

9/1/98
10:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

03-322424

P 510641

A 50617-W

DISTRICT 3rd

DATE 8/24/98

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXX~~ 410-313-2640

INDEXED

DATE SYSTEM APPROVED 9.30.98

INSPECTOR KM

Adamson Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 7825 McCellan Avenue, Boonsboro, Maryland 21713 PHONE 301-416-3968 829-0149

SUBDIVISION Woodford's Grant LOT 45 ROAD 11351 Barley Field Way

PROPERTY OWNER Hamilton Reed, LLC MIKE FAGAN.

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

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 4.5 feet below original grade. Effective area begins at 3 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - From the front lot line, start the first trench 130 feet down the left lot line and 50 feet off that lot line. Run trenches on 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/MR

PLANS APPROVED BY Amy McMillen/Donna K. Soe REVISED DATE 06/30/98

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

BLDG. PERMIT SIGNED
AND RETURNED 4-22-99
Serial # B00117985
3/20/03 B00.140792 FINISH BASEMENT

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

A 50617W

C1 05116

SEQUENCE NO. (MDE 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. 3-6 ON ALL CARDS)

COUNTY NUMBER A50617 W

ST/CO USE ONLY DATE Received 02.03.98

DATE WELL COMPLETED 01.29.98

Depth of Well 305 (TO NEAREST FOOT)

PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-94-1389

OWNER Hamilton Reed STREET OR RFD Barley Field Way TOWN Mammothville SUBDIVISION Woodfords Grant SECTION LOT 48

WELL LOG table with columns: DESCRIPTION, FEET (FROM, TO), check if water bearing. Includes entries for Top Soil, Sandy Sandstone, MICKA, Sandstone, MICKA.

GROUTING RECORD form including: WELL HAS BEEN GROUTED (Y), TYPE OF GROUTING MATERIAL (CM, BC), NO. OF BAGS (7), NO. OF ROUNDS (300), GALLONS OF WATER (42), DEPTH OF GROUT SEAL (0 to 23 ft).

CASING RECORD form including: casing types insert appropriate code below (ST, CO, PL, OT), MAIN CASING TYPE (PL), Nominal diameter top (main) casing (6), Total depth of main casing (25).

OTHER CASING (if used) form with columns for diameter and depth.

SCREEN RECORD form including: screen type or open hole (HO), insert appropriate code below (ST, BR, PL, HO, OT).

NUMBER OF UNSUCCESSFUL WELLS: 0

WELL HYDROFRACTURED (Y) (N)

CIRCLE APPROPRIATE LETTER: A, E, P

DRILLERS LIC. NO. MSD116, DRILLERS SIGNATURE, LIC. NO. MSD112

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

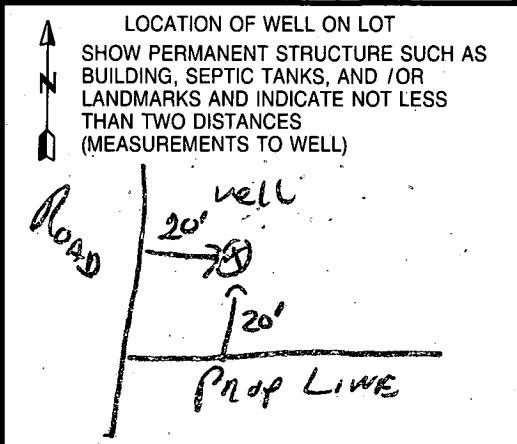
DEPTH (nearest ft.) table with columns for casing depth and screen depth.

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

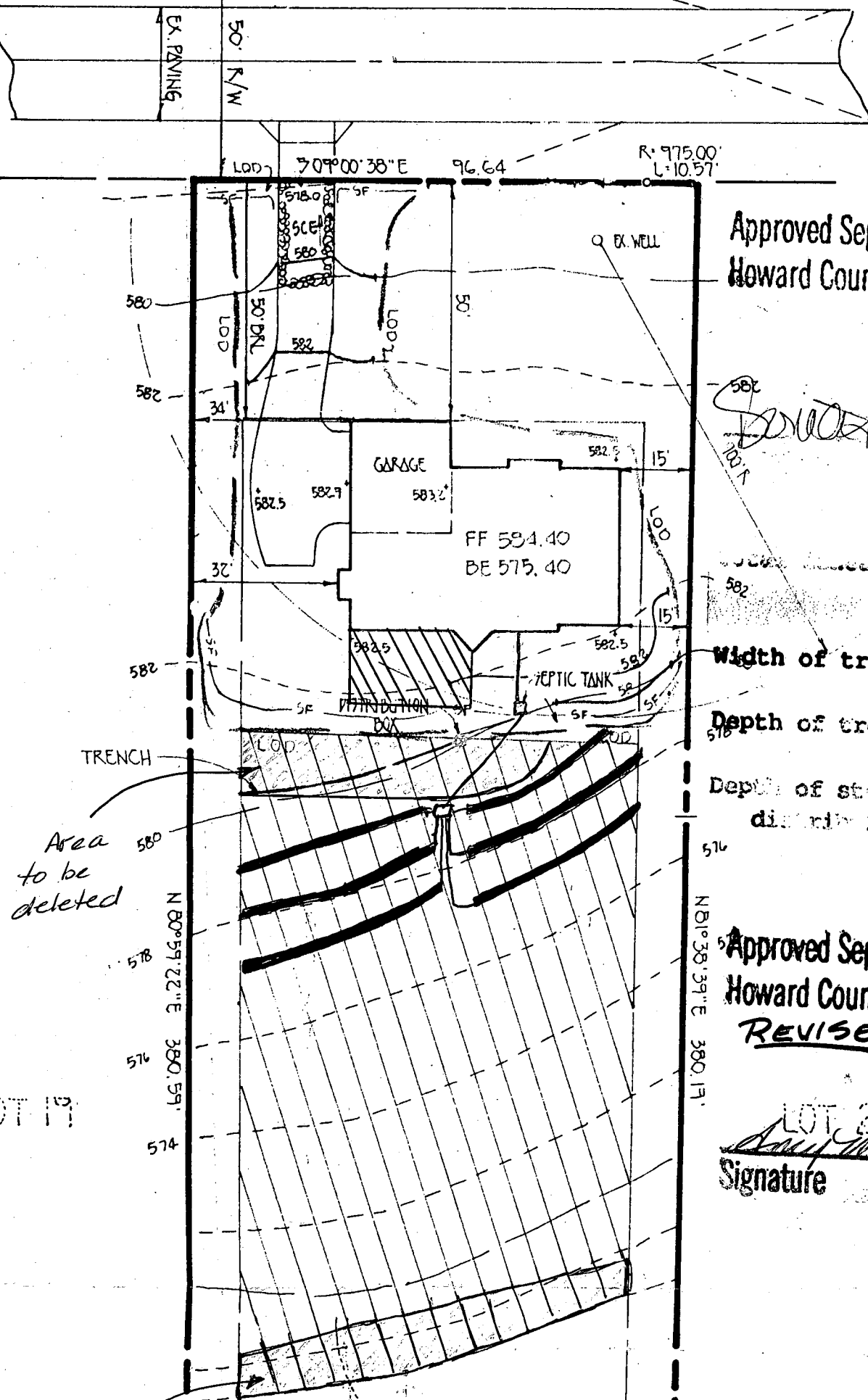
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q

PUMPING TEST form including: HOURS PUMPED (6), PUMPING RATE (3 gal. per min.), METHOD USED TO MEASURE PUMPING RATE (Bucket), WATER LEVEL (distance from land surface) BEFORE PUMPING (15 ft), WHEN PUMPING (16.5 ft).

PUMP INSTALLED form including: DRILLER WILL INSTALL PUMP (NO), TYPE OF PUMP INSTALLED (S), CAPACITY: GALLONS PER MINUTE (31), PUMP HORSE POWER (37), PUMP COLUMN LENGTH (43), CASING HEIGHT (+ above, - below).



BAILEY FIELD WAY



Approved Septic System Plan
Howard County Health Department

[Signature] 4/3/98
Date

Minimum depth of trench required 240 feet
Width of trench(es) 3 feet
Depth of trench 4.5 feet
Depth of stone required below distribution pipe 1.5 feet

Approved Septic System Plan
Howard County Health Department
REVISED

LOT 21
[Signature] 6/30/98
Signature Date

Topsoil Specifications - Soil to be used
i. Topsoil shall be a loam, sand, or silt soil. Heavy clay soils may be used if recommended by appropriate approval authority. Topsoil shall be free of textured subsoils and shall contain no rocks, fragments, gravel, sticks, roots, or other debris.

GENERAL NOTES

- SEPTIC EASEMENT SUBJECT TO HOWARD COUNTY HEALTH DEPARTMENT
- PROPOSED 1500 GALLON SEPTIC TANK.
- A. FIRST FLOOR ELEVATION: 584.40
B. BASEMENT ELEVATION: 575.40
C. INVERT OF SEPTIC SYSTEM AT HOUSE: 577.90
D. INVERT IN AT SEPTIC TANK: 577.50
E. INVERT OUT AT SEPTIC TANK: 577.20
F. PROPOSED GRADE OVER SEPTIC TANK: 580.00
G. INVERT AT DISTRIBUTION BOX: 577.00
H. EXISTING GROUND OVER DISTRIBUTION BOX: 580.00
- LENGTH OF TRENCH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE.
- CONTRACTOR / BUILDER TO VERIFY ELEVATIONS IN FIELD BEFORE BEGINNING ANY CONSTRUCTION.
- THERE IS NO BASEMENT SERVICE TO SEPTIC SYSTEM.

Area to be added

By copy of this plan the H.D. accepts this modification to the recorded SDA

[Signature]
LOT 20
40,000 sq. Ft.

8/28/98
WPI
OK JH

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 _____ Receipt # _____
Replacement _____ Date _____

Name of Installer _____ Telephone _____

License Number _____
Certified Well Pump Installer _____ Well Driller _____ Registered Plumber _____

Name of Property Owner _____ Telephone _____
Subdivision _____ Lot # _____ Well Tag # _____
Site Address _____

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower _____	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible _____	a. 110 _____	
2. Make _____	b. 220 _____	
3. Model # _____		
4. Capacity _____ GPM		
5. Pump exceeds well capacity Yes _____ No _____		
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 _____ Other _____		

Tank	Piping	Well data
1. Capacity _____	1. Type _____	1. Depth _____ ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield _____ GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level _____ ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? _____

9/2/98 T/C MSG TO BLDG
NO FCOP W/O COMPLETE
FORM OR ELEC CONDUIT

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: _____

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

APPLICATION

PERCOLATION TESTING

A 50617-00

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.~~ Hamilton REED

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

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Powell Property LOT NO. A 20

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

(11351 BARLEY FIELD WAY)

TAX MAP 10 PARCEL # 27, 29, 151

BLDG. PERMIT SIGNED

AND RETURNED 4-3-98

Serial # B0010786

SIZE OF LOT 40,000 sq. ft. TYPE BLDG. single family home - 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

A50617-62
COUNTY #

SOIL PROFILE
1044 1041

no distinct clay layer
tan grey
brown mica
SL
10% Saprolite
very decayed
OK

12'

E 1048

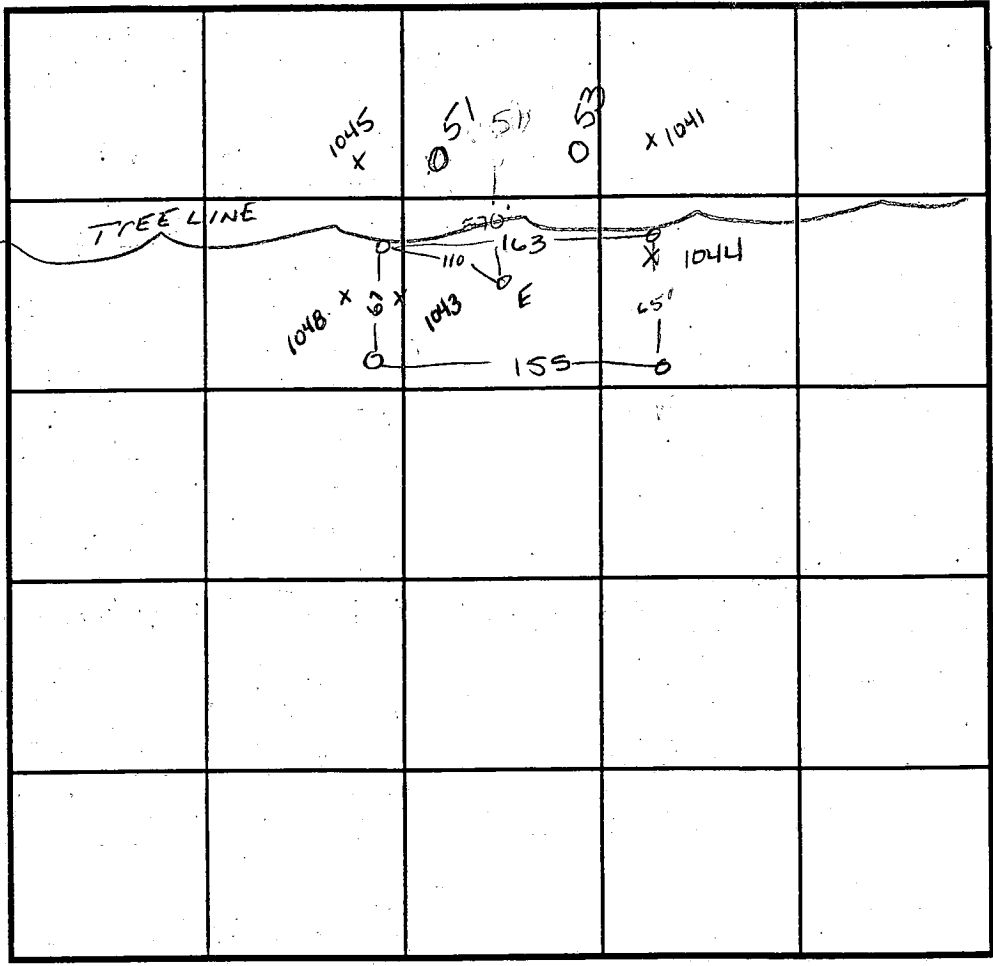
brn grey
brown mica
SL
45% shale frags
OK

12'

1045

very gravelly
SCL
20%
2-3' rock frags
w/ SL mica
lgt tan surrounding

10'



SOIL PROFILE
51, 53

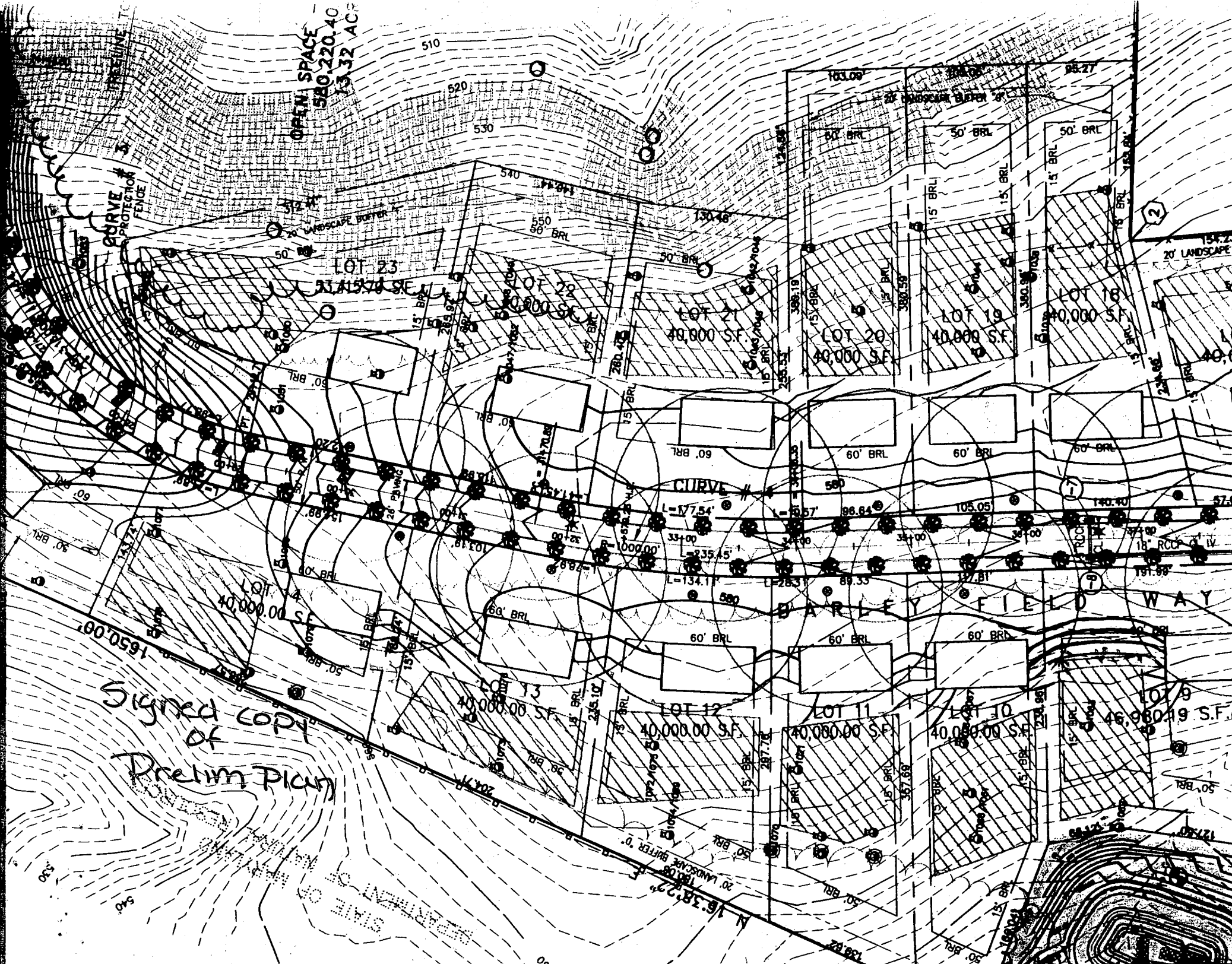
no distinct clay layer
dark brown
Salm
20% micaceous
Shale

10'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
11-30-94	1044	3' viz	9:34	9:34 ⁴⁵	9:34 ⁴⁵	9:36 ¹⁵	1 1/4 min
	1044	repour	9:36 ¹⁵	9:38	9:38	9:40 ¹⁵	2 1/4 min
	1041	Visual	to 12'				OK
	E	Visual	to 11'				OK
	1048	6' viz	9:08 ³⁰	9:09 ¹⁵	9:09 ¹⁵	9:10 ⁴⁵	1 1/2 min
	1048	3' viz	9:09 ¹⁵	9:10	9:10	9:10 ³⁰	30 sec
	1048	repour	9:11	9:11 ⁴⁵	9:11 ⁴⁵	9:12 ⁴⁵	1 min
	1045	2.5' viz	8:59 ¹⁵	9:00 ³⁰	9:00 ³⁰	9:05 ³⁰	5 min
7-17-95	51	4' viz	10:54 ¹⁵	10:45 ⁴⁵	10:45 ⁴⁵	10:57 ⁴⁵	2 1/4 min
	53	4' viz	11:03 ¹⁵	11:04 ³⁰	11:04 ³⁰	11:06 ³⁰	1 1/2 min

REMARKS _____
 TYPE OF SOIL _____
 TESTED BY Amy McMillan ALSO PRESENT Olan Ketterman
 TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 2 min TRENCH WIDTH 3'
 INLET DEPTH 2' MAXIMUM BOTTOM DEPTH 4' SQ. FT./BEDROOM 180 ft²



OPEN SPACE
580,220.40
13.32 AC

CURVE #
PROTECTION
FENCE

LOT 23
40,000 SF

LOT 22
40,000 SF

LOT 21
40,000 SF

LOT 20
40,000 SF

LOT 19
40,000 SF

LOT 18
40,000 SF

LOT 4
40,000 SF

LOT 13
40,000 SF

LOT 12
40,000 SF

LOT 11
40,000 SF

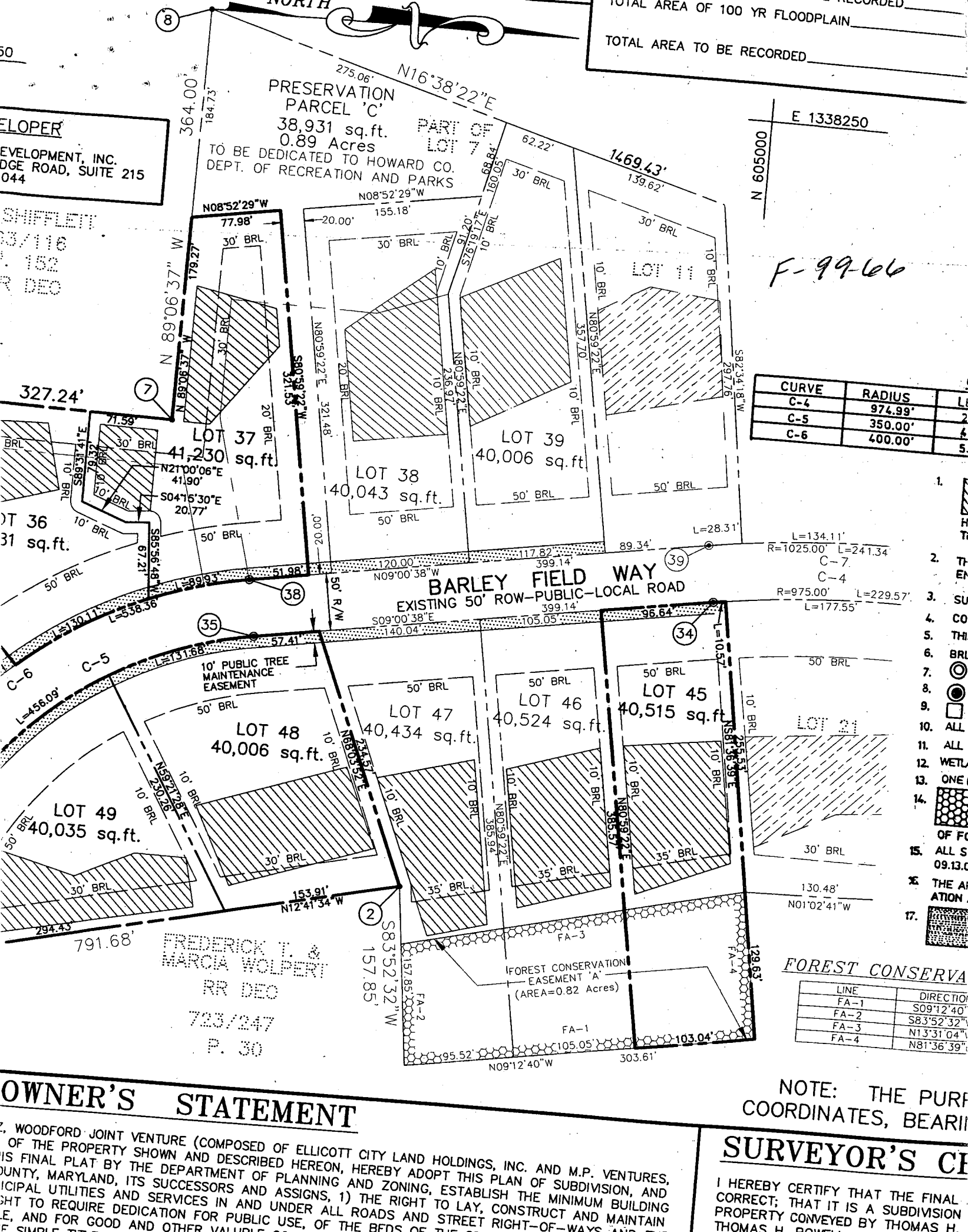
LOT 10
40,000 SF

LOT 9
46,980.19 SF

Signed COPY
of
Prelim Plan

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL
CONSERVATION

DARLEY FIELD WAY



TOTAL AREA OF 100 YR FLOODPLAIN _____
 TOTAL AREA TO BE RECORDED _____

DEVELOPER
 DEVELOPMENT, INC.
 EDGE ROAD, SUITE 215
 044

SHIFFLETT
 33/116
 152
 RR DEC

PRESERVATION
 PARCEL 'C'
 38,931 sq.ft.
 0.89 Acres

TO BE DEDICATED TO HOWARD CO.
 DEPT. OF RECREATION AND PARKS

E 1338250

000509 N

F-99-66

CURVE	RADIUS	LENGTH
C-4	974.99'	241.34'
C-5	350.00'	177.55'
C-6	400.00'	131.68'

LOT 36
 31 sq.ft.

LOT 37
 41,230 sq.ft.

LOT 38
 40,043 sq.ft.

LOT 39
 40,006 sq.ft.

BARLEY FIELD WAY
 EXISTING 50' ROW-PUBLIC-LOCAL ROAD

LOT 47
 40,434 sq.ft.

LOT 46
 40,524 sq.ft.

LOT 45
 40,515 sq.ft.

LOT 48
 40,006 sq.ft.

LOT 49
 40,035 sq.ft.

FREDERICK T. &
 MARCIA WOLPERT
 RR DEC
 723/247
 P. 30

FOREST CONSERVA

LINE	DIRECTION
FA-1	S09°12'40"
FA-2	S83°52'32"
FA-3	N13°31'04"
FA-4	N81°36'39"

OWNER'S STATEMENT

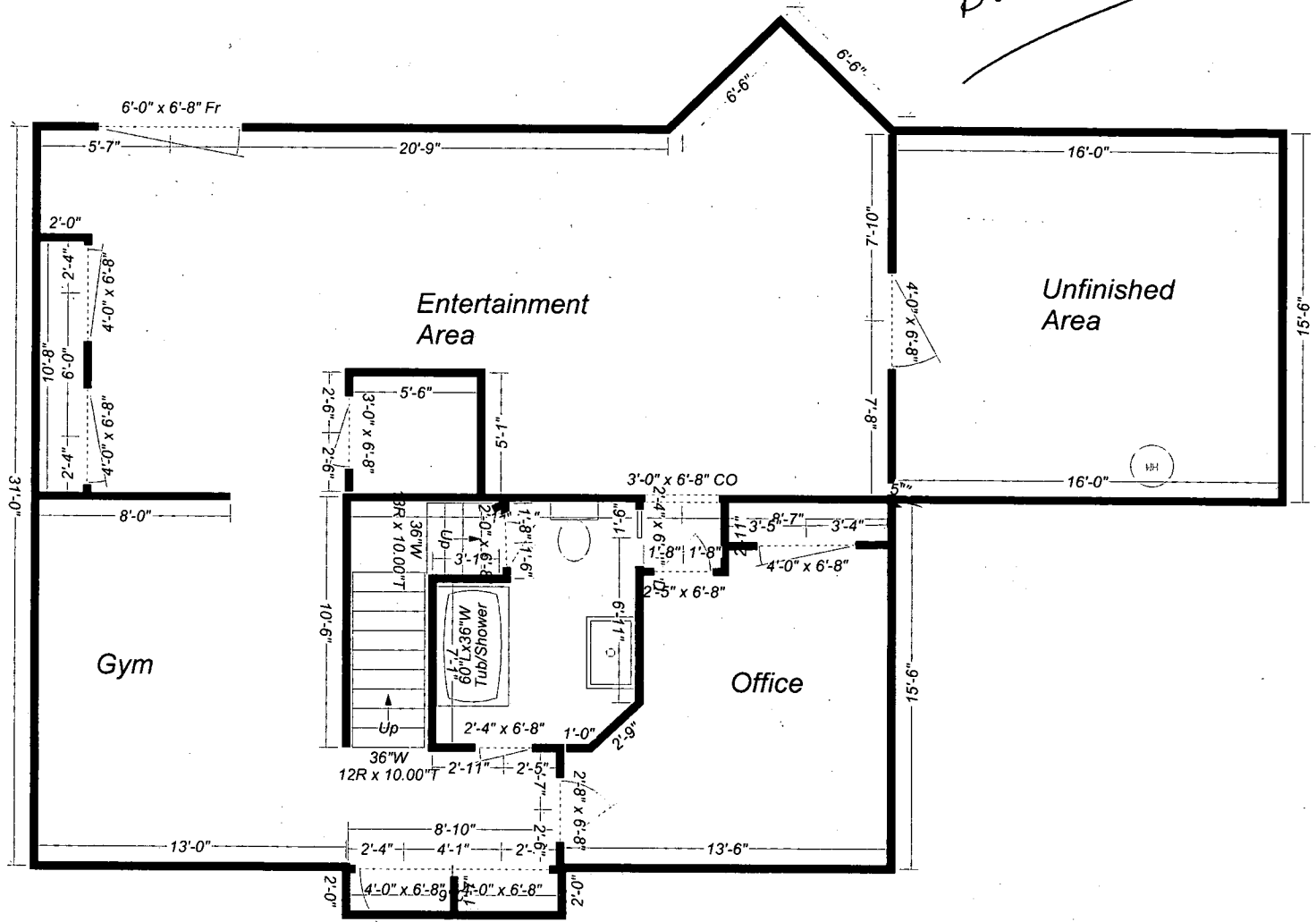
WOODFORD JOINT VENTURE (COMPOSED OF ELLICOTT CITY LAND HOLDINGS, INC. AND M.P. VENTURES, INC.) IS THE OWNER OF THE PROPERTY SHOWN AND DESCRIBED HEREON, HEREBY ADOPT THIS PLAN OF SUBDIVISION, AND THIS FINAL PLAT BY THE DEPARTMENT OF PLANNING AND ZONING, ESTABLISH THE MINIMUM BUILDING SETBACKS, UTILITIES AND SERVICES IN AND UNDER ALL ROADS AND STREET RIGHT-OF-WAYS AND MAINTAIN THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE, OF THE BEDS OF STREAMS AND RIVERS AND FOR GOOD AND OTHER VALUABLE PURPOSES.

NOTE: THE PLAT COORDINATES, BEARING

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE FINAL PLAT IS CORRECT; THAT IT IS A SUBDIVISION OF PROPERTY CONVEYED BY THOMAS H. BOWEN TO HOWARD COUNTY, MARYLAND, ITS SUCCESSORS AND ASSIGNS, 1) THE RIGHT TO LAY, CONSTRUCT AND MAINTAIN THE RIGHT TO REQUIRE DEDICATION FOR PUBLIC USE, OF THE BEDS OF STREAMS AND RIVERS AND FOR GOOD AND OTHER VALUABLE PURPOSES.

B00140792



3/20/03
No issues
concerning
well or septic.
No T in flows -
office has no
windows
(KN)