

10/18/94  
10/60

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 57300C

A REPAIR  
15832

DISTRICT \_\_\_\_\_

DATE 9/29/94

DATE SYSTEM APPROVED 10/18/94

INSPECTOR C. B. D.

**HOWARD COUNTY HEALTH DEPARTMENT**  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933 313-2640

03-292304

INDEXED

Olen Ketterman \_\_\_\_\_ IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER X

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SUBDIVISION Woodmark, Sec. 7 LOT 75, Blk. C ROAD 12213 Mount Albert Rd.

PROPERTY OWNER Steve Rossa

ADDRESS 12213 Mount Albert Road  
Ellicott City, Md. 21042

SEPTIC TANK CAPACITY 1500 GALLONS - Chambered

NUMBER OF BEDROOMS N/A POOL HOUSE WITH SHOWER AND WETBAR

N/A SQUARE FEET PER BEDROOM MAXIMUM DAILY SEWAGE DESIGN FLOW - 400 GPD.

LINEAR FEET OF TRENCH REQUIRED 134 x 3' wide = 402' trench bottom area with loading rate of 1gal/ft<sup>2</sup>/d  
TRENCH INLET 3' BELOW GRADE, BOTTOM 5' BELOW GRADE, 2' STAKE DEPTH,  
REPAIR - PURPOSE - TO PROVIDE SEPTIC CAPACITY FOR FREESTANDING POOL HOUSE. (BP 55548 8/8/94)

Call for inspection when ground is opened up, so Sanitarian can recommend repair.

1500 GAL CHAMBERED TANK TO PROVIDE PUMP CHAMBER CAPACITY SHOULD  
FUTURE TRENCH REPAIR BE REQUIRED. SYSTEM IS BEING INSTALLED IN LOWEST  
APPROXIMATE LOCATION.

INSTALL 134' FT OF TRENCH NO CLOSER THAN 100' TO STREAM AND APPROXIMATELY 40'-50'

BELOW LOWEST HOUSEHOLD DISPOSAL TRENCH.

PLANS APPROVED BY Craig Williams (OK/CW) (of ins field chg) DATE 9/16/94

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.

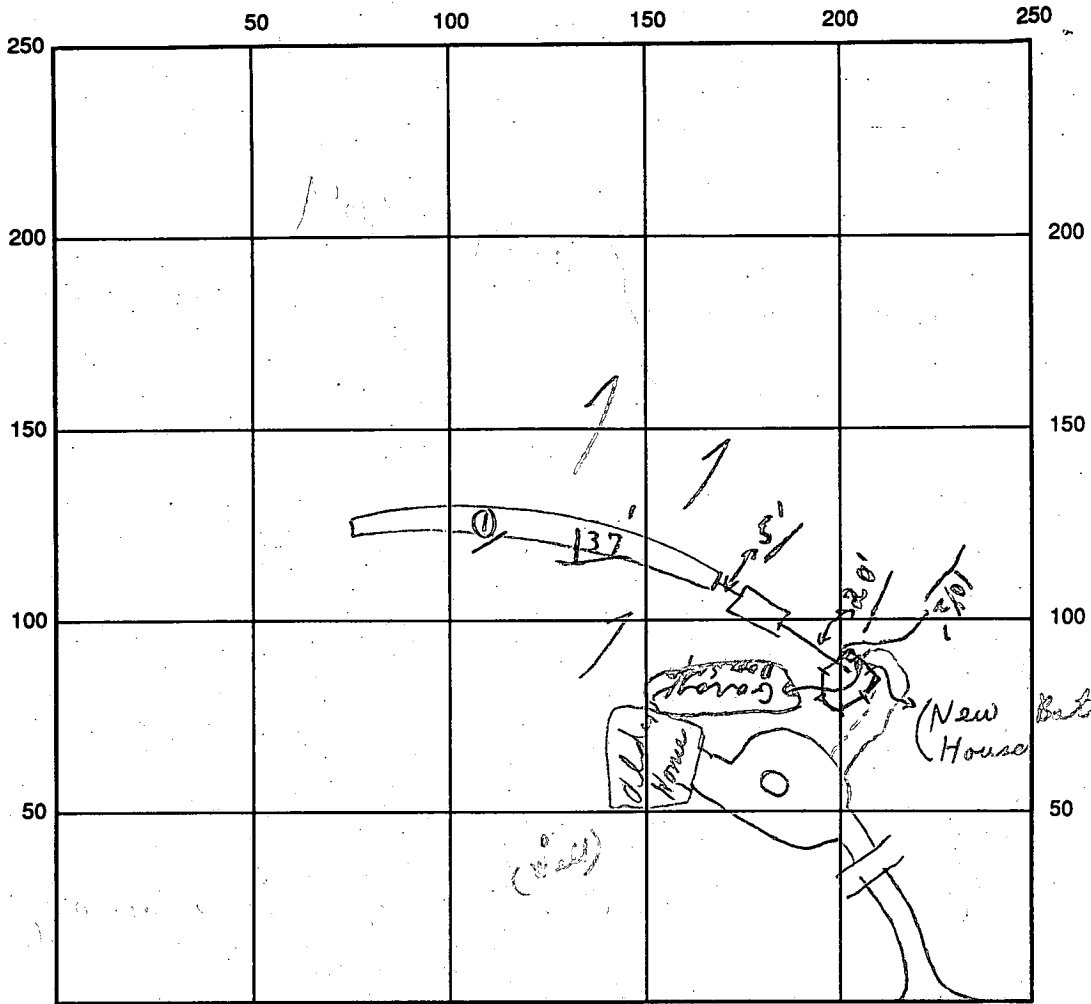
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

~~BLDG. PERMIT SIGNED~~  
~~AND RETURNED 9/5/94~~  
~~300130264-deck~~

BLDG. PERMIT SIGNED  
AND RETURNED 8/8/94  
Senat # 533 48 prot.

R 50300C



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK

CLEANOUTS Mount Albert Road  
S.T.  
(C.O. to be marked)

DISTRIBUTION BOX LEVEL N/A

DRAIN FIELD/TITLE DEPTH 5 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 137 FT.

NUMBER OF TRENCHES 1

ONE SIDEWALL/BOTTOM AREA 411<sup>+</sup> SQ. FT.

DRYWALL INSIDE DIAMETER — FT.

EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 411<sup>+</sup> SQ. FT.

REMARKS:

10/18/94 (A.M.) "1 stop" - Final; OK

DATE SYSTEM APPROVED 10/18/94

INSPECTOR Charles Bryan Street

9/15/94  
A.M.

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P \_\_\_\_\_

A REPAIR

DISTRICT 3rd

DATE \_\_\_\_\_

#### HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~461-9933~~ 313-2640

DATE SYSTEM APPROVED \_\_\_\_\_

INSPECTOR \_\_\_\_\_

IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SUBDIVISION Woodmark, Sec. 7 LOT 75, Blk. C ROAD 12213 Mount Albert Road

PROPERTY OWNER Steve Rossa

ADDRESS 12213 Mount Albert Road  
Ellicott City, Maryland 21042

SEPTIC TANK CAPACITY 1000 ~~1500~~ GALLONS For Pool

NUMBER OF BEDROOMS 5 (2) Separate Tanks Separate Pool ADDITION HAS BEEN CHANGED TO POOL HOUSE  
BP 55548

SQUARE FEET PER BEDROOM \_\_\_\_\_ OR TO CONTINUE WITH PLAN FOR LARGE TANK  
WITH EJECTOR PUMP FROM POOL HOUSE TO TANK

LINEAR FEET OF TRENCH REQUIRED \_\_\_\_\_ OR REPAIR FOR SEPARATE SYSTEM.

REPAIR - PURPOSE - SEPTIC TANK REPLACEMENT (A building permit for an addition is contemplated.)  
SEPTIC CONTRACTOR - KETTERMAN TO TANK TO GUIDANCE/OWNER & RESPOND

Call for inspection when tank is in place so that a sanitarian can approve size and location. 9/13/94 CW

(9/15/94 - Folder given to CBO - in A.M.) CHD (2) these holes found - located at rear of pool

For pool 9/15/94 1000 gallon tank after site inspection all pumps will be replaced with 1000 gallon tank. See back

PLANS APPROVED BY Ronald J. Pinkley Revised 9/15/94 DATE 07/12/94

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

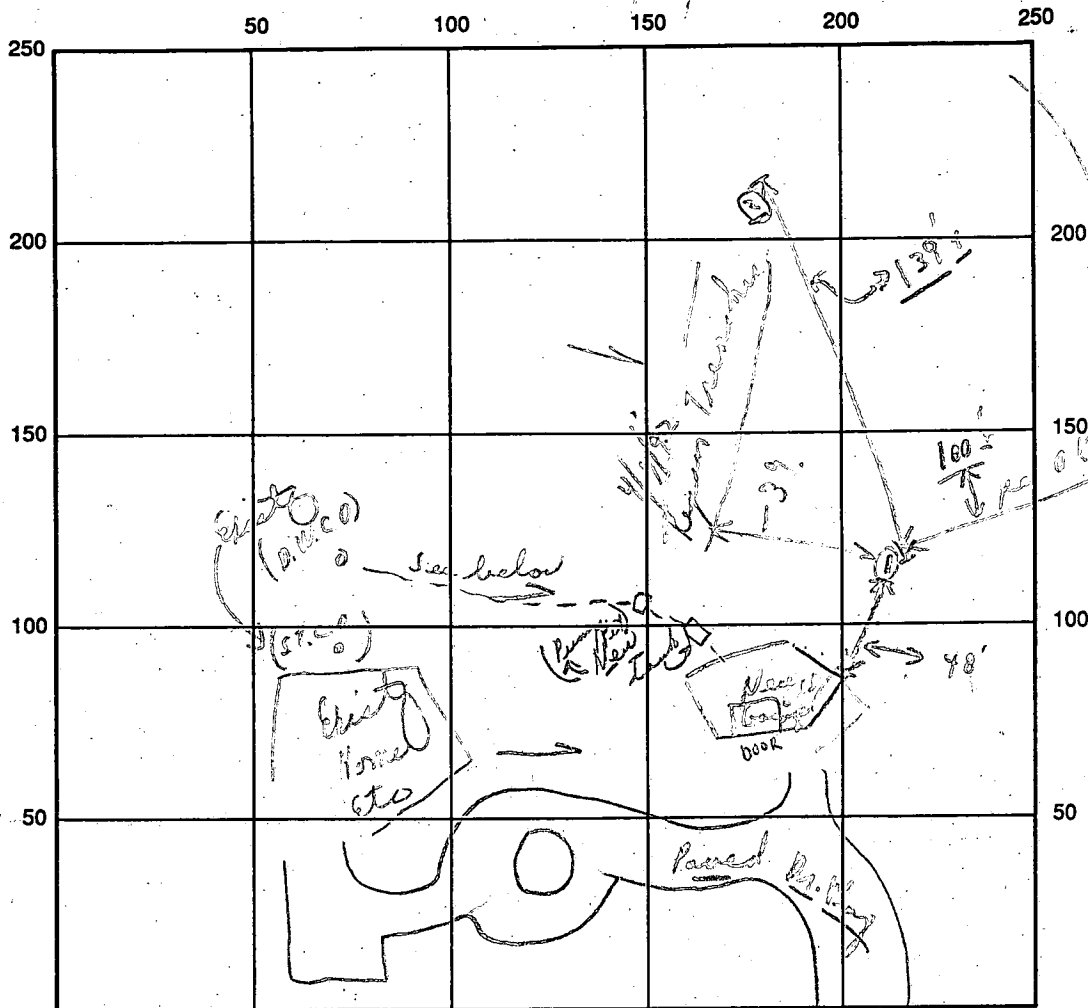
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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**



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL New 1000' / New 600' CLEANOUTS 5 Needed SW S.T. CO (2) Pump pit

DISTRIBUTION BOX LEVEL gallon / gallon pump pit To pump to existing dry well

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

EFFECTIVE GRAVEL DEPTH      FT. TOTAL LENGTH      FT.

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

DRYWALL INSIDE DIAMETER      FT. EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA      SQ. FT.

REMARKS: Parted 9/15 (2) Visited holes - show limits of existing  
sewer, excavated 10,000 sq. ft.; New septic tank and new  
pump pit to be installed for pool house and  
sewage effluent pumped to existing dry well for  
disposal. etc.

DATE SYSTEM APPROVED \_\_\_\_\_ INSPECTOR \_\_\_\_\_



*NOT SENT*  
*UPON RE-EXAMINATION OF AVAILABLE SITE INFO, OK TO INSTALL 1500 GAL TOP SEAM COMPARTMENTED TANK WITH 140' OF TRENCH AT A LOCATION 100' FROM STREAM INCBT 3' BOTTOMS 2' STONE. (SEE BELOW)*

**HOWARD COUNTY HEALTH DEPARTMENT**

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

September 16, 1994

Mr. Steve Rossa  
12213 Mount Albert Road  
Ellicott City, Maryland 21042

RE: Percolation Test Results  
Repair Application Fee Pending  
Proposed Use: Septic System to Serve  
Pool House - Building Permit No. 55548  
Property ID: Woodmark - Sect.7 - Lot 75 - Block C  
12213 Mount Albert Road

Dear Mr. Rossa:

Percolation testing conducted September 15, 1994 on the above referenced property provided inconclusive results. Copies of the percolation test results are enclosed.

The recommendation of the Health Department is for a pumped system, specifications for same are attached.

The request was to install a gravity flow septic system to serve the pool house under construction.

Although soil conditions were satisfactory in the location tested, it is not clear whether or not sufficient area exists to support current and future repair requirements for the pool house without compromising replacement options for the existing house.

If you prefer to continue the request for a gravity flow system, additional supporting detail should be provided via submission of a percolation certification plat showing actual locations and elevations of all excavated test holes and the location of all existing wells and septic systems on the property as well as the location of any other relevant features such as streams, swales or existing structures.

Upon review, follow-up testing in the Spring "Wet Season" could be required to confirm the lower portions of the proposed septic area are not compromised by seasonal high water table.

Opting for the use of a pumped septic system would seem to be the more reasonable option. If you have any questions regarding this matter, please feel free to contact me at the above address or by calling 313-2640.

Very truly yours,

Charles B. Streaker, R. S.  
Water and Sewerage Program

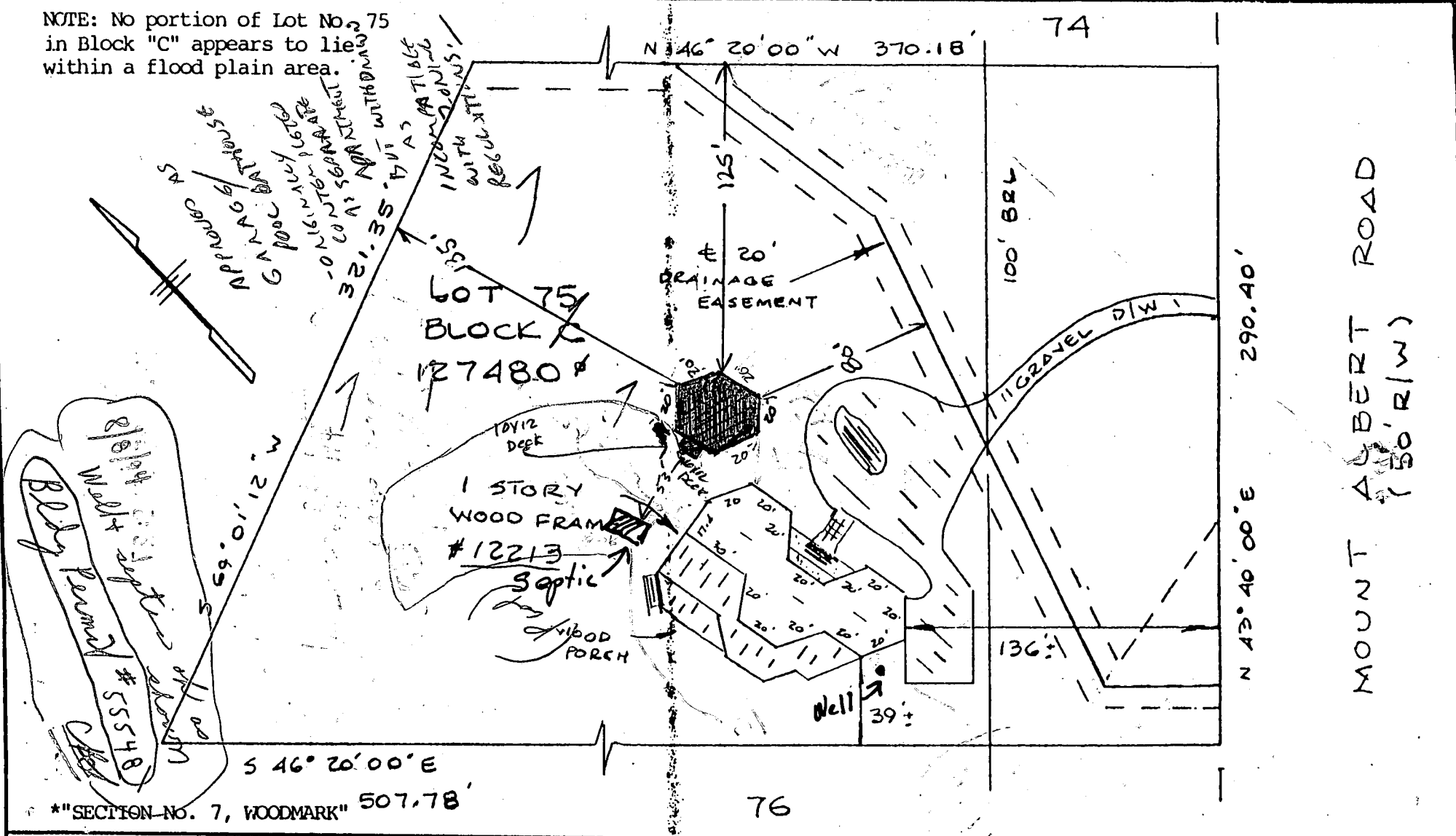
*SHOULD FUTURE REPAIR BE NEEDED, CHOICE WILL BE BETWEEN INSTALLING SLIGHTLY DEEPER TRENCH JUST ABOVE THIS ONE, OR PUMPING TO MUCH*

CBS:jr  
cc: Builder-Shea

Contractor - Ketterman Bureau of Environmental Health  
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544  
Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2642  
Director (410) 313-2645 TDD (410) 313-2323

*HIGHER GROUND NEAR POOL & HOUSEHOLD SYSTEM,*  
9/16/94 CW

NOTE: No portion of Lot No. 75 in Block "C" appears to lie within a flood plain area.



\*\*SECTION NO. 7, WOODMARK" 507.78'

This is to certify that I have surveyed the property known as (Lot No. 75, in Block "C") 12213 Mount Albert Road as shown on a plat entitled\* sheet 1 of 2 recorded PLAT 25/60 among the Land Records of HOWARD County, Maryland for the purpose of locating the improvements thereon.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.



J. Carl Hudgins PLS#96

LOCATION SURVEY  
12213 MT. ALBERT ROAD  
WOODMARK  
3RD ELECTION DISTRICT  
HOWARD COUNTY, MD

NTT ASSOCIATES, INC.  
16205 Old Frederick Road  
Mt. Airy, Maryland 21771  
Phone 442-2031

Scale	1" = 60'
Date	10/12/87
Field By	JLM
Drawn By	JLM
Drawing #	X6942

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 48001

A REPAIR

DISTRICT 3rd

DATE 4/3/92

DATE SYSTEM APPROVED 4/7/92

INSPECTOR R. Phibbs

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

# INDEXED

Norman Collins Company, Inc. IS PERMITTED TO INSTALL ALTER

ADDRESS 2024 Millers Mill Road, Sykesville, Maryland PHONE 795-8618

SUBDIVISION Woodmark LOT 75, Blk.C Sec.7 ROAD 12213 Mount Albert Road

PROPERTY OWNER Steve Rossa  
ADDRESS 12213 Mount Albert Road  
Ellicott City, Maryland

SEPTIC TANK CAPACITY EXISTING 1000 gal.  
1250 GALLONS

NUMBER OF BEDROOMS 4

SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED

REPAIR - PURPOSE - Septic System has failed. 4/01/92

Call for inspection when ground is opened so sanitarian can recommend repair.

APPLICANT ALSO REQUESTS EVALUATION FOR SUITABILITY FOR

FUTURE ADDITION - DWELLING PER MR/AP. 4/3/92

Install 2 Trenches, 75' long each, 2 Ft wide, 7' deep. Inlet depth 2 1/2 ft. This system will be connected through a distribution box to original drywell. Trench location to be determined in field.

PLANS APPROVED BY R. Phibbs DATE 4-7-92

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

BLDG. PERMIT SIGNED  
AND RETURNED 9/22/93  
Serial # 57908  
2-Story Addition

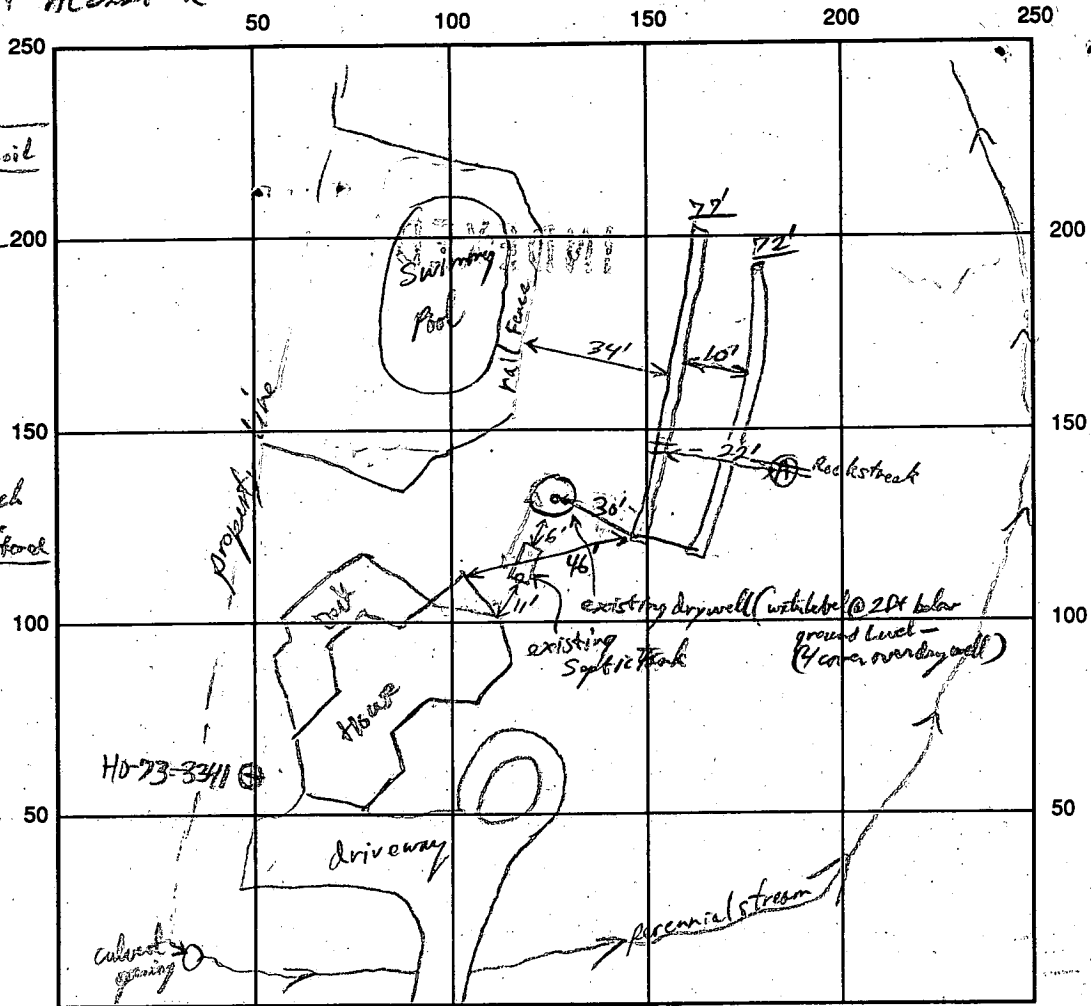
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

10087  
48001

12213 Mt Albert Rd



**Hole A**

6"	Dark Brn Loam top soil
2 1/2"	Red Brn - Str Brn CL-SiCL
2 1/2"	Red Brn SL E some rotten rock fragments > 50% rock in pockets and at bottom
9"	Less Rock in one spot of Repair Trench Rest of trench fine No Rock encountered

@ 5' Start 10:23:00  
1st " 10:26:00  
2nd " 10:32:00

6 min per  
125 #/bbl  
x 5  
4.5 625 #

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE  
Mt. Albert Rd

SEPTIC TANK LEVEL existing 1000gal CLEANOUTS \_\_\_\_\_

DISTRIBUTION BOX LEVEL \_\_\_\_\_

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

EFFECTIVE GRAVEL DEPTH 4 1/2 FT. TOTAL LENGTH 77/72 FT. (for a 5 Bdr House Design)

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA \_\_\_\_\_ SQ. FT.

DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 625 SQ. FT.

REMARKS: Steve's Backhoe - pit with tunnel 4/4/92 R/P 1st Trench OK - Rock out in Test Hole A and a very short stretch of 1st trench. OK to gravel fill. 4/7/92 R/P

Second Trench also dug & partially gravel filled - OK to cover when finished. 4-7-92

DATE SYSTEM APPROVED 4/7/92 INSPECTOR Donald [Signature]

4/1/81 FILE APPROVED. C.B.M.  
P 31081  
A 15832

3/27/81  
3/30/81  
please

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3rd.

## INDEXED

DATE 12/15/80

Zepp Plumbing & Heating IS PERMITTED TO INSTALL X ALTER

ADDRESS 6344 Ten Oaks Road, Clarksville, Md. PHONE 531-6712

SUBDIVISION Woodmark ROAD 12213 Mount Albert Road LOT 75, Blk C. Sec 7

PROPERTY OWNER Joseph Becker & Patricia Amato

ADDRESS 9872 Old Annapolis Road

SPECIFICATIONS 3 Bedrooms

SEPTIC TANK CAPACITY 1000 GALLONS

DRAIN FIELD \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

DEEP TRENCH \_\_\_\_\_ DEPTH \_\_\_\_\_ FEET, BOTTOM AREA \_\_\_\_\_ SQ. FT.

Dry Well SEEPAGE PITS X ABSORBENT SIDE-WALL AREA 360 SQ. FT. Total in Dry Well

INLET PIPE 4 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 11 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT \_\_\_\_\_ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 225 FT. FROM back LOT LINE AND 66 FT. FROM left LOT LINE AS SEEN WHEN FACING LOT FROM Mount Albert Road.

NOTE: PKAY TO USE TRENCH OFF DRY WELL TO MAKE UP ABSORBENT SIDEWALL AREA IN SYSTEM.  
LEAVE 5 FT. EARTH BUFFER BETWEEN TRENCH AND DRY WELL. TRENCH TO FOLLOW CONTOUR  
OF THE LAND. Call for two (2) inspections - before and after gravel is  
installed.

PLANS APPROVED BY Raymond Hodges DATE 6/25/73

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

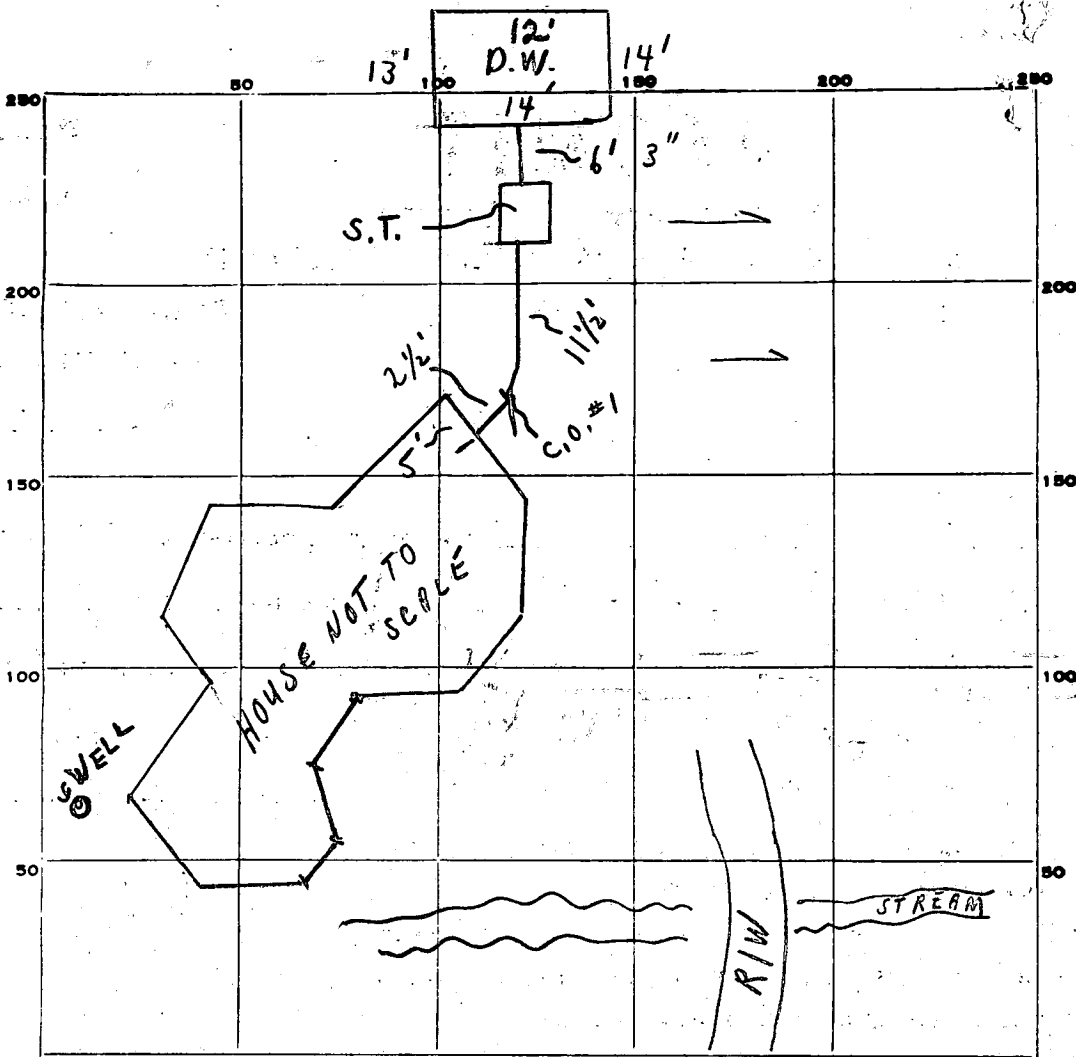
PERMIT VOID AFTER THREE YEARS.

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

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

BLDG. PERMIT SIGNED  
AND RETURNED 2/22/88  
Serial # 16721-974.

A 15832



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

MOUNT ALBERT ROAD

PERMIT CARD

SEPTIC TANK, LEVEL

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH \_\_\_\_\_ FT. TRENCH WIDTH \_\_\_\_\_ FT.

GRAVEL DEPTH \_\_\_\_\_ IN. TOTAL LENGTH \_\_\_\_\_ FT.

NUMBER OF TRENCHES \_\_\_\_\_ TOTAL BOTTOM AREA \_\_\_\_\_

SEEPAGE PITS, INSIDE DIAMETER 53 FT. DEPTH BELOW INLET 7 + FT.

ABSORBENT AREA 371 SQ. FT.

REMARKS 3/27/81 (1) CHECKED SYSTEM - TRENCH NOT STARTED. (2) TRENCH NOT NEEDED AFTER MEASURING DRY WELL; HOWEVER NEED <sup>C.B.S.</sup> MAN HOLE TYPE CLEANOUT ON SEPTIC TANK TO FINAL GRADE, C.B.S.

3/30/81 NEED TO SEE PLUG ON CLEANOUT NEAR HOUSE ONLY; OK TO COVER REST OF SYSTEM, PARTIAL. 4/1/81 PLUG ON CLEANOUT IN LINE, C.B.S.

DATE SYSTEM APPROVED 4/1/81

INSPECTOR C. B. Streaker

C. B. Streaker

# APPLICATION

A 15832

SEWAGE DISPOSAL TESTING

P \_\_\_\_\_

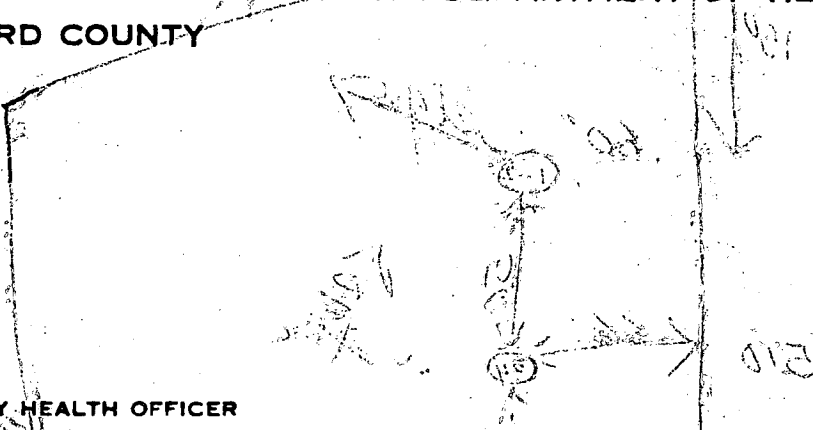
MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 3

DATE 4/5/71



TO: THE COUNTY HEALTH OFFICER  
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Mark Wakefield Joseph Becker + Patricia Amato  
9572 Old Annapolis Road Ron Carter  
ADDRESS Carroll Mill Road, Ellicott City, Md. PHONE HO 5-1635

PROPERTY LOCATION:

SUBDIVISION Woodmark LOT NO. 75, Blk. C, Sec. 7

ROAD AND DESCRIPTION 12213  
Mount Albert Road

OCCUPANT \_\_\_\_\_ PHONE \_\_\_\_\_

PERSON TO CONSTRUCT SYSTEM \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

SIZE OF LOT 139,800 sq. ft. (300' x 510' x 340' x 365') TYPE BLDG. 3 or 4  
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE \_\_\_\_\_  
BLDG. PERMIT SIGNED  
AND RETURNED 4/23/80  
Seal # 43480 SFD

SIGNATURE OF APPLICANT /s/ Mark Wakefield

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_  
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

# THIS IS NOT A PERMIT



C 1 9600  
 1 2 3 (SEQ. NO.) 6  
 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)

STATE OF MARYLAND  
 WATER RESOURCES ADMINISTRATION  
 TAWES STATE OFFICE BLDG. ANNAPOLIS, MD. 21401  
 WELL COMPLETION REPORT

THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION  
 FILL IN THIS FORM COMPLETELY.  
 COUNTY NUMBER 11-15 832

DATE RECEIVED (WRA USE ONLY) 8/14/77 DEPTH OF WELL 125 PERMIT NO. FROM "PERMIT TO DRILL WELL" AD-73-3341  
 DATE WELL COMPLETED 8/14/77 22 (TO NEAREST FOOT) 26  
 8-13 15 20 DRILLERS IDENTIFICATION NO. 273

OWNER Hanco Buildings Inc FIRST NAME Fallston Md.  
 LAST NAME 204 Connelly Rd. POST OFFICE

WELL LOG

STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING

DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING
	FROM	TO	
Top Soil	0	2	
Sandy	2	11	
Sand Stone	11	30	✓
Micka	30	40	
Sand Stone	40	50	✓
Micka	50	125	

12018

WELL DESCRIPTION

GROUTING RECORD

WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX)  Y  N  
 44 44  
 TYPE OF GROUTING MATERIAL (CIRCLE BOX)  
 CEMENT  CM  BC  
 45-46 45 46  
 BENTONITE CLAY  
 NO. OF BAGS 8 NO. OF POUNDS 800  
 GALLONS OF WATER 48  
 DEPTH OF GROUT SEAL (TO NEAREST FOOT)  
 FROM 0 FT. TO 20 FT.  
 (ENTER 0 IF FROM SURFACE)

C 3

PUMPING TEST

HOURS PUMPED (TO NEAREST HOUR) 4  
 8 9  
 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 30  
 11 15  
 METHOD USED TO MEASURE PUMPING RATE Bucket  
 WATER LEVEL: (DISTANCE FROM LAND SURFACE)  
 BEFORE PUMPING 25 (NEAREST FOOT)  
 17 20  
 WHEN PUMPING 125 (NEAREST FOOT)  
 22 25  
 TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST)  
 A AIR  P PISTON  T TURBINE  
 27 27 27  
 C CENTRIFUGAL  R ROTARY  O OTHER (DESCRIBE BELOW)  
 27 27 27  
 J JET  S SUBMERSIBLE  
 27 27

CASING RECORD

(INSERT APPROPRIATE CODE BELOW)

ST STEEL  CO CONCRETE  
 PL PLASTIC  OT OTHER

MAIN CASING TYPE  ST 6 22  
 60 61 63 64 66 70  
 NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH)  
 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT)

OTHER CASING (IF USED)  
 DIAMETER (INCH) DEPTH (FEET) FROM TO

PUMP INSTALLED

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) 29

DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX)  Y  N

CAPACITY:  
 GALLONS PER MINUTE (TO NEAREST GALLON) 31 35  
 PUMP HORSE POWER 37 41  
 PUMP COLUMN LENGTH (NEAREST FOOT) 43 47

SCREEN RECORD

(INSERT APPROPRIATE CODE BELOW)

ST STEEL  BR BRASS OR BRONZE  HO OPEN HOLE  
 PL PLASTIC  OT OTHER

CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT)

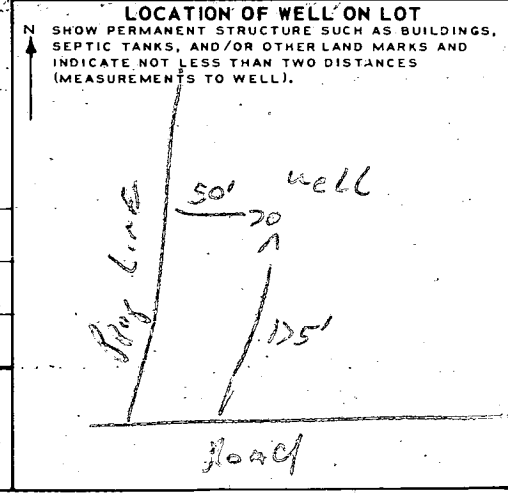
+ ABOVE } LAND SURFACE (NEAREST FOOT)  
 - BELOW } 2 (NEAREST FOOT)  
 49 50 51

C 2

DEPTH (NEAREST WHOLE FOOT)

FROM TO

1 HC 20 125  
 8 9 11 15 17 21  
 23 24 26 30 32 36  
 38 39 41 45 47 51  
 SLOT SIZE 1, 2, 3, \_\_\_\_\_



CIRCLE APPROPRIATE BOXES

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

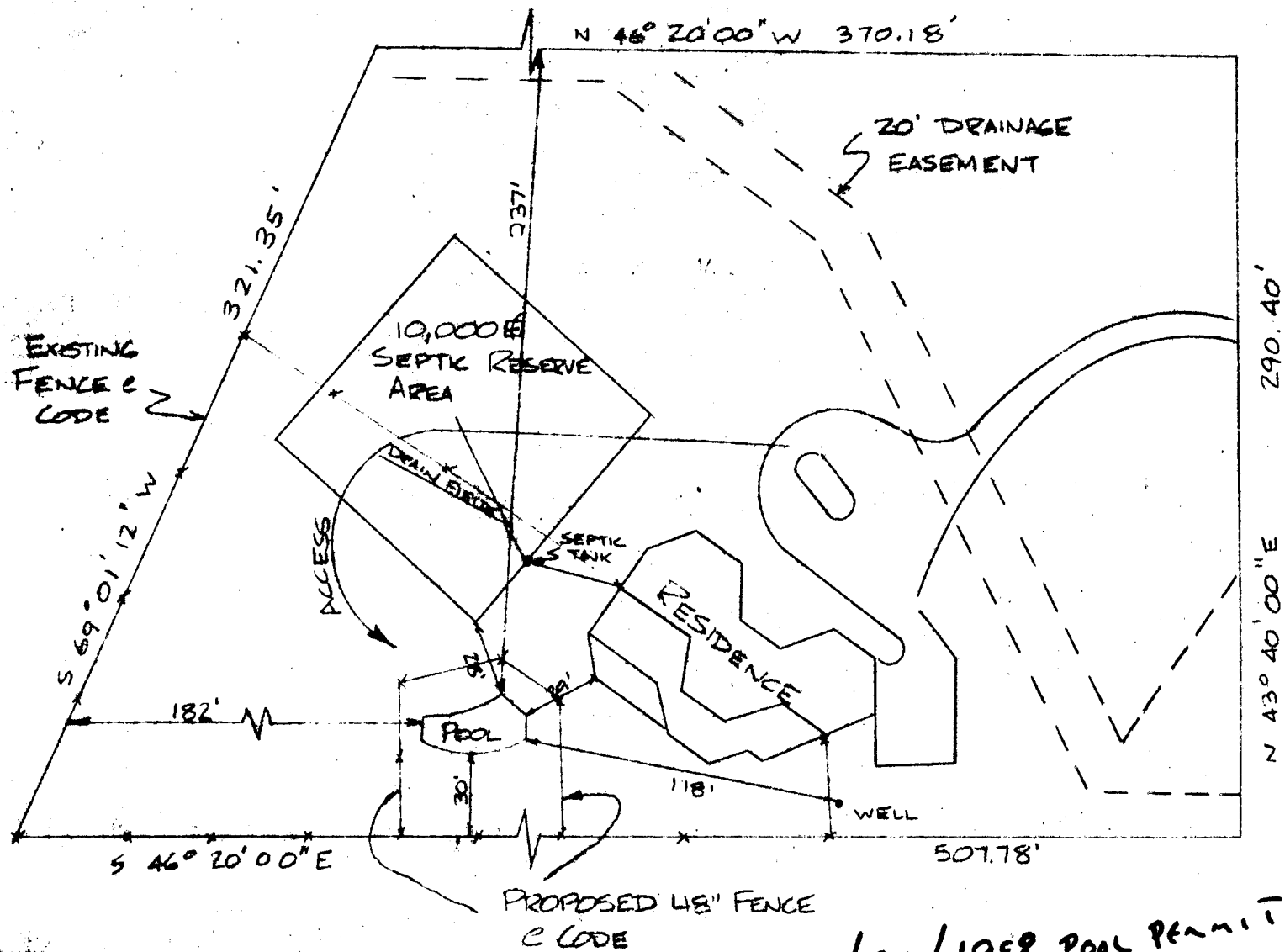
P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT I HAVE COMPLIED WITH ALL CONDITIONS STATED ON THE ABOVE-CAPTIONED "PERMIT TO DRILL WELL", AND THAT INFORMATION CONTAINED IN THIS REPORT IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

DRILLERS NAME Ralph Wayne  
 (PLEASE PRINT) Ralph Wayne  
 SIGNATURE

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

70  TELESCOPE CASING 72  LOG INDICATOR 74 75 76  OTHER DATA AVAILABLE



MOUNT ALBERT ROAD

2/22/1988 POOL PERMIT  
 -APPROVED R.H.

PROP  
 FOR



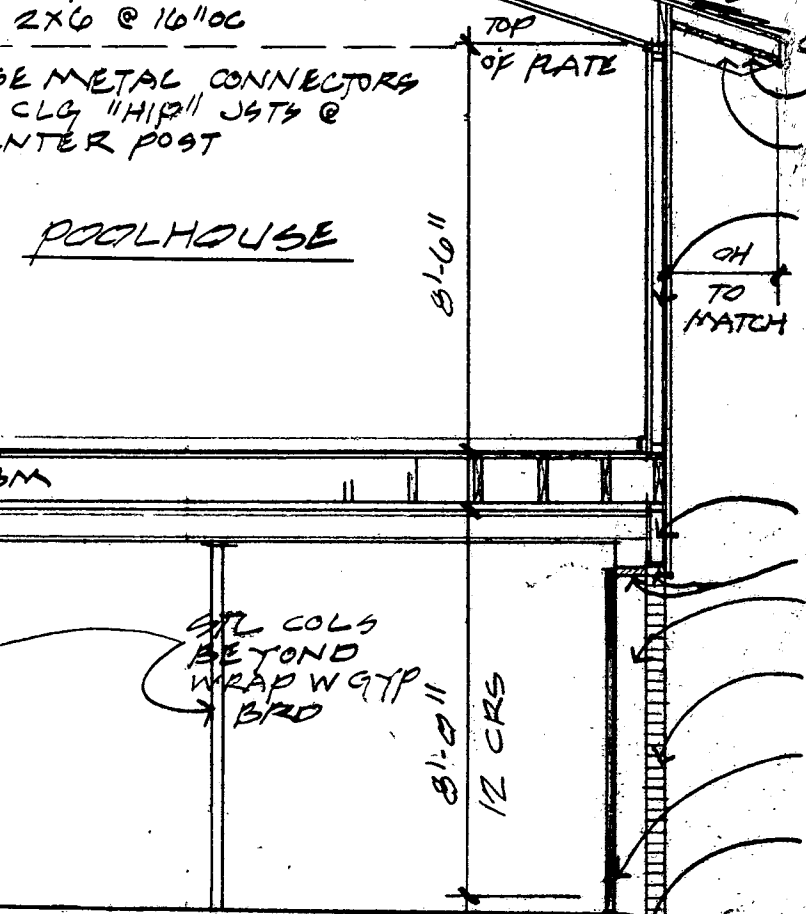
- COPPER SHT ROOFING  
W STANDING SEAMS  
& 1/2" SHTHG & 2X FRMG

- COPPER SHT WALL  
COVERING - SEE EXISTG  
FOR DTLS

X10 "HIP" JSTS - SPACED W BLOCK'G  
CLG - REMAINDER  
2X6 @ 16"OC

SE METAL CONNECTORS  
CLG "HIP" JSTS @  
CENTER POST

POOLHOUSE



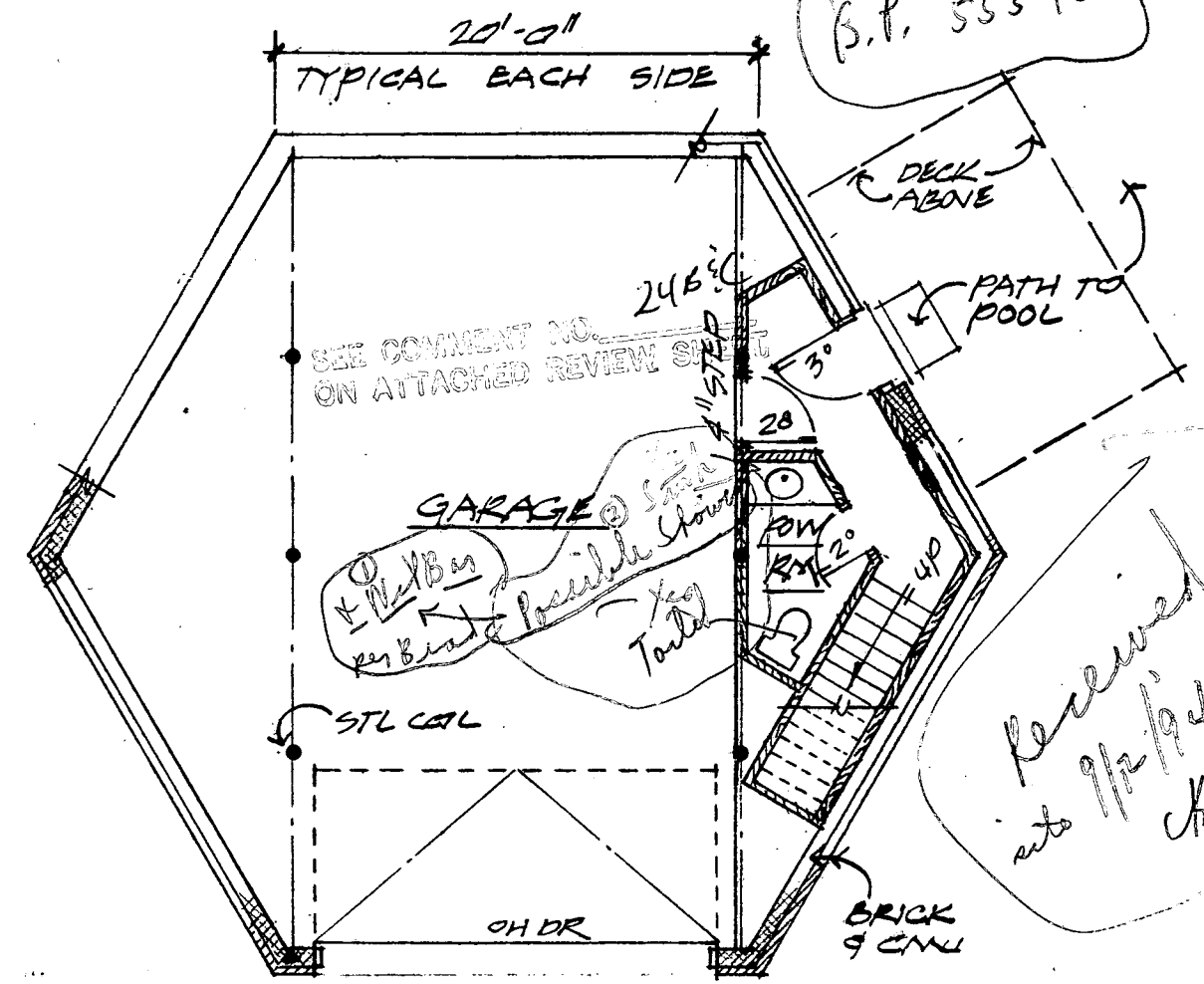
ROOF - CDR SHINGLES W 2 LAYERS  
OF RFG FELT & 1X SKIP SHTHG  
& SNOW & ICE GUARD & 1/2"  
SHTHG W CLIPS

5/8" x 10 CDR FASCIA  
1" JT 1X SOFFIT W STRIP VENT

BUILT UP CDR BM  
TO MATCH

TYPICAL EXT WALL -  
VERT CDR SIDING &  
FIR BARRIER & 1/2"  
SHTHG & 2X4 STUDS  
@ 16"OC W R13 INSUL

OH DR HDR  
HER TRIM  
WP TRIM @ OH DR  
BRICK BEYOND  
OH DR  
TURN ON  
CONC SLAB  
@ POOR



B.P. # 55548

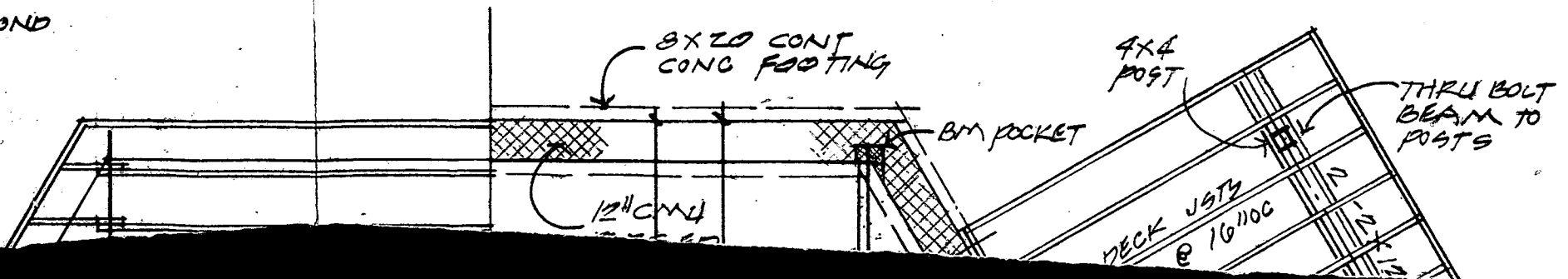
SEE COMMENT NO.  
ON ATTACHED REVIEW SHEET

GARAGE

Received at  
12/19/94  
K

GARAGE FLOOR PLAN

1/8" SEE PLAN BELOW FOR  
ADDITIONAL INFO

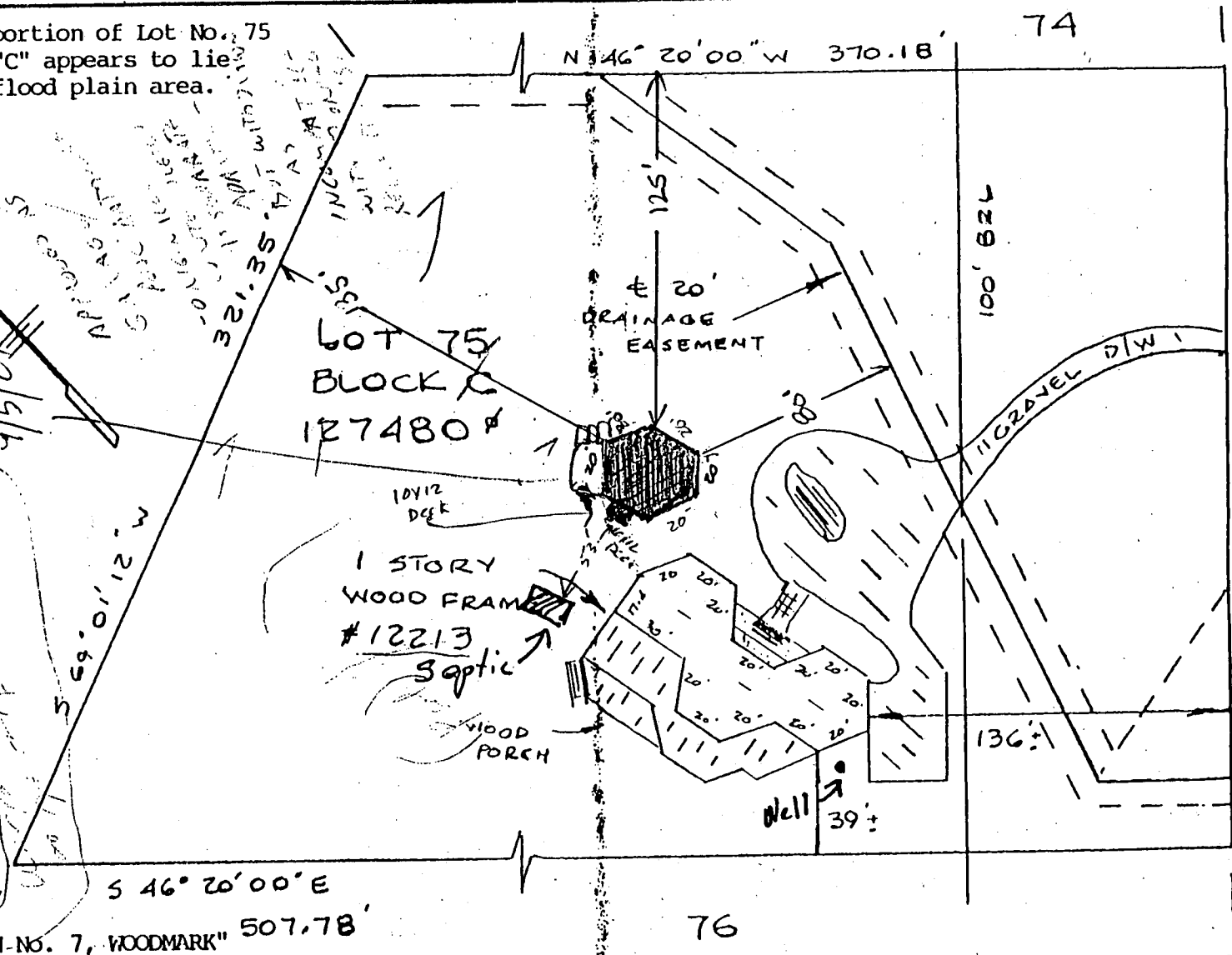


A BUILDERS  
SVILLE, MD. 21228  
788-3308

NOTE: No portion of Lot No. 75 in Block "C" appears to lie within a flood plain area.

DECK @ POOL HOUSE OK  
 MR Ho-Co-Health  
 9/5/01

34555 #  
 5554 #  
 559° 0' 12" W



This is to certify that I have surveyed the property known as (Lot No. 75, in Block "C") 12213 Mount Albert Road as shown on a plat entitled\* Sheet 1 of 2 recorded PLAT 25/60 among the Records of HOWARD County, Maryland for the purpose of locating the improvements thereon.

ONLY THAT THE IMPROVEMENTS ARE SHOWN WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE CONSIDERED AS A GUARANTEE OF PROPERTY LINES.



J. Carl Hudgins PLS#96

LOCATION SURVEY  
 12213 MT. ALBERT ROAD  
 WOODMARK  
 3RD ELECTION DISTRICT  
 HOWARD COUNTY, MD

NTT ASSOCIATES, INC.  
 16205 Old Frederick Road  
 Mt. Airy, Maryland 21771  
 Phone 442-2031

Scale	1" = 60'
Date	10/12/07
Field By	JLM
Drawn By	JLM
Drawing #	X6942

MOUNT ALBERT ROAD  
 (50' R/W)

Building Address 12213 MT ALBERT RD  
ELLICOTT CITY MD 21042  
 Suites/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision Woodmark  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot: 75  
 Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
 Zoning 6030 Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Rachel Rosa  
 Address 12213 MT ALBERT RD  
 City ELLICOTT CITY State MD Zip Code 21042  
 Home Phone 301-596-9898 Work Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein): \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD  
 Proposed Use Deck 12x20  
 Estimated Construction Cost \$ 4300.00  
 Description of Work ATTACH 12x20 deck to pool house

Contractor Company class act Design  
 Contact Person WAYNE FULL  
 Address P.O. Box 569  
 City Passapatanz State MD Zip Code 21123  
 License No. 48395  
 Phone 410-242-7771 Fax \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: <u>224 SF</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
State Certified Modular _____		Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
		Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	
		State Certified Modular _____ Manufactured Home _____	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Wayne Full  
 Applicant's Signature  
class act Design  
 Title/Company

Wayne Full  
 Print Name  
9/5/01  
 Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official	<u>9/5/01</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Dev. Engineering DPZ	<u>9/5/01</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Health		
<input checked="" type="checkbox"/> Fire Protection		

Is Sediment Control approval required prior to issuance?  
 YES  NO

CONTINGENCY CONSTRUCTION START:   
 ONE STOP SHOP:

**DPZ SETBACK INFORMATION**

Front: \_\_\_\_\_  
 Rear: 5 FT  
 Side: 7.5 FT  
 Side St.: 60  
 All minimum setbacks met? YES  NO  N/A  
 Is Entrance Permit required? YES  NO   
 Historic District? YES  NO   
 Lot Coverage for NewTown Zone \_\_\_\_\_  
 SDP/Red-line approval date \_\_\_\_\_

**PROPERTY ID#:** 13793

Filing fee	\$ _____
Permit fee	\$ <u>30</u>
Excise tax	\$ _____
Sub-total paid	\$ _____
Add'l permit fee	\$ _____
<b>TOTAL FEES</b>	\$ <u>30</u>
Balance due	\$ _____
Check	# <u>1015</u>
Validation	# <u>43320</u>

Accepted by [Signature]