

3/15/89 pm

05-405041

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
461-9933

INDEXED

P 44109

A 36982

DISTRICT 5th

DATE 4/26/89

DATE SYSTEM APPROVED 3/15/89

INSPECTOR M.R. Fkin

Jack Fyock

IS PERMITTED TO INSTALL X ALTER

ADDRESS PHONE 988-9270

SUBDIVISION The Chase ROAD 11621 Vixen's Path LOT 6

PROPERTY OWNER Dr. Alix Rey

ADDRESS

IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.

GARBAGE GRINDER? YES X NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 220 sq. ft. per bedroom with garbage disposal. Trench to be 3 feet wide. Inlet 3.5 feet below original grade. Bottom maximum depth 5.0 feet below original grade. Effective area begins at 3.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 320 feet up the right (602.06') lot line and 95 feet from the right (602.06') lot line as seen when facing the lot from Vixen's Path. Run trenches on contour toward rear and ^{the} right lot line.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. OK/CW

PLANS APPROVED BY Sid Abel DATE 1/02/87

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

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(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES)

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 40 PVC OR ABS

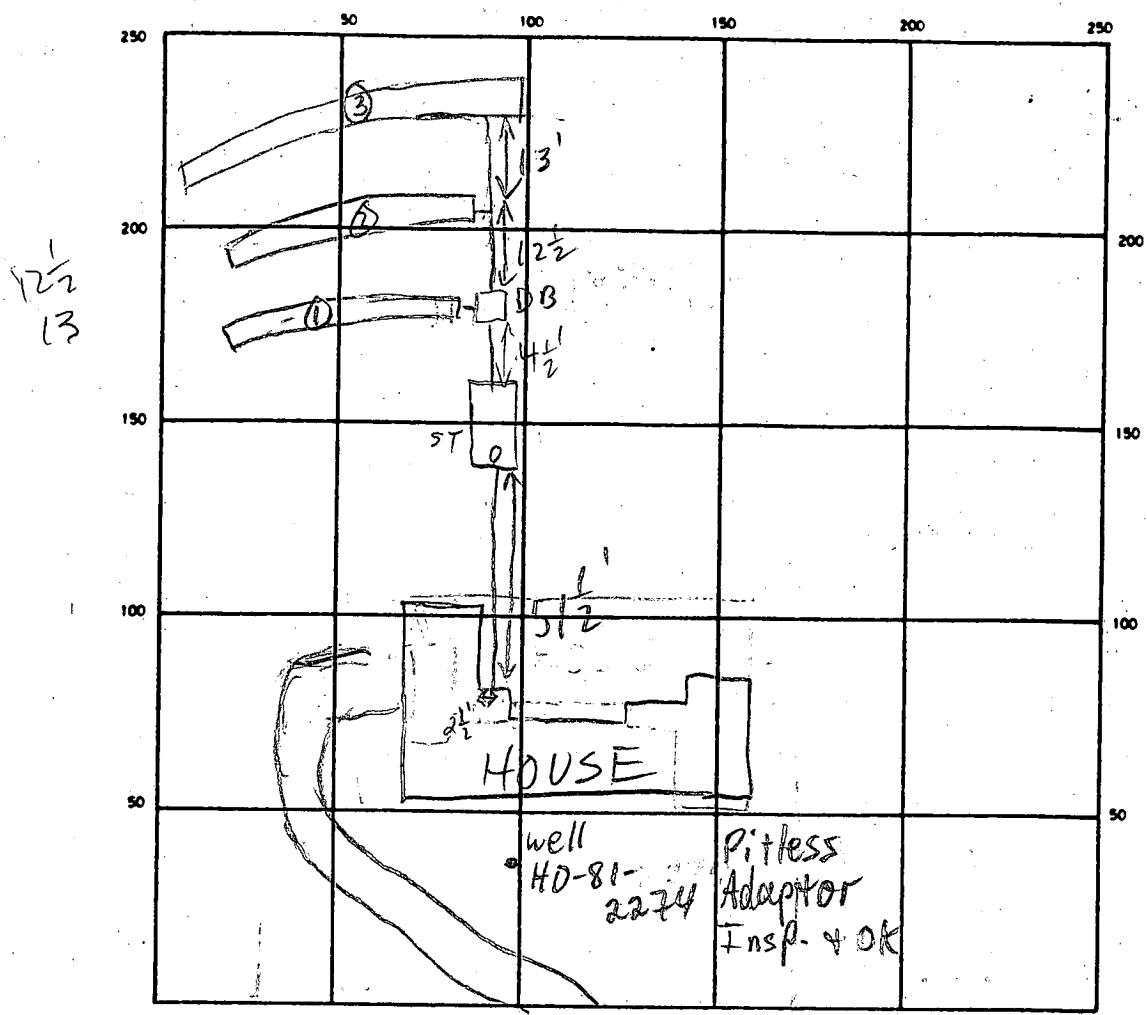
PERMIT VOID AFTER TWO YEARS

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 PVC 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 APROVAL ON THIS PERMIT

*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.



SEPTIC TANK. LEVEL 2000 (10' x 5') CLEANOUTS OK

DISTRIBUTION BOX. LEVEL BAFFLE OK

DRAIN FIELD/TILE FIELD. DEPTH 5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 1/2 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 899 FT. 293

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 880 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA — SQ. FT.

REMARKS 3/15/89 HOUSE CONN OK, TRENCHES ② & ③ DUG & STONED,
TRENCH ① IN PROCESS; NEED 20' ADD'L, (10' + ON ①, 10' + ON ②) MR
ALL TRENCHES NOW COMPLETE OK TO COVER - FINAL MR

DATE SYSTEM APPROVED 3/15/89 INSPECTOR M. R. FFEIN

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 _____ Receipt # _____
Replacement _____ Date _____
Name of Installer _____ Telephone _____
License Number _____
Certified Well Pump Installer _____ Well Driller Ray Registered Plumber _____
Name of Property Owner BYRON BUILDERS Telephone _____
Subdivision THE CHASE Lot # 6 Well Tag # HO-81-2274
Site Address VIXCUS PATH

Pump Motor Pitless Adapter
1. Type 1. Horsepower _____ 1. Make _____
a. Deep well jet _____ 2. RPM _____ 2. Model # _____
b. Shallow well jet _____ 3. Voltage _____ 3. Depth _____
c. Submersible _____ a. 110 _____
2. Make _____ b. 120 VIXCUS PATH
3. Model # _____
4. Capacity _____ GPM
5. Pump exceeds well capacity Yes 84 No _____
6. If Yes, is low pressure cutoff switch installed? Yes _____ No _____
7. What methods are used to protect the pump and electrical wiring from vibrations? Torque arrestors _____ Cable guards _____ Other _____

Tank Piping Well data
1. Capacity _____ 1. Type _____ 1. Depth 185 ft.
2. Pressure relief valve? _____ 2. Size _____ 2. Yield 6 GPM
3. NSF and/or BOCA Code approved _____ 3. Static water level 36 ft.
4. Depth of supply line _____ 4. Will water supply be disinfected by installer? _____

MR 3/15/89
P.A. 5' B.G. NO TANK

I understand that it is my responsibility to notify the Howard County Health Department when the installation is ready for inspection (otherwise this permit is null and void).

All information given above is true to the best of my knowledge.

Signature of Applicant: _____

Date: _____

Note: A sticker indicating approval/status of the installation will be placed on the well casing at the time of the inspection.

SUBDIVISION: THE CHASELOT NUMBER: 6DRY WELL OR DRY WELL AND TRENCH

	<u>Septic Tank</u>	<u>sq. ft./bedroom</u>
3 bedroom	1000 gallon	<u>Minimum Total square Feet</u>
4 bedroom	1250 gallon	
5 bedroom	1500 gallon	

Inlet _____ feet below original grade.

Bottom maximum depth _____ feet below original grade.

Effective area begins at _____ feet below original grade.

NOTE: If trench is used to make up absorbent area, run the trench on level ground and leave a 5 foot earth buffer between dry well and trench. No trench is to exceed 100 feet in length. Trench inlet to be same as dry well, with _____ feet of stone below distribution pipe.

TRENCHES180 sq. ft./bedroom220 sq ft/bedroom with G.I.Trench to be 3 wide.Inlet 3.5 feet below original grade.Bottom maximum depth 5.0 feet below original grade.Effective area begins at 3.5 feet below original grade.1.5 feet of stone below distribution pipe.

- NOTE:
- (1) No trench to exceed 100 feet in length.
 - (2) If more than one trench used, a distribution box is required.
 - (3) Trenches to be installed on level ground.
 - (4) Call for inspection of trench before gravel is installed.
 - (5) Provide 6"-8" diameter cleanout and cap to grade or above on septic tank and drywell.
 - (6) If a Garbage disposal is used, increase septic tank capacity by 50% and increase absorbant sidewall area by 22%.

LOCATION: PLACE THE DISTRIBUTION BOX 320 FEET UP THE RIGHT (60206) LOT
LINE AND 95 FEET FROM THE RIGHT (60206) LOT LINE AS SEEN WHEN
FACING THE LOT FROM VIXENS PATH. RUN TRENCHES ON CONTOUR TOWARD
REAR AND RIGHT LOT LINE. 1-2-87 S.A.M.

APPLICATION

PERCOLATION TESTING

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

A 36982

P _____

DISTRICT 5

DATE 5/15/86

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 Wayback Corporation DR. Alix Rey

ADDRESS P.O. Box 1018, Columbia, MD. 21044 PHONE 997-8800

PROSPECTIVE BUYER NONE

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

SUBDIVISION The Chase - formerly The Paddock LOT NO. 6

ROAD AND DESCRIPTION Homewood Road 11621 Vixen's PATH

TAX MAP 29 PARCEL # 24

SIZE OF LOT 3 acres TYPE BLDG. S.F.D.

(SINGLE FAMILY DWELLING OR COMMERCIAL)

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 Sid Abel FOR Shallow test fields DATE 1-2-87

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 6/24/86 Ruc. SATISFACTORY 1200' For subdivision Plat. S. Abel

4/24/86 Shallow Syst. ONLY

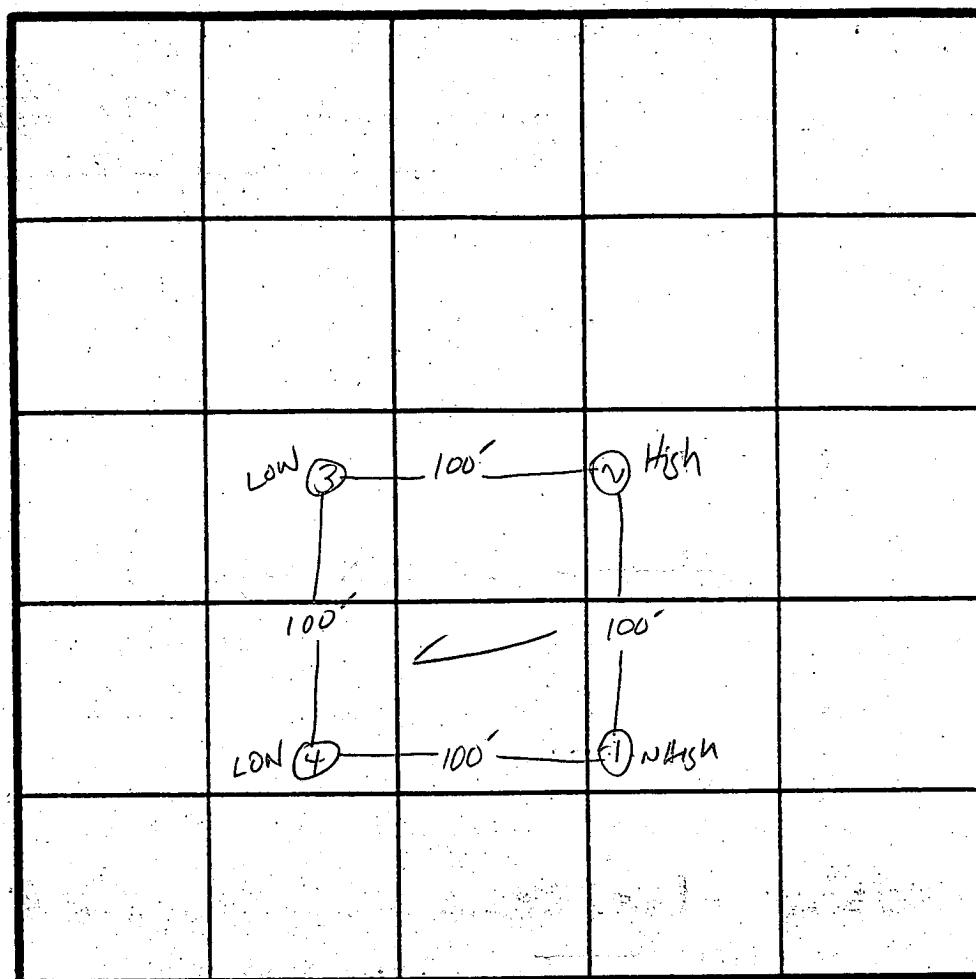
BLDG. PERMIT SIGNED
AND RETURNED 7-7-88

BP 19711 S. Abel

THIS IS NOT A PERMIT

③④
①②
SOIL PROFILE

4-1-3
STRONG BL
SAND LOAM
L 90% clay
3- STRONG BL
SAND LOAM
L 10%
FRAGMENTS
12-18"



X PERC
4min

INLET
3.5'

BOTTOM
5.0'

180 Φ 1BR

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

Hampwood Rd.

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	
6/24/86	1 S ✓	10-13" 12"	10:32	10:33	10:33	10:35	2min
			UNIFORM	Below 3'			
	2 S M	3" 8"	10:36	10:37:30	10:37:30	10:340	2.5min
			10:37	10:38	10:38	10:39:30	1.5min
	2 ✓	13'	same as #1				
	3 S ✓	4.5" 12.5"	10:41	10:43	10:43	10:47	4min
			same as hole #1-2				
	4 S ✓	4.5" 12"	10:47	10:49:30	10:49:30	10:55	5.5min
			same as hole #1-3				

REMARKS

Holes Located Per PLAT

TYPE OF SOIL

S. Abel

Jeff

EH-12-1079

APPLICATION

PERCOLATION TESTING

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

A 36982

P _____

DISTRICT 5

DATE 5/15/86

TO: THE COUNTY HEALTH OFFICER
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ADDRESS P.O. Box 1018, Columbia, MD. 21044 PHONE 997-8800

PROSPECTIVE BUYER NONE

ADDRESS _____ PHONE _____

PROPERTY LOCATION:

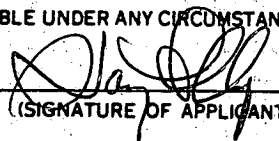
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(SIGNATURE OF APPLICANT)

APPROVED BY _____ FOR _____ DATE _____

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

Lot 6

UNNAMED RD

SOIL PROFILE

0

1

2

3

4

5

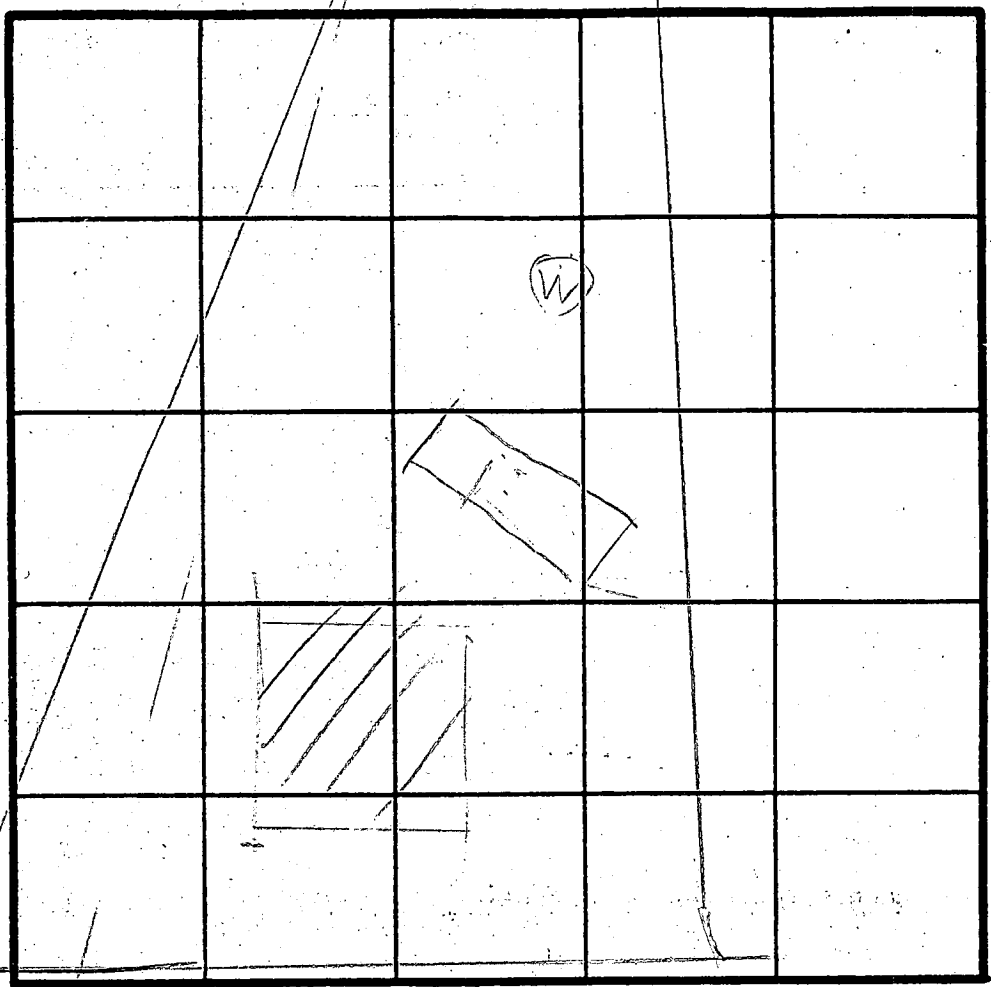
6

7

8

9

10



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

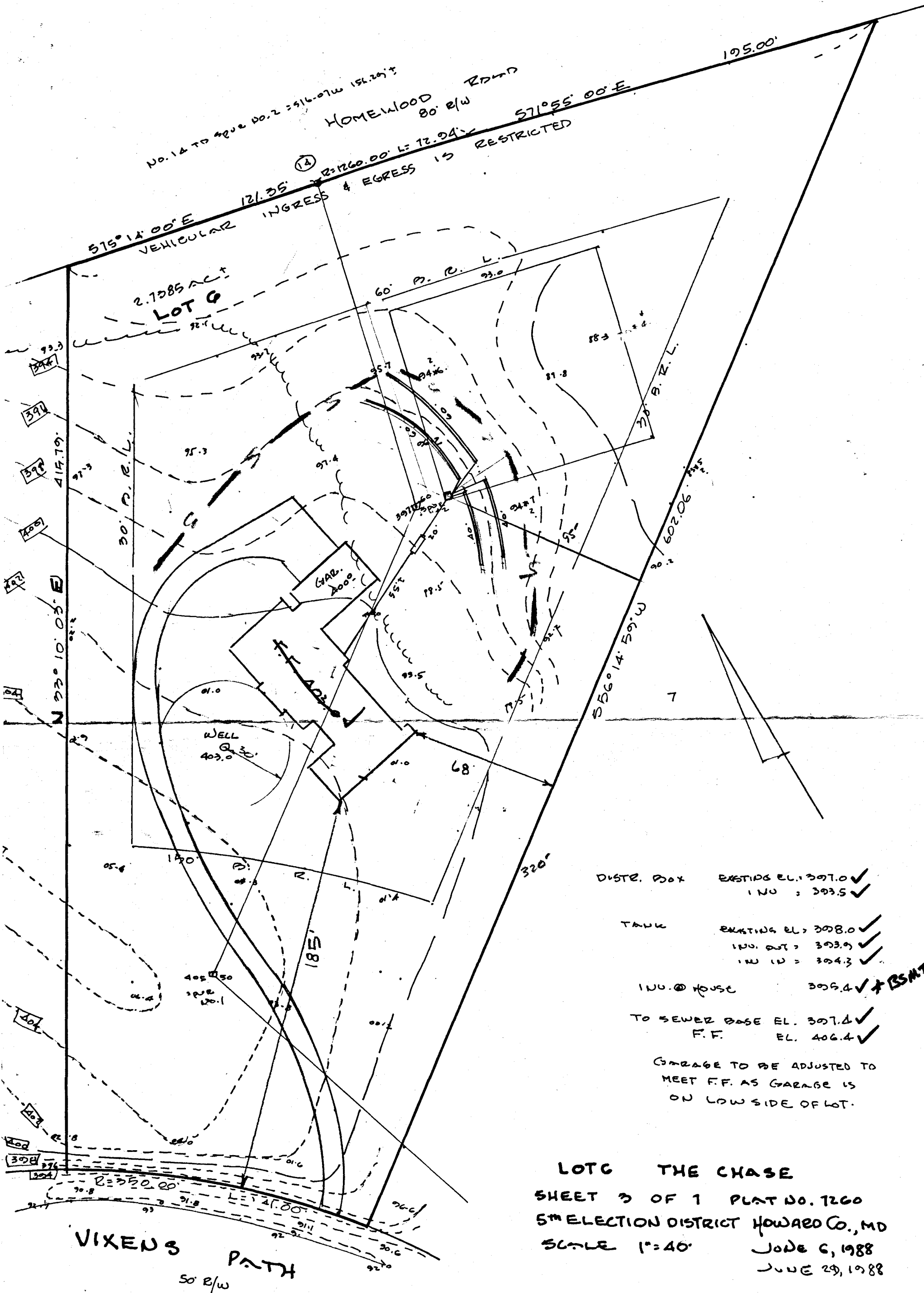
HOMEROWN RD

DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
			START	STOP	START	STOP	

REMARKS _____

TYPE OF SOIL _____

EH-12-1079



LOT 6 THE CHASE
 SHEET 3 OF 1 PLAT NO. 1260
 5th ELECTION DISTRICT HOWARD CO., MD
 SCALE 1"=40' JUNE 6, 1988
 JUNE 29, 1988

TRENCHES SUFFICIENT FOR 3BR ONLY - UNLIKELY
 THAT HOUSE WOULD BE ONLY 3BR.

7-7-88
 elevations of
 S. Alu

BLDG. PERMIT SIGNED
 AND RETURNED 7-7-88
 BP 19711
 S. Alu

C16079

SEQUENCE NO.
(OEP USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPE

THIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.

COUNTY
NUMBER

A-36982

DATE Received

DATE WELL COMPLETED

100887

Depth of Well

185

(TO NEAREST FOOT)

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

H4-81-2274

OWNER

BYRON BUILDERS

last name

VIRGINS PATH

first name

TOWN

CLARKSVILLE

SUBDIVISION

THE CHASE

SECTION

LOT

6

WELL LOG

Not required for driven wells

STATE THE KIND OF FORMATIONS
PENETRATED, THEIR COLOR, DEPTH,
THICKNESS AND IF WATER BEARING

DESCRIPTION (Use
additional sheets if needed)

FEET

FROM

TO

Check
if water
bearing

SAND

0

35

GRAY MICH
Rock

35

185

OK

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT

CM

BENTONITE CLAY

BC

NO. OF BAGS

99

NO. OF POUNDS

846

GALLONS OF WATER

54

DEPTH OF GROUT SEAL (to nearest foot)

from

0

ft.

to

35

ft.

(enter 0 if from surface)

CASING RECORD

casing
types
insert
appropriate
code
below

STEEL

CONCRETE

PL

OTHER

MAIN CASING TYPE

ST

Nominal diameter top (main) casing (nearest inch)

6

Total depth of main casing (nearest foot)

40

OTHER CASING (if used)

diameter inch

depth (feet) from to

SCREEN RECORD

screen type or open hole

insert appropriate code below

ST

BR

HO

STEEL

BRASS

OPEN HOLE

PL

OT

PLASTIC

OTHER

DEPTH (nearest ft.)

1

2

3

4

5

6

7

8

9

10

11

12

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FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2274
Location of property (road) VIRENS PATH
Subdivision THE CHASE Lot 6 Block Plat Sec.
Well Driller JOE MAYNE Owner BYRON BUILDERS

Depth of well 185
Distance of measuring point (M.P.) above ground 1
Static water level (S.W.L.) below M.P. 36

I. High rate pumping -- reservoir drawdown

Time pump started 12:30 Pumping rate 10 gal.
Total time 30 min to reach pumping water level 41 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

10/8/87 7:30 PT 3hrs 12:30 pm ✓
#2 10/7/87 9:30 SNOT Review _____
grout ✓
11:00 am

11:00 am FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-2274
Location of property (road) VIXENS PATH
Subdivision THE CHASE Lot 6 Block Plat Sec.
Well Driller JOE MAYNE Owner Baron Builders

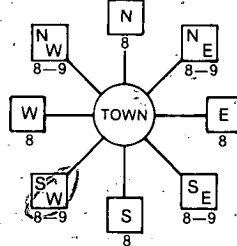
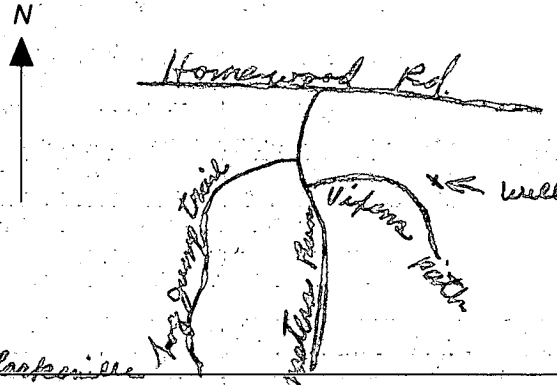
Depth of well 185 ft
Distance of measuring point (M.P.) above ground 1 ft
Static water level (S.W.L.) below M.P. 36 ft

I. High rate pumping -- reservoir drawdown

Time pump started 12:30 pm Pumping rate 10 gpm
Total time 30 min to reach pumping water level 41 ft. below M.P.

II. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

B 1 9303 <small>THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)</small>	SEQUENCE NO. (OEP USE ONLY) STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER 40-81-2234 <small>fill in this form completely</small>
Date Received 090283 OWNER INFORMATION RYRON RUILEERS <small>Last Name Owner First Name</small> 5397 WILK KNOX RD. <small>Street or RFD</small> Columbia MD 21045 <small>Town State Zip</small>		B 3 LOCATION OF WELL HOWARD <small>8 COUNTY</small> THE CHASE <small>23 SUBDIVISION</small> SECTION 44 46 LOT 48 50 CLARKSVILLE <small>52 NEAREST TOWN</small> MILES FROM TOWN (enter 0 if in town) 3 MI <small>73 76 77 78</small>
DRILLER INFORMATION Joseph L. Wayne <small>Driller's Name</small> Joseph L. Wayne Well Drilling 5512 Ridge Rd. Mt. Airy, Md. 21771 <small>Firm Name Address</small> Joseph L. Wayne <small>Signature</small> 8/27/87 <small>Date</small>		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  NEAR WHAT ROAD Vigena Path <small>ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</small> NORTH N WEST W EAST E SOUTH S DISTANCE FROM ROAD 245 FT <small>ENTER FT or MI</small>
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) 5 <small>8 12</small> AVERAGE DAILY QUANTITY NEEDED 500 <small>(GAL. PER DAY) 14 20</small>		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard <small>COUNTY NAME</small> A 36482 <small>COUNTY NO.</small> OEP SIGNATURE DATE ISSUED 090883 <small>43 48</small> NORTH GRID 513000 <small>50 55</small> EAST GRID 0824000 <small>57 63</small> EXP. DATE 03-07-88
USE FOR WATER (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY) <input type="checkbox"/> FARMING (LIVESTOCK WATERING & AGRICULTURAL IRRIGATION) <input type="checkbox"/> INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT) <input type="checkbox"/> PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL) <input type="checkbox"/> TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. WELL 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE E 820 4 N 510 3 000 000
APPROXIMATE DEPTH OF WELL 300 FEET <small>24 28</small> APPROXIMATE DIAMETER OF WELL 6 INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30. AIR-ROTary AIR-PERCussion ROTARY (Hydraulic Rotary) 37. CABLE REVERSE-ROTary Drive-POINT other		10-887 Grant Location ok 40 ft casing 35 ft open hole 9 bags cement 1 ft above ground DE Nadeau
REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX) <input checked="" type="checkbox"/> THIS WELL WILL NOT REPLACE AN EXISTING WELL <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED 39. <input type="checkbox"/> THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A STANDBY <input type="checkbox"/> THIS WELL WILL DEEPEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE) 41 52		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER 54 GAP 63 FORCE 54 WRITE INITIALS IN BOX PERMIT NO. 40-81-2234 <small>67 68 70 71 72 73 74 75 76 77 78 79</small>		
SPECIAL CONDITIONS		

R=1400.00
A= 138.74

S71°55'00"E
405.45'

R=1300.00
A= 75.25'

S75°14'00"E
156.64'

[375]
[380]
[385]
[390]
[400] [395]

[405]
[410]

[415]

R=1200.00
A= 439.39'

[420]

S59°00"E
391.32'

WOOD

ROAD

EX FENCE

VIXENS

PATH

3.48 AC

2.73 AC

2.74 AC

2.88 AC

3.03 AC

2.79 AC

2.79 AC

3.24 AC

2.85 AC

2.86 AC

7

6

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[665]

[370]

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S12°54'53"W
24.96'

S19°40'00"W
219.50'

S25°18'54"W

000515N

EB25000