

3/19/99
100 CO.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

04-362055

P 511459

A 50572-P

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 3/22/99

INSPECTOR M. Ripkin

DISTRICT _____

DATE 3/12/99

Olen Ketterman IS PERMITTED TO INSTALL ALTER _____

ADDRESS 14960 Route 144, Woodbine, Maryland 21797 PHONE 410-442-1336

SUBDIVISION Carriage Mill Farms LOT 48 ROAD 14789 Carriage Mill Drive

PROPERTY OWNER Oakhill Properties Bradley Bowser

ADDRESS _____

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 3 1/2 feet below original grade. Bottom maximum depth 7 1/2 feet below original grade. Effective area begins at 3 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Begin trenches 240 feet down the right (377.84') property line 75 feet off that same lot line as seen when facing the lot from Carriage Mill Drive. Run trenches on contour toward the left rear lot corner.

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

PLANS APPROVED BY Amy McMillen DATE 2-04-99

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

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

OLD PERMIT SYSTEM
AND RETURNED 32002
B00134991 - Screened
Porch

50572-P

APPLICATION

PERCOLATION TESTING

A 50572P

P _____

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

DISTRICT 4

DATE March 6, 1995

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 Oak Hill Properties, L.L.C.

ADDRESS 11501 Huff Court, North Bethesda, MD 20895 PHONE 301 816 9433

AGENT OR PROSPECTIVE BUYER Oak Hill Properties, L.L.C./ c/o Ralph E. Bice, III

ADDRESS Same as Above PHONE Same As Above

PROPERTY LOCATION:

SUBDIVISION Berkshire Estates LOT NO. 358

ROAD AND DESCRIPTION Property is located on the Northeast Side of the intersection of Route 144 and Old Frederick Road. (14789 CARRIAGE MILL DRIVE)

~~BLDG. PERMIT SIGN'D~~
~~AND RETURNED 2-3-99~~
Sealth B0115846

TAX MAP 8 PARCEL # 158 & 79

SIZE OF LOT Average size equals 60,000Sq. Feet TYPE BLDG. Single Family Detached - 4Bem
(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.

Ralph E. Bice, III
(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 _____

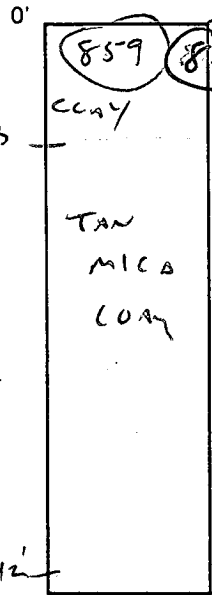
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

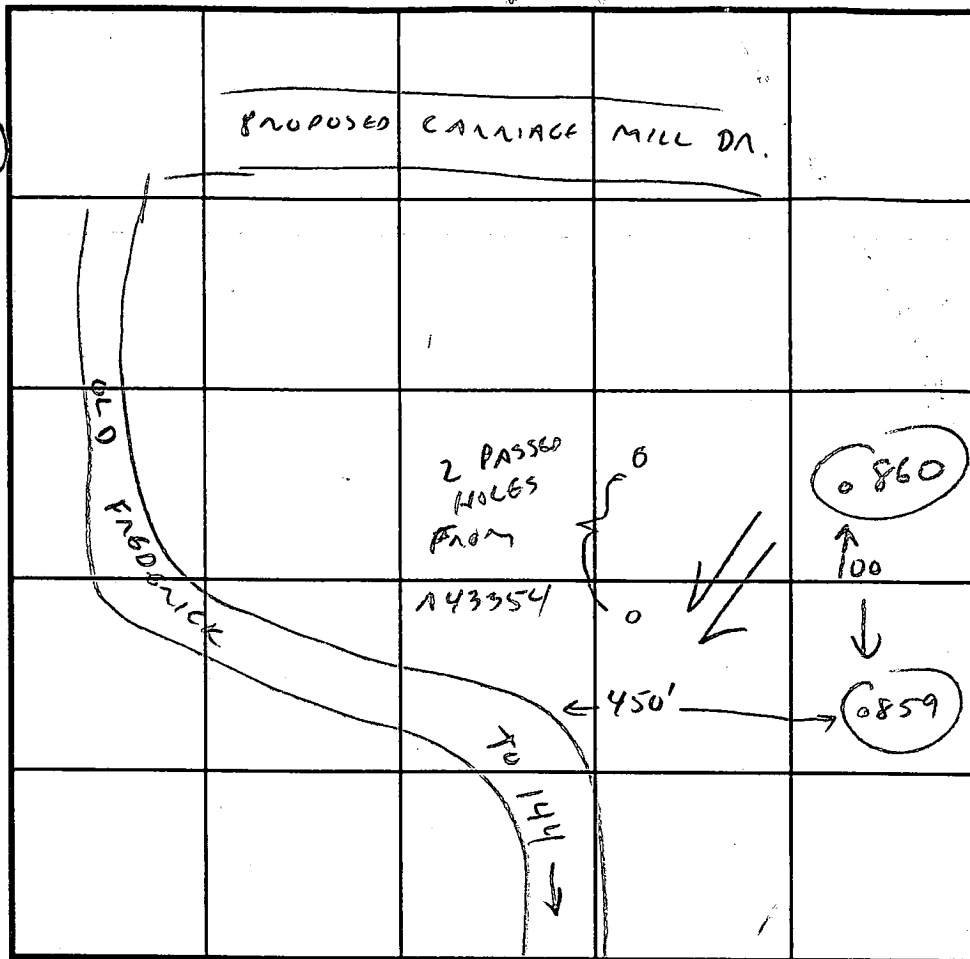
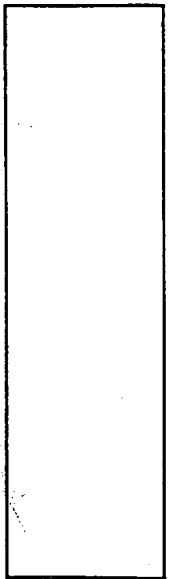
A 505 72 P

COUNTY #

SOIL PROFILE



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/11/95	859	3 8	2:45	2:47	2:47	2:50	3 MIN
		12					
	858	3 8	2:48	2:50	2:50	2:53	3 MIN
		12					
+ 2 HOLES FROM PREVIOUS 143354							

REMARKS _____

TYPE OF SOIL _____

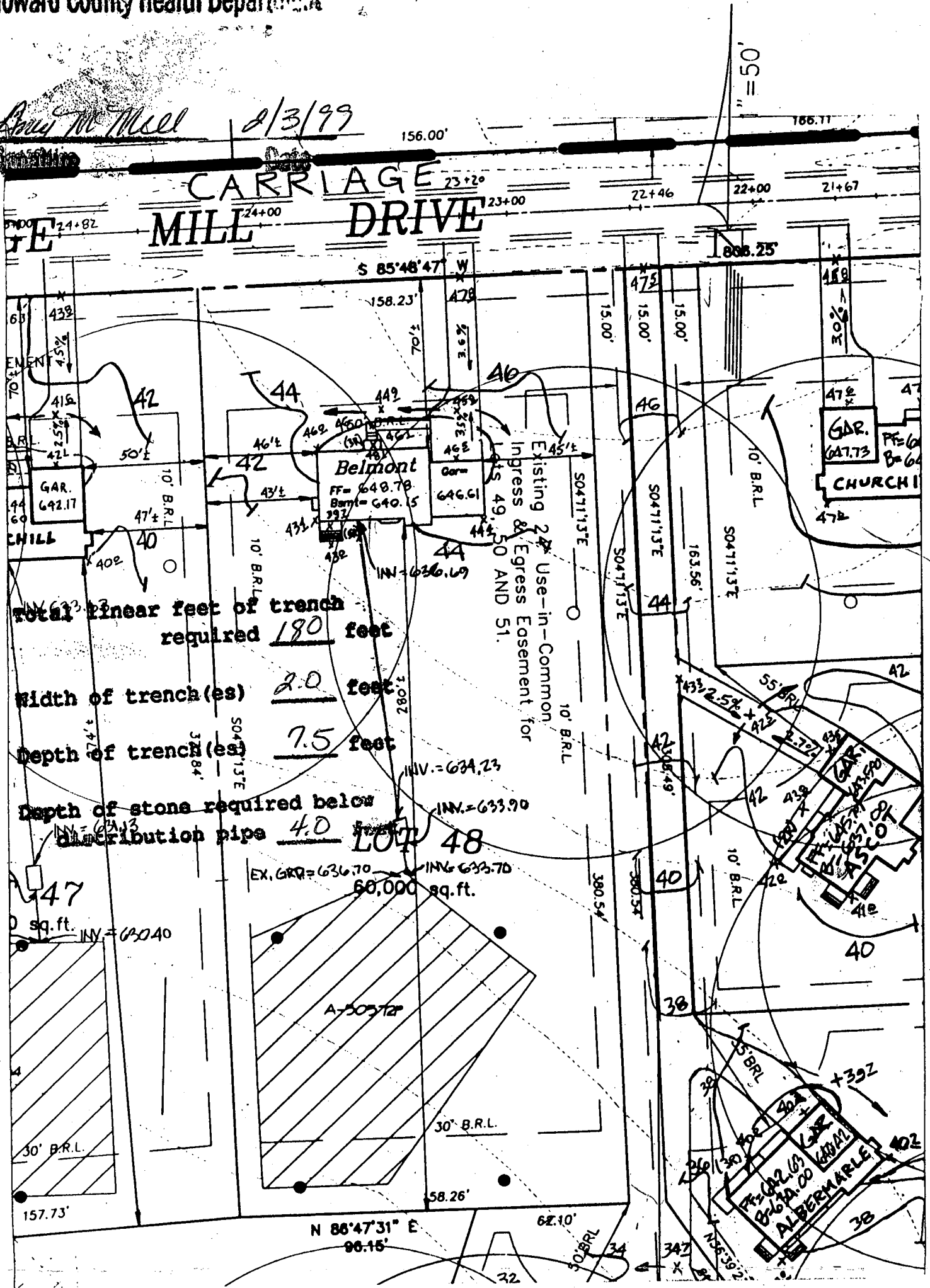
TESTED BY C. Miller ALSO PRESENT R BICE

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 3 MIN TRENCH WIDTH 2

INLET DEPTH 3 MAXIMUM BOTTOM DEPTH 7 SQ. FT./BEDROOM 180

Approved Septic System Plan
Howard County Health Department

Amir M. Mochi 2/3/99



Total linear feet of trench required 180 feet

Width of trench (es) 2.0 feet

Depth of trench (es) 7.5 feet

Depth of stone required below distribution pipe 4.0 feet

LOT 48

EX. GRQ = 636.70 INV. = 633.70
60,000 sq. ft.

CARRIAGE MILL FARMS

PHASE II
LOT 48
BUILDING PERMIT

DATE: 1/27/99

PROJECT NO.: 95005.22

DRAWN BY: SMZ

SCALE: 1"=50'

SEPTIC DATA

INV. OUT OF HOUSE = 639.69
INV. INTO SEPTIC TANK = 634.23
INV. OUT SEPTIC TANK = 633.90
INV. INTO DIST. BOX = 633.70
EX. ELEV @ DIST. BOX = 636.70

GP-96167

R.M. MOCHI GROUP, P.C.

CIVIL ENGINEERS
LAND SURVEYORS
PLANNERS
ENVIRONMENTAL

P.O. Box 10
New Market, MD 21774-0010

10120 A Old National Pike
Ijamsville, MD 21754-9706

(301) 865-5858
Fax: (301) 865-5111

C1 9323 SEQUENCE NO. (MDE USE ONLY)

STATE OF MARYLAND WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED AFTER WELL IS COMPLETED.

COUNTY NUMBER A 50572-P

DATE RECEIVED MM DD YY 8 13

DATE WELL COMPLETED MM DD YY 12 29 98

DEPTH OF WELL 22 150 26 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1906

OWNER OAKHILL PROPERTIES STREET OR RD CARRIAGE MILL DR. TOWN COOKSVILLE SUBDIVISION CARRIAGE MILL FARMS SECTION LOT 48

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Rows include dirt, soft yellow rock, soft red rock, med hard gray rock, hard gray rock, med hard gray rock, hard gray rock, hard light gray rock, med hard brown rock, hard light gray rock, hard brown rock, hard light gray rock, med hard gray rock, hard gray rock, hard green rock, hard light gray rock, hard gray rock.

GROUTING RECORD: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM), CEMENT (CM), BENTONITE CLAY (BC), NO. OF BAGS 23, NO. OF POUNDS 2300, GALLONS OF WATER 138, DEPTH OF GROUT SEAL 0 to 103 ft.

CASING RECORD: casing types (ST, CO, PL, OT), MAIN CASING TYPE (ST), Nominal diameter 6, Total depth 105.

OTHER CASING (if used) table with columns: diameter, depth (feet).

SCREEN RECORD: screen type (ST, BR, HO, PL, OT), DEPTH (nearest ft.) 103, 450.

NUMBER OF UNSUCCESSFUL WELLS: 0. WELL HYDROFRACTURED: YES (Y), NO (N).

- 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"...

DRILLERS LIC. NO. 1 M W D 304 David Kelley DRILLERS SIGNATURE

LIC. NO. 1 D Arnold Johnson SITE SUPERVISOR

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

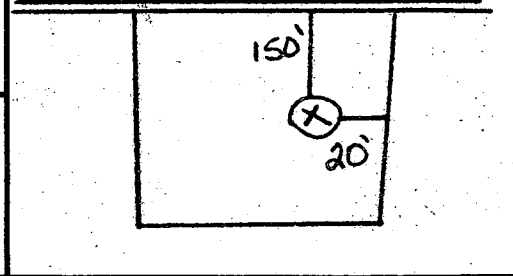
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.) W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

PUMPING TEST: HOURS PUMPED 6, PUMPING RATE 1.46, METHOD USED TO MEASURE PUMPING RATE timer, WATER LEVEL 24 ft. BEFORE PUMPING, 435 ft. WHEN PUMPING, TYPE OF PUMP USED (S) submersible.

PUMP INSTALLED: DRILLER INSTALLED PUMP YES (NO), TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29, CAPACITY: GALLONS PER MINUTE 31-35, PUMP HORSE POWER 37-41, PUMP COLUMN LENGTH 43-47, CASING HEIGHT 2 (nearest foot).

LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURES AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)



B 1 8515 SEQUENCE NO. (MDE USE ONLY)

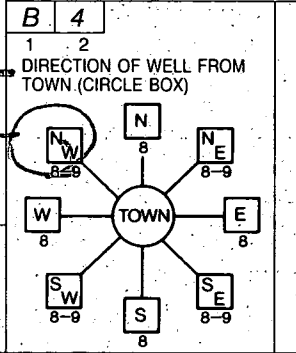
STATE OF MARYLAND PERMIT TO DRILL WELL please print or type

STATE PERMIT NUMBER Ho - 94 - 1906 fill in this form completely

OWNER INFORMATION: Date Received (APA), Berke Joseph, 414 Timbercove Circle, Longwood FL 32779

LOCATION OF WELL: B 3, HOWARD COUNTY, CARRIAGE Mill FARMS, COOKSVILLE, NEAREST TOWN

DRILLER INFORMATION: David Kelly, MWD 304, Jones Well Drilling Inc, 3700 Rush Rd, JARRETTSVILLE, DAVID KELLY, 10-13-98



CARRIAGE Mill Dr, NEAR WHAT ROAD, ON WHICH SIDE OF ROAD, DISTANCE FROM ROAD 150 FT, TAX MAP: 8, PARCEL 158

WELL INFORMATION: APPROX. PUMPING RATE 4 GAL. PER MIN., AVERAGE DAILY QUANTITY NEEDED 400 GAL. PER DAY

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL: HOWARD A 50572 P, COUNTY NAME, STATE SIGNATURE, DATE ISSUED 10/23/98, COUNTY SIGNATURE, EXP. DATE 10/22/99, NORTH GRID 792 000, EAST GRID 0544 000

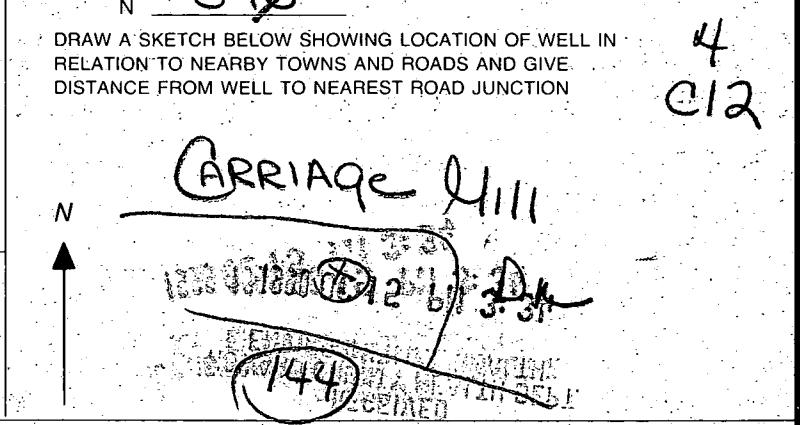
USE FOR WATER (CIRCLE APPROPRIATE BOX): D DOMESTIC POTABLE SUPPLY & RESIDENTIAL IRRIGATION

APPROXIMATE DEPTH OF WELL 200 FEET, APPROXIMATE DIAMETER OF WELL 6 INCH, NEAREST INCH

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X, SOURCES OF DRILLING WATER, WRITE THE BOX NUMBER FROM THE MAP HERE, E 7902, N 5404

METHOD OF DRILLING (circle one): BORED (or Augered), JETTED, Jetted & DRIVEN, AIR-ROTary, AIR-PerCussion, ROTARY (Hydraulic Rotary), CABLE, REVerse-ROTary, Drive-POINT

REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX): N THIS WELL WILL NOT REPLACE AN EXISTING WELL



Not to be filled in by driller (MDE OR COUNTY USE ONLY): APPROP. PERMIT NUMBER, G A P, PERMIT No. Ho - 94 - 1906

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
 Replacement

Receipt # _____
 Date 4-16-99

Name of Installer _____

Telephone 301-831-7057

License Number _____

Journeyman plumber

Certified Well Pump Installer Well Driller Registered Plumber _____

Name of Property Owner Oak Hill Prop

Telephone _____

Subdivision Carriage mill Dr. Lot # 48

Well Tag # HO - 94 - 1906

Site Address 14789 Carriage mill Dr.

Pump

Motor

Pitless Adapter

- | | | |
|--|---------------------|--------------------------|
| 1. Type | 1. Horsepower _____ | 1. Make <u>Martinson</u> |
| a. Deep well jet _____ | 2. RPM _____ | 2. Model # <u>B-108</u> |
| b. Shallow well jet _____ | 3. Voltage <u>✓</u> | 3. Depth <u>3 1/2</u> |
| c. Submersible <u>✓</u> | a. 110 _____ | |
| 2. Make <u>Goulds</u> | b. 220 <u>✓</u> | |
| 3. Model # <u>50507422</u> | | |
| 4. Capacity <u>5</u> GPM | | |
| 5. Pump exceeds well capacity Yes _____ No <u>✓</u> | | |
| 6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____ | | |
| 7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards <u>✓</u> Other _____ | | |

Tank

Piping

Well data

- | | | |
|------------------------------------|---|--|
| 1. Capacity <u>32</u> | 1. Type <u>PE</u> | 1. Depth <u>450</u> ft. |
| 2. Pressure relief valve? <u>✓</u> | 2. Size <u>1"</u> | 2. Yield <u>1.46</u> GPM |
| | 3. NSF and/or BOCA Code approved <u>yes</u> | 3. Static water level _____ ft. |
| | 4. Depth of supply line <u>3 1/2</u> | 4. Will water supply be disinfected by installer? <u>yes</u> |

Not our well

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.

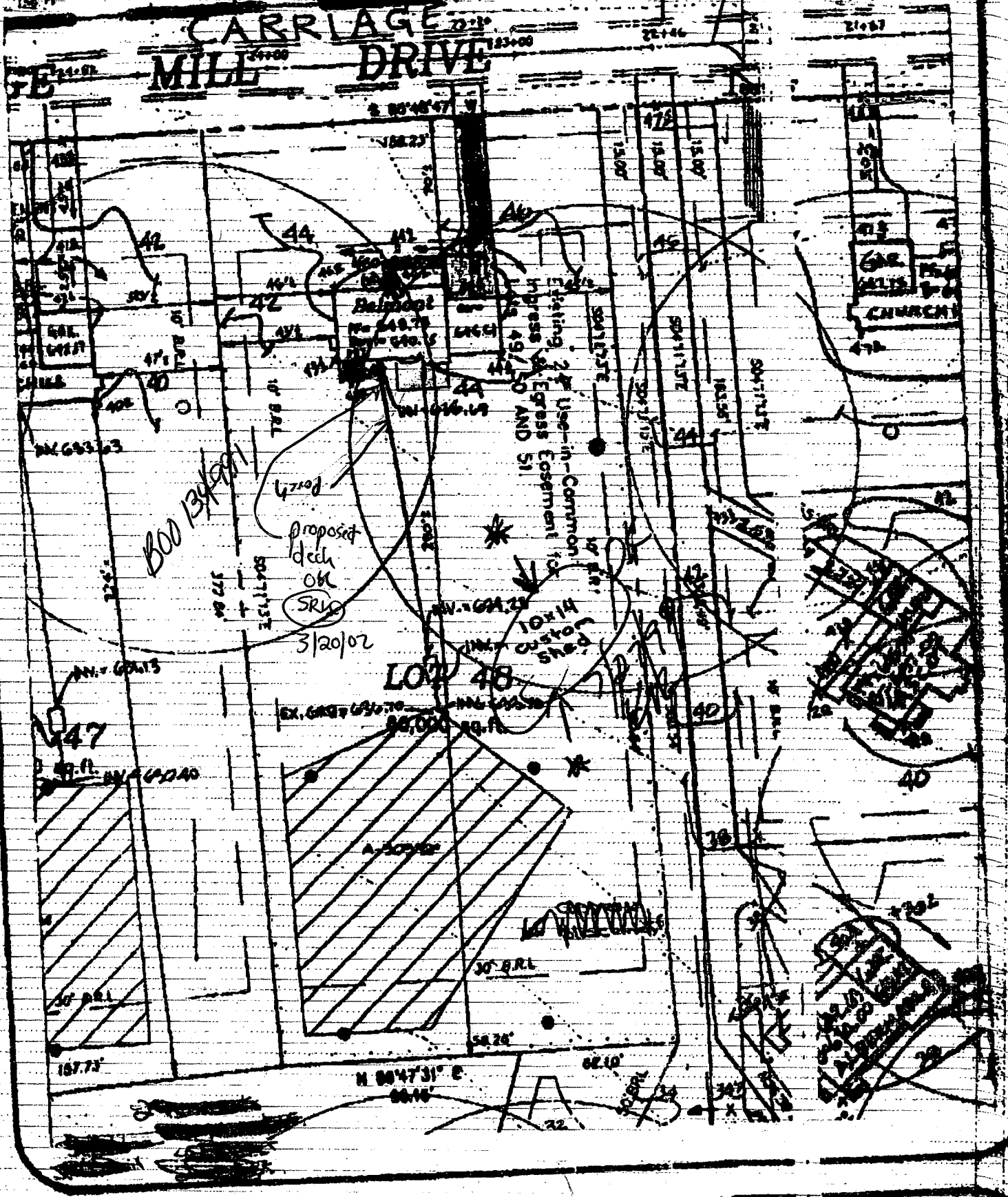
Signature of Applicant: Samuel Wilson

Date: 4-16-99

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

Filed 4-16-99
3/12/99

CARRIAGE MILL DRIVE



CARRIAGE MILL FARMS

SEPTIC DATA

INV. OUT OF HOUSE = 635.69
 INV. INTO SEPTIC TANK = 634.25
 INV. OUT SEPTIC TANK = 633.90

R.M. MOL-II GROUP