

4/15/02 - 1:30pm - Pump TEST

~~Head House Connection~~
Needs Pump Test

9/2/00
C.O. ST + PC only
Reddy Hnd - lot AM
10/20/00 PM
10/24/00 3:00

PERMIT
SEWAGE DISPOSAL SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
410-313-2640

P 514242

A 46847

ISSUE DATE 9/12/2000

APPROVAL DATE 4/15/02

INDEXED

Will Hopkins

IS PERMITTED TO INSTALL X ALTER

ADDRESS 17550 Old Frederick Road, Mt. Airy, MD 21771 PHONE 410-549-2575

SUBDIVISION LOT NUMBER ADDRESS 654 W. Watersville Road

PROPERTY OWNER Diane Dorsey/
Richard Jackson PROPERTY OWNER'S ADDRESS 1207 Rambler Place

SEPTIC TANK CAPACITY 1500 GALLONS

PUMP CHAMBER CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 4 ** TOP SEAMED, COMPARTMENTED SEPTIC TANK REQUIRED **

SQUARE FEET PER BEDROOM 240 ** TOP SEAMED PUMP CHAMBER REQUIRED **

LINEAR FEET OF TRENCH REQUIRED 320

TRENCHES: Trenches to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth
6 feet below original grade. 2 feet of stone below distribution box.

LOCATION: As per septic plan by Diane Dorsey, approved 8/30/2000:
Place distribution box 160 feet from the east (219') lot boundary and 60 feet above the
existing driveway. Install trenches of equal length (either 4 @ 80' or 3 @ 107') along
contour toward West Watersville Road.
~~Tank and pump pit to be installed to north side of house so as to be "not upslope"~~
~~of well.~~ Current plan is for first floor service only; OK to set tank and pump pit further
back on lot if basement service is requested.

Contractor to call for pre-construction insp. prior to beginning
any work → on sep 9/11/00

PLANS APPROVED Craig Williams DATE 9/1/2000

PERMIT VOID AFTER 2 YEARS

NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FOR ALL INSTALLATIONS

NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE

NOTE: WATERTIGHT SEPTIC TANKS REQUIRED

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS
ARE NOT ACCEPTABLE

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE 100 FEET FROM ANY WATER WELL UNLESS
OTHERWISE SPECIFICALLY AUTHORIZED

NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AUTHORIZED

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

NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY INSTALLER PRIOR TO ISSUANCE OF SEPTIC
PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT APPROVAL OF SEPTIC PERMIT

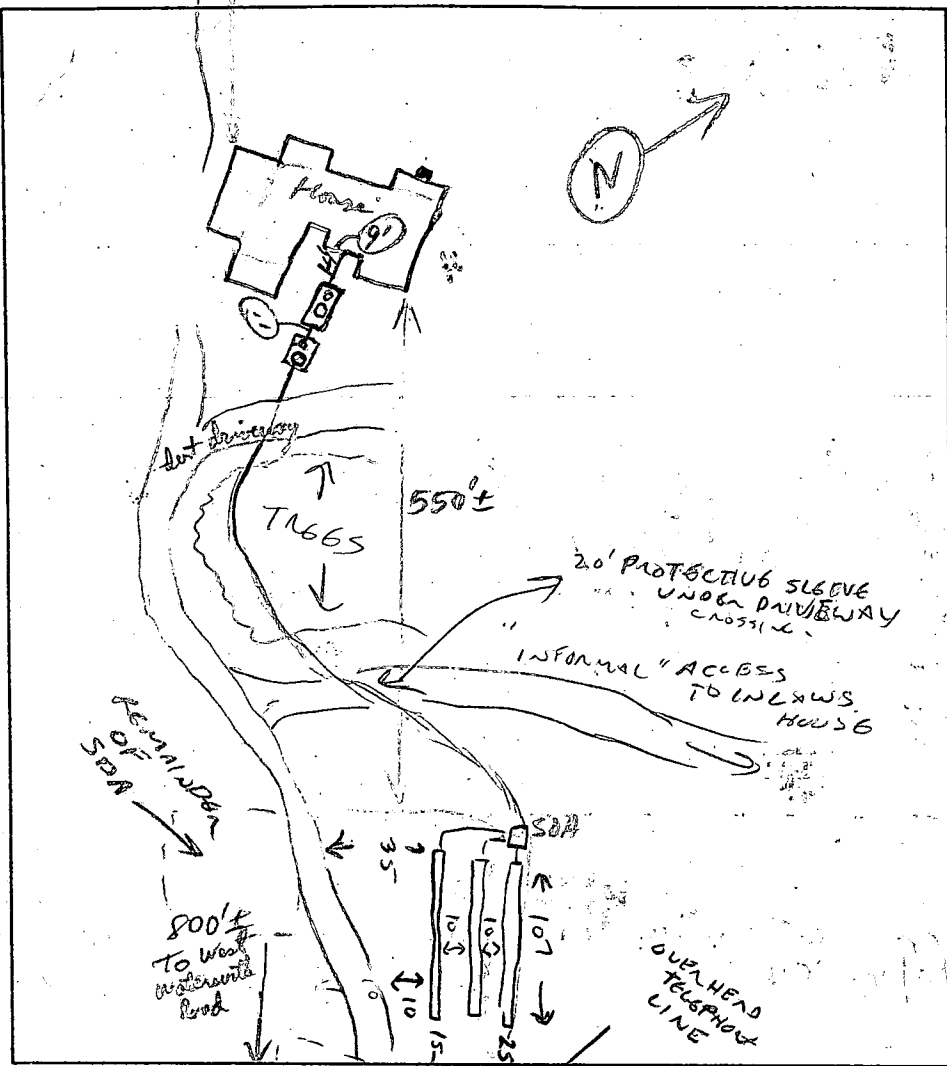
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE
SUCCESSFUL OPERATION OF ANY SYSTEM
PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

A 46847

MO-94-2223
Nwell

water line 165'

NOT TO SCALE



TRENCH DATA

TRENCH WIDTH 3'
TRENCH INLET DEPTH 4'
TRENCH BOTTOM DEPTH 6'
DEPTH OF STONE 2'
NUMBER OF TRENCHES 3
TOTAL TRENCH LENGTH 321
ABSORBENT AREA 963 ϕ
DISTRIBUTION BOX LEVEL ✓
BAFFLE IN DISTRIBUTION BOX ✓

SEPTIC TANK DATA

20000 (Total)
SEPTIC TANK 1500 Top Second GALLONS
(+500 gal sides P.C.)
MANHOLE RISER yes (1ft tall)
6 INCH INSPECTION PORT yes
Outlet Baffle OK, no inlet screen yet
PUMP CHAMBER DATA

PUMP CHAMBER GALLONS 1500 gal Top Second
MANHOLE RISER yes (1ft tall)
ALARM Functional
PUMP PERFORMANCE TEST OK

PRE-CONSTRUCTION INSPECTION: OK TO PLACE TANK AT ANY CONVENIENT LOCATION,
OBSERVATION HOLS NEAR HOUSE SHOW SIGNS OF RORIC TO BE NW AWAY FROM WELL.

INSPECTION COMMENTS: CORNERS OF SEPTIC AREA STAKES OK FOR 3 TRENCHES @ 107'.
Moderately Stacey Tank floor, PC set back from 1000 gal section is P.C., 500 gal is second section tank
Baffle OK @ inlet of PC & outlet of Septic Tank, No inlet ST. Baffle Mark Horse Connection. RPP 9/24/00
DISTRIBUTION BOX & 3 TRENCHES COMPLETE; OK TO COVER 10/20/00 CW
HOUSE CONNECTION, EFFLUENT LINE COMPLETE & OK TO COVER 10/26/00 CW

2/11/02 - PUMP & ALARM NOT WORKING - TOLD CONTRACTOR TO CALL WILL HOPKINS
ELECTRICIAN & PUMP INSTALLER (SEPTIC) TO FIGURE OUT PROBLEM (SRD)

INSPECTOR Steve Carter DATE SYSTEM APPROVED 4/15/02
4/15/02 Pump & Alarm tests OK. Well has rope thru vent in cap.
Needs to be fixed (E)

Basement elev. 717
 F.F. Elev. 725
 House Invert 721
 Septic Tank Invert 721
 Existing grade at Tank 724
 (25' of cover over tank)
 GIB2

TANK-OUTLET 721
 PUMP PT INVERT 721
 EX. HOUSE

NOTE:
 WELL EASEMENT IS TO BE
 ESTABLISHED ALLOWING
 ACCESS TO OFFSITE WELL AS A
 CONDITION TO OCCUPANCY APPROVAL

Total linear feet of trench
 required 320 feet

Width of trench (as)
 3 feet

Depth of trench (as)
 6 feet

Depth of stone required below
 distribution pipe 2 feet

RODNEY C. & DIANE DORSEY
 L. 4768 F. 0569
 20.000 Ac.±

CONTRACTOR TO PROVIDE
 EFFLUENT PUMP & SUPPLY LINE

DETAIL PRIOR TO
 ISSUANCE OF
 SEPTIC PERMIT

PROPOSAL
 15 FAN
 FIRST FLOOR SERVICE
 ONLY
 NO OBJECTION IF
 TANKS ARE SET
 LOWER ON LOT,
 NOT DEEPER
 IN GROUND
 EX. SEPTIC
 PROVIDE
 BASEMENT
 SERVICE

240' PER BEDROOM ÷ 3' WIDE =
 80 FT TRENCH PER BEDROOM
 X 4 BN
 320 LINEAR FT TRENCH

EXISTING
 GRADE AT
 SEPTIC FIELD
 TRENCH INVERT
 752
 748
 GIB2

DBOX

RICHARD J. & MARGARET
 JACKSON
 L. 470 F. 239

R. BUNN
 L. 262 F. 292

PUMP SPECIFICATION:

748
 721
 27' LIFT
 + 600' distance

(IF BASE OPTION IS USED 7' more lift + 50' more distance)

Diane Dorsey

J.L. DELP # 584/217

FROM : HoCo EnvHealth

FAX NO. : 4103132648

Oct. 17 2001 10:53AM P1

ATTN: DIANE DORSEY

FAX 443-778-
6189

**HOWARD COUNTY HEALTH DEPARTMENT
BUREAU OF ENVIRONMENTAL HEALTH
WATER AND SEWERAGE PROGRAM
TEL: (410)313-2640 FAX: (410)313-2648**

Information Form for the Installation of the Well Pump, Pitless Adapter, and Supply Piping

NOTE: The installer is responsible for requesting an inspection prior to 9 am on the day of the desired inspection. No work is to be covered until approved by the Health Department. All installations must comply with the National Standard Plumbing Code (NSPC, as amended locally) and COMAR 26.04.04 (MD Well Construction Regulations). Submission of a complete form is required prior to Use and Occupancy approval.

Company Name: Chummy Orchard Telephone: (801) 774-3869
Address: 1000 1st St Relative of Mrs. Dorsey
Not done for profit

(Must circle one) Licensed Plumber ☐ Licensed Well Driller ☒ Licensed Well Pump Installer ☐
License # and name of individual responsible for the field installation:
Name (Print): Tommy A. Ward & Chummy Orchard License: NO - OK SRM

*A licensed individual must perform the actual installation. Apprentices must be under the supervision of a licensed journeyman or master plumber, pump installer or well driller. Licenses may be subjected to field verification. Unlicensed individuals may be reported to the appropriate licensing agency.

Name of Property: 1000 1st St & Diane Dorsey Telephone #: (801) 829-6822
Subdivision: Dicky Farms Lot #: 23 Well Tag #: HO-94-2223
Site Address: 654 W. Waterville Rd Parcel

Submersible Pump Data
Make: Goulds Pitless Adapter
Model #: 111245 Make: Dan
Pump Capacity: 7 GPM Depth: 36" (36" min)
Well Yield: 10 GPM NSF/WSC approved: ☐ Well Cap and Electric Conduit
Depth of well encountered at time of pump installation: (feet) Two piece watertight cap: ☒
If pump capacity exceeds well yield, a low water cut off switch is required by NSPC 1990 Section 17.8.4
Torque arrestors, Cable guards, or other acceptable method used- Must circle one
Safety rope, if used, attached to brass rope adapter or other acceptable method inside of well casing
Screened, vented well cap: ☐
Cap secured to casing: ☒
Conduit min 18" B.G.: ☒
Conduit secured to well cap: ☒

Finishing to house
Type: 1 inch House Connection
PVC sleeve to undisturbed soil at wall penetration: back
PSI: (160 psi min) Approximate length of sleeve:
Depth of supply line: 36" (36" min) Sleeve caulked and sealed properly: yes

The water supply line is required to be at least ten feet from the septic tank, pump chamber, sewage piping, distribution box, riser fields, and sewage reserve area. If this cannot be accomplished, contact this office for approval prior to installation.

Signature of company representative responsible for installation
Chummy Orchard

date
Oct 18, 2001

For Health Department Use Only - Not to be completed by Installer

Date Insp. Request d: 12/27/99 Date Insp. Approved: 12/27/99 Inspector: CW & RJP SRM
Inspection Data:
Pitless adapter watertight & water supply line at least 36" below grade ☒
Two piece cap installed and attached to casing securely ☒
Electric conduit extends at least 18" below grade/attached to cap properly ☒
Safety rope not seen outside of well cap/casing ☒
Correct well tag attached properly and casing 8" above finished grade ☒
Water supply line sleeved adequately at house connection ☒
Alternate ground observed below pitless adapter ☒

C 1	4180	SEQUENCE NO. (MDE 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 NUMBER 2	
DATE RECEIVED MM DD YY 8 13 99			DATE WELL COMPLETED MM DD YY 7/16/99		DEPTH OF WELL 22 200 26 (TO NEAREST FOOT)	
ST/CO USE ONLY DATE RECEIVED MM DD YY 8 13 99			PERMIT NO. FROM "PERMIT TO DRILL WELL" HO 94 2223		28 29 30 31 32 33 34 35 36 37	

OWNER	DORSEY, DIANE				
STREET OR RFD	WATERSVILLE RD				
SUBDIVISION	JACKSON PROP				
TOWN	MT. AIRY				
SECTION	LOT				

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
Top Soil	0 2	
brown shale	2 30	
gray shale	30 40	
brown shale	40 55	
blue shale	55 70	
brown shale	70 72	✓
gray shale	72 170	
brown shale	170 175	✓
blue shale	175 200	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle appropriate box) yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
TYPE OF GROUTING MATERIAL (Circle one) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/>	
NO. OF BAGS 20 NO. OF POUNDS 2000	
GALLONS OF WATER 100	
DEPTH OF GROUT SEAL (to nearest foot) from 0 ft. to 54 ft. (enter 0 if from surface)	
CASING RECORD	
casing types insert appropriate code below	
STEEL <input checked="" type="checkbox"/> CONCRETE <input type="checkbox"/>	
PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/>	
MAIN CASING TYPE	
Nominal diameter top (main) casing (nearest inch)	
Total depth of main casing (nearest foot)	
ST 06 62	
OTHER CASING (if used)	
diameter inch	
depth (feet) from to	

PUMPING TEST	
HOURS PUMPED (nearest hour) 3	
PUMPING RATE (gal. per min.) 10	
METHOD USED TO MEASURE PUMPING RATE Bucket	
WATER LEVEL (distance from land surface)	
BEFORE PUMPING 50 ft.	
WHEN PUMPING 72 ft.	
TYPE OF PUMP USED (for test)	
A air P piston T turbine	
C centrifugal R rotary O other (describe below)	
J jet S submersible	

NUMBER OF UNSUCCESSFUL WELLS: 1
WELL HYDROFRACTURED
yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
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.

SCREEN RECORD	
screen type or open hole	
STEEL <input checked="" type="checkbox"/> BRASS <input type="checkbox"/> OPEN HOLE <input type="checkbox"/>	
BRONZE <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/>	
DEPTH (nearest ft.)	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN (NEAREST INCH)	
from to	

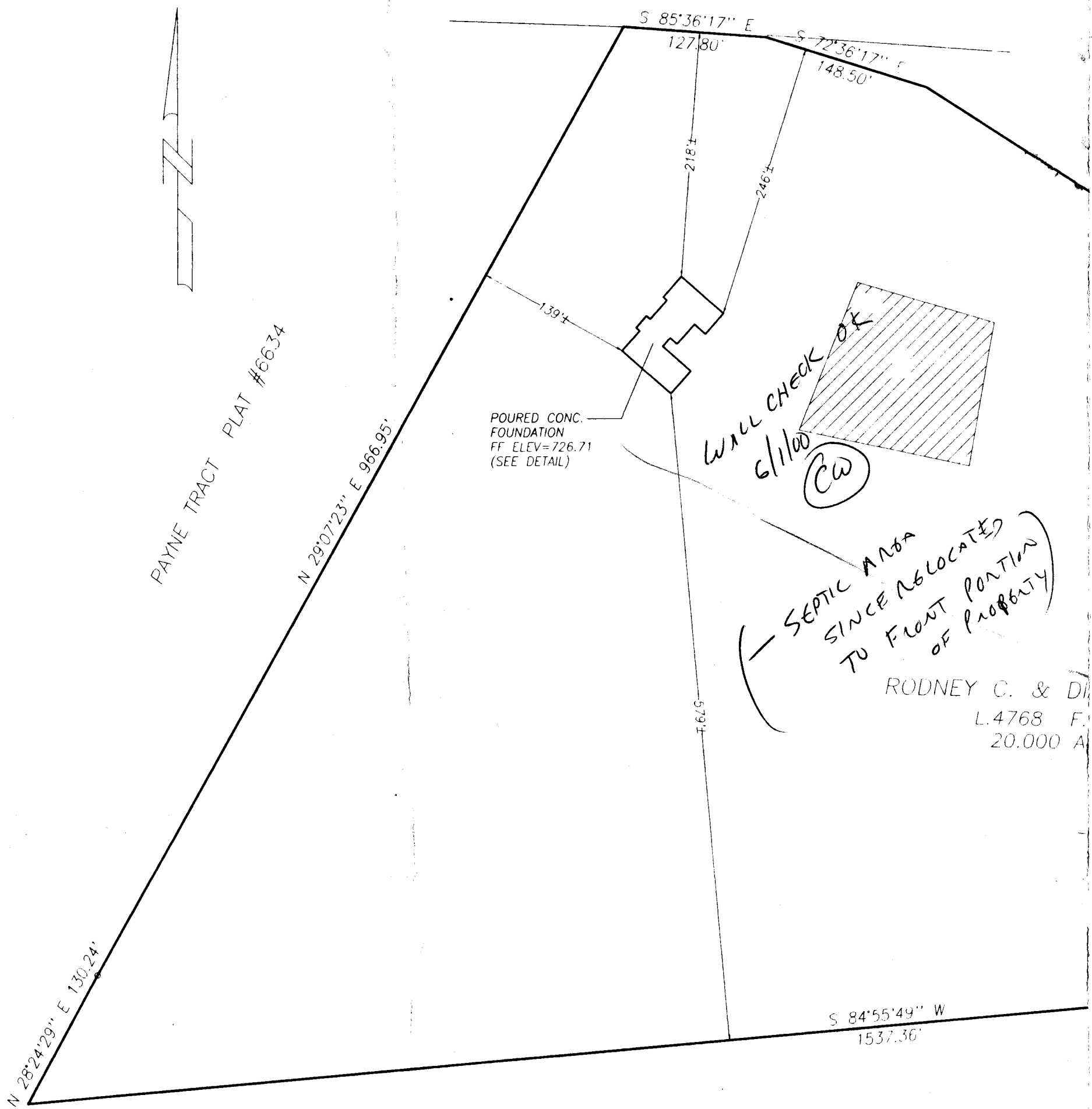
PUMP INSTALLED	
DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO)	
IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.	
TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29	
CAPACITY: GALLONS PER MINUTE (to nearest gallon)	
PUMP HORSE POWER	
PUMP COLUMN LENGTH (nearest ft.)	
CASING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

DRILLERS LIC. NO. 1 MW D 040
DRILLERS SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)
LIC. NO. 1 MW D 501
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

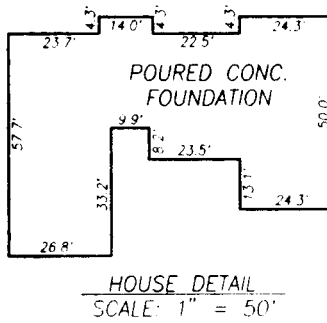
GRAVEL PACK IF WELL DRILLED: WAS FLOWING WELL INSERT F IN BOX 68	
MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	
T (E.R.O.S.) W Q	
70 72 74 75 76	
TELESCOPE CASING LOG INDICATOR OTHER DATA	

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)	
well 500'	
Watersville RD.	

C. SOLLERS
320/426



J.L. DELPH 584/217



- NOTES:
1. FOOTINGS AND FOUNDATION ARE IN PLACE AS SHOWN.
 2. FIRST FLOOR ELEV.=726.71

Sollers
Munn
10/7/99

APPLICATION

PERCOLATION TESTING

A 46847

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2840

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER RICHARD JACKSON FOR DIANE DOASEY

ADDRESS 634 W WATERSVILLE RD. PHONE _____

AGENT OR PROSPECTIVE BUYER STEPHANIE BIGGUS.

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION _____

TAX MAP 2 PARCEL # 99

SIZE OF LOT _____ TYPE BLDG. _____

(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # APPROVED DATE 8/30/00

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

A46847

COUNTY #

SOIL PROFILE

CLAY

SILT
LOAM20%
SAPPROLITE>50%
SAPPROLITESIMILAR
W/ EXCESS
SAPPROLITE
STARTING @ 6'

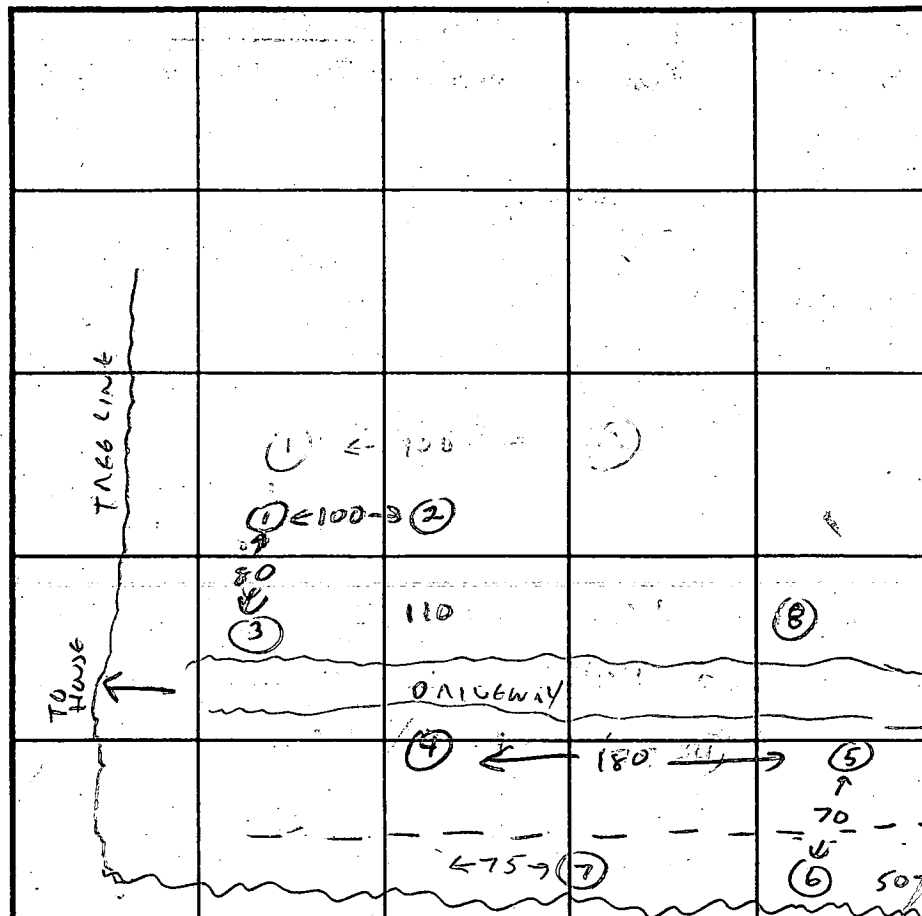
CLAY

SILT
LOAM20%
SAPPROLITE>50%
SAPPROLITE

CLAY

PINK
MICASILT
LOAM20-30%
SAPPROLITEEXCESSIVELY
SANDY

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

- - - - 15 BU160 (STILL VISIBLE) ELECTRIC LINE

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1' DROP		TIME
			START	STOP	START	STOP	
6/13/00	6/13/00	3 1/2	5:16	5:21	5:21	5:28	7 MIN
		VIS OK 3 1/2					
	2	3	5:24	5:35	5:35	6:05	30 MIN
	4,7	NO TEST - INSUFFICIENT SOIL DEPTH BETWEEN CLAY/ROCK					
	5	4 1/2	6:30	6:36	6:36	6:49	9 MIN
		VIS OK TO 10 1/2'					
	6	4 1/2	6:32	6:37	6:37	6:44	7 MIN
		VIS OK TO 1'					
	8	4	6:50	6:52	6:52	6:54	2 MIN
		VIS OK TO 10 1/2'					

REMARKS

TYPE OF SOIL

TESTED BY

ALSO PRESENT with HOPKINS

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

240

APPLICATION

Received
3-1-91

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

PERCOLATION TESTING

OK TO PROCESS
OR VACANT LOT
NO KNOWN PERC HISTORY,

DISTRICT

DATE

A 46847

P

2/28/91 CW

2/28/91

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

Richard Jackson

ADDRESS

634 W. Watersville Rd. Mt. Airy Md 21771
PHONE (301) 831-5773

PROSPECTIVE BUYER

Stephanie Biggs

ADDRESS

3545 Hopland Rd Frederick Md 21704
PHONE (301) 236-1037

PROPERTY LOCATION:

SUBDIVISION

LOT NO.

ROAD AND DESCRIPTION

off W. Watersville Rd Between P. 38 + P 56 go
straight back to wooded area, go into wood 150ft to clearing

TAX MAP

PARCEL #

2 99

SIZE OF LOT

20 acres

TYPE BLDG.

Single Family
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY

FOR

DATE

REJECTED BY

FOR

DATE

HOLD PENDING FURTHER TESTS

DATE

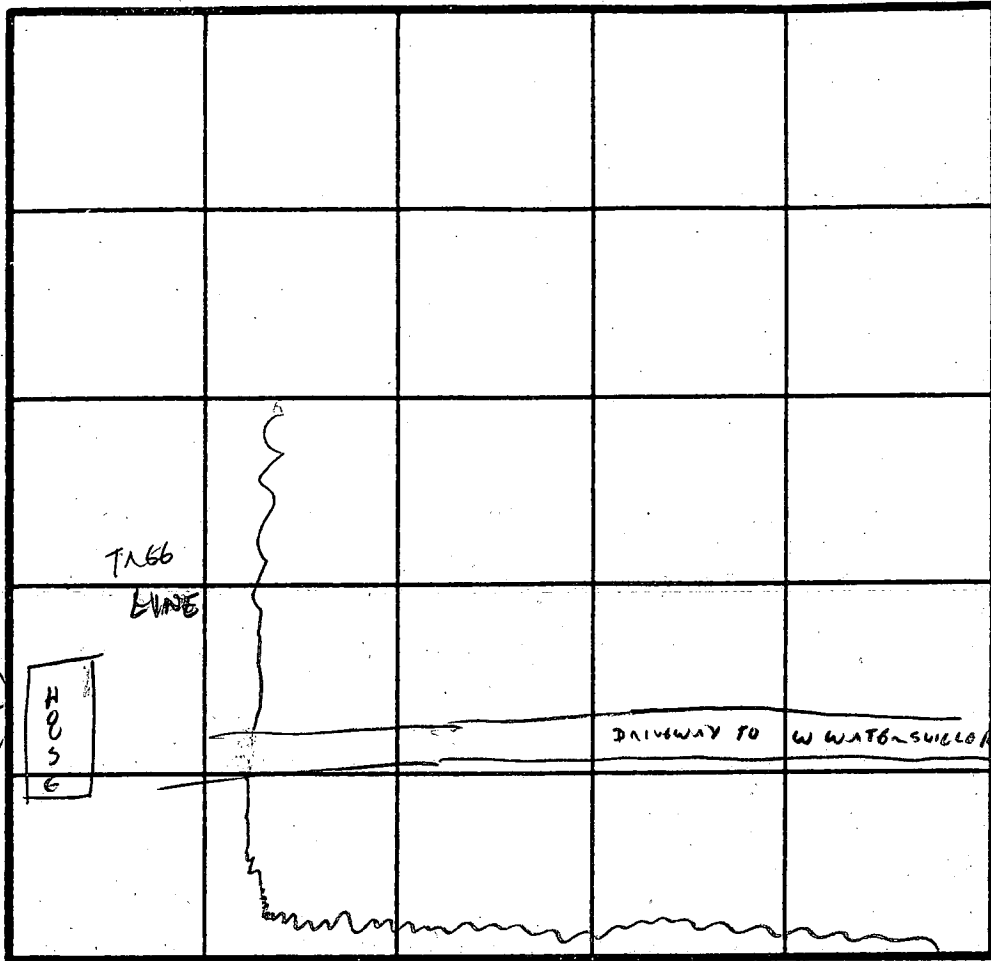
REASONS FOR REJECTION OR HOLDING

TESTED 6/13/00
SEE ATTACHMENT
PERC CERT OK
CW

THIS IS NOT A PERMIT

SOIL PROFILE

0'



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/13/00							

REMARKS _____

TYPE OF SOIL _____

TESTED BY _____ ALSO PRESENT _____

APPLICATION

PERCOLATION TESTING

A 50600

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Dorsey

ADDRESS _____ PHONE _____

AGENT OR PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION W. Watersville Rd

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG. _____
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

INLET DEPTH MAXIMUM BOTTOM DEPTH SQ. FT./BEDROOM _____

APPLICATION

PERCOLATION TESTING

A 50600

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE MARCH 23, 1997

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

PREVIEW OK
TEST FOR SINGLE LOT
IF RESULTS ARE
ENCOURAGING
OK TO CONTINUE FOR
UP TO 4 LOTS.
WITH ADDITIONAL
FEES (CW)

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Richard John Jackson

ADDRESS 634 W. Watersville Rd PHONE 3(301) 422-8656

AGENT OR PROSPECTIVE BUYER Diane Dorsey (Daughter)

ADDRESS 616 W. Watersville Rd PHONE (301) 829-9462

mt Airy MD 21771

PROPERTY LOCATION:

SUBDIVISION Hardby Farms LOT NO. _____

ROAD AND DESCRIPTION W. Watersville Rd. 20 Acre Subdivide in

4 Lots

TAX MAP 13 2 PARCEL # 99

SIZE OF LOT 4.75 TYPE BLDG. Single Family

(SINGLE FAMILY DWELLING OR COMMERCIAL)

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(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT.

SOIL PROFILE

FILED

ACCESS
DRIVEWAY
FROM WATERVILLE
ROAD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SOIL PROFILE

brn
Gravelly
s. 611m
reddish
brn
Sa 611m
25%
shale
saprobiol
mix.

8 750% SAPROLITE
9' hard bottom
SEE ADDITIONAL
SHEET FOR Q.

[illegible]REMARKS P SIMILAR TO O (SEE ADDITIONAL NOTES FOR P).

TYPE OF SOIL

TESTED BY GLENN SAVAGE

ALSO PRESENT AMY McMILLIN, OWNER

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _____ TRENCH WIDTH _____

INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

4/23/95
16.00

APPLICATION

PERCOLATION TESTING

A 50600

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE MARCH 23, 1995

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

PREVIEW OK
TEST FOR SINGLE LOT
IF RESULTS ARE
ENCOURAGING
OK TO CONTINUE FOR
UP TO 4 LOTS.
WITH ADDITIONAL
FEES (CW)

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Richard John Jackson

ADDRESS 634 W. Watersville Rd PHONE (301) 422-8656

AGENT OR PROSPECTIVE BUYER Diane Dorsey (Daughter)

ADDRESS 616 W. Watersville Rd PHONE (301) 829-9462

at Arty MD 21771

PROPERTY LOCATION:

SUBDIVISION Hardby Farms LOT NO. _____

ROAD AND DESCRIPTION W. Watersville Rd. 20 Acre Subdivide in

4 Lots

TAX MAP 2 PARCEL # 99

SIZE OF LOT 4.75 TYPE BLDG. Single Family
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT.

W0605

A 50660

COUNTY #

SOIL PROFILE

0'

DIRT
DRIVE

BRICK HOUSE

SHEP

 $R \otimes$

FIELD

A hand-drawn map of the study area. The map shows a grid of streets. A cross marks the 'City Center'. Another cross marks the 'Study Site'. A third cross marks the 'River'. A scale bar indicates 100 meters. A north arrow is present.

SOIL PROFILE

0

BRN GRAVEL
SCL

RED-DISH
Brew

Sec 9 Lm

282

SCALE
5000

APPROLITE
B.V.

7/14

75% SAVOLICE

9 HARD BATTLE

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

[illegible]

REMARKS NO HOLES PASSED THIS SHEET

TYPE OF SOIL

TESTED BY GLEN SAVAGE

ALSO PRESENT AMY McMILLON OWNER

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT./BEDROOM

APPLICATION

PERCOLATION TESTING

A 50600

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE MARCH 23, 1995

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

PREVIEW OK
TEST FOR SINGLE LOT
IF RESULTS ALL
ENCOURAGING
OK TO CONTINUE FOR
UP TO 4 LOTS.
WITH ADDITIONAL
FEES

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Richard John Jackson

ADDRESS 634 W. Watersville Rd PHONE (301) 422-8656

AGENT OR PROSPECTIVE BUYER Diane Dorsey (Daughter)

ADDRESS 616 W. Watersville Rd PHONE (301) 829-9462

PROPERTY LOCATION: MT. AIRY MD 21771

SUBDIVISION Hardby Farms LOT NO. _____

ROAD AND DESCRIPTION W. Watersville Rd. 20 Acre Sub divide in
4 lots

TAX MAP 13 2 PARCEL # 99

SIZE OF LOT 4.75 TYPE BLDG. Single Family
(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.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

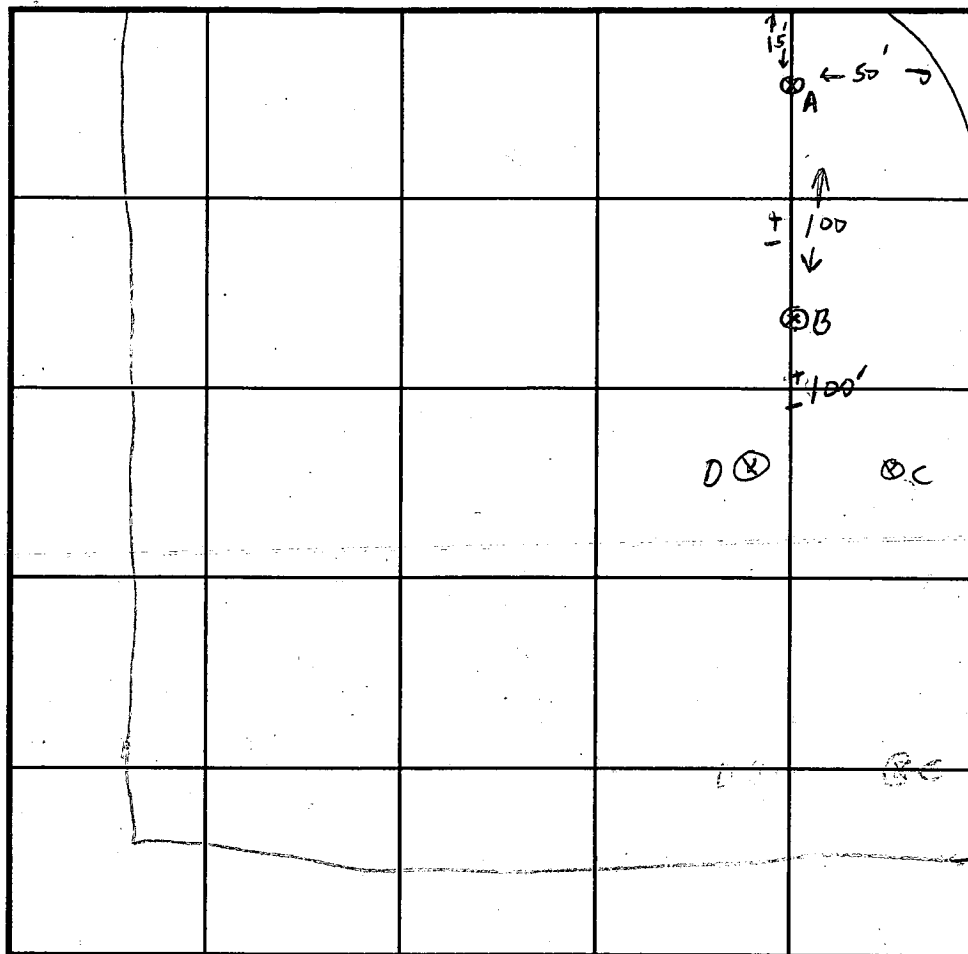
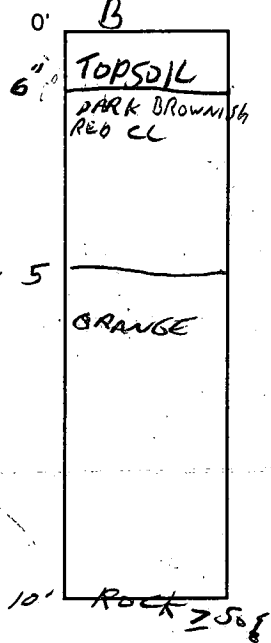
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

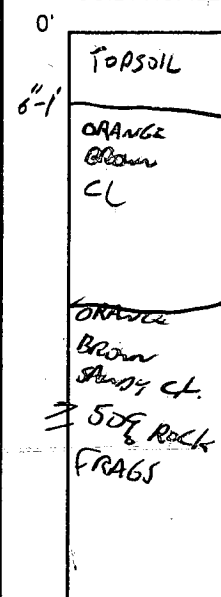
THIS IS NOT A PERMIT

A50600
COUNTY #

SOIL PROFILE



SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
4/28/95	A	NOT TESTED	HEAVY CLAY TO		ROCK		
	B	6'	11:18	1:35	1/4 INCH TEST STOPPED		FAIL
	C	ROCK AT 6'	CLAY ABOVE ROCK				
	D	ROCK 6' 6"	"	"	"		

REMARKS DORSEY LOT, NO HOLES PASSED THIS SHEET.

TYPE OF SOIL

TESTED BY GLEN SAVAGE

ALSO PRESENT FRANK DELPH, WILLIAM ORANGES, AMY MEMBERS

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

TRENCH WIDTH

INLET DEPTH

MAXIMUM BOTTOM DEPTH

SQ. FT/BEDROOM

APPLICATION

PERCOLATION TESTING

A 50600

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE March 23, 1993

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

PREVIEW OK
TEST FOR SINGLE LOT
IF RESULTS ARE
ENCOURAGING
OK TO CONTINUE FOR
UP TO 4 LOTS.
WITH ADDITIONAL
FEES

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER Richard John Jackson

ADDRESS 634 W. Watersville Rd PHONE (301) 422-8656

AGENT OR PROSPECTIVE BUYER Diane Dorsey (Daughter)

ADDRESS 616 W. Watersville Rd PHONE (301) 829-9462

PROPERTY LOCATION: 44 Hwy MD 21771

SUBDIVISION Hardby Farms LOT NO. _____

ROAD AND DESCRIPTION W. Watersville Rd. 20 Acre Subdivide in

4 Lots

TAX MAP 2 PARCEL # 99

SIZE OF LOT 4.75 TYPE BLDG. Single Family

(SINGLE FAMILY DWELLING OR COMMERCIAL)

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE. I FULLY UNDERSTAND THE

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COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.

(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT.

SQ. FT./BEDROOM

+20% SAPROLITE
FRAC

TEST DATA

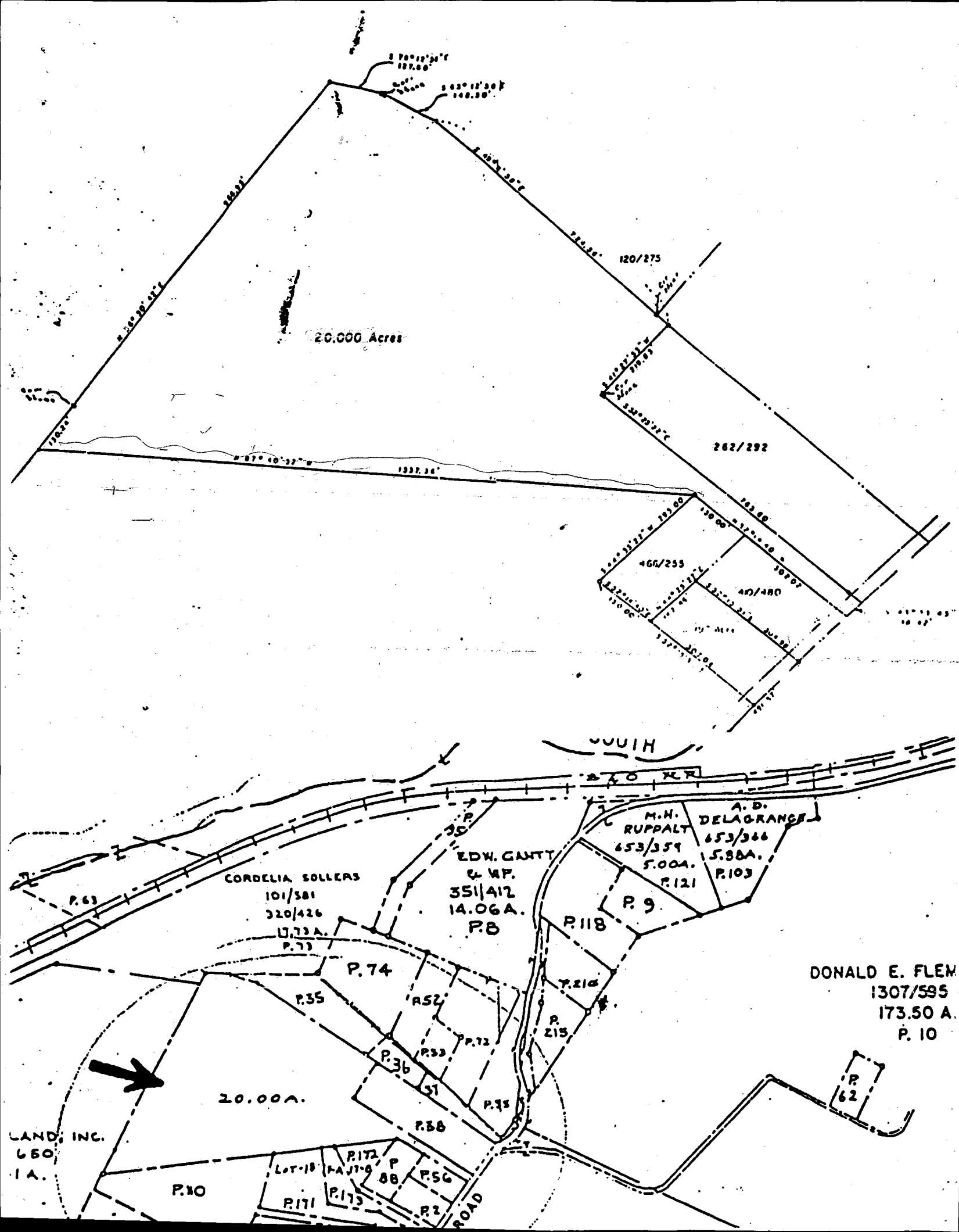
NAME	<u>Dorsey</u>	FILE NO	<u>A 50600</u>
LOCATION	<u>616 Watersville Rd</u>	COUNTY	<u>Howard</u>
		DATE	<u>7/21/95</u>
		GRID	<u>E</u>
RECORDED BY	<u>R. P. P. P.</u>		<u>N</u>

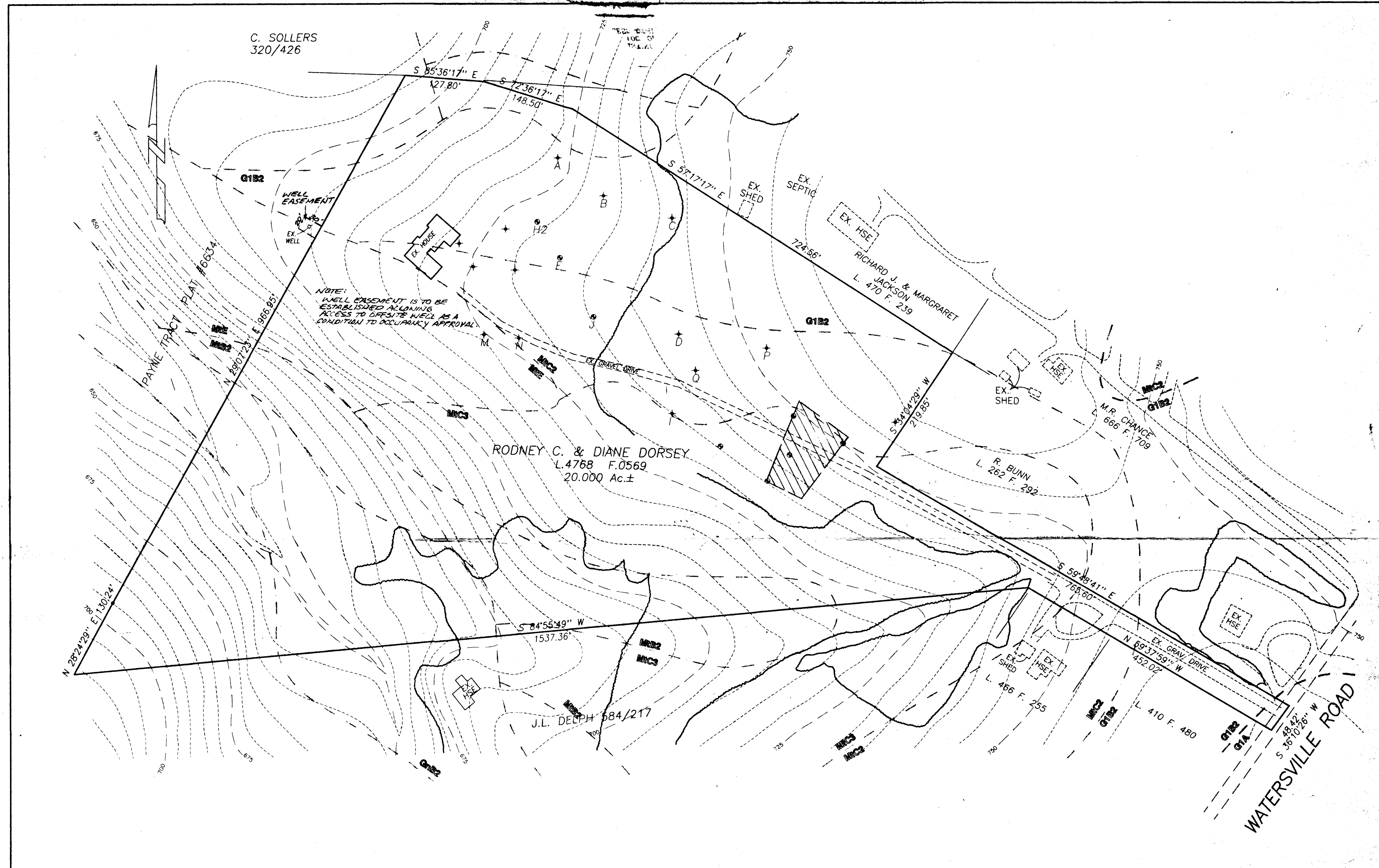
HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
A	start ① OK @ 9-4"	9'-14" Filled 7' head	9:50:29 10:00:55 10:14:00 10:29:40 10:44:40	24 mpi 30 mpi	13 1/4" 13 15/16" 14 5/8" 15 1/4" 15 3/4"	Tape from Notched Marker Infiltrometer only 3 1/2" head
A	Too Slow ② at 17-24"	17-24" Filled 7' head	9:58:45 10:12:45 10:27:40 10:42:50 11:06:00	120 mpi 190 mpi	11" even 11 3/8" 11 1/2" 11 9/16" 11 1/16"	Infiltrometer
A	OK ③ @ 5'	5' 4"	10:19:20 10:29:00 10:40:00	11 mpi	Top Nail 2nd Nail 3rd Nail	Hard to dig many channels 4-6" long Regular pore hole 12" dia 6" deep

TEST DATA

NAME <u>Diane Dorsey</u>	FILE NO <u>A50600</u>
LOCATION <u>W. Watersville Rd</u>	COUNTY <u>Howard</u>
<u>616</u>	DATE <u>7/21/95</u>
	GRID _____ E
RECORDED BY <u>RJ Purley</u>	N

HOLE NO.	TEST NO.	DEPTH	CLOCK TIME	ELAPSED TIME	MEASUREMENT	REMARKS (Method, Moisture, Biopores)
B	Too Slow @ 15-21"	15-21"	11:00 11:30:30 11:56:40 12:30:00	~ 190. mpi	1 1/4" 1 9/16" 1 3/4" 1 7/8"	Infiltration in light Str Brn silt slightly channely



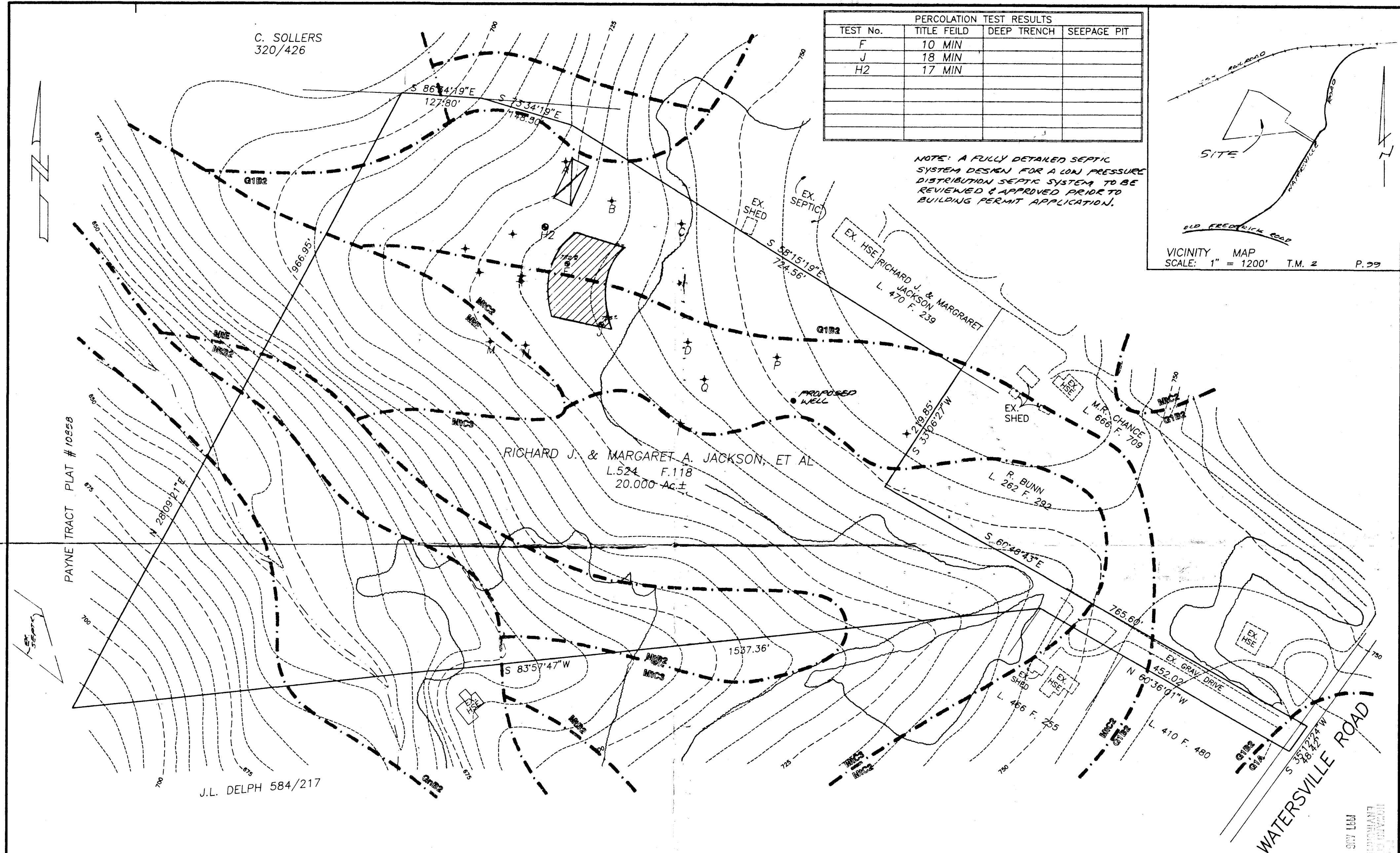


<p>APPROVED: FOR PRIVATE WATER AND PRIVATE SEWERAGE SYSTEMS. HOWARD COUNTY HEALTH DEPARTMENT</p> <p><i>Diane L. Watson</i> M.D. 8/20/00 HOWARD COUNTY HEALTH OFFICER</p> <p>DATE</p>	<p>I CERTIFY THAT THE PERCOLATION TEST HOLE LOCATIONS SHOWN HEREON HAVE BEEN ACCURATELY STAKED OUT ACCORDING TO THIS PLAN, IF PROPOSED, OR HAVE BEEN ACCURATELY FIELD LOCATED IF EXISTING, UNLESS OTHERWISE STATED HEREON.</p> <p><i>Sourabh G. Munshi</i> 7/25/00 SOURABH G. MUNSHI, PROFESSIONAL LAND SURVEYOR, MD. REG. No. 10770</p> <p>DATE</p>	<p>THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF ENVIRONMENT FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM. THE COUNTY HEALTH OFFICER SHALL HAVE THE AUTHORITY TO GRANT VARIANCES FOR ENCROACHMENTS. RECORDATION OF A MODIFIED SEWERAGE EASEMENT SHALL NOT BE NECESSARY.</p> <p>PROPOSED PERCOLATION TEST SITE ———— ● PASSED ———— + FAILED</p> <p>PROPOSED WELL ———— ●</p> <p>PROPOSED HOUSE SITE ———— ⊠</p> <p>NOTE: THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF ANY PROPOSED WELL OR SEPTIC UNLESS OTHERWISE SHOWN HEREON.</p>	<table border="1"> <tr> <th>DATE</th> <th>REVISIONS</th> </tr> <tr> <td>8/17/97</td> <td>PER COMMENTS</td> </tr> <tr> <td>7/24/00</td> <td>REVISED PERC LOCATIONS</td> </tr> <tr> <td>8/24/00</td> <td>SEPTIC & WELL EASMT.</td> </tr> </table> <p>STATE OF MARYLAND SOURABH G. MUNSHI PROFESSIONAL LAND SURVEYOR REG. NO. 10770</p>	DATE	REVISIONS	8/17/97	PER COMMENTS	7/24/00	REVISED PERC LOCATIONS	8/24/00	SEPTIC & WELL EASMT.	<p>Signed 8-20-00</p> <p>PERCOLATION CERTIFICATION PLAT</p> <p>LANDS CONVEYED TO RODNEY C. & DIANE DORSEY</p> <p>LIBER 4768 AT FOLIO 0569 SITUATED ON WATERSVILLE ROAD FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND SCALE: 1" = 100' JULY, 1997</p> <p>VANMAR ASSOCIATES, INC. Engineers Surveyors Planners 310 South Main Street P.O. box 328 Mount Airy, Maryland 21771 (301) 829 2890 (301) 831 5015 (410) 549 2751</p>
DATE	REVISIONS											
8/17/97	PER COMMENTS											
7/24/00	REVISED PERC LOCATIONS											
8/24/00	SEPTIC & WELL EASMT.											

PERCOLATION TEST RESULTS			
TEST No.	TITLE FEILD	DEEP TRENCH	SEEPAGE PIT
F	10 MIN		
J	18 MIN		
H2	17 MIN		

NOTE: A FULLY DETAILED SEPTIC SYSTEM DESIGN FOR A LOW PRESSURE DISTRIBUTION SEPTIC SYSTEM TO BE REVIEWED & APPROVED PRIOR TO BUILDING PERMIT APPLICATION.

VICINITY MAP
SCALE: 1" = 1200' T.M. 2 P. 99



HOWARD COUNTY
HEALTH OFFICER _____ DATE _____

Sourabh Munshi 7/3/97
SOURABH G. MUNSHI, PROFESSIONAL DATE
LAND SURVEYOR, MD. REG. No. 10770

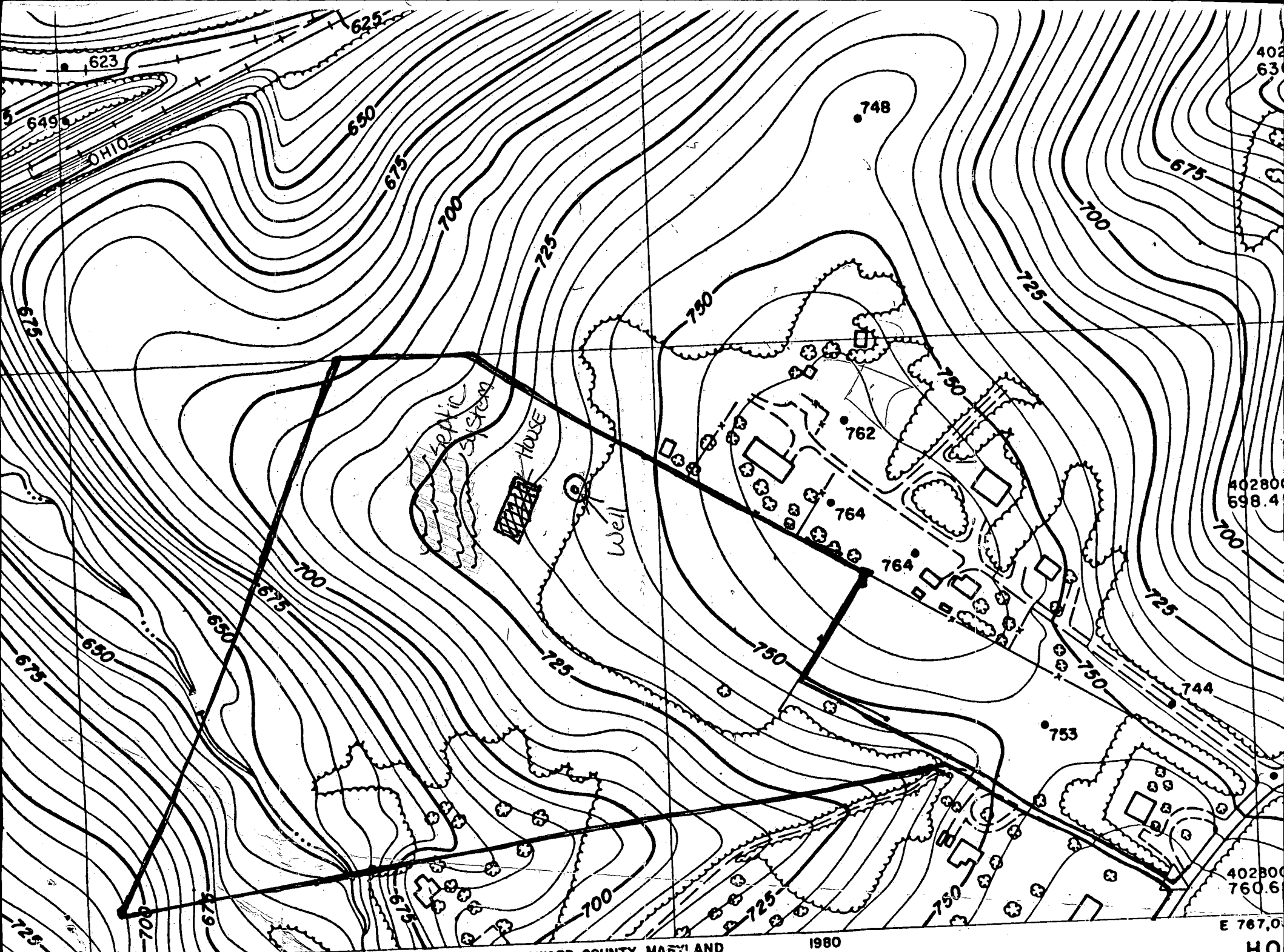
NOTE: THERE ARE NO EXISTING WELLS OR SEPTIC SYSTEMS WITHIN 100' OF ANY PROPOSED WELL OR SEPTIC UNLESS OTHERWISE SHOWN HEREON.

SIGNED
8-8-97

JULY, 8 1997



VANMAR ASSOCIATES, INC.
Engineers Surveyors Planners
310 South Main Street P.O. box 328 Mount Airy, Maryland 21771
(301) 829 2890 (301) 831 5015 (410) 549 2751

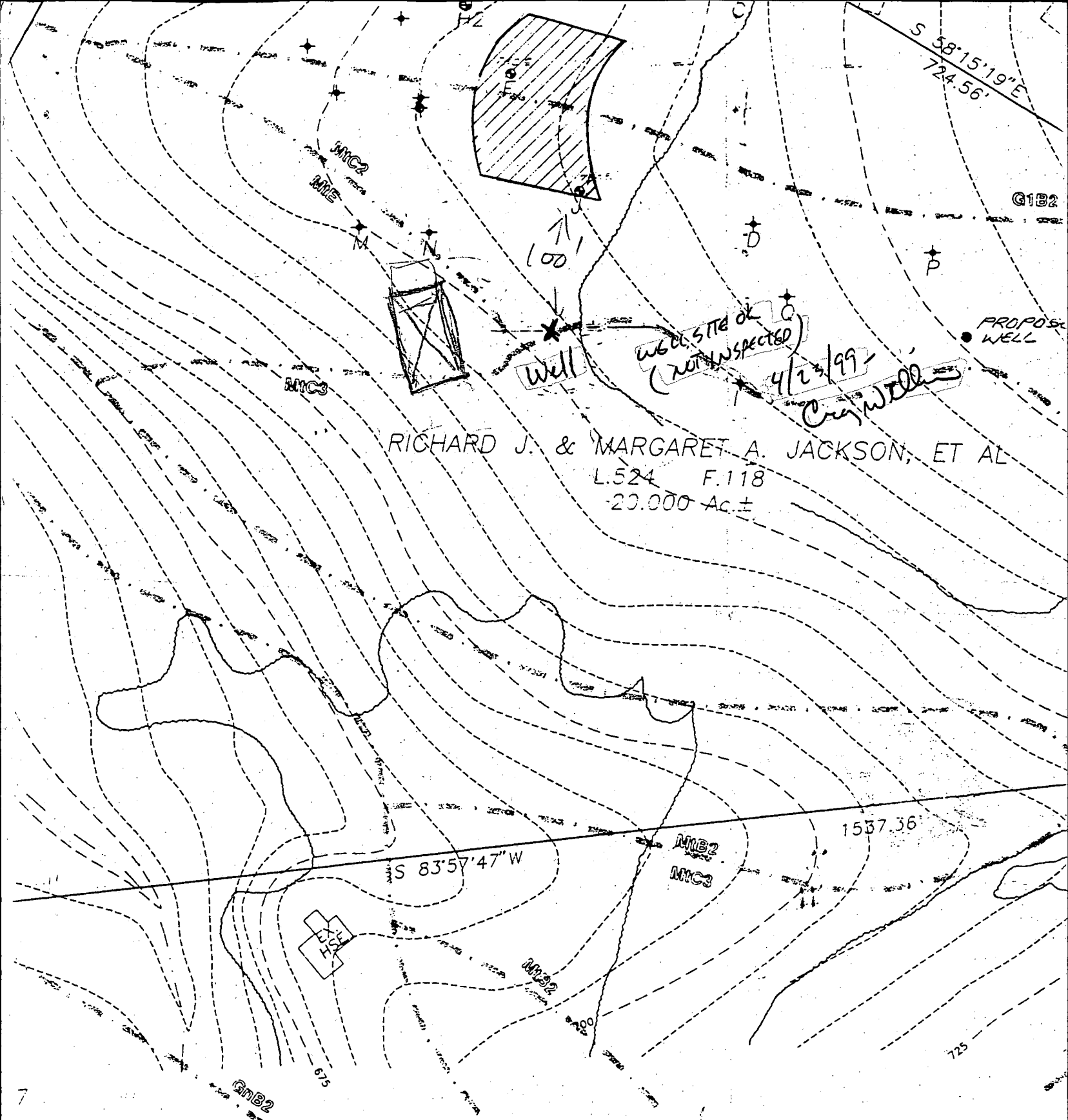


E 785,000
230 - 22

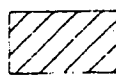
COPYRIGHT HOWARD COUNTY, MARYLAND
ALL RIGHTS RESERVED.

1980

E 767,000
HO
C



RICHARD J. & MARGARET A. JACKSON, ET AL
L.524 F.118
20.000 Ac.±



THIS AREA DESIGNATES A PRIVATE SEWERAGE
EASEMENT ~~AS REQUIRED BY~~ AS REQUIRED BY
MARYLAND STATE DEPARTMENT OF ENVIRONMENT
FOR INDIVIDUAL SEWERAGE DISPOSAL.

APPLICATION

PERCOLATION TESTING

A 50600

P _____

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 313-2640

DISTRICT _____

DATE _____

TO: THE COUNTY HEALTH OFFICER
ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLICATION FOR PERMIT TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM.

PROPERTY OWNER DIANE DORSEY

ADDRESS _____ PHONE 410-792-6000 x 4257

AGENT OR PROSPECTIVE BUYER RICHARD JOHN JACKSON

ADDRESS 634 W. WATERSVILLE ROAD PHONE _____

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION WEST WATERSVILLE ROAD

TAX MAP 2 PARCEL # 99

SIZE OF LOT _____ TYPE BLDG. _____
(SINGLE FAMILY DWELLING OR COMMERCIAL)

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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. _____
(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

DISAPPROVED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____

REASONS FOR REJECTION OR HOLDING _____

PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.D. # _____ DATE _____

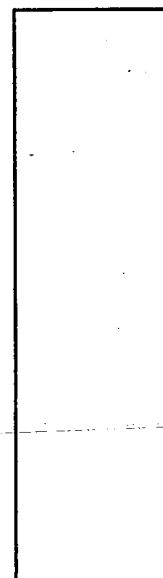
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR I.D. # _____ DATE _____

THIS IS NOT A PERMIT

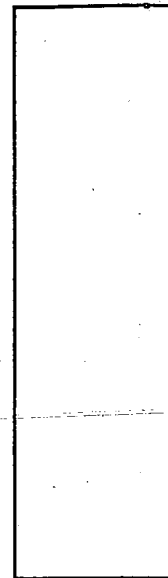
SOIL PROFILE



Q



0



GRAVEL DRIVE TO WEST WATERVILLE ROAD

↓ TO W. WATERSVILLE ROAD ↓

52

REMARKS OBSERVATION OF TESTING PERFORMED BY PRIVATE CONSULTANT FOR OWNER
TYPE OF SOIL BEEL AFTER 1 INCH \times 2, 6 INCH HOLE DIAMETER
TESTED BY TOM ^{TOM ASHTON} ALSO PRESENT G. SAUVE, C. WILLIAMS, OWNER
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 17 MIN TRENCH WIDTH _____
INLET DEPTH _____ MAXIMUM BOTTOM DEPTH _____ SQ. FT./BEDROOM _____

LOW PRESSURE DISTRIBUTION INFORMAL PLANS

T.W. SERVICES
On Site Sewage Disposal
Consultant
Tom W. Ashton
P.O. Box 220
Bluemont, VA 20135
540-554-8788

DATE: February 8, 1998
Dorsey / Jackson
County of Howard

NOTE: This Low Pressure Distribution system is to be installed according to the following specifications referencing the enclosed attachments. These plans are to be accompanied by a current valid Health Department permit prior to construction. The system is to be installed in accordance with the requirements of the State of Maryland. The exact location of all utilities must be determined prior to construction and any required setbacks adhered.

GENERAL INFORMATION

Sanitarian: Williams
Health Department: Howard
Tax Map Number: 2/99
Property Size: 20 acres.

Directions to Property: W. Watersville Rd., North
of I-70

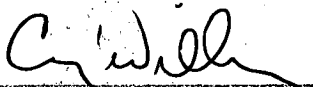

Subdivision: NA Block: NA Lot: NA

Design Prepared for: Diane Dorsey
616 W. Watersville Rd.
Mt. Airy MD 21771
Phone: 301-829-9462

Approved Septic System Plan

Howard County Health Department

B00117801 - SFD 3BR


Signature  Date

LOW PRESSURE DISTRIBUTION
Informal Plans and Specifications
DATE: February 7, 1998

CONTENTS

(A) <u>General Information</u>	Cover Sheet
(B) <u>General System Design Information Summary</u>	pg. 3
(C) <u>Specifications</u>	
ITEM 1: Building Sewer	pg. 3
ITEM 2: Pretreatment Systems	pg. 4
ITEM 3 Conveyance to Pump Chamber	pg. 5
ITEM 4: Pump Station	pg. 5
ITEM 5: Pump Controls	pg. 6
ITEM 6: Force Main	pg. 6
ITEM 7: Valve(s)	pg. 6
ITEM 8: Distribution System	pg. 7
(D) <u>Attachments</u>	
Attachment a: Septic tank / Pump Chamber	
Attachment b: Absorption system configuration, holes and manifold pipe size/lengths.	
Attachment c: Pump Curve	
Attachment d: Absorption system assembled pipe configurations, distal risers, trench cross section.	

These Low Pressure Distribution plans are a site-specific engineered design prepared to provide equal distribution of effluent throughout an approved drainfield area. No statement is made regarding the Hydraulic Conductivity of the soil. Adsorption area approved by the Howard County Health Department.

(B) SYSTEM DESIGN INFORMATION SUMMARY

- * DESIGN FLOW : 450 GPD or 4 bedrooms.
- * DESIGN RATE: <60 mpi.
- * TOTAL SQUARE FOOTAGE: 1200 ft₂.
- * SYSTEM CONFIGURATION:
 - 12 lines, 50 feet long
 - 2' wide, 6' center.
 - Center manifold.
 - Two valve groups: Two, 3" valves.
- * INSTALLATION DEPTH: @ 20 ".
- * LATERAL DIAMETER: 1.25".
- * HOLE SIZE: .25 (1/4)".
 - Refer to Attachment "B" for number and spacing of holes, length and diameter of manifolds, and relative elevations of laterals.*
- * SEWER LINE: 4", Schedule 40.
 - Minimum fall = >1.25" per 10'.
- * SEPTIC TANK SIZE: Minimum 1500 gallons (baffled).
- * GRAVITY CONVEYANCE LINE: 4" PVC, 1500 lb. crush.
 - Minimum fall = 6" per '.
- * PUMP CHAMBER: 1500 gallons (baffled, reversed).
 - Drawdown is 13 inches or 273 gallons
 - 21 Gallons per inch
 - Minimum 6" reserve required.
- * SUPPLY LINE: Diameter: 3".
 - Length: 60'.
- * PUMP REQUIREMENTS:
 - (a) at bottom line: 11 ft. @ 126.8 GPM.
 - (b) at pump intake: 32.2 ft. @ 126.8 GPM.
 - Elevation from pump to bottom of system: 15 '.
 - Distance from pump to bottom of system: 60 '.
- * REQUIRED PUMP: ZOELLER 295 , (2 HP).
- * Required.Control.Panel.:
 - American Manufacturing SA1 AJ.

(C) SPECIFICATIONS

ITEM 1: Building Sewer Materials

The building sewer is to be constructed with 4" Schedule 40 PVC pipe. The slope is to be greater than 1.25" in 10'. The minimum depth is 18". To be constructed in accordance with manufactures specifications regarding preparation (sanding and primer) and gluing (chemical fusion) requirements.

Joining of pipes of different sizes and or material shall be accomplished by the use of a manufactured adapter specifically designed for that purpose. Maintain the run as straight as possible. Ells (if absolutely necessary) are not to exceed 45 degrees.

Cleanouts

A cleanout is to be installed a minimum of 5' from the structure with additional cleanouts every 50' as necessary. The cleanouts are to be installed in the direction of the sewage flow.

Bedding and support

The entire length of the sewer line (as well as the conveyance and forced main) is to be bedded uniformly on natural, in place soil or on gravel packed over in place soil to provide uniform support along the length of the sewer.

Where the line crosses filled areas, the line is to be supported by an angle iron firmly placed on solid, natural ground for 2 feet at either end.

Where the sewer line crosses the angular open space around the septic tank hole, the space is to be bridged by use of an angle iron for support. The iron would rest on the lower portion of the inlet punch out and 2 feet onto solid ground in the trench.

Backfilling

The trench is to be backfilled with suitable material free of large stones and clumps of earth. The fill is to be firmly tamped during the backfilling process to prevent movement of the sewer.

Sewer lines passing within 50' of a nonpublic water supply source are to meet special construction requirements as required by the Health Department.

ITEM 2: Pretreatment Systems

Septic Tank (see to Attachment A)

Two 1000 gallon tanks in series is highly recommended to enhance presettling / treatment to help prevent and reduce the possibility of hole clogging. A 1500 gallon baffled tank is acceptable. Appropriate access as required is to be provided.

Inlet-outlet structure

The inlet-outlet structure if necessary or required is to be constructed of Schedule 40 PVC utilizing pipe tees. The fall between the inlet and outlet is to be greater than 1" but less than 2".

The inlet tee is to extend 8-10" above and 6-8" below the normal liquid level.

The outlet tee is to extend 8-10" above and 35-40% below the normal liquid level. See Attachment A.

All inlet and outlet pipe tees are to be assembled in accordance with manufacturers specifications and sealed at the tank with waterstop.

Placement

The tank is to be installed level onto a minimum of 6" of sand or fine gravel. The top of the tank is to be as close to the ground surface as possible to prevent infiltration. No more than 6-8" cover is advised.

Backfilling

Backfilling is to be performed in layers with sufficient tamping to avoid settling. Backfill material is to be free of large stones and debris.

ITEM 3 Conveyance to Pump Chamber.

The gravity conveyance system from the septic tank is to be constructed of 4" smooth bore PVC pipe. The minimum slope is to be greater than 6" per 100'. The material may be rated at 1500 pounds per foot except that Schedule 40 is required leaving the septic tank and before entering the pump chamber for 2' onto undisturbed soil. Schedule 40 is highly recommended for all materials.

The gravity conveyance line is to be constructed, bedded, supported (as necessary), and back filled as outlined under Item 1, Building Sewer above.

ITEM 4: Pump Station

Pump chamber (Refer to Attachment A)

A 1500 gallon pump chamber (baffled septic tank) is required. The chamber is to be reversed such that the pump is placed in the larger portion.

The pump chamber is to be placed and backfilled as outlined in Item 2 above.

The pump chamber will have an access manhole terminating above the ground surface. A minimum width dimension of 24" with a shoe box cover is required. The crock is to be adequately sealed with waterstop to eliminate any surface water infiltration.

Drawdown (Refer to Attachment A)

The volume in gallons per inch is approximately 21. The drawdown (LPD system dose) is to be 13" between the on and off float switches or 273 gallons. There is to be a minimum of a 3" separation between the off float switch and the high water alarm float switch. The floats are to be placed to maximize the volume of reserve above the high water alarm.

Pump

The site conditions and LPD design require a open face centrifugal pump rated for sewage effluent that will deliver 126.8 gallons per minute against 32.2 feet of head. This represents a vertical (elevation) separation of 15 feet from the bottom of the pump to the bottom (lowest lateral) of the LPD system. The "run" would be 60 feet of 3 inch pipe. The pump is to be set on the bottom of the tank. The recommended pump is a ZOELLER 295. See Attachment C.

Piping, Fittings (Refer to Attachment A)

The pump chamber force main is to be constructed of 3" pressure rated Schedule 40 PVC pipe. All joints and fittings are to be of the pressure type (PW) and assembled in accordance with manufacturers specifications.

From the pump a .25 inch hole is drilled 2" above the low water level (lowest float switch) followed by a quick disconnect coupling. A camlock coupling is required. A Schedule 80 union is acceptable. Assemble to provide for removal of pump without dewatering wet well.

A gate shut off valve is to be installed past the disconnect. Where the forced main leaves the chamber seal with water stop. Do not install a check valve.

ITEM 5: Pump Controls

All electrical work is to be performed by an electrician in accordance with manufacturers specifications.

Mercury float switches are to be utilized for the pump off (low water), pump on, and high water alarm controls. Place the floats so they are not affected by flow entering the pump chamber.

The wiring junction box located on the outside of the pump station is to carry a NEMA 3R rating. All wiring is to run to the house through conduit.

The indoor control panel may carry a NEMA 1 rating. The panel must be located in an area where it may be easily monitored. The panel requires a master disconnect switch (@ house breaker box), a manual over ride switch, and separate circuits for the pump control and alarm system.

The control panel must contain a audiovisual high water alarm indicators. A Control and Alarm Panel produced by American Manufacturing of Manassas is required. It is very important that the control box be matched for the make and model of pump.

ITEM 6: Force Main

A 3" force main is required. The main is to be constructed with pressure rated materials and fittings (PW) in accordance with manufacturers specifications. The main is to be constructed, bedded, supported, and back filled as stated in Item 1 above. The minimum depth is to be 24-30". Where the main leaves the pump chamber it is to be secured and bridged with an angle iron as stated in Item 1 above.

The 3" forced main will travel to the valves 3' from and along the bottom line. A trencher or a 1' bucket is to be used in this area to minimize any disturbance and encroachment of the reserve area.

Where the forced main turns at 45 degrees or greater, a thrust block is to be constructed. The joint is to be encased in concrete for one foot either side of the turn.

Forced mains passing within 50' of any drinking water source are to be pressure tested.

ITEM 7: Valve(s)

Brass globe valves are to be utilized. Two, 3" valves are required. The valves are to be placed as shown approximately 3' downslope from the lowest line.

The valves are to be followed immediately by a brass check valve installed with the hinge up. The check valves will prevent the valve group supply lines from slowly draining into the lower portions of the system when the pump turns off. The lowest valve group (3' run from valve to lateral) does not require a check valve. Those portions of pipe in which a check valve holds liquid must be protected from freezing by additional cover (>18").

The connections between the supply line forced main, valves, check valves, and the system manifolds are to be made with a minimum number of fittings.

The valve box "T's" are to be of the same diameter as the supply line, reducing at the valve side of the "T". The manifold run from the valve to the bottom of the manifold at the lower portion (last line) of the distribution system (each valve group) is to be straight.

Valves (and check valves) are to be housed in a protective structure such as a distribution box, meter box, or concrete crock. The structure will terminate near the surface for easy access. In no case is the soil cover to be greater than 3".

ITEM 8: Distribution System

NOTE: *The preservation of the original structure of the soil in the absorption area is essential to maintaining the percolative capacity of the soil. No activity other than the construction of the system is permitted within the absorption area.*

The absorption system is not to be constructed during periods of wet weather when the soil is sufficiently wet at the depth of installation to exceed its plastic limit. The plastic limit is exceeded when the soil can be rolled between the palms of the hands to produce threads 1/8 inch in diameter without breaking and crumbling.

Vegetation should be removed by hand and not by machine. All stumps are to be left intact and cut flush with the ground. Stumps are to be removed only when encountered during installation. Removal to be with a minimum of soil disturbance. Stumps should be cut out such that as much as the root system as possible is left intact.

The distribution system is to be constructed of pressure rated Schedule 40 PVC pipe and fittings (PW).

Manifold

The manifold lines are watertight lines that convey effluent from the valve to the pressure percolation lines (laterals). They are analogous to the "header" lines in a conventional drainfield. From the valve, the manifold diameter telescopes smaller uphill away from the valve. Where required an appropriate reducer is to be utilized.

The system is to be installed as to disturb as little of the area as possible. Do not bed manifolds on gravel. Use clean, tamped soil.

The manifold lengths and diameters are as specified in Attachment B.

The manifold is identified in the field by metal stakes set at the top and bottom line.

Manifold/Lateral connection

The manifold is to be installed above the laterals and connect by way of a riser with the use of two tees (or 90's). This configuration will allow the manifold to drain down into the laterals when the pump turns off. In shallow installations, the manifold may be located at the ground surface and will require additional cover (>18").

Donot install with the manifold under the laterals or intersecting with one tee.

Where the laterals leave the graveled adsorption trench, towards the manifold, they should be placed firm on undisturbed earth. See attachment D.

Pressure percolation lines

The absorption system consists of 12 lines, 2' wide, 50' long, with center ' centers at/and flowing from a center manifold. The installation depth is 20". The trench bottoms are to be installed flat and on contour.

All laterals are to be 1.25" in diameter. The laterals are to be installed flat in the horizontal center of the trench and maintain a straight alignment on contour. Grade boards and/or stakes are to be placed on <10' centers to maintain the gravel level for the placement of the laterals.

All laterals are to be fitted with a vertical riser and threaded cap extending to the ground surface. The 90 degree turn is to be accomplished by the use of two 45 degree fittings enabling ease of use as a cleanout. House in a minimum 6" meter housing with snap lid at surface. The lateral turnup is to be bedded within the housing with gravel, extending 2 inches above the gravel surface. See Attachment E.

The hole size is .25". The lateral is to be placed in a straight line along the longitudinal axis of the pipe with the holes facing vertically down. Note that the first hole is to be pointed vertically up, and housed in a small section of standard 4" drainfield pipe to act as a splash plate. This hole will act as a vent allowing the laterals to drain freely when the pump turns off. The number and spacing of the holes, and distance to the first hole for each lateral are specified in Attachment B. Holes to be drilled burr free.

From the manifold, there is 1' allowed for the manifold or "header" ditch, from there the lateral is to be bedded for 1' on natural, in place soil. See Attachment D. This area is to be backfilled and tamped with the clayiest material available on site to prevent infiltration into the manifold ditch area. From that point the graveled absorption trench (50') will begin. The total length of the 1.25" pipe will be 52. The distance from the first hole to the manifold

side soil plug and from the last hole to the end of the lateral will vary and should be approximately equal. See Attachment "B & D".

Gravel

The gravel is to be clean, and between .5 to .75" in size. The minimum amount of gravel under a lateral is 8.5". The lateral has a minimum of 2" gravel cover. Untreated building paper or other suitable material is to be placed over the gravel to prevent the migration of fines into the absorption trench during backfilling. See Attachment D.

Relative lateral elevations

Each lateral is to be placed at a specific elevation as specified in Attachment B. The top lateral in each valve group is to be installed with the minimum 8.5" gravel underneath. The top lateral elevation represents a bench mark of zero. The following laterals will be installed at the specified lower elevation relative to the top lateral of the valve group. Additional gravel may be necessary to maintain the relative elevations.

The manifold is identified in the field by metal stakes set at the top and bottom line.

Lateral ends

All lateral ends are to be fitted with a threaded end cap and brought to the surface as described above.

Inspection risers

A vertical riser is to be provided at the end of the top and bottom lateral of each valve group. See Attachment E. With the system pressurized, the valves will be adjusted until the water level is at the specified head elevation (pressure).

Once adjusted and prior to back filling, the risers are to be removed and the lateral fitted with a threaded cap to the ground surface, housed as described above.

Cover and backfilling

The entire distribution system is to be backfilled and graded to provide a minimum of 6" cover over the laterals and >18" cover over the manifold. To build up cover over the area, additional material maybe required. The manifold area is to be firmly tamped during backfilling. All backfill material is to be free of large stones and debris.

Final grade to be slightly mounded (turtle back) to divert surface runoff off and away from the site. Establish a lawn cover as soon as possible.

ATTACHMENT "B"

CONFIGURATION OF ABSORPTION AREA							
Line Number	Line Length	Head Pressure	Hole Size	Hole Space	Number of Holes	Manifold Diameter	Relative Elev. in.
No. 1/7	50	3	0.25	48/72	8	1.5	0
No. 2/8	50	3.41	0.25	48/72	8	2	3
No. 3/9	50	3.84	0.25	48/84	7	3	6
No. 4/10	50	3	0.25	48/72	8	1.5	0
No. 5/11	50	3.41	0.25	48/72	8	2	3
No. 6/12	50	3.84	0.25	48/84	7	3	6

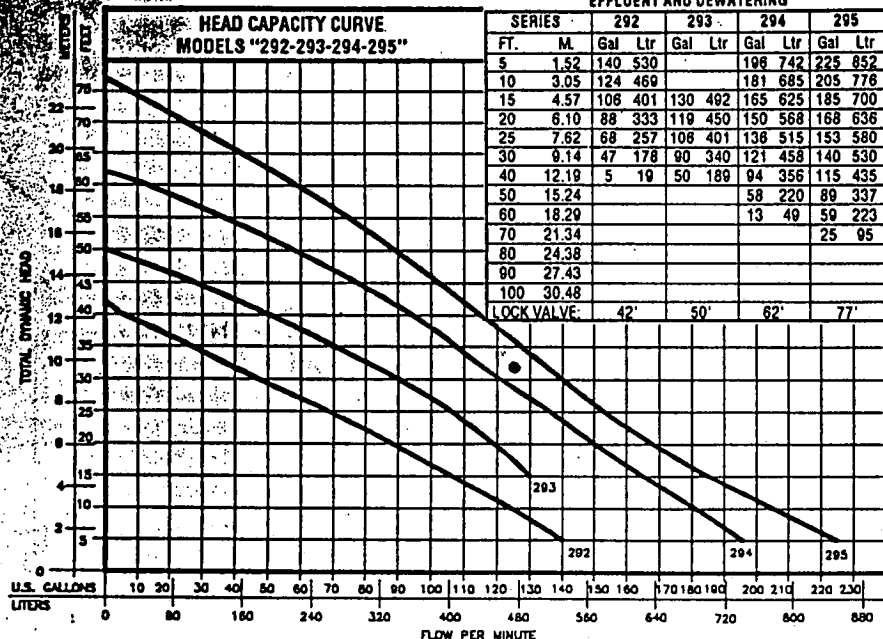
Line #1	Line #7 Manifold diameter is 1.5" Manifold length is 6'
Line #2	Line #8 Manifold diameter is 2" Manifold length is 6'
Line #3	Line #9 Manifold diameter is 3" Manifold length is 21' to valve
Line #4	Line #10 Manifold diameter is 1.5" Manifold length is 6'
Line #5	Line #11 Manifold diameter is 2" Manifold length is 6'
Line #6	Line #12 Manifold diameter is 3" Manifold length is 3' to valve
Valves in grade access protective structure	Supply line (3") to pump

NOTE: Under "Hole Space" the first number is the distance to the first hole, the second number is the hole spacing.
The elevation from the pump to the bottom line is 15'.
The distance from the pump to the bottom line is 60'.

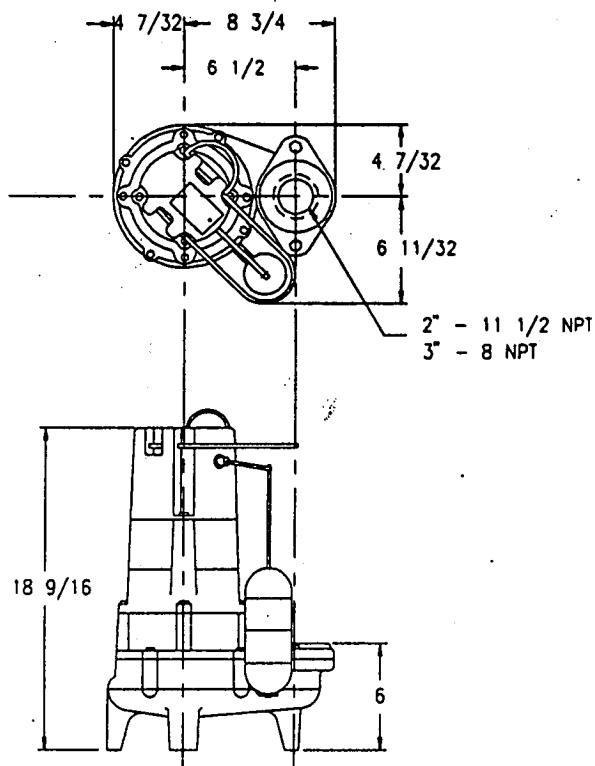
PUMP DRAWDOWN (Simplex)

A pump drawdown of 13 in. in a 1000 gallon chamber or 273 gallons is required for this design. Minimum reserve over alarm to inlet to be 6 inches. A
1000 gallon tank holds 21 Gallons per inch.
Elevation from pump to bottom of LPD system= 15 feet.
Distance from pump to bottom of LPD system= 60 feet.

**TOTAL DYNAMIC HEAD/FLOW PER MINUTE
EFFLUENT AND DEWATERING**



WARNING: Model 293 should not be subjected to less than 15 feet TDH.



Standard all models - Weight 83 lbs. - 20 ft. cord - 1/4 H.P.

292 MODELS				Control Selection		Listings	
Model	Volts-Ph	Mode	Amps	Simplex	Duplex	CSA	UL
M292	115	1	Auto	15.0	1 or 1 & 9	Y	Y
N292	115	1	Non	15.0	8 or 2 & 8	Y	Y

Standard all models - Weight 78 lbs. - 20 ft. cord - 1 H.P.

293 MODELS				Control Selection		Listings	
Model	Volts-Ph	Mode	Amps	Simplex	Duplex	CSA	UL
D293	230	1	Auto	9.8	1 or 1 & 9	Y	Y
E293	230	1	Non	9.8	2 or 2 & 7 or 2 & 9	Y	Y
*H293	200-208	1	Auto	10.7	1 or 1 & 9	Y	N
*I293	200-208	1	Non	10.7	2 & 8 or 2 & 7	Y	N
*F293	230	3	Non	6.6	2 & 4	Y	Y
*J293	200-208	3	Non	7.0	2 & 4	Y	Y
*G293	480	3	Non	3.3	2 & 4	Y	Y
*BA293	575	3	Non	3.3	2 & 4	Y	N

Standard all models - Weight 83 lbs. - 20 ft. cord - 1 1/4 H.P.

294 MODELS				Control Selection		Listings	
Model	Volts-Ph	Mode	Amps	Simplex	Duplex	CSA	UL
D294	230	1	Auto	13.7	1 or 1 & 9	N	Y
E294	230	1	Non	13.7	2 or 2 & 8	Y	Y
*H294	200-208	1	Auto	14.8	1 or 1 & 9	N	N
*I294	200-208	1	Non	14.8	2 & 7	N	N
*F294	230	3	Non	7.4	2 & 4	Y	Y
*J294	200-208	3	Non	10.8	2 & 4	Y	Y
*G294	460	3	Non	3.7	2 & 4	Y	Y
*BA294	575	3	Non	5.0	2 & 4	Y	N

Standard all models - Weight 83 lbs. - 20 ft. cord - 2 H.P.

295 MODELS				Control Selection		Listings	
Model	Volts-Ph	Mode	Amps	Simplex	Duplex	CSA	UL
**D295	230	1	Auto	16.8	1 or 1 & 9	N	Y
**E295	230	1	Non	16.8	2 & 7	Y	Y
*XE295	230	1	Auto	16.6	2 & 8 or 9	Y	Y
*H295	200-208	1	Auto	20.5	1 or 1 & 9	N	N
*I295	200-208	1	Non	20.5	2 & 7	N	N
*F295	230	3	Non	12.2	2 & 4	Y	Y
*J295	200-208	3	Non	13.6	2 & 4	Y	Y
*G295	460	3	Non	6.1	2 & 4	Y	Y
*BA295	575	3	Non	5.0	2 & 4	Y	N

SELECTION GUIDE

1. Integral float operated mechanical switch, no external control required.
2. Single piggyback wide angle mercury float switch or double piggyback mercury float switch. Refer to FM0477.
3. Mechanical alternator "M-Pak" 10-0072 or 10-0075.
4. Combination starter. Refer to FM0514.
5. See FM0712, for correct model of Electrical Alternator, "E-Pak".
6. Mercury sensor float switch 10-0225 used as a control activator, with "E-Pak" duplex (3) or (4) float system.
7. SIMPLEX CONTROL BOX 10-0050, 115/230V, 1 Ph. max. 2 HP uses: One (1) single piggyback wide angle mercury float switch OR two (2) 10-0225 mercury sensor floats for level control.
8. 4 hole "J-Pak", junction box, for watertight connection or wired-in simplex or duplex operation.
9. 2 hole "J-Pak", junction box, for watertight connection or splice.

* No Molded Plug

** Use 20 amp outlet. Zoeller P/N 10-0060.

CAUTION

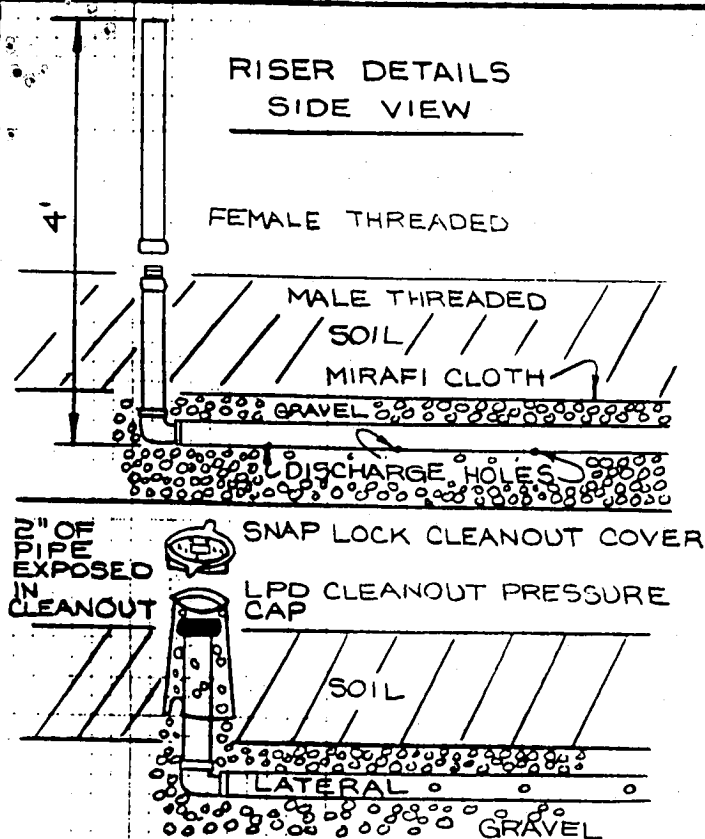
All installation of controls, protection devices and wiring should be done by a qualified licensed electrician. All electrical and safety codes should be followed including the most recent National Electric Code (NEC) and the Occupational Safety and Health Act (OSHA).

For information on additional Zoeller products refer to catalog on Combination Starter, FM0514; Piggyback Mercury Switches, FM0477; Electrical Alternator, FM0486; Mechanical Alternator, FM0495; Alarm Package, FM0513; Sump/Sewage Basins, FM0487; and Simplex Control Box, FM0732.

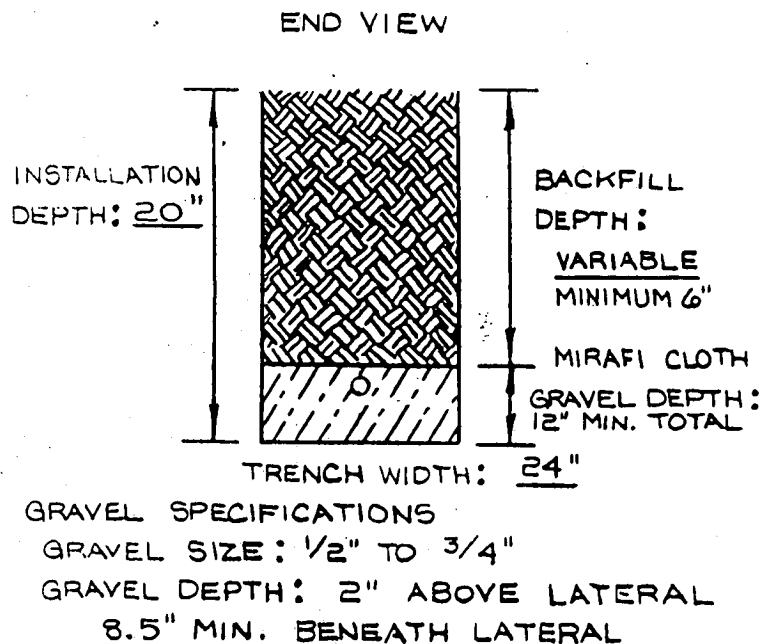
RESERVE POWERED DESIGN

For unusual conditions a reserve safety factor is engineered into the design of every Zoeller pump.

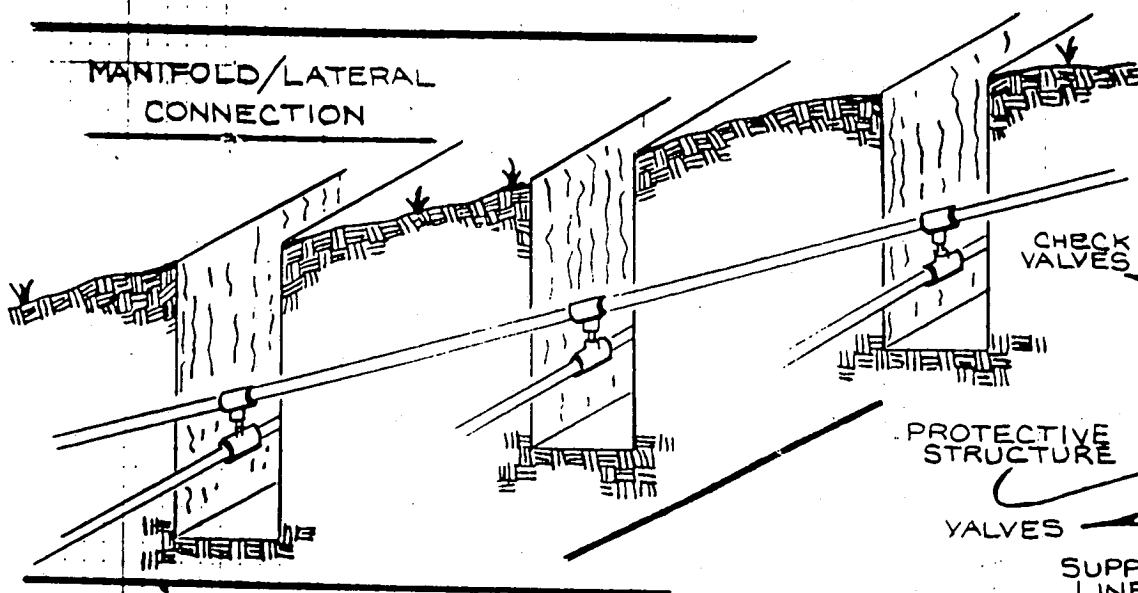
RISER DETAILS SIDE VIEW



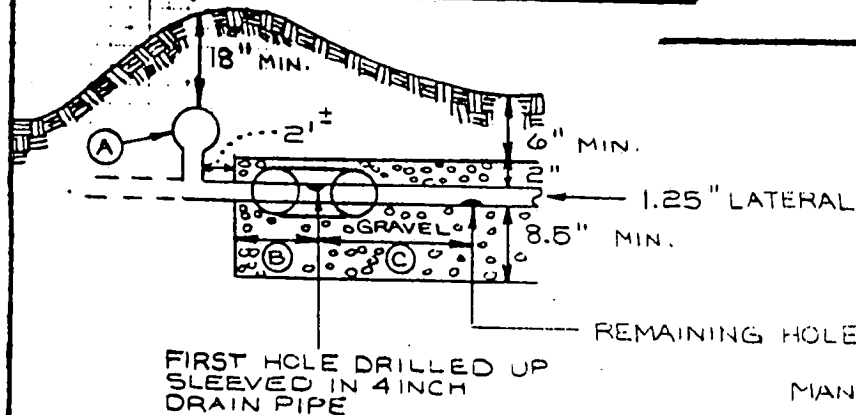
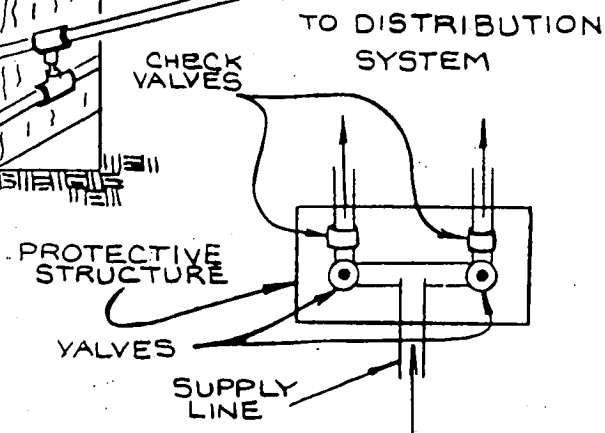
LOW PRESSURE DISTRIBUTION TRENCH CROSS SECTION



MANIFOLD/LATERAL CONNECTION



VALVE BOX END VIEW



- (A) MANIFOLD DIAMETERS SPECIFIED
- (B) DISTANCE TO FIRST HOLE AS SPECIFIED.
- (C) HOLE SPACING AS SPECIFIED.

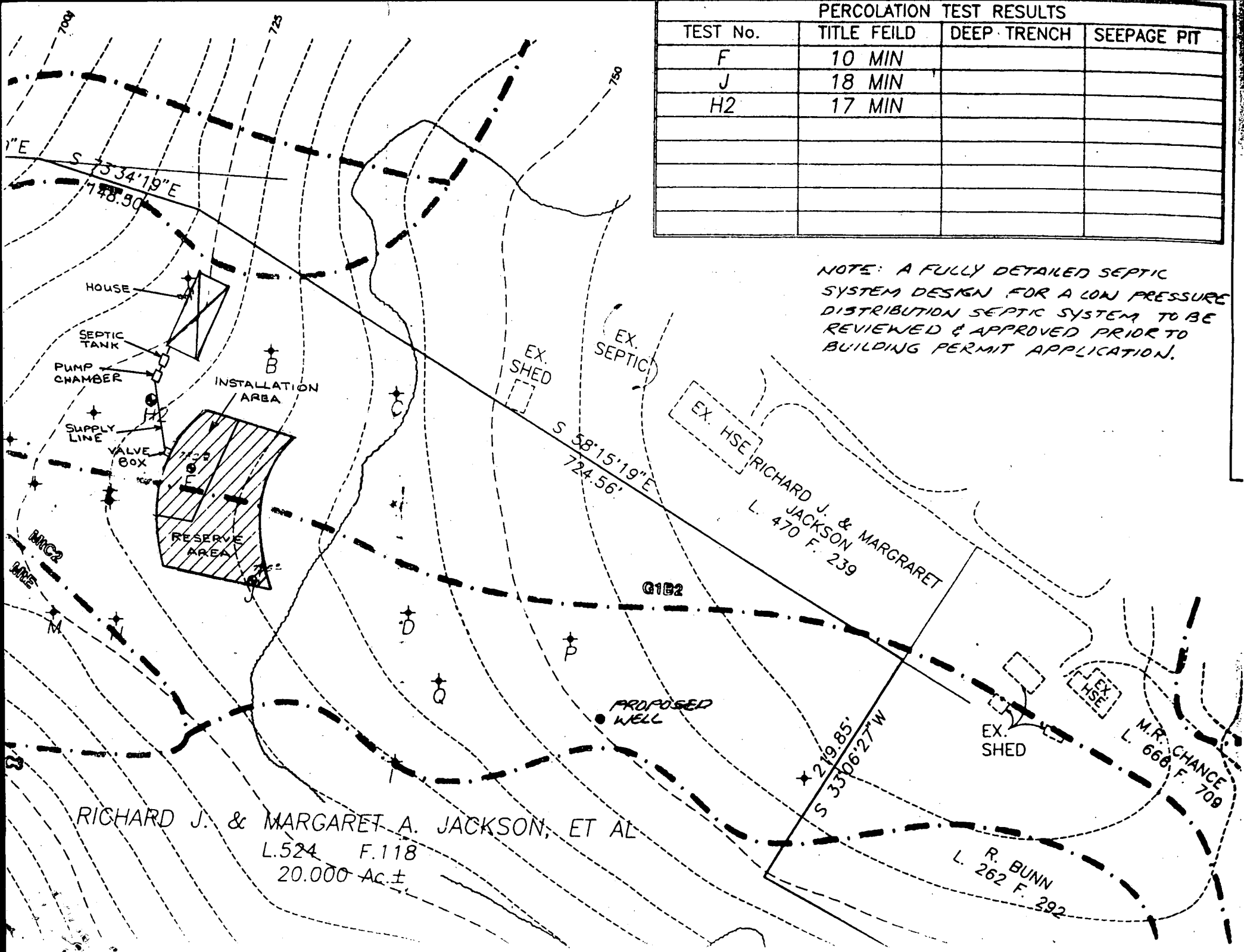
MANIFOLD/TRENCH CROSS SECTION

ATTACHMENT "D"

PERCOLATION TEST RESULTS

TEST No.	TITLE FEILD	DEEP TRENCH	SEEPAGE PIT
F	10 MIN		
J	18 MIN		
H2	17 MIN		

NOTE: A FULLY DETAILED SEPTIC SYSTEM DESIGN FOR A LOW PRESSURE DISTRIBUTION SEPTIC SYSTEM TO BE REVIEWED & APPROVED PRIOR TO BUILDING PERMIT APPLICATION.





HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

May 17, 2000

MEMORANDUM

TO: Mr. Richard Jackson
1207 Rambler Place
Hyattsville, MD 20783

BP# B00117801
656 W. Watersville Road
TM 2, Parcel 99, Grid 13

FROM: Craig Williams, R.S.
Water and Sewerage Program

This is to advise that the Health Department has recently recommended approval of the above referenced building permit application. Please be aware of the following conditions related to future permit processes:

SEPTIC SYSTEM ISSUES

1. A copy of the certified location drawing (i.e., wall check) for each structure shall be submitted to this office to allow sufficient review time prior to septic permit issuance.
2. Corners of the approved septic area should be staked by a licensed surveyor/engineer prior to system installation.
3. No grading shall be performed over any portion of the approved septic easement, unless specifically approved by the Health Department.

WELL WATER ISSUES

1. Final driveway location should be at least 15 feet from the existing well.
2. Notification of the well pump installation and well line connection must be forwarded to this office by the installer (licensed plumber/well driller/pump installer) prior to any approval request regarding the well water supply.
3. Prior to application for a Use and Occupancy Permit, the well water supply should be sampled by a private, state-certified laboratory and tested for at least the following parameters:

- pH, chlorine, nitrates, coliform/fecal coliform bacteria, sand and turbidity

4. A licensed installer should submit "Notification of Water Treatment Device Installation" (if applicable).

5. OTHER:

cc: File



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

June 10, 1997

Mr. Richard John Jackson
634 W. Watersville Road
Mt. Airy, Maryland 21771

RE: Percolation Test Results Application No. A50600
Use: Subdivision - Tax Map: 2 Parcel: 69

Dear Mr. Jackson:

Observation of percolation testing performed by a private consultant on April 16, 1997 indicated limited satisfactory soil conditions.

Shallow depth to bedrock precluded approval of design for a conventional trench disposal system, but percolation rates nearer the surface appeared potentially suitable for an alternative system design.

As discussed with you by telephone on May 16, 1997, your recently submitted architect's "Plat of Survey" did not appear sufficiently accurate for the intended purpose. A meeting in the field was recommended as the route to fastest resolution.

On May 27, 1997, I met on site with T. Michael VanSant, President, Vanmar Associates, Inc., a walkover site inspection was performed to identify passed and failed test locations.

Future review is contingent upon submission by a registered engineer of a percolation certification plat showing intended system design with actual locations and elevations of all excavated test holes and a suitable house and well site. The plat should also include the location of all existing wells and septic systems on the property as well as the location of any other relevant features such as streams, swales, or existing structures. A note must be included certifying that all wells and septic systems within 100 feet of property boundaries have been shown.

If you have any questions relative to this matter, please contact me at the below address or by calling 410-313-2640.

Very truly yours,

Glen Savage, R. S.
Water and Sewerage Program

ENC: VANMAR

GS:jr

cc: Vanmar Associates, Inc.
File



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

September 26, 1995

Ms. Diane Dorsey
616 W. Watersville Road
Mt. Airy, Maryland 21771

RE: Percolation Test Results Receipt No. A50600
Hardy Farms - Tax Map: 2, Parcel: 99

Dear Ms. Dorsey:

We had previously advised that percolation testing on the above referenced property was unsuccessful in establishing conditions suitable for approval of a septic system of standard trench design due to shallow depth to bedrock. Follow-up testing on July 21, 1995 was unsuccessful in establishing conditions suitable for a sand mound septic system due to slow infiltrometer test rates. A copy of the most recent test results is enclosed.

The lot can be considered to have failed at this point, subject to the standard appeal process if you believe this determination to be in error.

Because of the size of the property, we cannot rule out the possibility that there may be suitable soil conditions at other locations on the property which were not part of this evaluation. Another possibility is for an engineered proposal for a system utilizing trickle irrigation, or low pressure dosing, or other method of distribution matched to the limited hydraulic conductivity of the soils on this site. A final option would be for establishment of an off-site septic easement.

If you have any questions relative to this matter, please contact me at the below address or by calling 313-2640.

Very truly yours,

Craig Williams, Program Director
Water and Sewerage Program

CW:vr

cc: Rick Williams - Fogle's Septic Clean, Inc.
File

ENCLOSURE:

DIFF.
SEE
LOCATION
MUNSHI
APPROVED
PLAT
SIGNED

8/8/97 CW



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

March 24, 1995

Ms. Diane Dorsey
616 W. Watersville Road
Mt. Airy, Maryland 21771

RE: PERCOLATION TESTING
Receipt No. A50600
Hardy Farms
Tax Map 2. Parcel #99

Dear Ms. Dorsey:

A percolation test date has been reserved for April 28, 1995 at 10:00 a.m.

You will be responsible for having a contractor on-site to excavate test holes at the corners of proposed percolation area.

The mapped soil type is predominately Mount Airy, with moderate to steep slopes. Soils of this classification are generally somewhat difficult in regards to successful percolation testing. Although you expressed interest in attempting a four lot subdivision, it was agreed that only one test fee and application would be submitted. If testing for the first lot produces satisfactory results, testing for additional lots will continue at your option. Separate tests fees for any additional lots would be due at that time.

Please call this office between 8:30 a.m. and 4:30 p.m., Monday through Friday, to confirm your acceptance of this percolation test date.

Thank you for your cooperation in this matter.

Very truly yours,

Craig Williams, Program Director
Water and Sewerage Program

CW: vr

cc: Richard John Jackson

File

Bureau of Environmental Health

3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544

Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2642

Director (410) 313-2645 TDD (410) 313-2323



HOWARD COUNTY HEALTH DEPARTMENT

Joyce M. Boyd, M.D., County Health Officer

May 22, 1995

Mr. Richard John Jackson
634 W. Watersville Road
Mt. Airy, Maryland 21771

RE: Percolation Test Results Application
Number: A-50600
Proposed Use: Subdivision
Property ID: Tax Map: 2 Parcel: 99

Dear Mr. Jackson:

Percolation testing conducted April 28, 1995 on the above referenced property indicated unsatisfactory soil conditions. The shallow depth to rock and/or slow percolation times were the basis of the evaluation. Copies of the percolation test results are enclosed.

Contrary to this recommendation, if you believe that soil conditions are suitable for approval, you are eligible to present a proposal for further review. Such review is contingent upon submission by a registered engineer of a percolation certification plat showing actual locations and elevations of all excavated test holes and a suitable house and well site. The plat should also include the location of all existing wells and septic systems on the property as well as the location of any other relevant features such as streams, swales, or existing structures. A note must be included certifying that all wells and septic systems within 100' of property boundaries have been shown.

Further review of test notes did indicate a limited area that may pass testing for a sand mound system for a single lot of record. Please contact this office should you desire further testing.

If you have any questions regarding this matter, please free to contact me at the above address or by calling 313-2640.

Very truly yours,

Glen A. Savage

Glen Savage, Sanitarian
Water and Sewerage Program

GS:jr
Enclosures
cc: Diane Dorsey
File

Bureau of Environmental Health
3525-H Ellicott Mills Drive Ellicott City, Maryland 21043-4544
Water and Sewerage, Permits (410) 313-2640 Community Environmental Health (410) 313-2644
Food Protection Program (410) 313-2642 TDD (410) 313-2323

94 LEFT W OLD FREDERICK
R 22 W, WATERSVILLE
1 1/2 MILE TO
DRIVEWAY ON LEFT
(7-8 MAILBOXES
ON RIGHT)
COME TO 3RD
HOUSE ON RIGHT
(BLUE)

4/16/97
1 p.m.