

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

04-347609

P 47385

A 38731

DISTRICT _____

DATE 2-18-92

DATE SYSTEM APPROVED 3/3/92

INSPECTOR R. Hodges

Dave Hopkins

IS PERMITTED TO INSTALL ☒ ALTER _____

ADDRESS 17550 Old Frederick Road, Mt. Airy, Maryland 21771 PHONE 831-7257

SUBDIVISION Morgan Station LOT 23 ROAD ⁸⁷⁵~~825~~ The Old Station Court

PROPERTY OWNER Cecil and Marge Jones
~~875~~ 825 The Old Station Court

ADDRESS _____

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting from front left lot corner, start first trench 140 feet down left lot line and 120 feet off this same lot line. Run trenches on contour toward right side of lot. MAINTAIN 100 FEET FROM ALL NEARBY WELLS.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 1/17/92 RH

PLANS APPROVED BY Mark Rifkin Revised _____ DATE 12/10/91

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.

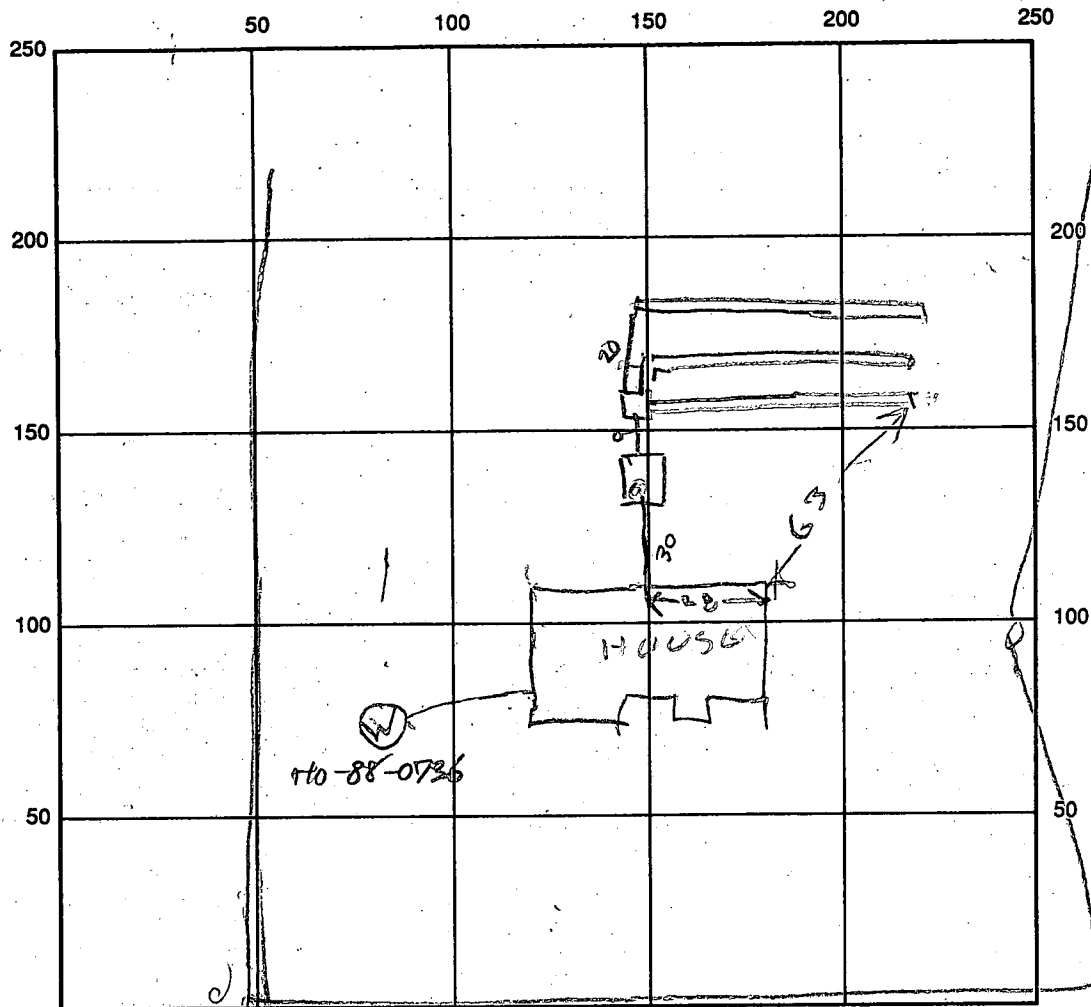
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 38731



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

OLD STATION CT

SEPTIC TANK LEVEL OK 1000

CLEANOUTS OK

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH 4-5 FT.

TRENCH WIDTH 3 FT.

INLET DEPTH 2-3 FT.

EFFECTIVE GRAVEL DEPTH 2 FT.

TOTAL LENGTH 19.5 FT.

NUMBER OF TRENCHES 3

~~ONE SIDEWALL~~ BOTTOM AREA 585 SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT.

EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: _____

DATE SYSTEM APPROVED 3/3/91

INSPECTOR Raymond Hodges

APPLICATION

PERCOLATION TESTING

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

A 38731

P _____

DISTRICT 4

DATE 12/17/86

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 Roy W. Crum + Wife Cecil + Madges Jones - 461-1532
Hazel P. Hall - 964-2928

ADDRESS 791 Morgan Station Rd PHONE 489-4995

PROSPECTIVE BUYER Hemphill Partnership

ADDRESS 10176 Baltimore National Pike Suite 210 PHONE 465-5855

PROPERTY LOCATION:

SUBDIVISION Morgan Station (~~Crum Property~~) LOT NO. 30

ROAD AND DESCRIPTION E/S Morgan Station Rd north of Old Frederick Rd
(875 The Old Station Court)

LOT 23 Prelim. 10/21/87

TAX MAP 3 PARCEL # 9

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.

Nail S. Rind
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 4/30/87 - Perc O.K. Hold for Best R.H.

BLDG. PERMIT SIGNED

AND RETURNED 1/14/92

Serial # 40837-SFD

BLDG. PERMIT SIGNED

AND RETURNED 9/19/89

Serial # 28919

SFD - 4 Bedroom

THIS IS NOT A PERMIT

Lot 30

Lot 31

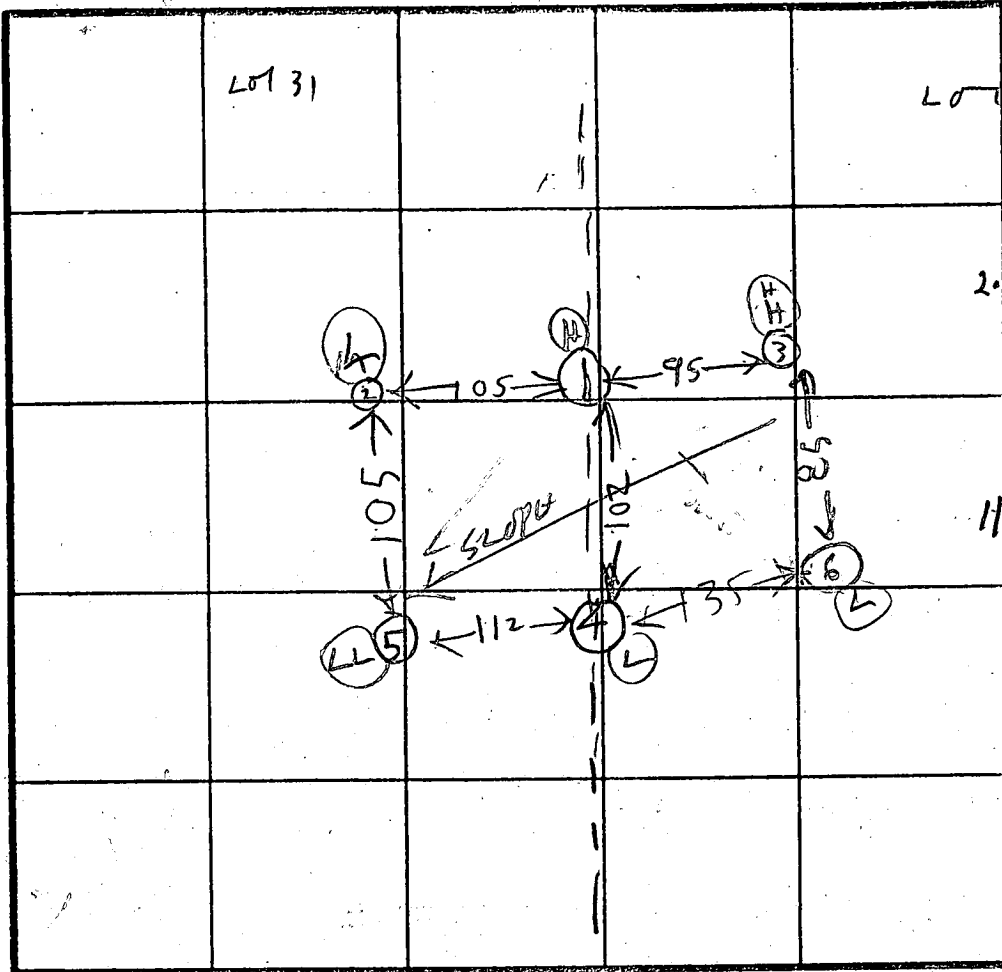
Lot 30

SOIL PROFILE

①
0
CLAY
2
BROWN
SAND
LOAM
50%
SAPRO-
LITE

⑤
2.5
CLAY
LIGHT
BROWN
SAND
LOAM

⑥
0
2
CLAY
PINK
BROWN
SAND
LOAM
100%
SAPRO-LITE
10.5



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

②
3
BROWN
CLAY
BROWN
SAND
LOAM
50%
SAPRO-LITE

③
CLAY
LIGHT
BROWN
SAND
LOAM
100%
SAPRO-LITE

④
CLAY
LIGHT
BROWN
SAND
LOAM

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/30/87	1S	3.5	154	159	159	206	7
	1D	7.	154	159	158	203	5
	1V	11	OK				
	2V	11.5	OK				
	3V	11	OK				
	4S	3	212	218	218	220	4
	4V	12.5	OK				
	5S	3	213	217	217	221	5
	5V	11.5	OK				
	6S	3	223	228	228	234	3
	6V	10.5	OK				

X PER
5 MIN
180 P/BK
INLET
3"
BOTTOM
5"

REMARKS Lot lines were / have changed from
Original Test Plot

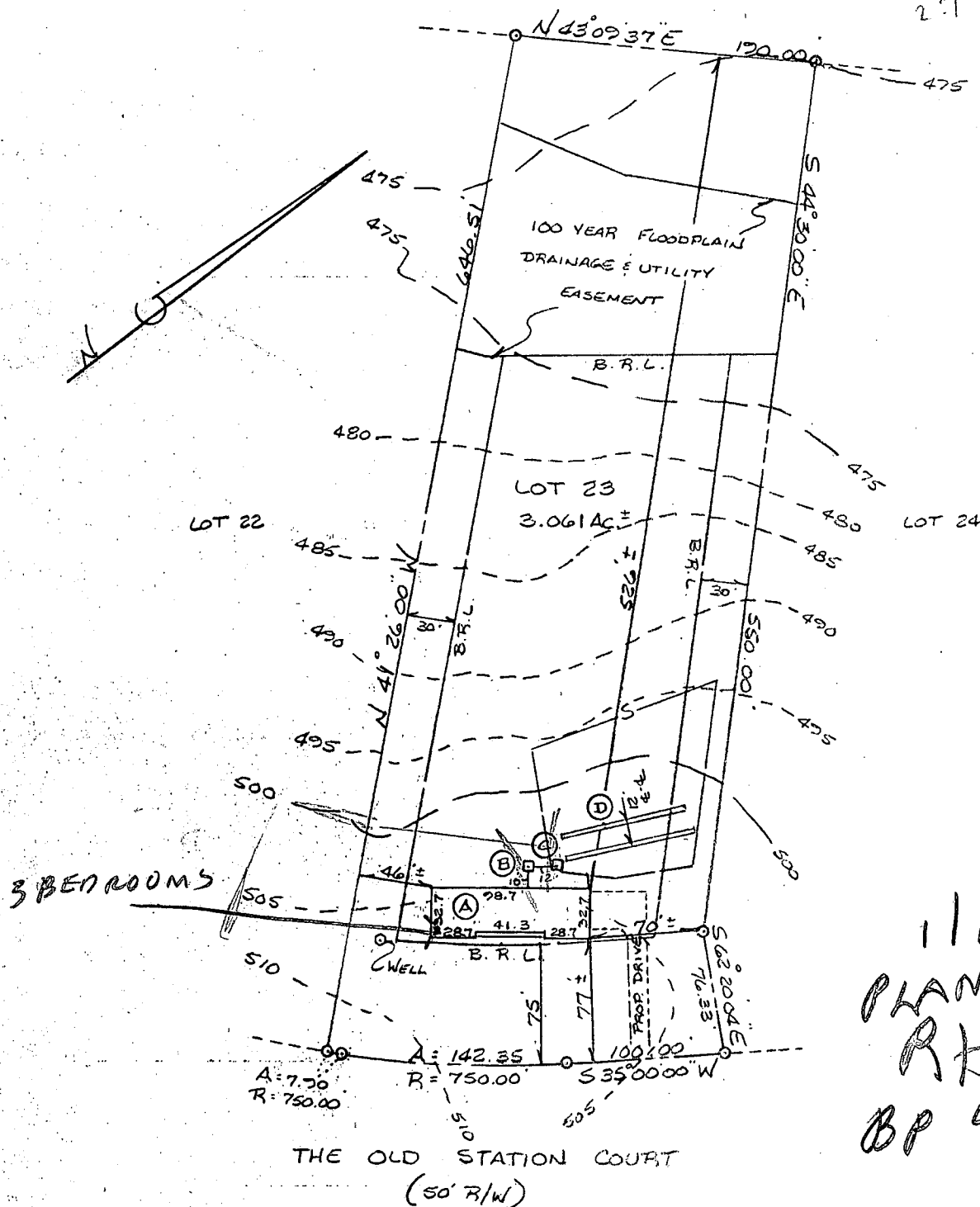
TYPE OF SOIL
TESTED BY RAYMOND HANCOCK

MIKE SURVEYOR
ALSO PRESENT OKEETTERMAN
DAVIS

EH 12-1079

- (A) = PROPOSED 3 BEDROOM HOUSE
 FF ELEV. = 511.4
 BSMT. ELEV. = 502.9
 INV. ELEV. = 501.7
- (B) = PROP. SEPTIC TANK
 EX. ELEV. = 504.0
 INV. IN = 501.6
 INV. OUT = 501.3
- (C) = PROP. DIST. BOX
 EX. ELEV. = 503.9
 INV. ELEV. = 501.2
- (D) = PROP. TRENCHES
 INV. ELEV. = 500.9
 2' STONE, 5' BOTTOM MAX.

LENGTH TO BE DETERMINED AT TIME OF SEPTIC PERMIT ISSUANCE



11/14/92
 PLANS O/K
 RH
 BP 40851

PLOT PLAN
 LOT 23
 MORGAN STATION
 SITUATED ON THE OLD STATION COURT
 ELECTION DISTRICT NO 4
 HOWARD COUNTY, MARYLAND
 SCALE: 1"=100' DEC. 1991



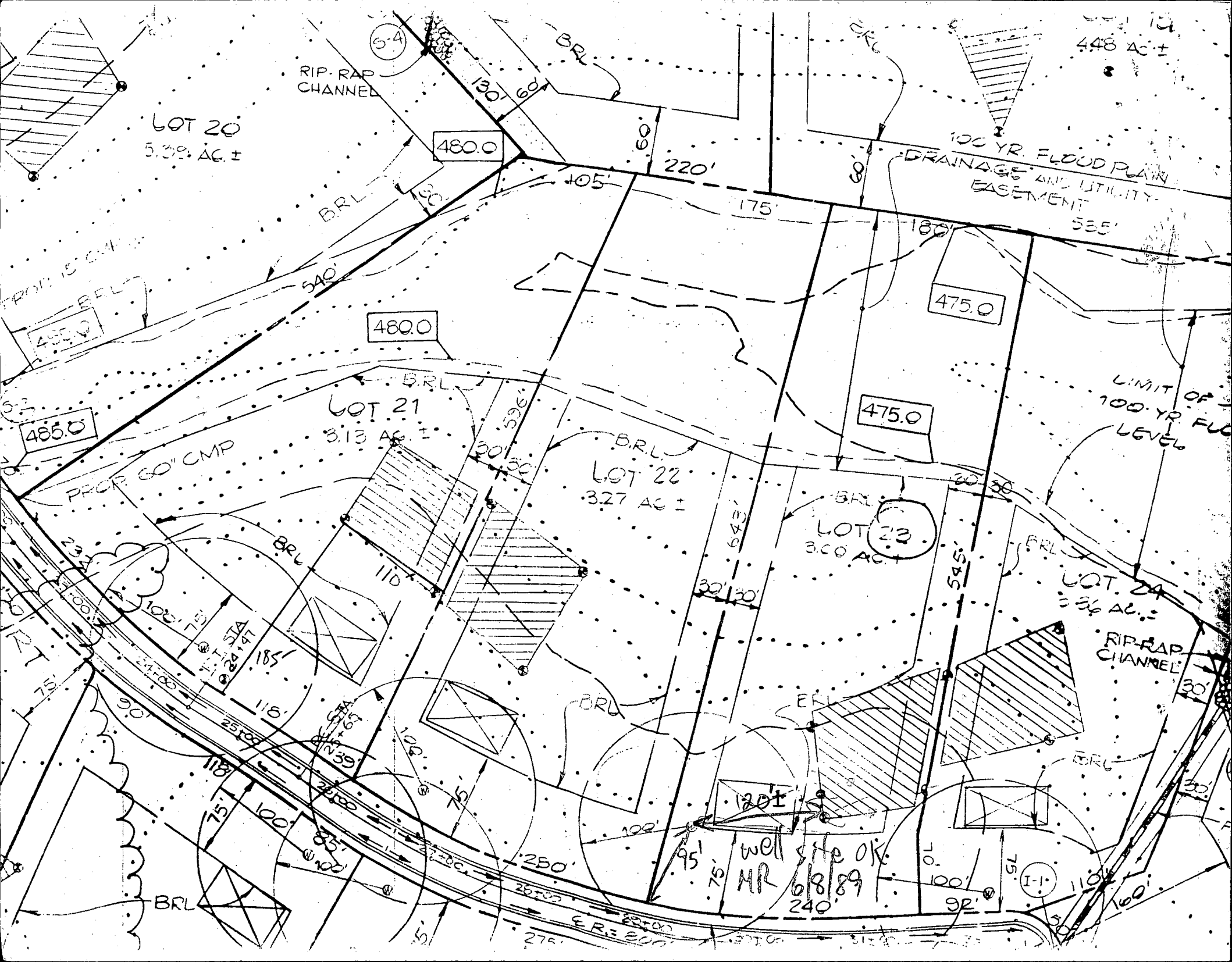
I CERTIFY THIS PLAT TO BE CORRECT; IT IS THE RESULT OF AN ACTUAL FIELD SURVEY, BASED ON DATA FOUND AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND, AS REFERENCED HEREON.

REFERENCE	JOB NO.
PLAT # 7825	91-23

LIBERTY SURVEY, INC.
 3020 BUFFALO ROAD
 NEW WINDSOR, MARYLAND

301-875-2784

21776



B 1	5911	SEQUENCE NO. (DP. USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-88-0736 <small>fill in this form completely</small>
<div style="display: flex; justify-content: space-between;"> <div style="width:45%;"> <p><small>(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small></p> <p>Date Received (APA) 041789</p> <p>OWNER INFORMATION</p> <p>15 Last Name 16 First Name UENAP ASSOCIATES</p> <p>36 Street or RFD 55 11126 Rte 1 11126 Rte 1</p> <p>57 Town 70 State 72 73 Zip 76 E 11126 Rte 1 City MD 21043</p> </div> <div style="width:45%;"> <p>B 3 LOCATION OF WELL</p> <p>8 COUNTY 21 Howard</p> <p>23 SUBDIVISION 42 11126 Rte 1</p> <p>SECTION 44 46 LOT 23 Parcel 9411</p> <p>52 NEAREST TOWN 71 11126 Rte 1</p> <p>MILES FROM TOWN (enter 0 if in town) 3 73 76 77 78 MI</p> </div> </div>				
<div style="display: flex; justify-content: space-between;"> <div style="width:45%;"> <p>DRILLER INFORMATION</p> <p>Driller's Name Frank Delph 79 License No. 80 453</p> <p>Firm Name Frank Delph Well Drillers Inc.</p> <p>Address 15234 Rte 1 Shop R. 11126 Rte 1</p> <p>Signature Frank Delph 3/7/89 Date</p> </div> <div style="width:45%;"> <p>B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</p> <p>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</p> <p>NEAR WHAT ROAD 30 THE OLD STATION COURT</p> <p>DISTANCE FROM ROAD 75 37 ENTER FT. or MI AT 38 39</p> </div> </div>				
<p>B 2 WELL INFORMATION</p> <p>APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12</p> <p>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20</p>				
<p>USE FOR WATER (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> H HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</p> <p><input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</p> <p><input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</p> <p><input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</p> <p><input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</p>				
<p>APPROXIMATE DEPTH OF WELL 500 24 28 FEET</p> <p>APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH</p>				
<p>METHOD OF DRILLING (circle one)</p> <p>BORED (or Augered) JETTED Jetted & DRIVEN</p> <p>30 AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary)</p> <p>37 CABLE REVERSE-ROTary Drive-POINT</p> <p>other _____</p>				
<p>REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL</p> <p><input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</p> <p><input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY</p> <p><input type="checkbox"/> D THIS WELL WILL DEEPM AN EXISTING WELL</p> <p>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 _____ 52</p>				
<p>Not to be filled in by driller (OEP USE ONLY)</p> <p>APPROP. PERMIT NUMBER _____ 54 G A P _____ 63</p> <p>FORCE HR WRITE INITIALS PERMIT No. HO-88-0736 67 68 IN BOX 70 71 72 73 74 75 76 77 78 79</p>				
<p>SPECIAL CONDITIONS</p>				

COUNTY

C1 0051 SEQUENCE NO. (DENV USE ONLY)
1 2 3 4 5 6
(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 38731

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 29 30 31 32 33 34 35 36 37

OWNER Humphill & Assoc
STREET OR RFD 1st name The Old Station Ct first name TOWN Lisbon
SUBDIVISION Morgan Station SECTION LOT 23

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	2	
Shale	2	15	✓
M. KA	15	35	
Sandstone	35	45	✓
M. KA	45	70	
Sandstone	70	75	✓
M. KA	75	145	

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT ☒ BENTONITE CLAY ☐

NO. OF BAGS 7 NO. OF POUNDS 200

GALLONS OF WATER 42

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 75 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)

PL 6 29
60 61 63 64 66 70

EACH CASING

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

screen type
or open hole

SCREEN RECORD

insert
appropriate
code
below

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
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 LOG OTHER DATA
CASING INDICATOR

C3

PUMPING TEST

HOURS PUMPED (nearest hour) 7

PUMPING RATE (gal. per min. to nearest gal.) 7

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 25

WHEN PUMPING 26

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 PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.

DRILLERS IDENT. NO. 453
DRILLERS SIGNATURE James H. Dufek
(MUST MATCH SIGNATURE ON APPLICATION)
SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

COUNTY

Well Permit No. HO - 88-0736
Location of property (road) 775 The Old Station Ct
Subdivision Morgan Station Lot 23 Block Plat Sec.
Well Driller Frank Delph Owner Hemphill & Assoc

Depth of well 145 ft
Distance of measuring point (M.P.) above ground 2 ft
Static water level (S.W.L.) below M.P. 25 ft

Time pump started 8:02 Pumping rate 96 l.m
Total time 15 m. to reach pumping water level 2.5 ft. below M.P.

[illegible]

29 f + PL 25 open 7 Bags

3/12/92 ANYTIME

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 # 47791
Date 3/5/91

Name of Installer J. Jos. Gartland, Inc.

Telephone 875-2400

License Number 1713

Certified Well Pump Installer ☐ Well Driller ☐ Registered Plumber ☒

Name of Property Owner CECIL JONES Telephone 461-1532

Subdivision MORGAN STATION Lot # 23 Well Tag # HO-88-0736

Site Address 875 The Old STATION CT.

Pump

- Type
 - Deep well jet ☐
 - Shallow well jet ☐
 - Submersible ☒
- Make Goulds
- Model # 10EJ05422
- Capacity 10 GPM
- Pump exceeds well capacity Yes ☐ No ☒
- If Yes, is low pressure cutoff switch installed? Yes ☐ No ☐
- What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors ☐ Cable guards ☐ Other ☐

Motor

- Horsepower 1/2
- RPM ☐
- Voltage ☐
 - 110 ☐
 - 220 ☒

Pitless Adapter

- Make HAWAII
- Model # PT800
- Depth 42"

Tank

- Capacity 42 gal
- Pressure relief valve? 75 psi
*Water line Trench half backfilled other half full of water (rummy) unable to see P.A. 3/12/92 RJP
Still Flooding 3/13/92 RJP
System Covered, Never Saw P.A. - 3/16/92*

Piping

- Type PLASTIC
- Size 1"
- NSF and/or BOCA Code approved yes
- Depth of supply line 42"

Well data

- Depth ☐ ft.
- Yield ☐ GPM
- Static water level ☐ ft.
- Will water supply be disinfected by installer? NO

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: 1/30/92

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