

6/17/96
READY ANYTIME
(Permit will be on
front sep)

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56969

A 50065C

DISTRICT 3rd

DATE 6-6-96

DATE SYSTEM APPROVED 6-17-96

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXXXX~~ 313-2640

INDEXED

319148

WTC III, Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 1820 Gillis Falls Road, Woodbine, MD 21797 PHONE 410-489-4457

SUBDIVISION W. Friendship Estates LOT 53 ROAD 13125 Fox Path Lane
~~3112 River Valley Chase~~

PROPERTY OWNER Chuck & Mary Jo Shields

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 280

TRENCHES - Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the 220.00' and 230.00' lot lines, place distribution box 13.5 feet down the 230.00 lot line and 80 feet off that same lot line. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. PROVIDE 6" - 8" DIAMETER CLEANOUT AND CAP TO GRADE OR ABOVE ON SEPTIC TANK. *ok/cw*

PLANS APPROVED BY Amy McMillen/Glen Savage REVISED _____ DATE 01/03/96

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

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 PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

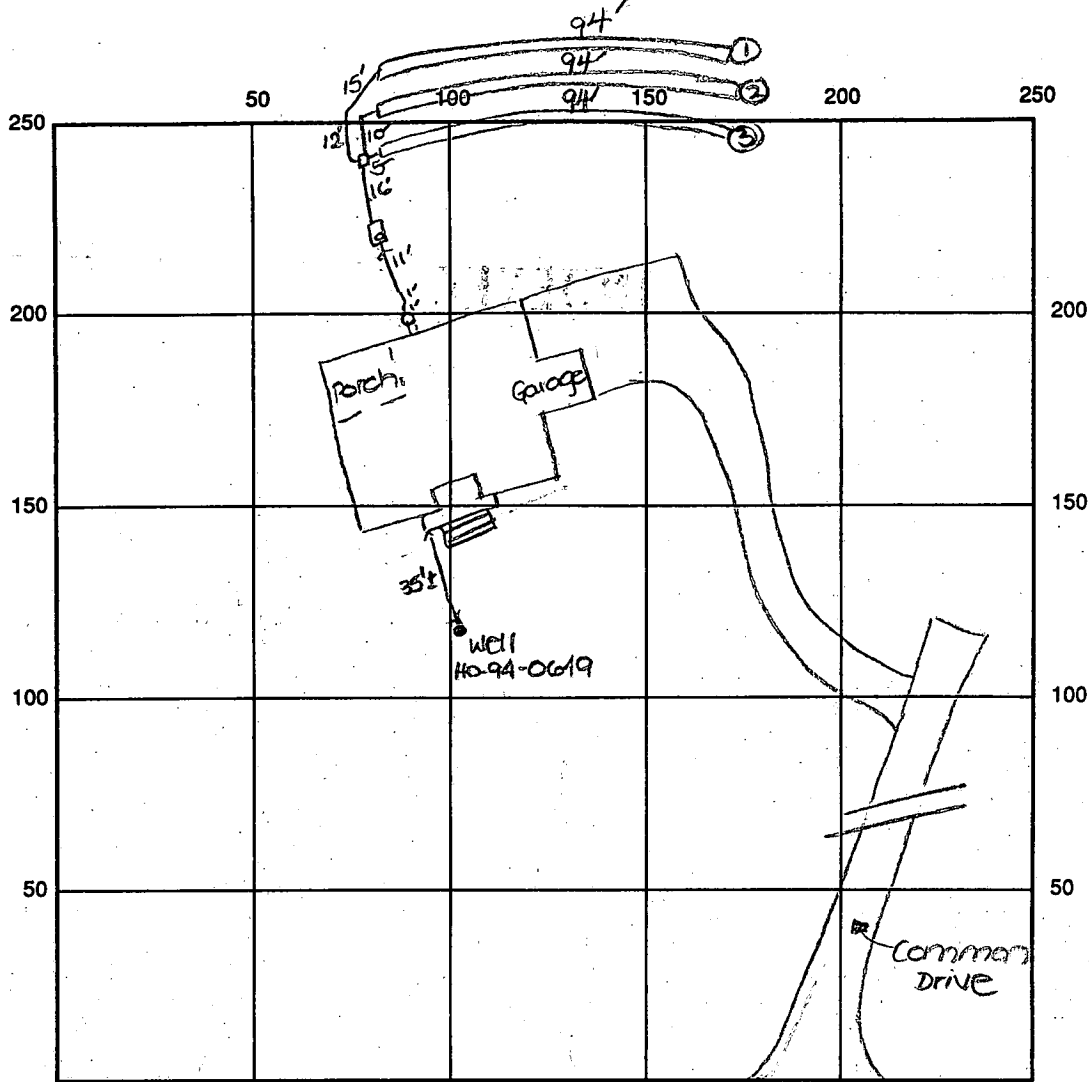
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

BLDG. PERMIT SIGNED
AND RETURNED 4-29-97
Serial # BR102069
ack

A50065C

LOT 53



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

River Valley Chase

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one at house, one on st.

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH ① 94 ② 94 ③ 94 → 282' total

NUMBER OF TRENCHES 3 ~~ONE TRENCH~~ / BOTTOM AREA 846 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 846 SQ. FT.

REMARKS: 6/17/96 FINAL - OK to cover all work. Needs to put cap on cleanout at house. DKS

DATE SYSTEM APPROVED 6/17/96 INSPECTOR D. MARK JOO

APPLICATION

PERCOLATION TESTING

A 50045C

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE 6/2/94

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER West Friendship Estates Inc. Chuck + Mary Jo Shields

ADDRESS C/O Land Design + Dev 10805 Hickory Ridge Rd PHONE 740-210

AGENT OR PROSPECTIVE BUYER Mark Reich

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION West Friendship Estates I LOT NO. 34 ^{Now 53} \leftrightarrow 8

ROAD AND DESCRIPTION Route 32 + West Ivory Rd (3112 River Valley Chase)

TAX MAP 15+22 PARCEL # 32,42+533

SIZE OF LOT 1 ± acre TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

PERMIT SIGNED AND RETURNED 11/6/96
Serial # 63117-4 Bmnv

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. Mark Reich
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

No
For 6/2/94
(P.M.)
(?) 6/8/94
6/9

C1 2806

SEQUENCE NO. (MDE 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. 3-6 ON ALL CARDS)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A50065-C

ST/CO USE ONLY DATE RECEIVED 080295

DATE WELL COMPLETED 010396

Depth of Well 325 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-0649

OWNER GREENFIELD HOMES STREET OR RFD RIVER VALLEY CHASE TOWN WEST FRIENDSHIP SUBDIVISION WEST FRIENDSHIP EST SECTION I LOT 53

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 Top Soil, Sandy, Sand Stone, MICKA, Sand Stone, MICKA, Sand Stone, MICKA.

GROUTING RECORD WELL HAS BEEN GROUTED (Y) (N) TYPE OF GROUTING MATERIAL (Circle one) CEMENT (CM) BENTONITE CLAY (BC) NO. OF BAGS 15 NO. OF POUNDS 1500 GALLONS OF WATER 90 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 40 ft.

CASING RECORD casing types insert appropriate code below MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot) PL 6 55

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)

NUMBER OF UNSUCCESSFUL WELLS: 0 WELL HYDROFRACTURED (Y) (N)

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 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT...

TYPE (MWD/MSD/MGD) 116 DRILLERS LIC. NO. 116 DRILLERS SIGNATURE Ralph E. Mayman

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) LIC. NO. 117 SIGNATURE Ralph E. Mayman

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

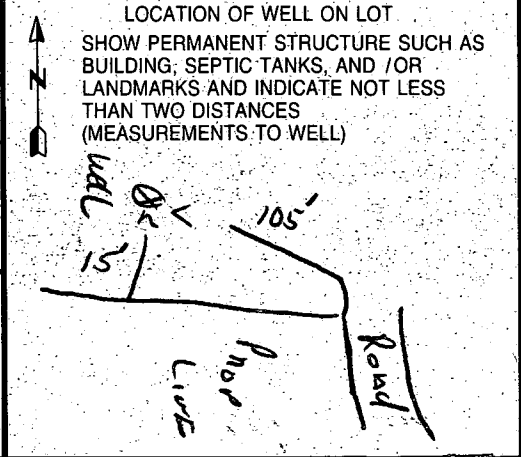
DEPTH (nearest ft.) H0 53 325 SCREEN RECORD (H0) 53 325 SLOT SIZE 1 2 3 DIAMETER OF SCREEN (NEAREST INCH) 56 60

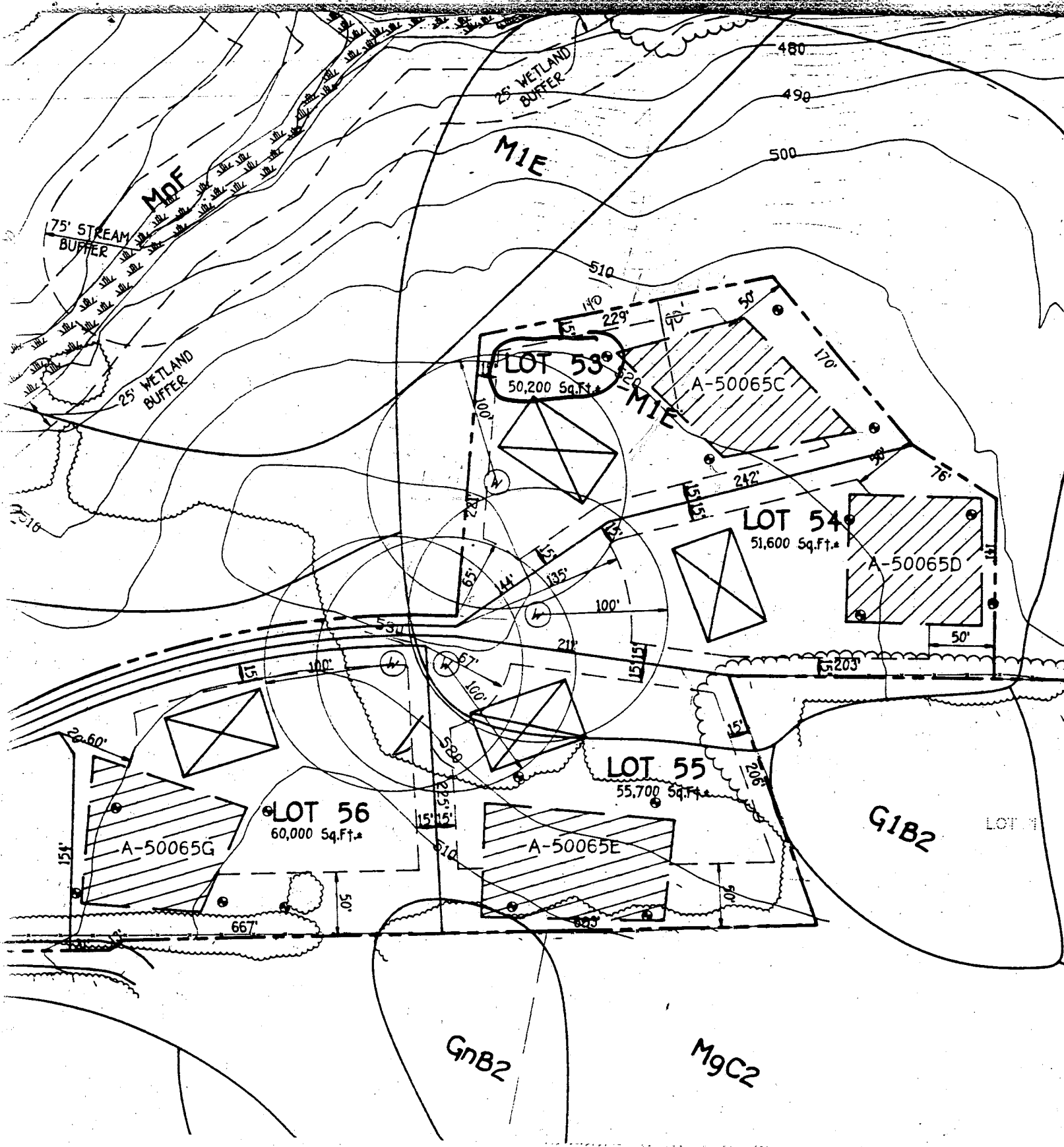
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

MDE USE-ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST HOURS PUMPED (nearest hour) 6 PUMPING RATE (gal. per min.) 2 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 50 WHEN PUMPING 120 TYPE OF PUMP USED (for test) S submersible

PUMP INSTALLED DRILLER WILL INSTALL PUMP (YES) (NO) IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS. TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 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) LAND SURFACE (nearest foot)





MIE

MDF

75' STREAM
BUFFER

25' WETLAND
BUFFER

LOT 53
50,200 Sq.Ft.

A-50065C

LOT 54
51,600 Sq.Ft.

A-50065D

LOT 56
60,000 Sq.Ft.

A-50065G

LOT 55
55,700 Sq.Ft.

A-50065E

G1B2

LOT 1

G1B2

M9C2

eye materials.
 100' after each rain.

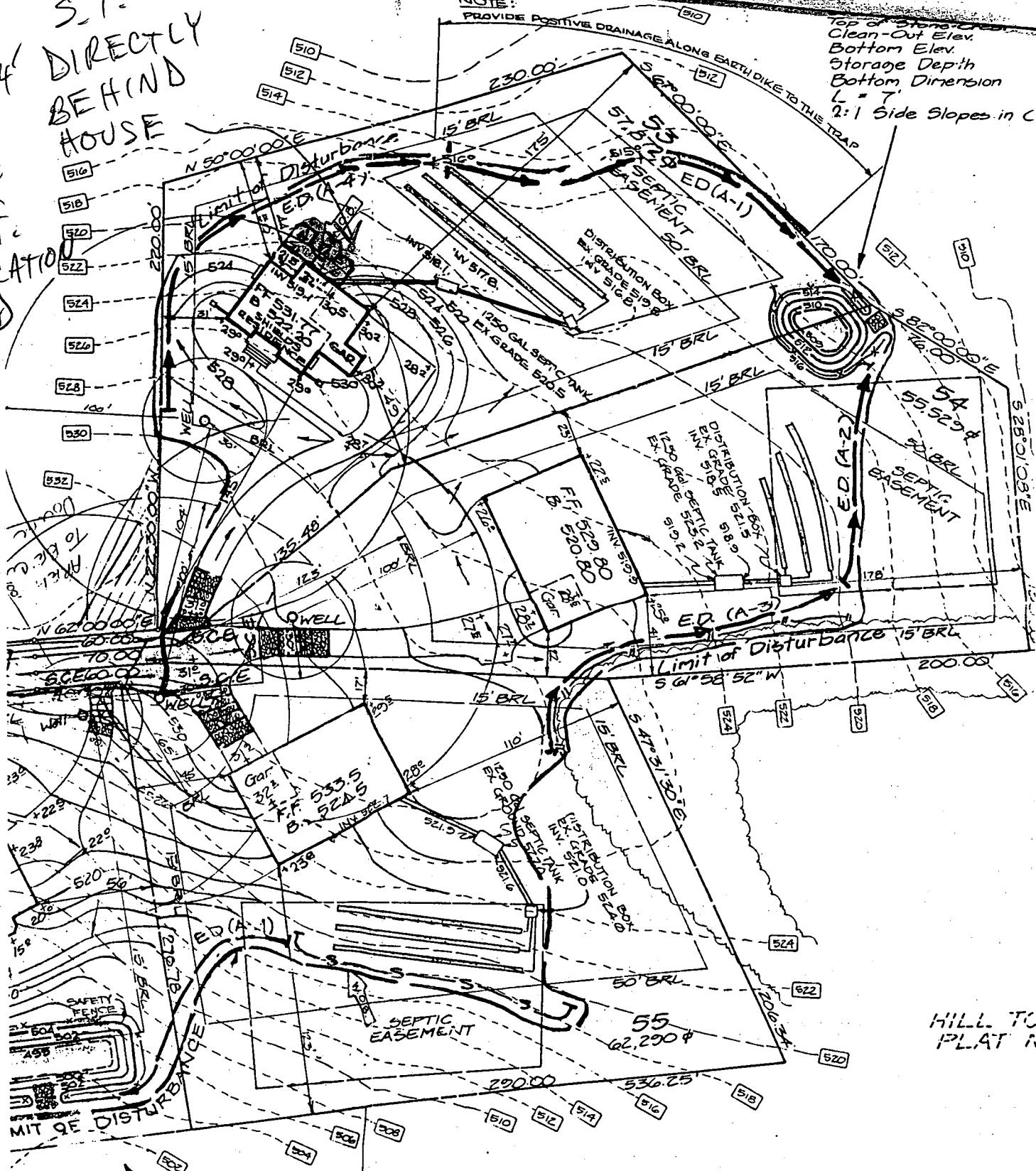
10/16/96 ATTEMPTED
 WALK-THRU FOR DECK

S.T.
 ~14' DIRECTLY
 BEHIND
 HOUSE

DECK
 OR S.T.
 MODIFICATION
 REQ'D
 MR

NOTE:
 PROVIDE POSITIVE DRAINAGE ALONG EARTH DIKE TO THE TRAP

Top of Stone Crest
 Clean-Out Elev.
 Bottom Elev.
 Storage Depth
 Bottom Dimension
 L = T
 2:1 Side Slopes in C



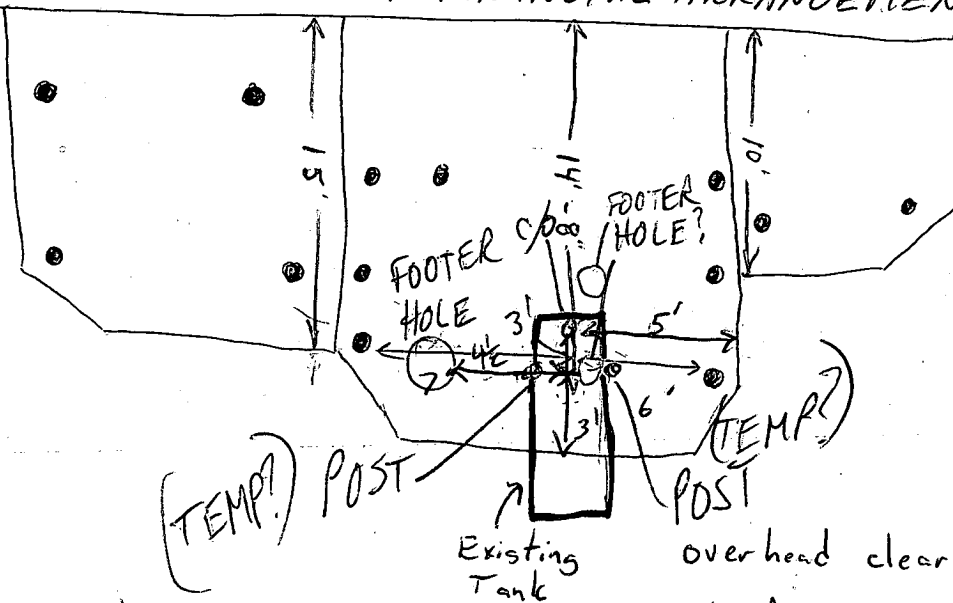
Sediment Trap No. 1 9.0.5.T. ST-V

| | |
|---------------------|---------|
| Ex. Drainage Area | 2.1 Ac |
| Prop. Drainage Area | 2.1 Ac |
| Storage Required | 3780 CF |
| Storage Provided | 3780 CF |
| Top of Stone Crest | 503.0 |
| Clean-Out Elev. | 500.5 |
| Bottom Elev. | 499.0 |

YES
 Y
 56

Greenfield Homes Inc. submitted for Shields Residence
 13125 Fox Path Lane, West Friendship Estates

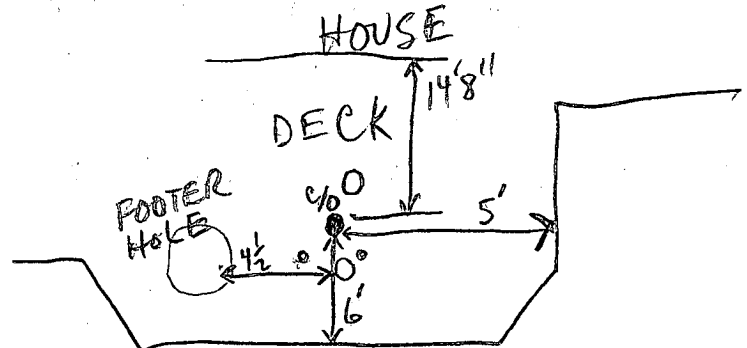
11/4/96 PLAN WAS TO MEET MIKE OF GREENFIELD
 11-12:00, ARRIVED ~12:00, MIKE NOT PRESENT;
 MIKE PAGED, DID NOT SHOW BEFORE 1:00, INSP
 COMPLETED; T/C W/MIKE & OWNER THAT P.M.
 TO ADVISE THAT DECK SHOULD CONFORM TO
 ORIGINALLY-AGREED UPON STANDARD (UP TO
 EDGE OF, NO OVERHANG); OWNER ACCEPTED DECISION,
~~MIKE~~ ADVISED HIM BEST TO MOVE S.T.; HE WILL
 ATTEMPT TO WORK OUT LOGISTICS
 Existing House & FINANCIAL ARRANGEMENTS W/BLDR,
 (HR)



overhead clearance is
 9' from bottom of beam
 to grade

Drawn by: Mike Mc Daniel
 10/29/96

410-442-0213 (O)
 410-432-3043 (P6R)



o = TEMP SUPPORT
 POSTS
 O = SHALLOW HOLES 1' DEEP
 (FOR FOOTERS??)

DECKS GALORE

P.O. Box 1343
Ellicott City, MD 21041
PH. 750-0487
MHIC #29578

FOR INSP 4/28/97 9:00

u = 6'

CA 53

Customer: Charles & Mary Jo Shields

Phone 489-4497

Street 13125 Fox Pond Ln

Job Location FOX VALLEY

City, State & Zip Code WEST FRIENDSHIP

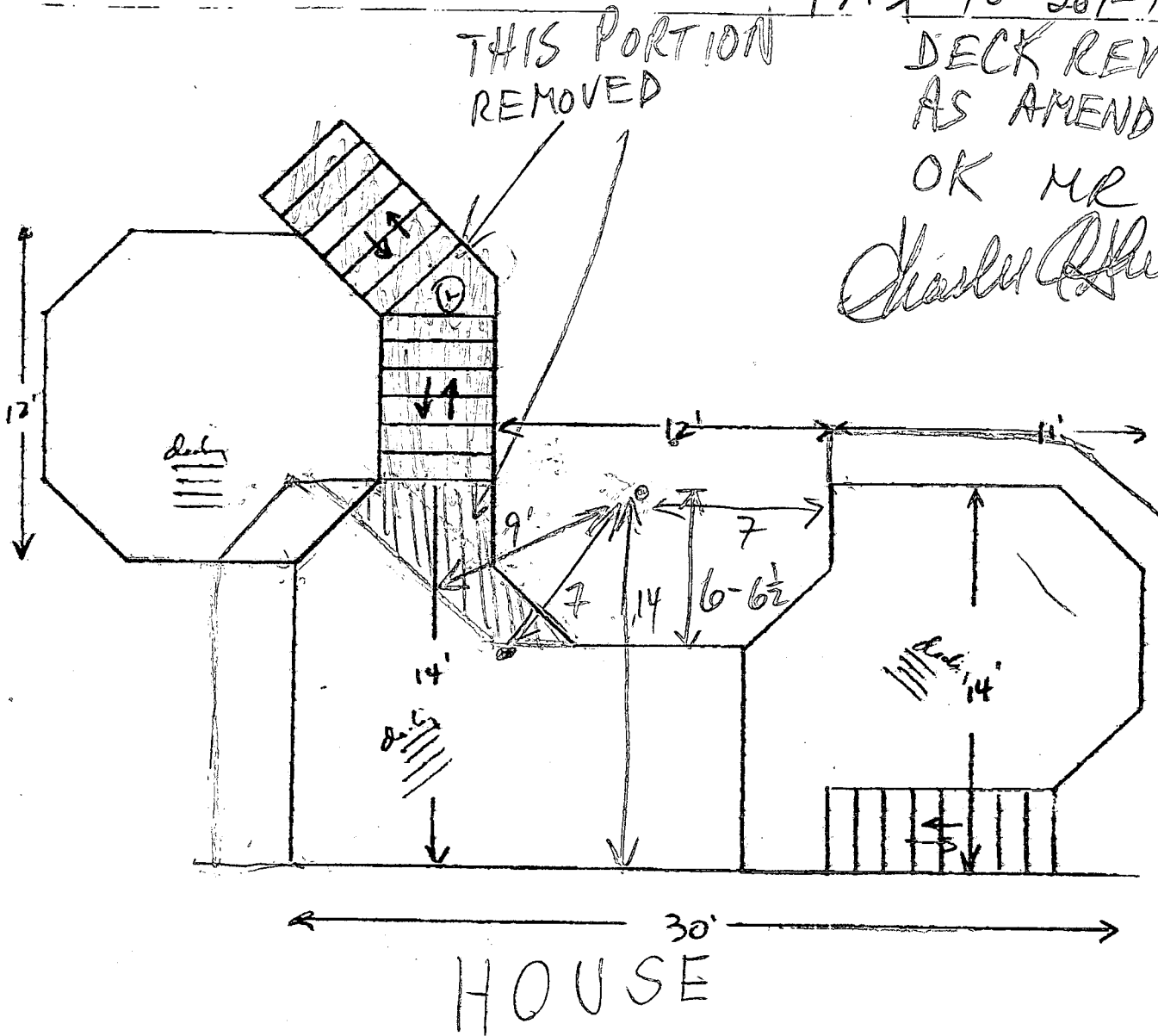
Date of Plans _____

RA X TO 301-979-4081

DECK REVISION
AS AMENDED

OK MR 4/29/97

Charles Shields



730-~~2452~~ 2452 Mary Jo Shields work
489-4497 - home

1997 APR 28 A 8:09
HOWARD CO HEALTH DEPT
ENVIRONMENTAL HEALTH

