

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 7/24/80

INDEXED

05-363179

C. Kenneth Lape, Jr.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 10016 Franklin Avenue, Glendale, Maryland 20769 PHONE 390-6624

SUBDIVISION _____ ROAD 7256 Route 32 LOT _____

PROPERTY OWNER C. Kenneth Lape

Across from W.E. Grace

ADDRESS _____

SPECIFICATIONS

4 Bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

DEEP TRENCH _____ DEPTH _____ FEET, BOTTOM AREA _____ SQ. FT.

Dry Well

SEEPAGE PITS ☒ ABSORBENT SIDE-WALL AREA 135 SQ. FT. Per bedroom

INLET PIPE 4 1/2 FT. BELOW ORIGINAL GRADE. MAXIMUM DEPTH 12 FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT _____ FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA 147 FT. FROM right LOT LINE AND 30 FT. FROM front LOT LINE AS SEEN WHEN

FACING LOT FROM route 32

If all trenches 628 sq. ft absorbent side-wall area. to run from dry well location towards

rear (378 ft. line) NOTE: TRENCHES NOT TO BE CONNECTED IN SERIES. MUST USE DISTRIBUTION BOX

OR T'S AND CONNECT TO END NEAREST SEPTIC TANK.

2 inspections of trench before and after

stone. Run trench or trenches on contour.

PLANS APPROVED BY Fred Frommelt ur. DATE 7/24/80

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 PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

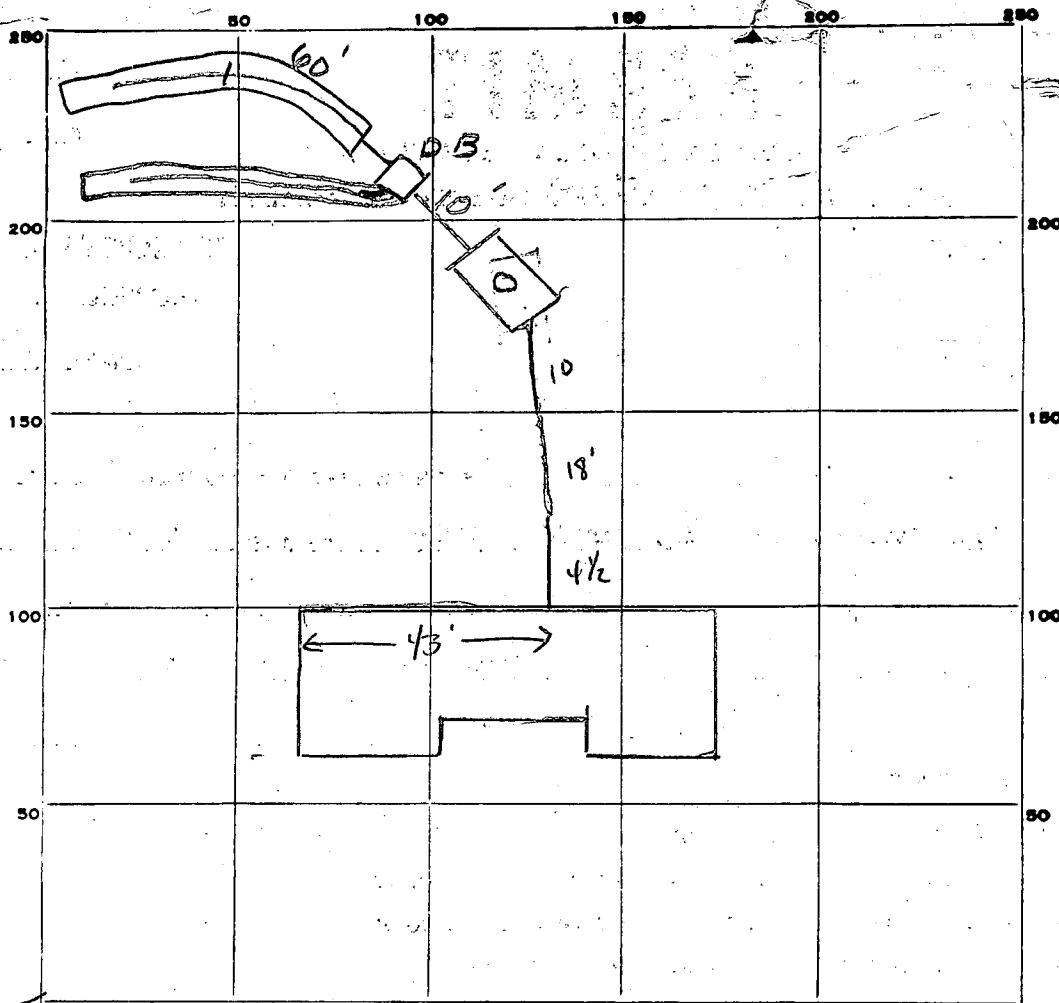
NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

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 TERRA COTTA ACCEPTED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

A 29745



INDICATE NORTH. — NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD ☒

SEPTIC TANK, LEVEL ☒

CLEANOUTS 4

DISTRIBUTION BOX, LEVEL ☒

TILE FIELD, DEPTH 10' 1/2 FT.

TRENCH WIDTH 3' 1/2 FT.

GRAVEL DEPTH 6 1/7 IN.

TOTAL LENGTH 60' 60 FT.

TOTAL

NUMBER OF TRENCHES 2

TOTAL BOTTOM AREA 780

SEEPAGE PITS, INSIDE DIAMETER _____ FT.

DEPTH BELOW INLET _____ FT.

ABSORBENT AREA 780 SQ. FT.

REMARKS

8-29-80 OK To fill over middle of Septic Tank

9-2-80 OK to gravel Trench #1 SK

C.B. & S.K.

9-3-80 OK to cover all work for

DATE SYSTEM APPROVED

9/3/80

INSPECTOR

Stager

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P.O. BOX 476 ELLICOTT, MARYLAND 21043
TELEPHONE: 992-2330

BLDG. PERMIT SIGNED
AND RETURNED 2/2/80
Serial # 45410

DISTRICT 5th

DATE 4/23/79

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 C. Kenneth Lape, Jr. 7/3/79

ADDRESS 10016 Franklin Ave., Glendale, Md. 20769

PHONE

390-6624

PROPERTY LOCATION:

SUBDIVISION ~~7856~~ Route 32, Clarksville, Md. - directly across from W.R. Grace - house

ROAD AND DESCRIPTION with pond in front of it

SIZE OF LOT 2,000 acres

TYPE BLDG. 4 bedrooms

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION IS NON-REFUNDABLE UNDER

ANY CIRCUMSTANCES.

SIGNATURE OF APPLICANT *C. Kenneth Lape*

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

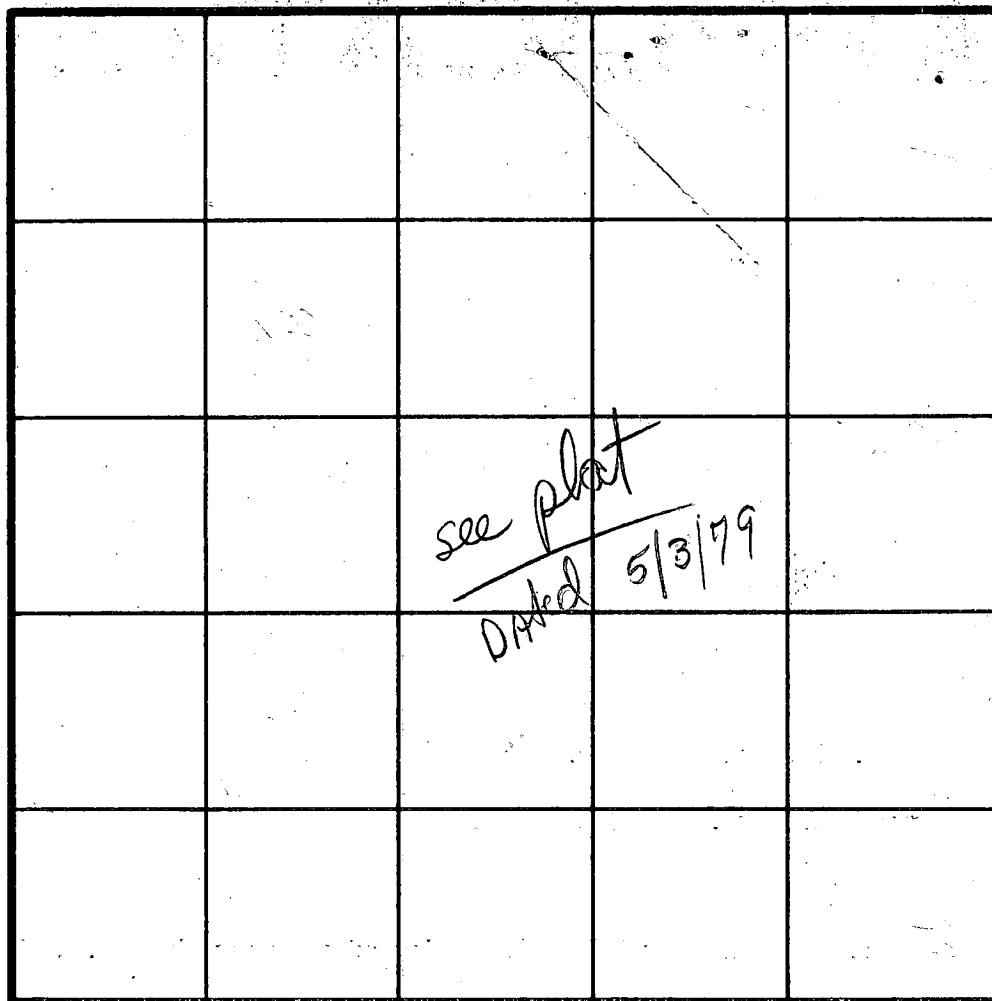
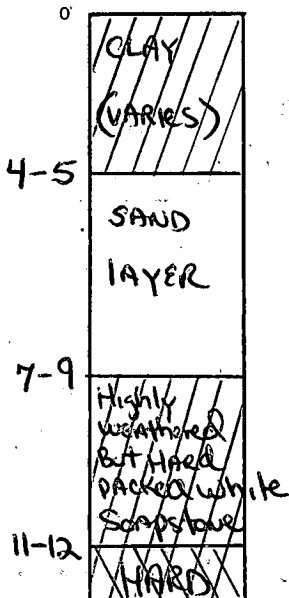
REASONS FOR REJECTION OR HOLDING

1/29/80 See Mr. Toner specs - add per D.W.M. @ office
dry well & 1/2 dry well & trench. Use Mr. Toner's location
C.B.C.

THIS IS NOT A PERMIT

Holes ①②④

SOIL PROFILE



see plot
Dated 5/3/79

57
21

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
5/3/79	15	2'	212	227	NO DROP		FAILS
	10	11'	212	245	245	330	45
	25	4'	215	221	221	257	36
	20 and pen	12'	215	221	221	245	24
	35	4'	219	220	220	221	1
	30	12'	219	220	220	223	3
	45	4'	234	235	235	237	2
	40	11'	235	255	255	320	25
	1m	6'	224			230	

ALL SAND →

fails
fails

REMARKS Rain Refsd to relocate house

TYPE OF SOIL See profile

TESTED BY G40

ALSO PRESENT Lape

APPLICATION

SEWAGE DISPOSAL TESTING

A 17542

P

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 10/10/72

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER

~~John W. Phillips~~

Ken Lappa

ADDRESS 7302 Route 32, Clarksville, Md.

Any questions call Mr. Ketterman,

PHONE 531-5449

PROPERTY LOCATION:

10016 Franklin Ave. 390-6624
Glendale, Md.

SUBDIVISION

LOT NO.

ROAD AND DESCRIPTION 7302 Route 32, Clarksville, Md. - directly across from W. R.

Grace - house with pond in front of it.

OCCUPANT

PHONE

PERSON TO CONSTRUCT SYSTEM

ADDRESS

PHONE

SIZE OF LOT 2.000 acres

TYPE BLDG. 3 or 4 bedrooms

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Judith A. Ketterman

APPROVED BY Robert V. Toner

FOR

(KIND OF SYSTEM)

DATE

REJECTED BY

FOR

(KIND OF SYSTEM)

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 10/10/72

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I, HEREBY, APPLY FOR THE NECESSARY TESTS IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER John W. Phillips

ADDRESS 7302 Route 32, Clarksville, Md.

Any questions call Mr. Ketterman,
PHONE 531-5449

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION 7302 Route 32, Clarksville, Md. - directly across from W. R. Grace - house with pond in front of it.

OCCUPANT _____ PHONE _____

PERSON TO CONSTRUCT SYSTEM _____

ADDRESS _____ PHONE _____

SIZE OF LOT 2.000 acres TYPE BLDG. 3 or 4 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

SIGNATURE OF APPLICANT /s/ Judith A. Ketterman

APPROVED BY Robert V. Tone

FOR Ony Well
(KIND OF SYSTEM)

DATE 10/13/72

REJECTED BY _____

FOR _____
(KIND OF SYSTEM)

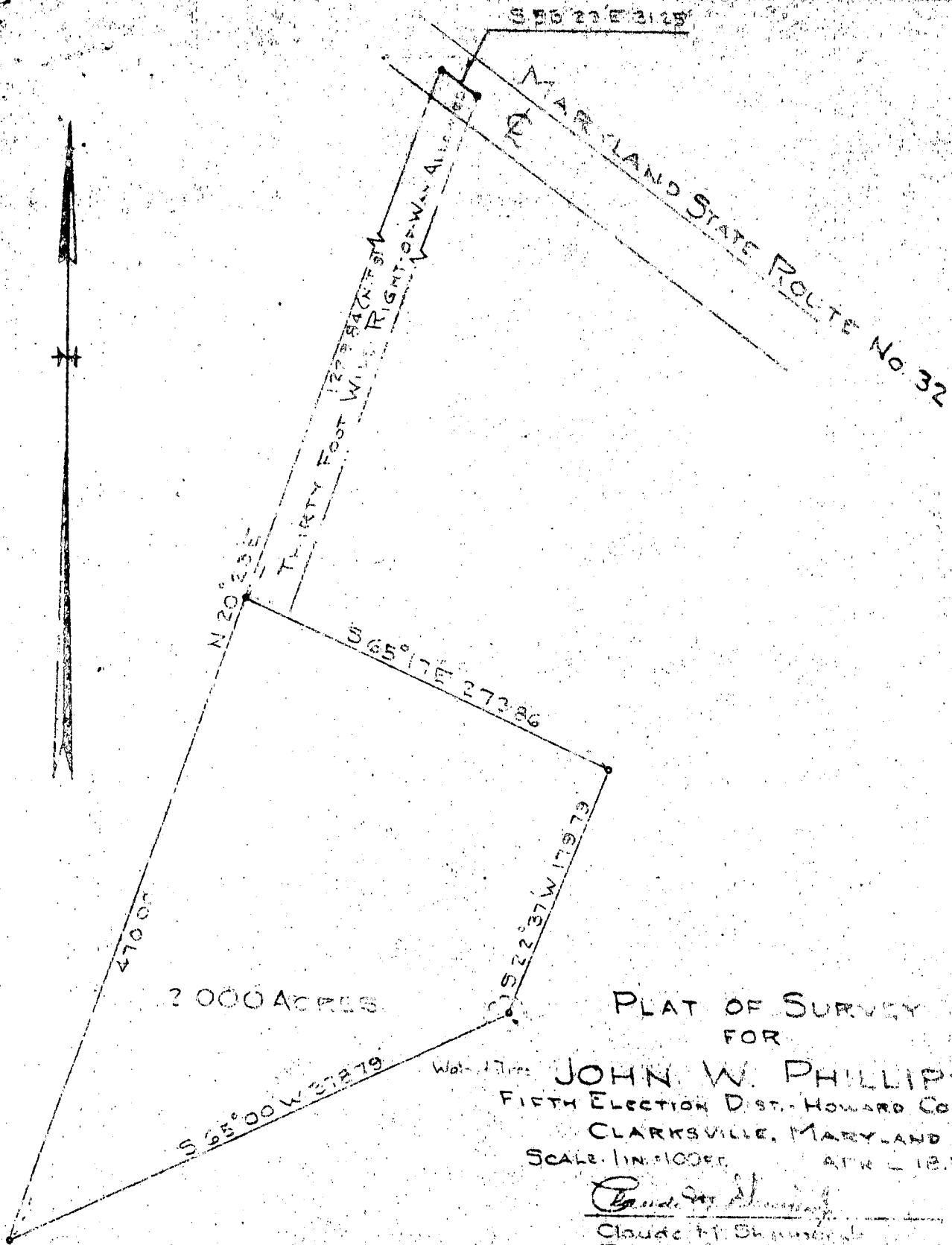
DATE _____

HOLD PENDING FURTHER TESTS _____

DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT



PLAT OF SURVEY
FOR

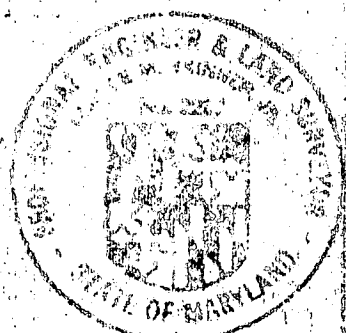
JOHN W. PHILLIPS

FIFTH ELECTION DIST. HOWARD COUNTY

CLARKSVILLE, MARYLAND

SCALE: 1"=100' APR 18, 1972

Claude H. Shumaker
Registered Professional Engineer
Land Surveyor in Maryland



Approved for Private Water & Private
Sewerage System
Howard County Health Dept.

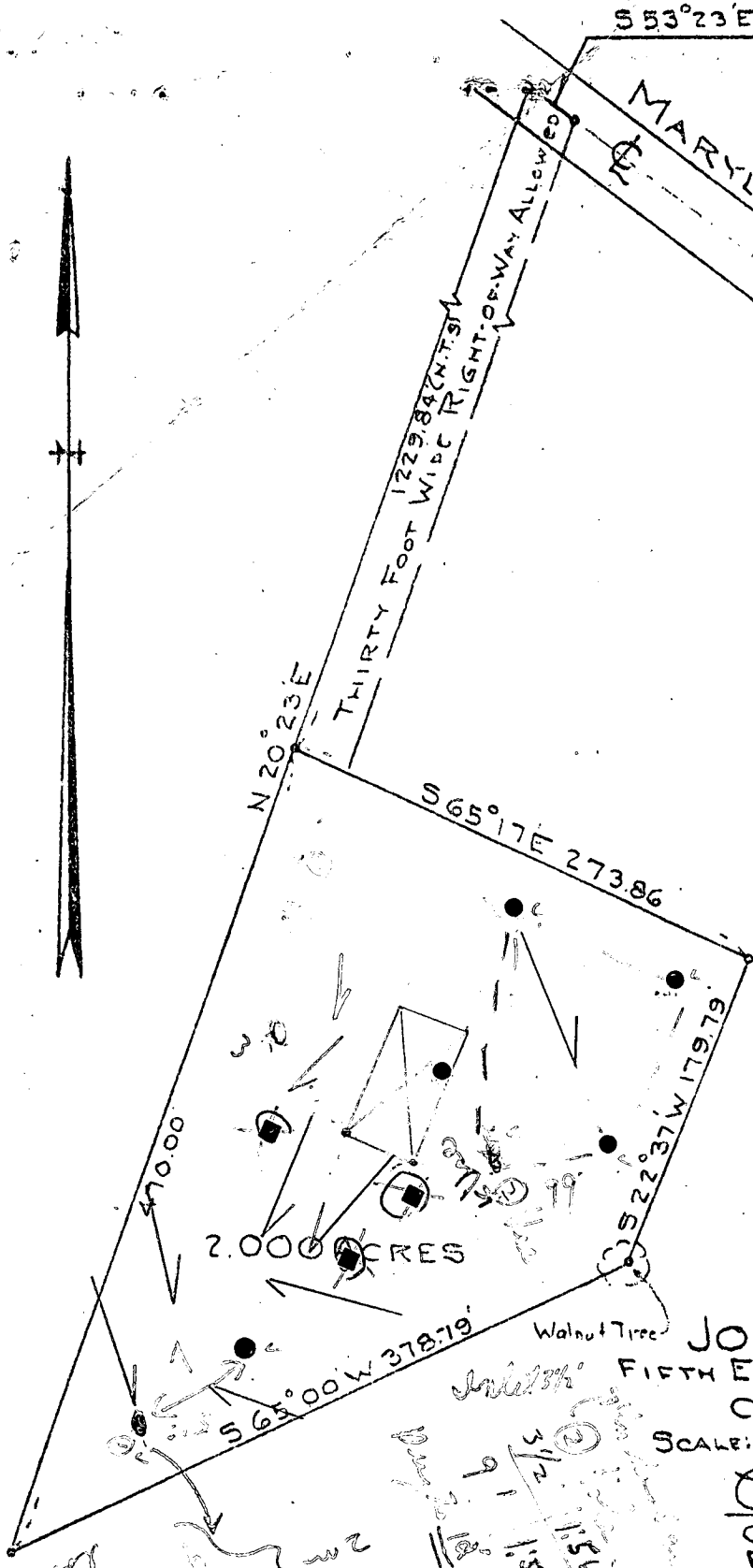
[Signature]
County Health Officer

[Signature] 11/2/72
Date

Note: The lot shown heretofore with the minimum ownership and lot area as required by the Maryland State Health Department Regulations

Phillips

A3455-5



● - GOOD
■ - BAD

(GLK) 3 MAY 79

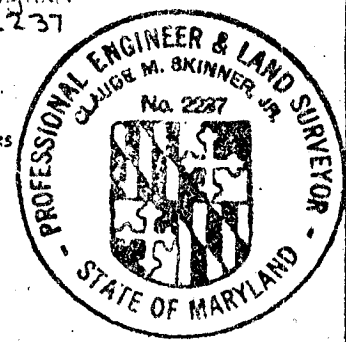
Sp. Layer 1" = 100'
6/29/79

Preliminary

PLAT OF SURVEY FOR

JOHN W. PHILLIPS.
FIFTH ELECTION DIST. - HOWARD COUNTY
CLARKSVILLE, MARYLAND.
SCALE: 1 IN. = 100 FT. APRIL 18, 1972

Claude M. Skinner, Jr.
Claude M. Skinner, Jr.
Reg Professional Engineer &
Land Surveyor No. 2237



Approved for Private Water & Private
Sewerage System
Howard County Health Dept.

Note: The lot shown hereon complies
with the minimum ownership and
lot area as required by the
Maryland State Health
Department Regulations

County Health Officer _____ Date _____

A 3455-5

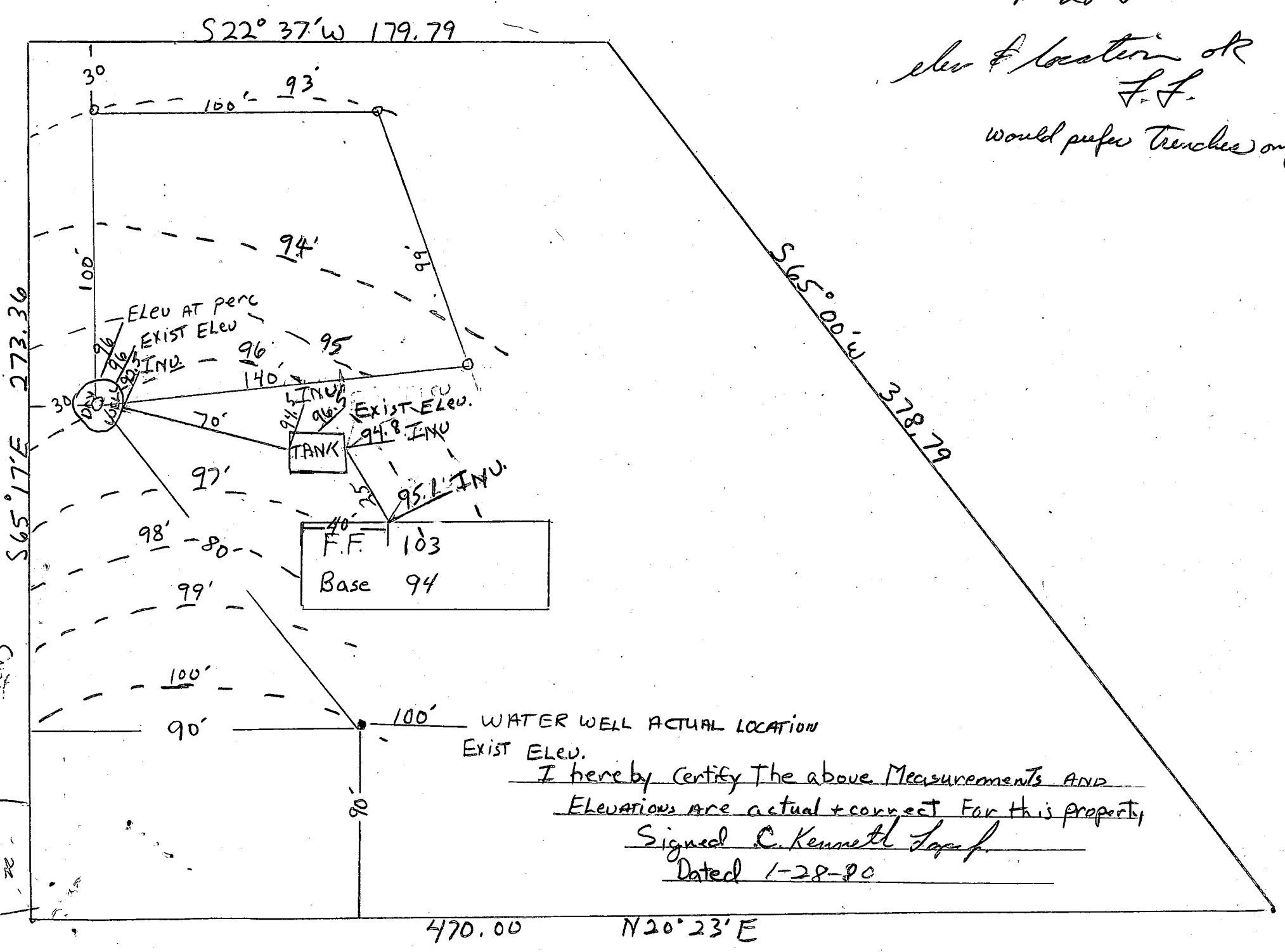
STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 APPLICATION FOR PERMIT TO DRILL WELL		WRA PERMIT NUMBER HO-73-3450 FILL IN THIS FORM COMPLETELY	
1 2 3 (SEQ. NO.) 6 4835 SEQUENCE NO. (WRA USE ONLY)			
DATE RECEIVED (WRA USE ONLY) 1/23/80 9:30 AM OWNER COL 15 LAST NAME <u>KENCRRAFT BUILDERS</u> C. Kenneth Lape - Owner FIRST NAME COL. 34			
STREET OR RFD COL 36 <u>10016 FRANKLIN AVE.</u> COL. 55			
POST OFFICE COL 57 <u>GLENDALE, MD.</u> 20769			
1 2 3 (SEQ. NO.) 6 CONTINUED DRILLER INFORMATION		1 2 3 (SEQ. NO.) 6 LOCATION OF WELL	
DATE <u>9/12/79</u> LICENSE NUMBER <u>040</u>		COUNTY <u>HOWARD</u> (DO NOT ABBREVIATE COUNTY NAME)	
FIRST NAME <u>George F. Easterday</u> DRILLER LAST NAME		SUBDIVISION <u>23</u> 42	
SIGNATURE <u>George F. Easterday</u> COL. 76		SECTION <u>44</u> LOT <u>48</u>	
1 2 3 (SEQ. NO.) 6 WELL INFORMATION		1 2 3 (SEQ. NO.) 6 DIRECTION FROM TOWN (CIRCLE APPROPRIATE BOX)	
MAXIMUM PUMPING RATE (GALLONS PER MINUTE) <u>5</u> 8 12		☒ N NORTH ☒ E EAST ☐ NE NORTHEAST ☐ SE SOUTHEAST	
AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) <u>600</u> 14 20		☐ S SOUTH ☐ W WEST ☐ NW NORTHWEST ☐ SW SOUTHWEST	
USE FOR WATER (CIRCLE APPROPRIATE BOX)		NEAR WHAT ROAD <u>RT 32</u> 11 30	
☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) ☐ N NORTH ☒ S SOUTH ☐ E EAST ☐ W WEST	
☐ F FARMING, AGRICULTURE, IRRIGATION		DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>400</u>	
☐ I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT.		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND STREAMS WITH NORTH IN THE DIRECTION OF THE ARROW, AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION OR STREAM CROSSING SHOWN ON THE SKETCH. ALSO SHOW, BY MEANS OF AN "X", THE WELL LOCATION IN THE BOX BELOW AND THE BOX NUMBER FROM THE WELL LOCATION MAP.	
☐ M MUNICIPAL WATER SUPPLY		NEAR WHAT ROAD <u>RT 32</u> 11 30	
☐ P PRIVATE WATER COMPANY		ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) ☐ N NORTH ☒ S SOUTH ☐ E EAST ☐ W WEST	
☐ T TEST		DISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) <u>400</u>	
APPROXIMATE DEPTH OF WELL <u>150</u> 24 28 FEET		APPROXIMATE DIAMETER OF WELL <u>6</u> (NEAREST INCH)	
METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD)		BOX NUMBER <u>820</u>	
☒ BORED (OR AUGERED) ☐ JETTED ☐ DRIVEN		BOX NUMBER <u>490</u>	
30-37 ☒ AIR-ROTARY ☐ AIR-PERCUSSION ☐ ROTARY (HYDRAULIC ROTARY)		BOX NUMBER <u>490</u>	
☐ CABLE ☐ REVERSE-ROTARY ☐ DRIVE-POINT		BOX NUMBER <u>490</u>	
OTHER (DESCRIBE)		BOX NUMBER <u>490</u>	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)		BOX NUMBER <u>490</u>	
☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL		BOX NUMBER <u>490</u>	
☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED		BOX NUMBER <u>490</u>	
☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY		BOX NUMBER <u>490</u>	
☐ THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)		BOX NUMBER <u>490</u>	
NOT TO BE FILLED IN BY DRILLER (WRA USE ONLY)		BOX NUMBER <u>490</u>	
APPROPRIATION PERMIT NUMBER		BOX NUMBER <u>490</u>	
FORCE		BOX NUMBER <u>490</u>	
WRITE INITIALS IN BOX		BOX NUMBER <u>490</u>	
CONDITIONS		BOX NUMBER <u>490</u>	
HEALTH DEPARTMENT APPROVAL		BOX NUMBER <u>490</u>	
1 2 3 (SEQ. NO.) 6 CONTINUED HEALTH DEPARTMENT APPROVAL		BOX NUMBER <u>490</u>	
41 ☒ STATE HEALTH (CIRCLE BOX) COUNTY NAME <u>HOWARD</u>		BOX NUMBER <u>490</u>	
MO. DAY YR. <u>1 9 2 1 7 9</u> COUNTY NO. <u>11</u>		BOX NUMBER <u>490</u>	
DATE <u>1 9 2 1 7 9</u> APPROVED BY <u>Donald W. Monaghan, Sanitarian</u>		BOX NUMBER <u>490</u>	
43 48 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)		BOX NUMBER <u>490</u>	
1 2 3 (SEQ. NO.) 6		BOX NUMBER <u>490</u>	

1-28-80

ele & location of
F.F.

would prefer trenches only.

Cont'd
20



WATER WELL ACTUAL LOCATION
EXIST ELEV.

I hereby certify The above Measurements AND
Elevations are actual & correct For this property

Signed C. Kenneth Lapf

Dated 1-28-80