

Approved 7-27-83
CW Williams

P 32977
A Repair

7/27/83
around noon

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

05-380715

ELLICOTT CITY
DISTRICT 5th

INDEX

DATE 7/22/83

Jack Fyock IS PERMITTED TO INSTALL ALTER

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

SUBDIVISION The Heritage ROAD 14197 Day Farm Road LOT 40, Sec. 2

PROPERTY OWNER Patrick H. Nolan

ADDRESS 14197 Day Farm Road, Glenelg, Md. 21737 Phone: 489-7320

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 recommend the repair system.

40 ft. ~~trench~~ trench - 6 ft. stone - 10 ft. deep per Frank Skinner / Ls

PLANS APPROVED BY Frank A. Skinner DATE 7/22/83

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. 800129790 - finish basement

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 7/24/83
PPH
800129790 - finish basement
7/24/83

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

4/4/79
4/8/79

Approved
GLK
10 Apr. 79

P 29666
A 22376

PERMIT

SEWAGE DISPOSAL SYSTEM
MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

ELLICOTT CITY
5th
DISTRICT

INDEXED

DATE 4/2/79

Jim Brittingham

IS PERMITTED TO INSTALL X ALTER

ADDRESS 3004 N. Rogers Avenue, Ellicott City, Md. 21043 PHONE 461-1870

SUBDIVISION The Heritage ROAD 14197 ~~Triadelphia~~ Road - Blenny, Md. 21737 LOT 40 Sec. 2

PROPERTY OWNER ~~Floyd Grayson~~ Patrick J. Nolan DAYFARM 489-7320

ADDRESS 2000 Century Plaza, Suite 245, Columbia, Md. 21044 PHONE: 997-1250

SPECIFICATIONS 4 Bedrooms
SEPTIC TANK CAPACITY 1250 GALLONS
DRAIN FIELD _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.
DEEP TRENCH _____ DEPTH _____ FEET. BOTTOM AREA _____ SQ. FT.
SEEPAGE PITS _____ ABSORBENT SIDE WALL AREA _____ SQ. FT.
INLET PIPE _____ FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH _____ FT. BELOW ORIGINAL GRADE
EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.
LOCATE DISPOSAL AREA _____ FT. FROM _____ LOT LINE AND _____ FT. FROM _____ LOT LINE AS SEEN WHEN
FACING LOT FROM

135
4
540

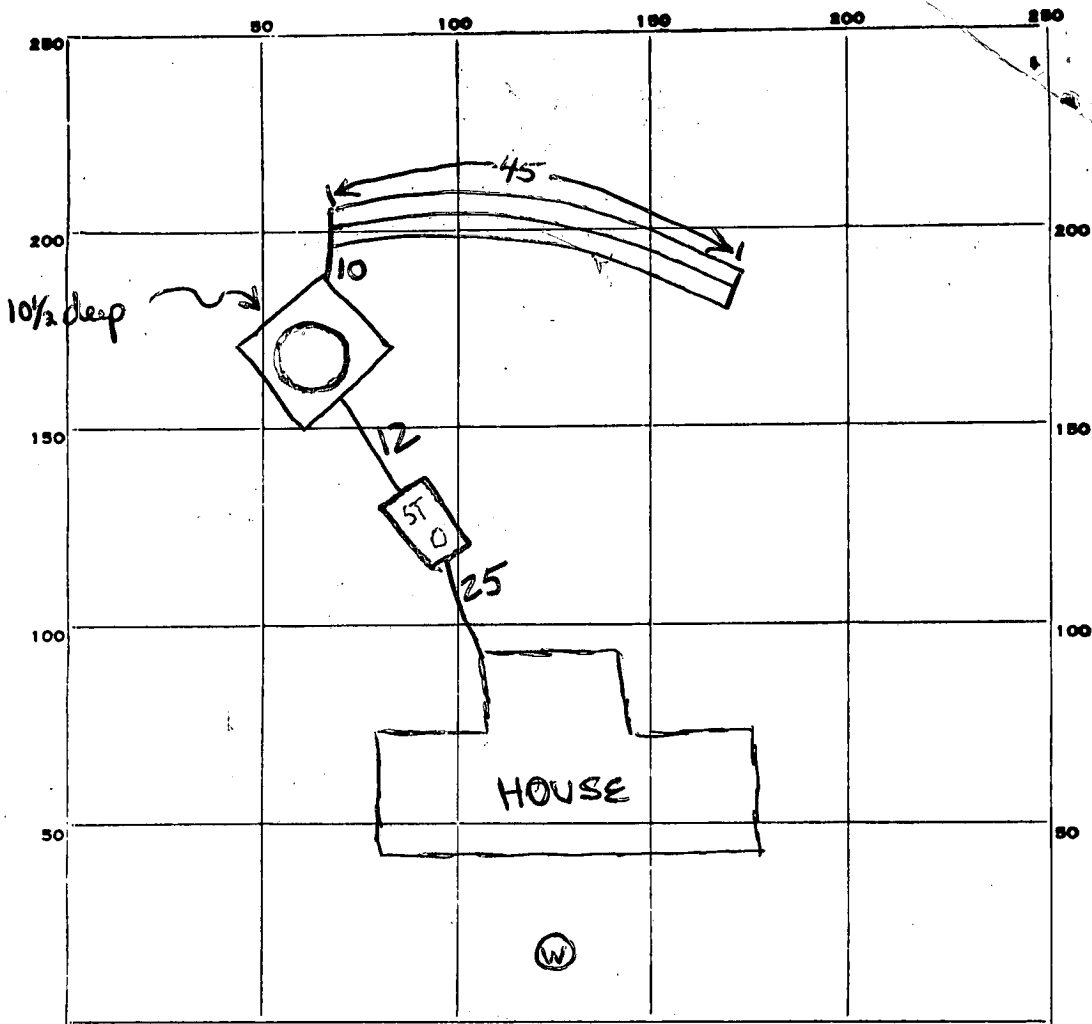
Locate Dry Well 20 feet from the left property line, and 175 feet from the front property line as seen from the road. The invert will enter the Dry Well at 4 feet below original grade, and the max. depth of the Dry Well will not exceed 10 feet below original grade. The Dry Well will have no less than 135 feet of vertical sidewall per bedroom, with the sidewall beginning at 4 feet below original grade.

PLANS APPROVED BY Robert T. Moorefield DATE 12/17/78

- 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 PLACING GRAVEL IN TRENCH.
- NOTE: NO DRY WELL SHALL EXCEED 16 FOOT IN DIAMETER.
- 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.

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

A 22376



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DAY FARM ROAD

PERMIT CARD Birmingham 4/10
4/4
 SEPTIC TANK, LEVEL 1750 tapered CLEANOUTS

ST	DW
✓	✓

terra cotta
 DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 10 1/2 FT. TRENCH WIDTH 2 FT.
4 → 10
 GRAVEL DEPTH 6 ~~X~~ TOTAL LENGTH 45 FT.
 NUMBER OF TRENCHES 1 TOTAL ^{1/2 SW} BOTTOM AREA 270 ±270
 SEEPAGE PITS, ^{perimeter} INSIDE DIAMETER 50 FT. DEPTH BELOW INLET 6 FT. ±300
 ABSORBENT AREA ±570 SQ. FT. ±570

REMARKS 4 Apr. 79 - Call for final when septic tank, sewers, & cleanouts are installed, when block is added to DW, & when gravel is added to trench & DW. (GLK) 10 Apr. 79 Final OK (GLK)

DATE SYSTEM APPROVED 10 Apr 79 INSPECTOR George L. Keller

4-12 holes
on 10,000 ft.
Preliminary

APPLICATION

A 22376

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 5
DATE 10/24/75

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 Waldgreen Joint Ventures Co.

ADDRESS _____ PHONE _____

PROPERTY LOCATION: The Heritage
SUBDIVISION Waldgreen Est. LOT NO. 42 42

ROAD AND DESCRIPTION _____

SIZE OF LOT _____ TYPE BLDG. 3 or 4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT John Schneider BLDG. PERMIT SIGNED AND RETURNED 12/27/78
Serial No. 37971

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

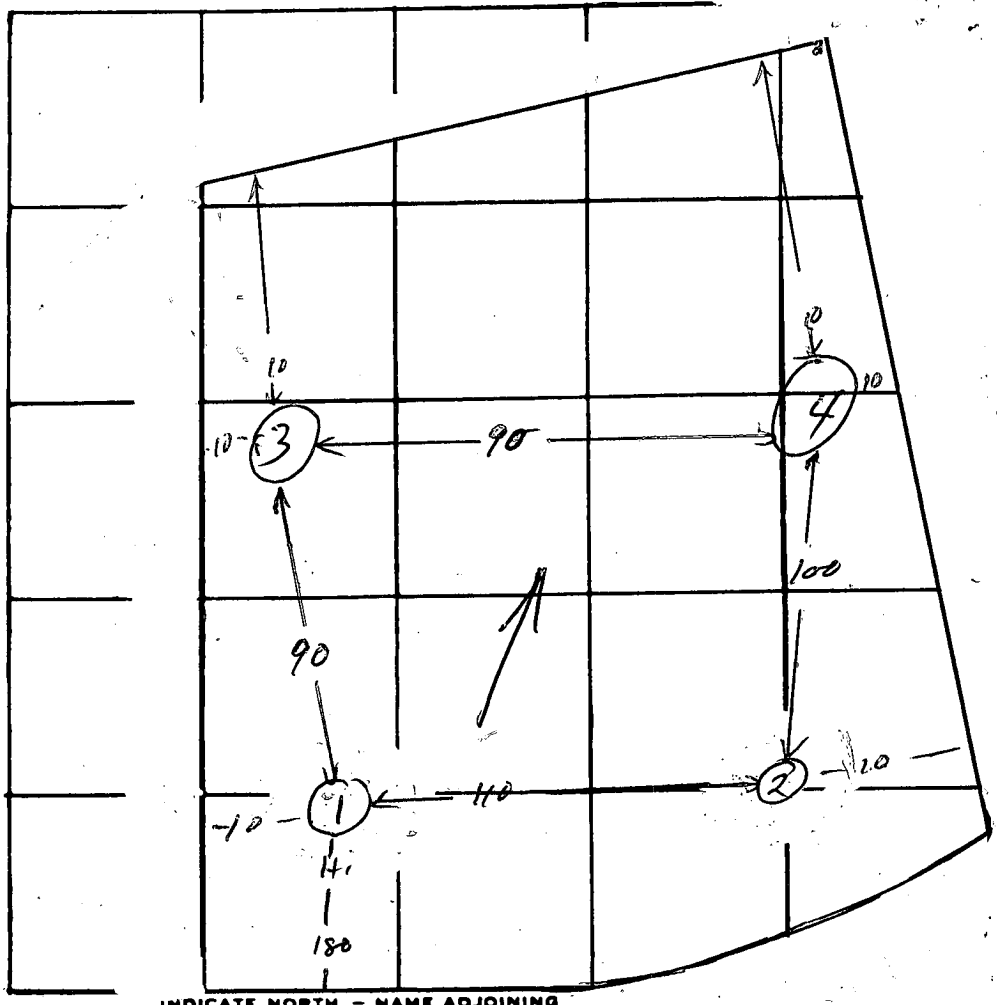
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

LA 47



INDICATE NORTH. - NAME ADJOINING
 NORMANSHIRE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/24	1	4'	228	230	230	240	10
	1A	12'	228	230	230	234	4
	2	12'	VISUAL	SAME		DRY	
	3	4'	240	246	246	254	8
	3A	12'	240	245	245	250	10
	4	4'	250	253	253	257	4
	4A	12'	250	254	254	301	7

REMARKS _____

TYPE OF SOIL _____

TESTED BY HZ, RM ALSO PRESENT: _____

B 1	5762	SEQUENCE NO. (WRA USE ONLY)	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL	WRA PERMIT NUMBER HO 733103
1 2 3 (SEQ. NO.) 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON A.W.L. CARDS)			FILL IN THIS FORM COMPLETELY	

DATE RECEIVED (WRA USE ONLY) 12/20/78 10:00 a.m.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%;">OWNER</td> <td style="width:40%; text-align: center;">GRAYSON</td> <td style="width:40%; text-align: center;">FLOYD</td> </tr> <tr> <td></td> <td style="font-size: 8pt;">COL. 15 LAST NAME</td> <td style="font-size: 8pt;">FIRST NAME COL. 34</td> </tr> <tr> <td>STREET OR RFD</td> <td colspan="2" style="text-align: center;">2000 CENTURY PLZ.</td> </tr> <tr> <td></td> <td style="font-size: 8pt;">COL. 36</td> <td style="font-size: 8pt;">COL. 58</td> </tr> <tr> <td>POST OFFICE</td> <td colspan="2" style="text-align: center;">COLUMBIA MD 21044</td> </tr> <tr> <td></td> <td style="font-size: 8pt;">COL. 57</td> <td style="font-size: 8pt;">COL. 76</td> </tr> </table>	OWNER	GRAYSON	FLOYD		COL. 15 LAST NAME	FIRST NAME COL. 34	STREET OR RFD	2000 CENTURY PLZ.			COL. 36	COL. 58	POST OFFICE	COLUMBIA MD 21044			COL. 57	COL. 76
OWNER	GRAYSON	FLOYD																	
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	COL. 36	COL. 58																	
POST OFFICE	COLUMBIA MD 21044																		
	COL. 57	COL. 76																	

B 1	CONTINUED	DRILLER INFORMATION
1 2 3 (SEQ. NO.) 4 5 6		
DATE	12/5/78	LICENSE NUMBER 209
	77	80
FIRST NAME	HOWARD	DRILLER LAST NAME DILLON
SIGNATURE	Howard E. Dillon	

B 3	LOCATION OF WELL
1 2 3 (SEQ. NO.) 4 5 6	
COUNTY	HOWARD
	(DO NOT ABBREVIATE COUNTY NAME) 21
SUBDIVISION	HERITAGE
	23 42
SECTION	40
	44 46 48 50
NEAREST TOWN	GLENELG
	52 71
MILES FROM TOWN (ENTER 0 IF IN TOWN)	3 MI
	79 76 77 78

B 2	WELL INFORMATION
1 2 3 (SEQ. NO.) 4 5 6	
MAXIMUM PUMPING RATE (GALLONS PER MINUTE)	5
	8 12
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY)	200
	14 20
USE FOR WATER (CIRCLE APPROPRIATE BOX.)	
<input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	
<input type="checkbox"/> FARMING, AGRICULTURE, IRRIGATION	
<input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.	
<input type="checkbox"/> MUNICIPAL WATER SUPPLY	} MUST HAVE STATE HEALTH DEPT. APPROVAL
<input type="checkbox"/> PRIVATE WATER COMPANY	
<input type="checkbox"/> TEST	

B 4	DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)		
1 2 3 (SEQ. NO.) 4 5 6			
<input type="checkbox"/> NORTH	<input type="checkbox"/> EAST	<input type="checkbox"/> NE NORTHEAST	<input type="checkbox"/> SE SOUTHEAST
<input type="checkbox"/> SOUTH	<input type="checkbox"/> WEST	<input type="checkbox"/> NW NORTHWEST	<input type="checkbox"/> SW SOUTHWEST
NEAR WHAT ROAD DAV FARM RD			
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)			
<input checked="" type="checkbox"/> NORTH	<input type="checkbox"/> SOUTH	<input type="checkbox"/> EAST	<input type="checkbox"/> WEST
DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 100 MI			
	34	37	38 39

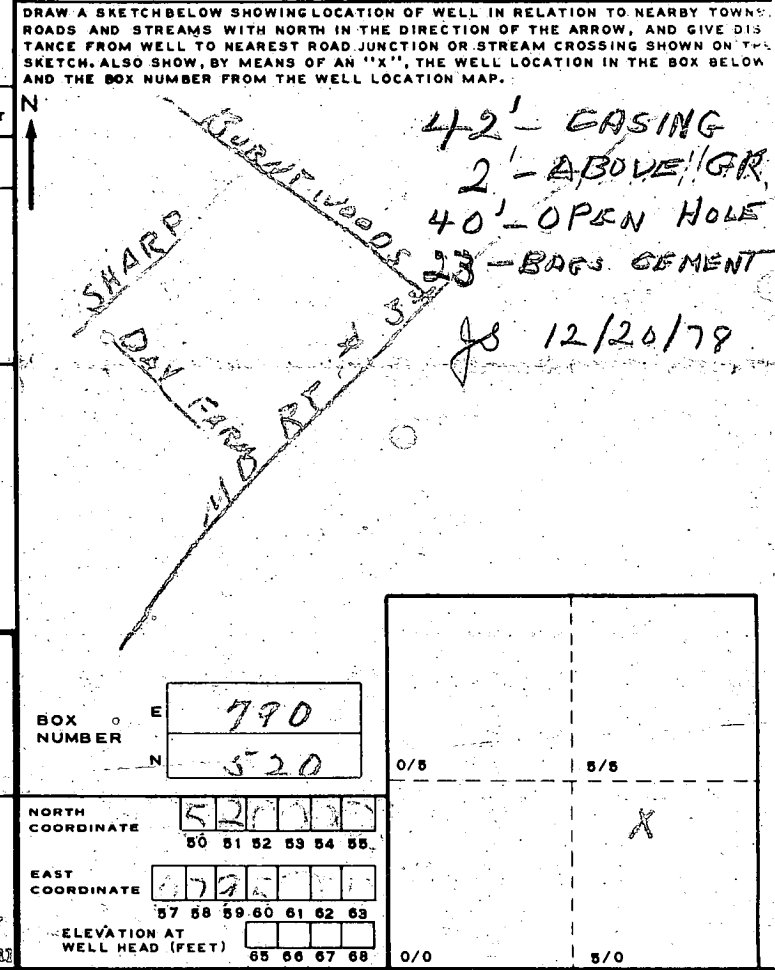
APPROXIMATE DEPTH OF WELL	200 FEET
	24 28
APPROXIMATE DIAMETER OF WELL	6 (NEAREST INCH)

METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)		
<input checked="" type="checkbox"/> BORED (OR AUGERED)	<input type="checkbox"/> JETTED	<input type="checkbox"/> DRIVEN
30-37 <input type="checkbox"/> AIR-ROTARY	<input type="checkbox"/> AIR-PERCUSSION	<input type="checkbox"/> ROTARY (HYDRAULIC ROTARY)
<input type="checkbox"/> CABLE	<input type="checkbox"/> REVERSE-ROTARY	<input type="checkbox"/> DRIVE-POINT
OTHER (DESCRIBE)		

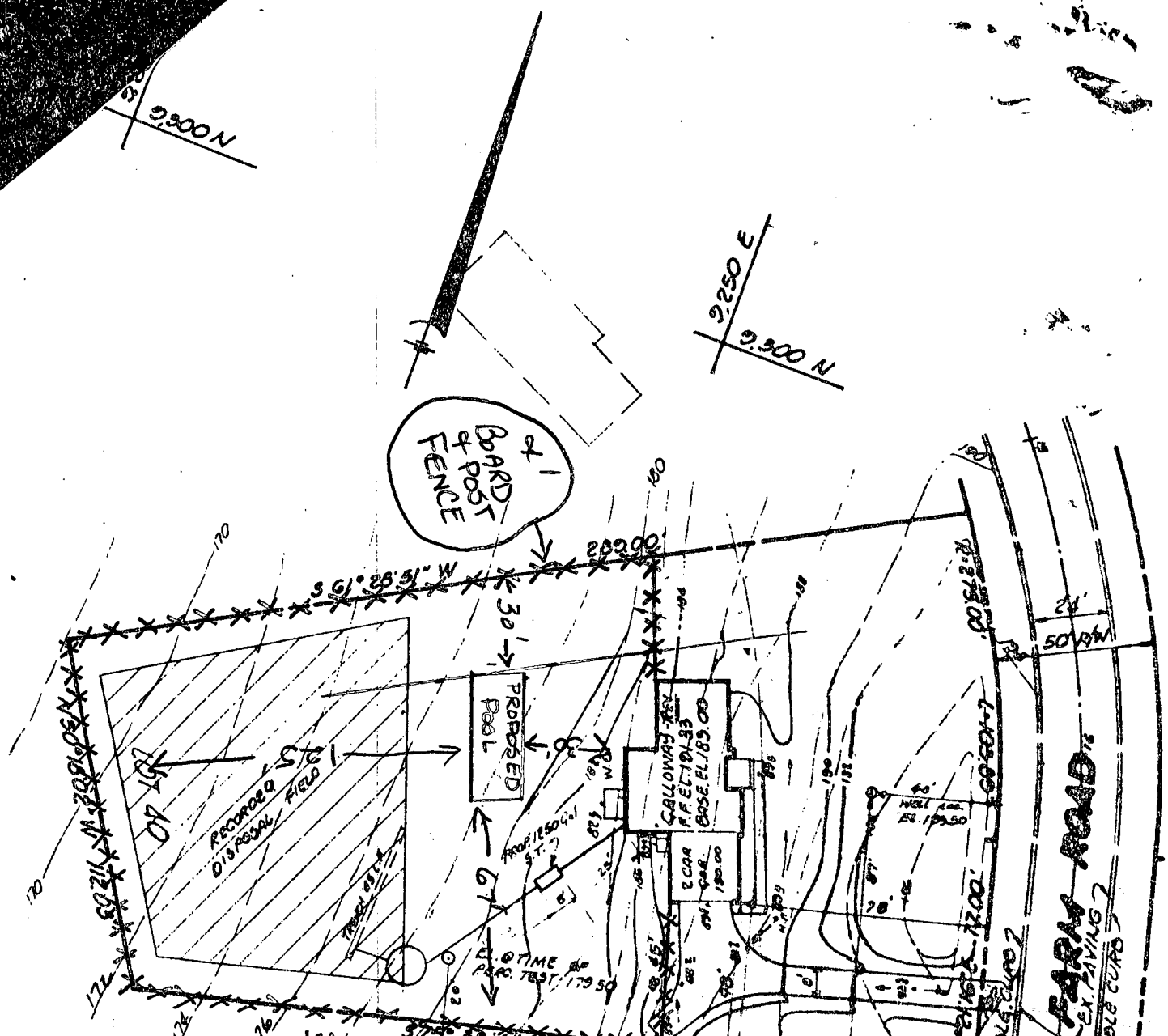
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)	
<input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL.	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED.	
<input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY.	
<input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)	

NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)	
APPROPRIATION PERMIT NUMBER	ENGINEER REVIEW DISTRICT NO.
54	63
FORCE	CONDITIONS
67 68	70 71 72 73 74 75 76 77 78 79

B 4	CONTINUED	HEALTH DEPARTMENT APPROVAL
1 2 3 (SEQ. NO.) 4 5 6		
STATE HEALTH (CIRCLE BOX)	Howard	170315
	COUNTY NAME	COUNTY NO.
DATE	120778	
	43 46	
	APPROVED BY Donald W. Monaghan , Sanitarian	



B 5	SPECIAL CONDITIONS 8-63 (WRA USE ONLY)
1 2 3 (SEQ. NO.) 4 5 6	



GENERAL NOTES:
 2 STY. 4 B.R. BLK & FRAME DWELL. 180
 WELL DATA (See Plan for location)
 EX. GRADE 193.50
 FIN. GRADE 183.50
 SEPTIC DATA
 TANK LOCATED 25' FROM HOUSE
 INV. @ HOUSE 181.50
 INV. "IN" 181.00
 INV. "OUT" 180.76
 EX. GRADE @ TANK 181.00
 FIN. GRADE @ TANK 182.50
 EX. WELL DATA (EX. GRADE 178.50)
 INV. "IN" 178.50
 INV. "OUT" 174.50
 SITE - FRENCH LENGTH 45 L.F.
 TOTAL S.F. ABS REQ 540
 TOTAL S.F. ABS PROVIDED 558
 TRENCH DATA
 INV. IN 174.28

ON SITE
 GRADING PLAN
 FOR
 THE HERITAGE SECTION I, AREA 2
 LOT 40

REVISED
 12/8/78

3RD ELECTION DISTRICT
 SCALE: 1"=50'

HOWARD COUNTY, MARYLAND
 DATE: 11/16/78

GRAYSON HOMES
 BUILDER - OWNER
 FLOYD GRAYSON JR. PHONE 007-3712 RES.
 2000 CENTURE PLAZA BUILDING 007-1200 OFF.
 COLUMBIA, MARYLAND 21044

PREPARED BY
 RON WAGNER, LAND DEVELOPMENT CONSULTANT
 8734 LOCH BELID DRIVE
 BALTIMORE, MARYLAND 21234
 PHONE 821-6280

NEVER PICKED UP - MAY HAVE JUST BEEN CLOGGED PIPES

PERMIT
SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P _____
A REPAIR
ISSUE DATE _____
APPROVAL DATE _____

Hatfield's Equipment IS PERMITTED TO INSTALL _____ ALTER X

ADDRESS 13785 Burntwoods Road, Glenelg, MD 21737 PHONE 301-854-6172

SUBDIVISION The Heritage II LOT NUMBER 40 ADDRESS 14197 Day Farm Road

PROPERTY OWNER Patrick Nolan PROPERTY OWNER'S ADDRESS Same

SEPTIC TANK CAPACITY _____ GALLONS

PUMP CHAMBER CAPACITY _____ GALLONS

NUMBER OF BEDROOMS _____

SQUARE FEET PER BEDROOM _____

LINEAR FEET OF TRENCH REQUIRED _____

TRENCHES: Trenches to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. _____ feet of stone below distribution box.

LOCATION: _____

REPAIR - PURPOSE - Existing septic system has failed.
Call for inspection when ground is opened so inspector can recommend repair. 8/10/01

PLANS APPROVED _____ DATE _____

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE
SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM