

7-2
WB1
12N
7-2-85
approved
Sabel

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

P 35665

A @ 28317

7/2/85
29 Sept
10:10 & after 12:01

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

03-307387

ELLICOTT CITY

DISTRICT 3rd

INDEXED

DATE 6/18/85

Earl E. Preston Jr., Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 2233 Engle Road, Fallston, Maryland 21047 PHONE 557-8100

SUBDIVISION Farside ROAD 11742 Spring Haven Court 74

PROPERTY OWNER Grace & Luke Koo

ADDRESS

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

GARBAGE GRINDER? YES X NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

Drywell to have 183 sq. ft. effective absorbant sidewall area per bedroom below inlet. Inlet to be maximum depth 4 feet below original grade and maximum depth 10 feet. LOCATION per engineers platt 30-50 feet in from left property line and 315-330 feet down left property line from left front corner point when facing lot from Court. or if drywell and trench used need: (1) 5' earth buffer between drywell and trench (2) inspection of trench before and after gravel is installed. (3) Run trench on contour.

PLANS APPROVED BY C. B. Streaker DATE 12/14/79

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.

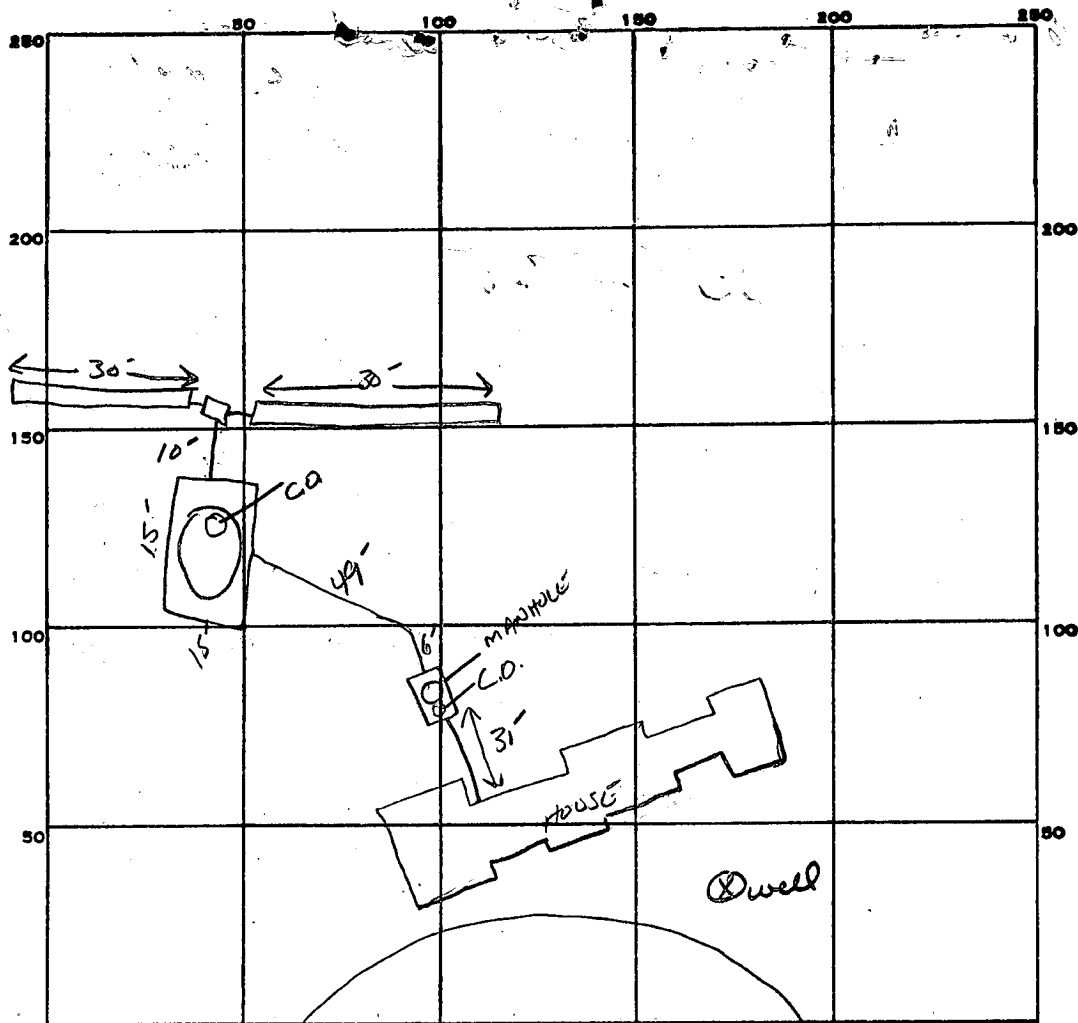
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 28317



PERMIT CARD ✓

SEPTIC TANK, LEVEL ✓ 2000 GAL

CLEANOUTS ✓ ST & DW MANHOLE ST

DISTRIBUTION BOX, LEVEL ✓

TILE FIELD, DEPTH 10 FT. TRENCH WIDTH 2 FT. INLET 4"

GRAVEL DEPTH 6 FT TOTAL LENGTH 30 ^① 30 ^② FT.

NUMBER OF TRENCHES 2 OFF DB TOTAL BOTTOM AREA 360 [ⓧ]

SEEPAGE PITS, INSIDE DIAMETER 15 X 15 FT. DEPTH BELOW INLET 6 FT.

ABSORBENT AREA 360 SQ. FT. TOTAL SQ FT 720 [ⓧ]

REMARKS 7-2-85 OK TO ADD STONE TO TRENCH + COVER DW TO HOUSE SA

DATE SYSTEM APPROVED 7-2-85 INSPECTOR S Abel

APPLICATION

SEWAGE DISPOSAL TESTING

A 28317

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

NOTE: MANHOLE + COVER
CLEARWAT ON

Septic Tank

POSSIBLY IF OVER

1-3 Bedrooms 1000 gallon
4 Bedrooms 1250 gallon
3' TO FINAL DISTRICT GRADE

② Dry well to have 150 sq ft. effective

absorbent sidewall area per bedroom below inlet.

Unleaded to be ^{max. 4'} below original grade and maximum depth 10'. Location per engineer's plat: 30'-50' in from left property line and 315-339' down left property line from left front corner point when facing lot from court.

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

Grace & Luke Rad
Woodmark Inc
11136 Woodlrose Way

(1) 5' earth buffer between dry well and trench

ADDRESS

PROPERTY LOCATION

Columbia Md. 21044

(2) 2 inspections of trench before and after stone in. NEW #74

SUBDIVISION

Farside

ROAD AND DESCRIPTION

11742 Springhaven Court

(3) Run trench on contour

SIZE OF LOT

TYPE BLDG.

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

APPROVED BY

C. B. Shesher

FOR

Dry Well & Trench

DATE

12/14/79

REJECTED BY

FOR

DATE

BP# 62140

HOLD PENDING FURTHER TESTS

DATE

BLDG. PERMIT SIGNED
AND RETURNED 12/23/83
Serial # 56778 SFLS

REASONS FOR REJECTION OR HOLDING

Left property line being 631.8 in length.
11/9/81 from Scott Shesher, ok to move Dry Well down 15' only.
C.B.S.

THIS IS NOT A PERMIT

APPLICATION

A 28317

SEWAGE DISPOSAL TESTING

P. _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICESP. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 356DISTRICT 1000 gallons
3DATE May 12, 1978
4 Bedrooms 1250 gallonsTO: 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 Woodmark, Inc.ADDRESS 9267 Balto. Nat'l. Pike PHONE 461-2889

PROPERTY LOCATION:

SUBDIVISION Farside LOT NO. 6159ROAD AND DESCRIPTION Rt. 40 West to left on Rt. 114, left on Folly Quarter, left on
Homewood, 1 mile to property on leftSIZE OF LOT 3 plus acres TYPE BLDG. 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 [Signature]APPROVED BY _____ FOR _____ DATE 11
(KIND OF SYSTEM)REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

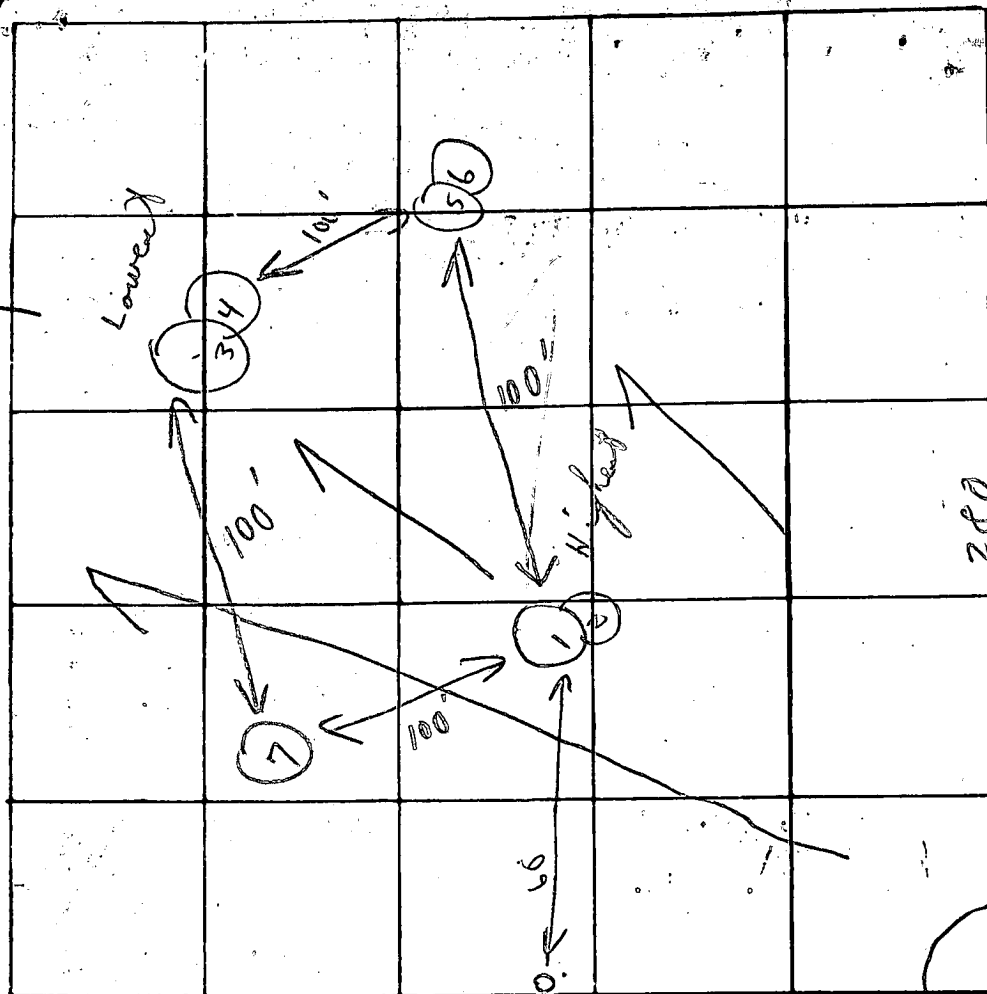
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Final #74

59



59

Soil Profile

Below clay

room

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
7/7/78	1	4'	1:26	1:28	1:28	1:30	2m
	2	12'	1:25	1:27	1:27	1:29	2m
	3	4 1/2'	1:28	1:29	1:29	1:31	2m
	4	12 1/2'	1:28	1:30	1:30	1:34	4m
	5	3 1/2 - 4'	Visual		similar		10
	6	10 1/2'	"		to		
	7	4' 1/3	Sandy loam		other		

150 sq ft. per bedroom

Tests

3 m avg

unless 4'

Holes { (5,6) } (7)

similar elevation

REMARKS

Tests in open field

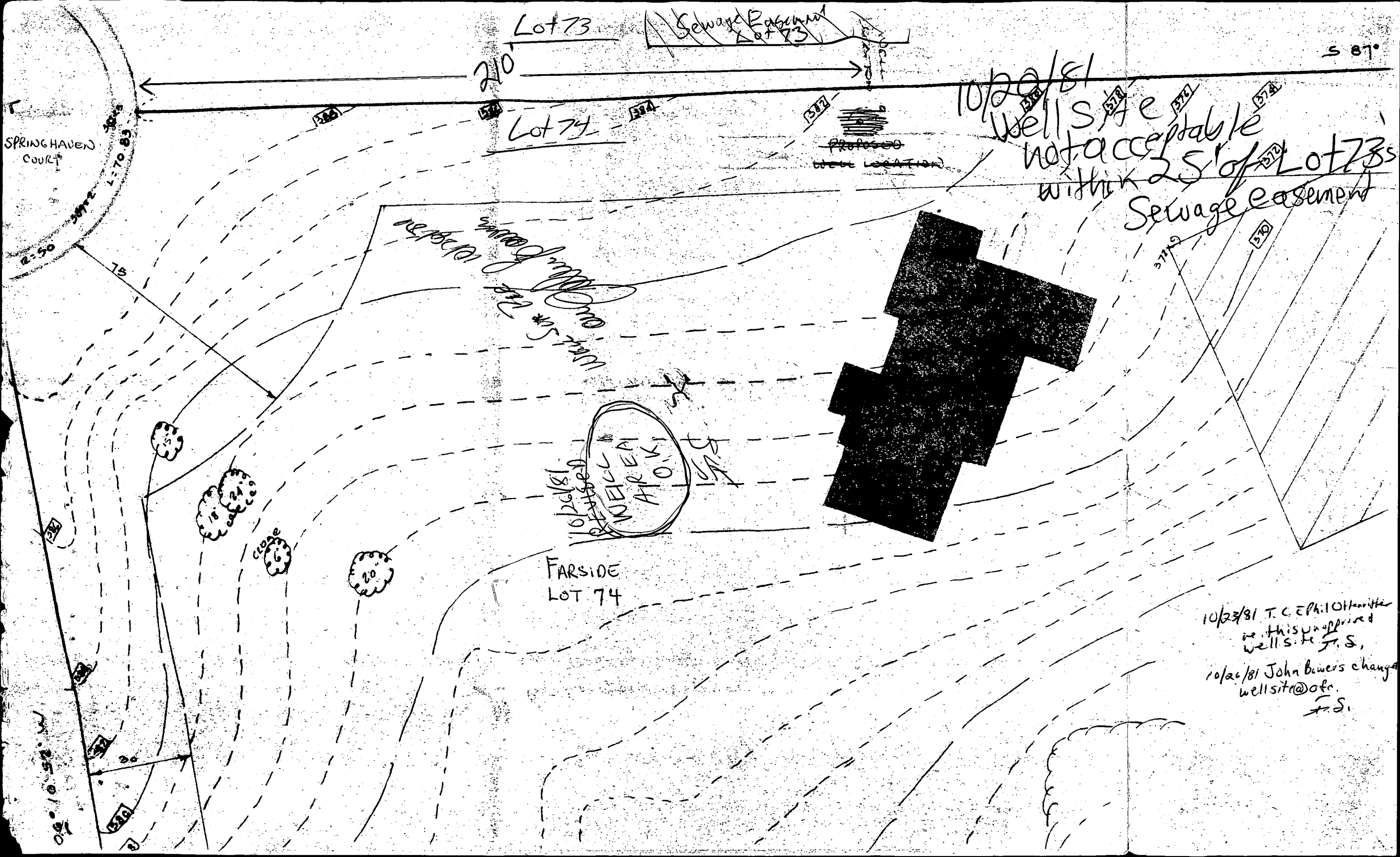
TYPE OF SOIL

TESTED BY:

J. S. + C. B.

ALSO PRESENT:

Same as yesterday



B 1 5441 SEQUE WRA U

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

APPLICATION FOR PERMIT TO DRILL WELL

please print or type

fill in this form completely

DATE RECEIVED 4-6-81
8 (WRA USE ONLY) 13

OWNER INFORMATION

LAST NAME 15 Woodmark Inc
OWNER FIRST NAME 34
12150 Mt Albert Ct
STREET OR RFD 55
Ellicott City MD
TOWN 57 STATE 5 ZIP 76

B 1 CONTINUED DRILLER INFORMATION

Stanley W. Bollinger Jr 308
DRILLER'S NAME 77 LICENSE NO. 80
SIGNATURE 4/1/81 DATE

B 2 WELL INFORMATION

APPROX. PUMPING RATE (GAL. PER MIN.) 5
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 550

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 165 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 DEEPEENED 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 DEEPEEN AN EXISTING WELL
- PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEEN (IF AVAILABLE) 41 52

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

APPROP. PERMIT NUMBER 54 GAP 63
FORCE INITIALS IN BOX CONDITIONS 40-73-4038
70 71 72 73 74 75 76 77 78 79

B 5 SPECIAL CONDITIONS 8-63 (WRA USE ONLY)

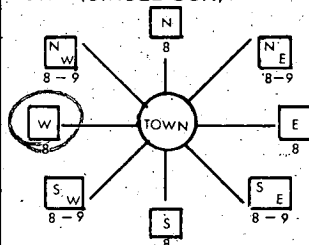
B 3

LOCATION OF WELL

COUNTY 1 2 3 Howard HO-73-4038
SUBDIVISION 23 Fc side
SECTION 44 LOT 48 459 new
NEAREST TOWN 52 Columbia
MILES FROM TOWN (enter 0 if in town) 73 3 MI 76 77 78

B 4

DIRECTION OF WELL FROM TOWN (CIRCLE BOX)



Springhaven Ct

NEAR WHAT ROAD 30
ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST 32 EAST
100
34 DISTANCE FROM ROAD (CIRCLE APPROPRIATE BOX) 37 MI 38 39

SHOW LOCATION OF WELL WITH AN "X" IN THIS BOX

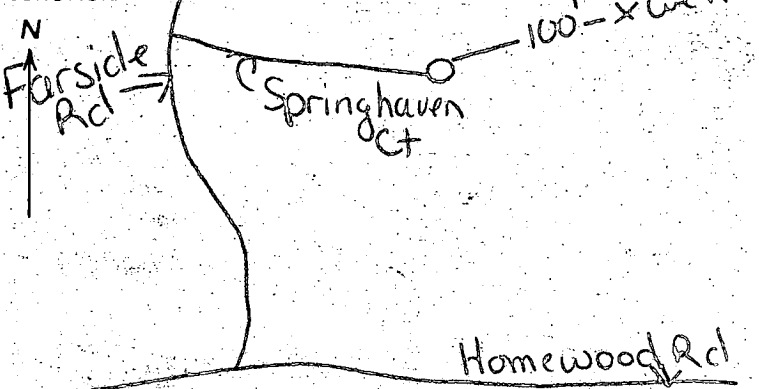
Location OK
21' casing
2' above gr
18' open well
4-bags cement
4/30/82 JS

WRITE THE BOX NUMBER FROM THE MAP HERE

8204
5106

000
000

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 A 28317
COUNTY NAME COUNTY NO.
EHA SIGNATURE STATE HEALTH CIRCLE BOX 41
MO DAY YR 10 26 81
CO SIGNATURE Frank Sh... DATE 10/26/81
NORTH 51 6 EAST 08 24 ELEV. (FT.)
GRID 50 55 GRID 57 63 65 68

HEALTH

C1 1317	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	A28317
Date Received (OEP use only)	DATE WELL COMPLETED	Depth of Well 105 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" HO-73-4038

OWNER	Woodmark Inc.	last name	first name
STREET OR RFD	Springhaven Court	TOWN	Columbia
SUBDIVISION	Farside	SECTION	LOT 74

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 Shale	2 8	
Brown Mica	8 60	
Brown Mica	60 70	117
Blue Mica	70 80	
Granite	80 105	

GROUTING RECORD	
WELL HAS BEEN GROUTED. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
TYPE OF GROUTING MATERIAL	
CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input checked="" type="checkbox"/>	
NO. OF BAGS	NO. OF POUNDS
GALLONS OF WATER	
DEPTH OF GROUT SEAL (to nearest foot)	
from 48 TOP (enter 0 if from surface) ft. to 54 BOTTOM 58 ft.	

CASING RECORD	
casing types insert appropriate code below	
STEEL <input checked="" type="checkbox"/> CONCRETE <input type="checkbox"/>	
PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/>	
MAIN CASING TYPE	
Nominal diameter top(main) casing (nearest inch)	Total depth of main casing (nearest foot)
6	21

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

SCREEN RECORD	
screen type or open hole	
insert appropriate code below	
STEEL <input checked="" type="checkbox"/> BRASS <input type="checkbox"/> OPEN HOLE <input type="checkbox"/>	
PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/>	

C2	
(Seq. no.)	
DEPTH (nearest ft.)	
H O 20 105	

CIRCLE APPROPRIATE BOX	
<input checked="" type="checkbox"/> A	A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED
<input type="checkbox"/> E	ELECTRIC LOG OBTAINED
<input type="checkbox"/> 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.	308
DRILLERS SIGNATURE	Thomas W. Mulligan Jr.
(MUST MATCH SIGNATURE ON APPLICATION)	

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

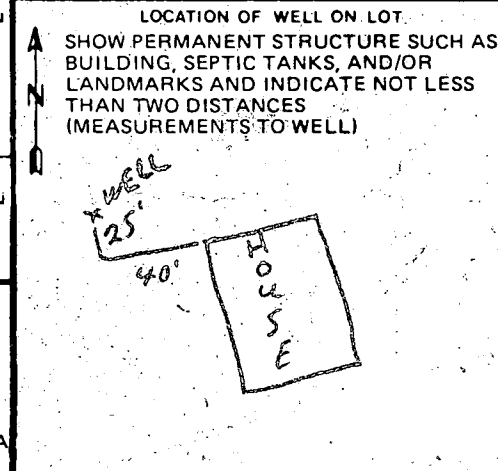
SLOT SIZE	
2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
from to	

GRAVEL PACK	
IF WELL DRILLED WAS FLOWING WELL CIRCLE BOX <input type="checkbox"/>	

OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T	(E.R.-O.S.)
70 <input type="checkbox"/>	72 <input type="checkbox"/>
TELESCOPE CASING	LOG INDICATOR
W Q 74 75 76	
OTHER DATA	

C3	
(Seq. no.)	
PUMPING TEST	
HOURS PUMPED (nearest hour)	2
PUMPING RATE (gal. per min. to nearest gal.)	17
METHOD USED TO MEASURE PUMPING RATE	
Bucket	
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	30
WHEN PUMPING	105
TYPE OF PUMP USED (for test)	
<input checked="" type="checkbox"/> A air	<input type="checkbox"/> P piston
<input type="checkbox"/> C centrifugal	<input type="checkbox"/> R rotary
<input type="checkbox"/> J jet	<input type="checkbox"/> S submersible
<input type="checkbox"/> T turbine	<input type="checkbox"/> O other (describe below)

PUMP INSTALLED	
YES NO	
DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> Y <input type="checkbox"/> 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)	
PUMP HORSE POWER	
PUMP COLUMN LENGTH (nearest ft.)	
CASING HEIGHT (circle appropriate box and enter casing height)	
<input checked="" type="checkbox"/> above	LAND SURFACE
<input type="checkbox"/> below	2 (nearest foot)



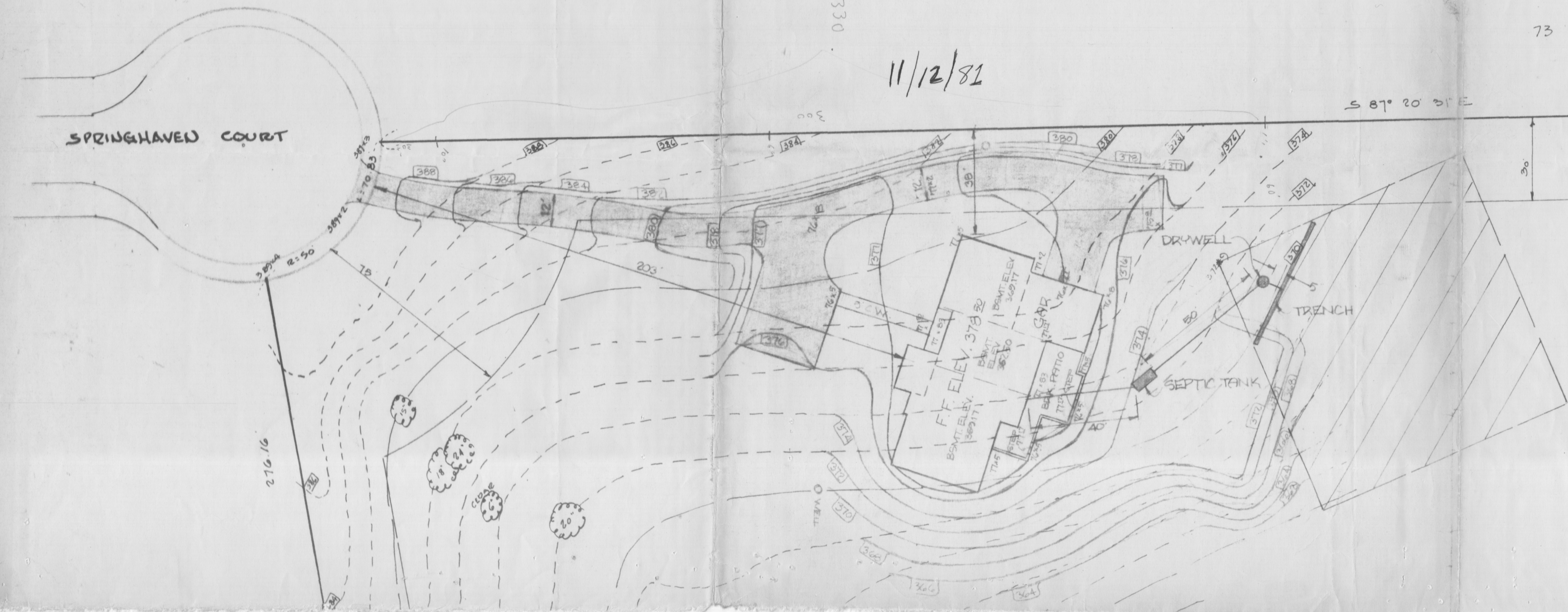


11/12/81

SPRINGHAVEN COURT

S 87° 20' 31" E

73



SPRINGHAVEN COURT

S 87° 20' 31" E

1026.87'

N 06° 10' 52" W

SEE GATEWAY DETAILS SHEET 9

Driveway

Lights

+ HP

Flood Lights

Well

FLOOD LIGHTS

Patio

Greasetrap

Septic Tank

Drywell

Trench

Septic Field

12/2/83
Plan incomplete
N.S.

LOT 74 FARMS

11742 SPRINGHAVEN COURT

N 82° 59' 45" W

