

HOWARD COUNTY HEALTH DEPARTMENT BUREAU OF ENVIRONMENTAL HEALTH

461-9933

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

39513

DISTRICT

DATE SYSTEM APPROVED

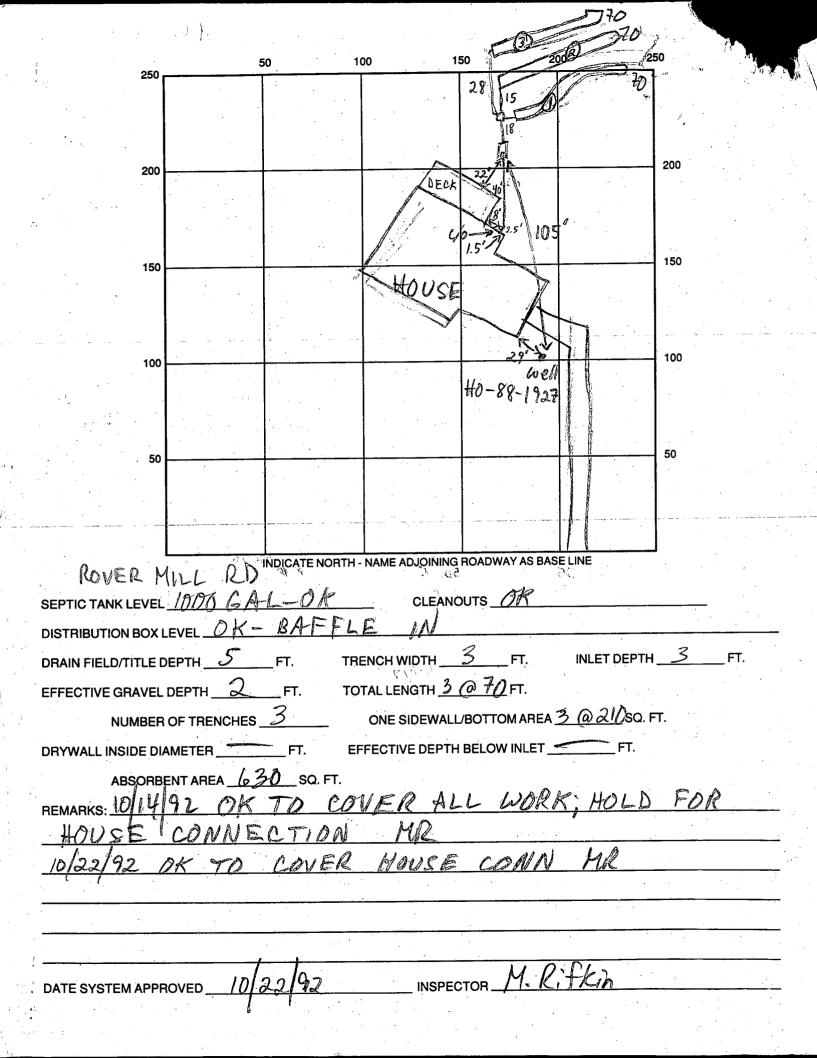
03-316378

				INSPECTOR TO THE PROPERTY OF T
Brian Isaac		ISP	ERMITTED TO INST	ALL X ALTER
ADDRESS P. O. Box 37, West Frien	dship, Maryland	21794	PHONE	465-2100
SUBDIVISION Rover Meadows	ьот10	ROAD	13940 Rover	Mill Road
PROPERTY OWNER	Sharon Isaac			
ADDRESS				
SEPTIC TANK CAPACITY 1000 GALLONS		•		
NUMBER OF BEDROOMS 3				
210 SQUARE FEET PER BEDROOM				
LINEAR FEET OF TRENCH REQUIRED 210		·		
TRENCHES - Trench to be 3 feet we depth 5 feet below or original grade. 2 feet LOCATION - Starting from the interpretation.	riginal grade. I eet of stone belo tersection of the	Effective a ow distribu e 162.10' a	rea begins at ition pipe. ind 6 53.7% lo	t 3 feet below ord; in
Run trench 2 35' down Run trenches on conto 100 feet from the we. NOTE = No trench to exceed and cap to grade or a	our away from the 11 and the trench 100 feet in lengt	e same lot hes at leas th. Provid	line. Keep to the contract of	the system at least om the house. ameter cleanout
DEVICE	NR 10/5/92			·
PLANS APROVED BY	Raymond Hodge's	<u>.</u>	cm	DATE10/16/91
COVER NO WORK UNTIL INSPECTED AND APPROVED		ı	·	
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEA	LTH DEPARTMENT IS RESPO	ONSIBLE FOR THE	SUCCESSFUL OPERAT	TION OF ANY SYSTEM
NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEV ACCEPTABLE.	WER LINE AND/OR AT 90°	SWEEPS IN LINES	S FROM HOUSE TO D	DRAIN FIELDS, 90° ELBOWS NOT
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, D AUTHORIZED)	ISTRIBUTION BOX TRENCH	ES) TO BE 100 F	EET FROM WELL (UN	LESS OTHERWISE SPECIFICALLY
NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPE	CTION BEFORE AND AFTER	PLACING GRAVEL	IN TRENCH(ES)	
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAME	TER NO ABSORPTION TRENG	CH TO EXCEED 100	FEET IN LENGTH	
NOTE: ALL DIDE COM HOUSE TO SEPTIC TANK MUST D	E CAST IDON OR SCHEDI II E	35/40 PVC OR ARS	2	

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

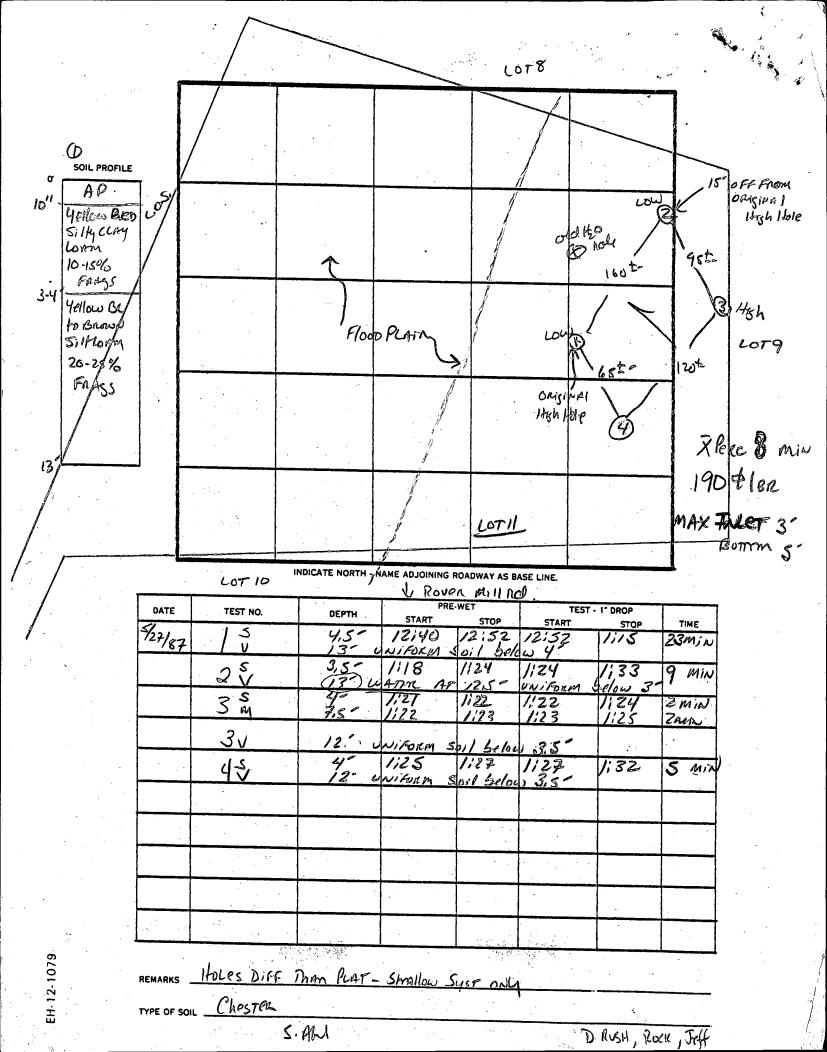


APPLICATION

*	SEWAGE DISPOSAL TESTING		A 39513
STATE OF MARYLA	IND - DEPARTMENT OF HEALTH AND ME	NTAL HYGIENE	Р
HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES		DISTRICT	36
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 992-2330			April po 1000

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND	
I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (C	OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.
	Isaac + Sharon Isaac
ADDRESS ROYEL Mill Rood 696-	9200 (w) PHONE
PROPERTY LOCATION:	
SUBDIVISION WE COUNTICK Property	LOTNOX10 on fina
ROAD AND DESCRIPTION OF the East side of Pare	Mill Road, at the intersection of
Old Rover food (13940 Rover	Mill Road)
SIZE OF LOT 3 AGE MINIMUM	TYPE BLDG 3 - 4
	(NUMBER OF BEDROOMS)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ON	LY 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.	Daylis W. Rush
	(SIGNATURE OF APPLICANT)
APPROVED BYFO	OR DATE
REJECTED BYFO	
HOLD PENDING FURTHER TESTS	and the second of the second o
REASONS FOR REJECTION OR HOLDING Rue. OMISTACTING A	Told for PLAT SAL 6-29-87 ALA
ADjUSTMENT IN PERC ANON PORM	THE DOWNSLOPE SA
	6100

THIS IS NOT A F



APPLICATION

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		SEWAGE DISPOSAL TES	TING		39511
		DEPARTMENT OF HEAD		GIENE	
	HOWARD COUNTY HEALTH DEPARTMENT			•	
•	ENVIRONMENTAL HEALTH SERVICES	•	•	DISTRICT	30
	P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 992-2330			DATE A	4il 20, 1987
		٨	•	DATE	
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		111/01	D.EXI	STING	DWELLIA
O:	THE COUNTY HEALTH OFFICER	W V	- P/ · ·		
	ELLICOTT CITY, MARYLAND			KE/	HABRED
	I. HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO	CONCERNET (OR DESCRIPTION			
	\\ \alpha \\ \al	CONSTRUCT TOR RECONSTRUC	CT) A SEWAGE DISPOSAL S	YSTEM.	
ROPE	ERTY OWNER COMPANY	brian 150	eac + Sh	aton Is	CAC
	ADDRESS ROVER Mill Road				- Cue
	ADDRESS 17111 1800		PHONE	465-7777	<u>-</u>
ROPE	ERTY LOCATION:				
		* *	**************************************		
יומפט	vision Mc Gritick Property			9 (EX	isting Ovelling
		A A	LOT NO	<u></u>	MING CHICIUIA
OAD.	AND DESCRIPTION OF THE East side a	f fact Mill 4	Road, at the	intersection	of of
d	ld face food			<u> </u>	
					
IŻE O	OF LOT 3 AGRE Minimum	•	, ::	3-4	•
			TYPE BLDG.	(NUMBER OF	PEDPOONES
THE S	SYSTEM INSTALLED UNDER THIS APPLICATION IS ACC	EPTABLE ONLY UNTIL PUE	BLIC FACILITIES BECOM	FAVAII ARI E I EIII	I V HINDEDSTAND THE
	CONNECTED WITH THE FILING OF THIS PERC TEST AP	PLICATION IS NON-REFUN	DABLE UNDER ANY CIRC	CUMSTANCES, I ALS	O AGREE TO COMPLY
	ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LO	4 1	in Il Rush	3	
	THE WOOD IN REGULATION IN TESTING THIS LO	ot	D. W. ISTON		
	100 mg/s 100		(SIGNATURE OF A	PPLICANT)	
PPRO	VED BY	FOR		DATE	
				- DATE	
EJEC	TED BY	FOR	<u> </u>	DATE	
OLD 1	PENDING FURTHER TESTS				
				DATE	·
EASO	ons for rejection or holding $5-27-82$ (ce	SATISFACTON 1	hold for Penso C	14	
			101 101 10	PALA	¥*

THIS IS NOT A PERMIT

SOIL PROFILE

O HD

HERCHAR

SILYCLING

COPM

10-150

Fring

4-45 Gillowich

SILYCOPM

15-20%

FRAGS

•		 Lo	TX		
		 		æ	•
					4
					(oT.
	LOT 11		Ð		
	LOT 10	BARN 25	180'		
		Lot 9	Frouse	ell Pit	

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

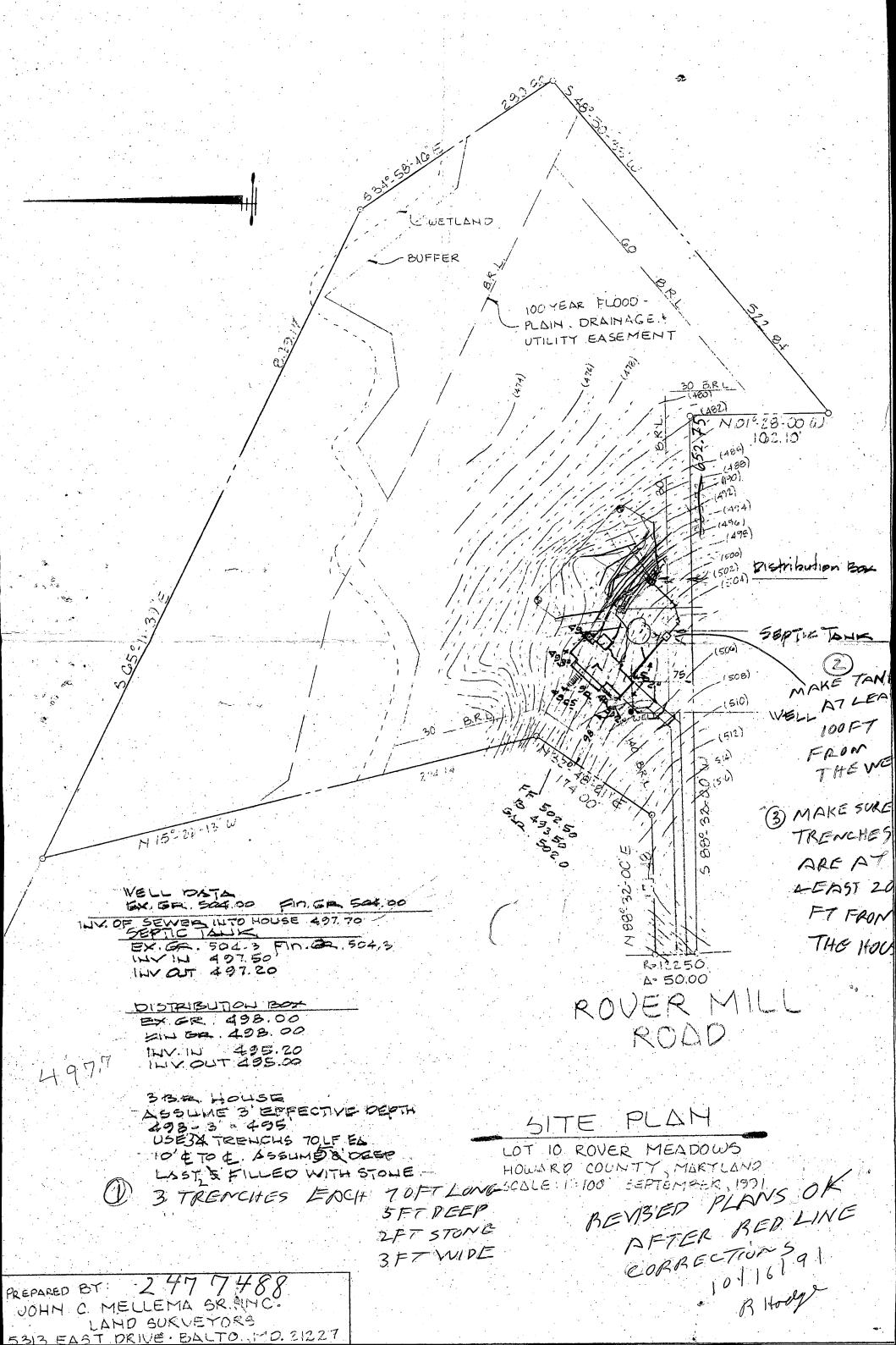
				Row	on Mil	િત્		
DATE	TEST NO.	DEI	тн	PRE-	WET STOP	TEST - START	1" DROP STOP	TIME
5/27/87	lv	13-	اهرارس	em Soil		15-		
	21			MM Soil				
1 7 7 10 1								
				· · · · · · · · · · · · · · · · · · ·				

			•						•	•
	SEVETIC	SYCT	CANINIT	Be	LOCATION-	Ac.e	of House	مسينسخ يرنج يحام	MA CO	15 B-01
REMARKS		<u> </u>								
	01.									* .

TYPE OF SOIL TAR IFK

5.06-1

Director Of Barton 2



EAST DRIVE · BALTO MO. 21227



B 1 SEQUENCE NO.	STATE OF	MARYLAND	STATE PERMIT NUMBER	
(DP USE ONLY)	l	ERMIT TO DRILL WELL	40-88-192	7
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED		int or type	70 fill in this form completely	7 79 .
in Cols. 3-6 QN all CARDS) Date Received (APA)	<u> </u>	B 3		
730591 OWNER INFORM	ΙΔΤΙΩΝΙ	1 2	LOCATION OF WELL	
8 13		HOWARD		
15AAS BRIH	N	8 COUNTY	21	
15 Last Name Owner	First Name 34	23 SUBDIVISION	[e] #11/10 WIS	42
1 3 9 0 0 R 0 0 E M / 1	LL RU 55	SECTION SECTION	LOT 10	72
WESTERIENDSDP	m021794	44 46	48 50	
57 Town 7	0 State 72 Zip 76	GLENWO0		
priller information	ON	52 NEAREST TOWN	7 K M	71
Joseph L. Mayre	238	MILES FROM TOWN (ente	r 0 if in town) 2 2 M I 73 76 77 78	
Driller's Name	77 License No. 80	B 4		
Firm Narrie	- 1 reling	DIRECTION OF WELL FROM	11 NEAR WHAT ROAD	30
5512 Ridge Rd. Ml. fa	ing, md. 21971	TOWN (CIRCLE BOX)		
Address & Man	3/5/9/			ORTH ·
Signature	Date	N 8 N E 8-9	(CIRCLE APPROPRIATE BOX)	32 []
B Ž WELL INFORMATION	<i>I</i>			S EAST OUTH
1 2 APPROX. PUMPING RATE (GAL. PER MIN.)		TOWN E		
AVERAGE DAILY QUANTITY NEEDED	12		34 3 5 0 37	
(GAL PER DAY)		S _W S _E 8-9 S 8-9	DISTANCE FROM ROAD	<u> </u>
USE FOR WATER (CIRCLE APPRO	20	8 8	ENTER FT or MI	38 39
<u> </u>	·		NOT TO BE FILLED IN BY DRILLER	
HOME (SINGLE OR DOUBLE HOUSEHO		11	HEALTH DEPARTMENT APPROVAL	100
FARMING (LIVESTOCK WATERING & AG	GRICULTURAL	MOUNT NAME	GOUNTY NO.	<u>くく</u>
INDUSTRIAL, COMMERCIAL, STATE AND	FEDERAL GOV.	STATE	COUNTY NO.	\Box
22 OTHER (REQUIRES APPROPRIATION P		SIGNATURE	INSERT S	41
PUBLIC OR PRIVATE WATER COMPANY APPROPRIATION PERMIT AND STATE H		D30591	Marke Hilles II	5/92
APPROVAL)			SIGNATURE EXP DA	<u> </u>
TEST, OBSERVATION, MONITORING (M/	AY REQUIRE	NORTH 5 3 4 0 0	O GRID O O O	
		SHOW MAJOR FEATURE	55 57 63 S OF 8/5/9/ 9/30	- ;
APPROXIMATE DEPTH OF WELL 260	FEET	BOX & LOCATE WELL _	Location OK	· .
24	28	WITH AN X SOURCES OF DRILLING	All De Co	
APPROXIMATE DIAMETER OF WELL6	NEAREST INCH	1. VUELL	11. #t	
	<u> </u>	2.	Hoags cerent Groutings	pass
METHOD OF DRILLING (ci		3.		1 4/391
BORED (or Augered) JETTED AND DEParation	Jetted & <u>DRIVEN</u>	WRITE THE BOX NUMBI	ER	
3/	ROTARY (Hydraulic Rotary)	FROM THE MAP HERE	_	
<u>CABLE</u> <u>REV</u> erse <u>-ROT</u> ary	<u>DR</u> ive- <u>POINT</u>	EVOX	-	
other		E 80K		
REPLACEMENT OR DEEPENE	D WELLS	N 5384	000	
(CIRCLE APPROPRIATE BO			SHOWING LOCATION OF WELL IN	
THIS WELL WILL NOT REPLACE AN EX	KISTING WELL		TOWNS AND ROADS AND GIVE TO NEAREST ROAD JUNCTION	
THIS WELL WILL REPLACE A WELL THE	HAT WILL BE	N	A CONTRACTOR OF THE PARTY OF TH	
ABANDONED AND SEALED 39 THIS WELL WILL REPLACE A WELL THE	HAT WILL BELISED	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		A
AS A STANDBY	g of the second	T	e Kandra Bit.	• • •
D THIS WELL WILL DEEPEN AN'EXISTING		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	L KONTO	
PERMIT NUMBER OF WELL TO BE REPLAC	ED OR DEEPENDED	a full	6/13	
(II AVAILABLE) 41	52		El x-wel	
Not to be filled in by driller (OEP t	JSE ONLY)		والمعال	
APPROP. PERMIT NUMBER G	APPPE		3	An
54	63 63	0	₹ J	
FORCE WITH WRITE PERMIT No. HO -	88=11927	/	77	
IN BOX	73 74 75 76 777 78 79			
SPECIAL CONDITIONS	"TUENTO"	Glanwood		

COUNTY

2

\$EQUENCE NO (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PUNCHED IN COLS:3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 39513
ST/CO USE ONLY DATE Received DATE WELL COMPLETE 15 15 20	22 235 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL"
OWNER	Kover Mill Zijst name Town G	Kaucod
SUBDIVISION ROVER MEAT	OWS SECTION	Tor 10
WELL LOG Not required for driven wells STATE THE KIND OF FORMATIONS	WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL 44 44	PUMPING TEST HOURS PUMPED (nearest hour)
DESCRIPTION (Use FEET Check if water bearing) additional sheets if needed) FROM TO	CEMENT CM BENTONITE CLAY BC NO. OF BAGS NO. OF POUNDS	PUMPING RATE (gal. per min. 3 9 2
SAND Stone 0 62	GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot) from C ft. to 6 0 ft.	to nearest gal.) METHOD USED TO MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
GRAY MICA 62 225 V	(enter 0 if from surface) Casing CASING RECORD	BEFORE PUMPING 3 3 1
CRAY MICH	types insert appropriate STEEL CONCRETE	WHEN PUMPING 22 TYPE OF PUMP USED (for test)
	code below PLASTIC OTHER	A air P piston T turbine
	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary Other (describe below)
	5 1 6 66 66 470	U jet S submersible
	C diameter depth (feet) H inch from to	PUMP INSTALLED
	C A S I	DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
	screen type SCREEN RECORD or open hole	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED
	insert STEL BR HO appropriate STEEL BRASS OPEN BRONZE HOLE	PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: CAPACITY: GALLONS PER MINUTE
	below PLASTIC OTHER C 2	(to nearest gallon) PUMP HORSE POWER 37 41
	DEPTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box
	A 8 9 11 15 17 21	and enter casing height) LAND SURFACE (nearest
CIRCLE APPROPRIATE LETTER A A WELL WAS ABANDONED AND SEALED	C 23 24 26 30 32 36 R 3	LOCATION OF WELL ON LOT
WHEN THIS WELL WAS COMPLETED E ELECTRIC LOG OBTAINED	N 38 39 41 45 47 51 SLOT SIZE 1 2 3	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR
P TEST WELL CONVERTED TO PRODUCTION WELL	DIAMETER (NEAREST OF SCREEN 56 60 INCH)	LANDMARKS AND INDICATE NOT LESS, THAN TWO DISTANCES (MEASUREMENTS TO WELL)
THEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE	from to	
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRE- SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.	IF WELL DRILLED WAS FLOWING WELL INSERT	- 2a /
DRILLERS IDENT NO. 131	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)	T (E.R.O.S.) 1 W O 74. 75 76	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	300
reaporation of shework in different from permitteey	COUNTY	(V poper meet of

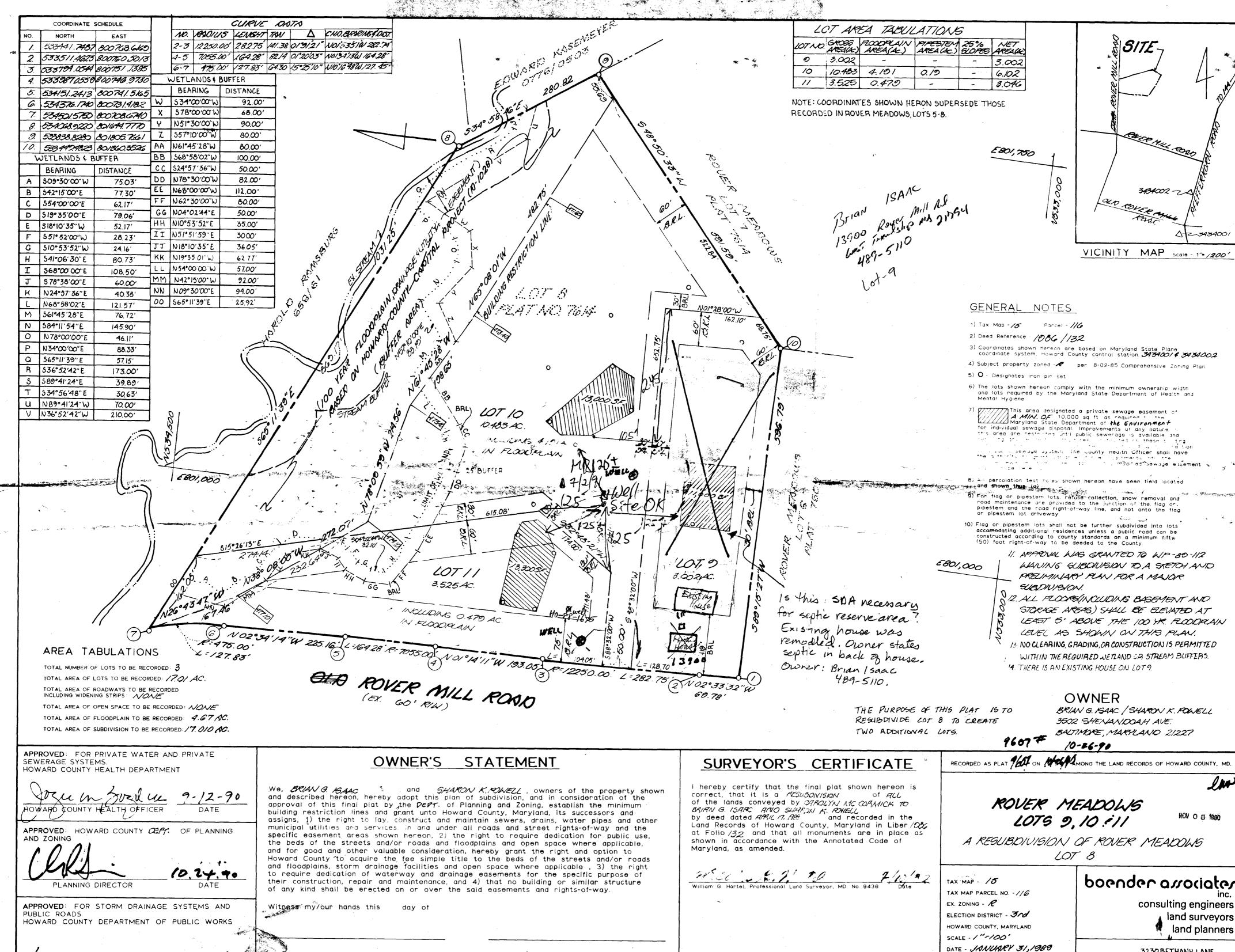
40/32/2V

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
Name of Installer MICHAEL F. MORLEY ALL QUALITY PLUMBING	Telephone <u>432 7247</u>
License Number	Registered Plumber ✓
Name of Property Owner _ BRIAN /55AC	Telephone <u>293 6427</u>
Subdivision ROVER MEADOWS Lot # 10 V Site Address 13940 ROVER MILL RD.	vell Tag # Ho - 88 - 1927
W. FRIENDSHIP, MD. 21794	
Pump Motor	Pitless Adapter
1. Type 1. Horsepower ½	
a. Deep well jet 2. RPM	2. Model # <u>B /0</u> ×
b. Shallow well jet 3. Voltage c. Submersible × a. 110	3. Depth /o'
2. MakeGouch 5 b. 220	
3. Model # 58305422	
4. Capacity S 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 elec	ctrical wiring from
vibrations? Torque arrestors Cable guard	isOther
Tank Piping 160 PS1	Well data
1. Capacity VIOA 1. Type BLK POLY 2. Pressure relief 2. Size /"	2. Yield 5 5 GPM
valve? <u>yes</u> 3. NSF and/or BOCA	3. Static water
P.A. OK 10' B.G. (EXISTING). Depth of supply	4 Will water supply
1 10 TO ~ () 1 10 ~ () 1 line / ()	be disinfected by
MR 10/22/92 B. G. + LAFTER line 10'	installer? No
I understand that it is my responsibility to notify Department when the installation is ready for inspect is null and void).	y the Howard County Health
All information given above is true to the best of my	/ knowledge.
Signature of Applicant:	· · · · · · · · · · · · · · · · · · ·
Date:	,

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



WITNESS

DIRECTOR

DATE

WITNESS

3230 BETHANY LANE ELLICOTT CITY, MD. 21043 1301) 465-7777 PN. 8005

O. P. & Z. FILE NOS. - F-88-86

WP-89-112 F-00-14