

6.9.98
WPIAM
7/10/98
13.30 cancelled
7-13-98
3:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-322319

P 59863

A 50617-L

DISTRICT _____

DATE 3-11-98

DATE SYSTEM APPROVED 7-16-98

INSPECTOR AU

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~461-9933X~~ 410-313-2640

INDEXED

Arnold Backhoe & Septic Service IS PERMITTED TO INSTALL ALTER

ADDRESS P. O. Box 15, Woodbine, Maryland 21797 PHONE 410-795-7873

SUBDIVISION Woodford's Grant LOT 1039 ROAD 11358 Barley Field Way

PROPERTY OWNER Trinity Custom Homes

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

MANHOLE CLEANOUT REQUIRED

NUMBER OF BEDROOMS 3

BLDG. PERMIT SIGN
AND RETURNED 8-3-98
Serial # Bro 113314-deck.

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

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 - Begin trenches 130 feet up the left (236.96') lot line and 45 feet off that same lot line as seen when facing the lot from Barley Field Way. Run trenches on contour toward the right 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. 2/25/98 OK A McMiller
7/7/98 Revised DKS

PLANS APPROVED BY Kim Maiste/Donna K. Soe REVISED DATE 02/17/98

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

BLDG. PERMIT SIGN
AND RETURNED 7-8-98
Serial # Bro 112742
purpose call

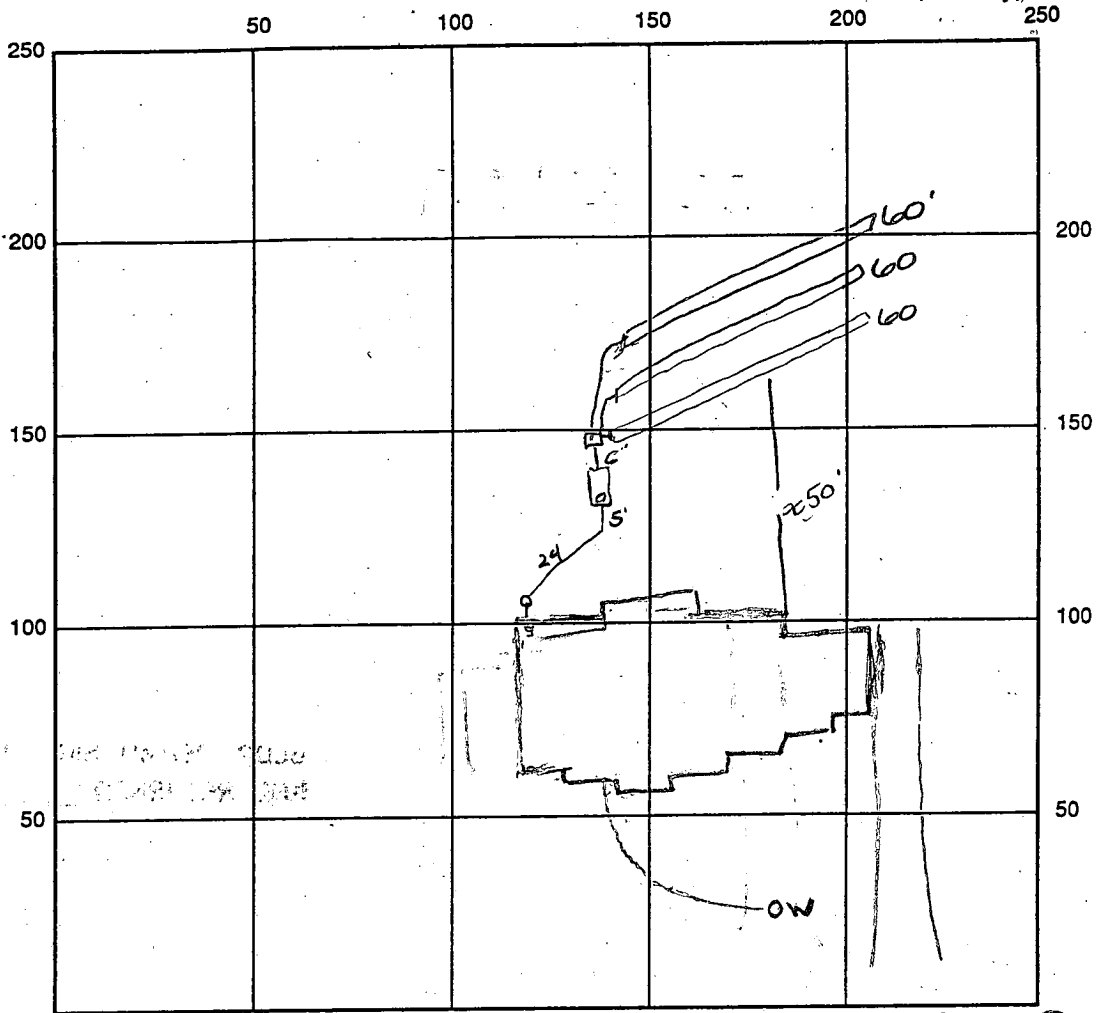
PERMIT VOID AFTER TWO YEARS

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 50617-L



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE *Barley Field Way*

SEPTIC TANK LEVEL OK 1250gal CLEANOUTS OK - one on tank - one @ house

DISTRIBUTION BOX LEVEL OK pre-fab baffle

DRAIN FIELD/TITLE DEPTH 5.0 FT. TRENCH WIDTH 3.0 FT. INLET DEPTH 3.0 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 180 FT. $\frac{280}{40}$

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 540 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET 2 FT.

ABSORBENT AREA — SQ. FT.

REMARKS: WPI: 6/9/98 OK H.O. 6/13/98 OK to cover all work
final etc

DATE SYSTEM APPROVED 7/16/98 INSPECTOR Amy McMill

(MDE USE ONLY)

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.

1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

COUNTY NUMBER A50617L

ST/CO USE ONLY
DATE RECEIVED
2-3-98

DATE WELL COMPLETED
MM 01 DD 30 YY 98

Depth of Well
22 385 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HO-94-1030

OWNER TBI Homes
STREET OR RFD Barkley Field Way TOWN Marriottsville
SUBDIVISION Woodford's Grant SECTION LOT 1040

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	25	
Sand Stone	25	35	✓
MICKA	35	75	
Sand Stone	75	80	✓
MICKA	80	385	

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N

TYPE OF GROUTING MATERIAL (Circle one)
CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 10 NO. OF POUNDS 1000

GALLONS OF WATER 60

DEPTH OF GROUT SEAL (to nearest foot)
from 0 ft. to 30 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 PL3 Nominal diameter top (main casing) (nearest inch!) 6 Total depth of main casing (nearest foot) 34

60 61 62 63 64 65 66 67 68 69 70

OTHER CASING (if used)

diameter inch _____ depth (feet) from _____ to _____

screen type or open hole

SCREEN RECORD

insert appropriate code below

ST STEEL BR BRASS HO OPEN HOLE
 PL PLASTIC OT OTHER

C 2

DEPTH (nearest ft.)

HO 32 385

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76

DIAMETER OF SCREEN _____ (NEAREST INCH)
from _____ to _____

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

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 6

PUMPING RATE (gal. per min.) 3

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)
BEFORE PUMPING 35 ft.
WHEN PUMPING 145 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 or NO) YES

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 29

CAPACITY: GALLONS PER MINUTE (to nearest gallon) _____ 31 _____ 35

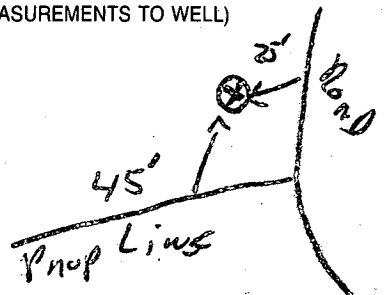
PUMP HORSE POWER _____ 37 _____ 41

PUMP COLUMN LENGTH (nearest ft.) _____ 43 _____ 47

CASING HEIGHT (circle appropriate box and enter casing height)
 + above } LAND SURFACE
 - below } 2 (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)



DRILLERS LIC. NO. 1 MSD116
Valh Meyer
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

LIC. NO. 1 MSD117
Valh E. Meyer

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

B 1 **8759** 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
HC-94-1330
 fill in this form completely

Date Received (APA) **111397**

OWNER INFORMATION

TBI HOMES INC
 15 Last Name 13 Owner 34 First Name

6212 DEUON DR
 36 Street or RFD 55

COLUMBIA **MO 21049**
 57 Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

HOWARD
 8 COUNTY 21

WOODFORDS GRANT
 23 SUBDIVISION 42

SECTION **T** LOT **40**
 44 46 48 50

MARLBOROUGH
 52 NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) **1 MI**
 73 76 77 78

DRILLER INFORMATION CIRCLE: **(MSD) MGD/MWD**

Ralph Mayne **116**
 77 License No. 80

Driller's Name **Ralph Mayne (well drilling)**

Firm Name **Gino Brown Church & Mt Airy**

Address **Ralph Mayne Nov 11 1997**

Signature _____ Date _____

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

NEAR WHAT ROAD **BARLEY FIELD WAY**
 11 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

DISTANCE FROM ROAD **25**
 34 37

ENTER FT OR MI **44**
 38 39

TAX MAP: _____ BLK: _____ PARCEL _____

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 **A50617L**
 COUNTY NAME COUNTY NO.

STATE SIGNATURE _____ INSERT S

DATE ISSUED **111897** **A.M. Miller** **11/18/98**
 43 48 CO SIGNATURE EAST EXP. DATE

NORTH GRID **546000** EAST GRID **0828000**
 50 55 57 63

APPROXIMATE DEPTH OF WELL **150** FEET
 24 28

APPROXIMATE DIAMETER OF WELL **6"** NEAREST INCH

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 DEEPEINED 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 DEEPEIN AN EXISTING WELL

PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) _____

Not to be filled in by driller (MDE OR COUNTY USE ONLY)

APPROP. PERMIT NUMBER **G A P**

FORCE **AM** WRITE INITIALS IN BOX PERMIT No. **HC-94-1330**
 67 68 70 71 72 73 74 75 76 77 78 79

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

- well**
-
-

WRITE THE BOX NUMBER FROM THE MAP HERE

828
50046

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

1-26-98
18' bagroot
1/26/98
 location looks good
 34' casing
 30' open
 10' bag (KM)

APPLICATION

PERCOLATION TESTING

A 50617-2

P _____

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

DISTRICT _____

DATE 3-30-95

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 Thomas Powell ~~c/o Land Design & Development, Inc.~~ Trinity Custom Homes

ADDRESS 10805 Hickory Ridge Rd., Columbia 21044 PHONE (410) 740-2100

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Powell Property LOT NO. X 10

ROAD AND DESCRIPTION off of Marriottsville Road, Howard County, MD

(11358 BARLEY FIELD WAY)

TAX MAP 10 PARCEL # 27, 29, 151

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. single family home - 3 Bdrms
(SINGLE FAMILY DWELLING OR COMMERCIAL)

**BLDG. PERMIT SIGNED
AND RETURNED 2-17-98**

Serial # B-10 98213 Bdrms

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

A 50617L

COUNTY #

SOIL PROFILE

0' 1062 1066
 rocky
 CSL
 red /
 orange
 brn

5' rocky
 orange
 brn
 SL
 mica

11' 1063
 dark
 grey SL
 mica

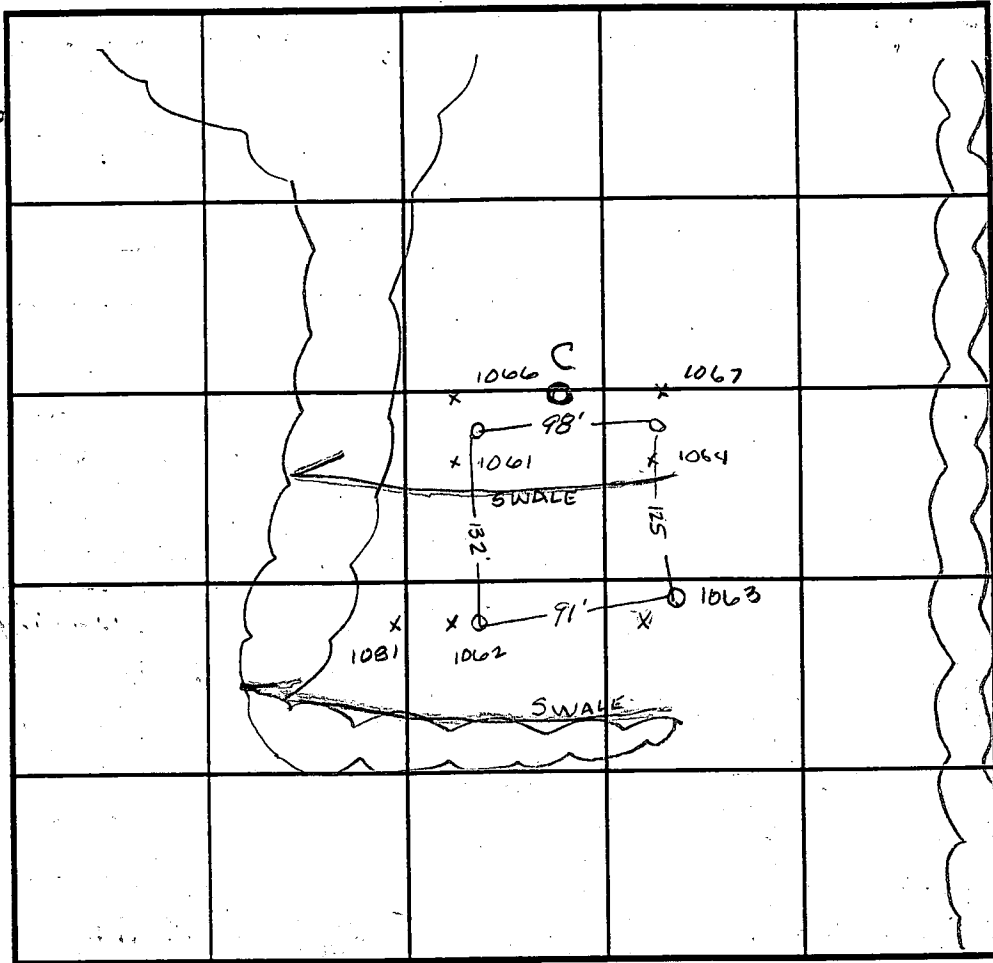
4.5' 1063
 orange
 brn
 mica
 CSL

12' 1064
 1gt
 orange
 tan
 mica
 SL
 gravelly
 shale /
 mica
 OK

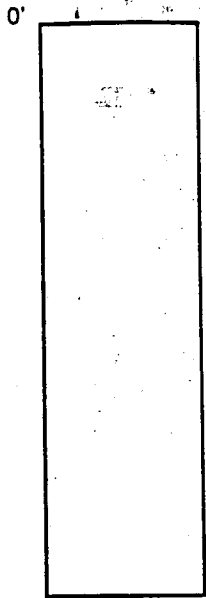
2' 1064
 orange
 brn
 CSL

10' 1064
 orange
 brn
 SSil
 mica
 100%
 shale

11' darker
 brn sil
 mica / shale
 20%



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-23-94	1062	5.5' / V12	9:56	9:57 ³⁰	9:57 ³⁰	10:00	2 1/2 min
	1066	3' / VII'	10:01 ¹⁰	10:01 ³⁰	10:01 ³⁰	10:02	30 sec
	1066	repair	10:02 ¹⁵	10:03	10:03	10:03 ⁴⁵	45 sec
	1063	visual to 12'					OK
	1064	8' / VII'	10:34	10:34 ¹⁵	10:34 ¹⁵	10:36 ⁴⁵	2 1/2 min
	1064	2.5' / VIII'	10:35 ⁴⁵	10:39 ³⁰	10:39 ³⁰	10:44 ³⁰	5 min

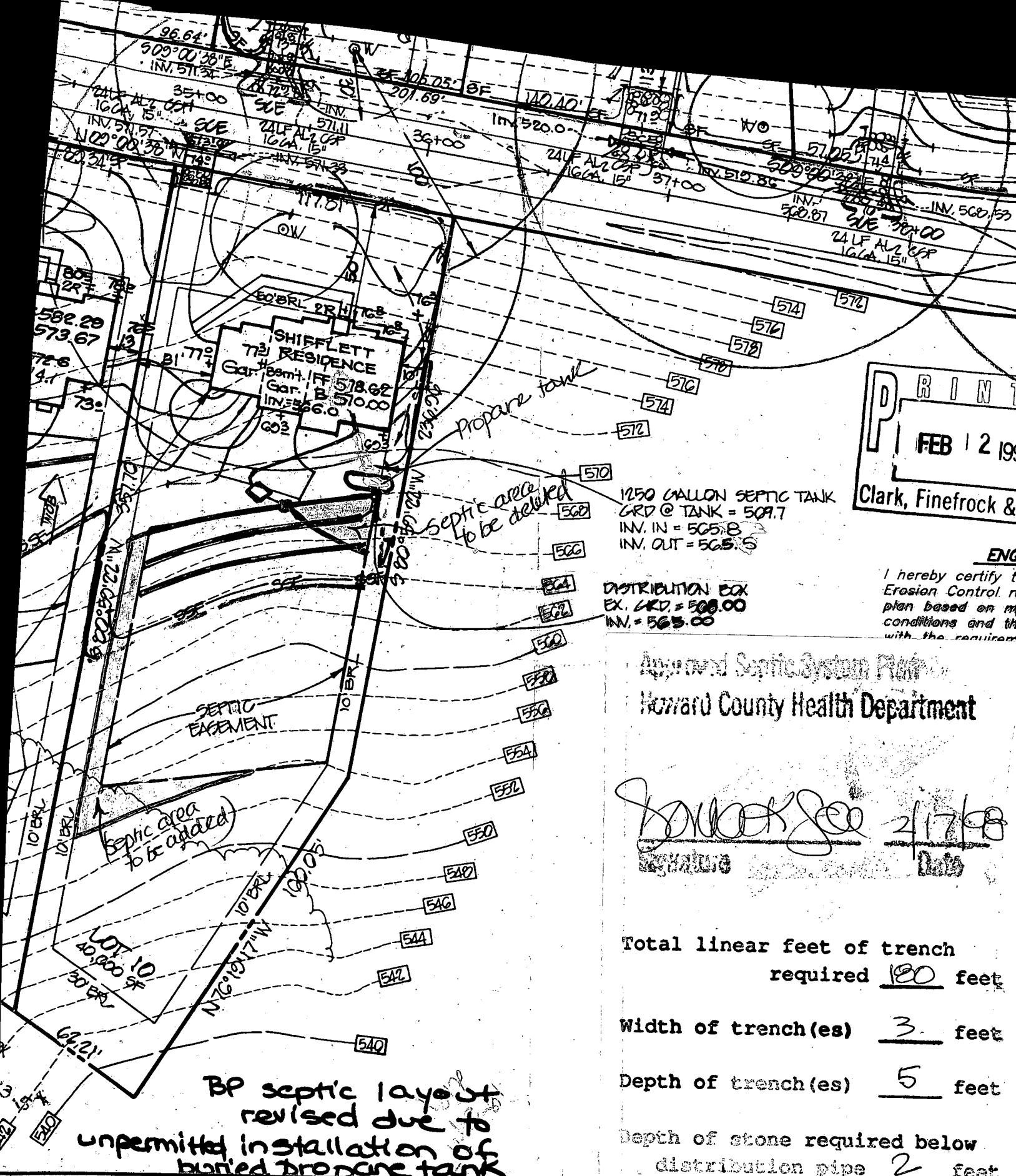
REMARKS _____

TYPE OF SOIL _____

TESTED BY Amy McMillen ALSO PRESENT Olan Ketterman

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 min TRENCH WIDTH 3

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



PRINT
 FEB 12 1998
 Clark, Finerock &

1250 GALLON SEPTIC TANK
 GRD @ TANK = 509.7
 INV. IN = 505.8
 INV. OUT = 505.5

DISTRIBUTION BOX
 EX. GRD = 508.00
 INV. = 505.00

I hereby certify that this Erosion Control plan is based on the conditions and the requirements of the

Approved Septic System Plan
 Howard County Health Department

[Signature] 2/17/98
 Signature Date

Total linear feet of trench required 180 feet

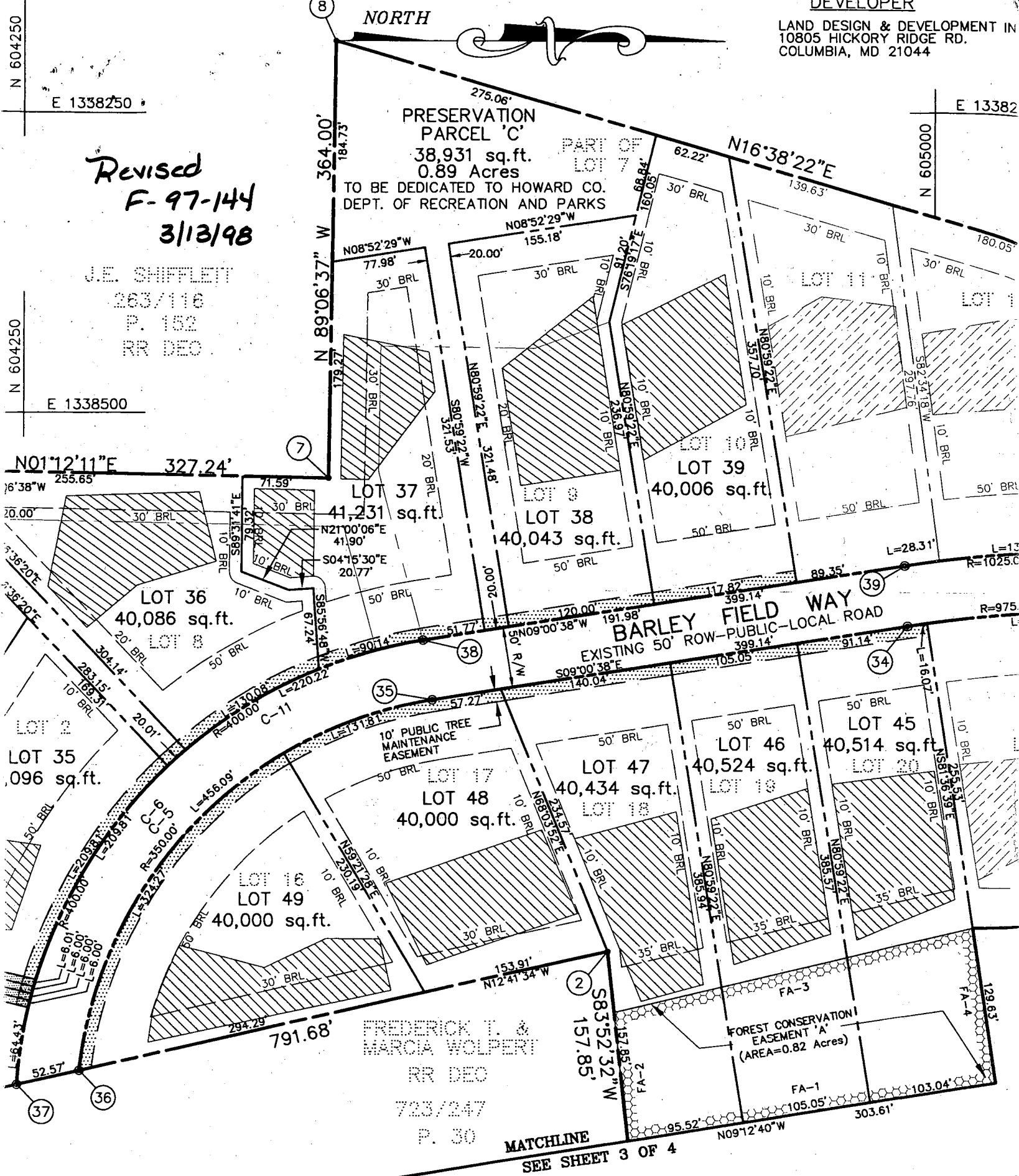
Width of trench(es) 3 feet

Depth of trench(es) 5 feet

Depth of stone required below distribution pipe 2 feet

BP septic layout revised due to unpermitted installation of buried propane tank

7/8/98
 SRS

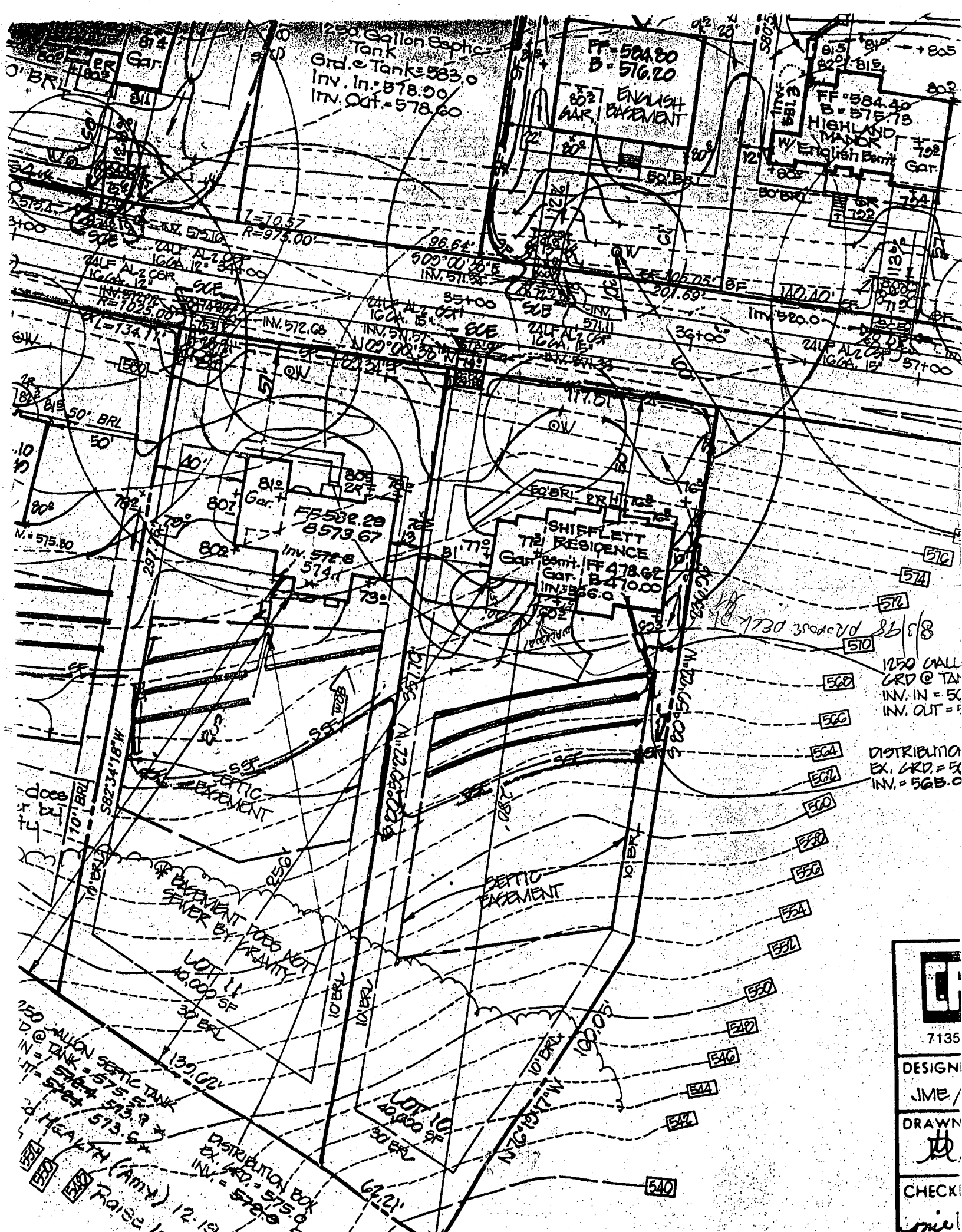


OWNER'S STATEMENT

H. POWELL, JR., PATRICIA ANN MERZ, AND WOODFORD JOINT VENTURE (COMPOSED OF ELICOTT CITY LAND HOLDINGS, VENTURES, INC.) OWNERS OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF AND IN CONSIDERATION OF THE APPROVAL OF OF THIS FINAL PLAT BY THE DEPARTMENT OF PLANNING AND ZONING, MINIMUM BUILDING RESTRICTION LINES AND GRANT UNTO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN CANALS, DRAINS, WATER PIPES AND OTHER MUNICIPAL UTILITIES AND

SURVEY

I HEREBY CERTIFY THAT THIS SURVEY IS CORRECT; THAT THE PROPERTY COVEY



7135
DESIGNER
JME
DRAWN
CHECKED