

2/25/85 - 2 Inpts.
1:00 p.m. - 3:30-4:00 p.m.
+ latrine

05-383617

2-25-85
approved
Sabel

PERMIT

P 34949
A 24068

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

ELLICOTT CITY
DISTRICT 5th
DATE 2/8/85

INDEXED

Paul Schissler IS PERMITTED TO INSTALL X ALTER _____
ADDRESS 4410 Salem Bottom Road, Westminster, MD 21157 PHONE 875-4197
SUBDIVISION Highland Lakes ROAD 6567 River Clyde Dr. LOT 76
PROPERTY OWNER United General Contractors
ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO X

SEPTIC TANK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 158 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 3 feet below original grade. 6 feet of stone below distribution pipe. LOCATION: Start the trench 120 feet from the rear lot line and 75 feet from the right side line as seen when facing the lot from River Clyde Drive. Continue to dig the trench on level ground the necessary distance running towards the right side of the lot. 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 gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY Frank Skinner DATE 1/10/85

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.

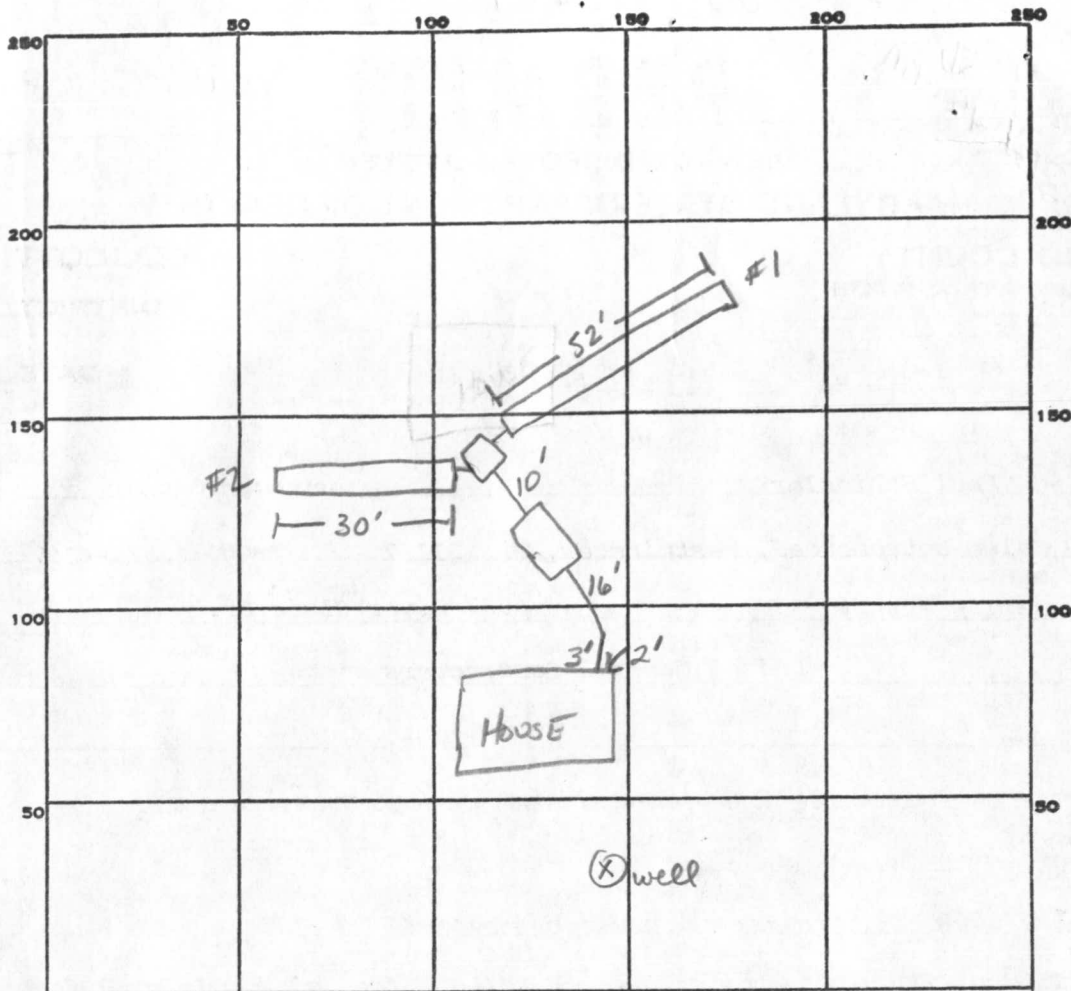
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

***CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.**

EH - 2-1082

24068
1-24068
1-24068



2
158
3
474

PERMIT CARD _____

SEPTIC TANK, LEVEL ✓ 1000 GAL

CLEANOUTS ✓ ST

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 9 FT. TRENCH WIDTH 2 FT.

INLET = 3'

GRAVEL DEPTH 10 FT INK TOTAL LENGTH 52+30 82 FT

NUMBER OF TRENCHES #1 = 52' #2 = 30' TOTAL BOTTOM AREA 492

82
6
492

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 492 SQ. FT.

REMARKS 2-25-85 OK TO ADD STONE, NEED CLEANOUT ON ST SAIL
2-25-85 OK TO COVER ALL WORK

DATE SYSTEM APPROVED 2-25-85

INSPECTOR S. AUEL

APPLICATION

A 24068

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

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. 132

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

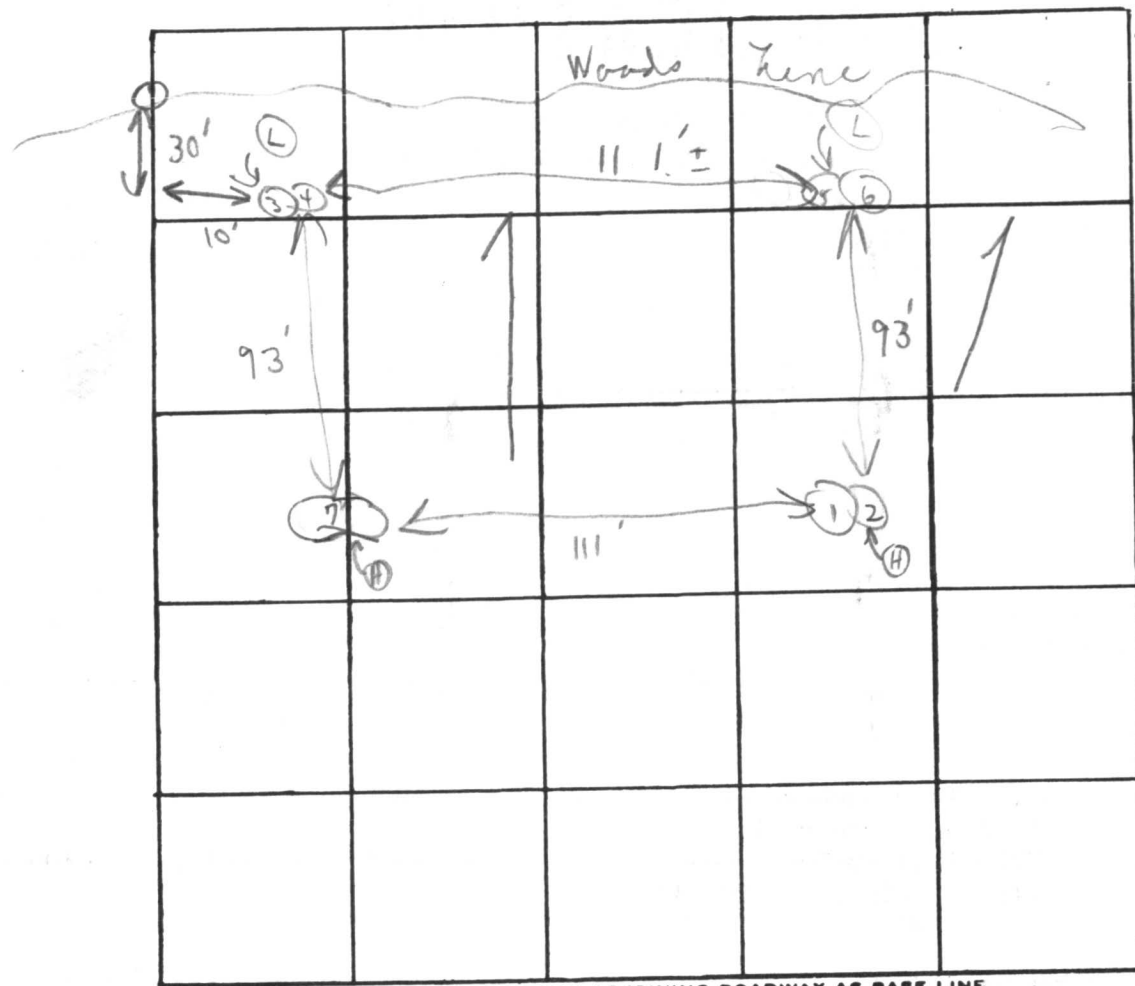
APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Castelbay Lane

80

Lot # 132

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/15/20	1	3 1/2'	3:21	3:23	3:23	3:29	4 min
	2	13'	3:21	3:23	3:23	3:26	3 min
	3	3'	3:13	3:15	3:15	3:19	4 min
	4	12 1/2' 13'	3:13	3:15	3:15	3:19	4 min
	5	5 1/2'	3:05	3:10	3:10	3:29	19 min
	6	13'	3:05	3:07	3:07	3:10	3 min
	7	1-4' Clayish 8' Loam	Visual			6	37

unleashed
3 1/2'

and

7 min

REMARKS

Open field

TYPE OF SOIL

Sandy loam below clay

TESTED BY

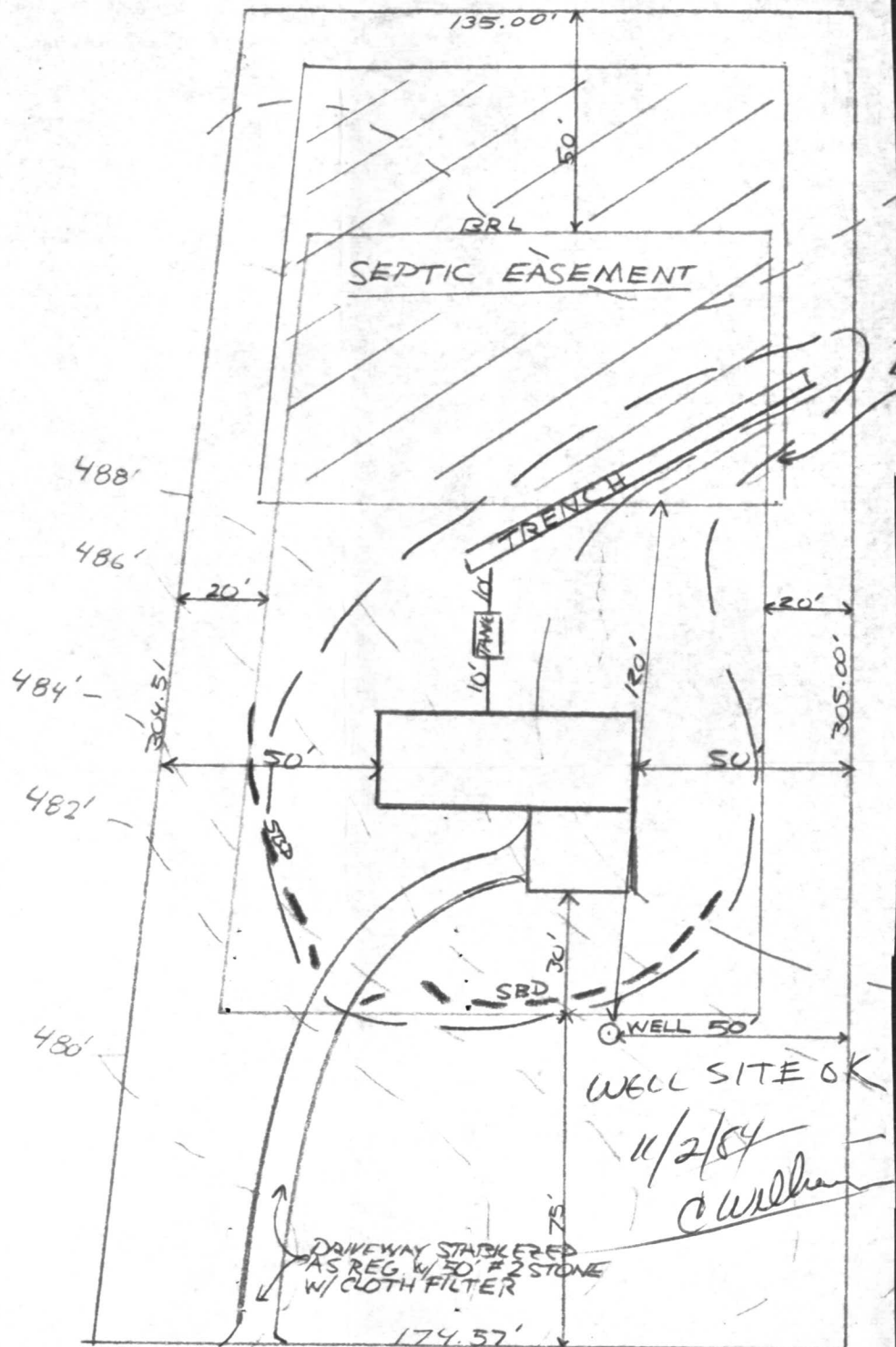
C. B. S.

ALSO PRESENT:

Ketterman
son's grandson

LOT 76 HIGHLAND L

(.9452 Ac)



RIVER CLYDE DRIVE

ELEVATIONS FOR SEPTIC

WELL 486.00'

HOUSE

FF 492.00'

BASE 484.00'

INV OUT 487.85'

TANK

EX GR 488.00'

FIN GR 489.00'

INV IN 487.65'

INV OUT 487.25'

TRENCH

EX GR 490.00'

FIN GR 490.00'

INV IN 487.00'

11/26/84

Elevation of
Cutter

C1 3001 SEQUENCE NO. (OEP USE ONLY)

1 2 3 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)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

A344727

DATE RECEIVED
8 13DATE WELL COMPLETED
15 20 122184Depth of Well
22 26 250
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"
40-81-0781
28 29 30 31 32 33 34 35 36 37OWNER BEAR DEVELOPMENT CO.
STREET OR RFD last name RIVER CLYDE DR first name TOWN HIGHLAND
SUBDIVISION HIGHLAND LAKES SECTION LOT 76

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 36'

schist
water

36' 44'

schist
water

44' 86'

schist
water

86' 127'

schist

127' 250'

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC
45 46 45 46

NO. OF BAGS 9 NO. OF POUNDS 864

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from 0 48 TOP 52 ft. to 29 54 BOTTOM 58 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

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 G 39 60 61 63 64 66 70

OTHER CASING (if used)
diameter depth (feet)
inch from toscreen type
or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
HOLE
PL OT
PLASTIC OTHER

C2

DEPTH (nearest ft.)
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

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP 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) 8

PUMPING RATE (gal. per min. to nearest gal.) 3

METHOD USED TO MEASURE PUMPING RATE watch bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 20

WHEN PUMPING 200

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:

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)
49 50 51
- below }

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)River Creek Dr.
well X 100' →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
WELLI 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

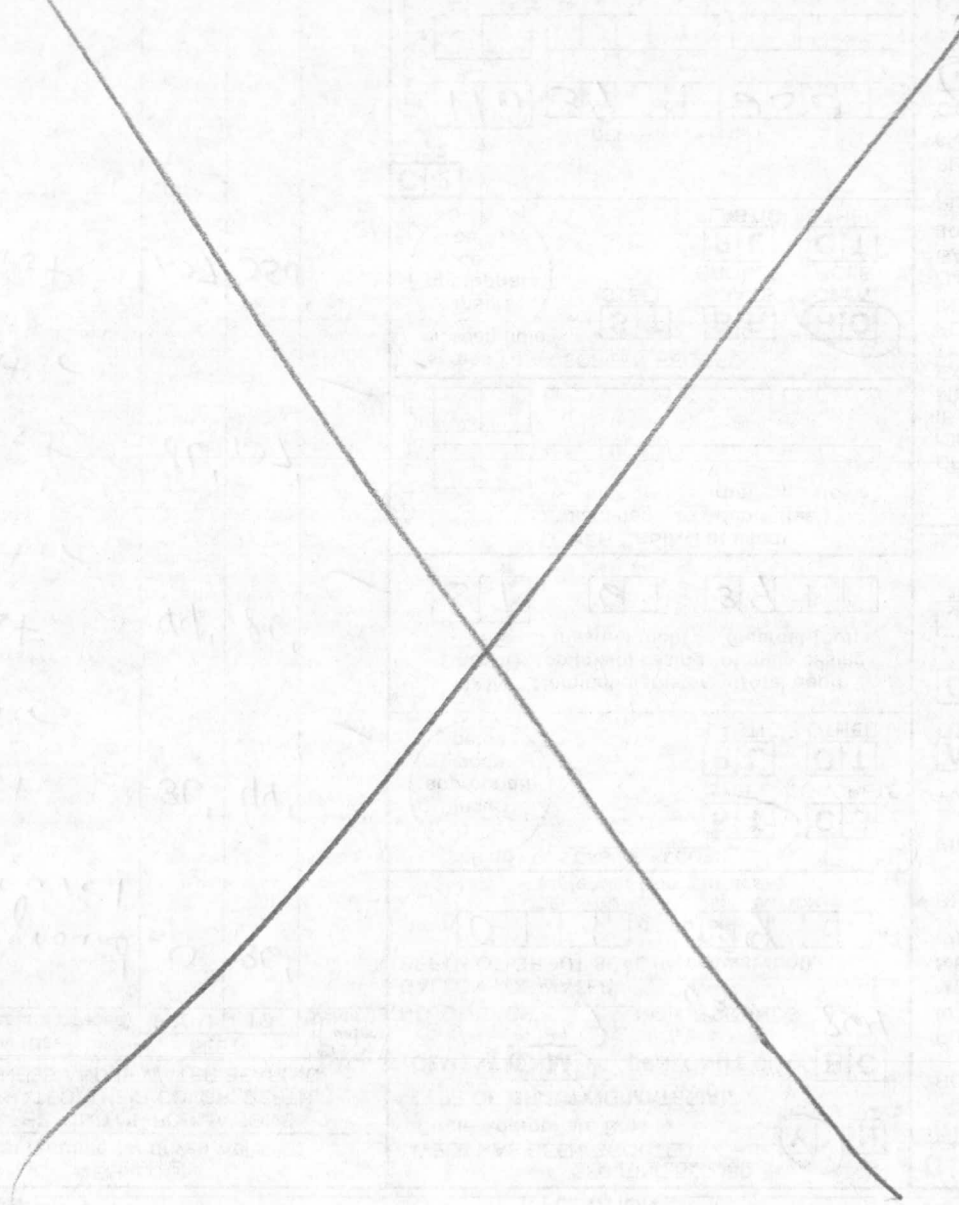
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

HEALTH

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

DEC 27 9 03 AM '81

DIVISION OF
ENVIRONMENTAL
HEALTH



Page 1 of 1
Date 12/21/84

Review 1/3/85 OK FS

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-0781
Location of property (road) RIVER CLYDE DRIVE
Subdivision HIGHLAND LAKES Lot 76 Block Plat Sec.
Well Driller WM. REICHA Owner BEAR DEVELOPMENT CO.

Depth of well 250'
Distance of measuring point (M.P.) above ground surface
Static water level (S.W.L.) below M.P. 20'

I. High rate pumping -- reservoir drawdown

Time pump started 8:00 AM Pumping rate 10 gpm
Total time 1 3/4 hrs to reach pumping water level 200 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)
8:00	20'	30 sec		10
8:15	35'	"		"
8:30	50'	"		"
8:45	80'	"		"
9:00	125'	"		"
9:15	165'	"		"
9:30	200'	"		"
9:45	200'	100 sec		3
10:00	"	"		"
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	"	"		"
↓	↓	↓		"
3:45	200'	100 sec		3

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD

DEC 26 9 52 AM '84

DIVISION OF
ENVIRONMENTAL
HEALTH

DEC 27 9 03 AM '84

RECEIVED
HOWARD COUNTY
HEALTH DEPT.