

04-346718 File

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

P 43145

A 38374

DISTRICT 4th

DATE 11/30/88

DATE SYSTEM APPROVED 11/18/88

INSPECTOR MR YCBS

JACK FYOCK

~~Lendrim Contracting, Inc.~~

IS PERMITTED TO INSTALL X ALTER

ADDRESS 14010 Forsythe Road, Sykesville, Maryland PHONE 442-2416

SUBDIVISION Glenwood Springs ROAD 2815 Shadow Roll Court LOT 26

PROPERTY OWNER James Meadows

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 - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 8 feet below original grade. Effective area begins at 4 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 300 feet down the left (594.15') lot line and 100 feet off the left lot line as seen when facing the lot from Shadow Roll Court. Run trenches on contour toward the rear 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. OK/CW

PLANS APPROVED BY S. Abel DATE 6/14/88

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 TRENCHES ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCHES.

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.

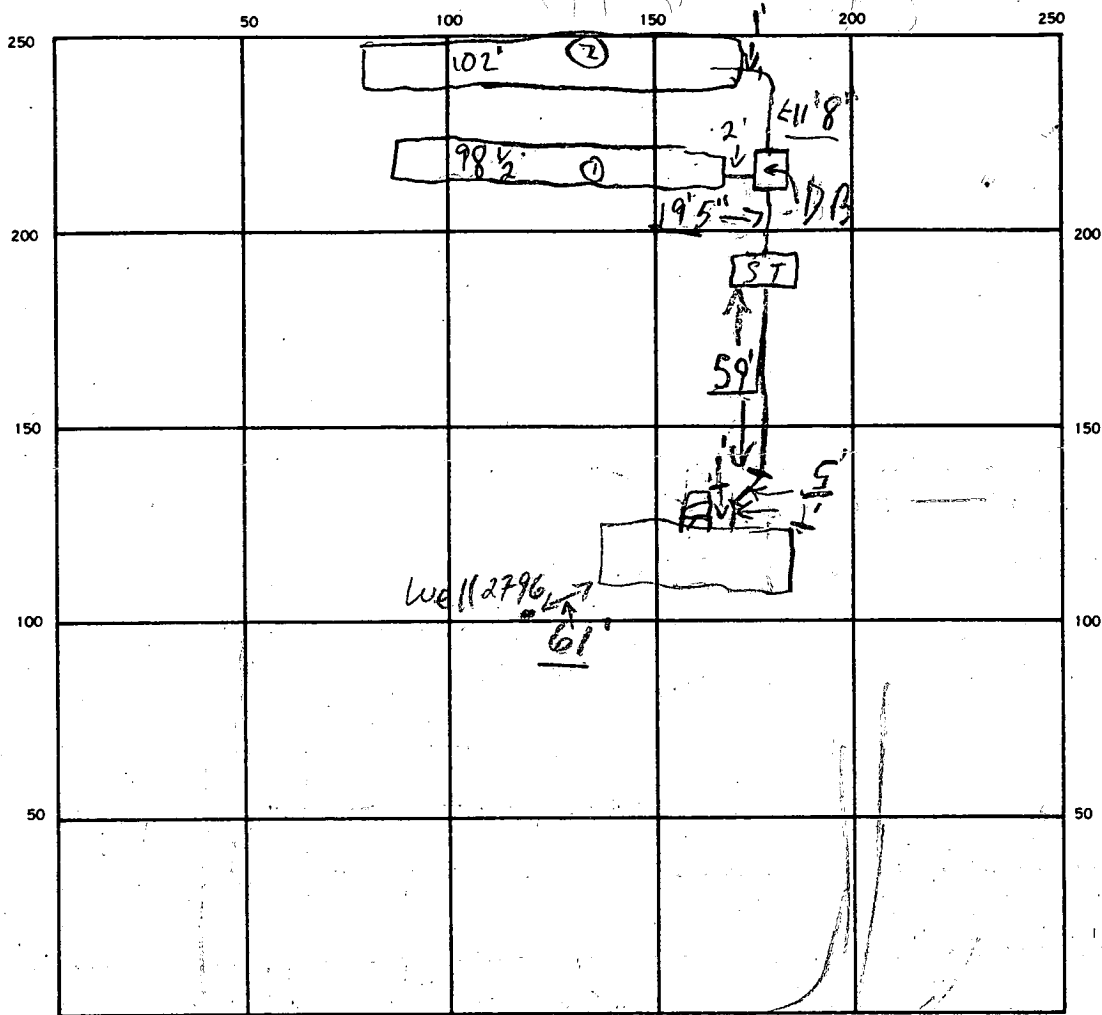
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 38374



INDICATE NORTH — NAME ADJOINING ROADWAY AS BASE LINE.
~~SHADOW ROLL CT~~

SEPTIC TANK, LEVEL OK CLEANOUTS S.T. OK
 DISTRIBUTION BOX, LEVEL OK baffle OK
 DRAIN FIELD/TILE FIELD, DEPTH 8 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 1/2 FT.
 EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH 102 1/2 FT.
 NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 800 SQ. FT.
 DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.
 ABSORBENT AREA 800 SQ. FT.

REMARKS 11/18/88 OK to cover from house to end of trench
Partial MR & CBS; ② Final OK to cover all work
MR & CBS

DATE SYSTEM APPROVED 11/18/88 INSPECTOR MR & CBS

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 461-9933

A 38374
P _____

DISTRICT _____

DATE 10-14-86

*1/29/87
per 0210
pending
approved*

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 James Meadows

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER Ronald Carter

ADDRESS 8388 Court Ave., Ellicott City, Md 21043 PHONE 461-2855

PROPERTY LOCATION:

SUBDIVISION Hakes Property LOT NO. Twenty Six

ROAD AND DESCRIPTION Hobbs Road 2815 Shadow Roll Ct. Return of 4/29/87

TAX MAP 14 PARCEL # 87,83,202

SIZE OF LOT 3+ ACRES TYPE BLDG. SFD
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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. I ALSO AGREE TO COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

Ronald D. Carter
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING for fold located hakes & sub + plat

BEDG. PERMIT SIGNED
AND RETURNED 7-6-88

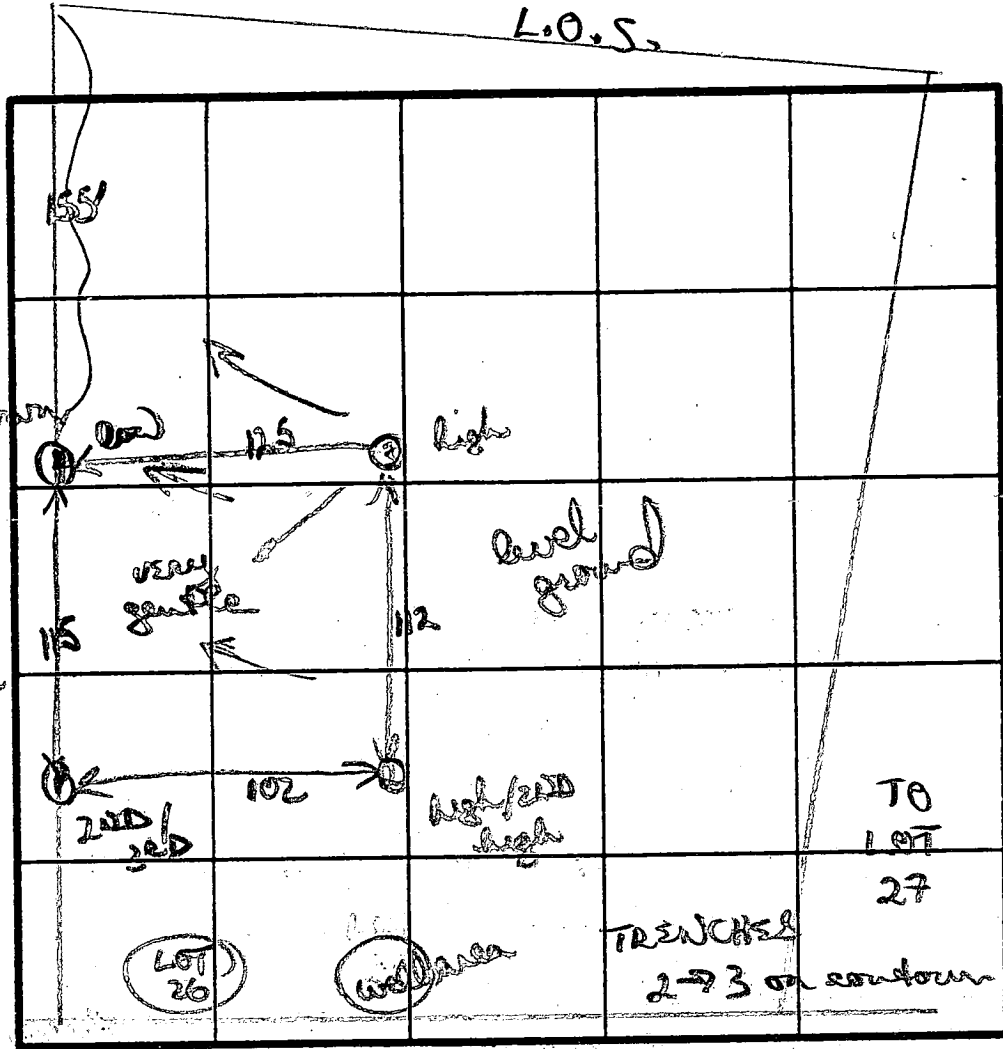
BP19710

THIS IS NOT A PERMIT

X=10 MIN
 INLET 4'
 MAX D. 8'
 100 #/BDPM

SOIL PROFILE

clumpy/
 gritty
 orange/brown
 clay/silt
 loam 3'
 to tan
 brown
 silty
 loam
 11'D



orange/brown
 clay/silt
 loam 3'
 to tan
 powdery
 silty
 loam
 12'D

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

orange/brown
 clumpy/gritty
 clay/clay
 sand loam
 11'
 to tan/brown
 silty/sandy
 loam
 5% med
 scattered rock
 11 1/2'D

red orange
 clay 3'
 to clay
 loam 4'

to brown/orange
 silty
 loam
 10'
 to 11'
 brown
 scattered
 11 1/2'D

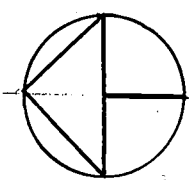
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
12/1/87	①	3 1/2'S	1213	1218	1218	1224	9 MIN
		7 1/2'M	1215	1218	1218	1225	5 MIN
		11'D	Bottom (see profile)				
	②	4'S	1220	1230	1230	1252	22 MIN
		11 1/2'D	Bottom (see profile)				
	③	4'S	1231	101	1231	1232	17 MIN
		5'S	155	203	203	220	
		11 1/2'D	Bottom (see profile)				
	④	3 1/2'S	1239	1242	1242	1246	4 MIN
		8'M	1239	1241	1241	1243	2 MIN
		12'D	Bottom (see profile)				

REMARKS: holes 1-4 common for lots 26+25

TYPE OF SOIL: orange/brown clay/clay loams to 4'; mostly tan + orange

TESTED BY: B. Nixson ALSO PRESENT: Phil, Cliff

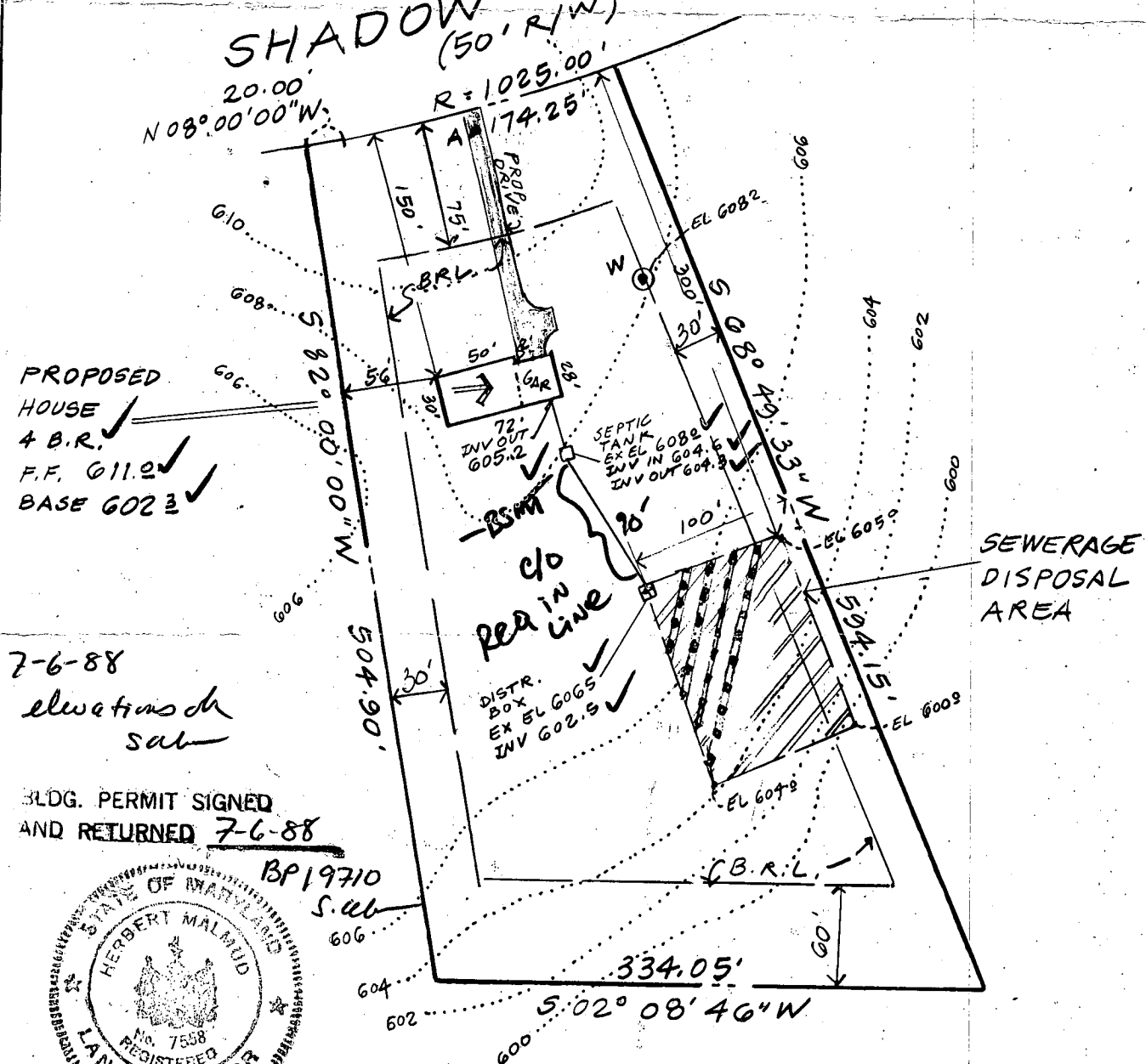
tan + orange
 silty
 loam



LEGEND

- PERC HOLE TEST (SHOWN AS CORNER OF DISPOSAL AREA)
- ▨ SEWERAGE DISPOSAL AREA
- ⊙ W = WATER WELL
- B.R.L. = BUILDING RESTRICTION LINE
- ▬ = TRENCH

SHADOW ROLL CT.



7-6-88
elevations ch
sub

BLDG. PERMIT SIGNED
AND RETURNED 7-6-88



I CERTIFY THAT THE MEASUREMENTS AND ELEVATIONS ARE
ACTUAL AND CORRECT FOR THIS PROPERTY.

Herbert Malmud
Herbert Malmud
Registered Land Surveyor
Maryland # 7558

NOTE: TOPOGRAPHY FROM
SURVEY BY FISCHER,
COLLINS & CARTER, INC.

The lots shown hereon comply with minimum ownership width
and lot area as required by Maryland State Health Regulations.

Scale: 1" = 100'

Date: JUNE 30, 1988

8823

PLOT PLAN
LOT 26

SHADOW ROLL COURT
"GLENWOOD SPRINGS" Plat 7683
Election District No 4
Howard County, MD.

H. Malmud & Asso. Inc.

100 Church Lane
Baltimore, Md. 21208

(301) 653-9511

E795,000

N533,000

37

COL

N26°30'00"W
L=224.69'

R=2149.58'
L=430.00'

ROLL

SHEET
L=330.96'
L=156.71'

SHADOW

LINE

L=310.47'
L=196.27'

MATCH

R=1270.62'
L=114.20'

N22°00'00"W
L=190.10'

R=50.00'
L=12.34'

R=25.00'
L=21.00'

MATCH LINE

28
3.982 AC. ±

27
3.015 AC. ±

26
3.200 AC. ±

25
3.024 AC. ±

24
3.000 AC. ±

DRAINAGE
UTILITY
TENT

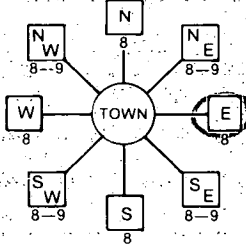
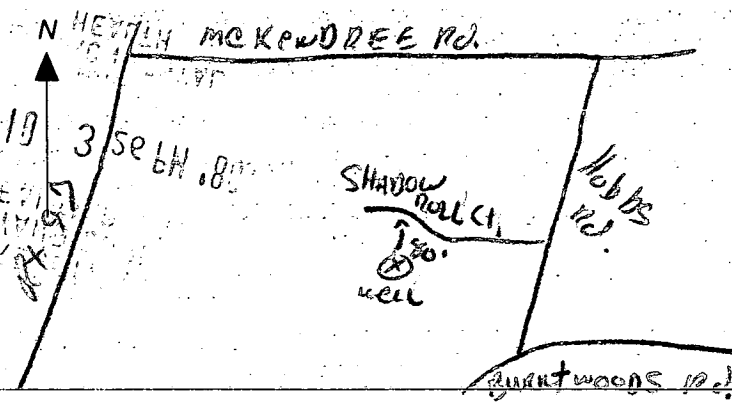
(872)

334.05'
502°08'46"W

273.92'
N39°16'44"W
B.R.L.

WINIFRED ABBOTT

OWN
GLEN
PO. B
ELL
FICHE

B 1 7148 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 110-81-2796 <small>fill in this form completely</small>
Date Received (APA) 051888		B 3 LOCATION OF WELL 8 COUNTY HOWARD 23 SUBDIVISION GLEENWOOD SECTION 7 LOT 26 52 NEAREST TOWN GLEENWOOD MILES FROM TOWN (enter 0 if in town) 1 MI	
OWNER INFORMATION 15 Last Name MEADOWS Owner. First Name JAMES 36 Street or RFD 4504 COYLE RD 57 Town MILLS 70 State MD 72 Zip 21117		DRILLER INFORMATION Driller's Name Ralph MAYNE 77 License No. 80 Firm Name Ralph MAYNE (WELL DRILLING) Address 9120 Brown Church Rd. Mt Airy Signature Ralph Mayne Date 5/9/88	
B 2 WELL INFORMATION 1 APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD SHADOW ROLL CT. ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input type="checkbox"/> WEST <input checked="" type="checkbox"/> EAST <input type="checkbox"/> SOUTH <input type="checkbox"/> 34 DISTANCE FROM ROAD 80 37 ENTER FT or MI FT	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME Howard COUNTY NO. A38374 STATE SIGNATURE _____ INSERT S <input type="checkbox"/> DATE ISSUED 061388 CO SIGNATURE Frederick A. Bell EXP. DATE 12-13-88 NORTH GRID 532000 EAST GRID 079800	
APPROXIMATE DEPTH OF WELL 150 FEET APPROXIMATE DIAMETER OF WELL 6" INCH		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 59084 N 5302	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> 30 AIR-ROTARY <input checked="" type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> 37 CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> DRIVE-POINT <input type="checkbox"/> other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ FORCE 5A WRITE INITIALS IN BOX 5A PERMIT NO. 110-81-2796 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS 363-6559			

11/4/88
my line

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 # 42823
Date 10/19/88

Name of Installer Dickson PLB + HTG

Telephone 265-7003

License Number 1680

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner JAMES A MEADOWS

Telephone 363-6559

Subdivision Glenwood Springs Lot # 26

Well Tag # H0-81-2796

Site Address _____

Pump

1. Type
 - a. Deep well jet ☐
 - b. Shallow well jet ☐
 - c. Submersible ☒
2. Make Goulds
3. Model # 5FS05422
4. Capacity 8 GPM
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 ☐

Motor

1. Horsepower 1/2
2. RPM 3450
3. Voltage 110
 - a. 110 ☒
 - b. 220 ☐

Pitless Adapter

1. Make Harvard
2. Model # BP10X
3. Depth 3 1/2

Tank

1. Capacity 750 gal
2. Pressure relief valve? yes

Piping

1. Type HD160
2. Size 1"
3. NSF and/or BOCA Code approved ☒
4. Depth of supply line 4'

Well data

1. Depth 185 ft.
2. Yield 15 GPM
3. Static water level 13 ft.
4. Will water supply be disinfected by installer? yes

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: Led Dickson

Date: Oct 19, 1988

11/4/88 - OK TO COVER OUTSIDE WORK

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

PRESSURE TANK NOT YET INSTALLED