

WP1
OK

7-19-83
approved
S. Hall

PERMIT

P 33716

A 32984

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

03-309371
INDEXED

ELLICOTT CITY
DISTRICT 5th

DATE 9/25/83

Pat Lendrim IS PERMITTED TO INSTALL ALTER

ADDRESS 14010 Forsythe Road, Sykesville, Maryland 21784 PHONE 442-2416

SUBDIVISION Donald Berilla ROAD 12556 ~~12562 Folly Quarter~~ LOT 2

PROPERTY OWNER Linda A. Biddison

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 158 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4½ feet below original grade. Effective area begins at 3 feet below original grade. 1½ feet of stone below distribution pipe. LOCATION: Start first trench 125 feet from back lot line and 40 feet from left lot line, as seen when facing the property from Folly Quarter Road. Run trench(s) along level ground toward right lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

BLDG. PERMIT SIGNED
AND RETURNED 9/26/83
Serial # B1010221
replace deck + porch

WP1 Pitress 4.5' Below grade
New line 5' Below grade

PLANS APPROVED BY C. Williams DATE 9/21/83

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.

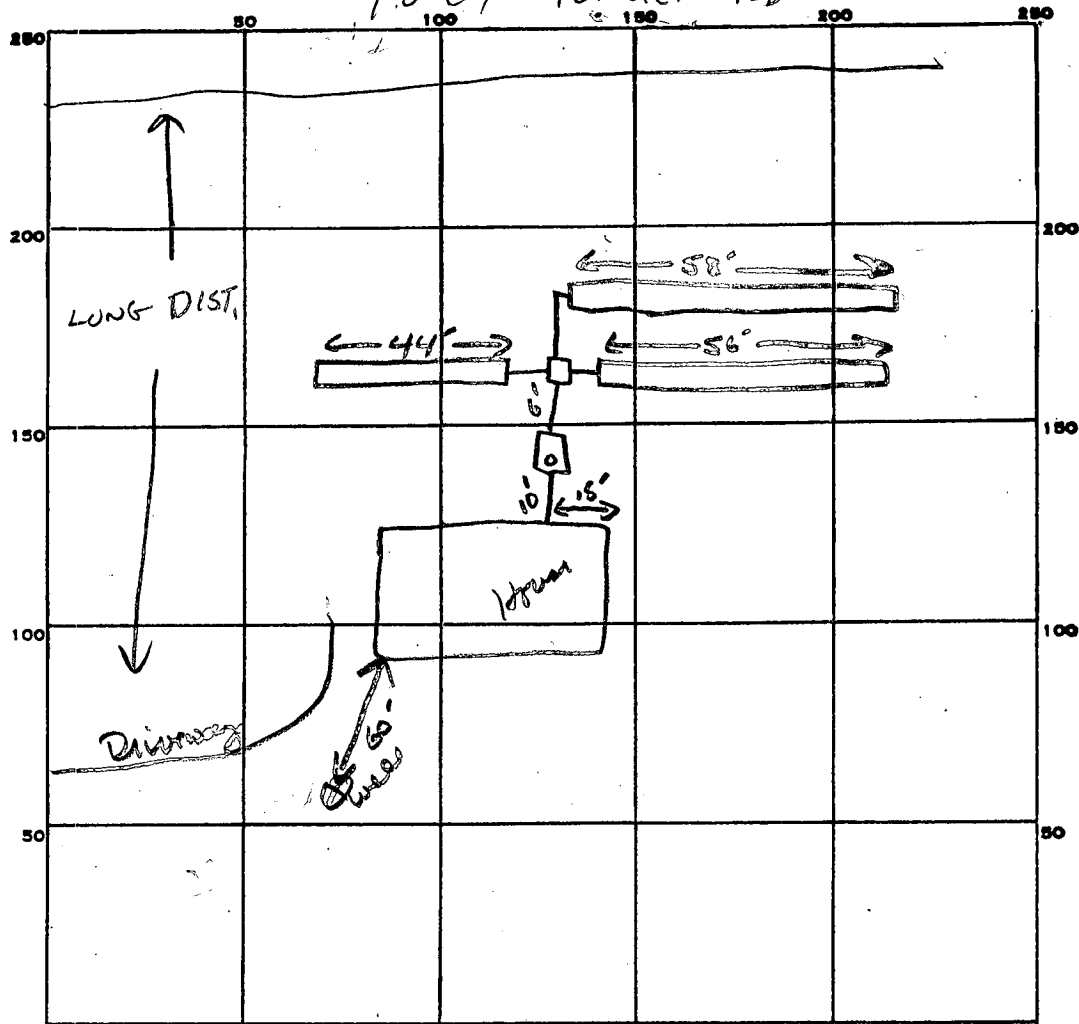
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 32984

FOLLY QUARTER RD



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1000 GAL

CLEANOUTS ✓ 5

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET 3"

GRAVEL DEPTH 18 IN. TOTAL LENGTH 158 FT.

NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA 474

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

ABSORBENT AREA 474 SQ. FT.

REMARKS _____

DATE SYSTEM APPROVED 7-19-85

INSPECTOR SAHL

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 32984

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 5TH

DATE 25 JULY 83

*Paul
7/28/83
9:30 AM
Cancelled*

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 ANNE WHITE LINDA BIDDISON BERILLA
ADDRESS 12562 FOLLY QUARTER ROAD PHONE 953-7100X7113

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. ONE TWO

ROAD AND DESCRIPTION ADJACANT TO JUMPER'S HILL LANE WITH
12556
ACCESS TO FOLLY QUARTER ROAD (ADJOINS 12562 FOLLY QUARTER)

SIZE OF LOT 3 ± ACRES TYPE BLDG. 3 OR 4 BEDROOM HOUSE
(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.

Don Berilla
(SIGNATURE OF APPLICANT)

APPROVED BY C Williams FOR TRENCHES DATE 9-21-83

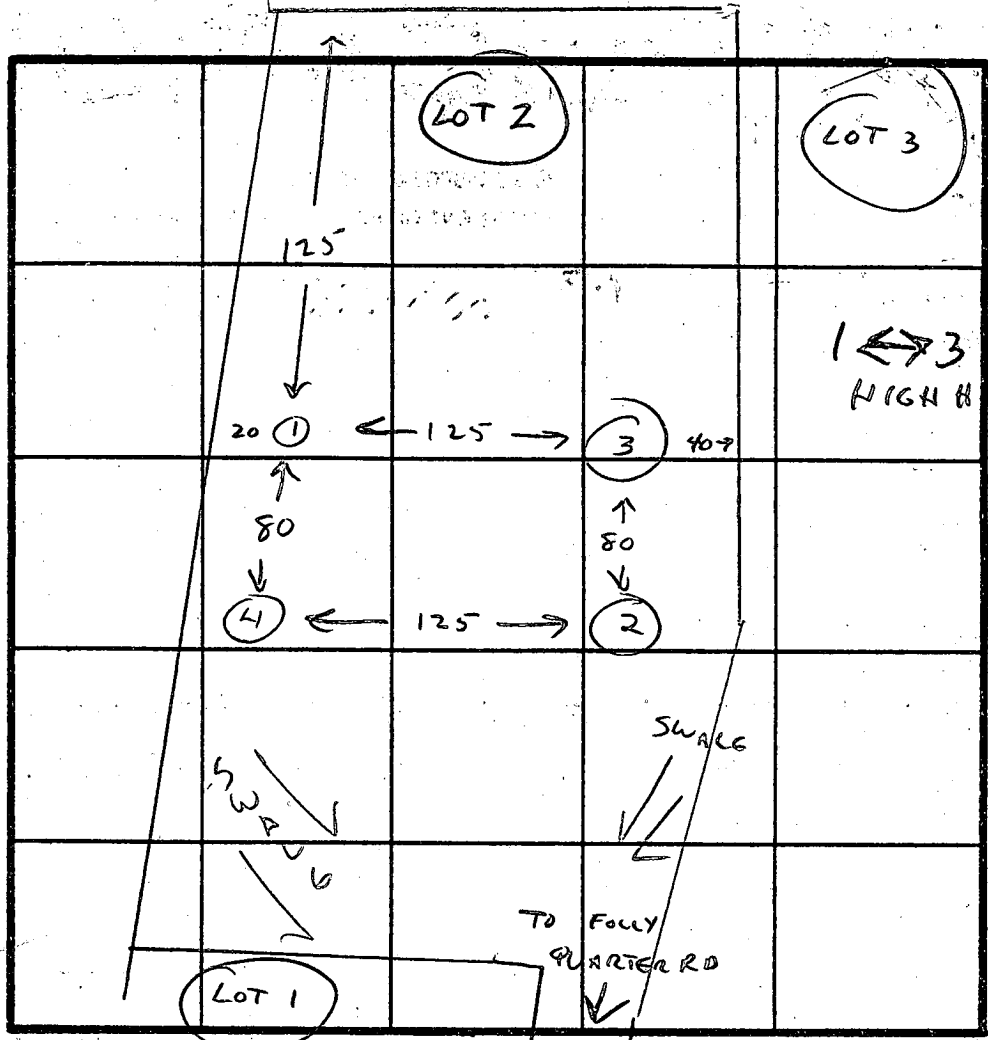
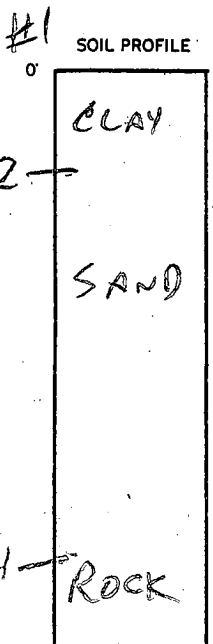
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

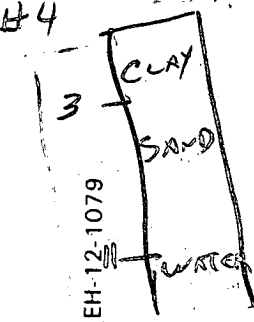
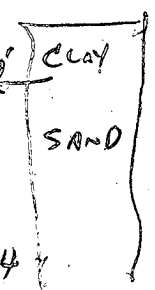
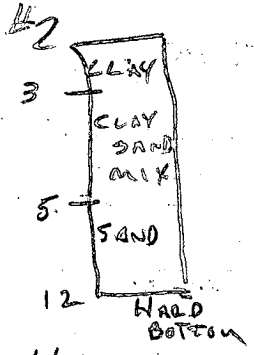
REASONS FOR REJECTION OR HOLDING B.P. # 64127

4-26-85

THIS IS NOT A PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

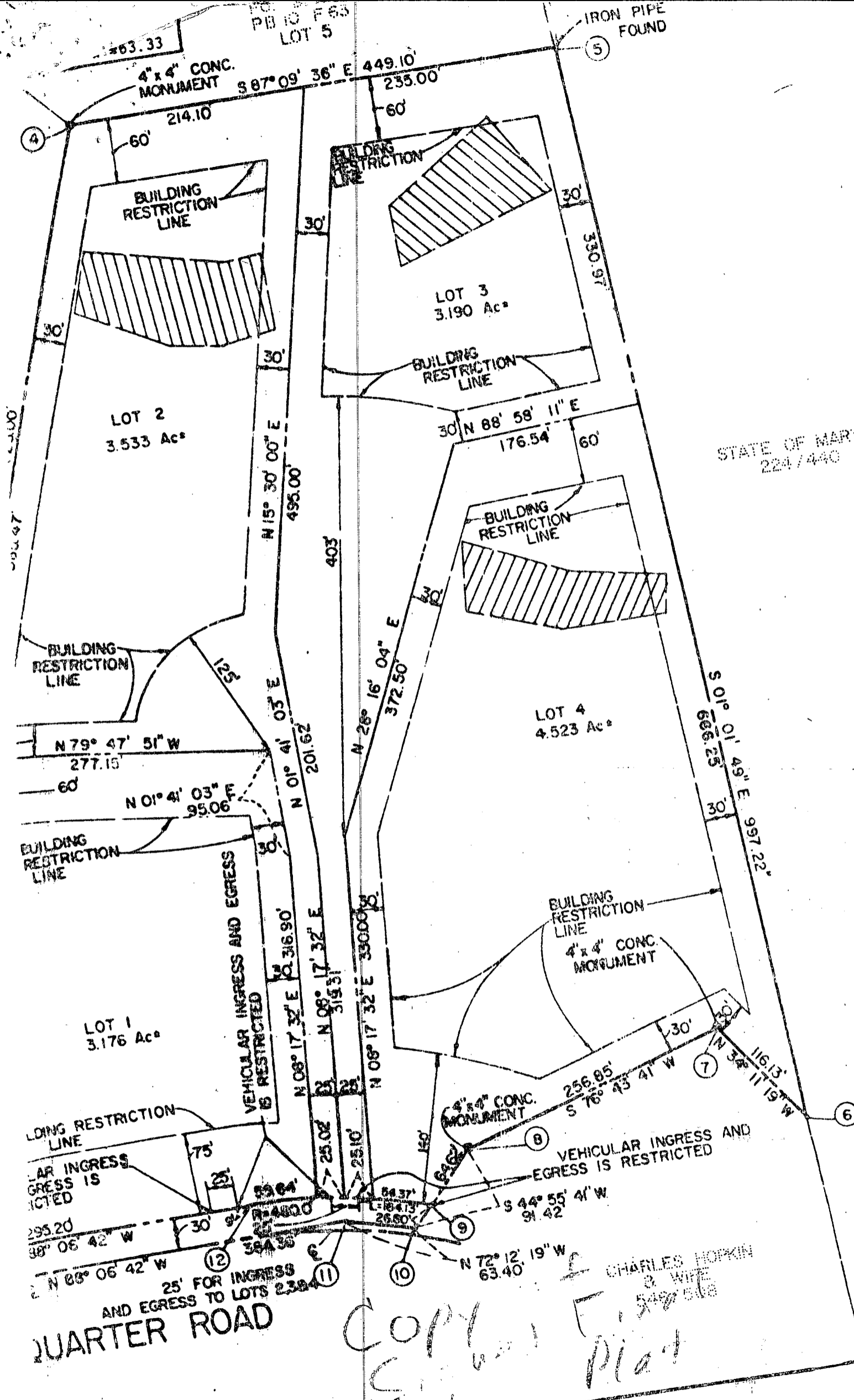


DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
8-22-83	1	3	10:42	10:44	10:44	10:46	2	
		14	ROCK AT 14 -		SAND ABOVE			
8-22-83	2	4	10:50	11:07	11:01	11:18	17min	
		12	NOT DISPLACE - LOAD OCCURST AT 12'					
8-22-83	3	2 1/2'	10:52	10:55	10:55	10:58	3	
		14	10:52	10:54	10:54	10:56	2	
8-22-83	4	3 1/2'	11:00	11:02	11:02	11:04	2	
		11'	WATER					

REMARKS _____

TYPE OF SOIL SAND w/ ROCK BOTTOM

TESTED BY Craig Williams ALSO PRESENT DON BERRILA



STATE OF MARYLAND
224/440

OWNER'S CERTIFICATE

DONALD BERILLA, OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY
 CERTIFIES THAT THE APPROVAL OF THIS FINAL PLAT BY THE OFFICE OF PLANNING
 AND ZONING OF THE BOARD OF MUNICIPAL UTILITIES OF BOWEN COUNTY, MARYLAND, ITS SUCCESSORS
 AND THE APPROVAL OF THE BOARD OF MUNICIPAL UTILITIES OF BOWEN COUNTY, MARYLAND, ITS SUCCESSORS

C1 2909 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 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 32984**

DATE RECEIVED [] DATE WELL COMPLETED **092084** Depth of Well **200** (TO NEAREST FOOT)
 PERMIT NO. FROM "PERMIT TO DRILL WELL" **40-81-0707**

OWNER **Biddison** last name **Folly Quarter Rd.** first name **Linda A** TOWN **Glenely**
 STREET OR RFD SUBDIVISION **Berilla Property** SECTION _____ LOT **2**

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	21	
Sand Stone	21	35	<input checked="" type="checkbox"/>
Micka	35	45	
Sand Stone	45	55	<input checked="" type="checkbox"/>
Micka	55	200	

Nitrate/Nitrogen 3 ppm

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) **Y** **N**
 TYPE OF GROUTING MATERIAL
 CEMENT **CM** BENTONITE CLAY **BC**
 NO. OF BAGS **42** NO. OF POUNDS **500**
 GALLONS OF WATER
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **28** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
ST **CO** **PL** **OT**
 STEEL CONCRETE PLASTIC OTHER
 MAIN CASING TYPE **PL** Nominal diameter top (main) casing (nearest inch) **6** Total depth of main casing (nearest foot) **30**

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

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

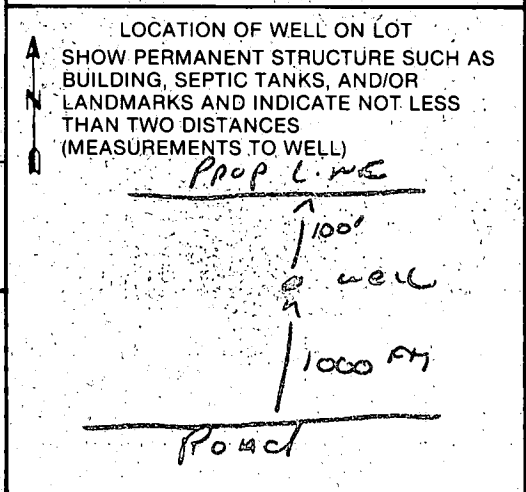
C2
 DEPTH (nearest ft.)
 1 **HO** **28** **200**
 2 _____
 3 _____
 SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)

GRAVEL PACK _____
 IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

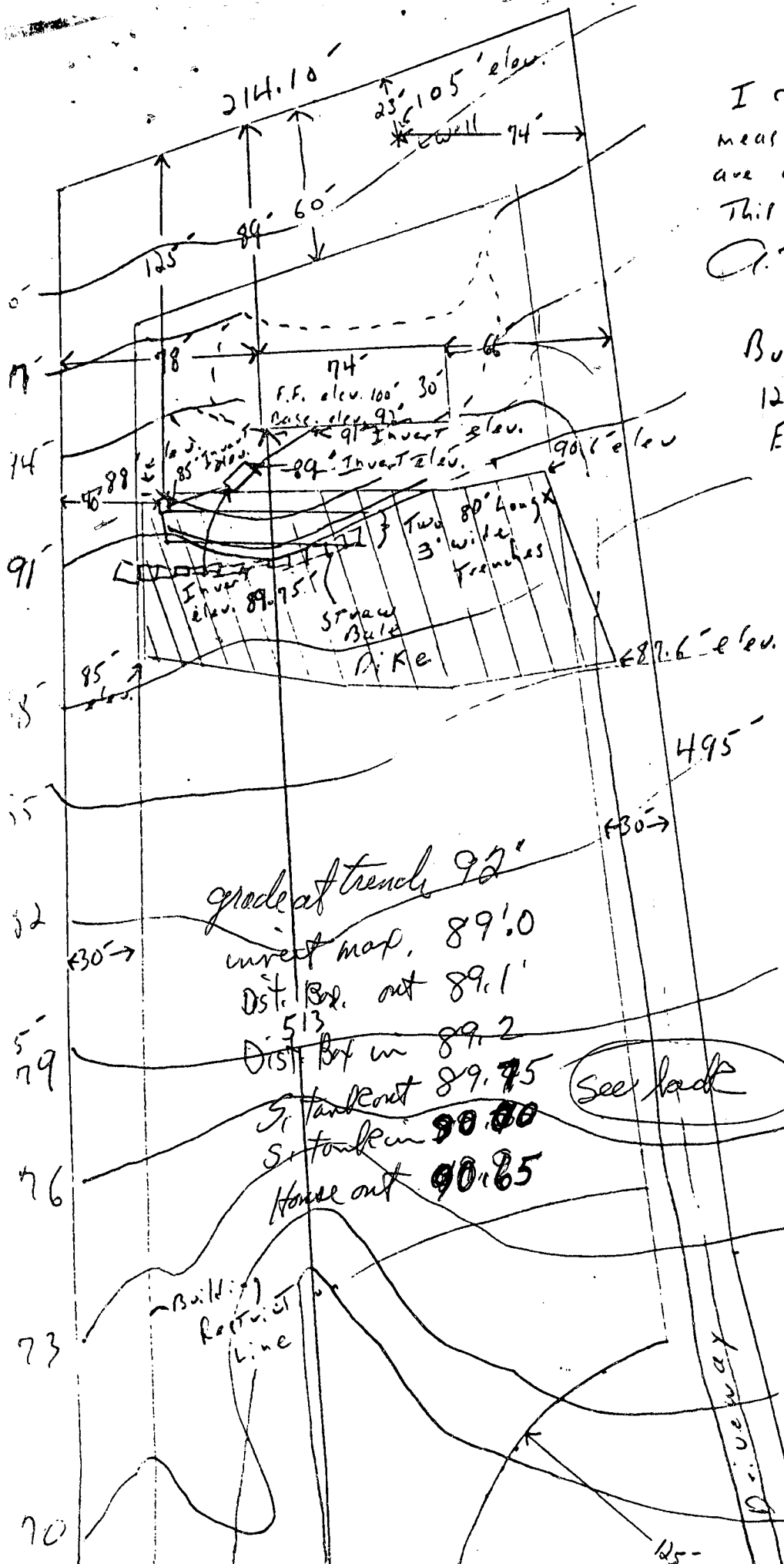
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) _____ WQ _____
 TELESCOPE CASING _____ LOG INDICATOR _____ OTHER DATA _____

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **9**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface) BEFORE PUMPING **28** WHEN PUMPING **80**
 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: 29
 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 below LAND SURFACE **2** (nearest foot)



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. **27**
 DRILLERS SIGNATURE **Ralph Mayne**
 (MUST MATCH SIGNATURE ON APPLICATION)
 SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)



I certify The above
 measurements & elevations
 are actual & correct for
 This property
 C. Thomas Langer.

Building Address:
 12556 Folly Quarter Rd.
 Ellicott City Md.

OWNER:
 Linda Biddison
 10236 Owen Brown Rd.
 Balto, Md. 21044

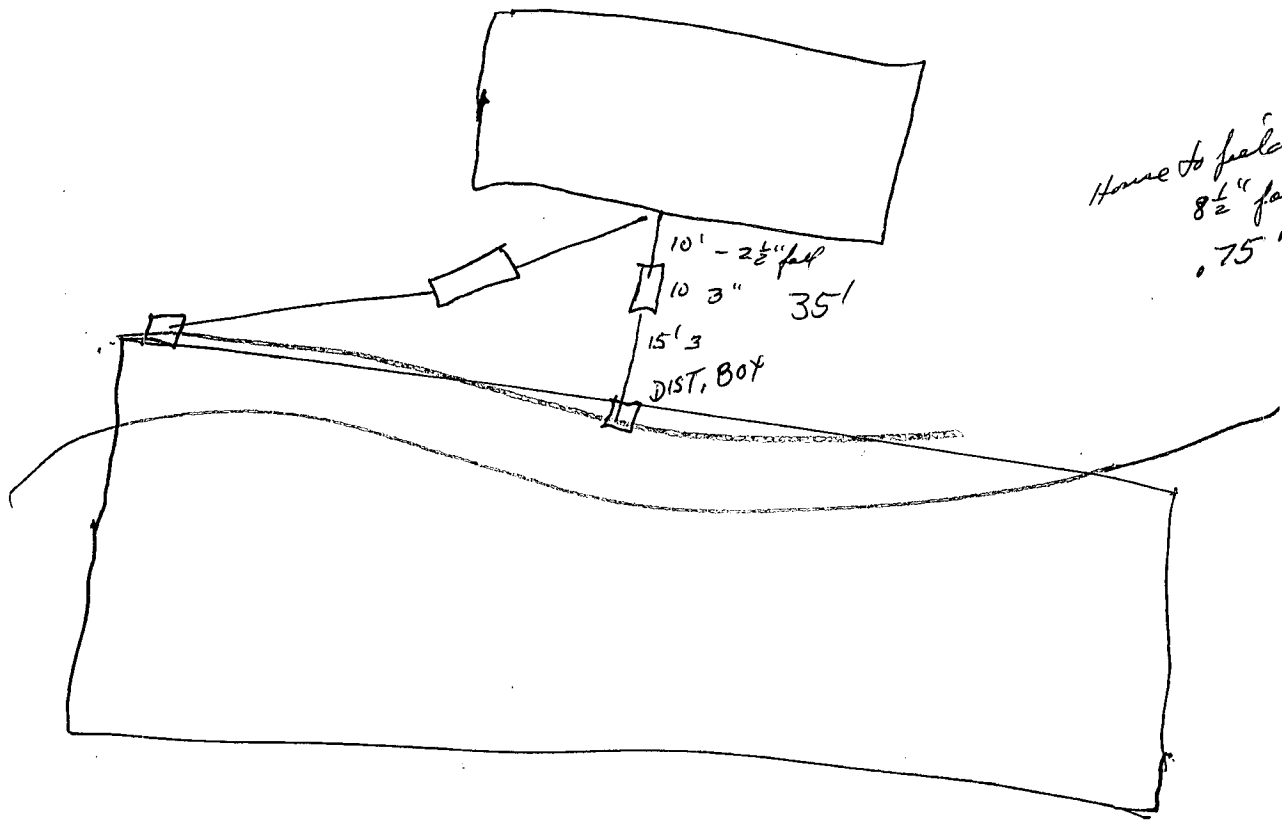
Contractor:
 Plumb Const. Co. Inc.
 2844 Grier Nursery Rd
 Forest Hill, Md. 21050
 539-8777

grade of trench 92'
 invert max. 89.0
 Dist. Box out 89.1
 Dist. Box in 89.2
 S. tank out 89.75
 S. tank in 90.00
 House out 90.85

(See back)

BP # 64127

1" = 60'



House to field
8 1/2" fall
.75'

