HOWARD COUNTY

INDEXED

ELLICOTT	CITY
DISTRICT.	4

DDRESS 8957 Chapel Avenue, Ellicott Ci	
	ity, Maryland PHONE HO 5-2205
SEWAGE DISPOSAL-SYSTEM LOCATED AT	
· · · · · · · · · · · · · · · · · · ·	and the second of the second o
UBDIVISION	ROAD Forsythe Road (see LOT
	application for better directions)
ROPERTY OWNER James E. Zuck	
DDRESS	
PECIFICATIONS - 4 or 5 bedrooms	•
DRAIN FIELDFEE	ET, BOTTOM AREASQ. FT.
SEEPAGE PITS ABSORBENT SID	
SEPTIC TANK CAPACI	ITY
FOR GARBAGE GRINDER, INCREASE D	DISPOSAL AREA 22% & TANK CAPACITY 50%.
OTHER Dry well - dig pit 16 ft. squ	mare - set block and top for 12 ft. diameter
and fill in rest of pit with gravel. Dry	well to be 8 ft. deep below inlet pipe. Inlet.
pipe to be 3 to 4 ft. below original grade	Max. depth permitted for dry well is 12 ft.
below original grade. Place dry wall abo	out 90 ft. from edge of wood (which is about 800
ft. from Forsythe Rd. and about 54 ft. to from the front. NOTE: ALL PIPE FROM HOU PLANS APPROVED BY D. W. Monaghan PERMIT VOID AFTER THREE YEARS.	the right of the driveway as seen when facing USE TO SEPTIC TANK MUST BE CAST IRON. DATE 5/20/70
	TER BEFORE CALLING FOR AN INSPECTION. COVER NO WORL
	NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE

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

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Penilso 6			ROADWAY AS BAS	E LINE.	TAL.
PERMIT CARD 2 1/2		of marks	uch busself from 1	1 20	
SEPTIC TANK, LEVEL		CLEA	NOUTS	o k	 01
DISTRIBUTION BOX, LEVEL	· · · · · · · · · · · · · · · · · · ·	ga in the second		1. / //	ri , v ar
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GRAVEL DEPTH				FT•	ni il vi od sede
NUMBER OF TREN					in the knows to be
SEEPAGE PITS, INSIDE DIAMET		_FT. DEPTH		<u>У</u> FТ	. St. Iron man
ABSORBENT AF		SQ. FT.			.ช่ง ช่ว อดีซี สถนับ
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DATE SYSTEM APPROVED	199/71	INS	PECTOR_	- junay	13 13 48 1. P. 9.6

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SEWAGE DISPOSAL TESTING

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MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY DISTRICT_4th

DATE 4-30-70

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND	CONSTRUCTION TO CONS	A SEWAGE
I, HEREBY, APPLY FOR THE NECESS DISPOSAL SYSTEM.	SARY TESTS IN ORDER TO CONS	STRUCT (OR RECONSTRUCT) A SEWAGE
PROPERTY OWNER James E. Zuc	ik NA	NIONE 442-2253
ADDRESS McKendree Lane, W	lest friendship, Mu.	PHONE
PROPERTY LOCATION:	A fine	LOT NO.
SUBDIVISION		
ROAD AND DESCRIPTION Forsyth	ne Rd., Sykesville, Md.	coming of QT. 97 vocaing next 1 Constantine Laure
tenths of a mile north	of Old Frederick Rd.	100 100 100 100 100
OCCUPANT	14 10 1 10 10 10 10	•HONEG
PERSON TO CONSTRUCT SYSTEM		PHONE
ADDRESS	The second contract in the	PHONE Single Family Dwelling
SIZE OF LOT 13.5 Acres		YPE BLDG. 5 Redrooms
IF NOT SINGLE RESIDENCE DESCRIBE.	2000	
- V Am	Sich	
SIGNATURE OF APPLICANT		
APPROVED BY Ste Monag hon		DATE DATE
REJECTED BY		м.
HOLD PENDING FURTHER TESTS	D	DATE
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REASONS FOR REJECTION OR HOLDING	1	ACH. AUG W. FRIMMIN.

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			<i>P</i>	pre-M	ET	TEST -	I" DROP.	10 000	1 - 3 - 3
	DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME	
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TESTED BY NIM	 • • •			

REMARKS

WR-W-3 9-70 SEQUENCE NO. STATE OF MARYLAND DEPARTMENT OF WATER RESOURCES DWR USE ONLY STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 (5EQ. NO.) PLS. 30 ON ALL CAROS) APPLICATION FOR PERMIT TO DRILL WELL FILL IN THIS FORM COMPLETELY DATE RECEIVED OWNER FIRST NAME COL. 34 COL 15 LAST NAME STREET OR RFD COL. 55 COL 36 POST COL. 76 COL 57 B 1 CONTINUED DRILLER INFORMATION LOCATION OF WELL (SEQ. NO.) 2 3 (SEQ. NO.) LICENSE COUNTY (OO NOT ABBREVIATE COUNTY NAME) DATE ! NUMBER 77 80 SUBDIVISION SECTION FIRST NAME DRILLER LAST NAME NEAREST TOWN SIGNATURE_ MI MILES FROM TOWN (ENTER O IF IN TOWN) 76 77 78 B 2 WELL INFORMATION DIRECTION FROM TOWN (SEQ. NO.) MAXIMUM PUMPING RATE (GALLONS PER MINUTE) N NORTH N E NORTHEAST 5 E SOUTHEAST AVERAGE DAILY QUANTITY NEEDED (GALLONS PER DAY) USE FOR WATER (CIRCLE APPROPRIATE BOX) 5 SOUTH NW W SOUTHWEST WEST NORTHWEST D DOMESTIC, HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) NEAR WHAT FARMING, AGRICULTURE, IRRIGATION 30 WEST W 32 E INOUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOVERNMENT. FT OISTANCE FROM ROAD (ENTER DISTANCE AND CIRCLE APPROPRIATE BOX) 37 MI MUNICIPAL WATER SUPPLY MUST HAVE STATE HEALTH DEPT. APPROVAL DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS, ROADS AND PRIVATE WATER COMPANY 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. APPROXIMATE DEPTH OF WELL APPROXIMATE DIAMETER OF WELL J(NEAREST INCH) METHOD OF DRILLING USED (CIRCLE APPROPRIATE METHOD) BORED (OR AUGERED) JETTED DRIVEN 30-37 AIR-ROTARY AIR-PERCUSSION ROTARY (HYDRAULIC ROTARY) DRIVE - POINT CABLE REVERSE ROTARY OTHER (DESCRIBE) _ REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX) N THIS WELL WILL NOT REPLACE AN EXISTING WELL Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 5 THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY D THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) NOT TO BE FILLED IN BY DRILLER (DWR USE ONLY) APPROPRIATION PERMIT NUMBER BOX G WQ NUMBER N CONDITIONS 0/5 71 72 73 74 75 76 77 78 73 HEALTH DEPARTMENT APPROVAL B 4 CONTINUED NORTH CORDINATE (SEQ. NO.) 3 STATE HEALTH S CIRCLE BOX EAST **COUNTY NAME** COUNTY NO. CORDINATE MO. DAY DATE APPROVED BY WELL HEAD (FEET) B 5 SPECIAL CONDITIONS 8-63 (DWR USE ONLY (SEQ. NO.)

Il 12 megenting
FILE Well Growting DATE REPORTED 7/8/71
PROPERTY OWNER James Wuck
P.O. ADDRESS TOTAL TELEPHONE
DIRECTIONS TO PROPERTY Sykeside Set.
approx 1/2 mile from ald And Rd. off Rt. 97
left side - horse site tock off road - pont in host -
INFORMANT (feside Constantine)
CONDITION FOUND -9-71 8 of Cosing 2008 -11 bays Coment
Co # 2693 OK DWN
Cott 2693 OK Dur
ACTION TAKEN
ACTION TARDA
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FINAL DISPOSITION
FINAL DISPOSITION

SEQUENCE NO. THIS REPORT MUST BE SUBMITTED WITH-IN 30 DAYS AFTER WELL COMPLETION STATE OF MARYLAND C 7990 DEPARTMENT OF WATER RESOURCES STATE OFFICE BLDG., ANNAPOLIS, MARYLAND 21401 FILL IN THIS FORM COMPLETELY (SEQ. NO.) (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS) **WELL COMPLETION REPORT** DEPTH OF WELL DATE RECEIVED PERMIT NO. FROM "PERMIT TO DRILL WELL" DATE WELL COMPLETED (TO NEAREST FOOT) DRILLERS IDENTIFICATION NO. OWNER. LAST NAME STREET OR RFD-POST OFFICE -WELL DESCRIPTION WELL LOG GROUTING RECORD STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) Y N (SEO. NO.) PUMPING TEST FEET USE ADDITIONAL SHEETS TYPE OF GROUTING MATERIAL (CIRCLE BOX) FROM TO ВС BENTONITE CLAY HOURS PUMPED (TO NEAREST HOUR) CITY, MO. 45 46 PUMPING RATE
(GALLONS PER MINUTE TO NEAREST GALLON) NO. OF BAGS_ NO. OF POUNDS _ GALLONS OF WATER_ METHOD USED TO MEASURE PUMPING RATE DEPTH OF GROUT SEAL (TO NEAREST FOOT) WATER LEVEL: (DISTANCE FROM LAND SURFACE) FROM _____FT. 48 (ENTER 0 IF FROM SURFACE) NEAREST FOOT) 52 FT. TO _____ CASING CASING RECORD (NEAREST INSERT c o 5 T TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) APPROPRIATE CONCRETE CODE T TURBINE BELOW ОТ PL 27 OTHER PLASTIC O OTHER (DESCRIBE 27 BELOW) R ROTARY С CENTRIFUGAL NOMINAL DIAMETER TOTAL OEPTH
TOP (MAIN) CASING OF MAIN CASING
(NEAREST INCH) (NEAREST FOOT) MAIN CASING S SUBMERSIBLE J JET 63 60 61 64 66 70 PUMP INSTALLED OTHER CASING (IF USED) TYPE OF PUMP (WRITE APPROPRIATE LETTER IN DEPTH (FEET) BOX - SEE ABOVE: A, C, J, P, R, S, T, O) FROM (INCH) DRILLER WILL INSTALL PUMP N CAPACITY: SCREEN RECORD SCREEN TYPE OR OPEN HOLE 35 BR но 5 T INSERT PUMP HORSE POWER APPROPRIATE BRASS OPEN HOLE CODE PUMP COLUMN LENGTH (NEAREST FOOT) 43 BELOW 47 PL ОТ CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) OTHER PLASTIC + ABOVE C 2 LAND SURFACE 2 13 (SEQ. NO.) - BELOW DEPTH (NEAREST WHOLE FOOT) EACH LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL). 21 SORWEZ CIRCLE APPROPRIATE BOXES 23 30 24 A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED SLOTSIZE 1,___ (NEAREST INCH) C COPY OF ELECTRIC LOG ATTACHED 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 GRAVEL PACK IF WELL DRILLED WAS A 68 F FLOWING WELL CIRCLE BOX DRILLERS NAME DWR USE ONLY (NOT TO BE FILLED IN BY DRILLER) (PLEASE PRINT) (E.R.O.S.) 74 75 76 OTHER DATA AVAILABLE 72 SIGNATURE

WR - W-4

9/70