

8/5/86
A

05-392985

Approved
8/5/86
P 37452
A 31730

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

ELLCOTT CITY

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330
461-9933

INDEXED

DISTRICT 5th
DATE 8/4/86

C. C. Cissell IS PERMITTED TO INSTALL ALTER

ADDRESS 14079 Brighton Dam Road, Clarksville, MD 21029 PHONE 854-2006

SUBDIVISION Dunfretten Estates ROAD 13602 Meadow Glenn Road LOT 17

PROPERTY OWNER Thomas/Sherry Hackshaw

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 4 1/2 feet below original grade. Bottom maximum depth 9 1/2 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the trench 110 feet from the front lot line and 80 feet from the left side of the lot as seen when facing the lot from Meadow Glen. Run the trench toward per chole #4 which is located 130 feet from the front lot line and 70 feet from the left sideline as seen when facing the lot from Meadow Glen.

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. ok/cw

BLDG. PERMIT SIGNED
AND RETURNED 5/6/86
Serial # 11758
propene tank
DATE 5/23/83

PLANS APPROVED BY Raymond Hodges

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.

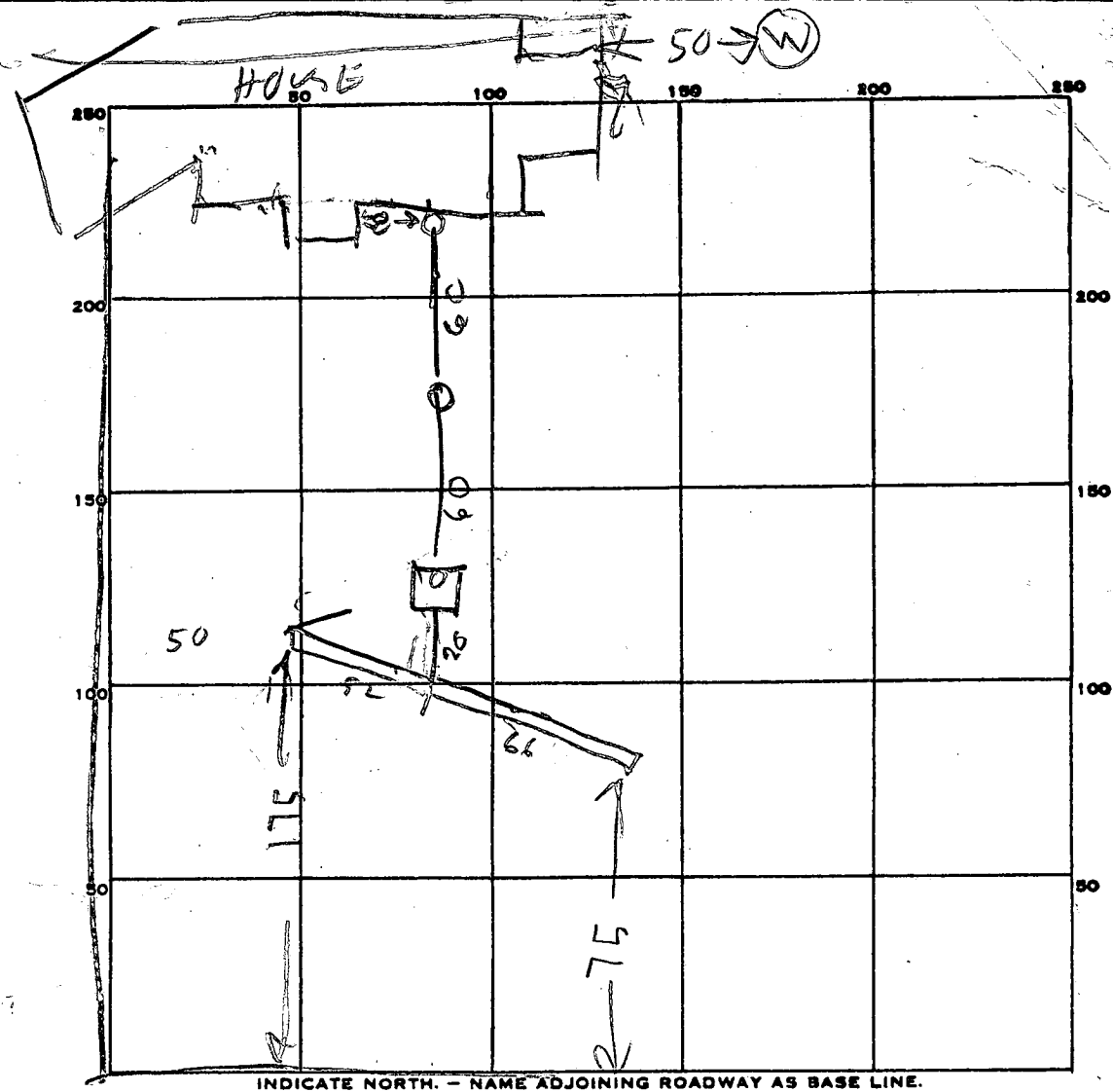
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA. OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED. Pat.

BLDG. PERMIT SIGNED
AND RETURNED 4/13/85
Serial # 17706

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

A 31730



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

MEADOW GLEN RD

PERMIT CARD _____

SEPTIC TANK, LEVEL 1500

CLEANOUTS OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 9.7 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 5 1/2 IN. TOTAL LENGTH 168 FT.

NUMBER OF TRENCHES _____ TOTAL BOTTOM AREA 649

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 8/5/86 LOCATED OK OK TO HAVE 5' x 5' STONE & EFFECTIVE DEPTH OF 4' FT EXTEND TRENCH TO ADD STONE, OK TO COVER TANK & HOUSE SEWER
8/5/86 TRENCH EXTENDED & STONE ADDED
 649 SQ FT INSTALLED 632 SQ FT REQUIRED

DATE SYSTEM APPROVED 8/5/86

INSPECTOR Raymond Hodel

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 31730
P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

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

ADDRESS 1370 Philadelphia Mill Rd PHONE 286-2993
Clarksville, Md. 21029

PROPERTY LOCATION:

SUBDIVISION Dunfretten Estates LOT NO. #17

ROAD AND DESCRIPTION Meadow Glenn (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 _____ FOR _____ DATE _____

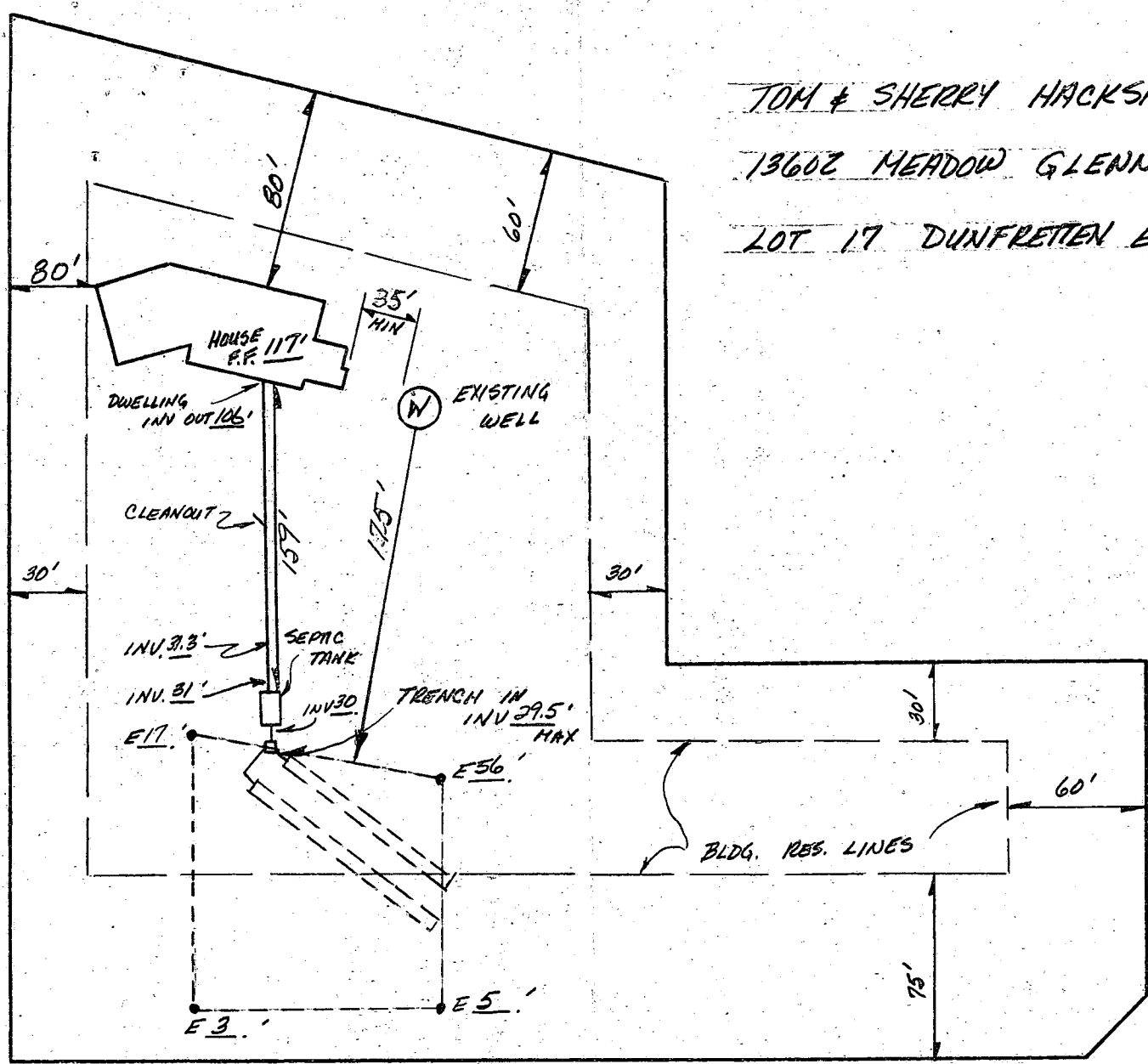
REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

TOM & SHERRY HACKSHAW
 13602 MEADOW GLENN
 LOT 17 DUNFRETEN ESTATES

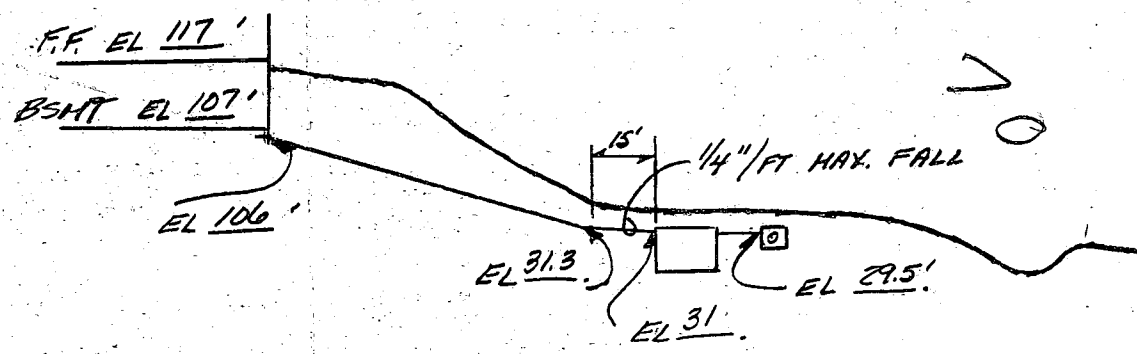


wells/cw.

Septic elev's & location
 or FF 3-11-86

TRENCH GRADE 34'
 - 29.5'

 4.5'



PLAT MAP NO. 5403

LOT 12

N 40° 08' 00" E 510.00'
247.77' 262.25'

LOT 1
NICHOLS
PROPERTY
PLAT BOOK 31
PLAT 23

TRIAD DELPHIA

LOT 17
3.0065 ac

LOT 18
3.0187 ac

Building Restriction Line

N 21° 14' 02" E 208.36'
105.36'

Mill
purpose dedicated to
public road

MEADOW
GLENN
S 24° 25' 56" N 439.00'
740.00'
580.00'
N 23° 45' 56" E 35.36'

LOT 25
3.0070 ac

15' easement for
drainage and
utilities

Building Restriction
Line

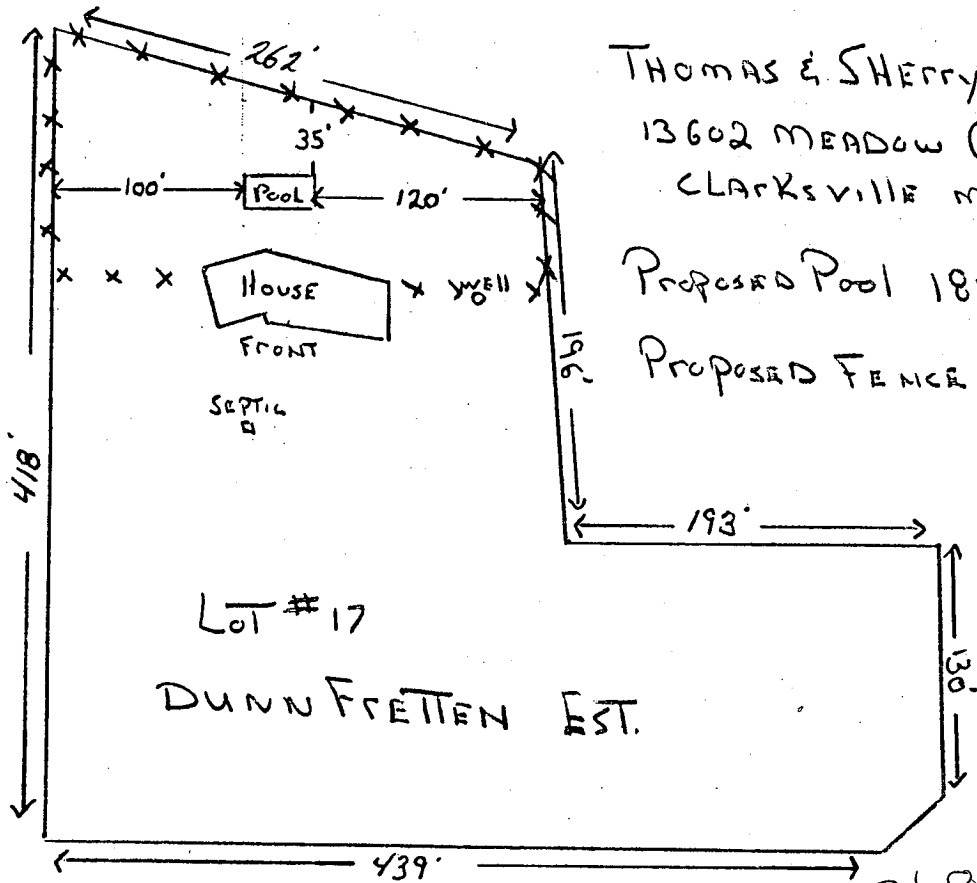
S 14° 11' 09" N
615.46'

well/cw

B.P. 69069
HACKSHAW

HOHNE
POOLS & SPAS
 SINCE 1954

9000 Harford Road • Baltimore, Maryland 21234
 (301) 668-1300



THOMAS & SHERRY HACKSHAW
 13602 MEADOW GLENN
 CLARKSVILLE MD 21029

Proposed Pool 18x36
 Proposed Fence XXX

4/13/88
 OK TO SIGN
 well & septic
 not near pool
 R/H



**DEVELOPMENT
CONSULTANTS
GROUP**

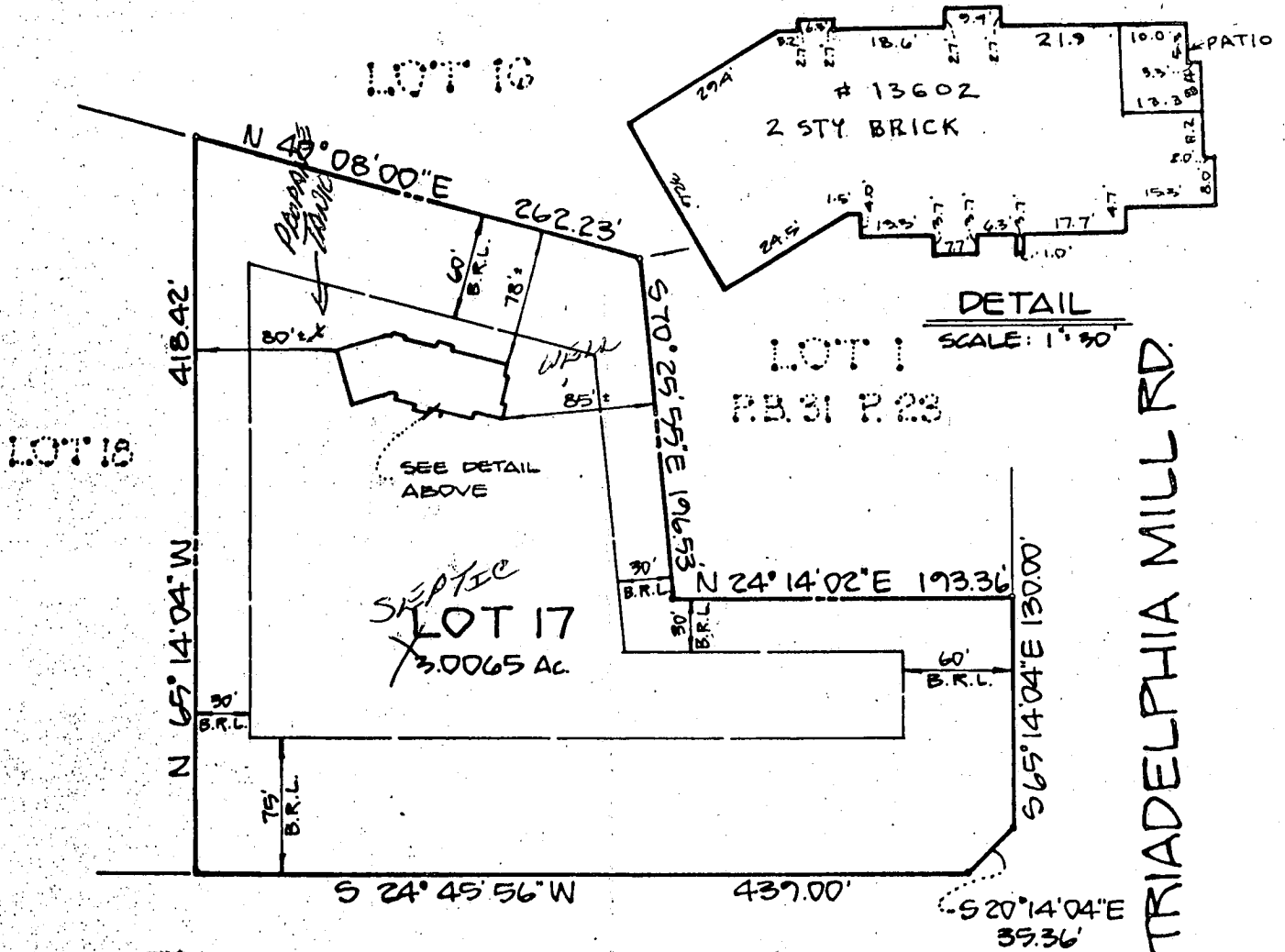
17904 GEORGIA AVE. S-102
OLNEY, MD. 20832

TELEPHONE
301-924-4570

HOUSE LOCATION PLAT

LOT 17 BLOCK
DUNNFRETEN EST.

COUNTY OF HOWARD PLAT BK. — PLAT NO. 5403



MEADOW GLENN

5/6/88
OK TO SIGN
BH

NOTE: Existence of property corners not guaranteed by this plat.

SURVEYOR'S CERTIFICATION

I hereby certify that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This Plat is not for determining property lines, but prepared for exclusive use of present owners of property and also those who purchase, mortgage, or guarantee the title thereto, within six months from date hereof, and as to them I warrant the accuracy of this Plat. No title report furnished.

Jefferson D. Lawrence
Professional Land Surveyor No. 5216

Job No.	21-316
Scale:	1" = 100'
DATES	
Wall Ck:	5-14-86
Final Loc:	11-21-86
Recort:	

9/8/86 - AM phase

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

New Installation
Replacement

Receipt # 34621
Date 9/5/86

Name of Installer Keller-May PLUMBING/HEAT Telephone 949-3525

License number 2306
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner DYNATEMP, INC. Telephone 301-587-8020
Subdivision DUNFRETTON Lot # 17 Well tag # HO-81-0920
Site Address 13602 MEADOW GLEN

Pump

- Type
 - Deep well jet
 - Shallow well jet
 - Submersible

2. Make MYERS
3. Model # 5052-J11 P
4. Capacity 11 GPM

- Pump exceeds well capacity Yes No
- 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 Other

Motor

- Horsepower 1/2
- RPM 3450
- Voltage
 - 110
 - 220

Pitless Adapter

- Make HARVARD
- Model # PT800
- Depth 6'

Tank

- Capacity 80 GALS.
- Pressure relief valve? NO

Piping

- Type POLYETHYLENE
- Size 1"
- NSF and/or BOCA Code approved Yes
- Depth of supply line 6'

Well data

- Depth 165 ft.
- Yield 10 GPM
- Static water level 25 ft.
- Will water supply be disinfected by installer? NO

9/8/86 all work inside & out complete - sets covers

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: L. Dennis Keller

Date: 9/5/86

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

C1 **9573** **SEQUENCE NO. (OEP USE ONLY)**
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 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 31730**

DATE Received [] [] [] [] [] [] **DATE WELL COMPLETED** **032985** **Depth of Well** **165** **PERMIT NO.** **HO-81-0920**
 (TO NEAREST FOOT)

OWNER **NICHOLS JAMES S.** **STREET OR RFD** **Meadow Glenn** **TOWN** **DAYTON**
SUBDIVISION **DUNFRETEN** **SECTION** [] **LOT** **17**

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	33	
Sand	33	67	
Shaymia rock	67	165	

GROUTING RECORD (yes no)
 WELL HAS BEEN GROUTED Y N
 TYPE OF GROUTING MATERIAL
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS **12** NO. OF POUNDS **1128**
 GALLONS OF WATER **72**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **40** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST CO
 STEEL CONCRETE
 PL OT
 PLASTIC OTHER
 MAIN CASING TYPE S T
 Nominal diameter top (main) casing (nearest inch) **6** **6 1/2**
 Total depth of main casing (nearest foot) **165**

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

C2
 DEPTH (nearest ft.)
 EACH SCREEN 1 **HO** **60** **165**
 2 [] [] [] [] [] [] [] [] [] []
 3 [] [] [] [] [] [] [] [] [] []
 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.) [] [] [] [] [] []
 WQ [] [] [] [] [] []
 TELESCOPE CASING LOG OTHER DATA
 INDICATOR

C3
PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min. to nearest gal.) **10**
 METHOD USED TO MEASURE PUMPING RATE **meter**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **25**
 WHEN PUMPING **11**
 TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet S submersible

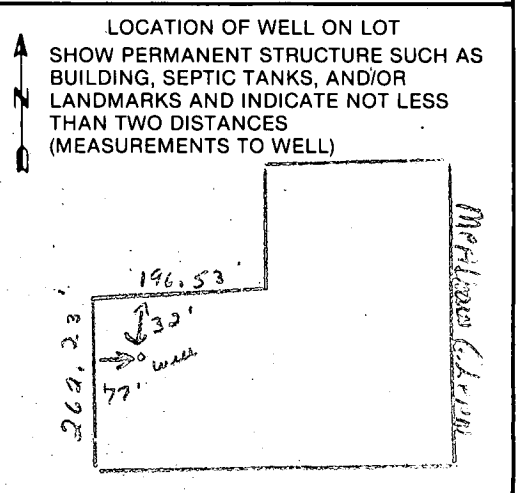
PUMP INSTALLED
 DRILLER WILL INSTALL PUMP YES NO
 IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
 TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 29
 CAPACITY: GALLONS PER MINUTE (to nearest gallon) [] [] [] [] [] [] [] [] [] []
 PUMP HORSE POWER [] [] [] [] [] [] [] [] [] []
 PUMP COLUMN LENGTH (nearest ft.) [] [] [] [] [] [] [] [] [] []
 CASING HEIGHT (circle appropriate box and enter casing height)
 + above } LAND SURFACE (nearest foot)
 - below }

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. **238**
DRILLERS-SIGNATURE *Robert L. Marjano*
 (MUST MATCH SIGNATURE ON APPLICATION)

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



B 1 3287 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
4/1/85 please print or type

OEP PERMIT NUMBER
40-81-0920
fill in this form completely

Date Received 3/29/85 9:30 AM
OWNER INFORMATION
NICHOLS S JAMES
13938 HIGHLAND RD.
CLARKSVILLE MD 21029

B 3 LOCATION OF WELL
HOWARD COUNTY
DUNFRETTEW SUBDIVISION
SECTION 44 46 LOT 17
DAYTON NEAREST TOWN
MILES FROM TOWN (enter 0 if in town) 2 MI

DRILLER INFORMATION
Joseph L. Mayne 238
77 License No. 80
Joseph L. Mayne Well Drilling
5512 Ridge Rd. Mt. Airy MD 21771
Joseph L. Mayne 2/21/85

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
MEADOW Glenn NEAR WHAT ROAD
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 250 FT
ENTER FT or MI FT

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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME
A31730 COUNTY NO.
OEP SIGNATURE DATE ISSUED 03/28/85
STATE HEALTH SIGNATURE DATE 9/12/85
NORTH GRID 503000 EAST GRID 0803000

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

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
E 800 3
N 500 3

REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)
N THIS WELL WILL NOT REPLACE AN EXISTING WELL
Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
D THIS WELL WILL DEEPEM AN EXISTING WELL
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE)

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
Sketch showing location of well near Dayton, Triadelphia Mill Rd., and other roads.

Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE J.S. PERMIT No. 40-81-0920

SPECIAL CONDITIONS

