Approved 11/30/83
Stager

11/30/83
A. M. please

P 33348

A Repair

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

INDL..

ELLICOTT CITY
DISTRICT 3rd

DATE 11/30/83

Jack Fyock IS PERMITTED TO INSTALL X ALTER _____

ADDRESS 13775 Triadelphia Road, Glenelg, Md. 21737 PHONE 988-9270

SUBDIVISION Burntwoods ROAD 14114 Burntwoods Road LOT 4
2nd house past Sharp Road on right

PROPERTY OWNER Stanley Charles

ADDRESS 14114 Burntwoods Road, Glenwood, Md. 21738 Phone: 489-4266

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 an appointment when ground is opened ~~xxx~~ up and Sanitarian will recommend the repair system.

PLANS APPROVED BY Frank A. Skinner DATE 11/30/83

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.

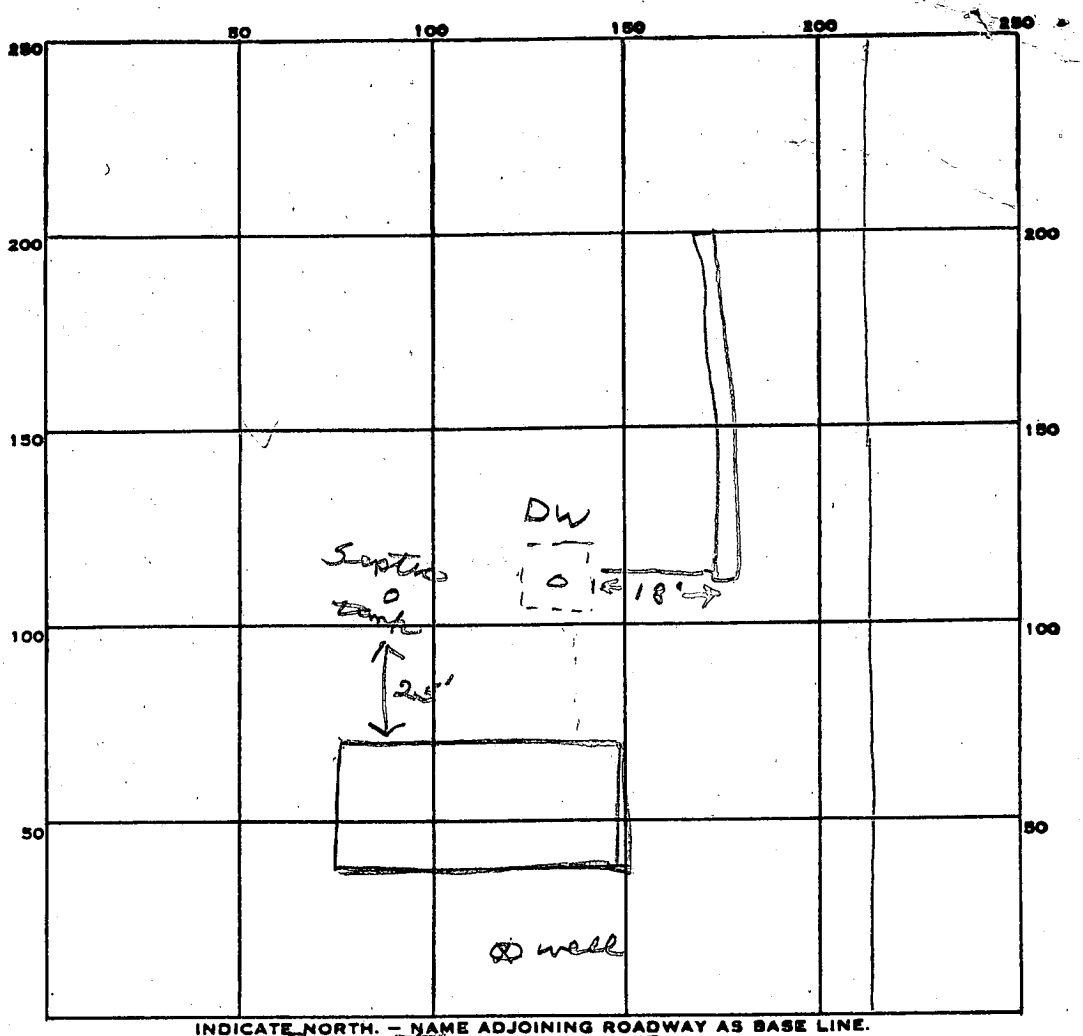
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

P 33348

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

***CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.**

EH - 2-1082



INDICATE NORTH. – NAME ADJOINING ROADWAY AS BASE LINE.

Burnwood Rd.

PERMIT CARD ✓

SEPTIC TANK, LEVEL _____ CLEANOUTS DW (Replaced)

DISTRIBUTION BOX, LEVEL _____

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

GRAVEL DEPTH 7 IN. TOTAL LENGTH 70 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 490

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

ABSORBENT AREA 490 SQ. FT.

REMARKS 11/30/83 OK to add stone in trench JS

11/30/83 OK to cover all work. JS

DATE SYSTEM APPROVED 11/30/83 INSPECTOR Stayer

5/11/65 ready

Approved 5/11/65 H.F.

PERMIT

P 10095

A 08274

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

INDEXED

DATE 4/27/65

Andrew McGraw, Jr. IS PERMITTED TO INSTALL X ALTER

ADDRESS Box 57 - Rt. 5 - Baltimore 7, Md. PHONE 944-5334

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Burnt Wood ROAD Burnt Woods Rd. LOT 4, Blk. A, Sec. 1

PROPERTY OWNER Burnt Woods Development Co., Inc.

ADDRESS 212 Crownswood Rd., E. C.

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 - 112 sq. ft. sidewall area below inlet piper per bedroom.
Inlet pipe must be 4½ ft. below grade.
Place dry well about 141 ft. from front lot line and about 24 ft. from right side as seen when facing lot from Burnt Wood Rd.

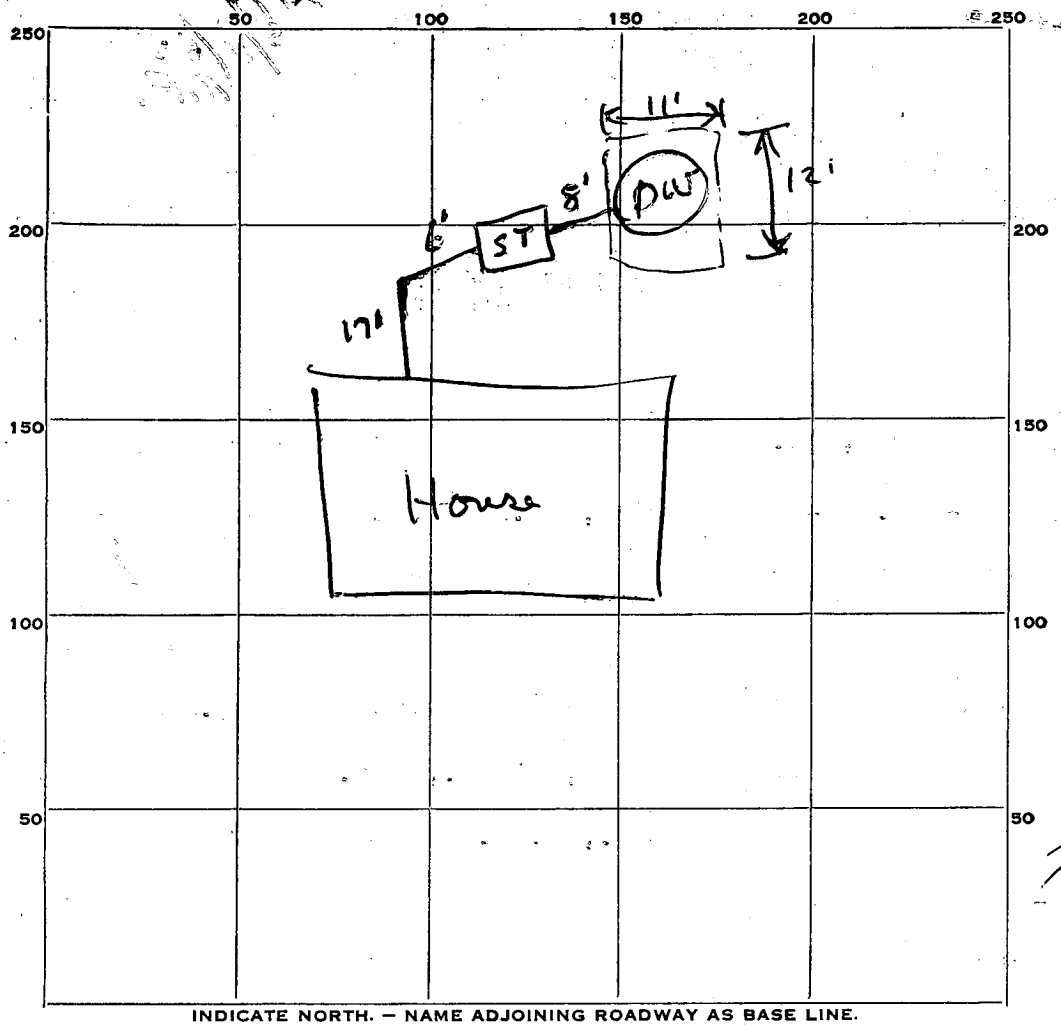
PLANS APPROVED BY D. W. Monaghan DATE 4/16/64

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.

A 08274

owner: James O. Jones
489-4087



11
11
12
12
46
8
368

INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD OK

SEPTIC TANK, LEVEL OK 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, INSIDE DIAMETER 8 FT. DEPTH BELOW INLET 8 FT. (9 ft. below inlet / Inlet only 3½ ft. below grade)

ABSORBENT AREA 200 SQ. FT.

REMARKS 5/11/65 — Perimeter 12 x 12 x 11 x 11 = 46 x 8 = 368 sq. ft.

DATE SYSTEM APPROVED 5/11/65 INSPECTOR R. F. Fletcher

APPLICATION

A 08274

P

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 4/10/64

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

Dry Well - 112 sq ft sidewall and below inlet pipe per bedroom. Inlet pipe must be 4 1/2 ft below grade. Place dry well about 141 ft from front lot line and about 24 ft from right side as seen when facing lot from Burntwood Rd.

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 Crownswood Rd., E. C., Md. PHONE HO 5-1345

PROPERTY LOCATION:

SUBDIVISION Burnt Wood LOT NO. 4, Blk. A - Sec. 1

ROAD AND DESCRIPTION Burnt Woods Road

OCCUPANT PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS PHONE

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. test per bedroom
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT W. A. Wakefield Jr

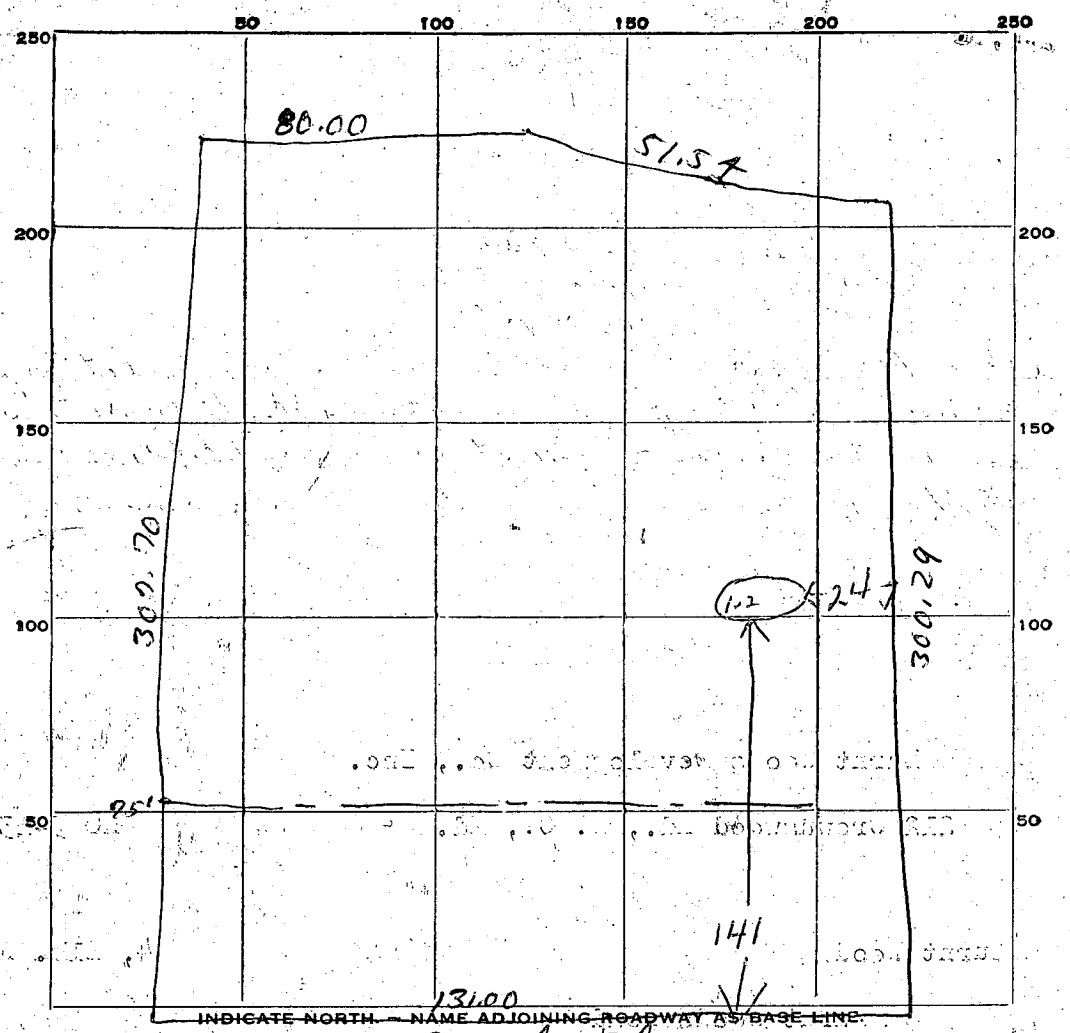
APPROVED BY Lee Mongan FOR Dry Well (KIND OF SYSTEM) DATE 4/16/64

REJECTED BY FOR (KIND OF SYSTEM) DATE

HOLD PENDING FURTHER TESTS DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET START	PRE-WET STOP	TEST - 1" DROP START	TEST - 1" DROP STOP	TIME
4/16/64	1	9	1143	1144	1144	1154	10 min
	2	5	1143	1146	1146	1156	10 min

SOIL AUGER FINDING

TESTED BY Dunn-RDF 4/16/64

REMARKS

ALSO PRESENT [illegible] LOT NO. 4 Blk A Sec 1

R-W-3
2-65

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
State Office Building
ANNAPOLIS, MARYLAND 21401

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

No. 253

APPLICATION FOR PERMIT TO DRILL WELL

Owner James D Jones
Street or R. F. D.
Post Office Thomas Run Md.

Driller Denny Mason License Number 56
Street or R. F. D.
Post Office Mt. Rainier Md.
Date May 1 1965

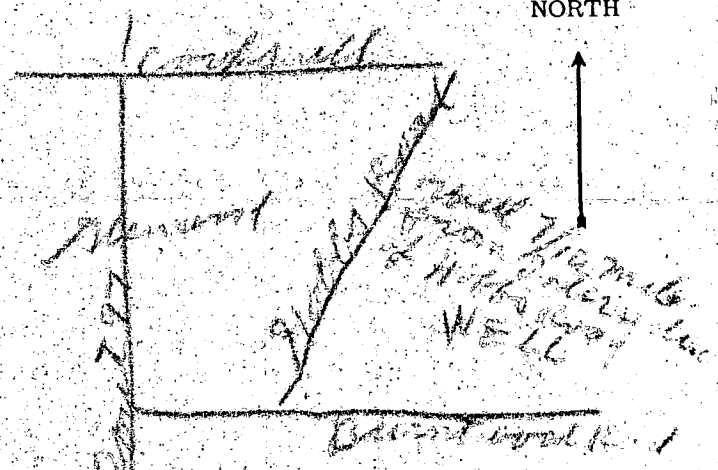
Quantity of Water to be Produced 3 G.P.M.
Total Quantity Needed For Use 1000 G.P.D.
Use for Water House
Approximate Depth of Well (feet) 100 ft.
Method of Drilling to be used Cable

Is this a Replacement Well? Yes – No
If YES, indicate date abandoned well is to be sealed:
and by whom:

Location of Well
Subdivision Belmont Manor
Section Lot 4
County Prince George's
Nearest Town Forest Manor
Distance from Town 2 miles
Direction from Town East

Description of Location of Well
(This information should be definite enough to permit locating well on a county map).
Near what road Belmont Manor
On which side of road North
(North, East, South, West)
Distance from road 100 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.



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

Well Permit No. PG-66-W-421

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.

Paul W. McKee 5-11-65
Director Date

THIS PERMIT IS NOT TRANSFERRABLE
WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT

Special conditions that must be observed:

Health Department Approval of Application
Prince George's County Department of Health
or ☐ State Department of Health
Approved by
Title
Date

COUNTY HEALTH

HOWARD COUNTY
MARYLAND STATE DEPARTMENT OF HEALTH
8 Church Road
ELLICOTT CITY, MARYLAND

WELL COMPLETION REPORT

This report must be submitted within 10 days after completion of the well

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This is to certify that the well which has been completed on the below property has been constructed and disinfected in compliance with the regulations and specifications of the State Board of Health.

The following construction and performance characteristics were noted:

1. Type, diameter and length of casing 6in o.D. 70ft.
2. Total depth of well 115ft.
3. Type, diameter and length of strainer _____ Size of screen openings _____
4. Method of sealing top and bottom of screen _____
5. Method of grouting Cement. Quantity, cement used 2 Bags lbs. Gals. water 10
6. Standing water level (depth below ground surface when not pumping) 40
7. Yield of well in gallons per minute 7; elevation of water surface when pumped at the designated rate 75ft.
8. Number of hours pump operated at stipulated rate during pumping test 1
9. Record of any other pumping performance None
10. Log of materials encountered during drilling Rock from 70ft.
11. Physical appearance of water at end of final pumping test Partly Clear
12. Variation in vertical alignment (how much the well casing varies from a truly plumb line) throughout its depth None
13. Disinfected by 10 ounces of _____% Chlorine (Brand name Clorox)

Property Owner James D. Jones Address Ellicott, Md.
Location of property Brentwood Sub.

Health Department Number _____ Dept. of Water Resources Permit No. HO.65W421

Date: May 7, 1965. Danny Brown
Signature of Well Driller

INSTRUCTIONS: This form is to be completed in triplicate and certified by the well driller upon completion of each drilled well. One copy will be forwarded to the Department of Water Resources. One copy will be forwarded to the property owner by the Health Department along with the final approval of the well.