

C-D
WPI
ASAP
6/5/98

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 510128

A 50463-K

DISTRICT 4th

DATE 5/6/98

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

INDEXED

~~XXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 6.5.98

INSPECTOR *ll*

#360575

Walter King P&H Contractors IS PERMITTED TO INSTALL ALTER

ADDRESS 5305 King's Court, Frederick, MD 21703 PHONE 410-831-4070

SUBDIVISION Riggs Property LOT 39 ROAD 2028 Meadow Tree Court

PROPERTY OWNER Ryan Homes

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

BUILDING PERMIT SIGNED

AND RETURNED 6/2/98
500 B6066 - DECK

TRENCHES - Trench to be 3 feet wide. Inlet ^{6.0} feet below original grade. Bottom maximum depth 6 feet below original grade. Effective area begins at 4 feet below original grade. 1.52 feet of stone below distribution pipe.

LOCATION - Starting at the intersection of the 168' and the 179.95' lot lines, place the distribution box 50 feet down the 179.95' lot line and 40 feet off this same lot line as seen when facing the lot from Meadowtree Court. Run trenches along 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 ll 5/8/98*

REVISED 6/2/98 *AW*

PLANS APPROVED BY Donna K. Soe DATE 4/24/98

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

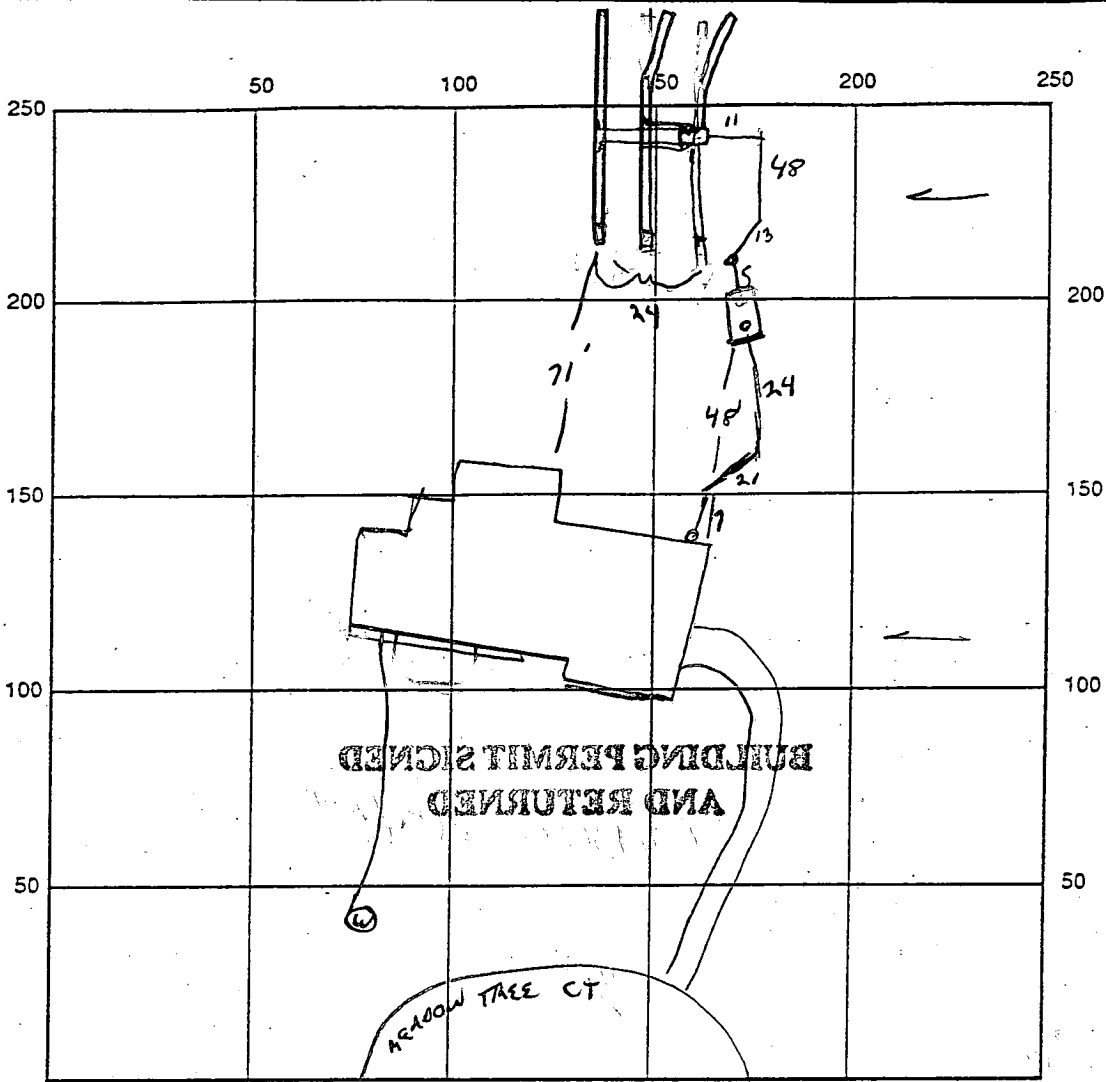
PERMIT VOID AFTER TWO YEARS

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**

A 50463K



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL ok CLEANOUTS

DISTRIBUTION BOX LEVEL ok LEVELERS SET

DRAIN FIELD/TITLE DEPTH 7.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 6 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 6 x 40 FT. = 240

NUMBER OF TRENCHES 6 ONE SIDEWALL/BOTTOM AREA 120 SQ. FT.

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

ABSORBENT AREA — SQ. FT.

REMARKS: 6/2/98 Field topo different than BP topo - gravity service not possible to highest portion of trench - test hole dug to 13.0' - OK - specs changed to invert @ 6.0 & bottom @ 7.5' to get gravity service all

6.5.98 Final - COVER ALL WORK, WPI OK TO COVER *[Signature]*

DATE SYSTEM APPROVED 6.5.98

INSPECTOR *[Signature]*

APPLICATION

50463K
~~30308~~

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
PO BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE 461-9933

DISTRICT

4th

DATE

9/30/94

P _____

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

Anatolia Riggs, c/o SDC Group, Inc Ryan Homes
8480 Baltimore - National Pk

ADDRESS

PO BOX 417, Ellicott City, MD 21041 PHONE (410) 465-6105

PROSPECTIVE BUYER _____

ADDRESS _____

PHONE _____

PROPERTY LOCATION:

SUBDIVISION

Riggs Property

LOT NO.

Grd. 1 39

ROAD AND DESCRIPTION

Located @ SW Corner of the intersection of
Roxbury Mill (Rte. 97) & Frederick Rd (Rte 144)

TAX MAP

8814

PARCEL #

96

(2028 Meadow Tree Court)

BLDG. PERMIT SIGNED

AND RETURNED

4-24-98

SIZE OF LOT

55000 ± S.F.

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.

James R. Morley, III V.Pes
(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

COUNTY #

SOIL PROFILE
552

0'
brn
Cilm

3.0
reddish
brn
Silm

4.5
yellow
tan
SaSilm

11.0

551

4.0
pink
Cilm

lgt tan
pink
Silm
very
powdery
few
large
rocks
not
interconnect

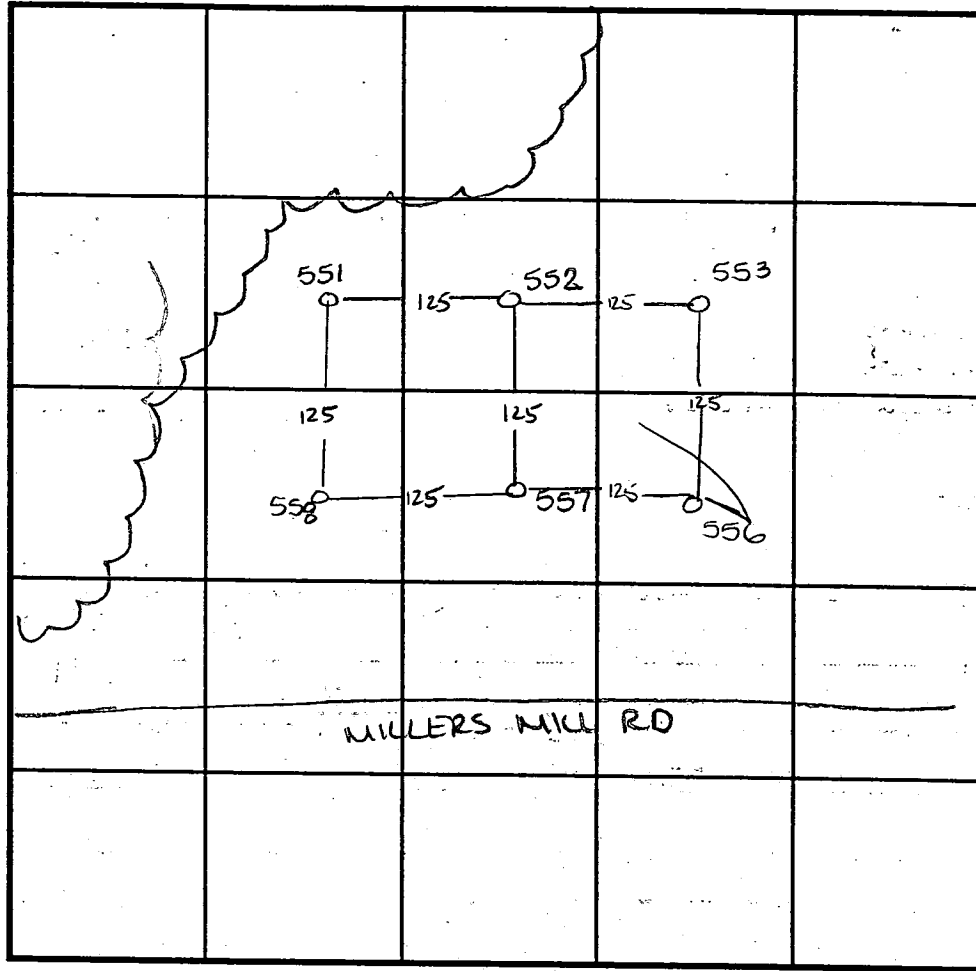
12.0

558

4.0
dark
brown
aBalm

very
light
pink
Saalm

11.5



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

SOIL PROFILE
553

0'
red orange
Cilm

5.0
red's yel
mottled
from
parent
rocks
Silm

7.0
lgt grey
red Silm
black spots

9.0
tan's
yellow
SaSilm

11.0

556

3.6
brn red
clay

5.0
yellow
brn clay

pink
Silm
blocky
structure

11.0

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-2-94	552	5.0 / 11.0	5:58	6:00	6:00	6:03 ³⁰	3 1/2 min
	551	5.0 / 12.0	5:40 ³⁰	5:41 ³⁰	5:41 ³⁰	5:43 ³⁰	2 min
11-3-94	558	4.5 / 11.5	5:26 ⁴⁵	5:28	5:28	5:29	1 min
11-2-94	557	4.5 / 10.5	5:09 ³⁰	5:11	5:11	5:15	4 min
11-8-94	553	5.0 / 11.0	6:58	6:59	6:59	7:10	11 min
	556	6.0 / 11.0	6:52 ³⁰	6:54 ³⁰	6:54 ³⁰	6:57 ¹⁵	2 1/4 min

REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen

ALSO PRESENT _____

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____

TRENCH WIDTH _____

INLET DEPTH _____

MAXIMUM BOTTOM DEPTH _____

SQ. FT./BEDROOM _____

C1 1313

SEQUENCE NO. (DENV 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. 3-5 ON ALL CARDS)

COUNTY NUMBER A 50463 J

ST/CO USE ONLY DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

Grid for ST/CO USE ONLY DATE Received

DATE WELL COMPLETED 12/7/96

Depth of Well 380 (TO NEAREST FOOT)

PERMIT NO. H0-194-1007

OWNER SDC last name MeADowtree Ct. first name TOWN Cooksville MD. SUBDIVISION RIGGS PROP. SECTION LOT 39

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. Includes entries for Sand and Gray Mica Rock.

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) YES [X] NO [] TYPE OF GROUTING MATERIAL CEMENT [CM] BENTONITE CLAY [BC] NO. OF BAGS 29 NO. OF POUNDS 2726 GALLONS OF WATER 174 DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 80 ft.

CASING RECORD

ST CO STEEL CONCRETE PL OT PLASTIC OTHER MAIN CASING TYPE ST 6 91 Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

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

SCREEN RECORD

ST BR HO STEEL BRASS OPEN HOLE PL OT PLASTIC OTHER

IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED yes [Y] no [X]

- 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.

DRILLERS IDENT. NO. 24

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION) Larry Mayne 27

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)

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3

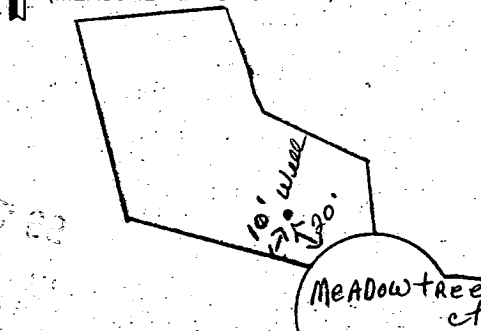
PUMPING TEST

HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min. to nearest gal.) 4 METHOD USED TO MEASURE PUMPING RATE Bucket WATER LEVEL (distance from land surface) BEFORE PUMPING 20 WHEN PUMPING 325 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 EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 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)

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)



B 1 **7486** SEQUENCE NO. (MDE USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type STATE PERMIT NUMBER **40-94-1007**
70 fill in this form completely 79

OWNER INFORMATION
 Date Received (APA) **1/18/96**
 SDC
 15 Last Name **BOYD** Owner First Name
 36 Street or RFD **ELLICOTT CITY MD 21041**
 57 Town 70 State 72 Zip 76

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
 Driller's Name **Joseph L. Mayne** 77 License No. **24**
 Firm Name **Joseph L. Mayne Well Drilling**
 Address **5512 Ridge Rd. Mt. Airy 21771**
 Signature **Joseph L. Mayne** Date **11/18/96**

B 2 WELL INFORMATION
 APPROX. PUMPING RATE (GAL. PER MIN.) **500**
 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)

APPROXIMATE DEPTH OF WELL **280** FEET
 APPROXIMATE DIAMETER OF WELL **6** INCH NEAREST

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 DEEPEN 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)
 APPROX. PERMIT NUMBER **G A P**
 FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **40-94-1007**

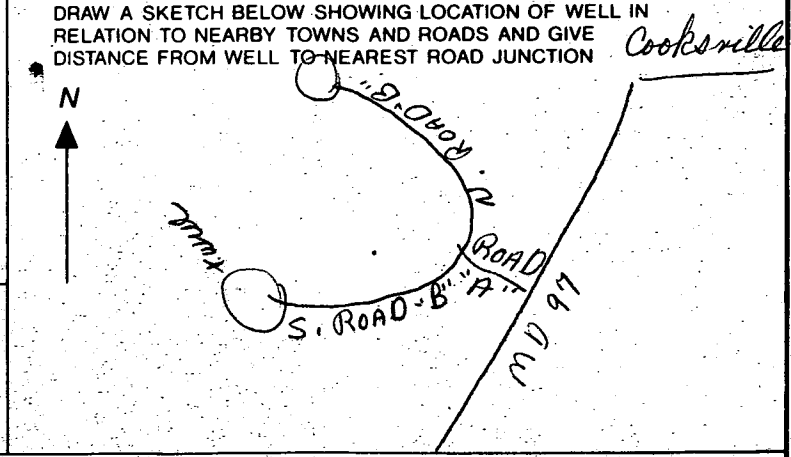
B 3 LOCATION OF WELL
HOWARD COUNTY
RIDGE PROPERTY SUBDIVISION
 SECTION **39** LOT
COOKSVILLE NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) **1** MI

B 4
 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

 NEAR WHAT ROAD **S. ROAD B**
Meadowtree Ct
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 WEST EAST
 DISTANCE FROM ROAD **20** FT OR MI **FT**
 TAX MAP: _____ BLK: _____ PARCEL _____

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL
HOWARD CO. COUNTY NAME **A 50463J** COUNTY NO.
 STATE SIGNATURE _____ INSERT S _____
 DATE ISSUED **12/4/97**
LA M Miller CO SIGNATURE EXP. DATE
 NORTH GRID **530000** EAST GRID **0190000**

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 **790**
 N **530**
 000 000



HAZARD CLASS "A" FACILITY

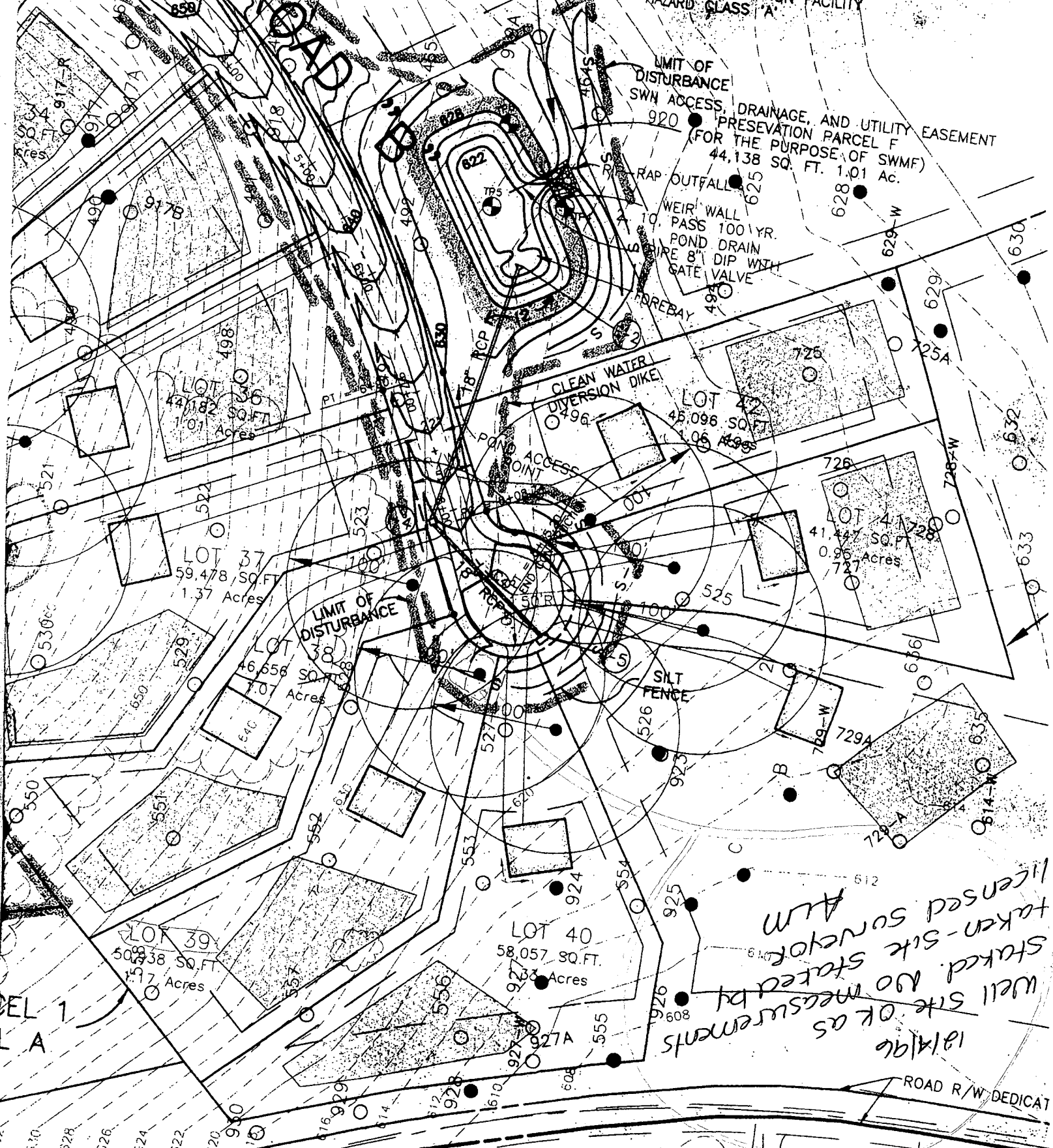
LIMIT OF DISTURBANCE
SWM ACCESS, DRAINAGE, AND UTILITY EASEMENT
PRESERVATION PARCEL F
(FOR THE PURPOSE OF SWMF)
44,138 SQ. FT. 1.01 Ac.

RAP OUTFALL
WEIR WALL
PASS 100 YR.
POND DRAIN
PIPE 8" DIP WITH
GATE VALVE

CLEAN WATER
DIVERSION DIKE

LIMIT OF DISTURBANCE

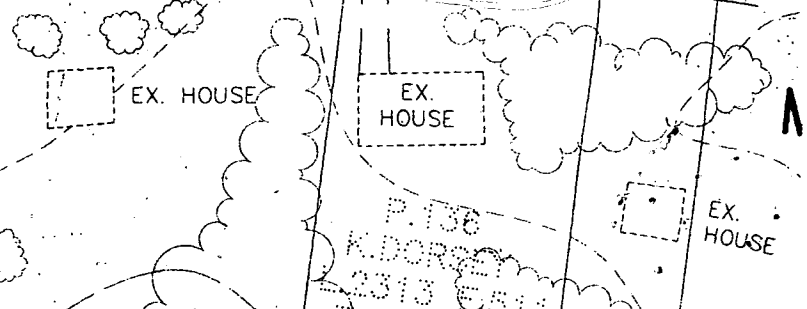
SILT FENCE



Well site OR as
staked. No staked by
taken-site survey
licensed surveyor
AUM
12/14/96

RS
SUBMISSION
610

ROAD
CEMETERY



WATER QUALITY BY INFILTRATION
WATER QUANTITY BY DETENTION FACILITY
HAZARD CLASS 'A'

LIMIT OF
DISTURBANCE
SWM ACCESS, DRAINAGE, AND
NON-BUILDABLE PRESERVATION
920 (FOR THE PURPOSE OF)
44,138 SQ. FT.

RAP OUTFALL
WEIR WALL
PASS 100 YR.
POND DRAIN
PIPE 8" DIP WITH
GATE VALVE
FOREBAY

CLEAN WATER
DIVERSION DIKE
LOT 42
45,096 SQ. FT.
1.05 Acres

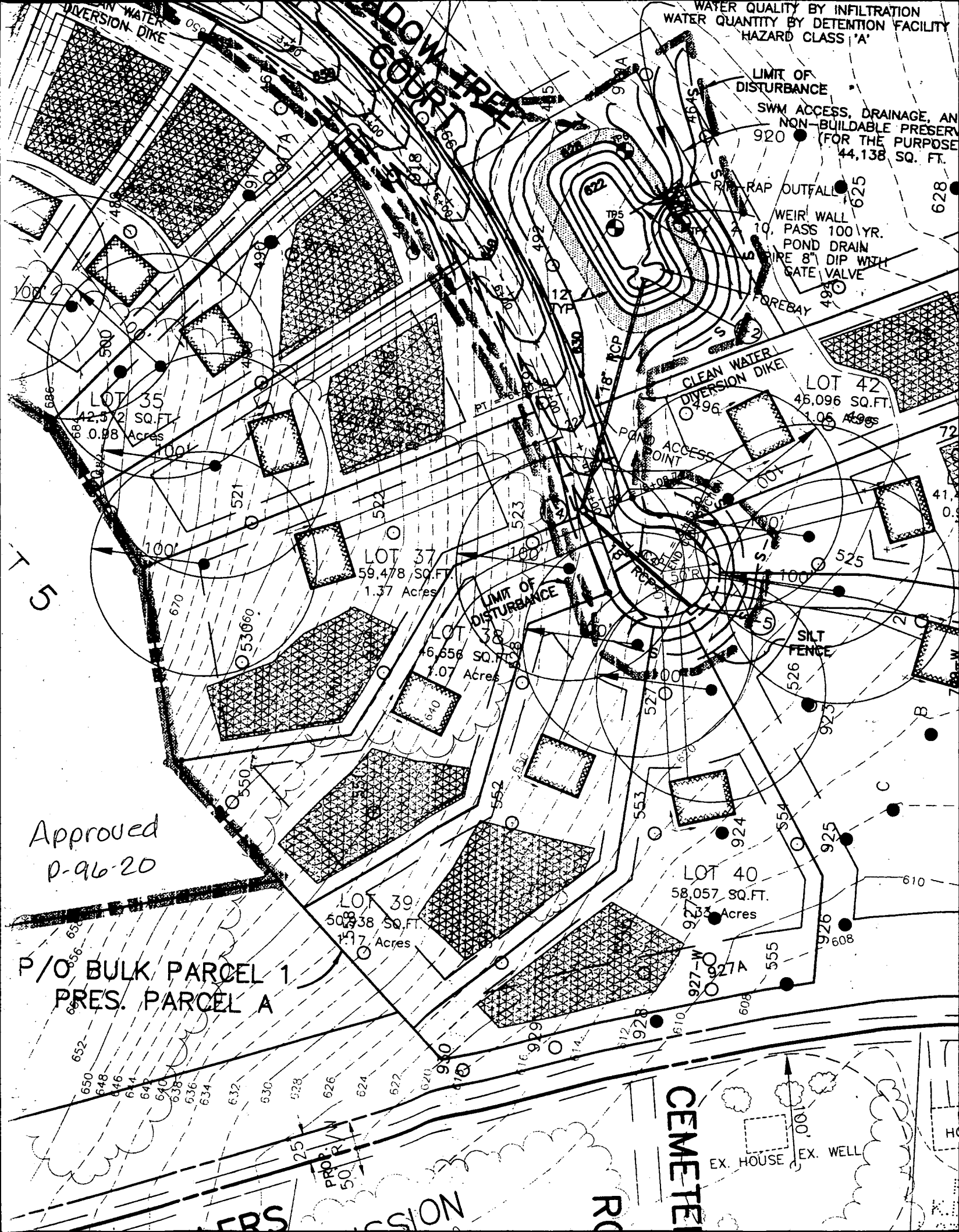
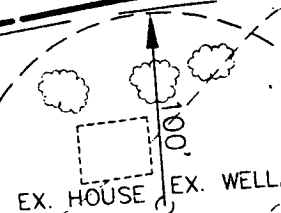
LIMIT OF
DISTURBANCE

SILT
FENCE

Approved
P-96-20

P/O BULK PARCEL 1
PRES. PARCEL A

CEMETERY



HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-H Ellicott Mills Drive
Ellicott City, MD 21043
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation XX
Replacement _____

Receipt # _____
Date 3-06-98

Name of Installer Walter W. King Plmb. & Htg., Inc.

Telephone (301) 662-6990

License Number 2217

Certified Well Pump Installer _____ Well Driller _____ Registered Plumber XX

Name of Property Owner Ryan Homes

Telephone (410) 654-0501

Subdivision Riggs Meadow Lot # 39 Well Tag # HO-94-1007

Site Address 2028 MEADOW TREE CT. COOKESVILLE, MD 21223

Pump

- Type
 - Deep well jet _____
 - Shallow well jet _____
 - Submersible XX

Motor

- Horsepower 3/4
- RPM 3450
- Voltage _____
 - 110 _____
 - 220 XX

Pitless Adapter

- Make Boshart
- Model # P-100-4
- Depth 42"

- Make STA-RITE
- Model # 5SB4D02HL
- Capacity 5.5 GPM

- Pump exceeds well capacity Yes X No _____
- If Yes, is low pressure cutoff switch installed? Yes X No _____
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards XX Other _____

Tank

- Capacity 86 Gal.
- Pressure relief valve? Yes

Piping

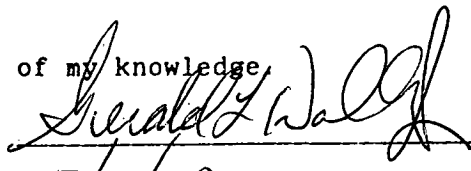
- Type 160 PSI Plastic
- Size 1"
- NSF and/or BOCA Code approved Yes
- Depth of supply line 42"

Well data

- Depth 380 ft.
- Yield 4 GPM
- Static water level 20 ft.
- Will water supply be disinfected by installer? Yes

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: 

Date: 5/5/98

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

