

04-226806

PUB. SEWER STATUS VERIFIED BY _____

ISSUE DATE: _____

APPROVAL DATE: _____

**PERMIT
INDEXED**

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A re-index

**ON-SITE SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH**

_____ IS PERMITTED TO INSTALL ALTER

ADDRESS: _____ PHONE NUMBER: _____

SUBDIVISION: _____ LOT NUMBER: _____

ADDRESS: 14380 Frederick Road PROPERTY OWNER: Christian Von Berg

SEPTIC TANK CAPACITY (GALLONS): _____

PUMP CHAMBER CAPACITY (GALLONS): _____

NUMBER OF BEDROOMS: _____

SQUARE FEET PER BEDROOM: _____

LINEAR FEET OF TRENCH REQUIRED: _____

TRENCHES:	Trench to be _____ feet wide. Inlet _____ feet below original grade. Bottom maximum depth _____ feet below original grade. Effective area begins at _____ feet below original grade. _____ feet of stone below distribution pipe.
LOCATION:	_____
PURPOSE:	_____

PLANS APPROVED: _____ DATE: _____


- NOTE: PERMIT VOID AFTER 2 YEARS
- NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS
- NOTE: WATERTIGHT SEPTIC TANKS REQUIRED
- NOTE: ALL PARTS OF SEPTIC SYSTEM SHALL BE 100 FEET FROM ANY WATER WELL
- NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

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CF 1862 AK

Click here for a plain text ADA compliant screen.

	Maryland Department of Assessments and Taxation HOWARD COUNTY Real Property Data Search	Go Back View Map New Search
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Account Identifier: District - 04 Account Number - 326806

Owner Information

Owner Name:	VON BERG CHRISTIAN TRUSTEE VON BERG ODA TRUSTEE	Use:	AGRICULTURAL
		Principal Residence:	YES
Mailing Address:	14380 FREDERICK RD COOKSVILLE MD 21723-9514	Deed Reference:	1) / 5532/ 56. 2)

Location & Structure Information

Premises Address 14380 FREDERICK RD COOKSVILLE 21723	Zoning RCDEO	Legal Description LOT 5 14.070 AR 14380 FREDERICK RD COOKSVILLE
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Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Group	Plat No: Plat Ref:
8	24	359					5	81	

Special Tax Areas	Town Ad Valorem Tax Class	NO A/V, NO M/P, RURAL FIRE TAX
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Primary Structure Built	Enclosed Area	Property Land Area	County Use
1800	4,408 SF	14.07 AC	

Stories	Basement	Type	Exterior
1 1/2	NO	STANDARD UNIT	BRICK

Value Information

	Base Value	Value As Of	Phase-in Assessments		PREFERRED LAND VALUE INCLUDED IN LAND VALUE
			As Of	As Of	
Land:	86,530	116,530	07/01/2002	07/01/2003	
Improvements:	246,160	288,130			
Total:	332,690	404,660	356,680	380,670	
Preferential Land:	6,530	6,530	6,530	6,530	

Transfer Information

Seller: VON BERG CHRISTIAN & WF	Date: 06/19/2001	Price: \$0
Type: NOT ARMS-LENGTH	Deed1: / 5532/ 56	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:

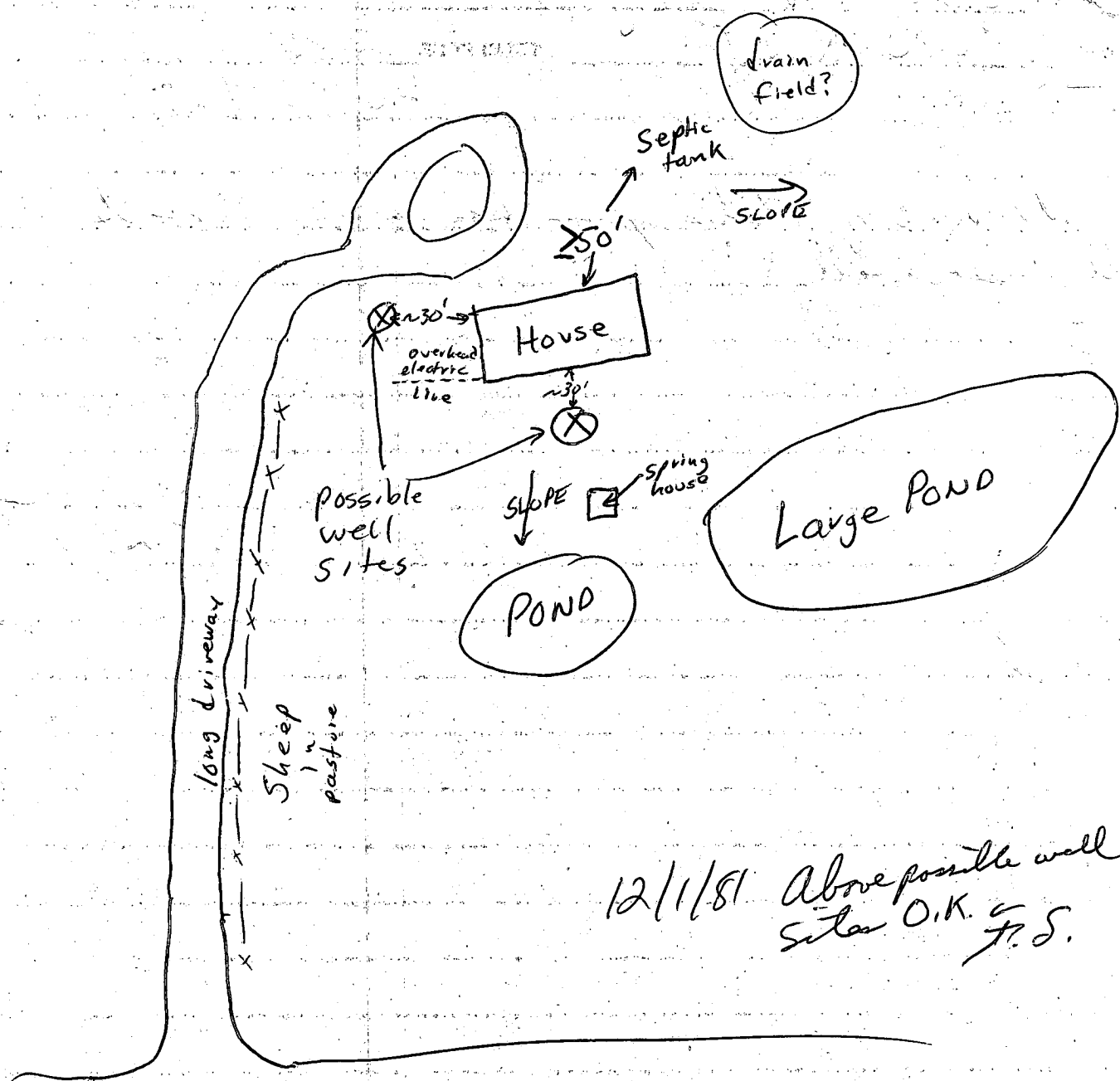
Exemption Information

Partial Exempt Assessments	Class	07/01/2002	07/01/2003
County	000	0	0
State	000	0	0
Municipal	000	0	0

Tax Exempt: NO	Special Tax Recapture: AGRICULTURAL TRANSFER TAX
Exempt Class:	

PROPERTY LINE

PROPERTY LINE



12/1/81 Above possible well sites O.K. J.S.

Rte 144

12/18/81
12/20/81

A31785

FILE Emergency Well Site Check DATE REPORTED 12/1/81

PROPERTY OWNER Christian Von Berg

P.O. ADDRESS 14380 Rte 144 TELEPHONE 286-3802

DIRECTIONS TO PROPERTY HO-73-4071

INFORMANT Mr. Von Berg states spring has run dry & wants to drill a new well

CONDITION FOUND 12/1/81 Visited site, spoke to Mr. Von Berg (see sketch on opposite side) F.S.

ACTION TAKEN

FINAL DISPOSITION

A31785
A31785

C 358 SEQUENCE NO. (OEP USE ONLY)

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

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A31785-2

Date Received (OEP use only)

DATE WELL COMPLETED 12 7 81

Depth of Well 60 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" 40-73-4071

OWNER VON BERG Christian last name first name STREET OR RFD 14380 Md. Rte 144 TOWN Cooksville SUBDIVISION SECTION LOT 5

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), Check if water bearing. Includes handwritten entries: TOP SOIL, CLAY, BROWN SLATE.

WELL HAS BEEN GROUTED (Y) NO (N) TYPE OF GROUTING MATERIAL CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 20 NO. OF POUNDS 2000 GALLONS OF WATER 100 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 35 ft.

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

MAIN CASING TYPE (ST) Nominal diameter (nearest inch) 6 Total depth of main casing (nearest foot) 43

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

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

DEPTH (nearest ft.) HO 41 60

- 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 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...

DRILLERS IDENT. NO. 40 DRILLERS SIGNATURE (Must match signature on application)

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

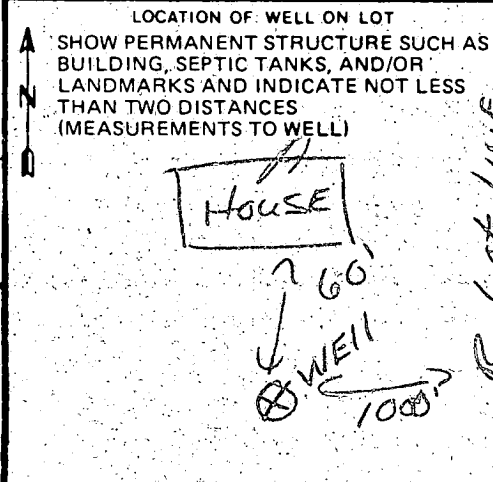
SLOT SIZE DIAMETER OF SCREEN (NEAREST INCH) GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX (F)

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST: C 3 (seq no) HOURS PUMPED 4 PUMPING RATE 25 METHOD USED TO MEASURE PUMPING RATE BUCKET WATER LEVEL BEFORE PUMPING 41 WHEN PUMPING 60 TYPE OF PUMP USED (for test) A air, P piston, T turbine, C centrifugal, R rotary, O other, J jet, S submersible

PUMP INSTALLED YES (Y) NO (N) DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) 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) CAPACITY: GALLONS PER MINUTE PUMP HORSE POWER PUMP COLUMN LENGTH CASING HEIGHT LAND SURFACE



4923 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

OEP/PERMIT NUMBER
40-73-4071
fill-in this form completely.

Date Received 12/1/81
OWNER INFORMATION
VON BERG CHRIS
14380 AT Rte 144
COOKSVILLE MD 21723

LOCATION OF WELL
COUNTY HOWARD
SUBDIVISION
SECTION 23 LOT 48
NEAREST TOWN COOKSVILLE
MILES FROM TOWN 0

DRILLER INFORMATION
GEOFFREY FASTERDAY
L.F. FASTERDAY, INC.
9265 Browns Church Rd. Mt. Airy, Md.
Signature Date 12/1/81

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
NEAR WHAT ROAD RT. 144
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
DISTANCE FROM ROAD 180

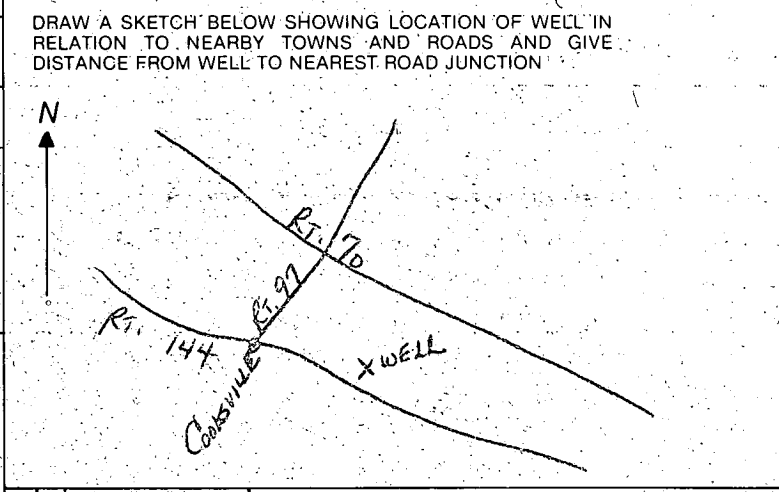
WELL INFORMATION
APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500

USE FOR WATER (CIRCLE APPROPRIATE BOX)
HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
SOURCES OF DRILLING WATER
WRITE THE BOX NUMBER FROM THE MAP HERE
Location OK
38' casing
2' - above gr.
35' - open
20' - large cement
12/7/81
JF SK x

APPROXIMATE DEPTH OF WELL 150 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



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

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD COUNTY NAME
A-31785 COUNTY NO.
OEP SIGNATURE STATE HEALTH CIRCLE BOX
DATE ISSUED 12/01/81
CO SIGNATURE Frank Shuman
NORTH GRID 541 EAST GRID 0796 EXPIRES 06/01/85

Not to be filled in by driller (OEP USE ONLY)
APPROP. PERMIT NUMBER GAP
FORCE AC INITIALS IN BOX PERMIT No. 40-73-4071

SPECIAL CONDITIONS 8-63