

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXX~~ 313-2640

INDEXED

P 56440A

A REPAIR

DISTRICT

DATE

DATE SYSTEM APPROVED

INSPECTOR

Jack Fyock Septic Services

IS PERMITTED TO INSTALL

ALTER ☒

ADDRESS

PHONE

988-9270

SUBDIVISION

LOT

ROAD 14610 Route 144

PROPERTY OWNER

Edward Bell

14610 Route 144

ADDRESS

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS

SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED

REPAIR - PURPOSE - REPLACING COLLAPSED METAL SEPTIC TANK WITH A 1000 GALLON CONCRETE TANK.

Call for inspection when tank is in place so that the size and location can be approved.

Install 2 - 50' long trenches, 2' wide, inlet @ 4 1/2', Tr #1 (uphill) Bottom 9', 4 1/2' stone
Tr #2 (downhill) Bottom 8', 3 1/2' stone

PLANS APPROVED BY

Amy McMillen

DATE

02/09/96

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

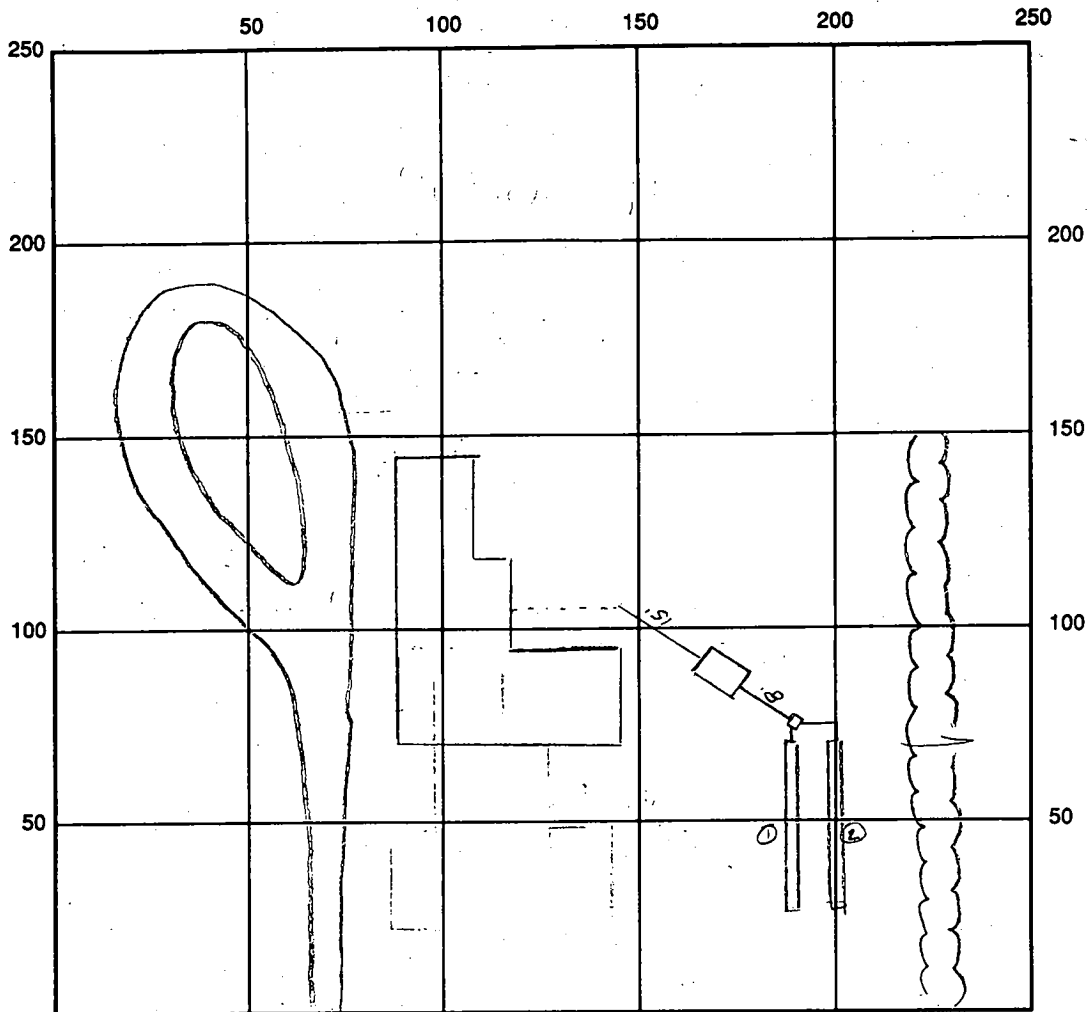
PERMIT VOID AFTER TWO YEARS

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

56440A



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL New 1000gal Septic Tank

CLEANOUTS _____

DISTRIBUTION BOX LEVEL _____

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: Septic Tank Placement OK, call for trench final when ready, 6/14/96

DATE SYSTEM APPROVED 6/14/96

INSPECTOR Amy McMillan

SITE INSPECTION SHEET

OWNER: Robert Bell

DATE REQUESTED: 4/4/96

ADDRESS: 14610 Frederick Road

DRILLER: _____

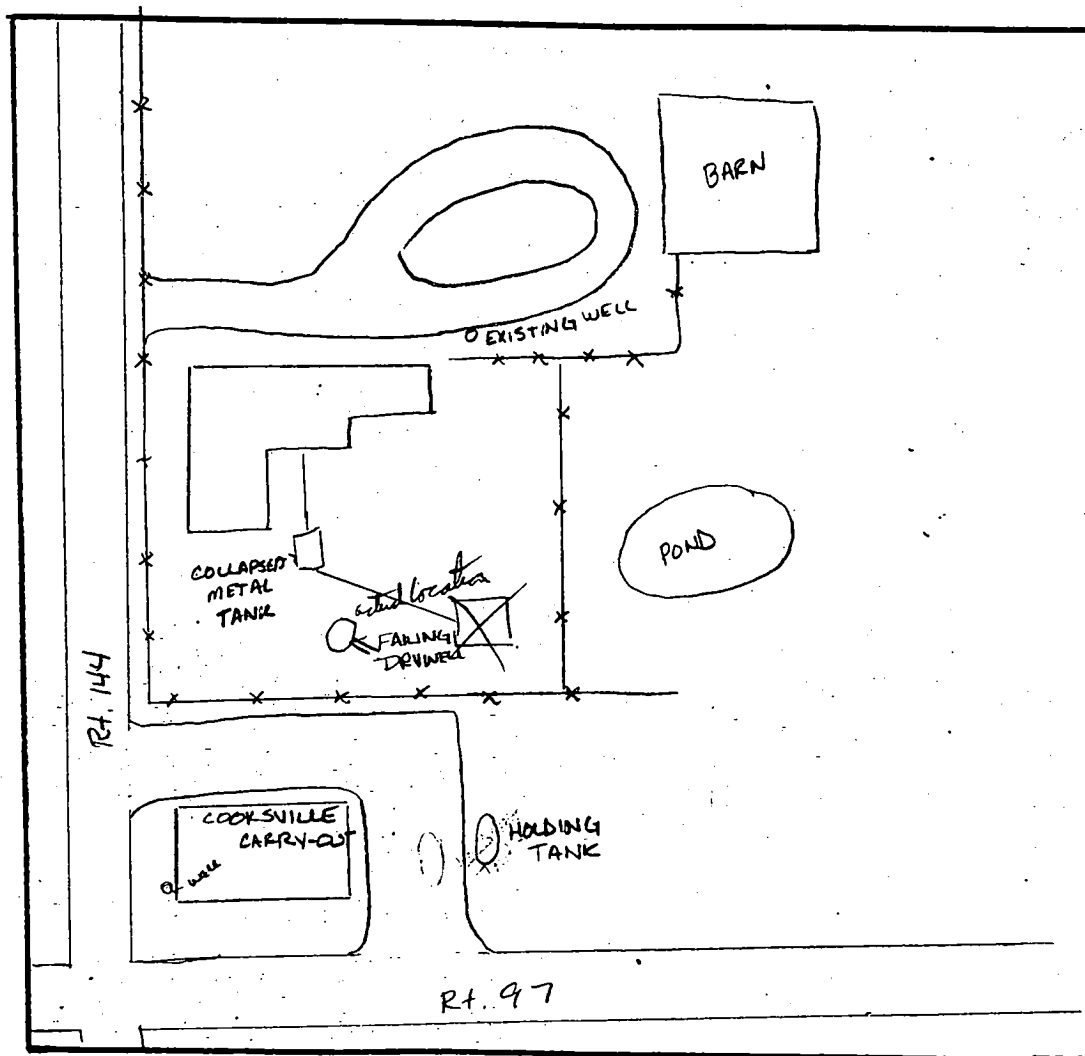
Cooksville

WELL TAG # _____

COUNTY # _____

PROPOSAL: collapsed metal tank - want to replace

LOCATION DIAGRAM



COMMENTS: 4/4/96 ok to replace tank - need to repair entire system. suggest 1500gal
dual chambered tank to allow for possible pump system or holding tank.

DATE: 4/4/96

INSPECTOR: Amy McMillan

Emergency No. (If any) - STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL WRA PERMIT NUMBER

DATE RECEIVED (WRA USE ONLY) OWNER COL 15 LAST NAME FIRST NAME COL 34 STREET OR RFD COL 36 COL 55 POST OFFICE COL 57 COL 76

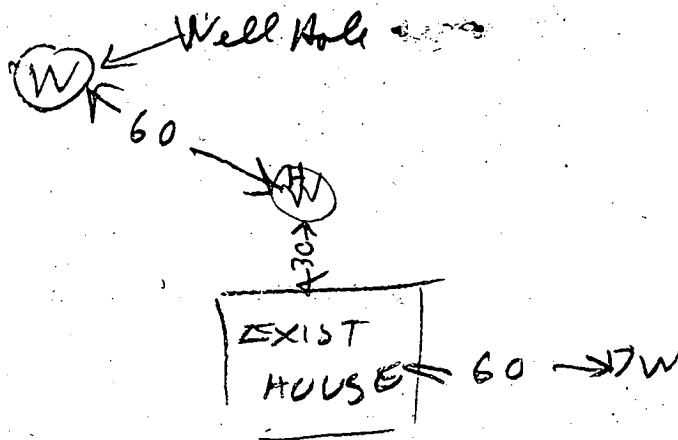
DRILLER INFORMATION DATE LICENSE NUMBER FIRST NAME DRILLER LAST NAME SIGNATURE

WELL INFORMATION MAXIMUM PUMPING RATE (GALLONS PER MINUTE) AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) USE FOR WATER (CIRCLE APPROPRIATE BOX) APPROXIMATE DEPTH OF WELL APPROXIMATE DIAMETER OF WELL METHOD OF DRILLING USED REPLACEMENT OR DEEPEINED WELLS

HEALTH DEPARTMENT APPROVAL DATE APPROVED BY SPECIAL CONDITIONS 8-63

LOCATION OF WELL COUNTY SUBDIVISION SECTION NEAREST TOWN MILES FROM TOWN DIRECTION FROM TOWN 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. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW, AND THE BOX NUMBER FROM THE WELL LOCATION MAP.

7/15/77 Well OK see other side of attached sheet R. Hodge



(1+W) = Ditching
dug well
25 ft deep
& drying up

442 2005

RT 144

- ① Mayne said well is now 85 ft deep to rock & caving in. I observed much mud being pumped out of hole casing not yet set. Mar
- ② Talked to FF He said well ^{grout} pipe must be ~~put~~ put down to 85 ft & attempt to cleanout well must be made as casing put down.
- ③ Talked to J. Mayne He said he has 40 ft of grout pipe & is willing to put 40 ft of grout pipe down side of casing. He said it is impossible to put 85 ft grout pipe down
- ④ otherwise well will be abandoned
- ④ Talked to FF He said they will ~~grout~~ ~~85 ft of grout~~ 85 ft of grout pipe & attempt to cleanout it
- ⑤ Told Bell the owner & R Mayne. FF decision in ④ Bell called

See Lined sheet

ROBERT BELL WELL
Rt 144 nr Rt 97
Ralph Mayne Well Driller

- (6) After Bell called F.F. F.F. said that Mayne must get more grout pipe (20 to 30 ft) & to put grout pipe down well as far as it would go
- (7) Mayne put 85 ft casing in well with 5 ft sticking out of ground
- (8) I measured 22 ft depth of open hole with a string
- (9) A 45 ft long grout pipe was then jettied down 45 ft & grouting started
- (10) 33 bags of cement used
b.w. 500 lb
- (11) Well OK R/P

C 1 0544 (SEQ. NO.) 6 (THIS NUMBER IS TO BE PUNCHED IN COLUMNS 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 <u>W/25067</u>																														
DATE RECEIVED (WRA USE ONLY) DATE WELL COMPLETED <u>Jul 10 1977</u> 8-13 <u>15</u> <u>20</u>	DEPTH OF WELL <u>125</u> 22 (TO NEAREST FOOT) 26	PERMIT NO. FROM "PERMIT TO DRILL WELL" 28 29 30 31 32 33 34 35 36 37 DRILLERS IDENTIFICATION NO. <u>1000000000</u>																														
OWNER <u>Well</u> <u>Robert</u> LAST NAME <u>Frederick</u> FIRST NAME <u>Robert</u> STREET OR RFD <u>19100</u> POST OFFICE <u>19100</u>																																
WELL DESCRIPTION																																
WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)</th> <th colspan="2">FEET</th> <th rowspan="2">CHECK IF WATER BEARING</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td><u>Top Soil</u></td> <td><u>0</u></td> <td><u>2</u></td> <td></td> </tr> <tr> <td><u>Sandy</u></td> <td><u>2</u></td> <td><u>25</u></td> <td></td> </tr> <tr> <td><u>Sand Stone</u></td> <td><u>25</u></td> <td><u>90</u></td> <td></td> </tr> <tr> <td><u>Clck</u></td> <td><u>90</u></td> <td><u>100</u></td> <td></td> </tr> <tr> <td><u>Sand Stone</u></td> <td><u>100</u></td> <td><u>185</u></td> <td>☒</td> </tr> <tr> <td><u>Clck</u></td> <td><u>105</u></td> <td><u>185</u></td> <td></td> </tr> </tbody> </table>	DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING	FROM	TO	<u>Top Soil</u>	<u>0</u>	<u>2</u>		<u>Sandy</u>	<u>2</u>	<u>25</u>		<u>Sand Stone</u>	<u>25</u>	<u>90</u>		<u>Clck</u>	<u>90</u>	<u>100</u>		<u>Sand Stone</u>	<u>100</u>	<u>185</u>	☒	<u>Clck</u>	<u>105</u>	<u>185</u>		GROUTING RECORD WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) ☒ Y ☐ N TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT ☒ CM ☐ B BENTONITE CLAY ☐ BC NO. OF BAGS <u>33</u> NO. OF POUNDS <u>3300</u> GALLONS OF WATER <u>178</u> DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM <u>0</u> FT. TO <u>30</u> FT. (ENTER 0 IF FROM SURFACE) CASING RECORD INSERT APPROPRIATE CODE BELOW STEEL ☒ ST ☐ CO CONCRETE PLASTIC ☐ PL ☐ OT OTHER MAIN CASING TYPE ☒ S ☐ T NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) <u>6</u> TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) <u>85</u> OTHER CASING (IF USED) DIAMETER (INCH) <u> </u> DEPTH (FEET) FROM <u> </u> TO <u> </u> SCREEN RECORD INSERT APPROPRIATE CODE BELOW STEEL ☐ ST ☐ BR BRASS OR BRONZE ☒ HO OPEN HOLE PLASTIC ☐ PL ☐ OT OTHER	
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PUMPING TEST HOURS PUMPED (TO NEAREST HOUR) <u>8</u> PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) <u>11</u> METHOD USED TO MEASURE PUMPING RATE <u>11</u> WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING <u>40</u> (NEAREST FOOT) WHEN PUMPING <u>175</u> (NEAREST FOOT) TYPE OF PUMP USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST) AIR ☐ A ☐ P PISTON ☐ T TURBINE CENTRIFUGAL ☐ C ☐ R ROTARY ☐ O OTHER (DESCRIBE BELOW) JET ☐ J ☐ S SUBMERSIBLE																																
PUMP INSTALLED TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES ☒ Y NO ☐ N CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) <u>31</u> PUMP HORSE POWER <u>37</u> PUMP COLUMN LENGTH (NEAREST FOOT) <u>43</u> CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) ABOVE ☒ + ☐ - BELOW LAND SURFACE (NEAREST FOOT) <u>51</u> LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL).																																
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 <u>Ralph Wayne</u> (PLEASE PRINT) <u>Ralph Wayne</u> SIGNATURE <u>Ralph Wayne</u> DEPTH (NEAREST WHOLE FOOT) FROM <u>0</u> TO <u>125</u> EACH SCREEN <u>40</u> SLOT SIZE 1. <u> </u> 2. <u> </u> 3. <u> </u> DIAMETER OF SCREEN <u>56</u> (NEAREST INCH) FROM <u> </u> TO <u> </u> GRAVEL PACK <u> </u> IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX ☐ F ☒ F WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) TELESCOPE CASING ☐ T ☐ L LOG INDICATOR ☐ W Q OTHER DATA AVAILABLE																																