

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH\*

P 35392

A REPAIR

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

992-2330

ELLICOTT CITY

DISTRICT \_\_\_\_\_

DATE 5/3/85

Charles Wright

IS PERMITTED TO INSTALL \_\_\_\_\_ ALTER X

ADDRESS Route 144

PHONE \_\_\_\_\_

SUBDIVISION Wright Property

ROAD Route 144

Tax Map 16, Parcel 6  
LOT 4 (Existing House)

PROPERTY OWNER Charles Wright

Route 144

ADDRESS \_\_\_\_\_

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

GARBAGE GRINDER? YES \_\_\_\_\_ NO \_\_\_\_\_

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS NUMBER OF BEDROOMS \_\_\_\_\_

PERCOLATION TEST TO ESTABLISH SUFFICIENT AREA TO ALLOW FOR FUTURE REPAIRS TO EXISTING  
SEPTIC SYSTEM.

PLANS APPROVED BY Craig Williams

DATE 5/3/95

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

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REPAIR  
4  
35392





<b>B 1</b> <span style="font-size: 24pt; font-weight: bold;">5725</span>	SEQUENCE NO. (OEP USE ONLY)	<b>STATE OF MARYLAND</b> <b>PERMIT TO DRILL WELL</b> please print or type	OEP PERMIT NUMBER <span style="font-size: 24pt; font-weight: bold;">WB-81-1428</span> <small>fill in this form completely</small>
(THIS NUMBER IS TO BE PUNCHED IN C.O.S. 3-6 ON ALL CARDS)			
<b>Date Received</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             1 2 3 4 5 6 7 8 9 10 11 12 13           </div>		<b>B 3 LOCATION OF WELL</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             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           </div>	
<b>OWNER INFORMATION</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             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 52 53 54 55 56 57           </div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">             8 COUNTY           </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             23 SUBDIVISION           </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             SECTION           </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             LOT           </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             52 NEAREST TOWN           </div>	
<b>DRILLER INFORMATION</b> Driller's Name <u>Ralph Mayne</u> Firm Name <u>Ralph Mayne (well Drilling)</u> Address <u>9120 Brown Church Rd. Mt Airy</u> Signature <u>Ralph Mayne</u> Date <u>4/14/86</u>		<div style="border: 1px solid black; padding: 2px; display: inline-block;">             77 License No. 80           </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             73 76 77 78           </div>	
<b>B 2 WELL INFORMATION</b> APPROX. PUMPING RATE (GAL. PER MIN.) <u>5</u> AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <u>500</u>		<b>B 4</b> DIRECTION OF WELL FROM TOWN (CIRCLE BOX) 	
<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)		NEAR WHAT ROAD <u>MD. 144</u> ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">             NORTH N WEST W EAST E SOUTH S           </div> <div style="text-align: center;">             34 37              DISTANCE FROM ROAD              ENTER FT or MI <u>2.5</u> </div> </div>	
APPROXIMATE DEPTH OF WELL <u>150</u> FEET		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL <u>HOWARD</u> COUNTY NAME <u>HOWARD</u> COUNTY NO. <u>P-35392</u> OEP SIGNATURE <u>B. Nulton</u> STATE HEALTH INSERT S <u>10/18/86</u> DATE ISSUED <u>04/18/86</u> CO SIGNATURE <u>0320000</u> EXP. DATE <u>0320000</u> NORTH GRID <u>533000</u> EAST GRID <u>0320000</u>	
APPROXIMATE DIAMETER OF WELL <u>6"</u>		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <u>well</u> 2. <u>MD-81-1428</u> 3. <u>MD-144</u> WRITE THE BOX NUMBER FROM THE MAP HERE <div style="border: 1px solid black; padding: 5px; display: inline-block;">             E 820 0              N 530 3           </div>	
<b>METHOD OF DRILLING (circle one)</b> BORED (or Augered) <u>AIR-ROTARY</u> JETTED <u>ROTARY</u> Jettied & DRIVEN AIR-ROTARY AIR-PERCUSION ROTARY (Hydraulic Rotary) CABLE REVERSE-ROTARY DRIVE-POINT other _____		DRAW A SKETCH BELOW SHOWING LOCATION OF WELL IN RELATION TO NEARBY TOWNS AND ROADS AND GIVE DISTANCE FROM WELL TO NEAREST ROAD JUNCTION 	
<b>REPLACEMENT OR DEEPEMED 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 DEEPEMED AN EXISTING WELL PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEMED (IF AVAILABLE) _____		Not to be filled in by driller (OEP USE ONLY) APPROX. PERMIT NUMBER _____ FORCE <u>PN</u> WRITE INITIALS IN BOX <u>40-81-1428</u> PERMIT No. <u>40-81-1428</u>	
SPECIAL CONDITIONS			