

Tag ID-05-412927

# PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

HOWARD COUNTY HEALTH DEPARTMENT  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

P 47611

A 42059

DISTRICT 5th

DATE 11-8-91

DATE SYSTEM APPROVED 11/18/91

INSPECTOR M. Rifkin

L. and F. Company IS PERMITTED TO INSTALL X ALTER

ADDRESS 10688 Scaggsville Road, Laurel, Maryland 20708 PHONE 301-725-3392

SUBDIVISION Rutherford LOT 14 ROAD 4506 Rutherford Way

PROPERTY OWNER Hanover Limited Partnership James Kraus

**BUILDING PERMIT SIGNED**

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS 8-19-04 BODN965-10RCA

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 5 feet below original grade. Effective area begins at 3 feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Starting from the right front lot corner, place the distribution box 130' down the right lot line, and 70' off this same lot line. Run trenches on contour in both directions.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. 012 8/15/91

PLANS APPROVED BY Mark Rifkin cm DATE 7/10/91

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

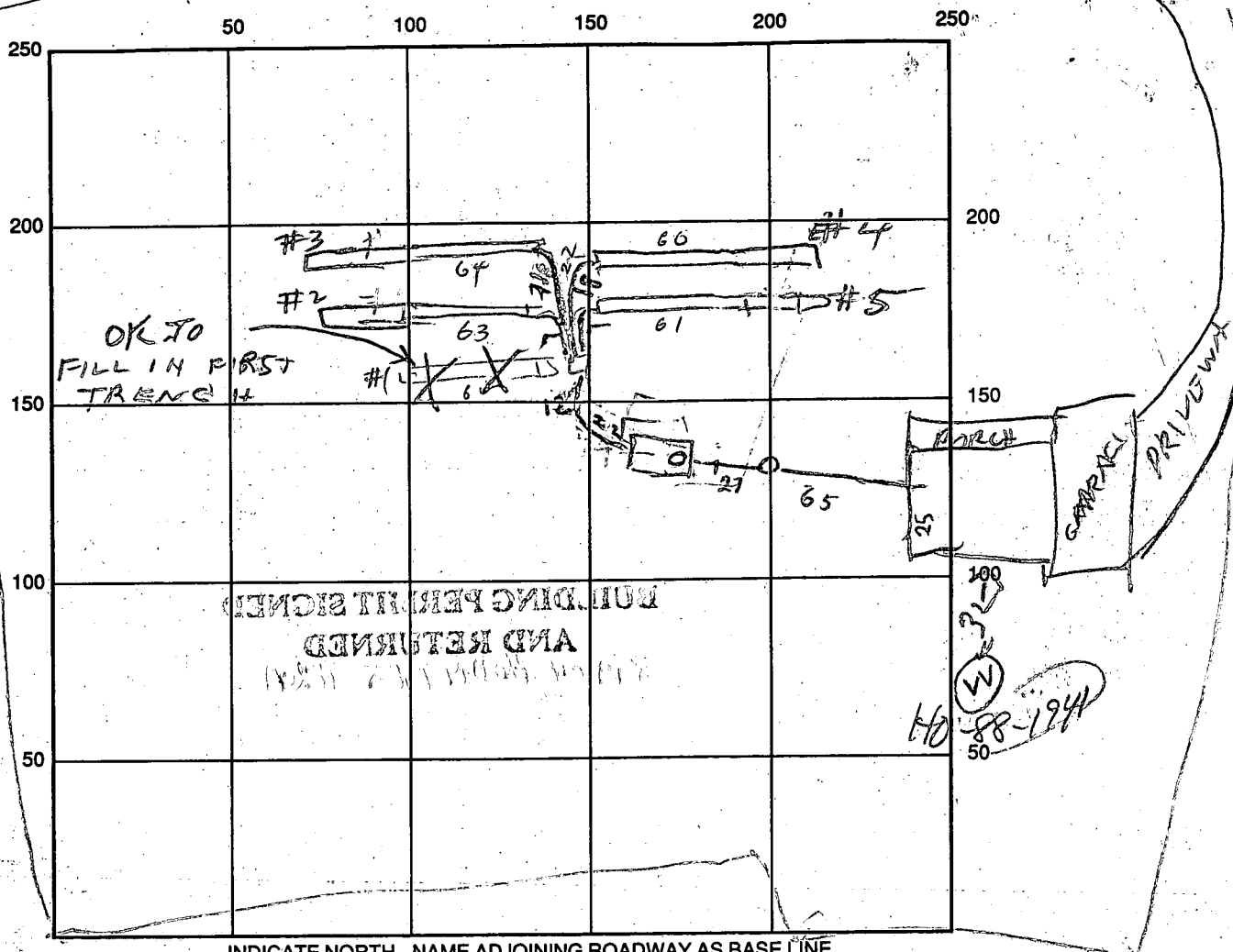
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON, CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET, MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

**\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT**  
\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

A  
42059

# RUTHERFORD WAY



SEPTIC TANK LEVEL 2000 CLEANOUTS OK

DISTRIBUTION BOX LEVEL \_\_\_\_\_

DRAIN FIELD/TITLE DEPTH 5-5 1/2 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.  
 EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 

#2	#3	#4	#5	TOTAL
62	64	60	61	247

NUMBER OF TRENCHES 4 ONE SIDEWALL/BOTTOM AREA 741 SQ. FT.

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

ABSORBENT AREA 741 SQ. FT.

REMARKS: 11/14/91 LOCATION OK. OK TO FILL TRENCH #1 & USE

OTHER 4 TRENCHES AS LONG AS 240 LINEAR FT. 11/13/91

SOME STONE ADDED TO 4 TRENCHES. FIRST TRENCH FILLED IN RH

11/15/91 - PIPE & STONE ADDED TO ALL 4 TRENCHES ADD MORE STONE TO

ALL TRENCHES TO COVER PIPE. A LITTLE STONE ADDED TO TRENCHES

#2 & #5 TO PARTLY COVER PIPE. PIPE UNCOVERED IN #3 & #4. LEAVE

#3 & #4 UNCOVERED FOR INSPECTION BY C.W. COVER #2 & #5

DATE SYSTEM APPROVED 11/18/91 INSPECTOR M. R. R. R.  
CONTRACTOR DOES NOT BELIEVE PIPE HAS TO BE COVERED WITH STONE  
11/18/91 OK TO COVER ALL MR

# APPLICATION

PERCOLATION TESTING

A 42059

P \_\_\_\_\_

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

DISTRICT 521

DATE 3/8/88

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 MARY C. HILL ET AL Hanover Limited Partnership

ADDRESS 6642 SEDECA DRIVE COLUMBIA PHONE 301-381-4444  
MARYLAND 21044

PROSPECTIVE BUYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY LOCATION:

SUBDIVISION RUTHERFORD LOT NO. 16 14

ROAD AND DESCRIPTION WEST SIDE OF MD RTE 32, EAST SIDE OF TEN  
OWLS ROAD (4506 Rutherford Way)

TAX MAP 28 PARCEL # 75

SIZE OF LOT 3.1 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. Mary C. Hill  
(SIGNATURE OF APPLICANT)

APPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING 10/18/89 PERC OK HOLD FOR PLAT R HODGES

BLDG. PERMIT SIGNED

AND RETURNED 8/13/91

Serial # 59176 - SFD

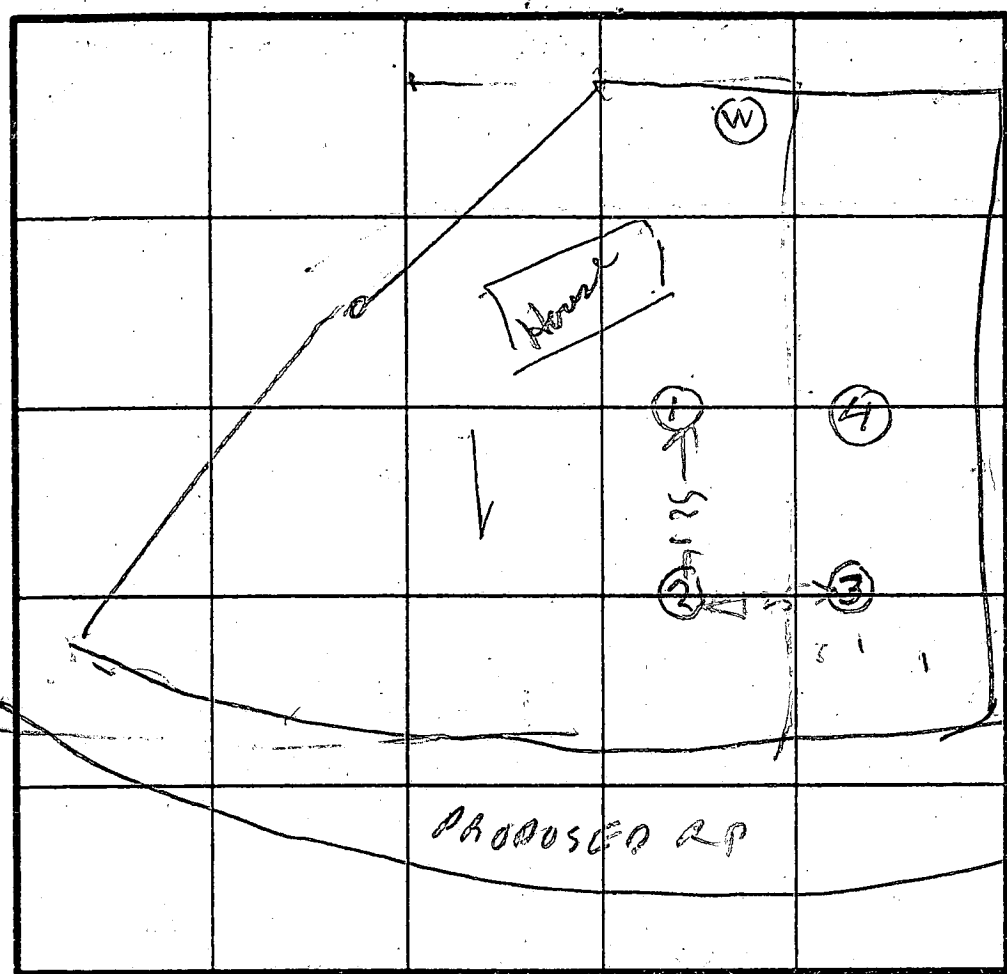
4 Bedroom

# THIS IS NOT A PERMIT

Lot 16  
A 42059

SOIL PROFILE  
0' BROWN CLAY  
3' BROWN SAND MICA LOAM  
12'

2'3' BROWN CLAY  
4' BROWN SAND MICA LOAM  
13' 4' BROWN CLAY  
4' BROWN SAND MICA  
14'



4' OK 12.5' 3' 1'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/12/88	1 S	4.5	1000	1001	1001	1002	1
	1 D	9	1000	1005	1005	1013	8
	1 V	12.5	OK				
	2 S	8	1005	1007	1007	1011	4
	2 V	13	OK				
	2 S	9	1016	1021	1021	1029	8
	2 V	13.5	OK				
10/18/88	4 V	13	OK				

av  
Tens  
5 min  
max  
Depth  
3'

REMARKS Holer Dug per Test Plate stake RAIN TODAY

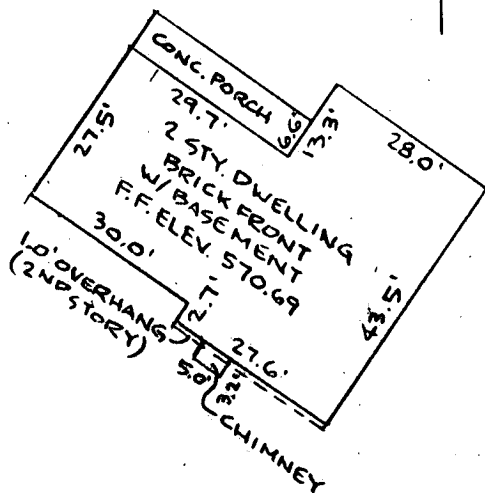
TYPE OF SOIL \_\_\_\_\_

TESTED BY R. H. NOG

ALSO PRESENT PHIL BRADFORD SUPERVISOR

EH-12-1079

THIS PLAT IS NOT INTENDED FOR USE IN  
ESTABLISHING PROPERTY LINES AND DOES  
NOT CONSTITUTE A BOUNDARY SURVEY.



THIS IS TO CERTIFY THAT I HAVE SURVEYED THE PROPERTY SHOWN HEREON  
FOR THE PURPOSE OF LOCATING THE IMPROVEMENTS ON SAID PROPERTY  
AND THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN.



Oliver Shackford

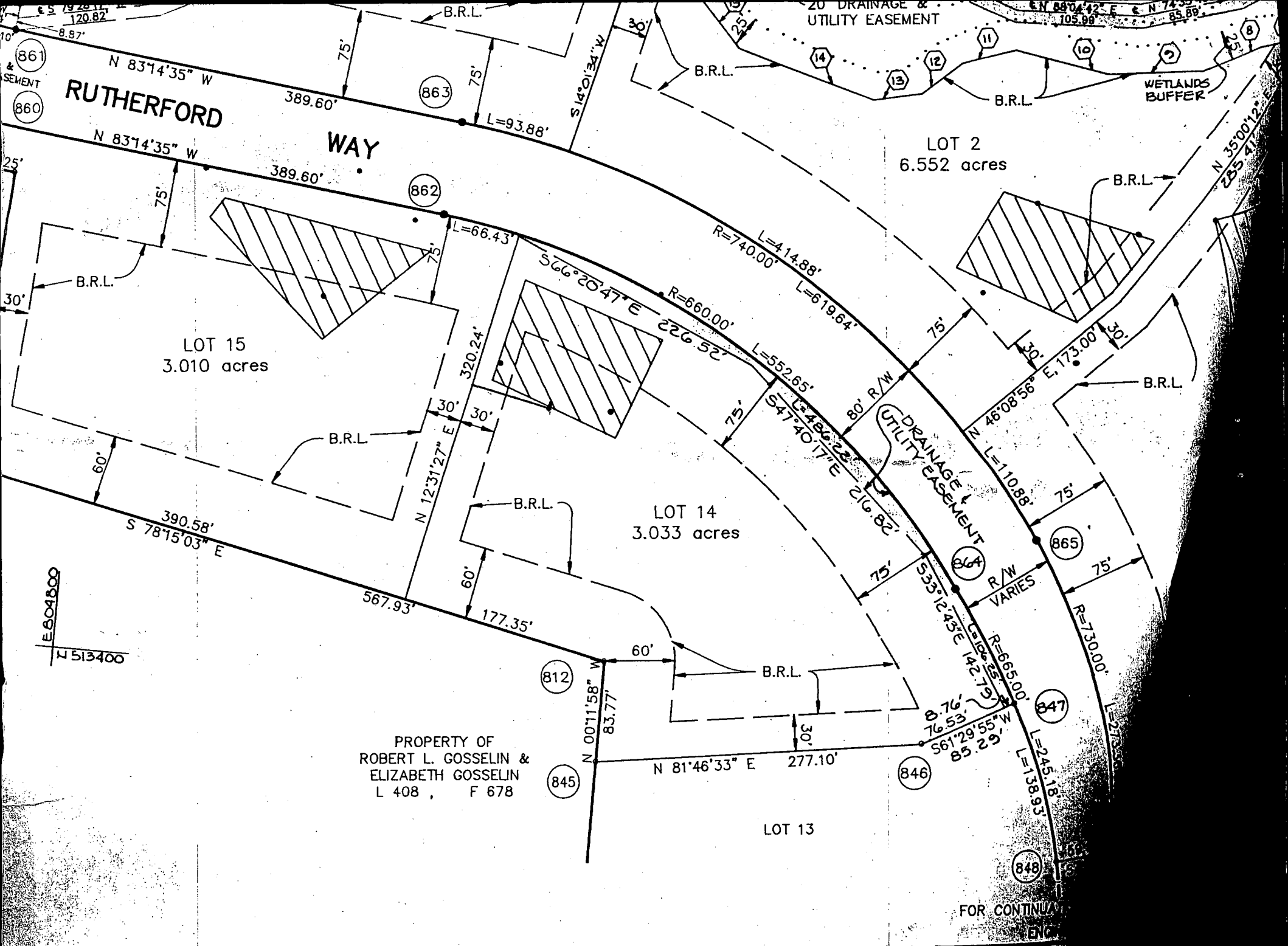
Nov 1, 1991  
DATE

**RIEMER MUEGGE & ASSOCIATES, INC.**  
A Land Planning, Engineering and Consulting Firm  
8818 Centre Park Drive • Suite 200 • Columbia, Maryland 21045  
301-997-8900 • FAX: 301-997-9282

LOCATION SURVEY

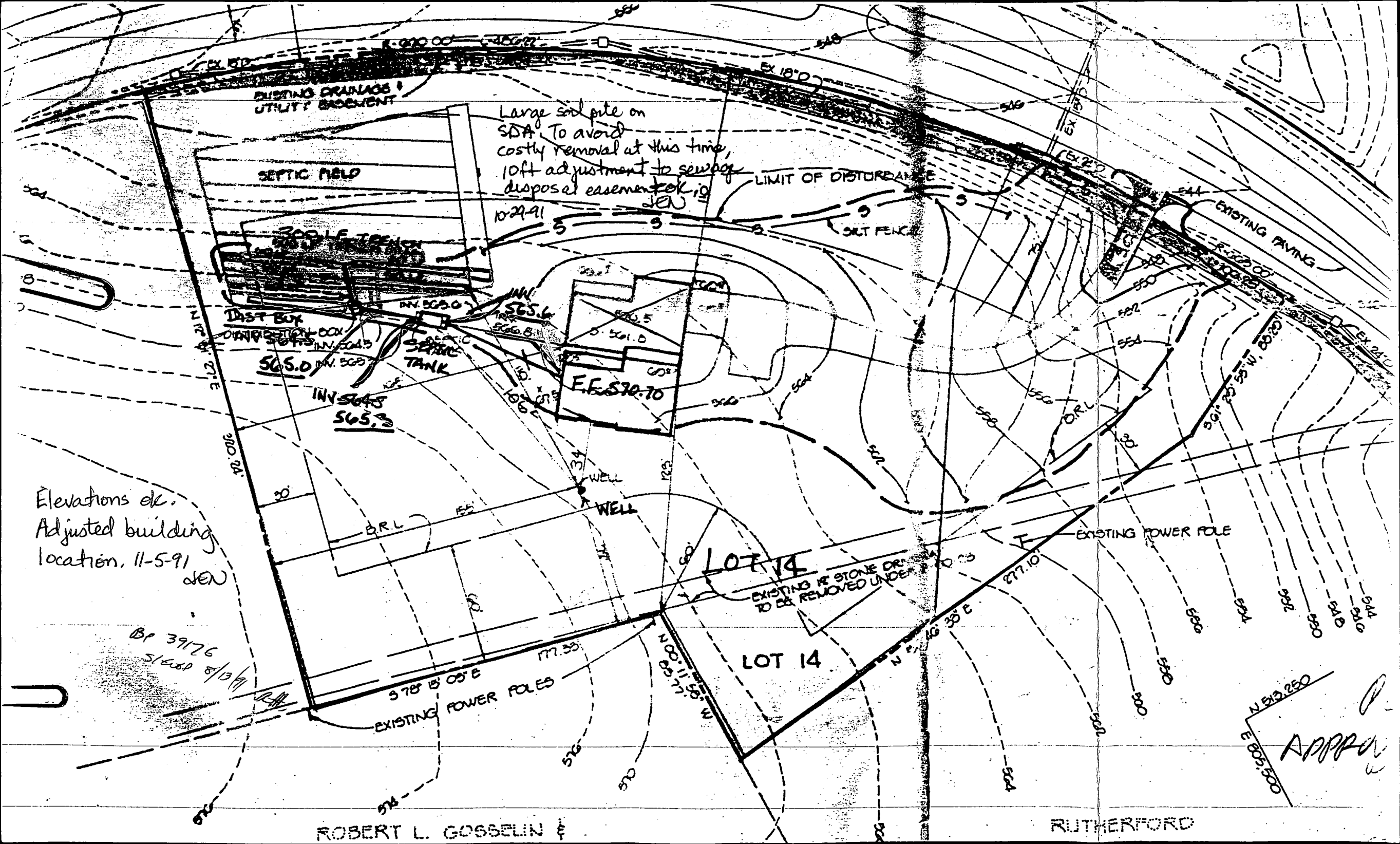
LOT 14  
RUTHERFORD  
5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND  
SEE RECORDED PLAT NO. 9370

SCALE: 1"=100'	WO. NO. 80600	BY: GRS	DATE: 11/1/91
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□ DENOTES 4" X 4" X 36" CONCRETE MONUMENT

RIEMER MUEGGE  
3105 NORTH



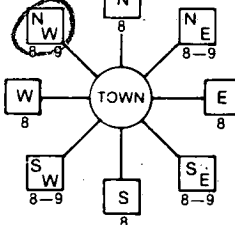
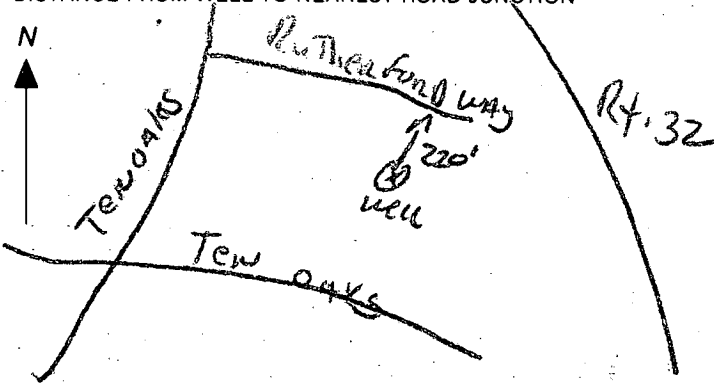
Elevations ok.  
Adjusted building  
location, 11-5-91  
DEN

BP 39176  
5/6/80 8/13/91

ROBERT L. GOSSELIN &

RUTHERFORD

APPROVED

B 1	7998	SEQUENCE NO. (DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER <b>HD-88-1991</b> <small>fill in this form completely</small>
Date Received (APA) <b>073191</b>			LOCATION OF WELL 8 COUNTY <b>HOWARD</b> 23 SUBDIVISION <b>RUTHERFORD</b> SECTION <b>44</b> LOT <b>14</b> 52 NEAREST TOWN <b>DAYTON</b> MILES FROM TOWN (enter 0 if in town) <b>1</b> M <b>1</b>	
OWNER INFORMATION				
45 Last Name <b>MAJER</b> Owner First Name <b>GENE</b> 36 <b>11788</b> Street or RFD <b>ROUTE 216</b> 57 <b>FULTON</b> Town 70 State 72 <b>MD</b> Zip 76 <b>20759</b>				
DRILLER INFORMATION Driller's Name <b>Ralph MAYNE</b> 77 License No. 80 <b>223</b> Firm Name <b>Ralph MAYNE well drilling</b> Address <b>9120 Brown Church Rd. Mt. Airy</b> Signature <b>Ralph Mayne</b> Date <b>7/24/91</b>				
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <b>5</b> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <b>500</b>			DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="radio"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="radio"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="radio"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="radio"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)				
APPROXIMATE DEPTH OF WELL <b>150</b> FEET APPROXIMATE DIAMETER OF WELL <b>6"</b> INCH				
METHOD OF DRILLING (circle one) BORED (or Augered) <input checked="" type="radio"/> AIR-ROTARY <input type="radio"/> AIR-PERCussion <input type="radio"/> ROTARY (Hydraulic Rotary) CABLE <input type="radio"/> REVERSE-ROTARY <input type="radio"/> Drive-POINT <input type="radio"/> other _____				
REPLACEMENT OR DEEPEMED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="radio"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED <input type="radio"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="radio"/> THIS WELL WILL DEEPEM AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____			NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <b>Howard</b> COUNTY NO. <b>A42059</b> STATE SIGNATURE _____ DATE ISSUED <b>080191</b> NORTH GRID <b>513000</b> EAST GRID <b>080500</b> SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <b>well</b> 2. _____ 3. _____ WRITE THE BOX NUMBER FROM THE MAP HERE 	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ FORCE <b>MR</b> INITIALS PERMIT NO. <b>HD-88-1991</b> SPECIAL CONDITIONS <b>725-8387</b>				
COUNTY				



C14604

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.

COUNTY  
NUMBERA-42059

123  
(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

ST/CO USE ONLY  
DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.  
FROM "PERMIT TO DRILL WELL"

OWNER  
last namefirst nameTOWN  
STREET OR RFD  
SUBDIVISIONSECTIONLOT

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	
	FROM	TO
Top So L	0	2
Shaly	2	45
Sandstone	45	50
MICKA	50	60
Shaly Sandstone	60	65
MICKA	65	325

GROUTING RECORD

WELL HAS BEEN GROUTED

TYPE OF GROUTING MATERIAL

CEMENTBENTONITE CLAY

NO. OF BAGSNO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

fromft. toft.

CASING RECORD

STEELCONCRETE

PLASTICOTHER

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

OTHER CASING (if used)

diameter inch

depth (feet) fromto

SCREEN RECORD

screen type or open hole

STEELBRASSOPEN HOLE

BRONZEPLASTICOTHER

DEPTH (nearest ft.)

slot size 123

diameter of screen (nearest inch)

fromto

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.)WQ

7072747576

TELESCOPE LOG OTHER DATA

CASING INDICATOR

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)

AairPpistonTturbine

CcentrifugalRrotaryOother (describe below)

JjetSsubmersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP (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)

abovebelow

LAND SURFACE (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)

road

250'

75'

Prop Line

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

THEREBY 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.

DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)

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

COUNTY

