PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P	99435

A 38877

DISTRICT

DATE SYSTEM APPROVED

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH INDEXED XXXXXXXX 313-2640

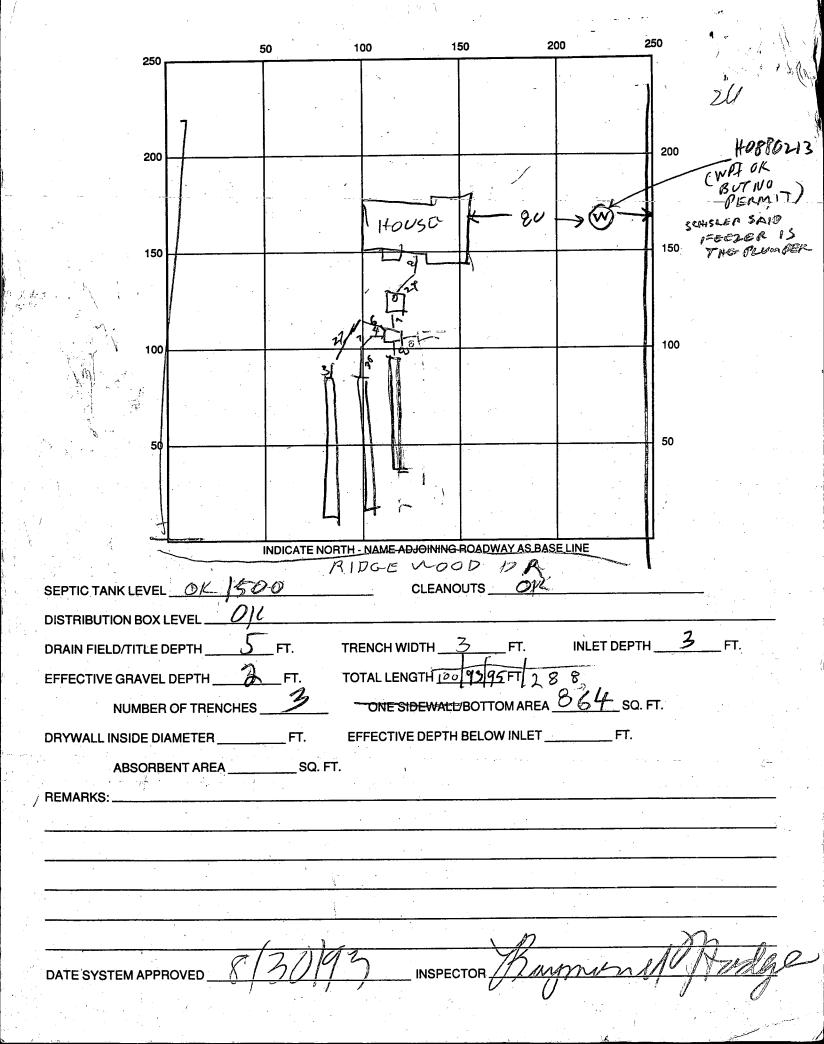
Poul Cabinal and Carlo C	1			v	
Paul Schissler/South Carroll Back		,			LTER
ADDRESS 4410 Salem Bottom Road, Westmi	nster, Mary	land 21157	PHONE	875-4197	· ,
SUBDIVISION Ridgewood LC	от2	ROAD _	13301 Ridgewo	od Drive	
PROPERTY OWNER	Robert Ca	llens	•		
ADDRESS		•			·
SEPTIC TANK CAPACITY 1250 GALLONS			· /		•
NUMBER OF BEDROOMS 4	•			•	
210 SQUARE FEET PER BEDROOM					
LINEAR FEET OF TRENCH REQUIRED 280					!
TRENCHES - Trench to be 3 feet wide. depth 5.5 feet below original grade. 2 feet of LOCATION - Place the first trench 210 right lot line as seen when on contour toward front of NOTES - No trench to exceed 100 feet cap to grade or above on see	nal grade. stone below feet from t n facing the lot.	Effective distribut he front late from	area begins a ion pipe. ot line and Ridgewood Dri	t 3.5 fee 110 feet ve. Run	from the trenches
					· · · · · · · · · · · · · · · · · · ·
PLANS APROVED BY Sid Abel				DATE	30/88
COVER NO WORK UNTIL INSPECTED AND APPROVED					
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEP	ARTMENT IS RESPO	NSIBLE FOR THE S	SUCCESSFUL OPERAT	ON OF ANY SYS	ТЕМ
NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LIN ACCEPTABLE.	E AND/OR AT 90° S	WEEPS IN LINES	FROM HOUSE TO D	RAIN FIELDS, 90	o ELBOWS NOT
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUT AUTHORIZED)	TION BOX TRENCHE	S) TO BE 100 FE	ET FROM WELL (UNL	ESS OTHERWIS	SE SPECIFICALLY
NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION B	EFORE AND AFTER F	PLACING GRAVEL I	N TRENCH(ES)		
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO A	ABSORPTION TRENC	H 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

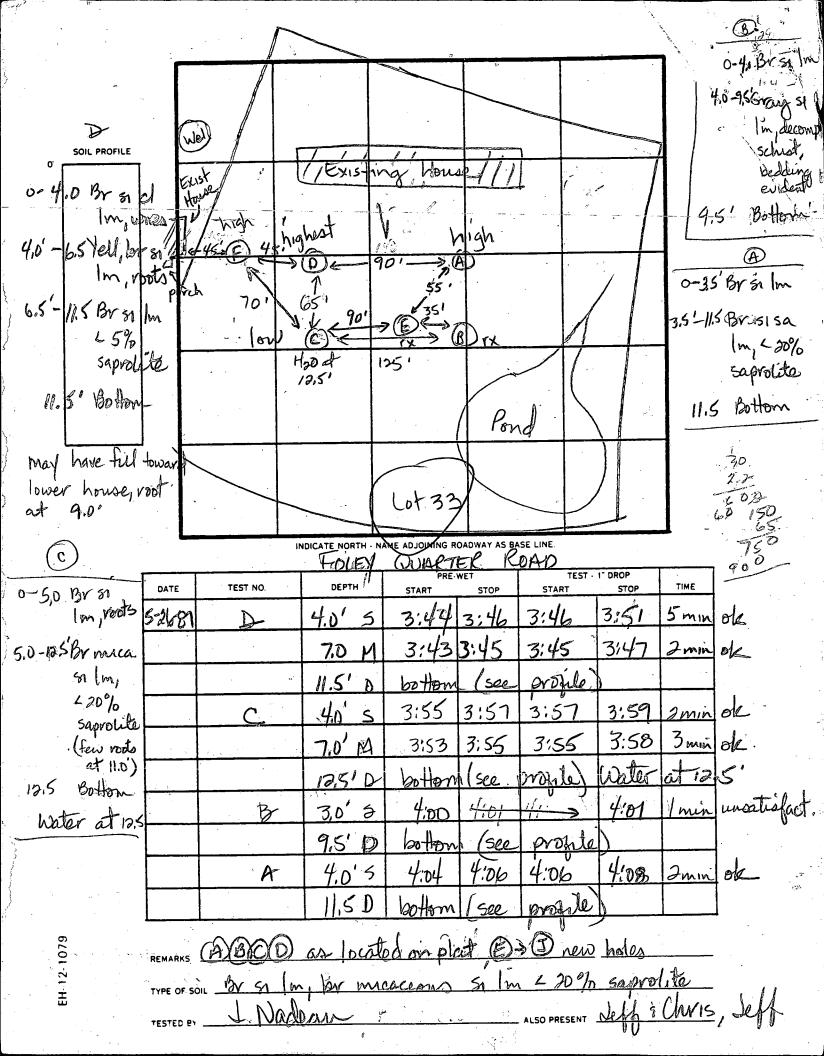
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES



APPLICATION

	PERCOLATION TE	ESTING	·
		A	' P
HOWARD COUNTY HEALTH DEPARTM	MI TO PE	perhed 7-20-8	DISTRICT
P.O. BOX 476 ELLICOTT CITY, MARYLAND 2	- A-	~ []	DATE 2/26/87
TELEPHONE: 461-9933	2/20/0 21	appropriate	DATE
	المعمور	2	
	Tower to the second		51 1
: THE COUNTY HEALTH OFFICER		1	Sheet 193
ELLICOTT CITY, MARYLAND			
I, HEREBY, APPLY FOR THE NECESSARY TES	I IN ORDER TO CONSTRUCT (OR RECON	STRUCTI A SEWAGE DISPOSAL	SYSTEM.
OPERTY OWNER Royden A.	Blunt Robe ies, Inc. 233 E. Re	rt Chillens	
c/o F.A.M. Equi	ies, Inc. 233 E. Re		
ADDRESS Baltimore, MD	21202	PHONE	
F.A.M. Eq	uities, Inc.		
802 Garrett BI	ig., 233 E. Redwood S	treet	704 605 0500
ADDRESS Baltimore, MD	21202	PHONE	301-685-8588
Intersection	of Rt. 32 and Folly Q	uarter Road	- a - andi-
ROPERTY LOCATION: THE SECTION			2 6000000000000000000000000000000000000
Ridgewood Ridgewood		LOT NO	<u> </u>
Off For	Ly Quarter	Rd (13301	Kidgewood DrivE)
DAD AND DESCRIPTION 077 100	7	, 30.	
		கூ	***
22 paggs # 16	J.	ANT	G. PERMIT SIGNED
TAX MAPPARCEL #	<u>/ </u>	Secial +	REJURNED 5/6/93
IZE OF LOT 4,7 AC		TYPE BLDG	Single Family -4 Bechara
			ISINGLE PAMIET DVELENO ON COMMENCIALITY
THE SYSTEM INSTALLED UNDER THIS APPL	CATION IS ACCEPTABLE ONLY UNT	IL PUBLIC FACILITIES BECC	ME AVAILABLE. I FULLY UNDERSTAND THE
	•		
EE CONNECTED WITH THE FILING OF THIS		to d	IRCUMSTANCES. I ALSO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIREMENTS IN T	STING THIS LOT WIGOIN	1 H. Therner-1	Agent for FAM EQ.)
WITH ALL MIO.S.H.A. REGOMEMENTS IN T	.571110 77113 5511	(SIGNATURE OF	APPLICANT)
B NINON	508 \$	hallow on	ly DATE 10/27/87
PPROVED BY	- rok -	, <u>, , , , , , , , , , , , , , , , , , </u>	
EJECTED BY	FOR		DATE
Ø	- 0 1 1	400	DATE
IOLD PENDING FURTHER TESTS	ar form and		
EASONS FOR REJECTION OR HOLDING	ray be 250	parato k	alars Volument
	In the same		
	THE RESERVE SALL THE PARTY OF T	·	Contract
	CHAD LOW SYS!	LIMB COM	YEE ADDITIONAL
	3		
			NOTES ON NEXT
TUIC IC	NOT	ΔΡ	FPMIT



APPLICATION

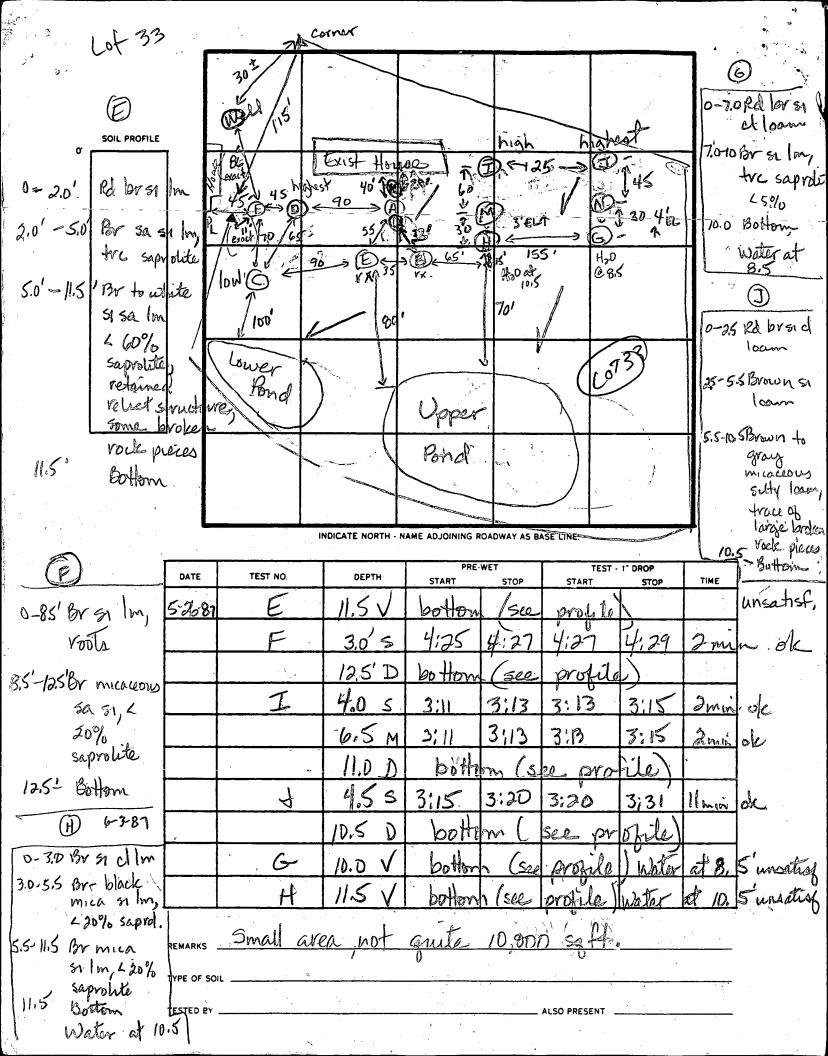
PERCOLATION TESTING

38877

HOWARD COUNTY HEALTH DEPARTMENT DISTRICT BUREAU OF ENVIRONMENTAL HEALTH P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE. 461-9933 THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND I, HEREBY. APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM ADDRESS . ADDRESS PROPERTY LOCATION: ROAD AND DESCRIPTION (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 UN TESTING THIS LOT. HOLD PENDING FURTHER TESTS

HD-216

THIS IS NOT A PERMIT



APPLICATION

PERCOLATION TESTING

A 38877

Р _____

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 461-9933

DATE 2-26-87

Sheet 30/3

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				•		
ADDRESS		· · · · · · · · · · · · · · · · · · ·		PHONE		
PROSPECTIVE BUYER						
ADDRESS	· · · · · · · · · · · · · · · · · · ·	<u> </u>		PHONE		· · · · · · · · · · · · · · · · · · ·
PROPERTY LOCATION: SUBDIVISION PLACE	wood			LOT NO	33	
ROAD AND DESCRIPTION			- 			
			<u> </u>	· · · · · · · · · · · · · · · · · · ·		
TAX MAP ————PARC	EL #					
SIZE OF LOT	<u>γ</u> γ			_ TYPE BLOG _	(SINGLE FAMILY DWE	LLING OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER	R THIS APPLICATION IS	ACCEPTABLE ONLY	INTIL PÜBLIC FA	ACILITIES BECO	ME AVAILABLE. I FU	LLY UNDERSTAND THE
FEE CONNECTED WITH THE FIL			*	E UNDER ANY C	RCUMSTANCES. I AL	SO AGREE TO COMPLY
WITH ALL M.O.S.H.A. REQUIRER	MENTS IN TESTING TH	IIS LOT.				
			4	SIGNATURE OF		
APPROVED BY		FOR _		p	DATE	
REJECTED BY		FOR _	e		DATE	
HOLD PENDING FURTHER TESTS		· · · · · · · · · · · · · · · · · · ·			DATE	· · · · · · · · · · · · · · · · · · ·
REASONS FOR REJECTION OR HOLDI	NG		· · · · · · · · · · · · · · · · · · ·	, 		
:				v		<u> </u>

THIS IS NOT A PERMIT

TD-216

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σ	SOIL PROFILE	, [Jun	(")		マノ 		9
0-3,5	Rd lov sil	ly.			3					- clay
- 35-11.0	Brown to black in			<u>-</u>					ela ela	A (3
	Si loan some sap			ं उत्तव	PERC D	S Ki) SU C	H THAT	<i>P</i>	frances
	625 %, v	relict re to		(2 mind	APSA	es con		Wa.	College - Colleg
11.0	Saprolite Bottom		73		UPPSR 6	1		1)350		- V
	dry		e e e e e e e e e e e e e e e e e e e		FOR IN	MIN				030
))	Ĺ <u></u>		ý		LOWER	I				
M		ŀ			CSHALL	pw	5 Y& 7	eas of		
Deen	- clay				•			or of a	Su	Lin
1.1				INDICATE NORTH -	NAME ADJOINING ROA	ADWAY AS BA	ASE LINE.		-	CH W
to Iron		DATE	TEST NO.	DEPTH	PRE-WI	ET STOP	TES' START	T - 1" DROP STOP	TIME	kurd J
show s	Po GE	7/2%	K		VISUR	-(8	red 3	4 14		mod v
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^	Y WON		M	485	115	117	17	120	3mm	dal's
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			M N	35	sett o	25	7 A		3mm) 9mm)	•
	rows			11,0	o st s		lar 125		0.74	•
	nam			35	sett o	25	lar 125		0.74	•
	de de la como de la co			35	sett o	25	lar 125		9mm)	•
Service of the servic	ds som	REMARKS		111 D 38 98	sett o	25	lar 125		9mm)	15 % BD
of the state of th	offer Land	REMARKS TYPE OF S	SHA	11'D 38 98	system system	25	lare 125		9mm	•
Sold States	offer Land	REMARKS TYPE OF S RESTED BY	SHA Sola	111 D 38 98	softs 122 level syspen dependent	25	lare 125		9mm PAR VZZT	15 % BD

B 1 Q75Q SEQUENCE NO.	STATE OF M	IABVITAND	STATE PERMIT NUME	3ER
B 1 9758 SEQUENCE NO. (DP USE ONLY)	PERMIT TO D			1 5
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED	please print		10 0 1 0 4 1 9 β 70 fill in this form comp	40toty 79
IN COLS. 3-6 ON ALL CARDS)			L <u><u></u></u>	-//61 71
Date Received (APA)	<u> </u>	B 3	LOCATION OF WELL R -	13619
OWNER INFORMA	ATION	MANUALDI		40,10
REPARELLAND		8 COUNTY	21	10/3/81
15 Last Name Owner	First Name 34	RIDGEWDO		
1 1 1 5 8 MT 1 1 L 1 6 E 1	2 1 38 12 4 1 1	23 SUBDIVISION	n i	. 42
36 Street or RFD	55	SECTION 44 46	LOTOK I S	
57 Town 70	1) 12 / 0 4 13 SState 72 Zip 76	GLENELB		
		52 NEAREST TOWN		71
George F. Easterday	N AU	MILES FROM TOWN (ent	ter 0 if in town)	
		B 4	/3 /6 // /	•
L. Franklin Easterday, Inc.		1 2	RIDEWOOD DR.	
9255 Brown Church Rd., Mt.Airy,	. Md. 21771 -	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 J NEAR WHAT ROAD	30
Address 4 (*)		N		NORTH
Plane T. Eastraker	9/22/88	, N B NE	ON WHICH SIDE OF ROAD	
Signature /	Date '	8-9	(CIRCLE APPROPRIATE BOX)	WESTS
B 2 WELL INFORMATION	4	W TOWN E		SOUTH.
ÄPPROX. PUMPING RATE (GAL. PER MIN.)			34 2 h h 2 3	37
AVERAGE DAILY QUANTITY NEEDED	12	S _W S _E	DISTANCE FROM RO	AD
(GAL. PER DAY).	<u>C' 1 20</u>	8-9 S 8-9	ENTER FT o	or MI
USE FOR WATER (CIRCLE APPR	OPRIATE BOX)	8	NOT TO BE FILLED IN BY DRILL	38 39
	i.		HEALTH DEPARTMENT APPROV	
F FARMING (LIVESTOCK WATERING &		Howard	138877	7
IRRIGATION)	AGRICULTURAL	COUNTY NAME	J V 2 2 2 2	NTY NO.
INDUSTRIAL, COMMERCIAL, STATE A	ND FEDERAL GOV.	STATE SIGNATURE	INSER	ot s
22 UTHER (REQUIRES APPROPRIATION PUBLIC OR PRIVATE WATER COMPAI		DATE ISSUED	200	1 1 2
P APPROPRIATION PERMIT AND STATE		400488	a wellen (K.H.) chid	14181 -
APPROVAL) T TEST, OBSERVATION, MONITORING (MAY DECILIDE	NORTH O O	O SIGNATURE	0 0
APPROPRIATION PERMIT)	VIAT REQUIRE	GRID (1) 0 0	55 GRID() (1 (1) (1) (1)	63
		SHOW MAJOR FEATUR		
APPROXIMATE DEPTH OF WELLS	FEET	BOX & LOCATE WELL _ WITH AN X	PLAT ATT	ACHE D
		SOURCES OF DRILLING	3 WATER	
APPROXIMATE DIAMETER OF WELL	NEAREST INCH	WELL		
METHOD OF DOWNING		2		
METHOD OF DRILLING BORED (or Augered) JETTED	(circle one) Jetted & DRIVEN	3.		
20-	I	WRITE THE BOX NUMB FROM THE MAP HERE	ER	
3/	OTARY (Hydraulic Rotary) DRive-POINT	, The man there	Y. Y.	
	Drive-1 Ont	1 E/807	B	
other		1001	000	
REPLACEMENT OR DEEPEN	ED WELLS	"(320	000	\& \&\
(CIRCLE APPROPRIATE E			OW SHOWING LOCATION OF WE TOWNS AND ROADS AND GIVE	
THIS WELL WILL NOT REPLACE AN E	EXISTING WELL		TO NEAREST ROAD JUNCTION	
THIS WELL WILL REPLACE A WELL T	HAT WILL BE	N	(32)	
39 S AS A STANDBY	HAT WILL BE USED			· · · · · · · · · · · · · · · · · · ·
,	in the second se	T		
D THIS WELL WILL DEEPEN AN EXISTI	NG WELL	07	ENEUG	
PERMIT NUMBER OF WELL TO BE REPLA	CED OR DEEPENDED	TRIADE		٠,
(IF AVAILABLE) 41	52	I KITTLE	Ridgewow	
Not to be filled in by driller (OEP	USE ONLY)		X	(v)
APPROP. PERMIT NUMBER				\\d_{\alpha}^{\chi} = -1
APPHOP PEHMIT NUMBER 54	63			W.
FORCE WRITE PERMIT NO				
	73 74 75 76 77 78 79			
SPECIAL CONDITIONS		* * * * * * * * * * * * * * * * * * *		

3, 15	C 1 2 0537 SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
	(THIS NUMBER IS TO BE PUNCHED IN COLS. 36 ON ALL CARDS)	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY
	DATE Recéived DATE WELL COMPLETE	,	PERMIT NO. FROM "PERMIT TO DRILL WELL"
		22 4 0 0 26	W0-88-0213
	OWNER BOKKUWIKI M	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
	STREET OR RFD last name (£ 16	EWOOD PR first name TOWN	PLENEL C
	SUBDIVISION RIDGE WOOD		LOI
,	Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
	STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,	TYPE OF GROUTING MATERIAL	PUMPING TEST
	THICKNESS AND IF WATER BEARING DESCRIPTION (Ose FEET Check if water	CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour) 8 9 PUMPING RATE (gal. per min.
	additional sheets if needed) FROM TO bearing	NO. OF BAGS NO. OF POUNDS	to nearest gal.)
N. N. W.		GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE Buchet
Or Salar		from 6 ft. to 5 ft. ft.	WATER LEVEL (distance from land surface)
-	The second of th	48 10P 52 54 BOTTOM 58 (enter 0 if from surface) casing CASING RECORD	BEFORE PUMPING (4)
c.		types	WHEN PUMPING
		appropriate STEEL CONCRETE	TYPE OF PUMP USED (for test)
		code PL OT PLASTIC OTHER	air P piston T turbine
	The Act of the Control of the Contro	MAIN Nominal diameter Total depth	C centrifugal: R rotary O other (describe
	The state of the state of	CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	27 27 below)
	Gray No. 1 206 400 18		J jet (S submersible
		60 61 63 64 66 70 E OTHER CASING (if used)	
`		diameter depth (feet) inch from to	PUMP INSTALLED
			DRILLER WILL INSTALL PUMP YES NO
		N N N N N N N N N N N N N N N N N N N	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
		screen type SCREEN RECORD	EXCEPT HOME USE TYPE OF PUMP INSTALLED
		or open hole ST BR HO	PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE: 29
2		(appropriate) STEEL BHASS OPEN BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
		below PLASTIC OTHER	(to nearest gallon) 31 35
		C 2	PUMP HORSE POWER
		DEPTH (nearest ft.)	(nearest ft.)
i		E 1 4 4 4 1 15 17 21	CASING HEIGHT (circle appropriate box and enter casing height)
			LAND SURFACE
	CIRCLE APPROPRIATE LETTER	C 23 24 26 30 32 36	below b (literates) (neares) (1001)
	A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	E 3 38 39 41 45 47 51	LOCATION OF WELL ON LOT
	E ELECTRIC LOG OBTAINED	SLOT SIZE 123	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
	P TEST WELL CONVERTED TO PRODUCTION WELL	DIAMETER (NEAREST OF SCREEN INCH)	THAN TWO DISTANCES THAN TWO DISTANCES MEASUREMENTS TO WELL)
	I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17:13 "WELL CONSTRUCTION"	56 60 to	Q MILASONEMICATO TO WELL)
	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	IF WELL DRILLED WAS COME TO THE STATE OF THE	
	OF MY KNOWLEDGE.	FLOWING WELL INSERT 30 68 68 11 16	
	DRILLERS IDENT. NO. 2. Tasterlas	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
	DRILLERS SIGNATURE	T (E.R.O.S.)	
	(MUST MATCH SIGNATURE ON APPLICATION)	70 72 74 75 76	
	SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	
ı			

	, y . Y	
of	10,20 Mm	12.30
Date	10 Juli	,,0

FIELD DATA SHEET

Well Permit No. HO - \(\frac{18}{18}\) O \(\frac{1}{18}\) \(\frac{1}{18}\) O \(\frac{1}{1						
TIME (in 15	WATER LEVEL	PUMPING RATE /	FLOW METER READING	CALCULATED FLOW		
minute in- tervals	below M.P.	time to fill/5	(if used)	(gallons per		
9 . 45	1197	gallon bucket	N/A	minuce)		
10:00	117	12 500	plump at 260	3 gpm		
10.	117	/2	Killanen	15		
10:13	117'	112		5		
10:30	117'	12		5		
-						
10:45	112'	12		5		
11'60	117	1-5		1 hard		
11:15	117	15		5		
	117	12		5		
11:30	.1)+	1%		5		
11:45	1171.	12		5 .		
12,00	117	100				
17:15	1/2	12		<u> </u>		
12:30	117-	12				
1AL	//-	//\		5		
19 - UK	1.77/					
12,45	117'	12		13		

