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

XXXXXXXXX

410-313-2640

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

INDEXED

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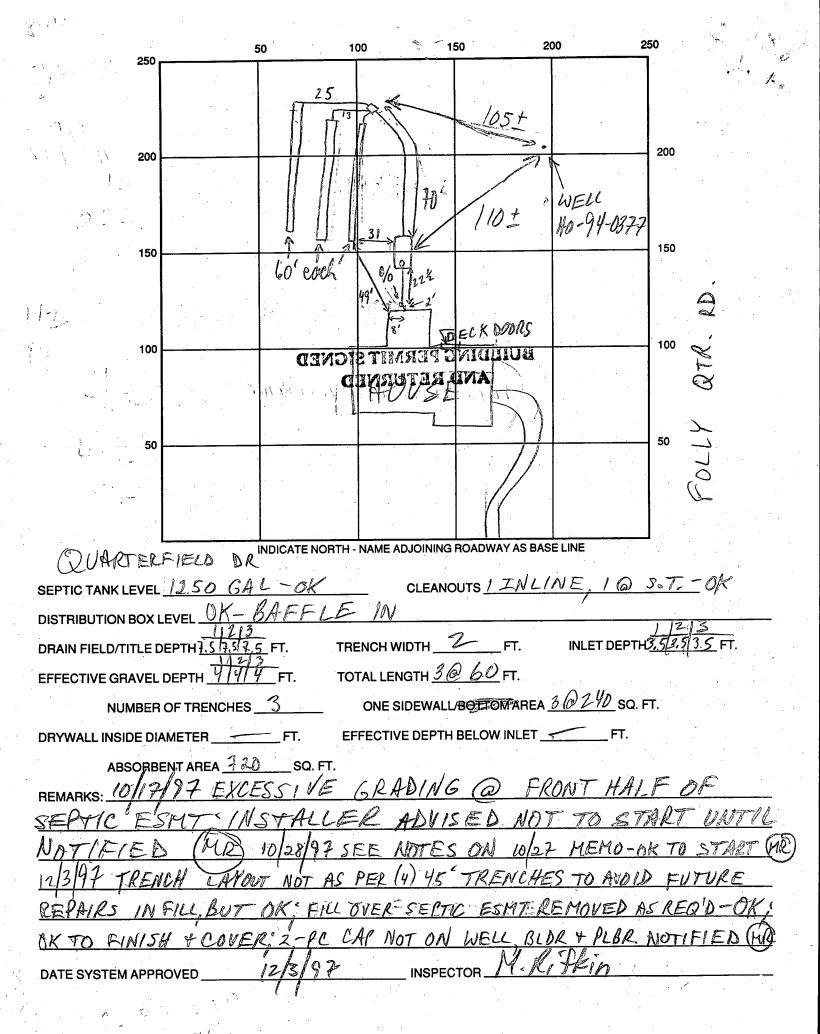
48826

DISTRICT 3rd

DATE SYSTEM APPROVED

INSPECTOR <u>FC- E7JA(A</u>				
Fogle's Septic Clean, Inc. IS PERMITTED TO INSTALL X ALTER				
ADDRESS 558 Obrecht Road Sykesville, Maryland 21784 PHONE (410) 795-5674				
SUBDIVISION Quarterfield LOT 45 (LOT 10) ROAD 11600 Quarterfield Drive				
PROPERTY OWNER Robert Ugansky				
ADDRESS BUILDING PERMIT SIGNED				
SEPTIC TANK CAPACITY 1250 GALLONS 9-10-03 BODDY-1030-FORCE & TORRESCE				
NUMBER OF BEDROOMS 4				
180 SQUARE FEET PER BEDROOM				
LINEAR FEET OF TRENCH REQUIRED 180 (4 trenches, each 45 (ong)				
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 distribution box 195 feet up the left lot line and 80 feet off that same lot line as seen when facing the lot from Quarterfield Drive. Run trenches on contour toward the left lot line. ****MAINTAIN A MINIMUM OF 100 FEET FROM THE WELL TO ALL PARTS OF THE SEPTIC SYSTEM.				
NOTES - Run 3-60 ft. trenches. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.				
PLANS APROVED BY Amy McMillen/Mark Rifkin REVISED DATE 6/20/97				
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





HOWARD COUNTY HEALTH DEPARTMENT

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

October 27, 1997

Mr. Dale Thompson Dale Thompson Builders 10005 Old Columbia Road Columbia, MD 21046

Possible Grading Impacts

to Recorded Sewage Easements

Quarterfield Lots 11 and 45

Dear Mr. Thompson:

During a septic system installation inspection on October 17, 1997 at Quarterfield Lot 11, this inspector observed that a large portion of the recorded sewage easement had been covered by significant quantities of fill soil. Although the the septic contractor has been issued final system approval, significant concerns remain.

This inspector also found that significant amounts of fill material cover an even greater portion of the recorded sewage easement on adjacent Lot 45 (previously Lot 10). A "Stop Work" Order was issued to the septic contractor regarding Lot 45; that is, the contractor has been advised not to start work on Lot 45 until notified by this office.

The impacts of these conditions (depth/safety concerns, confirmation of original grades) may be problematic for proper septic system installation. This office requests that a meeting be held in the field to discuss these issues. At your choice, a backhoe may be necessary to confirm the extent of the problem.

It is also not clear at this point which party is responsible for the grading. If you believe others to be the responsible party, you may choose to have them present at this meeting as well.

To arrange this meeting, or if you have any questions, please call me at (410) 313-2640.

10028/97 MTG. W/DALET, FOGLE'S RE: Very truly yours,

GRADING, IT WAS AGREED THAT 4-45 Mark E. Rifkin, R.S.

TRENCHES WOULD BE INSTALLED FOR Mark E. Rifkin, R.S.

FIRST SYSTEM AFTER FILL Water and Sewerage Program

MR

cc: Fogle's Septic Clean REMOVED TO AVOID NEED FOR FUTURE

INSTALL ATIMAL IN FILL MAYEN

File

INSTALLATION IN FILL MIN/EW

Bureau of Environmental Health

APPLICATION

PERCOLATION TESTING

HOWARD COUNTY HEALTH DEPARTMENT **BUREAU OF ENVIRONMENTAL HEALTH** 3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLAND 21043 **TELEPHONE: 313-2640**

DISTRICT

TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND

I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO APPLIC	ATION FOR PERMIT TO	CONSTRUCT (OR F	RECONSTRUCT) A SEWAG	E DISPOSAL SYSTEM.
PROPERTY OWNER Joseph M. Zoller, III				
11696 Carroll Mill Road		June 19		
Tiliant City Maryland	2.104.3	מאסאוב		•
ADDRESS Ellicott City, Maryland	21043	PHONE		
AGENT OR PROSPECTIVE BUYER SDC Group, Inc.				·
ADDRESS P.O. Box 417, Ellicott Ci	ty, MD 2104		10) 465-4244	
PROPERTY LOCATION:				
SUBDIVISION Zoller Property		_LOT NO	(25 10	·
ROAD AND DESCRIPTION Northeast quadrant F				11 Road
intersection. 11600 Quartert	iald Dieivis)	<u>slo</u>	G PERMIT SIGNE	4.
TAX MAP 23 PARCEL# 8,82 & 101		Jour	SH B181056	
SIZE OF LOT 1 A c + / -	TYPE BLD	G. Single	e Family GLE FAMILY DWELLING OF	COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPT	ABLE ONLY UNTIL PU	JBLIC FACILITIES E	BECOME AVAILABLE. I F	ULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST AI	PPLICATION IS NON-RE	EFUNDABLE UNDI		S. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS	ь сот.		NATURE OF APPLICANT)	
APPROVED BY	FOR		DATE	
DISAPPROVED BY	FOR		DATE	
HOLD PENDING FURTHER TESTS				
REASONS FOR REJECTION OR HOLDING PERC OK	HOLD F	OR PL	AT MR	7/22/93
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

HD-216 (3/92)

A 48853 COUNTY# bra Im org brn sa. Mica (0 am 10% Frags bra sa (m F.a. RD

SOIL PROFILE

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SOIL PROFILE

O

No indicate north- name adjoining roadway as base line.

			PRE-WET TEST		TEST - 1	*DROP	
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
2293	1 S 1 M	31/2 8	12:03 12:03	12:05	12:05 12:04	12:07	73
	/ V	12'4"		sile			
	2 M	3/2 84	12:11	12:14	12:19	12:20	6 2
	27	12	see p	offle	4.00 4.00 4.00 4.00 4.00 4.00 4.00 4.00		
	3 Š	3/2	12:24:00	12:24:30	12:26:00	12:26:45	
	3 5	3/2	12:27:20	12128:00	12:28:00		
	3 M	8	12:28:45	12:36	12.36	12:29:45 12:40	4.
	3 1/	124"	sim to			,	,
2/9/93	101 S	69	3:17:45	3:19:15	3:19:15	3:24 3:21:30	52
	101 V	12	sim to	1) more	pink	clayto	51

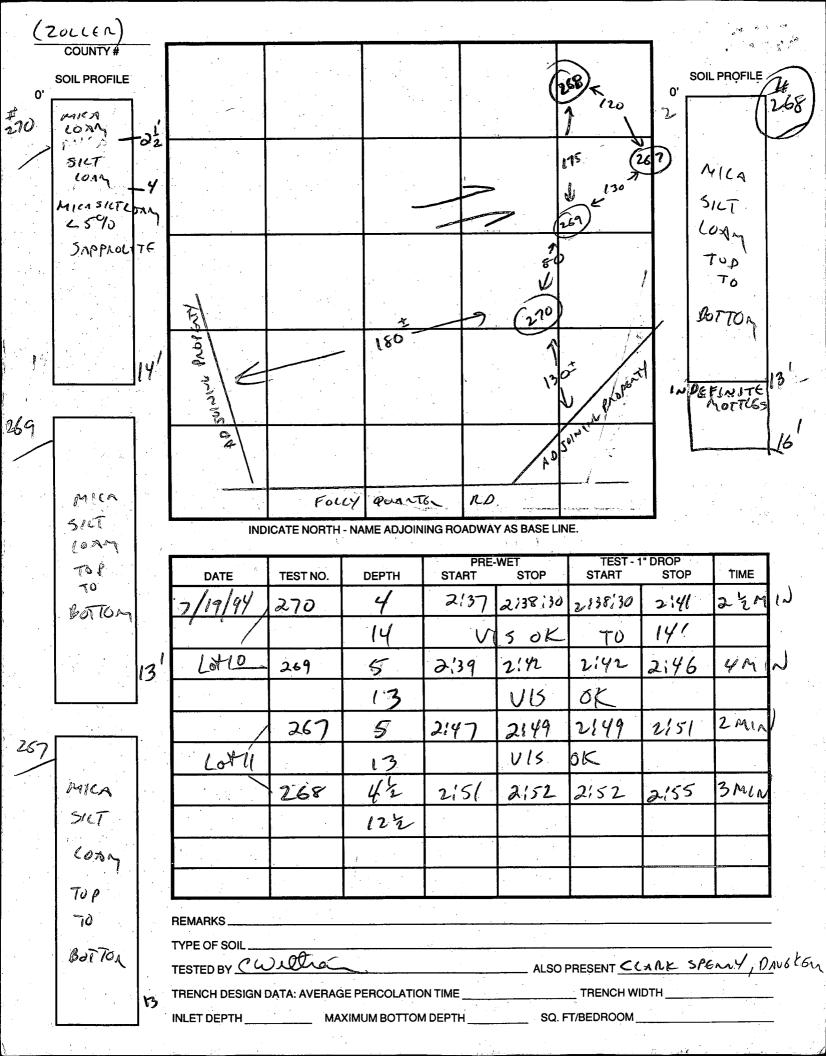
REMARKS	
TYPE OF SOIL	
TESTED BY M. Ritkin	ALSO PRESENT
TRENCH DESIGN DATA: AVERAGE PERCOLATION TIME _	TRENCH WIDTH 2
INI ET DEDTH 3 3 MAYIMI IM BOTTOM DEPTH	74 SO ET/BEDROOM 180

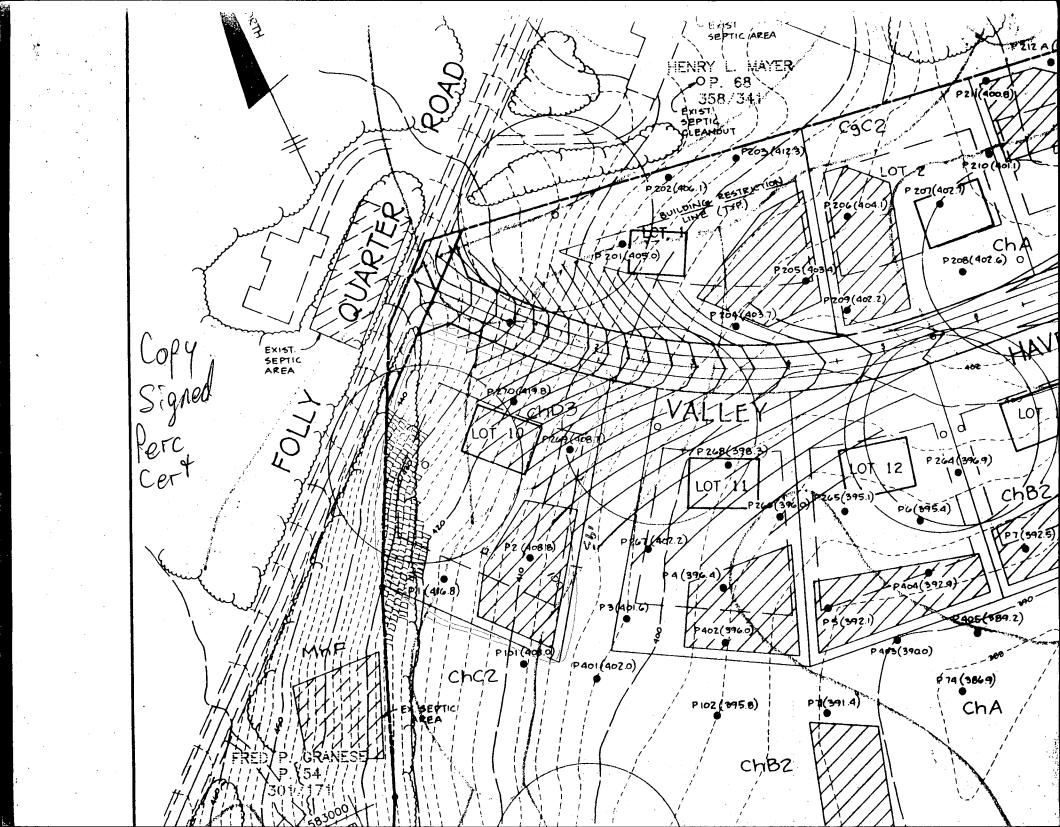
APPLICATION

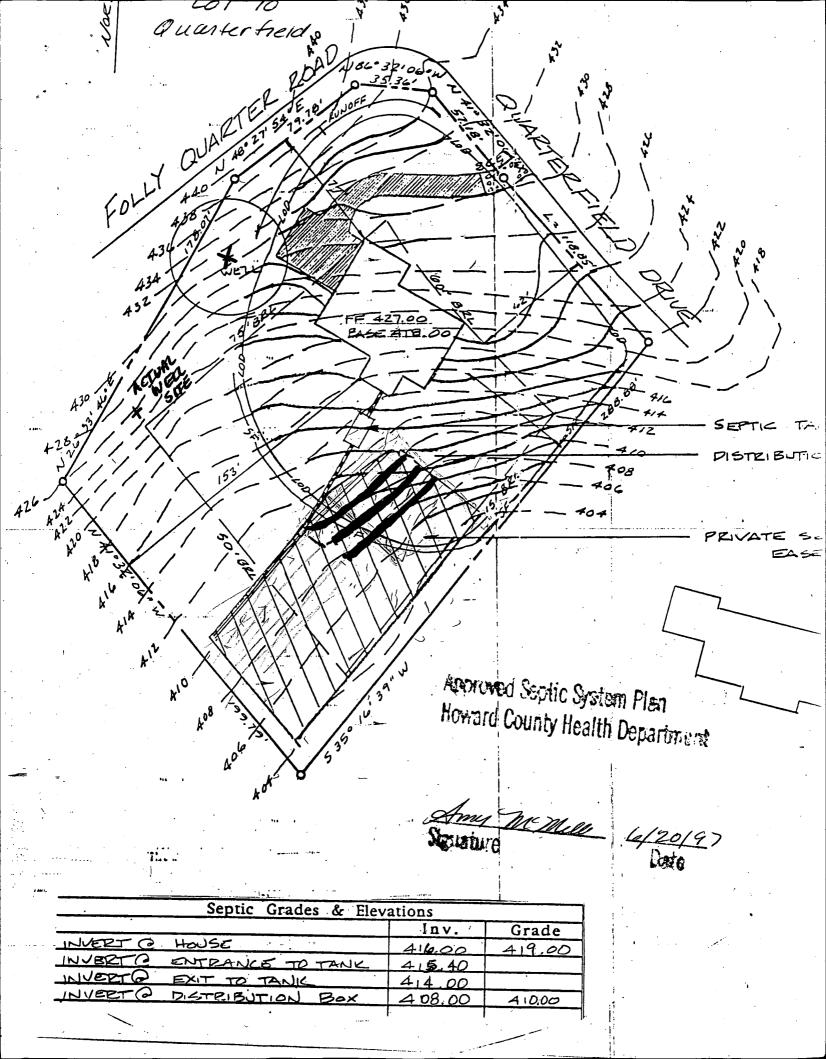
	PERCOLA	ATION TESTING		Α
				P
				<u> </u>
HOWARD COUNTY HEALTH DEPARTMENT	•		DISTRICT	
BUREAU OF ENVIRONMENTAL HEALTH 3525-H ELLICOTT MILLS DRIVE/ELLICOTT CITY	/ MADVI AND 21042		DATE	
TELEPHONE: 313-2640	, MARTLAND 21045		DATE	
				·
TO: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND			· ·	
I HEREBY APPLY FOR THE NECESSARY TEST	PRIOR TO APPLICATION	FOR PERMIT TO CONST	FRUCT (OR RECONSTRUCT) A SEW	AGE DISPOSAL SYSTEM.
PROPERTY OWNER		<u>, , , , , , , , , , , , , , , , , , , </u>	•	
ADDRESS	·		NE	
AGENT OR PROSPECTIVE BUYER				
AGENT OF PROSPECTIVE BUYER				· · · · · · · · · · · · · · · · · · ·
ADDRESS		PHC	ONE	
			·	
PROPERTY LOCATION: ZOLLE	En Prop	GATY	10 on	final
			·	n
ROAD AND DESCRIPTION	FOLLY QUA	NTGN RD	, some 1	nto re=11
TAX MAP PARCEL#		<u> </u>		. •
TAX MAPPARCEL#	······································			
SIZE OF LOT		TYPE BLDG		
	•	j	(SINGLE FAMILY DWELLING	OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICA	TION IS ACCEPTABLE (ONLY UNTIL PUBLICE	ACILITIES BECOME AVAILABLE.	FULLY UNDERSTAND THE
		· · · · · · · · · · · · · · · · · · ·		
FEE CONNECTED WITH THE FILING OF THIS	PERC TEST APPLICAT	TION IS NON-REFUND	ABLE UNDER ANY CIRCUMSTAN	CES. 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 - TITI	SEORID#	:	DATE	
- ENGLANDA ILOTT ENT/FREEIWINANT FLAT - IIII	LE VII I.D. #		UNIE	
SITE DEVELOPMENT PLAN/FINAL PLAT - TITLE OR L	D.#		DATE	

THIS IS NOT A PERMIT

HD-216 (3/92)

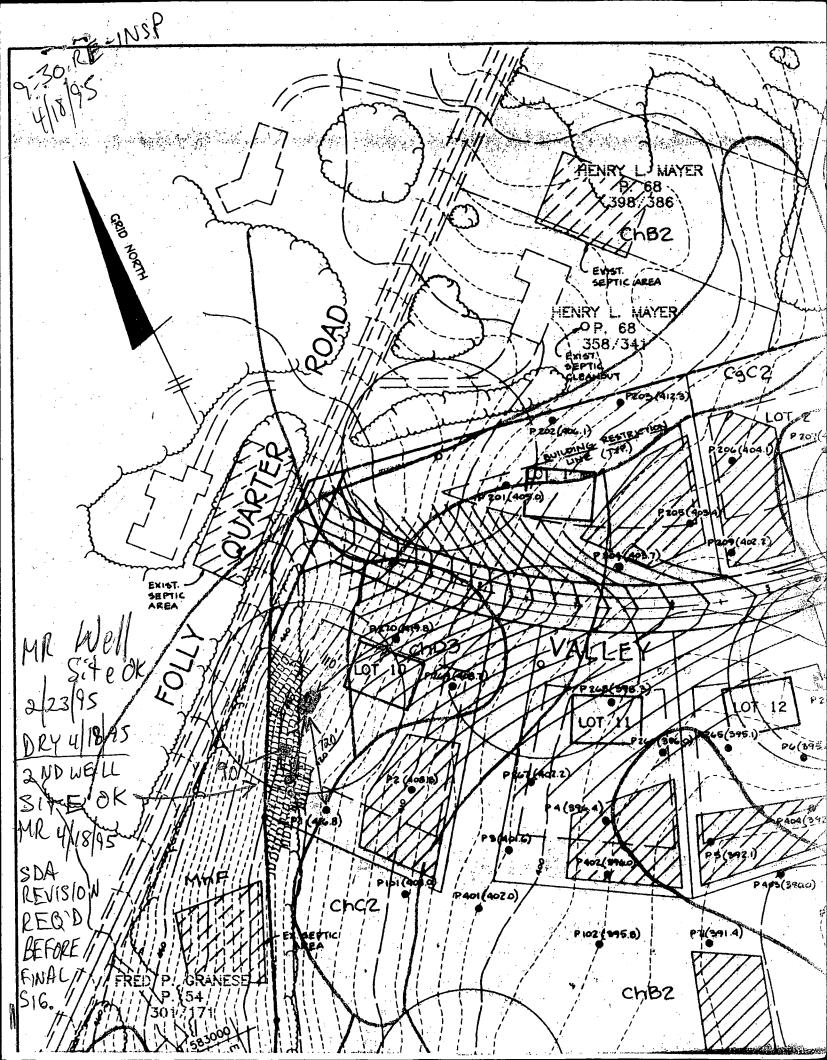


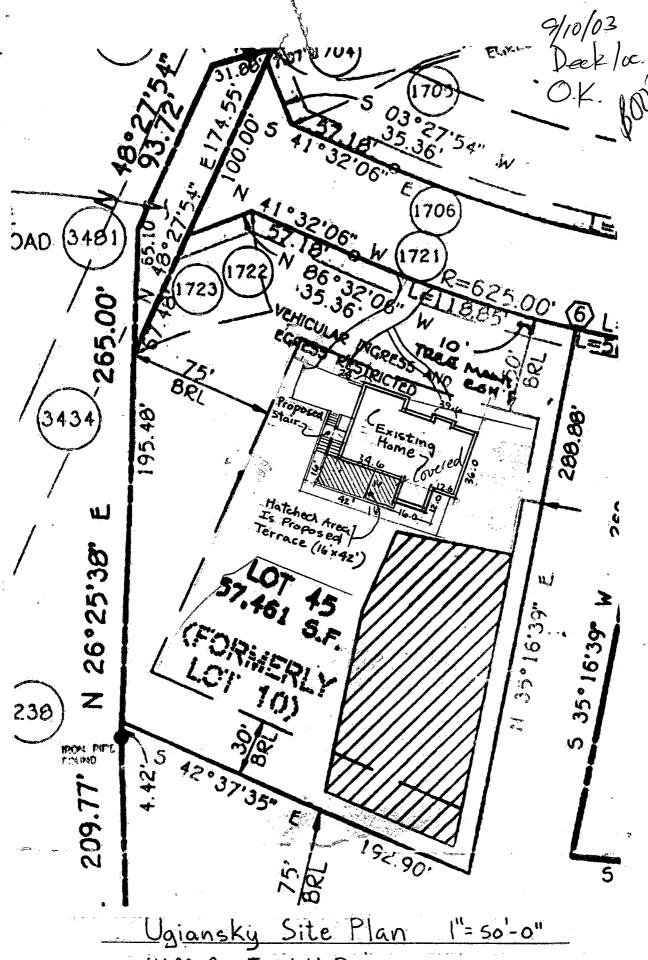




C 1 3575	SEQUENCE NO. (DENV USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PL	INCHED	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 488 503 76
IN COLS. 3-6 ON ALL CARD			PERMIT NO.
DATE Received	DATE WELL COMPLETE	Depth of Well 22 3 4 5 26	FROM "PERMIT TO DRILL WELL"
8 13	15 20	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
	ast name	Wallar How Por Drown L	1. Friendship
SUBDIVISION ZOL	LER PR	OP SECTION	LOT 16 45
WELL LO Not required for o		GROUTING RECORD WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
STATE THE KIND OF F PENETRATED, THEIR	ORMATIONS COLOR, DEPTH,	(Circle Appropriate Box) TYPE OF GROUTING MATERIAL	PUMPING TEST
THICKNESS AND IF W		CEMENT CM BENTONITE CLAY BC	HOURS PUMPED (nearest hour)
	FROM TO fr water bearing	NO. OF BAGS 2/ NO. OF POUNDS 159794	PUMPING RATE (gal. per min. 11 15 15
SAND	9 80	GALLONS OF WATER	METHOD USED TO MEASURE PUMPING RATE Bucket
The second second	0 80	from 0 ft. to 51 BOTTOM 58	WATER LEVEL (distance from land surface)
Application of the second seco		(enter O if from surface) Casing CASING RECORD	BEFORE PUMPING 17 20
GRAY MICH ROCK	80 345 0	types insert	WHEN PUMPING 30 1/25
Rock		(appropriate) STEEL CONCRETE	TYPE OF PUMP USED (for test)
		code below PLASTIC OTHER	air P piston T turbine
		MAIN Nominal diameter Total depth	C centrifugal R rotary O (describe
		CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	J jet Submersible
		5/ 6 834	jet Submersible
		60 61 63 64 66 70 E OTHER CASING (if used)	
		diameter depth (feet) inch from to	PUMP INSTALLED
		CAS LL	DRILLER WILL INSTALL PUMP YES (NO) (CIRCLE) (YES or NO)
0 442	v'	N G	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS
Dry weel 42	ita	screen type SCREEN RECORD or open hole	EXCEPT HOME USE TYPE OF PUMP INSTALLED
Coment + a		insert STEI BRS OPEN	PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE: 293
Coment to	nuing !	appropriate BRONZE HOLE	CAPACITY: GALLONS PER MINUTE
malera		PLASTIC OTHER	(to nearest gallon) PUMP HORSE POWER
IN HARD ROCK AREAS, IDEN			PUMP COLUMN LENGTH 37 41
WHERE SATURATED FRACTO	JAES WERE OBSERVED.	E 1 HO 82 3 45	(nearest ft.) CASING HEIGHT (circle appropriate box
WELL HYDROFRACTUR	yes no	A 8 9 11 15 17 21 C	and enter casing height) LAND SURFACE
WELLTHONOUN	KED A (IN)	S 2 23 24 26 30 32 36	below (nearest foot)
CIRCLE APPROPR		R 3 41 45 47 51	49 50 51 LOCATION OF WELL ON LOT
WHEN THIS WELL WA	AS COMPLETED	N 38 39 41 45 47 51	A SHOW PERMANENT STRUCTURE SUCH AS
E ELECTRIC LOG OBTAI		SLOT SIZE 123(NEAREST	BUILDING, SEPTIC TANKS, AND/OR N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
P WELL THEREBY CERTIFY THAT THIS WELL		OF SCREEN 1 1 1 INCH)	(MEASUREMENTS TO WELL)
ACCORDANCE WITH COMAR 26.04 AND IN CONFORMANCE WITH ALL ABOVE CAPTIONED PERMIT, AND T	1.04 "WELL CONSTRUCTION" CONDITIONS STATED IN THE	from to	Frankley Haven DR.
SENTED HEREIN IS ACCURATE AND MY KNOWLEDGE		IF WELL DRILLED WAS FLOWING WELL INSERT	.50
DRILLERS IDENT. NO.	24	F IN BOX 68 68 MDE USE ONLY	low ho
Joseph &	mayre	(NOT TO BE FILLED IN BY DRILLER)	
DRILLERS SIGNATURE (MUST MATCH SIGNATURE		74 75 76	
	etriller or journeyman	TELESCOPE LOG OTHER DATA	
SITÈ SUPERVISOR (sign. of responsible for sitework if d	ifferent from permittee)	CASING INDICATOR	
		COUNTY	

EMERGENCY/TEMP NO. IF ANY	STATE USE INDUSTRIES JESSUP, MD 20794
B 7 4415 SEQUENCE NO. STATE OF	MARYLAND STATE PERMIT NUMBER
APPLICATION FOR PL	FRMIT TO DRILL WELL int or type To fill in this form completely 79
"IN COLS. 3-6 ON ALL CARDS) Date Received (APA)	B 3 LOCATION OF WELL
020995 OWNER INFORMATION	
8 13 SDE 68040 TUC	8 COUNTY 21
15 Last Name Owner First Name 34	ZOLLER PROPERTIES 123 SUBDIVISION 42
B C X 9 / /	SECTION 44 \ 46 LOT 1 D SECTION 48 50
ELLICOTT CONT 70 State 72 Zip 76	West-FRIEWOSHIA 11
DRILLER INFORMATION MSD/MGD/MWD	MILES FROM TOWN (enter 0 if in town) V
Priller's Name 77 License No. 80	B 4
Franch T. Mayor WELL DRICCING	DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 11 NEAR WHAT ROAD 30
35/2 Rige 14. M. aug ma. 21711	NORTH IST
Signature 2/8/95	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) WEST SEST
B 2 WELL INFORMATION	TOWN E DISTANCE FROM ROAD
APPROX. PUMPING RATE (GAL. PER MIN.) 5 12	ENTER FT OR MI
AVERAGE DAILY QUANTITY NEEDED 500 14 20	38 39 S 8-9 TAX MAP: BLK: PARCEL
USE FOR WATER (CIRCLE APPROPRIATE BOX)	NOT TO BE FILLED IN BY DRILLER
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)	HEALTH DEPARTMENT APPROVAL AUS C 527/
F FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION)	COUNTY NAME COUNTY NO.
INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)	STATE SIGNATURE DATE ISSUED ON 1 0 0 1
PUBLIC OR PRIVATE WATER COMPANY (REQUIRES P APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT	030295 // Will C. Kettern 3/2/46
APPROVAL) TEST, OBSERVATION, MONITORING (MAY REQUIRE	43 48 CO SIGNATURE PXP. DATE NORTH 5 2 3 0 0 0 EAST 0 8 2 3 0 0 0
APPROPRIATION PERMIT)	50 55 57 63 SHOW MAJOR FEATURES OF 4-21-95
APPROXIMATE DEPTH OF WELL 28 P FEET	BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER
24 28 NEAREST	
APPROXIMATE DIAMETER OF WELL INCH	1. WELL 2.
METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN	3.
BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-POTER AIR-PERcussion ROTARY (Hydraulic Rotary)	WRITE THE BOX NUMBER FROM THE MAP HERE
CABLE REVerse-ROTary DRive-POINT	(S)
nther	82 <u>83</u>
(CIRCLE APPROPRIATE BOX)	DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN
THIS WELL WILL NOT REPLACE AN EXISTING WELL THIS WELL WILL REPLACE A WELL THAT WILL BE	RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS	Avet Friend Blugo
POLICY ON STANDBY WELLS	↑
D THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPENED	\ \frac{\frac}\fint{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}}}}}}}{\frac{\fir}}}}}}{\frac{\frac{\frac{\frac{\frac}\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac
(IF AVAILABLE) 41 52	Walley Haven On
Not to be filled in by driller (OEP USE ONLY)	1 mounds
APPROP PERMIT NUMBER G A P 63	A Ruell
FORCE MID WRITE PERMIT No. HIO - 94-0377	95 FEB -9 (FV 12: 13
67. 68 IN BOX 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS NOTE = APPROVING AUTHORITIES SHOULD USE S	EPARATE SHEET IF NEEDED =





11600 Quarterfield Drive