

5-15-98
2:00 p.m.
5/18/98
ASBP

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 59843

A 50619-A

DISTRICT 4th

DATE 3-3-98

04-359682

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 5/18/98

INSPECTOR [Signature]

INDEXED

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ALTER

ADDRESS 558-R Obrecht Rd, Sykesville, MD 21784 PHONE 410-795-5674

SUBDIVISION Holly Hills LOT 13 ROAD 3334 Sang Road

PROPERTY OWNER Williamsburg Group, LLC

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS top seamed tank (Inlet into septic tank 6.0 feet below grade)

NUMBER OF BEDROOMS 5

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 225

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

LOCATION - Place the distribution box 155 feet down the left lot line and 90 feet off this same lot line. Run trenches on contour to left side of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ***MANHOLE CLEANOUT REQUIRED.*** OR 1/27/98

PLANS APPROVED BY Mark Rifkin/A. McMillen REVISED _____ DATE 01/14/98

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

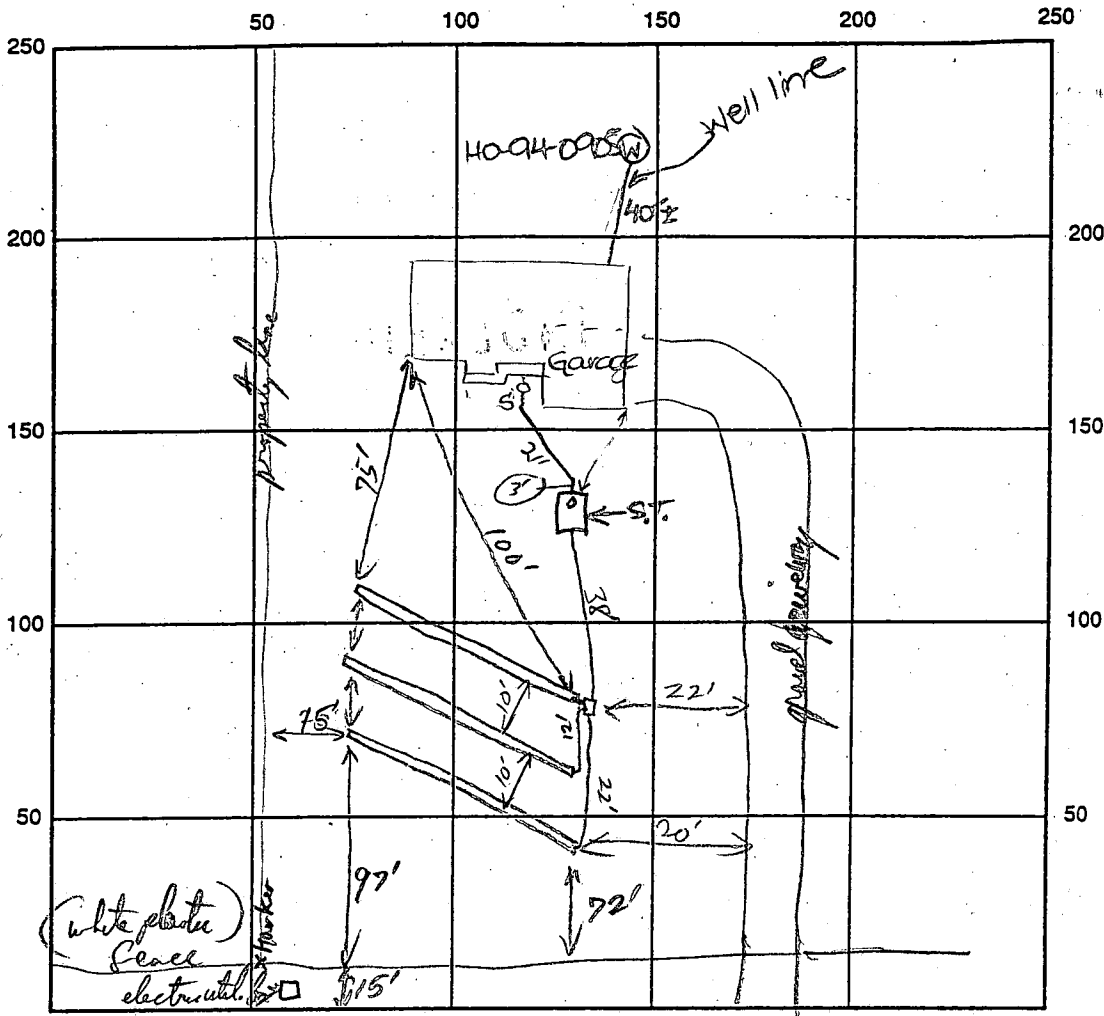
PERMIT VOID AFTER TWO YEARS

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 50619



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Sang Road

SEPTIC TANK LEVEL Top Seamed 1500 gal CLEANOUTS S.T. ✓

DISTRIBUTION BOX LEVEL ✓ (used auto levelers)

DRAIN FIELD/TITLE DEPTH 7' FT. TRENCH WIDTH 2' FT. INLET DEPTH 2 1/2 - 3' FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 75/75/75 FT. = 225

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 676 SQ. FT.

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: 5/15/98 ok to cover from house to tanks
and continue. Trenches all gravel filled OK, OK to cover when last trench is
repared RPP 5/18/98

DATE SYSTEM APPROVED 5/18/98 INSPECTOR [Signature]

A-50619

COUNTY #

SOIL PROFILE 523

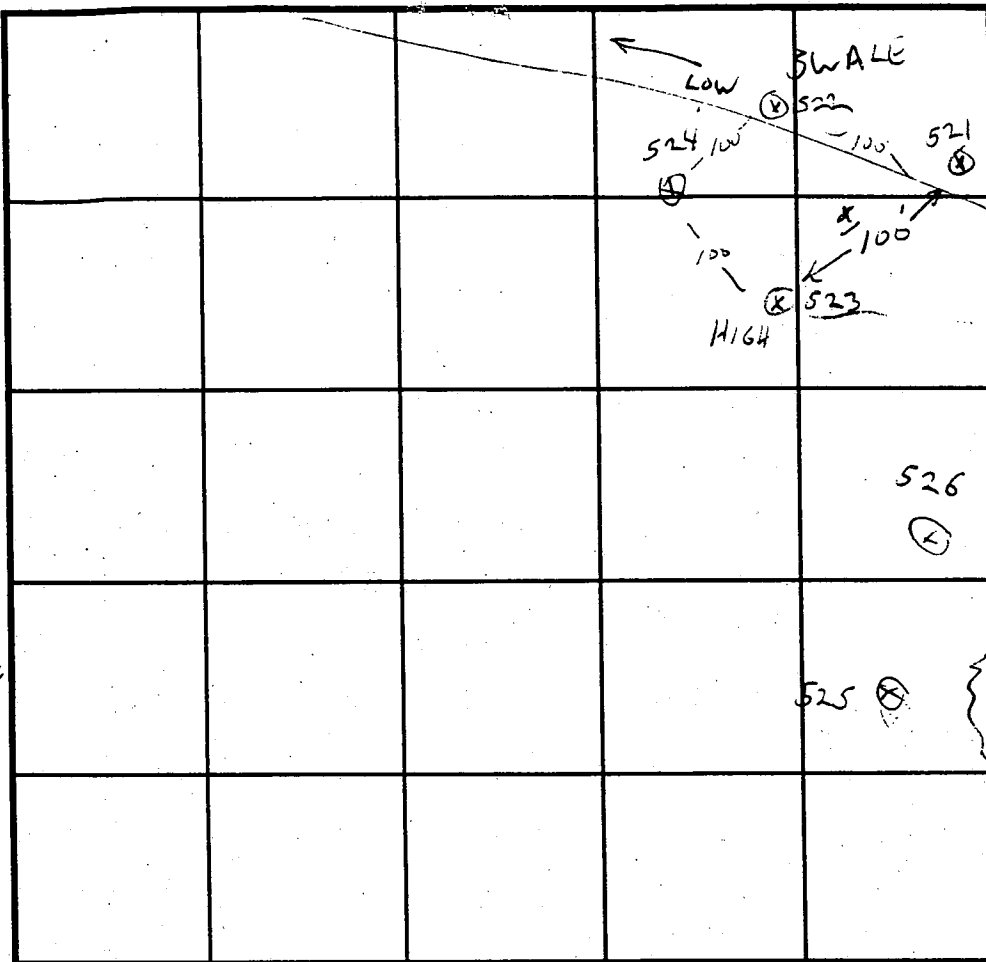
TOPSOIL
 1'
 ORANGE CLAY LOAM
 3'
 MIXED ORANGE & PINK S.S.L.
 11'3"

524

VISUAL OK
 SIMILAR TO
 523

526

TOPSOIL
 1'
 Red/Brown CL
 2'6"
 MIXED ORANGE RED-TAN S.S.L.
 10'4"



SOIL PROFILE 521

SLIGHTLY SANDIER & LESS CLAY THAN 522

WOODS

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/24/95	521	VISUAL-OK					
	523	4'6"	2:38	2:39	2:39	2:42	3 MIN
	526	3'	2:54	2:56	2:56	2:59	3 MIN
006 TO 106	525	3'6"	3:03	3:05	3:05	3:11	6 MIN
LOT 13	524	4'10"	VISUAL-OK		SIMILAR TO 521	531B-	7 MIN

REMARKS 525 SIMILAR TO 526

TYPE OF SOIL

TESTED BY GLEN SAVAGE

ALSO PRESENT WILL HOVENS & HELPER

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 min

TRENCH WIDTH 3

INLET DEPTH 4

MAXIMUM BOTTOM DEPTH 8"

SQ. FT./BEDROOM 180

REV MR 4/4/97

B 1 SEQUENCE NO. (MDE USE ONLY)
 3047
 (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-99-0905
 fill in this form completely

OWNER INFORMATION
 Date Received (APA) 03/19/96
 WILLIAMSBURG BUILDER
 STABSHARDERS FARM RD
 COLUMBIA MD 21044

B 3 LOCATION OF WELL
 HOWARD COUNTY
 HOLLY HILLS
 SECTION 44 46 LOT 48 50 13
 GREENWOOD
 52 NEAREST TOWN
 MILES FROM TOWN (enter 0 if in town) 3 MI

DRILLER INFORMATION CIRCLE: MSD/MGD/MWD
 Joseph L. Mayne 24
 Joseph L. Mayne Well Drilling
 5512 Ridge Rd. Mt Airy 21771
 Joseph L. Mayne 3/19/96

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)
 Sang Road
 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)
 DISTANCE FROM ROAD 280 FT
 TAX MAP: 14 BLK: PARCEL 92

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 COUNTY NAME A-506190H COUNTY NO.
 STATE SIGNATURE DATE ISSUED 08/16/98 EXP. DATE 8/16/97
 NORTH GRID 528000 EAST GRID 798000

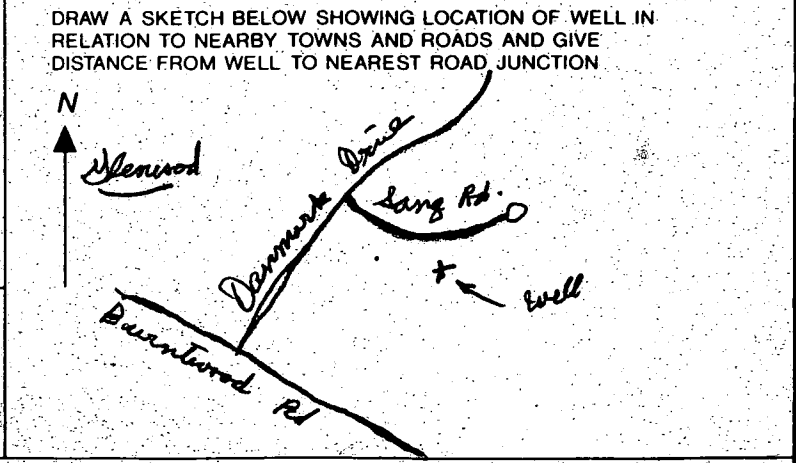
APPROXIMATE DEPTH OF WELL 220 FEET

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

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X
 SOURCES OF DRILLING WATER
 1. Well
 WRITE THE BOX NUMBER FROM THE MAP HERE
 798
 528

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 DEEPEM 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)
 APPROP. PERMIT NUMBER GAP
 FORCE GS PERMIT No. HC-99-0905

C1 4587

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)

FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE

COUNTY NUMBER A-50619 H

ST/CO USE ONLY DATE RECEIVED

DATE WELL COMPLETED

Depth of Well

PERMIT NO. FROM "PERMIT TO DRILL WELL"

DATE RECEIVED grid

DATE WELL COMPLETED 09/09/94

Depth of Well 325 (TO NEAREST FOOT)

PERMIT NO. 40-94-0905

OWNER WILLIAMSBURG BUILDERS last name FIRST NAME TOWN GLENWOOD STREET OR RFD SANG ROAD SECTION LOT 13 SUBDIVISION HOLLY HILLS

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 FROM TO check if water bearing

Table with 3 columns: DESCRIPTION, FEET FROM, FEET TO. Includes entries for Sand (0-67) and Gray Mica Rock (67-325).

GROUTING RECORD

WELL HAS BEEN GROUTED (Y/N) TYPE OF GROUTING MATERIAL (Cement CM, Bentonite Clay BC) NO. OF BAGS 20 NO. OF POUNDS 180

CASING RECORD

MAIN CASING TYPE (S) Nominal diameter top (main) casing (nearest inch) 6 Total depth of main casing (nearest foot) 72

OTHER CASING (if used)

Table for other casing with columns for diameter and depth.

SCREEN RECORD

screen type or open hole (S, BR, HO, PL, OT) insert appropriate code below

C2

DEPTH (nearest ft.)

Table for depth measurements with columns for depth intervals and values.

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

C3

PUMPING TEST

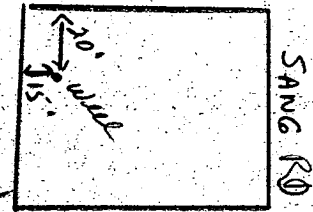
HOURS PUMPED (nearest hour) 3 PUMPING RATE (gal. per min.) 100 METHOD USED TO MEASURE PUMPING RATE Bucket

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (YES/NO) TYPE OF PUMP INSTALLED (S) CAPACITY: GALLONS PER MINUTE

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)



HOWARD COUNTY HEALTH DEPARTMENT
Bureau of Environmental Health
3525-N Ellicott Mills Drive
Ellicott City, MD 21043
461-9833

6/17/98
WPI am

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New installation
Replacement

Receipt # _____
Date 6-9-98

Name of Installer Charles A Klein & Sons Inc Telephone 410-549-6900

License Number 6521
Certified Well Pump Installer Well Driller Registered Plumber

Name of Property Owner William & Susan Hamid Telephone 410-997-8800
Subdivision Holly Hills Lot # 13 Well Tag # HO-94-0905
Site Address 3334 Song Rd

Pump	Motor	Pitless Adapter
1. Type	1. Horsepower <u>1/2</u>	1. Make _____
a. Deep well jet _____	2. RPM _____	2. Model # _____
b. Shallow well jet _____	3. Voltage _____	3. Depth _____
c. Submersible <input checked="" type="checkbox"/>	a. 110 _____	
2. Make <u>WY-302</u>	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 <u>325</u> ft.
2. Pressure relief valve? _____	2. Size _____	2. Yield <u>20</u> GPM
	3. NSF and/or BOCA Code approved _____	3. Static water level <u>37</u> ft.
	4. Depth of supply line _____	4. Will water supply be disinfected by installer? _____

Well casing 6" a.g.
Well line PA. 4" b.g.
Ground wire to be secured
2-pc cap installed OK TO COVER (W.S.)

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: Charles A Klein Jr

Date: 6-9-98

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

6/17/98
WPI



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

June 18, 1998

Williamsburg Group, LLC
P.O. Box 1018
Columbia, Maryland 21044

RE: Holly Hills, Lot #13
3334 Sang Road
Well Permit #HO-94-0905

Dear Sir or Madam:

Upon inspection of the well on the above referenced property, during septic installation, it appeared that the well casing terminates only 6 inches above finished grade. According to COMAR, " a minimum of 8 (eight) inches of the casing length shall extend above ground level after final grading."

After final grading, please make certain that the well casing meets the COMAR standard. Any necessary casing repair should be performed by a licensed well driller. Please contact the Health Department once the well is ready for reinspection.

Please be advised that no Interim Certificate of Potability will be issued for the property until this issue is resolved.

Thank you in advance for your prompt attention to this matter.

Sincerely,

Donna K. Soe, R. S.
Water and Sewerage Program

DKS
cc: file

Approved Septic System Plan
Howard County Health Department

FIRST FLOOR ELEV.	=	615.71
INV. OUT OF HOUSE	=	604.75
INV IN SEPTIC TANK	=	603.35
INV. OUT SEPTIC TANK	=	603.10
INV. IN DIST. BOX	=	602.80
EXIST. ELEV. @ SEPTIC TANK	=	607.00
PROP. ELEV. @ SEPTIC TANK	=	610.00
EXIST. ELEV. @ DIST. BOX	=	605.80

Total linear feet of trench required 225 feet

Width of trench(es) 2.0 feet

Depth of trench(es) 7.0 feet

Depth of stone required below distribution pipe 4.0 feet

Anthony D. Mella
Signature

1/14/98
Date

