

C.O.
10:00
10-7-96

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57293-A

A 50387B

DISTRICT 3rd

DATE 9-25-96

320588

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

XXXXXXX 313-2640

DATE SYSTEM APPROVED 10/1/96

INSPECTOR M. Beckin

INDEXED

Arnold Backhoe & Septic Services

IS PERMITTED TO INSTALL ALTER

ADDRESS 15050 Carr's Mill Road, Woodbine, Maryland 21797 PHONE 489-7095

SUBDIVISION Benson Branch Estates LOT 17 ROAD 3709 Park Overlook Court

PROPERTY OWNER Trinity Custom Homes, Inc.

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

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 51.53 and 209.04 lot lines, begin trenches 175 feet up the 209.04 lot line and 15 feet off that same lot line. Run trenches on contour toward the 209.04 lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 9/13/96 OKS

BUILDING PERMIT SIGNED

AND RETURNED 11-13-02

800139342-IG POOL

PLANS APPROVED BY Amy McMillen DATE 08/30/96

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

BLOG PERMIT SIGNED

12/19/96

Serial # Bto 103444 - deck

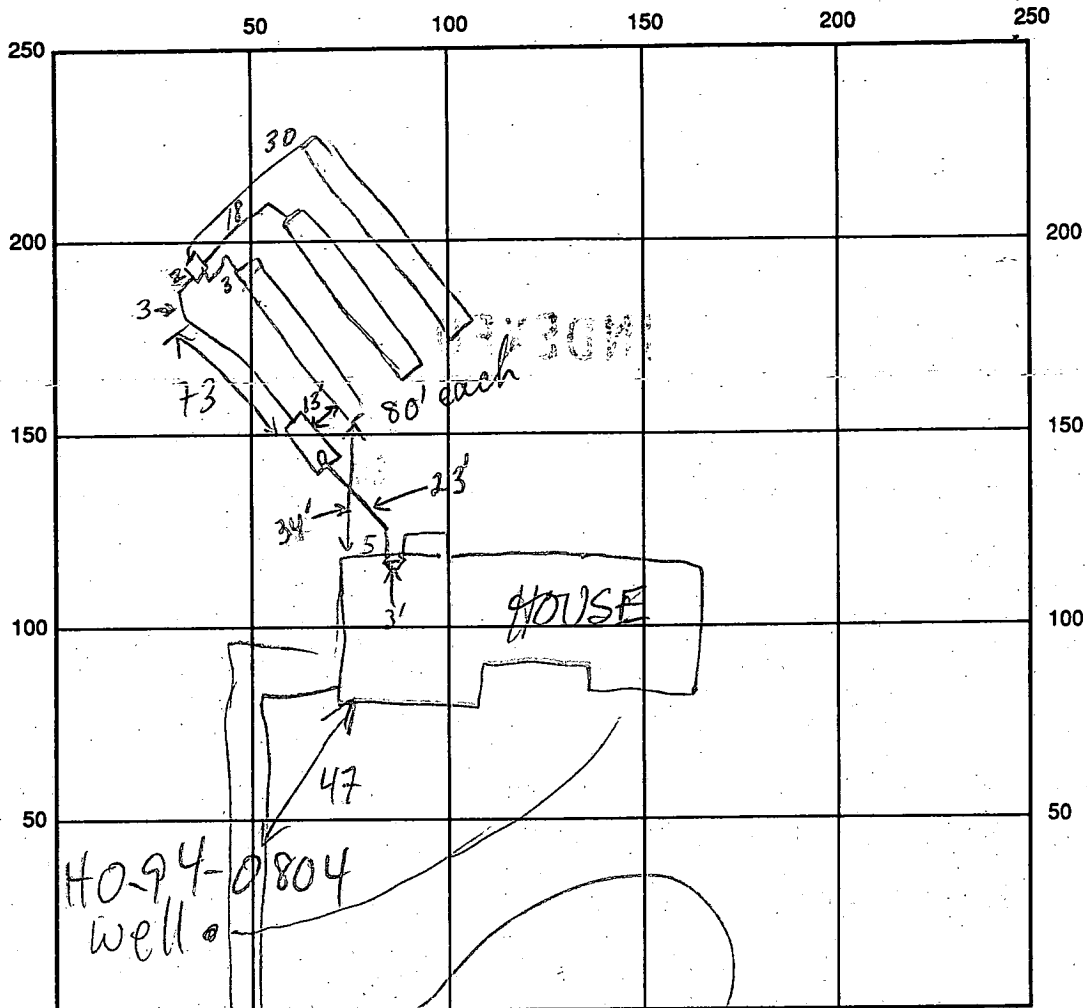
PERMIT VOID AFTER TWO YEARS

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**

A 50387B



PARK OVERLOOK CT INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1250 GAL - OK CLEANOUTS S.T. - OK

DISTRIBUTION BOX LEVEL OK BAFFLE IN **BUILDING PERMIT SIGNED**

DRAIN FIELD/TITLE DEPTH 6 FT. TRENCH WIDTH 3 FT. **AND RETURNED**

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3 @ 80 FT.

NUMBER OF TRENCHES 3 ONE-SIDEWALL/BOTTOM AREA 3 @ 240 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 960 SQ. FT.

REMARKS: 10/1/96 OK TO COVER MR

10/1/96 WPI OK TO COVER (4' B.G.T)

DATE SYSTEM APPROVED 10/1/96 INSPECTOR M. Riffin

APPLICATION

PERCOLATION TESTING

A 50387B

P _____

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

DISTRICT _____

DATE 11/10/94

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 Brandt c/o Land Design & Development, Inc. Trinity Custom Homes Inc

ADDRESS 10805 Hickory Ridge Road PHONE (410) 740-2100
Columbia, MD 21044

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Brandt Property LOT NO. #17

ROAD AND DESCRIPTION Triadelphia Road (3709 Park Overlook Court)

BLDG. PERMIT SIGNED

AND RETURNED 8/20/96

Serial # BR0102034-4Bm

TAX MAP 22 PARCEL # 16, 398, 399

SIZE OF LOT 40,000/60,000 TYPE BLDG. single family dwelling
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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.

[Handwritten Signature]
(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

A50387B

LOT 4

COUNTY #

SOIL PROFILE
0'B 442, 443, 446

brn
C
3' bright red
Si CL
mica
6' yellow brown
Si L
mica
< 5%
saprolite
brags
12' A 447/444/443
455

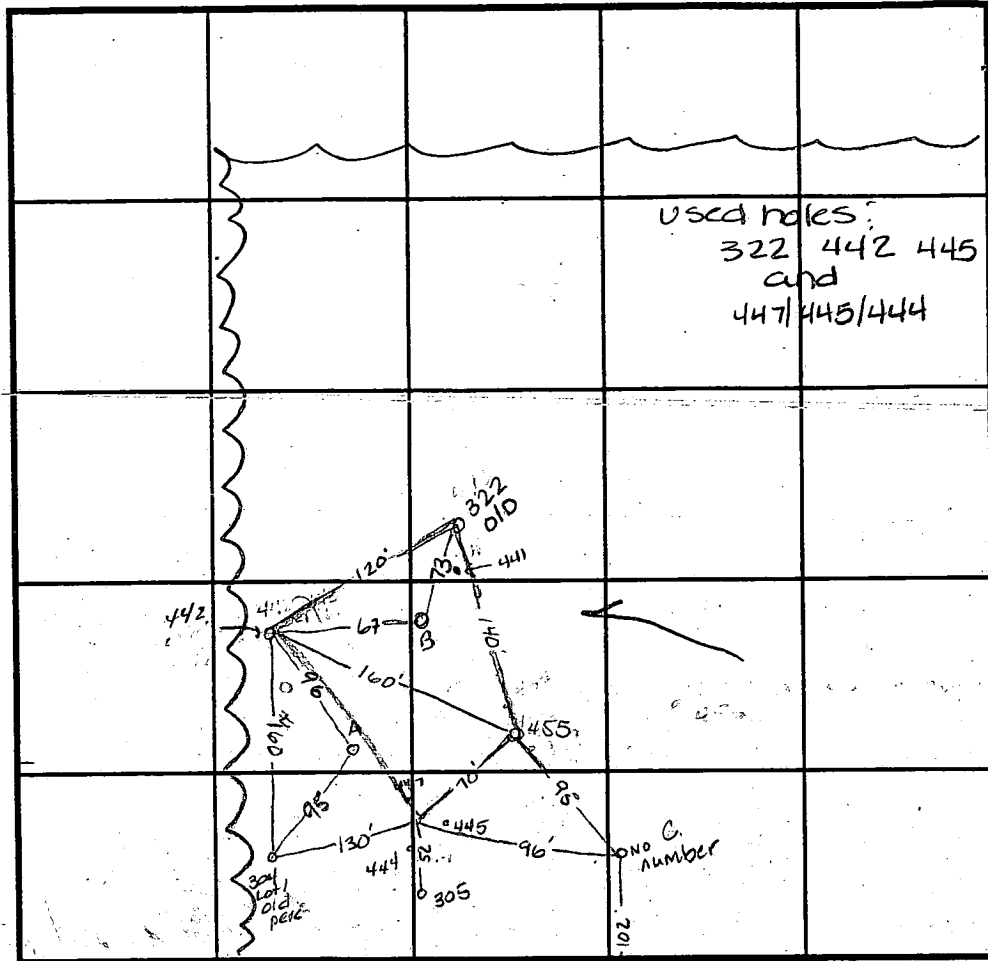
red
brn
CL
mica
flocs
3 1/2'

yellow
brn
Si L
5 1/2'

pink
Si SL
mica
10%
mica
saprolite
brags
OK
13'

yellow
brown
C
3.5'

reddish
brn
(dark)
Si L
few
frags
< 5%
OK
13'



SOIL PROFILE

0' orange
brn
CL
3' zone of 30%
very decayed
rock -
pebble size
6' pink
Si SL
20%
rock
brags
shallow
only
13'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
	442	6' V12'	5:11	5:12 ¹⁵	5:12 ¹⁵	5:13 ³⁰	1 1/4 min
10-18-94	455	4' V13'	5:22	5:23	5:23	5:24	1 min
	447 445 444	4' V12'	5:28 ⁴⁵	5:29 ⁰⁵	5:29 ⁰⁵	5:29 ⁴⁵	40 sec
	447 445 444	repour	5:30	5:31	5:31	5:32	1 min
	A	Visual to 12'					OK
	B	Visual to 13'					OK

REMARKS

TYPE OF SOIL shallow only fast perc

TESTED BY Amy McMullen ALSO PRESENT Mark Reich

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 3'

INLET DEPTH 4' MAXIMUM BOTTOM DEPTH 6' SQ. FT./BEDROOM 180 ft²

C1 7913

SEQUENCE NUMBER (MDE USE ONLY)

WELL DRILLING REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

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

COUNTY NUMBER **A50387-B**

ST/CO USE ONLY
DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

080996

400

H0-94-0804

OWNER Trinity Custom Homes
STREET OR RFD Park Overlook Ct TOWN Glenelg
SUBDIVISION Benson Branch Est 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	
Top Soil	0	2	
Sandy	2	35	
Sand Stone	35	45	✓
MICKA	45	75	
Sand Stone	75	80	✓
MICKA	80	400	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES NO
TYPE OF GROUTING MATERIAL (Circle one)
CEMENT BENTONITE CLAY
NO. OF BAGS 15 NO. OF POUNDS 1500
GALLONS OF WATER 90
DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 307 ft.

CASING RECORD

OTHER CASING (if used)
diameter inch _____ depth (feet) from _____ to _____
SCREEN RECORD
screen type or open hole
insert appropriate code below
STEEL BRASS OPEN HOLE
BRONZE PLASTIC OTHER

C 3

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 45 ft.
WHEN PUMPING 245 ft.
TYPE OF PUMP USED (for test)
 air piston turbine
 centrifugal rotary other (describe below)
 jet submersible

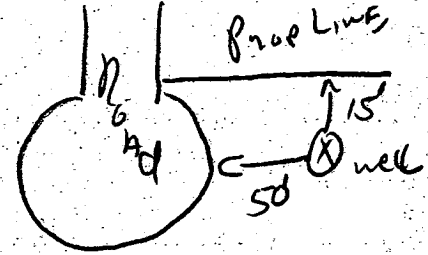
PUMP INSTALLED

DRILLER WILL INSTALL PUMP (CIRCLE) (YES OR NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED
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 } 2 (nearest foot)

C 2

DEPTH (nearest ft.)
A 1 H043 400
S 2 _____
R 3 _____
E N
SLOT SIZE 1 _____ 2 _____ 3 _____
DIAMETER OF SCREEN _____ (NEAREST INCH)

LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



NUMBER OF UNSUCCESSFUL WELLS: 0
WELL HYDROFRACTURED YES NO

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, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

TYPE: MWD(MSD)MGD 116
DRILLERS LIC. NO. Ruth Mayne

DRILLERS SIGNATURE Ruth S. Mayne
LIC. NO. 117

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

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 _____

Copy of signed
Prelim. Plan

C.E. WEBER
657/64

