HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH 461-9933

DATE 11/17/87

DATE SYSTEM APPROVED 11-25-87

INSPECTOR _

MARYLAND STATE DEPARTMENT OF HEALTH' UNTY 01-169149

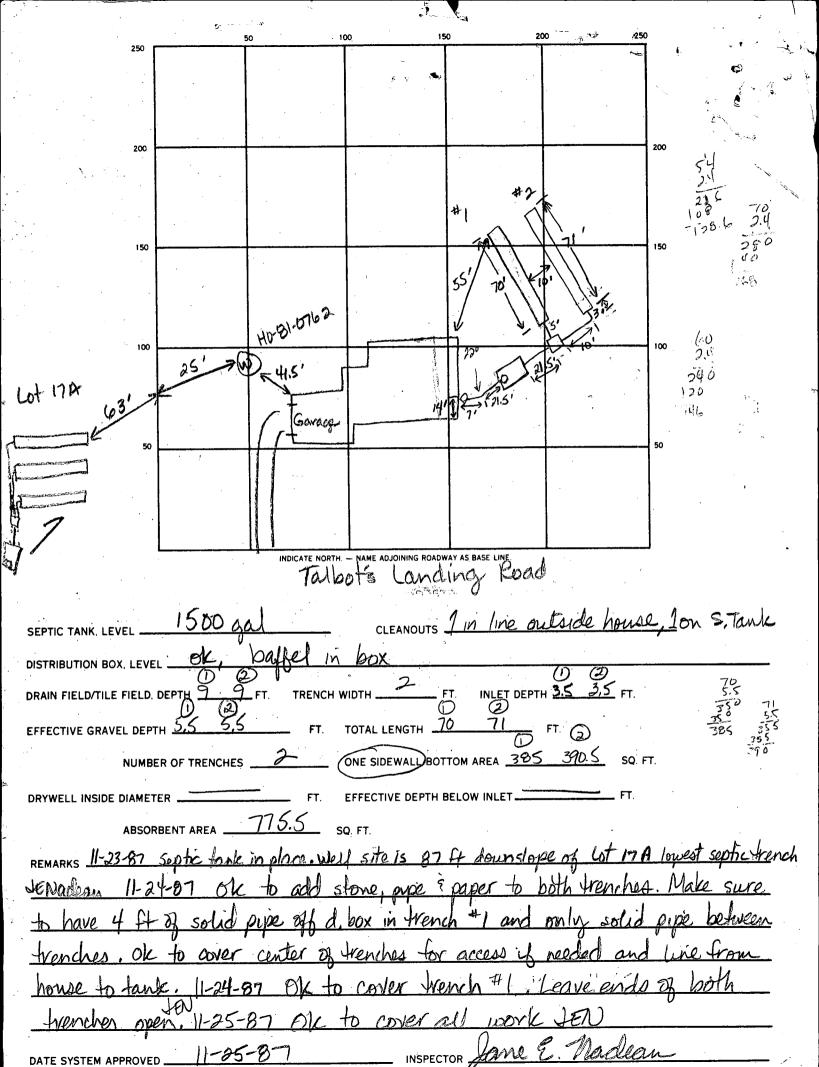
Warren Lowe	IS PERMITTED	TO INSTALL	X ALTER
ADDRESS	PHON	NE ANGA A	GPLATTED ENTINGE
SUBDIVISION Talbot's Last Shift	ROAD 5161 Talbot 's Land	ing_LOT	17CD TO LOT
PROPERTY OWNER Daniel Nor	din/Judith Burns		1991.
Builder Galen Martin, Horize ADDRESS	on Builders - confused	l about	regulations
IF GARBAGE GRINDER IS USED INCREASE SEPTIC TANK	CAPACITY BY 50% AND ABSORPTION AREA	BY 22%.	² 100 4)540
GARBAGE GRINDER? YES NOX		ţ	540
SEPTIC TANK CAPACITY GALLONS	NUMBER OF BEDROOMS3	138	A trench 30
TRENCHES - 180 sq. ft. per bedroom.	Trench to be 2 feet wide.	Inlet 5 f	<u>eet below origi</u> na
	epth 9 feet below original gr		
	grade. 4 feet of stone belo		
LOCATION - Start the trench 130 fee			
	nd 155 feet from the 983.82 i y). Run trench(s) on contour		
· · · · · · · · · · · · · · · · · · ·	en facing lot from right-of-v		ne iione light
	feet in length. Provide 6" -		ter cleanout and
cap to grade or above on			
÷			
PLANS APPROVED BY Craig	Williams	DATE	11/17/87
COVER NO WORK UNTIL INSPECTED AND APPROVED.	•		.*
NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPART	TMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERA	TION OF ANY SYST	rem.
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	X, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OT	HERWISE SPECIFIC	ALLY AUTHORIZED)
NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFO	ORE AND AFTER PLACING GRAVEL IN TRENCH(ES).	•	
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO AB	SORPTION TRENCH TO EXCEED 100 FEET IN LENGTH	,	
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRO	N OR SCHEDULE 40 PVC OR ABS.		
DEDMIT VOID AFTER TWO YEARS	•		

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

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.



APPLICATION

SEWAGE DISPOSAL TESTING

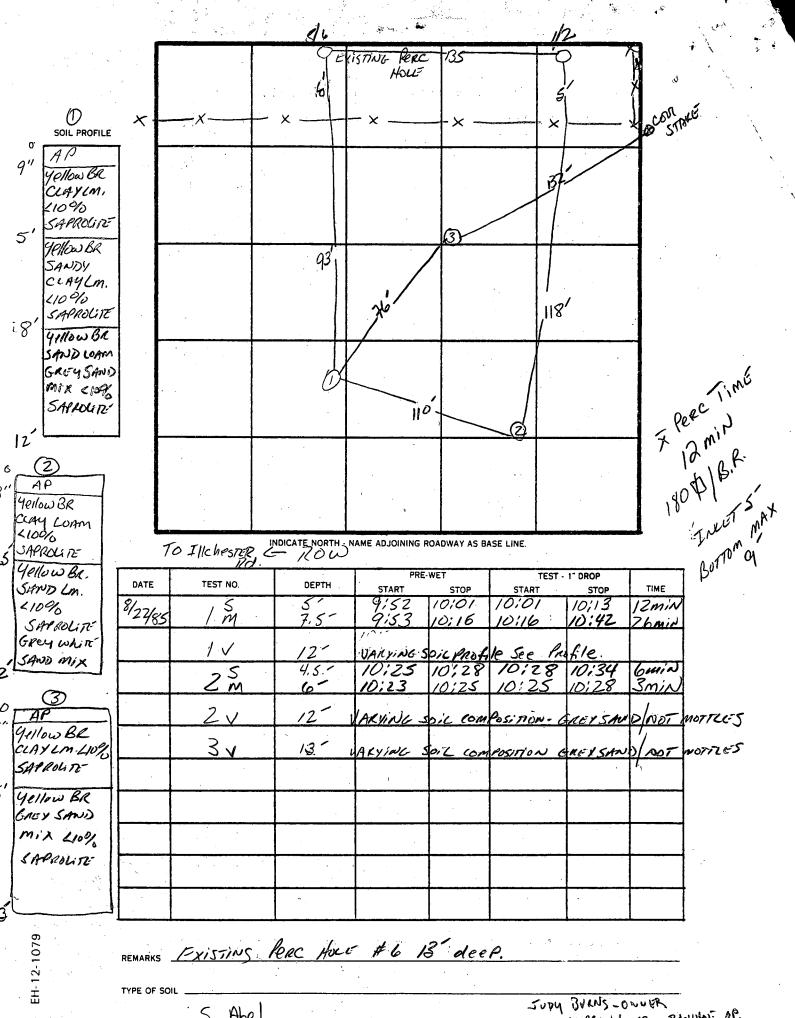
STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

HOWARD COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH SERVICES**

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TELEPHONE: 992-2330

					*	
						·
TO:	THE COUNTY HEALTH OFFICE	R .		•		
	ELLICOTT CITY, MARYLAND					
	I, HEREBY, APPLY FOR THE NE	ECESSARY TEST IN ORDER T	O CONSTRUCT (OR RECO	NSTRUCT) A SEWAGE DISP	OSAL SYSTEM.	. *
	+ -	-1 A G	2		100/-	J.
PROP	PERTY OWNER JUD	1TH HT)	URNS +	MNIEZ	P. NORD	1 N
	ADDRESS 318	ELKADER	Ro B	ALTO MAPH	ONE 849-	1884
PROP	PERTY LOCATION:	Co.		••	<u> </u>	
SUBD	DIVISION TABOT'S	CAST SHIP	1	LOT NO	11a +	2
ROAD	D AND DESCRIPTION	WHESTER	Ra			
SIZE	OF LOT 2+	ACRES		TYPE BLDG	Cosion	VE
					(NUMBER O	F BEDROOMS)
THE	SYSTEM INSTALLED UNDER	THIS APPLICATION IS AC	CCEPTABLE ONLY UNT	IL PUBLIC FACILITIES B	BECOME AVAILABLE. I FU	ILLY UNDERSTAND THE
FEE	CONNECTED WITH THE FILE	NG OF THIS PERC TEST	APPLICATION IS NON-F	REFUNDABLE UNDER AN	NY CIRCUMSTANCES. I AI	LSO AGREE TO COMPLY
WiTi	H ALL M.O.S.H.A. REQUIREM	IENTS IN TESTING THIS	LOT	idit &	Joun.	2
				(SIGNATURE	OF APPLICANT)	,
APPR	OVED BY Sichney a	ful	FOR	esp henches	DATE	1/17/84
REJE	CTED BY	· · · · · · · · · · · · · · · · · · ·	FOR		DATE	· ·
HOLD	PENDING FURTHER TESTS	·			DATE	
REAS	ONS FOR REJECTION OR HOLDIN	NG 8-22-85 /	Regence Reso	1ts SATISFACTO	ony; sawe	_ 8-22-85
Ne	ew forc AREA	DRAWN ON AP	PROJED PLAT	SACIO	BIDG PER	MIT SIGNED
			ţ.		AND RETU	RNED 1/17/84



S. Abe TESTED BY .

WARREN LOWE - BACKHOUT OP. ALSO PRESENT

PRELIMINARY

APPLICATION

	, i	SEWAGE	E DISPOSAL TI	ESTING		:		•
	STATE OF MAR	YLAND - DEPAR	TMENT OF HE	ALTH AND MEN	TAL HYGIENE		P	
OWARD COUNTY H	IEALTH DEPARTMEN	NT :			DISTI	RICT	lst	
	CITY, MARYLAND 21043	3	:		D	ATE)/5/81	
	v		•					
**************************************		er or a superior						
				•			• .	: , ,
	•							1000
	× ×							
ý					, .	,	•	•
,	e e e e e e e e e e e e e e e e e e e	$\frac{1}{2} = \frac{1}{2} + \frac{1}{2} = \frac{1}{2}$						
HE COUNTY HEALTH OF					# 1		•	
LLICOTT CITY, MARYLAN)				•		•
HEREBY, APPLY FOR TH	HE NECESSARY TEST IN (ORDER TO CONSTRU	ICT (OR RECONST	RUCT). A SEWAGE DIS	SPOSAL SYSTEM.		• .	
Howa	rd Associates	;						÷
TY OWNER								
3591 Sc	cheel Drive,	Ellicott C	itu. Md.	21043	NONE DON R	euwer -	465-49	20
DDRESS				<u> </u>	HONE			
			•					
Y LOCATION:		•						•
Talbott!	s Last Shift	•	-	LOT	NO. <u>17C,D</u>			
sion <u>Talbott's</u>	and start at which is a second of the start	one no en orden or	- 	LOT	NO <u>17C,D</u>			· · · · · · · · · · · · · · · · · · ·
sion <u>Talbott's</u>	s Last Shift Ilchester Roa	nd		LOT	NO. <u>17C,D</u>			,
sion <u>Talbott's</u>	and start at which is a second of the start	ng na sina ad		LOT	NO. <u>17<i>C</i>, D</u>			
SION <u>Talbott's</u>	and start at which is a second of the start	id		LOT	NO. <u>17C,D</u>			
SION <u>Talbott's</u>	and start at which is a second of the start	ad		LOT		A 2-2		
Talbott's ID DESCRIPTION	and start at which is a second of the start	ad		LOT	.ng. <u>3 or</u>	4 bedi		
SION	and start at which is a second of the start	ad		7	.ng. <u>3 or</u>		OOMS BEDROOMS	
SION Talbott's	Ilchester Roa			TYPE BL		UMBER OF	BEDROOMS	
SION Talbott's	Ilchester Roa		E ONLY UNTIL F	TYPE BL		UMBER OF	BEDROOMS	
Talbott's ID DESCRIPTION LOT? STEM INSTALLED UN	Ilchester Roa	ON IS ACCEPTABL		TYPE BL	DG. 3 OT (N	IUMBER OF	BEDROOMS	TAND THI
Talbott's ID DESCRIPTION LOT? STEM INSTALLED UNDERCRED WITH THE	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES	DG 3 OT (N	LABLE. I FU	BEDROOMS LLY UNDERS SO AGREE TO	TAND THI
Talbott's ID DESCRIPTION LOT? STEM INSTALLED UNDERCRED WITH THE	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES	DG 3 OT (N	LABLE. I FU	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's ID DESCRIPTION LOT STEM INSTALLED UNDONNECTED WITH THE	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG 3 or (N S BECOME AVAIL ANY CIRCUMST hett Real	LABLE I FU	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's ID DESCRIPTION LOT STEM INSTALLED UNDONNECTED WITH THE	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG 3 OT (N	LABLE I FU	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's ID DESCRIPTION LOT? STEM INSTALLED UN INNECTED WITH THE	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG. 3 OT ON S BECOME AVAIL ANY CIRCUMST hett Real RE OF APPLICA	LABLE I FU	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's AD DESCRIPTION PORT STEM INSTALLED UN DINNECTED WITH THE	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG. 3 OT ON S BECOME AVAIL ANY CIRCUMST hett Real RE OF APPLICA	LABLE I FUI ANCES I AL ty & Ho	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's IND DESCRIPTION POT STEM INSTALLED UN CONNECTED WITH THE ALL M.O.S.H.A. REQUI	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG. 3 OT (NO SECOME AVAILABLE ANY CIRCUMST Hett Real RE OF APPLICA	LABLE I FUI ANCES I AL ty & Ho	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's ND DESCRIPTION POT STEM INSTALLED UNDONNECTED WITH THE ALL M.O.S.H.A. REQUIRED BY	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG. 3 OT (NO SECOME AVAILABLE ANY CIRCUMST Hett Real RE OF APPLICA	LABLE I FULL ANCES I AL ty & Ho INT)	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	TYPE BL PUBLIC FACILITIES UNDABLE UNDER	DG. 3 OT (NO SECOME AVAILABLE ANY CIRCUMST Hett Real RE OF APPLICA	LABLE I FULL ANCES I AL ty & Ho INT)	BEDROOMS LLY UNDERS SO AGREE TO	TAND THE
Talbott's ND DESCRIPTION POT YSTEM INSTALLED UN DINNECTED WITH THE ALL M.O.S.H.A. REQUI	Ilchester Roa	ON IS ACCEPTABL	ON IS NON-REF	PUBLIC FACILITIES UNDABLE UNDER EUWER FOR R. (SIGNATU	DG. 3 OT (NO SECOME AVAILABLE ANY CIRCUMST Hett Real RE OF APPLICA	ANCES. I AL ty & Hc INT) DATE	BEDROOMS LLY UNDERS SO AGREE TO	COMPLY SOCIAT

SOIL PROFILE

O

CALLED SOIL PROFILE

CALLED SOIL P

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

			PRE-	WET	TEST	TEST - 1" DROP		
DATE	TEST NO.	. DEPTH	START	STOP	START	STOP	TIME	
salv.							7	
		4			·			
. ••								
		<u> (1868-1988)</u>	2.0 . \(\alpha\)					
				, .				
•					-			
	-							

REMARKS	;	 		
	 	Vicinity of	,	
TYPE OF SOIL	 			·
TESTED BY	 		ALSO PRESENT	

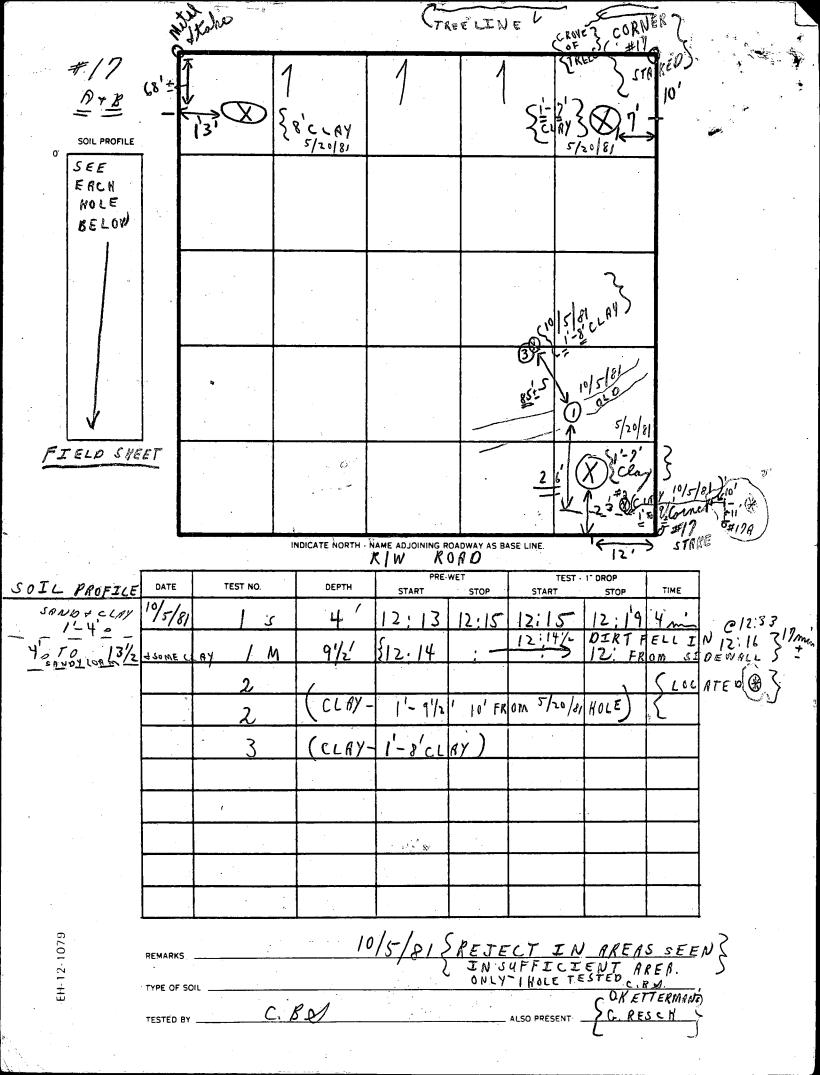
EH-12-1079

AIDD HOLD October 5, 1981 Fill sheet C.B.J. REUWER -1-b. ALSO 3-0 KET TERMAN PRESENT MAGIO (NOLD FOR WET SERSON 7 D MARKED HOLD IF TESTED FOR: (1) HOUSE SITE (2) WATER WELL SITE
(3) LERTIFIED
PERC-HOLE EDGE OF PAYED RORD WITH TAR + CHIP Time I start SOIL PROFILE CLRYISH 1: 01/10 ABOVE WATER WATER ESTS NO. DIGGER #2 ONLY DUCTOB No CLAYISN TESTS DIGGER # CLAYISH ONLY DUG TO 5/2' No TESTS DIGGER No TESTS CLAYISH ONLY DU ON 17 A

PRELIMINARY

APPLICATION

	STAT		DEI MITTINE III.		MENTAL H	IGICIAL	P	
•	HOWARD COUNTY HEALTH DI	EPARTMENT				W	lst	
	ENVIRONMENTAL HEALTH SE	ŖVICES				DISTRICT _		6 1.
	P. O. BOX 473 ELLICOTT CITY, MARY	LAND 21043	4			DATE _	5/20/81	Mar.
	TELEPHONE: 992-2330				ţ	UAIL	7)	i 14:
								1 4
		in a figure de la filipe de la servición de la La companya de la co	ett var ett ett ett ett ett ett ett ett ett et		25 to 1 , X d		. 4	N
	6.				. ;			h 31
	10-16	:				, and the second second	, ,	3
	The state of the s						`	1
		14.		•				
		7						,
TO:	THE COUNTY HEALTH OFFICER	~ 7(I)					3	
	ELLICOTT CITY, MARYLAND	# 1 m	1	•				
	I, HEREBY, APPLY FOR THE NECESSA	RY TEST IN ORDER TO	CONSTRUCT (OR REC	ONSTRUCT) A SEV	AGE DISPOSAL	SYSTEM.	, in the second	
		200						
PROPE	ERTY OWNER Howard As	sociates				·	·	
			: ***					
	ADDRESS	<u> </u>	_ * ;*		PHONE	Don Reuwe	r-531-64.	55
		•				*	' با درين د	Consultation of
PROPE	ERTY LOCATION	eren de proposition			•		*	•
- 1	THE AMELICAN		·	•				
SUBDI	VISIONTalbot's-Last	Shift	1		LOT NO	17-		
			$\sum_{i \in \mathcal{S}_{i}} \mathbf{w}_{i} = \sum_{i \in \mathcal{S}_{i}} \mathbf{w}_{i} = \sum_{i \in \mathcal{S}_{i}} \mathbf{w}_{i} = \sum_{i \in \mathcal{S}_{i}} \mathbf{w}_{i}$. The State of	$e^{-i t \cdot \mathbf{r}} = e^{-t} \mathbf{r}^{-1} \cdot e^{-t} \mathcal{J}^{\mu} + \mathcal{J}^{\mu}$	•	
ROAD	AND DESCRIPTION	r Road						···
-		and the state of t	A CONTRACT OF SALES		٠,			
	4				<u></u> .	- 1. ·		, J
	and the second of the second o						04 6	a San indianimanis 1911-y
SIZE (OF LOT		54 · C	1.1.1	TYPE BLOG. 3	or 4 bed	rooms	7
7. (3. 	K BELLEVER TW					NUMBE	OF BEDROO	MS)(\
1		Or him washing were	41 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in the N		13%	T_{ij}
THE	SYSTEM INSTALLED UNDER THIS	APPLICATION IS ACC	EPTABLE ÖNLY UI	TIL PUBLIC FAC	ILITIES BECO	ME AVAILABLE.	I FULLY UNDE	RSTAND THI
				,	ا	2		,
	CONNECTED WITH THE FILING OF	THIS PERC TEST AP	PLICATION IS NO	-REFUNDABLE	UNDER ANY CI	RCUMSTANCES	I ALSO AGREE	TO COMPL
FEE (1. M. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			2 -			
						r		
	I ALL M.O.S.H.A. REQUIREMENTS	IN TESTING THIS L	OT /s/ Dor	Réuwer f	or Howar	d Associa	tes	
	I ALL M.O.S.H.A. REQUIREMENTS	IN TESTING THIS L	ot /s/ Dor	(Si	GNATURE OF	d Associa APPLICANT)	tes	
	ALL M.O.S.H.A. REQUIREMENTS	IN TESTING THIS L		Rêuwer f	GNATURE OF	d Associa APPLICANT)	tes	
WITH	OVED BY		FOR	(SI)	GNATURE OF	APPLICANT) DATE _	tes	
WITH	The second secon	IN TESTING THIS L	FOR	(SI)	GNATURE OF	APPLICANT)	tes	
WITH	OVED BY		FORFOR	(SI)	GNATURE OF	APPLICANT) DATE DATE		
WITH	OVED BY		FOR	(SI)	GNATURE OF	APPLICANT) DATE _		
WITH APPRO	OVED BY TED BY PENDING FURTHER TESTS		FORFOR	(SI)	GNATURE OF	DATE		
WITH APPRO	OVED BY TED BY PENDING FURTHER TESTS		FORFOR	(SI)	GNATURE OF	DATE		
WITH APPRO REJEC	PENDING FURTHER TESTS		FOR	(SI)	GNATURE OF	APPLICANT) DATE _ DATE _ DATE _		
WITH APPRO REJEC	PENDING FURTHER TESTS		FOR	(SI)	GNATURE OF	APPLICANT) DATE _ DATE _ DATE _		



APPLICATION

Α	3	Ó	7	8	0

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

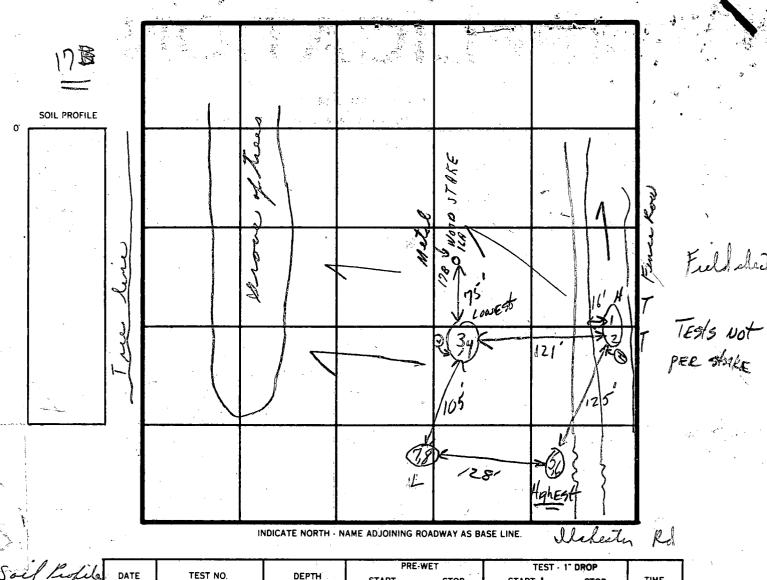
HOWARD COUNTY HEALTH DEPARTMENT **ENVIRONMENTAL HEALTH SERVICES**

P.O. BOX 476 ELLICOTT, MARYLAND 21043

TELEPHONE: 992-2330

DISTRICT

			; * 			· · · · · · · · · · · · · · · · · · ·	•
TO: THE COUNTY HEALT ELLICOTT CITY, MAR	the state of the s						
I. HEREBY, APPLY FO	OR THE NECESSARY TEST IN	ORDER TO CONSTRUCT (C	OR RECONSTRUCT) A SE	WAGE DISPOSAL'S	SÝSTEM.		
PROPERTY OWNER	Warrand	Beson	tis				
ADDRESS				PHONE _			· .
PROPERTY LOCATION:				•	#		
SUBDIVISION			· · · .	LOT NO	17	CD	-
ROAD AND DESCRIPTION	Medera	es Rd.	· · · · · · · · · · · · · · · · · · ·			. · ·	
• · · · ·				·			
SIZE OF LOT	And the second s			_ TYPE BLDG	374		· · · ·
THE SYSTEM I	NSTALLED UNDER TH	IIS APPLICATION IS	ACCEPTABLE ONL	Y UNTIL PUBL	IC FACILITIES B	ECOME AVAILA	BLE.
I FULLY UNDE	RSTAND THE FEE CO	INECTED WITH THE F	ILING OF THIS PE	RC TEST APPLI	CATION IS NON-R	REFUNDABLE U	NDER
ANY CIRCUMSTANCES	s. /s/ 2/				3 - 3	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE OF APPLICANT	_ // Nou	raid las	ocialis.	00		1 0/0	
APPROVED BY	mord)f	relige .	OR My NE		DATE 6	14/2	_
REJECTED BY		F	OR		DATE	, 1 1	
HOLD PENDING FURTHER TE	ESTS				DATE		
REASONS FOR REJECTION-C	OR HOLDING	Suther	Lesto o	n 6/20/	90 Hold	for sertif	<u>ieof</u>



Soil Refile DATE TEST NO. DEPTH STOP START: 1 - 3's cligica 6/20/80 Danly V to 10'0 - 11/2' 1'- 3' Clared 3 3-11/2 11:58 12:11 11:58 11:47 Manda 11:58 12:01 48 11:56 11:58 1:4/2 C/AY TILBA 10:08 10:09 10:09 10:13 4mm 1/2-13' SANOY 10:08 10:11 10:11 5min 10:16 6 13 1-4/2 Unl 10:26 10:26 4% 10:34 10:21 4/2-13 SAND! 10:41 12 mes 10:29 10:29 10:21

> (Teste in open areas) Hold for further REMARKS 5K+1247-1-80

APPLICATION

SEWAGE DISPOSAL TESTING

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: 465-5000, EXT. 356

DISTRICT	_lst
DAŤE	6/29/77

TO:	THE COUNTY HEALTH OFFICER				
	ELLICOTT CITY, MARYLAND				
	I HEREBY APPLY FOR THE NECESSARY TEST	IN ORDER	R TO CONS	TRUCT (OR RECON	STRUCT) A SEWAGE
DIS	POSAL SYSTEM.				•
PPC	OPERTY OWNER <u>Howard Associates</u>				
				RUCKIE	
	ADDRESS			_ PHONE	
PRO	OPERTY LOCATION:				
					+10/0100
SUB	BDIVISION	· · · · · · · · · · · · · · · · · · ·	 	_ LOT NO. SELET	V 11 - 1 1 1 1 1 1
	AD AND DESCRIPTION	,			
POA	AD AND DESCRIPTION		· · · · · · · · · · · · · · · · · · ·		
					· · ·
SIZI			T	YPE BLDG3 or_	=
				NUME	ER OF BEDROOMS
IF N	NOT SINGLE RESIDENCE DESCRIBE		·····		
	THE SYSTEM INSTALLED UNDER THIS	APPLICA'	TION IS A	ACCEPTABLE ON	LY UNTIL PUBLIC
FA	CILITIES BECOME AVAILABLE.				
				,	
SIG	SNATURE OF APPLICANT <u>/s/ Howard Associa</u>	tes			
ДРР	PROVED BY	FOR	•	DATE	
,			(KIND OF		
REJ	JECTED BY	_ FOR	-1	DATE _	
			(KIND OF S	SYSTEM }	
HOI	LD PENDING FURTHER TESTS			DATE	
REA	ASONS FOR REJECTION OR HOLDING	•			. •
-			· · · · · · · · · · · · · · · · · · ·	······································	
			· · · · · · · · · · · · · · · · · · ·		
					· ·

			¥	*
	T	T	Part of	* - #
	! {			
	•			
	}			
			·	
		l		
	ŀ	i		
•		· ·		
		ł		, ,
				
		į		
		ļ		
				•
		<u> </u>		
				,
		-	•	
	·*		·	
				Maria Car
. 1			٠	
	,			
1				
	l	Ī	I '	
		ŀ	<u>i</u>	

DATE	TEST NO.	DEPTH	PRÉ. Start	WET STOP	TEST - 1	" DROP STOP	TIME
io/st27	10	13	3 2 3	327	327	334	7
N 1).	15	3	3 23	324	327 324	326	2
						·	
		·					

TYPE OF SOIL	
TYPE OF SOIL	

4-12 Lold

APPLICATION

A	20685	

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

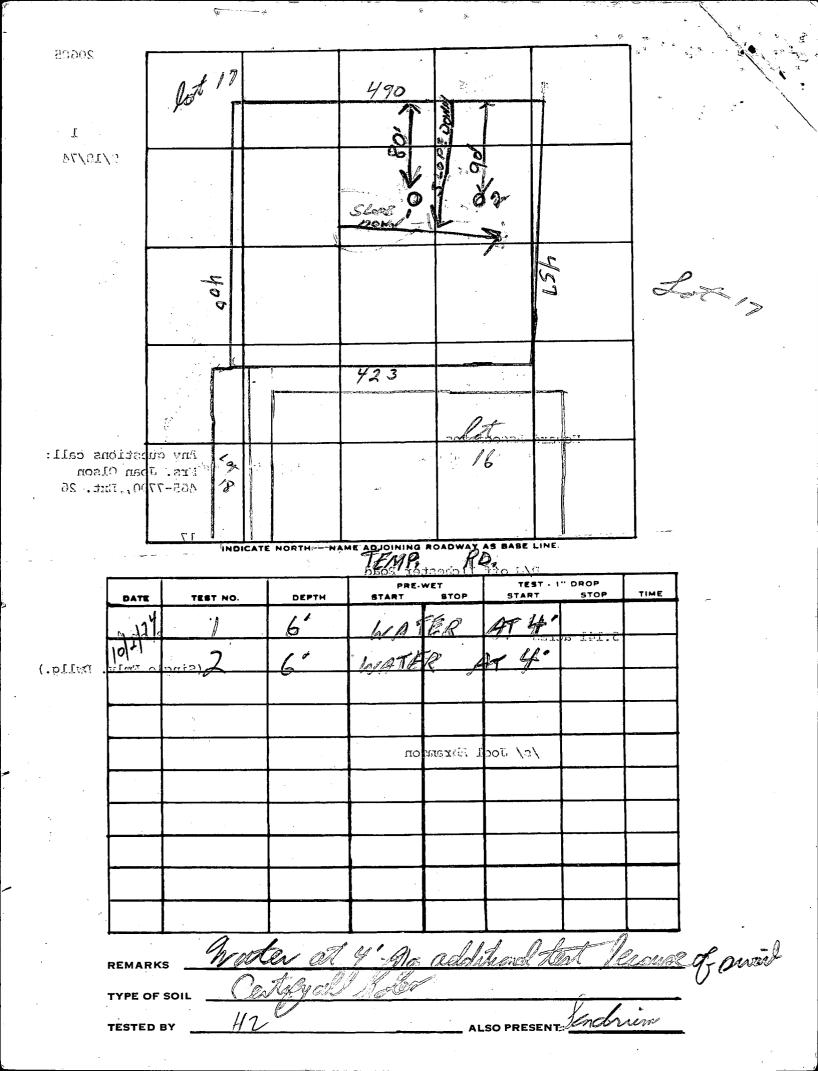
HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES P. O. BOX 476, ELLICOTT CITY, MARYLAND 21043 TELEPHONE: 465-5000, EXT. 356

	_
DISTRICT_	1
DATE	9/18/74

TO:	THE COUNTY HEALTH OFFICER
	FILICOTT CITY MARYLAND

I, HEREBY, APPLY	FOR THE	NECESSARY	TEST I	N ORDER	TO CONSTRUCT	(OR RECONSTRUCT)	A SEWAGE
DISPOSAL SYSTEM.		٤			•	• •	

PROPERTY OWNERHoward Associ	iates	. * *	
ADDRESS	,	Any questions call PHONE Mrs. Joan Olson 465-7700, Ext. 26	:
PROPERTY LOCATION:			
SUBDIVISION		LOT NO. 17	
ROAD AND DESCRIPTIONR/W off	Ilchester Road		
SIZE OF LOT		TYPE BLDG. 3 or 4	
IF NOT SINGLE RESIDENCE DESCRIBE			-
THE SYSTEM INSTALLED UNDEFACILITIES BECOME AVAILABLE.	RITHIS APPLICATION I	S ACCEPTABLE ONLY UNTIL PUE	3L1C
SIGNATURE OF APPLICANT/S/_JOEJ	Abramson		
APPROVED BY	FOR(KIND	DATEOF SYSTEM)	
REJECTED BY		DATE	
HOLD PENDING FURTHER TESTS		DATE	
REASONS FOR REJECTION OR HOLDING			
			•



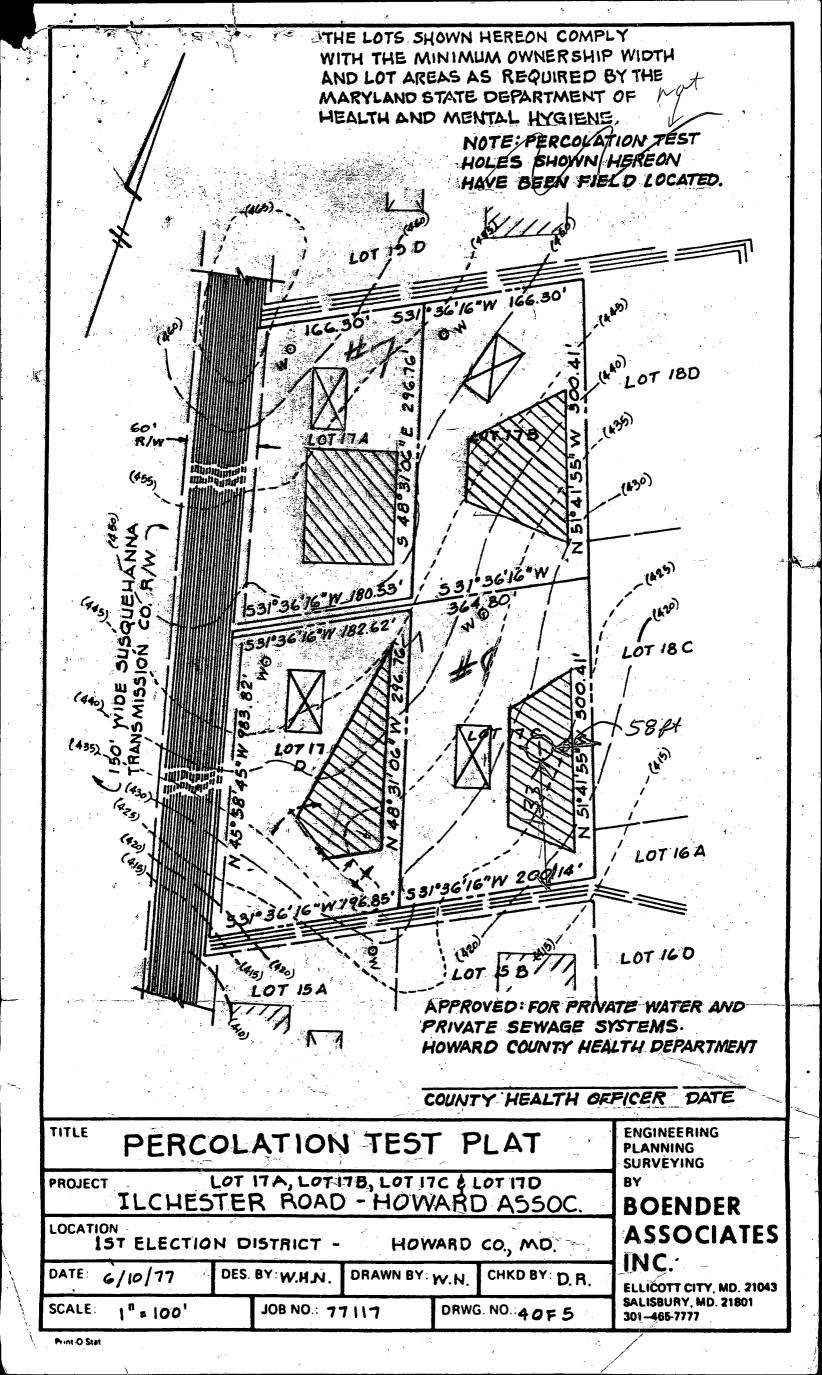
TALBOT'S LAST SHIFT PARCEL 17 CD S161 TALBOT'S LANDING ROAD

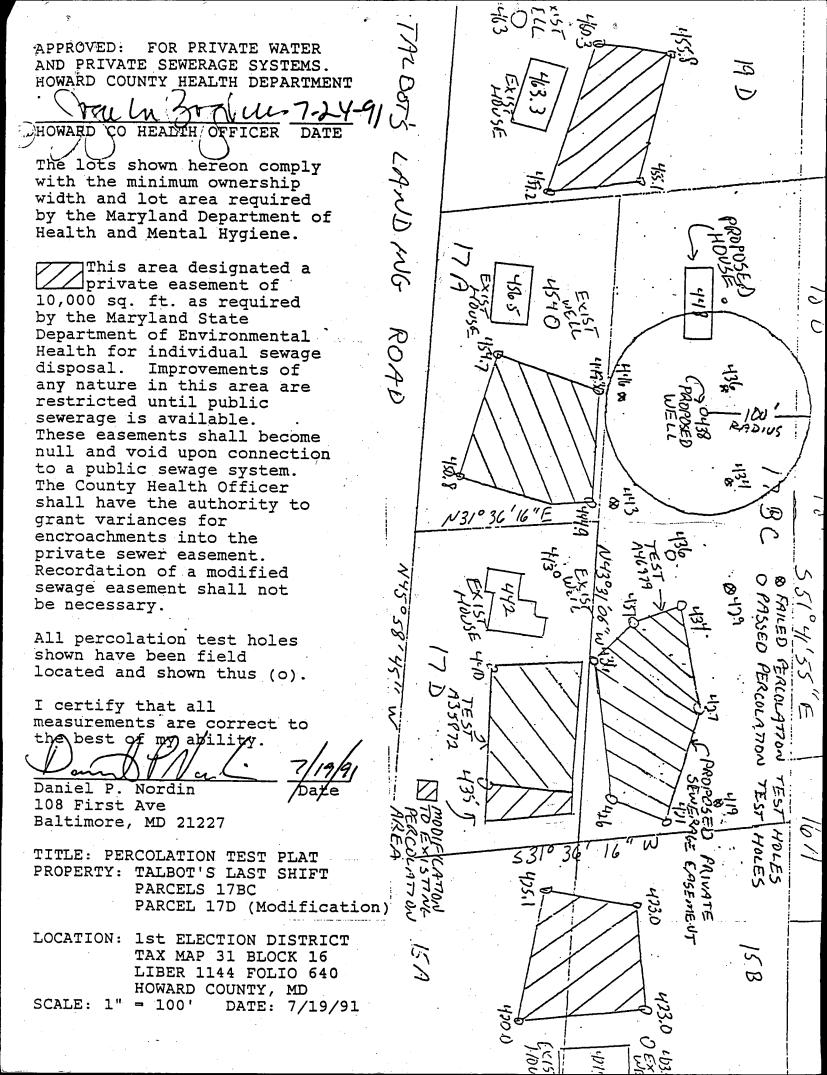
11/17/84 00T-435 OF 1405É 3BR house TATO SEPTIC 434,5 OUT OF TANK - 434.25 INLET INTO MENCH 434.0 eleuprins per phone conversation al 434 mr. Modin BLDG. PERMIT SIGNED AND RETURNED M/7/86 BP# 8928 SAUP £35'-437.0 -201-9K445.0'-SEWAGE 40 -20'-DISPOSAL EASEMENT 1ST FL ELEN. BASEMENT EXISTING ELEVATION 400 INVERT 13 - ELEV-OUT OF 439.01 4350 HOUSE THUES NUERT 4345 INVERT INLET HEST ELEV : DOT OF ELE SEPTIC TANK -133,25 Too Deep ELEV 435 SEPTIL EXIST ELEN 431.25 AT SEPTIL 431.25 well Require 450 Will Regulat STEP DOWN 4-75T MANITO GLADE

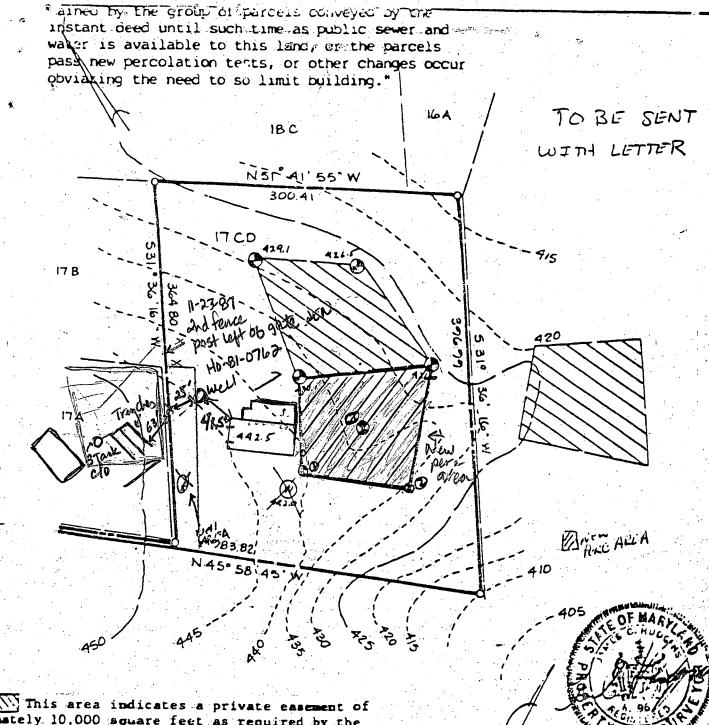
I CERTIFY THE ABOVE MEASUREMENTS AND ELEVATIONS ARE ACTUAL & CORRECT FOR THIS PROPERTY 316NED: () 11/10/86

SCALE- 1"=50'

ا	c ₁ ~ 2965	SEQUENCE NO		STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
	1 23 6 (THIS NUMBER IS TO BE P IN COLS. 3-6 ON ALL CARE			WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 30780
DATE Received DATE WELL COMPLETED			401 ETE		PERMIT NO. FROM "PERMIT TO DRILL WELL"
B 13 15 20 OWNER NOR OIN				22 2 6 0 26	H0-31-0762
			20	(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37
STREET OR RFD last name 14 CUS				STER RD first name TOWN F	ONT HILL
SUBDIVISION TALBUTT'S LAST 5				0201,011	LOT 17 CO
WELL LOG Not required for driven wells				WELL HAS BEEN GROUTED (Circle Appropriate Box)	<u>C 3</u>
	STATE THE KIND OF PENETRATED, THEIR	R COLOR, DEPTH		(Circle Appropriate Box) TYPE OF GROUTING MATERIAL	PUMPING TEST HOURS PUMPED (nearest hour)
ŀ	THICKNESS AND IF DESCRIPTION (Use	FEET	Check if water	CEMENT (CM) BENTONITE CLAY BC	HOURS PUMPED (nearest hour) 8 9 PUMPING RATE (gal. per min. 8
l	additional sheets if needed)	FROM TO	bearing	NO. OF BAGS 17 NO. OF POUNDS 1700	to nearest gal.) METHOD USED TO
l	topsoil	0 1		DEPTH OF GROUT SEAL (to nearest foot)	MEASURE PUMPING RATE
	SANPY LOOM			from 0 ft. to 2 0 ft.	WATER LEVEL (distance from land surface) BEFORE PUMPING 50
İ	Je Par	12	. V	(enter 0 if from surface)' casing CASING RECORD	WHEN PUMPING
l	YOUND SANA	12 28	,	types insert ST CO	22 25
	STAY CAY	28 60		appropriate STEEL CONCRETE PL OT	TYPE OF PUMP USED (for test) A air P pişton T turbine
	a ante			below PLASTIC OTHER	27 27 27 Other
	grapi.	60 115	٠	MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary (describe 27 below)
	SANDSONE	1115 116 (TYPE (nearest inch) (nearest foot)	J jet Submersible
	SANDSTONE SANDSTONE	116 150		60 61 63 64 66 70	27 27
	enn dore	150 153	6	E OTHER CASING (if used) A diameter depth (feet)	PUMP INSTALLED
ŀ	341.03.0			inch from to	DRILLER WILL INSTALL PUMP YES NO
	STARITE	153 180			(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
	SANDSTONE	100 010		screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
	w/flint	180 210	Carrette	or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX - SEE ABOVE:
	of slint	210 26		(appropriate) STEEL BHASS OPEN BRONZE HOLE	CAPACITY:
				below PLASTIC OTHER	(to nearest gallon) 31 35
				C 2	PUMP HORSE POWER 37 PUMP COLUMN LENGTH
				DEPTH (nearest ft.)	(nearest ft.)
Ì				E 1 H O 67 1260 1	CASING HEIGHT (circle appropriate box and enter casing height)
				2	49 LAND SURFACE
		PRIATE LETTER®		S 23 24 26 30 32 36 R 3	49 foot)
	A WELL WAS ABAND WHEN THIS WELL WA		.ED	E 3 45 47 51	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
	E ELECTRIC LOG OBTA			SLOT SIZE 123 DIAMETER [] (NEAREST	BUILDING, SEPTIC TANKS, AND/OR N. LANDMARKS AND INDICATE NOT LESS
ļ	P TEST WELL CONVERT		·	OF SCREEN 56 (NEAREST INCH)	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
	I HEREBY CERTIFY THAT THIS WELL ACCORDANCE WITH COMAR 10.1 AND IN CONFORMANCE WITH ALL	7.13 "WELL CONSTRU CONDITIONS STATED	JCTION" IN THE	from to	₽
ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEGE.				IF WELL DRILLED WAS FLOWING WELL INSERT	
I	DRILLERS IDENT. NO.	41		F IN BOX 68 68 0EP USE ONLY	1000
	JK Dance	V Caste	uda,	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W Q	0 × 20'1
DRILLERS SIGNATURE (MUST MATCH SIGNATURE ON APPLICATION)			O _{(NC}	74 75 76	7 m. 1 2.
	SITE SUPERVISOR (sign. of	f driller or journey	/man	70 72 TELESCOPE LOG OTHER DATA	
	responsible for sitework if			CASING INDICATOR	REAR 10 11aid
	••			HEALTH	







pproximately 10,000 square feet as required by the aryland State Department of Health and Mental Hygine or individual disposal. Improvements of any kind in is area are restricted until public sewage is availble and servicing any residential structures construced on this site. This easement shall become null and oid upon connection to a plubic sewage system. ercolation test holes shown hereon have been field ocated and shown as "@".

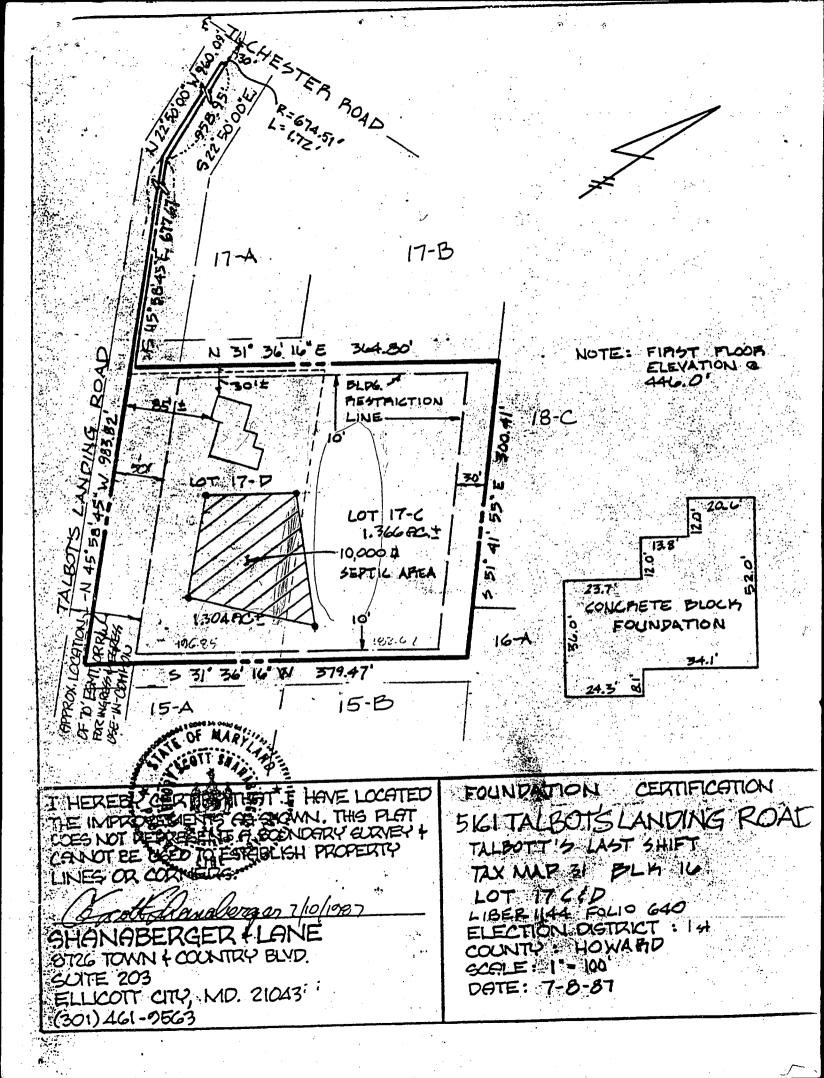
he lots shown hereon comply with the minimum ownersip width and lot areas as required by the Maryland tate Department of Health and Mental Hygiene. ercolation areas and water wells for adjoining lots

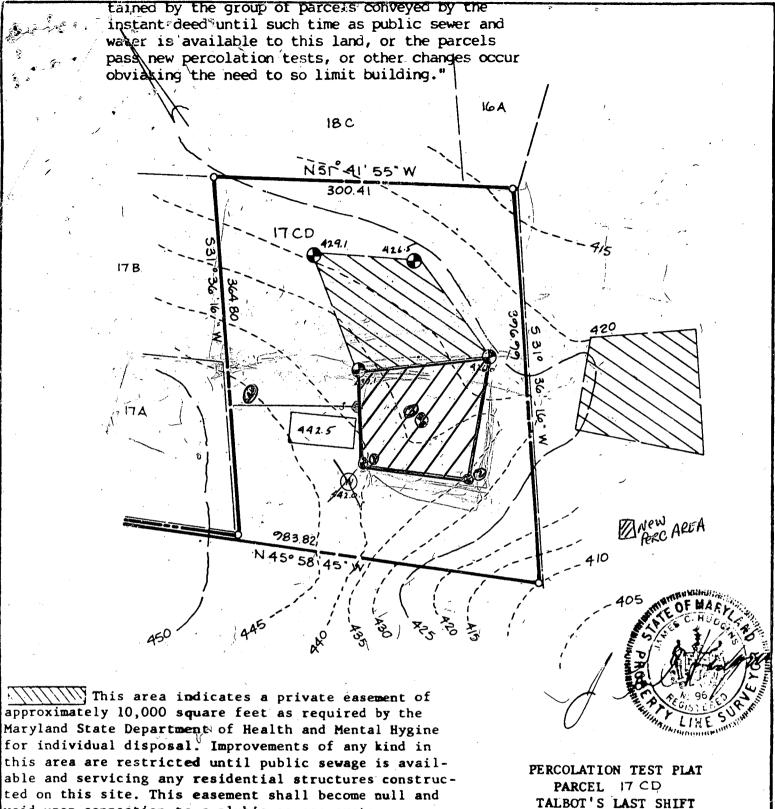
ave been shown where pertinent.

PROVED: For Private Water and Private Sewage Systems

PERCOLATION TEST PLAT PARCEL 17 CD TALBOT'S LAST SHIFT PROPERTY OF HOWARD ASSOCIATES ILCHESTER ROAD 1st Election District Howard County Maryland Scale: [100' Date 17-15-60

NTT Associates Suite 307 Clark Bldg. Columbia Md. 21044





for individual disposal. Improvements of any kind in this area are restricted until public sewage is available and servicing any residential structures constructed on this site. This easement shall become null and void upon connection to a plubic sewage system. Percolation test holes shown hereon have been field located and shown as ".".

The lots shown hereon comply with the minimum ownership width and lot areas as required by the Maryland State Department of Health and Mental Hygiene. Percolation areas and water wells for adjoining lots

"Unity one nome may be erected on

APPROVED: For Private Water and Private Sewage Systems

have been shown where pertinent.

Court Health Officer Date

PERCOLATION TEST PLAT
PARCEL 17 CD
TALBOT'S LAST SHIFT
PROPERTY OF
HOWARD ASSOCIATES
ILCHESTER ROAD
1st Election District
Howard County Maryland
Scale: 1*100' Date: 7-18-80

NTT Associates Suite 307 Clark Bldg. Columbia Md. 21044 321-0307