

PERMIT

02-339625

P 49652

SEWAGE DISPOSAL SYSTEM

A 38513

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT _____

DATE 10/1/93

DATE SYSTEM APPROVED 10/26/93

INSPECTOR M. Rifkin

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

X461-9933 313-2640

INDEXED

J. Joseph Gartland

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 1835 West Old Liberty Road, Westminster, Maryland PHONE 875-2400

SUBDIVISION Burleigh Manor, Sec. 2 LOT 676 ROAD 10414 Queensway Drive

PROPERTY OWNER Philip & Mary Down PHONE: 531-5437

ADDRESS _____

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

210 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 263

TRENCHES - Trench to be 2 feet wide. Inlet 4 1/2 feet below original grade. Bottom maximum depth 8 1/2 feet below original grade. Effective area begins at 4 1/2 feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Starting from right front lot corner, start first trench 185 feet down right lot line, and 45 feet off this same lot line. Run trenches on contour toward front and rear of lot.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 11/14/93 MR OK

REVISED FOR TIGHT ELEVATIONS MR 10/15/93

PLANS APPROVED BY Mark Rifkin DATE 8/16/89

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, 90° ELBOWS NOT ACCEPTABLE.

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 35/40 PVC OR ABS

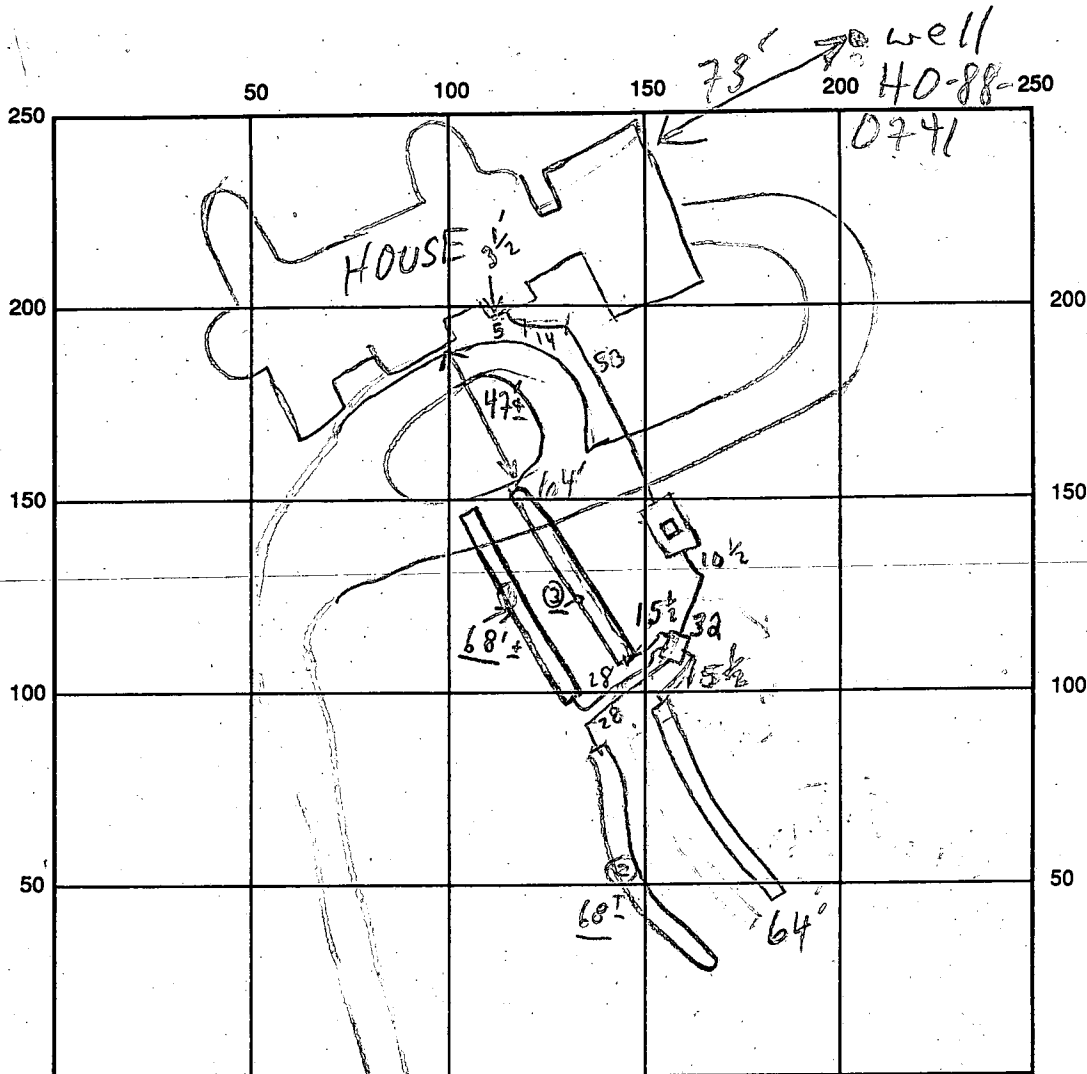
PERMIT VOID AFTER TWO YEARS

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 PVA 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 APPROVAL ON THIS PERMIT

A 38513



Queensway Dr

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

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

DISTRIBUTION BOX LEVEL OK - BAFFLE IN

DRAIN FIELD/TITLE DEPTH

1	2	3	4
9	9	9	9

 FT.

TRENCH WIDTH 2 FT.

INLET DEPTH

1	2	3	4
5	5	5	5

 FT.

EFFECTIVE GRAVEL DEPTH

1	2	3	4
4	4	4	4

 FT.

TOTAL LENGTH ①68' ②68' ③64' ④64' TOTAL = 264 FT.

NUMBER OF TRENCHES 4

ONE SIDEWALL/BOTTOM AREA ①272 ②272 ③256 ④256 SQ. FT.

DRYWALL INSIDE DIAMETER FT.

EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 1056 SQ. FT.

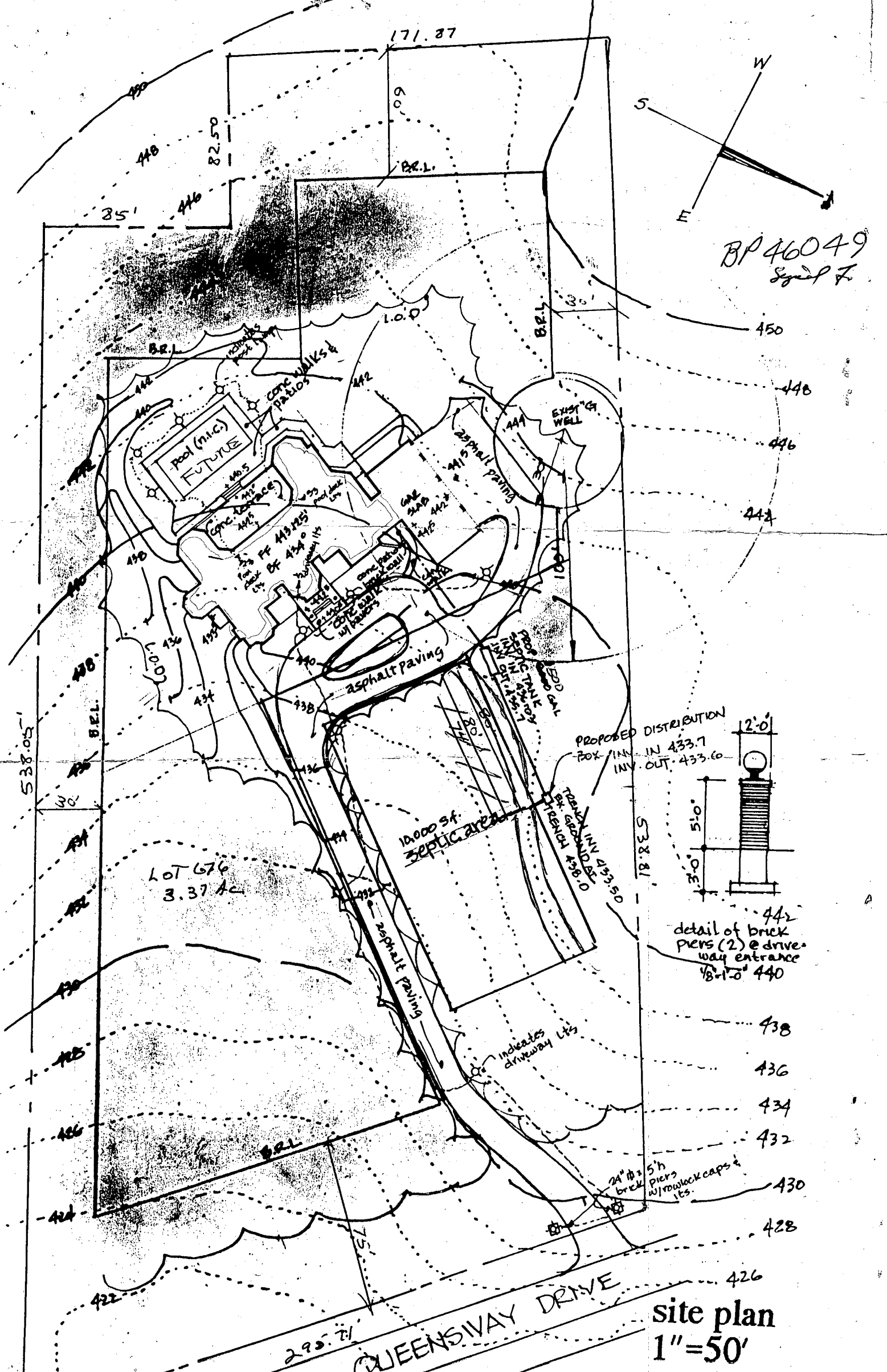
REMARKS: 10/14/93 CONFIRMED STARTING LOC. W/INSTALLER; OK TO COVER FIRST 60' OF PIPE MR 10/15/93 UNCERTAIN OF ACCURACY OF D.B. LOCATION; OK TO CONTINUE MR 10/18/93 MOVE D.B. UPHILL CLOSER TO SPECS; CONTINUE MR 10/19/93 P.M. - Two trenches ok to cover; and from house to dist box only; Need to see the last 2 trenches + R.E. area

DATE SYSTEM APPROVED 10/26/93

INSPECTOR M. Rifkin

10/24/93 TRENCHES #3 & #4 DUG AND STONED CALL RH 10/26/93 OK - COVER ALL MR

Project No:
0192
drawing:
SD.1
date:
April 9, 1992



PROPOSED DOWN RESIDENCE
 LOT 676 BURLEIGH MANOR, SECTION 2
 QUEENSWAY DRIVE
 ELLICOTT CITY, (HOWARD CO.) MARYLAND

GOLDBERG ASSOCIATES
 ARCHITECTS AND PLANNERS
 4 WORTHINGTON RIDGE COURT
 REISTERSTOWN, MARYLAND 21136
 (410) 833-4080

Project No:
 0192
 drawing:
SD.1
 date:
 April 9, 1992

10/26

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 # - 0 -
Date 9/22/93

Name of Installer ST. JOSEPH CONTRACTORS, INC.

Telephone 875-2400

License Number 17713

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner Phyllis & Mary Down Telephone 531-47949

Subdivision BURLEIGH MANOR Lot # 6764 Well Tag # 40-88-0741

Site Address 10414 QUEENSWAY DR

Pump

1. Type

- a. Deep well jet ☐
b. Shallow well jet ☐
c. Submersible ☒

2. Make Grundfos

3. Model # TERRA 1000

4. Capacity 7 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 3/4

2. RPM 3450

3. Voltage 240

a. 110 ☐

b. 220 ☒

Pitless Adapter

1. Make Hi-Land

2. Model # P-5-B.O.O.

3. Depth 42 1/2"

Tank

1. Capacity 412 gal

2. Pressure relief valve? 7.5 psi + WELL LINE

10/26/93 P.A. OK

MR @ 13 1/2 - 5' B.G.

Piping

1. Type PVC

2. Size 1 1/2"

3. NSF and/or BOCA Code approved Yes

4. Depth of supply line 42 1/2"

Well data

1. Depth 42 1/2" ft.

2. Yield 7 GPM

3. Static water level 42 1/2" 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: [Signature]

Date: 9/22/93

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

APPLICATION

PERCOLATION TESTING

A 38513

P _____

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

DISTRICT _____

DATE 1-28-87

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 Gerald M. Katz, Trustee c/o Whitman, Requardt and Associates Stewart J. Greenbaum - 484-8400

ADDRESS 2315 Saint Paul Street, Baltimore, MD 21218 PHONE (301) 235-3450

PROSPECTIVE BUYER Philip & Mary Down 531-5437
12146 Mt. Albert El.

ADDRESS _____ PHONE _____

PROPERTY LOCATION: LOT 676 on Prelim Plan

SUBDIVISION Burleigh Manor Section 2 LOT NO. 5

ROAD AND DESCRIPTION West of the intersection of Centennial Lane and Old Annapolis Road
(10414 Queensway Drive) E.C. 21042

TAX MAP 23, 24 PARCEL # 290

SIZE OF LOT 3 Ac. TYPE BLDG. Single Family Dwelling
(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. Stewart J. Greenbaum
(SIGNATURE OF APPLICANT)

APPROVED BY B. Nijon FOR Deep system DATE 2/5/88

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 3-26-87 Due. satisfactory; hold for subdivision plat. S. Abel

BLDG. PERMIT SIGNED 12/3/92 AND RETURNED Serial # 46325 - Andrew Prol
BLDG. PERMIT SIGNED 12/3/92 AND RETURNED Serial # 46324 - Prol
BLDG. PERMIT SIGNED 9/20/89 AND RETURNED Serial # 29424 - SFD
5 Bedrooms 46049 11-18-92

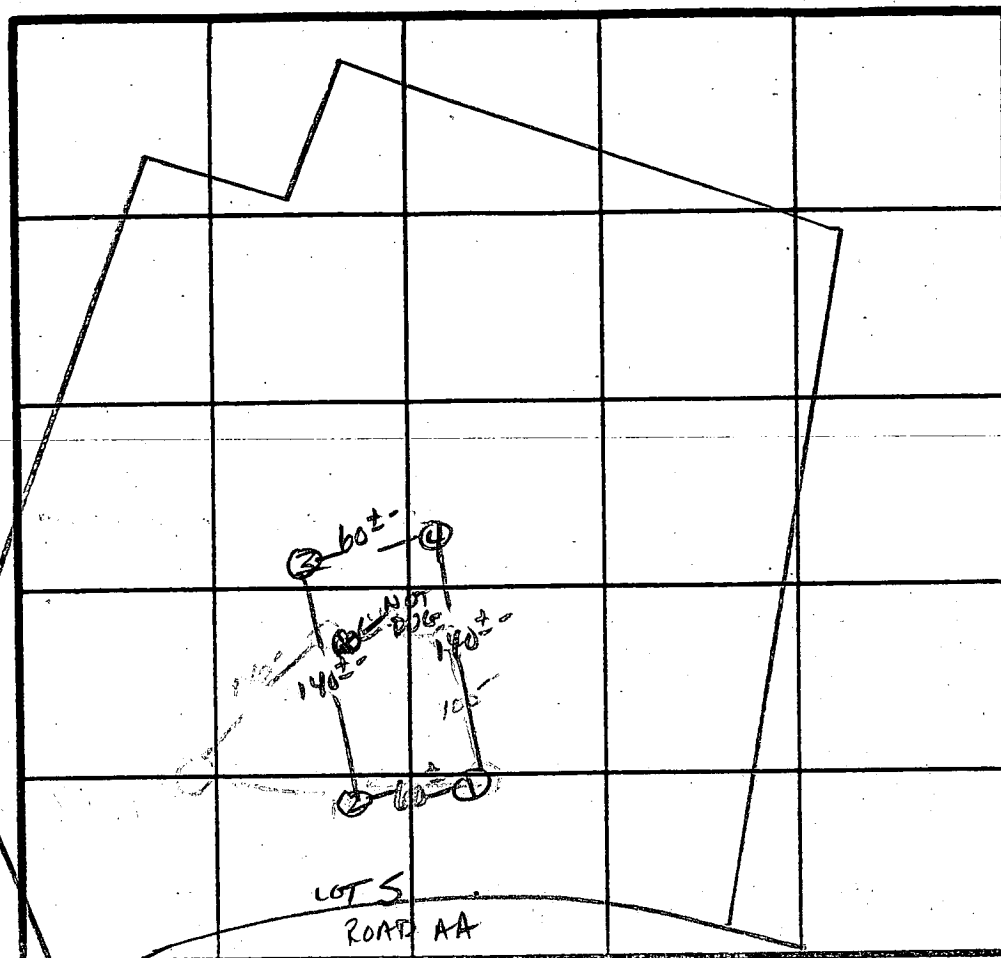
THIS IS NOT A PERMIT

④
① ② ③
SOIL PROFILE

4" 0
A1-3
YELLOW RED
SILT LOAM
7-12% CLAY
FEW SILT
QUARTZ STONE
15-25%
FRAGS

4-8" 0
YELLOW BL
SILT SAND
LOAM
20-25%
FRAGS

13-14" 0



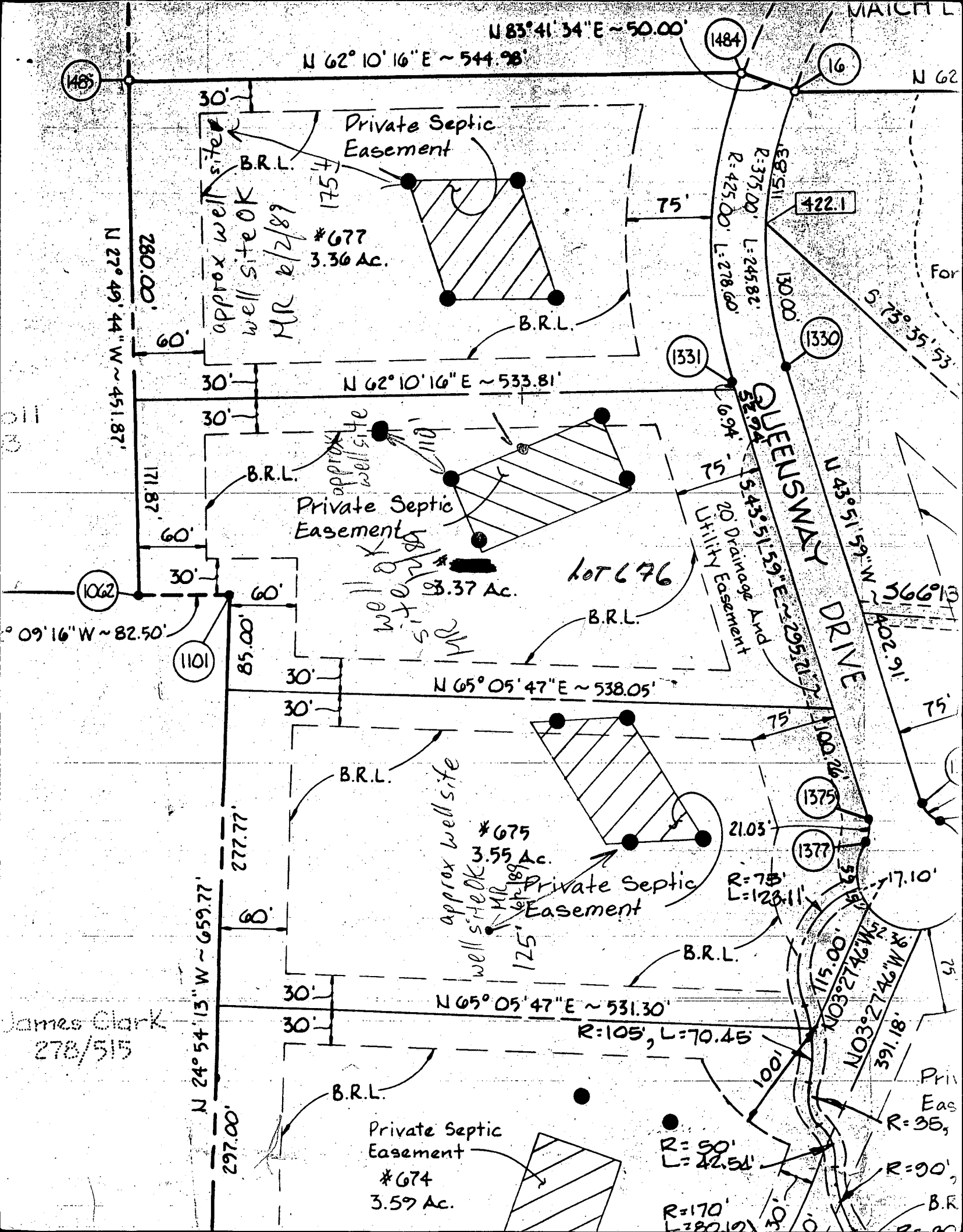
$\bar{X} = 15 \text{ min}$
INLET 4" $\frac{1}{2}$
MAX D 8" $\frac{1}{2}$
210 ϕ / BDRM

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/24/87	1V	13.5" UNIFORM SOIL below 4"					
	2S	5"	10:45	10:56	10:56	11:20	24 MIN
	2V	13" UNIFORM SOIL below 4.5"					
	3S	4"	10:55	10:57	10:57	11:02	5 MIN
	3V	13" UNIFORM SOIL below 4.0"					
	4S	4.5"	10:50	11:03	11:03	11:30	27 MIN
	4M	9"	10:48	10:49	10:49	10:52	3 MIN
	4V	14" UNIFORM SOIL below 4"					

REMARKS HOLES PER PLAT

TYPE OF SOIL CHESTER GRAVELLY LM

TESTED BY S. Abel ALSO PRESENT Bill, Rocky



C1 0052 SEQUENCE NO. (DENV 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 A38513

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"

8 13

15 20

22 26
(TO NEAREST FOOT)

28 37

OWNER Greenbaum Assoc. last name first name
STREET OR RFD Queensway Dr TOWN Ellicott City
SUBDIVISION RURLEIGH MANOR SECTION LOT 676

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

SAND stone 0 36
Gypsiferous Rock 36 245

GROUTING RECORD

WELL HAS BEEN GROUTED (Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT C.M. BENTONITE CLAY BC

NO. OF BAGS 9 NO. OF POUNDS 846

GALLONS OF WATER 54

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 35 ft.
(enter 0 if from surface)

CASING RECORD

casing types insert appropriate code below

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHER

MAIN CASING TYPE Nominal diameter top (main) casing (nearest inch) Total depth of main casing (nearest foot)

ST 6 42

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

screen type or open hole

SCREEN RECORD

insert appropriate code below

ST BR HO
STEEL BRASS OPEN HOLE
PL PL OT
PLASTIC OTHER

C2

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (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.) W Q
70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 12

WHEN PUMPING 170

TYPE OF PUMP USED (for test)

A air P piston T turbine
C centrifugal R rotary O other (describe below)
J jet S submersible

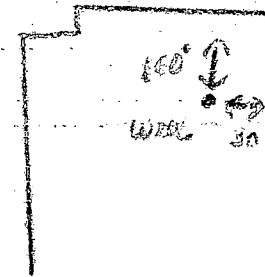
PUMP INSTALLED

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)
PUMP HORSE POWER
PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height) LAND SURFACE (nearest foot)

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

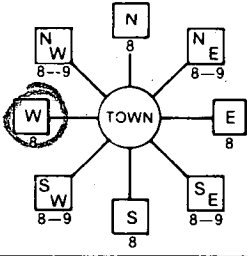

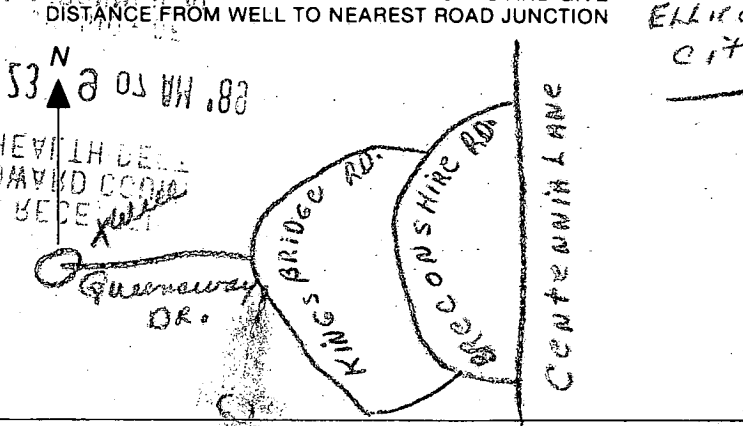
I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DRILLERS IDENT. NO. 238

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

B 1- 5663 <small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (DP USE ONLY) 5663	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 40-88-0741 <small>fill in this form completely</small>
Date Received (APA) 052389 OWNER INFORMATION 15 Last Name GREENBAUM 21 Owner ROSS 26 First Name ASS 34 36 1777 RIVER STREET 42 STOWN RD. 55 57 BALTIMORE 70 MD 72 21208 76		B 3 LOCATION OF WELL 1 HOWARD 21 8 COUNTY 23 SUBDIVISION BURLEIGH MANOR 42 SECTION 2 44 676 50 LOT 52 NEAREST TOWN FALLICK CITY 71 MILES FROM TOWN (enter 0 if in town) 3 1/2 73 MI 76 77 78	
DRILLER INFORMATION Driller's Name Joseph L. Mayne 77 License No. 238 80 Firm Name Joseph L. Mayne Well Drilling Address 5512 RIDGE RD. MT. AIRY 21771 Signature Joseph Mayne 5/22/89 Date		B 4 1 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  2 NEAR WHAT ROAD QUORUM DR. 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  34 390 37 DISTANCE FROM ROAD ENTER FT or MI FT 38 39	
B 2 WELL INFORMATION 1 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 12 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME A38513 COUNTY NO. STATE SIGNATURE _____ INSERT S _____ DATE ISSUED 06/14/89 43 CO-SIGNATURE Mark E. Rife 48 NORTH GRID 518000 50 55 EAST GRID 0834000 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. well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 8384 N 52818 000 000	
APPROXIMATE DEPTH OF WELL 300 24 FEET 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="radio"/> JETTED <input type="radio"/> Jetted & DRIVEN 30- AIR-ROTary <input checked="" type="radio"/> AIR-PERCussion <input type="radio"/> ROTARY (Hydraulic Rotary) 37- CABLE <input type="radio"/> REVERSE-ROTary <input type="radio"/> Drive-POINT other _____		REPLACEMENT OR DEEPEMED 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 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 _____ 63 FORCE MR 67 WRITE INITIALS IN BOX 68 PERMIT NO. 40-88-0741 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS			

REAR PL.	10'
SIDE PL.	30'
HOUSE	10'
SEPTIC	20'
WELL	10'

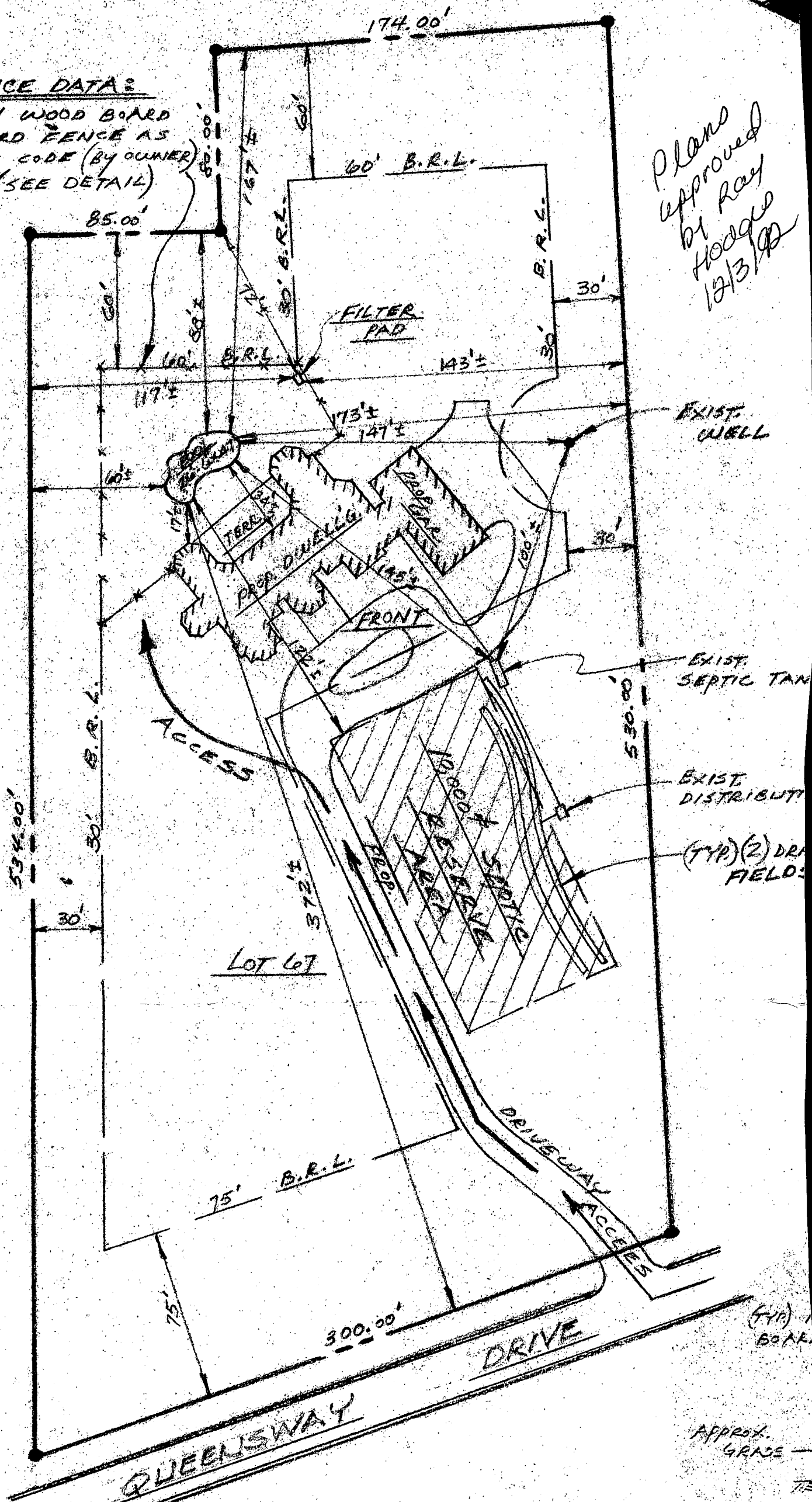
NOTE:

A VACUUM BREAKER WILL
BE INSTALLED AS PER CODE.

FENCE DATA:

5' HIGH WOOD BOARD
ON BOARD FENCE AS
PER CODE (BY OWNER)
(SEE DETAIL)

Plans
approved
by Ray
Hodge
12/3/92



SITE PLAN

SCALE: 1"=50'

10414 QUEENSWAY DRIVE
HOWARD COUNTY, MD. 21043
"BURLEIGH MANOR"
LOT 67, SECTION II.

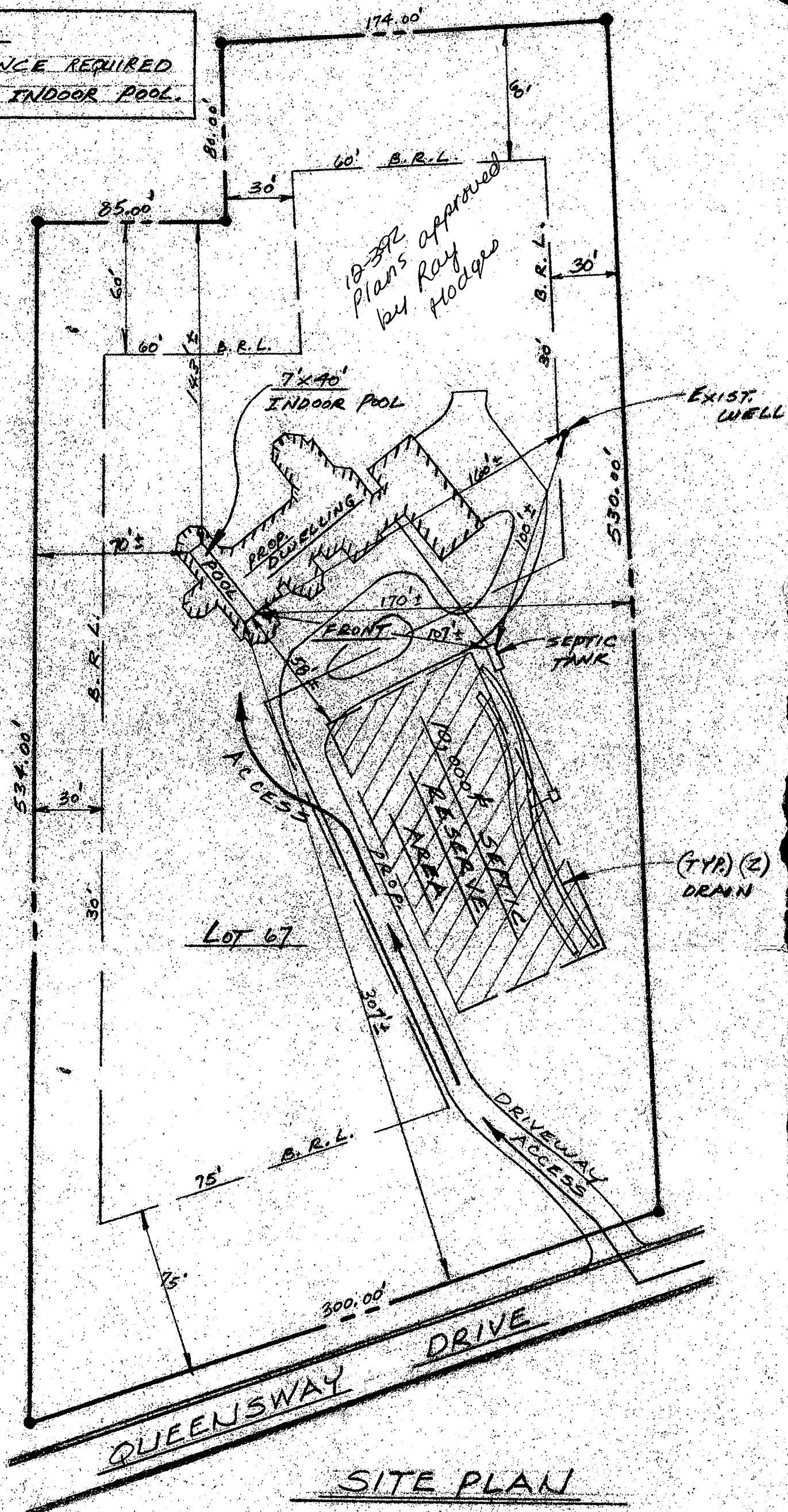
REAR PL. 10'
SIDE PL. 30'
HOUSE 10'
SEPTIC 20'
WELL 10'

NOTE:

A VACUUM BREAKER
WILL BE INSTALLED AS
PER CODE

NOTE:

**NO FENCE REQUIRED
ON AN INDOOR POOL.**



10414 QUEENSWAY DRIVE
HOWARD COUNTY, MD. 21043

(HOUSE UNDER CONSTRUCTION)

Review

OK MR 1/4/21

Well Permit No. HO - 88-074/

Location of property (road) Queensway Dr.

subdivision BURLEIGH MANOR

Lot	676	Block	Plat	Sec.
-----	-----	-------	------	------

Well Driller J. MAYNE

Owner GREENE BAUM + ROSE

Depth of well 245'

Distance of measuring point (M.P.) above ground /

Static water level (S.W.L.) below M.P. 12'

7. High rate pumping -- reservoir drawdown

Time pump started 7:00

Pumping rate 15 gpm

Total time 30 min. to reach pumping water level 170 ft. below M.P.

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

[illegible]