

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50759C

A REPAIR

DISTRICT 5th

DATE 6/30/95

DATE SYSTEM APPROVED 6/15/95

INSPECTOR R. P. [Signature]

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

INDEXED

349974

Jack Fyock Septic Services

IS PERMITTED TO INSTALL ALTER X

ADDRESS 13775 Triadelphia Road, Glenleg, MD 21737 PHONE 988-9270

SUBDIVISION Highland Acres LOT 11 ROAD 12488 E. Nugget Ct. West Gunston Ct.

PROPERTY OWNER Mr. Ward
ADDRESS 12488 East Nugget Ct.

SEPTIC TANK CAPACITY existing 1000 GALLONS

NUMBER OF BEDROOMS 3

(180) 125 ^{repair} SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED (135) or as near as possible

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

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

Install 2 Trenches (one about 48' long, the other 70' ft long) with Max Bottom depth near dist. box at 7', inlet 3', 2' wide, 4' stone fill. Shorted Trench end will be 6' deep and long Trench end about 7 1/2' deep. Disconnect from Failed Lead bed. RP 6/14/95

PLANS APPROVED BY [Signature] DATE 6/14/95

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.

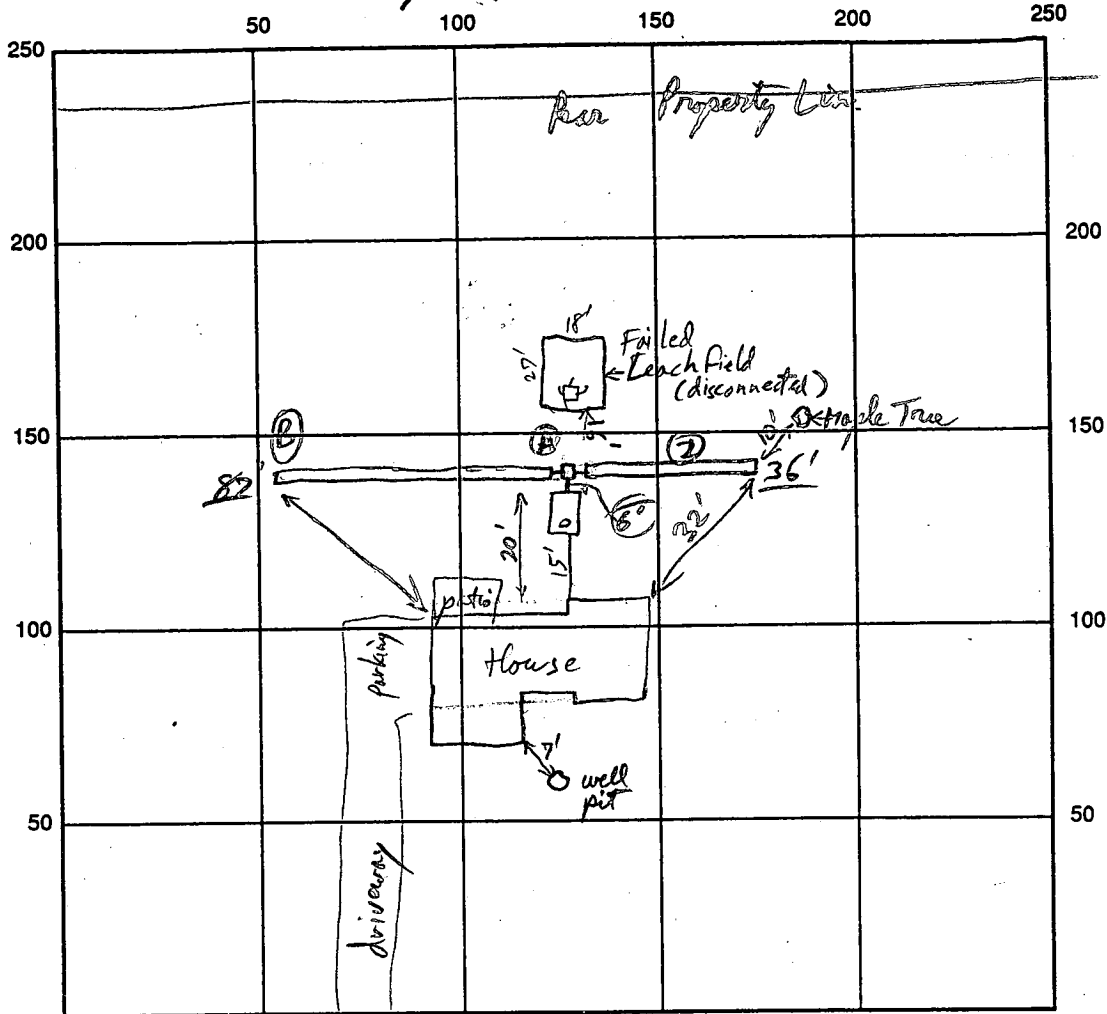
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

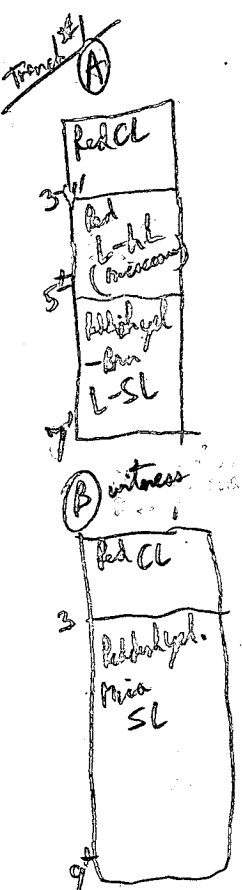
P 50759C

6/14/95
1 pm
(Cor soor...)
6/15/95

← Hyde Property Subdiv Lot #1 →



E. Nugget Ct INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE



SEPTIC TANK LEVEL existing 1000 gal CLEANOUTS _____

DISTRIBUTION BOX LEVEL OK

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

EFFECTIVE GRAVEL DEPTH 4' over FT. TOTAL LENGTH 87 / 36 FT. = 123 LF.

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

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

ABSORBENT AREA _____ SQ. FT.

REMARKS: Extensive testing in Spring of 1994 & 1995 on adjacent Property show good chert bearing soils with Red CL
set with tubes at 10 1/2 ft or deeper on elevations similar to the lower part of this lot. - Reason for
allowing Trench depth no greater than 7 ft below grade RP 6/14/95
Trench's OK, gravel, etc correct. OK to cover 6/15/95

DATE SYSTEM APPROVED 6/15/95 INSPECTOR David J. [Signature]

4/19/65
5/4/65
particular
of Howard County
4/19/65

PERMIT

P 10013

A 08602

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

INDEXED

DISTRICT 5

DATE 4/15/65

Emerson Feaga IS PERMITTED TO INSTALL ALTER

ADDRESS Triadelphia Rd., Ellicott City, Md. PHONE AT 6-2516

A SEWAGE DISPOSAL-SYSTEM LOCATED AT

SUBDIVISION Highland Acres ROAD West Gunston Ct. LOT 11

PROPERTY OWNER Mr. James H. Fowler

ADDRESS

SPECIFICATIONS - 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

1250 or 1500

SEPTIC TANK CAPACITY ~~750~~ GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

18

OTHER Leaching bed - ~~18~~ ft. wide by 22 ft. long. Bottom of gravel to be at 5 ft. depth below original grade.

Locate leaching bed in the area between 55 ft. to 105 ft. from back lot line and in the area between 76 ft. to 126 ft. from the left side line as lot is seen when facing it from the front of the lot.

NOTE: CALL FOR INSPECTION OF LEACHING BED EXCAVATION BEFORE ANY GRAVEL IS INSTALLED.

PLANS APPROVED BY R. D. Fletcher DATE 6/17/64

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 08602

APPLICATION

A 086021

SEWAGE DISPOSAL TESTING

P _____

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

1250 or 1500

ELLICOTT CITY

DISTRICT 5

DATE 6/9/64

Septic tank ~~1250 gal.~~
Leaching bed - ~~13~~ 13 ft. wide by 22 ft. long.
Bottom of gravel to be at 5 ft. depth below original grade.

Yogate leaching bed in the area between 55 ft. to 105 ft. from back lot line and in the area between 76 ft. to 126 ft. from the left side line as lot is seen when facing it from the front of the lot.

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 Mr. James H. Fowler

ADDRESS 4709 Listra Rd., Rockville, Md. PHONE WH 2-6267

PROPERTY LOCATION:

SUBDIVISION Highland Acres LOT NO. 11

ROAD AND DESCRIPTION West Gunston Court

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 1 acre TYPE BLDG. 3 NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ James H. Fowler

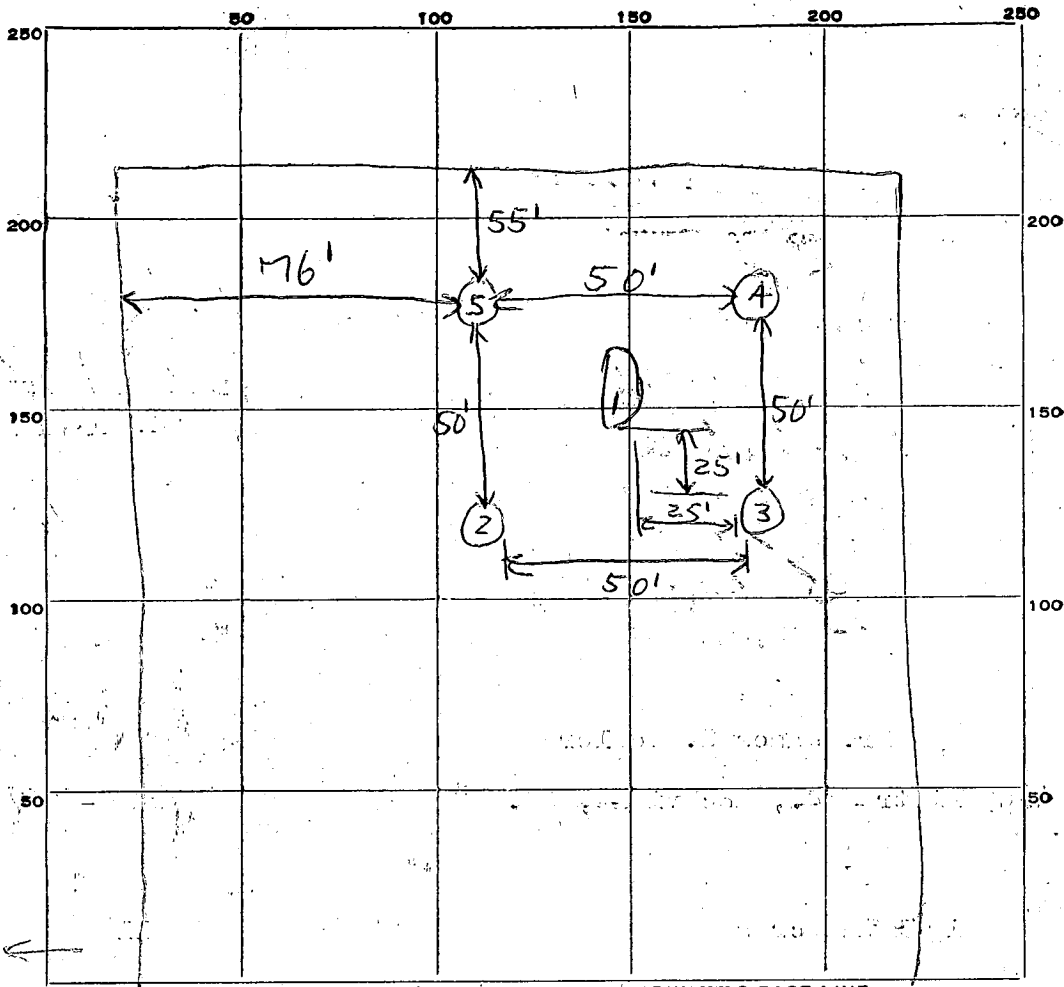
APPROVED BY R. D. Fletcher FOR Leaching Bed DATE 6/17/64
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/17/64	1	9/2 ft.	1017	1021	1021	1035	14 min.
	2	5 ft.	1022	1023	1023	1025	2 min.
	3	5 ft.	1028	1039	1039	1050	11 min.
	4	4 1/2 ft.	1028	1029	1029	1032	3 min.
	5	5 ft.	1033	1043	1043	1105	22 min.

Brown Red

SOIL AUGER FINDING

TESTED BY ADF 6/17/64

REMARKS

ALSO PRESENT James H. Fowler LOT NO. 11

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES
State Office Building
ANNAPOLIS, MARYLAND 21401

No. 156

APPLICATION FOR PERMIT TO DRILL WELL

An application must be submitted and permit received before drilling a well.

Owner James Fowler
Street or R. F. D. 4104 Fortna Rd
Post Office Rockville, Md

Driller Paul W. McKee License Number 15
Street or R. F. D. 2524 Old Frederick Rd
Post Office Cabinville, Md
Date 1-5-65

Quantity of Water to be Produced 5 G.P.M.
Total Quantity Needed For Use 300 G.P.D.
Use for Water New House
Approximate Depth of Well (feet) 60
Method of Drilling to be used table

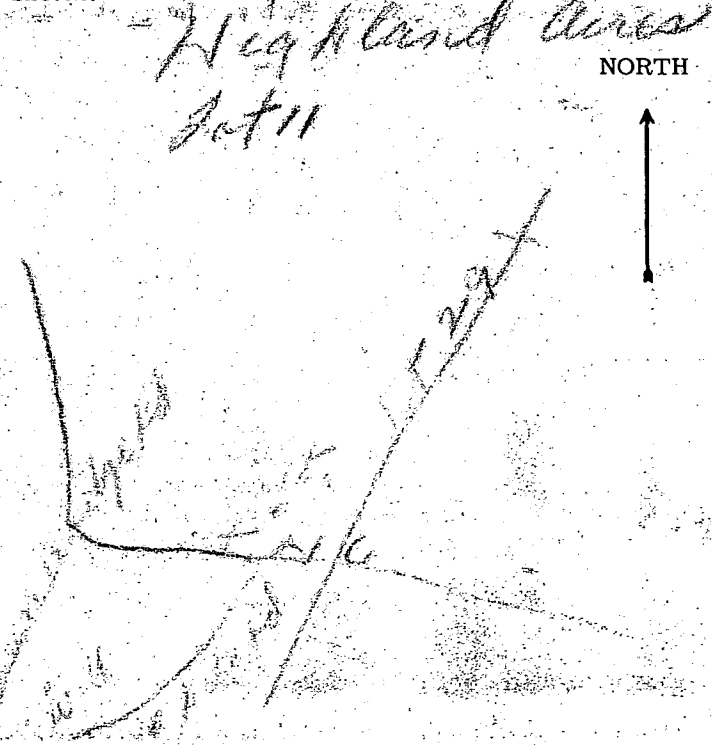
Location of Well
County Howard
Nearest Town Patuxent
Distance from Town 2 miles
Direction from Town South

PERMIT TO DRILL WELL
(Permit to be returned to Driller)

NOT TO BE FILLED IN BY DRILLER

Permit No. HC-65-W-233
Samples of Cuttings Required by Department Yes No
Owner Requires Permit to Appropriate Water Yes No
Owner Has Permit to Appropriate Water Yes No
The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.
Paul W. McKee
Director
Date 1-5-65

Description of Location of Well
(This information should be definite enough to permit locating well on a county map).
Near what road Green, Kings Rd
On which side of road Left
(North, East, South, West)
Distance from road 1/2 mile
Draw a sketch below showing location of well in relation to nearby towns, roads and streams with north in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch.



Health Department Approval of Application
Howard County Department of Health
or State Department of Health
Approved by Debra F. Ware
Title Chief Sanitarian
Date 4/1/65

STATE OF MARYLAND
DEPARTMENT OF WATER RESOURCES

State Office Building
ANNAPOLIS, MARYLAND 21401

08602

WELL COMPLETION REPORT — This report must be submitted within 30 days after completion of the well

WELL DESCRIPTION

Permit Number HO65W323

WELL LOG

State the kind of formations penetrated, their depth, their thickness, and if water-bearing

CASING AND SCREEN RECORD

State the kind and size of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

Name of Owner James H Fowler

F E E T
from to.....

D I A M.
(Inches)

F E E T
from to.....

PUMPING TEST

Hours Pumped 2

Type of Pump Used Bailer

Pumping Rate
Gallons per Minute 8

WATER LEVEL

Distance from land surface to water:

Before Pumping 8 Ft.

When Pumping 70 Ft.

APPEARANCE OF WATER

Clear

Cloudy

Taste good

Odor None

Height of Casing Above Land

Surface 2 Ft.

PUMP INSTALLED

Type None

Capacity

Gallons per Minute.....

Gallons per Hour.....

Pump Column Length..... Ft.

REMARKS

None

Well Was Completed

Date 7 Feb 65

Well Driller Russell B

Zwister

Signature

clay
clay
quicksand
sandstone

0-21
21-24
24-80
80-102

Steel

6 1/4

9 1/2 ft.

Water entering
95-97 ft.