

9/11/90

PERMIT

P 45791

SEWAGE DISPOSAL SYSTEM

SA 31114

MARYLAND STATE DEPARTMENT OF HEALTH DISTRICT 4th

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

04-348737

DATE 4/18/90

DATE SYSTEM APPROVED 9/14/90

INDEXED

INSPECTOR M. Rifkin

Walter W. King Plumbing & Heating Contractors, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 5305 King's Court, Frederick, Maryland 21701 PHONE 1-301-662-6990

SUBDIVISION ~~Ellerslie Estates~~ GLEN MANOR ROAD 3100 Ellerslie Ct. LOT 1

PROPERTY OWNER Pulte Homes Corporations

ADDRESS _____

**BUILDING PERMIT SIGNED
AND RETURNED**

~~EXCAVATION SHALL BE USED TO EXPOSE SEWER TANK CAPACITY BY 50% AND ABSORPTION TRENCH BY 25%~~ 4-21-90 B0014757 P6 P00L

~~SANITAGE GRINDERS XXXXX XXXXXXXXXXXXXXXXXXXXXXX~~

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 240 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4.5 feet below original grade. Bottom maximum depth 8.5 feet below original grade. Effective area begins at 4.5 feet below original grade. 4.5 feet of stone below distribution pipe.

LOCATION - Start the first trench 85 feet off the rear (475') lot line and 100 feet from the left lot line as seen when facing the lot from Ellerslie Court. Run trench on contour toward the left lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Sid Abel cm DATE 04/12/89

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: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS

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

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 TWO 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

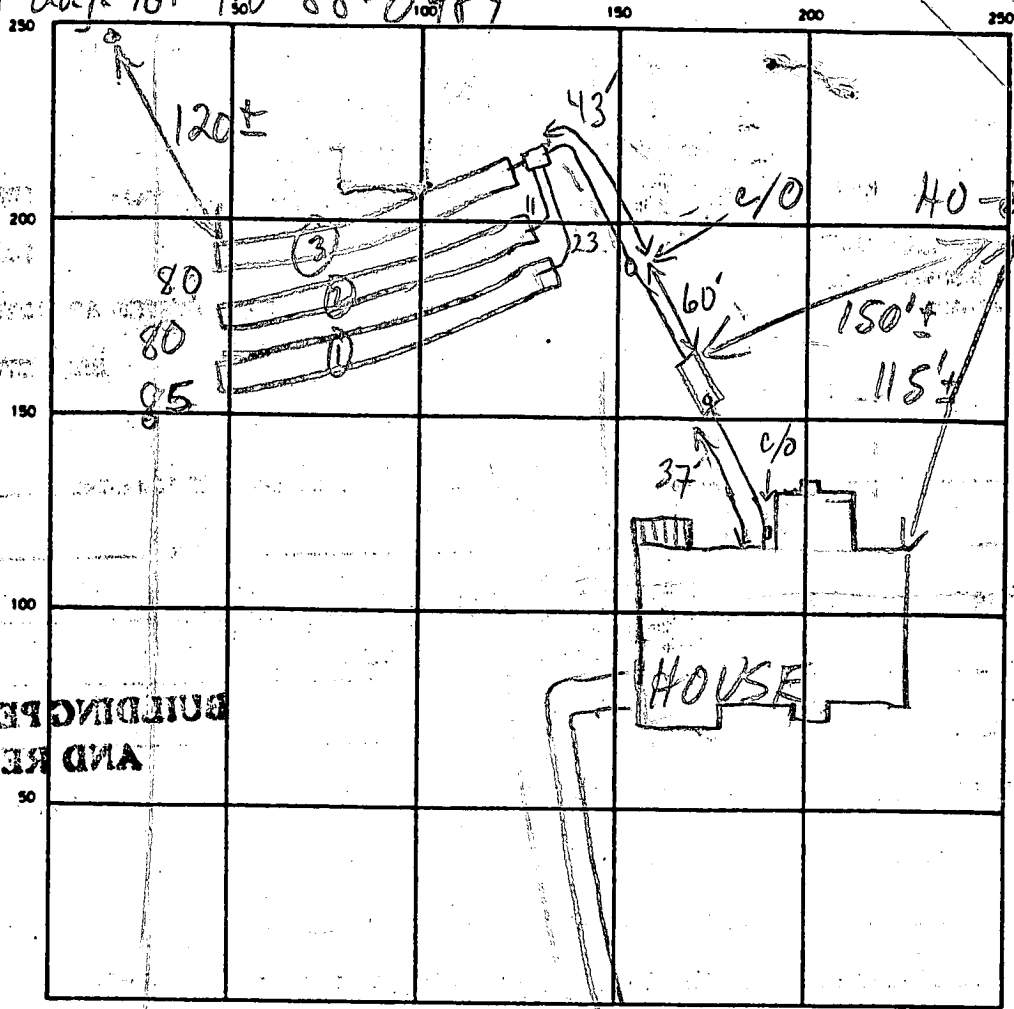
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

7115

well adj. lot HO-88-0489



HOBBS RD

BUILDING PERMIT SIGNED AND RETURNED

ELLERSLIE CT

SEPTIC TANK LEVEL 1250 GAL CLEANOUTS S.T. - OK 2 FULINE - OK

DISTRIBUTION BOX LEVEL OK - BAFFLE W

DRAIN FIELD/TILE FIELD DEPTH 8.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 4.5 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 085 @ 80 @ 80 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 0340 @ 320 @ 320 SQ. FT.

DRYWELL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 980 SQ. FT.

REMARKS 9/11/90 OK TO STONE & CONTINUE MR

9/14/90 OK TO COVER ALL MR

DATE SYSTEM APPROVED 9/14/90 INSPECTOR M. Ripken

APPLICATION

prel.

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 31114

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT FOURTH

DATE JANUARY 19, 1981

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 MR. WILLIAM MITCHELL

ADDRESS 13071 TRIADELPHIA ROAD, ELLICOTT CITY, MD. 21043 PHONE 988-9207

PROPERTY LOCATION:

SUBDIVISION ROSEBAR LOT NO. 15 D

ROAD AND DESCRIPTION NORTHWESTERLY CORNER AT THE INTERSECTION OF BURNTWOODS ROAD AND HOBBS ROAD.

SIZE OF LOT 3 Ac. +- TYPE BLDG. SINGLE FAMILY

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.

SIGNATURE OF APPLICANT Charles J. Crowder

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

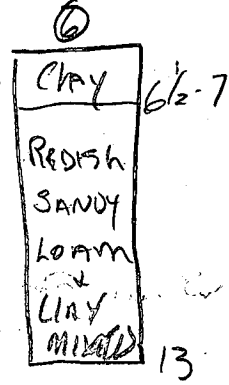
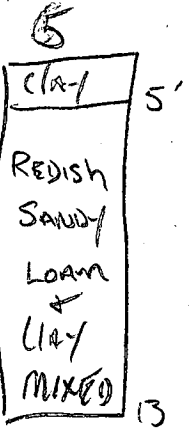
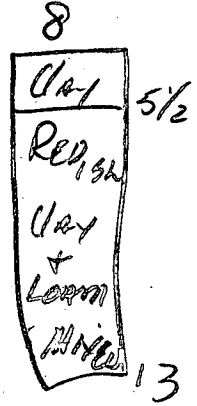
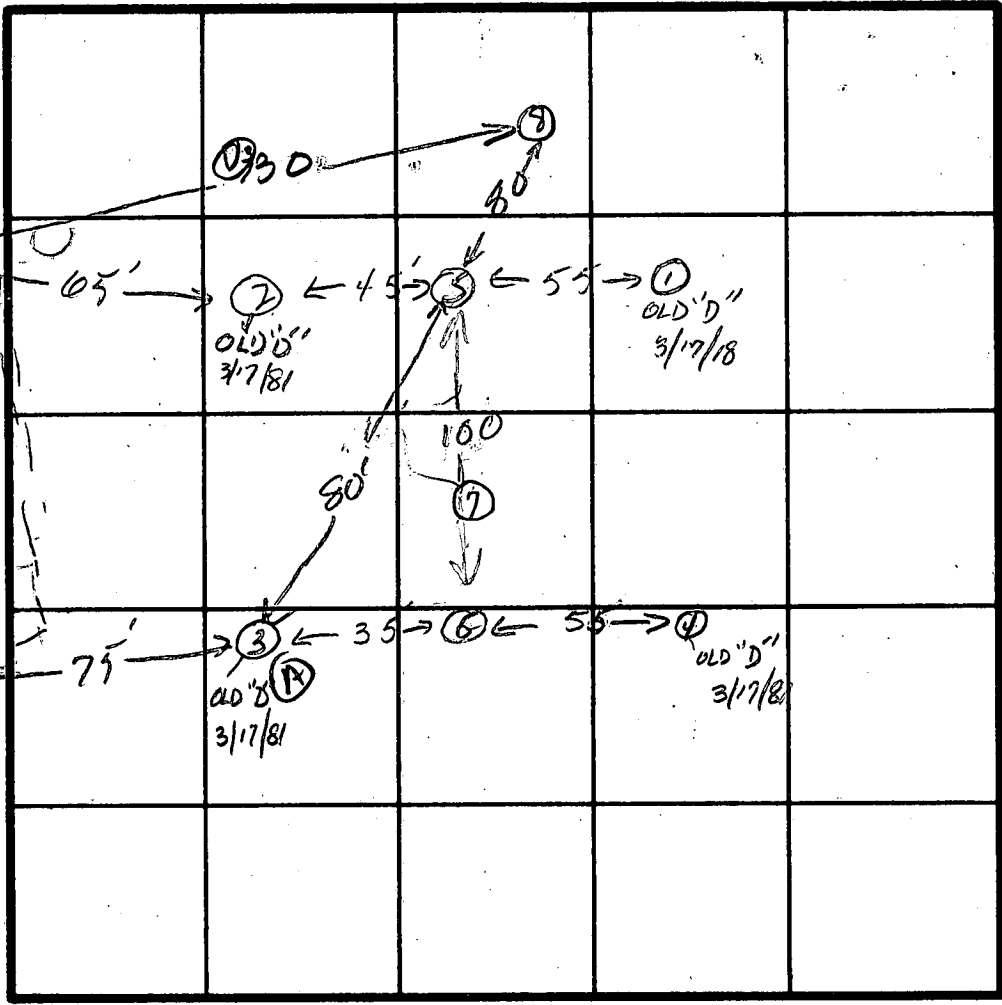
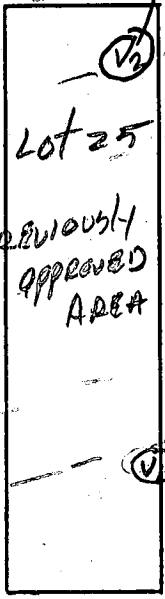
THIS IS NOT A PERMIT

Lot D

5/15/81 Lot #1

Lot 25

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
4-27/81	53	5'	9:43	9:54	9:54	10:20	26	
	54	9'	9:43	9:51	9:51	10:00	9	
	50	14'						
	(65)	5'	9:48	XXX	XXX	XXX	Fail	
	6m	9'	9:48	10:05	10:05	10:31	26	
	60	13'						
	(75)	5'	11:11	XX	XX	XX	Fail	
	85	5'	11:31	11:43	11:43	12:05	28	
	8m	9'	12:12	12:20	12:20	12:36	16	
	V3	13'	1-5	CLAY				
12/2/88	AV	13'	Clay 3.5-4.0' Blendg. Silt Loam below Clay					

mid of good soil 5' Max Depth 10' t=21min

REMARKS Most line stakes out measurements from previous perc holes

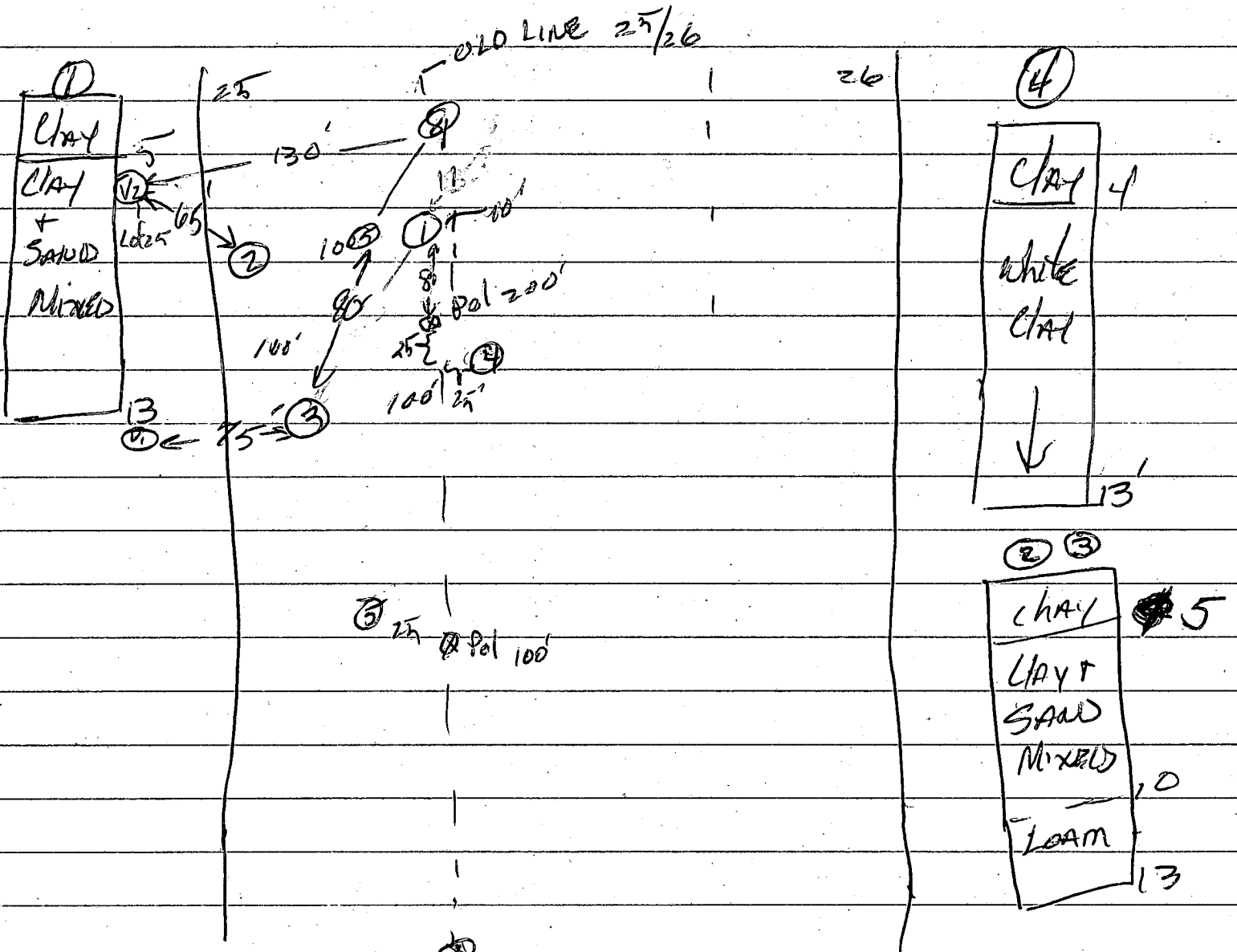
TYPE OF SOIL

TESTED BY SK 4/27/81

ALSO PRESENT SKIP + Robert of Frock ANTHONY BOGDAN

(?) #1 5/15/81

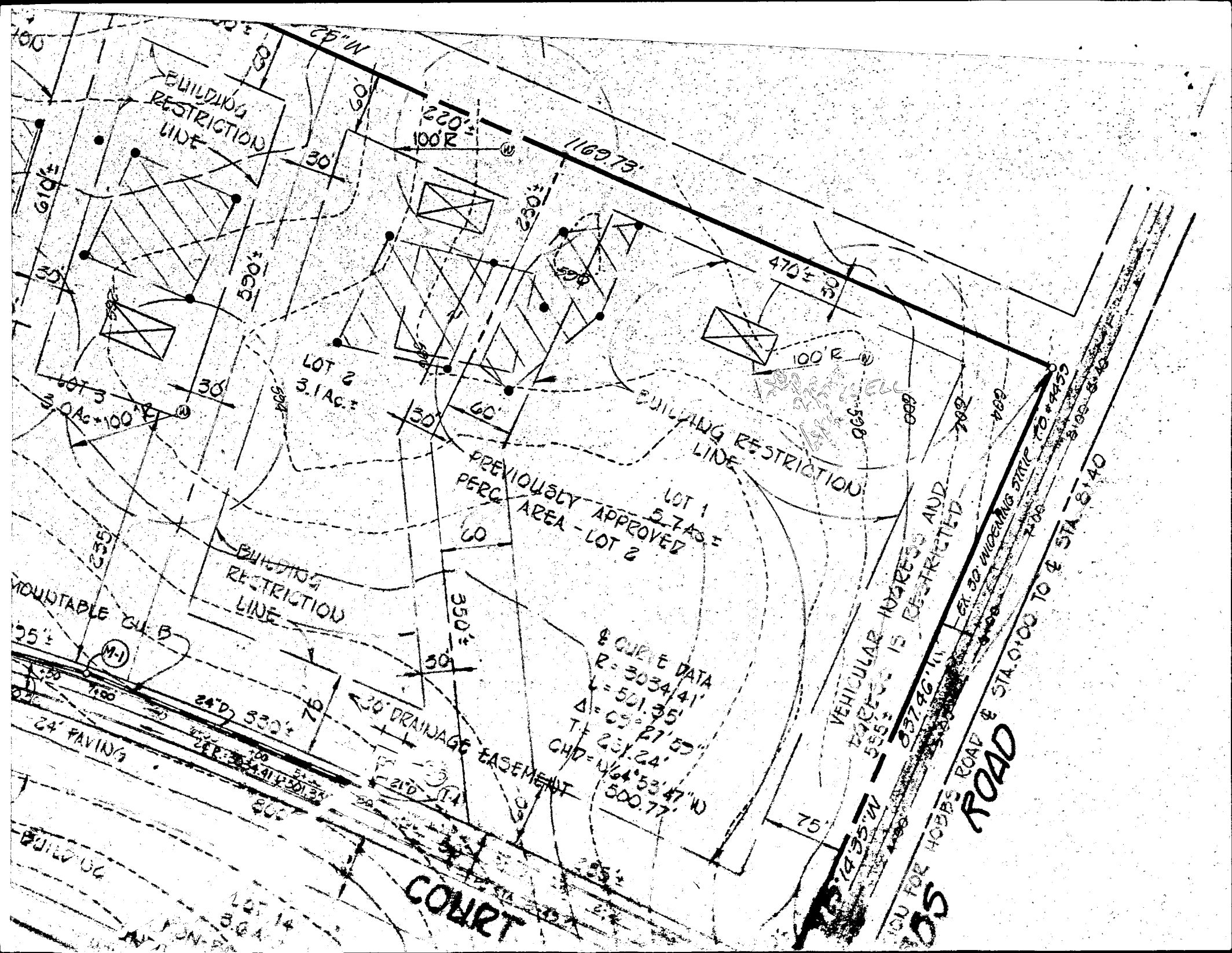
New unnamed lot D
old 25 + 26



3/17/18

Time	Lat	Long	Time	Time	Time	Time	Notes
10	15	5	12:22	12:22	12:43	12:53	25 mi
23	1M	9	12:22	12:22	12:43	12:53	20 mi
2m			12:14	12:14	12:28	12:48	27 mi
20			12:14	12:14	12:28	12:48	13 mi
33			12:25	12:25	12:35	12:02	
3m			12:25	12:25	12:30	12:43	
30							

9/11 inch Fall
 3/4 in April
 inlet 4
 good soil 5'
 Max depth 10'
 E = 21 min
 Trenches



BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

BUILDING RESTRICTION LINE

PREVIOUSLY APPROVED PERC AREA - LOT 2

8 CURVE DATA
 R = 3034.41'
 L = 501.35'
 Δ = 09° 27' 55"
 T = 251.24'
 CHD = 1164° 53' 47" 10
 500.77'

LOT 2
 3.1 AC±

LOT 1
 5.743±

VEHICULAR ACCESS AND EGRESS IS RESTRICTED

ROAD

COURT

610±

LOT 3
 3.0 AC±

ADJUTABLE GULCH

24' PAVING

BUILDING

1169.79'

1169.79'

470±

100 R

350±

30'

30' DRAINAGE EASEMENT

75'

YOU FOR HOBBS ROAD & STA. 0+00 TO & STA. 8+40

LOT 14
 3.6 A

C1 2325

SEQUENCE NO. (DENV USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.

COUNTY NUMBER A-3114

(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

DATE Received

DATE WELL COMPLETED 040189

Depth of Well 140 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-88-0488

OWNER KOREN Development last name first name STREET OR RFD SLEEPY CT TOWN Glenwood SUBDIVISION SLEEPY SECTION LOT 1

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes entries for Top Soil, Shale, mica, and Green mica.

GROUTING RECORD form with fields for WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL (CEMENT, BENTONITE CLAY), NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form with fields for casing types (STEEL, CONCRETE, PLASTIC, OTHER), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter, depth.

SCREEN RECORD form with fields for screen type (STEEL, BRASS, BRONZE, PLASTIC, OPEN HOLE, OTHER), DEPTH (nearest ft.), SLOT SIZE, DIAMETER OF SCREEN.

GRAVEL PACK form with fields for GRAVEL PACK, IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68, OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER).

PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, TYPE OF PUMP USED.

PUMP INSTALLED form with fields for DRILLER WILL INSTALL PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.

LOCATION OF WELL ON LOT form with fields for SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS.

CIRCLE APPROPRIATE LETTER A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"

DRILLERS IDENT. NO. 40

DRILLERS SIGNATURE

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X
Replacement

Receipt # 45803
Date 04/20/90

Name of Installer W.W.King Plbg. & Htg. Contr., Inc.

Telephone 1-301-662-6990

License Number 2217

Certified Well Pump Installer Well Driller Registered Plumber X

Name of Property Owner Pulte Homes

Telephone 1-301-681-5800

Subdivision Ellerslie Est/Glen Manor Lot # 1

Well Tag # HO - 88 - 0488

Site Address 3100 Ellerslie Ct.

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible X
- Make Goulds
- Model # 7EH05422
- Capacity 7 GPM
- Pump exceeds well capacity Yes No X
- If Yes, is low pressure cutoff switch installed? Yes No
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards X Other

Motor

- Horsepower 1/2
- RPM 3500
- Voltage
 - 110
 - 220 X

Pitless Adapter

- Make Martinson
- Model # BBP-10X
- Depth 42" min
60" max

Tank

- Capacity 80
- Pressure relief valve? yes

*P.A. OK @ 3.5'
B.G. MR 9/14/90*

Piping

- Type plastic #660
- Size 1"
- NSF and/or BOCA Code approved X
- Depth of supply line 40" min
60" max

Well data

- Depth 140 ft.
- Yield 30 GPM
- Static water level ft.
- Will water supply be disinfected by installer? yes

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

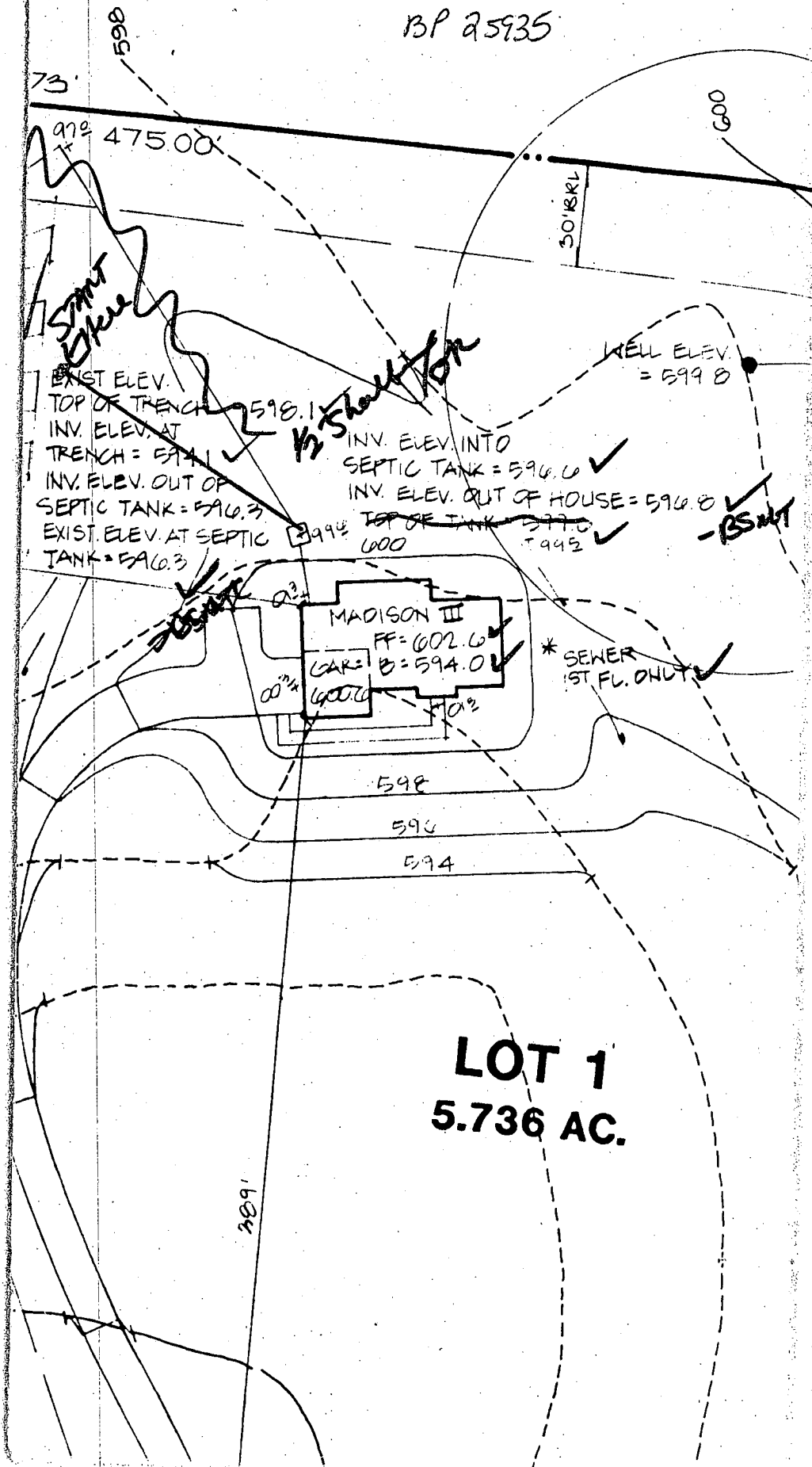
Signature of Applicant: Walter W King

Date: 4-17-90

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

ENG. PERMIT SIGNED
AND RETURNED 5-19-89

BP 25935



EXIST. ELEV.
TOP OF TRENCH = 598.1
INV. ELEV. AT
TRENCH = 594.1
INV. ELEV. OUT OF
SEPTIC TANK = 596.3
EXIST. ELEV. AT SEPTIC
TANK = 596.3

INV. ELEV. INTO
SEPTIC TANK = 596.6
INV. ELEV. OUT OF HOUSE = 596.8
TOP OF TANK = 599.0

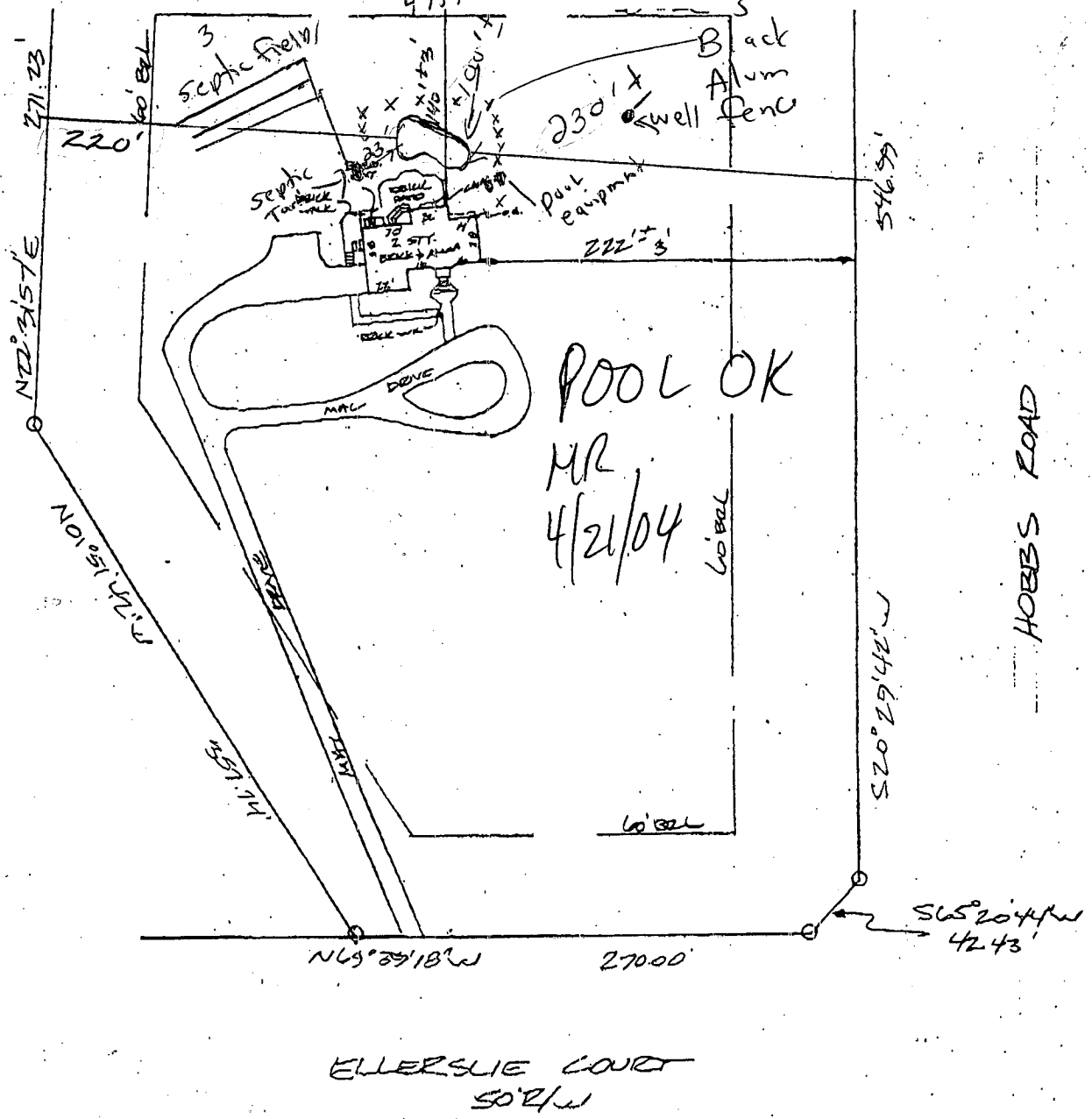
WELL ELEV.
= 599.8

MADISON III
FF = 602.6
GAR = 594.0
600' x 600'

* SEWER
1ST FL. ONLY

LOT 1
5.736 AC.

2



The 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. The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. The 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.

300 ELLERSLIE COURT LOT 1
 "ELLERSLIE ESTATES" PLAT 8488
 HOWARD COUNTY MARYLAND

THE LOT SHOWN HEREON IS IN FLOOD ZONE "C" PER F.E.M.A. FLOOD INSURANCE RATE MAP PANEL # 240044 004 B

Curran
 UPDATED 11-12-02 02-1855

SCALE 1"=100'
DATE 7-20-99
JOB No. 99-1297

LOCATION CERTIFICATION

**WITZ & ASSOCIATES
 GENERAL SURVEYING CO.**

1009 Frederick Road
 Baltimore, MD 21228
 Phone 410-869-3536
 Fax 410-869-3538



District of Account # 348737

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 2400 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2456 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B00147547
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Building Address 3100 ELLERSIE COURT
GLENWOOD, MARYLAND 21738

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 604002 Subdivision ELLERSIE EST.

Section _____ Area _____ Lot 1

Tax Map 14 Parcel 235 Grid 23

Zoning RROE5 Map Coordinates 7176 Lot size 5.73 ACRES

Property Owner's Name GEORGE & DEBRAH CARROLL

Address 3100 ELLERSIE COURT

City GLENWOOD State MD Zip Code 21738

Home Phone (410) 489-2563 Work Phone (301) 775-1113

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use SINGLE FAMILY DWELLING

Proposed Use SAME WITH POOL

Estimated Construction Cost \$ 22,500.00

Description of Work CONCRETE INGROUND POOL
WITH D.E. FILTER, POOL
FILLED BY TRUCK. 26' 6" WIDE BY 47'
LONG. 3' 6" TO 9' 6" DEEP, 6 DIVING BOARD.
TOTAL S.F. = 808
300 L.F. OF 48" HIGH BLACK ALUMINUM FENCE TO CURB.

Occupant or Tenant SAME AS OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Contractor Company ANTHONY & SYLVAN ROES, INC.

Contact Person GEORGE A. SCHWEICH AGENT CONTRACTOR

Address 10840 GUILFORD ROAD, SUITE 407

City ANNAPOLIS State MD Zip Code 20701

License No. 14347

Phone (301) 490-1930 Fax (410) 792-2818

Engineer or Architect Company _____

Contact Person N/A

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFFPA #13D _____ NFFPA #13R _____ Other: _____
No. of Bedrooms _____	
Multi-family dwellings: _____	
No. of efficiency units: _____	
No. of 1 BR units: _____	
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure <u>INGROUND POOL</u>	
Dimensions: <u>26' 6" wide, 47' long</u>	
Footings: _____	
Roof: _____	
State Certified Modular <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

George A. Schweich
 Applicant's Signature
AG-511 FIRM CONTRACTOR
 Title/Company

GEORGE A. SCHWEICH
 Print Name
APRIL 21, 2004
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY **
 - FOR OFFICE USE ONLY -