

PERMIT

Needs House Connection 7/17/98

P 510555

SEWAGE DISPOSAL SYSTEM

A 43326

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 4th

DATE 7-9-98

DATE SYSTEM APPROVED 7/20/98

INSPECTOR DKS

HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
~~XXXXXX~~ 410-313-2640

INDEXED
04-354486

B.E.K. Enterprises, Inc.

IS PERMITTED TO INSTALL ☒ ALTER ☐

ADDRESS 8375 Jumpers Hole Rd, Suite 302, Millersville, MD 21108 PHONE 410-647-4446

SUBDIVISION Pleasant Hills LOT 10 ROAD 2056 Watkins Way

PROPERTY OWNER Andrew Shaffer

BUILDING PERMIT SIGNED

ADDRESS
SEPTIC TANK CAPACITY 1250 GALLONS
turned 1500 Top Second 2 chamber installed. OK

AND RETURNED

61903 800142577-DECK

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 2.5 feet below original grade. Bottom maximum depth 4.0 feet below original grade. Effective area begins at 2.4 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - From the intersection of the 191.35' and 635.22' lot lines, place the distribution box 205 feet down the 635.22' lot line and 95 feet off this same lot line.
Run first trench on contour towards the pipestem; run all other trenches on contour 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/HR*

PLANS APPROVED BY Donna K. Soe DATE 4/15/98

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

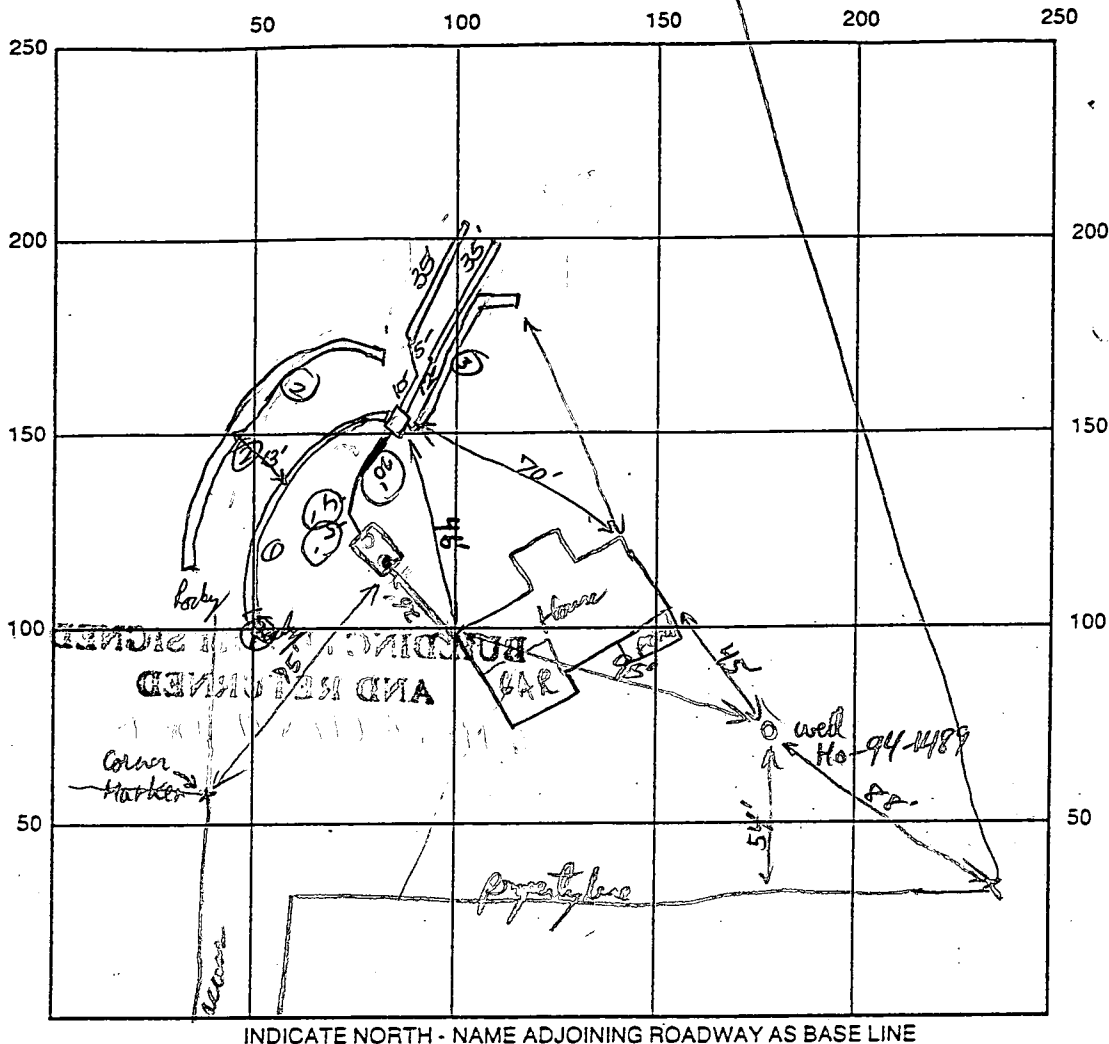
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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



ON SITE
MARK PHILLIPS

Neighbor's
well
Ho-94-1224

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL 1500 gal Top Seamed, 2 chamber CLEANOUTS ST. in + outlet (Mid Baffle also intact)

DISTRIBUTION BOX LEVEL OK

DRAIN FIELD/TITLE DEPTH

1	2	3	4	5
3	2 1/2	2 1/2	3 1/2	2 1/2

 TRENCH WIDTH 3 FT. INLET DEPTH 1-1/2 FT.

EFFECTIVE GRAVEL DEPTH

4	2	1	3	4	5
1	1	1	1.5	1	1

 TOTAL LENGTH 45 20 60 35 135 → 245

NUMBER OF TRENCHES 5 ONE SIDEWALL/BOTTOM AREA 735 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: Septic Tank hole is 120 ft from well. S.T. hole is very shallow (75% deeper than rock floor)

4 ft lower at ST inlet (good they used Top Seamed ST. each 1 1/2 ft apart). D.B. is OK. They will call for open trench inspection on all trenches prior to gravel filling. RPP 7/15/98 7.16.98

ONLY USE 1ST 40 OF 1ST TRENCH - LAST 20' SHALEY (70% Rock) CONTINUE OPEN

TRENCH 1 WSP. 45 East of Tr #1 and OK to gravel fill then cover. Tr #2 open OK 70 ft (Dip from inlet at 2 1/2' to only 26" deep at head end). Tr #3 cut to only 60 ft long, last 20' dips to only 9" attention grave - D.B. not used. Inlet last 2 short Tr as shown on RPP 7/17/98 S.T. shows OK to gravel supply line, OK to gravel to Tr #3, OK to gravel fill to 45' when dig.

DATE SYSTEM APPROVED 7/20/98 INSPECTOR HOWARD SOL

7.21.98 Well line OK to cover P.A. 3' below grade, casing 1' above grade, has 2 piece cap (K&N)

APPLICATION

PERCOLATION TESTING

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

A 43326
P _____
DISTRICT 4TH
DATE 1-4-89

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 Nelson M. Watkins Andrew Shaffer

ADDRESS 26311 Howard Chapel Road PHONE (301) 859-0563
Damascas, MD 20878

PROSPECTIVE BUYER Standard Management Corporation

ADDRESS 10324-B Baltimore National Pike PHONE (301) 461-6777
Ellicott City, MD 21043

PROPERTY LOCATION:

SUBDIVISION Pleasant Hills LOT NO. 10

ROAD AND DESCRIPTION Off of Long Corner Road

(2056 Watkins Way)

TAX MAP 12 PARCEL # 5

BLDG. PERMIT SIGNED

AND RETURNED 4-15-98

Serial # B1110912

SIZE OF LOT 4.7 Ac. TYPE BLDG. Single Family - 4Bn
(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. Eric K...
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 1-27-89 Combined Perc Area ~20K ip for LOTS 9+10

TO BE SPLIT IF LOT LINES CAN BE MOVED AND ROAD. Hold for PLAT

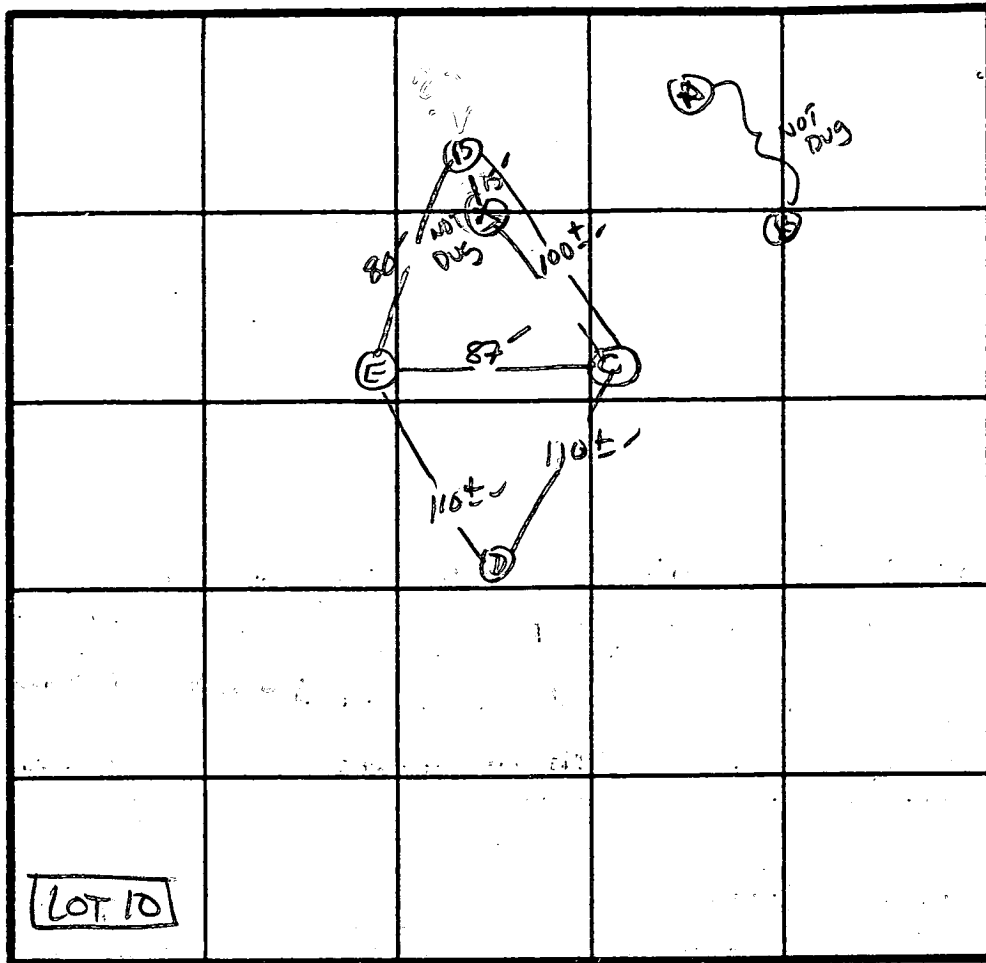
to certify. Same

THIS IS NOT A PERMIT

A-43326

SOIL PROFILE

0	AP
8"	Strong BA Highly Fragmented Clay loam 35-50% frag
35"	Strong BA Silt loam frag 30-40% massive at 10'
10'	



$\bar{x}$ Perc 4min
180 ϕ /BA
Inlet 2.5'
Bottom 4.0'

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Long corner Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
1/27/89	E ^S E ^V	3.0" 12"	11:58 As profiled	12:00	12:00	12:03	3min
	X B ^V	10" Refusal - Structured	AT 1-2" down				
	C ^S C ^V	3" 12.5"	12:04 similar to profile	12:06	12:06	12:10	4min
	D ^S D ^V	3" 11"	12:14 Hard Bottom	12:16	12:14	12:19	3min

REMARKS Holes differ from PLOT - Shallow spot only. Horse + well site? LOT line
Changes required
 TYPE OF SOIL Mc Arroy
 TESTED BY S. Abel ALSO PRESENT JACK F. ROCKY; Jeff A.

C105078

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

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 43326

ST/CO USE ONLY
DATE Received
4-9-98

DATE WELL COMPLETED
4 6 98

Depth of Well
425

PERMIT NO.
FROM "PERMIT TO DRILL WELL"
94-1489

OWNER
Shaffer

STREET OR RD
Watkins Way

SUBDIVISION
Reasons Hills

TOWN
Mt. Airy MD

SECTION
1

LOT
10

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

check if water bearing

BROWN SHALE 0 30

BLUE SLATE 30 425

1990 APR - 9 P 12:01

WATER AT 58-73-398

GROUTING RECORD
WELL HAS BEEN GROUTED (Circle appropriate box) YES NO
TYPE OF GROUTING MATERIAL (Circle one) CEMENT BENTONITE CLAY
NO. OF BAGS 15 NO. OF POUNDS 1410
GALLONS OF WATER 90
DEPTH OF GROUT SEAL (to nearest foot) 39

CASING RECORD
casing types insert appropriate code below
MAIN CASING TYPE ST
Nominal diameter top (main) casing (nearest inch) 6
Total depth of main casing (nearest foot) 40

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

C3
PUMPING TEST
HOURS PUMPED (nearest hour) 3
PUMPING RATE (gal. per min.) 10
METHOD USED TO MEASURE PUMPING RATE TIME
WATER LEVEL (distance from land surface) BEFORE PUMPING 40
WHEN PUMPING 52
TYPE OF PUMP USED (for test) A air P piston T turbine C centrifugal R rotary O other J jet S submersible

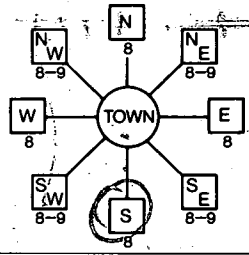
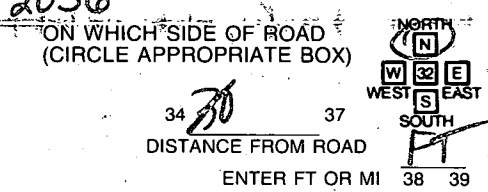
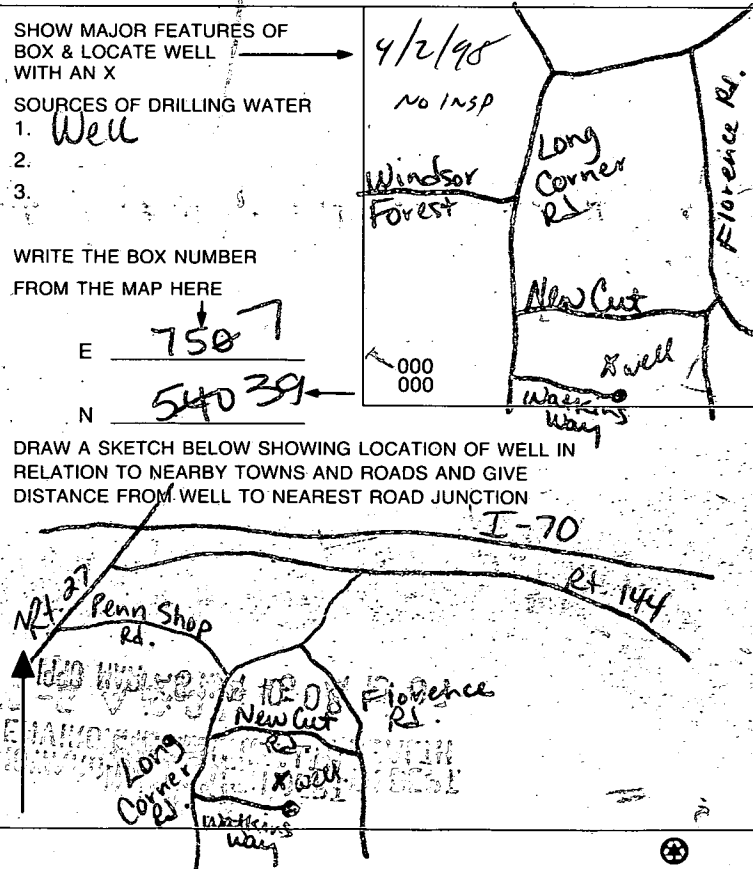
PUMP INSTALLED
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) YES NO
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29
CAPACITY: GALLONS PER MINUTE (to nearest gallon) 31 35
PUMP HORSE POWER 37 41
PUMP COLUMN LENGTH (nearest ft.) 43 47
CASING HEIGHT (circle appropriate box and enter casing height) + above - below LAND SURFACE (nearest foot) 49 50 51

C2
DEPTH (nearest ft.)
1 425
2 39
3 425
EACH CASING diameter inch depth (feet) from to
SLOT SIZE 1 2 3
DIAMETER OF SCREEN (NEAREST INCH) 56 60
GRAVEL PACK IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68 68

MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.) T W Q
70 72 74 75 76
TELESCOPE CASING LOG INDICATOR OTHER DATA

DRILLERS LIC. NO. MW D 139
Robert Cline
DRILLERS SIGNATURE
LIC. NO. MW D 536
Robert Cline
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

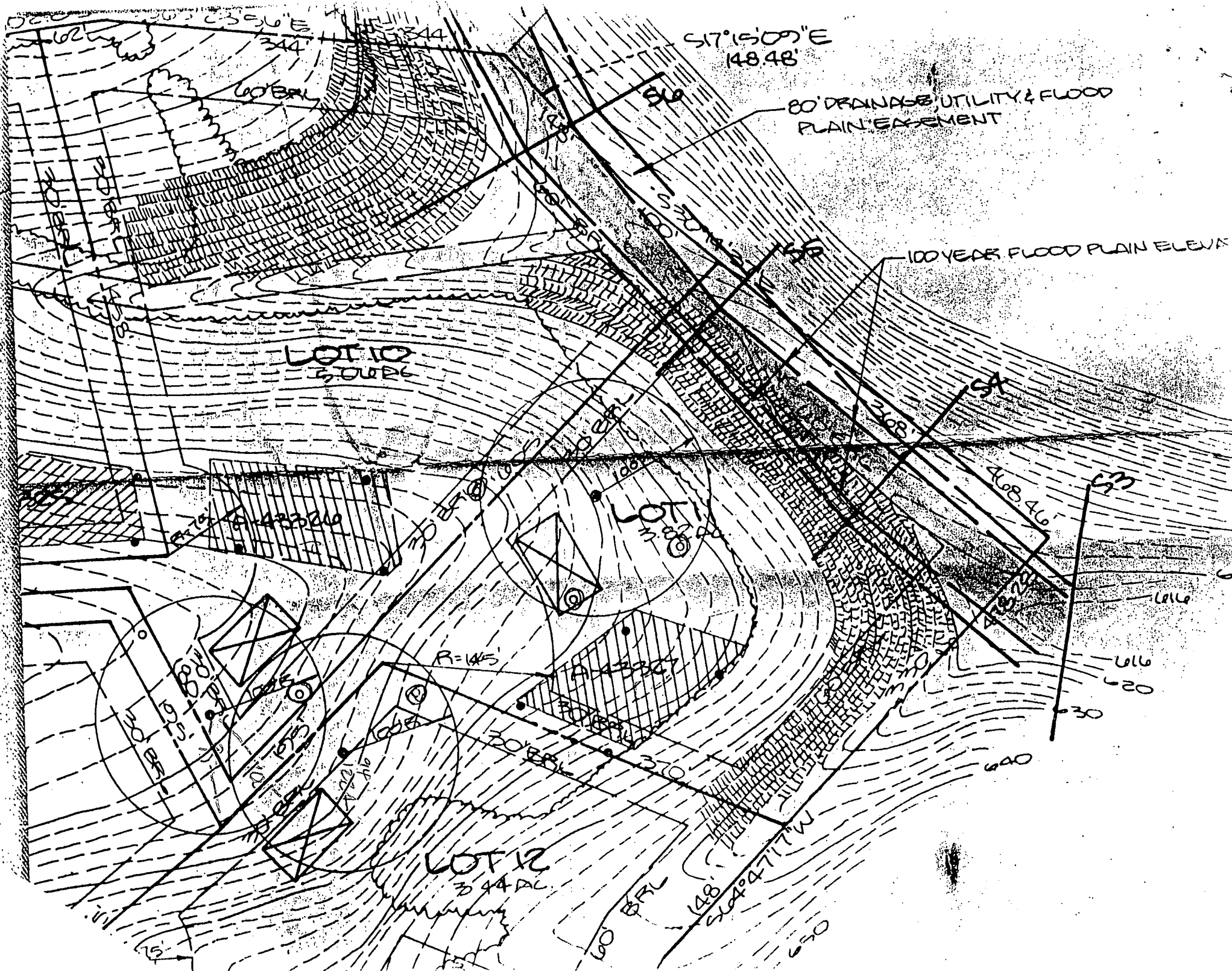
LOCATION OF WELL ON LOT
SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)
LONG CORNELL ROAD
WATKINS WAY
PROPOSED HOUSE
PROPOSED WELL

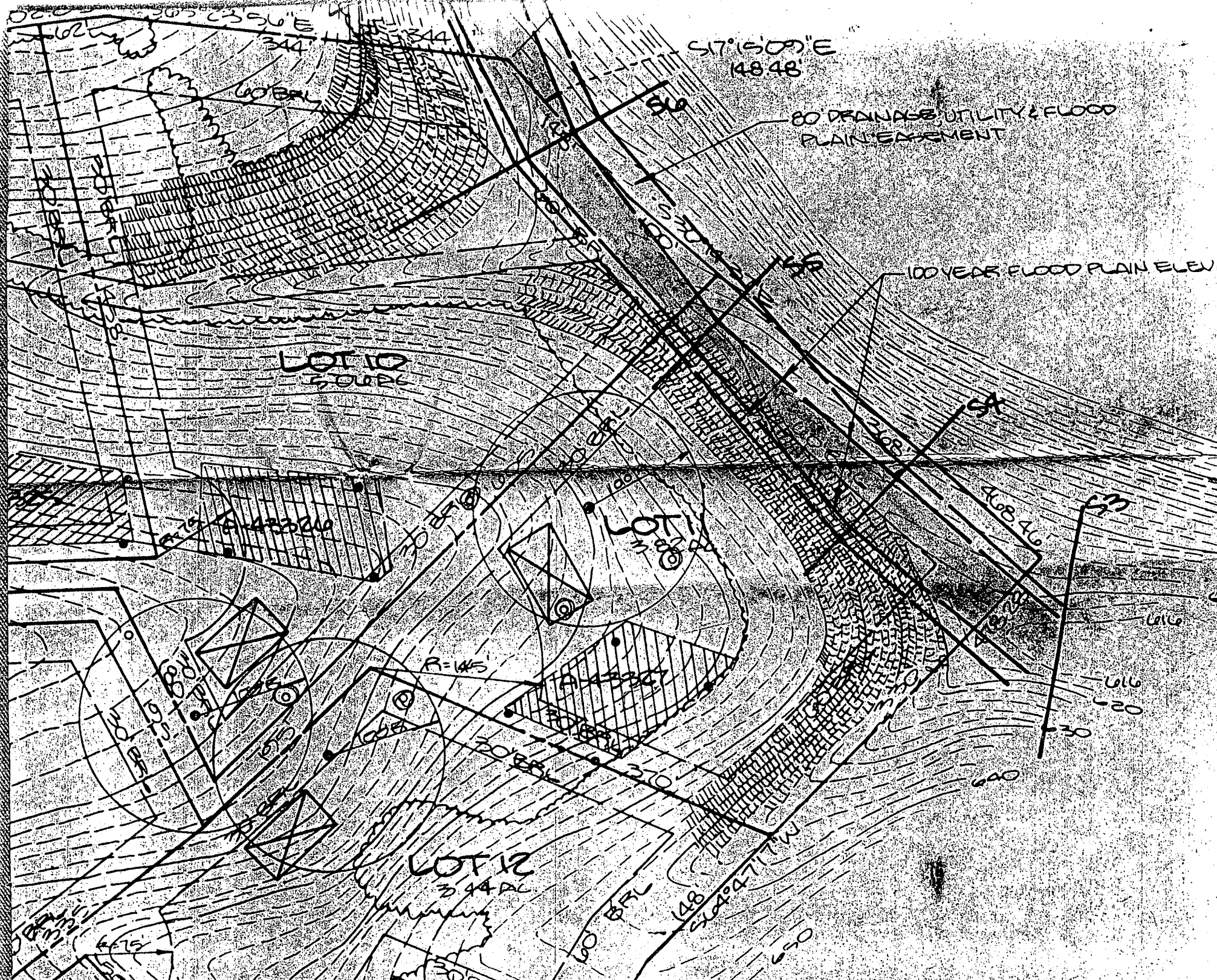
B 1 9774 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS.)	SEQUENCE NO. (MDE USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	STATE PERMIT NUMBER HO-94-1489 fill in this form completely
Date Received (APA) 8/5/98 8 MM DD YY 13 Shaffer Owner Andy First Name 18633 Flower Hill Way Street or RFD Gaithersburg MD 20879 Town State Zip		B 3 Howard LOCATION OF WELL 8 COUNTY 21 Pleasant Hills 23 SUBDIVISION 42 SECTION 44 LOT 10 44 46 48 50 Mount Airy 52 NEAREST TOWN 71 MILES FROM TOWN (enter 0 if in town) 3 M I 73 76 77 78	
DRILLER INFORMATION Robert L. Cline MWD 139 Driller's Name 76 License No. 81 Cline & Durrall, Inc. Firm Name 893 Hillmark Ct., Frederick Address Robert L. Cline Signature 3/2/98 Date		B 4 Watkins Way 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  2056 NEAR WHAT ROAD ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)  DISTANCE FROM ROAD 30 ENTER FT OR MI TAX MAP: _____ BLK: _____ PARCEL: _____	
B 2 WELL INFORMATION 1 2 APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 300 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME A43326 COUNTY NO. STATE SIGNATURE _____ INSERT S _____ DATE ISSUED 3/18/98 CO SIGNATURE _____ EXP. DATE 3/17/99 43 MM DD YY 48 NORTH GRID 539 000 EAST GRID 0757 000 50 55 57 63	
USE FOR WATER (CIRCLE APPROPRIATE BOX) ☒ HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) ☐ FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) ☐ INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) ☐ PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE APPROVAL) ☐ TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. Well 2. No Insp 3. Windsor Forest WRITE THE BOX NUMBER FROM THE MAP HERE E 7507 N 54039 DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
APPROXIMATE DEPTH OF WELL 250 FEET 24 28 APPROXIMATE DIAMETER OF WELL 6 INCH NEAREST INCH		METHOD OF DRILLING (circle one) BORED (or Augered) _____ JETTED _____ Jetted & DRIVEN _____ AIR-ROTARY _____ AIR-PERCussion _____ ROTARY (Hydraulic Rotary) _____ CABLE _____ REVERSE-ROTARY _____ DRIVE-POINT _____ other _____	
REPLACEMENT OR DEEPEENED WELLS (CIRCLE APPROPRIATE BOX) ☒ THIS WELL WILL NOT REPLACE AN EXISTING WELL ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED ☐ THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY-CONTACT LOCAL APPROVING AUTHORITY FOR POLICY ON STANDBY WELLS ☐ THIS WELL WILL DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEENED (IF AVAILABLE) _____		Not to be filled in by driller (MDE OR COUNTY USE ONLY) APPROP. PERMIT NUMBER _____ GAP _____ FORCE DS WRITE INITIALS IN BOX PERMIT NO. HO 94-1489 67 68 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE - APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED -			

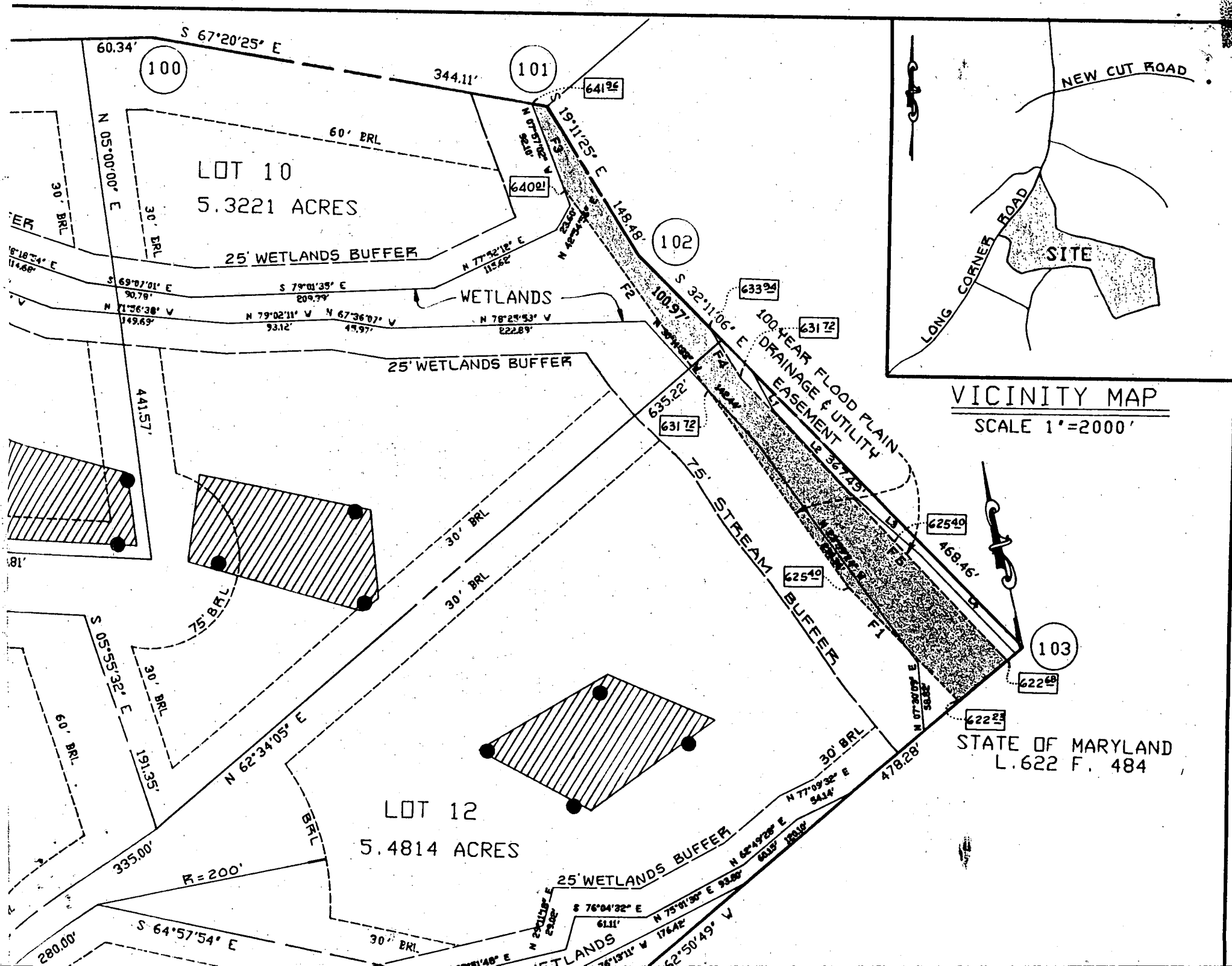
Pleasant Hills -
Lot 10

well site OK
as marked

(10) 3/16/98







VICINITY MAP
SCALE 1"=2000'

STATE OF MARYLAND
L. 622 F. 484

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 ☒
Replacement ☐

Receipt # _____
Date 7-21-98

Name of Installer Perry HARLEY

Telephone 301-898-1068

License Number MSD-143

Certified Well Pump Installer ☐

Well Driller ☒

Registered Plumber ☐

Name of Property Owner _____

Telephone 301-277-2434

Subdivision PIROSAW HILLS Lot # 10

Well Tag # MD-94-1989

Site Address 2056 Watkins Way

Pump

1. Type
 - a. Deep well jet _____
 - b. Shallow well jet _____
 - c. Submersible ☒
2. Make WATER AIRE
3. Model # 2445089003
4. Capacity 10 GPM

Motor

1. Horsepower I
2. RPM 3450
3. Voltage _____
 - a. 110 _____
 - b. 220 ☒

Pitless Adapter

1. Make DICKINS
2. Model # _____
3. Depth 4211

5. Pump exceeds well capacity Yes ☐ No ☒
6. If Yes, is low pressure cutoff switch installed? Yes ☐ No ☒
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Tank

1. Capacity 75 GPM
2. Pressure relief valve? ☒

Piping

1. Type 1/2" only
2. Size 1"
3. NSF and/or BOCA Code approved ☒
4. Depth of supply line 4 FT

Well data

1. Depth 400 ft.
2. Yield 10 GPM
3. Static water level 35 ft.
4. Will water supply be disinfected by installer? ☒

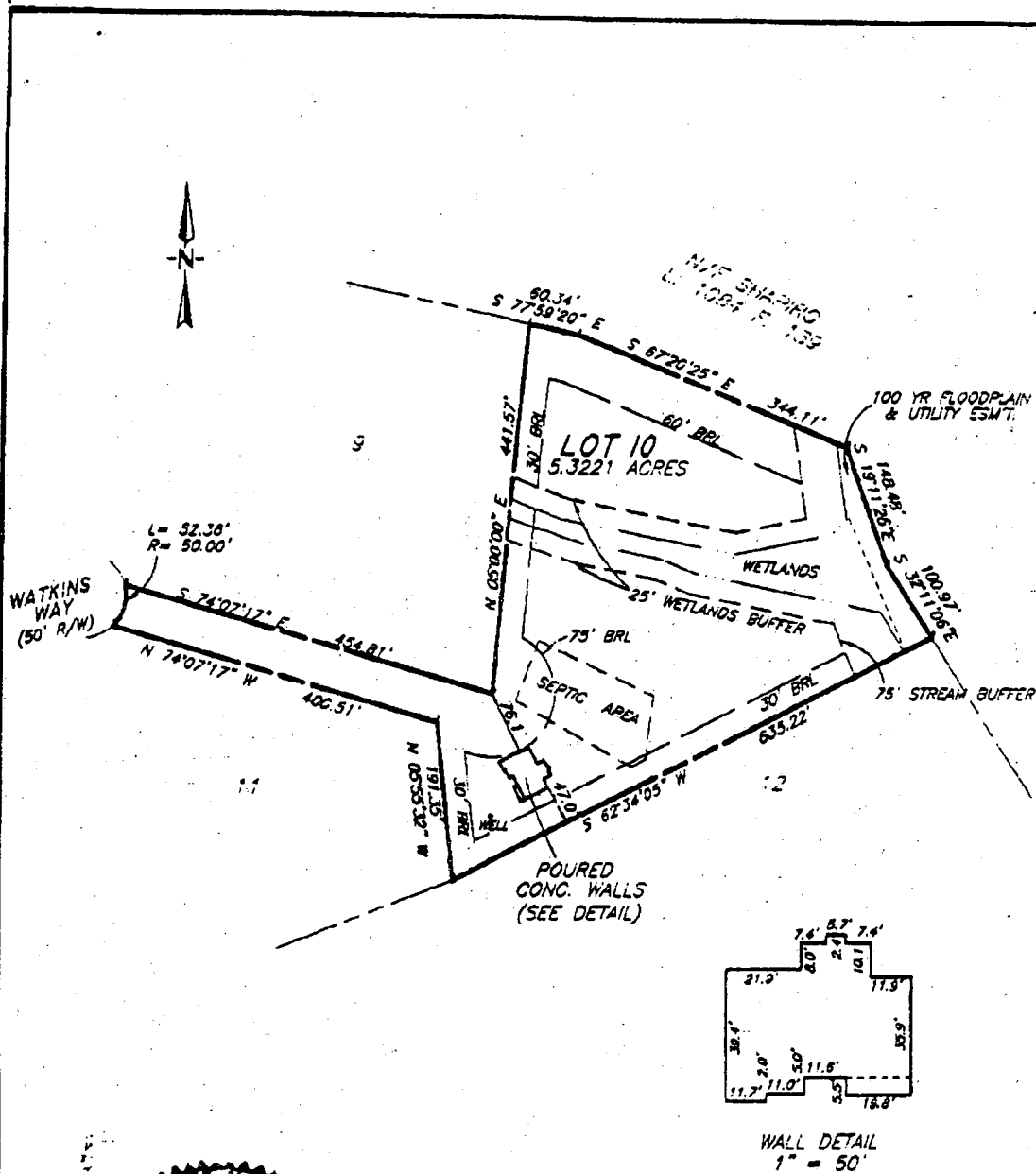
I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: Perry Harley

Date: 7-21-98

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



**LAVELLE & ASSOCIATES
INCORPORATED**
ENGINEERS • PLANNERS • SURVEYORS

336 EAST SECOND STREET • FREDERICK, MARYLAND 21701
OFFICE • (301) 695-9722 • FAX (301) 695-9700

REFERENCE

LIBER / FOLIO

10512

PLAT NUMBER

04/29/98

DATE

1" = 200'

SCALE

DRAWN
BY: R.S.L.

CHECKED
BY: D.P.L.

FILE No:
98-012

SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE POSITION OF ALL EXISTING VISIBLE IMPROVEMENTS ON THE PROPERTY SHOWN HEREON HAVE BEEN CAREFULLY ESTABLISHED BY FIELD MEASUREMENTS, AND UNLESS OTHERWISE SHOWN, THERE ARE NO VISIBLE ENCROACHMENTS. THIS SURVEY IS TO ESTABLISH THESE ABOVE-GROUND IMPROVEMENTS ONLY AND IS NOT INTENDED TO FIND UNDERGROUND UTILITIES OR INSTALLATIONS.

DANIEL P. LAVELLE, R.L.S. No. 10848

WALL CHECK SURVEY
LOT 10
PLEASANT HILLS
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

7/9/98 3:35 pm - received wall check from septic contractor. Reviewed and approved - OK to issue septic permit. (SLS)

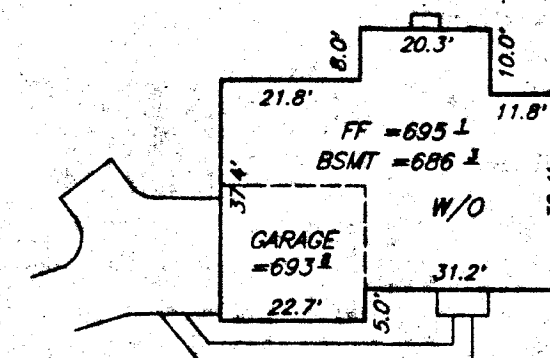
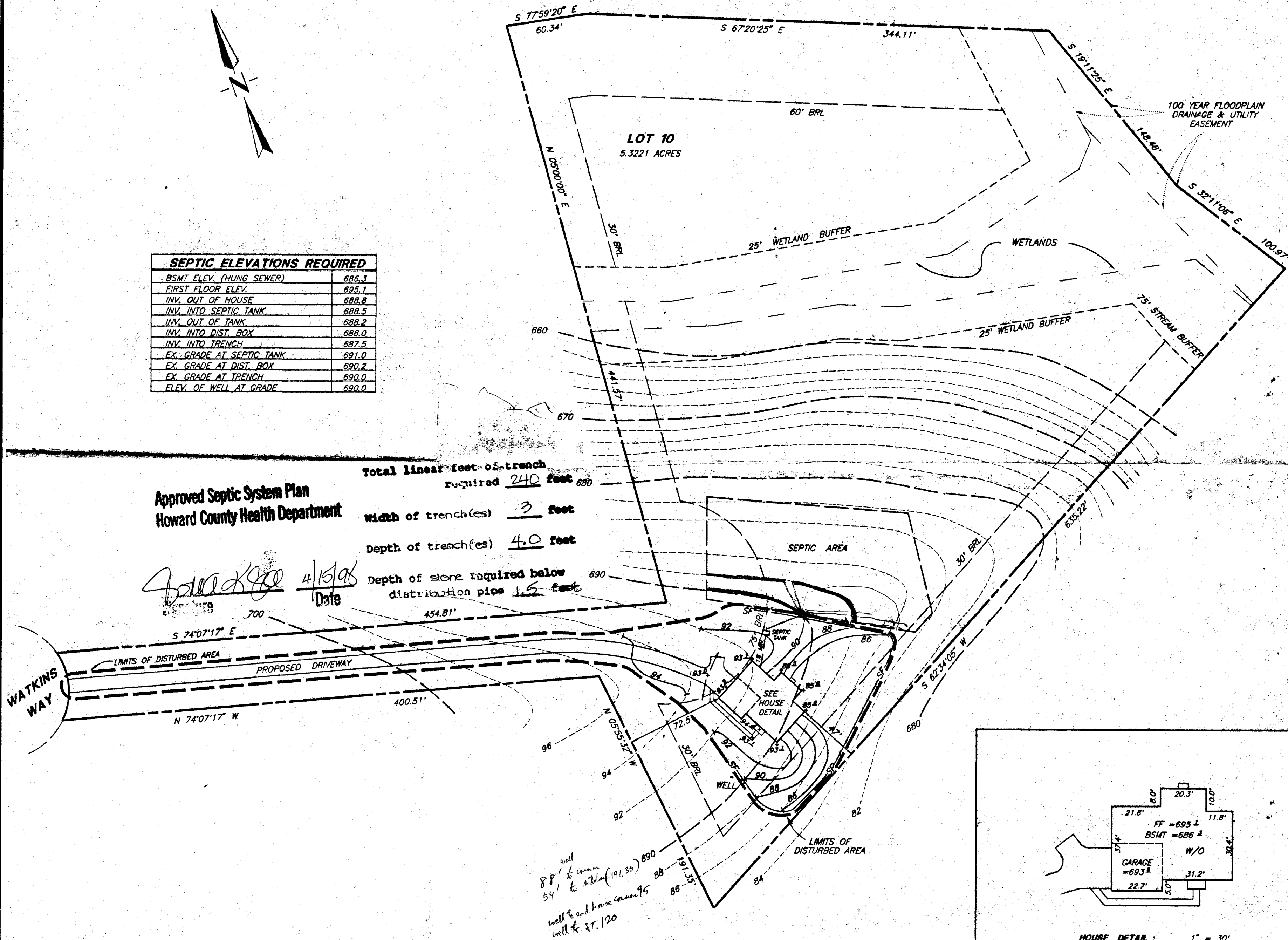
1703 APR -8 A 7:40

SEPTIC ELEVATIONS REQUIRED	
BSMT ELEV. (HUNG SEWER)	686.3
FIRST FLOOR ELEV.	695.1
INV. OUT OF HOUSE	688.8
INV. INTO SEPTIC TANK	688.5
INV. OUT OF TANK	688.2
INV. INTO DIST. BOX	688.0
INV. INTO TRENCH	687.5
EX. GRADE AT SEPTIC TANK	691.0
EX. GRADE AT DIST. BOX	690.2
EX. GRADE AT TRENCH	690.0
ELEV. OF WELL AT GRADE	690.0

Approved Septic System Plan
Howard County Health Department

Total linear feet of trench required 240 feet
width of trench(es) 3 feet
Depth of trench(es) 4.0 feet
Depth of stone required below distribution pipe 1.5 feet

John K. Koo
Date 4/15/98



HOUSE DETAIL: 1" = 30'

DATE

REVISIONS

No.

LAVELLE & ASSOCIATES
ENGINEERS • PLANNERS • SURVEYORS
336 EAST SECOND STREET • FREDERICK, MARYLAND 21701
OFFICE • (301) 695-9722 • FAX (301) 695-9766

SITE PLAN
LOT 10
PLEASANT HILLS
FOURTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

DATE: FEB. 23, 1998

SCALE: 1" = 50'

PROJ. No. 98-012

FILE: /98DWG/98012SP

DRAWN: J.C.A.

