

8/26/97
C.E.D.
10/30/97
10:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

P 58906-

A 50387-D

DISTRICT _____

DATE 8-7-97

DATE SYSTEM APPROVED 10-30-97

INSPECTOR ALM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XX461-9933X~~ 410-313-2640

3 20502

Arnold Backhoe & Septic Services IS PERMITTED TO INSTALL ALTER

ADDRESS P.O. Box 15 Woodbine, MD 21797 PHONE (410) 795-7873

SUBDIVISION Benson Branch Estates LOT 10 ROAD 13140 Benson Estates Court

PROPERTY OWNER Trinity Builders

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

*****PUMP SYSTEM ONLY*****

NUMBER OF BEDROOMS 4

- Manhole Cleanout required on pump tank.
- Contractor to call for septic pump test prior to final septic approval.

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Beginning from the intersection of the of the 281.26' and 33.31' lot lines, start trenches 60 feet down the 281.26' lot line and 10 feet off that same lot line. Run trenches on contour toward the 354.11' 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 LM 6/19/97

PLANS APPROVED BY Amy McMillen/Donna K. Soe DATE 6/16/97

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

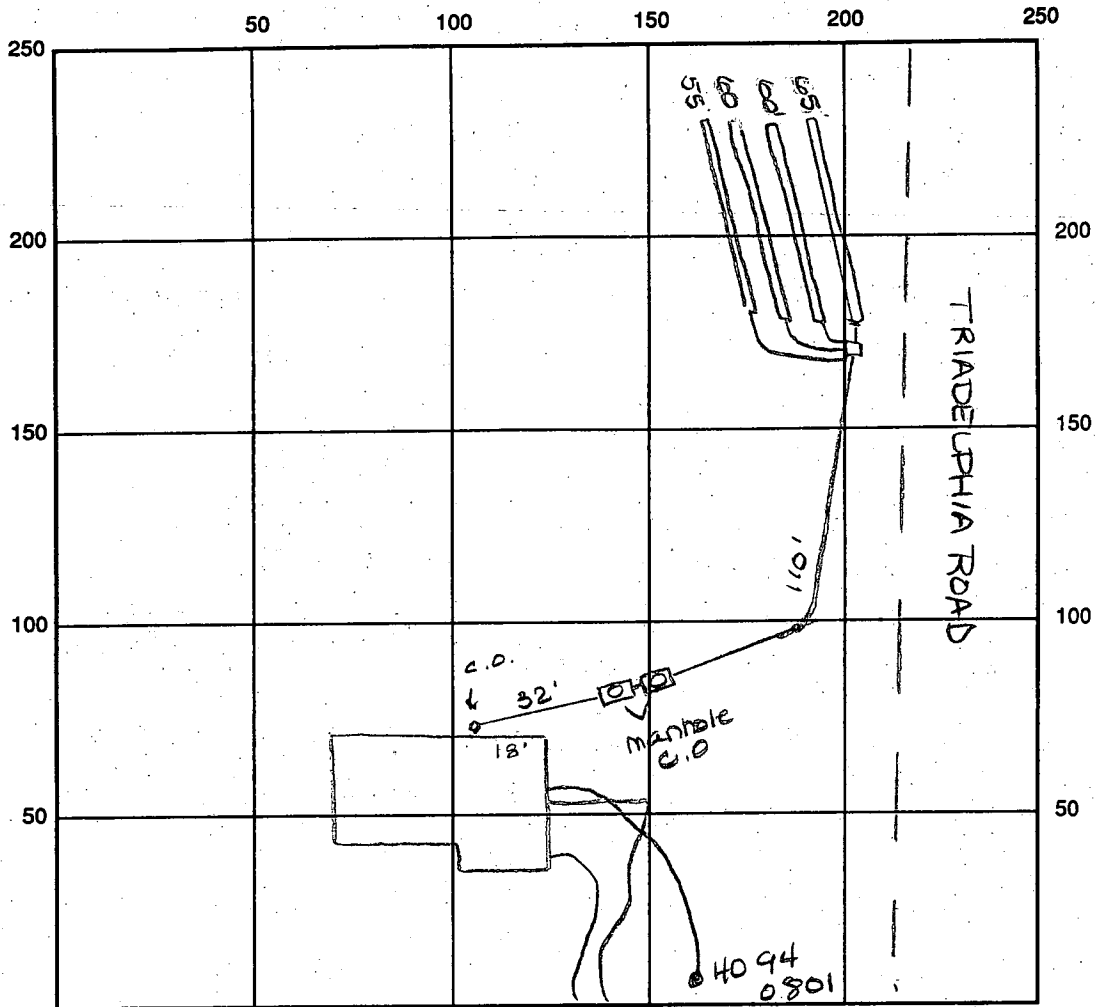
***INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**

BUILDING PERMIT SIGNED

AND RETURNED

4/24/03 502141491 - SCREEN IN DECK

A 50387D



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
 BENSON ESTATES COURT

SEPTIC TANK LEVEL OK 2/1250 gal tanks CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK baffle is in

DRAIN FIELD/TITLE DEPTH 2.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 5.0 FT. TOTAL LENGTH 220 FT.

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2.0 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 8/27/97 OK to cover all work - septic pump test needed. ALM

10/30/97 Septic Pump Test O.K. ALM

8/26/97 Well Line OK to cover ALM

DATE SYSTEM APPROVED 10/30/97 INSPECTOR A McMillen

APPLICATION

PERCOLATION TESTING

A 50387D
P _____

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

DISTRICT _____
DATE 9/23/94

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 Builders

ADDRESS 10805 Hickory Ridge Road PHONE (410) 740-2100

AGENT OR PROSPECTIVE BUYER Columbia, MD 21044

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Brandt Property LOT NO. PRELIM 10 FINAL 10

ROAD AND DESCRIPTION Triadelphia Road (13140 Benson Estates Court) BLDG. PERMIT SIGNED 6-16-94

TAX MAP 22 PARCEL # 16, 398, 399

SIZE OF LOT 40,000/60,000 TYPE BLDG. single family dwelling - 4 Bed
(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. [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

APPLICATION

PERCOLATION TESTING

A 50387D

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 _____

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 10

ROAD AND DESCRIPTION _____

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(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.

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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

A503870
COUNTY #

Lot 10

SOIL PROFILE

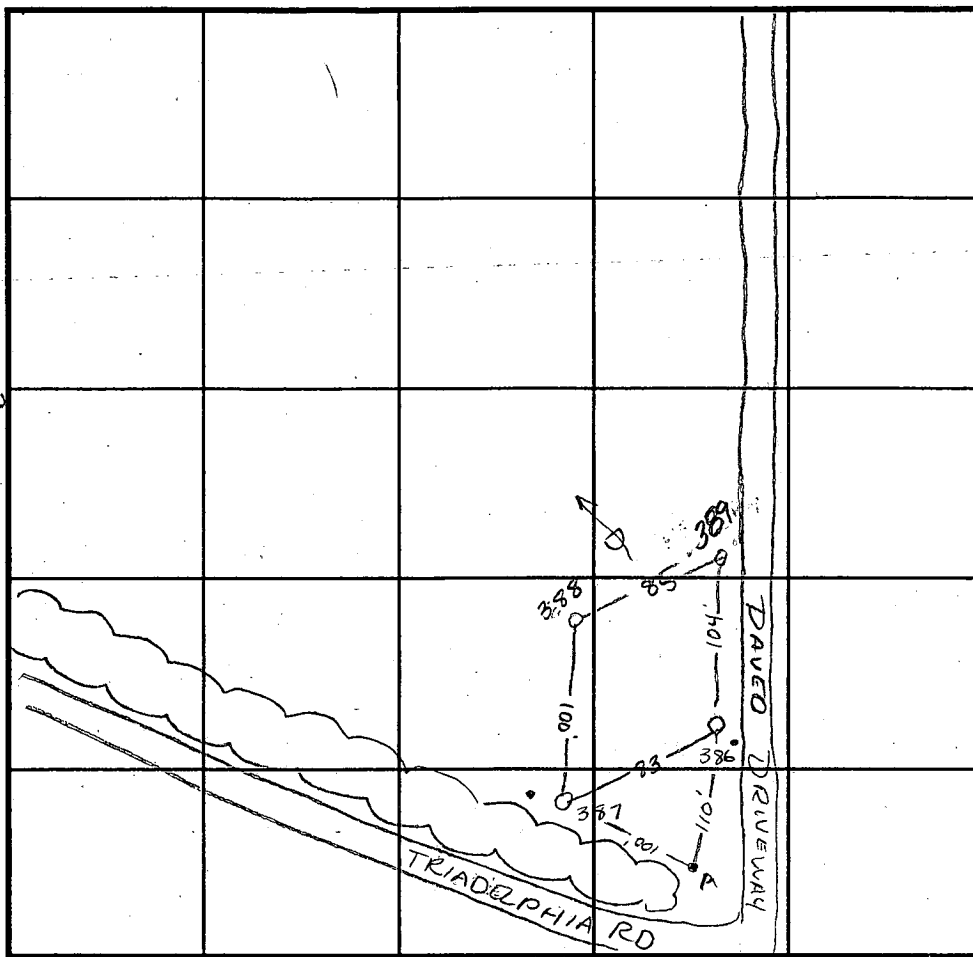
0' 386 388 389

orange
brn
C

3.5' very light
tan
almost yellow
35%
mica
OK

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

387

no
distinct
clay
layer
pink
5% SL
all
the way
through
45%
shale
frags
OK

12'

A

red
C.SL

2'

yellow
brn
micaceous
sil
10%
saprolite

5'

reddish
to pink
mica
5% SL

13'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10-18-94	387	5 1/2' / V12'	9:37 ¹⁵	9:38	9:38	9:39 ³⁰	1 1/2 min
	387	2 1/2' / V12'	9:37 ⁴⁵	9:39 ¹⁵	9:39 ¹⁵	9:40 ⁴⁵	1 1/2 min
	386	Visual	to 13'				OK
	388	2 1/2' / V11'	9:44	9:45 ³⁰	9:45 ³⁰	9:47 ³⁰	2 min
	389	5' / V13	9:48 ³⁰	9:49 ³⁰	9:49 ³⁰	9:51	1 1/2 min
3-10-95	A	3.5' / V13'	10:26 ³⁰	10:27 ³⁰	10:27 ³⁰	10:28 ¹⁵	1 3/4 min

REMARKS stay 25' off swale

TYPE OF SOIL Chester silt loam

TESTED BY Amy McMillen ALSO PRESENT Mark Reich

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

INLET DEPTH 3' MAXIMUM BOTTOM DEPTH 5' SQ. FT./BEDROOM 180 ft²

24' Wide Private
Common Driveway
Easement to Serve Others

LOT 10

BENSON
ESTATES
COURT

Public 20' Drainage Utility
Easement

ROAD
Collector

7p Tank
Inv. 505.0
Distribution Box
Grd. 500.0
500.0

TRIADELPHIA
(Major)

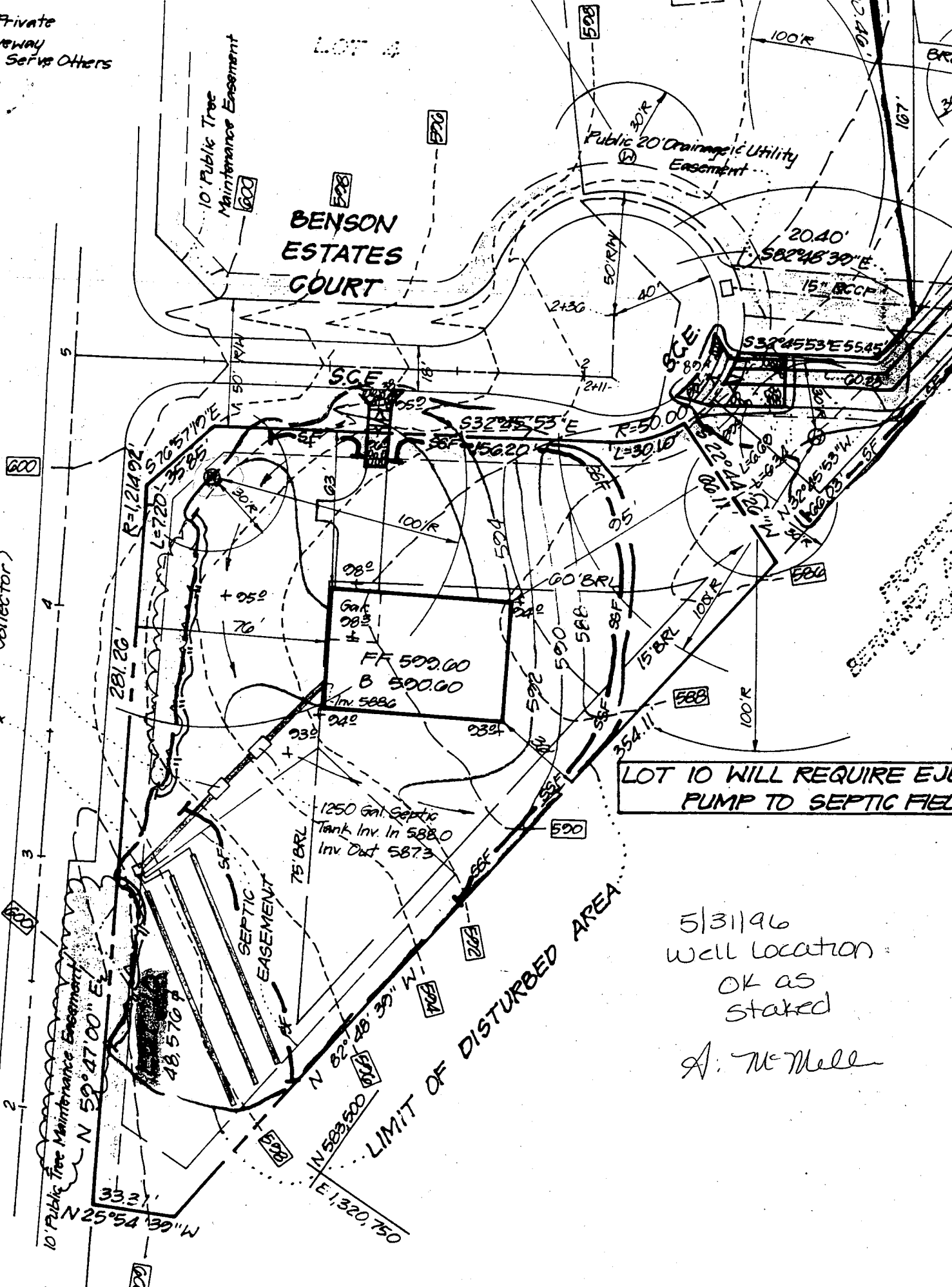
10' Public Tree Maintenance Easement
N 59° 47' 00" E

SEPTIC
EASEMENT

LIMIT OF DISTURBED AREA

LOT 10 WILL REQUIRE EJECTOR
PUMP TO SEPTIC FIELD

5/31/96
well location
OK as
staked
A. McMill



B 1 **8204** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
 PERMIT TO DRILL WELL
 please print or type

STATE PERMIT NUMBER
HO-94-0801
 fill in this form completely.

Date Received (APA) **051096**
OWNER INFORMATION
TRINITY CUSTOM HOMES
 6212 DEWON DR
 COLUMBIA MD 21044

B 3 LOCATION OF WELL
 HOWARD CO
 BENSON BRANCH EST
 SECTION **+** LOT **10**
 GLENELG
 MILES FROM TOWN **2 MI**

DRILLER INFORMATION
 CIRCLE: MSD MGD MWD
 Driller's Name **Ralph MAYNE**
 Firm Name **Ralph MAYNE WELL DRILLING**
 Address **7120 Brown Church Rd. N. Aring Path Manor**
 Date **5/10/96**

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 NEAR WHAT ROAD **TRINDELPHIA RD.**
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD **40**
 ENTERED OR MI **KT**

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)
 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 APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
 TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

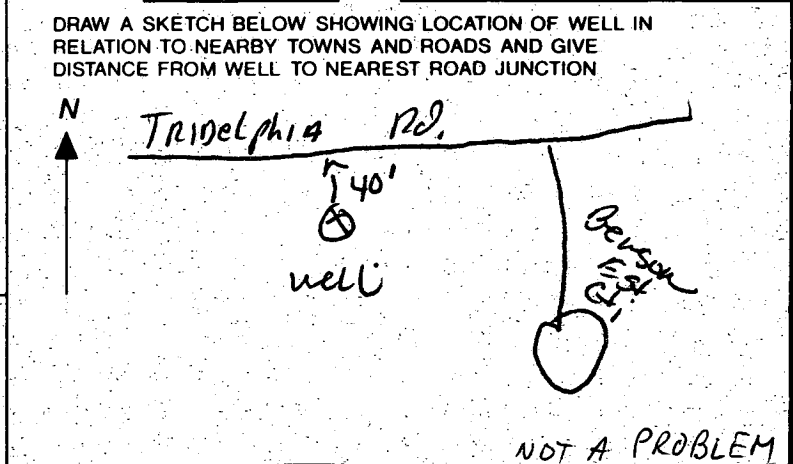
NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
Howard Co. COUNTY NAME
A50387-D COUNTY NO.
 STATE SIGNATURE _____ DATE ISSUED **053196**
 CO SIGNATURE **A. M. Miller** EXP. DATE **5/30/98**
 NORTH GRID **524000** EAST GRID **0810000**

APPROXIMATE DEPTH OF WELL **150** FEET
 APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. well
 2. 60' casing
 3. 30' open
 13 bags grout ok
 location ok (KM)
 WRITE THE BOX NUMBER FROM THE MAP HERE
 E **89610**
 N **5204**

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 DEEPEMED 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-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS
 THIS WELL WILL DEEPEMED AN EXISTING WELL
 PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____



Not to be filled in by driller (MDE OR COUNTY USE ONLY)
 APPROP. PERMIT NUMBER **GAP**
 FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **HO-94-0801**

SPECIAL CONDITIONS
 NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED - **6/5/97 PERMIT EXPIRED - ADVISED R. MAYNE**
 COUNTY

C 1 7910

SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

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

COUNTY NUMBER A 50387-D

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

ST/CO USE ONLY DATE RECEIVED 060697

DATE WELL COMPLETED 060597

Depth of Well 405 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-94-0801

OWNER Trinity Custom Homes Benson Estates Court TOWN Glencol SUBDIVISION Benson Branch Est SECTION LOT 10

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Sandstone Micka and Sandstone Micka.

GROUTING RECORD form with fields for WELL HAS BEEN GROUTED, TYPE OF GROUTING MATERIAL, CEMENT, BENTONITE CLAY, NO. OF BAGS, NO. OF POUNDS, GALLONS OF WATER, DEPTH OF GROUT SEAL.

CASING RECORD form with fields for casing types (ST, CO, PL, OT), MAIN CASING TYPE, Nominal diameter, Total depth.

OTHER CASING (if used) form with fields for diameter, depth.

SCREEN RECORD form with fields for screen type (ST, BR, HO, PL, OT), slot size, diameter of screen.

WELL HYDROFRACTURED: YES (Y) NO (N)

CIRCLE APPROPRIATE LETTER: A, E, P

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 DRILLERS LIC. NO. 116

DRILLERS SIGNATURE (Must match signature on application)

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

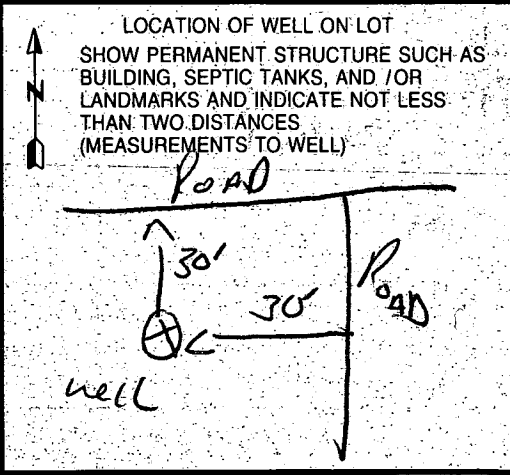
DEPTH (nearest ft.) table with columns for depth intervals (8-9, 11-15, 17-21, 23-24, 26-30, 32-36, 38-39, 41-45, 47-51) and handwritten values H0, 58, 905.

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 74-75 76

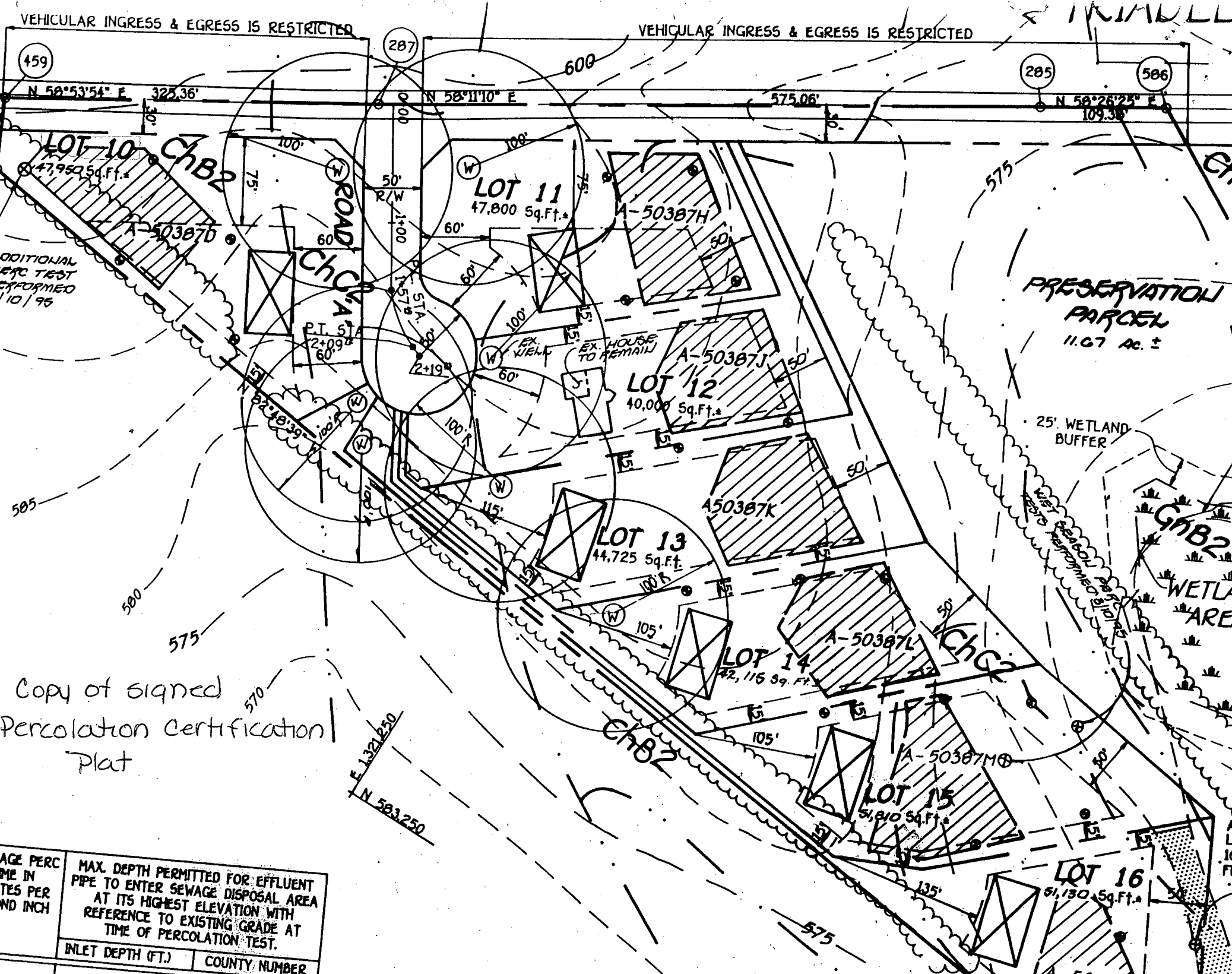
PUMPING TEST form with fields for HOURS PUMPED, PUMPING RATE, METHOD USED TO MEASURE PUMPING RATE, WATER LEVEL, BEFORE PUMPING, WHEN PUMPING, TYPE OF PUMP USED.

PUMP INSTALLED form with fields for DRILLER WILL INSTALL PUMP, TYPE OF PUMP INSTALLED, CAPACITY, PUMP HORSE POWER, PUMP COLUMN LENGTH, CASING HEIGHT.



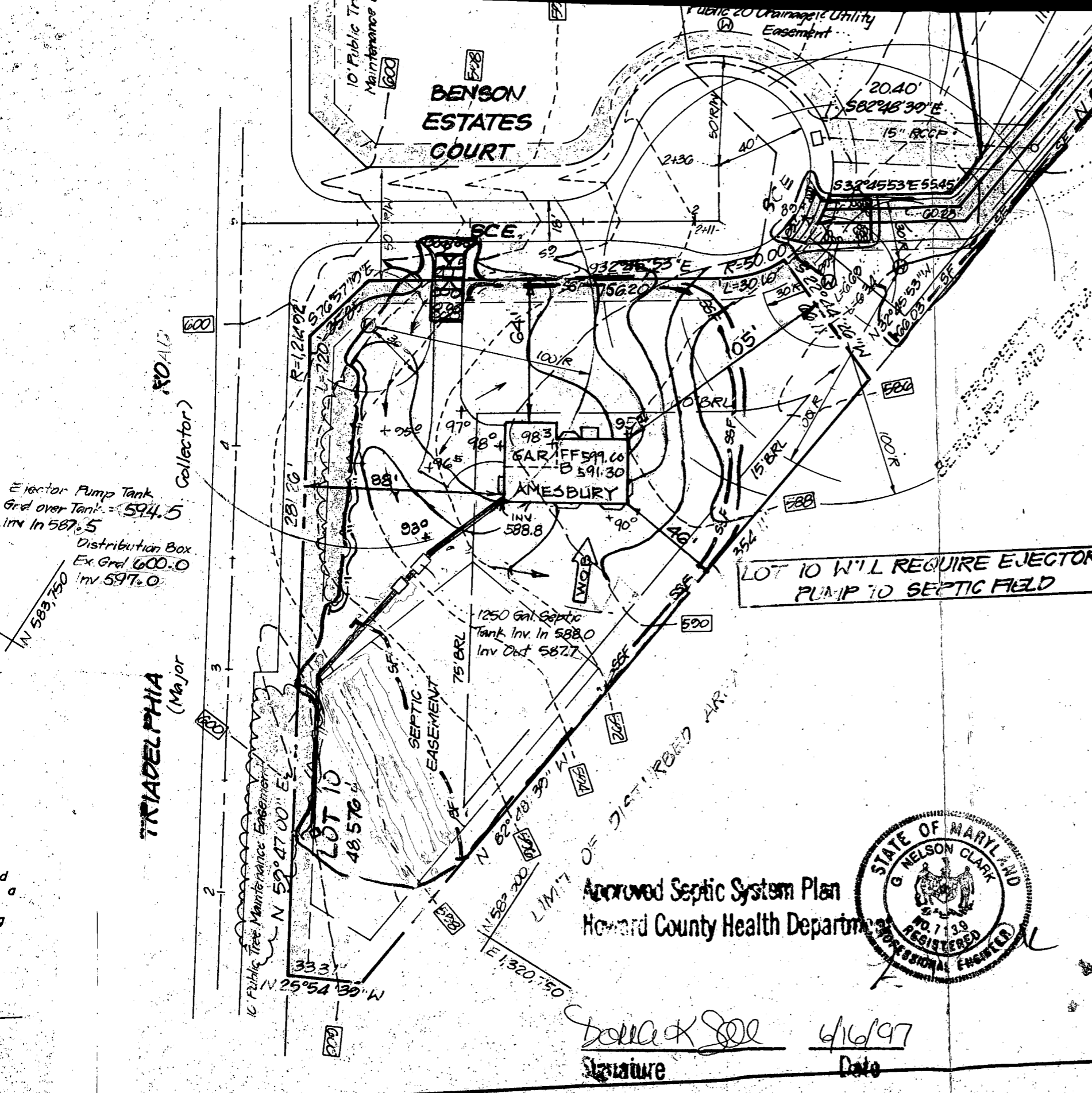
VEHICULAR INGRESS & EGRESS IS RESTRICTED

VEHICULAR INGRESS & EGRESS IS RESTRICTED



Copy of signed Percolation Certification Plat

AGE PERC ME IN TES PER ND INCH	MAX. DEPTH PERMITTED FOR EFFLUENT PIPE TO ENTER SEWAGE DISPOSAL AREA AT ITS HIGHEST ELEVATION WITH REFERENCE TO EXISTING GRADE AT TIME OF PERCOLATION TEST.	
	INLET DEPTH (FT.)	COUNTY NUMBER



ENGINEER'S CERTIFICATE

I hereby certify that this plan for Sediment and Erosion Control represents a practical and workable plan based on my personal knowledge of the site conditions and that it was prepared in accordance with the requirements of the Howard Soil Conservation District.

[Signature]
G. NELSON CLARK

DATE

GP-96-148



CLARK • FINEFROCK & SACKETT, INC.
ENGINEERS • PLANNERS • SURVEYORS

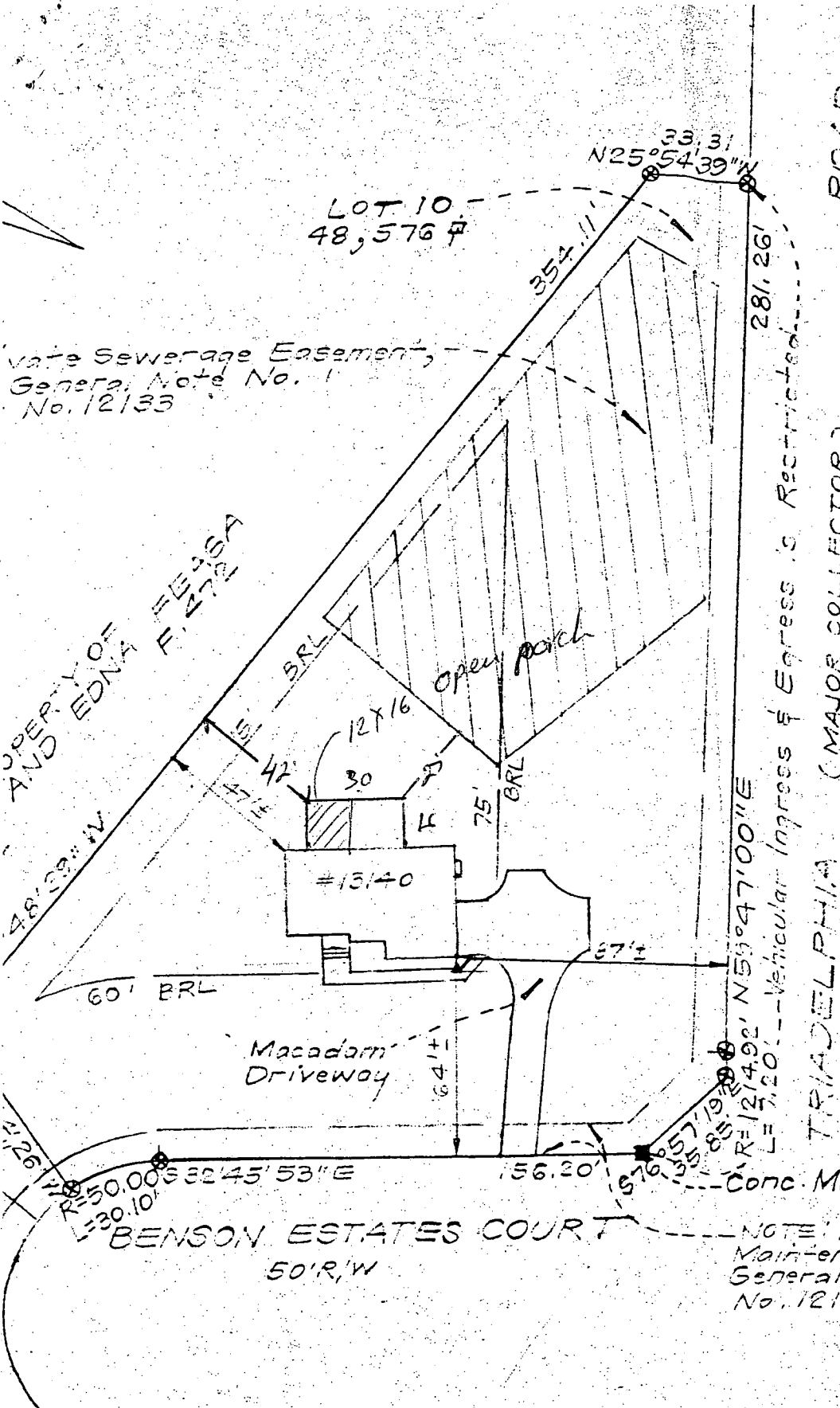
7135 MINSTREL WAY • COLUMBIA, MD. 21045 • (410) 381-7500 - BALTO. • (301) 621-8100 -

DESIGNED	DM
DRAWN	PS
CHECKED	<i>[Signature]</i>
DATE	4-23-96

SEDIMENT EROSION CONTROL PLAN
LOTS 6, 7, 10, 12, 14, 15, 17 AND 19
BENSON BRANCH ESTATES
THIRD (3rd) ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

FOR: TRINITY HOMES
6212 DEVON DRIVE
COLUMBIA, MARYLAND 21044





LOT 10 -
48,576 #

Water Sewerage Easement,
General Note No. 1
No. 12133

PROPERTY OF EUGENIA
AND EDNA F. WELLS

ROAD

TRIADDELPHIA (MAJOR COLLECTOR)

B00141491

4/24/03

Proposed
Porch O.K.

(BB)

N59°47'00"E
L=71.20' -- Vehicular Ingress & Egress is Restricted

Conc. Mon. Found

BENSON ESTATES COURT
50'R/W

NOTE: 10' Wide Public Tree
Maintenance Easement, see
General Note No. 23 Plat
No. 12133