

05-385075

8/5/83 App'd F.S.

8/4/83 8/5/83

PERMIT

P 33009

A 24051

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

INDEX

ELLICOTT CITY

DISTRICT 5th

DATE 8/2/83

William H. Smith

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS P. O. Box 38, Darlington, Maryland 21034

PHONE 879-7641

SUBDIVISION Highland Lake ROAD 6530 River Clyde Drive LOT 84, SEC. 3, Area 1

PROPERTY OWNER Yorkridge Service Corporation John T. & Carol D. McBeth

ADDRESS 3725 Old Court Road, Pikesville, Md. 21208

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

GARBAGE GRINDER? YES NO ☒

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

DRY WELL OR DRY WELL AND TRENCH - 125 sq. ft. per bedroom. Minimum total square feet for 4 bedroom home is 500 sq. ft. Inlet 3½ ft. below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 3½ ft. below original grade. Place the dry well 90 ft. far from the front lot line and 20 ft. from the left sideline as seen when facing the lot from River Clyde Drive. If trenches only system to be used place trenches parallel to each other 13 ft. apart and in the area of the described dry well site. NOTE: HOUSE MUST BE AT LEAST 20 FEET FROM ANY PART OF PRIVATE SEWAGE EASEMENT. Trenches require 158 sq. ft. per bedroom. Trench to be 2 ft. wide. Inlet 3½ ft. below original grade. Bottom maximum depth 10 feet below original grade. Effective area begins at 3½ ft. below original grade. 6½ ft. of stone below distribution pipe.

Mr Skinner Changed Location per plans slightly
See Septic Plans

PLANS APPROVED BY Frank A. Skinner BLDG. PERMIT SIGNED AND RETURNED 5/8/80 Serial #32514- DATE 5/12/83

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.

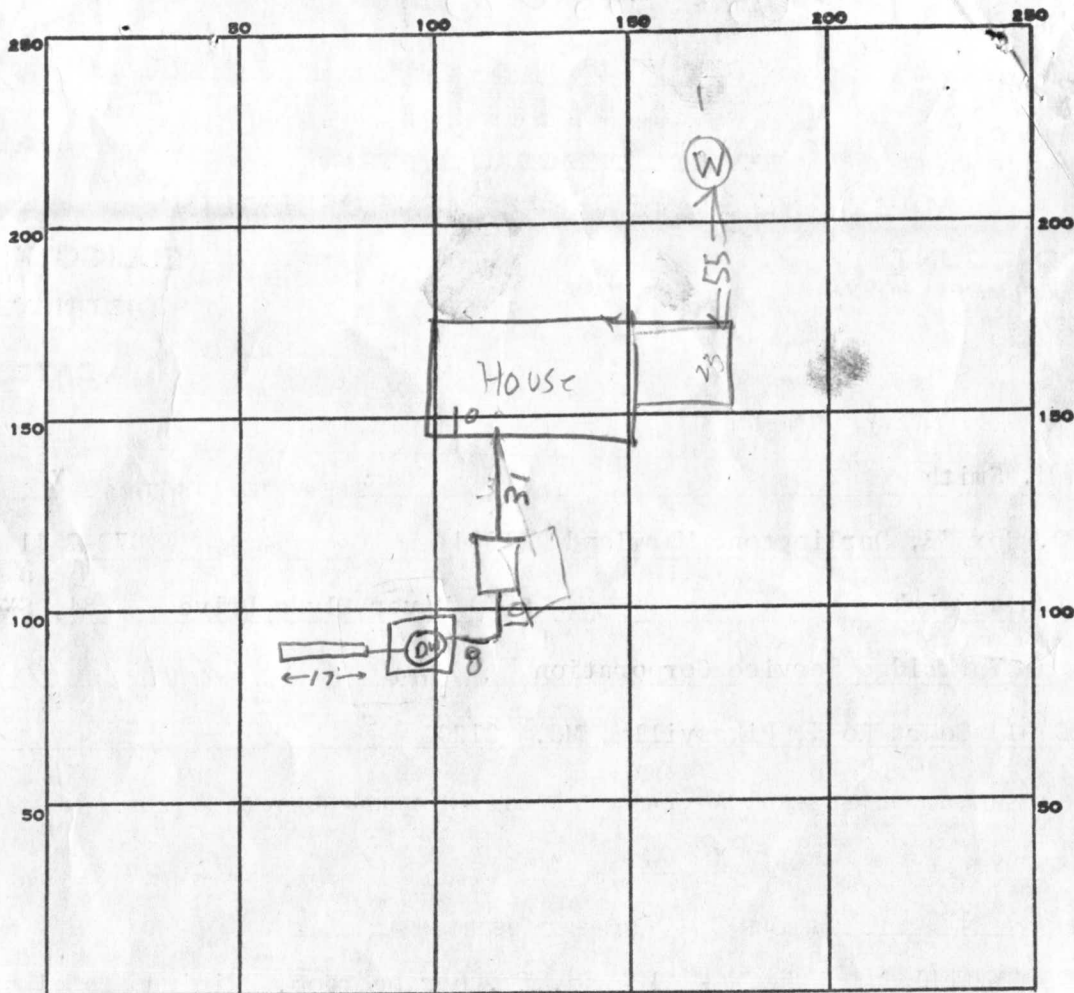
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 24051



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

River Clyde Dr.

PERMIT CARD _____

ST NO DW NO

SEPTIC TANK, LEVEL 1500 TOP 2 FT
below grade

CLEANOUTS OK OK

DISTRIBUTION BOX, LEVEL _____

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT.

GRAVEL DEPTH 6 1/2-7 IN. TOTAL LENGTH 17 FT.

NUMBER OF TRENCHES 1 ONE SIDEWALL
TOTAL BOTTOM AREA _____

SEEPAGE PITS, INSIDE DIAMETER 60 FT. DEPTH BELOW INLET 6 1/2 FT.

ABSORBENT AREA ±500 SQ. FT.

REMARKS 8/4/83 - LOCATION PER PLANS approved by FS.
OK TO COVER TANK & HOUSE SEWER RHT

8/4/83: HOLE DUG FOR DW & CLEANOUT PUT ON TANK

8/5/83 Install 1/2 transmittable new well & 5 inch; dig trench 17-18' long; all else OK to cover FS.

8/5/83

DATE SYSTEM APPROVED 8/5/83

INSPECTOR Frank Shinn

APPLICATION

A 24051

SEWAGE DISPOSAL TESTING

P _____

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 Fifth

DATE 9/15/76

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
8777 First Avenue PHONE (8)-588-3100
Silver Spring, MD 20901

PROPERTY LOCATION:

SUBDIVISION Highland Lake LOT NO. 110 Lot 84

ROAD AND DESCRIPTION Castlebay Lane

SIZE OF LOT one acre m/l TYPE BLDG. 3 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 _____ 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

B 1	1186	SEQUENCE NO. (OEP USE ONLY)	5/19/83 STATE OF MARYLAND 8:30 PERMIT TO DRILL WELL 6hr pumps	OEP PERMIT NUMBER 40-81-0092
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) Date Received 5/19/83 2:30 pm - grout OWNER INFORMATION York Ridge Service Corp. Inc. 3725 Old Court Rd Pikesville MD 21208				
DRILLER INFORMATION Wm. W. Reichart Driller's Name Wm. W. Reichart, Inc. Firm Name RD #2 Box 54 Hanover, PA 17331 Address Wm. W. Reichart Signature Date 4/14/83				
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500				
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL 250 FEET APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTary Drive-POINT other				
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)				
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER GAP FORCE 73 WRITE INITIALS IN BOX PERMIT No. 40-81-0092 SPECIAL CONDITIONS				

B 3	LOCATION OF WELL Howard Highland Lake SECTION 3 LOT 84 Clarksville MILES FROM TOWN (enter 0 if in town) 1.25 MI
B 4	DIRECTION OF WELL FROM TOWN (CIRCLE BOX) ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) River Clyde Drive NEAR WHAT ROAD ON WHICH SIDE OF ROAD DISTANCE FROM ROAD 200 FT ENTER FT or MI

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL HOWARD COUNTY NAME OEP SIGNATURE DATE ISSUED 05/11/83 NORTH GRID 494000 EAST GRID 081000 COUNTY NO. A24051 STATE HEALTH INSERT S EXP. DATE 11/11/83	
SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. Approved well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 810 0 N 490 4	DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

C1 7743 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER A24051Date Received
(OEP use only)

DATE WELL COMPLETED

5/19/83

Depth of Well

300'
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

44-81-0092

OWNER York Ridge Service Corp. Inc.

last name

first name

STREET OR RFD River Clyde Drive

TOWN Clarksville

SUBDIVISION Highland Lake

SECTION 3

LOT 84

WELL LOG
Not required for driven wellsSTATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)

FEET

Check
if water
bearing

FROM TO

rolling & caving
ground

0 47'

schist
water

47' 73'

schist

73' 141'

water

141' 300'

schist

141' 300'

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

yes
Y no
N

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 20 NO. OF POUNDS 140

GALLONS OF WATER 140

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 30 ft.

(enter 0 if from surface)

48 TOP 52 ft. 54 BOTTOM 58 ft.

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)

ST 6 55

60 61 62 64 66 70

OTHER CASING (if used)

EACH CASING diameter inch depth (feet) from to

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

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[illegible]

Page 1 of 1
Date 5/19/83

Review 5/26/83 OK F.S.

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0092
Location of property (road) River Clyde Drive
Subdivision Highland Lake Lot 84 Block Plat Sec. 3
Well Driller William Reichart Owner Yorkridge Service Corporation

Depth of well 300'
Distance of measuring point (M.P.) above ground surface
Static water level (S.W.L.) below M.P. 37'

I. High rate pumping -- reservoir drawdown

Time pump started 8:30 AM Pumping rate 10 gpm
Total time 1 3/4 hrs to reach pumping water level 270 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
8:30	37'	30 sec		10
8:45	105'	" "		10
9:00	167'	" "		10
9:15	215'	37.5 sec		8
9:30	240'	42.5 sec		7
9:45	262'	50 sec		6
10:00	270'	100 sec		3
10:15	"	"		"
10:30	"	"		"
10:45	"	"		"
11:00	"	"		"
11:15	"	"		"
11:30	"	"		"
11:45	"	"		"
12:00	"	"		"
12:15	"	"		"
12:30	"	"		"
12:45	"	"		"
1:00	"	"		"
1:15	"	"		"
1:30	"	"		"
1:45	"	"		"
2:00	"	"		"
2:15	"	"		"

over

RECEIVED
HOWARD COUNTY
HEALTH DEPT
ELLCOTT CITY, MD.

MAY 25 9 58 AM '83

time	water level	time to fill 5 gal bucket	gpm
2:30			
2:45	270'	100 sec	3
3:00	"	"	"
3:15	"	"	"
3:30	"	"	"
3:45	"	"	"
4:00	270'	100 sec	3

RECEIVED
HOWARD COUNTY
HEALTH DEPT
MAY 25 3 20 PM '83
DIVISION OF
ENVIRONMENTAL
HEALTH



DEVELOPMENT
CONSULTANTS
GROUP

TELEPHONE
301-596-9080
301-988-9830

12408 ROUTE 108
CLARKSVILLE MD 21029

SITE PLAN

HIGHLAND LAKE

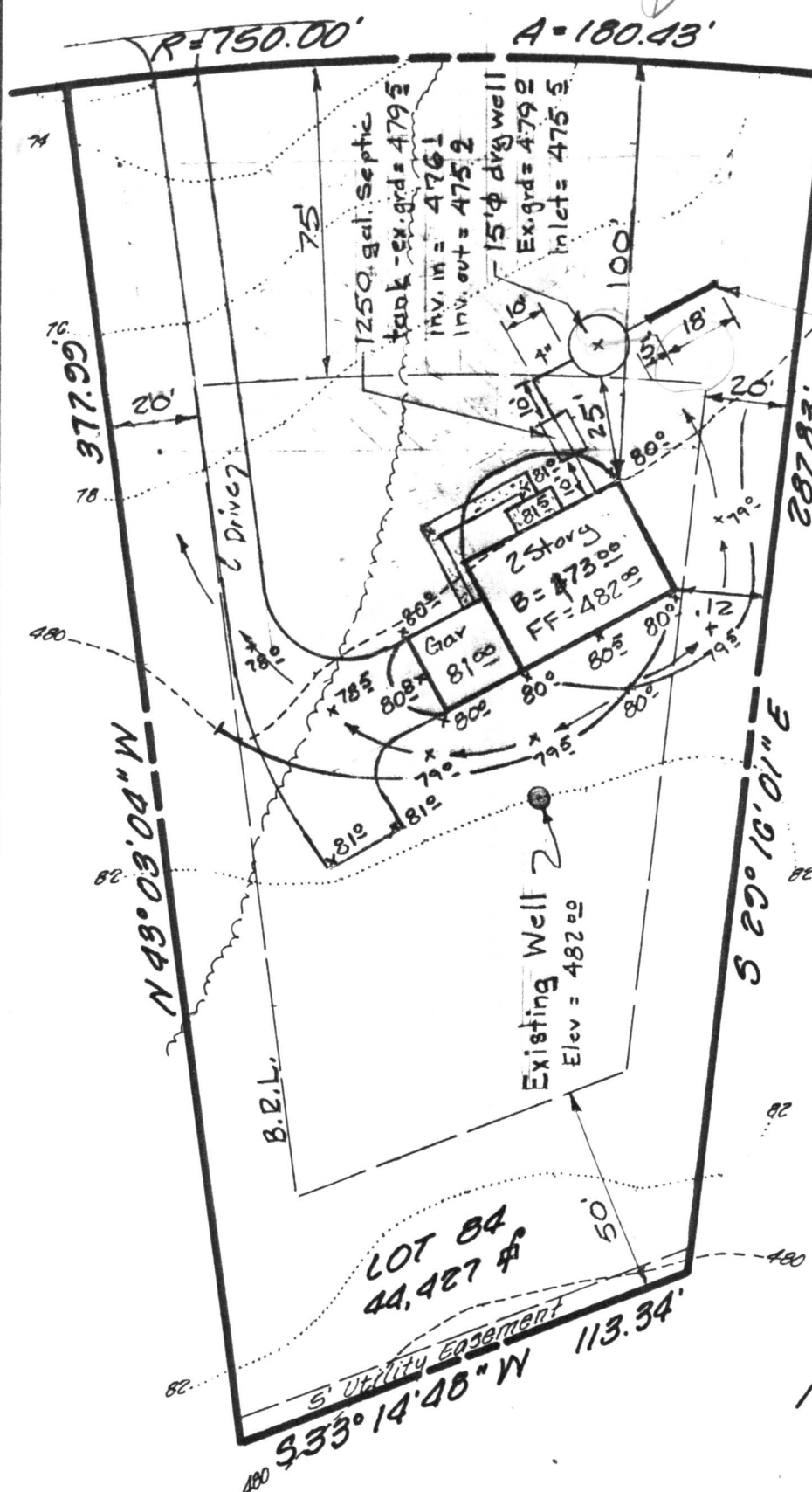
Section 3 Area 1

Lot 84

Howard County, Md.

Plot 3894

Job No.
Case No.
Scale 1"=40'
DATES
Wall Ck 5-31-83
Final Loc



ELEVATIONS

Inv. @ house = 476.3
Septic tank in = 476.1
Septic tank out = 475.9
dry well in = 475.5
dry well out = 475.5
trench begin = 475.5
trench end = 475.5

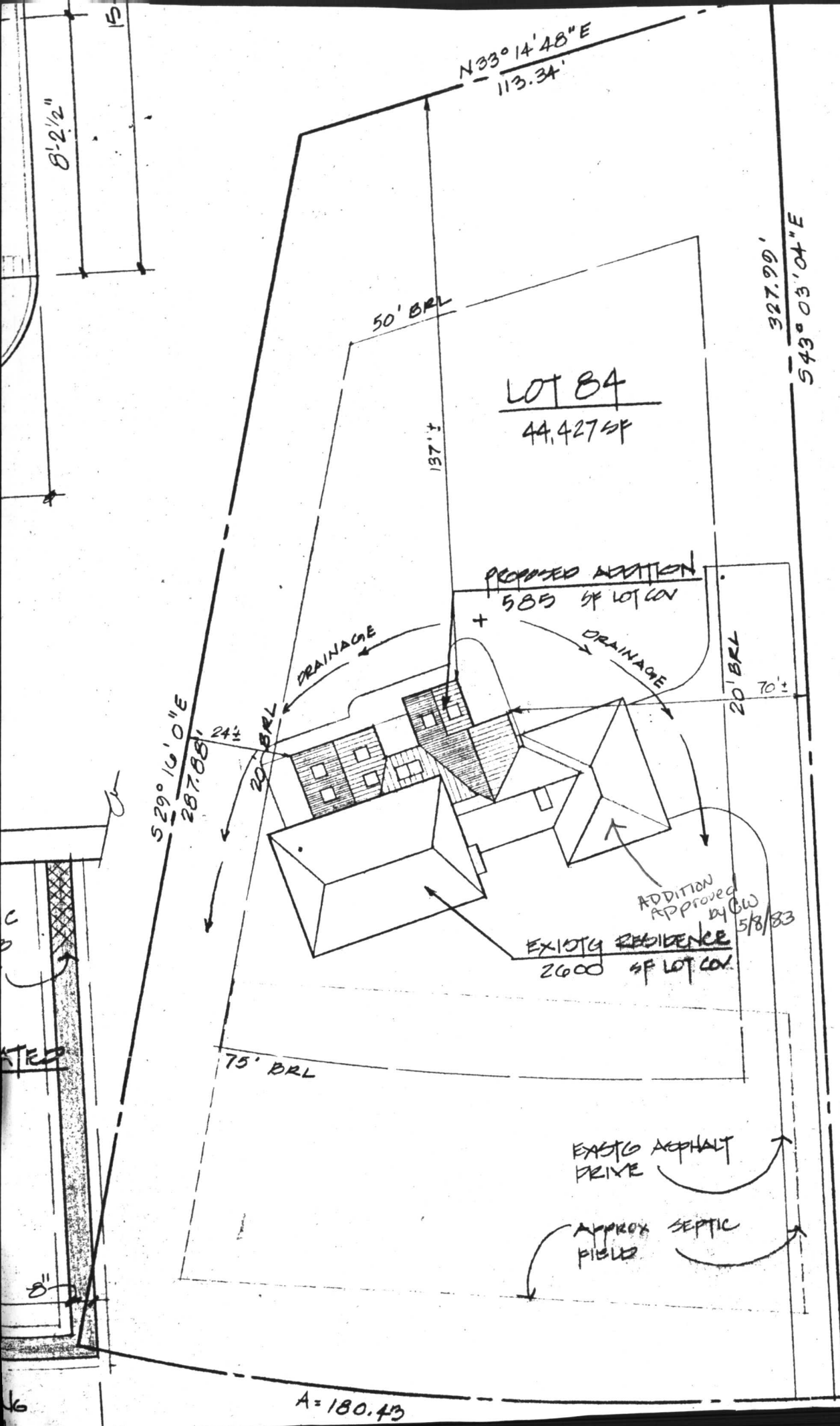
Trench

Ex. grd = 479.5
top stone = 475.5
bottom stone = 469.2
18' long 2' wide

RIVER CLYDE DRIVE
(50' R/W)

6/1/83

Sheet 01 of 1



SIXEX DESIGN
 9014 BLUE PEARL COLUMBIA, MARYLAND
 ARCHITECT
 JOHN McDETH
 HYDE DRIVE
 HIGHLAND, MARYLAND 20777
 LITERATURE FOR

RECEIVED
HOWARD COUNTY
HEALTH DEPT

MAY 3 9 15 AM '90

DIVISION OF
ENVIRONMENTAL
HEALTH

