

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH
HOWARD COUNTY

ELLICOTT CITY

DISTRICT 2

DATE 9/12/69

INDEXED

Emerson Pease

IS PERMITTED TO INSTALL X ALTER

ADDRESS Old Frederick Road, Woodstock, Maryland PHONE DA 8-2481

A SEWAGE DISPOSAL SYSTEM LOCATED AT _____

SUBDIVISION Allenford

ROAD Tracy Bath Court

LOT 15, Blk. E, Sec. 3

PROPERTY OWNER

FREDERICK FINK
Douglas Lohrter

BLDG. PERMIT SIGNED

AND RETURNED 5-12-99

ADDRESS _____

SPECIFICATIONS - 3 bedrooms

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

SEEPAGE PITS _____ ABSORBENT SIDE-WALL AREA _____ SQ. FT.

SEPTIC TANK CAPACITY 750 GALLONS

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

OTHER Dry well - 300 sq. ft. sidewall area below the inlet with a minimum
depth below grade of 12 ft. Place the dry well between 75 ft. and 95 ft.
from the back lot line and between 40 ft. and 60 ft. from the right side of the
lot as seen when facing the lot from Tracy Bath Court.

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON.
PERMIT VOID AFTER THREE YEARS.

PLANS APPROVED BY Raymond Hodges DATE 10/30/68

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.

10/14/69 Trench 60 ft long - 5 ft deep - 4 ft x 9 ft gravel under pipe & located
about 65 ft from rear lot line.

**NOTIFY THE HEALTH DEPARTMENT 48 HOURS
BEFORE EXCAVATIONS ARE TO BE BACK FILLED.**

BLDG. PERMIT SIGNED
AND RETURNED 7/1/83

13581

298486C

APPLICATION

SEWAGE DISPOSAL TESTING

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY 750 Gallon Tank

ELLICOTT CITY

DISTRICT 2

DATE 5/3/68

Dry Well - 300 sq ft sidewalk area
below the inlet with a maximum depth
below grade of 11 FT

Place the dry well between 75 FT and 95 FT from
the back lot line and between 40 FT and 60 FT
from the right side of the lot as seen when
facing the lot from Tracy Beth Court

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 Douglas Lichtler

ADDRESS 2620 Frederick Rd., Baltimore 28, Md. PHONE 465-2853

PROPERTY LOCATION:

SUBDIVISION Allenford

LOT NO. 15, Blk. E, Sec. 3

ROAD AND DESCRIPTION Unnamed Court

OCCUPANT

PERSON TO CONSTRUCT SYSTEM

PHONE

ADDRESS

PHONE

SIZE OF LOT 55' x 150' x 76' x 54' x 155' x 21' x 285' TYPE BLDG. 3

NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE

SIGNATURE OF APPLICANT /s/ Douglas Lichtler

APPROVED BY Raymond Hodge

FOR

(KIND OF SYSTEM)

DATE 10/30/68

REJECTED BY

FOR

(KIND OF SYSTEM)

DATE

HOLD PENDING FURTHER TESTS

DATE

REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

State Office Building
ANNAPOLIS, MARYLAND 21401

DEPARTMENT OF
WATER RESOURCES

THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL

WELL COMPLETION REPORT

WELL DESCRIPTION

A

WELL LOG

State the kind of formations penetrated, their color, their depth, their thickness, and if water-bearing

B

CASING AND SCREEN RECORD

State the kind and size and position of casing, liner, shoe, screen, and other accessories (if no casing used, give diameter of well).

DIRT
BLUE SHALE
BLUE GREEN ROCK
Hard BLACK ROCK

FEET
from 1 to 25
35-60
60-150
150-180

STEEL

DIAM.
(inches)
6 1/2

FEET
from 1 to 48

Permit Number Ho 690223
Owner Chandra L. G. S.
Address 2620 Park Rd
Subdivision ALLAN Ford
Section 2 Lot 151E
County Permit Number _____
PUMPING TEST
Hours Pumped 1
Type of Pump Used Roller
Pumping Rate _____
Gallons per Minute 3

WATER LEVEL

Distance from land surface to water)

Before Pumping 70 Ft.

When Pumping 120 Ft.

APPEARANCE OF WATER

Clear _____ Cloudy _____

Taste None

Odor None

Height of Casing Above Land

Surface 1 Ft.

PUMP INSTALLED

Type _____

Capacity

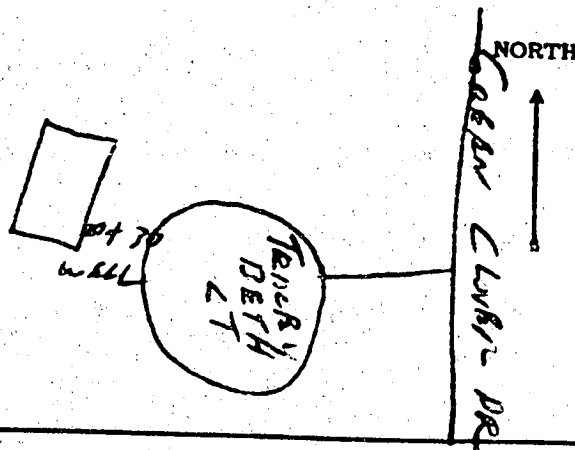
Gallons per Minute _____

Gallons per Hour _____

Pump Column Length _____ Ft.

LOCATION OF WELL ON LOT

Show permanent structures such as building(s), septic tank, and/or other landmarks and indicate not less than 2 distances (measurements) to well.



DATE
WELL WAS
COMPLETED

9/15/69

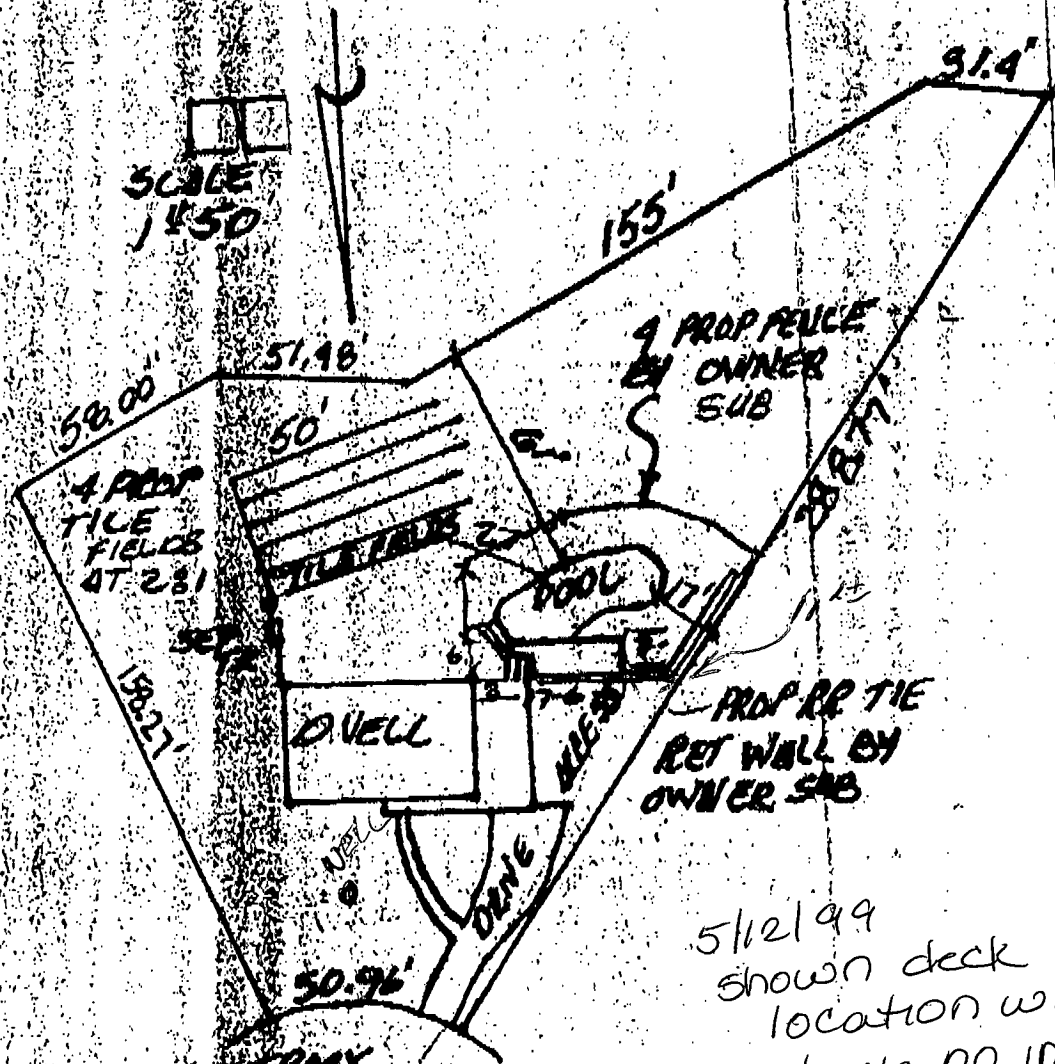
I hereby affirm that this report contains no willful misrepresentations or falsifications and that information given in this report is true, accurate and complete to the best of my knowledge and belief.

9/15/69, Well Driller

Well Driller License No.: 96

mike

Location Deck on PLAT



5/12/99
shown deck
location will
have no impact
on the existing
well and/or
septic

A McMill