

9/11/96
-10-11 & later
9/12/96
10:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 56958

A 50548C

DISTRICT 4th

DATE 5/30/96

04-318862

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

DATE SYSTEM APPROVED 9/12/96

INSPECTOR DKS

INDEXED

~~T & K Excavating~~ Joseph Gantland IS PERMITTED TO INSTALL ALTER
1835 West Liberty Road
ADDRESS 11640 Buffington Rd., Woodsboro, MD 21798 PHONE 875-2900
1-301-845-8606

SUBDIVISION Harris Property LOT 1 ROAD 16212 Frederick Road

PROPERTY OWNER Stephen & Sheila Borrer

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

240 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 - Place distribution box 40 feet up the right (644.71') lot line and 80 feet off that same lot line as seen when facing the lot from Route 144. Run trenches on contour ~~in both directions~~. (towards the left lot line.) (DKS)

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. DP 5/17/96

PLANS APPROVED BY Amy McMillen/cw DATE 05/14/96

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

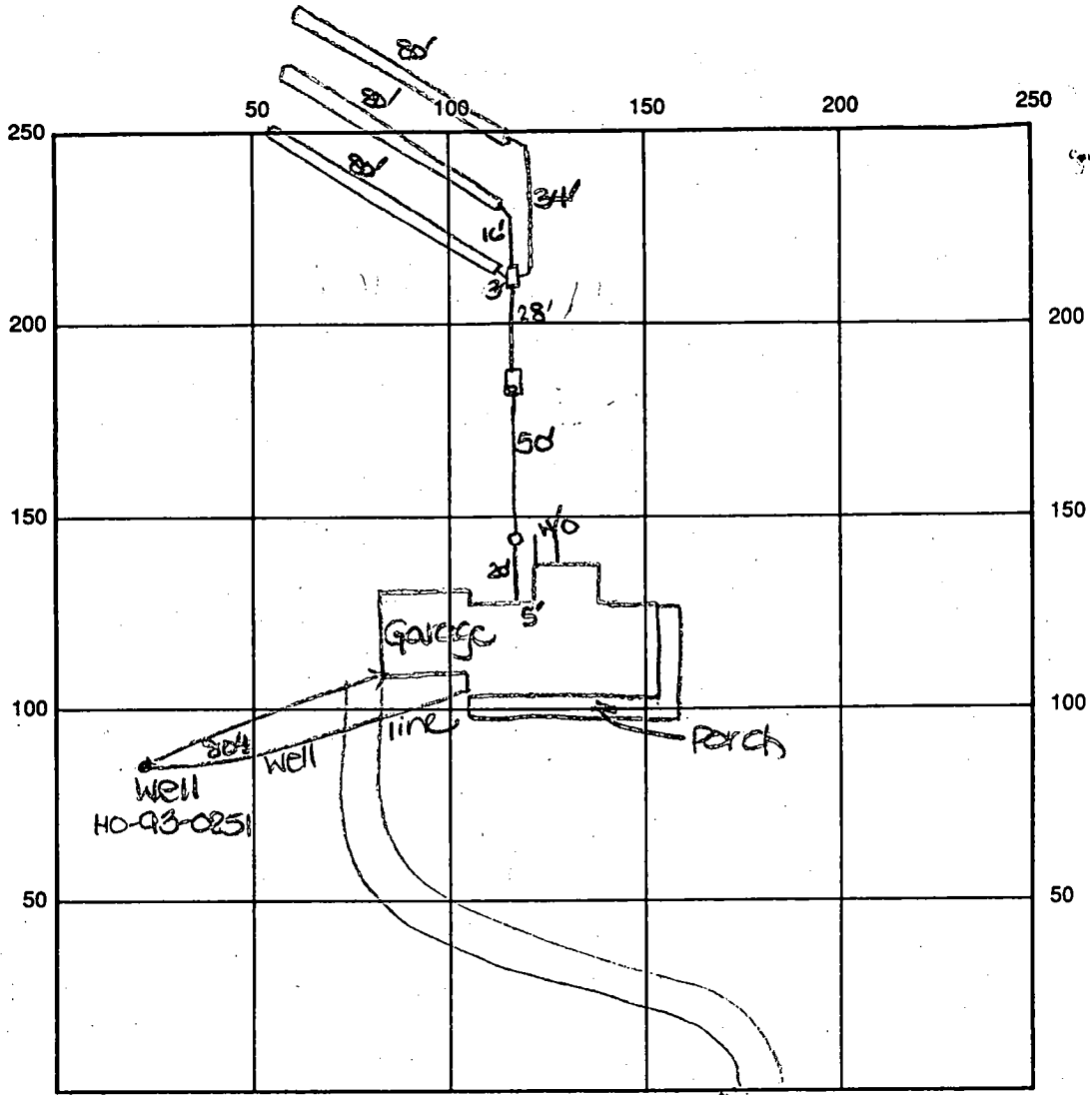
PERMIT VOID AFTER TWO YEARS

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**

A 50548C



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Frederick Road

SEPTIC TANK LEVEL OK-1000 gal CLEANOUTS one in line, one on s.t.

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 3 x 80 FT. → 240'

NUMBER OF TRENCHES 3 ~~GRAB AREA~~/BOTTOM AREA 720 SQ. FT.

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

ABSORBENT AREA 720 SQ. FT.

REMARKS: 9/11/96 OK to cover from house to d.b. and
continue. DKS WPI OK to cover - P.A. 4' below grade.
9/12/96 FINAL - OK to cover all work. DKS

DATE SYSTEM APPROVED 9/12/96 INSPECTOR DONIA K SOY

7/24/95
11:00
Retest

APPLICATION

PERCOLATION TESTING

A 50548C

P _____

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

CONTINUATION
OF PREVIOUS TESTING
ELSEWHERE ON LOT.

DISTRICT _____

DATE 2/27/95

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 STEPHEN HARRIS

ADDRESS 2402 NOBLE MANOR LANE PHONE _____

AGENT OR PROSPECTIVE BUYER SHANABENGER & LANE

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Harris Property LOT NO. 1

ROAD AND DESCRIPTION Route 144

TAX MAP 7 PARCEL # 425

SIZE OF LOT _____ TYPE BLDG. SFD
(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.

SCOTT SHANABENGER
(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

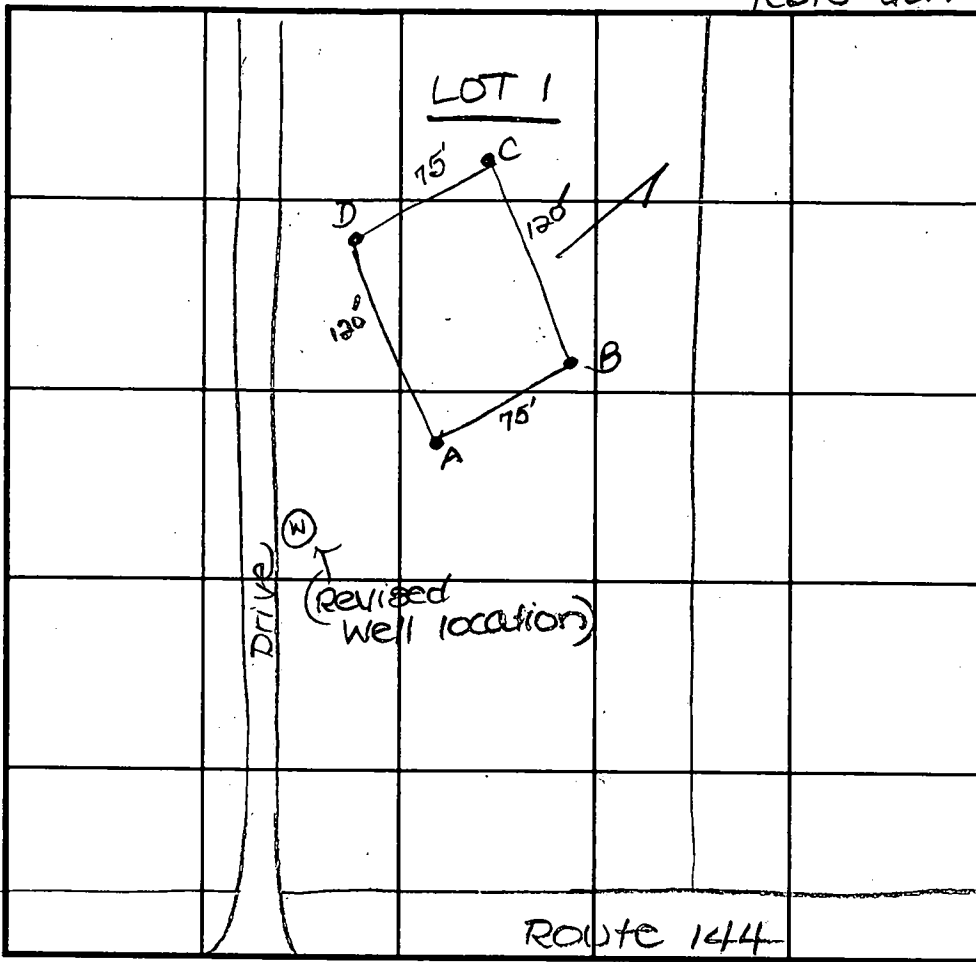
50548 C

COUNTY #

Measurements approximate - tests done in corn field

SOIL PROFILE

0' (C)
 1' topsoil
 red br
 cl lm
 4' H or br
 to tan
 sil m
 7' sm
 shale
 patch
 10% shale
 frags
 11'



SOIL PROFILE

0' (A)
 1' topsoil
 red or
 br cl lm
 3.5' H or br
 to H pk
 sil m
 7' sm
 shale
 patch
 10% shale
 frags
 11'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

0' (D)
 1' topsoil
 red or br
 cl lm
 3.5' bright
 or br
 sil m
 8' shale
 patch
 10% shale
 frags
 12'

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7-24-95	C	4.0'S	11:15 ₃₀ 11:14	11:17 11:15	11:17 Repair	11:19	2
		11.0'D	see profile				
	D	12.0'D	visual - see profile				
	B	3.5'S	11:41 11:39 ₃₀	11:42 ₃₀ 11:40 ₃₀	11:42 ₃₀ Repair	11:44 ₃₀	2
		12.0'D					
	A	4.0'S	11:59	12:03	12:03	12:09 ₃₀	7
		6.5'M	11:58 ₃₀	12:00 ₃₀	12:00 ₃₀	12:04	4
		11.0'D	see profile				

0' (B)
 1' topsoil
 red or
 br cl lm
 3' H or br
 to H pk
 sil m
 12' 5-10%
 shale
 frags

REMARKS holes tested as staked
 TYPE OF SOIL _____
 TESTED BY D. See ALSO PRESENT O. Ketterman, Jr.
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 min TRENCH WIDTH 3'
 INLET DEPTH 3.0' MAXIMUM BOTTOM DEPTH 5.0' SQ. FT./BEDROOM 180

4/17/95

APPLICATION

PERCOLATION TESTING

A 505480

P _____

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
3525 H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE 2/27/95

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 STEPHEN S. HARRIS & CHRISTINE M. LAMBRAS ^{Stephen & Sheila 302202}

ADDRESS 2402 NOBLE MANOR LANE PHONE (W) 410-388-6148
(H) 301-695-0132

(AGENT) OR PROSPECTIVE BUYER SHANBERGER & LANE

ADDRESS 8722 TOWN & COUNTRY BLDG., SUITE 104, F.C., MD. 21043 PHONE 461-9563

PROPERTY LOCATION:

SUBDIVISION HARRIS PROPERTY, LOTS 1-3 LOT NO. 1

ROAD AND DESCRIPTION N. SIDE ROUTE 144, 1250' WEST OF RT. 94
16212 Frederick Road

TAX MAP 7 PARCEL # 425

SIZE OF LOT 2.9781 AC. ± TYPE BLDG. SINGLE-FAMILY DETACHED DWELLING
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED AND RETURNED 5-10-96
Serial # 64984-3 BRMS

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 TEST NOTES VOID NOT USED - UP HILL FROM EXISTING WELL 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 _____

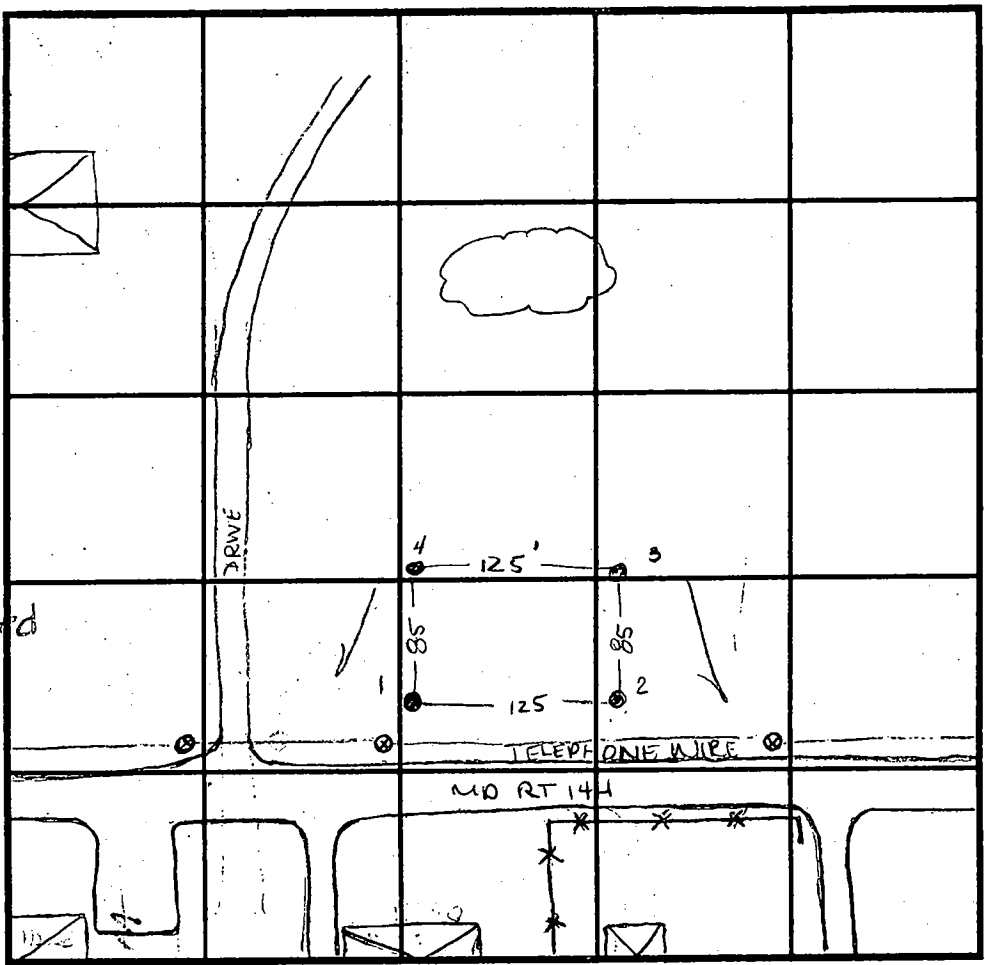
THIS IS NOT A PERMIT

SOIL PROFILE

4' 4"
 yellow
 orange
 brn
 SiLm
 3.5'
 brn
 matrix
 color
 blk/yellow
 white
 red
 mottled
 (bands)
 brn
 parent
 rock
 15% decayed
 saprolite

SOIL PROFILE

0'



2

topsoil
 yellow
 orange
 SiLm
 gravelly
 2'
 yellow
 brn
 SiLm
 15% shale

8'
 20-30%
 shak
 very
 decayed

3

yellow
 brn
 SiLm
 pink
 matrix
 SalM
 10-15%
 saprolite

yellow
 red
 white

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4-17-95	1	4' VII'	10:47	10:49	10:49	10:51 ¹⁵	2 1/4 min
	2	3.5' VII'	10:52 ⁴⁵	10:53 ³⁰	10:53 ³⁰	10:54 ⁴⁵	1 1/4 min
	2	repour	10:56	10:58	10:58	11:00 ³⁰	2 1/2 min
	2	7.5' VII'	11:02 ³⁰	11:04 ³⁰	11:04 ³⁰	11:07	2 1/2 min
	3	3' VI2'	11:06 ⁴⁵	11:08	11:08	11:09 ³⁰	1 1/2 min
	3	repour	11:10	11:12 ¹⁵	11:12 ¹⁵	11:15	2 3/4 min
	4	Visual to 11'					OK

REMARKS locate well & septic on all surrounding properties

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Alan

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 1/2 min TRENCH WIDTH 2'

INLET DEPTH 2' MAXIMUM BOTTOM DEPTH 6' SQ. FT./BEDROOM 180 ft²

C 1 **0227** SEQUENCE NO. (MDE USE ONLY)
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND
WELL COMPLETION REPORT
 FILL IN THIS FORM COMPLETELY
 PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
 45 DAYS AFTER WELL IS COMPLETED.
 COUNTY NUMBER **A 50548C**

SI/CO USE ONLY
 DATE Received

DATE WELL COMPLETED
02/13/96

Depth of Well
285
 (TO NEAREST FOOT)

PERMIT NO.
 FROM "PERMIT TO DRILL WELL"
40-93-0251

OWNER **Harris** **Stephen**
 last name first name
 STREET OR RFD **Route 144** TOWN **Lisbon**
 SUBDIVISION **Harris Property** SECTION _____ LOT **1**

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	
<i>Brown Shale</i>	0	144	
<i>Blue Rock</i>	144	285	✓

GROUTING RECORD (yes) no
 Y N
 WELL HAS BEEN GROUTED (Circle Appropriate Box)
 TYPE OF GROUTING MATERIAL (Circle one)
 CEMENT CM BENTONITE CLAY BC
 NO. OF BAGS **66** NO. OF POUNDS **6204**
 GALLONS OF WATER **396**
 DEPTH OF GROUT SEAL (to nearest foot)
 from **0** ft. to **120** ft.
 (enter 0 if from surface)

CASING RECORD
 casing types insert appropriate code below
 ST STEEL CO CONCRETE
 PL PLASTIC OT OTHER
 MAIN CASING TYPE
 Nominal diameter top (main) casing (nearest inch) **6**
 Total depth of main casing (nearest foot) **148**

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

C 3

PUMPING TEST
 HOURS PUMPED (nearest hour) **3**
 PUMPING RATE (gal. per min.) **12**
 METHOD USED TO MEASURE PUMPING RATE **Bucket**
 WATER LEVEL (distance from land surface)
 BEFORE PUMPING **65** ft.
 WHEN PUMPING **169** ft.
 TYPE OF PUMP USED (for test)
 A air P piston T turbine
 C centrifugal R rotary O other (describe below)
 J jet 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)
 + above } LAND SURFACE
 - below } **2** (nearest foot)

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

TYPE: MWD/MSD/MGD
 DRILLERS LIC. NO. **24**
Joseph E. Maype

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)
 LIC. NO. _____

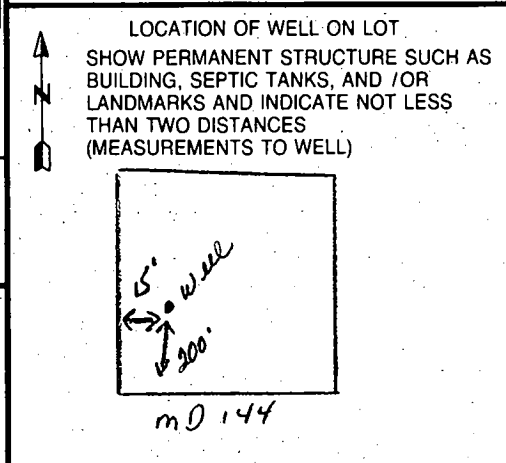
C 2

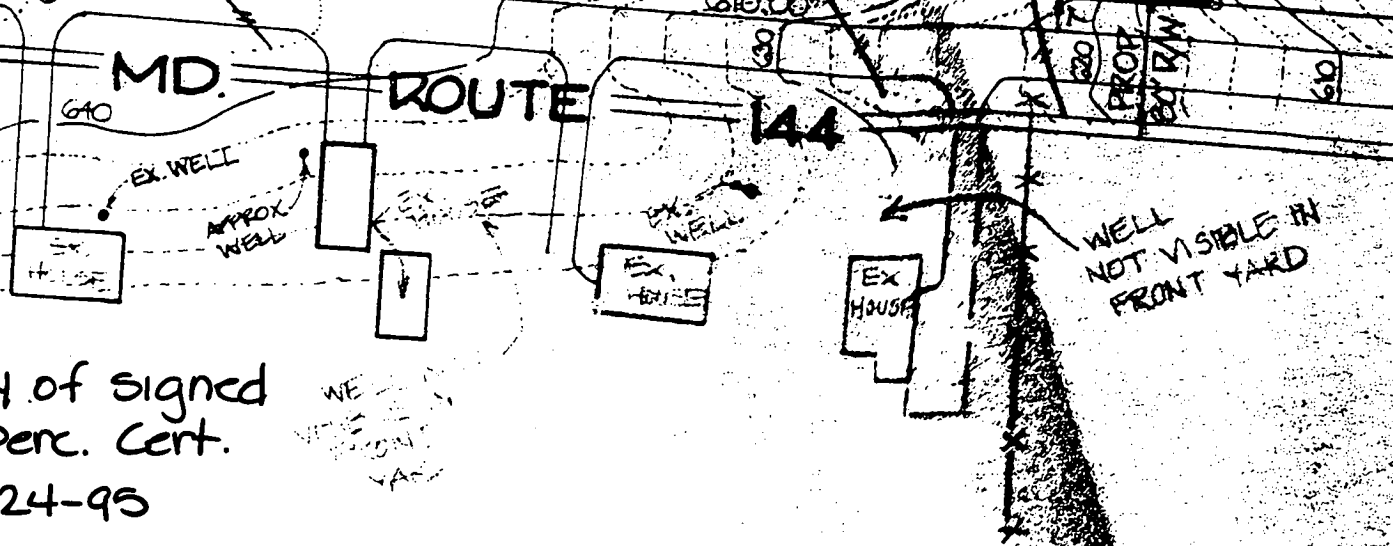
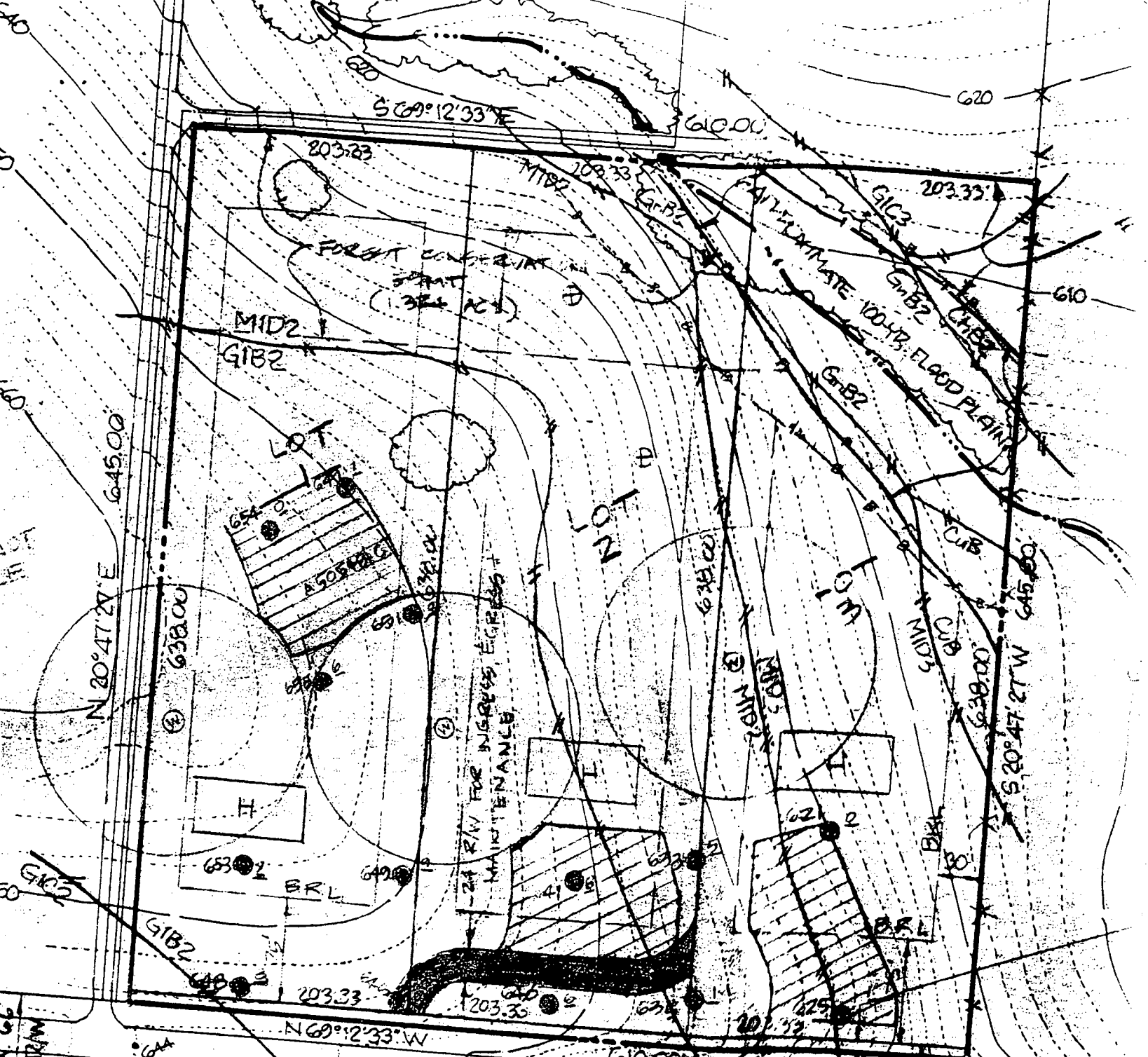
DEPTH (nearest ft.)
H 0 146 285

SLOT SIZE 1 _____ 2 _____ 3 _____
 DIAMETER OF SCREEN _____ (NEAREST INCH)

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
 70 72 74 75 76
 TELESCOPE CASING LOG INDICATOR OTHER DATA





Copy of signed
 Perc. Cert.
 10-24-95

BEARING	
N65°43'57" E	76.3'
N65°43'57" E	70.7'
N65°43'57" E	59.6'
N65°27'45" E	59.6'

13. SAFETY REQUIREMENTS - 12 FEET WIDTH - 6 INCH SURFACE COATING. GEOMETRY - MAXIMUM 15% MINIMUM OF 45 FOOT TURNING RADIUS. STRUCTURES - (CULVERTS, BRIDGES) CAPABLE OF PASSING 100-TONS. (H25 LOADING) DRAINAGE ELEMENTS - CAPABLE OF 1 FOOT DEPTH OVER DRIVEWAY SURFACE. STRUCTURE CLEARANCES - MINIMUM 12 FEET MAINTENANCE - SUFFICIENT TO INSURE ALL WEATHER USE.
14. DECLARATION OF MAINTENANCE OBLIGATION FOR PRIVATE USE-IN-COMMON DRIVEWAY SERVING LOTS 1, 2, & 3 IS RECORDED IN LIBER FOLIO
15. NO CLEARING, GRADING OR CONSTRUCTION IS PERMITTED WITH THE FORECASTED CONSERVATION EASEMENTS, OR 100 YEAR FLOODPLAIN.

AVOLIO
1224/67

SWADOW
1250/001

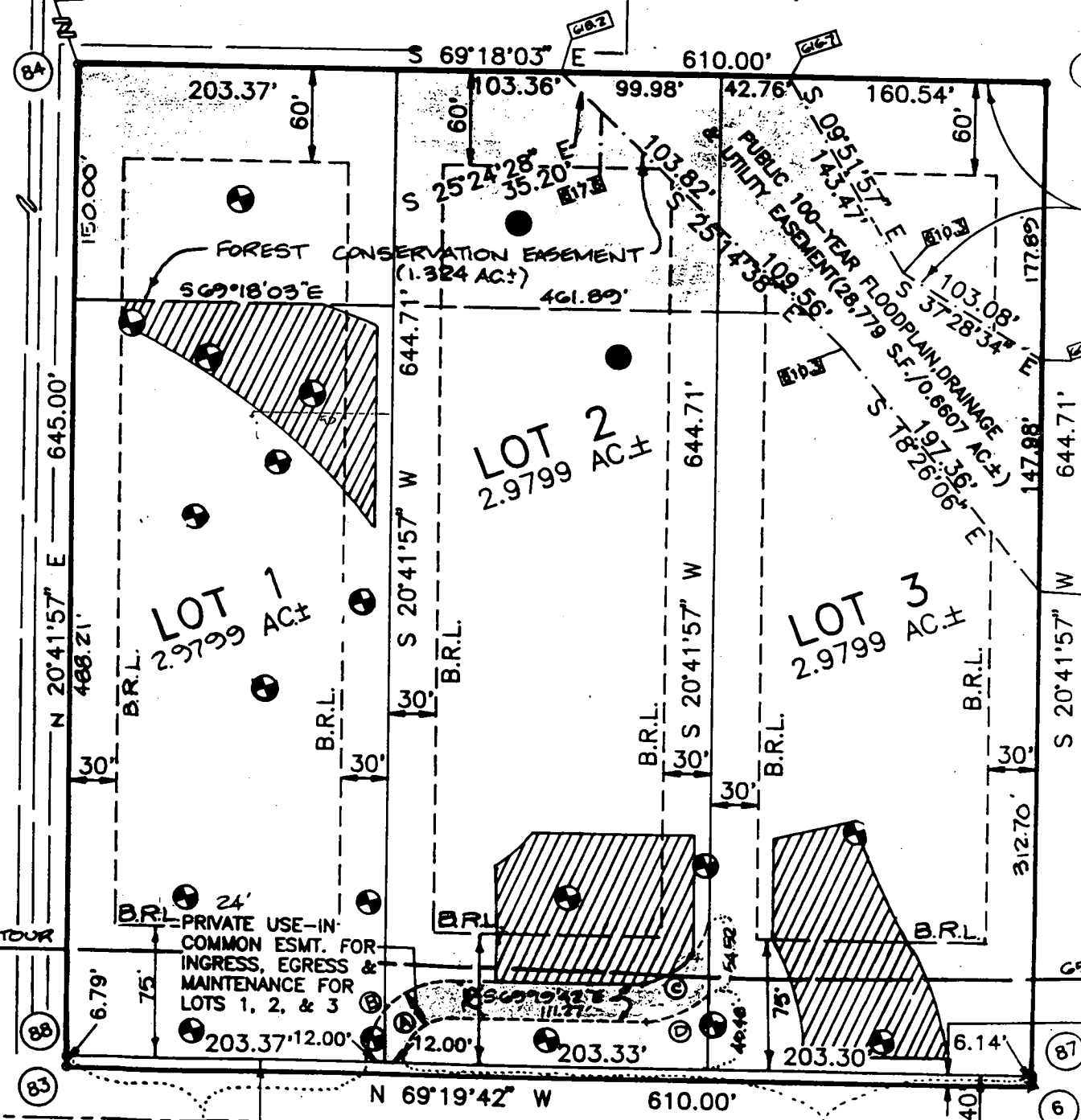
DEWBERRY
3195/969

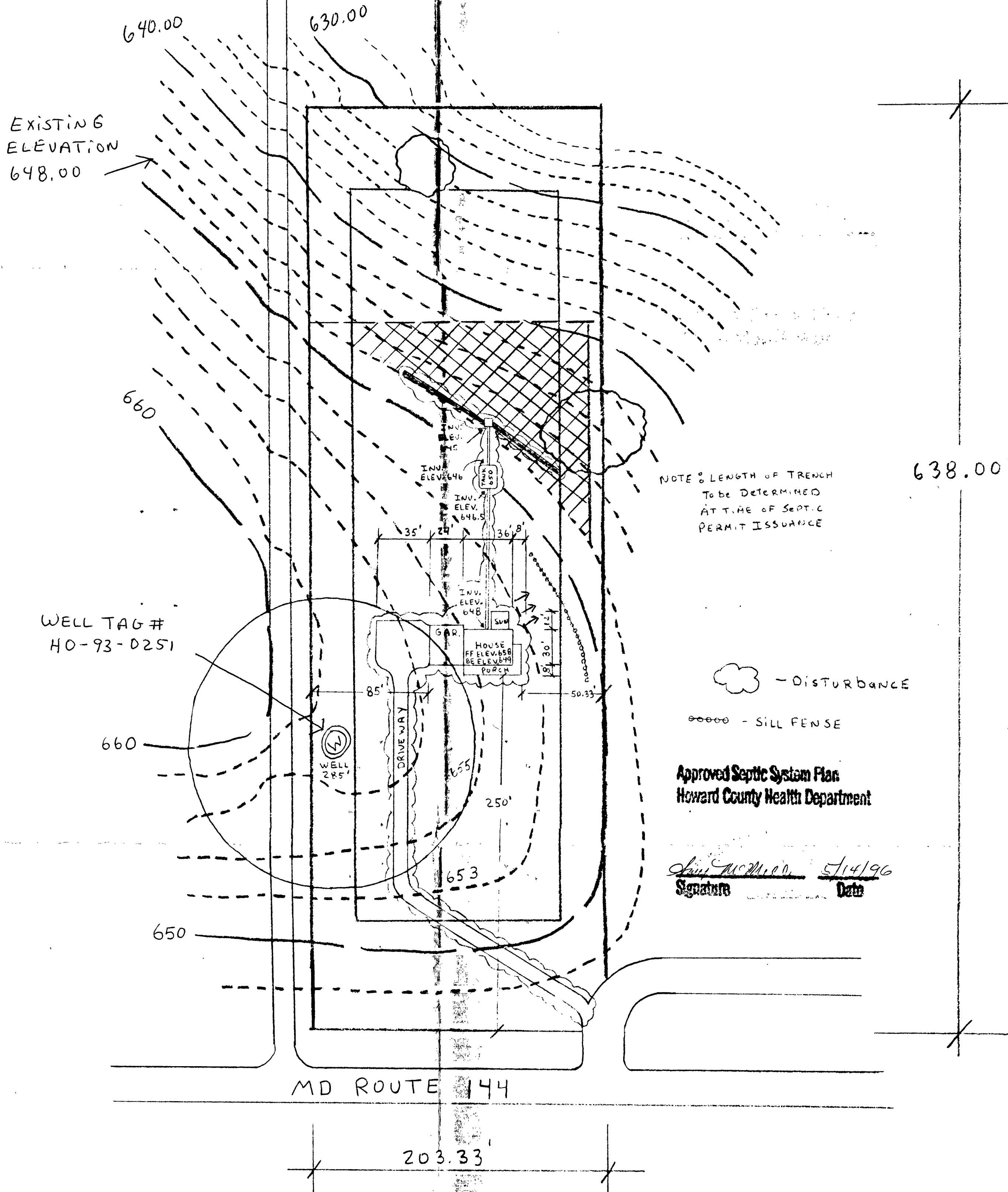
copy of
signed
final plat
F-96-64
(4-96)

GRADY
006/01

CSdBA NOISE CONTOUR

MD. ROUTE 144 (MINOR ARTERIAL)
VEHICULAR INGRESS & EGRESS IS RESTRICTED
FUTURE 80' R/W





Approved Septic System Plan
Howard County Health Department

Jan McMillon 5/14/96
Signature Date

VICTORIAN FARMHOUSE	
SCALE 1" = 50'	APPROVED BY
DATE 12-18-95	STEPHEN BARROR
DESIGNED BY: SHEILA + STEPHEN BARROR	
2,452 SQ.FT. W/ 3-CAR GARAGE	
DRAWING NUMBER 011	