

9/3/86
AM 9/4/86
AM

9-4-86
approved
S. Abel

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH*

P 37598

A 34889

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH

~~XXXXXX~~

461-9933

05-399211

INDEXED

ELLICOTT CITY

DISTRICT 5th

DATE 9/2/86

Jack Fyock

IS PERMITTED TO INSTALL X ALTER

ADDRESS PHONE 988-9270

SUBDIVISION Greene Fields ROAD 6576 Prestwick Drive LOT 19

PROPERTY OWNER Rzepkowski

ADDRESS

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

GARBAGE GRINDER? YES NO X

SEPTIC TANK CAPACITY 1250 GALLONS NUMBER OF BEDROOMS 4

TRENCHES - 187 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 4 feet below original grade. Bottom maximum depth 5.5 feet below original grade. Effective area begins at 4 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 120 feet from the front (305') lot line and 145 feet from the left (310') lot line as seen when facing the lot from Prestwick Drive. Run trenches on contour toward back lot line, maintain 100 feet from well with septic tank.

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. OK/CW

PLANS APPROVED BY S. Abel DATE 7/18/86

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.

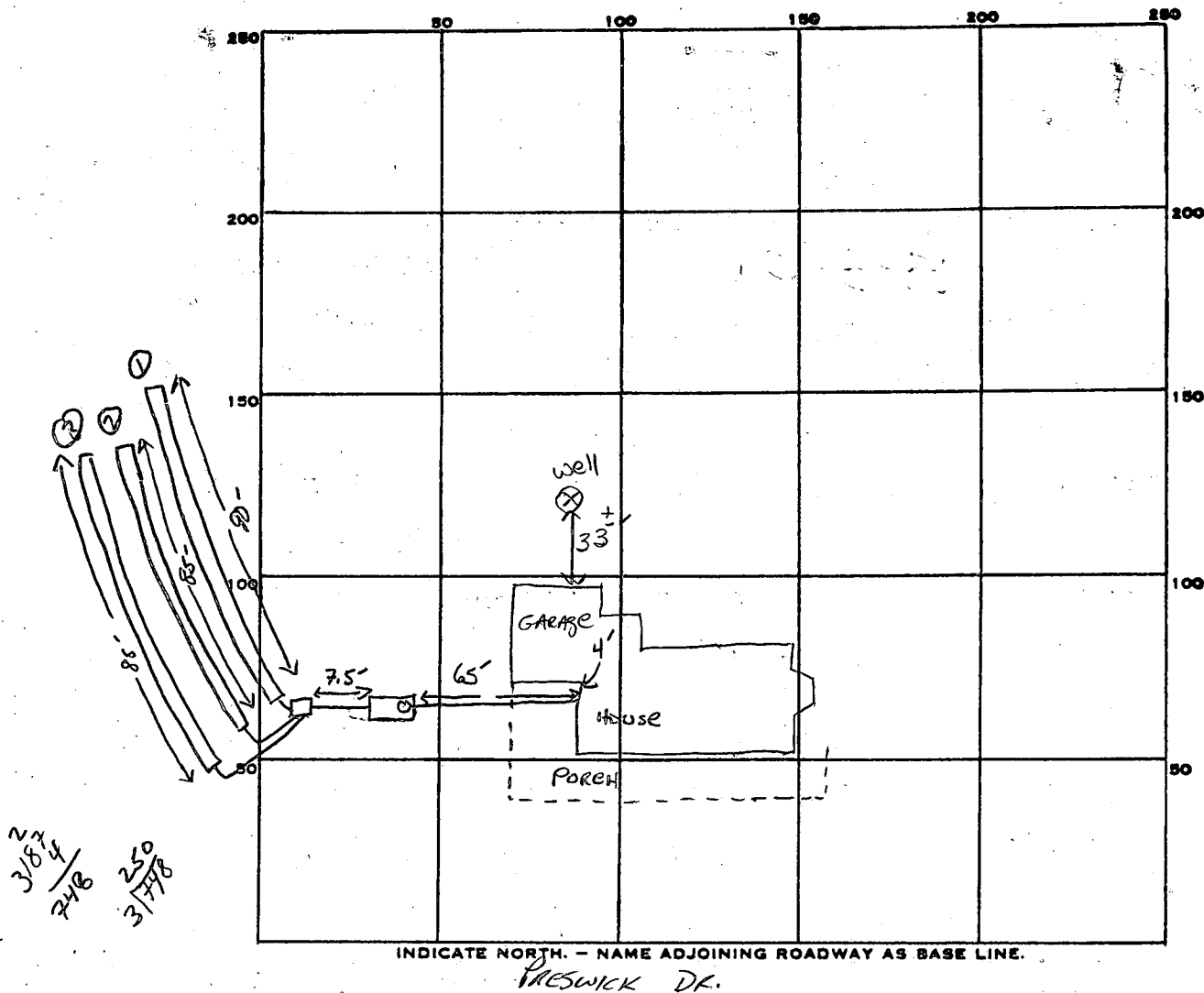
NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

*CALL 992-2330 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1082

A 34889



PERMIT CARD ☒

SEPTIC TANK, LEVEL ☒ 1500 GAI

CLEANOUTS ☒ 5

DISTRIBUTION BOX, LEVEL ☒

TILE FIELD, DEPTH 5.5 FT. TRENCH WIDTH 3 FT.

INLET 4"

GRAVEL DEPTH 18 IN. TOTAL LENGTH 90 85 85 TOTAL 260 FT.

NUMBER OF TRENCHES 3 TOTAL BOTTOM AREA 780

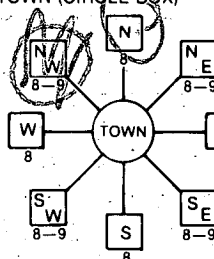
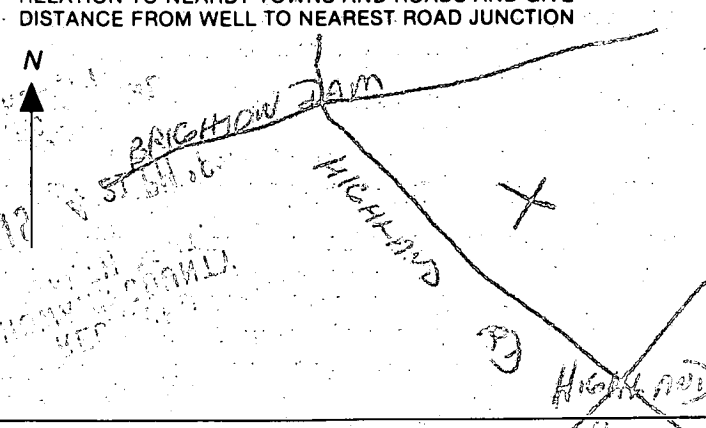
SEEPAGE PITS, INSIDE DIAMETER FT. DEPTH BELOW INLET FT.

ABSORBENT AREA 780 SQ. FT.

REMARKS 9-3-86 NO WORK DONE. S.A.

9-4-86 OK TO COVER

DATE SYSTEM APPROVED 9-4-86 INSPECTOR S. Aul

B 1 0731 1 2 3 4 5 6 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL <i>lot</i> 10-30 AM please print or type	OEP PERMIT NUMBER 40-91-1401 70 fill in this form completely 79
Date Received <i>4/30/86</i> OWNER INFORMATION 8 13 15 Last Name <i>WALKER</i> Owner First Name <i>CC</i> 34 36 <i>DRUM AVE</i> Street or RFD 55 57 <i>DASADENA</i> Town 70 State 72 <i>MD</i> Zip 76 <i>21117</i>		B 3 LOCATION OF WELL 1 2 78 COUNTY <i>ANNAPOLIS</i> 21 23 SUBDIVISION <i>GREENBELT</i> 42 SECTION <i>1</i> 44 46 LOT <i>19</i> 48 50 52 NEAREST TOWN <i>HIGHLAND</i> 71 MILES FROM TOWN (enter 0 if in town) <i>1</i> 73 <i>M</i> 76 77 78 <i>1</i>	
DRILLER INFORMATION Driller's Name <i>George P. Easterday</i> 77 License No. 80 <i>1</i> Firm Name <i>G. P. Easterday, Inc.</i> Address <i>9265 Brown Ch. Rd., Mt. Airy, Md. 21771</i> Signature <i>George P. Easterday</i> Date <i>3/17/86</i>		B 4 1 2 DIRECTION OF WELL FROM TOWN (CIRCLE BOX)  11 <i>HIGHLAND RD</i> NEAR WHAT ROAD 30 ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) NORTH <i>N</i> 32 EAST <i>E</i> WEST <i>W</i> SOUTH <i>S</i> 34 <i>1</i> 37 DISTANCE FROM ROAD ENTER FT or MI <i>0.1</i> 38 39	
B 2 WELL INFORMATION APPROX. PUMPING RATE (GAL. PER MIN.) <i>5</i> 8 12 AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY) <i>500</i> 14 20		NOT TO BE FILLED IN BY DRILLER HEALTH DEPARTMENT APPROVAL COUNTY NAME <i>ANNAPOLIS</i> COUNTY NO. <i>A-31851</i> OEP SIGNATURE <i>George P. Easterday</i> STATE HEALTH INSERT S <i>41</i> DATE ISSUED <i>04/02/86</i> NORTH GRID <i>493000</i> 43 48 CO SIGNATURE <i>George P. Easterday</i> EXP. DATE <i>11/01/86</i> EAST GRID <i>0811000</i> 50 55 57 63	
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)		SHOW MAJOR FEATURES OF BOX & LOCATE WELL WITH AN X SOURCES OF DRILLING WATER 1. <i>under</i> 2. <i>under</i> 3. <i>under</i> WRITE THE BOX NUMBER FROM THE MAP HERE E <i>800 11</i> N <i>490 3</i> 000 000	
APPROXIMATE DEPTH OF WELL <i>200</i> 24 28 FEET APPROXIMATE DIAMETER OF WELL <i>6</i> INCH METHOD OF DRILLING (circle one) BORED (or Augered) JETTED Jetted & DRIVEN 30 AIR-ROTARY AIR-PERCussion ROTARY (Hydraulic Rotary) 37 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 	
REPLACEMENT OR DEEPEND 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 39 <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) 41 _____ 52		Not to be filled in by driller (OEP USE ONLY) APPROP. PERMIT NUMBER _____ 54 GAP _____ 63 FORCE <i>15</i> 67 68 WRITE INITIALS IN BOX PERMIT No. <i>41-91-1401</i> 70 71 72 73 74 75 76 77 78 79	
SPECIAL CONDITIONS			

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34889

P _____

HOWARD COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH SERVICES

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

DISTRICT 5

DATE 3-29-85

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 DEVELOPER RZEPKOWSKI Prestwick Drive Joint Venture

ADDRESS Box 196, Clarksville, Maryland 21029 PHONE 854-0498

PROPERTY LOCATION:

SUBDIVISION Ralph Greene Property / GREEN Fields Sec 1 LOT NO. NEW LOT 19

6576 End of Prestwick Drive ROAD AND DESCRIPTION ON FINAL

SIZE OF LOT 3 acres TYPE BLDG. single family
(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.

APPROVED BY Sidney Abel FOR Shallow tile fields DATE 2-18-86
(SIGNATURE OF APPLICANT)

REJECTED BY _____ FOR _____ DATE _____

HOLD PENDING FURTHER TESTS _____ DATE _____

REASONS FOR REJECTION OR HOLDING 4-10-85 perc. satisfactory, hold for certified subdivision plat,
hole location, house and well site. Satisf B.P. # 70273

BLDG. PERMIT SIGNED
AND RETURNED 5-23-86

THIS IS NOT A PERMIT

C1 20458	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.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)		COUNTY NUMBER	A- 34889

DATE Received	DATE WELL COMPLETED	Depth of Well	PERMIT NO.
8 13	15 20	22 26	FROM "PERMIT TO DRILL WELL"
	143084	160	40-81-1401
		(TO NEAREST FOOT)	28 29 30 31 32 33 34 35 36 37

OWNER	REPPAWSKA CONST. CO		
STREET OR RFD	last name	first name	TOWN
SUBDIVISION	GREENFIELDS		HIGHLAND
SECTION	1		LOT 19

WELL LOG Not required for driven wells		
STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING		
DESCRIPTION (Use additional sheets if needed)	FEET FROM TO	Check if water bearing
Top Soil	0 2	
Clay	2 5	
Stony	5 12	
Brown Mica	12 50	
Gravel Stone	50 78	
Mica	78 90 or 92	
Sand Stone	90 92	✓
Mica	92 130	
Flint	130 132	✓
Mica	132 160	

GROUTING RECORD	
WELL HAS BEEN GROUTED (Circle Appropriate Box)	
TYPE OF GROUTING MATERIAL	
CEMENT	BENTONITE CLAY
CM	BC
NO. OF BAGS	NO. OF POUNDS
13	1300
GALLONS OF WATER	
105	
DEPTH OF GROUT SEAL (to nearest foot)	
from 0 ft. to 30 ft.	
TOP BOTTOM	
(enter 0 if from surface)	
CASING RECORD	
casing types insert appropriate code below	
ST CO	
STEEL CONCRETE	
PL OT	
PLASTIC OTHER	
MAIN CASING TYPE	
Normal diameter Total depth	
top (main) casing of main casing	
(nearest inch) (nearest foot)	
ST 6 80	
60 61 63 64 66 67 70	

PUMPING TEST	
HOURS PUMPED (nearest hour)	
3	
PUMPING RATE (gal. per min. to nearest gal.)	
12	
METHOD USED TO MEASURE PUMPING RATE	
Bucket	
WATER LEVEL (distance from land surface)	
BEFORE PUMPING	
35	
WHEN PUMPING	
57	
TYPE OF PUMP USED (for test)	
A air P piston T turbine	
C centrifugal R rotary O other (describe below)	
J jet S submersible	

OTHER CASING (if used)	
diameter depth (feet)	
inch from to	
EACH CASING	
screen type or open hole	
insert appropriate code below	
ST BR HO	
STEEL BRASS OPEN HOLE	
BRONZE HOLE	
PL OT	
PLASTIC OTHER	

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)	
PUMP HORSE POWER	
PUMP COLUMN LENGTH (nearest ft.)	
CASING HEIGHT (circle appropriate box and enter casing height)	
+ above - below	
LAND SURFACE	
(nearest foot)	

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	


DEPTH (nearest ft.)	
110 78 160	
EACH SCREEN	
SLOT SIZE 1 2 3	
DIAMETER OF SCREEN	
(NEAREST INCH)	
56 60	

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)	
65' well	
Highland RD.	

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. 40	
DRILLERS SIGNATURE	
(MUST MATCH SIGNATURE ON APPLICATION)	
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	

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

5-2-86
8:00

OK'D 8/18/86 

FIELD DATA SHEET
HOWARD COUNTY WELL YIELD TEST

Well Permit No. HO - 81-1401
Location of property (road) HIGHLAND AVE.
Subdivision GREENFIELDS Lot 19 Block Plat Sec. 1
Well Driller George WATSON Owner REDFLOWERS CONST. CO.

Depth of well 160 206 PM
Distance of measuring point (M.P.) above ground 1 ft
Static water level (S.W.L.) below M.P. 32 ft

High rate pumping -- reservoir drawdown

Time pump started 8:45 Pumping rate 12 GPM
Total time 45 min to reach pumping water level 57 ft ft. below M.P.

11. Recovery pump test data - observations to be recorded every 15 minutes

[illegible]

SEPTIC INFORMATION

- 1- INV. @ HOUSE = 493.2 ✓
- 2- INV. @ TANK (IN) = 497.2 X
- 3- INV. @ TANK (OUT) = 491.5 ✓
- 4- INV. @ DIST. BOX (IN) = 490.5 ✓
- 5- INV. @ DIST. BOX (OUT) = 490.3 ✓ 90.3
- 6- INV. @ TRENCH = 490.0 ✓

TRENCH = 3'0" WIDE, INLET 4'0" BELOW GARDE
 BOTTOM OF TRENCH = 5'6", 1'6" STONE BELOW PIPE.
 LENGTH OF TRENCH = 250
 SEPTIC TANK = 1250 GALLON (4BEDROOMS)

INLET 4
 BOTTOM S.S.
 3" WIDE
 LOCATION OK

B.P. 70273

I CERTIFY THAT THE PERC TEST
 HOLES WERE FIELD LOCATED

Jefferson D. Lawrence
 JEFFERSON D. LAWRENCE
 MD REG. P.L.S. #5216

APPROVED FOR PRIVATE WATER AND
 PRIVATE SEWAGE SYSTEMS.
 HOWARD COUNTY HEALTH DEPARTMENT

DATE _____

HOWARD COUNTY HEALTH OFFICER

PLAN

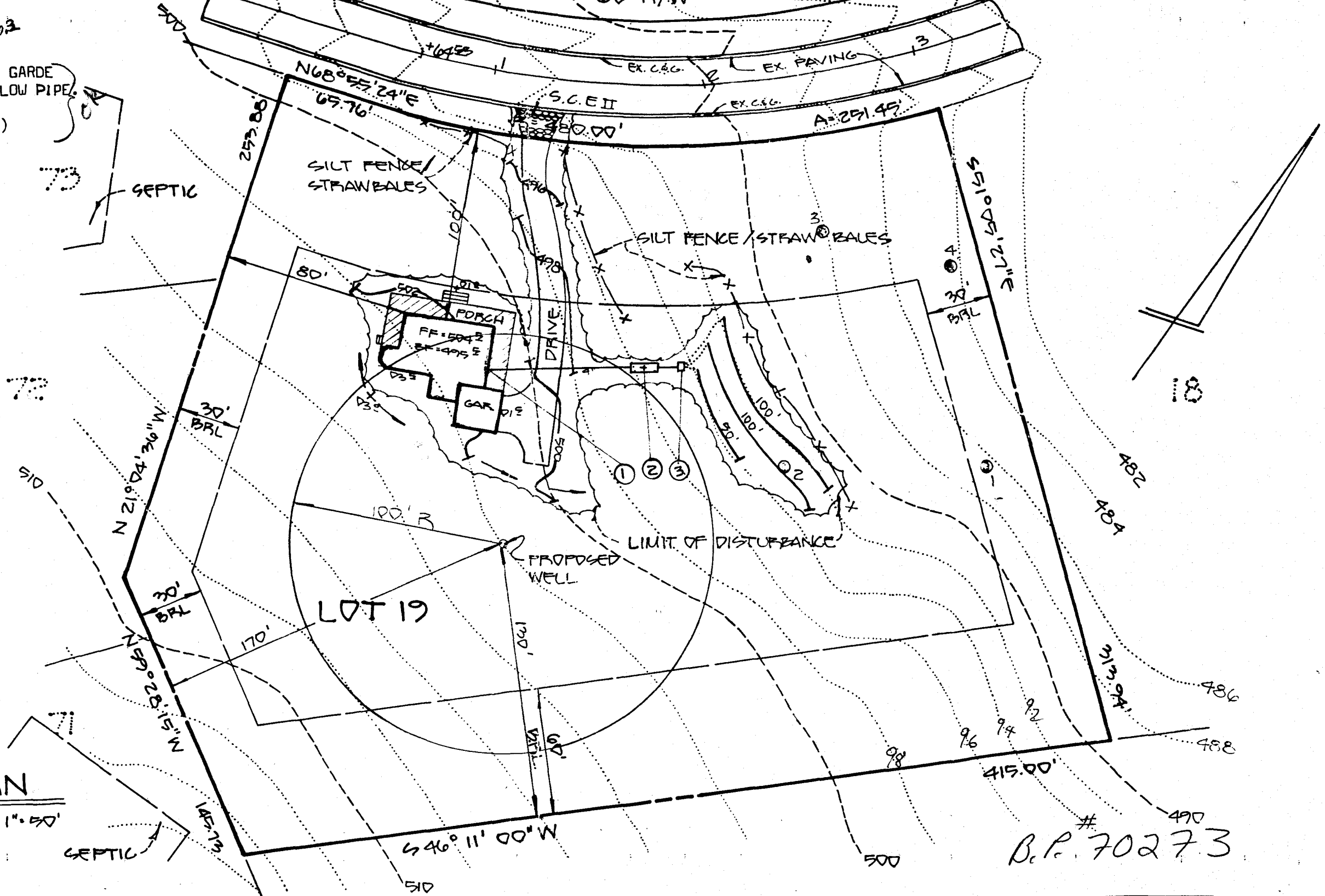
SCALE: 1"=50'

SEPTIC

PRESTWICK DRIVE

60' R/W

RZEPKOWSKI
 LOT 19 PRESTWICK DR.
 GREENEFIELDS



RZEPKOWSKI CONGT. CO.

212 Drum Avenue
 Pasadena, Md. 21122
 441-2246



DEVELOPMENT
 CONSULTANTS
 GROUP, INC.

17904 GEORGIA AVENUE * 102
 OLNEY, MARYLAND 20832
 301-924-4570

SITE PLAN
 LOT 19 SECTION ONE AREA ONE
 GREENEFIELDS
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

DATE
 7-5-86
 DRAWN
 M.A.M.
 CHECKED
 M.L.L.
 SCALE
 1"=50'

Sheet
 1
 of 1
 PROJECT NO.
 1573-01