### PERMIT

SEWAGE DISPOSAL SYSTEM

| P | 5 | 7 | 2 | 6 | 4 | <u>C</u> |
|---|---|---|---|---|---|----------|
|   |   |   | - |   |   |          |

A 35016

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT

1.349 The 8 **HOWARD COUNTY HEALTH DEPARTMENT** 

**BUREAU OF ENVIRONMENTAL HEALTH** 

**460/9933** 313-2640

|                         |  |   |  |  | INSPECTO                                      | R_#                                   |
|-------------------------|--|---|--|--|---|---------------------------------------|
| Jack_Fy                 | ock Septic Service   |   | IS P   | ERMITTED TO I  | NSTALL X                                      | ALTER                                 |
| ADDRESS                 | 13775 Triadelphia Road   | Glenelg, MD   | 21737  | PHONE_   | 988-9270                                      |                                       |
| SUBDIVISION             |  | LOТ2  |  |  | ina FarmŠC                                    | ourt                                  |
| PROPERTY OV             | VNER   | Percontee,  | Inc.   |  | <del> </del>                                  | <del> </del>                          |
| ADDRESS                 |  |   |  |  |   |                                       |
|                         | CAPACITY 1000 GALLONS  |   |  |  |   |                                       |
| NUMBER OF B             | •  |   |  |  |   |                                       |
| 210                     | SQUARE FEET PER BEDROOM  |   |  | • .  |   |                                       |
| LINEAR FEET             | OF TRENCH REQUIRED 2/0   |   |  | 4 - 1 - 4 4<br>- 1   |   |                                       |
| LOCATION                | - 210 sq. ft. per bedroom original grade. Bottom area begins at 4.0 feet grade. 1.5 feet of sto - Start the first trench right (365') lot line a Run trenches on contour - Noitrench to exceed 100 | m maximum dept<br>below origin<br>one below dist<br>310' from the<br>as seen when f<br>r toward the 1 | h 5.5 feet b<br>al grade. 1<br>ribution pir<br>rear (688')<br>acing the lo<br>eft side lir | pelow origing to the second of | inal grade.  stone bel  and 260 fe  Sobrina I | ow original eet from the Farms Court. |
|                         | cap to grade or above o  | <u>on septic tank</u>   |  | <del>1 70 °</del>  |   |                                       |
| PLANS APROVE            | ову Кауг   | nondiHodges   | C  | em   | DATE  | 12/18/90                              |
| COVER NO WOR            | RK UNTIL INSPECTED AND APPROVED  |   |  |  |   | •                                     |
| NEITHER THE H           | OWARD COUNTY COUNCIL NOR THE HEALT   | TH DEPARTMENT IS RES  | SPONSIBLE FOR THE  | SUCCESSFUL OP  | PERATION OF ANY                               | SYSTEM                                |
| NOTE: CLEANO<br>ACCEPT  | OUT REQUIRED EVERY 70 FEET OF SEWE   | ER LINE AND/OR AT 90  | O' SWEEPS IN LINE  | S FROM HOUSE   | TO DRAIN FIELD                                | S, 90° ELBOWS NOT                     |
| NOTE: ALL PAF<br>AUTHOR | RTS OF SEPTIC SYSTEMS (I.E. TANK, DIS<br>RIZED)  | TRIBUTION BOX TREN  | CHES) TO BE 100 F  | EET FROM WELL  | _ (UNLESS OTHER                               | RWISE SPECIFICALLY                    |
| NOTE: IF DEEP           | TRENCH(ES) ARE USED CALL FOR INSPEC  | TION BEFORE AND AFTI  | ER PLACING GRAVEL  | IN TRENCH(ES)  |   |                                       |
| NOTE: NO DRY            | WELL SHALL EXCEED 15 FOOT IN DIAMETE   | ER NO ABSORPTION TRE  | ENCH TO EXCEED 10  | FEET IN LENGTH   |   |                                       |
| NOTE: ALL PIPE          | FROM HOUSE TO SEPTIC TANK MUST BE  | CAST IRON OR SCHEDU   | ILE 35/40 PVC OR ABS   | 3  |   |                                       |
| PERMIT VOID AF          | TER TWO YEARS  |   |  |  |   |                                       |
| NOTE: INSTALL PVA OR    | STAND PIPE ON SEPTIC TANK AND DRY V<br>ABS ACCEPTED. IF TOP OF SEPTIC TANK IS  | VELL STAND PIPES MUS<br>DEEPER THAN 3 FEET.   | ST BE 6 INCHES IN D<br>. MANHOLE TO GRAD   | IAMETER CAST IF  | RON. CONCRETE                                 | OR TERRA COTTA OR                     |

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

to sooking CT. 150 50 250 200 150 36 50 BARN INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE SEPTIC TANK LEVEL OK CLEANOUTS OK DISTRIBUTION BOX LEVEL \_\_\_\_\_ DRAIN FIELD/TITLE DEPTH 5.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 4 FT. EFFECTIVE GRAVEL DEPTH 1,5 FT. TOTAL LENGTH 3 × 100 FT. = 300 NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 900 SQ. FT. DRYWALL INSIDE DIAMETER \_\_\_\_\_ FT. EFFECTIVE DEPTH BELOW INLET \_\_\_\_\_ FT. ABSORBENT AREA \_\_\_\_\_\_ SQ. FT. REMARKS: 9-10-96 90' EXTRA TRENCH ADDED AT REQUEST OF SWNER.

DATE SYSTEM APPROVED 9/16 96 INSPECTOR Seld Song

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

|   | A  | 3 | 5 | 0 | 16 |  |
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|   |    |   |   |   | 74 |  |
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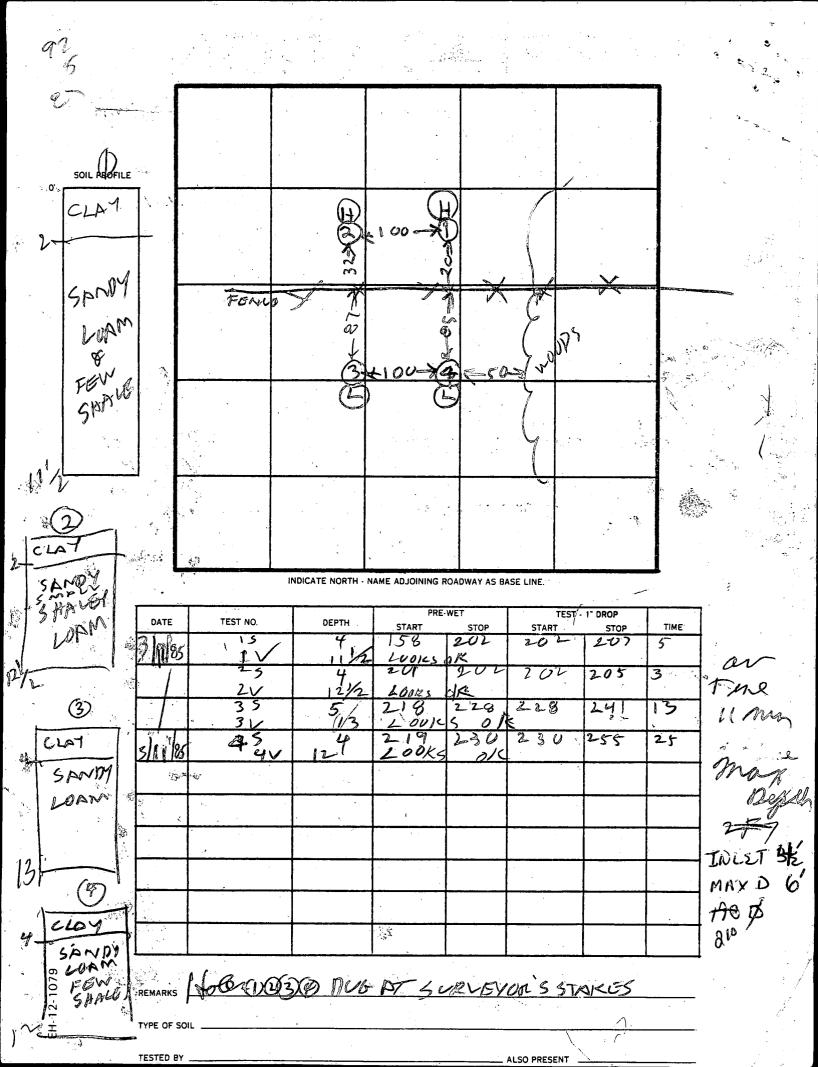
HOWARD COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH SERVICES** 

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 992-2330

THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM Sobrina 99. Inc. 12150 Tech Road Silver Spring, MD 20904 PROPERTY LOCATION: Montgomery Industrial Park Route 94 ROAD AND DESCRIPTION SIZE OF LOT 5.3 Acres 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 /s/ Don Reuwer 3/11/85 /ERC OK SEERT IFT HOUSE

## THIS IS NOT A PERMIT



| SEQUENCE NO. (DENV USE ONLY)   | STATE OF MARYLAND WELL COMPLETION REPORT   | THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.  |
|--|--|--|
| 1 2 3 NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)   | FILL IN THIS FORM COMPLETELY<br>PLEASE PRINT OR TYPE   | COUNTY A 350/6   |
| ST/CO USE ONLY DATE WELL COMPLETE  8 13 20   | D Depth of Well  22  26  (TO NEAREST FOOT)   | PERMIT NO. FROM "PERMIT TO DRILL WELL"   |
| OWNER last name  |  | A  |
| STREET OR RFD  | FAMES SECTION TOWN   | LOT Z  |
| SUBDIVISION WELL LOG   | GROLITING RECORD   |  |
| Not required for driven wells STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH,   | WELL HAS BEEN GROUTED (Circle Appropriate Box)  TYPE OF GROUTING MATERIAL                                    | PUMPING TEST   |
| THICKNESS AND IF WATER BEARING DESCRIPTION (Use FEET Check   | CEMENT   BENTONITE CLAY   B C  | HOURS PUMPED (nearest hour)  |
| additional sheets if needed) FROM TO if water bearing  | NO. OF BAGS NO. OF POUNDS AS   | PUMPING RATE (gal. per min. 15 to nearest gal.) 15 METHOD USED TO MEASURE PUMPING RATE   |
|  | from 17   1   1   1   1   1   1   1   1   1  | WATER LEVEL (distance from land surface)  BEFORE PUMPING  17  20   |
| Blue State 10 15   | types insert appropriate STEEL CONCRETE  | WHEN PUMPING  TYPE OF PUMP USED (for test)   |
| Barun 56 7 45 51 L   | code below PLASTIC OTHER   | A air P piston T turbine   |
| Bluffet, 50 40   | MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot) | C centrifugal R rotary O (describe below)  J jet S submersible   |
| Brunglet 60 65 L   | 60 61 63 64 66 70  OTHER CASING (if. used)   | 27   |
|  | diameter depth (feet) H inch from to   | PUMP INSTALLED   |
| Blood 1145 715   | C C C C C C C C C C C C C C C C C C C  | DRILLER WILL INSTALL PUMP YES NO (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION   |
|  | screen type or open hole ST BR HO  | MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)   |
|  | appropriate code below  steel  STEEL  BRASS OPEN BRONZE HOLE P L  OT   | IN BOX - SEE ABOVE:  CAPACITY: GALLONS PER MINUTE  31 35   |
| A CONTROL OF THE CONT | PLASTIC OTHER  | PUMP HORSE POWER   |
|  | 1 2 DEPTH (nearest ft.)  | PUMP COLUMN LENGTH (nearest ft.)  CASING HEIGHT (circle appropriate box  |
|  | E 1 15 17 21 C 8 9 11 15 17 21   | + above LAND SURFACE   |
| CIRCLE APPROPRIATE LETTER  | S 23 24 26 30 32 36  | below (nearest foot)   |
| A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED   | E 3 47 51 N 38 39 41 45 47 51  | LOCATION OF WELL ON LOT  SHOW PERMANENT STRUCTURE SUCH AS  |
| E ELECTRIC LOG OBTAINED  TEST WELL CONVERTED TO PRODUCTION   | SLOT SIZE 123(NEAREST  | BUILDING, SEPTIC TANKS, AND/OR LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES  |
| P WELL  THEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN   | OF SCREEN 1 1 1 1 1 NCH)  from to  | (MEASUREMENTS TO WELL)   |
| ACCORDANCE WITH COMAR 26.04.04 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE:  | GRAVEL PACK LIF WELL DRILLED WAS FLOWING WELL INSERT FIN BOX 68  | LAR - No Cornect   |
| DRILLERS IDENT, NO.  | OEP USE ONLY<br>(NOT TO BE FILLED IN BY DRILLER)   | The state of the s |
| DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)   | T (E.R.O.S.) W Q 74 75 76 70 72  | And Frederick  |
| SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)  | TELESCOPE LOG OTHER DATA<br>CASING INDICATOR   |  |
| The wife of the second of the second of the second of the second   | COUNTY   | tand at a definition of the latest and the latest a  |

| Page | of      |
|------|---------|
| Datê | 8/11/89 |
|      |         |

#### FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

|  |  | HOWARD COUNTY WELL                               | TIELD TEST                               | •  |  |  |
|--|--|--|--|--|--|--|
| Location of pro<br>Subdivision   | HO - 88-09<br>perty (road)<br>Sobrina Fu<br>Fuelph | SOBRING Fari                                     | MS CX.  2 Block Plat  1 (and Design + Da | Sec.                                       |  |  |
| Depth of well  |  |  |  |  |  |  |
| Time pump started  |  |  |  |  |  |  |
| II. Recovery pump test data - observations to be recorded every 15 minutes |  |  |  |  |  |  |
| TIME (in 15<br>minute in-<br>tervals                                       | WATER LEVEL<br>below M.P.                          | PUMPING RATE<br>time to fill \$<br>gallon bucket | FLOW METER READING<br>(if used)          | CALCULATED FLOW<br>(gallons per<br>minute) |  |  |
| 2:15   | × 3 11   |  | 1/19                                     | 9 G. P.M                                   |  |  |

| TIME (in 15<br>minute in- | WATER LEVEL below M.P. | time to fill 4 | (if used)                             | (gallons per |
|---------------------------|------------------------|----------------|---------------------------------------|--------------|
| tervals                   |                        | gallon bucket  |                                       | minute)      |
| 7:15                      | 53 H                   | Jen            | NA                                    | 9 G. P.M     |
| フ;30                      | 53 PT                  | Jeac           | /                                     | 9 cpm        |
| 7:45                      | 53 AT                  | 7 or           | ·                                     | 9 GPm        |
| 8:00                      | 53ft                   | Jen            |                                       | 9 GPM        |
| 8115                      | 53 FT                  | 7 DOC          |                                       | 9 QPM        |
| 8130                      | 5341                   | 7 sie          |                                       | 9 GPM        |
| 8.45                      | 53FT                   | 7 sec          |                                       | 9 GPM        |
| 9:00                      | 53f+                   | 7 su           |                                       | Gopm         |
| 9:13                      | 53 FX                  | 7 ose          |                                       | 9 GPM        |
| 9:30                      | 5311                   | 7 sec          |                                       | g apm        |
| 9:45                      | 534                    | 7 sec          |                                       | 9 6 PM       |
| 10:00                     | 53 H                   | 7 sec          |                                       | 9. GPM       |
| 10:15                     | 53H                    | 7 sec          | , , , , , , , , , , , , , , , , , , , | 96M          |
| 10130                     |                        |                |                                       |              |
|                           |                        |                |                                       |              |
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| L                         |                        | 0,0,1          | came 680                              |              |

HD-224 21 ft PL 19 open 6 Bage

8-16-89 3h PT 7:00AM

Review

| Págeof         |                     | 7,00,1               | Review                            | ······································ |
|----------------|---------------------|----------------------|-----------------------------------|--|
| Pate           |                     | -                    |                                   | ,                                      |
| * .            |                     | FIELD DATA S         | HEET                              |  |
|                | ,                   | HOWARD COUNTY WELL   |                                   |  |
| rall Danmit N- | . но - <u>88-09</u> | 8/                   |                                   |  |
| cation of pro  | operty (road)       | SOBRING FARMS        | Z Block Plat  R 1000 Design & Del |  |
| Subdivision    | SUBMINA FA          | us. Lot              | Block Plat                        | Sec.                                   |
| Well Driller _ | FiDelph             | Owne                 | I Land Design & Dev               | recupment                              |
| Depth of       | f well              | 5                    | . 🖊                               | •                                      |
| Distance       | e of measuring po   | oint (M.P.) above gr | ound                              | •                                      |
| Static 1       | water level (S.W.   | .L.) below M.P.      | <u> </u>                          |  |
|                | pumping reser       |                      | ,                                 |  |
| Time pum       | p started 7/0       | ٥                    | Pumping rate 1060 ft. b           | M                                      |
| Total ti       | me Knin to          | reach pumping water  | level $53$ ft. b                  | elow M.P.                              |
| II. Recoveru   | nump test data -    | observations to be   | recorded every 15 minut           | es                                     |
| TIME (in 15    | WATER LEVEL         | PUMPING RATE         | FLOW METER READING                | CALCULATED FLOW                        |
| minute in-     | below M.P.          | time to fill 3/      | (if used)                         | (gallons per                           |
| tervals        |                     | gallon bucket        |                                   | minute)                                |
| 10:15          | 53                  | 7                    |                                   | GEAM                                   |
|                |                     |                      | arrived after Competion           |  |
|                |                     |                      | Comfession                        |  |
|                |                     |                      | 81                                |  |
|                | · ·                 |                      | SAMPR TULEN 8A                    |  |
|                |                     |                      | H-1973                            |  |
|                |                     |                      |                                   |  |
| <u> </u>       |                     |                      |                                   |  |
|                |                     |                      |                                   |  |
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|                | <u> </u>            |                      |                                   |  |

SIN APK NOON

#### 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 InstallationReplacement  |   | Receipt #<br>Date                                |
|--|---|--|
| Name of Installer 6AA  | TELAND  | Telephone  |
| License Number Certified Well Pump Installer   | Well Driller  | Registered Plumber                               |
| Name of Property Owner   |   | Telephone,                                       |
| Name of Property Owner Subdivision 50 BRIANA Site Address  | Lot # 2   | Well Tag * <u>#10-88-</u> - <u>0986</u><br>-     |
| Pump  1. Type  a. Deep well jet  b. Shallow well jet  c. Submersible  2. Make  3. Model #  4. Capacity GPM  5. Pump exceeds well capacity  6. If Yes, is low pressure cutof  7. What methods are used to protyibrations? Torque arrestor | f switch installed?<br>ect the pump and el  | 2. Model # 3. Depth  Yes No ectrical wiring from |
| Tank  1. Capacity  2. Pressure relief valve?  ITLESS ADAPTOR OK  31 B.G. MR 8/28/96  | Piping  1. Type  2. Size  3. NSF and/or BOCA Code approved  4. Depth of supply line | 2. Yield GPM                                     |
| I understand that it is my res<br>Department when the installation<br>is null and void).   | ponsibility to noti   | fy the Howard County Health                      |
| All information given above is t   | true to the best of   | my knowledge.                                    |
| Signatur   | re 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.

I CERTIFY THAT THE MEASUREMENTS SHOWN ON LOT 2 ARE ACTUAL & CORRECT TO THE BEST OF MY KNOWLEDGE. NOTE: LIENCITH OF TRENCHES TO BE DETERMINED BY THE HEALTH DEPT. AT THE OF SEPTIC PROMIT ISSUANCE. 2A 5051.0 SO 72 2123 FLOOD PLANE ESHT. 2434 001 @coquat X420.00. 14.85 \omega 422-190'94.

