

10/10 - around noon -

APPROVED  
10/17/85  
RIT  
P 3608-7  
A 31722

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330

05-392896

ELLICOTT CITY  
DISTRICT 5th  
DATE 10/09/85

INDEXED

Andrew Snow IS PERMITTED TO INSTALL  ALTER

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SUBDIVISION Dunfretten Estates ROAD 13741 Pasture Green LOT 9

PROPERTY OWNER Jules Richa

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 2 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 2 1/2 feet below original grade. 6 feet of stone below distribution pipe. LOCATION: Start the trench at perc hole #1 which is located 370 feet from the front lot line and 170 feet from the left side of the lot as seen when facing the lot from Pasture Green. Run the trench toward the left side of the lot as seen when facing the lot from Pasture Green. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY C. Williams/R. Hodges DATE 5/16/83

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.

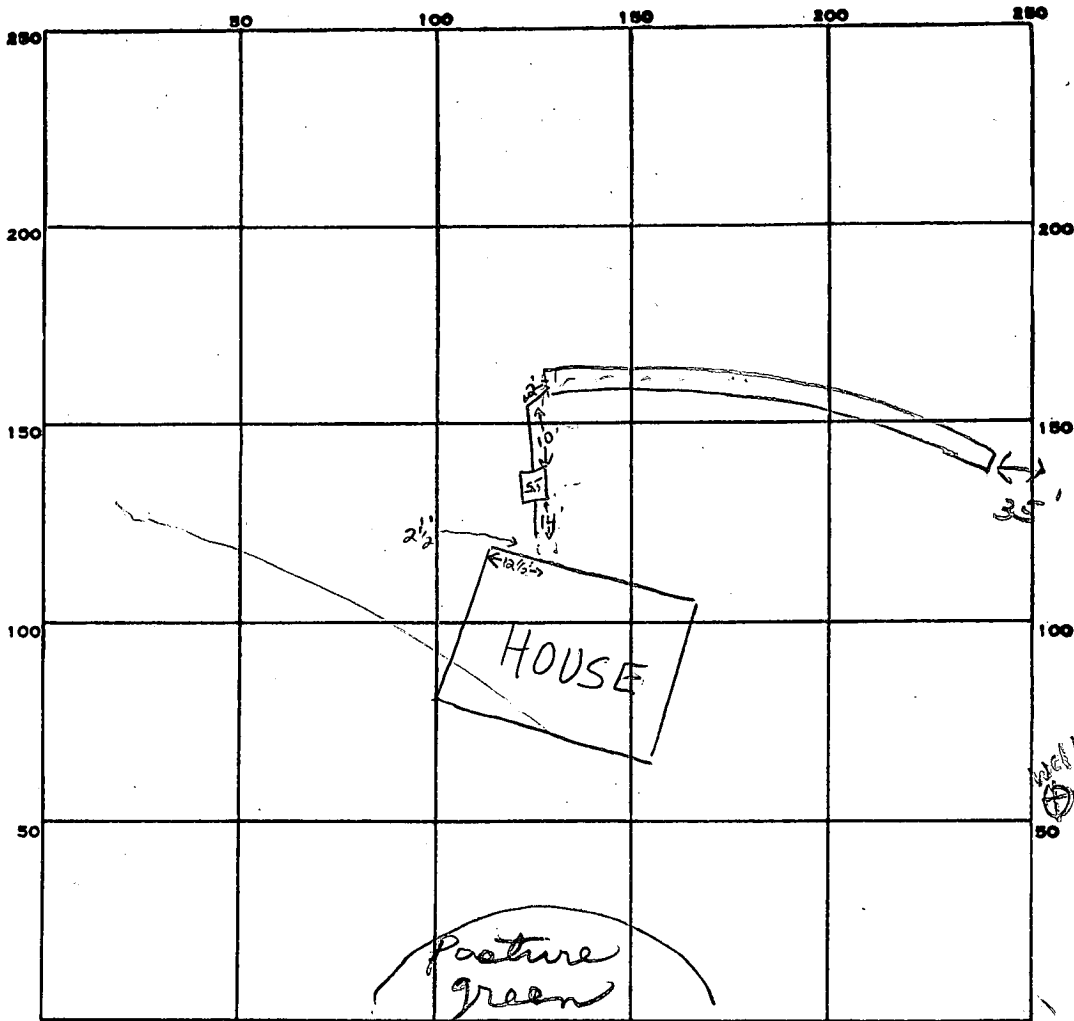
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

\*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A  
31222



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

158  
4  
632

PERMIT CARD  \_\_\_\_\_

SEPTIC TANK, LEVEL  \_\_\_\_\_

CLEANOUTS S.T.  
O.K.

DISTRIBUTION BOX, LEVEL n.a.

TILE FIELD, DEPTH 8 1/2 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 FT. TOTAL LENGTH 106 FT.

106  
6  
636

NUMBER OF TRENCHES 1 ONE SIDE  
TOTAL BOTTOM AREA

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA ±636 SQ. FT.

REMARKS 10-10-85 OK to add stone in trench

10-10-85 OK to cover trench

10/14/85 Must see house connection ~2 1/2 ft

10/17/85 - SEPTIC HOOK UP O.K.

DATE SYSTEM APPROVED 10/17/85

INSPECTOR Raymond Hooper

SUBDIVISION: DUNFRETTON ESTATES

LOT NUMBER: 9

DRY WELL OR DRY WELL AND TRENCH

125 sq. ft./bedroom

	<u>Septic Tank</u>	<u>Minimum Total square Feet</u>
3 bedroom	1000 gallon	_____
4 bedroom	1250 gallon	_____
5 bedroom	1500 gallon	_____

Inlet 2 1/2 feet below original grade.

Bottom maximum depth 9 1/2 feet below original grade.

Effective area begins at 2 1/2 feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with 6 feet of stone below distribution pipe.

TRENCHES

158 sq. ft./bedroom

Trench to be 2 wide.

4 Bed

Inlet 2 1/2 feet below original grade.

Bottom maximum depth 8 1/2 feet below original grade.

Effective area begins at 2 1/2 feet below original grade.

6 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
  - (2) If more than one trench used, a distribution box is required.
  - (3) Trenches to be installed on level ground.
  - (4) Call for inspection of trench before gravel is installed.
  - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
  - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: START THE TRENCH OR PLACE THE DRY WELL AT PERC  
HOLE #1 WHICH IS LOCATED 370 FT FROM THE FRONT  
LOT LINE AND 170 FT FROM THE LEFT SIDE OF THE LOT  
AS SEEN WHEN FACING THE LOT FROM PASTURE GREEN  
RUN THE TRENCH TOWARD THE LEFT SIDE OF THE LOT  
AS SEEN WHEN FACING THE LOT FROM PASTURE GREEN  
5116183011

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT,  
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 473, ELLICOTT CITY, MARYLAND 21043  
TELEPHONE: 992-2330

A 31722

P \_\_\_\_\_

DISTRICT 5th

DATE 11/24/81

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 S. Turner Nichols and James S. Nichols Ju' RICH

ADDRESS 13270 Triadelphia Mill Road PHONE 285-2993  
Clarksville, Md. 21029

PROPERTY LOCATION:

SUBDIVISION Dunfretten Estates LOT NO. #9

ROAD AND DESCRIPTION 13741 Pasture Green (Macadam)

SIZE OF LOT 3 Acres TYPE BLDG. \_\_\_\_\_ (NUMBER OF 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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

S. Turner Nichols - James S. Nichols  
(SIGNATURE OF APPLICANT)

APPROVED BY Raymond Hodge FOR Dry Keeton DATE 5/16/83

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 5/16/83 Green Wotton BH  
B.P. # 64431

# THIS IS NOT A PERMIT



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APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

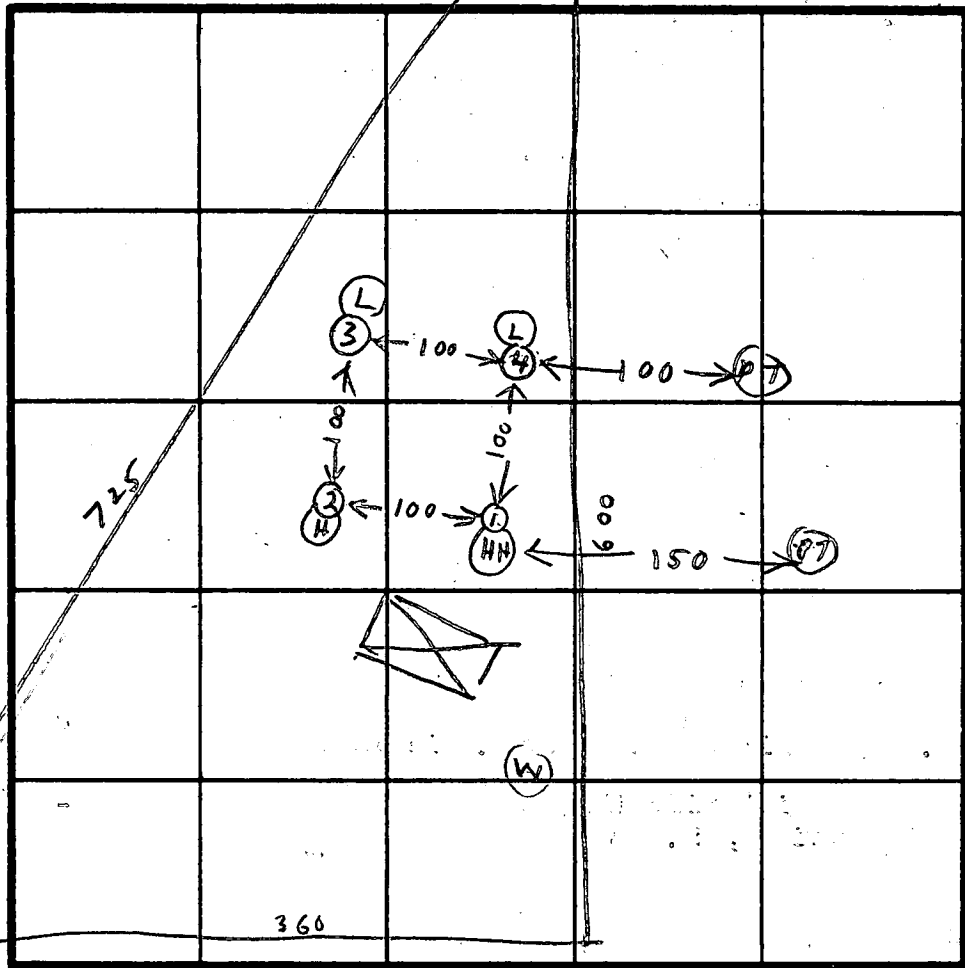
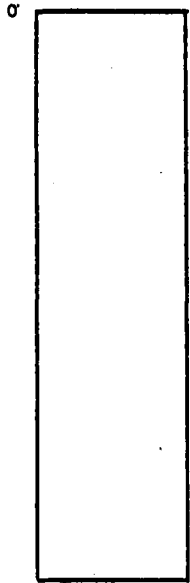
HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT

Sheet #9

SOIL PROFILE



Hole Elev  
 (HH) = Highest  
 (H) = High  
 (L) = Low

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME	
			START	STOP	START	STOP		
12/3/81	1S	4	1016	1017	1017	1020	3	
	1V	12 1/2	ALL	SANDY				
	2S	4	1020	1022	1022	1026	4	
	2V	12	TOP BUT	6 FT 6 FT	SAND SAND	& SMALL ROCKS	dry	
	3S	5	1029	1030	1030	1031	1	
	3V	12	ALL	SANDY				
	4S	4 1/2	1032	1033	1033	1036	3	
	4V	12	TOP BUT	2 FT 10 FT	CLAY SAND	& SMALL ROCKS	Run	

Autumn 3  
 March 1/2

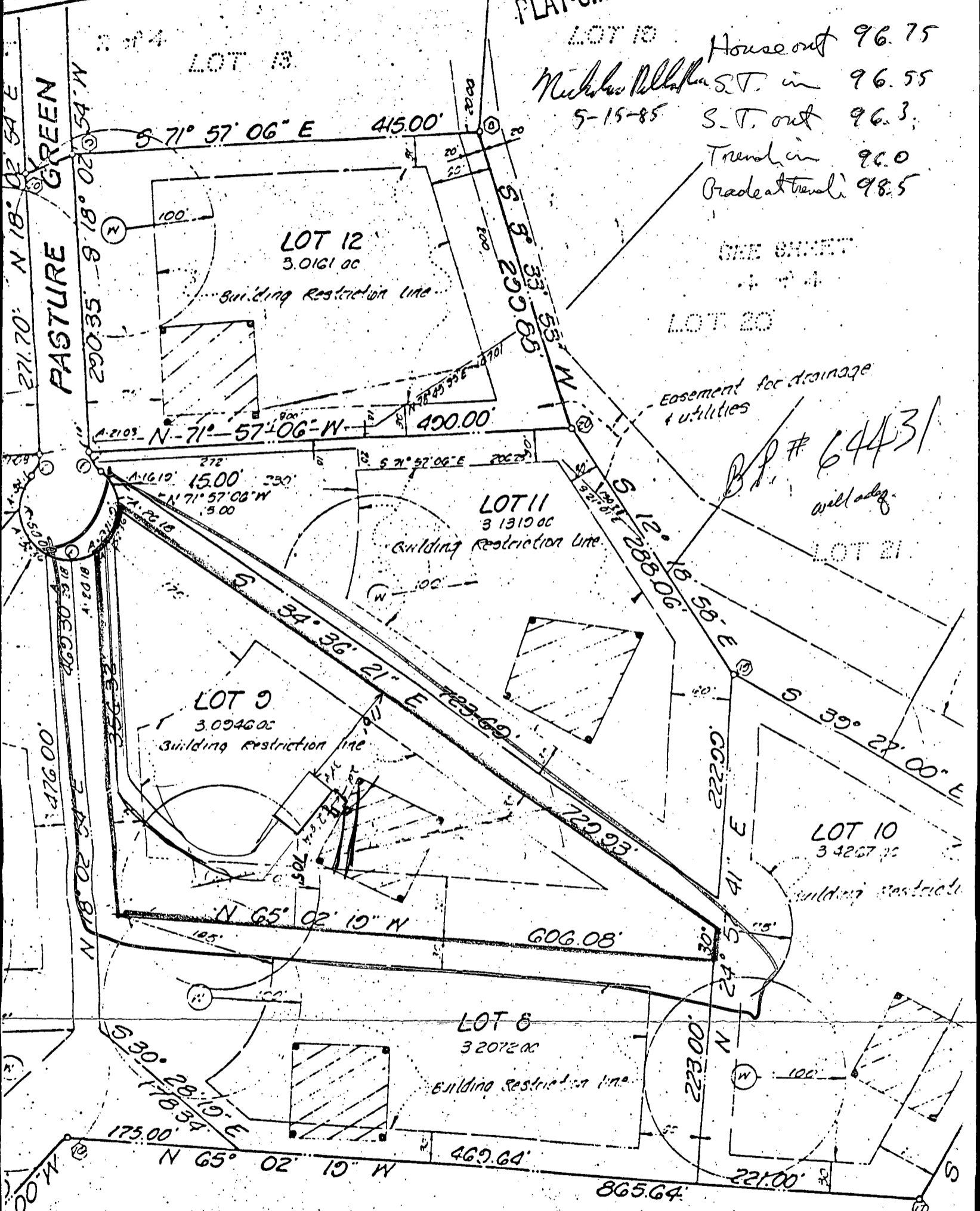
EH-12-1079

REMARKS \_\_\_\_\_

TYPE OF SOIL \_\_\_\_\_

TESTED BY R HODGES ALSO PRESENT ORNDORF NICHOLS

FLAT-C.M.P. NO. 5402



LOT 13  
 House out 96.75  
 Michael Peltava S.T. in 96.55  
 5-15-85 S.T. out 96.3  
 Trench in 96.0  
 Grade at trench 98.5

ONE SHEET

B.P. # 64431  
 well adq.

CHARLES RUPPERT JR. et al  
 L 187 F 012  
 L 447 F 567  
 L 707 F 908

Spec's & notes sent and elev's 53.85  
 variance petition

**CERTIFICATE**

**SURVEYOR**

I hereby certify that the property shown and described herein is correct and described herein as shown and described in the final plat by the approval of this map and grant of variance petition of JAMES

Spec's

B 1 **3273** SEQUENCE NO. (OEP USE ONLY)  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

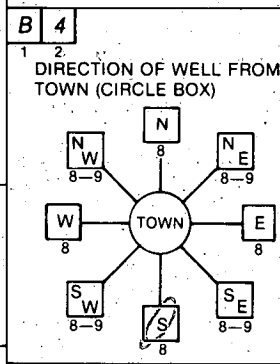
STATE OF MARYLAND  
 PERMIT TO DRILL WELL  
 2nd please print or type

OEP PERMIT NUMBER  
**40-81-0909**  
 fill in this form completely

Date Received **3/28/85**  
**022783** OWNER INFORMATION  
 15 Last Name **MILHA** Owner First Name **MILHA**  
 36 Street or RFD **631 FAIRWAY DRIVE**  
 57 Town **HOWSON** 70 State 72 **MD** Zip 76 **2104**

B 3 LOCATION OF WELL  
 8 COUNTY **HOWARD** 21  
 23 SUBDIVISION **DUNELTON** 42  
 SECTION **44** 46 LOT **9** 50  
 52 NEAREST TOWN **DAYTON** 71  
 MILES FROM TOWN (enter 0 if in town) **2 3/10** MI 73 76 77 78

DRILLER INFORMATION  
 Driller's Name **Joseph L. Magee** 77 License No. 80 **238**  
 Firm Name **Joseph L. Magee Well Drilling**  
 Address **5512 Ridge Rd. Mt. Airy, Md. 21111**  
 Signature **Joseph L. Magee** Date **2/25/85**



11 **Pasture Lane** 30 NEAR WHAT ROAD  
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  
 NORTH  WEST  EAST  SOUTH   
 34 **280** 37 DISTANCE FROM ROAD  
 ENTER FT or MI **FT** 38 39

B 2 WELL INFORMATION  
 APPROX. PUMPING RATE (GAL. PER MIN.) **5** 8 12  
 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) **500** 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 APPROVAL 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 **A31722** COUNTY NO.  
 OEP SIGNATURE \_\_\_\_\_ STATE HEALTH INSERT S  41  
 DATE ISSUED **030485** CO SIGNATURE **J. Stayer** EXP. DATE **9/4/85**  
 NORTH GRID **502000** 50 55 EAST GRID **0802000** 57 63

APPROXIMATE DEPTH OF WELL **200** 24 28 FEET

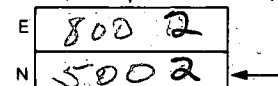
APPROXIMATE DIAMETER OF WELL **6** NEAREST INCH

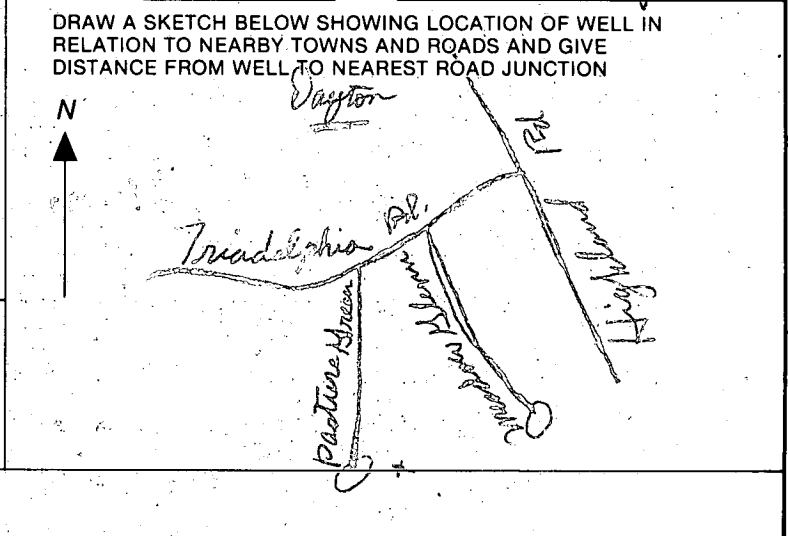
METHOD OF DRILLING (circle one)  
 BORED (or Augered)  JETTED  Jetted & DRIVEN  
 AIR-ROTary  AIR-PERcussion  ROTARY (Hydraulic Rotary)  
 CABLE  REVERSE-ROTary  Drive-POINT  
 other \_\_\_\_\_

REPLACEMENT OR DEEPEINED 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 DEEPEIN AN EXISTING WELL  
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) \_\_\_\_\_ 41 \_\_\_\_\_ 52

Not to be filled in by driller (OEP USE ONLY)  
 APPROP. PERMIT NUMBER \_\_\_\_\_ 54 **GAP** \_\_\_\_\_ 63  
 FORCE **JS** WRITE INITIALS IN BOX PERMIT No. **40-81-0909** 70 71 72 73 74 75 76 77 78 79

SPECIAL CONDITIONS

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X  
 SOURCES OF DRILLING WATER:  
 1. WELL  
 2.  
 3.  
 WRITE THE BOX NUMBER FROM THE MAP HERE  
  
**29' casing**  
**26' open**  
**6' bags cement**  
**3/28/85**





HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

PUMP INSTALLATION

THE FOLLOWING STATEMENT MUST BE COMPLETED BY THE HOME OWNER  
WHEN A PUMP IS INSTALLED BY A PERSON OTHER THAN THE WELL  
DRILLER:

My well driller is not to install the pump for my water well, and I  
hereby certify that it will be my responsibility to have a Pump Permit  
taken out by a registered master plumber or certified pump installer.  
It will be my responsibility to notify the Health Department before  
and during the installation so that inspections can be made by their  
representative. (Pursuant to Chapter XVII, of the Plumbing Code of  
Howard County.)

Jules A. Richa  
(Name)

631 Fairway Drive  
(Address) Towson, Md. 21204  
1-825-9377

HO-81-0909  
(OEP Well Permit Number)

2/25/85  
(Date)

*Lot 9 Dunfetter*

C1 3021 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

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

COUNTY NUMBER A 31722

DATE Received DATE WELL COMPLETED

Depth of Well (TO NEAREST FOOT) 165

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-81-0909

OWNER RICHARD PASTURE GREEN last name first name JULES TOWN DAYTON SUBDIVISION DUNFRETEN SECTION LOT 9

WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

Table with columns: DESCRIPTION (Use additional sheets if needed), FEET (FROM, TO), Check if water bearing. Rows include BROWN SHALE, Sand, BROWN SHALE, GRAY MICHA Rock.

GROUTING RECORD WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL CEMENT BENTONITE CLAY CEMENT BENTONITE CLAY NO. OF BAGS 6 NO. OF POUNDS 364

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE ST 6 29

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

SCREEN RECORD screen type or open hole insert appropriate code below ST BR HO PL OT

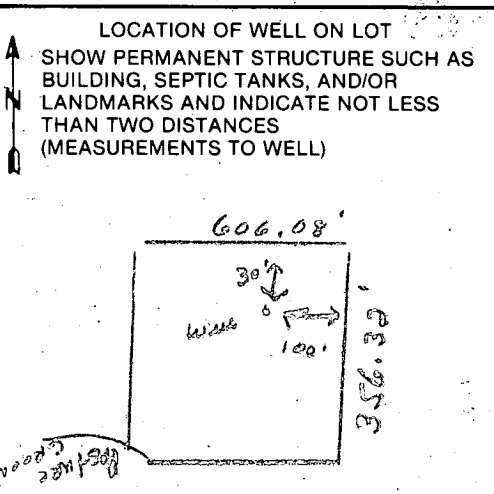
DEPTH (nearest ft.) HO 28 165 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK 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.) WQ TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 10 METHOD USED TO MEASURE PUMPING RATE bucket

PUMP INSTALLED DRILLER WILL INSTALL PUMP YES (NO) TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE (to nearest gallon)



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. 238

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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



10/17/85 - anytime

WELL PUMP INSPECTION

Owner's Name: Jules Ricka 825-9377  
Address: 631 Fairway Dr  
Towson 21204

LOCATION OF PROPERTY: 13741 Paster Green  
lot # 9 - Duntretten Estates  
WELL TAG NUMBER: H021 0909

PLUMBER OR CERTIFIED PUMP INSTALLER:  
Maske Plumbing & Heating  
John Maske  
Phone Number: 788-3289  
License Number: 3189

Receipt Number: 36098  
Date: 10/16/85

Comments: ① W

Inspection: ① Pitless adapter OK  
② Wires OK  
③ Pipes OK  
④ NO Pressure Tank Test  
10/17/85 R. Hodges

Date Well Pump Inspection Was Approved:

Inspector: