

11/28/83
~~11/25/83~~
9:50
11/30/83
G.M. Plummer

Approved 11/30/83

Stayed

P 33322
A Repair

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

03-29976

ELLICOTT CITY

DISTRICT 3rd

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDEX

DATE Nov. 22, 1983

Jack Fyock, Jr.

IS PERMITTED TO INSTALL _____ ALTER

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

SUBDIVISION Burntwoods ROAD 14009 Celbridge Dr. LOT 10, Blk. D, Sec. #3

PROPERTY OWNER Robert Youshaw

ADDRESS 14009 Celbridge Dr., Glenwood, MD

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

GARBAGE GRINDER? YES _____ NO _____

SEPTIC TANK CAPACITY _____ GALLONS NUMBER OF BEDROOMS _____

REPAIR - CALL FOR INSPECTION WHEN GROUND IS OPENED UP SO SANITARIAN CAN RECOMMEND REPAIR.

Water at 14 ft. Trench 55 ft long 11 ft deep - anlets at 4 1/2 ft - 6 1/2 ft of stone in trench. 11/28/83 JF

PLANS APPROVED BY Frank Skinner DATE November 22, 1983

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.

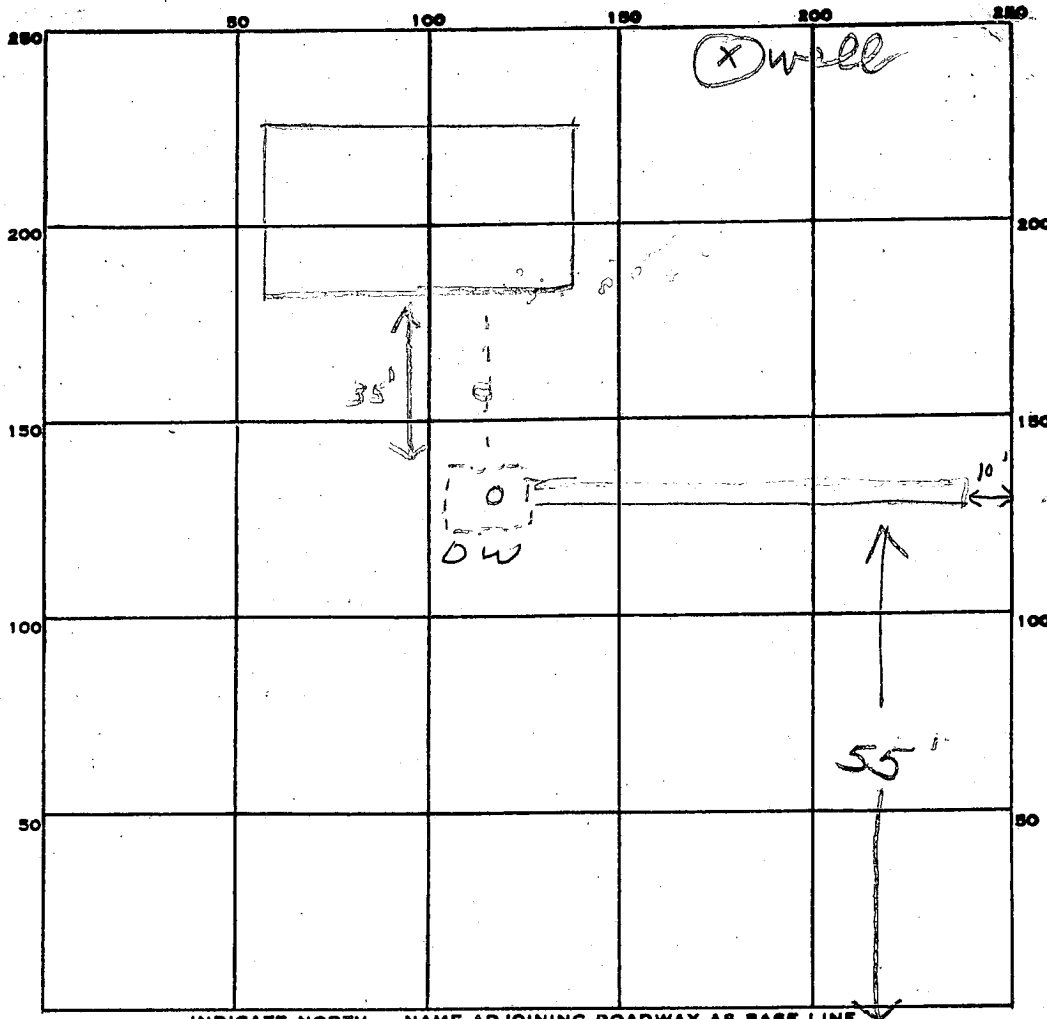
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

P 33322



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Bellbridge Dr

PERMIT CARD _____

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 11 FT. TRENCH WIDTH 2 FT.

57
399

GRAVEL DEPTH 7 IN. TOTAL LENGTH 5.7 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 399

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

ABSORBENT AREA 399 SQ. FT.

REMARKS 11/28/83 OK to add stone in trenches
11/30/83 OK to cover all work

DATE SYSTEM APPROVED 11/30/83

INSPECTOR Stayer

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 3

DATE 12/3/68

app. 3-11-69
14160

A 09025

3/11/69

Robert Dubin IS PERMITTED TO INSTALL X ALTER

ADDRESS Rt. 1, Brookeville, Md. PHONE 774-9615

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Burnt Wood ROAD Celbridge Drive LOT 10, Blk. D,
Sec. 3, Pt. 1

PROPERTY OWNER Burnt Woods Development Co., Inc.

ADDRESS _____

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER Dry well - 100 sq. ft. sidewall area below inlet pipe per bedroom.

Inlet pipe no deeper than 4 ft. below grade. Max. depth 12' below original grade.

Place dry well about 25 ft. from front lot line and about ⁵⁵ 25 ft. from left side

line as seen when facing from Street "C" Celbridge Drive.

PERMIT VOID AFTER THREE YEARS.

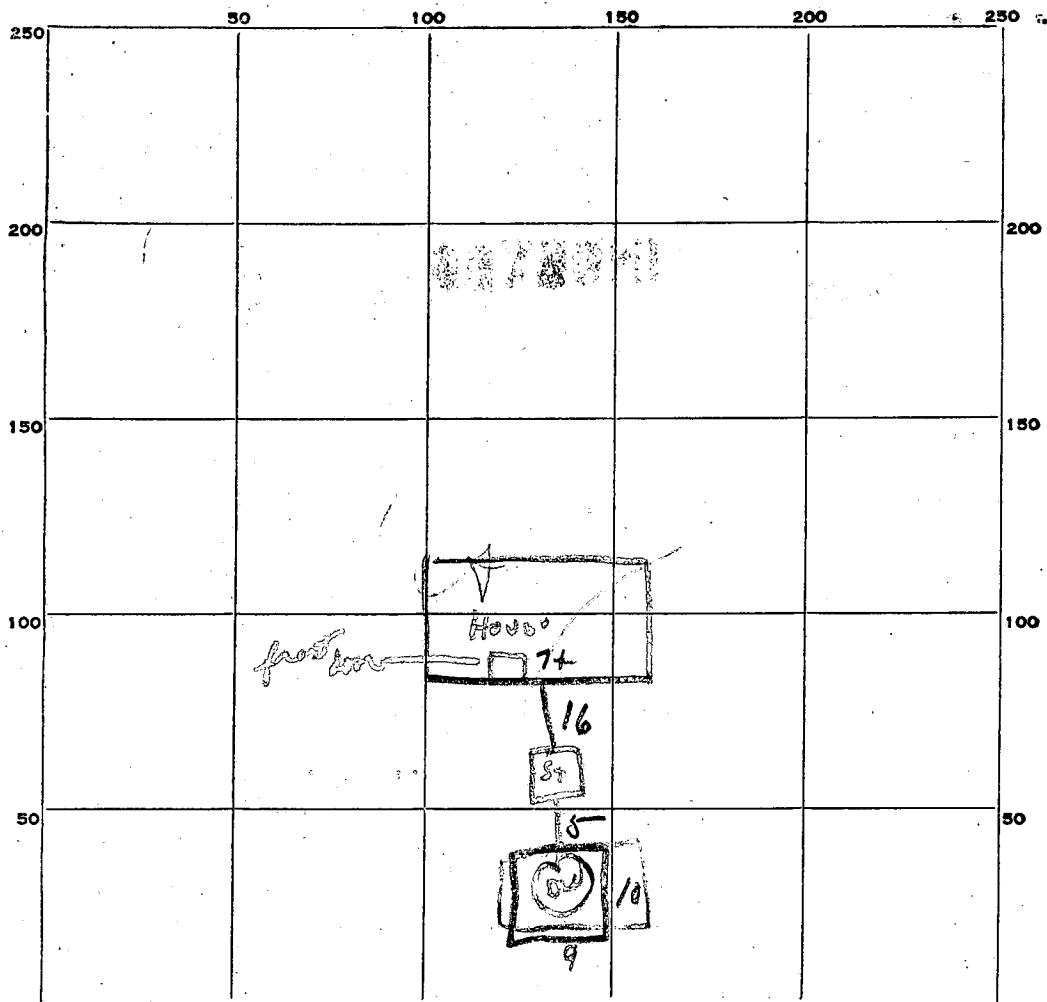
PLANS APPROVED BY D. W. Monaghan DATE 9/24/64

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

NOTIFY THE HEALTH DEPARTMENT 48 HOURS BEFORE EXCAVATIONS ARE TO BE BACK FILLED.

09025



10
300
3 4
304

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Albright Street

PERMIT CARD 612

SEPTIC TANK, LEVEL 02

CLEANOUTS OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

SEEPAGE PITS, ^{Perimeter} ~~INSIDE~~ DIAMETER 38 ft FT. DEPTH BELOW INLET 8 FT.

ABSORBENT AREA 304 SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 3/11/69

INSPECTOR Dr. Monaghan

APPLICATION

A 09025

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

Septic Tank - 3 bedroom - 750 gal.
4 " - 1000 gal.
5 " - 1500 gal.

DISTRICT 3

DATE 9/9/64

Dry Well - 100 sq. ft. sidewalk area below inlet pipe per bedroom. Inlet pipe no deeper than 4 ft below grade. Max. depth 14' below original grade. Wasm # 18/68.

Place Dry Well about 25 ft from front lot line and about 25 ft from left sideline as seen when facing from Street.

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Burnt Woods Development Co., Inc.

ADDRESS 212 Crownwood Road, E.C., Md. PHONE HO 5-1345

PROPERTY LOCATION:

SUBDIVISION Burnt Wood LOT NO. 10, Blk. D, Sec. 2 ^{300'}

ROAD AND DESCRIPTION Const. ^{475'} Street & Celbridge Drive

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 130' x 300' x 90' TYPE BLDG. test per bedroom
NUMBER OF BEDROOMS (3)

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ M. A. Wakefield, Jr.

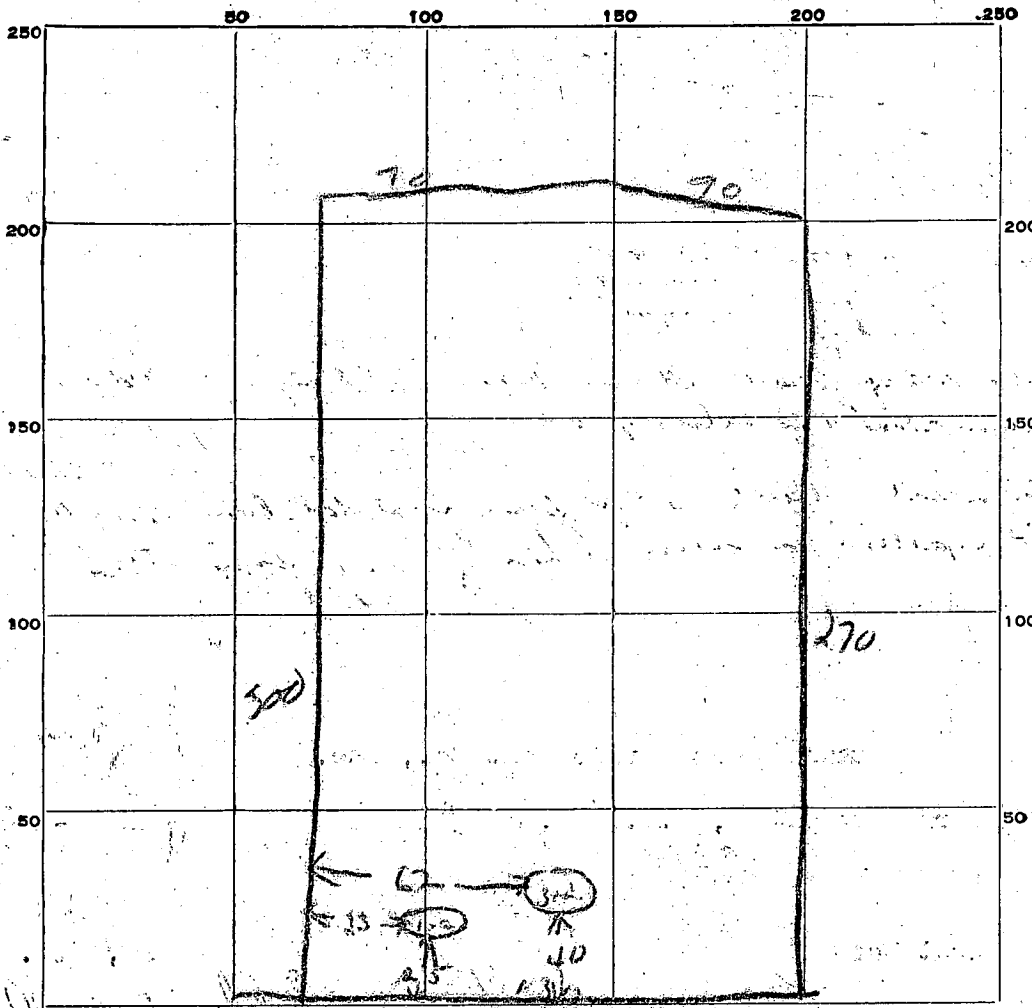
APPROVED BY [Signature] FOR Dry Well DATE 9/24/64
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH, - NAME ADJOINING ROADWAY AS BASE LINE.

C Sheet

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
9/11/64	1	11-00	1104	1106	1106	1112	6 min
	2	6-00	1104	1107	1107	1113	6 min
	3	11-00	1112	1114	1114	1117	3 min
	4	6-00	1111	1114	1114	1120	6 min

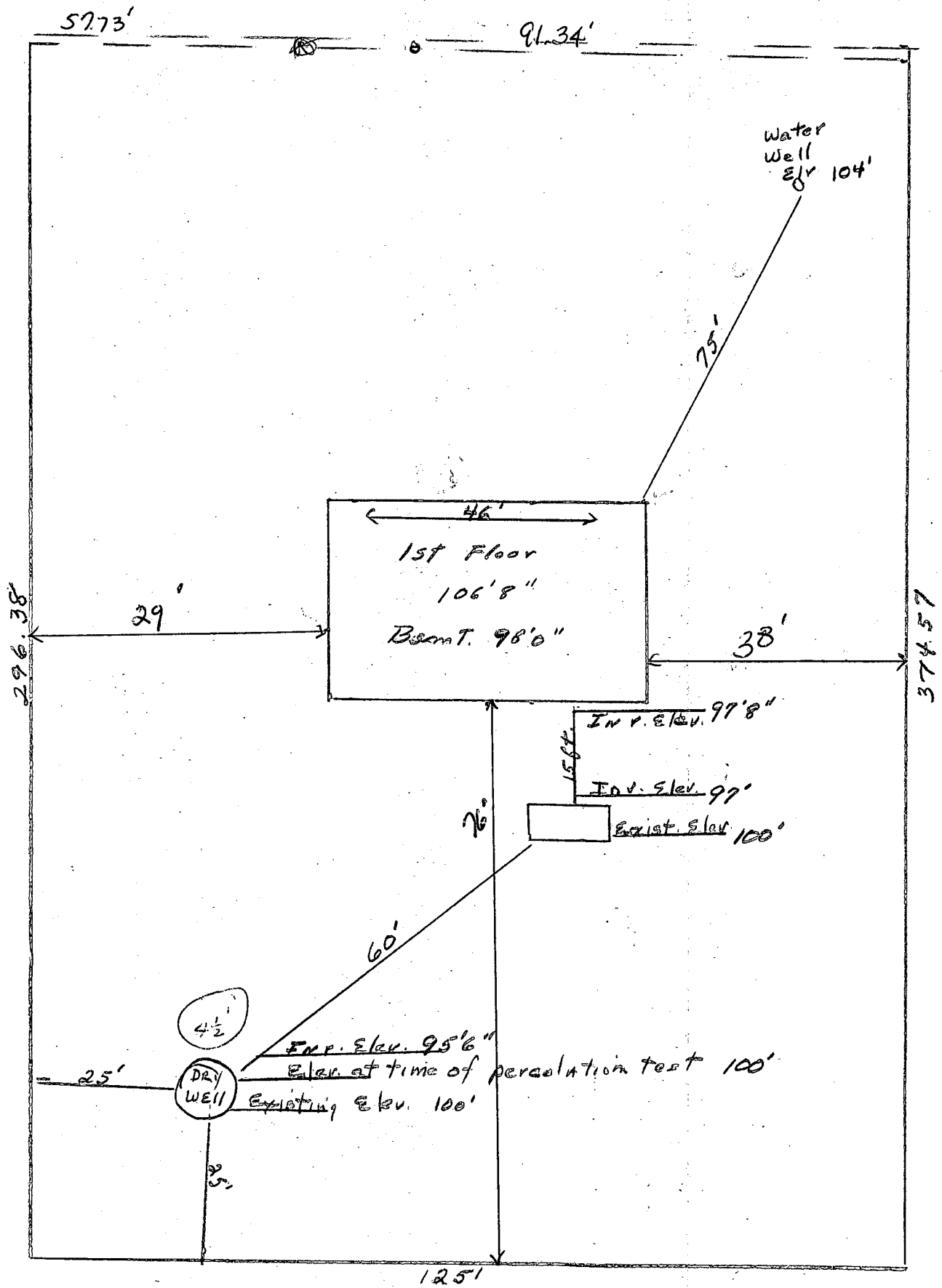
SOIL AUGER FINDING _____

TESTED BY Dum 9/11/64

REMARKS _____

ALSO PRESENT L Booth LOT NO. 10 D sec 3 part 1

Lot TO Block D
Burnt woods



A. L. STROMBERG CO.
REAL ESTATE *INSURANCE*

ARBUTUS OFFICE:

5308 EAST DRIVE

BALTIMORE, MARYLAND 21227

PHONE: 242-7100

HOWARD COUNTY OFFICE:

773. BALTIMORE NATIONAL PIKE

ELLCOTT CITY, MARYLAND 21043

PHONE: 465-5500

GLEN BURNIE OFFICE:

310 CRAIN HIGHWAY S. W.

GLEN BURNIE, MARYLAND 21061

PHONE: 766-7100

REPLY TO: _____

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

A 09025

APPLICATION FOR PERMIT TO DRILL WELL

No. 2742

Owner John R. Devereux

Street or R.F.D. Sharp Road

Post Office Glenwood Maryland 21738

Quantity of Water to be Produced 5 Gallons Per Minute

Total Quantity Needed For Use 300 Gallons Per Day

Use for Water Home

Approximate Depth of Well (feet) 130

Method of Drilling to be used Rotary

Is this a Replacement Well? Yes - No

If YES, indicate date abandoned well is to be sealed: _____ and by whom: _____

Driller Howard Dillon License Number 157

Street or R.F.D. _____
Post Office 6511 Mt Vernon Ave # 15

Date Jan. 31, 1969

Location of Well County Howard

Subdivision Burntwoods

Section D Lot 10

Nearest Town Glenwood

Distance from Town 3 mi.

Direction from Town North

Description of Location of Well
(This information MUST BE ACCURATE, and should be definite enough to permit locating well on a county map).

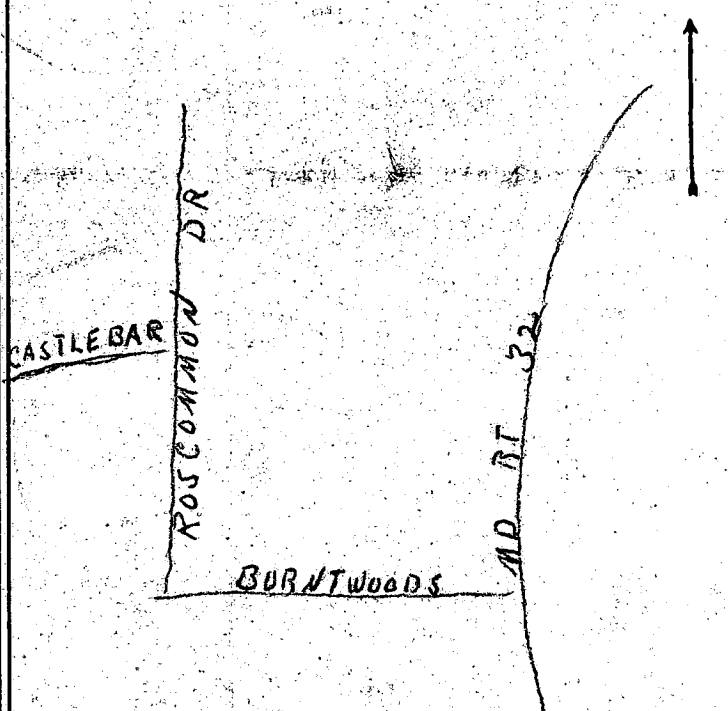
Near what road Castlebar Dr.

On which side of road South
(North, East, South, West)

Distance from road 75 ft.

Draw a sketch below showing location of well in relation to nearby towns, roads and streams with north in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch. Distances may be approximate, but must be indicated.

NORTH



PERMIT TO DRILL WELL
(Not To Be Filled In By Driller)

Well Permit No. H0690124

Samples of Cuttings Required by Department: Yes No
Owner Requires Permit to Appropriate Water: Yes No
Owner Has Permit to Appropriate Water: Yes No

Appropriation Permit No. _____

The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.

Basil W. McKee Director 020469 Date

THIS PERMIT IS NOT TRANSFERABLE
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT
Special conditions that must be observed:

Health Department Approval of Application

Howard County Department of Health

or State Department of Health

Approved by Robert F. Wine

Title Director, Environmental Health

Date 2/3/69

THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL

WELL COMPLETION REPORT

WELL DESCRIPTION

WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

	FEET		DIAM. (inches)	FEET	
	from	to		from	to
Mica Soil Surface	to	50 ft.	55 ft.		
Mica Rock	50 to	110	6 inch steel casing		

Permit Number H0690124
Owner John R. Devereux
Address Sharp Road
Subdivision Burntwoods
Section D Lot 10

PUMPING TEST
Hours Pumped 2
Type of Pump Used Air
Pumping Rate 30
Gallons per Minute 30

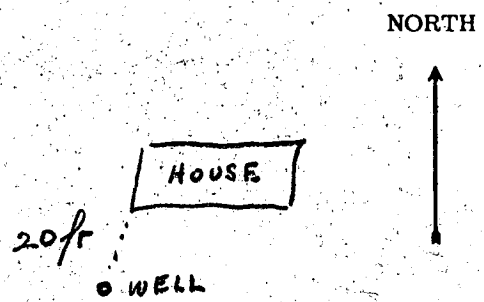
WATER LEVEL
(Distance from land surface to water)
Before Pumping 20 Ft.
When Pumping out Ft.

APPEARANCE OF WATER
Clear X Cloudy _____
Taste _____
Odor _____

Height of Casing Above Land
Surface 1 Ft.

PUMP INSTALLED
Type _____
Capacity _____
Gallons per Minute _____
Gallons per Hour _____
Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT
Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE
WELL WAS
COMPLETED

Mar 5-69

I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

W. Dillon, Well Driller
Well Driller License No.: 157