

PERMIT

04-350839

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P 50205HA 41280-BDISTRICT 4thDATE 8/10/94DATE SYSTEM APPROVED 7/28/94INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

~~Crosen Homes Inc.~~ Jack Fyock Septic Service IS PERMITTED TO INSTALL ☒ ALTER ☐ADDRESS 3775 Shady Lane PHONE _____SUBDIVISION Sharp Farms LOT 28 3927 ROAD Sharp RoadPROPERTY OWNER Crosen Homes, Inc. / New Owner -ADDRESS Robert HottingerSEPTIC TANK CAPACITY 1250 GALLONSNUMBER OF BEDROOMS 4210 SQUARE FEET PER BEDROOMLINEAR FEET OF TRENCH REQUIRED 210

BLDG. PERMIT SIGNED

AND RETURNED 3/13/97Serial # B0104412
ack
$$\begin{array}{r} 210 \\ 14 \\ \hline 4 \times 210 \\ \hline 840 \end{array}$$

840

TRENCHES - Trench to be 2' wide. Inlet 3' below original grade. Bottom maximum depth 7' below original grade. Effective area begins at 3' below original grade. 4 feet of stone below distribution pipe.

LOCATION - Start trenches 220' down along left (466' in length) property line from left front corner point and in 160' from left lot line being 466' in length when facing lot from Sharp Rd. CBS per plat 3/17/93. Run trenches on contours.

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

PLANS APPROVED BY _____ DATE _____

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.

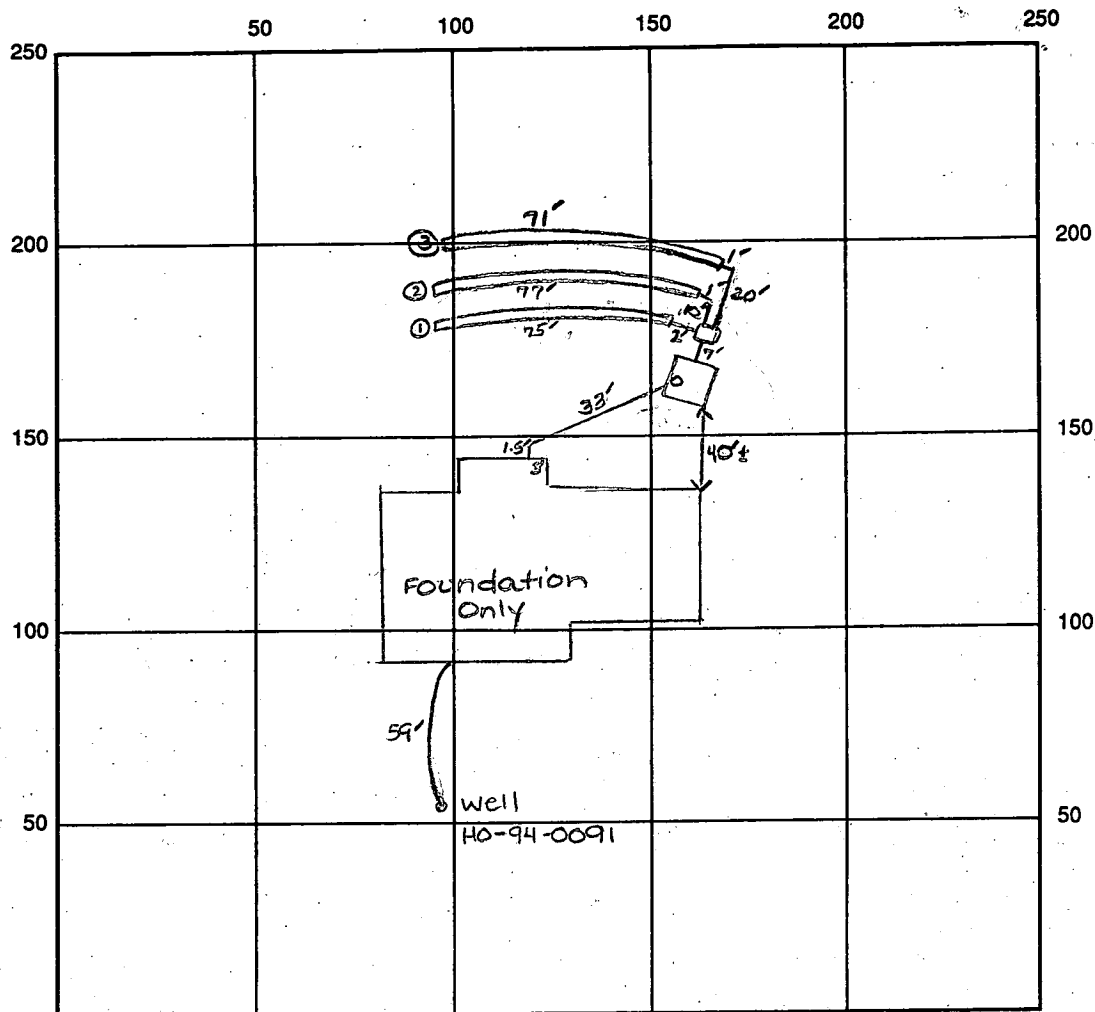
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

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

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A 412805



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
Sharp Road

SEPTIC TANK LEVEL OK - 1250 gal CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK - baffle in

DRAIN FIELD/TITLE DEPTH 7 FT. TRENCH WIDTH 2 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 4 FT. TOTAL LENGTH ①75 ②71 ③71 FT. 223' total

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 892 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA 892 SQ. FT.

REMARKS: 7/27/94 A.M. OK to cover house to s.t. and continue. DKS

7/27/94 P.M. OK to cover trenches ① and ②. DKS

WPI OK to cover. DKS

7/28/94 PM OK to cover all work. DKS

DATE SYSTEM APPROVED 7/28/94 INSPECTOR John K. Goe

HOWARD COUNTY

25.00
10

SERIAL NUMBER

55667

DEPARTMENT OF INSPECTIONS, LICENSES & PERMIT
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MARYLAND 21043

BUILDING ADDRESS (HOUSE NO., STREET, TOWN OR AREA)

3927 Sharp Road
Glenwood, MD 21738

GRADING/SEDIMENT CONTROL ☐ YES ☐ NO

SDP #

DESCRIPTION OF WORK AUTHORIZED

2 story, 2½ baths, 4 bedrooms, full
basement, fireplace and 2 car gara

LOT NO.	PARCEL NO.	SEC.	AREA	BLOCK NO.	LIBER	FOLIO
28	195	-	-	17	-	-

SUB DIVISION	ZONE	ZONE MAP	ELEC. DIST.	CENSUS TR.
Charles Sharp	21	4th	6040	

OWNER NAME AND ADDRESS	PHONE NO.
Crosen Homes, Inc. 3775 Shady Lane Glenwood, MD 21738	(301) 854- 6655

[illegible]

ARCHITECT OR ENGINEER'S NAME AND ADDRESS	PHONE NO.
Clark Finetrock & Sackett 7385 Minstrel Way Columbia, MD 21045	381-7500

CONTRACTOR'S NAME AND ADDRESS	PHONE NO.
Crosen Homes, Inc. 3775 Shady Lane Glenwood, MD 21738	(301) 854 6655

EXISTING USE	PROPOSED USE
vacant lot	single family dwelling

EST. CONSTRUCTION COST	LICENSE NUMBER	PERMIT FEE
------------------------	----------------	------------

120000

LICENSE NUMBER**PERMIT FEE**

W/S CODE

FOR OFFICE USE ONLY

DISTRICT IN FEET FROM R/W LINE TO FRONT BUILDING LINE

SIDE YARD
(DISTANCE IN FEET FROM SIDE BLDG. LINE TO SIDE PROPERTY LINE)

TO SIDE BUILDING LINE _____
DISTANCE IN FEET. REAR YD. REQUIRING SET

BACK (CORNER LOT ONLY)

SDP #

Check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

CAUTION

IMPORTANT: PLEASE SHOW ZIP CODES AND AREA CODES WHEREVER REQUIRED

LP-69-591

SIZE OF BLDG	FRONT	DEPTH	HEIGHT

TYPE OF BLDG.	AREA	VOLUME	ROOF
B. ROOMS			
ROOMS			
BATHS			
FIREPLACES			

FOOTINGS	FOUNDATION	S. WALLS

UTILITIES					
WATER/WELL	SEWER/SEPTIC	GAS	ELECTRICITY	TYPE OF HEAT	AC
			✓	HP	✓

I have carefully examined and read this application and know the same is true and correct, and that is doing this work, all provisions of Howard County Ordinances and the State Laws of Maryland will be complied with, whether specified or not; and I will notify the Department of Inspections, and Permits twenty-four hours in advance when I am ready for the inspections called for elsewhere in the application; and that no work will be covered up until such inspections have been complied with.

SIGNATURE President DATE 6/27/94
TITLE _____

FUNCTION	DATE	SIGNATURE APPROVAL
ZONING/PLANNING		
SHA		
SEDIMENT/GRADING		
BUILDING OFFICIAL		
WATER & SEWER		
HEALTH DEPT.	7/5/94	Amy M. Mc
FIRE PROTECTION		
STORM WATER MGM.		

APPROVED

DATE _____

Distribution of Copies:
White - Building Official
Green - Planning & Zoning

Yellow - Engineering
Pink - Health Dept.
Gold - S.H.A.

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 X
Replacement

Receipt # -0-
Date 7/22/94

Name of Installer GREG C. FRYFOGLE

Telephone 576-0003

License Number 9081
Certified Well Pump Installer

Well Driller Registered Plumber X

Name of Property Owner CROSEN HOMES

Telephone 854-6655

Subdivision SHARP FARM Lot # 28

Well Tag # 40-94-0091

Site Address 3927 SHARP RD.

Pump

1. Type

- a. Deep well jet
b. Shallow well jet
c. Submersible X

2. Make JACUZZI

3. Model # SANDHANDLER

4. Capacity 5 GPM

5. Pump exceeds well capacity Yes X No

6. If Yes, is low pressure cutoff switch installed? Yes X No

7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors Cable guards X Other

Motor

1. Horsepower 3/4

2. RPM

3. Voltage

a. 200
b. 220

Pitless Adapter

1. Make HARVARD

2. Model # PT800

3. Depth 42" MIN

Tank

1. Capacity W203

2. Pressure relief valve? YES

7/27/94 WPI

3'6" below grade

OK to cover. DKS

Piping

1. Type 1/60161" BLACK

2. Size 1"

3. NSF and/or BOCA Code approved YES

4. Depth of supply line 42"

Well data

1. Depth 345 ft.

2. Yield 2.5 GPM

3. Static water level ft.

4. 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: GREG C. Fryfogle

Date: 7/22/94

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

SUBDIVISION:

Sharp Farms

A 41280

LOT NUMBER:

28

Sharp Road

DRY WELL OR DRY WELL AND TRENCH

sq. ft./bedroom

	Septic Tank
3 bedroom	1000 gallon
4 bedroom	1250 gallon
5 bedroom	1500 gallon

Minimum Total Square Feet

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5-foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHESTrench to be 2' wide.Inlet 3 feet below original grade.Bottom maximum depth 7 feet below original grade.Effective area begins at 3 feet below original grade. BLDG. PERMIT SIGNED AND RETURNED 7/5/944 feet of stone below distribution pipe.210 sq. ft./bedroom

4 bedroom house =

210 linear ft. of trench

- NOTE:**
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a garbage disposal is used, increase septic tank capacity by 50% and increase absorbent sidewall area by 22%.

LOCATION:

Start trenches 22.0' down along left (466' in length) property line from left front corner point and in 100' down left lot line, leaving 466' in length when facing lot from SHARP ROAD

CBT per plat 3/12/93. Revised 6/13/94

Run trenches on contours.

#11

BELOW - T. SOIL
+ CLAY

LOAM



12 Days

TESTED BY

TESTS PER STAKE

7B " 11 1/2" L OAM-
IN OPEN

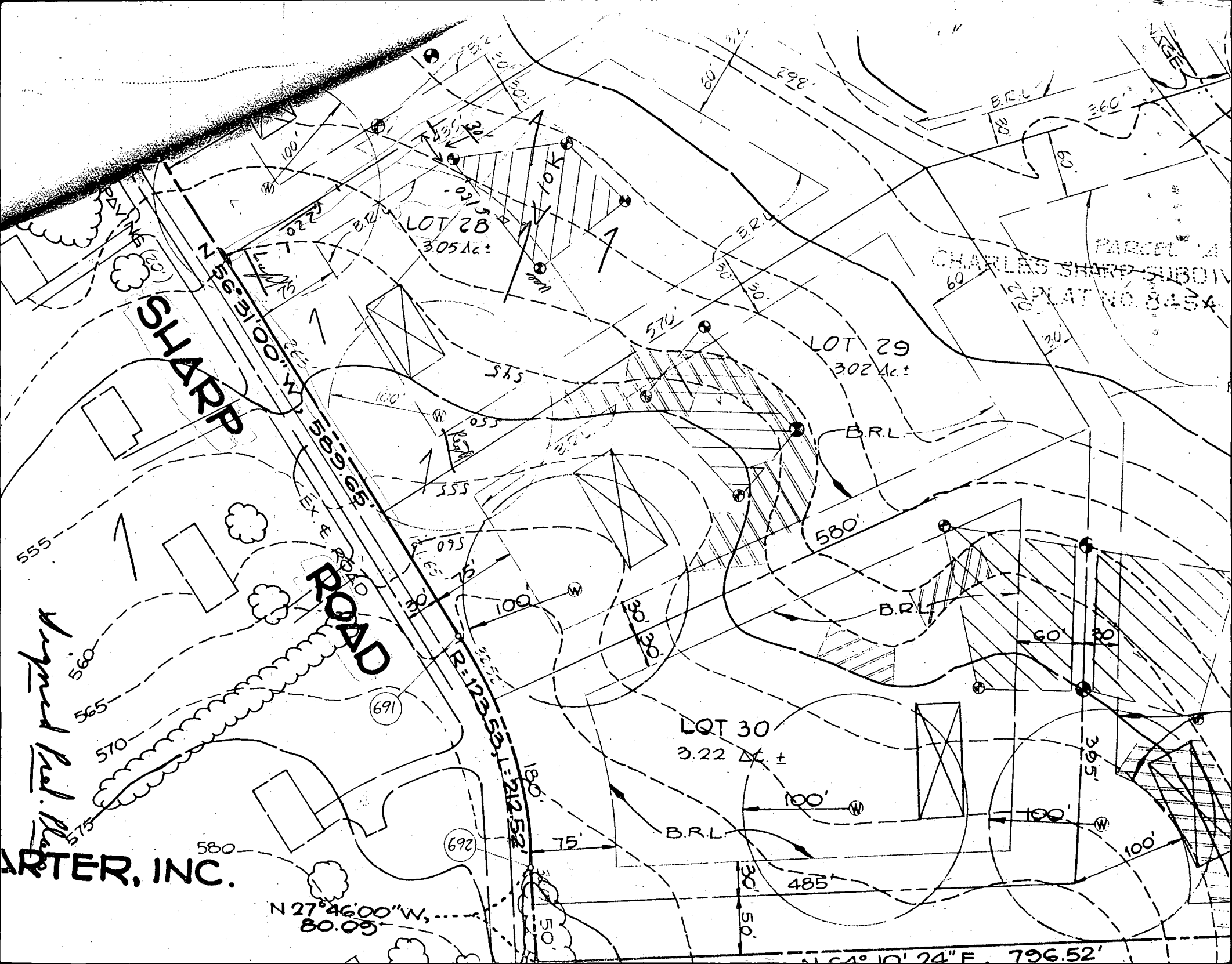
C.B. ✓

ALSO PRESENT:

HOLD FOR WET--FFPS

✓ on WATER TABLE

WOODY
CERRY



SHARP ROAD

PROPOSED ROAD

LOT 28
3.05 Ac.

LOT 29
3.02 Ac.

LOT 30
3.22 Ac. ±

PARCEL "A"
CHARLES SHARP SUBDIVISION
PLAT NO. 8454

W. J. P. HARTER, INC.

N 27° 46' 00" W, 80.09

N 64° 10' 24" E, 796.52'

C1 5174

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORTFILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A 41280

ST/CO USE ONLY-
DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.
FROM "PERMIT TO DRILL WELL"1 2 3 4 5 6
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

061394

22 345 26
(TO NEAREST FOOT)

A0-94-0091

OWNER CROSEY HOMES INC.
last name first name TOWN
STREET OR RFD SLEEP ROAD
SUBDIVISION SHARP FARMS SECTION LOT 28

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed) FEET Check
if water bearingSAND 0 99
GRAY MICH 97 345
ROCK

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes no
Y N
44 44

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 19 NO. OF POUNDS 1756

GALLONS OF WATER 114

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 72 ft.
48 TOP 52 54 BOTTOM 58
(Enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN
CASING
TYPENominal diameter
top (main) casing
(nearest inch)Total depth
of main casing
(nearest foot)51 6 101
60 61 63 64 66 70E
A
C
H
C
A
S
I
N
G

OTHER CASING (if used)

diameter depth (feet)
inch from to

EACH CASING

screen type
or open hole

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
HOLE
PL OT
PLASTIC OTHER

C2

DEPTH (nearest ft.)
1 H0 99 345
8 9 11 15 17 21
2 23 24 26 30 32 36
3 38 39 41 45 47 51E
A
C
H
S
C
R
E
E
N

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK
IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)T (E.R.O.S.) W Q
70 72 74 75 76

TELESCOPE CASING LOG INDICATOR OTHER DATA

C3

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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

(CIRCLE) (YES or 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

above below (nearest foot)

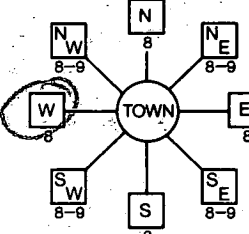
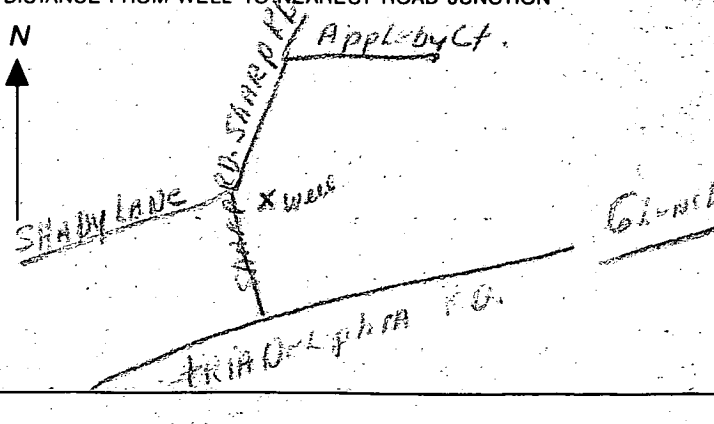
LOCATION OF WELL ON LOT

SHOW PERMANENT STRUCTURE SUCH AS
BUILDING, SEPTIC TANKS, AND/OR
LANDMARKS AND INDICATE NOT LESS
THAN TWO DISTANCES
(MEASUREMENTS TO WELL)See Attached
Well locationCIRCLE APPROPRIATE LETTER
A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED
E ELECTRIC LOG OBTAINED
P TEST WELL CONVERTED TO PRODUCTION
WELLTHEREBY 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. 24

DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

COUNTY

B 1 09883	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER H0-94-0091 <small>fill in this form completely</small>
Date Received (APA) 053194		B 3 LOCATION OF WELL	
OWNER INFORMATION 15 Last Name ROSEN 34 Owner First Name TOMES LANE 36 Street or RFD 3775 SHADY LANE 55 57 Town ELKWOOD 70 State 72 MD Zip 76 21738		8 COUNTY HOWARD 21 23 SUBDIVISION SHARP FARMS 42 SECTION 44 46 LOT 28 48 50 52 NEAREST TOWN GLENVIEW LG 71 MILES FROM TOWN (enter 0 if in town) 2 73 MI 76 77 78	
DRILLER INFORMATION Driller's Name Joseph L. Mayne 77 License No. 80 24 Firm Name Joseph L. Mayne Well Drilling Address 5512 RIDGE RD. MT. AIRY MD 21771 Signature Joseph L. Mayne Date 5/31/94		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		11 SHARP RD. 30 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> N <input type="checkbox"/> NE <input type="checkbox"/> E <input type="checkbox"/> SE <input type="checkbox"/> S <input type="checkbox"/> SW <input type="checkbox"/> W <input type="checkbox"/> NW SOUTH 34 80 37 DISTANCE FROM ROAD ENTER FT or MI FT 38 39	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> P PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> T TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME HOWARD COUNTY NO. A# 41280 STATE SIGNATURE Charles Beran INSERT S <input type="checkbox"/> DATE ISSUED 060194 EXP. DATE 06/1/95 NORTH GRID 521000 50 55 EAST GRID 0796000 57 63	
APPROXIMATE DEPTH OF WELL 300 24 28 FEET APPROXIMATE DIAMETER OF WELL 6 NEAREST INCH		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 E 280 5 N 520 1 000 000	
METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVerse-ROTary <input type="checkbox"/> Drive-POINT other _____		6/13/94 9:30 G. root 72' open 19 bags 101' casing Amy McMiller 6/13/94	
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> N THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> Y THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> D THIS WELL WILL DEEPEIN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 _____ 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER GAP 54 63 FORCE <input checked="" type="checkbox"/> WRITE INITIALS IN BOX PERMIT No. H0-94-0091 70 71 72 73 74 75 76 77 78 79			
SPECIAL CONDITIONS			

LOT 26

296.29'

604.72'

S 84° 13' 52" E

60' BRL

466.93'

30' BRL

30' BRL

Septic Easement

15' x 18' Wood Deck

#3927

91'±

110'±

3/13/97
WELL + SEPTIC DATA
FROM HEALTH DEPT RECORDS
DECK PROPOSAL WILL
NOT IMPACT ON WELL
OR SEPTIC, OK TO PROCEED
JH

75' BRL

135'±

N 33° 29' 00" E

S 33° 25' 00" W

N 56° 31' 00" W

263.00'

SHARP ROAD

