

12-27-85  
130 pm  
12/30/85  
11:10 AM  
W.P.I.  
05-383390  
APPROVED  
12/30/85  
R1  
P36299  
A 35830-W

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
992-2330  
461-9933

INDEXED

ELLICOTT CITY

DISTRICT

DATE 12/4/85

Paul Schissler

IS PERMITTED TO INSTALL ☒ ALTER

ADDRESS 4410 Salembottom Road, Westminster, MD 21157 PHONE 875-4197

SUBDIVISION Highland Lakes ROAD 6566 River Clyde Dr. LOT 56

PROPERTY OWNER United General Contractors, Inc.

ADDRESS

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

GARBAGE GRINDER? YES ☒ NO

SEPTIC TANK CAPACITY 2000 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 245 sq. ft. per bedroom with garbage disposal. Trench to be 2 feet wide. Inlet 3½ feet below original grade. Bottom maximum depth 7½ feet below original grade. Effective area begins at 3½ feet below original grade. 4 feet of stone below distribution pipe. LOCATION: Start first trench 90 feet from left lot line and 220 feet from rear lot line as seen when facing property from River Clyde Drive. Run trench(s) along contour toward rear 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.

SOIL CONDITIONS DIFFERENT THAN EXPECTED.

800 SQ FT TOTAL REQUIRED.

OK TO INSTALL TRENCH INLET AT 3' BOTTOM AT 10' IN VICINITY OF PEARL HOLE. IF ROCK ENCOUNTERED, THEN SHALL LOWER TRENCH REQUIRED.

PLANS APPROVED BY C. Williams

DATE 9/20/85

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.

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.

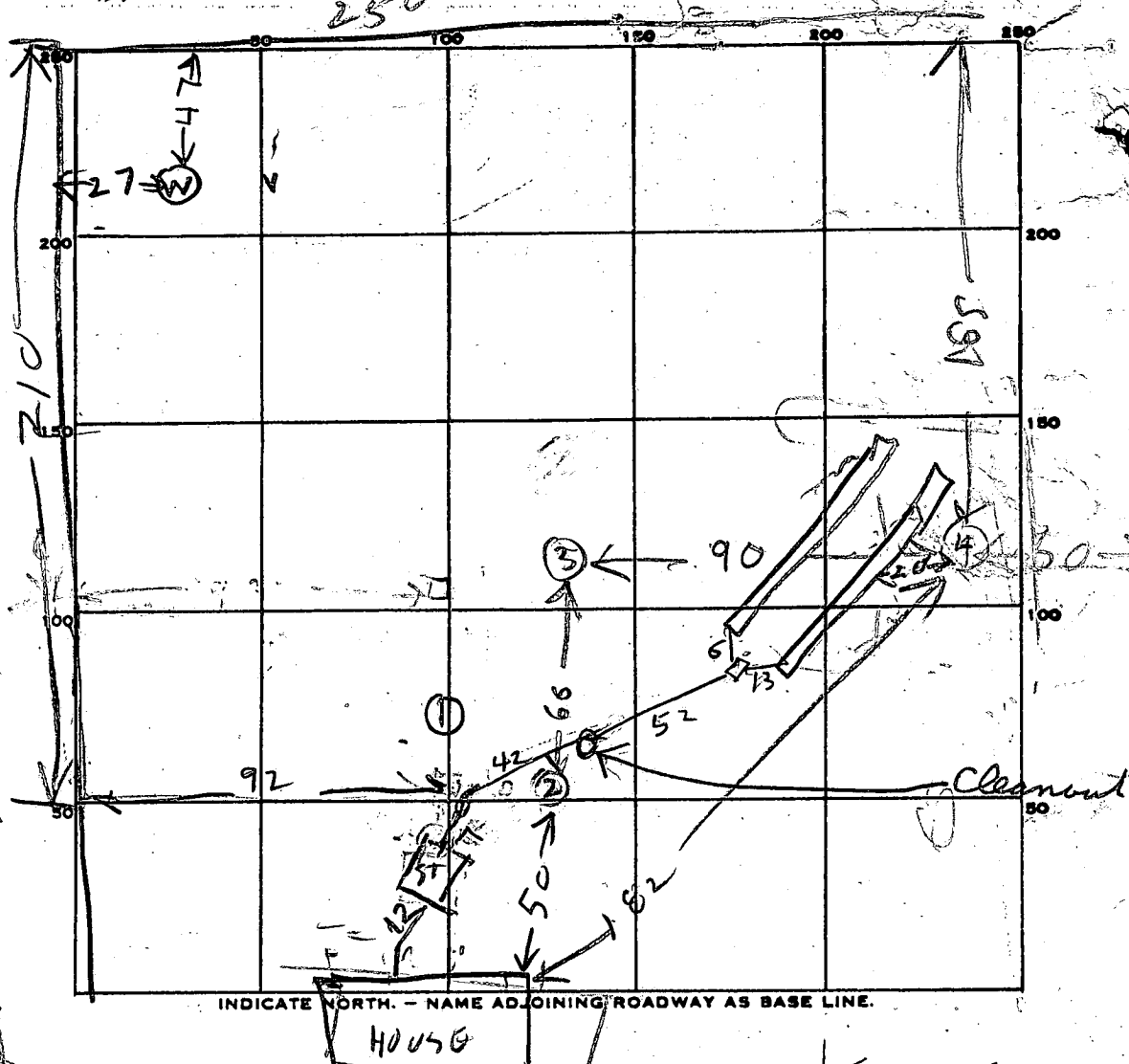
\*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

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

EH - 2-1082

35830

BACK LINE 250



①  
BROWN SANDY  
ROCK BOT

②  
BROWN SANDY  
ROCK BOT

③  
BROWN SANDY  
ROCK BOT

④  
BROWN SANDY  
LOAM

PERMIT CARD

ST SEWER

SEPTIC TANK, LEVEL OK 700 0 14 CLEANOUTS OK OK  
TOP 1 FT BELOW GRADE

DISTRIBUTION BOX, LEVEL OK

TILE FIELD, DEPTH #1 10.7 #2 10.7 TRENCH WIDTH #1 2 #2 2 FT. TOTAL 2

GRAVEL DEPTH 7 1/4 7 1/4 IN. TOTAL LENGTH 71 71 142 FT.

NUMBER OF TRENCHES 2 TOTAL BOTTOM AREA #1 497 #2 497 TOTAL 994

SEEPAGE PITS, INSIDE DIAMETER \_\_\_\_\_ FT. DEPTH BELOW INLET \_\_\_\_\_ FT.

ABSORBENT AREA \_\_\_\_\_ SQ. FT.

REMARKS 12/27/85 - HIT ROCK MUST CHECK PERC RECORDS. OK TO COVER TANK. MUST CHANGE SPECS AFTER CONSULTING RECORDS R/H

12/27/85 - CANNOT FIND RECORDS CONSULT WITH CIN. DECIDED DEEP DITCH NEAR PERC HOLD ④

800 SDF1 12/30/85 - TWO TRENCHES DUG ADD STONE. & CONNECT TO TANK.

12/30/85 - STONE PADDED & TRENCHES HOOKED TO TANK R/H

MARK TOOK PICTURE OF TRENCH FOR PHOTOLOG - R/H

DATE SYSTEM APPROVED 12/30/85 INSPECTOR Raymond Hodger

# ELEVATIONS

WELL 490.00'

HOUSE

F.F. 490.00'

BASE 482.00'

INV. OUT 486.25'

TANK

EX. GR. 488.00'

FIN. GR. 488.00'

INV. IN 486.00'

INV. OUT 485.50'

SEPTIC

EX. GR. 488.00'

FIN. GR. 488.00'

INV. IN 485.00'

EX. GRADE AT TRENCH 488'

INV. TO TRENCH 484.5'

210

92

902 2108

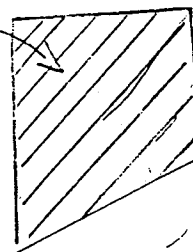
47

92

92

Elevation ok  
9/20/85 C. Wells

SEPTIC EASEMENT LOT 54



REVISED SEPTIC LOCATION  
AS OF 7/23/85

LOT 56

(3.72 AC. ±)

RIVER CLYDE DRIVE

B.P. Appl # 66823

C12407

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-35830-W

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

OWNER

STREET OR RFD

SUBDIVISION

SECTION

LOT

WELL LOG

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

DESCRIPTION (Use  
additional sheets if needed)

FEET

Check  
if water  
bearing

rolling ground gravel

sandstone

gray shale

gray shale & sandstone

brown shale

water

gray shale

brown shale

water

brown & gray shale

brown shale

water

gray shale

flint

water

flint & gray shale

flint

water

gray shale

GROUTING RECORD

WELL HAS BEEN GROUTED

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

NO. OF BAGS

NO. OF POUNDS

GALLONS OF WATER

DEPTH OF GROUT SEAL (to nearest foot)

from

ft. to

ft.

CASING RECORD

MAIN CASING TYPE

Nominal diameter top (main) casing (nearest inch)

Total depth of main casing (nearest foot)

OTHER CASING (if used)

diameter inch

depth (feet) from to

SCREEN RECORD

screen type or open hole

insert appropriate code below

STEEL

BRASS

OPEN HOLE

BRONZE

PL

OT

PLASTIC

OTHER

DEPTH (nearest ft.)

SLOT SIZE 1 2 3

DIAMETER OF SCREEN (NEAREST INCH)

GRAVEL PACK

IF WELL DRILLED WAS FLOWING WELL INSERT F IN BOX 68

OEP USE ONLY

(NOT TO BE FILLED IN BY DRILLER)

T

(E.R.O.S.)

WQ

TELESCOPE CASING

LOG INDICATOR

OTHER DATA

PUMPING TEST

HOURS PUMPED (nearest hour)

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

METHOD USED TO MEASURE PUMPING RATE

WATER LEVEL (distance from land surface)

BEFORE PUMPING

WHEN PUMPING

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 (CIRCLE) (YES or 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)

PUMP HORSE POWER

PUMP COLUMN LENGTH (nearest ft.)

CASING HEIGHT (circle appropriate box and enter casing height)

above

below

LAND SURFACE (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)

CIRCLE APPROPRIATE LETTER

A A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED

E ELECTRIC LOG OBTAINED

P TEST WELL CONVERTED TO PRODUCTION WELL

I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "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.

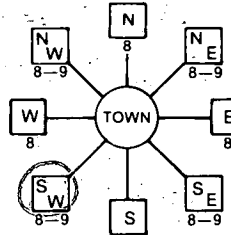
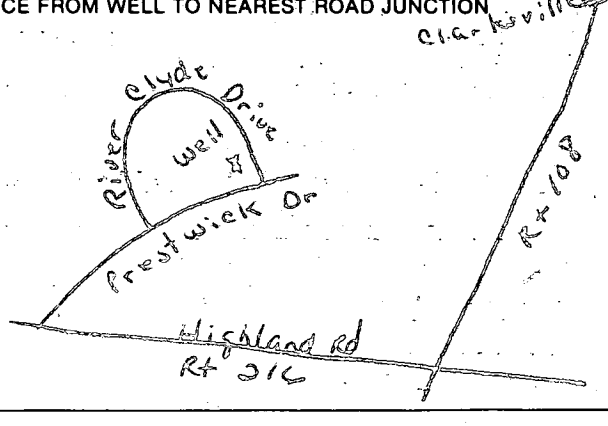
DRILLERS IDENT. NO.

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)

HEALTH

<b>B 1</b> 3006 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY) 10:00 AM	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER 40-81-11149 fill in this form completely
<b>OWNER INFORMATION</b> Date Received: 7/20/85 United General Contr. Inc. 8370 Court Ave. Ellicott City MD 21043		<b>LOCATION OF WELL</b> Howard 8 COUNTY Highland Lake 23 SUBDIVISION SECTION 44 46 LOT 55 50 Clarksville 52 NEAREST TOWN MILES FROM TOWN (enter 0 if in town) 1.25 MI	
<b>DRILLER INFORMATION</b> Wm. W. Reichart Driller's Name Wm. W. Reichart Inc. Firm Name RD #2 Box 54 Hanover PA 17331 Address Wm. W. Reichart Signature 7/26/85 Date		<b>B 4</b> DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH WEST EAST SOUTH 34 300 37 DISTANCE FROM ROAD ENTER FT or MI 5+	
<b>WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) 5 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) 500		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL Howard COUNTY NAME A-35730-20 COUNTY NO. STATE HEALTH INSERT S DATE ISSUED 082086 CO SIGNATURE EXP. DATE 08-20-86 NORTH GRID 494000 EAST GRID 0811000	
<b>USE FOR WATER (CIRCLE APPROPRIATE BOX)</b> <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. Approved well 2. 3. WRITE THE BOX NUMBER FROM THE MAP HERE 8101 4904	
APPROXIMATE DEPTH OF WELL 250 FEET APPROXIMATE DIAMETER OF WELL 6 INCH <b>METHOD OF DRILLING (circle one)</b> BORED (or Augered) JETTED Jetted & DRIVEN AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other		8-21-85 well location OK 21 FT CASING 20 FT OPEN ANNULAR 7+ BAGS CEMENT TAG PRESENT WATER sample SAGAL	
<b>REPLACEMENT OR DEEPEND WELLS (CIRCLE APPROPRIATE BOX)</b> <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 DEEPEEN AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEND (IF AVAILABLE)		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 GAP FORCE 5A WRITE INITIALS IN BOX PERMIT No. 40-81-11149 SPECIAL CONDITIONS			