

8/31/99
follow 1 PM at 228
9/20/99 NOON
9/20/99
2:00
9/23/99
2:00

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 512676

A56429-HH

03-327469

DISTRICT _____

HOWARD COUNTY HEALTH DEPARTMENT

DATE 8/23/99

BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~ 410-313-2640

DATE SYSTEM APPROVED 9/23/99

INSPECTOR SRK

INDEXED

Lehsac Plumbing & Heating IS PERMITTED TO INSTALL ALTER _____

ADDRESS 202 Azar Court, Baltimore, MD 21227 PHONE 410-242-6888

SUBDIVISION Gaither Hunt, Sec. II LOT 34 ROAD 11079 Dorsch Farm Road

PROPERTY OWNER Ryan Homes

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 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 120 feet down the left lot line and 55 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. 6/30/99 OK AM

PLANS APPROVED BY Mark E. Rifkin DATE 6-15-1999

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.

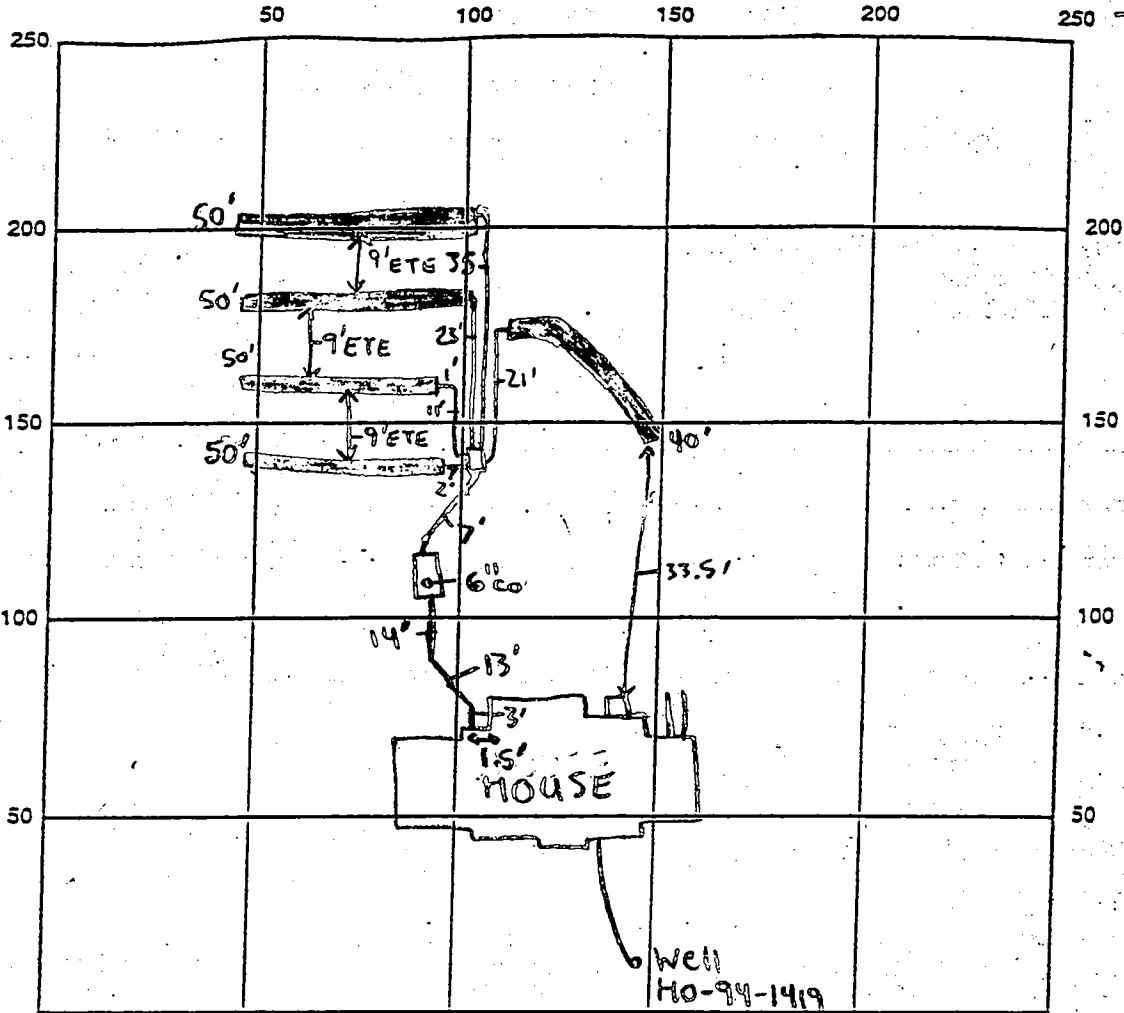
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL 461-9833 FOR INSPECTION OF SEPTIC SYSTEM.

HH
A56429

NOT TO SCALE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
DORSCH FARM RD

SEPTIC TANK LEVEL 1250 gallon midseam CLEANOUTS 6" @ Tank

DISTRIBUTION BOX LEVEL Baffle is in

DRAIN FIELD/TILE DEPTH 5' FT. TRENCH WIDTH 3' FT. INLET DEPTH 3' FT.

EFFECTIVE GRAVEL DEPTH 2' FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWELL DRYWELL INSIDE DIAMETER N/A FT. EFFECTIVE DEPTH BELOW INLET N/A FT.

ABSORBENT AREA N/A SQ. FT.

REMARKS: 8/31/99 - OK TO CONTINUE WORK, CONTRACTOR TO CALL AND SCHEDULE FIELD MEETING TO DISCUSS TRENCH LAYOUT DESIGN - SRK 9/20/99 - Met w/ Contractor agreed on best trench layout design see BP Plan - SRK 9/23/99 - OK TO COVER ALL WORK - SRK

DATE SYSTEM APPROVED 9/23/99 INSPECTOR Steven R Krieg

APPLICATION

PERCOLATION TESTING

A 56429HH

P _____

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

DISTRICT _____

DATE 4-12-96

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 J Thomas Scrivener

ADDRESS c/o Land Design & Development PHONE 410 740 5176

AGENT OR PROSPECTIVE BUYER Donald R. Reuwer Jr

ADDRESS 10805 Hickory Ridge Rd PHONE _____
21044

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. 33 34 ✓

ROAD AND DESCRIPTION (11079 Dorsch Farm Rd)

TAX MAP 29 PARCEL # 21

SIZE OF LOT 1+ Acres TYPE BLDG. SFD - 4Brm
(SINGLE FAMILY DWELLING OR COMMERCIAL)

**BLDG PERMITS SKIPPED
AND REBUILT 6-15-99
Serial # 670117571**

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.

Donald R. Reuwer Jr
(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

56429 HH

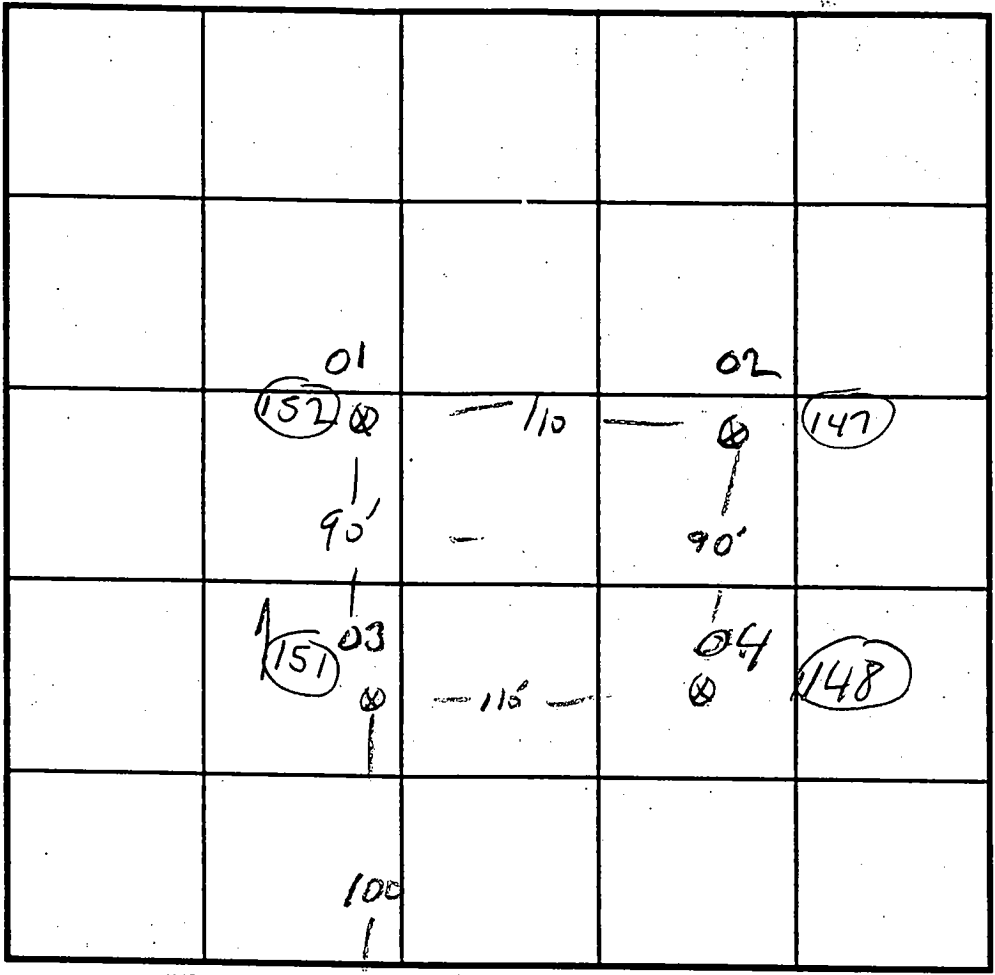
COUNTY #

SOIL PROFILE

0' [Empty box for soil profile]

[Empty box for soil profile]

[Empty box for soil profile]



SOIL PROFILE

0' [Empty box for soil profile]

TOP SOIL 1'

ORANGE SANDY CLAY LOAM 6'

BROWN SSL 11'

PLAT #S CIRCLED

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

← N FARM ROAD

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|-----------|---------------|---------|------|----------------|------|------|
| | | | START | STOP | START | STOP | |
| 4/12-96 | 151 03 | 5' 11 | 3:23 | 3:26 | 3:26 | 3:33 | 7 MW |
| | 152 01 | 4'6" 11 | 3:27 | 3:28 | 3:30 | 3:32 | 2 MW |
| | 148 04 | 4'8" 10'6" | 3:32 | 3:34 | 3:34 | 3:39 | 5 MW |
| | 147 02 | 4' 10'6" | 3:38 | 3:39 | 3:39 | 3:41 | 2 MW |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

REMARKS LOT 33 34, USE 147, 148

TYPE OF SOIL 6. SAUSAGE

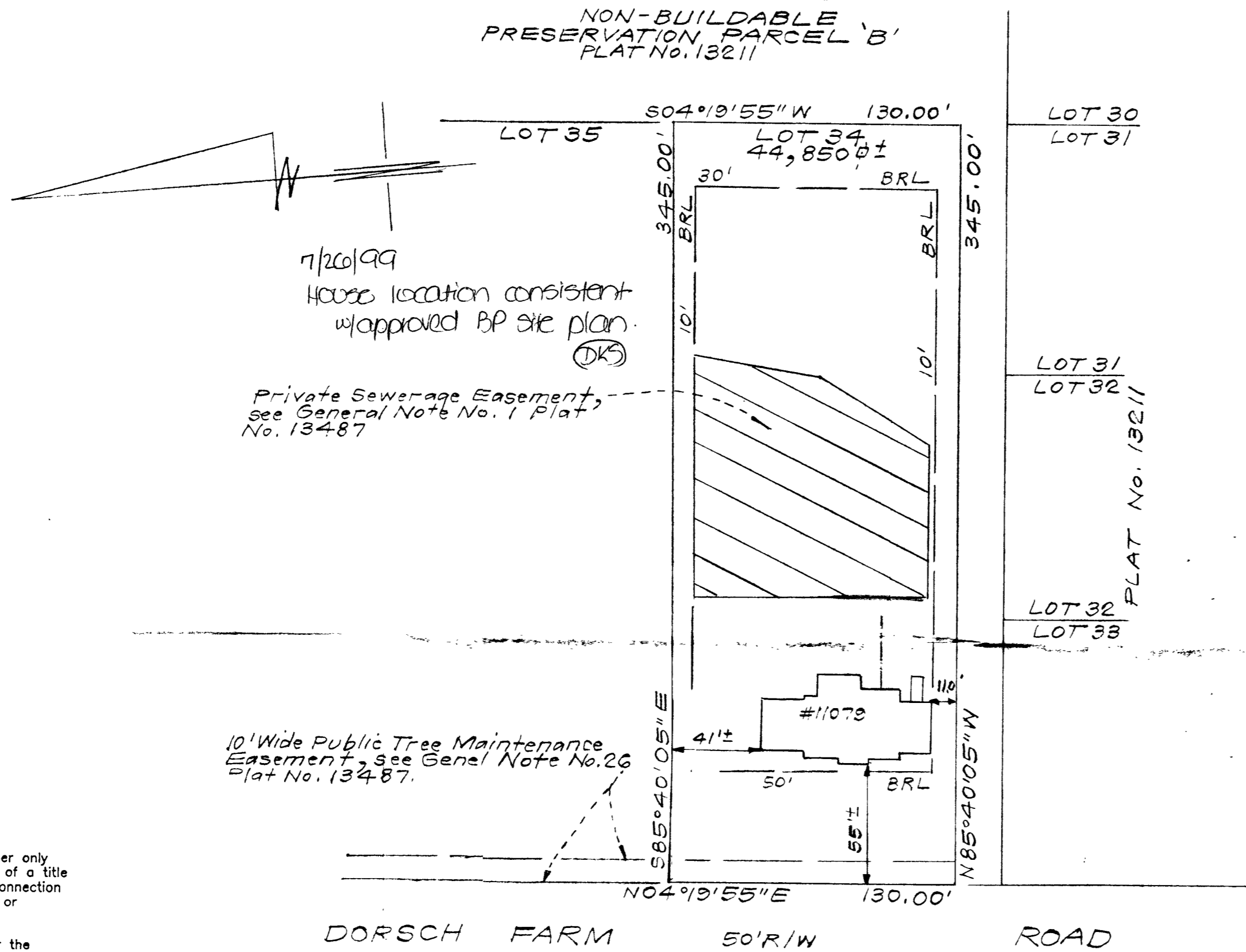
TESTED BY MIKE + MIKE ALSO PRESENT Don REYNOLDS

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 5 MW TRENCH WIDTH 3

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

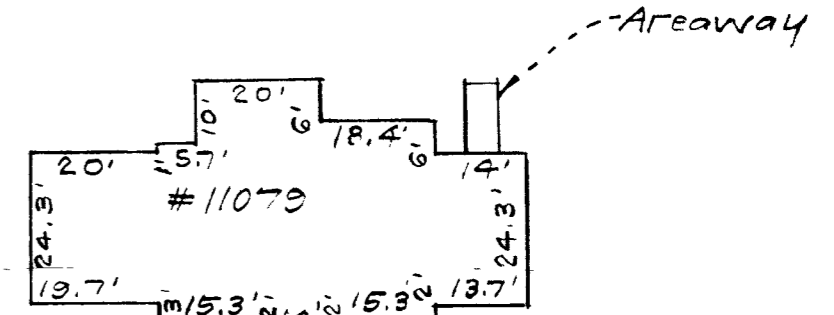
NOTE: This Lot appears to lie in an area classified as Zone C, area of minimal flooding as shown on FIRM MAP of Howard County, Maryland, Community Panel Number 2400440027B, Panel 27 of 45, dated December 4, 1986.

Wall Check: 7-6-99
Top of Wall Elev.: 485.9



7/20/99
House location consistent w/approved BP site plan. (DKS)
Private Sewerage Easement, see General Note No. 1 Plat No. 13487

10' Wide Public Tree Maintenance Easement, see Genl Note No. 26 Plat No. 13487.



SCALE: 1"=30'

CONSUMER INFORMATION

- 1) This plot is of benefit to the consumer only insofar as it is required by a lender of a title insurance company or its agent in connection with contemplated transfer, financing or refinancing purposes;
- 2) This plot is not to be relied upon for the establishment or location of fences, garages, buildings or other existing or future structures;
- 3) This plot does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.

SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating improvements shown hereon, and that they are located as shown.

DATE _____

NOTE: 1. That setback distance accuracy = 1'

Plat Reference: Plat No. 13487

| | | |
|--|--|----------------------|
| CLARK • FINEFROCK & SACKETT, INC. ENGINEERS • PLANNERS • SURVEYORS | | |
| 7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7500 BALT. • (301) 621-8100 WASH. | | |
| DESIGNED | LOCATION DRAWING 11079 DORSCH FARM ROAD LOT 34 GAITHER HUNT Section 1, Area 2 Lots 34-62 And Buildable Preservation Parcel 'A' | SCALE 1"=50' |
| DRAWN KWC | (A Resubdivision of Lot 1, As Shown On A Plat Entitled "Chance Lot 1" - Plat No. 6985 And Part of Liber 42.08 At Folio 436) Second Election District Howard Co., Maryland | DRAWING |
| CHECKED PAS | | JOB NO. |
| DATE 7-8-99 | | FILE NO. 98-009-0 |

| | | | | |
|------------|-------------|--------------------------------|--|---|
| B 1 | 2014 | SEQUENCE NO. (MDE USE ONLY) | STATE OF MARYLAND PERMIT TO DRILL WELL please print or type ... | STATE PERMIT NUMBER HD - 94 - 1419 <small>fill in this form completely</small> |
|------------|-------------|--------------------------------|--|---|

OWNER INFORMATION

Date Received (ARA) 2-5-98

8 MM DD YY 13

15 WOOD LOT ENTERPRISES.
Last Name Owner First Name 34

36 5026 DORSEY HALL RD SITE 204
Street or RFD 55

57 ELICOTT CITY, MD 21042.
Town 70 State 72 Zip 76

B 3 LOCATION OF WELL

8 Howard COUNTY 21

23 GATHER OVERLOOK SUBDIVISION 42

SECTION 44 46 LOT 34 48 50

52 WILD LAKE. NEAREST TOWN 71

MILES FROM TOWN (enter 0 if in town) 4 M I J
73 76 77 78

DRILLER INFORMATION

76 MICHAEL BARLOW MWD 355 License No. 81

Firm Name MICHAEL BARLOW WELL DRILLING SVCS INC

Address 912 FAWN CT JOPPA, MD 21085

Signature [Signature] Date 2-3-98

B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)

11 MANOR LAKE ROAD NEAR WHAT ROAD 30

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)

34 1500 37 DISTANCE FROM ROAD ENTER FT OR MI 38 39

TAX MAP: _____ BLK: _____ PARCEL _____

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20

USE FOR WATER (CIRCLE APPROPRIATE BOX)

HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)

FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)

22 INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)

PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL)

TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

Howard COUNTY NAME AS6429 HHT COUNTY NO.

STATE SIGNATURE _____ INSERT S _____ 41

DATE ISSUED 2/10/98 Kim Maisto 2/10/99 EXP. DATE

43 MM DD YY 48 CO SIGNATURE

NORTH GRID 830 000 EAST GRID 514 000

50 55 57 63

APPROXIMATE DEPTH OF WELL 200 FEET 24 28

APPROXIMATE DIAMETER OF WELL 10 NEAREST INCH

METHOD OF DRILLING (circle one)

BORED (or Augered) JETTED Jetted & DRIVEN

30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary)

37 CABLE REverse-ROTary DRive-POINT

other _____

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

39 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) 41 52

SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X

SOURCES OF DRILLING WATER

-
-
-

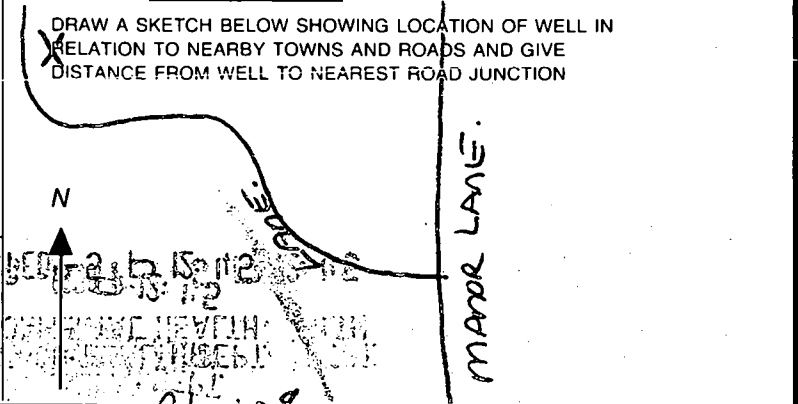
WRITE THE BOX NUMBER FROM THE MAP HERE

E 5204

N 830

000 000

3/2/98 Groux no ins [Signature]



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

APPROP. PERMIT NUMBER KM WRITE INITIALS IN BOX 54

FORCE HD - 94 - 1419 PERMIT No. 63

70 71 72 73 74 75 76 77 78 79

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
Replacement

Receipt # _____
Date _____

Name of Installer LEHSAC CORP

Telephone 410 242-6888

License Number 3344
Certified Well Pump Installer _____

Well Driller _____ Registered Plumber

Name of Property Owner RYAN

Telephone 410-645-0501

Subdivision _____ Lot # 34

Well Tag # HO-94-1419

Site Address 11079 DORSCH FARM RD

Pump

1. Type
a. Deep well jet _____
b. Shallow well jet _____
c. Submersible

Motor

1. Horsepower 3/4
2. RPM _____
3. Voltage _____
a. 110 _____
b. 220

Pitless Adapter

1. Make WILKINS
2. Model # _____
3. Depth 42"

2. Make JACUZZI
3. Model # T75471215-S2
4. Capacity 7 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

1. Capacity 86
2. Pressure relief valve? YES

Piping

1. Type 16016
2. Size 1
3. NSF and/or BOCA Code approved
4. Depth of supply line 42"

Well data

1. Depth 175 ft.
2. Yield 15 GPM
3. Static water level 35 ft.
4. Will water supply be disinfected by installer? NO

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.

8/31/99 WPI OK SRK 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.