

10-20-86  
2PM

10/20/86

S. Skinner  
approved

P 36918  
A 30754

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
XX992-2330  
461-9933

01-184962

INDEXED

ELLICOTT CITY  
DISTRICT 1st  
DATE 5/09/86

Timothy & Deidre Potter IS PERMITTED TO INSTALL X ALTER       

ADDRESS        PHONE 355-5408

SUBDIVISION Talbot's Last Shift ROAD 5252 Talbot's Landing  
5083 Fitchester Road LOT 4A - 4B

PROPERTY OWNER Timothy & Deidre Potter

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 240 feet from the front (1447.85 ft. long) lot line and 60 feet from the right (614.91 ft. long) sideline as seen when facing the lot from the private road. Continue to dig the trench on level ground 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 and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY Frank Skinner DATE 10/09/85

COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL COMPLETION OF THIS PROJECT. **BUILDING PERMIT SIGNED**

NOTE: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH. **AND RETURNED**

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH. 4/11/03 B00141047 INGROUND POOL

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PERMIT VOID AFTER THREE YEARS.

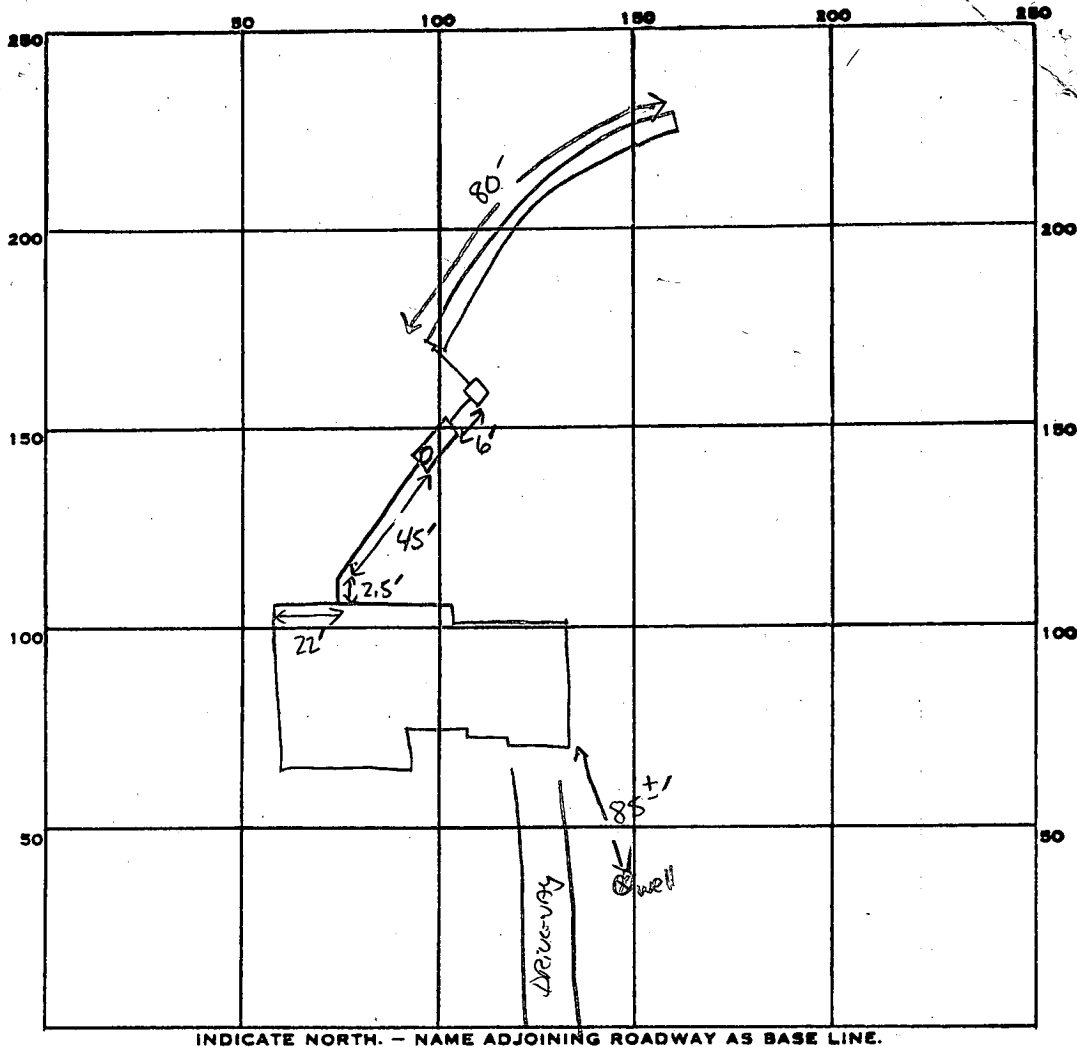
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

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

EH - 2-1082

A30954



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ☒

SEPTIC TANK, LEVEL 1000 GAL

CLEANOUTS 1ST

DISTRIBUTION BOX, LEVEL ☒

TILE FIELD, DEPTH 9' FT. TRENCH WIDTH 2 FT. INLET 3

GRAVEL DEPTH 6' FE IN. TOTAL LENGTH 80 FT.

NUMBER OF TRENCHES 1 ONE SIDE WALL 480  
TOTAL BOTTOM AREA 480

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

ABSORBENT AREA 480 SQ. FT.

REMARKS 10/20/84 OL TO ADD STONE - REPAIR SYSTEM HIGHER ON LOT. THAN ORIGINAL SYSTEM  
MISTAKE ON REQUIRED AMT OF TRENCH STARTED LOWEST ONE FIRST SO REPAIR WHERE  
ORIGINAL SPECS CALLED. DB IN PLACE. S.A.W.

DATE SYSTEM APPROVED 10/20/84 INSPECTOR S. Abel

SANDY  
LOAM

# HOLE ELEVATIONS

③ = highest

④ = Next Highest

① = Low

② = Lowest

inlet 3  
max depth 8 1/2

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME	
			START	STOP	START	STOP		
12/80	1D	12 1/2	1047	1049	1049	1053	4	
	1S	4	1047	1100	1100	1114	14	
	2S	4 1/2	1049	1052	1052	1054	2	
	2D	12	1049	1055	1055	1103	8	
	3S	4	1059	1103	1103	1112	9	
	3D	12	1059	1104	1104	1111	7	
	4V	12 1/2	SEE SOIL PROFILE					

REMARKS

TYPE OF SOIL

TESTED BY

RH SK

**ALSO PRESENT**

OKETTERMAN

Date Received  
(WRA use only)  
1/16/81

DATE WELL COMPLETED  
15 16 17 18 19 20

Depth of Well  
205  
(TO NEAREST FOOT)

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"  
40-73-3756

OWNER  
last name Oxley first name John

STREET OR RFD  
Ilchester Rd.

TOWN  
Ellicott City

SUBDIVISION  
Talbots Last Shift

SECTION

LOT  
4 AB

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
Top Soil	0 2	
Brown Soil	2 21	
Brown Clay	21 23	
Granite	23 60	
Granite	60 63 J2	
Granite	63 170	
Granite	170 175 J8	
Granite	175 205	

WELL HAS BEEN GROUTED  
(Circle Appropriate Box)  
☒ Y ☐ N

TYPE OF GROUTING MATERIAL  
CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 5 NO. OF POUNDS 490

GALLONS OF WATER 70

DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 25 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  
☒ S ☐ T

Nominal diameter top/main casing (nearest inch) 6

Total depth of main casing (nearest foot) 27

OTHER CASING (if used)  
diameter inch depth (feet) from to

EACH CASING

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

DEPTH (nearest ft.)  
0 205

EACH SCREEN

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)  
from 56 to 60

CIRCLE APPROPRIATE BOX

☒ 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 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 BELIEF.

DRILLERS IDENT. NO. 308

DRILLERS SIGNATURE  
(MUST MATCH SIGNATURE ON APPLICATION)

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

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX ☐ F

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

T (E.R.O.S.)

W Q

TELESCOPE CASING LOG INDICATOR OTHER DATA

C 3 (seq. no.)

PUMPING TEST  
HOURS PUMPED (nearest hour) 5

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

METHOD USED TO MEASURE PUMPING RATE BUCKET

WATER LEVEL (distance from land surface)  
BEFORE PUMPING 47  
WHEN PUMPING 205

TYPE OF PUMP USED (for test)  
☒ A air ☐ P piston ☐ T turbine  
☐ C centrifugal ☐ R rotary ☐ O other (describe below)  
☐ J jet ☐ S submersible

PUMP INSTALLED  
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) ☐ Y ☒ N

IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE

TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: (A, C, J, P, R, S, T, O))

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  
☐ - below 2 (nearest foot)

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)

HOUSE

60'

40'

B 1 5527 SEQUENCE NO.  
WRA USE ONLYSTATE OF MARYLAND  
APPLICATION FOR PERMIT TO DRILL WELL

WRA PERMIT NUMBER

MD-73-3756

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

please print or type

fill in this form completely

DATE RECEIVED

8 (WRA USE ONLY) 13  
OWNER INFORMATION

1/16/81  
9:30 AM

Oxley John

LAST NAME 15 4814 A FIRST NAME 34 Hartell Court

STREET OR RFD 36 Fort Meade MD 20755

TOWN 57 STATE 76 ZIP 55

B 1 CONTINUED

## DRILLER INFORMATION

Stanley W. Bollinger, Jr 308

DRILLER'S NAME 77 LICENSE NO. 80

Signature: Stanley W. Bollinger, Jr 10/21/80

SIGNATURE DATE

B 2

## WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN) 5

AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 750

## USE FOR WATER (CIRCLE APPROPRIATE BOX)

- ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)
- ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)
- ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)
- ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)
- ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)

APPROXIMATE DEPTH OF WELL 200 FEET

APPROXIMATE DIAMETER OF WELL 6 INCH

## Method of Drilling (circle one)

BORED (OR AUGERED) JETTED JETTED & DRIVEN

AIR ROTARY AIR PERCUSSION ROTARY (HYDRAULIC)

CABLE REVERSE ROTARY DRIVE POINT ROTARY

other

## REPLACEMENT OR DEEPEMED WELLS

(Circle Appropriate Box)

- ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL
- ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED
- ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY
- ☐ THIS WELL WILL DEEPEMED AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52

Not to be filled in by driller. (WRA USE ONLY)

APPROX. PERMIT NUMBER 54 G A P 63

FORCE INITIALS CONDITIONS 70 71 72 73 74 75 76 77 78 79

B 5

SPECIAL CONDITIONS

(WRA USE ONLY)

B 3

## LOCATION OF WELL

COUNTY 8 Howard

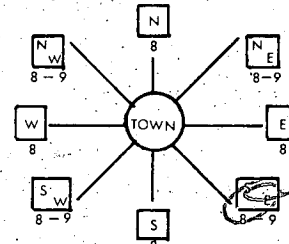
SUBDIVISION 23 Talbots Last Shift

SECTION 44 LOT 48 4 A B Combined

NEAREST TOWN 52 ELlicott City

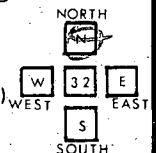
MILES FROM TOWN (enter 0 if in town) 4 MI

B 4

DIRECTION OF WELL FROM  
TOWN (CIRCLE BOX)

ILCHESTER

NEAR WHAT ROAD

ON WHICH SIDE OF ROAD  
(CIRCLE APPROPRIATE BOX)34 DISTANCE FROM ROAD  
(CIRCLE APPROPRIATE BOX)SHOW LOCATION OF WELL WITH  
AN "X" IN THIS BOX

27' casing 1 1/2' above grade

25' open hole

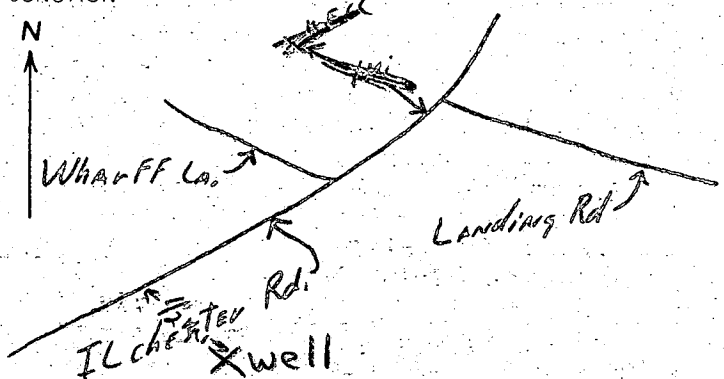
5 bags cement

5K+13 1/16/81

WRITE THE BOX NUMBER  
FROM THE MAP HERE

860 4

510 1

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL  
IN RELATION TO NEARBY TOWNS AND ROADS AND  
GIVE DISTANCE FROM WELL TO NEAREST ROAD  
JUNCTION

B 4

NOT TO BE FILLED IN BY DRILLER  
HEALTH DEPARTMENT APPROVAL

HOWARD

COUNTY NAME

A 30754

COUNTY NO.

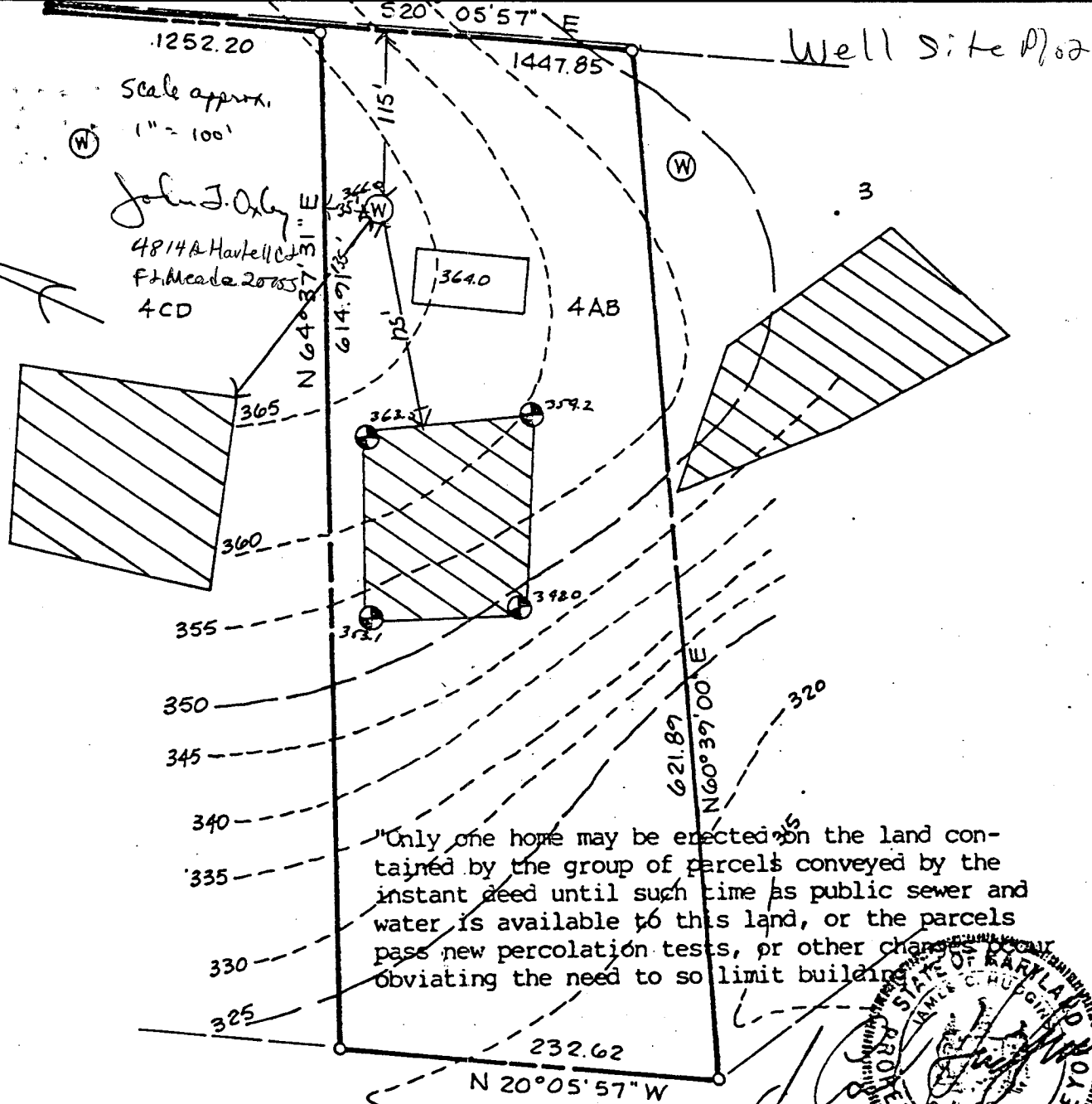
EHA  
SIGNATURESTATE HEALTH  
CIRCLE BOX

MO DAY YR 12 03 80

CO. SIGNATURE Frank Shinner 12/3/80

NORTH 510 EAST 0860 ELEV. (FT.)

GRID 55 GRID 57 63 65 68



This area indicates a private easement of approximately 10,000 square feet as required by the Maryland State Department of Health and Mental Hygiene for individual disposal. Improvements of any kind in this area are restricted until public sewage is available and servicing any residential structures constructed on this site. This easement shall become null and void upon connection to a public sewage system. Percolation test holes shown hereon have been field located and shown as "●".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene. Percolation areas and water wells for adjoining lots have been shown where pertinent.

APPROVED: For Private Water and Private Sewage Systems

*James M. Bogdan*  
County Health Officer

11-7-80  
Date

PERCOLATION TEST PLAT  
PARCEL 4 AB  
TALBOT'S LAST SHIFT  
PROPERTY OF  
HOWARD ASSOCIATES  
ILCHESTER ROAD  
1st Election District  
Howard County Maryland  
Scale: 1"=100' Date: 7-18-80

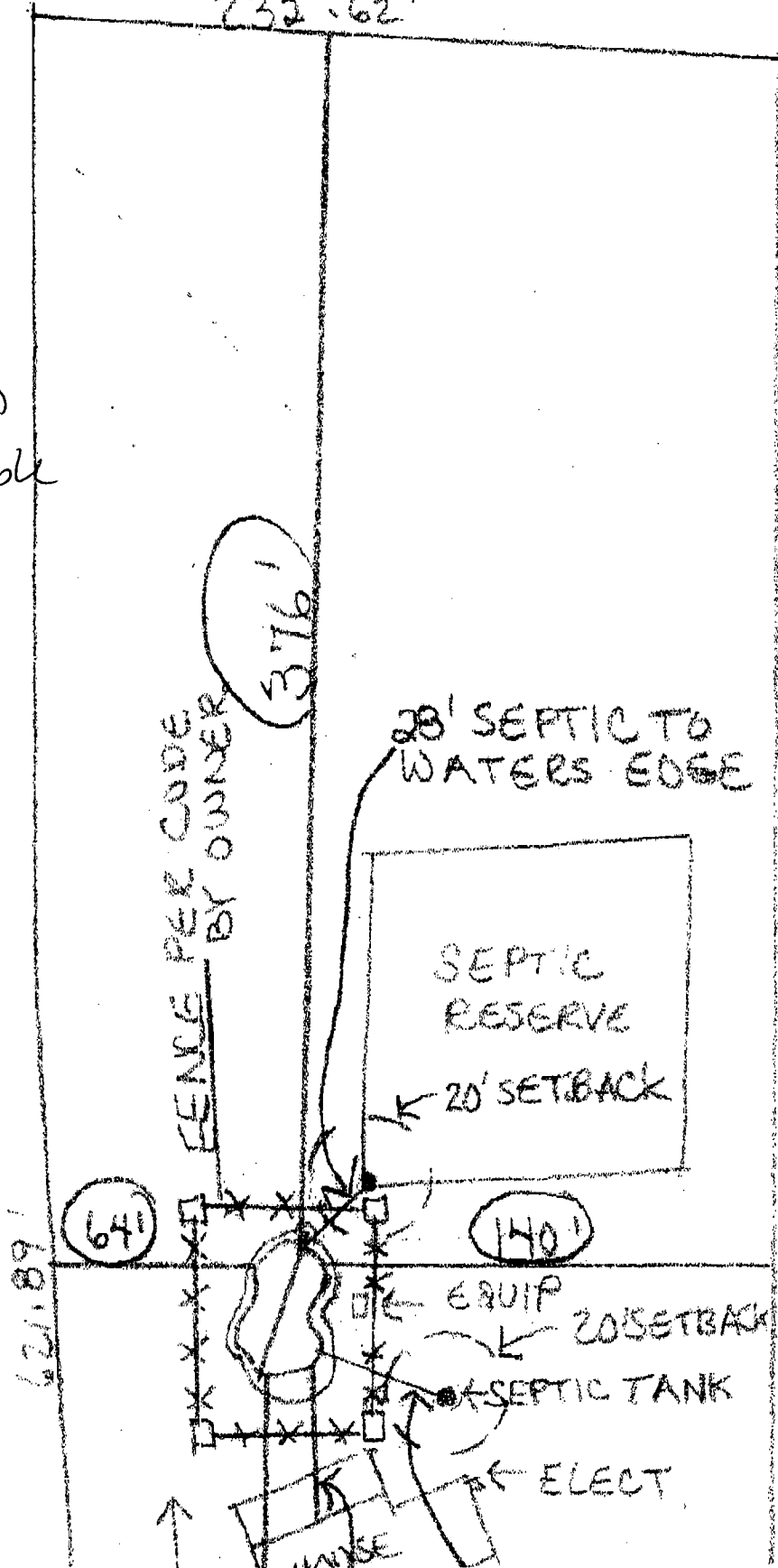
NTT Associates  
Suite 307  
Clark Bldg.  
Columbia Md. 21044  
321-0307

SCALE: 1" = 100'

HOWARD CO.  
PARCEL 4 AB

232.62'

BP 00141047  
4-11-03  
Pool location  
has acceptable  
set-back  
from  
SEPTIC  
sys. &  
repair  
area  
KN



14.4109