

8/7/87
PARTY PM

5/11/87 AM

04-344553

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P. 39822

A. 31150

DISTRICT 4th

DATE 8/6/87

DATE SYSTEM APPROVED 8-10-87

INSPECTOR JEN

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

Deer Park Excavating

IS PERMITTED TO INSTALL ALTER

ADDRESS _____ PHONE 442-1336

SUBDIVISION Patapsco Overlook I ROAD 16134 Patapsco Overlook Ct 16/24 7

PROPERTY OWNER David Puckett

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO

BLDG. PERMIT SIGNED
AND RETURNED 7/27/95

Serial # 61090-deck

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 175 feet from the front (331') lot line and 130 feet from the right (662') lot line as seen when facing the property from Patapsco Overlook Court. Run trench(s) along contour toward right rear part of property.

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

8-7-87 Note: Drawing is not to scale. Dist. box at upper left perc test hole JEN

PLANS APPROVED BY C. Williams DATE 8/25/86

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.

BLDG. PERMIT SIGNED
AND RETURNED 9/29/94

Serial # 56428
Pool

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.

EH - 2-1186

1 A 31150

APPLICATION

A 3/1/50

Prep

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 4th

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 2/9/81

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 Georgia Ave. Properties Inc. DAVID POCKETT

ADDRESS c/o E. Brook Lee III, 13838 Ga. Ave, Wheaton, Md. PHONE _____

PROPERTY LOCATION:

SUBDIVISION Georgia Ave Properties LOT NO. 7 SECT I

ROAD AND DESCRIPTION Md. Rte. 94 and Old Frederick Rd.

16124
16134 PATRICK OVERLOOK CT

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

IF NOT SINGLE RESIDENCE DESCRIBE NA

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

SIGNATURE OF APPLICANT [Signature]
Agent

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

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

HOLD PENDING FURTHER TESTS _____ DATE _____

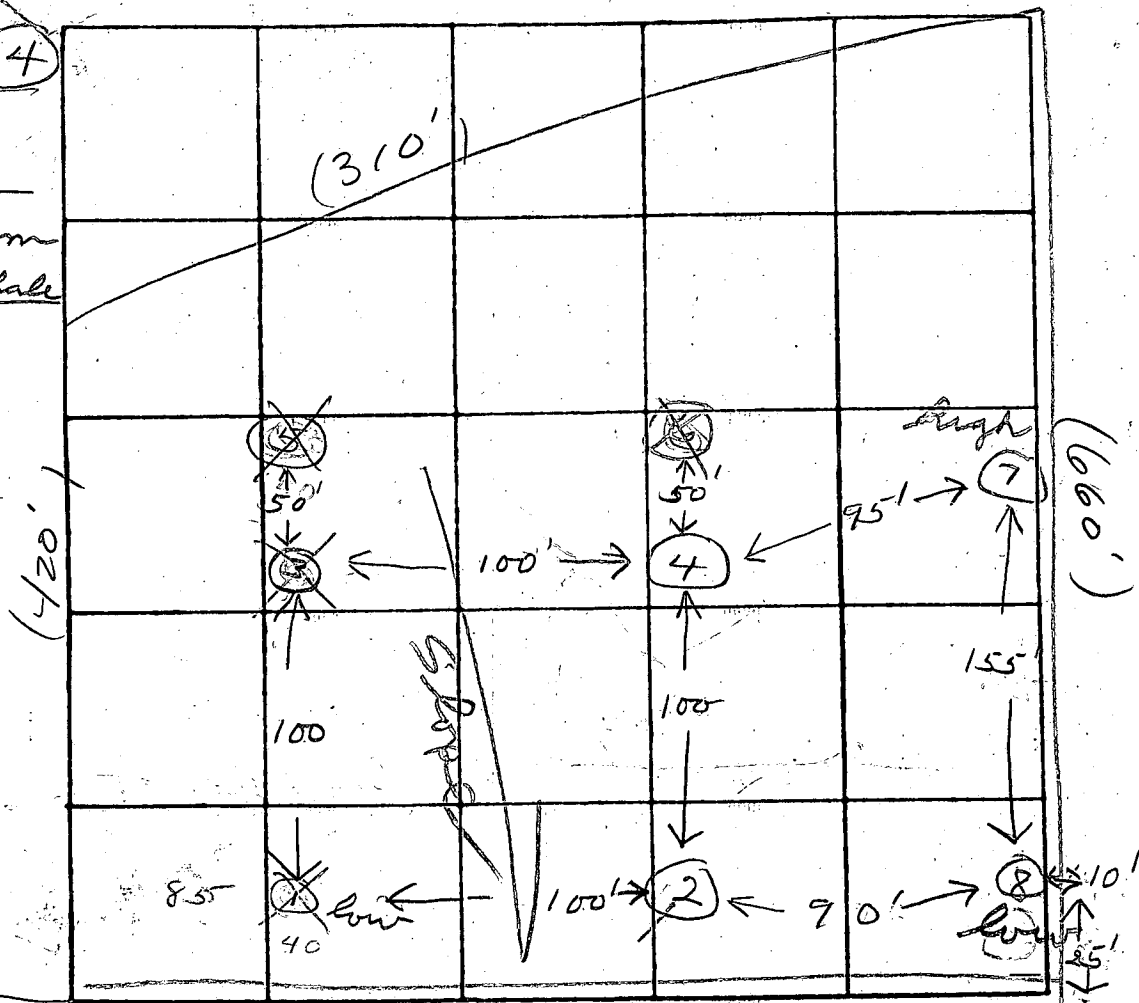
REASONS FOR REJECTION OR HOLDING _____

BLDG. PERMIT SIGNED AND RETURNED 4/17/82 BLDG. PERMIT SIGNED AND RETURNED 4-23-87
Serial # 12637 3 Axel
2-car garage BP11303

THIS IS NOT A PERMIT

LOT 7

⑧ ② ④
 clay
 4 1/2'
 sandy loam
 mixed w. shale
 12'



#w 7

7
 clay
 3
 sandy loam
 13

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
2/24/81	1S	4	9:50	no perc	perc		Fail
	1M	8	9:53	9:55	9:55	9:57	2
	2S	4	9:58	10:15	10:15	10:45	30
	2M	8	10:50	10:52	10:52	10:54	2
	3S	4	10:02	no perc	perc		Fail
	3M	8	10:10	10:15	10:15	10:23	8
	1SA	5	10:34	no perc			Fail
	3SA	5	10:41	No perc			Fail
	4S	4	11:45	12:10	12:00	12:29	29
	4M	8	12:24	12:25	12:25	12:27	2
	5	8	No perc		clay	5 ft	
	6	8	shale	6 ft			
	7S	4	12:20	12:25	12:25	12:29	4
	7M	8	12:20	12:26	12:26	12:35	9
	8S		12:35	12:37	12:37	12:40	3
	8M		12:35	12:41	12:41	12:54	13

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY JR f SK ALSO PRESENT: Don Novak

(4)

UNDEVELOPED PROPERTIES
1774



626.77'

N72°37'25" E
306.38'

225.00'

(7)

LOT 6
3.055 Ac.

LOT 7
3.426 Ac.

LOT 8
3.88 Ac.

BUILDING RESTRICTION LINES

BUILDING RESTRICTION LINES

N26°45'34" E
419.80'

S20°14'55" W
662.4'

NO IMPACT ON
WELL ON SECTORS
DUE TO PROGRESS
6/17/87 (dw) well



S63°14'26" E
47.22'

S68°49'42" W
100.44'

N63°14'26" W
81.72'

331.11'

S63°14'26" E

535.00'



N68°49'42" E
76.43'

LOT 9
3.091 Ac.

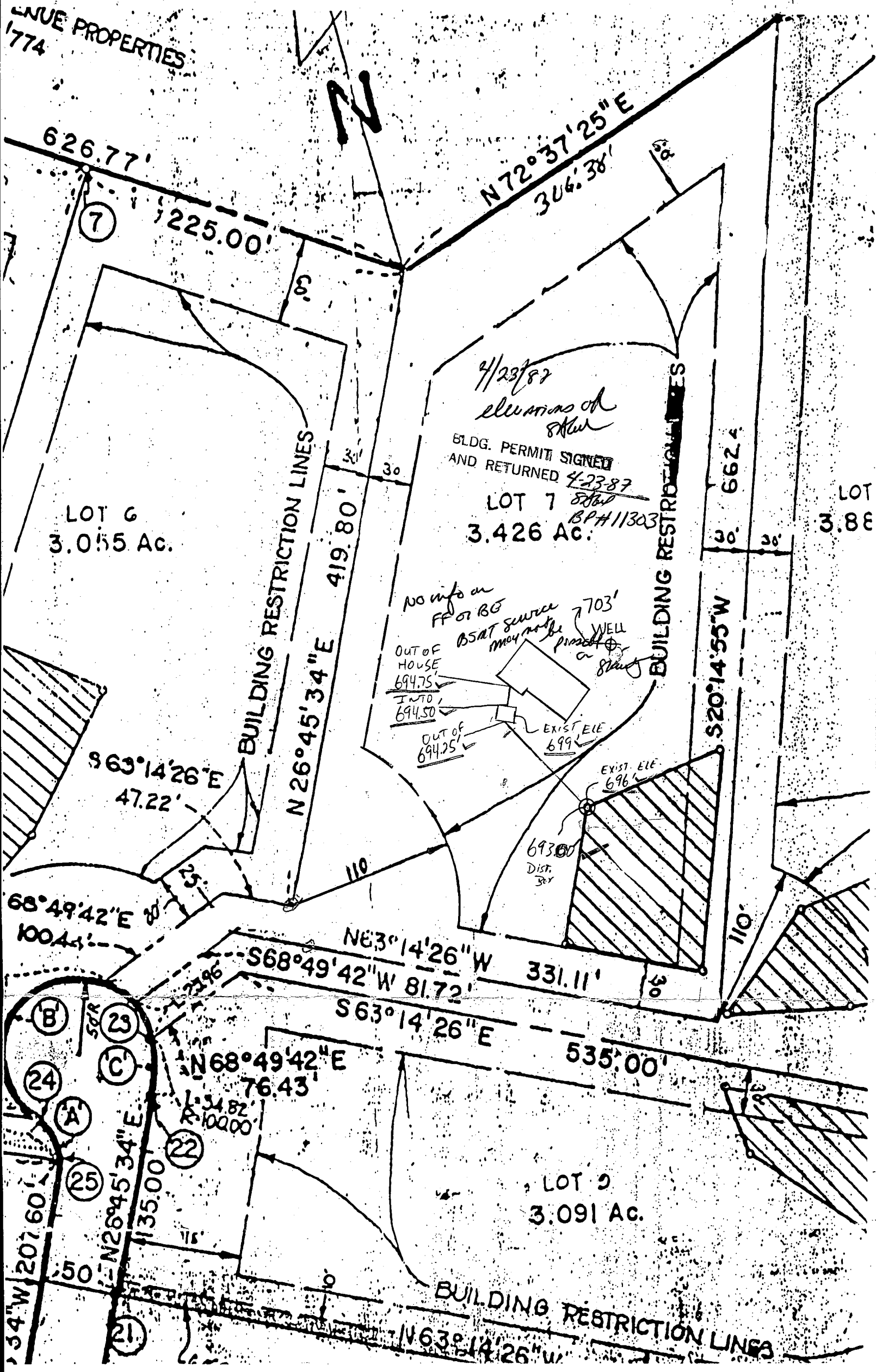
BUILDING RESTRICTION LINES

N63°14'26" W

BUILDING RESTRICTION LINES

Puckett
551-3877
7612 Fairbanks Ct.
Hanover MD
21076

LANUE PROPERTIES
1774



LOT 6
3.055 Ac.

4/23/87
elevations of
BLDG. PERMIT SIGNED
AND RETURNED 4-23-87
LOT 7
3.426 Ac.
BPH11303

LOT
3.88

LOT 9
3.091 Ac.

No info on
FF or BG
OUT OF HOUSE
694.75'
INTO
694.50'
OUT OF
694.25'
EXIST. ELE
699'
EXIST. ELE
696'
7703'
WELL
DIST. 30'

BUILDING RESTRICTION LINES

BUILDING RESTRICTION LINES

BUILDING RESTRICTION LINES

(B)
(23)
(C)
(24)
(A)
(25)
(21)

B 1 5273

SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND PERMIT TO DRILL WELL

OEP PERMIT NUMBER

40-81-1605

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

please print or type

fill in this form completely

Date Received

8 13

OWNER INFORMATION

PURKITT F DAVID
7612 FAIRBANKS COURT
HANOVER MD 21076

B 3

LOCATION OF WELL

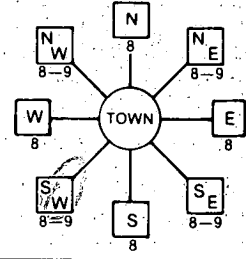
HOWARD
PATAPSCO OVERLOOK
SECTION 1 LOT 7
WOODBINE
MILES FROM TOWN 1 MI

DRILLER INFORMATION

Driller's Name: [Signature] License No. 239
Firm Name: W.H. DRILLING
Address: 5512 Ridge Rd. Mt. Airy, Md. 20854
Signature: [Signature] Date: 6/30/86

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Patapasco overlook court NEAR WHAT ROAD

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)



200 DISTANCE FROM ROAD

ENTER FT or MI 17

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)

- HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

HOWARD COUNTY NAME A 31150 COUNTY NO.
OEP SIGNATURE B Nolon DATE ISSUED 01/24/87
NORTH GRID 553000 EAST GRID 0777000

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN
AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)
CABLE REVERSE-ROTARY DRIVE-POINT

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)

- THIS WELL WILL NOT REPLACE AN EXISTING WELL
THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
THIS WELL WILL DEEPEM AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

Not to be filled in by driller (OEP USE ONLY)

APPROP. PERMIT NUMBER GAP

FORCE [Signature] PERMIT No. 40-81-1605

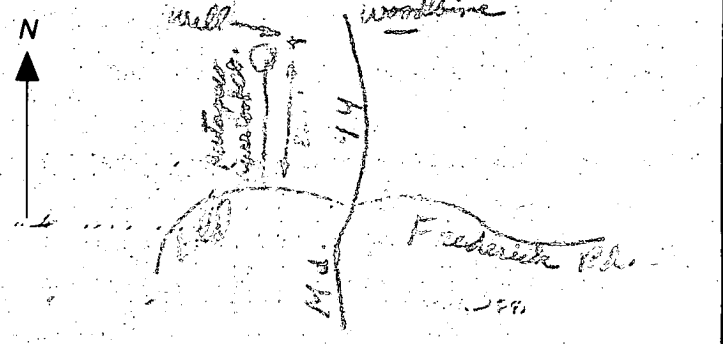
SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

60' casing 1' above n 50'-open
WRITE THE BOX NUMBER FROM THE MAP HERE
13
left site 10 bags
point not finished well
8/19/86

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION



C1 5236 SEQUENCE NO. (OEP USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-8 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-31150

DATE Received [] [] [] [] [] [] DATE WELL COMPLETED 05/17/56
 Depth of Well 22 1/2 (TO NEAREST FOOT)
 PERMIT NO. MD-81-1605

OWNER RUCKETT DAVID
 STREET OR RFD DATAPSCO OVERLOOK CT. TOWN WOODBINE
 SUBDIVISION DATAPSCO OVERLOOK SECTION 1 LOT 7

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	
Basin shale	0	54	
Blue rock	54	245	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO
 TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY

CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS 137 NO. OF POUNDS 1222
 GALLONS OF WATER 13
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 52 ft.

CASING RECORD
 casing types insert appropriate code below
 ST CO STEEL CONCRETE
 PL OT PLASTIC OTHER

MAIN CASING TYPE SC
 Nominal diameter top (main) casing (nearest inch) 60
 Total depth of main casing (nearest foot) 60

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

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

DEPTH (nearest ft.)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
40																				
23	24	26	30	32	36	38	39	41	45	47	51									

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. 258
 DRILLERS SIGNATURE [Signature]

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

SLOT SIZE 1 2 3
 DIAMETER OF SCREEN [] [] [] (NEAREST INCH)
 GRAVEL PACK from [] to []
 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.) 70 [] 72 [] WQ 74 [] 75 [] 76 []

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

PUMPING TEST
 HOURS PUMPED (nearest hour) 3
 PUMPING RATE (gal. per min. to nearest gal.) 16 1/2
 METHOD USED TO MEASURE PUMPING RATE []
 WATER LEVEL (distance from land surface) BEFORE PUMPING [] WHEN PUMPING []

TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

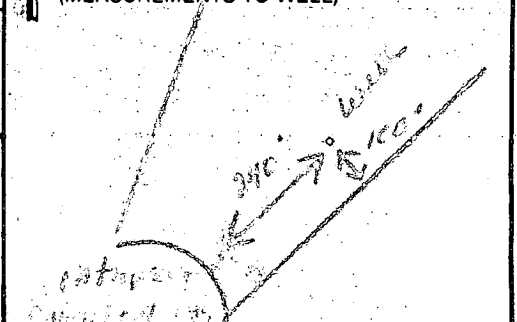
PUMP INSTALLED

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: 26

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 (nearest foot)
 - below }

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)



APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

Howard County Health Department
 Bureau of Environmental Health
 3525-H Ellicott Mills Drive
 Court House Square
 Ellicott City, Md. 21043
 461-9933

9/14/87
 partial WPI
 OK to cover
 line

New Installation
 Replacement

Receipt # 39672
 Date 7/14/87

Name of Installer George Baker

Telephone 788-3080

License number 2214
 Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner PICKETT Telephone _____
 Subdivision Patapsco Overlook Lot # _____ Well tag # HO-81-1605
 Site Address 16119 Patapsco Overlook
Lisbon, MD, 21165

Pump
 1. Type
 a. Deep well jet _____
 b. Shallow well jet _____
 c. Submersible _____
 2. Make _____
 3. Model # _____
 4. Capacity _____ GPM
 5. Pump exceeds well capacity Yes _____ No _____
 6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Motor
 1. Horsepower _____
 2. RPM _____
 3. Voltage _____
 a. 110 _____
 b. 220 _____

Pitless Adapter
 1. Make _____
 2. Model # _____
 3. Depth 40"

ground wires unmounted

Tank
 1. Capacity _____
 2. Pressure relief valve? _____

Piping
 1. Type _____
 2. Size 1" black
 3. NSF and/or BOCA Code approved _____
 4. Depth of supply line = 40"

Well data
 1. Depth _____ ft.
 2. Yield _____ GPM
 3. Static water level _____ ft.
 4. Will water supply be disinfected by installer? _____

9/14/87
 not in file

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.

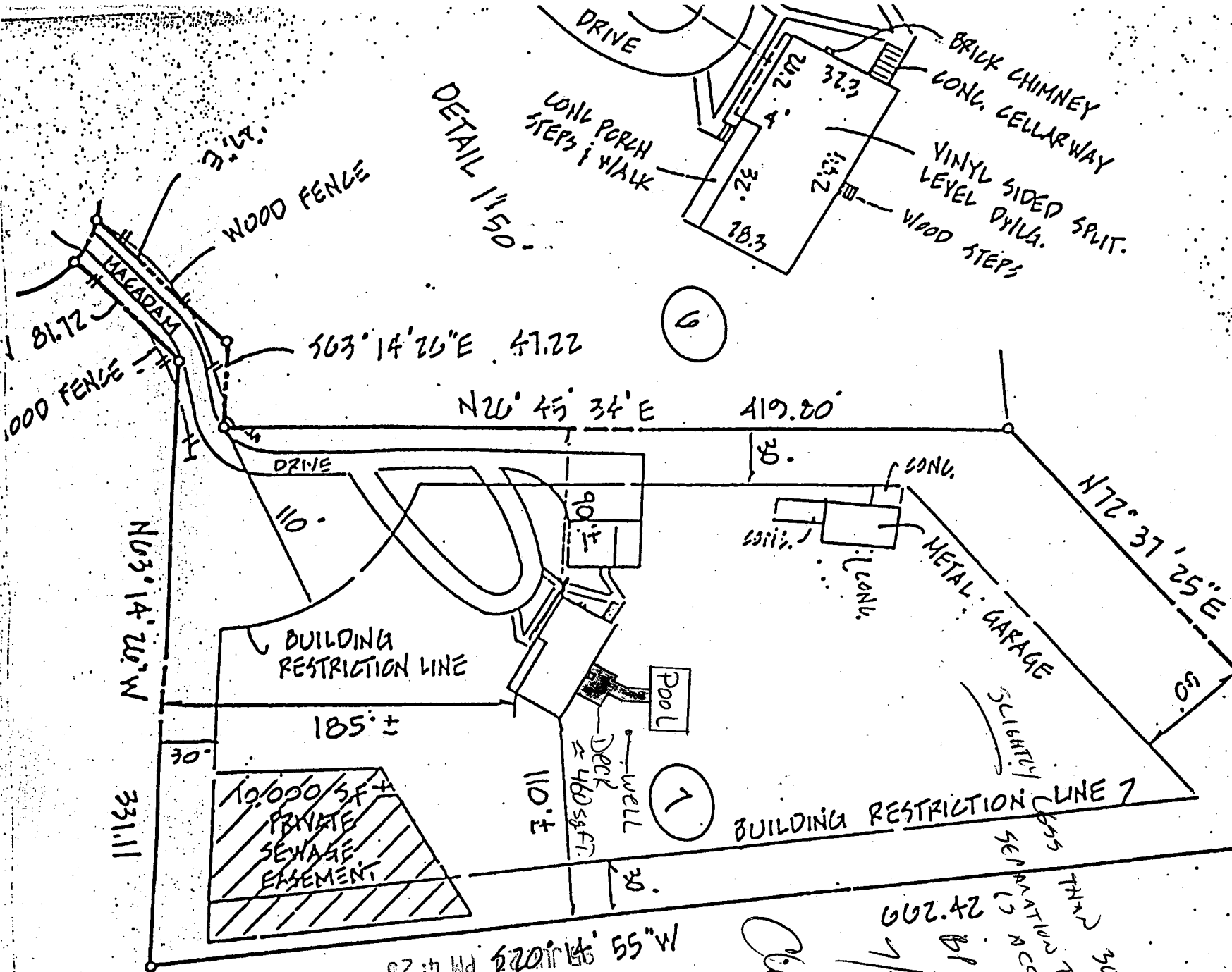
Signature of Applicant: George Baker

Date: 7-8-87

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

Well is 22' From Pool
And 24' From Corner of Deck

3525H



DETAIL 1/150

6

7

M.55 9/10/03 PM 4:25

RECEIVED
HORDON COUNTY
HEALTH DEPT.

30' RAMP
RECEIVED
FOR APPROVAL
9/21/95
[Signature]