

Has6 connection REV'D.

# PERMIT

P 44881

**A** 25053

## SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH, DISTRICT 3rd

## HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

DATE 8/21/89

DATE SYSTEM APPROVED 7/30/90

INSPECTOR M. Rifkin

INDEXED

Paul Schissler/South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL     X     ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland

PHONE 875-4197

SUBDIVISION Dicky Farms

ROAD 1045 Day Road

LOT 9

PROPERTY OWNER \_\_\_\_\_ Michael Bostron

965-0218

**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 1250 GALLONS      NUMBER OF BEDROOMS 4

TRENCHES - 210 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 7.5 feet below original grade. Effective area begins at 3.5 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the first trench 210 feet up the left (818.46') lot line and 20 feet off the same lot line as seen when facing the lot from Day Road. Run trenches on contour toward the right lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.

PLANS APPROVED BY \_\_\_\_\_ Sid Abel

DATE 8/30/88

**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. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS**

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E., TANK, DISTRIBUTION BOX, TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

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 TWO 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.

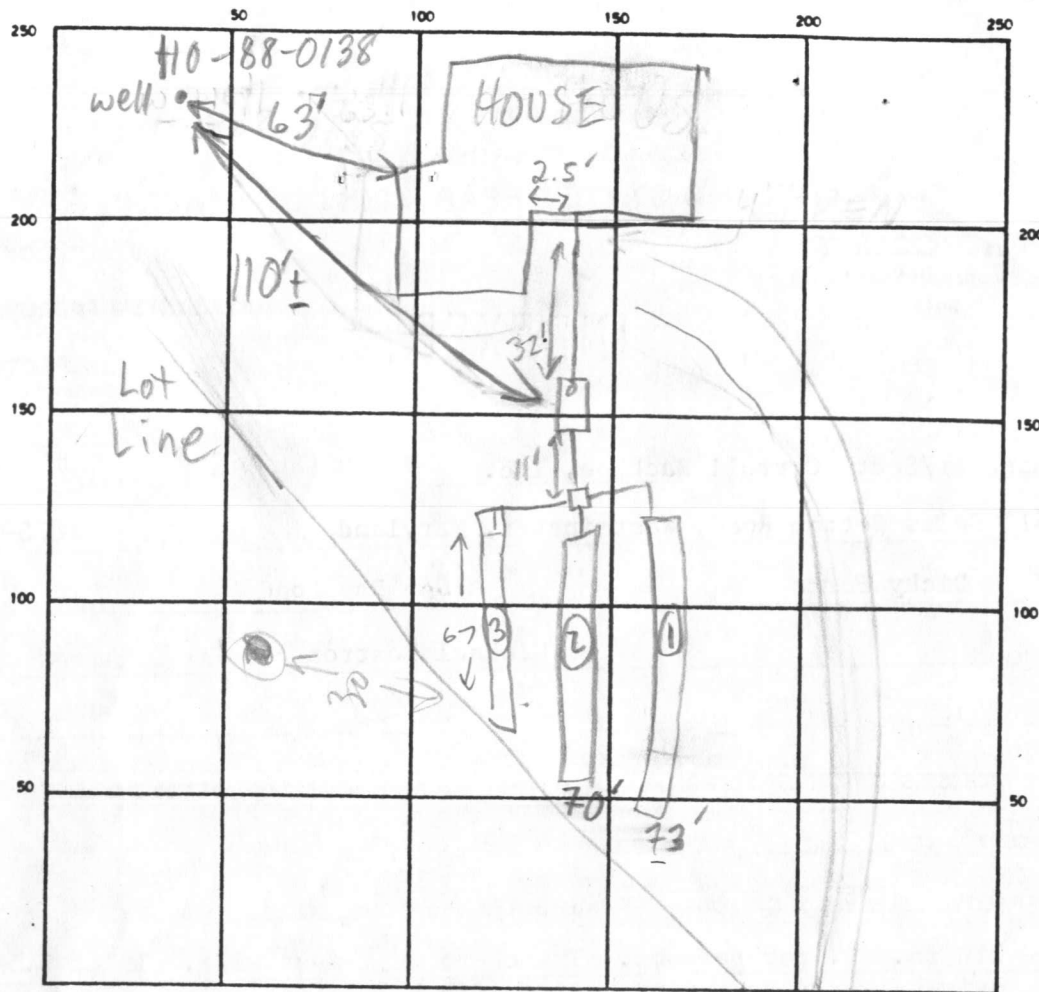
**NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES**

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

**\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.**

HD-260

A 25053



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE

DAY RD

SEPTIC TANK. LEVEL 1500 GAL - OK CLEANOUTS OK - S.T.

DISTRIBUTION BOX. LEVEL \_\_\_\_\_

DRAIN FIELD/TILE FIELD. DEPTH 7.5 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 67 70 73 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 210 x 4 = 840 SQ. FT.

DRYWELL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA 840 SQ. FT.

REMARKS 11/7/89 #1 EXTREMELY LARGE ROCK FRAGS AT S.T. (TO 4-5')  
VERY FEW FRAGS IN TRENCHES; EXTRA SEALANT APPLIED TO S.T.;  
TRENCH 2 TO START 2' OUT FROM DB. MR

11/17/89 #2 NO HOUSE CONN; FINISH & COVER TRENCHES

① 4 ② MR 11/20/89 TRENCHES COMPLETE - OK TO COVER. HOUSE CONNECTION REQ'D. CW,

7/30/90 HOUSE CONN OK - VERIFIED BY WATER FLOW MR

DATE SYSTEM APPROVED 7/30/90 INSPECTOR M. Pitkin

HOWARD COUNTY HEALTH DEPARTMENT  
Bureau of Environmental Health  
3525-H Ellicott Mills Drive  
Ellicott City, MD 21043  
461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation ☒  
Replacement ☐

Receipt # 45070  
Date 10-5-89

Name of Installer Allen M. Van Sant inc

Telephone 442-2221

License Number 1862

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner Michael H Bostrom Telephone

Subdivision Pickers Farm Lot # 9 Well Tag # HO-88-0138

Site Address 1045 Day Rd SV 21784

Pump

1. Type
  - a. Deep well jet ☐
  - b. Shallow well jet ☐
  - c. Submersible ☒
2. Make Goulds
3. Model # 5ES010412
4. Capacity 5 GPM

Motor

1. Horsepower 1/2
2. RPM
3. Voltage 
  - a. 110 ☐
  - b. 220 ☒

Pitless Adapter

1. Make Hannibal
2. Model #
3. Depth 3 FT.

5. Pump exceeds well capacity Yes ☐ No ☒
6. If Yes, is low pressure cutoff switch installed? Yes ☒ No ☐
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☐ Cable guards ☒ Other ☐

Tank

1. Capacity 42
2. Pressure relief valve? yes

Piping

1. Type #160 LB.
2. Size 1"
3. NSF and/or BOCA Code approved yes
4. Depth of supply line 3 FT

Well data

1. Depth 400 ft.
2. Yield  GPM
3. Static water level  ft.
4. Will water supply be disinfected by installer? ☐

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: [Signature]

Date: 10-5-89

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.



58.48'

$$818.46$$

All elevations  
are assumed

Well Elev. 91.5' ✓  
BE Elev. 88.0' ✓  
FF Elev. 97.0' ✓

Inverts

Out of house 94.5' ✓ - G.M.T.  
Into septic tank 94.0' ✓  
Out of septic tank 93.5' ✓  
Into dist box 93.0' ✓  
Into trench 93.0' ✓

Existing grades

Septic tank	95.5'✓
Dist. Box	97.0'✓
Trench	96.5'✓

Trenches total 210' ✓  
septic tank 1250 gallon ✓

I certify that the above  
measurements are actual and  
correct for this property.

Signed: M H Burton

$L = 100'$   
 $R = 275'$

BLDG. PERMIT SIGNED  
AND RETURNED 10/10/88  
BP 21721  
DAC

Septic  
Elevation/site  
Plan  
for

Michael H. Bostro  
Lot #9  
1045 Day Rd.  
Sykesville, MD  
21784

$$1'' = 50'$$



1 0663  
SEQUENCE NO.  
(DENY USE ONLY)  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

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.

COUNTY  
NUMBER A-25053

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

8 13

092988

22 900 26  
(TO NEAREST FOOT)

40-88-0138  
28 29 30 31 32 33 34 35 36 37

OWNER BOSTON MIKE  
STREET OR RFD DAY ROAD first name MIKE TOWN SPYKESVILLE  
SUBDIVISION DICKLY FARMS SECTION 9 LOT 9

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		Check if water bearing
	FROM	TO	
Top Soil	0	1	
Rd. mica	1	30	
Tan mica	30	30	
Bd. mica	109	135	
Blue mica	135	400	

GROUTING RECORD  
WELL HAS BEEN GROUTED  
(Circle Appropriate Box)  
TYPE OF GROUTING MATERIAL  
CEMENT CM BENTONITE CLAY BC  
NO. OF BAGS 11 NO. OF POUNDS 1100  
GALLONS OF WATER 55  
DEPTH OF GROUT SEAL (to nearest foot)  
from 0 ft. to 24 ft.  
(enter 0 if from surface)

CASING RECORD  
casing types insert appropriate code below  
STEEL ST CONCRETE CO  
PLASTIC PL OTHER OT  
MAIN CASING TYPE  
Nominal diameter top (main) casing (nearest inch) 6  
Total depth of main casing (nearest foot) 38

OTHER CASING (if used)  
diameter inch from to

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

DEPTH (nearest ft.)  
1 10 2 38 3 400  
EACH SCREEN  
1 8 9 11 15 17 21  
2 23 24 26 30 32 36  
3 38 39 41 45 47 51  
SLOT SIZE 1 2 3  
DIAMETER OF SCREEN 56 (NEAREST INCH)  
from to

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

PUMPING TEST  
HOURS PUMPED (nearest hour) 6  
PUMPING RATE (gal. per min. to nearest gal.) 2  
METHOD USED TO MEASURE PUMPING RATE Bucket  
WATER LEVEL (distance from land surface)  
BEFORE PUMPING 40  
WHEN PUMPING 1162  
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 YES NO  
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE  
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:  
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  
LAND SURFACE 2 (nearest foot)  
50 51

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)

CIRCLE APPROPRIATE LETTER  
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 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.

DRILLERS IDENT. NO. 40  
DRILLERS SIGNATURE Mike  
(MUST MATCH SIGNATURE ON APPLICATION)  
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

COUNTY





Oct 3, 1988  
10:00

Review of 12/9/88 CW

FIELD DATA SHEET  
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 88-0138  
Location of property (road) DAY ROAD  
Subdivision DICKY FARMS Lot 9 Block - Plat - Sec. -  
Well Driller L. FRANKLIN EASTERDAY Owner BOSTRON, MIKE

Depth of well 400 26 PM  
Distance of measuring point (M.P.) above ground 1 1/2 ft.  
Static water level (S.W.L.) below M.P. 40 ft.

I. High rate pumping -- reservoir drawdown

Time pump started 10:00 Pumping rate 10 gpm  
Total time 3 min to reach pumping water level 165 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

TIME (in 15 minute intervals)	WATER LEVEL below M.P.	PUMPING RATE 1 time to fill 5 gallon bucket	FLOW METER READING (if used)	CALCULATED FLOW (gallons per minute)
10:30	165'	30 sec	90 ...	2 gpm
10:45	165'	30	pump at 20'	2
11:00	165'	30	Diffusion	2
11:15	165'	30		2
11:30	164'	30		2
11:45	164'	30		2
12:00	164'	30		2
12:15	164'	30		2
12:30	164'	30		2
12:45	164'	30		2
1:00	164'	30		2
1:15	163'	30		2
1:30	163'	30		2
1:45	163'	30		2
2:00	163'	30		2
2:15	163'	30		2
2:30	163'	30		2
2:45	163'	30		2
3:00	162'	30		2
3:15	162'	30		2
3:30	162'	30		2
3:45	162'	30		2
4:00	162'	30		2
4:15	162'	30		2



RECEIVED  
HOWARD COUNTY  
HEALTH DEPT  
ELICOTT CITY, MD.

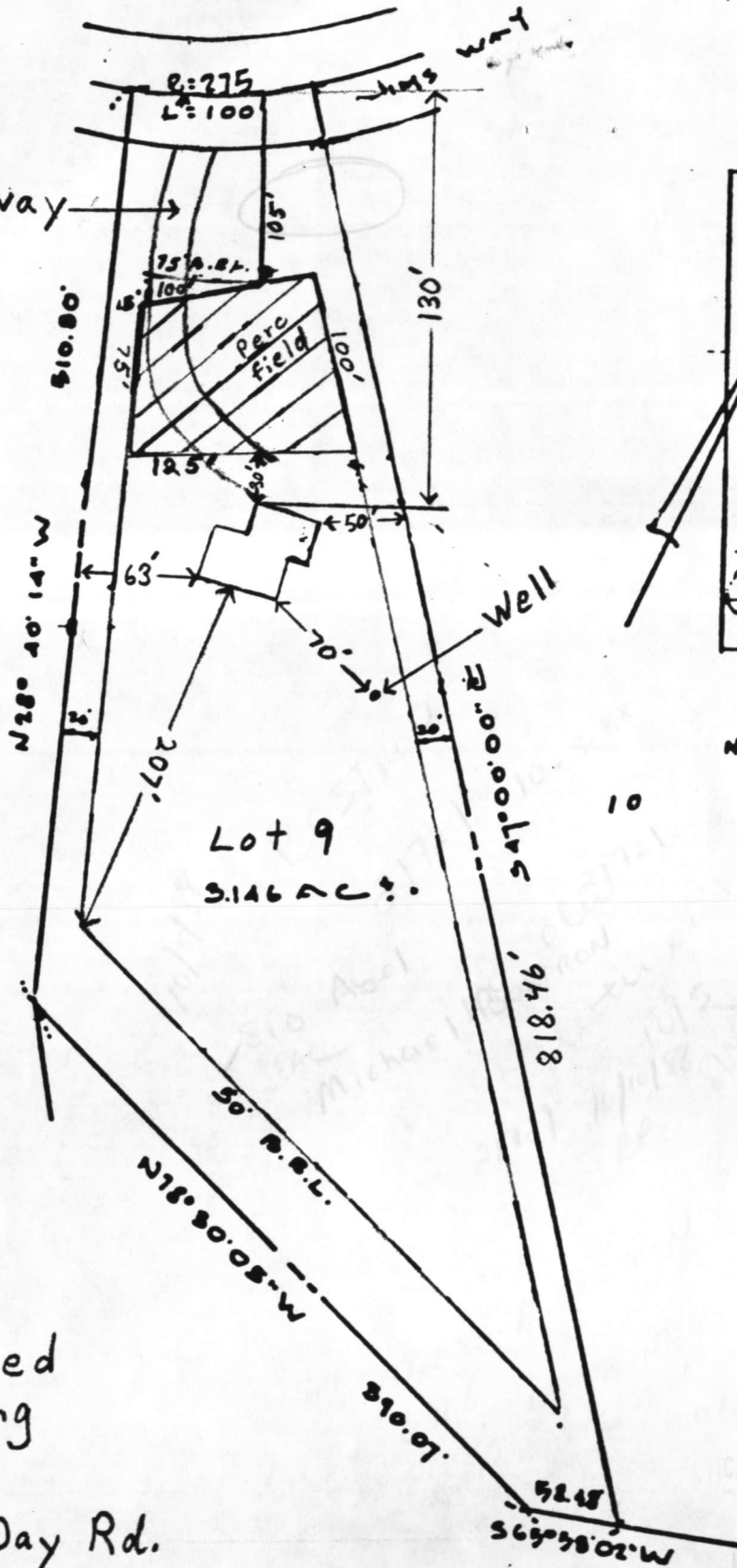
Nov 14 9 23 AM '88

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HOWARD COUNTY  
HEALTH DEPT

Nov 14 4 17 PM '88

DIVISION OF  
ENVIRONMENTAL  
HEALTH

Driveway



THE LOT SHOWN HEREON COMPLIES  
THE MINIMUM OWNERSHIP WIDTH  
LOT AREA AS REQUIRED BY THE  
MARYLAND STATE DEPARTMENT OF  
HEALTH AND MENTAL HYGIENE.

APPROVED FOR PRIVATE WATER &  
PRIVATE SEWAGE SYSTEMS.

HOWARD COUNTY HEALTH DEPARTMENT

*John P. [Signature]* 12-  
COUNTY HEALTH OFFICER DA

TAX MAP 9 PARCELS 255 th

NO WELL EXISTING ON LOTS 8 & 10

FIELD LOCATED PERC FILES

LOT 9 FIGHTY FARM  
DEED 711 Folio 552  
3rd ELECTION DISTRICT  
HOWARD COUNTY, MD  
SCALE 1"=100' DEC. 5, 1977

Proposed  
Building  
Site

1045 Day Rd.  
Lot #9

Michael H. Boston

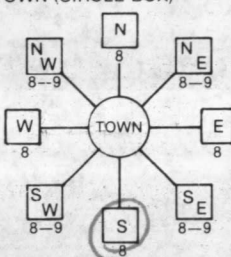
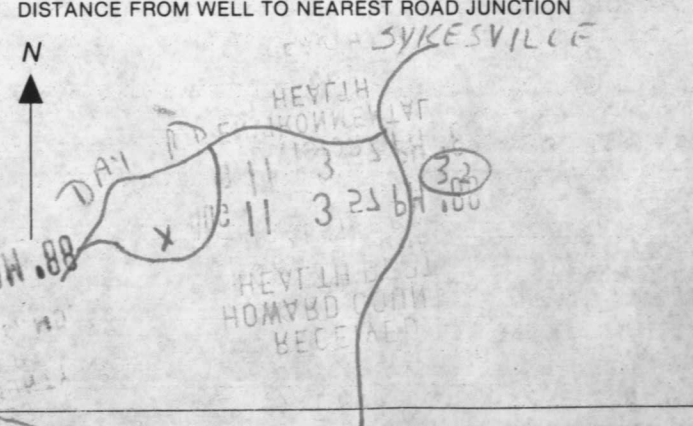
HUDKINS ASSOCIATES  
231 JEFFERSON SQUARE  
COLUMBIA, MD 21044

RECEIVED  
HOWARD COUNTY  
HEALTH DEPT

OCT 5 8 56 AM '88

DIVISION OF  
ENVIRONMENTAL  
HEALTH



B 1 <b>2570</b> <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY) 081188	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	STATE PERMIT NUMBER <b>40-88-0138</b> ✓ <small>fill in this form completely</small>
Date Received (APA) <b>081188</b> OWNER INFORMATION 15 Last Name <b>BOSTRON</b> Owner First Name <b>MIKE</b> 36 <b>6906</b> Street or RFD <b>UPPER MILLS CI</b> 57 <b>BALTIMORE</b> Town 70 State 72 <b>MD</b> Zip 76 <b>21228</b>		B 3 LOCATION OF WELL <b>R 42343</b> 1 <b>HOWARD</b> 21 COUNTY 23 SUBDIVISION <b>DICKER FARMS</b> 42 SECTION 44 <b>9</b> 46 LOT 48 <b>9</b> 50 52 NEAREST TOWN <b>SYKESVILLE</b> 71 MILES FROM TOWN (enter 0 if in town) <b>1</b> 73 <b>M</b> 76 <b>I</b> 77 <b>1</b> 78	
DRILLER INFORMATION Driller's Name <b>George F. Easterday</b> 77 License No. 80 <b>40</b> L. Franklin Easterday, Inc. Firm Name <b>9265 Brown Church Rd., Mt. Airy, Md. 21771</b> Address Signature <b>George F. Easterday</b> Date <b>8/9/88</b>		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD <b>DAY RD</b> 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="radio"/> 32 EAST <input type="radio"/> WEST <input type="radio"/> SOUTH <input type="radio"/> 34 <b>500</b> 37 DISTANCE FROM ROAD ENTER FT or MI <b>FT</b> 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <b>5</b> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>500</b> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <b>HOWARD</b> COUNTY NO. <b>A 25053</b> STATE SIGNATURE _____ INSERT S _____ 41 DATE ISSUED <b>081988</b> CO SIGNATURE <b>Charles E. Easterday</b> EXP. DATE <b>2/19/89</b> NORTH GRID <b>548000</b> 50 55 EAST GRID <b>0808000</b> 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <b>WELL</b> 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E <b>800 8</b> N <b>540 8</b> 9/29/88 (C.B.D. at site) approx 10' 30" well 11 Bags of cement 28' casing 24' ground-open hole. 2' casing above ground. 000 Tag on V. C. RD	
APPROXIMATE DEPTH OF WELL <b>200</b> 24 28 FEET APPROXIMATE DIAMETER OF WELL <b>6</b> NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="radio"/> JETTED <input type="radio"/> Jetted & DRIVEN <input type="radio"/> 30- <b>AIR-ROTARY</b> AIR-PERCussion ROTARY (Hydraulic Rotary) 37 <b>CABLE</b> REVERSE-ROTARY Drive-POINT other _____	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ 54 <b>G A P</b> 63 FORCE <b>C S</b> WRITE INITIALS IN BOX PERMIT No. <b>40-88-0138</b> 67 68 70 71 72 73 74 75 76 77 78 79 SPECIAL CONDITIONS			

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HOWARD COUNTY  
HEALTH DEPT.  
ELICOTT CITY, MD.

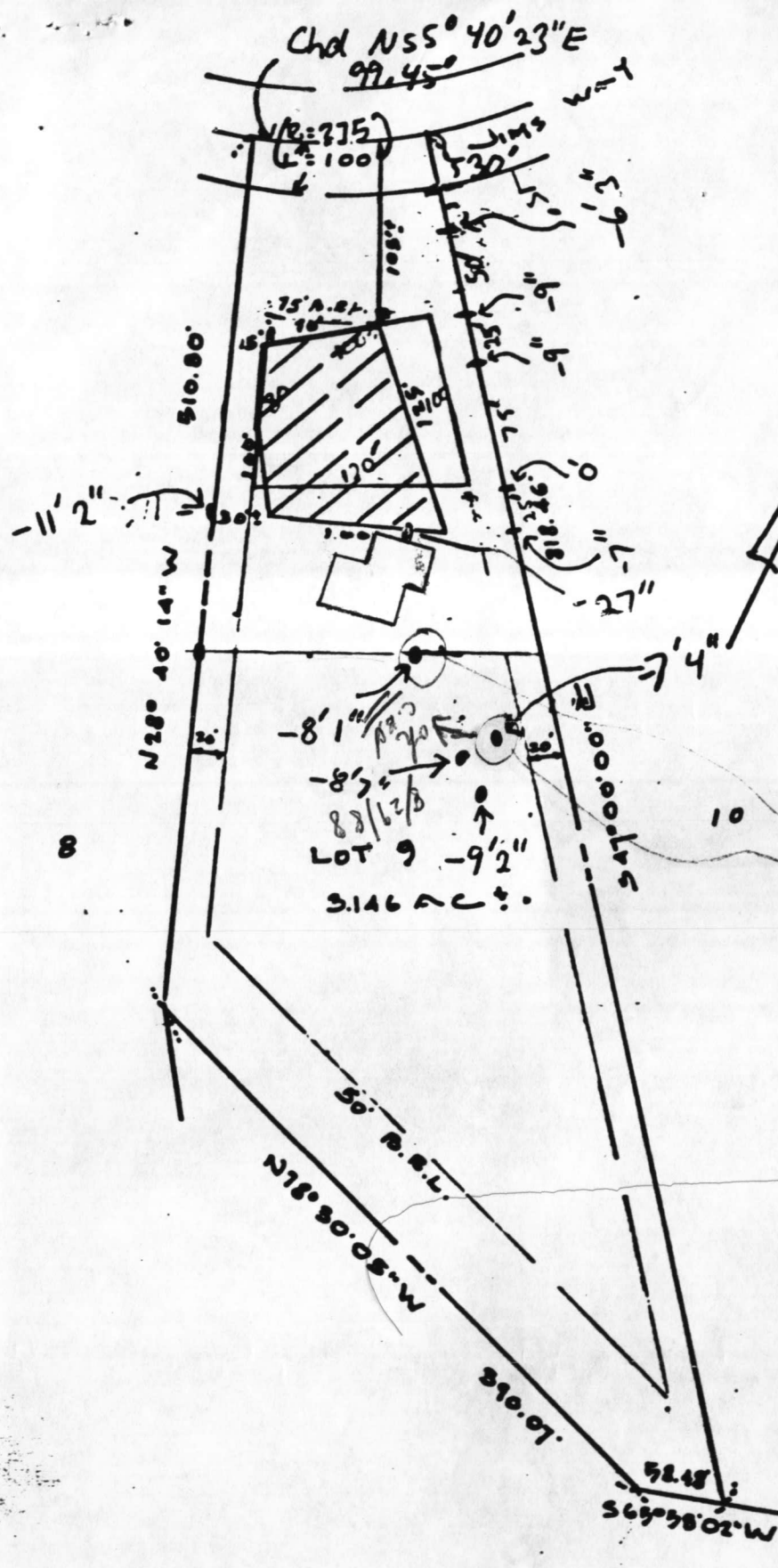
AUG 11 9 50 AM '88

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HOWARD COUNTY  
HEALTH DEPT.

AUG 11 3 57 PM '88

DIVISION OF  
ENVIRONMENTAL  
HEALTH

*pamela*  
*Rd*  
*E.C. Md*



*Approved 12/22/77*

THE LOT SHOWN HEREON COMPLIES  
THE MINIMUM OWNERSHIP WIDTH &  
LOT AREA AS REQUIRED BY THE  
MARYLAND STATE DEPARTMENT OF  
HEALTH AND MENTAL HYGIENE.

APPROVED FOR PRIVATE WATER AND  
PRIVATE SEWAGE SYSTEMS.

HOWARD COUNTY HEALTH DEPARTMENT

*John Ferguson* 12-2  
COUNTY HEALTH OFFICER DAT

TAX MAP 9 PARCELS 255 the

NO WELL EXISTING ON LOTS 8 & 10

well location H2  
well location H1

FIELD LOCATED PERC HOLES

LOT 9 RICKY FARM  
DEED 711 Folio 552  
3rd ELECTION DISTRICT  
HOWARD COUNTY, MD  
SCALE 1"=100' DEC. 5, 1977

*Walter Par*  
FRUDKINS ASSOCIATES  
231 JOSEPH SQUARE  
COLUMBIA, MD 21044



# APPLICATION

A 25053

SEWAGE DISPOSAL TESTING

P. \_\_\_\_\_

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 465-5000, EXT. 356

DISTRICT 3<sup>rd</sup>DATE 12/27/76

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

Charles Wehrle Michael Boston

ADDRESS

ELLICOTT CITY, Md.

PHONE

465-8155

PROPERTY LOCATION:

Call Carol Ann Clark Summit Realty 531 5115 or

SUBDIVISION

Pickney Farms

LOT NO.

9 about per

ROAD AND DESCRIPTION

1045 DAY ROAD

SIZE OF LOT

3.1461 A/C

TYPE BLDG.

3

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

Al & Ed

APPROVED BY \_\_\_\_\_

FOR \_\_\_\_\_

DATE \_\_\_\_\_

(KIND OF SYSTEM)

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_

DATE \_\_\_\_\_

(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS \_\_\_\_\_

DATE \_\_\_\_\_

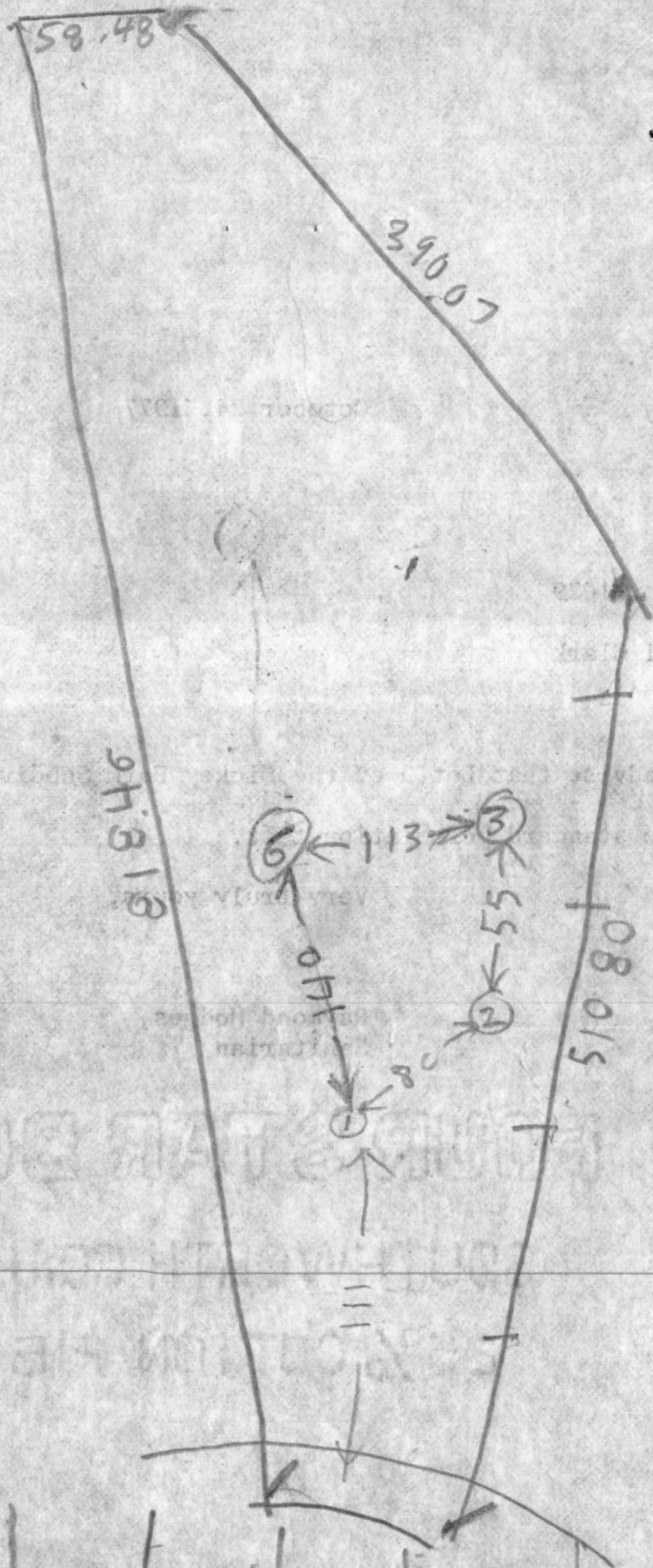
REASONS FOR REJECTION OR HOLDING

3/24/77 - Does not have10000 sq ft perc area Dig More holes R/H11/27/77 Perc OK Now Hold for Plot R/H.

BLDG. PERMIT SIGNED

AND RETURNED 10/10/88**THIS IS NOT A PERMIT**BP21721  
SA





See original  
per sheet also  
8 Plat with  
California Holes

Hole 6 Highest  
Use for DW  
Hole 1 next  
highest

11/23/77	6D	12	141	144	144	146	2
11/23/77	6S	4	144	147	147	150	3

Texted By B. Hodger

also Present Ron Clark  
Kenny Allen



October 24, 1977

Strimel Real Estate  
6389 Ten Oaks Road  
Clarksville, Maryland 21029

ATTENTION: Mrs. Carol Clark

Dear Mrs. Clark:

This is to advise that Lot 9 of the Dickey Farm Subdivision  
has not yet passed the standard percolation test.

Very truly yours,

Raymond Hodges,  
Sanitarian

RH:hs