

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXXXXXX~~

313-2640

INDEXED

DISTRICT 3rd

DATE 4/29/93

DATE SYSTEM APPROVED 5/12/93

INSPECTOR R.H.

T. M. Moylan, Inc.

IS PERMITTED TO INSTALL X ALTER

ADDRESS 10 Melloff Avenue, Catonsville, Maryland 21228 PHONE 788-8466

SUBDIVISION Stephanie Woods Subdivision 2 ROAD 785 River Road

PROPERTY OWNER Christopher Carlyle

ADDRESS

SEPTIC TANK CAPACITY 1000 GALLONS

NUMBER OF BEDROOMS 3

200 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 150

Trenches adequate for 4 bedroom

TRENCHES - Trench to be 2 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 7 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 approximately 400 feet down the left (625') lot line and 80 feet off that line. Run trenches along contour toward right side of property.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. *OK 7/20/92 RJK*

PLANS APPROVED BY C. Williams

REVISED DATE 6/29/92

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 OR WATER SOURCE 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**

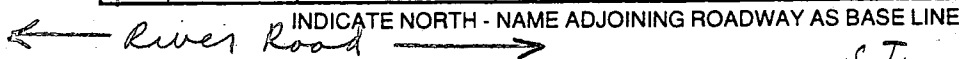
*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

5/3/93 P.C.O.
0 C.B.D.
5/4/93 2 P.C.O.
P 49205 C.B.D.
A 40923 5/11/93 P.C.O.
C.B.D.

**BUILDING PERMIT SIGNED
AND RETURNED**

*21005 BCO12168-2nd story
ADDITION*

A
40923



CLEANOUTS

S.T. ^{later}
No. 5/4/93

5/11/93
Not complete,

DISTRIBUTION BOX LEVEL OK (Ball is in) $\pm 5/4$ Lath

INLET DEPTH 3 FT.

TOTAL LENGTH $\frac{50}{51}$ } FT. } = 1.53

ONE SIDEWALL/BOTTOM AREA 612 SQ. FT.

EFFECTIVE DEPTH BELOW INLET 10 FT.

ABSORBENT AREA 612 SQ. FT.

REMARKS: 151 BIRCHWOOD LANE - P.M. - Septic tank just under
DENRUTER ¹⁰ (rock around area) [Hold for a call when trenches
READY 7 5/4/93 Noon - Partial - 1 trench; 50' long - only - of for
stones; C.B.D. 5/4/93 Late-Partial no pipe in trench. 5/5/93 NO ADD'L WORK.
3/4" GRAVEL USED MR; 5/11/93 ok for stone in trench #2 & #3, ok to
cover from house to septic tank. partial - C.B.D. Note: Need to see
DATE SYSTEM APPROVED 5/12/93 INSPECTOR B. Hodge
1/13 ends of 3 trenches & pipe from septic tank then to last trench.
5/12/93 ENDS OF TRENCHES OK C.B.D.

APPLICATION

PERCOLATION TESTING

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

A 40923

P _____

DISTRICT 3RD.

DATE 2-8-88

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 Raghibir Sehgal Former Doris Doll Property

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER CARMAN Associates

ADDRESS Box 122 E.C. 21043 PHONE 461-2855 Ron Carter

PROPERTY LOCATION:

SUBDIVISION Doris Doll 10 AC LOT NO. 2

ROAD AND DESCRIPTION River Road

~~OLD PERMIT SIGNED~~

~~NOT RETURNED~~ 6227
Serial # 44051

TAX MAP 9 PARCEL # 7

SIZE OF LOT 3 AC TYPE BLDG Single Family
(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. Phyllis A. Marlett
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

HD-216

THIS IS NOT A PERMIT

Lot 7

SOIL PROFILE

CLAY TOPSOIL
LIGHT BROWN SAND LOAM FEW COBBLES

17

12.5

BROWN CLAY
LIGHT BROWN SAND LOAM FEW COBBLES

(3)

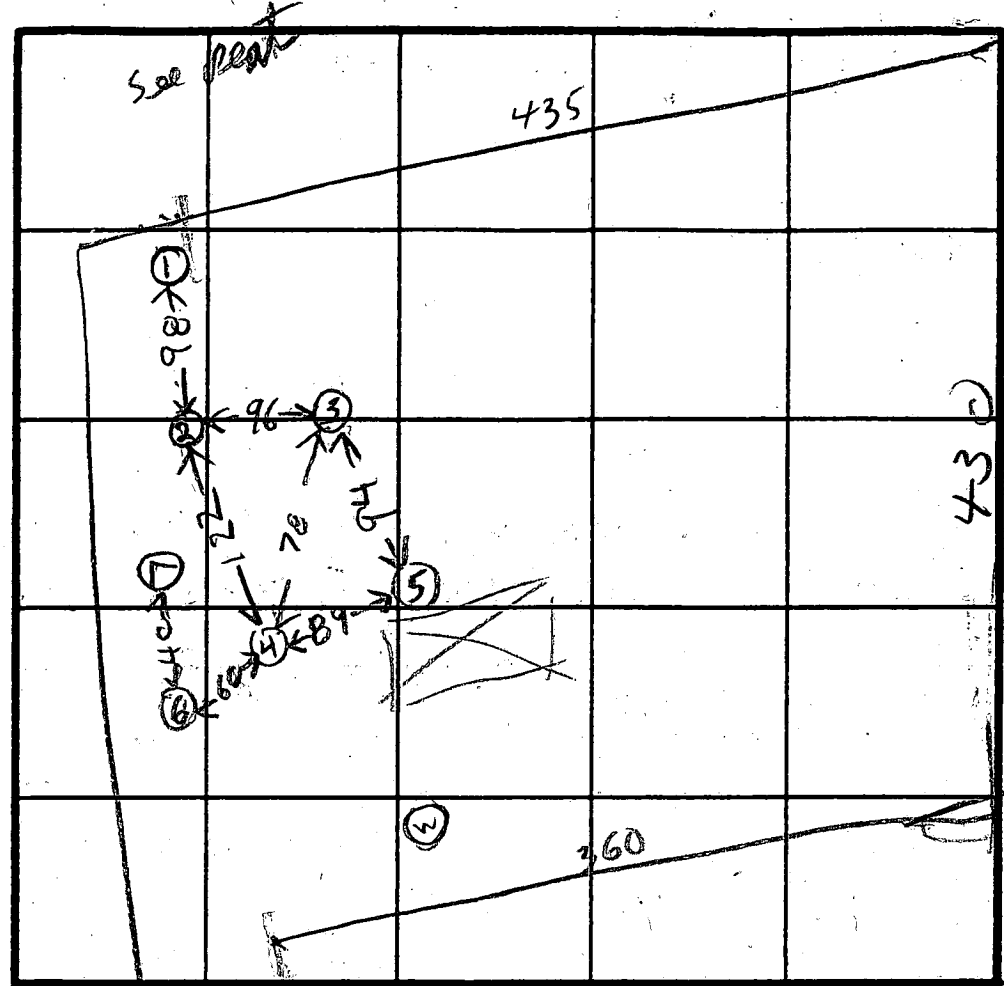
BROWN CLAY
GRAY BROWN SAND LOAM FEW COBBLES

12

(4)

BROWN CLAY TOPSOIL
BROWN GRAY SAND LOAM FEW COBBLES

12



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

(5)

BROWN CLAY LOAM
BROWN GRAY SAND LOAM

5

12

(6)

CLAY
SAND & BOULDER ROCK

3

12

(7)

CLAY
SAND & BOULDER
ROCK

5

10

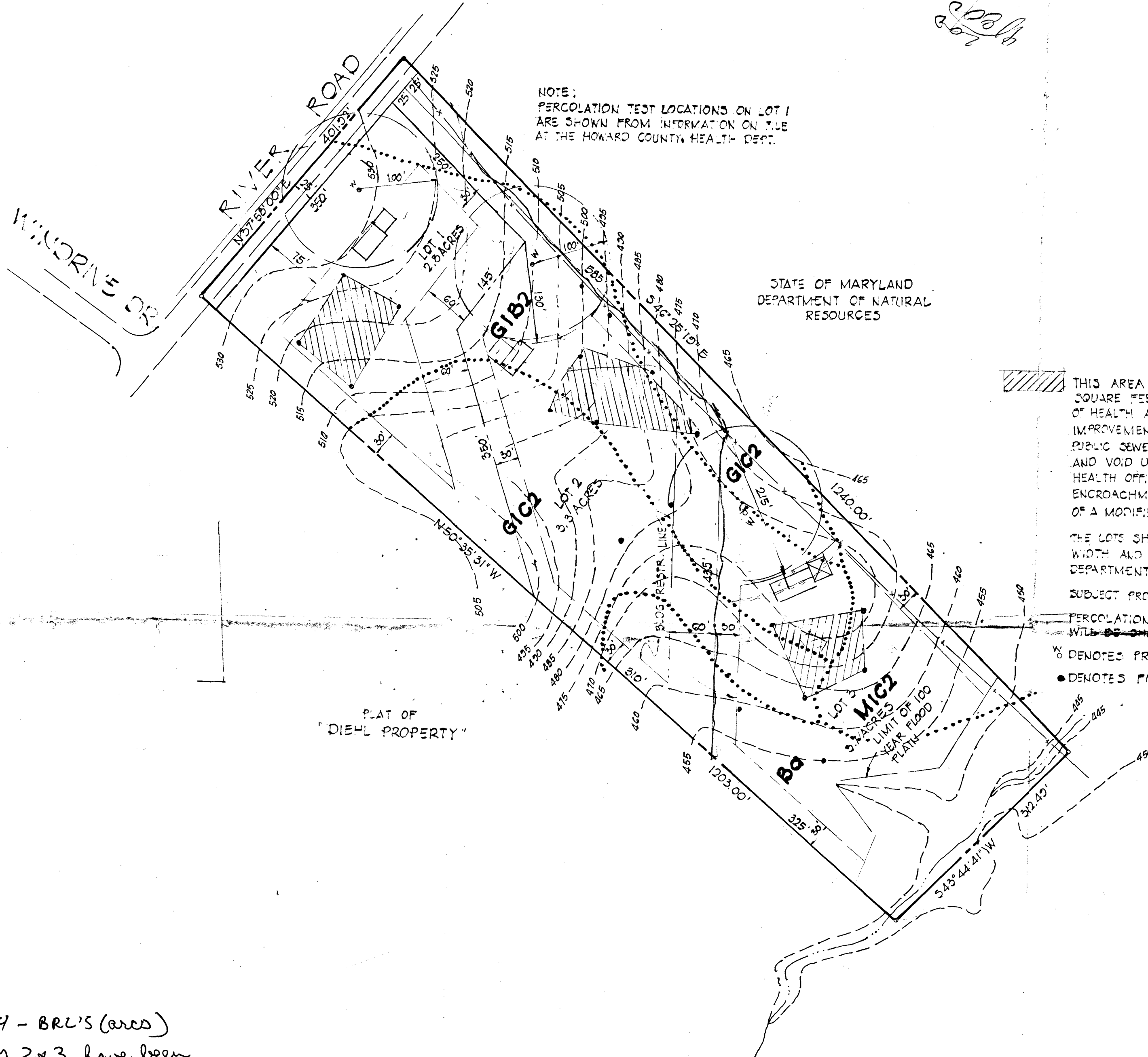
DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/14/88	1S	5	1112	1124	1124	1144	20
	1V	12.5	OK				
	2S	4	1122	1126	1126	1130	4
	2V	11	OK				
	3S	5	1141	1142	1142	1145	3
	3V	12	OK				
	4S	5	1156	1157	1157	1158	1
	4V	12	OK				
	5S	5	1206	1214	w/le pers		
	5D	8.5	1206	1209	1208		
	5V	12	OK				
	5M	6 1/2	1217	1218	1218	1220	2
	6	12	ROCKY SAND				
	7	10	ROCK BUTTON				

REMARKS: HOLE NOT DUG PER SURVEY OR PLAN

TYPE OF SOIL: PUT TRENCH BETWEEN HOLE (4) & (5)

TESTED BY: RAYMOND ADAMS

ALSO PRESENT: DOC MARGULIS
KEN



NOTE:
PERCOLATION TEST LOCATIONS ON LOT 1
ARE SHOWN FROM INFORMATION ON FILE
AT THE HOWARD COUNTY HEALTH DEPT.

STATE OF MARYLAND
DEPARTMENT OF NATURAL
RESOURCES

NOTES:

THIS AREA DESIGNATES A PRIVATE SEWAGE EASEMENT OF 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE FOR INDIVIDUAL SEWAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWER IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS INTO THE PRIVATE SEWAGE EASEMENT. RECORDATION OF A MODIFIED SEWAGE EASEMENT SHALL NOT BE NECESSARY.

THE LOTS SHOWN HEREON COMPLY WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREA AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

SUBJECT PROPERTY ZONED 'R' PER 10/3/77 COMPREHENSIVE ZONING PLAN.

PERCOLATION AREAS AND WATER WELLS FOR ADJOINING LOTS
WILL BE SHOWN WHERE PERTINENT.

W DENOTES PROPOSED WELL

• DENOTES FIELD LOCATION OF PERCOLATION TEST HOLES

7/26/58

F88 284 - BRL'S (area)

for lots 2 & 3 have been

↑, thus reducing 4/2
eliminating house sites

FISHER, C. C.

1000 2. 100'

1000 2. 100'

1000 2. 100'

1000 2. 100'

Perc records not available
at this time.

Refer final plat of this time
until BRL'S resolved

APPROVED FOR PRIVATE WATER AND
PRIVATE SEWERAGE SYSTEMS
HOWARD COUNTY HEALTH DEPARTMENT

J. B. B. B. 4-11-58
COUNTY HEALTH OFFICER

DATE

final plat in @ H3

PERCOLATION TEST CERTIFICATION PLAN

PROPERTY TO BE ACQUIRED BY

CARMAN ASSOCIATES

THIRD ELECTION DISTRICT

HOWARD COUNTY, MARYLAND

FEB. 5, 1988

SCALE: 1" = 100'

REVISED 4/1/88

C1 9599	SEQUENCE NO. (DENV USE ONLY)	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER	A-40923
DATE Received	DATE WELL COMPLETED	Depth of Well	PERMIT NO.
8 13	15 20	22 26 (TO NEAREST FOOT)	FROM "PERMIT TO DRILL WELL"
	180388	22 235 26	HC-85-0064

OWNER	last name	first name	TOWN
	RITTER	BILL	SYKESVILLE
STREET OR RFD	RIVER ROAD		
SUBDIVISION	STEPHANIS WOODS	SECTION	LOT
			2

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	
Clay	0 3	
Brown Shale	3 27	
GRAY GRAVEL	27 225	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL	
CEMENT	BENTONITE CLAY
CM	BC
NO. OF BAGS	NO. OF POUNDS
8	750
GALLONS OF WATER	
48	
DEPTH OF GROUT SEAL (to nearest foot)	
from	ft. to
48 52	54 58
(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)
56	33
60 61	63 64 66 70

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

SCREEN RECORD	
screen type or open hole	insert appropriate code below
ST BR HO	STEEL BRASS OPEN HOLE
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 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
56 60	
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.)
70	72
TELESCOPE CASING	LOG INDICATOR
OTHER DATA	

C3		
PUMPING TEST		
HOURS PUMPED (nearest hour)		
3		
PUMPING RATE (gal. per min. to nearest gal.)		
15		
METHOD USED TO MEASURE PUMPING RATE		
Bucket		
WATER LEVEL (distance from land surface)		
BEFORE PUMPING		
31		
WHEN PUMPING		
31		
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 (CIRCLE) (YES or NO)	
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)	
31 35	
PUMP HORSE POWER	
37 41	
PUMP COLUMN LENGTH (nearest ft.)	
43 47	
CASING HEIGHT (circle appropriate box and enter casing height)	
+ above	
LAND SURFACE	
- below	
3 (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 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 10.17.13 "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	1284	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER 4B-88-0064 <small>fill in this form completely</small>
<div style="display: flex; justify-content: space-between;"> <div style="width:48%;"> <p>Date Received (APA) 06/17/88</p> <p>OWNER INFORMATION</p> <p>15 Last Name WILK Owner First Name STEPHANIE</p> <p>36 Street or RFD 2381 LAKESIDE LANE</p> <p>57 Town CLARK 70 State 72 MD Zip 76 21771</p> </div> <div style="width:48%;"> <p>LOCATION OF WELL</p> <p>8 COUNTY NEWARD 21</p> <p>23 SUBDIVISION STEPHANIE WOODS 42</p> <p>SECTION 2 LOT 2 (OLD DOLL PROP)</p> <p>52 NEAREST TOWN SVK-EVILKE 71</p> <p>MILES FROM TOWN (enter 0 if in town) 2 M I</p> </div> </div>				
<div style="display: flex; justify-content: space-between;"> <div style="width:48%;"> <p>DRILLER INFORMATION</p> <p>Driller's Name Joseph L. Wayne 77 License No. 80 238</p> <p>Firm Name Joseph L. Wayne Well Drilling</p> <p>Address 5512 Ridge Rd. Mt. Airy, Md. 21771</p> <p>Signature Joseph L. Wayne Date 6/10/88</p> </div> <div style="width:48%;"> <p>WELL INFORMATION</p> <p>APPROX. PUMPING RATE (GAL. PER MIN.) 5</p> <p>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500</p> </div> </div>				
<p>USE FOR WATER (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</p> <p><input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)</p> <p><input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</p> <p><input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</p> <p><input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</p>				
<p>APPROXIMATE DEPTH OF WELL 260 FEET</p> <p>APPROXIMATE DIAMETER OF WELL 6 INCH</p>				
<p>METHOD OF DRILLING (circle one)</p> <p>BORED (or Augered) JETTED Jetted & DRIVEN</p> <p>AIR-ROtary AIR-PERcussion ROtary (Hydraulic Rotary)</p> <p>CABLE REVerse-ROtary DRive-POINT</p> <p>other _____</p>				
<p>REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX)</p> <p><input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL</p> <p><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</p> <p><input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY</p> <p><input type="checkbox"/> THIS WELL WILL DEEPEEN AN EXISTING WELL</p> <p>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____</p>				
<p><small>Not to be filled in by driller (OEP USE ONLY)</small></p> <p>APPROP. PERMIT NUMBER _____</p> <p>FORCE 2 WRITE INITIALS IN BOX 4B-88-0064</p> <p>SPECIAL CONDITIONS _____</p>				

LOCATION OF WELL (Continued)

11 NEAR WHAT ROAD **River Road**

ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE, BOX)

34 DISTANCE FROM ROAD **300** **37**

ENTER FT or MI **FT**

NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL

NEWARD **A 40923**

COUNTY NAME COUNTY NO.

STATE SIGNATURE _____ INSERT S _____

DATE ISSUED **07/25/88** CO SIGNATURE **B. Wilson** EXP. DATE **01/25/89**

NORTH GRID **551000** EAST GRID **0815000**

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

819 5

550 1

7/27/88 9:30

Not on site during grant 8-3-88

3 ft above ground

35 ft casing

30 ft open hole

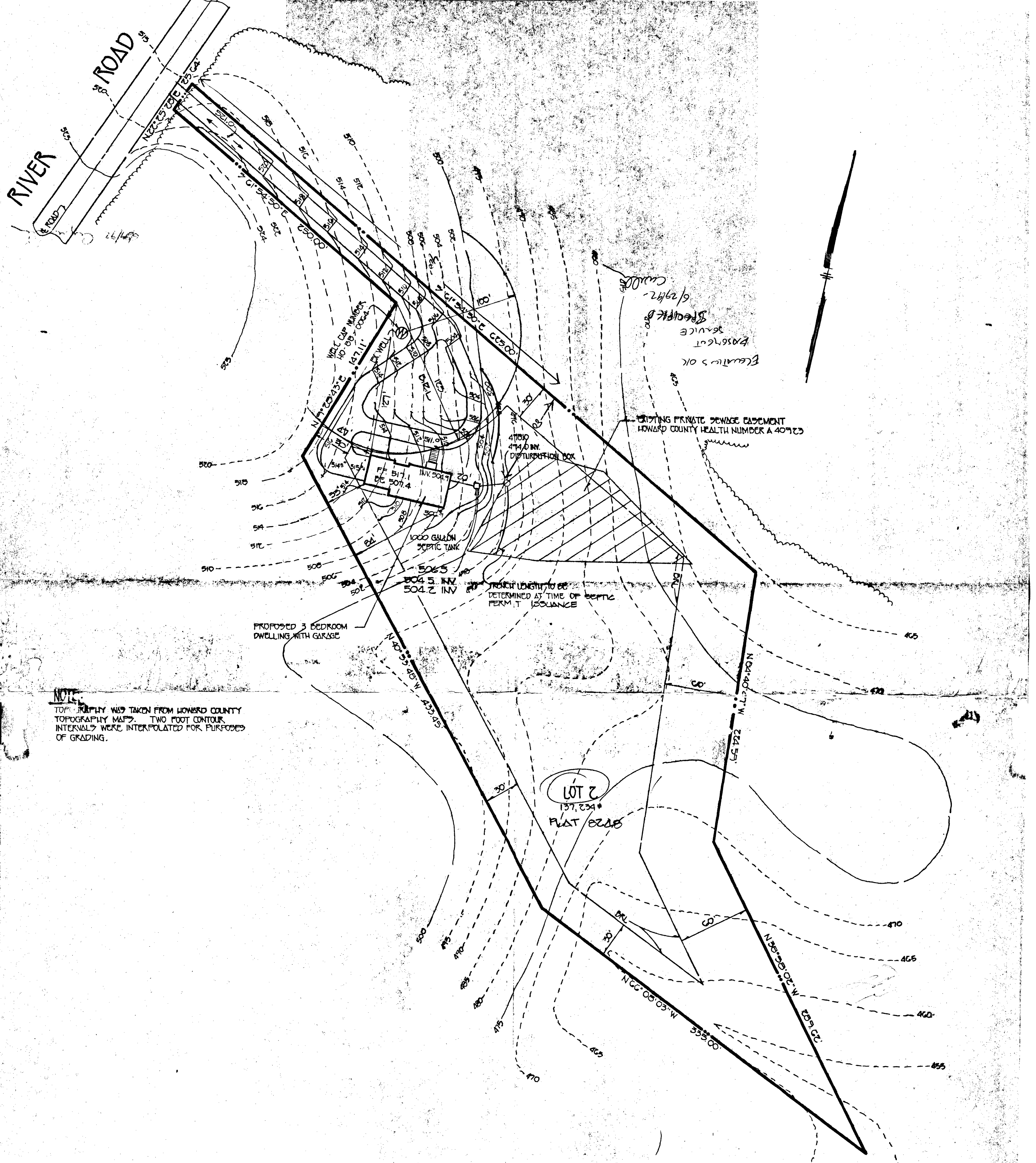
8 bags cement

Location of well

JE Nodorn

DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION

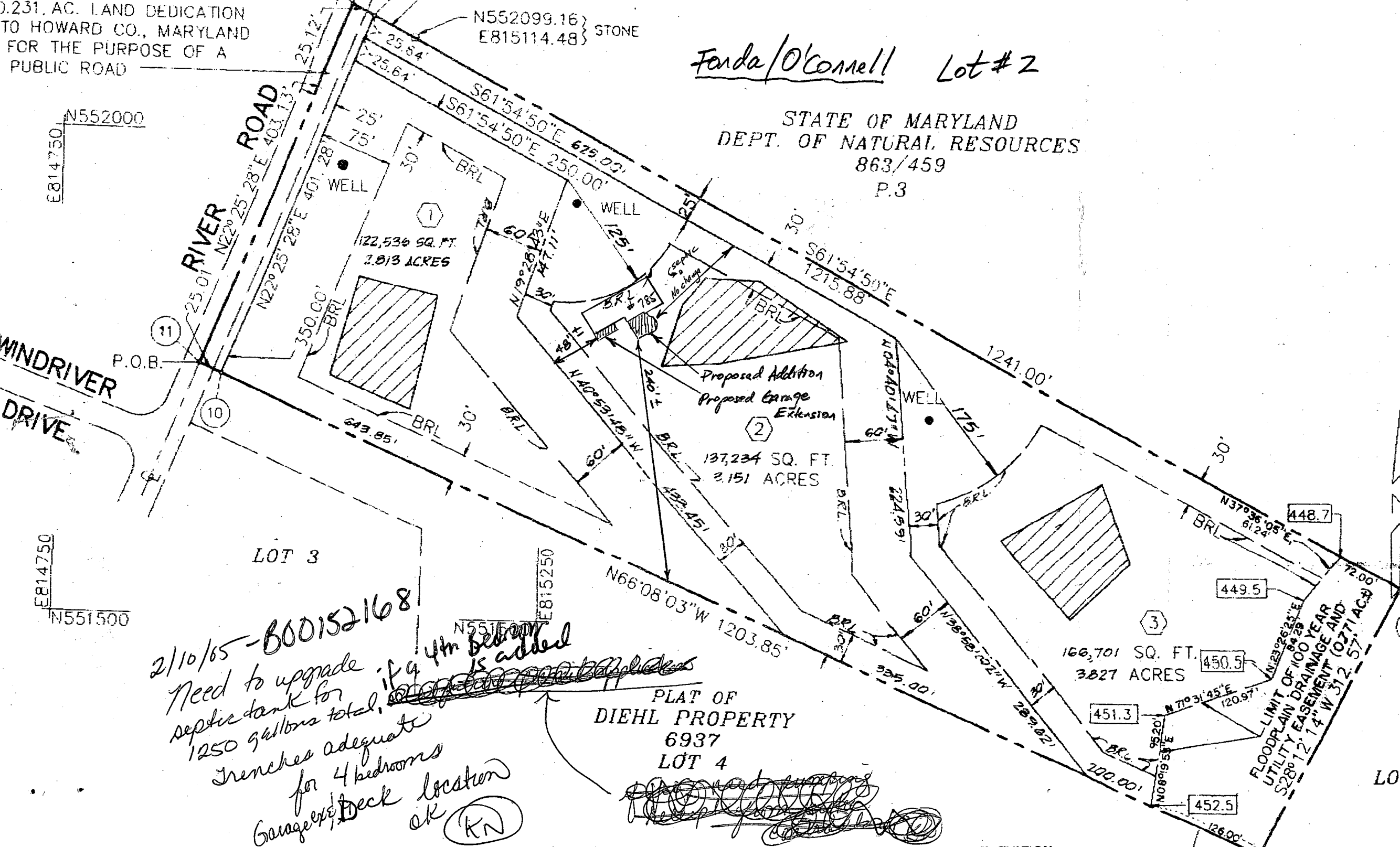
Sketch: A hand-drawn sketch showing a road junction. A road labeled "River Road" runs vertically. A road labeled "River" runs horizontally, intersecting River Road. A well location is marked with an 'X' and labeled "well". A distance of "32" is marked along River Road from the junction to the well. A north arrow points upwards.



0.231 AC. LAND DEDICATION
TO HOWARD CO., MARYLAND
FOR THE PURPOSE OF A
PUBLIC ROAD

Farda/O'Connell Lot #2

STATE OF MARYLAND
DEPT. OF NATURAL RESOURCES
863/459
P.3



2/10/65 - 600152168
Need to upgrade
septic tank for
1250 gallons total.
if 4 ym bed
is added
trenches adequate
for 4 bedrooms
Garage Deck location
ok
KN

PLAT OF
DIEHL PROPERTY
6937
LOT 4

FLOODPLAIN DRAINAGE AND
UTILITY EASEMENT (0.271 AC.)
LIMIT OF 100 YEAR
S28°12'14" W 312.57'
N23°26'25"E 64.29'