

7/1/86
7/21/86
partial WPT
OK'd
sticker
attached
7/21/86
septic OK'd
(BN)

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

~~992-2930~~
461-9933

05-383374

INDEXED

ELLICOTT CITY

DISTRICT 5th

DATE 6/26/86

P 37281

A 24032

WM. Esworthy & Son

IS PERMITTED TO INSTALL X ALTER

ADDRESS 17 Ritters Lane, Owings Mills, MD 21117 PHONE 356-7090

SUBDIVISION Highland Lakes ROAD 6599 Prestwick Drive LOT 54, Section II

PROPERTY OWNER Shelley Construction, Inc.

529 Gifford Lane

ADDRESS Moakton, Maryland 21111

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 150 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION - Start the trench at a point 250 feet from the front lot line and 110 feet from the left lot line as seen when facing the lot from Prestwick Drive. Run the trench toward the back lot line along level ground (the 501.5 contour).

NOTE - No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

BLDG. PERMIT SIGNED

AND RETURNED 5/22/87

Serial 11904 - Wick

PLANS APPROVED BY R. Hodges DATE 12/16/83

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 AND AFTER PLACING GRAVEL IN TRENCH.

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 40 PVC OR ABS.

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, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED

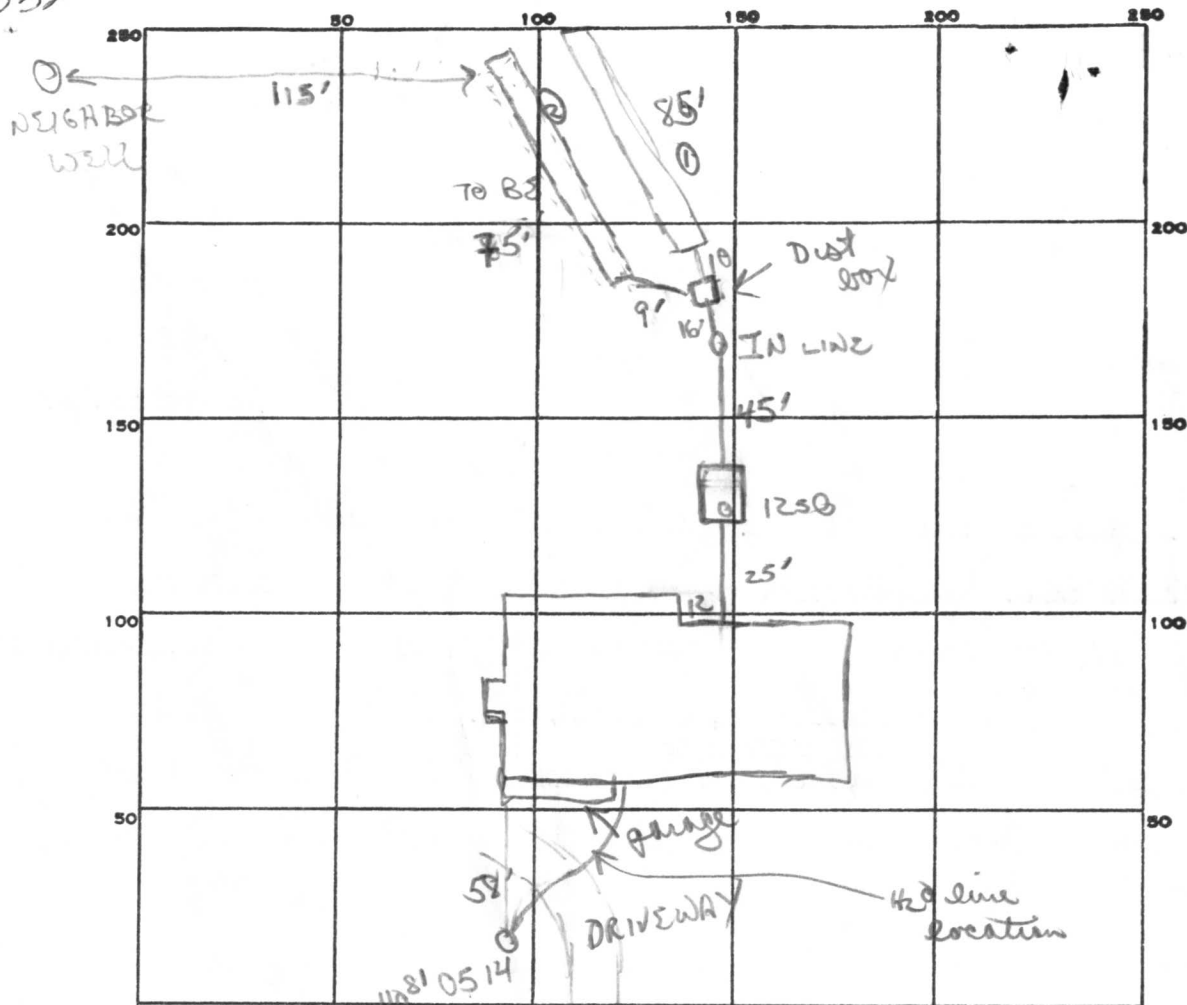
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

*CALL ~~992-2930~~ FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 24032

A24032



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PRESTWICK DR

PERMIT CARD ✓ finalSEPTIC TANK, LEVEL 1250CLEANOUTS 1 ST; 1 2nd lineDISTRIBUTION BOX, LEVEL 1250TILE FIELD, DEPTH 1' + 1' 9' FT. TRENCH WIDTH 2 FT.GRAVEL DEPTH 4' + 4' IN. TOTAL LENGTH 85' + 75' FT.NUMBER OF TRENCHES 1 + 1 SIDE WALL TOTAL BOTTOM AREA 340 + 300SEEPAGE PITS, INSIDE DIAMETER — FT. DEPTH BELOW INLET — FT.ABSORBENT AREA 640 SQ. FT.

REMARKS 7/18/86 OK to go 5' to 9' (instead 4-9' because of contours)
Lengthen trenches to compensate OK to add stone pipe paper
to trench #1 + partial backfill #1 OK to start trench #2
+ add stone pipe paper
7/21/86 OK to cover trenches 1 + 2 + all remaining work

DATE SYSTEM APPROVED

7/21/86

INSPECTOR

B. W. Yon

160
4

640

80
4
—
32075
4
—
300

APPLICATION

A 240.32

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT Fifth

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DATE 9/15/76

FINAL 54

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER Mr. Walter Bucher

ADDRESS Highland Partnership

PHONE (8)-588-3100

6777 First Avenue

PROPERTY LOCATION: Silver Spring, MD 20901

SUBDIVISION Highland Lake LOT NO. 102

ROAD AND DESCRIPTION Castlebay Lane

SIZE OF LOT one acre m/l TYPE BLDG. 5 or 4 bedroom
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT /s/ Mr. Walter Bucher

APPROVED BY Raymond Hodge FOR TRENCH OR DRYWELL DATE 12/16/83
(KIND OF SYSTEM)

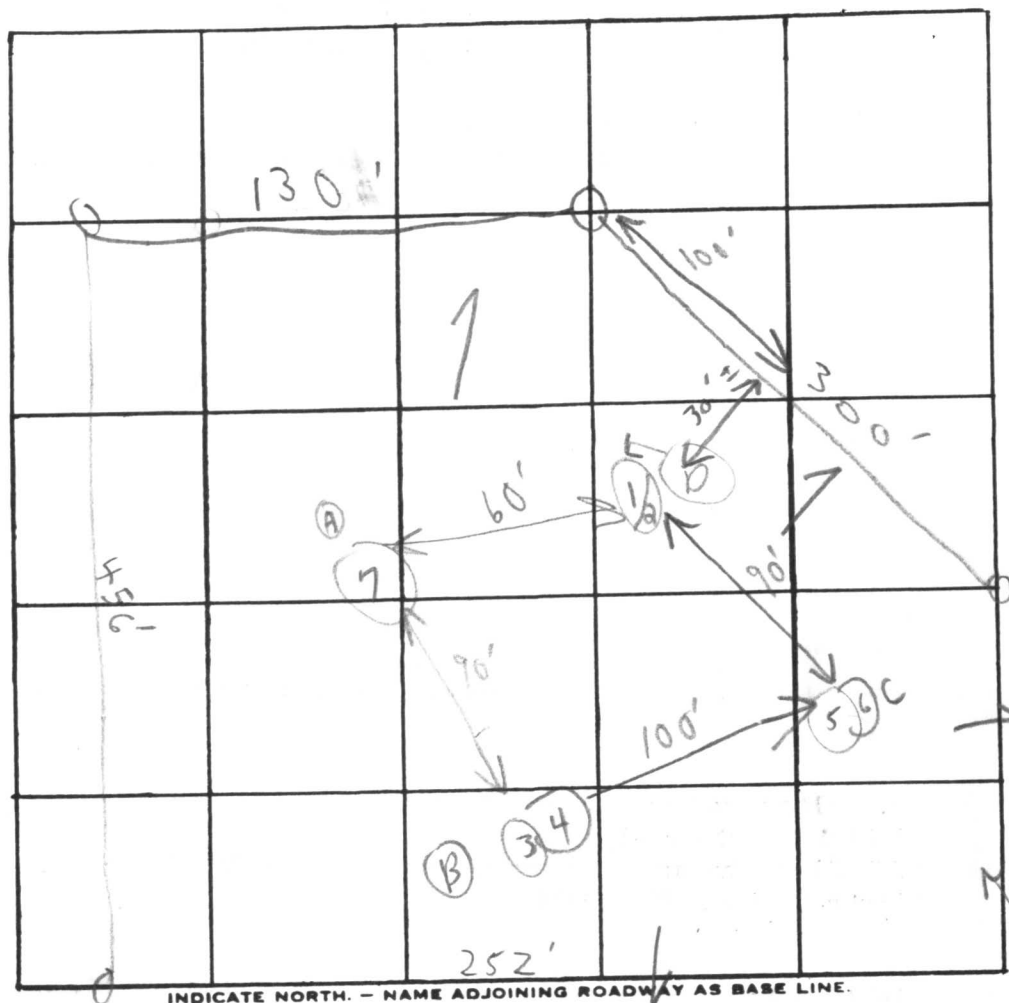
REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 12/16/83 Spec Vulture BH

THIS IS NOT A PERMIT

A24032



Lot # 102
Use as
57

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|--------|----------|----------|---------|------|-----------------------------|------|------------|
| | | | START | STOP | START | STOP | |
| 6/9/76 | 1 | 3' s | 1:23 | 1:25 | 1:25 | 1:28 | 3m |
| | (D) 2 | 12 1/2' | 1:23 | 1:26 | 1:26 | 1:31 | 5m |
| | 3 | 4' s | 1:18 | 1:21 | 1:21 | 1:26 | 5m |
| | (B) 4 | 13' d | 1:18 | 1:21 | 1:21 | 1:26 | 5m |
| | 5 | 3 1/2' s | 1:20 | 1:22 | 1:22 | 1:25 | 3m |
| | (C) 6 | 13' d | 1:20 | 1:22 | 1:22 | 1:27 | 5m |
| | (A) 7 | | Visual | | 1-3' clay 12' below clay | | sandy loam |
| | | | | | | 6 26 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Soil Profile
1-3' clay
9 1/2' loam
1-4' clay
9' loam
1-3 1/2' clay
loam

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT:

Open field all holes in area level
Sandy loam below clay on all holes
CBL
Alan Ketterman
& son; son in law

Hold for field located

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 5th
DATE 6/27/74

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER J. T. Barnes of Washington, D.C. Inc. & D. Grunberg
ADDRESS 152 New Mark Esplanade Rockville, Md. PHONE 390-8979

PROPERTY LOCATION:

SUBDIVISION Highland Lake LOT NO. 147-Phase 9
ROAD AND DESCRIPTION Prestwick Drive

SIZE OF LOT 40000 sq ft TYPE BLDG. 3,4
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT [Signature]

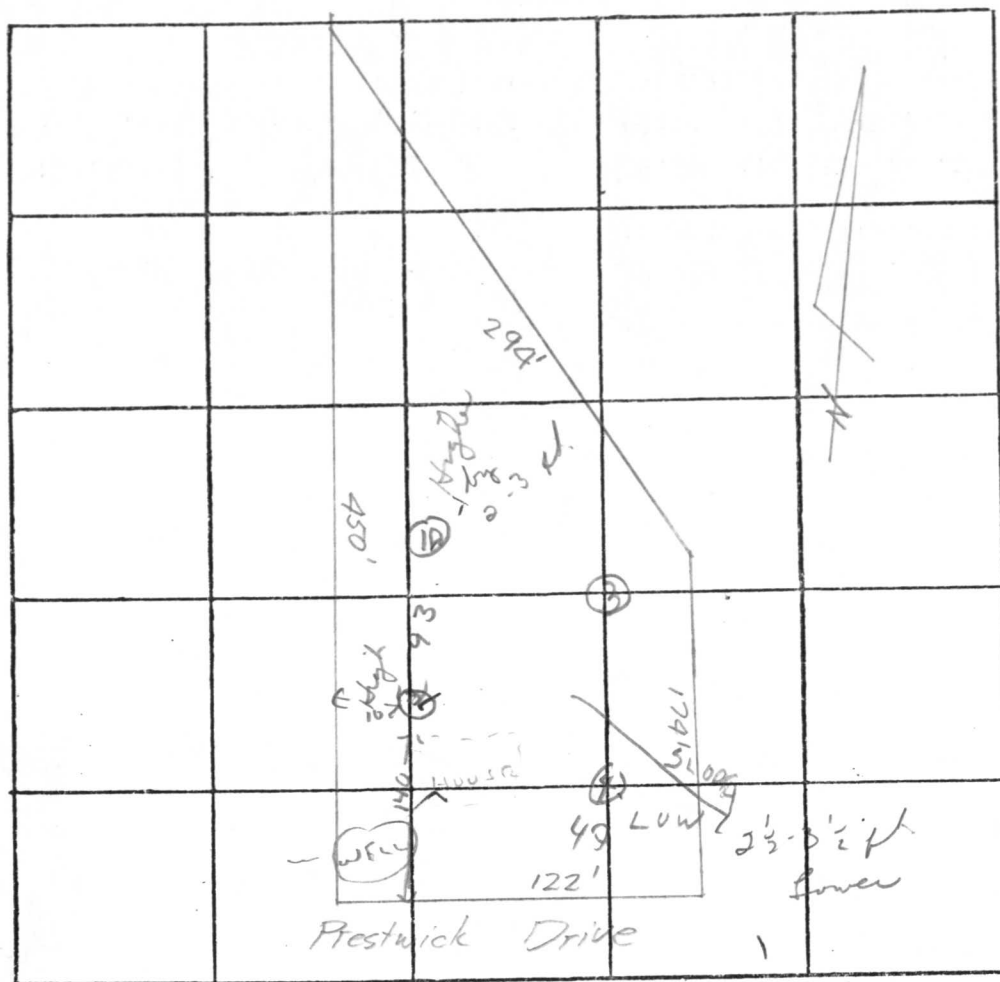
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|---|---------|-------|----------------|-------|---------|
| | | | START | STOP | START | STOP | |
| 7/10/74 | 1 | 11 1/2 ft | 10 48 | — | 10 51 | — | 3 min |
| | 1A | 4 ft | 10 52 | 10 53 | 10 54 | — | 1 min |
| | 2 | 12 ft | 10 54 | — | — | — | — |
| | 3 | 11 1/2 ft | 10 54 | — | — | — | — |
| | 4 | 11 ft | 11 07 | 11 16 | 11 16 | 11 38 | 22 min? |
| | 4A | 3 1/2 ft | 11 05 | — | 11 11 | — | 6 min |
| | 1210 | Still a little water open to him still here | | | | | |
| | | Good soil in all holes | | | | | |
| | | Wet at 11 ft in Low Hole | | | | | |

REMARKS

Use No 2.

inlet no deeper than 3 1/2 ft.

TYPE OF SOIL

TESTED BY

R.T.

ALSO PRESENT:

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356

DISTRICT 5th
DATE 6/27/74

Need fast test - or locate holes.

Porto 57

*FILED
A24032*

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

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

PROPERTY OWNER J. T. Barnes of Washington, D.C. Inc. & D. Grunberg
ADDRESS 152 New Mark Esplanade Rockville Md. PHONE 340-8979

PROPERTY LOCATION:

SUBDIVISION Highland Lake LOT NO. ~~148~~ Phase 4
ROAD AND DESCRIPTION Prestwick Drive

SIZE OF LOT 40000 sq ft TYPE BLDG. 3, 9
NUMBER OF BEDROOMS
IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT *[Signature]*

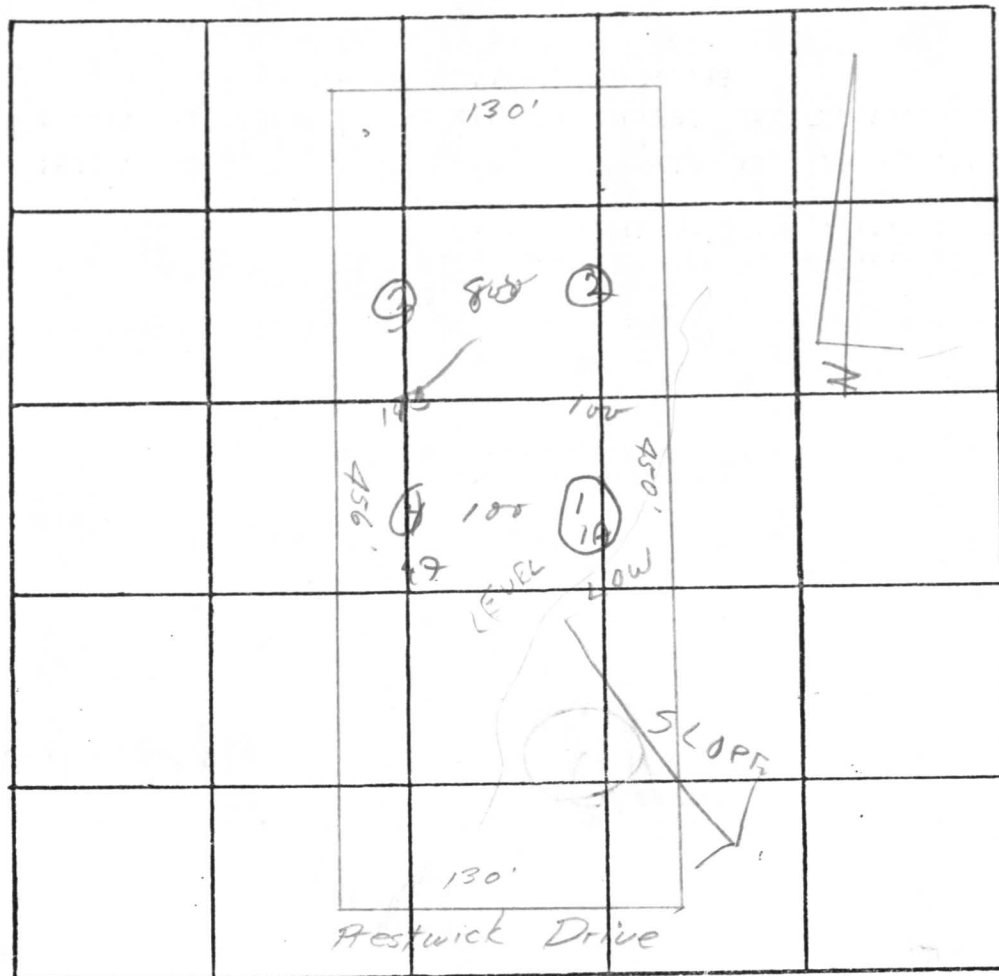
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

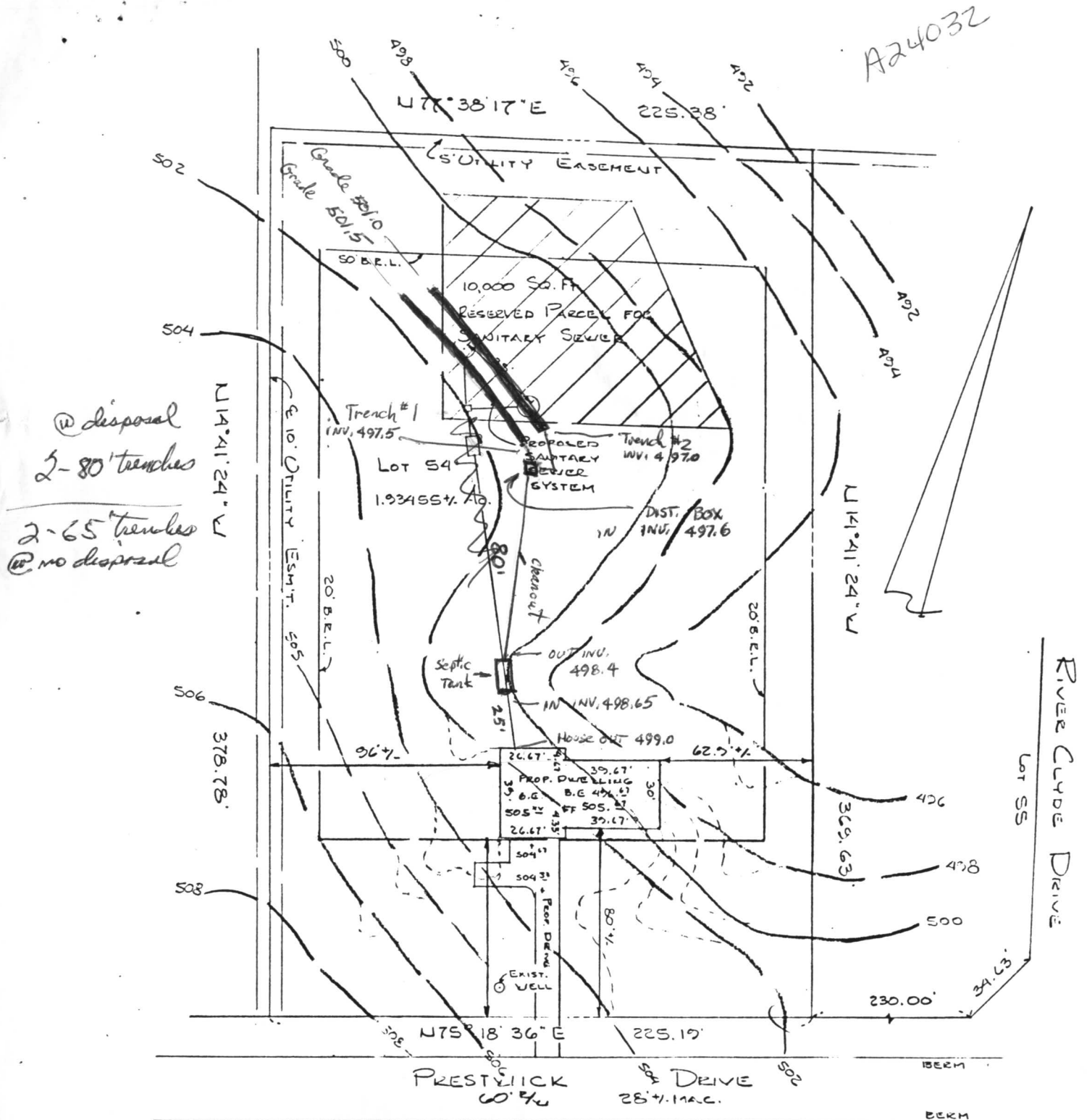
| DATE | TEST NO. | DEPTH | PRE-WET | | TEST - 1" DROP | | TIME |
|---------|----------|-----------|------------------|------|------------------|------|-------|
| | | | START | STOP | START | STOP | |
| 7/10/74 | 1 | 4 ft | 12 ⁴³ | — | 12 ⁴⁷ | — | 4 min |
| | 1A | 12 ft | 12 ⁴³ | — | 12 ⁵⁰ | — | 7 min |
| | 2 | 7 1/2 | Same Soil | | | | |
| | 3 | 12 ft | Good Sandy soil | | | | |
| | 4 | 11 1/2 ft | 12 ⁵⁴ | — | 12 ⁵⁹ | — | 5 min |
| | 4A | 4 ft | 12 ⁵³ | — | 12 ⁵⁹ | — | 6 min |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

REMARKS _____

TYPE OF SOIL _____

TESTED R. Tom ALSO PRESENT: _____

Site Plan of # 6519 Prestwick Drive, Lot 54, SHEET 2 of 3, SECTION II, HIGHLAND LAKE, which plat is recorded among the land records of Howard County as plat #3876.



inlet to be no greater than 3' below original grade

Fall will be between 1/8 min to 1/4 max pft. on section line

min 3/8"

B.P. 69705

4/24/86

K. FLEETER
6599 PRESTWICH
HIGHLAND MD

NO DEWITE CLEARANCE
OK TO SOFT TANK
5/2/87
PROCEED
Mullin



SCALE
 $\frac{1}{4}'' = 1'$

C1 3414 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBER A 24032

DATE Received
8 13

DATE WELL COMPLETED
06/14/84
15 20

Depth of Well
22 175 26
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
HP-81-0514
28 29 30 31 32 33 34 35 36 37

OWNER YorkKridge Service Corporation Inc.
STREET OR RFD last name Prestwick Drive first name TOWN Clarksville
SUBDIVISION Highland Lake SECTION 2 LOT 57

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

rolling ground + gravel 0 40'
schist 40' 64'
water
schist 64' 149'
water
schist 149' 175'

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box) yes Y no N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 11 NO. OF POUNDS 1056

GALLONS OF WATER 77

DEPTH OF GROUT SEAL (to nearest foot)

from 0 48 TOP 52 ft. to 31 54 BOTTOM 58 ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below
ST CO STEEL CONCRETE
PL OT PLASTIC OTHER

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

S.T. 60 61 6 63 64 41 66 70

OTHER CASING (if used)

EACH CASING diameter inch depth (feet) from to

SCREEN RECORD

screen type or open hole insert appropriate code below
ST BR HO STEEL BRASS OPEN HOLE
PL OT PLASTIC OTHER

C2

DEPTH (nearest ft.)
1 40 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51
EACH SCREEN

SLOT SIZE 1 2 3

DIAMETER OF SCREEN 56 60 (NEAREST INCH)

from to

GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3 8 9

PUMPING RATE (gal. per min. to nearest gal.) 10 11 15

METHOD USED TO MEASURE PUMPING RATE patch bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 23 17 20

WHEN PUMPING 41 22 25

TYPE OF PUMP USED (for 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

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

(CIRCLE) (YES or NO)
IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE

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

CAPACITY:
GALLONS PER MINUTE (to nearest gallon) 31 35

PUMP HORSE POWER 37 41

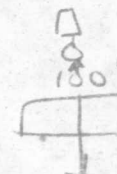
PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE (nearest foot)
- below } 1 50 51

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)



x well
Prestwick

CIRCLE APPROPRIATE LETTER
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 THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 064

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)
Wm W. Reichart

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)