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MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH 461-9933

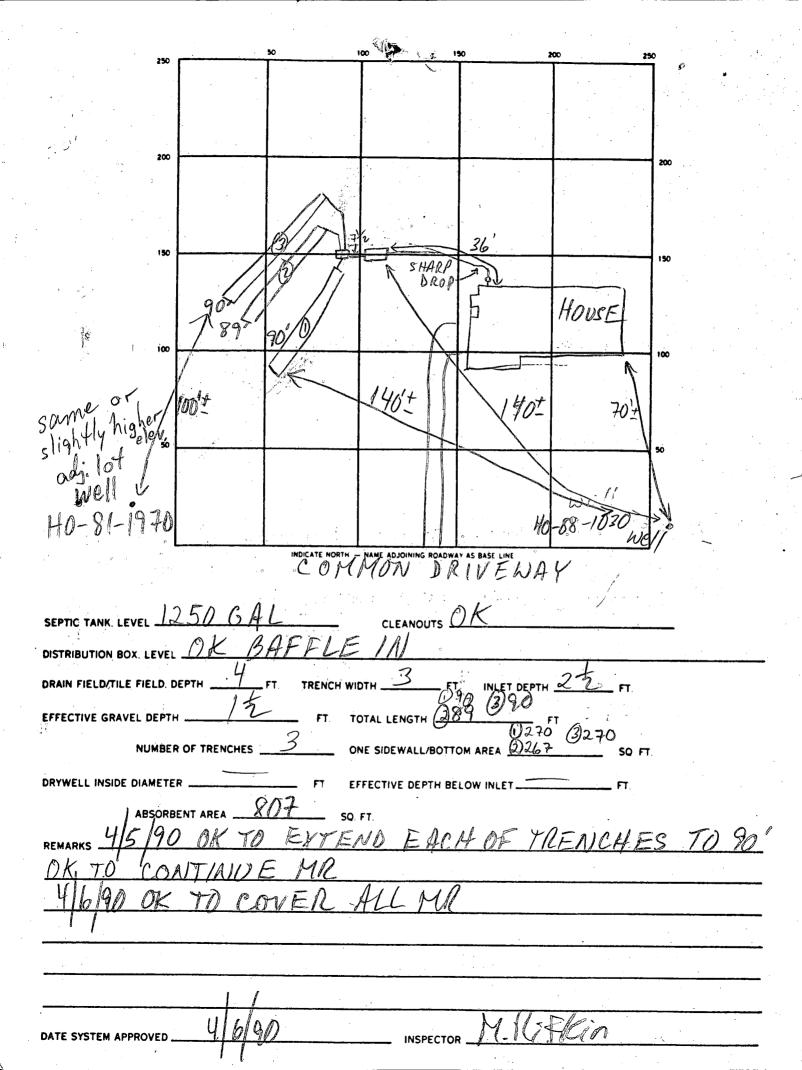
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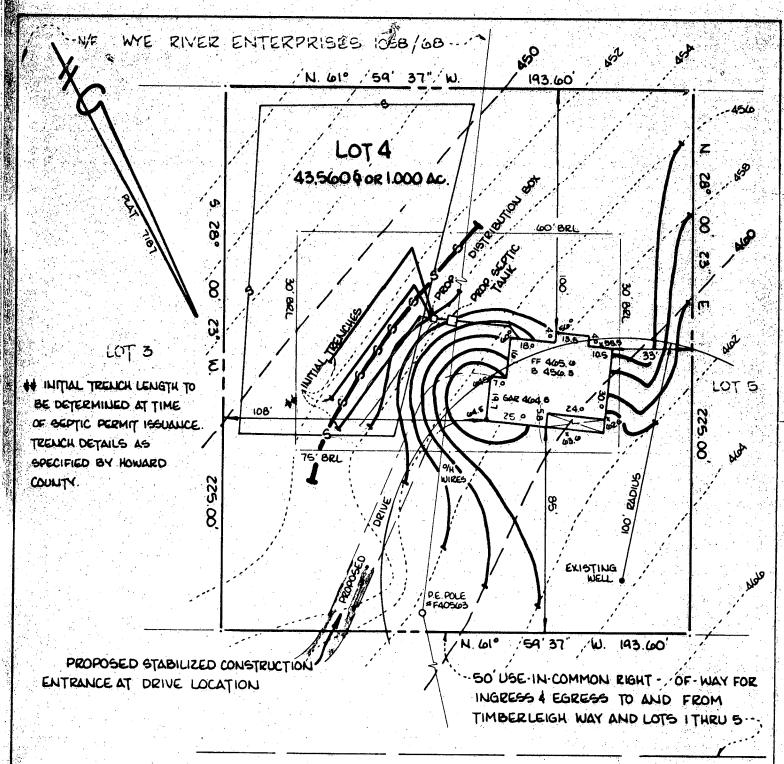
DATE SYSTEM APPROVED

S. T. Mechanical Contractors	IS PERMITTED TO INSTALL X ALTER
ADDRESS P. O. Box 3856, Frederick	, Maryland 21701 PHONE695-6677
	ROAD 17595 Timberleigh Way LOT 4
PROPERTY OWNER	Susan & Clyde E. Hunt, Jr.
ADDRESS	
H-XIVADENCE XCBNAGENAR NORTH INCREM RECEIPENT	ANK XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
EXHBAGE ENIMBERXXXXXES XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXX
SEPTIC TANK CAPACITY 1250 GALLONS	NUMBER OF BEDROOMS4
area begins at 2.5 fe distribution pipe. LOCATION - Place the distributio the left lot line as	om. Trench to be 3 feet wide. Inlet 2.5 feet below on maximum depth 4 feet below original grade. Effective et below original grade. 1.5 feet of stone below n box 130 feet off the front lot line and 80 feet off seen when facing the property from the common road. Run
NOTE - No trench to exceed 1	oward the front lot line. MAINTAIN A MINIMUM OF 100 WELLS. 00 feet in length. Provide 6" - 8" diameter cleanout bove on septic tank.
PLANS APPROVED BY	adeau/Ray Hodges DATE <u>8/31/89/12/01</u> /89
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEP	PARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM
NOTE. CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE A	IND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS
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 B	EFORE AND AFTER PLACING GRAVEL IN TRENCHIES)
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO	
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST I	RON OR SCHEDULE 40 PVC OR ABS
PERMIT VOID AFTER TWO YEARS	` <u>`</u>
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL ST ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 F	AND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVC OR ABS EET. MANHOLE TO GRADE REQUIRED
APP BATTAN FIRM BANKS AND THE STATE OF THE S	4)

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.





SITE, GRADING & SEDIMENT CONTROL PLAN

LOT 4

KENNEY SUBDIVISION

SITUATED OFF TIMBERLEIGH WAY 45 ELECTION DISTRICT HOWARD COUNTY, MARYLAND

MOWARD COUNTY, MARYLAND

BEPTIC INFORMATION

INV OUT FROM HOUSE: 452.3

32 L.F. TO SEPTIC TANK

INV. IN- SEPTIC TANK: 451.6

INV. OUT - SEPTIC TANK: 456.0

EX. GROUND AT SEPTIC TANK: 456.0

SEPTIC TANK TO DISTRIBUTION BOX: 7 L.F.:

INV. IN- DISTRIBUTION BOX: 451.2

INV. OUT - DISTRIBUTION BOX: AND INTO INITIAL

TRENCH: 451.0

EX. GROUND AT DISTRIBUTION BOX: 454.0

EX. GROUND AT BEG. OF TRENCH: 453.1

INV. EL AT END OF INITIAL TRENCH: 44

Ex GROUND ELEVATION AT WELL: 463.8

SCALE: 1": 40'
REFERENCE PB P 7187
DRAWN BY N. MOORE
CHECKED BY C. THOMAS

Thomas, Moore & Associates, Inc.

LAND SURVEYORS: CONSULTANTS
129 6 WEST PATRICK STREET
FREDERICK MARYLAND 21701
(301) 698 9788

O356

REUGION AS PER COUNTY COMMENTS
11: -88-61-12-6-89:

PLOT PLAN AUGUST 1989

2.) LOT BOUNDARY AND SEPTIC LOCATION AS SHOWN HEREON IS BASED ON A PLAT BY OTHERS TITLED "KENNY SUBDIVISION LOTS I THRU S A RESUBDIVISION OF LOT 2-ALBERT R HARDY ET AL SUBDIVISION.

HOWARD COUNTY HEALTH DEPARTMENT Bureau of Environmental Health 3525-H Ellicott Mills Drive Ellicott City, MD 21043 461-9933

APPLICATION FOR PITLESS ADAPTER, WELL PUMP AND PRESSURE TANK INSTALLATION

New Installation X Replacement	· ·	Receipt # 45420 Date 0/12/14					
Name of Installer STMEC	HANICAL CON	Telephone <u>695-6677</u>					
License Number	Well Driller I	Registered Plumber X					
Name of Property Owner Club Subdivision Kruner Site Address 17595 Timbre	E HUNT JR Lot # 4 Well LEIGH WAY	Telephone 253-1863 1 Tag # <u>H6-88-1030</u>					
Pump	Motor	Pitless Adapter					
1. Type	1. Horsepower 3/4	1. Make CAMOBELL					
a. Deep well jet	2. RPM	2. Model # 8-10×					
b. Shallow well jet	3. Voltage	3. Depth <u>5-677</u>					
c. Submersible	a. 110						
2. Make GOULDS	b. 220						
3. Model # 75H07412	,						
4. Capacity GPM	Was No.						
5. Pump exceeds well capacity6. If Yes, is low pressure cuto	ff owitch installed? V	as / No					
7. What methods are used to pro	tect the numn and electr	ical wiring from					
vibrations? Torque arresto							
vibiaciono. Ibique allocato		and the same that area from					
Tank	Piping	Well data					
1. Capacity QOGAL	1. Type \(\(\cop\)\(\frac{1}{2}\)	1. Depth ft.					
2. Pressure relief	2. Size	2. Yield GPM					
valve? UES 75 LB	3. NSF and/or BOCA	3. Static Water					
P.A. OK @ 3 B G	Code approved uss	level ft.					
1.19 - UN W 3 12 G	line 5-6 =T	 Will water supply be disinfected by 					
MR 3/29/90	Time 3641	installer? <u>NO</u>					
I understand that it is my res Department when the installation is null and void).	sponsibility to notify t n is ready for inspection	he Howard County Health n (otherwise this permit					
All information given above is true to the best of my knowledge.							
Signatu	re of Applicant:	luld / an					
Date: 1/10/90							
Note: A sticker indicating approval/status of the installation will be placed							

on the well casing at the time of the inspection.

PPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TO:	THE COUNTY HEALTH OFFICER		•		
	ELLICOTT CITY, MARYLAND			•	
	I, HEREBY, APPLY FOR THE NECESSARY TEST	I IN ORDER TO CONSTRUC	CT (OR RECONSTRUCT)	A SEWAGE DISPOSAL SYSTEM	•
PROPE	ERTY OWNER Wallan	Die V	Enney	SusAN +Clyp	le E Hunt, Ir.
	ADDRESS 17601 To	mberleich	May	PHONE S	4 613 / 253-18
PROPE	ERTY LOCATION:	. 0			Fual low
SUBDI	IVISION Hardy Pa	operty		LOT NO	3
ROAD	AND DESCRIPTION Janker	but Wa	4		
*· · · ·		0 .	/		
SIZE C	OF LOT / acre La	nd Preser	Nation)	TYPE BLOG. Less	Sent
		,			NUMBER OF BEDROOMS)
THE:	SYSTEM INSTALLED UNDER THIS APPLIC	ATION IS ACCEPTABLE	ONLY UNTIL PUBLIC	C FACILITIES BECOME AVA	ILABLE. I FULLY UNDERSTAND TH
FEE (CONNECTED WITH THE FILING OF THIS F	PERC TEST APPLICATION	ON IS NON-REFUNDA	BLE UNDER ANY CIRCUMS	TANCES.) ALSO AGREE TO COMPL
WITH	I ALL M.O.S.H.A. REQUIREMENTS IN TES	STING THIS LOT. \angle	Villan	v Dyer Te	enny
		÷.		(SIGNATURE OF APPLIC	ANT)
APPRO	OVED BY	<u> </u>	_ FOR ,	····	DATE
REJEC	CTED BY		FOR		DATE
HOLD	PENDING FURTHER TESTS		· · · · · · · · · · · · · · · · · · ·		DATE
REASO	ONS FOR REJECTION OR HOLDING 11-25	ess Peac. S	SANSFACTOR	y hold for	a leatified hole
10	carion house and	well Site.	Stoll	BMDG. PE	RMIT SIGNED
	,			AND RET	URNED 1987 172
				SFD-	4 Belivon

THIS IS NOT A PERMIT

