

3/28/83 App'd J.S.

3/28/83

3/24/83

Approved for install. 3/28/83 imp. Approved 3/30/83

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 32419
A 22314

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

03-304892

ELLICOTT CITY
DISTRICT 4th.

INDEX

DATE 1/17/82

Paul Schissler IS PERMITTED TO INSTALL ALTER

ADDRESS 7311 Brangles Road, Marriottsville, Maryland PHONE 795-2642

SUBDIVISION Gwenlee Estates ROAD 3179 Sharp Road LOT 2, Sec. 3, Area 2

PROPERTY OWNER Maurice Evans

ADDRESS 8894 Town & Country Boulevard, Apt. C
Ellicott City, Maryland 21043

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 - 175 sq. ft. absorption sidewall area per bedroom. Minimum Total sw. Ft. 525 sq. ft. Trench to be 2 fet. wide. Inlet 4 ft. below original grade. Maximum depth 10 ft. below original grade. 6 Ft. of stone below distribution pipe. NOTE: (1) no trench to exceed 100 ft. in length (2) If more than one trench used, a distribution box is required. (3) Trenches to be installed on level ground. LOCATION: Begin trench 65 feet from the right side line and 125 feet from the rear lot line, and proceed to dig trench on level ground running towards the rear of the lot. Call for inspection of trench before gravel is installed.

PLANS APPROVED BY Revised 1/3/83 Frank Skinner DATE 1/3/83

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESS OR FAILURE OF THIS PERMIT.

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 APROVAL ON THIS PERMIT**

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

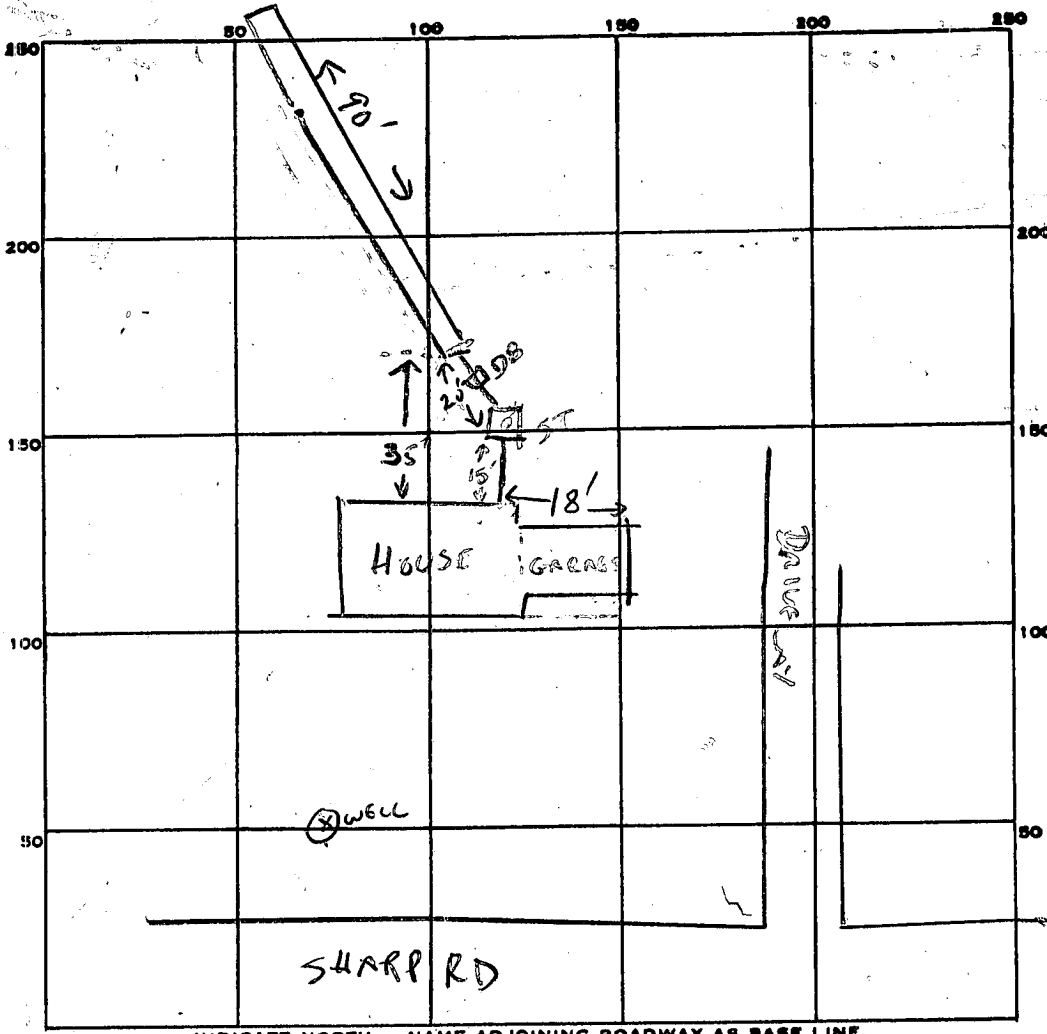
BUILDING PERMITS SIGNED AND RETURNED

10/28/2002 800138704 WOOD DECK

A 800141932419

22314

lot 2



PERMIT CARD ✓ Signed final OK F.S.

SEPTIC TANK, LEVEL ✓

CLEANOUTS S.T. / O.K. /

DISTRIBUTION BOX, LEVEL _____

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

GRAVEL DEPTH 6 FT. TOTAL LENGTH 90 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL TOTAL BOTTOM AREA 540

SEEPAGE PITS, INSIDE DIAMETER — FT. DEPTH BELOW INLET 6 FT.

ABSORBENT AREA ±540 SQ. FT.

REMARKS

TRENCH OK, CONTINUE WORK 3-24-83 CW

ALL OK EXCEPT NEED HOUSE CONNECTION 3-24-83 pm CW

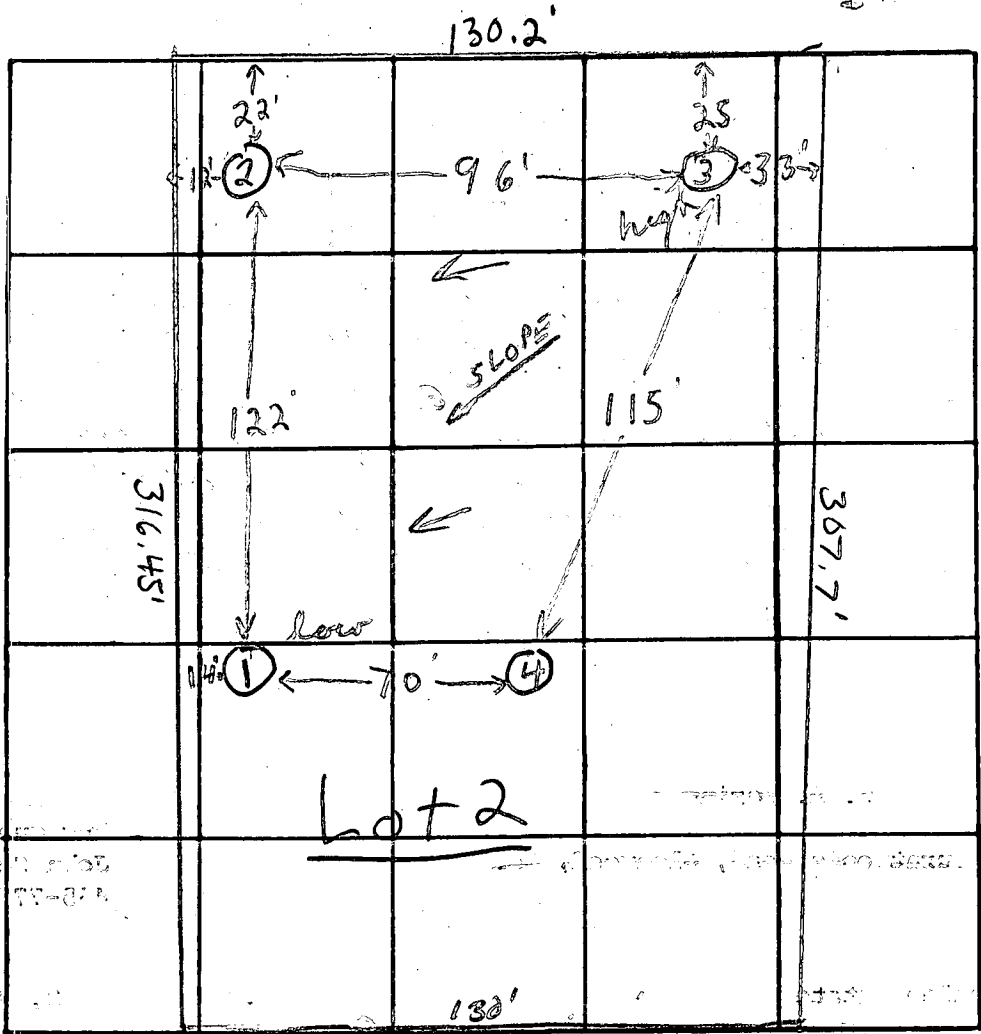
3/28/83 final connecti OK. F.S.

DATE SYSTEM APPROVED 3/28/83

INSPECTOR F. Spinner

A# 22314

copy plan @ lot 1



Overlook Est
3179
Sharp Rd.
lot 2 Sec 3
40,578 sq. ft.

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Proposed Sharp Road

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/24/75	low	6'	11:17	11:33	11:33	11:59	26 min
	1A	12'	11:16	11:19	11:19	11:26	7 min
	2	5'	11:25	11:27	11:27	11:31	4 min
	2A	12 1/2'	11:25	11:32	11:32	11:42	10 min
	3 high	5'	11:37	11:40	11:40	11:48	8 min
	3A	12'	11:37	11:40	11:40	11:46	6 min
	4	12'	Visual	Clay to 5 1/2'	silty loam below		

on line
1/2 yd

artima 10
max depth 5

REMARKS

TYPE OF SOIL silty loam below top 5-6' clay soil

TESTED BY F.S. R.H.

ALSO PRESENT: Rush, Bristle and crow
Lot 2

Date Received (OEP use only) _____ DATE WELL COMPLETED **10/21/82** Depth of Well **160** PERMIT NO. FROM "PERMIT TO DRILL WELL" **HO-73-4292**
 (TO NEAREST FOOT)

OWNER **Evans** **Maurice T.**
 last name first name
 STREET OR RFD **Sharp Road** TOWN **Glenelg**
 SUBDIVISION **Gwennie Estates** SECTION **3 area 2** 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	10	
Sand Stone	10	20	
Micka	20	55	
Sand Stone	55	60	
Micka	60	160	

GROUTING RECORD
 WELL HAS BEEN GROUTED YES NO
 (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL:
 CEMENT BENTONITE CLAY
 NO. OF BAGS **5** NO. OF POUNDS **500**
 GALLONS OF WATER **30**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **20** ft to **21** 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 ST **6** **23**
 Nominal diameter top/main casing (nearest inch) Total depth of main casing (nearest foot)

OTHER CASING (if used)
 diameter inch depth (feet) from to
 E A C H S C R I N G

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

C2 (seq. no.)
 DEPTH (nearest ft.) **28** **160**
 E A C H S C R E E N

CIRCLE APPROPRIATE BOX
 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. **223**
Ralph E. Wayne
 DRILLERS SIGNATURE
 (MUST MATCH SIGNATURE ON APPLICATION)
Ralph E. Wayne
 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

SLOT SIZE _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)
 from _____ to _____

GRAVEL PACK _____
 IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

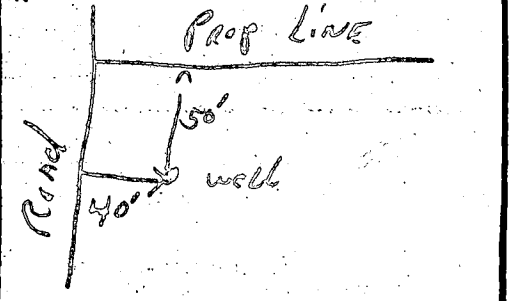
OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T _____ (E.R.O.S.)
 W Q _____
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C3 (seq. no.)
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **10**
 METHOD USED TO MEASURE PUMPING RATE _____
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **23**
 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

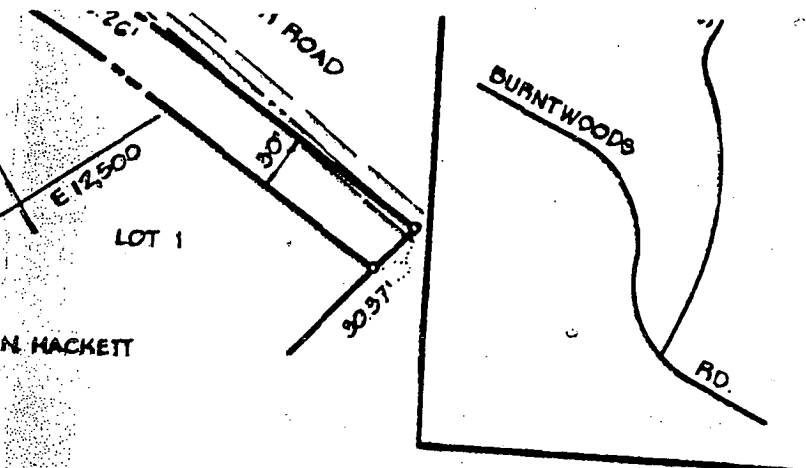
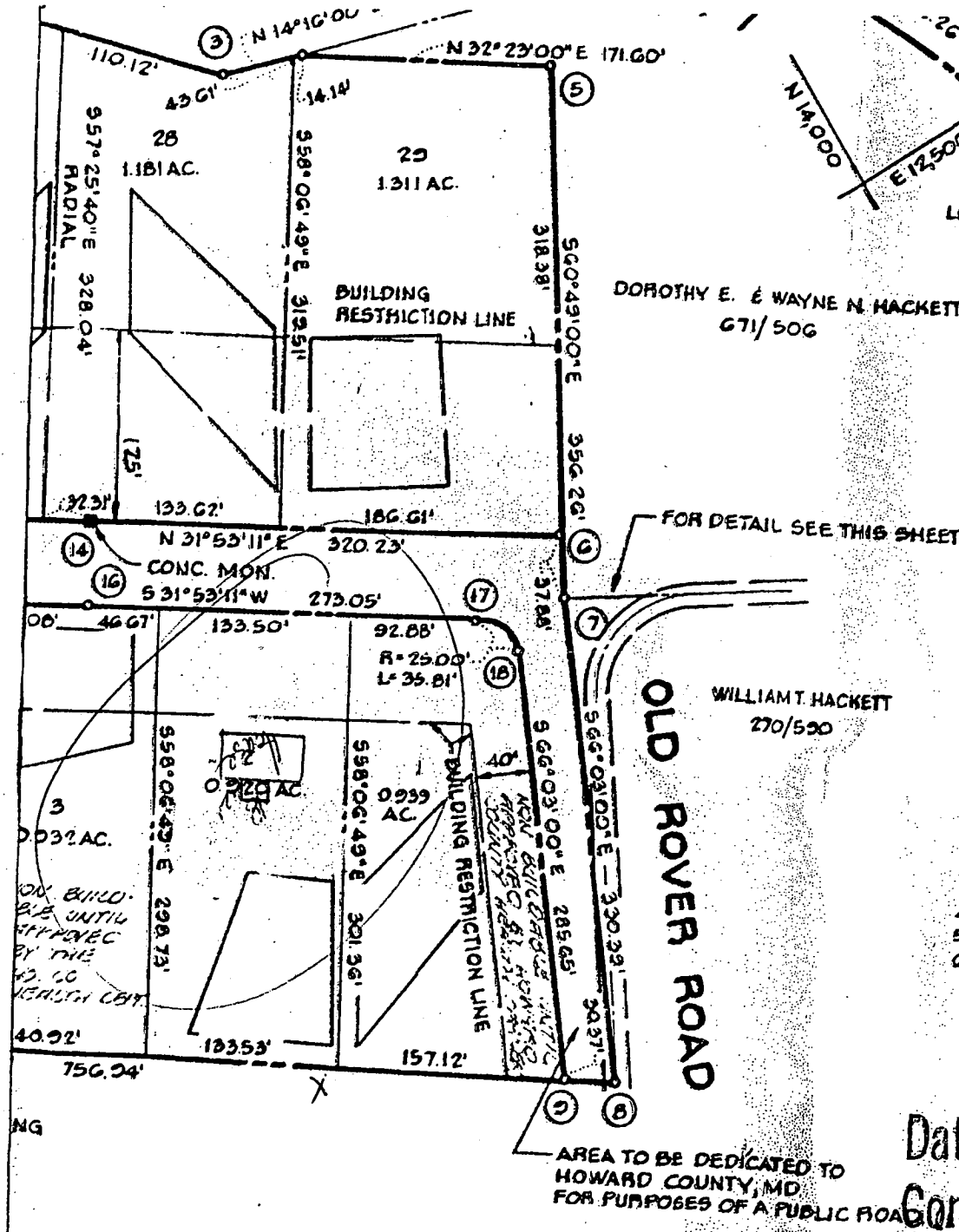
PUMP INSTALLED YES NO
 DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P; R, S, T, O))
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____
 PUMP HORSE POWER _____
 PUMP COLUMN LENGTH (nearest ft.) _____

CASING HEIGHT (circle appropriate box and enter casing height)
 above } LAND SURFACE
 below } **3** (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)



6212 21970



VICINITY MAP
SCALE: 1" = 2000'

GENERAL NOTE

1. THE LOTS SHOWN HEREON COMPLIES WITH THE MINIMUM WIDTH AND LOT AREAS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.
2. ALL PERC TEST HOLE LOCATIONS HAVE BEEN FIELD LOCATED APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY THE STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SEWER RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDINGS. THIS EASEMENT SHALL BECOME NULL AND VOID UPON COMPLETION OF A PUBLIC SEWAGE SYSTEM.
3. THIS AREA INDICATES A PRIVATE SEWAGE EASEMENT APPROXIMATELY 10,000 SQ. FT. AS REQUIRED BY THE STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWAGE IS AVAILABLE AND SEWER RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDINGS. THIS EASEMENT SHALL BECOME NULL AND VOID UPON COMPLETION OF A PUBLIC SEWAGE SYSTEM.
4. TAX MAP 14 & 15, PART OF PARCEL 99.
5. DEED REFERENCE: G32/02.
6. COORDINATES SHOWN HEREON ARE ASSUMED.

B00138704

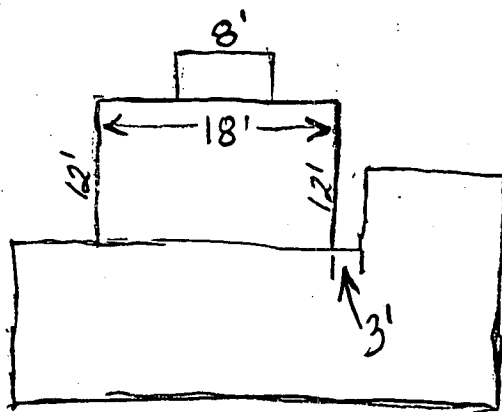
REVISED

Date: 10-28-02

Comments: deck moved 3'

RECORDED FILE: 3829

Ammend Deck Permit -
Shift Deck 3' Away
From Bump Out As
Per Health Dept.



Sharp Road

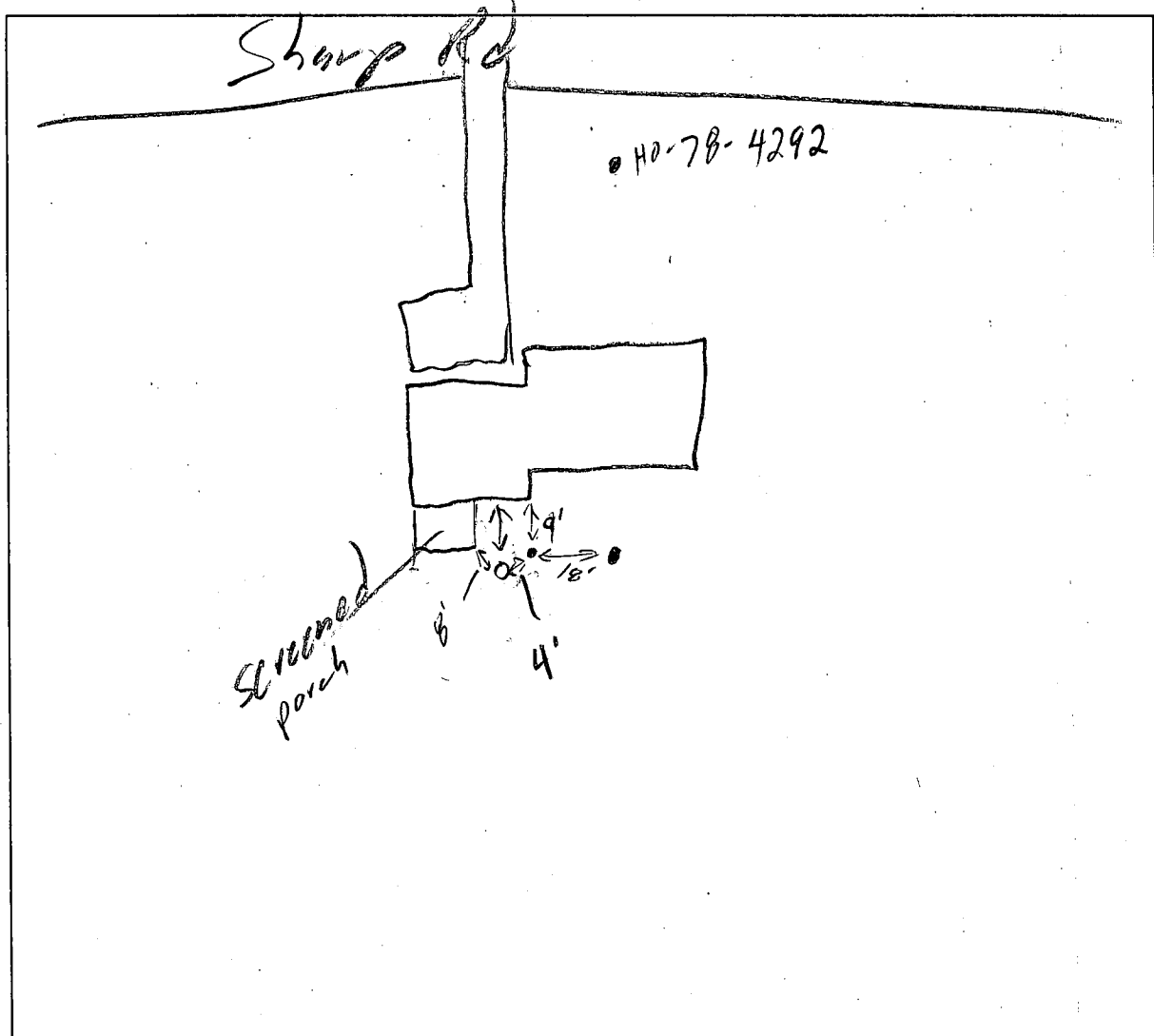
B00138704 Deck Permit

3179 Sharp Road

SITE INSPECTION SHEET

OWNER: _____ PHONE #: _____
ADDRESS: 3179 Sharp Rd CONTRACTOR: _____
Glenwood, MD 21738 WELL TAG #: HO-78-4292
SUBDIVISION: _____ LOT: _____ COUNTY #: Howard
PROPOSAL: 12' x 18' deck

LOCATION DIAGRAM



COMMENTS: Stake 4' from C.O.

DATE: 10/17/02 INSPECTOR: [Signature]