

1 ap ID - 04-309197

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

5/22/92 R.P. 1
6/1/92 need
11:00 A.M.
original permit not
built after 1974 (Steve Barnard or Steve Barnard)
HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

INDEXED

see (A 18995)
+ HO-23-0913
(Steven Barnard)
P 48/29

A REPAIR

DISTRICT

DATE 5/20/92

DATE SYSTEM APPROVED 6/1/92

INSPECTOR 4372

Arnold Backhoe & Septic Services, Inc.

IS PERMITTED TO INSTALL

ALTER X

ADDRESS P. O. Box 15, Woodbine, Maryland 21797

PHONE 795-7873/489-5188

SUBDIVISION LOT ROAD 1023 St. Michaels Road

PROPERTY OWNER Arnie Moore

1023 St. Michaels Road

ADDRESS Mt. Airy, Maryland

SEPTIC TANK CAPACITY 1000 ^{existing} GALLONS

NUMBER OF BEDROOMS 3

300 SQUARE FEET PER BEDROOM counts 4 sq ft / L.F. of Trench R/P 5/22/92

LINEAR FEET OF TRENCH REQUIRED 90

REPAIR - PURPOSE - TO REPAIR FAILING SEPTIC SYSTEM.

Call for inspection when ground is opened so sanitarian can recommend repair. 5/18/92

Install 2 trenches at least 45 ft long each with 2 ft of stone below
inlet pipe. Inlet at approx 4-5 ft below existing grade. Keep Trenches as shallow
as possible. R/P 5/22/92

PLANS APPROVED BY

Donald Philly

DATE

5/22/92

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.

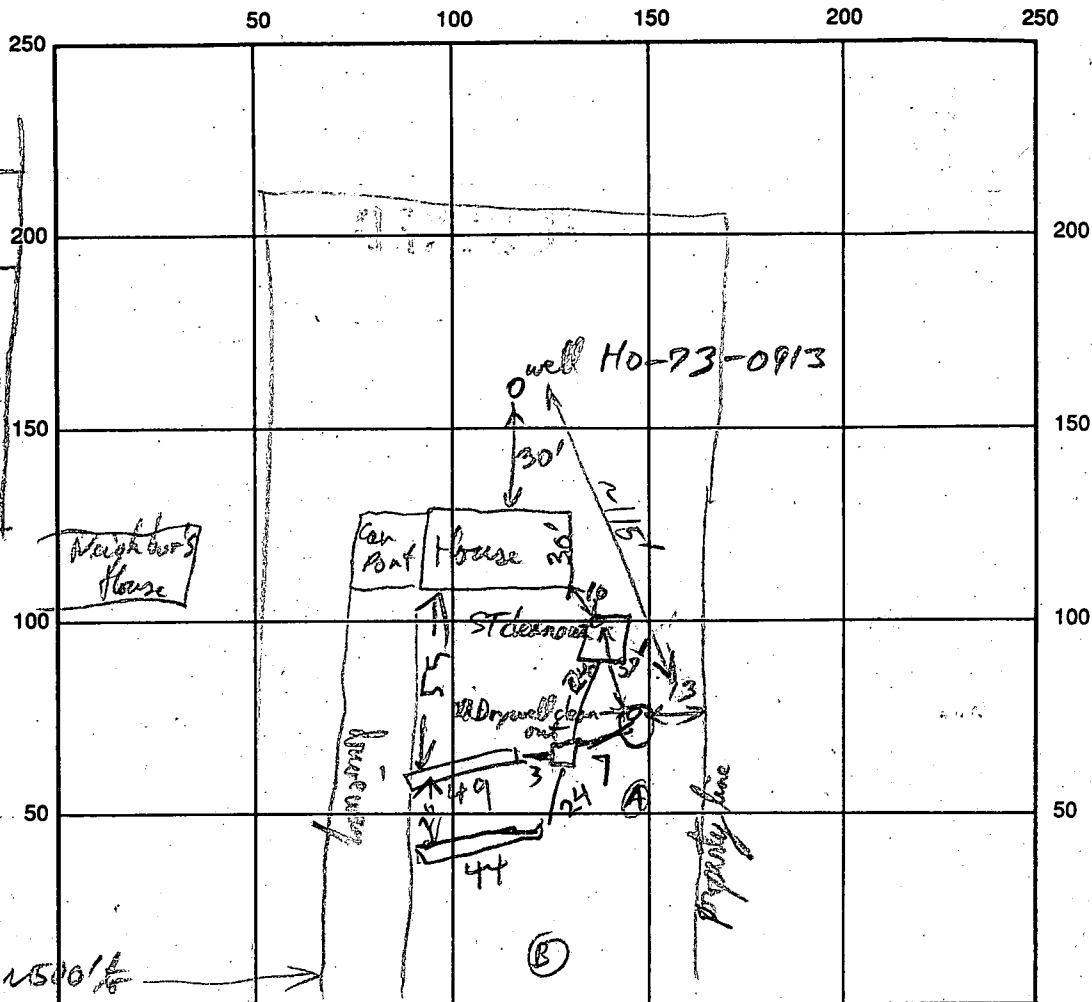
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

HD-260(6-90)

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEM.

48129



Test Hole A
Dark brown soil
Red + yellow
Heavy clay loam
3-5'
Red Brn to dark
Brown h loam
~50% weathered
diggable rock
(Microschist)
To 8' pf

Hole B
Rn by @ 1 1/2 ft

St Michael's

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE
private driveway to house

SEPTIC TANK LEVEL _____ CLEANOUTS _____

DISTRIBUTION BOX LEVEL 0/1

DRAIN FIELD/TITLE DEPTH 7-9 FT. TRENCH WIDTH 2 FT. INLET DEPTH 5-6 FT.

EFFECTIVE GRAVEL DEPTH 2 FT. TOTAL LENGTH 44/49 FT. 93

NUMBER OF TRENCHES 2 ONE SIDEWALL/BOTTOM AREA 186 SQ. FT.

DRYWALL INSIDE DIAMETER _____ FT. EFFECTIVE DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS: _____

DATE SYSTEM APPROVED 6/1/92 INSPECTOR Raymond Hodges

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

INDEXED

11/19/74 File filed

P 20908

A 18995

ELLICOTT CITY

DISTRICT 4th

DATE 11/12/74

Howard Pickett

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS Watersville Road, Mt. Airy, Maryland 21771 PHONE 829-0543

A SEWAGE DISPOSAL SYSTEM LOCATED AT

SUBDIVISION ROAD St. Michael's Road LOT 6

PROPERTY OWNER Steven E. and Teresa A. Barnard

ADDRESS 302 Redwood Avenue, Frederick, Maryland Phone: 663-6227

SPECIFICATIONS 3 bedrooms

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

SEPTIC TANK CAPACITY 1000 GALLONS

FOR GARBAGE GRINDER, INCREASE DISPOSAL AREA 22% & TANK CAPACITY 50%.

OTHER DRY WELL - To have 160 sq. ft. effective absorbent sidewall area per bedroom below inlet. Inlet to be 4 ft. below original grade and maximum depth 10 ft. Locate dry well 130 ft. from left side of lot and 140 ft. from front of lot as seen when facing lot from road in front of lot. (Perc hole 1 & 2).

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE YEARS.

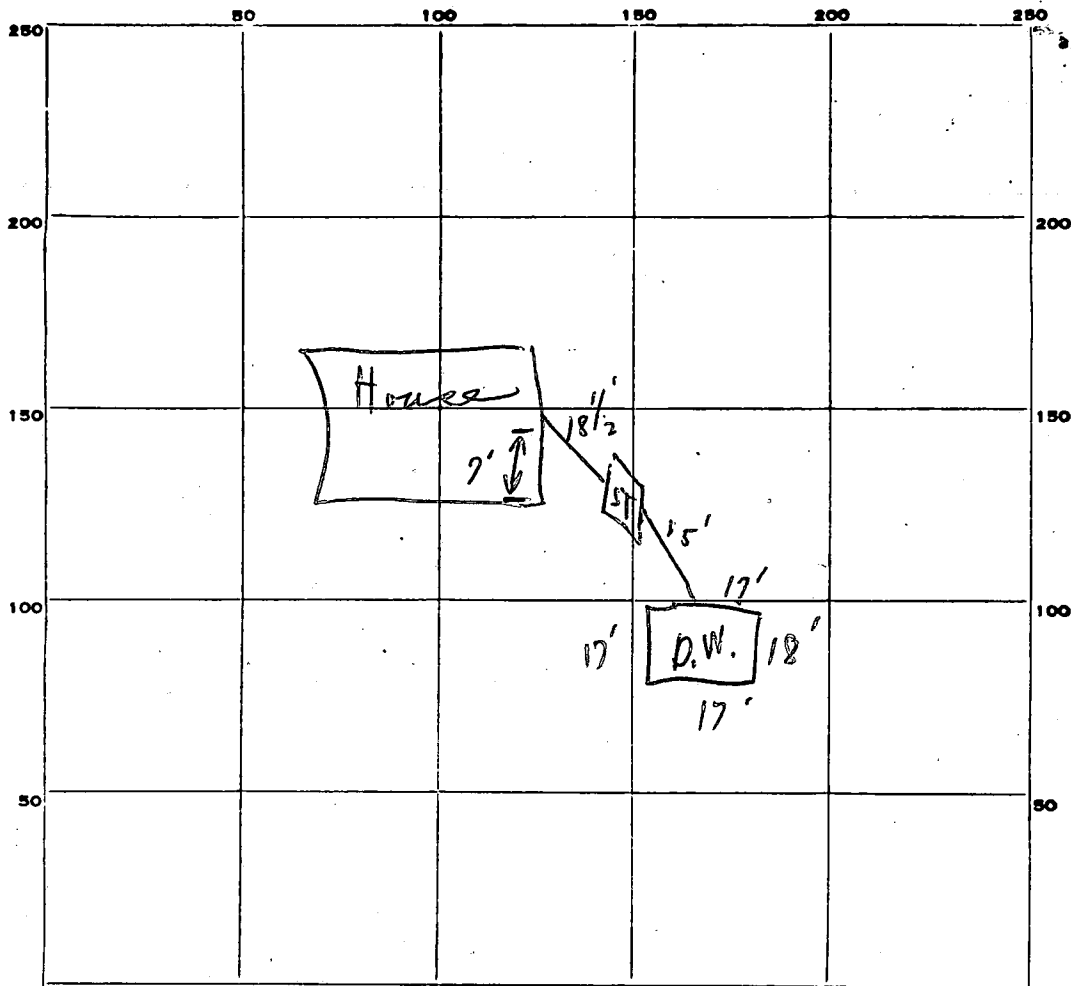
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES CAST IRON, CONCRETE OR TERRA COTTA ACCEPTED.

PLANS APPROVED BY Charles B. Streaker DATE 10/26/73

FILL SEPTIC TANK AND DISTRIBUTION BOX WITH WATER BEFORE CALLING FOR AN INSPECTION. COVER NO WORK UNTIL INSPECTED AND APPROVED.

NEITHER THE HOWARD COUNTY COMMISSIONERS NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.

A 18995



PERMIT CARD

Signed

SEPTIC TANK, LEVEL

OK

CLEANOUTS

S.T.

D.W.

OK

OK

DISTRIBUTION BOX, LEVEL

TILE FIELD, DEPTH

FT.

TRENCH WIDTH

FT.

GRAVEL DEPTH

IN.

TOTAL LENGTH

FT.

NUMBER OF TRENCHES

TOTAL BOTTOM AREA

SEEPAGE PITS, INSIDE DIAMETER

outside perimeter 69 ±

FT.

DEPTH BELOW INLET

7 1/2 ±

FT.

ABSORBENT AREA

518 ±

SQ. FT.

REMARKS

("1/19/74 Pry Well in general area called for")

DATE SYSTEM APPROVED

11/19/74

INSPECTOR

C. Sherk

*51
18
69*

*7
483
35
518*

*10' 10'
2' 10' 480
8
7 1/2*

APPLICATION

A 18995

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES
P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-5000, EXT. 386

DISTRICT 4th

DATE 9-18-73

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 Steven E. Barnard & Teresa A. Barnard

ADDRESS 302 Redwood Avenue, Frederick Md. PHONE 663-6227

PROPERTY LOCATION:

SUBDIVISION _____ LOT NO. _____

ROAD AND DESCRIPTION Rt. 144 to St. Michaels Road, 1/3 mile on St. Michaels Rd. to intersection on left (gravel road)

SIZE OF LOT 1.098 acres TYPE BLDG. Rambler 3 bedrooms
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

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

SIGNATURE OF APPLICANT Steven E. Barnard

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

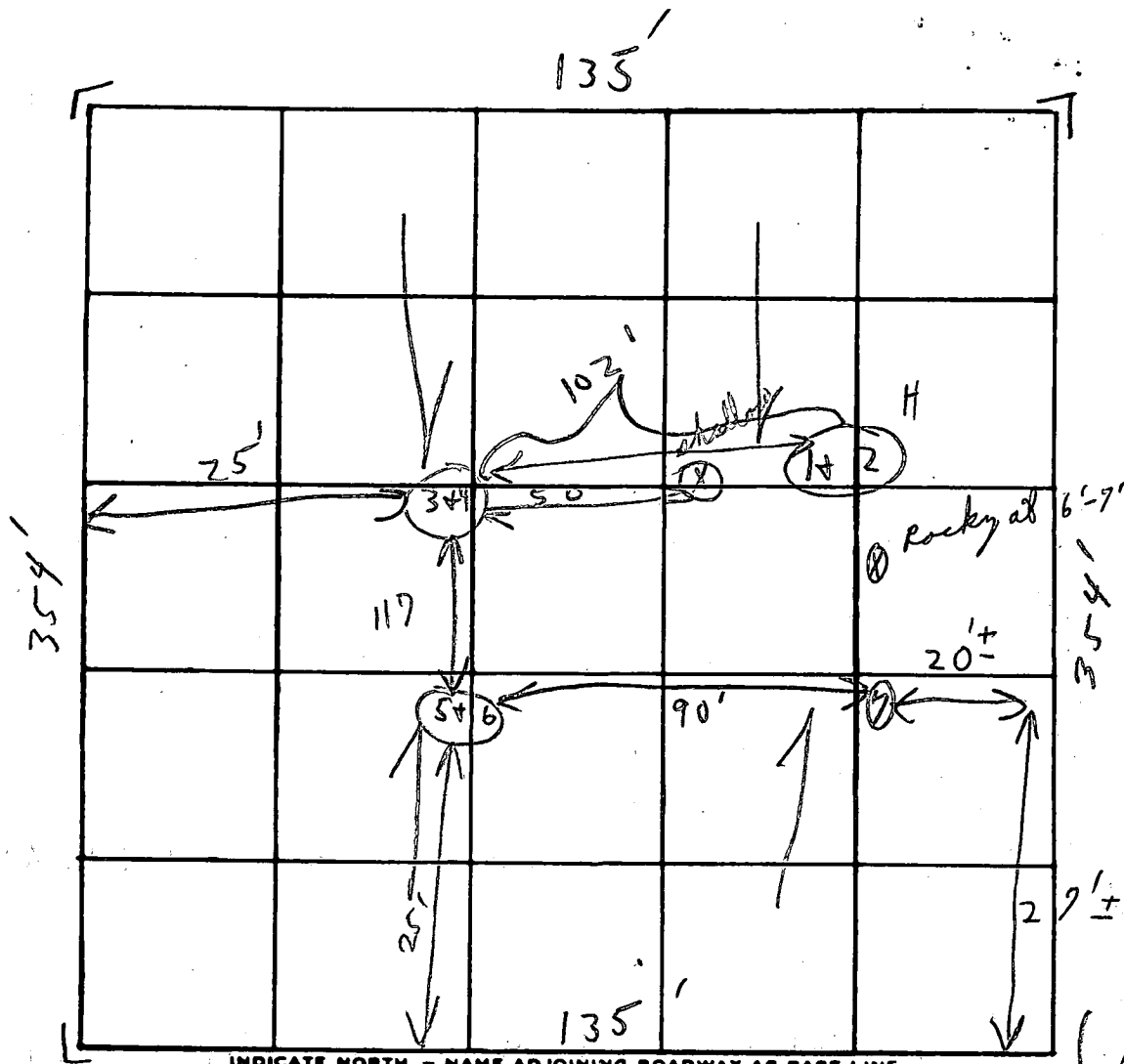
REASONS FOR REJECTION OR HOLDING _____

PLDG. PERMIT SIGNED
AND RETURNED 9/14/74

THIS IS NOT A PERMIT

St Michaels Road
New

Quincy House



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

Rights of Way

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
10/4/73	1	2'	10:08	10:14	10:14	10:26	12 min
	(H) 2	10'	10:09	10:15	10:15	10:30	15 min
	3	3 1/2'	10:27	10:30	10:30	10:45	15 min
	4	10'	10:34	10:36	10:36	10:39	3 min
	5	3 1/2'	10:46	10:48	10:48	10:51	3 min
	6	11 1/2'	10:46	10:48	10:48	10:55	7 min
	7	(8 1/2' deep similar to 5+6)					14 min

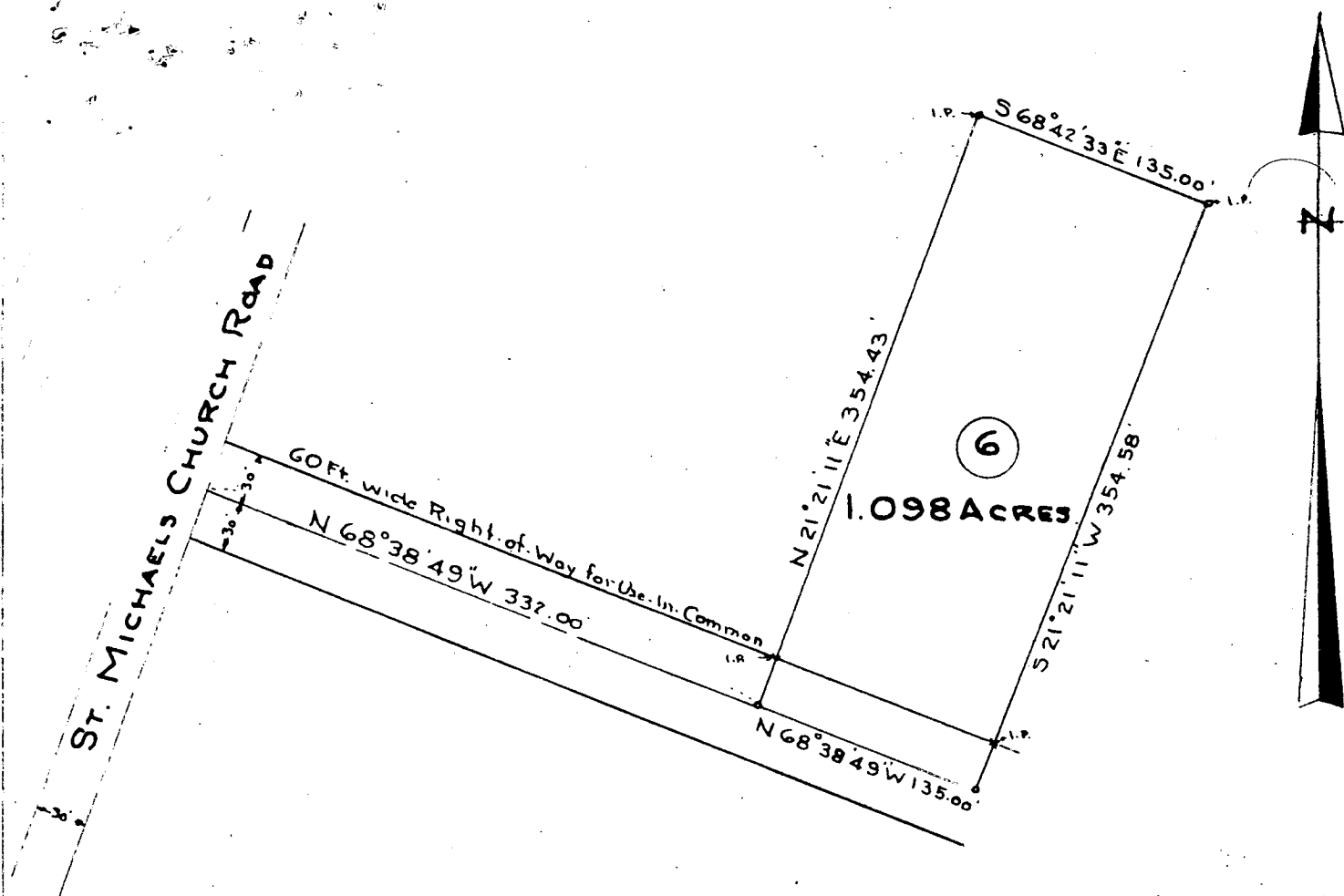
Measure to edge of feature

Solid rock below this

REMARKS

Whaling & Clay

TYPE OF SOIL



PLAT OF SURVEY
FOR
DAYTON B. BARNARD
FOURTH ELECTION DISTRICT OF HOWARD COUNTY
MT. AIRY, MARYLAND.

SCALE: 1 IN. = 100 FT.

MARCH 21, 1972

Claude M. Skinner, Jr.

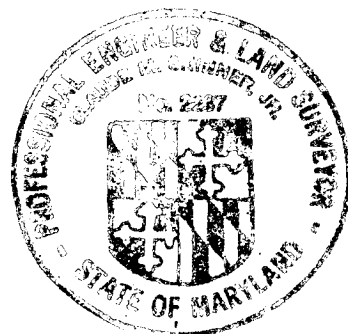
Claude M. Skinner, Jr.
Reg. Professional Engineer &
Land Surveyor No. 2237

Note: The lot shown hereon complies with
the minimum ownership width and lot area
as required by the Maryland State Health
Department Regulations

Approved: Private Water & Private Sewerage

Howard County Health Officer

Date

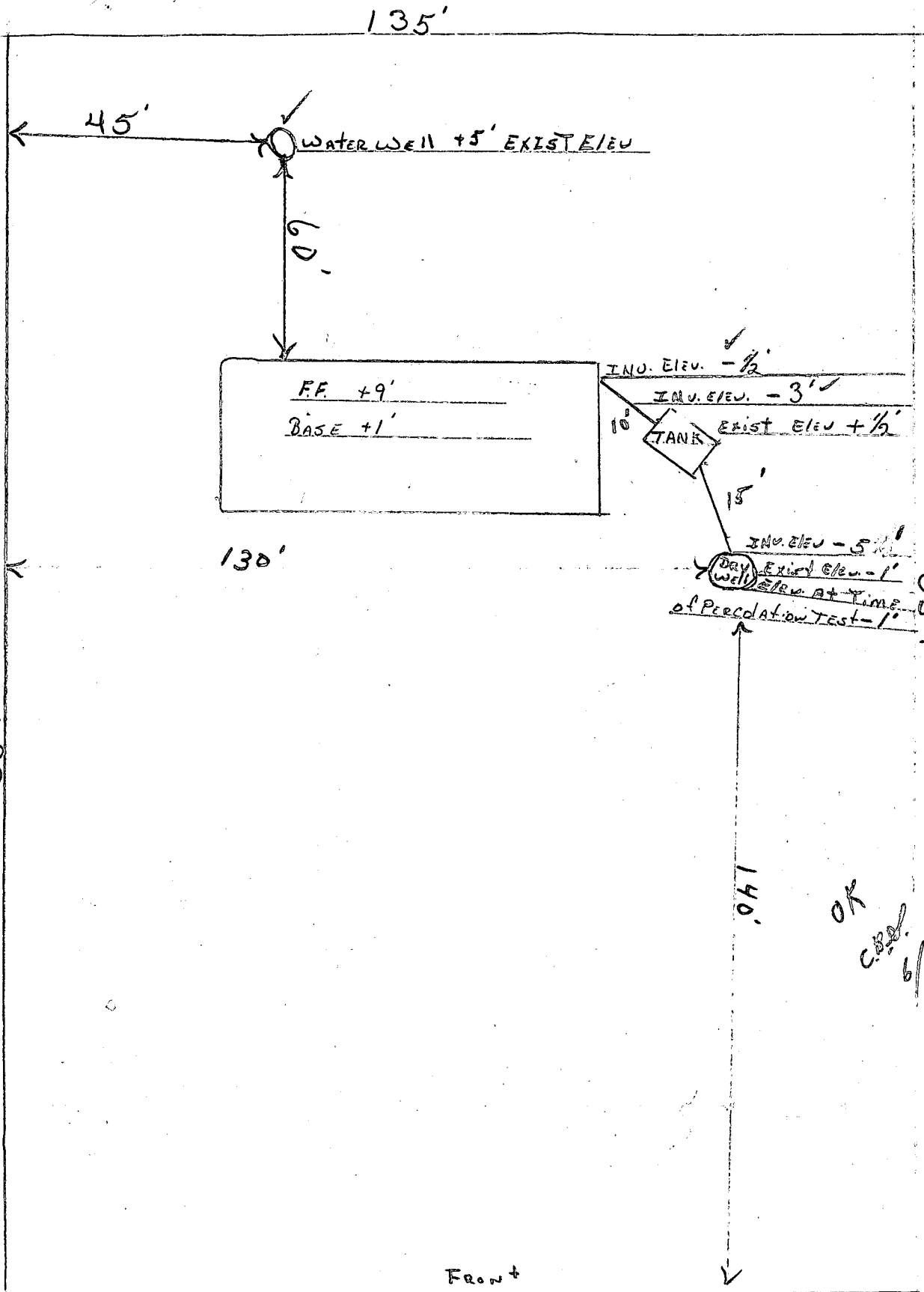


A-3328

Lot 6
Steven E. Barnard

St. Michaels Road

354'



This is to certify that the above measurements and elevations are actual and correct for this property.

Teressa A. Barnard

OK
C.B.B.
6/4/94

C 1 2108 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (WRA USE ONLY) 1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	STATE OF MARYLAND WATER RESOURCES ADMINISTRATION TAWES STATE OFFICE BLDG., ANNAPOLIS, MD. 21401 WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 30 DAYS AFTER WELL COMPLETION FILL IN THIS FORM COMPLETELY COUNTY NUMBER _____
DATE RECEIVED (WRA USE ONLY) Jan 7 1975 DATE WELL COMPLETED	DEPTH OF WELL 72 (TO NEAREST FOOT)	PERMIT NO. FROM "PERMIT TO DRILL WELL" H0-73-0943 28 29 30 31 32 33 34 35 36 37	
OWNER BARNARD LAST NAME STREET OR RFD 1023 St. Michaels Rd.		FIRST NAME Steven E. POST OFFICE Mt. Airy, Md.	

WELL LOG STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)</th> <th colspan="2">FEET</th> <th rowspan="2">CHECK IF WATER BEARING</th> </tr> <tr> <th>FROM</th> <th>TO</th> </tr> </thead> <tbody> <tr> <td>Shale Rock</td> <td>0</td> <td>21</td> <td></td> </tr> <tr> <td>Flint Rock</td> <td>21</td> <td>72</td> <td></td> </tr> </tbody> </table>	DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)	FEET		CHECK IF WATER BEARING	FROM	TO	Shale Rock	0	21		Flint Rock	21	72		GROUTING RECORD YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> WELL HAS BEEN GROUTED (CIRCLE APPROPRIATE BOX) TYPE OF GROUTING MATERIAL (CIRCLE BOX) CEMENT <input checked="" type="checkbox"/> BENTONITE CLAY <input type="checkbox"/> NO. OF BAGS 5 NO. OF POUNDS 470 GALLONS OF WATER 30 DEPTH OF GROUT SEAL (TO NEAREST FOOT) FROM 0 FT. TO 21 FT. (ENTER 0 IF FROM SURFACE) CASING RECORD INSERT APPROPRIATE CODE BELOW STEEL <input checked="" type="checkbox"/> CONCRETE <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/> MAIN CASING TYPE ST NOMINAL DIAMETER TOP (MAIN) CASING (NEAREST INCH) 6 TOTAL DEPTH OF MAIN CASING (NEAREST FOOT) 23 OTHER CASING (IF USED) DIAMETER (INCH) _____ DEPTH (FEET) FROM _____ TO _____ SCREEN RECORD INSERT APPROPRIATE CODE BELOW STEEL <input checked="" type="checkbox"/> BRASS <input type="checkbox"/> OPEN HOLE <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER <input type="checkbox"/> C 2 (SEQ. NO.) 6 DEPTH (NEAREST WHOLE FOOT) FROM 21 TO 72 SLOT SIZE 1. _____ 2. _____ 3. _____ DIAMETER OF SCREEN _____ (NEAREST INCH) GRAVEL PACK _____ IF WELL DRILLED WAS A FLOWING WELL CIRCLE BOX F WRA USE ONLY (NOT TO BE FILLED IN BY DRILLER) (E.R.O.S.) TELESCOPE CASING <input type="checkbox"/> LOG INDICATOR <input type="checkbox"/> OTHER DATA AVAILABLE <input type="checkbox"/>	PUMPING TEST C 3 (SEQ. NO.) 76 HOURS PUMPED (TO NEAREST HOUR) 2 PUMPING RATE (GALLONS PER MINUTE TO NEAREST GALLON) 10 METHOD USED TO MEASURE PUMPING RATE Baler WATER LEVEL: (DISTANCE FROM LAND SURFACE) BEFORE PUMPING 35 (NEAREST FOOT) WHEN PUMPING 0 (NEAREST FOOT) TYPE OF PUMPED USED (CIRCLE APPROPRIATE BOX) (FOR PUMPING TEST) AIR <input type="checkbox"/> PISTON <input type="checkbox"/> TURBINE <input type="checkbox"/> CENTRIFUGAL <input type="checkbox"/> ROTARY <input type="checkbox"/> OTHER (DESCRIBE BELOW) <input type="checkbox"/> JET <input type="checkbox"/> SUBMERSIBLE <input type="checkbox"/> Baler PUMP INSTALLED TYPE OF PUMP (WRITE APPROPRIATE LETTER IN BOX - SEE ABOVE: A, C, J, P, R, S, T, O) DRILLER WILL INSTALL PUMP (CIRCLE APPROPRIATE BOX) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> CAPACITY: GALLONS PER MINUTE (TO NEAREST GALLON) _____ PUMP HORSE POWER _____ PUMP COLUMN LENGTH (NEAREST FOOT) _____ CASING HEIGHT (CIRCLE APPROPRIATE BOX AND ENTER CASING HEIGHT) ABOVE <input checked="" type="checkbox"/> BELOW <input type="checkbox"/> LAND SURFACE 2' (NEAREST FOOT) LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS BUILDINGS, SEPTIC TANKS, AND/OR OTHER LAND MARKS AND INDICATE NOT LESS THAN TWO DISTANCES (MEASUREMENTS TO WELL). Well 32' Back
DESCRIPTION (USE ADDITIONAL SHEETS IF NECESSARY)		FEET			CHECK IF WATER BEARING											
	FROM	TO														
Shale Rock	0	21														
Flint Rock	21	72														

Ernest Moore

854-6019

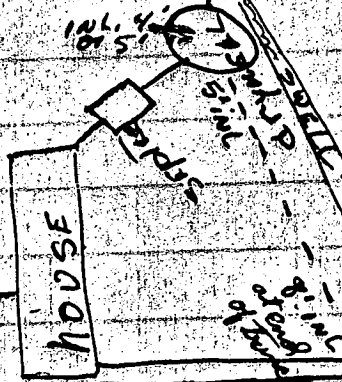
1023 S Mich Rd

Mt. Airy, N.C. 2171

Howard County Map

page 2 K-9

Prop. Line



Barnard

Barnard

#1023

Prop. Line

3rd

Barnard

2nd

1027

Larry Barnard

1031

1st

Barnard

Larry Monday

#1029

St. Michaels Rd

3 bedrooms
2 Baths
no Disposal
Basement
plumbing