PERMIT

SEWAGE DISPOSAL SYSTEM

INDEXED

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24129

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT\_5th

DATE 3/11/77

Samuel Deshay	IS PERMITTED T	O INSTALL X ALTER
ADDRESS 8105 Chester Street, Takoma Par	k, Maryland PHO	NE
A SEWAGE DISPOSAL-SYSTEM LOCATED AT		
A SEWAGE DISTOSAL STOTEM EGGATED AT		
SUBDIVISION (Spring Valley Farms)	(340) Route 32	LOT_5
PROPERTY OWNER Samuel Deshay	Between Heritage He	gt. & Clarksville Ridge)
ADDRESS same as above		BUILDING PERMIT SIGNED
SPECIFICATIONS 5 bedrooms		AND RETURNED 518-04 BODI47769-LPTANK
DRAIN FIELD DEPTH FE	ET, BOTTOM AREA	440
SEEPAGE PITS ABSORBENT SIL	DE-WALL AREA	SQ. FT.

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

DRY WELL AND TRENCH - The dry well will be located 52 ft. from the 915 ft. property line and 232 ft. from the 948 ft. property line (measured at right angles to the 948 ft. line). The invert will enter the dry well at 4 ft. below original grade and the maximum drag depth of the dry well will not exceed 10 ft. below original grade. The trench will begin 5 ft. frommthe edge of the dry well and will follow the contour of the land. The trench will be dug 2 ft. wide, 10 ft. deep and contain 6 ft. of stone. There will be no less than 125 sq. ft. of sidewall area per bedroom. NOTE: CALL FOR INSPECTION OF TRENCH BEFORE PLACING GRAVEL IN TRENCH. NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON. 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 10/26/76

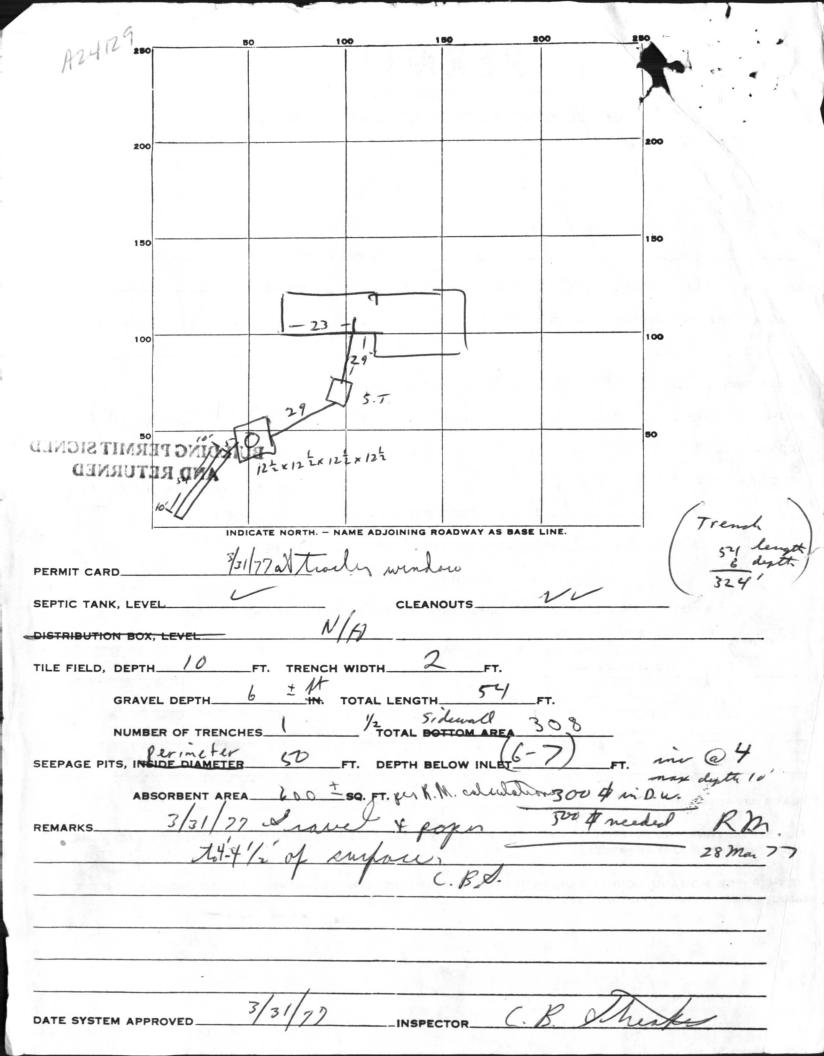
TERRA COTTA ACCEPTED.

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

AND RETURNED 4/13/FF Serial # 19172 - Pirl.

,24129



	Deshay
PRELIMINARY APPLICATION	A 24129
PRELIMINARI	
0/14/76 . SEWAGE DISPOSAL TESTING	P
5.3 STATE OF MARYLAND - DEPARTMENT OF HEALTH AND ME	NTAL HYGIENE
HOWARD COUNTY HEALTH DEPARTMENT 388-1000 gal	DISTRICT5th
HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043  5.T.: 388-1000 gal 488-1270 gal 588-1500 gal	DATE
TELEPHONE: 465-5000, EXT. 356 The D.W. will be located \$221	of from the 112 of brook
line and 232' from the 948' perop line (measured at right	It angles to the 945'le
The inv. will enter the D.w. @ 4'below O.G. and the	max depth of the D. W
will not exceed 10' below. O. G. The trench will begin the D.w. and will follow the contour of the land be dug 2' wide 10' december the trivial the	5 from the edged
be die and will follow the contour of the land	. The trench will
be dug 2' wide, 10' deep and contain 6'of stone.	There will be no
of sedewall area par BR.	
TO: THE COUNTY HEALTH OFFICER 2 inspections	
ELLICOTT CITY, MARYLAND	Rm. 10/20/76
I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT	
DISPOSAL SYSTEM.	
PROPERTY OWNER Claude D. Kruhm Samuel Alshay	
ADDRESS 8105 Chester St., Jakoma Park, Ma.	, IE
PROPERTY LOCATION:	
SUBDIVISION(Spring Valley Farms) LOT	NO. #5
POAD AND DESCRIPTION Route 32	
	The dream
5.0006 acres	3 or 4 bedrooms
SIZE OF LOT TYPE BLE	NUMBER OF BEDROOMS
IF NOT SINGLE RESIDENCE DESCRIBE	
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPT	ABLE ONLY HATH PHOLIC
FACILITIES BECOME AVAILABLE. BLD	G. PERMITI SIGNED
SIGNATURE OF APPLICANT /s/ John D. Rettaliata	RETURNED 12/29/76
The state of the s	1

## THIS IS NOT A PERMIT

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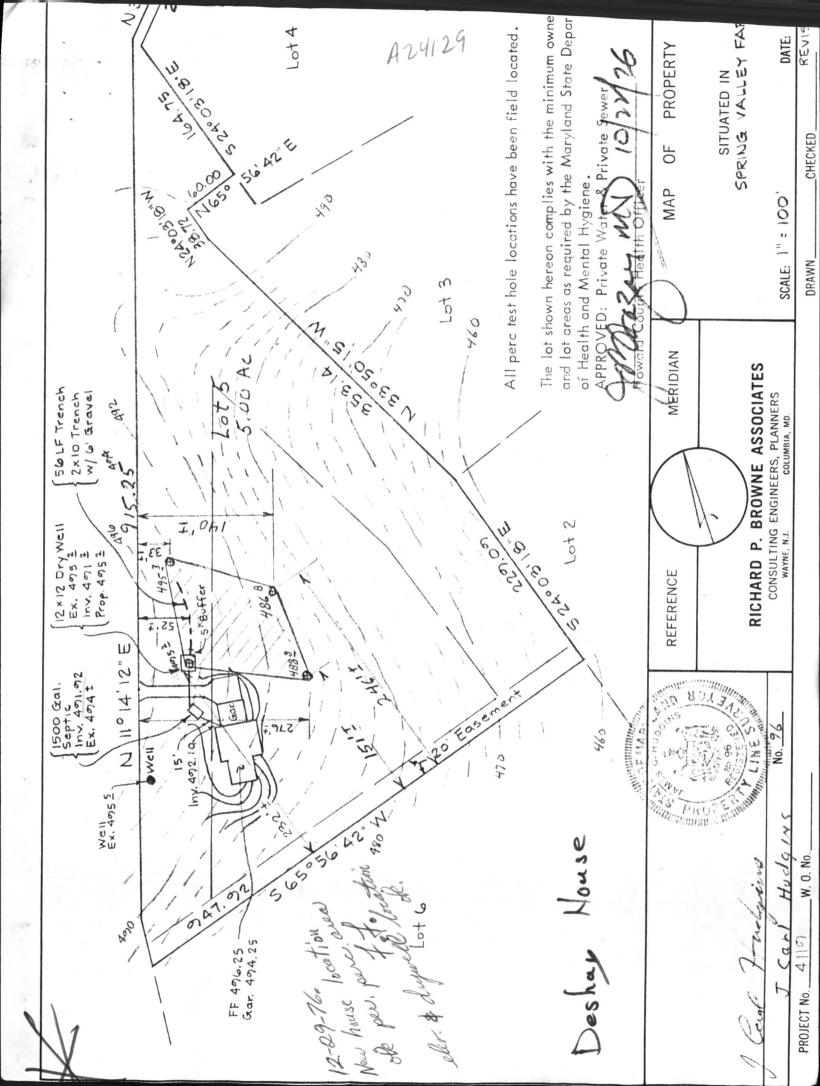
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-	 (2)		0.1	7
	145	-100		
	(M)		100	
-	6 -	100	40	
			*	
1				

INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

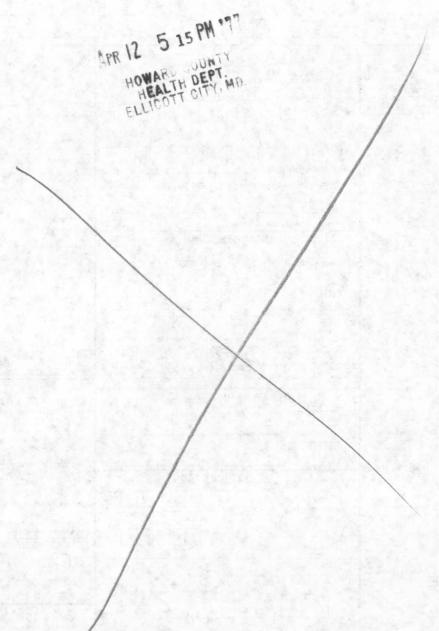
E # 320 TEST - 1" DROP STOP TIME TEST NO. DEPTH START STOP START DATE 10/14/26 4 1102 11.10 10 1055 1046 2 1046 13 VA 1034 10 34 1032 1038 42 3 1032 1036 10 36 10 43 34 6 Vis dry 12

REMARKS			
TYPE OF SOIL			<u> </u>
TESTED BY	K-M-	ALSO PRESENT:	alette

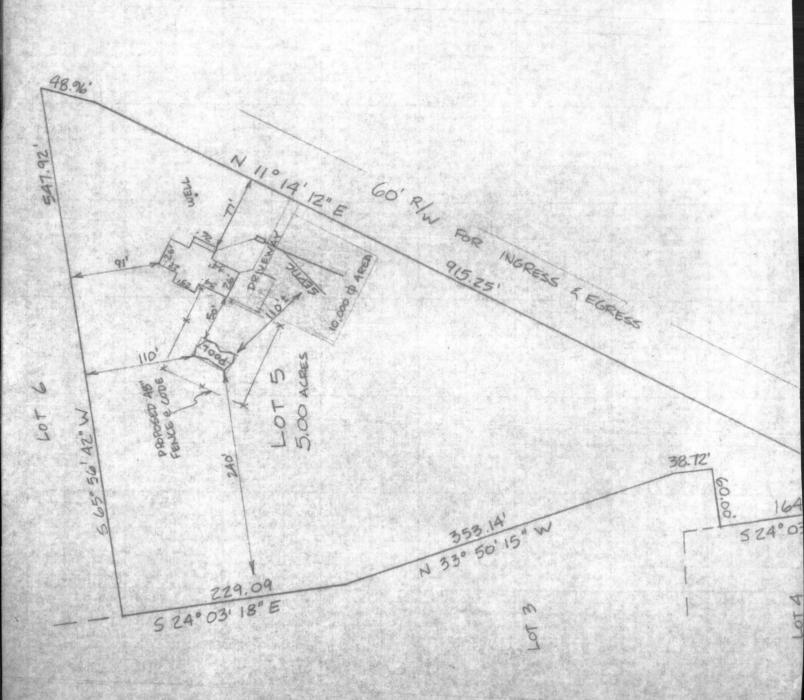


DNR 214 9/71 SEQUENCE NO STATE OF MARYLAND REPORT MUST BE SUBMITTED WITH 30 DAYS AFTER WELL COMPLETION WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401 (SEQ. NO.) FILL IN THIS FORM COMPLETELY (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) WELL COMPLETION REPORT COUNTY NUMBER DATE RECEIVED DEPTH OF WELL 70 HO-73 (TO NEAREST FOOT) 28 29 30 31 32 33 34 35 36 37 DRILLERS IDENTIFICATION NO. OWNER\_ FIRST NAME 21 STREET OR RED. POST OFFICE WELL DESCRIPTION GROUTING RECORD C 3 WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N (SEQ. NO.) PUMPING TEST 44 FFFT TYPE OF GROUTING MATERIAL (CIRCLE DESCRIPTION CHECK IF WATER BEARING BOX) (USE ADDITIONAL SHEETS FROM TO C М BC BENTONITE CLAY HOURS PUMPED (TO NEAREST HOUR) 45 UMPING RATE 8 NO. OF POUNDS (GALLONS PER MINUTE TO NEAREST GALLON) GALLONS OF WATER\_ METHOD USED TO MEASURE PUMPING RATE DEPTH OF GROUT SEAL (TO NEAREST FOOT) WATER LEVEL: (DISTANCE FROM LAND SURFACE) 58 FT. FROM TO (NEAREST FOOT) 48 52 (ENTER O IF FROM SURFACE) CASING CASING RECORD 55 WHEN PUMPING (NEAREST FOOT) 50 INSERT 22 25 ST CO TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX (FOR PUMPING TEST) APPROPRIATE 20 CODE AAIR BELOW P PISTON T PL OT 27 27 PLASTI OTHER OTHER (DESCRIBE C CENTRIFUGAL R 0 ROTARY MAIN BELOW) NOMINAL DIAMETER 27 TOTAL DEPTH 27 27 CASING TOP (MAIN) CASING OF MAIN CASING (NEAREST FOOT) TYPE (NEAREST INCH) J S SUBMERSIBLE 27 70 PUMP INSTALLED OTHER CASING (IF USED) TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) DIAMETER DEPTH (FEET) (INCH) DRILLER WILL INSTALL PUMP N (CIRCLE APPROPRIATE BOX) CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) SCREEN RECORD SCREEN TYPE OR OPEN HOLE 35 ST BR но PUMP HORSE POWER APPROPRIATI BRASS OPEN HOLE CODE PUMP COLUMN LENGTH BELOW 47 PL OT CASING HEIGHT (CIRCLE APPROPRIATE BOX + ABOVE 2 (NEAREST FOOT) LAND SURFACE (SEQ. NO. DEPTH (NEAREST WHOLE FOOT) 50 49 FROM 70 EACH 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 SCREE (MEASUREMENTS TO WELL). CIRCLE APPROPRIATE BOXES 32 36 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED 45 E ELECTRIC LOG OBTAINED SLOT SIZE 1,\_ HOUSE P TEST WELL CONVERTED TO PRODUCTION WELL DIAMETER OF SCREEN L (NEAREST INCH) 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 56 GRAVEL PACK IF WELL DRILLED WAS A BELIEF. FLOWING WELL CIRCLE BOX DRILLERS NAME WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) PRINT) (E.R.O.S.) Q 72 74 75 76 OTHER DATA TELESCOPE LOG SIGNATURE

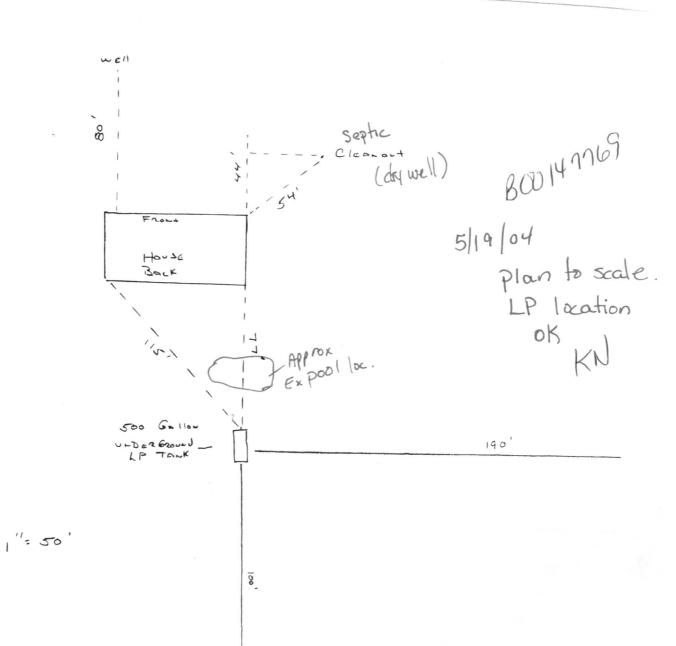
MECEIVEU



HO 73 1857



CAROLYN WALLACE - GREEN
6360 GUILFORD RD
CLARKSVILLE, MB 21029



## RECEIVED

MAY 18 2004

HOWARD COUNTY HEALTH DEPT.
BUREAU OF ENVIRONMENTAL HEALTH