

8/28/85
8/29/85 - AM

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
992-2330

04-318765

INDEXED

ADP-102
8/29/85
P 34755
A 10275 24649

ELLICOTT CITY
DISTRICT 4th
DATE 7/2/85

Arthur Bell IS PERMITTED TO INSTALL ☒ ALTER ☐
ADDRESS 10331 South Dolfield Road. Baltimore, MD 21117 PHONE 363-0880
SUBDIVISION Lower Trail ROAD 16212 Route 144 LOT 17
PROPERTY OWNER Robert Dewberry
ADDRESS Mr. Robin

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

GARBAGE GRINDER? YES ☒ NO ☐

SEPTIC TANK CAPACITY 1500 GALLONS NUMBER OF BEDROOMS 3

TRENCHES - 224 sq. ft. per bedroom with garbage grinder. Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 9 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 5 feet of stone below distribution pipe. LOCATION: Start the first trench 275 feet from the back (North) lot line and 125 feet from the right (East) lot line. Run trenches along level ground toward East lot line. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Trenches to be installed on level ground. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

8/29/85 - WPT. is OK see other sheet RH

PLANS APPROVED BY C. Williams DATE 4/3/85

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.

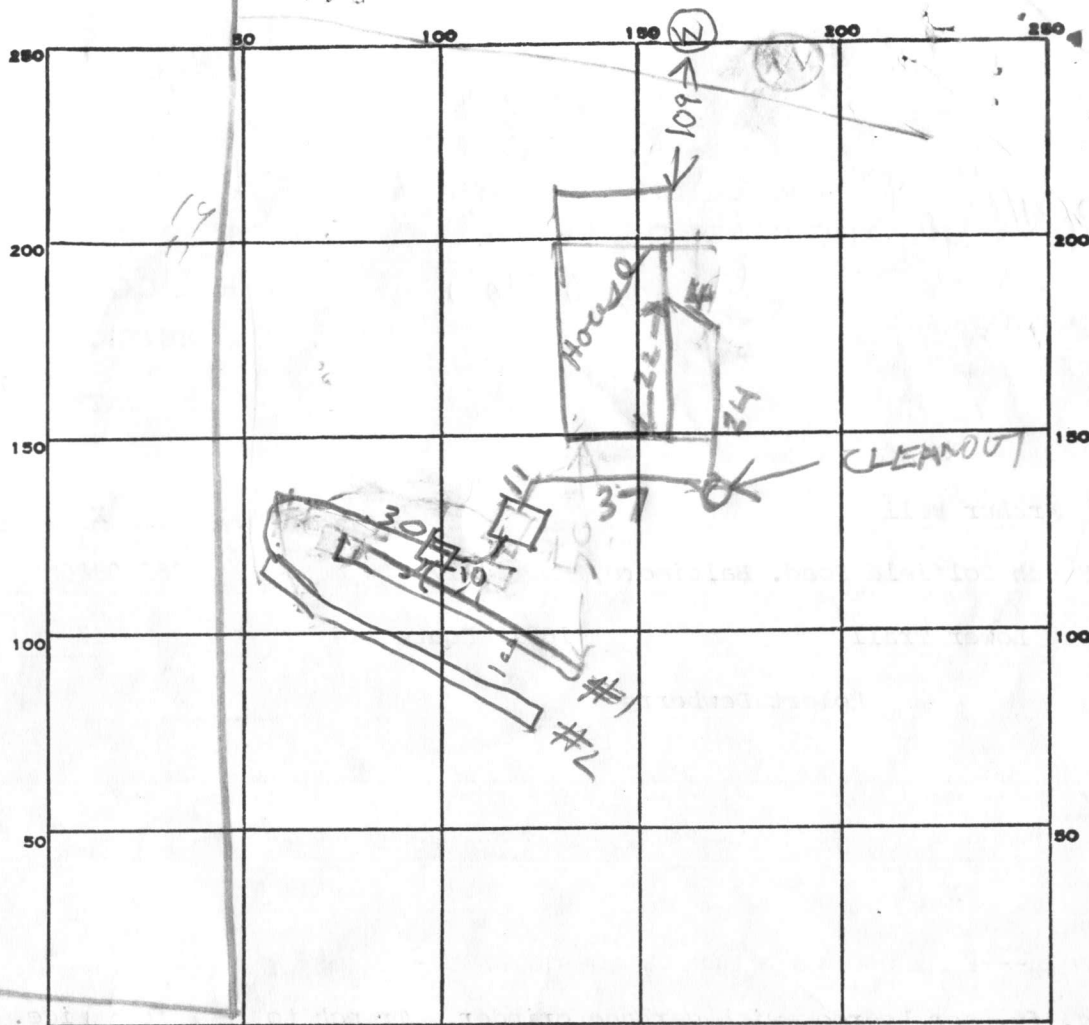
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA. OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 10275
24649



PERMIT CARD _____

SEPTIC TANK, LEVEL OK 1500

CLEANOUTS _____

DISTRIBUTION BOX, LEVEL OK

TILE FIELD, DEPTH #1 10.5 FT. TRENCH WIDTH #1 2 FT.

GRAVEL DEPTH #1 IN. TOTAL LENGTH 70 FT.

NUMBER OF TRENCHES _____

TOTAL BOTTOM AREA 315 420

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

ABSORBENT AREA _____ SQ. FT.

REMARKS 8/29/85 LOCATION OK ADD STONE TO TRENCH #1

DIG TRENCH #2 COVER HOUSE SEWER RH

8/29/85 1100 AM - TRENCH #1 OK TO COVER ADD STONE TO TRENCH #2

8/29/85 200 PM - STONE ADDED TO TRENCH #2

8/29/85 235 PM - TRENCH #2 CONNECTED TO BOX

DATE SYSTEM APPROVED 8/29/85

INSPECTOR Raymond Hodge

NO SMALL PLAT FOR THIS LOT

APPLICATION

A 24649

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

4th

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

DISTRICT _____

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

DATE 11/10/76

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 Howard Associates Robert Dewberry

ADDRESS Old Frederick Road PHONE Joel Abramson 730-7733

PROPERTY LOCATION:

SUBDIVISION Lower Trail LOT NO. 98 17

ROAD AND DESCRIPTION 16212 Old Frederick Road RT 144

SIZE OF LOT 1.787 Acres 5 acres m/l TYPE BLDG. 3 or 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 /s/ Joel Abramson

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

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

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 1/5/78-PERC OK BUT HOLD FOR

REVIEW WATER RIT 1/8/79-HOLD FOR REVIEW

WITH DM PERC OK HOLD FOR PLA-

BLDG. PERMIT SIGNED
AND RETURNED 4/10/85

Serial # 64183 SFD

THIS IS NOT A PERMIT



HOLE ELEVATIONS

LOV

MEDIUM

'LOWEST

MEDIUM

NEX7
HICHEST

HIGHEST
USE FOR NW

TYPE OF SOIL

TESTED BY

ALSO PRESENT: PENNY NIMROD
HUGGINS

C1 4483	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.
THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS		COUNTY NUMBER	A24649
DATE Received	DATE WELL COMPLETED	Depth of Well	PERMIT NO. FROM "PERMIT TO DRILL WELL"
8 13	15 20	22 26 (TO NEAREST FOOT)	40-81-0402 28 29 30 31 32 33 34 35 36 37
OWNER: Dewberry		first name	F
STREET OR RFD: Md Rte. 144		TOWN	Lisbon
SUBDIVISION: Lower Trail		SECTION	LOT 17

WELL LOG Not required for driven wells		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box) Y N		C 3	
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		TYPE OF GROUTING MATERIAL CEMENT CM BENTONITE CLAY BC		PUMPING TEST	
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	NO. OF BAGS NO. OF POUNDS		HOURS PUMPED (nearest hour)	
Top Soil	0 2	45 46		3	
Brown Shale	2 24	45 46		8 9	
Brown Shale	25 30	45 46		PUMPING RATE (gal. per min. to nearest gal.)	
Blue Shale	30 40	45 46		9	
Brown Shale	40 50	45 46		METHOD USED TO MEASURE PUMPING RATE	
Blue Shale	50 180	45 46		Bucket	
Check if water bearing		GALLONS OF WATER		WATER LEVEL (distance from land surface)	
		42		BEFORE PUMPING	
		DEPTH OF GROUT SEAL (to nearest foot)		46	
		from 0 ft. to 37 ft.		WHEN PUMPING	
		(enter 0 if from surface)		180	
		48 TOP 52 54 BOTTOM 58		TYPE OF PUMP USED (for test)	
		CASING RECORD		A air P piston T turbine	
		casing types insert appropriate code below		C centrifugal R rotary O other (describe below)	
		ST CO STEEL CONCRETE		J jet S submersible	
		PL OT PLASTIC OTHER		PUMP INSTALLED	
		MAIN CASING TYPE		DRILLER WILL INSTALL PUMP YES NO	
		Nominal diameter top (main) casing (nearest inch)		IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE	
		34		TYPE OF PUMP INSTALLED	
		60 61 63 64 66 70		PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:	
		OTHER CASING (if used)		CAPACITY: GALLONS PER MINUTE (to nearest gallon)	
		diameter inch depth (feet) from to		PUMP HORSE POWER	
				PUMP COLUMN LENGTH (nearest ft.)	
				CASING HEIGHT (circle appropriate box and enter casing height)	
				+ above - below	
				LAND SURFACE (nearest foot)	
				9	
				50 51	
CIRCLE APPROPRIATE LETTER		SCREEN RECORD		LOCATION OF WELL ON LOT	
A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED		ST BR HO STEEL BRASS OPEN HOLE		SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)	
E ELECTRIC LOG OBTAINED		PL OT PLASTIC OTHER		A well	
P TEST WELL CONVERTED TO PRODUCTION WELL		SCREEN TYPE or open hole insert appropriate code below		100'	
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.		EACH SCREEN		1500'	
DRILLERS IDENT. NO. 273		DEPTH (nearest ft.)		MO 144	
DRILLERS SIGNATURE: Ralph E. Mayne		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			
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)		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			

RECEIVED
HOWARD COUNTY
HEALTH DEPT.
ELICOTT CITY, MD.

MAR 12 9 25 AM '84

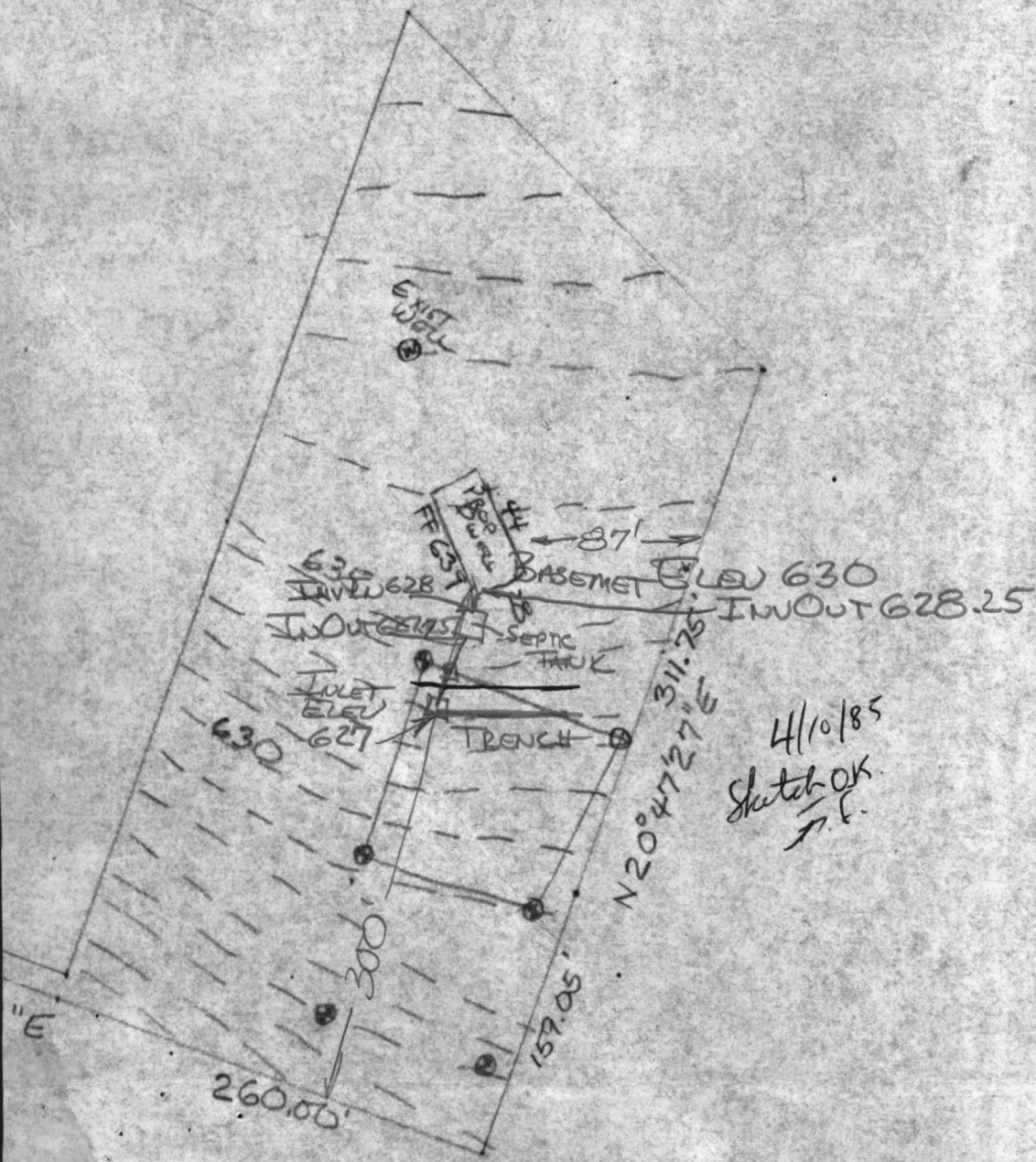
DIVISION OF
ENVIRONMENTAL
HEALTH

MAR 12 3 56 PM '84

RECEIVED
HOWARD COUNTY
HEALTH DEPT.

170 81

9



4/10/85
Sketch OK
J.E.

SCALE 1" = 100'

22 Ac. ±