

11/19/85
2/20/85

APPROVED
11/20/85
B12
P 36219
A 35157

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
XXXXXX
461-9933

04-335791

ELLICOTT CITY
DISTRICT 4th

DATE 11/19/85

INDEXED

_____ IS PERMITTED TO INSTALL X ALTER _____

ADDRESS _____ PHONE _____

SUBDIVISION Glenwood Estates II ROAD 3315 Saddlehorse Court LOT 6, Section 1

PROPERTY OWNER Daniel & Cindy Sobus Mr. & Mrs. Adam Willie

ADDRESS _____

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

GARBAGE GRINDER? YES _____ NO ✓

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 200 sq. ft. per bedroom. Trench to be 2 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 9 feet below original grade. Effective area begins at 4 feet below original grade. 5 feet of stone below distribution pipe.

LOCATION: Start first trench no more than 200 feet from back (125') lot line and 15 feet from left lot line as seen when facing the property from the Right-of-way line. Run trench(s) along level ground toward front of property. NOTE: No trench to exceed 100 feet in length. If more than one trench used, a distribution box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ✓

PLANS APPROVED BY C. Williams DATE 4/16/85

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.

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. LOG. PERMIT SIGNED AND RETURNED 3/27/89 Serial # 24202

PERMIT VOID AFTER THREE YEARS.

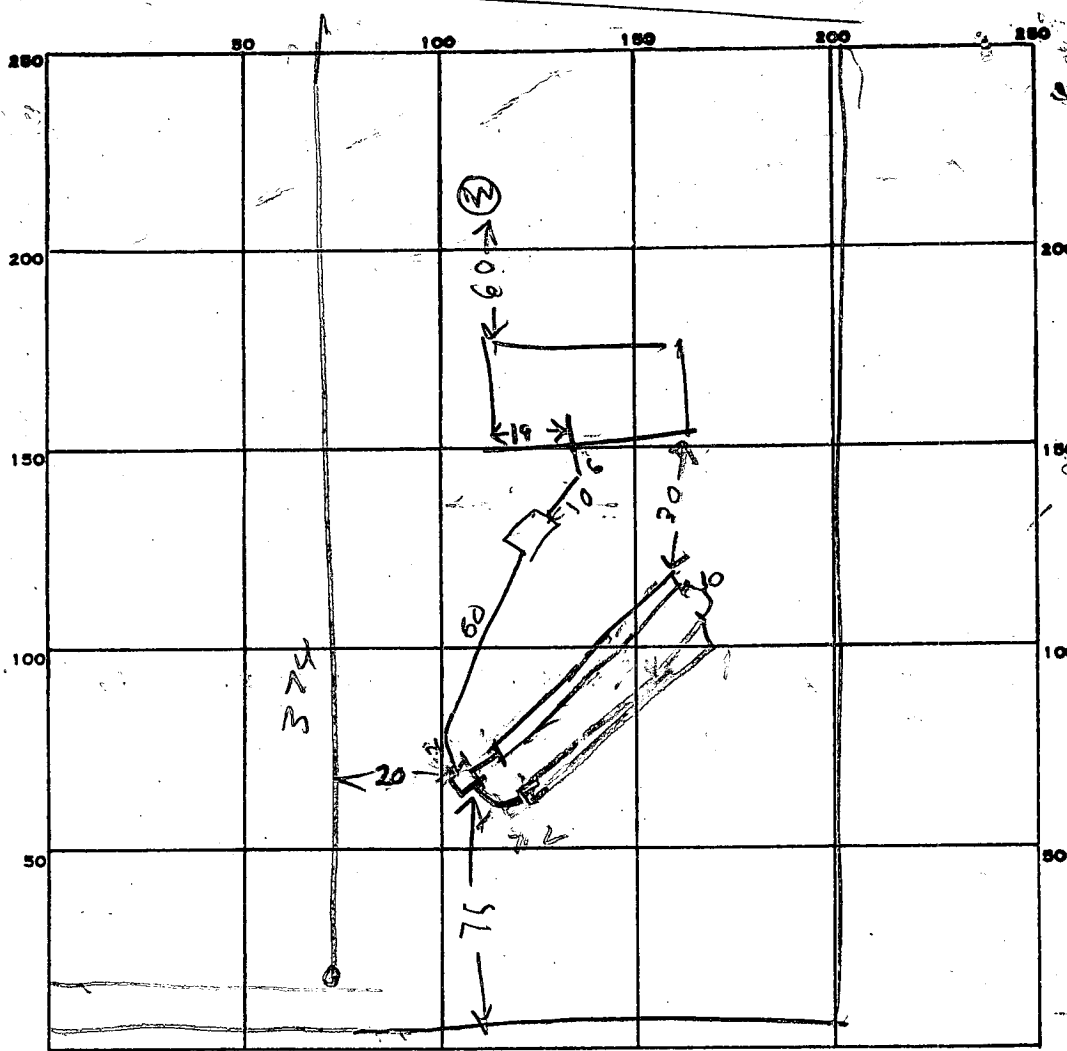
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA. OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

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

***CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.**

EH - 2-1082

95157



INDICATE NORTH. - NAME ADJOINING ROADWAY AS BASE LINE.

PERMIT CARD OK Paper instead

SEPTIC TANK, LEVEL 1500

CLEANOUTS OK

DISTRIBUTION BOX, LEVEL OK

TRENCH #1 | #2
TILE FIELD, DEPTH 9 | 9 FT.

TRENCH WIDTH 2 | 2 FT.

GRAVEL DEPTH 5 | 5 IN.

TOTAL LENGTH 80 | 80 FT. 160

NUMBER OF TRENCHES 2

TOTAL ^{ONE} ~~BOTTOM~~ AREA 800

SEEPAGE PITS, INSIDE DIAMETER _____ FT. DEPTH BELOW INLET _____ FT.

ABSORBENT AREA _____ SQ. FT.

REMARKS 11/19/85 LOCATION OK FILL DIRT OVER TRENCHES 1-3 FT

TRENCH #1 9 FT DEEP BELOW ORIGINAL GRADE TRENCH #1 OK

FILL WITH STONE DIG TRENCH #2 11/19/85 3:00 PM TRENCH #2

DUG. ADD STONE TO BOTH TRENCHES FINISH JOB RH

11/19/85 4 BR - 800 SQ FT REQUIRED 800 SQ FT INSTALLED

DATE SYSTEM APPROVED 11/20/85

INSPECTOR Raymond Rody

NOTE: This property does NOT lie within a flood plain (Flood Zone C - minimal flooding)

3/27/89 - OK TO SIGN
RZH

SADDLE
HORSE CT.

$$-R = 50.00' \quad L = 20.34'$$

525° 09' 10" W

20.51'

10' ASPHALT DRIVEWAY

S 25° 09' 10" W

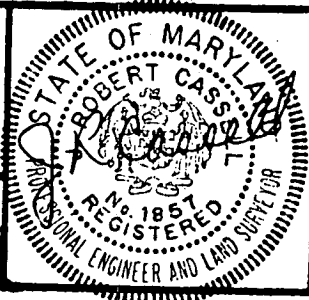
332.36'

THE INFORMATION ON THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS INDICATED HEREON ARE CONTAINED WITHIN THE OUTLINES OF THE LOT UPON WHICH THEY ARE ERECTED AND IS NOT TO BE CONSTRUED AS ESTABLISHMENT OF PROPERTY LINES.

ATLANTIC ENGINEERING

CORP.

198 Pennsylvania Ave.
Westminster, Md. 21157
(301).876-1288



HOUSE LOCATION SURVEY

3315 SADDLE HORSE CT.

LIBER 1369 FOLIO 607

HOWARD COUNTY, MD

Date _____

7120187

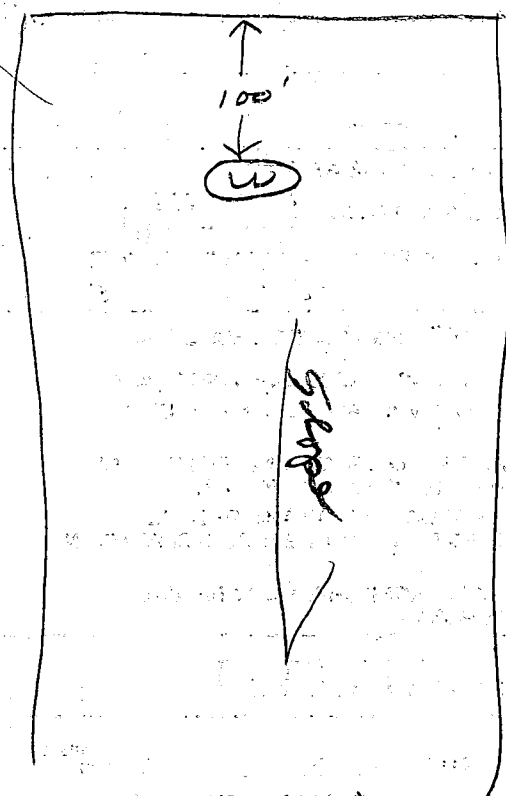
Signed

(GAG/PL)

Scale 1" = 50'

File # 18-2147-113

B 1 <div style="border: 1px solid black; padding: 2px; display: inline-block; font-size: 1.2em;">8560</div>	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL please print or type	OEP PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block; font-family: monospace;">H0-81-1022</div>
(THIS NUMBER IS TO BE PUNCHED IN COLS 3-6 ON ALL CARDS)		fill in this form completely	
Date Received <div style="border: 1px solid black; padding: 2px; display: inline-block;">6/14/85</div>		B 3 LOCATION OF WELL	
OWNER INFORMATION <div style="border: 1px solid black; padding: 2px; display: inline-block;">Sobus</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;">DANIEL</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">HOWARD</div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">2008</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">GRACIE ST.</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6 LENWOOD</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 10px;">EAST AYES</div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">FINKSBURG</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">MO21048</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6 LENWOOD</div>	
DRILLER INFORMATION <div style="border: 1px solid black; padding: 2px; display: inline-block;">Joseph L. Wayne</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;">238</div>		B 4 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Joseph L. Wayne</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;">WELL DRILLING</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">Saddle Horse Court</div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">5512 Ridge Rd Mt. Airy, Md. 21771</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">NEAR WHAT ROAD</div>	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">Joseph L. Wayne</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;">5/8/85</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</div>	
WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <div style="border: 1px solid black; padding: 2px; display: inline-block;">5</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">TOWN</div>	
AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <div style="border: 1px solid black; padding: 2px; display: inline-block;">500</div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3430</div>	
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)		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <div style="border: 1px solid black; padding: 2px; display: inline-block;">Howard</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;">A35157</div>	
APPROXIMATE DEPTH OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">185</div> FEET		COUNTY NAME <div style="border: 1px solid black; padding: 2px; display: inline-block;">Howard</div> COUNTY NO. <div style="border: 1px solid black; padding: 2px; display: inline-block;">A35157</div>	
APPROXIMATE DIAMETER OF WELL <div style="border: 1px solid black; padding: 2px; display: inline-block;">6</div> INCH		OEP SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block;">Joseph L. Wayne</div> STATE HEALTH INSERT S <div style="border: 1px solid black; padding: 2px; display: inline-block;">41</div>	
METHOD OF DRILLING (circle one) <input checked="" type="checkbox"/> BORED (or Augered) <input type="checkbox"/> JETTED <input type="checkbox"/> Jetted & DRIVEN <input checked="" type="checkbox"/> AIR-ROTARY <input type="checkbox"/> AIR-PERCussion <input type="checkbox"/> ROTARY (Hydraulic Rotary) <input type="checkbox"/> CABLE <input type="checkbox"/> REVERSE-ROTARY <input type="checkbox"/> Drive-POINT other _____		DATE ISSUED <div style="border: 1px solid black; padding: 2px; display: inline-block;">052085</div> CO SIGNATURE <div style="border: 1px solid black; padding: 2px; display: inline-block;">C. W. Will</div> EXP. DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">11/20/85</div>	
REPLACEMENT OR DEEPEMED 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 <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 DEEPEMED (IF AVAILABLE) <div style="border: 1px solid black; padding: 2px; display: inline-block;">41</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">52</div>		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 <div style="border: 1px solid black; padding: 2px; display: inline-block;">7907</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">5206</div>	
Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">54</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">GAP</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">63</div>		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION <div style="border: 1px solid black; padding: 2px; display: inline-block;">N</div>	
FORCE <div style="border: 1px solid black; padding: 2px; display: inline-block;">CW</div> WRITE INITIALS IN BOX <div style="border: 1px solid black; padding: 2px; display: inline-block;">H0-81-1022</div>		SPECIAL CONDITIONS	



Saddle Horse St

Could not find any corner
stakes - high grass -
6/14/85 JS

4/16/85
Retest
1:30 PM

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 35757

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 992-2330

DISTRICT _____

DATE 3-19-85

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 RANDOLPH B. COLE Daniel & Cindy Sobus

ADDRESS 554 6TH STREET PASADENA, Md. 21122 PHONE 255-6390

PROPERTY LOCATION:

SUBDIVISION GLENWOOD ESTATES LOT NO. 6, Sec 2.

3315
ROAD AND DESCRIPTION SADDLEHOSE COURT (LAST LOT ON LEFT BEFORE LARGE FENCED LOT.)

SIZE OF LOT 1.22 ACRES TYPE BLDG. 3 or 4 Bedroom
(NUMBER OF BEDROOMS)

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. Randolph B. Cole (3-19-85)
(SIGNATURE OF APPLICANT)

APPROVED BY C. Williams FOR TRENCHES DATE 4/16/85

REJECTED BY _____ FOR _____ DATE _____

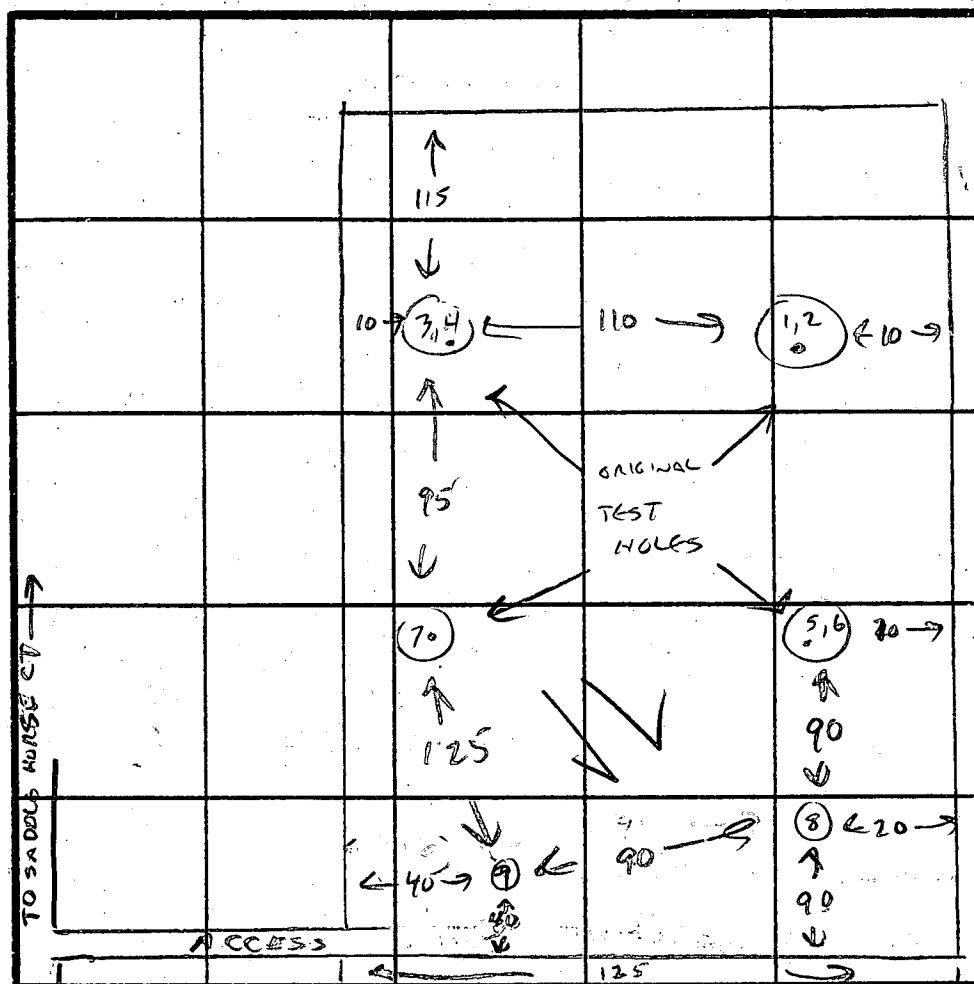
HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING B.P. 66058

BLDG. PERMIT SIGNED
AND RETURNED 7-29-85

THIS IS NOT A PERMIT

A hand-drawn soil profile diagram. It consists of a vertical rectangle representing the soil column. To the left of the rectangle, there are depth markers: '0' at the top, '4' and '5' between horizontal lines, and '3' at the bottom with a horizontal line. To the right of the rectangle, the soil layers are labeled: 'CLAY LOAM' in the top section, 'TRANSITION' in the middle section, and 'SANDY LOAM' in the bottom section.



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

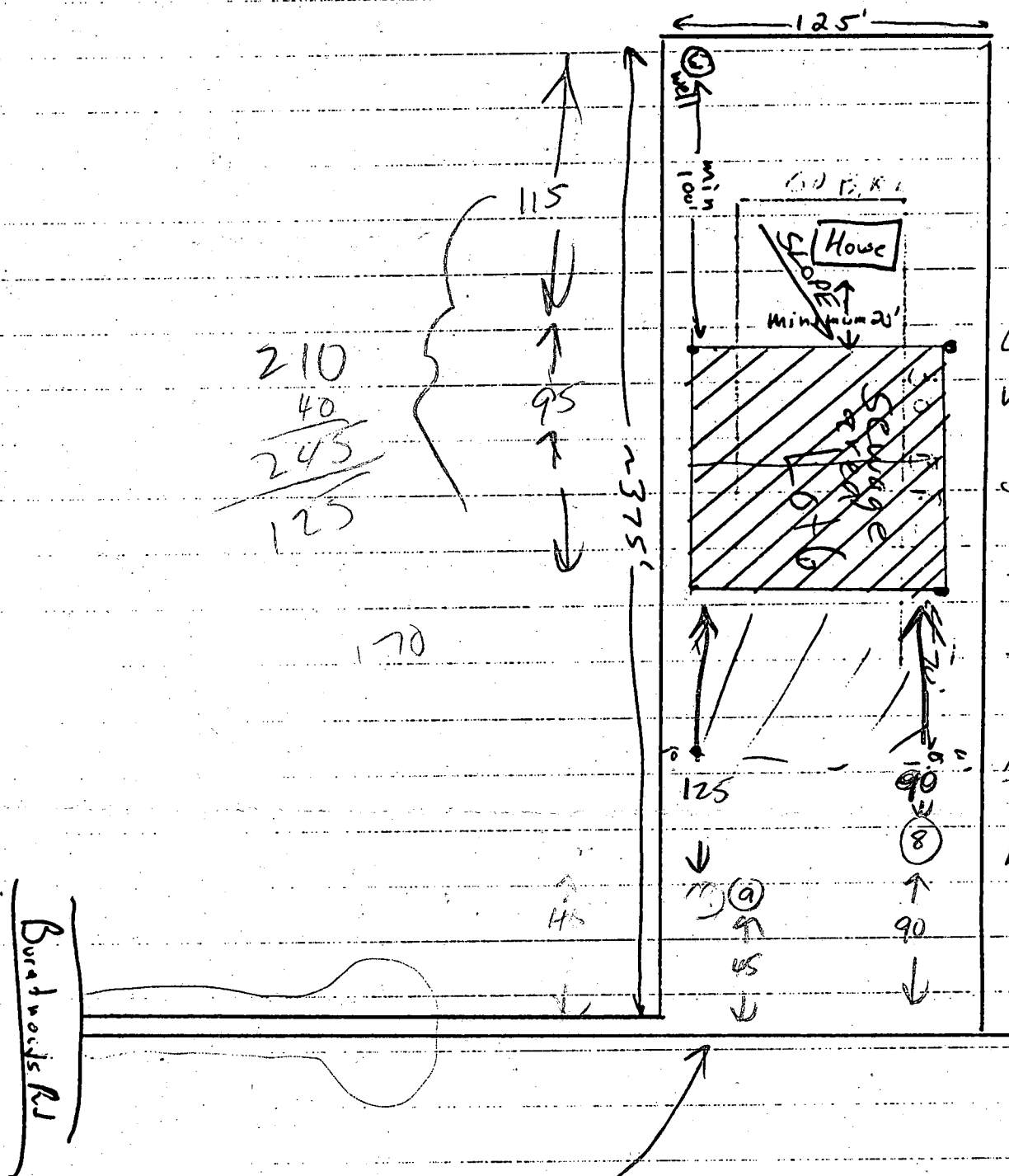
[illegible]

REMARKS OK TO EXTEND PERC AREA TO WITHIN 40' OF LOT LINE =

TYPE OF SOIL ORANGE SAND LOAM

TESTED BY Curt Thain

ALSO PRESENT



OK TO START SYSTEM
 200' FROM BACK
 LOT LINE BASED
 ON PERCS OF 4/16/85 CWS.

CJS
 R.B.C.
 a.m.s.

APPLICATION

A 19226

SEWAGE DISPOSAL TESTING

P _____

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043
TELEPHONE: 465-3000, EXT. 356

DISTRICT 4

DATE 12/6/74

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 Justice Tract, Joint Venture

ADDRESS 1131 Univ. Blvd. W. Rm. 215, Silver Spring, Md. 20902 PHONE 649-1500

PROPERTY LOCATION:

SUBDIVISION Glenwood Estates LOT NO. 6, Section 2

ROAD AND DESCRIPTION South Side of Burntwoods Road midway bet. Sharp Rd. & Shady Lane

SIZE OF LOT 49,000 sq. ft. TYPE BLDG. 3
NUMBER OF BEDROOMS

IF NOT SINGLE RESIDENCE DESCRIBE _____

THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC FACILITIES BECOME AVAILABLE.

SIGNATURE OF APPLICANT Justice Tract, Joint Venture, by *Shenbury* Partner

APPROVED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

REJECTED BY _____ FOR _____ DATE _____
(KIND OF SYSTEM)

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING _____

THIS IS NOT A PERMIT

HOWARD COUNTY HEALTH DEPARTMENT

JOYCE M. BOYD, M.D., M.P.H.
COUNTY HEALTH OFFICER



BUREAU OF ENVIRONMENTAL HEALTH

P. O. Box 476

ELLICOTT CITY, MARYLAND 21043
TELEPHONE:

461-9933

April 24, 1985

Dan & Cynthia Sobus
2008 Gracie Drive
Finksburg, Maryland 21048

RE: Percolation Retest
Lot 6 - Glenwood Estates II

Dear Mr. & Mrs. Sobus:

Percolation testing conducted at the above referenced property on April 16, 1985 allowed the septic reserve area to be moved downhill as far as you requested or even a little more.

I have enclosed the test results and septic system specifications to assist you in preparing the information that you will need for your well permit and later for your building permit.

The septic reserve area should total at least 10,000 square feet and should start at the location indicated for the first trench (220 ft. or less from back lot line). It should extend no farther than the new test holes.

If you have any further questions relative to this matter, please call me at 461-9933.

Very truly yours,

A handwritten signature in cursive script that reads "Craig Williams".

Craig Williams, Acting Director
Water and Sewer Program

CW:JR

Enclosures

[illegible]

C1 2290 SEQUENCE NO. (OEP USE ONLY)

STATE OF MARYLAND
WELL COMPLETION REPORT
FILL IN THIS FORM COMPLETELY
PLEASE PRINT OR TYPETHIS REPORT MUST BE SUBMITTED WITHIN
45 DAYS AFTER WELL IS COMPLETED.COUNTY
NUMBER A 35157DATE Received
8 13DATE WELL COMPLETED
06/14/85
15 20Depth of Well
22 265 26
(TO NEAREST FOOT)PERMIT NO.
FROM "PERMIT TO DRILL WELL"
H0-81-1022
28 29 30 31 32 33 34 35 36 37OWNER SOBOS DANIEL
STREET OR RFD last name SADDLE HULSE CT first name TOWN GLENWOOD
SUBDIVISION GLENWOOD EST SECTION LOT 6

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 Check
if water
bearingSAND 0 50
GRAY MICAC ROK 50 265

GROUTING RECORD

WELL HAS BEEN GROUTED
(Circle Appropriate Box)

TYPE OF GROUTING MATERIAL

CEMENT CM BENTONITE CLAY BC

NO. OF BAGS 22 NO. OF POUNDS 2068

GALLONS OF WATER 132

DEPTH OF GROUT SEAL (to nearest foot)

from 0 48 ft. to 38 54 ft.
(enter 0 if from surface)casing
types
insert
appropriate
code
below

CASING RECORD

ST CO
STEEL CONCRETE
PL OT
PLASTIC OTHERMAIN Nominal diameter Total depth
CASING top (main) casing of main casing
TYPE (nearest inch) (nearest foot)5 6 59
60 61 63 64 66 67 70EACH
CASING

OTHER CASING (if used)

diameter depth (feet)
inch from toscreen type or open hole
insert
appropriate
code
below

SCREEN RECORD

ST BR HO
STEEL BRASS OPEN
PL BRONZE HOLE
PLASTIC OTHER

C2

DEPTH (nearest ft.)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21
22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)
56 60

GRAVEL PACK from to

IF WELL DRILLED WAS
FLOWING WELL INSERT
F IN BOX 68OEP USE ONLY
(NOT TO BE FILLED IN BY DRILLER)T (E.R.O.S.) WQ
70 72 74 75 76
TELESCOPE LOG OTHER DATA
CASING INDICATOR

C 3

PUMPING TEST

HOURS PUMPED (nearest hour) 3

PUMPING RATE (gal. per min. to nearest gal.) 10

METHOD USED TO MEASURE PUMPING RATE bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING 35

WHEN PUMPING 114

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) 31 35

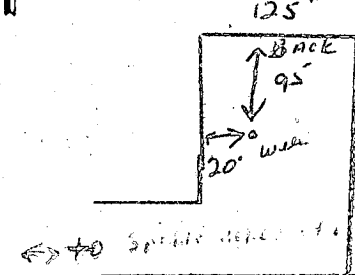
PUMP HORSE POWER 37 41

PUMP COLUMN LENGTH (nearest ft.) 43 47

CASING HEIGHT (circle appropriate box and enter casing height)

+ above } LAND SURFACE (nearest foot)
- below } 2 (nearest foot)

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)

HEALTH