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No # found in Real Pap. Season PERMIT

P 37/86

REPAIR

## SEWAGE DISPOSAL SYSTEM MARYLAND STATE DEPARTMENT OF HEALTH'

#### HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

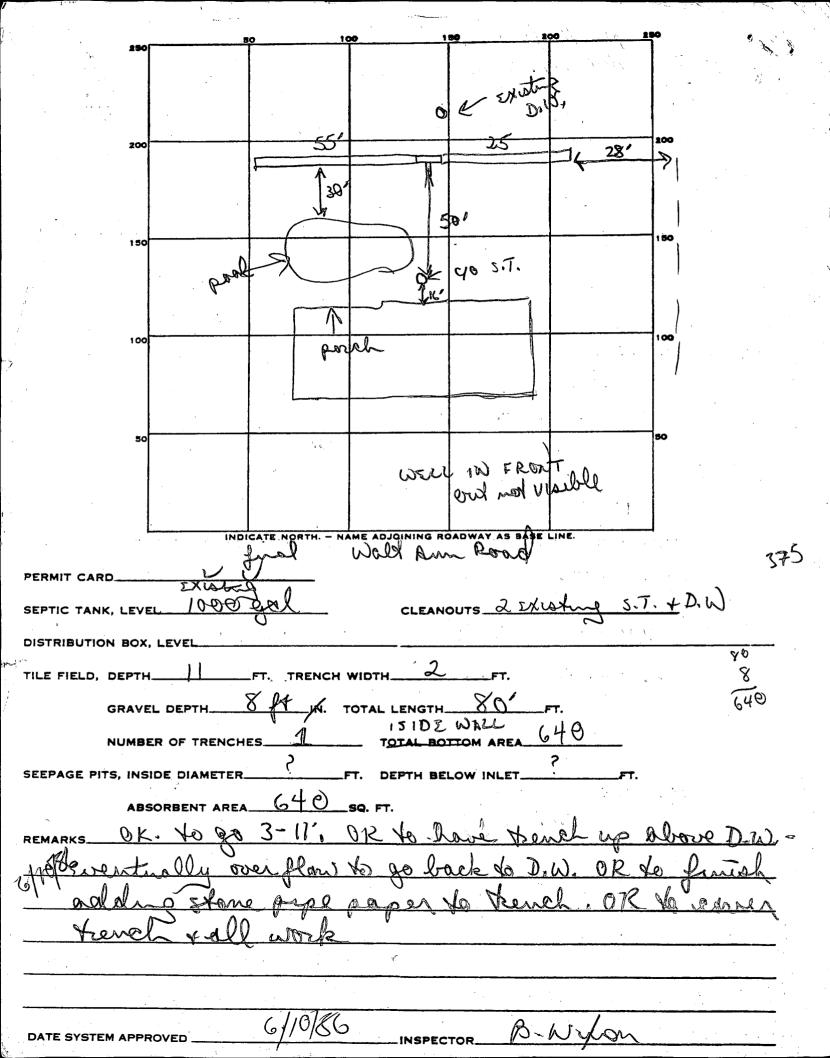
INDEXED

DISTRICT\_\_\_\_

DATE 4/14/80

Já	ack Fyock		IS PERMITTED	TO INSTALL	ALTER X
				000_02	7.0
ADDRESS			in the second second	NE988-92	
SUBDIVISION Sheppare	ds Glenn	ROAD		LOT	1/9
PROPERTY OWNER	Anthony				
ADDRESS	3836 Walt Anne Dr.				· · · · · · · · · · · · · · · · · · ·
IF GARBAGE GRINDER IS	USED INCREASE SEPTIC TANK	CAPACITY BY 50% AN	D ABSORPTION AREA	A BY 22%.	
GARBAGE GRINDER? Y	res NO				
	1000 GALLONS		омѕ 🕙		
REPATI	R- CALL FOR INSPECTI	ON WHEN GROUND	IS OPENED UP	SO SANITARI	AN CAN
RECOM	MEND REPAIR				
	System 18.	yrans old	) ·	t in a second	· · · · · · · · · · · · · · · · · · ·
	312 40 98 3	-11' - 50	ls predo	minatele	selly /
·	laron	Dolan De	& lormas	clau I	auer C
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				· · · · · · · · · · · · · · · · · · ·	
PLANS APPROVED BY Sidne	ey Abel			DATE5/.	29/86
COVER NO WORK UNTIL INSI					
NEITHER THE HOWARD COUL	NTY COUNCIL NOR THE HEALTH DE	EPARTMENT IS RESPONSI	BLE FOR THE SUCCESSI	FUL OPERATION OF A	NY SYSTEM.
NOTE: IF TRENCH IS USED	CALL FOR INSPECTION BEFORE AM	ND AFTER PLACING GRAV	EL IN TRENCH.		<b>``</b>
NOTE: NO DRY WELL SHAL	L EXCEED 15 FOOT IN DIÂMETER.	NO ABSORPTION TRENCH	TO EXCEED 100 FEET	IN LENGTH:	•
NOTE: ALL PIPE FROM HOL	JSE TO SEPTIC TANK MUST BE CA	ST IRON OR SCHEDUĻE 44	PVC OR ABS		
PERMIT VOID AFTER THREE Y	'EARS.				
NOTE: INSTALL STAND PIP	E ON SEPTIC TANK AND DRY WELL	. STAND PIPES MUST BE 6	INCHES IN DIAMETER.	CAST IRON, CONCRET	E OR TERRA COTTA, C
BVC OR ARS ACCER	TED IE TOP OF SEPTIC TANK IS DE	EPPER THAN 3 FEET MANI	IOLE TO GRADE RECUI	RED	

\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT



## PERMIT

09612

#### SEWAGE DISPOSAL SYSTEM MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

**ELLICOTT CITY** 

DISTRICT.

•		MDEXE		DATE 9/8/66
	. •			
Waj	ter A. Shank		IS PERMITTED TO INS	TALL X ALTER
DDRESS AVOC	a Ave., Ellicot	t City, Md.	PHONE	но 5-3464
SEWAGE DISPOSAL-	SYSTEM LOCATED AT			
UBDIVISION Sher	herds Glen	3/2 ROAD_	3/ Walt-Ann Drive	
ROPERTY OWNER	same as abo	ve M. + Mus	. Tony anthi	ny.
DDRESS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
SPECIFICATIONS - 4	bedrooms			
DRAIN	FIELD DEPTH	FEET, BOTT	OM AREA	_SQ. FT.
SEEPA	GE PITS ABSO	ORBENT SIDE-WALL	AREASQ. F	т.
	SEPTIC TA	NK CAPACITY1	000 GALLONS	
FOR	GARBAGE GRINDER, I	NCREASE DISPOSAL	AREA 22% & TANK CA	PACITY 50%.
from the front	property line a	nd 80 ft. off	the left side proj	t. located 205 ft. perty line as seen ft. below original
grade.	e 10t 110m rolly	quarter Diale		
			8	
				• .
PLANS APPROVED BY	J. Hennigan		DATE 5/27/65	

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.

NOTIFY THE HEALTH DEPARTMEN BACK BE

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	INDI	CATE NORTH - NA	ME ADJOINING RO	DADWAY AS BASE	LINE.	
		W	alt Clan	Dure		
PERMIT CARD	2 K	<del></del>	\$			
SEPTIC TANK, LE	VEI 0 12		CLEAN	OUTS 6	K	
SEPTIC TANK, LE	V =		CLEAN	0013		<del></del>
DISTRIBUTION BO	X, LEVEL					<del></del>
δ .	8			<b>c</b> .		
TILE FIELD, DEP	гн	FT. TRENCH	WIDTH	FT.		
GRA	VEL DEPTH	IN. T	OTAL LENGTH		FT.	
						ų
NUM	BER OF TRENCHE	s	TOTAL BO	TTOM AREA		
Dutla	pt did will	/4/ F	Т. DEPTH BE		1/3	
SEEPAGE PITS, IN	ISIDE DIAMETER	F	I. DEPTH BE	LOW INLE	F1.	
A	BSORBENT AREA	485	SQ. FT.		6.	
• •		the second of	- 18 · · ·	e e e e e e e e e e e e e e e e e e e		
REMARKS		S	6,7,8			
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		elec		TOR SULL	n 1	
DATE SYSTEM AP	PROVED 20/19	100	INSPEC	TOR_4////	conage Ru	<del></del>

# APPLICATION

SEWAGE DISPOSAL TESTING

A	09612	
-		

MARYLAND STATE DEPARTMENT OF HEALTH

	3 bedara	ors)			LICOTT ISTRICT_	
Day well.	12 Hinden	by 9FT. de	les belo	with	DATE_	2/8/65
- N		from the	front f			1
and 80 ft.	770	side popul		e Est Se	//	
fame the		olly Burn	the Fr	ive. Joa	ales do	let
Ob 181 Celow	or final gr	( )	30 Gal	. aglac	fank,	
		4 bedroo	<del></del>			
THE COUNTY HEALTH OFFICE ELLICOTT CITY, MARYLAND	Same as a	love with	There ex	reptions)	and by	rell 13 fg 11 fg Baz
I, HEREBY, APPLY FOR THE OSAL SYSTEM.	NECESSARY TEST	S IN ORDER T	O CONSTRU	CT (OR RE	CONSTRUC	T) A SEWA
OJAL OTOTEM			1	<b>.</b>		•
PERTY OWNER Walter	A. Shank		*	<u> </u>		
ADDRESS Avoca Ave.	. Ellicott Ci	ty. Md.	./ Э <b>p</b>	HONE HO	5-3464	
ADDICESS			. 1			
PERTY LOCATION:	•	·	\$	A STATE OF THE STA		
DIVISION KXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	CXV Shanhards	Glan		O) NO	1 A	
D AND DESCRIPTION To	(XXAXØRRKKKX)	WXWXX Walt-	-Ann Driv	re	·	· · · · · · · · · · · · · · · · · · ·
D AND DESCRIPTION To	<b>(XX</b> #XØ####X	0xxvxX Walt-	-Ann Driv	7e		
UPANT			-Ann Driv	PHONE		
UPANT	10 10 NO NO NO		-Ann Driv	PHONE	1	· · · · · · · · · · · · · · · · · · ·
UPANT	10 10 NO NO NO	2011	-Ann Driv	PHONE	· · · · · · · · · · · · · · · · · · ·	
UPANTSON TO CONSTRUCT SYSTEM.	10:21 10:2	2011		PHONE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
UPANT	10:21 10:2	2011		PHONE	3 or 4	
ADDRESS OF LOT 1.00 acre	10:21 10:2			PHONE	3 or 4	SEDROOMS.
UPANT				PHONE	3 or 4	SEDROOMS
OF LOT 1.00 acre				PHONE	3 or 4	BEDROOMS
OF LOT 1.00 acre				PHONE	3 or 4	SEDROOMS'
OF LOT 1.00 acre				PHONE	3 or 4 NUMBER OF E	BEDROOMS
UPANT SON TO CONSTRUCT SYSTEM ADDRESS OF LOT 1.00 acre OT SINGLE RESIDENCE DESCRI	RIBE	Shank		PHONE PHONE BLDG	3 or 4	BEDROOMS
OF LOT 1.00 acre	RIBE	Shank		PHONE	3 or 4 NUMBER OF E	BEDROOMS
UPANT SON TO CONSTRUCT SYSTEM ADDRESS OF LOT 1.00 acre OT SINGLE RESIDENCE DESCRI	RIBE /s/ Walter A.	Shank	TYPE	PHONE PHONE BLDG	3 or 4 NUMBER OF E	SEDROOMS
ADDRESS  OF LOT 1.00 acre  OT SINGLE RESIDENCE DESCRIPTIONS  ROVED BY	RIBE /s/ Walter A.	Shank	TYPE	PHONE BLDG.	3 or 4 NUMBER OF E	BEDROOMS
ADDRESS  OF LOT 1.00 acre  OT SINGLE RESIDENCE DESCRIPTIONS  ROVED BY	RIBE /s/ Walter A.	Shank	TYPE	PHONE BLDG.	3 or 4 NUMBER OF E	SEDROOMS

# THIS IS NOT A PERMIT

200 RECAL/ED HOWARD BOUNTY HEALIEL TO (2,75,765 FO nct 17 3 38 88 '68 150 ٠.... DIVISION OF ENVIRORMENTAL HEALIT (3,4 100 100 1031.1 1.00V45 50 - 50 4.5

SISTO

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

DA	TE	TEST NO.	DEPTH	PRE- START	WET STOP	TEST - 1 START	" DROP STOP	TIME
-24-	65	- Same	6'	1150	12:01	12:01	12:07	6%
	1.	2/P	11	ł ·		12:00	12:10	97
		3 Same	61	11:59	12.10	12:10	12:23	13%
	40	4/14	11'	12:04	12:67	12:07	12:13	10.6
		<b>7</b>						
	- •						•	
-				: Bright	. <u>40</u> 1	1. N. J. J.		
	,							
				2.				

SOIL AUGER FINDING TESTED BY

ar. Peru Time 8.3 Min

# WR-W-3 7-65 State Office Building ANNAPOLIS, MARYLAND 21401

#### STATE OF MARYLAND

## DEPARTMENT OF WATER RESOURCES

APPLICATION MUST BE SUBMITTED AND PERMIT RECEIVED BEFORE DRILLING IS STARTED.

APPLICATION FOR P	ERMIT TO DRILL WELL #747
A	
Owner Walter Shank	Driller License License 58
Street or R. F. D. Ellicott City Ma	1
Post Office Flical Continue	Date
Quantity of Water to be ProducedG.P.M.	Subdivision Shepherds Glev
Total Quantity Needed For Use	SectionLot14
Use for Water	County Hondand
Approximate Depth of Well (feet)	Nearest Town Glenera  Distance from Town 3/4 Mile
Method of Drilling to be used Spudel ex	Direction from Town
Is this a Replacement Well? — No  If YES, indicate date abandoned well is to be	Description of Location of Well  (This information should be definite enough to permit locating well on a county map).
sealed:	Near what road Walt - ANN Drive
and by whom:	On which side of road (North, East, South, West)
PERMIT TO DRILL WELL (Not To Be Filled In By Driller)  Well Permit No. Ho - 67 - W - 45	Distance from road Approx 110 Fee, Draw a sketch below showing location of well in relation to nearby towns, roads and streams with north in the direction of the arrow, and give distance from well to nearest road junction or stream crossing shown on the sketch.
Samples of Cuttings Required by Department: Yes No Owner Requires Permit to Appropriate Water: Yes No Owner Has Permit to Appropriate Water: Yes No	NORTH
Appropriation Permit No.  The applicant is herewith granted a permit to drill this well subject to the conditions stipulated.  Saul W. Miles	
Director Date  THIS PERMIT IS NOT TRANSFERRABLE  WITHOUT WRITTEN PERMISSION FROM THE DEPARTMENT	
Special conditions that must be observed:	
	Glenela Innatatotica Ro
	Well 2
Health Department Approval of Application  County Department of Health	
or State Department of Health	Aur Aur
Title Distry, Engineeral Political P	S work

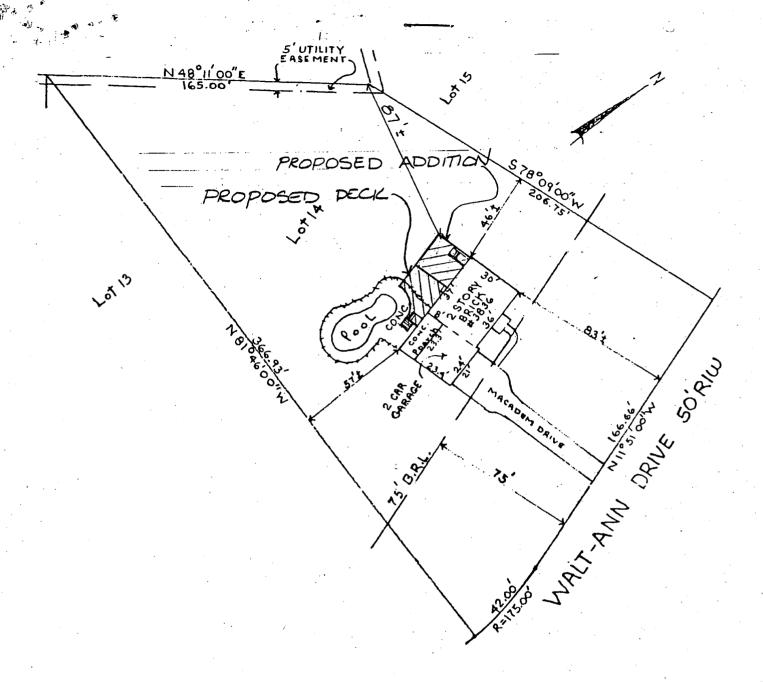
#### STATE OF MARYLAND

## DEPARTMENT OF WATER RESOURCES

THIS REPORT
MUST BE SUBMITTED
WITHIN 30 DAYS
AFTER COMPLETION
OF THE WELL

WELL COMPLETION REPORT

			TREE LAND O		
	WELL	DESCRIPTION		4 7 3 A C 4 A	Permit Number HO 67 W 45
WELL LOG State the kind of formations pend color, their depth, their thickness, bearing		CASING AND SC State the kind and size liner, screen, an no casing used, give dia	and position d other acce	of casing, ssories (if	Owner Welter Show!  Address Ellicoti City Md.  Subdivision Sheaherds Clew  Section Lot 19
top Soil	FEET from to	ater water coallis	DIAM. (inches)	FEET from to	PUMPING TEST Hours Pumped Type of Pump Used Pumping Rate Gallons per Minute WATER LEVEL
Sand Solf Shyle Water Ruck	30-40 48 40-80				Distance from land surface to water:  Before Pumping Ft.  When Pumping Ft.  APPEARANCE OF WATER
lard Gray Ruck	80 - 90				Clear Cloudy  Taste U/  Odor WUNC  Height of Casing Above Land
					PUMP INSTALLED  Type Capacity  Gallons per Minute  Gallons per Hour  Pump Column Length Ft.
			Show pei	manent structu d/or other lar	OF WELL ON LOT pressouch as buildings sentic and indicate not less urements) to well.
Date Well Was Completed Aug 11 (	Well Driller _ Signature &	Walter Burnes			B well



### SITE PLAN

SCALE 1" : 50'

ANTHONY RESIDENCE MR. & MRS. TONY ANTHONY 3036 WALT ANN DRIVE ELLICOTT CITY. MARYLAND 21043

26 MAY 88



#### CRAIG L STEWART ARCHITECT PC

8329 MAIN STREET ELLICOTT CITY, MD 21043 301-465-7687 (BALT.)