

5/12/97
10:00 AM
6/10/97
tank only
pmco.
6/16/97
12:00 PM
6-17-97 by noon
PERMIT
SEWAGE DISPOSAL SYSTEM
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
INDEXED

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXX-XXXX~~

313-2640

05-42224

P 58/26B

A 49860K

DISTRICT 5th

DATE 5/2/97

DATE SYSTEM APPROVED 6/17/97

INSPECTOR DKS

Fogle's Septic Clean, Inc.

IS PERMITTED TO INSTALL X ALTER

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

SUBDIVISION Springdale LOT 5 ROAD 13720 Springdale Drive

PROPERTY OWNER Gary Rubloff

ADDRESS

SEPTIC TANK CAPACITY 1250 GALLONS

NUMBER OF BEDROOMS 4

180 SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED 240

TRENCHES - Trench to be 3 feet wide. Inlet 2½ feet below original grade. Bottom maximum depth 4½ feet below original grade. Effective area begins at 2½ feet below original grade. 2 feet of stone below distribution pipe.

LOCATION - Place the distribution box 120 feet up the right lot line and 100 feet off this same lot line as seen when facing the lot from Springdale Drive. Run trenches on contour in both directions.

NOTES - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK 1/30/97 DKS

PLANS APPROVED BY Donna K. Soe

DATE 01/28/97

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

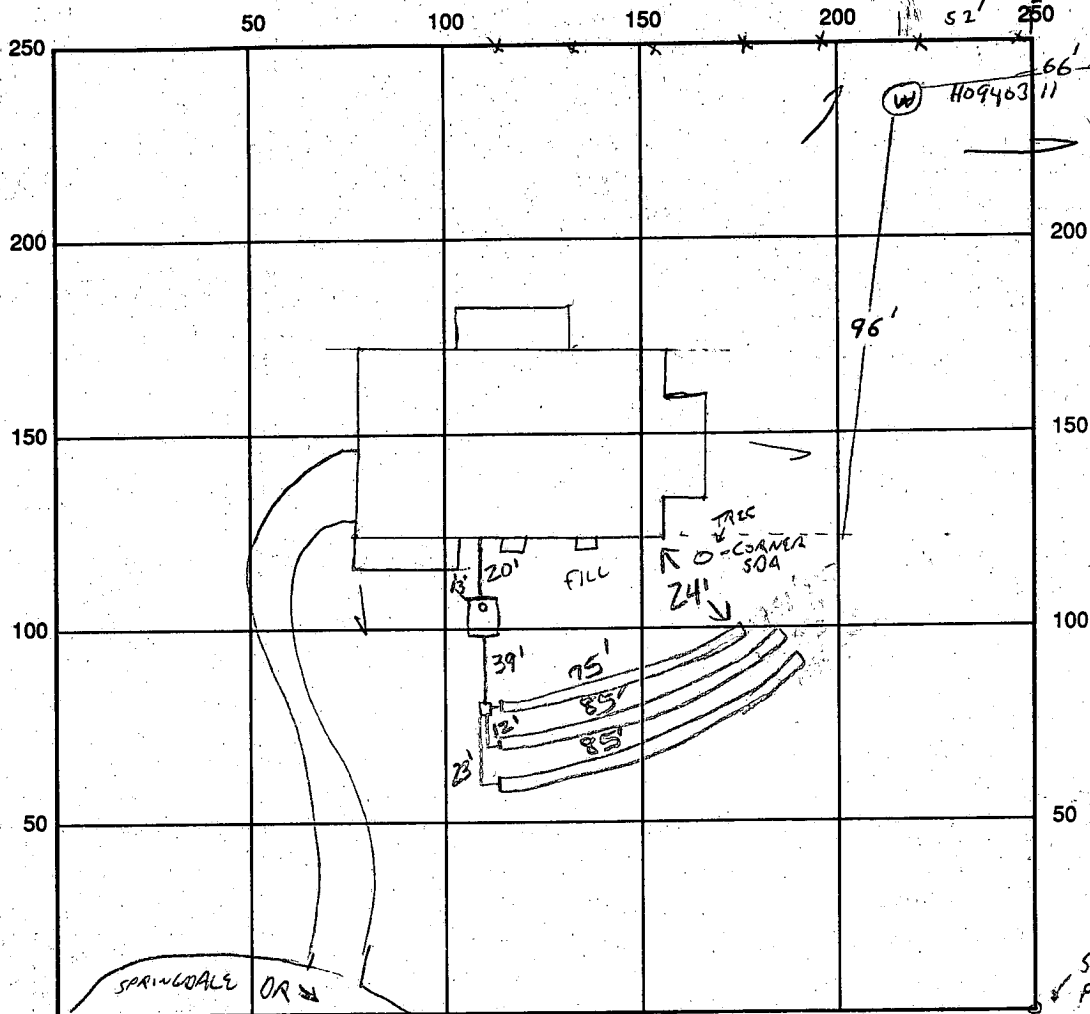
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

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

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

SEPTIC TANK LEVEL OK, 1250 GAG CLEANOUTS one on s.t.

DISTRIBUTION BOX LEVEL OK, baffle in

DRAIN FIELD/TITLE DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 2.5 FT.

EFFECTIVE GRAVEL DEPTH 2.0 FT. TOTAL LENGTH 75 2x85 FT. 245'

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 735 SQ. FT.

DRYWALL INSIDE DIAMETER FT. EFFECTIVE DEPTH BELOW INLET FT.

ABSORBENT AREA SQ. FT.

REMARKS: 5/14/97 TANK NOT CONNECTED 6/9/97 SITE WALKOVER, 4-5' FILL TO
BE REMOVED IN 20' STRIP ALONG UPPER EDGE SOA, CONTRACTOR VERIFIED HOUSE CONNECTION

OK, SS

6-16-97 OK to cover 1st and 2nd trench, leave ends of 3rd trench open (VMI)

6/10/97 NO well line work seen. DKS

6-16-97 WPI OK to cover, P.A. 3.5' below grade, casing 2.5' above grade, needs 2 pc cap (Fes)

DATE SYSTEM APPROVED 6/17/97 INSPECTOR [Signature]

4/17/97 FINAL INSPECTION - OK to cover all work DKS

APPLICATION

PERCOLATION TESTING

A 49860K

P _____

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

DISTRICT _____

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.

PROPERTY OWNER GARY Rubloff

ADDRESS _____ PHONE _____

PROSPECTIVE BUYER _____

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION Springdale LOT NO. 6 5 on perc cert

ROAD AND DESCRIPTION 13720 Springdale Court

TAX MAP _____ PARCEL # _____

SIZE OF LOT _____ TYPE BLDG SFD - 4Brm
(SINGLE FAMILY DWELLING OR COMMERCIAL)

BLDG. PERMIT SIGNED

AND RETURNED 1/28/97

Serial # 10345

SFD - 4Brm

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 _____

HD-216

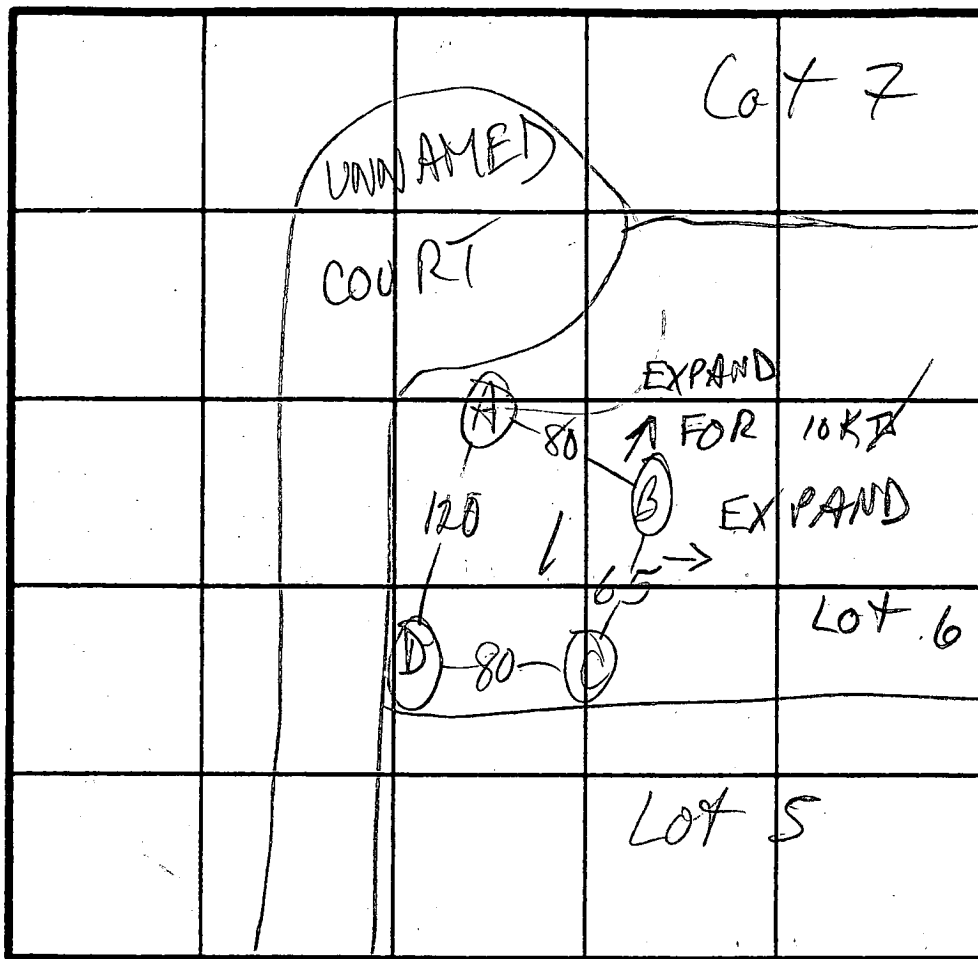
THIS IS NOT A PERMIT

A49860 K

Lot 6

ALL HOLES
SOIL PROFILEred brn
Fine sa
cl 1mtan
org
sa mica
1m
5-15%
frags.

1 1/2 - 3 1/2"



BRIGHTON DAM RD

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
3/7/94	A S	3 1/2	10:42	10:43	10:43	10:44	1
11	A V	11'4"					
	B S	3 1/2	10:48	10:49	10:49	10:52	3
	B M	7	10:48	10:49	10:49	10:52	3
	B V	11					
	C S	3	10:58	10:59	10:59	11:00	1
	C M	7	10:57			10:59	FAST
	C V	7 1/2	11:01	11:03	11:03	11:05	2
	D S	4	11:05	11:06	11:06	11:08	2
	D V	12					

REMARKS

HOLES PER PLANT

TYPE OF SOIL

TESTED BY

M. Ripkin

ALSO PRESENT

L. Allen, R. Demmitt

C1 3513

SEQUENCE NO.
(DENV USE ONLY)STATE OF MARYLAND
WELL COMPLETION REPORTFILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER

A49860K

ST/CO USE ONLY
DATE Received

1	2	3	4	5	6
8					13

DATE WELL COMPLETED

022395

Depth of Well

22 400 26
(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

HO-94-0311

OWNER Demmitt Richard
last name first name
STREET OR RFD Springdale Dr TOWN Clarksville
SUBDIVISION SPRINGDALE SECTION 5 LOT 5

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARINGDESCRIPTION (Use
additional sheets if needed)FEET
FROM TOCheck
if water
bearing

SAND 0 80
FLINT GRAVEL 80 120 ✓
FLINT + SAND mixed 120 170 ✓
GRAY MICA ROCK 170 400 ✓

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)yes ☒ Y no ☐ N

TYPE OF GROUTING MATERIAL

CEMENT ☒ CM BENTONITE CLAY ☐ BC

NO. OF BAGS 34 NO. OF POUNDS 3196

GALLONS OF WATER 304

DEPTH OF GROUT SEAL (to nearest foot)

from 0 ft. to 105 ft.
48 TOP 52 BOTTOM 58
(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
belowST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN CASING TYPE Nominal diameter
top (main) casing
(nearest inch) Total depth
of main casing
(nearest foot)ST 6 176
60 61 63 64 66 70

OTHER CASING (if used)

diameter depth (feet)
inch from to

screen type
or open hole

SCREEN RECORD

insert
appropriate
code
belowST BR HO
STEEL BRASS OPEN
HOLE
PL OT
PLASTIC OTHER

C2

DEPTH (nearest ft.)	
1 40	11 173
2 17	15 400
3 21	25 36
4 36	41 51
5 47	53 55
6 55	57 59
7 59	61 63
8 63	65 67
9 67	69 71
10 71	73 75
11 75	77 79
12 79	81 83
13 83	85 87
14 87	89 91
15 91	93 95
16 95	97 99
17 99	101 103
18 103	105 107
19 107	109 111
20 111	113 115
21 115	117 119
22 119	121 123
23 123	125 127
24 127	129 131
25 131	133 135
26 135	137 139
27 139	141 143
28 143	145 147
29 147	149 151
30 151	153 155
31 155	157 159
32 159	161 163
33 163	165 167
34 167	169 171
35 171	173 175
36 175	177 179
37 179	181 183
38 183	185 187
39 187	189 191
40 191	193 195
41 195	197 199
42 199	201 203
43 203	205 207
44 207	209 211
45 211	213 215
46 215	217 219
47 219	221 223
48 223	225 227
49 227	229 231
50 231	233 235
51 235	237 239
52 239	241 243
53 243	245 247
54 247	249 251
55 251	253 255
56 255	257 259
57 259	261 263
58 263	265 267
59 267	269 271
60 271	273 275
61 275	277 279
62 279	281 283
63 283	285 287
64 287	289 291
65 291	293 295
66 295	297 299
67 299	301 303
68 303	305 307
69 307	309 311
70 311	313 315
71 315	317 319
72 319	321 323
73 323	325 327
74 327	329 331
75 331	333 335
76 335	337 339
77 339	341 343
78 343	345 347
79 347	349 351
80 351	353 355
81 355	357 359
82 359	361 363
83 363	365 367
84 367	369 371
85 371	373 375
86 375	377 379
87 379	381 383
88 383	385 387
89 387	389 391
90 391	393 395
91 395	397 399
92 399	401 403
93 403	405 407
94 407	409 411
95 411	413 415
96 415	417 419
97 419	421 423
98 423	425 427
99 427	429 431
100 431	433 435

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

from to

GRAVEL PACK IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68MDE USE ONLY
(NOT TO BE FILLED IN BY DRILLER)

T (E.R.O.S.)

70 72

TELESCOPE
CASINGLOG
INDICATOR

W Q

74 75 76

OTHER DATA

C3

1 2

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 6

METHOD USED TO MEASURE PUMPING RATE Bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 43

WHEN PUMPING 220

TYPE OF PUMP USED (for test)

A air P piston T turbine

C centrifugal R rotary O other (describe below)

J jet S submersible

PUMP INSTALLED

DRILLER WILL INSTALL PUMP YES NO

IF DRILLER INSTALLS PUMP, THIS SECTION
MUST BE COMPLETED FOR ALL WELLS
EXCEPT HOME USE

TYPE OF PUMP INSTALLED

PLACE (A,C,J,P,R,S,T,O)

IN BOX - SEE ABOVE:

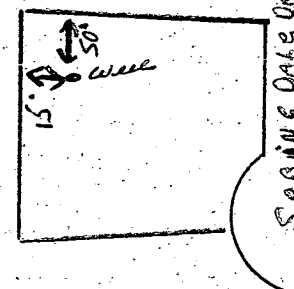
CAPACITY:

GALLONS PER MINUTE
(to nearest gallon)

PUMP HORSE POWER

PUMP COLUMN LENGTH
(nearest ft.)CASING HEIGHT (circle appropriate box
and enter casing height)+ above } LAND SURFACE 3 (nearest foot)
- below }

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).IN HARD ROCK AREAS, IDENTIFY SPECIFICALLY
WHERE SATURATED FRACTURES WERE OBSERVED.

WELL HYDROFRACTURED

yes ☒ Yno ☐ N

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED
WHEN THIS WELL WAS COMPLETED

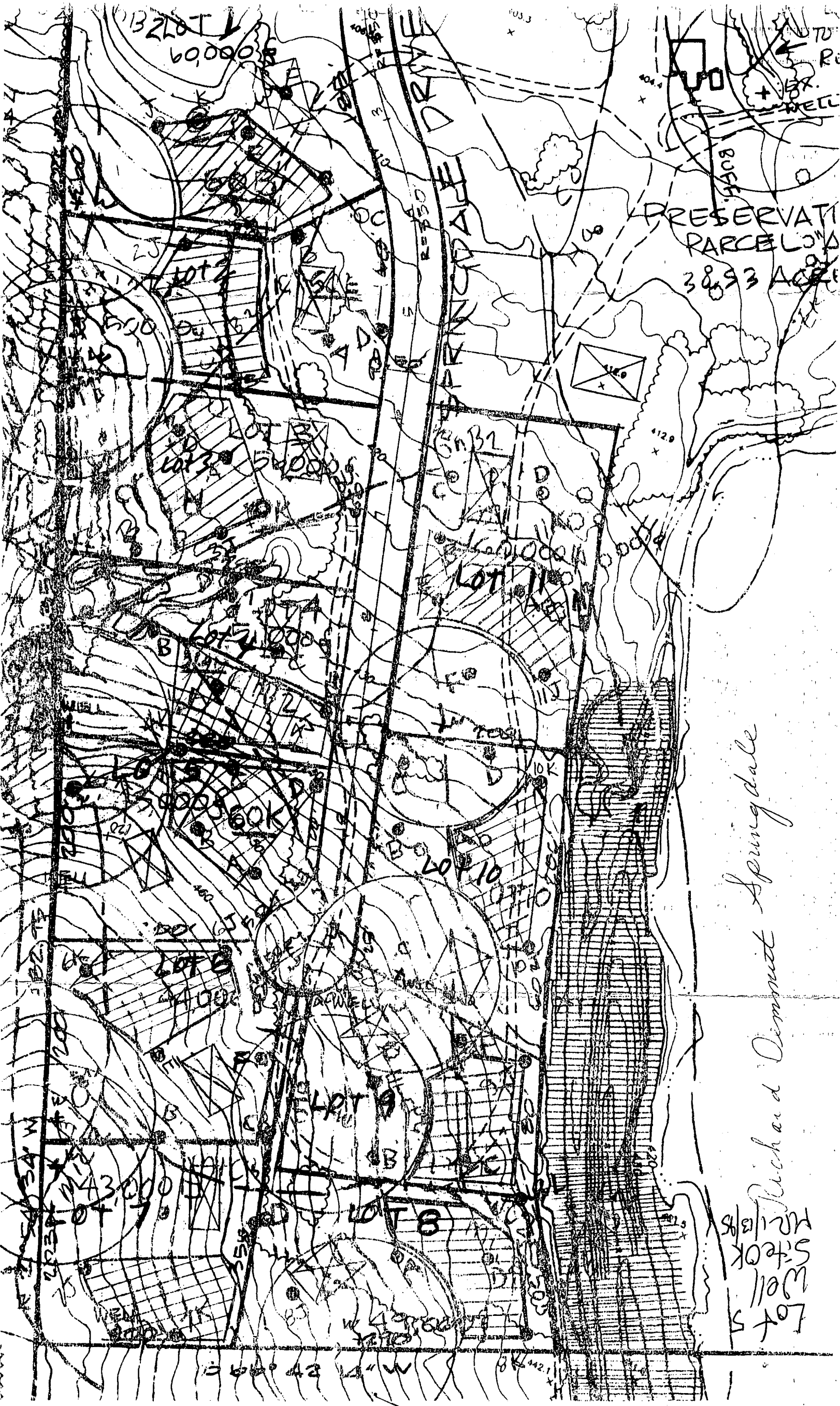
E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION
WELLI 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 PRE-
SENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF
MY KNOWLEDGE.

DRILLERS IDENT. NO. 24

DRILLER'S SIGNATURE
(MUST MATCH SIGNATURE ON APPLICATION)SITE SUPERVISOR (sign. of driller or journeyman
responsible for sitework if different from permittee)

COUNTY



Lot 5
Well
Site
Mar 13/8
Richard Dimmitt Springdale

APPROVED SEPTIC SYSTEM
HOWARD COUNTY HEALTH DEPARTMENT

Donna K. [Signature]

Signature

1/28/97

Date

Septic Grades & Elevations

	Inv.	Grade
INVERT AT HOUSE	455.0	460.0
INVERT AT ENTRANCE TO TANK	454.75	
INVERT AT EXIT FROM TANK	454.5	
INVERT AT DISTRIBUTION BOX	453.0	456.0
	453.5	

G.P.#

SITE PLAN

SCALE: 1" = 50'

DATE: 1.7.97

RUBLOFF RESIDENCE

LOT 5-5

