

Approved 9/24/81
Stayed P 31623
A 31228

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

05-375223

ELLICOTT CITY

DISTRICT 5th

INDEX

DATE 9/23/81

W. W. King

IS PERMITTED TO INSTALL ALTER

ADDRESS 8097A Hillmark Court, Frederick, Md. 21701 PHONE 662-6990

SUBDIVISION Fox Haven ROAD 14085 Route 108 LOT 12

PROPERTY OWNER Robert and Susan Bard

ADDRESS 11119 Willow Bottom Drive, Columbia, Md. 21044

SPECIFICATIONS 3 bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

DRY WELL SEEPAGE PITS ABSORBENT SIDE-WALL AREA 120 SQ. FT. per bedroom.

INLET PIPE 3-3 1/2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 10-10 1/2 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

Locate dry well 50 feet from the left (S 54° 26' 29" E) lot line and 387 feet up from the left rear corner point of lot as seen when facing the lot from common right-of-way.

PLANS APPROVED BY Charles B. Streaker DATE 4/3/81

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 15 FOOT IN DIAMETER.

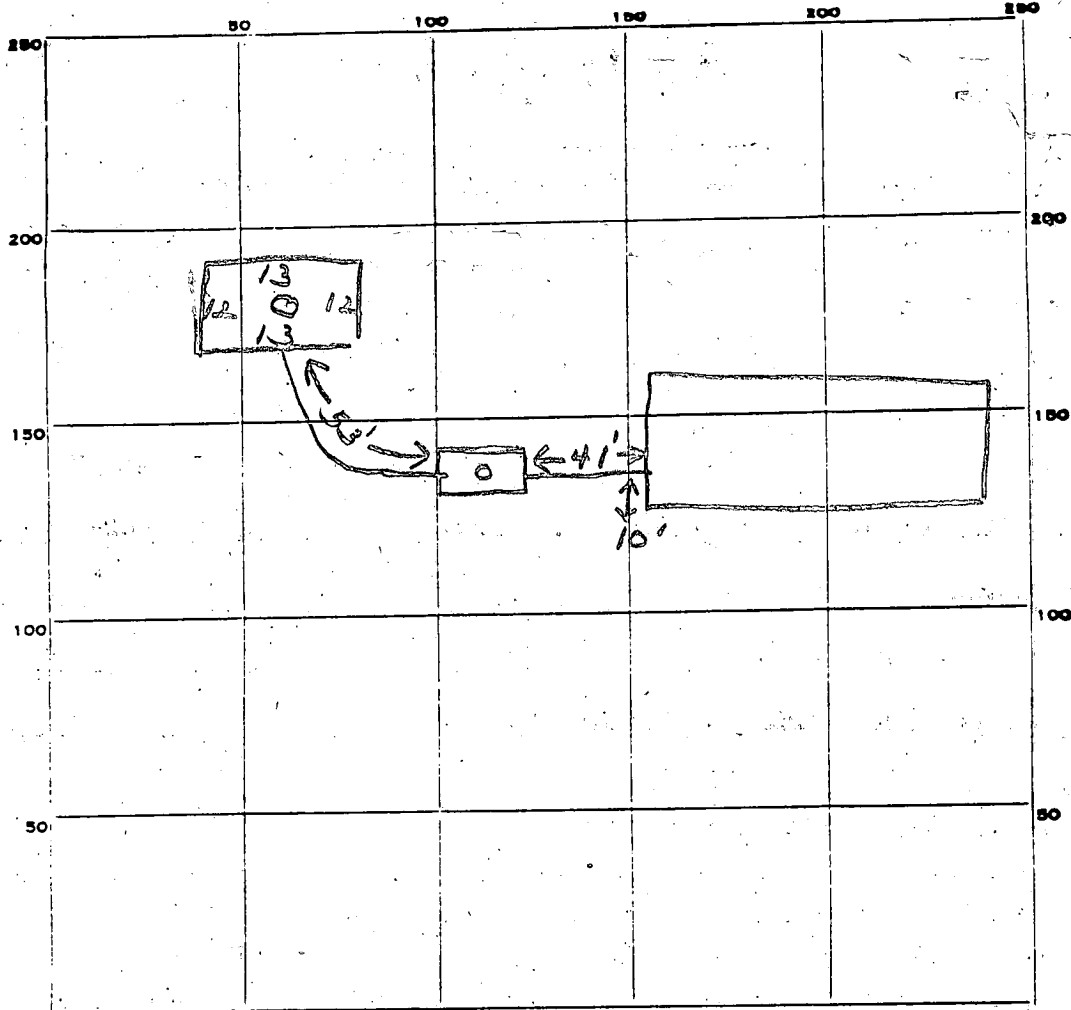
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 3/22/88



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

26
24

PERMIT CARD

SEPTIC TANK, LEVEL

CLEANOUTS ST/DW
 cast iron

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH _____ FT. TRENCH WIDTH _____ FT.

GRAVEL DEPTH _____ IN. TOTAL LENGTH _____ FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA _____

7.5
50

3750

SEEPAGE PITS, INSIDE DIAMETER 50 FT. DEPTH BELOW INLET 7.5 FT.

ABSORBENT AREA 375 SQ. FT.

REMARKS 9/24/81 - OK to cover all work

DATE SYSTEM APPROVED 9/24/81 INSPECTOR Stayer

Date Received (WRA use only) JUNE 30 1981 PERMIT NO. FROM "PERMIT TO DRILL WELL" **H0-73-3900**
 DATE WELL COMPLETED Depth of Well 425 (TO NEAREST FOOT)

OWNER Bard Bob & Sue
 last name first name
 STREET OR RFD 14085 Md. Rte 108 TOWN Highland
 SUBDIVISION Fox Haven SECTION 2 LOT 12

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	
BROWN SHALE	0	70	
BROWN SLATES	70	425	

GROUTING RECORD
 WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N
 TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE-CLAY BC
 NO. OF BAGS 18 NO. OF POUNDS 1692
 GALLONS OF WATER 108
 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 77 ft.
48 TOP 52 ft. 54 ft. 58 BOTTOM (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE S T Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 78

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

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

DEPTH (nearest ft.) 77 425

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 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 IDENT. NO. 139
Robert Plone
 DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
John Plone
 SITE SUPERVISOR (sign of driller or journeyman responsible for sitework if different from permittee)

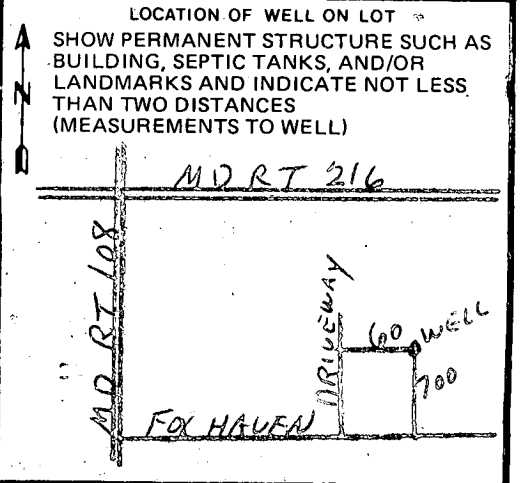
SLOT SIZE:
 DIAMETER OF SCREEN (NEAREST INCH) from to

GRAVEL PACK
 IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX F

WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER)
 T (E.R.O.S.) 70 72 W Q 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 (seq no)
PUMPING TEST
 HOURS PUMPED (nearest hour) 1
 PUMPING RATE (gal. per min. to nearest gal.) 1
 METHOD USED TO MEASURE PUMPING RATE TIME
 WATER LEVEL (distance from land surface) BEFORE PUMPING 40 WHEN PUMPING 425
 TYPE OF PUMP USED (for test) A jet 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) Y N
 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 1 (nearest foot)



B 1 **6240** SEQUENCE NO. WRA USE ONLY
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

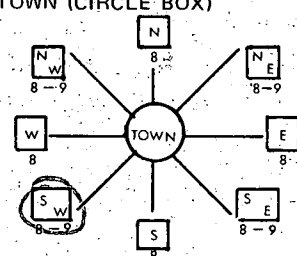
STATE OF MARYLAND
APPLICATION FOR PERMIT TO DRILL WELL
please print or type

WRA PERMIT NUMBER
40-73-3900
fill in this form completely

DATE RECEIVED **4/27/81**
8 (WRA USE ONLY) 13
6/9/81
6/30/81
9/30/81
NO. 9 MUDDY ROAD C.B.D.
OWNER INFORMATION
Bob & Sue
LAST NAME OWNER FIRST NAME
11119 Willow Bottom Drive
36 STREET OR RFD 55
Columbia, Md. **21044**
TOWN 57 STATE 76 ZIP

B 3 LOCATION OF WELL
1 2 3 6
COUNTY **Howard** 21
SUBDIVISION **Fox Haven** 42
SECTION **12** 44 46 48 50
NEAREST TOWN **Highland** 52 71
MILES FROM TOWN (enter 0 if in town) **2** 73 76 77 78 **M I**

B 1 CONTINUED DRILLER INFORMATION
Robert L. Cline **139**
DRILLER'S NAME 77 LICENSE NO. 80
Robert L. Cline **4-24-81**
SIGNATURE DATE

B 4
1 2 3 6
DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

11 **14085 Route 108** 30
NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST EAST SOUTH NORTH
32
34 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) 37 **M I**
38-39

B 2 WELL INFORMATION
1 2 3 6
APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **300** 14 20

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)

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX
18 Bags of Cement P.W.D.
78' Well Case P.W.D.
4 1/2' Well Head P.W.D.
1 1/2' Case above ground C.B.D.
WRITE THE BOX NUMBER FROM THE MAP HERE

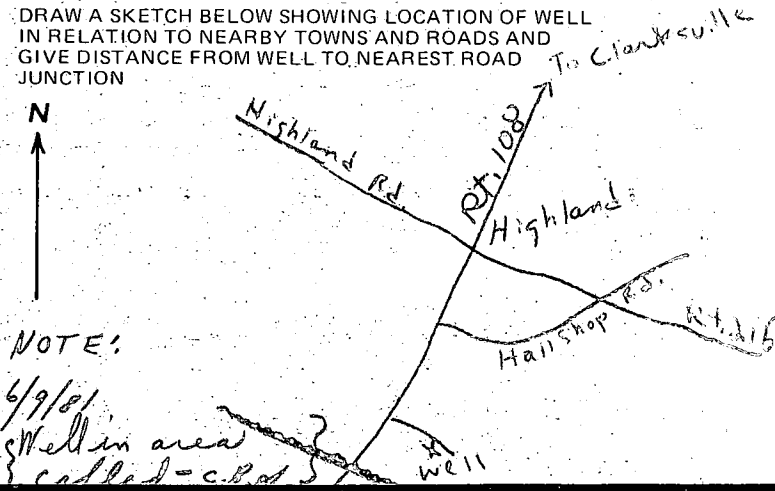
E	800	8
N	480	4

000
000

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

Method of Drilling (circle one)
BORED (OR AUGERED) JETTED JETTED & DRIVEN
30- AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC) ROTARY
37 CABLE REVERSE ROTARY DRIVE POINT
other

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 DEEPEMED AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52



Not to be filled in by driller (WRA USE ONLY)
APPROX. PERMIT NUMBER **GAP**
WRITE INITIALS CONDITIONS **AEINS GWQC L U**
FORCE IN BOX 67 68

B 4 NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard **221590**
COUNTY NAME COUNTY NO.
EHA SIGNATURE **Frank Skinner, Sanitarian** STATE HEALTH CIRCLE BOX 41
Frank Skinner
MO DAY YR **7 27 81**
43 48 CO SIGNATURE DATE
NORTH **4804** EAST **0808** ELEV. (FT.)
GRID 50 55 GRID 57 63 65 68

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

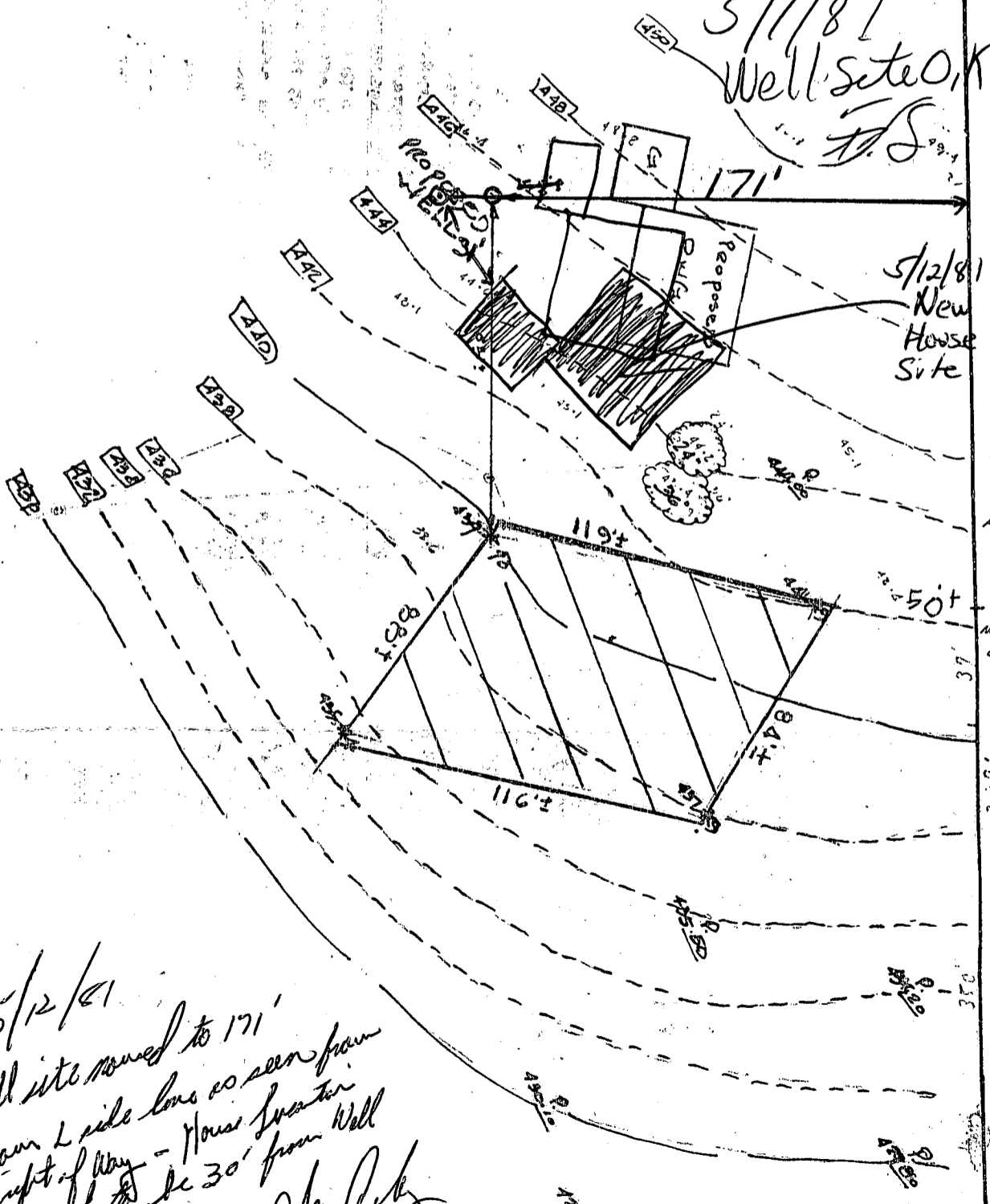
LOT 11

S 54° 26' 29" E

LOT 12
8.99 AC.
FOX HAVEN
RETEST
UNSIGN ENP
COPY

N 36° 38'

5/1/81
Well site OK
T.S.



5/12/81 AM.
Hold-house
plan review
shows
change
in location
of house for
well T/C to Mr. Beck
owner.
They are
to change
well site location
& distances
in field
to @ least:
30' from house
15' from road
100' from other
C.B.D.

5/12/81
Well site moved to 171'
from L side line as seen from
right of way - House location
moved to be 30' from Well
as noted
[Signature]

APPLICATION

Relist
4/3/81 New location

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 31228

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT 5th

DATE 3/13/81

*50' off left property line
(See attached specs on sheet)*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

BLDG. PERMIT SIGNED
AND RETURNED 4/30/81
Serial # 46578

I HEREBY APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM

PROPERTY OWNER Richard Hallowell

ADDRESS Highland, Md. 20777 PHONE 286-2988

PROPERTY LOCATION:

SUBDIVISION Fox Haven LOT NO. 12

ROAD AND DESCRIPTION Route 108 - east side - first private road approximately 400 ft. North
of Patuxent River

SIZE OF LOT 8.990 acrs TYPE BLDG. 3 or 4 bedrooms

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 *Virginia Belmont agent for Rm Hallowell*

APPROVED *C.B. Stricker* FOR *Dry Well* DATE *4/3/81*

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING *for certified holes of perc; house site
+ well site locations. c.s.s. 4/6/81 send certified hole
memo.*

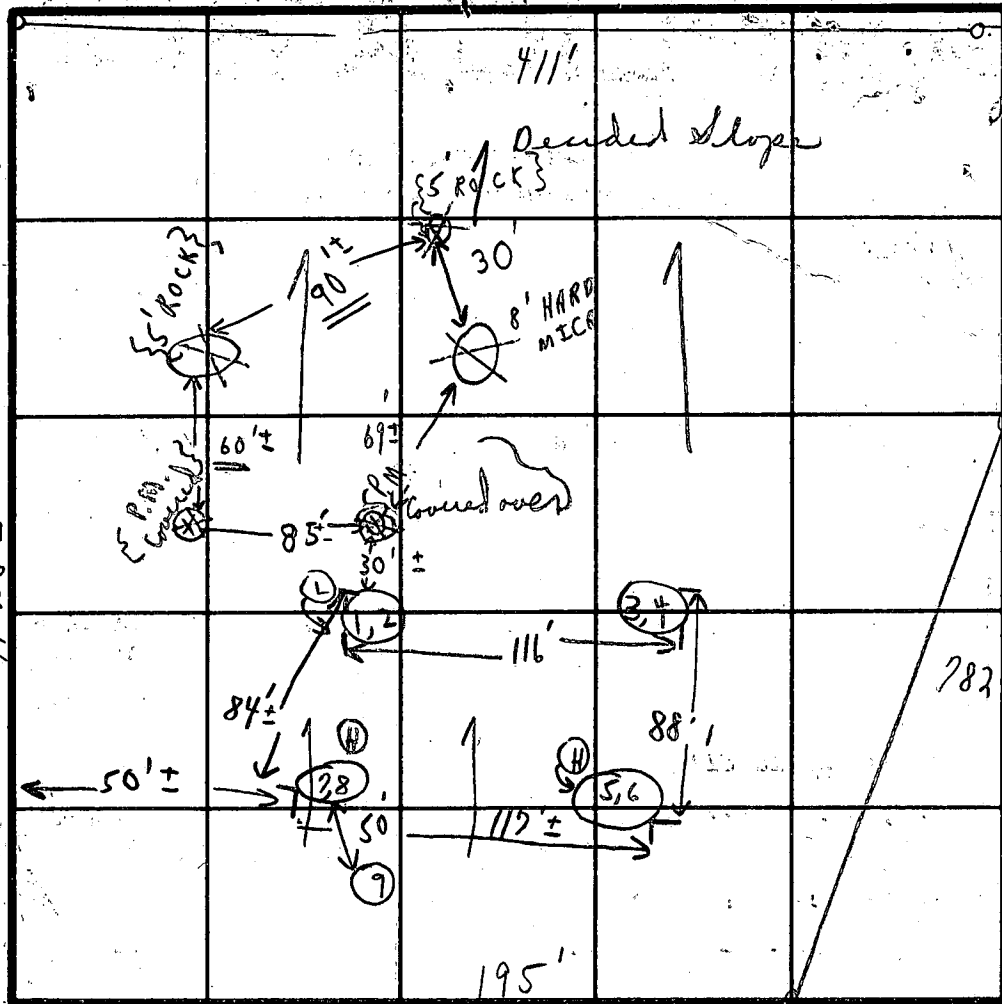
THIS IS NOT A PERMIT

WAITED 1.5
ON TREES
TODAY 70
10350
HOLES
P.M.

#12
FOXNAVEN
RETEST
SOIL PROFILE

SEE
EACH
HOLE
BELOW

FIELD SHEET



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

R/W

41
52
7/360
35
1013

SOIL PROFILE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/3/81 { P.M.	1	2 1/2'	12:33	12:35	12:35	12:37	2 in
	2	7'	12:33	12:34	12:34	12:35	1 in
	3	3'	1:07	1:09	1:09	1:13	4 in
	4	13'	:(LO AM + DIRTY)				
	5	3 1/2'	1:27	1:31	1:31	1:38	7 in
	6	8'	1:30	1:32	1:32	1:39	7 in
	7	3'	2:25	2:27	2:27	2:31	4 in
	8	9' ±	2:25	2:28	2:28	2:30	2 in
	9	12'	Visual		DUG OUT OF CONFIRMATION AREA		ION 3

Outlet
3' Below
grade
Depth
3'-10'
Dry
Well
120 yd
Bedroom

ION 3
DETERMINED

MACHINE LEAKING OIL @ 1:43. Stopped DOWN TIL 2:11

REMARKS (HEAVILY WOODED LOT) (HOLD FOR CERTIFIED HOLES)

TYPE OF SOIL A.M. = 3 Rock holes (2) HOUSE SITE + WATER WELL

TESTED BY C.B. SCOTT WILLIAMS ALSO PRESENT
(REP. OF YANKEE BARN) } FLOCK'S MAN SKIP
MRS. HEWITT ROBERT
OWNER'S MR. + MRS. BARD P.M.

Recorded

Liber 713, Folio 368

APPLICATION

A 21590

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT 5th

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

DATE 6/2/75

3 B.R. 1000 gal. septic tank | *4 B.R. 1250 gal. septic tank*
 Drywell to have 120 sq. ft. effective sidewall absorption area per bedroom, to begin below the first 4 ft. of non-porous soil. Maximum depth permitted for drywell is 12 ft. below original grade. Locate the drywell 235 ft. from the front property line, and 35 ft. from the left side line, as seen when facing the property from the right-of-way. See retest A 31228

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 Richard Hallowell

ADDRESS Highland, Md. 20777 PHONE 286-2988

PROPERTY LOCATION: Highland, Md.

SUBDIVISION (Fox Haven) LOT NO. 12

ROAD AND DESCRIPTION Off E. side of Rt 108 on first private road approx. 400' N. of Patuxent River

SIZE OF LOT Parcel ¹² ~~XX~~ 8.990 ac 713/368 TYPE BLDG. re. 4 bedrms
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 Richard Hallowell
Richard Hallowell

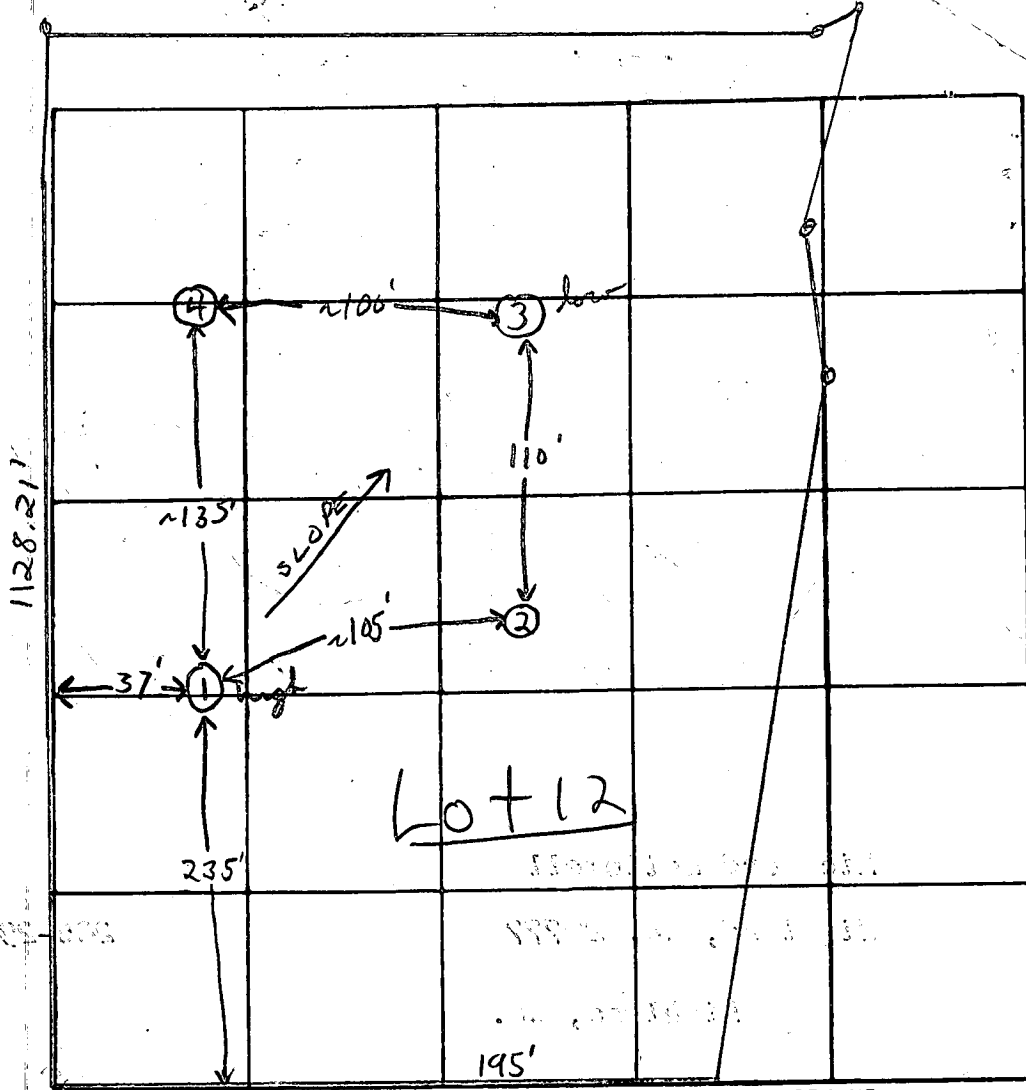
APPROVED BY Frank Skinner FOR Drywell DATE 1/22/76
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
6/4/75	1 high	5'	11:21	11:24	11:24	11:30	6 min	
	1A	12 1/2'	11:21	11:25	11:25	11:31	6 min	
	2	5'	11:25	11:26	11:26	11:28	2 min	
	2A	12 1/2'	11:25	11:28	11:28	11:32	4 min	
	3 low	5'	11:35	11:37	11:37	11:42	5 min	
	3A	12 1/2'	11:35	11:40	11:40	11:47	7 min	
	4	11'	Visual, clayey to 5'; mica lean below					

120 SQ. FT / B.A.
invest 4 ft.

REMARKS

TYPE OF SOIL mica lean below top 3-5' clay and silty clay lean

TESTED BY F.S.

ALSO PRESENT: J. Fyock & Co.

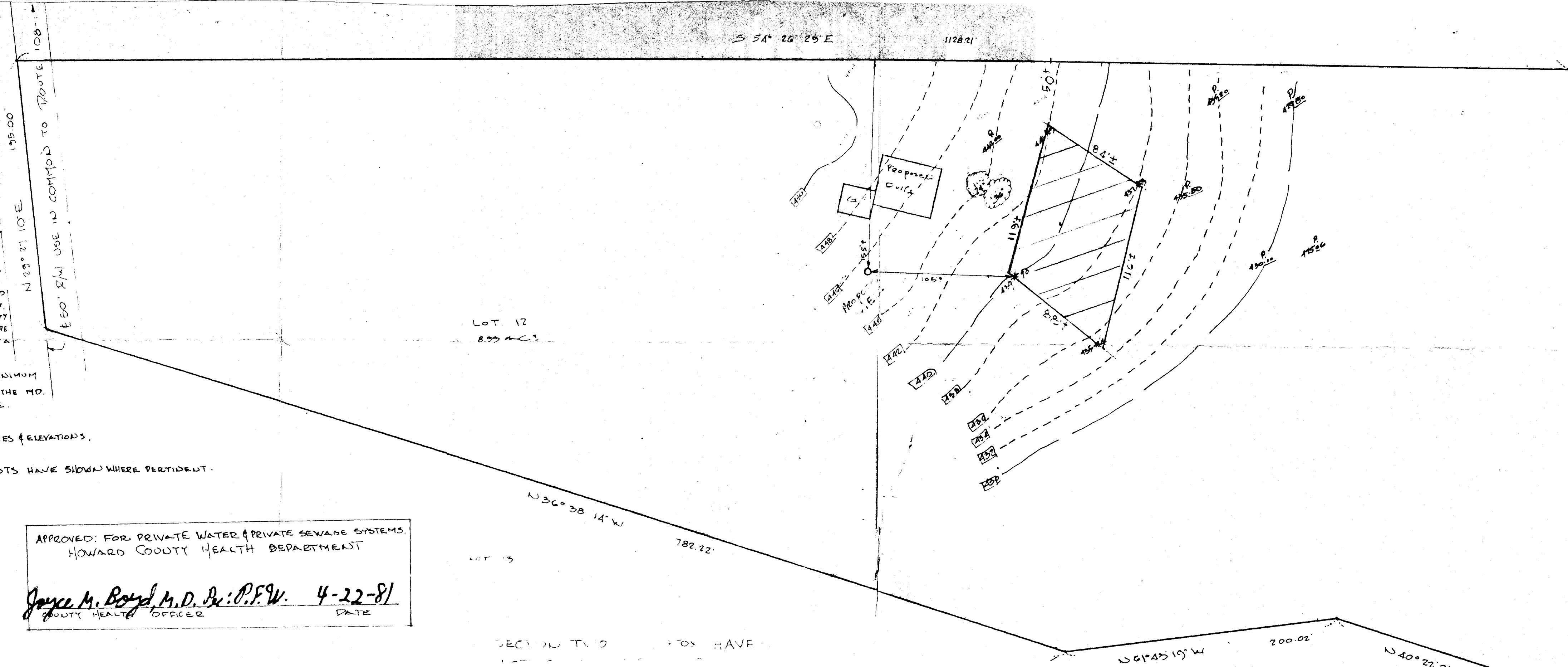
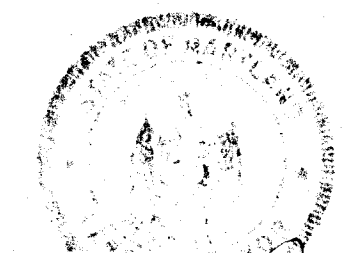
THIS DESIGNATES A PRIVATE SEWAGE EASEMENT OF APPROX. 10,000' AS REQUIRED BY THE MO STATE DEPT. OF HEALTH & MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THIS EASEMENT SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED EASEMENT SHALL NOT BE NECESSARY.

THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH & LOT AREA AS REQUIRED BY THE MO. STATE DEPT. OF HEALTH & MENTAL HYGIENE.

AS SHOWN DESIGNATES FIELD LOCATED PERC HOLES & ELEVATIONS.

PERC AREAS & WATER WELLS FOR ADJOINING LOTS HAVE SHOWN WHERE PERTINENT.

APPROVED: FOR PRIVATE WATER & PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPARTMENT
 Joyce M. Boyd, M.D. P.C. P.F.W. 4-22-81
 COUNTY HEALTH OFFICER DATE



411.72
 5 34° 21' 04" W

521° 03'