ADDRESS\_

#### Tax ID-04-349598

### PERMI

#### SEWAGE DISPOSAL SYSTEM

#### DEPARTMENT OF HEALTH AND MENTAL HYGIENE

p *50.3 ///B* 

41067

DISTRICT

DATE SYSTEM APPROVED 12/16

INSPECTOR

John Cullison

**BUREAU OF ENVIRONMENTAL HEALTH XXXXXXXX** 313-2640 INDEXED Fogle's Septic Clean \_\_\_\_ IS PERMITTED TO INSTALL X ALTER \_ ADDRESS 558 Obrecht Road, Sykesville, Maryland 21784 \_\_\_PHONE 795-5674 SUBDIVISION Wellington LOT 34, Area 1 ROAD 2832 Sagewood Drive Security Development Corp. PROPERTY OWNER \_

**GALLONS** 

9/30/99 Applicant finished basement with the addition of an extra bedroom-no upgrade

to septic required @ this

LINEAR FEET OF TRENCH REQUIRED 180

180 SQUARE FEET PER BEDROOM

SEPTIC TANK CAPACITY 1250

NUMBER OF BEDROOMS # 5

HOWARD COUNTY HEALTH DEPARTMENT

TRENCHES - Trench to be 2 feet wide. Inlet  $3\frac{1}{2}$  feet below original grade. Bottom maximum depth  $7\frac{1}{2}$  feet below original grade. Effective area begins at  $3\frac{1}{2}$  feet below

original grade. 4 feet of stone below distribution pipe.

LOCATION - Place distribution box 30 feet down the front lot line (334.45') and 80 feet off that same lot line when facing the lot from the pipestem. Run trenches on contour in both directions.

- No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and NOTES cap to grade or above on septic tank. OK 9/20/94 DKS

XI PERMIT SIGNED

NO RETURNED 9 DATE 09/07/94

PERMIT SIGNED

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

Amy McMillen

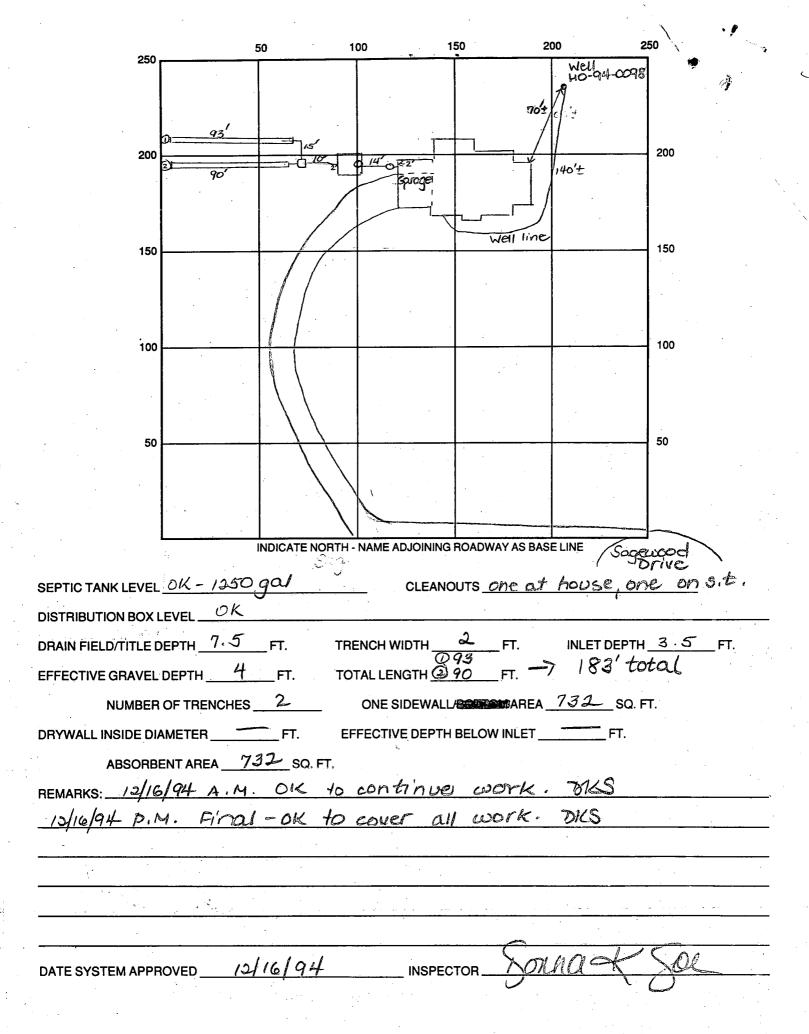
PERMIT VOID AFTER TWO YEARS

PLANS APROVED BY \_

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

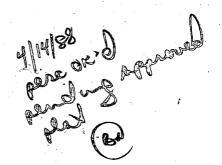


## APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES P. O. 80X 476 ELLICOTT CITY, MARYLAND 21043 TELEPHONE 992-2330

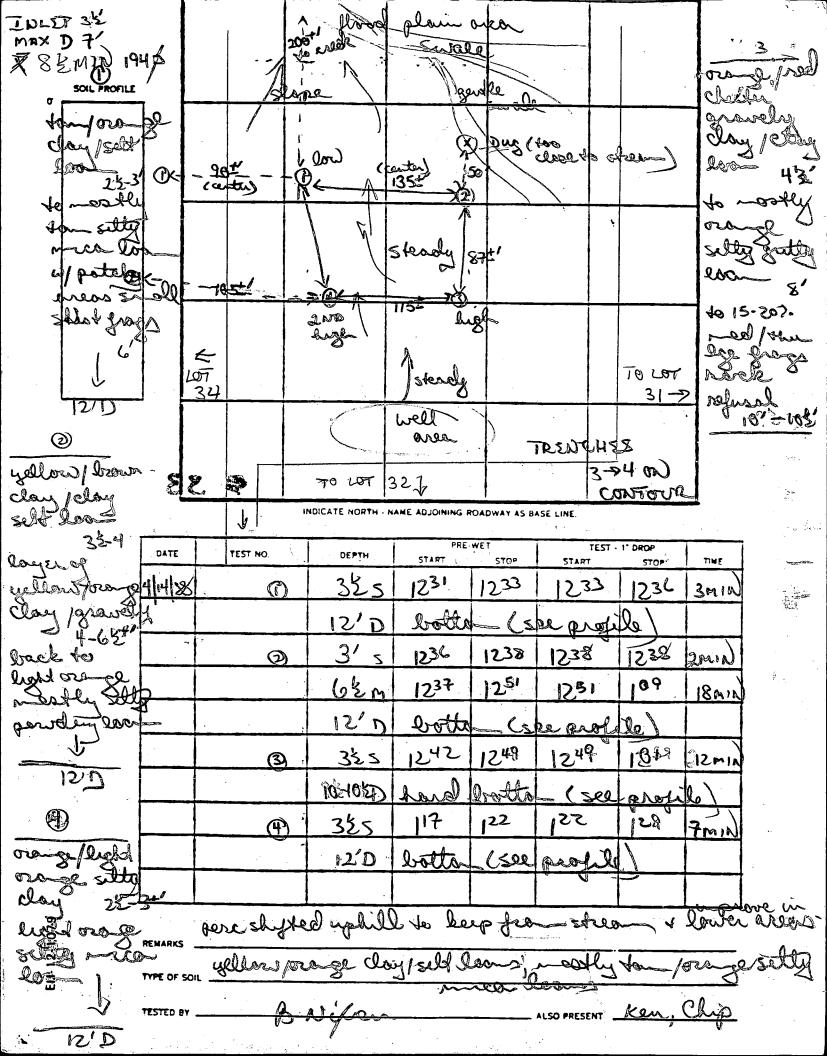


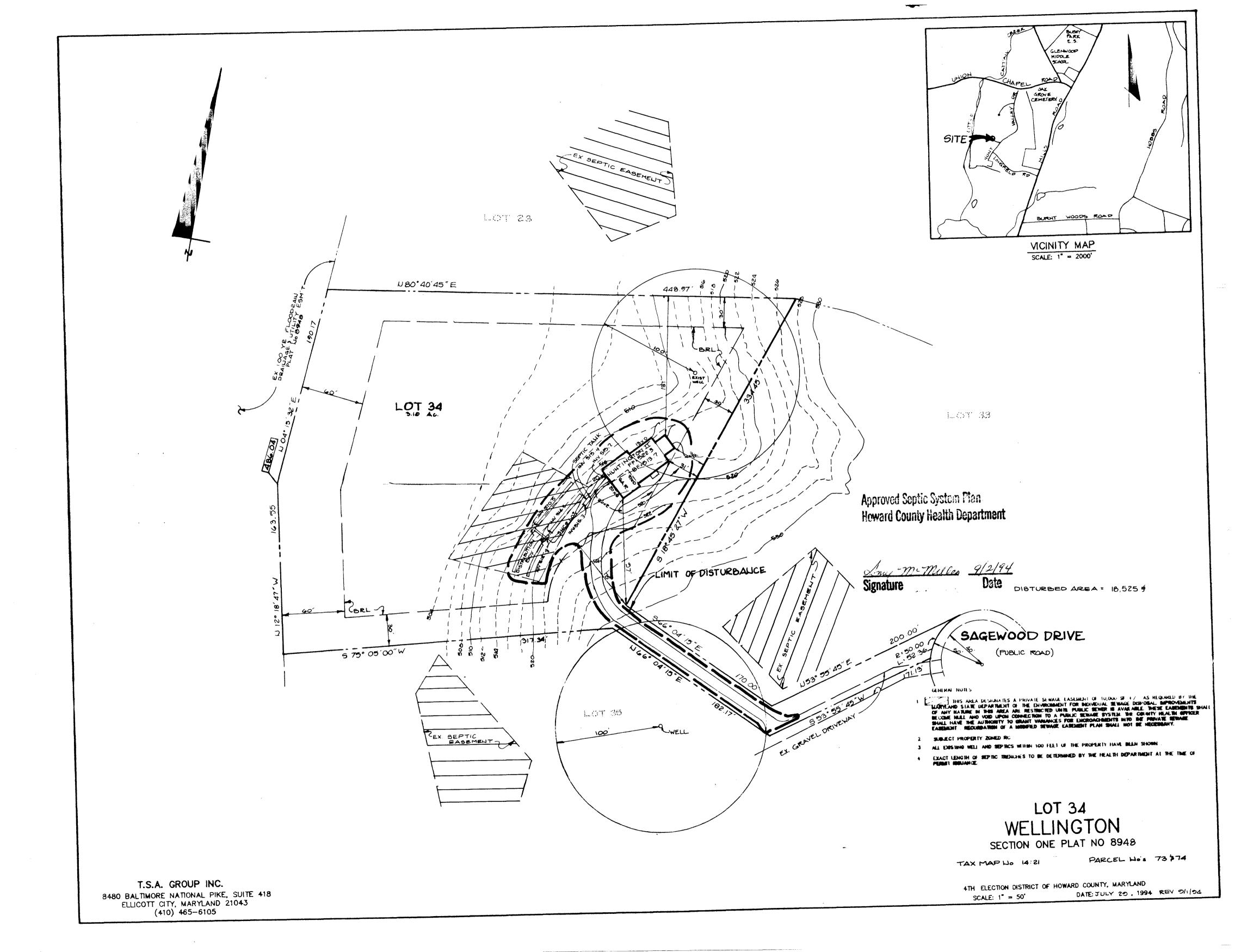
DATE December 18, 1987

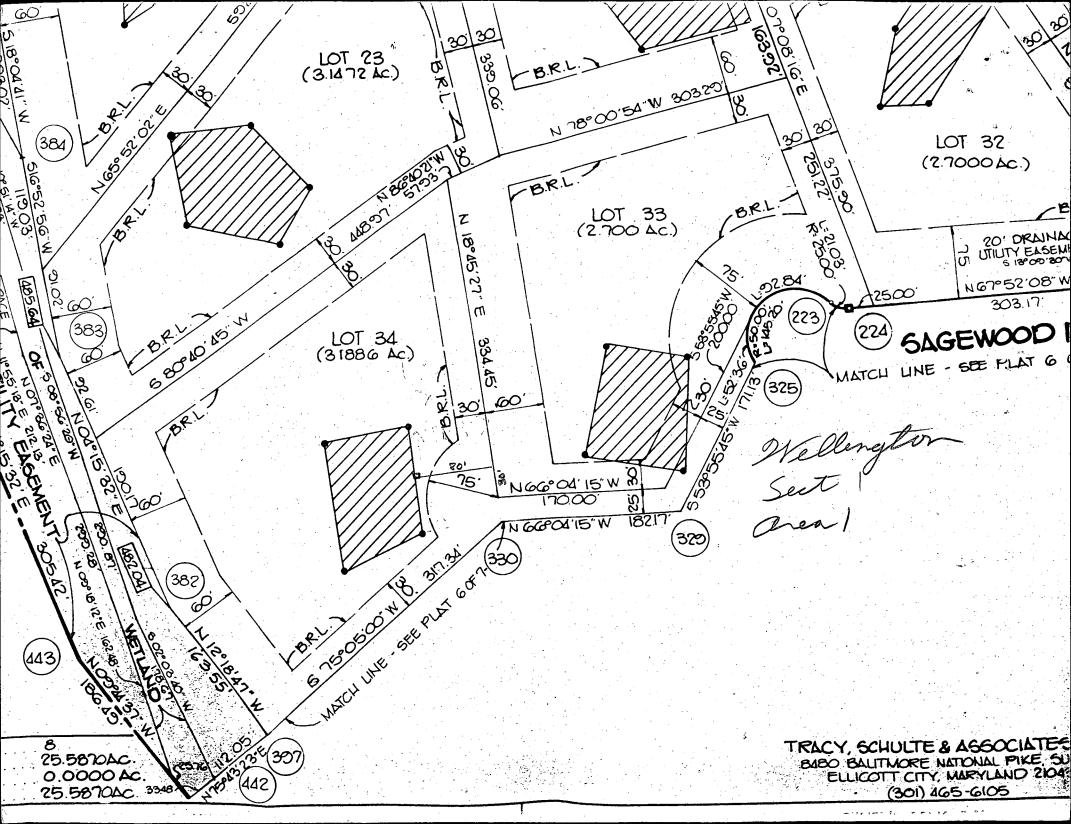
41067

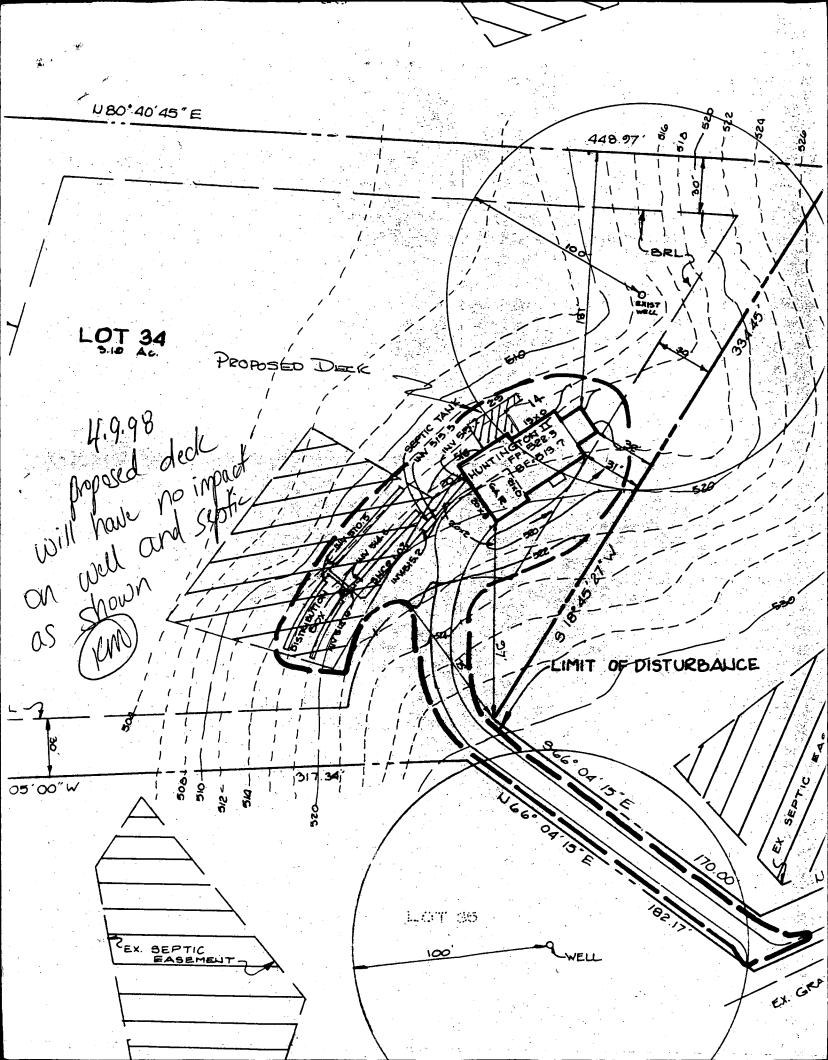
	•		•	
THE COUNTY HEALTH OFFICER		• .	•	
ELLICOTT CITY, MARYLAND		ann an Die <b>so</b> ell Cw		***
I. HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT IO		1,	/ -	
C. Oliver Goldsmith, et-ux.	BECURITY	Developm	nent-Corp.	- 4244
ADDRESS Route 27, Longwood Farm, Glenv	wood, MD 217	737. PHONE		
ATVLOCATION WELLINGTON SEC	71		Lotzy Pr	elmmy
SISION Chon-gwood Farm / RE	N/	LOT NO.	<b>\$ 3.3</b> 3	iec.
AND DESCRIPTION Southwest Quadrant of inter-	section of l	Roybury Mill	s Rd. (Rt.97)	• and
Union Chapel Road (2832)	Sagewood	Drive AND	RETURNED 9/	2/9%
Union Chaper house por species		Sle	UUP # 35801	-SFD-4B
3+ Acres		TYPE BLOG SF	D Residential	
FLOT			(NUMBER OF BED	
		* Undeterπ	ined at this	time
SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE OF	NLY UNTIL PUBLIC	FACILITIES BECOME	AVAILABLE. I FULLY	INDERSTAND THE
3131EM H317EEE5 GIGEN TO STATE OF THE STATE				
CONNECTED WITH THE FILING OF THIS PERC TEST APPLICATION	IS NON REFUNDAB	LE UNDER FNY CIR	UMSTANCES. I ALSO A	GREE TO COMPLY
Connect Estimate Temporary	1 Stew	NEMY DEURY	SPMEND, COME	
A ALL MOSHA REQUIREMENTS IN TESTING THIS LOT	5-y	a pend	~ US	
		ISIGNATURE OF A	PPLICANTI	1.1~
	500 Trens	l a	/	1251 9
ONED BY	FOR THE PARTY		DATE	/
TED BY	FOR		OUTE	
	, ·			
PENDING FURTHER TESTS	<b>N</b>		DATE	
on so or iscrem or horous fell lacatie	Le born o l	and had	a slevida	312 and
SONS FOR REJECTION OR HOLDING				V
			1	
	0 0	2002 20	o do el	

# THIS IS NOT A PERMIT









c1 8755	SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.				
1 2 3 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER A 4/06				
ST/CO USE ONLY	DATE WELL COMPLETE	Depth of Well  22 2 2 2 26  (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL"				
OWNER last name 2832 Spanning Chirst name TOWN							
STREET OR RED							
SUBDIVISIONWELL L		GROUTING RECORD (yes) no	C 3				
Not required for driven wells  STATE THE KIND OF FORMATIONS		WELL HAS BEEN GROUTED (Circle Appropriate Box)	1 2				
PENETRATED, THEIR THICKNESS AND IF V	COLOR, DEPTH,	TYPE OF GROUTING MATERIAL	PUMPING TEST HOURS PUMPED (nearest hour)				
DESCRIPTION (Use	FEET Check	CEMENT C M BENTONITE CLAY B C	8 9				
additional sheets if needed)	FROM TO bearing	NO. OF BAGS NO. OF POUNDS 13/16	PUMPING RATE (gal. per min. to nearest gal.)				
SAND Stoke Chay Much Keck	~ 521	GALLONS OF WATER DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE				
, and a second		from U / ft., to 5 2 , ft.	WATER LEVEL (distance from land surface)				
11° 11.	P 4 40 6	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING 17 20				
Liny Much	345 1	casing CASING RECORD types	WHEN PUMPING				
. Kerk	<b>海</b>	insert appropriate STEEL CONCRETE	TYPE OF PUMP USED (for test)				
		code below PL OT	A air P piston T turbine				
		PLASTIC OTHER	27 27 27 other				
		MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary O (describe below)				
		TYPE (nearest inch) (nearest foot)	J jet S submersible				
			27 27				
		60 61 63 64 66 70  E OTHER CASING (if used)					
		diameter depth (feet) H inch from to	PUMP INSTALLED				
		c	DRILLER WILL INSTALL PUMP YES NO				
		S I	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION				
·		G	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE				
	3	screen type SCREEN RECORD or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A.C.J.P.R.S.T.O)				
		insert appropriate STEEL BRASS OPEN OPEN	IN BOX - SEE ABOVE: 29				
		code   BRONZE HOLE	CAPACITY: GALLONS PER MINUTE				
		below PLASTIC OTHER	(to nearest gallon)  PUMP HORSE POWER				
		C 2	PUMP COLUMN LENGTH				
		DEPTH (nearest ft.)	(nearest ft)				
		E 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CASING HEIGHT (circle appropriate box and enter casing height)				
	·	A 8 9 11 15 17 21	LAND SURFACE				
		S 23 24 26 30 32 36	below (nearest foot)				
CIRCLE APPROPRIATE LETTER  A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED  R 3		49 50 51  LOCATION OF WELL ON LOT					
WHEN THIS WELL W			A SHOW PERMANENT STRUCTURE SUCH AS				
E ELECTRIC LOG OBTA	SLOT SIZE 1 3 3 3 RTED TO PRODUCTION DIAMETER (NEAREST		BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS				
P WELL OF SCREEN I INCH)		THAN TWO DISTANCES (MEASUREMENTS TO WELL)					
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 CRAVEL PACK		N					
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRE- SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF  IF WELL DRILLED WAS		IF WELL DRILLED WAS	0				
MY KNOWLEDGE. FLOWING WELL INSERT		See attached Well location					
DRILLERS IDENT. NO. OEP USE ONLY							
DRILLERS SIGNATURE		(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	Well location				
(MUST MATCH SIGNATURE	ON APPLICATION)	74 75 76					
·		70 72 0THER DATA					
SITE SUPERVISOR (sign. or responsible for sitework if d	t driller or journeyman different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR					

COUNTY