

approved 7/12/83
Stayed

7/12/83
12 o'clock

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 32924
A Repair

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

04-334655

ELLICOTT CITY
DISTRICT 4th
DATE 7/6/83

INDEX

Jack Fyock IS PERMITTED TO INSTALL _____ ALTER X

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

SUBDIVISION _____ ROAD 3281 Gwenlee Circle LOT 1 Block D, Sec 2

PROPERTY OWNER Joseph Corliss

ADDRESS 3281 Gwenlee Circle, Glenwood, Maryland 21738 Phone: 442-2861

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 up and Sanitarian will

BUILDING PERMIT SIGNED for the repair system.

AND RETURNED

99-04-60050280-2 STORY ADDITION

PLANS APPROVED BY Frank A. Skinner DATE 7/6/83

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.

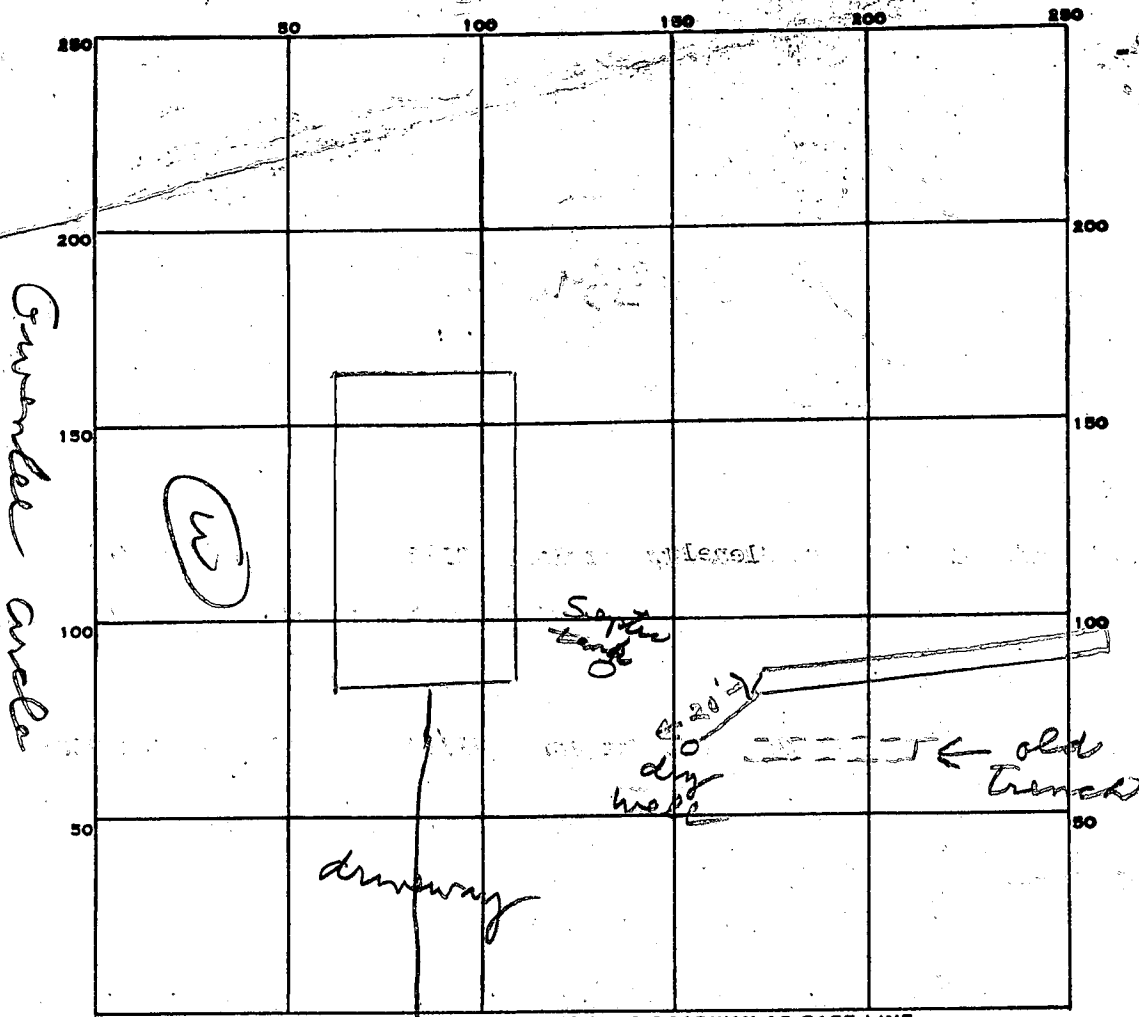
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

BLDG. PERMIT SIGNED
AND RETURNED Wiley
Serial # 59102 - Pool

X 32924

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Cared Drive

BUILDING PERMIT SIGNED

AND RETURNED

PERMIT CARD ✓

SEPTIC TANK, LEVEL _____

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 13 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 IN. TOTAL LENGTH 75 FT.

NUMBER OF TRENCHES 1 TOTAL BOTTOM AREA 45.0

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

ABSORBENT AREA 450 SQ. FT.

REMARKS 7/12/83 OK to cover all work

DATE SYSTEM APPROVED

7/12/83

INSPECTOR

Stayer

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLIOTT CITY

DISTRICT 1st

INDEXED

DATE 12/2/75

See how this was prepared

Ortelle Bellars

IS PERMITTED TO INSTALL ALTER

ADDRESS Box 2201 Route 94, Woodbine, Md.

PHONE 412-2268

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION Overlee Estates

ROAD Overlee Circle & Carel Dr, Lot 1, Elk. D, Sec. 2

PROPERTY OWNER W. L. Boring

ADDRESS Buntwoods Road, Glenwood, Md.

Phone: 463-2483

SPECIFICATIONS 4 bedrooms

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

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

SEPTIC TANK CAPACITY 1200 GALLONS

FOR GARAGE GRINDER, INCREASE DISPOSAL AREA AND TANK CAPACITY SEE _____

OTHER DRY WELL AND TRENCH - 600 sq. ft. absorbent sidewall area to begin below the first 1/2 ft. of non-porous soil. Maximum depth permitted for dry well is 11 1/2 ft. Locate dry well 12 1/2 ft. from front lot line and 20 ft. from right side line as seen from Overlee Circle. (If trench is used with dry well call for inspection before and after stone is installed.)

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 ACCEPTED.

PLANS APPROVED BY Robert V. Totto

DATE 12/23/75

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER AND WORK UNTIL INSPECTED AND APPROVED.

NITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

18355

APPLICATION

18355

SEWAGE DISPOSAL TESTING
 STATE OF MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
 HOWARD COUNTY HEALTH DEPARTMENT
 ENVIRONMENTAL HEALTH SERVICES
 P. O. BOX 470, ELLICOTT CITY, MARYLAND 21043
 TELEPHONE: 410-430-8300, EXT. 335

P. _____
 DISTRICT _____
 DATE _____

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 _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Quinn East LOT NO. 1, BIR. D, BOC. # 2

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. 3 BR/2

IF NOT SINGLE RESIDENCE DESCRIBE _____ NUMBER OF BEDROOMS _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ John [unclear]

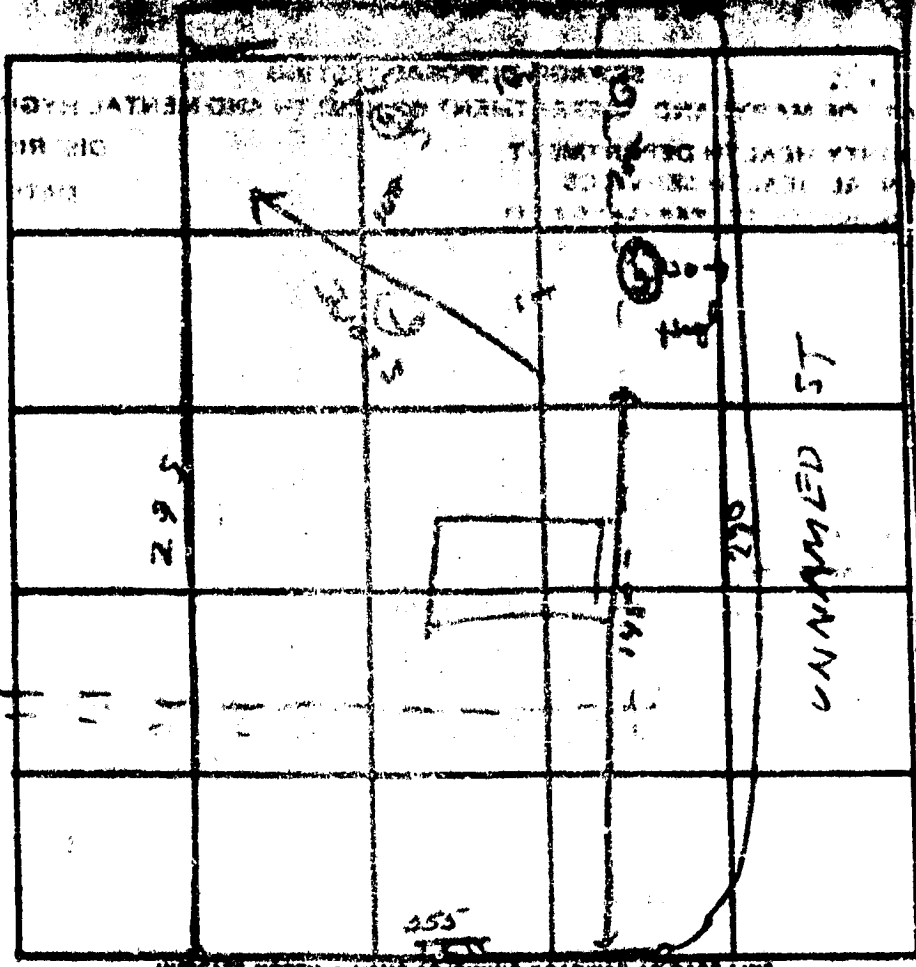
APPROVED BY _____ FOR _____ DATE _____
 (KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH - LANE ADJOINING ROADWAY AS BASE LINE

UNNAMED ST

DATE	TEST NO.	OPEN	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11/2/73	1	134	219	236	226	234	8 min
	2	134	219	231	231	249	18 min
	3	134	V				11 min (2nd)
	4	134	229	232	232	247	12 min
	5	134	229	233	233	242	9 min
P.T.	6	114	V				

avg. 12 min
with 5'

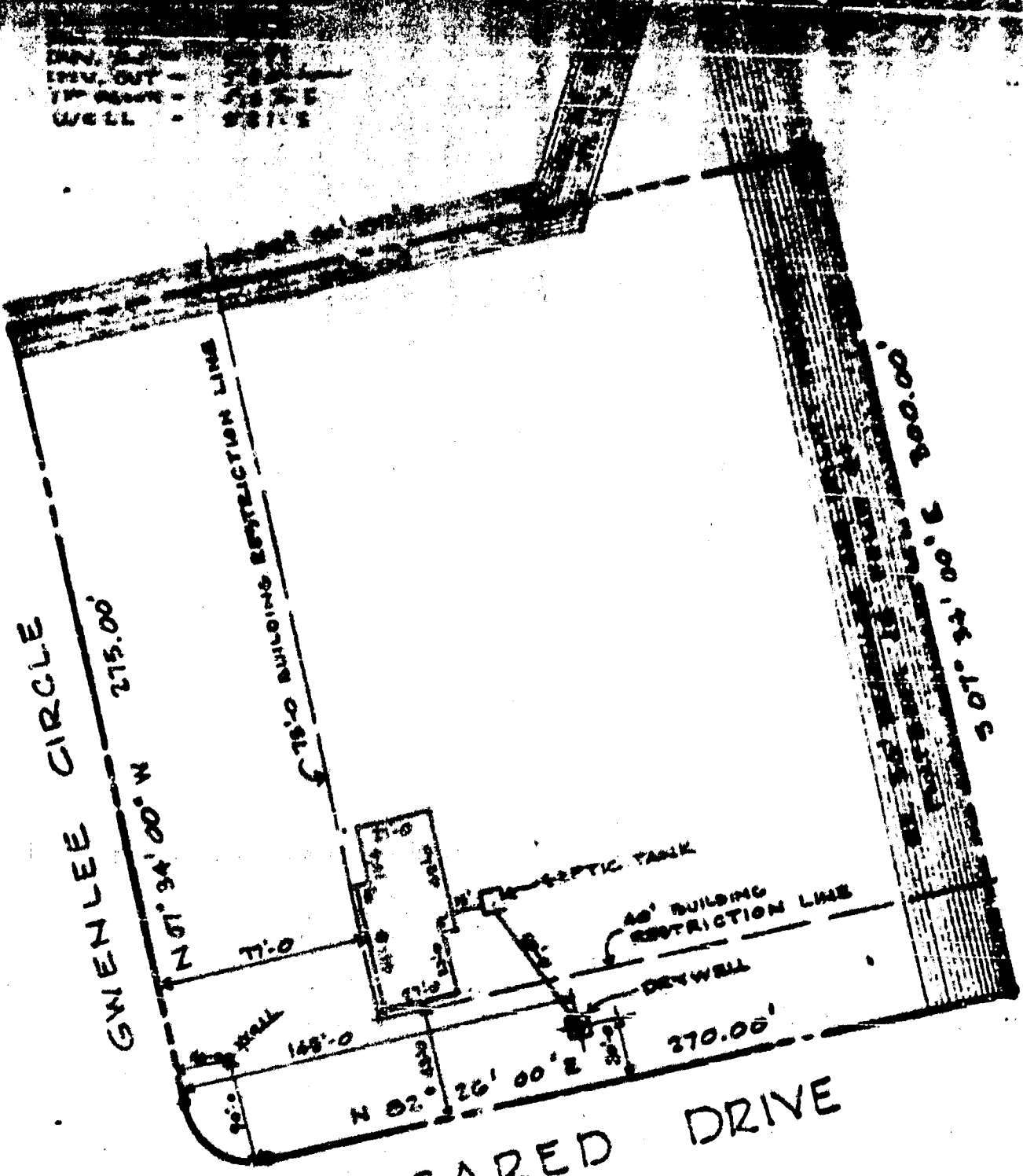
P. 51.
Oct 11.
No. 2

REMARKS: See 10 - 11 - 12 - 13 - 14 - 15 - 16 - 17 - 18 - 19 - 20 - 21 - 22 - 23 - 24 - 25 - 26 - 27 - 28 - 29 - 30 - 31 - 32 - 33 - 34 - 35 - 36 - 37 - 38 - 39 - 40 - 41 - 42 - 43 - 44 - 45 - 46 - 47 - 48 - 49 - 50 - 51 - 52 - 53 - 54 - 55 - 56 - 57 - 58 - 59 - 60 - 61 - 62 - 63 - 64 - 65 - 66 - 67 - 68 - 69 - 70 - 71 - 72 - 73 - 74 - 75 - 76 - 77 - 78 - 79 - 80 - 81 - 82 - 83 - 84 - 85 - 86 - 87 - 88 - 89 - 90 - 91 - 92 - 93 - 94 - 95 - 96 - 97 - 98 - 99 - 100

TYPE OF TEST: 1D

11-7-1

DIM. -
 EXH. OUT -
 TYP. MARK -
 WELL -



44
 11-4-75
 [Signature]

PLOT PLAN

GWENLEE ESTATES SEC. 2 BLOCK D LOT 1

WELL COMPLETION REPORT

THIS FORM MUST BE COMPLETED

COUNTY NUMBER **119355**

DATE RECEIVED (USE A USE ONLY)

11-10-70

DEPTH OF WELL

140

119-14-11183

DRILLERS IDENTIFICATION NO. **42**

OWNER **Carleffey Blaire**

STREET OR RFD. **1st St**

POST OFFICE

TOWN NAME **Woodbine Md**

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		WATER BEARING
	FROM	TO	
Top Soil	0	3	
Shale	3	40	
Loam shale	40	70	
Clay shale	70	140	

WELL DESCRIPTION

PERMIT RECORD
 WELL HAS BEEN DRILLED (CIRCLE APPROPRIATE BOX) YES NO

TYP. OF DRILLING MATERIAL (CIRCLE BOX) CM M

SEAM: C M B C

DR. OF BATH **6** NO. OF POUNDS **600**

GALLONS OF WATER **70**

DEPTH OF GROUT SEAL (TO NEAREST FOOT)
 FROM **0** FT. TO **140** FT.
 SECTION IF FROM SURFACE: **0** **52** **84** **116** **140**

CASING RECORD

CASING TYPES (CIRCLE APPROPRIATE CODE BELOW)

ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER

MAIN CASING TYPE T 6 55

NOMINAL DIAMETER (INCH) **6** TOTAL DEPTH (NEAREST FOOT) **55**

OTHER CASING (IF USED)

DIAMETER (INCH) FROM TO

1

2

SCREEN RECORD

SCREEN TYPE (CIRCLE APPROPRIATE CODE BELOW)

ST STEEL BA BRASS HO HOLE
 DL DRAIN OT OTHER

DEPTH (NEAREST WHOLE FOOT)

FROM TO

1 **140** **140**

2

3

CIRCLE APPROPRIATE BOXES

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 I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL" AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME _____
 (IF FASE PRINT) _____
 SIGNATURE _____

DISCOVERY OF SCREEN **140** (NEAREST INCH)
 FROM **140** TO **140**

SPRINKLER _____

IF WELL DRILLED WAS A PUMPING WELL CIRCLE BOX P

FOR USE ONLY (NOT TO BE FILLED IN BY DRILLER) (S.P.C.S.)

TELESCOPE Casing LOG INDICATOR

DR. TO 70 FEET DATA AVAILABLE

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) **2**

PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) **7**

METHOD USED TO MEASURE PUMPING RATE **bucket**

WATER LEVEL (DISTANCE FROM LAND SURFACE)

REPORT PUMPING **30** (NEAREST FOOT)

WHEN PUMPING **140** (NEAREST FOOT)

TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (SEE PUMPING TEST)

A AIR D DIAPHRAGM T TURBINE
 C CENTRIFUGAL R ROTARY O OTHER (DEFINITION BELOW)
 J JET S SUBMERSIBLE

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, L, J, P, R, S, T, O)

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES NO

GALLONS PER MINUTE (TO NEAREST GALLON) **7**

PUMP HORSE POWER **37**

PUMP COLUMN LENGTH (NEAREST FOOT) **45**

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

+ ABOVE - BELOW

LAND SURFACE **2** (NEAREST FOOT)

LOCATION OF WELL ON LOT
 SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER. NO MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).

(THIS NUMBER IS TO BE PRINTED IN COLES IN ALL CASES)

PERMIT REPORT

COUNTY NUMBER **ALL 555**

DATE RECEIVED

DATE WELL COMPLETED **01/11/75**

DEPTH OF WELL (TO NEAREST FOOT) **75**

OK MR. [Signature] FROM "PERMIT TO DRILL WELL" **02-07-75**

OWNER **Corliss [Signature]** STREET OR RFD **3377 Kwoles Road** TOWN **Granville** SUBDIVISION **Thurston** SECTION **1**

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	
Topsoil	0	2	
Br. Mica	2	53	
Tan Mica	53	56	
Br. Mica	56	58	<input checked="" type="checkbox"/>
Tan Mica	58	67	
Gray Mica	67	90	
Br. Mica	90	92	<input checked="" type="checkbox"/>
Gray Mica	92	160	

GRouting RECORD
(Circle Appropriate Box) **Y** **N**

WELL HAS BEEN GROUTED

TYPE OF GROUTING MATERIAL
CEMENT **CM** BENTONITE CLAY **BC**

NO. OF BAGS **8** NO. OF POUNDS **800**

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)
from **0** ft. to **30** 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
Nominal diameter: **ST** (top (main) casing (nearest inch))
Total depth of main casing (nearest foot): **63**

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

SCREEN RECORD

screen type or open hole insert appropriate code below

ST **BR** **NO**
STEEL BRASS OPEN HOLE
PL **OT**
PLASTIC OTHER

DEPTH (nearest ft.)

C2 **H0** **100** **120**

SLOT SIZE **7** **3**

DIAMETER OF SCREEN **4** (NEAREST INCH)

GRAVEL PACK (if well drilled was flowing well insert F in box 68)

TELESCOPE CASING **INDICATOR**

WC **1** **1** **1**

C3

PUMPING FEET

HOURS PUMPED (nearest hour) **1**

PUMPING RATE (gal. per min. to nearest gal.) **10**

METHOD USED TO MEASURE PUMPING RATE **bucket**

WATER LEVEL (distance from land surface) BEFORE PUMPING **0**

WHEN PUMPING **100**

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** (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 **O**

CAPACITY GALLONS PER MINUTE (to nearest gallon) **10**

PUMP HORSE POWER **1**

PUMP COLUMN LENGTH (nearest ft.) **1**

CASING HEIGHT (circle appropriate box and enter casing height)
+ above **-** below

LAND SURFACE (nearest foot) **0**

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)

House

40
55 = 610 ft.
40

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.

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or person responsible for site work if different from permittee)

LOT 2

295.00'

LOT 1 - BLOCK "D"
GWENLEE ESTATES
SECTION - 2

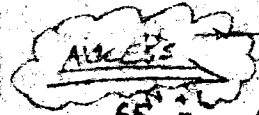
RED. NO. 9436

GWENLEE CIRCLE 275.00'

75' B.R.L.

165'

300.00'



PROPOSED
4' FEAKE

83.5'

128' ±

WELL

CONK. PAD

77.5'

TRENCH

SEPTIC TANK

DRY WELL

40' B.R.L.

R=25.00'
L=39.27'

41.9'

41.2'

270.00'

GARED DRIVE

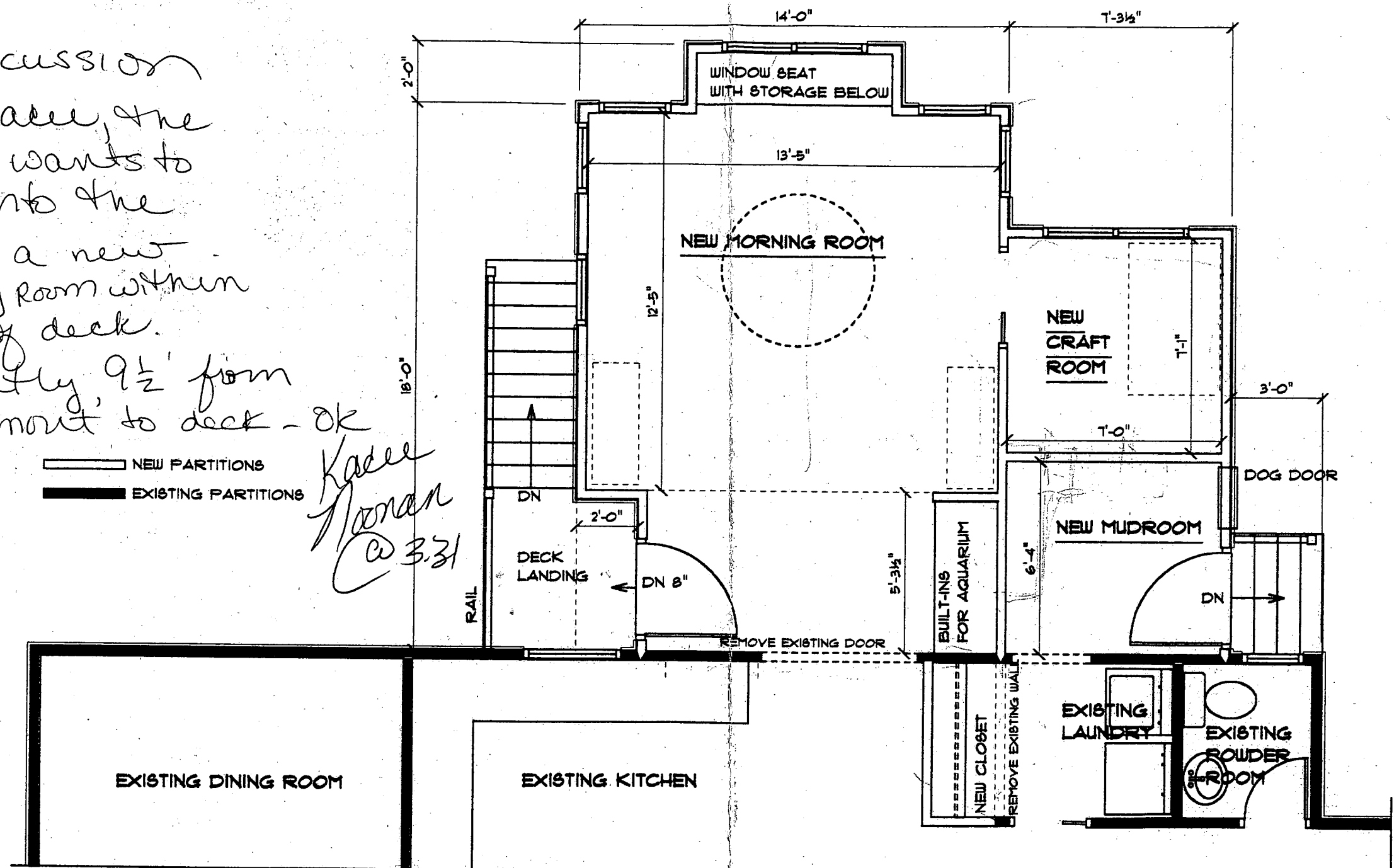
SCALE: 1" = 50'-0"

6-10-03

Per discussion with Kacie, the owner wants to place onto the home a new morning room within frame of deck.

Currently, 9 1/2' from S.T. cleanout to deck - OK

Kacie Noonan
© 3.31



YUAN RESIDENCE ADDITION - HOWARD COUNTY, MARYLAND
PRELIMINARY FIRST FLOOR PLAN

AJA SCHMIDT ARCHITECT, INC.

SCALE: 1/4" = 1'-0"

JUNE 5, 2003

365 SQUARE FEET

S 07°34'00" E 300.00'

EX. 30' DRAINAGE AND UTILITY EASEMENT

LOT 2

LOT 1
2.02 Ac.

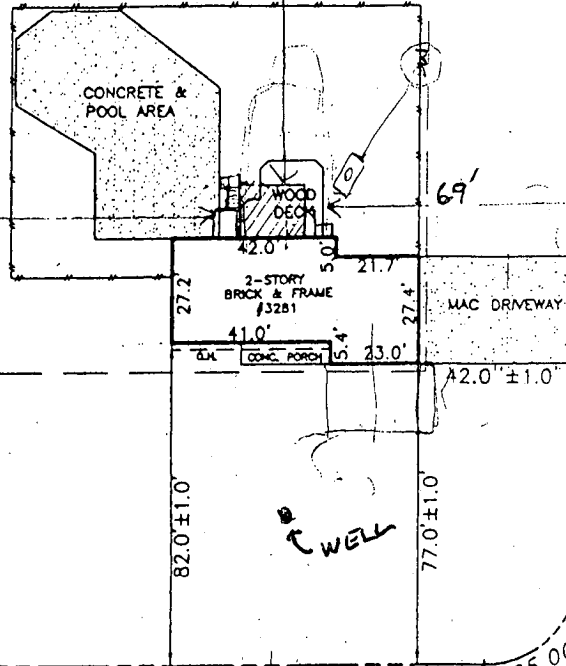
- ① Trees
- ② well
- ③ BRL
- ④ Driveway
- ① Move dock
- ② Septic

N 82°26'00" E 295.00'

EX. UTILITY EASEMENT

75' B.R.L.

206'



SHED

40' B.R.L.

S 82°26'00" W 295.00'

CARED DRIVE

APPROVED

WALKTHRU BUILDING PERMIT

BP# 150280 A# 32924

APP. SAN. KACEN DATE: 9/9/04

DESC. OF WORK: ADDITION

N 07°34'00" W 300.00'
GWENLEE CIRCLE

Exist BRL → 75.30'

Curtis 11/24/03 Holo. Zoning (410) 313 2354
Variance Admin Act 30'±2'

Residential

Surveyor's Certification

I hereby certify that the survey shown hereon is correct to the best of my knowledge and that, unless noted otherwise, it has been prepared utilizing description of record. This survey is not a boundary survey and the location or existence of property corners is neither guaranteed nor implied. Fence lines, if shown, are approximate in location. This property does not lie within a 100-year flood plain according to FEMA insurance maps as interpreted by the originator unless otherwise shown hereon. Building restriction lines shown are as per available information and are subject to the interpretation of the originator.

Stephen J. Benthold



Meridian Surveys, Inc.
811 Russell Avenue
Suite #303
Gaithersburg, MD 20879
(301) 721-9400

Date: 07-21-99 Scale: 1"=50' Drn: MZ
 Plat Book: NO TITLE REPORT FURNISHED
 Plat No.: 3324
 Work Order: 99-3399
 Address: 3281 GWENLEE CIRCLE
 District: 4
 Jurisdiction: HOWARD COUNTY, MD

LOCATION DRAWING
LOT 1 BLOCK D
GWENLEE ESTATES
SECTION 2

NOTE: This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.

6
4
1
40