

3/23/97  
3/31/97  
WPI AM

# PERMIT

## SEWAGE DISPOSAL SYSTEM

### DEPARTMENT OF HEALTH AND MENTAL HYGIENE INDEXED

P 580261

A 48825

DISTRICT 3rd

DATE 3/14/97

DATE SYSTEM APPROVED 3-25-97

INSPECTOR KM

#### HOWARD COUNTY HEALTH DEPARTMENT

##### BUREAU OF ENVIRONMENTAL HEALTH

~~XX461-9933~~ 313-2640

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 558 Obrecht Road Sykesville, Maryland 21784 PHONE 795-5674

SUBDIVISION Quarterfield LOT 9 ROAD 3709 Running Springs Road

PROPERTY OWNER John & Susan Heinz

ADDRESS \_\_\_\_\_

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 180

TRENCHES - Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 7½ feet below original grade. Effective area begins at 3½ feet below original grade. 4 feet of stone below distribution pipe.

LOCATION - Place the distribution box 150 feet down the left lot line and 90 feet off this same lot line. Run trenches on contour towards rear lot line.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 9/17/96 DKS

PLANS APPROVED BY Mark Rifkin/Glen Savage

REVISED \_\_\_\_\_ DATE 09/17/96

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

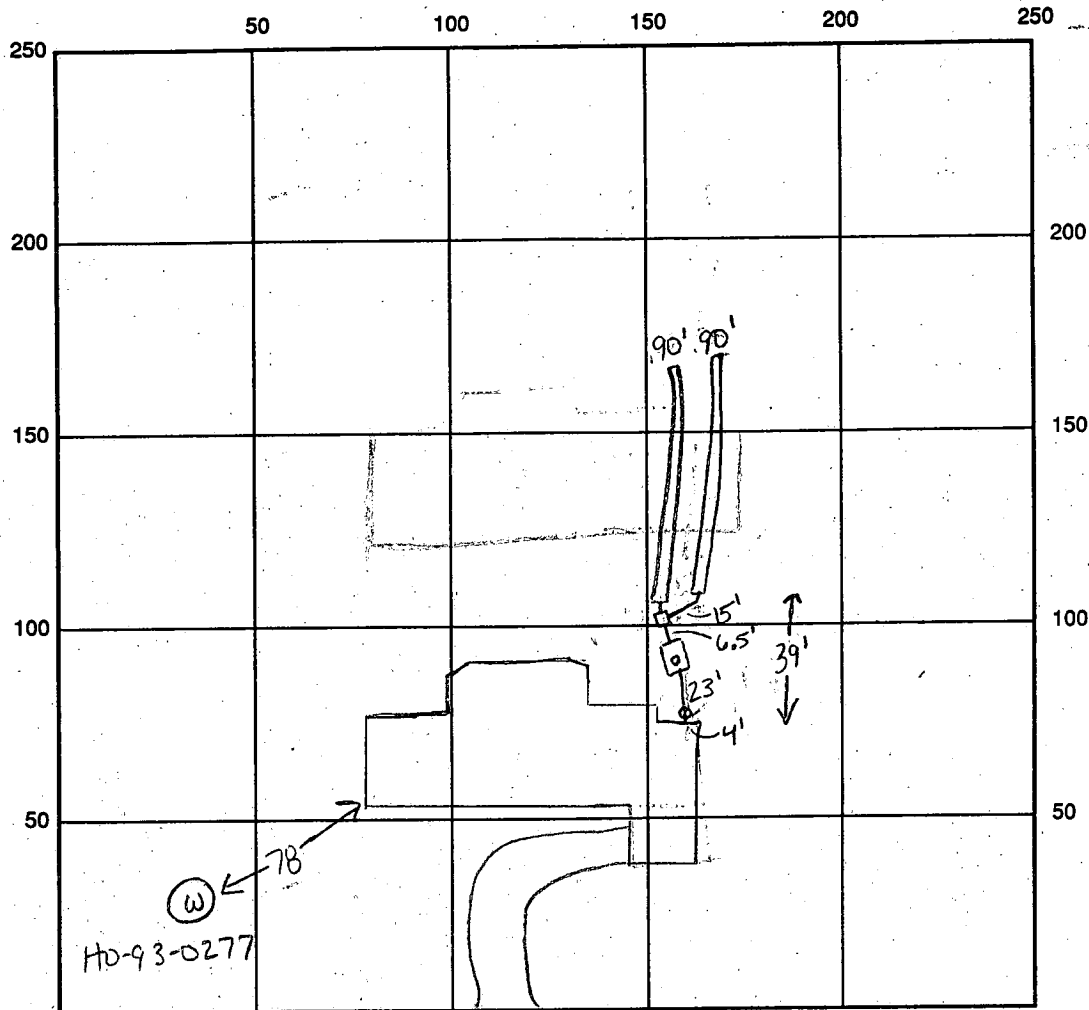
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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**



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

Running Spring Rd.

SEPTIC TANK LEVEL OK, 1250 gallons

CLEANOUTS 1 on tank, 1 at house

DISTRIBUTION BOX LEVEL OK, baffle in

DRAIN FIELD/TITLE DEPTH 7 1/2 FT.

TRENCH WIDTH 2 FT.

INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 4 FT.

TOTAL LENGTH 2 x 90 FT. → 180

NUMBER OF TRENCHES 2

ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWALL INSIDE DIAMETER      FT.

EFFECTIVE DEPTH BELOW INLET      FT.

ABSORBENT AREA      SQ. FT.

REMARKS: 3-25-97 house connection made, OK to continue KM

3-25-97 (pm) OK to cover all work (spoke with contractor about leaving trenches open for inspection on deep system installation) KM

3-31-97 WPI OK to cover wall line P.A. 4.5' below original grade, casing 1' above grade needs new 2 piece watertight cap (one on now is cracked) KM

DATE SYSTEM APPROVED 3-25-97

INSPECTOR Kimberly Maister

# APPLICATION

PERCOLATION TESTING

A 4882 <sup>5</sup>

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT \_\_\_\_\_

DATE 1/7/93

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 Joseph M. Zoller, III John & Susan Heinz  
11696 Carroll Mill Road  
ADDRESS Ellicott City, Maryland 21043 PHONE \_\_\_\_\_

AGENT OR PROSPECTIVE BUYER SDC Group, Inc.  
ADDRESS P.O. Box 417, Ellicott City, MD 21041 PHONE (410) 465-4244

PROPERTY LOCATION:

SUBDIVISION Zoller Property LOT NO. 8 <sup>9</sup>  
(3709 Running Spring Road)  
ROAD AND DESCRIPTION Northeast quadrant Folly Quarter Road and Carroll Mill Road  
intersection.

TAX MAP 23 PARCEL # 8,82 & 101

SIZE OF LOT 1 Ac +/- TYPE BLDG. Single Family - 4 Bm  
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED

AND RETURNED 9/17/96

Senat # 600102163

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. By: [Signature] SDC Group Inc.  
(SIGNATURE OF APPLICANT)

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

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING HOLD FOR PLAT - PERC OK MR 7/26/93

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

A48824

COUNTY #

Lot 8

SOIL PROFILE

(128) (129)

(113) (116A)

brn

red

sa cl lm

3 1/2

br gray

sa mica

lim

10% - 15%

saprolite

frags

(114)

brn

tan

sa cl lm

2 3/4

lt. org

yel beige

tan red

sa lm

5-10%

frags

(116B)

brn

red

sa cl lm

2

brn

tan

sa lm

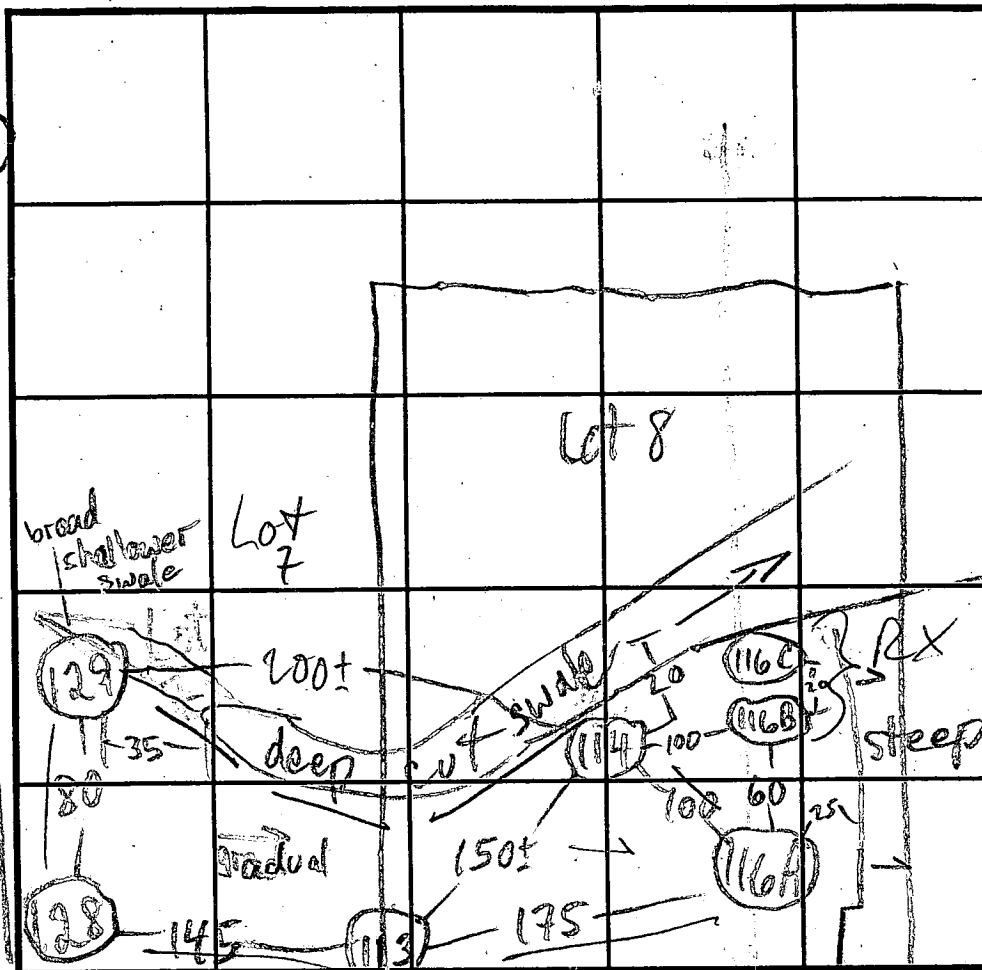
5 1/2

red

sa lm

7 1/2

REFUSAL



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SOIL PROFILE

(116C)

org brn

sa cl lm

25%

frags

2 1/2

brn

sa lm

50%+

frags

7

REFUSAL

| DATE    | TEST NO. | DEPTH  | PRE-WET          |          | TEST - 1" DROP |          | TIME      |
|---------|----------|--------|------------------|----------|----------------|----------|-----------|
|         |          |        | START            | STOP     | START          | STOP     |           |
| 2/12/93 | 128 S    | 4 1/2  | 10:30:00         | 10:33:00 | 10:33:00       | 10:36:00 | 3 min     |
|         | 128 M    | 8      | 10:28:30         | 10:30:30 | 10:30:30       | 10:23:00 | 2 1/2 min |
|         | 128 V    | 13 1/2 | see profile pink |          | strata         |          | 3 1/2 - 5 |
|         | 129 S    | 5      | 10:44:15         | 10:49:30 | 10:49:30       | 10:52:30 | 3 min     |
|         | 129 M    | 8      | 10:44:30         | 10:47:30 | 10:47:30       | 10:53:30 | 6 min     |
|         | 129 V    | 13     | see profile      |          |                |          |           |
|         | 113 S    | 4      | 10:52:15         | 11:00:00 | 11:00:00       | 11:06:30 | 6 1/2 min |
|         | 113 M    | 8 1/2  | 10:58:45         | 11:02:30 | 11:02          | 11:12    | 10 min    |
|         | 113 V    | 13     | see profile      |          |                |          |           |
|         | 114 S    | 5      | 11:10:00         | 11:11:30 | 11:11:30       | 11:14:30 | 3 min     |
|         | 114 M    | 8 1/2  | 11:14:30         | 11:16:15 | 11:16:15       | 11:18:45 | 2 1/2 min |
|         | 114 V    | 12 1/2 | see profile      |          |                |          |           |
|         | 116A S   | 4 1/2  | 11:27:45         | 11:31:00 | 11:31          | 11:25    | 4         |
|         | 116A M   | 9      | 11:23:15         | 11:25:45 | 11:25:45       | 11:22:45 | 2         |
|         | 116A V   | 13     | see profile      |          |                |          |           |

REMARKS

116B V 7 1/2 REFUSAL - FAIL / USE (128)-(129)-(113)

TYPE OF SOIL

116C 7 REFUSAL - FAIL (114)-(116A)

TESTED BY

M. Rifkin

ALSO PRESENT

C. Sperry, Hatfield crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME

4 min

TRENCH WIDTH

2

INLET DEPTH

3

MAXIMUM BOTTOM DEPTH

8

SQ. FT/BEDROOM

180

# APPLICATION

## PERCOLATION TESTING

A 48825

P \_\_\_\_\_

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

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

DISTRICT \_\_\_\_\_

DATE \_\_\_\_\_

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(SIGNATURE OF APPLICANT)

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

DISAPPROVED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

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

REASONS FOR REJECTION OR HOLDING \_\_\_\_\_

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

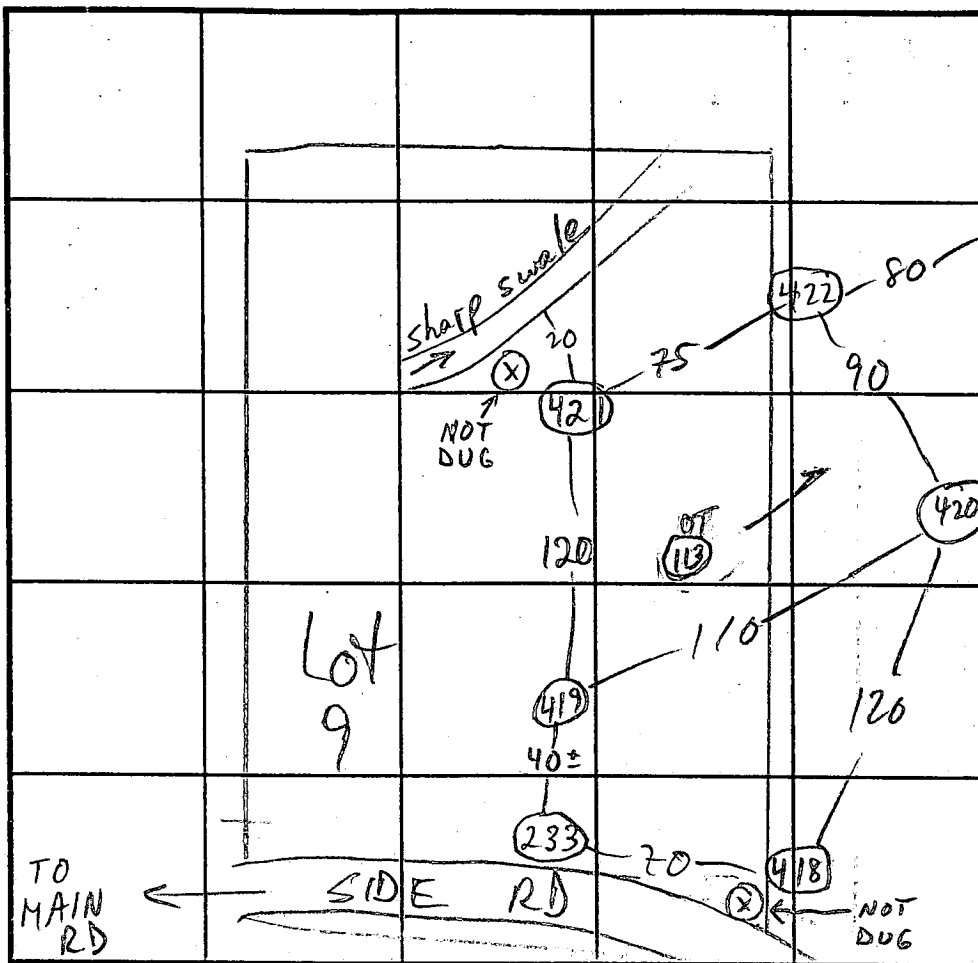
# THIS IS NOT A PERMIT

COUNTY #

SOIL PROFILE

brn  
red  
sa cl/m  
10% frags  
tan w/  
wh. flecks  
sand  
&  
sa mica  
loam  
10%  
frags

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

| DATE    | TEST NO. | DEPTH | PRE-WET<br>START | PRE-WET<br>STOP | TEST - 1" DROP<br>START | TEST - 1" DROP<br>STOP | TIME      |
|---------|----------|-------|------------------|-----------------|-------------------------|------------------------|-----------|
| 7/21/94 | 233      | 4'8"  | 8:29:15          |                 | 8:29:55                 | FAST                   |           |
|         | 233      | 4'8"  | 8:30:15          |                 | 8:31:05                 | FAST                   |           |
|         | 233      | 4'8"  | 8:31:25          | 8:31:55         | 8:31:55                 | 8:32:20                | 25 sec    |
|         | 233      | 4'2"  | 8:33:00          | 8:33:20         | 8:33:20                 | 8:33:50                | 30 sec    |
|         | 419?     | 12    | Sim              | 40              | 233                     |                        |           |
|         | 421      | 4'3"  | 8:49:35          | 9:16:45         | 9:18:45                 | 9:18                   | LOST TIME |
|         | 421      | 12    |                  |                 |                         |                        | 4         |
|         | 422      | 4     | 9:25:15          | 9:25:40         | 9:25:40                 | 9:26:00                | 20 sec    |
|         | 422      | 4     | 9:26:10          | 9:27:00         | 9:27:00                 | 9:27:45                | 45 sec    |
|         | 422      | 4     | 9:28:15          | 9:29:00         | 9:29:00                 | 9:30:00                | 1 min     |
|         | 420      | 4     | 9:34:20          | 9:34:45         | 9:34:45                 | 9:38                   | 4 min     |
|         | 418      | 4     | 9:54:15          | 9:54:30         | 9:54:30                 | 9:55                   | 30 sec    |
|         | 418      | 4     | 9:55:15          | 9:56:00         | 9:56:00                 | 9:57                   | 1 min     |

REMARKS

TYPE OF SOIL USE 420-114-422-113-116A

TESTED BY M. Rifkin ALSO PRESENT Hartfield crew

TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME 4 TRENCH WIDTH 2

INLET DEPTH 3 1/2 MAXIMUM BOTTOM DEPTH 7 1/2 SQ. FT./BEDROOM 180

|                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| C 1 0249                                                                                                                                                           |  | SEQUENCE NO. (MDE USE ONLY)                                                                                                                                                                                                                                                                                                                            |  | STATE OF MARYLAND<br>WELL COMPLETION REPORT<br>FILL IN THIS FORM COMPLETELY<br>PLEASE PRINT OR TYPE                                                                                                                                                                                                                                                                                                                                                         |  | THIS REPORT MUST BE SUBMITTED WITHIN<br>45 DAYS AFTER WELL IS COMPLETED.                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| (THIS NUMBER IS TO BE PUNCHED<br>IN COLS. 3-6 ON ALL CARDS)                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | COUNTY<br>NUMBER <u>48825</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |
| ST/CO USE ONLY<br>DATE Received                                                                                                                                    |  | DATE WELL COMPLETED<br><u>072696</u>                                                                                                                                                                                                                                                                                                                   |  | Depth of Well<br>22 <u>280</u> 26<br>(TO NEAREST FOOT)                                                                                                                                                                                                                                                                                                                                                                                                      |  | PERMIT NO.<br>FROM "PERMIT TO DRILL WELL"<br><u>H0-93-0277</u>                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
| OWNER <u>Thompson</u>                                                                                                                                              |  | STREET OR RFD <u>Running Spring Rd</u>                                                                                                                                                                                                                                                                                                                 |  | TOWN <u>W. Friendship</u>                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| SUBDIVISION <u>QUARTERFIELD</u>                                                                                                                                    |  | SECTION <u>9</u>                                                                                                                                                                                                                                                                                                                                       |  | LOT <u>9</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |
| WELL LOG<br>Not required for driven wells                                                                                                                          |  | GRROUTING RECORD<br>WELL HAS BEEN GROUTED (Circle Appropriate Box)<br>TYPE OF GROUTING MATERIAL (Circle one)<br>CEMENT <u>CM</u> BENTONITE CLAY <u>BC</u><br>NO. OF BAGS <u>15</u> NO. OF POUNDS <u>1410</u><br>GALLONS OF WATER <u>90</u><br>DEPTH OF GROUT SEAL (to nearest foot)<br>from <u>0</u> ft. to <u>49</u> ft.<br>(enter 0 if from surface) |  | PUMPING TEST<br>HOURS PUMPED (nearest hour) <u>3</u><br>PUMPING RATE (gal. per min.) <u>15</u><br>METHOD USED TO MEASURE PUMPING RATE <u>Bucket</u><br>WATER LEVEL (distance from land surface)<br>BEFORE PUMPING <u>47</u> ft.<br>WHEN PUMPING <u>49</u> ft.<br>TYPE OF PUMP USED (for test)<br><u>A</u> air <u>P</u> piston <u>T</u> turbine<br><u>C</u> centrifugal <u>R</u> rotary <u>O</u> other (describe below)<br><u>J</u> jet <u>S</u> submersible |  | C 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| STATE THE KIND OF FORMATIONS<br>PENETRATED; THEIR COLOR, DEPTH,<br>THICKNESS AND IF WATER BEARING                                                                  |  | CASING RECORD<br>casing types insert appropriate code below<br>MAIN CASING TYPE <u>ST</u> Nominal diameter top (main) casing (nearest inch) <u>6</u> Total depth of main casing (nearest foot) <u>66</u><br>OTHER CASING (if used)<br>EACH CASING diameter inch depth (feet) from to                                                                   |  | SCREEN RECORD<br>screen type or open hole insert appropriate code below<br><u>ST</u> STEEL <u>BR</u> BRASS BRONZE <u>HO</u> OPEN HOLE<br><u>PL</u> PLASTIC <u>OT</u> OTHER                                                                                                                                                                                                                                                                                  |  | PUMP INSTALLED<br>DRILLER WILL INSTALL PUMP (CIRCLE) (YES or NO) <u>NO</u><br>IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS.<br>TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX 29<br>CAPACITY: GALLONS PER MINUTE (to nearest gallon) <u>31</u><br>PUMP HORSE POWER <u>37</u><br>PUMP COLUMN LENGTH (nearest ft.) <u>43</u><br>CASING HEIGHT (circle appropriate box and enter casing height)<br><u>+</u> above <u>49</u> LAND SURFACE <u>3</u> (nearest foot) |  |
| DESCRIPTION (Use additional sheets if needed)                                                                                                                      |  | FEET<br>FROM TO<br><u>0</u> <u>61</u><br><u>61</u> <u>280</u><br><u>Sand</u><br><u>Gray Mica Rock</u>                                                                                                                                                                                                                                                  |  | NUMBER OF UNSUCCESSFUL WELLS: <u>0</u><br>WELL HYDROFRACTURED <u>Y</u> <u>N</u>                                                                                                                                                                                                                                                                                                                                                                             |  | C 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
| CIRCLE APPROPRIATE LETTER<br>A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED<br>E ELECTRIC LOG OBTAINED<br>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.                                                                |  | TYPE: MWD/MSD/MGD<br>DRILLERS LIC. NO. <u>24</u><br>DRILLERS SIGNATURE <u>Joseph L. Mayne</u><br>LIC. NO. <u></u>                                                                                                                                                                                                                                                                                                                                           |  | LOCATION OF WELL ON LOT<br>SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND /OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL)<br><u>Running Spring Rd.</u><br><u>15' 30"</u>                                                                                                                                                                                                                                                                           |  |
| SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)                                                              |  | TELESCOPE CASING LOG INDICATOR OTHER DATA                                                                                                                                                                                                                                                                                                              |  | MDE USE ONLY (NOT TO BE FILLED IN BY DRILLER)<br>T (E.R.O.S.) W-Q<br>70 72 74 75 76                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |

67  
498

R. HYMAN  
108  
9/242

OF SUBMISSION

MgB2

MgC<sub>3</sub>

MID3

PRESERVATION  
PARCEL 1B

Ho

MIBZ

MR 2/14/81

Well site OK  
WIS. MAX

LOT 8  
128 (416.7)

LOT 25

MID3

P 47(373.5)



OFFICE COPY

# Approved Septic System Plan Howard County Health Department

9/17/96 BY COPY OF THIS APPROVED  
PLAN, THE HEALTH DEPT. ACCEPTS  
THE PROPOSED MODIFICATIONS TO  
THE SEPTIC EASEMENT.

*Handwritten signature*  
ANTHONY

*Handwritten signature*  
Signature

*Handwritten date*  
Date

ADD SEWERAGE  
DISPOSAL EASEMENT

PARCEL 82  
FOREST CONSERVATION

PRIVATE SEWERAGE  
EASEMENT

SEPTIC DISTRIBUTION BOX

SEPTIC TANK

ABANDONED PRIVATE  
SEWERAGE DISPOSAL EASEMENT  
LENGTH OF TRENCHES BE OBTAINED

Construction stormwater  
management to be handled  
by developers stormwater  
management pond until removed

RUNNING SPRINGS ROAD

DALE THOMPSON BUILDER

Septic Grades & Elevations

|                         | Inv.   | Grade |
|-------------------------|--------|-------|
| Invert at House         | 395.0  | 399.0 |
| Invert at Tank Entrance | 394.75 | 398.0 |
| Invert at Tank Exit     | 394.25 | 397.0 |
| Invert at DIST. Box     | 394.0  | 397.0 |

1040