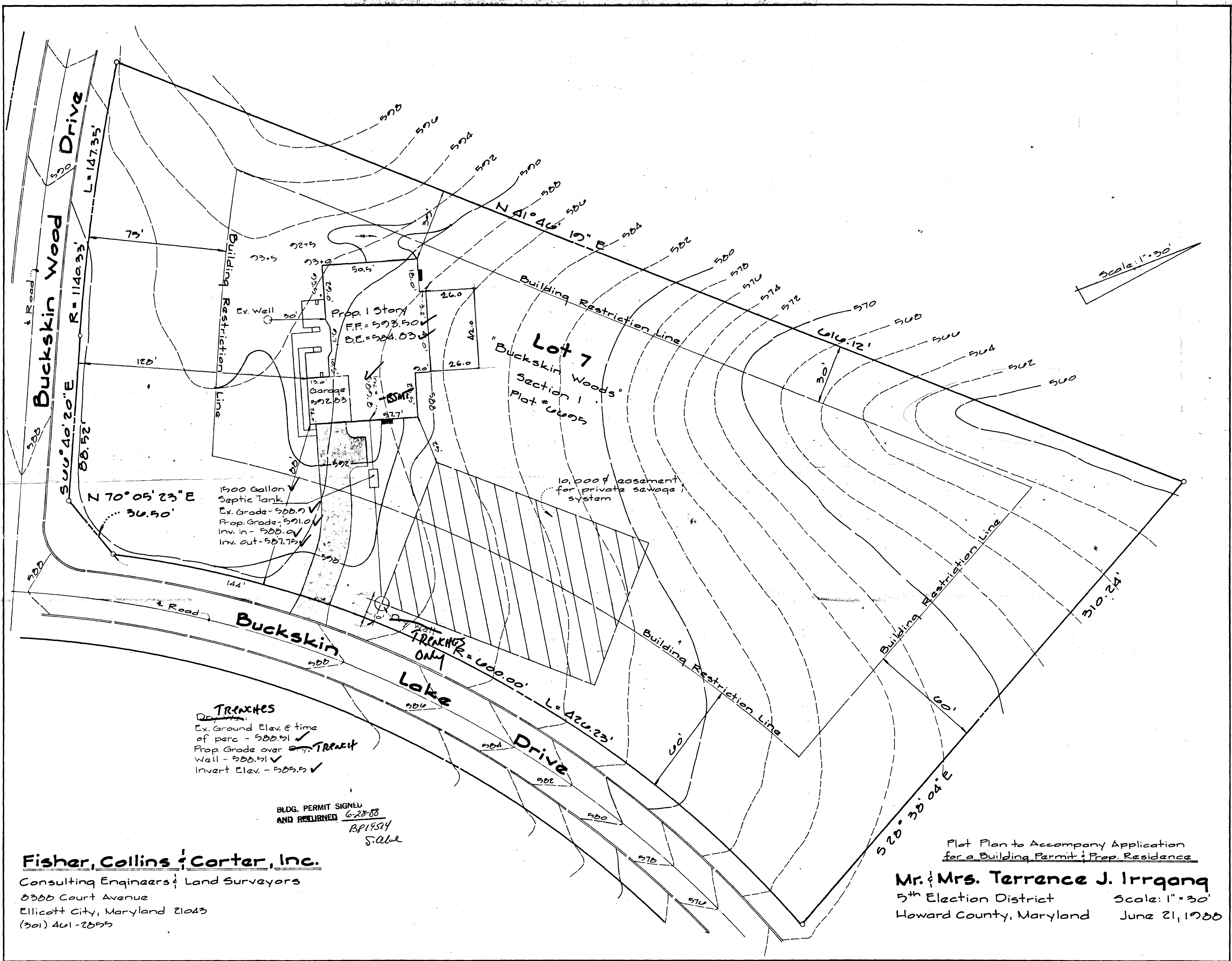
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

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

Signature of Applicant: \_\_\_\_\_

Date: 12/1/88

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



Scale: 1" = 30'

Prop. 1 Story  
 F.F. = 503.50  
 B.E. = 504.03

1500 Gallon  
 Septic Tank  
 Ex. Grade - 508.0  
 Prop. Grade - 501.0  
 Inv. In - 500.0  
 Inv. Out - 507.75

10,000 g. easement  
 for private sewage  
 system

**TRENCHES**  
 Ex. Ground Elev. & time  
 of perc - 500.51 ✓  
 Prop. Grade over  
 Wall - 500.51 ✓  
 Invert Elev. - 505.5 ✓

BLDG. PERMIT SIGNED  
 AND RETURNED 6-28-88  
 BP19514  
 S. Albe

**Fisher, Collins & Carter, Inc.**  
 Consulting Engineers & Land Surveyors  
 8300 Court Avenue  
 Ellicott City, Maryland 21043  
 (301) 461-2855

Plot Plan to Accompany Application  
 for a Building Permit - Prop. Residence  
**Mr. & Mrs. Terrence J. Irrgang**  
 5<sup>th</sup> Election District  
 Howard County, Maryland  
 June 21, 1988

