

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXX-XXXX~~ 313-2640

INDEXED

P 49890

A 41666

DISTRICT 5th

DATE 2/18/94

DATE SYSTEM APPROVED 2/25/94

INSPECTOR 8K5

South Carroll Backhoe, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 4410 Salem Bottom Road, Westminster, Maryland 21157 PHONE 875-4197

SUBDIVISION Orndorff Property LOT 2 ROAD 4875 Ten Oaks Road

PROPERTY OWNER Bageant Homes, Inc.

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 3.5 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting from the left front lot corner (intersection of the 443.54' and 429.57' lot lines), place the distribution box 145 feet down the 429.57' lot line and 90 feet off this same lot line. Run initial trenches toward left lot line, future trenches in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK MR 2/17/94

PLANS APPROVED BY Mark Rifkin

DATE 4/23/92

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 (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

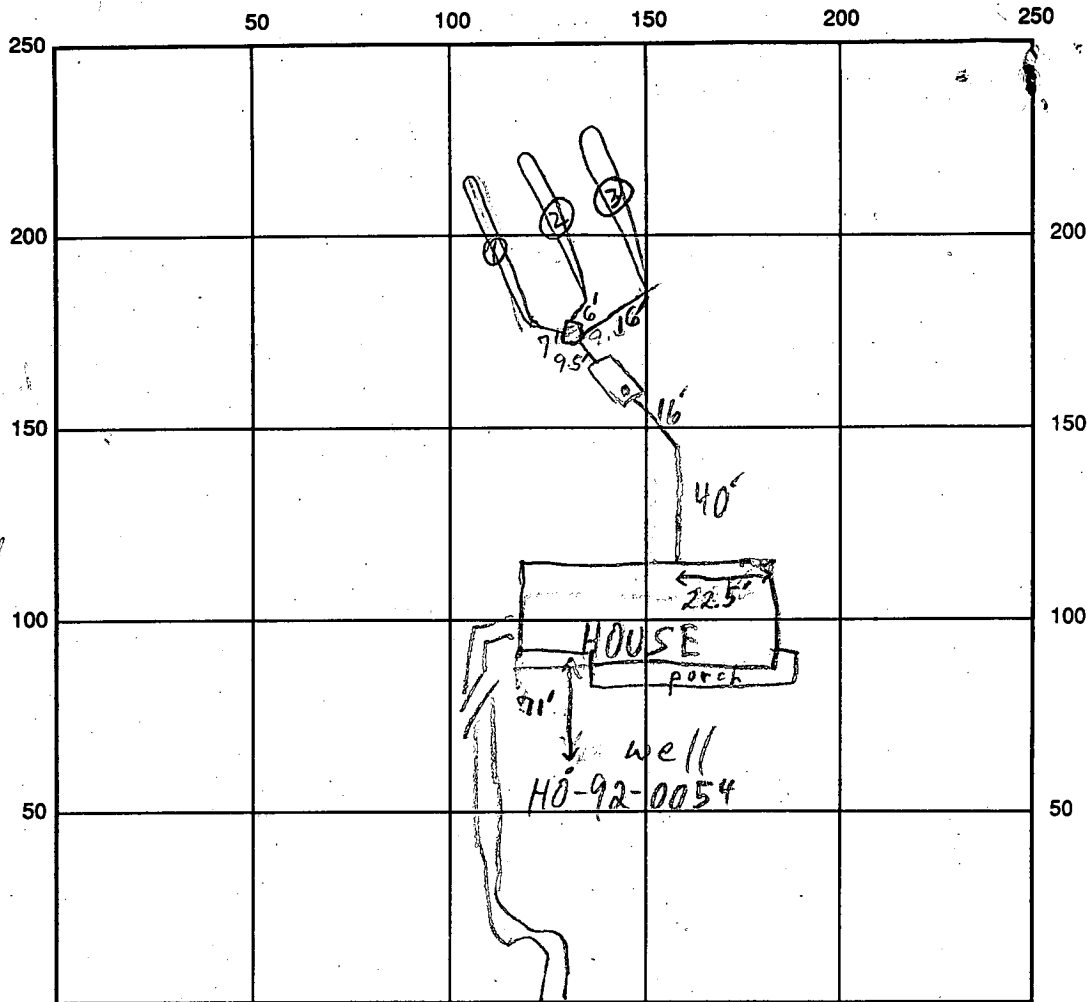
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

6LOG. PERMIT SIGNED

END OF PERMIT 7/26/00

B00125626 Parch

A 41666



TEN OAKS RD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 GAL - OK CLEANOUTS S.I. - OK

DISTRIBUTION BOX LEVEL OK - Baffle in

DRAIN FIELD/TITLE DEPTH 5.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3.5 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 80'
81'
84'

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 235 SQ. FT.

DRYWALL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS: 2/24/94 OK TO CONTINUE MR

2/25/94 OK TO cover all work OKS

DATE SYSTEM APPROVED 2/25/94

INSPECTOR

[Signature]

APPLICATION

PERCOLATION TESTING

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

A 41666

P _____

DISTRICT 5TH

DATE 8-6-88

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 P.A. ORNDORFF Bageant Homes, Inc
ADDRESS 4901 TEN OAKS ROAD, DAYTON, Md 21036 PHONE (301) 531-2288 ⁵³¹⁻⁶⁴⁷⁴

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION ORNDORFF PROPERTY LOT NO. Lot 2 on plat 10/1/88

ROAD AND DESCRIPTION EAST SIDE OF TEN OAKS ROAD; WEST OF MD. RTE 32
(4875 Ten Oaks Road)

TAX MAP 28 PARCEL # 42

SIZE OF LOT 3.8 ACRES TYPE BLDG SFD
(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.

Peggy A. Orndorff
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6-27-88 PERC Satisfactory - HOLD FOR PCAT. S. Ab. 1

BLDG. PERMIT SIGNED
AND RETURNED 11/15/93
Serial # 57307

THIS IS NOT A PERMIT

SOIL PROFILE

Yell. BR
Silt loam
w/ pink
cast of
sand loam
10-15%
frag

3-3.5 Yellow BR
w/ PINK
Casts
Highly
micaceous
Silty SAND
Lm. c10% Foss

COT BOUNDARY

[illegible]

2 PERC
4 MIN
180 Ø 18A
INLET 3.5'
BOTTOM S. 2'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

TEN OAKS RD.

[illegible]

REMARKS

Shallow SYST DUE TO LANDSCAPE POSITION

TYPE OF SOIL

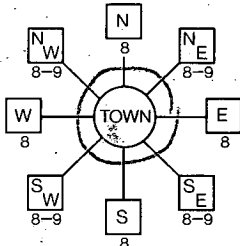
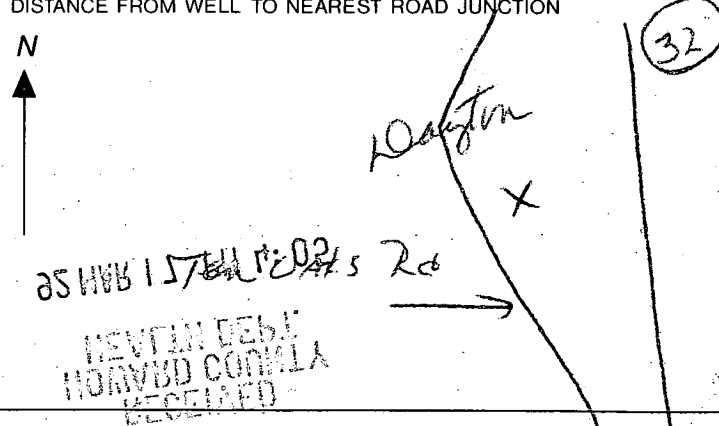
Glaweig - Chester Gravelly loam

TESTED BY

S. Abel

ALSO PRESENT

BRUNDOFF & Co

B 1 3901	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND APPLICATION FOR PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-92-0054 <small>70 fill in this form completely 79</small>
Date Received (APA) 031792		B 3 LOCATION OF WELL	
OWNER INFORMATION RACEANT HOMES 15 Last Name Owner First Name 34 4714 LINTHICUM RD 36 Street or RFD 55 DAYTON 57 70 State 72 Zip 76		HOWARD 8 COUNTY 21 TEA OAKS RD 23 SUBDIVISION SECTION 44 46 LOT 2 48 50 DAYTON 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 73 76 77 78	
DRILLER INFORMATION George F. Easterday 4x0 4 0 Driller's Name 77 License No. 80 L. Franklin Easterday, Inc. Firm Name 9265 Brown Church Rd., Mt. Airy, Md. 21771 Address George F. Easterday 3-13-92 Signature Date		B 4 TEN OAKS RD 11 30 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <input checked="" type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W WEST <input type="checkbox"/> EAST <input type="checkbox"/> SOUTH 34 900 37 DISTANCE FROM ROAD ENTER FT or MI 38 39	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard A 41666 COUNTY NAME COUNTY NO. STATE SIGNATURE DATE ISSUED INSERT S 042292 Mark E. Riden 10/22/92 43 48 CO SIGNATURE EXP. DATE NORTH GRID 512000 EAST GRID 0805000 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. 22 <input type="checkbox"/> OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		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 80X5 N 51X2 000 000	
APPROXIMATE DEPTH OF WELL 200 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST		4/28/92 AM 15 BAGS GROUP 63' CASING OK 50' OPEN NOT OBS'D 2' CASING A.C. LOC. OKx 4/28/92 000 VTAS OK MR	
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 29 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 GABLE REVerse-ROTary Drive-POINT other		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39 <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) 41 52		Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER 54 63 FORCE MR WRITE INITIALS IN BOX PERMIT No. HO-92-0054 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS			

C19296

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.

123456
(THIS NUMBER IS TO BE PUNCHED
IN COLS. 3-6 ON ALL CARDS)

COUNTY
NUMBERA41666

ST/CO USE ONLY
DATE Received

DATE WELL COMPLETED
042892

Depth of Well
300
(TO NEAREST FOOT)

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-92-0034

OWNER Richard Flores

STREET OR RFD TEN OAKS TOWN DARTON

SUBDIVISION TEN OAKS FARMS SECTION 2 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	
Top soil	0	1
Clay	1	4
Br. mica	4	35
S. stone	35	45
Ten mica	45	52
Granite	52	75
Gray mica	75	165
Sand stone	165	195
Granite	185	205
Sand stone	205	215
Granite	215	300

GRROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 15 NO. OF POUNDS 1500

GALLONS OF WATER 75

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 49 ft.

CASING RECORD

casing
types
insert
appropriate
code
below

ST CO
STEEL CONCRETE

PL OT
PLASTIC OTHER

MAIN CASING TYPE ST

Nominal diameter top (main) casing (nearest inch) 6

Total depth of main casing (nearest foot) 13

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

DEPTH (nearest ft.)

110 115 120 125 130 135 140 145 150 155 160 165 170 175 180 185 190 195 200 205 210 215 220 225 230 235 240 245 250 255 260 265 270 275 280 285 290 295 300

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

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.)

W Q

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 10

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 45

WHEN PUMPING 130

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

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:

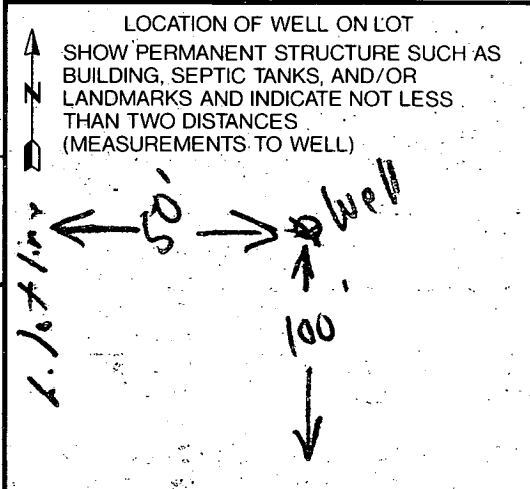
CAPACITY: GALLONS PER MINUTE (to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

LAND SURFACE



CIRCLE APPROPRIATE LETTER

A 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 26.04.04 "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. 40

DRILLERS SIGNATURE George F. [Signature]

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee) [Signature]

SUBMITTED BY
DUTCH BAGEANT
MANHOLE REQUIRED
ON SEPTIC TANK
TRENCH LENGTH
DETERMINED BY
HEALTH DEPT.

BP 51307

4 BR elevations OK
MR 11/15/93

HOUSE:
F.F. ELEV. = 553.2
C.E. ELEV. = 543.7
INV. @ HOUSE ELEV. = 541.2

SEPTIC TANK:

TOP ELEV. =	546.0
INV. IN ELEV. =	540.8
INV. OUT ELEV. =	540.3

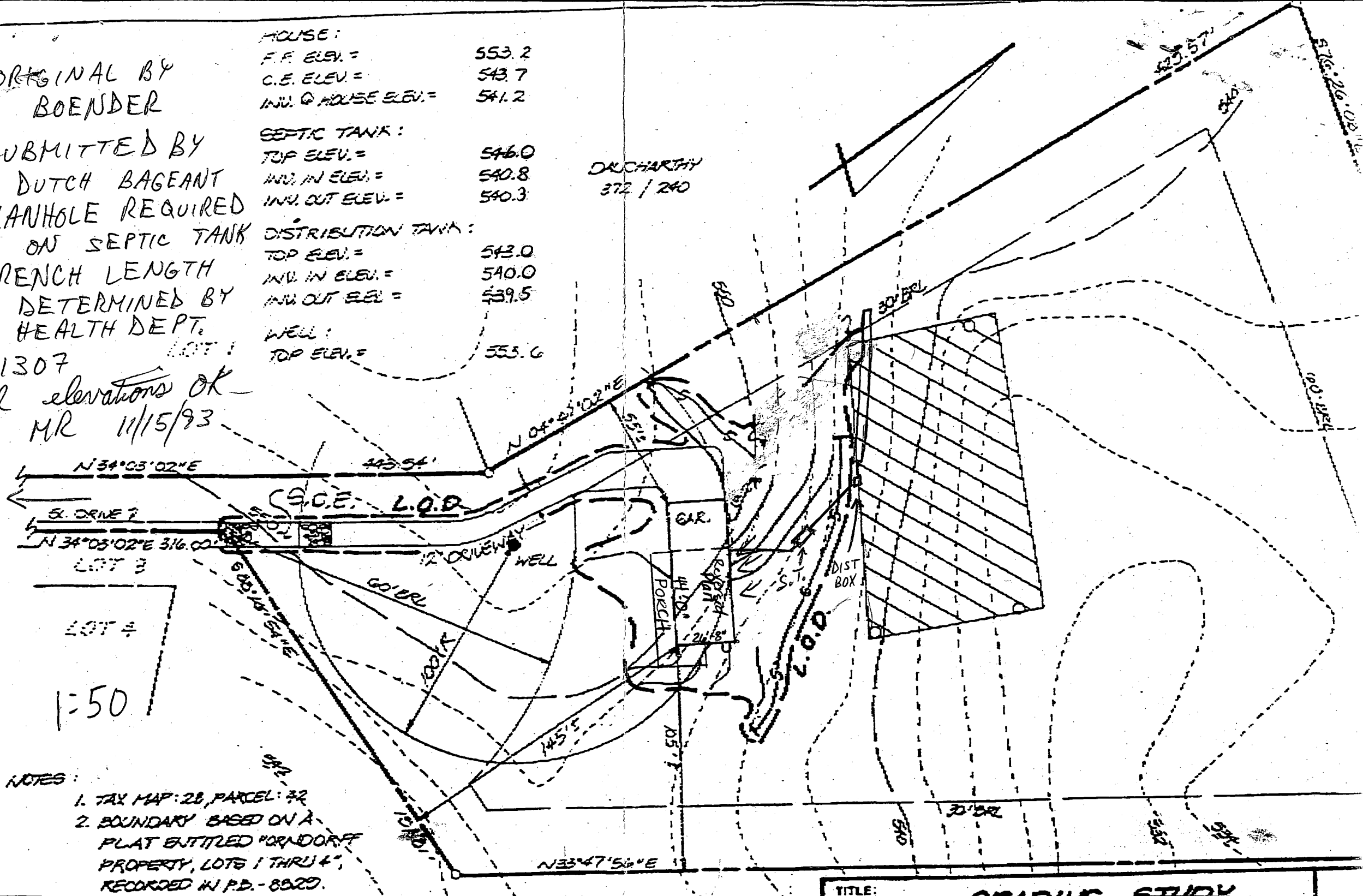
DISTRIBUTION DATA:

TOP ELEV. =	543.0
INT. IN ELEV. =	540.0
INT. OUT ELEV. =	539.5

WELL: /
TOP ELEV. = / 555.6

ON CARTON
372 / 240

TEN
OAKS
ROAD



NOTES:

1. TAX MAP: 28, PARCEL: 32
2. BOUNDARY BASED ON A PLAT ENTITLED "ORDONOT PROPERTY, LOTS 1 THRU 4", RECORDED IN P.D. - 8529.

TITLE

CRADLE STONE