

PERMIT

SEWAGE DISPOSAL SYSTEM

Δ	47226	

₽ 50612

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DATE 4-5-95

DISTRICT 3rd

INSPECTOR

HOWARD COUNTY HEALTH DEPARTMENT INDEXED **BUREAU OF ENVIRONMENTAL HEALTH**

XXXXXXXXX

313-2640

03-318958

DATE SYSTEM APPROVED Anna

WTC IS PERMITTED TO INSTALL X ALTER 1820 Gillis Falls Road, Woodbine, Maryland 21797 PHONE 410-489-4457 ADDRESS_ SUBDIVISION West Friendship Estates LOT 35 ROAD 3131 River Valley Chase Dorsey Builders, inc. PROPERTY OWNER _ ADDRESS_ SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4 240 SQUARE FEET PER BEDROOM LINEAR FEET OF TRENCH REQUIRED 320 TRENCHES - Trench to be 3 feet wide. Inlet 5 feet below original grade. Bottom maximum depth 7 feet below original grade. Effective area begins at 5 feet below original grade. 2 feet of stone below distribution pipe. LOCATION - Place distribution box 120 feet off the front lot line (287.70') and 100 feet off the left lot line (252.92') when facing the lot from River Valley Chase. Run trenches on contour in both directions. No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and NOTES cap to grade or above on septic tank. OK 1/17/95 DKS __DATE 01/12/95 Amy McMillen PLANS APROVED BY ___ 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 DO PERMIT SIGNED

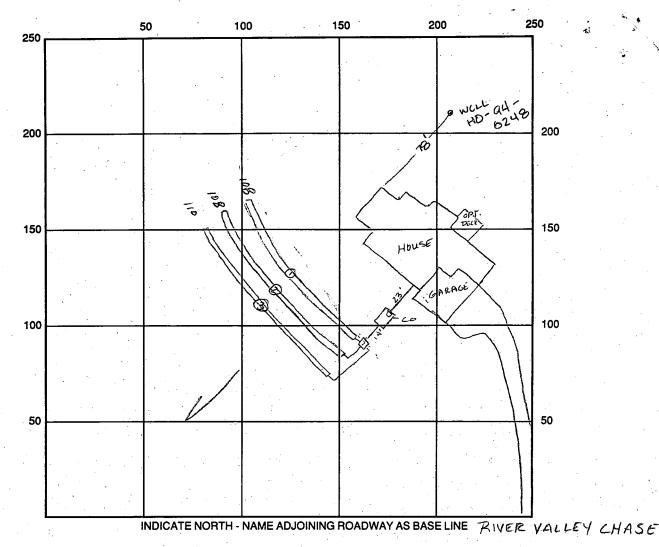
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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



SEPTIC TANK LEVEL 1250 gal	CLEANOUTS COOK
DISTRIBUTION BOX LEVEL OIL Baffle is	<u>n</u>
DRAIN FIELD/TITLE DEPTH 7 FT. T EFFECTIVE GRAVEL DEPTH 2-2 FT. T	RENCH WIDTH 3 FT. INLET DEPTH 4.5 FT. OTAL LENGTH 3^{108} FT. 4 to to $3^{\frac{1}{2}}$ SO FT. ONE SIDEWALL BOTTOM AREA 978 SO FT. 978
NUMBER OF TRENCHES 3	ONE SIDEWALL/BOTTOM AREA 978 SQ. FT. 978
DRYWALL INSIDE DIAMETERFT.	EFFECTIVE DEPTH BELOW INLETFT.
ABSORBENT AREASQ. FT.	
REMARKS: 4-5-95 GK to Cover all	work final Au
e region	
CHARLES LEW	
WPT Completed 3-30-95 Au	n
DATE SYSTEM ADDROVED 4/-5-95	INSPECTOR Dense M. M. M. I Co.

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
P.O. BOX 476 ELLICOTT CITY, MARYLAND 21043

A 47226

DISTRICT _

TELEPHONE. 461-9933 DATE _ 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. ORSEV BuildERS Inc ADDRESS PHONE PROSPECTIVE BUYER . ADDRESS . _ PHONE PROPERTY LOCATION: ---- PARCEL #--SIZE OF LOT ... (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) _ FOR REJECTED BY ___ HOLD PENDING FURTHER TESTS . REASONS FOR REJECTION OR HOLDING

HD-216

THIS IS NOT A PERMIT

Lot 124 019 one side 100 frags brosalm 20 to stake ROAD INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE. 15-20% 1 Frags TEST - 1" DROP TEST NO. DEPTH 3/91 Sa Im 23/6:30 216:30 15% Suprolite 2:33 trags 10 21 EST org red bl lin 6 bryred 9a si 10.0m REMARKS TYPE OF SOIL Leache ALSO PRESENT Frags

12

	FO40 DEGUENOS NO	07475.05	MADVI AND	STATE PERMIT NUMBER		
В	5319 SEQUENCE NO. (DP USE ONLY)	STATE OF I				
7	(THIS NUMBER IS TO BE PUNCHED	APPLICATION FOR PERMIT TO DRILL WELL please print or type		70 fill in this form completely 79		
_	IN COL'S. 3-6 ON ALL CARDS) Date Received (APA)	L	B 3	LOCATION OF WELL		
	OWNER INFORM	ATION		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	8 13	90 Tap	HOWARD 8 COUNTY	21		
) 	15 Last Name Owner	First Name 34	West FRI	RUOSH 10 Est.		
		erickel	23 SUBDIVISION	ιοτ 9 15		
	Street or RFD	m 10 21 7 8 4	SECTION 44 46	48 50		
_	57 Town 70	State 72 Zip 76	WEST FR 52 NEAREST TOWN	I = V O S A I P III III III III III III		
	DRILLER INFORMATION	MSD/MGD/MWD	MILES FROM TOWN (ente	r () if in town)		
	Driller's Name	77 License No. 80	B 4	73 76 77 78		
	Joseph L. MAYNE WEL	L DRILLING	1 2	River Valley Chest		
	5512 RiDGERD. M-	1. Airy 21771	DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	11 NEAR WHAT ROAD 30		
	Address P P	inhelau		ON WHICH SIDE OF ROAD		
	Signature - What you	Date Date		(CIRCLE APPROPRIATE BOX) WEST CLEAST		
В	WELL INFORMATION	<i>1</i>	W TOWN E	34 2 5 0 37 SOUTH DISTANCE FROM ROAD		
	ÅPPROX. PUMPING RATE (GAL. PER MIN.)			ENTER FT OR MI		
	AVERAGE DAILY QUANTITY NEEDED 8	12	SW S S-9	38 39		
	(GAL PER DAY)	20	8-9 5 8-9	TAX MAP: BLK: PARCEL		
	USE FOR WATER (CIRCLE APPRO	OPRIATE BOX)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL		
	D HOME (SINGLE OR DOUBLE HOUSEHO		11000	A# # 1 7 7 P		
	FARMING (LIVESTOCK WATERING & ACTION)		COUNTY NAME	COUNTY NO.		
	INDUSTRIAL, COMMERCIAL, STATE AND OTHER (REQUIRES APPROPRIATION P	D FEDEŘAL GOV. FRMIT)	STATE SIGNATURE	INSERT S		
ļ	PUBLIC OR PRIVATE WATER COMPANY	(REQUIRES	DATE ISSUED			
	P APPROPRIATION PERMIT AND STATE H APPROVAL)	IEALTH DEPARTMENT	43 48 C	O SIGNATURE EXP. DATE		
	TEST, OBSERVATION, MONITORING (MA	AY REQUIRE	NORTH S A O O	O EAST 0 8 0 0 0 0 55 83		
-			SHOW MAJOR FEATUR	ES OF 12-7-94		
	APPROXIMATE DEPTH OF WELL	FEET .	BOX & LOCATE WELL - WITH AN X	Grout 10:30		
H	5.25	ALCADOOT.	SOURCES OF DRILLING	WATER Not complete		
	APPROXIMATE DIAMETER OF WELL	NEAREST INCH		841 casing		
T	METHOD OF DRILLING (c	ircle one)	2. 3.	4/2' OPEN		
	BORED (or Augered) JETTED	Jetted & DRIVEN	WRITE THE BOX NUMB			
	AIR-ROTary AIR-PERCUSSION	ROTARY (Hydraulic Rotary)	FROM THE MAP HERE			
	CABLÉ C REVerse-ROTary	<u>DR</u> ive- <u>POINT</u>	E FOG	& Some me miles		
-	REPLACEMENT OR DEEPEN	ED WELLS	N 529	2 000		
	(CIRCLE APPROPRIATE BO		DRAW A SKETCH BELO	W SHOWING LOCATION OF WELL IN		
	THIS WELL WILL NOT REPLACE AN EXIS	STING WELL	RELATION TO NEARBY	TOWNS AND ROADS AND GIVE		
	THIS WELL WILL REPLACE A WELL THAT ABANDONED AND SEALED		N	TO NEAREST ROAD JUNCTION		
	39 S THIS WELL WILL REPLACE A WELL THA A STANDBY-CONTACT LOCAL APPROVI	T WILL BE USED AS NG AUTHORITY FOR	"			
	POLICY ON STANDBY WELLS		T	lead lead		
	THIS WELL WILL DEEPEN AN EXISTING					
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED (IF AVAILABLE) 41 52		Fox	elley Vill 13 &			
Not to be filled in by driller (OEP LISE ONLY)				l'à la		
Not to be filled in by driller (OEP USE ONLY)		, & ,,	3			
	APPROP. PERMIT NUMBER G	63 63		2		
	FORCE WRITE PERMIT No. # 0 -	94-0248		Md.		
L	67 68 IN BOX 70 71 72	73 74 75 76 77 78 79	L	0		
	SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE SEPARATE SHEET IF NEEDED =					

c 1 5928	SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE F IN COLS: 3-6 ON ALL CAR		FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	NUMBER 7 4/226
STI/CO USE ONLY DATE Received	DATE WELL COMPLETE	Depth of Well 22 3 6 5 26 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL"
6	ORSEY BLD last name RIVE	20 A Company of the Additional members	W. FRIENDSHIP
STREET OR RFD	FRIENDSHI	10111	LOT 35
WELL I	LOG	GROUTING RECORD yes no	C 3
Not required for STATE THE KIND OF	FORMATIONS	WELL HAS BEEN GROUTED (Circle Appropriate Box)	1 2 PUMPING TEST
PENETRATED, THEIR THICKNESS AND IF	WATER BEARING	TYPE OF GROUTING MATERIAL CEMENT C M BC	HOURS PUMPED (nearest hour)
DESCRIPTION (Use additional sheets if needed)	FEET Check if water bearing	NO. OF BAGS 15 NO. OF POUNDS 14/10	PUMPING RATE (gal. per min.
SANO		GALLONS OF WATER	to nearest gal.) METHOD USED TO Run Koff
3/1/50	0 80	DEPTH OF GROUT SEAL (to nearest foot) from O ft. to ft.	MEASURE PUMPING RATE LEVENTED WATER LEVEL (distance from land surface)
		48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING 381
GRAY MICA ROCK	80 3/1	casing <u>CASING RECORD</u>	17 20 [3]3[3]
GRAY MICA ROCK	100 303	types insert ST CO	WHEN PUMPING 22 25
ď		(appropriate code PL OT	TYPE OF PUMP USED (for test) A air P piston T turbine
		below PLASTIC OTHER	27 27 27
		MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary O other (describe
		TYPE (nearest inch) (nearest foot)	27 below)
<i>1</i> -5		5+ 6 8411	J jet S submersible
		60 61 63 64 66 70 E OTHER CASING (if used)	
		C OTHER CASING (if used) C diameter depth (feet) H inch from to	PUMP INSTALLED
		C C S	DRILLER WILL INSTALL PUMP YES NO
	.	$\begin{bmatrix} 1 \\ N \end{bmatrix}$	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
		screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
•		or open hole SIT BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)
		insert appropriate STEEL BRASS OPEN BRONZE HOLE	IN BOX - SEE ABOVE: 29 CAPACITY: 1
r		code below PL OT	GALLONS PER MINUTE (to nearest gallon)
		C 2 PLASTIC OTHER	PUMP HORSE POWER 37 41
IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY		1 2	PUMP COLUMN LENGTH (nearest ft.)
WHERE SATURATED FRAC	TURES WERE OBSERVED.	DEPTH (nearest ft.) 82 365	CASING HEIGHT (circle appropriate box
WELL HYDROFRACTU	yes no	A 8 9 11 15 17 21 C	and enter casing height) LAND SURFACE
WELL HYDROPHACIO	URED Y N	H 2 23 24 26 30 32 36	below (nearest foot)
CIRCLE APPROP	PRIATE LETTER DONED AND SEALED	R 23 24 25 35 47 51	LOCATION OF WELL ON LOT
WHEN THIS WELL V	VAS COMPLETED	E 38 39 41 45 47 51	A SHOW PERMANENT STRUCTURE SUCH AS
E - ELECTRIC LOG OBTAINED SLOT SIZE 1 23 TEST WELL CONVERTED TO PRODUCTION DIAMETER [T] [NEAREST		BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS	
P TEST WELL CONVERTED TO PRODUCTION DIAMETER OF SCREEN (NEAREST INCH)			THAN TWO DISTANCES (MEASUREMENTS TO 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 CRAVI		from to	138
ABOVE CAPTIONED PERMIT, AND SENTED HEREIN IS ACCURATE AN	THAT THE INFORMATION PRE-	GRAVEL PACK L	18
MY KNOWLEDGE.	24	FLOWING WELL INSERT F IN BOX 68 68	To the second second
DRILLERS IDENT. NO. L	1 0 00	MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)	3
DRILLERS SIGNATURE	a C. Billeyor	T (E.R.O.S.) W Q	2
(MUST MATCH SIGNATUR	E ON APPLICATION)	70 72 74 75 76	3
SITE SUPERVISOR (sign.	of driller or journeyman	TELESCOPE LOG OTHER DATA	3
responsible for sitework if	different from permittee)	CASING INDICATOR	

COUNTY

