

5/22/87  
early PM  
5/21/87  
4 PM  
6/1/87 PM  
6/1/87 PM  
6/1/87 PM  
6/1/87 PM  
6/1/87 PM  
6/1/87 PM

# PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY  
BUREAU OF ENVIRONMENTAL HEALTH  
461-9933

INDEXED  
05-399145

P 39370

A 34898

DISTRICT 5th

DATE 5/21/87

DATE SYSTEM APPROVED 6-4-87

INSPECTOR S. A. M.

H. G. Ubbo Van Der Valk

IS PERMITTED TO INSTALL X ALTER

ADDRESS 13150 Deanmar Drive, Highland, MD 20777

PHONE 596-9013

SUBDIVISION Greenefields

ROAD 6552 Prestwick Drive LOT 15

PROPERTY OWNER Earl Layman

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 - 180 sq. ft. per bedroom. Trench to be 3 feet wide. Inlet 3 feet below original grade. Bottom maximum depth 4.5 feet below original grade. Effective area begins at 3.5 feet below original grade. 1.5 feet of stone below distribution pipe.

LOCATION - Place the distribution box 135 feet from the front (325') lot line and 140 feet from the right (400.57') lot line as seen when facing the lot from Right-of-way. off Prestwick Drive. Run trenches on contour toward the front and rear right corner of lot. Maintain 100 feet from well with septic tank.

Perc area moved 10 feet further back than shown on plat to allow basement service.

NOTE - No trench to exceed 100 feet in length. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank. ok/cw

PLANS APPROVED BY C. Williams

DATE 8/05/86

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: 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, TRENCHES) TO BE 100 FEET FROM WELL. (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(IES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(IES).

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 TWO 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.

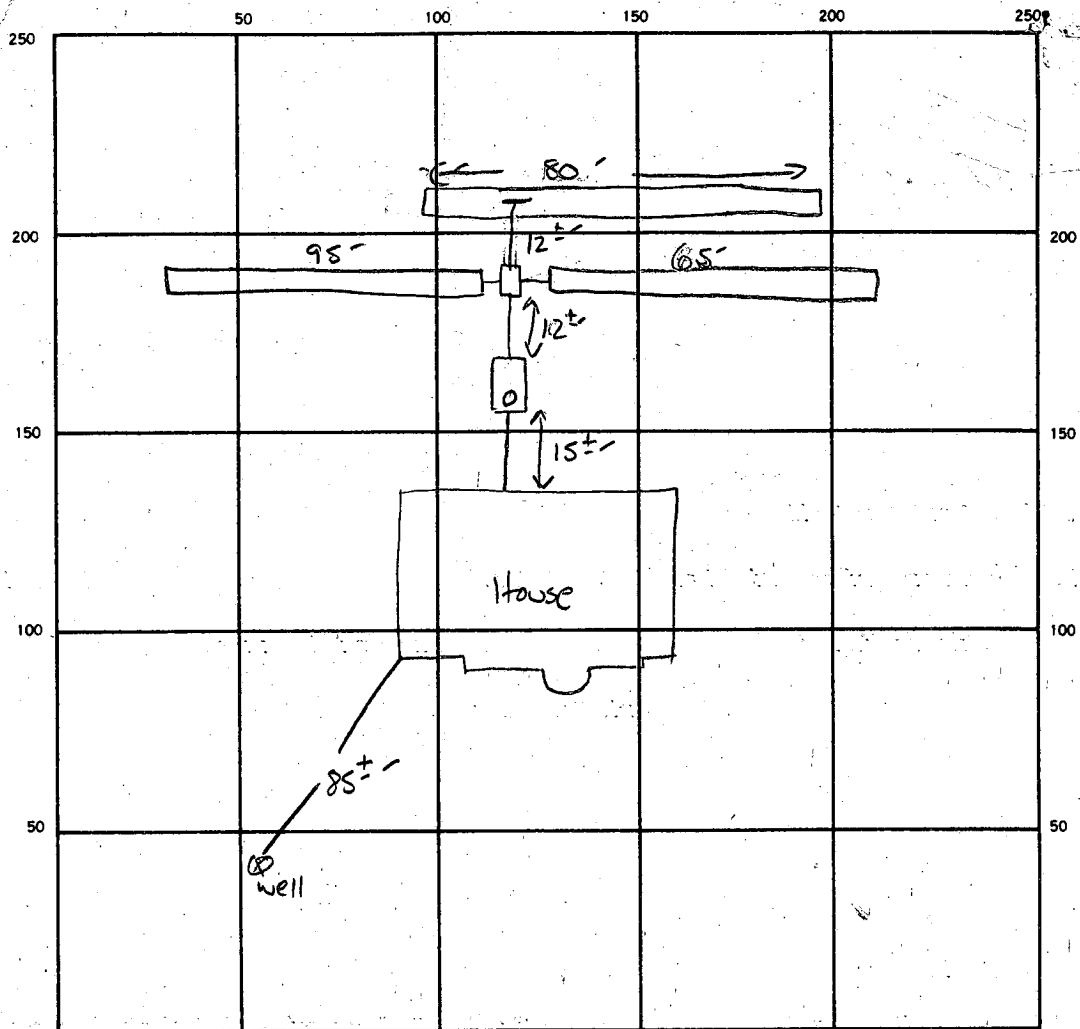
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES.

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

\*CALL 461-9933 FOR INSPECTION OF SEPTIC SYSTEMS.

EH - 2-1186

A 34898



3180  
720  
240  
3720  
6  
12

SEPTIC TANK LEVEL ✓ 1500 CLEANOUTS ✓ 51

DISTRIBUTION BOX LEVEL ✓

DRAIN FIELD (TILE FIELD) DEPTH 4.5 FT. TRENCH WIDTH 3 FT. INLET DEPTH 3 FT.

EFFECTIVE GRAVEL DEPTH 1.5 FT. TOTAL LENGTH 240 FT.

NUMBER OF TRENCHES 3 ONE SIDEWALL/BOTTOM AREA 720 SQ. FT.

DRYWELL INSIDE DIAMETER — FT. EFFECTIVE DEPTH BELOW INLET — FT.

ABSORBENT AREA 720 SQ. FT.

REMARKS 5/27/87 TANK INSTALLED, TRENCH LOCATION DISCUSSED, OK TO  
DIG TRENCHES AND PARTIALLY FILL AS NECESSARY, C.W.

DATE SYSTEM APPROVED 6-4-87 INSPECTOR S. Am

# APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

A 34898

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 Prestwick Drive Joint Venture EARL CAYMAN

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

PROPERTY LOCATION:

SUBDIVISION Ralph Greene Property / Greene Fields Sec 1 LOT NO. NEW LOT 15  
ON FINAL

ROAD AND DESCRIPTION End of Prestwick Drive 6552 Prestwick Dr.

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.

Philip Mangit  
(SIGNATURE OF APPLICANT)

APPROVED BY Sidney Abel FOR Shallow tile fields DATE 2-18-86

REJECTED BY \_\_\_\_\_ FOR \_\_\_\_\_ DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_ DATE \_\_\_\_\_

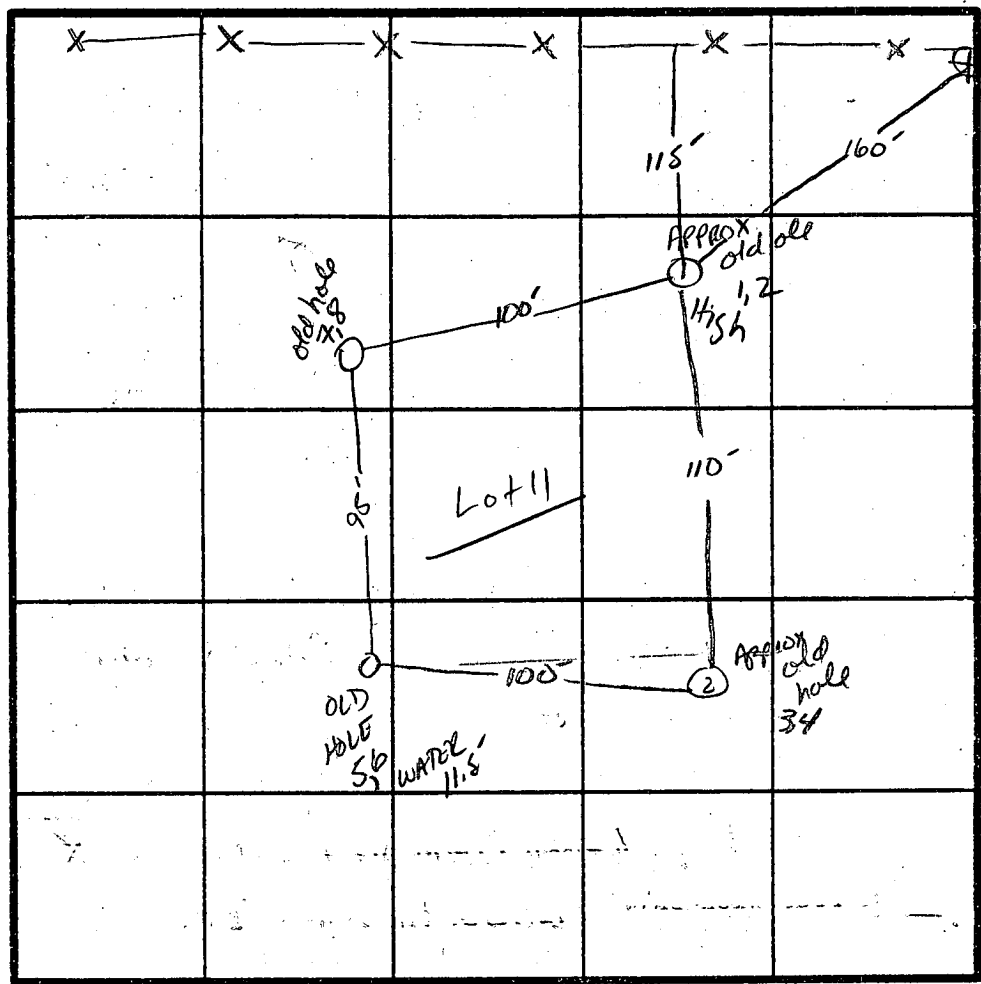
REASONS FOR REJECTION OR HOLDING 4-9-85 OLD PERC IS SATISFACTORY, VISUAL REINSPECTION  
SATISFACTORY, hold for certified subdivision plat, hole location house + well  
Site Satisf

BLDG. PERMIT SIGNED  
AND RETURNED 8/5/86  
Serial # 72136-SFO

## THIS IS NOT A PERMIT

0'	AP
9"	BROWN CLAY LOAM 100% SAPROLITE
3'	BROWN silty SAND 60% SAPROLITE

②  
AP  
OWN CLAY LOAM  
5% SAPROLITE  
OWN Silty SAND  
10% SAPROLITE

[illegible]

STAKE  
CORR LOT  
1116.12

$\bar{x}$  Perc Time 12 min  
INLET 3'  
BOTTOM MAX 4.5'  
180  $\Phi$  / BR

INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

[illegible]REMARKS: Shallow System only

TYPE OF SOIL \_\_\_\_\_  
TESTED BY SAW

Phil Mangit, Richard Demet  
ALSO PRESENT Crossed

# APPLICATION

A 30515

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: 465-5000, EXT. 356

DISTRICT 5

DATE \_\_\_\_\_

1000 gallons  
5  
1250 gallons

Septic Tank {

1-3 Bedrooms

4 Bedrooms

{ See attached specs }

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

Ralph and Virginia Greene

ADDRESS

7 Dean Street Annapolis Md 21401

PHONE

263-2115

PROPERTY LOCATION

Route 108 (West side)

SUBDIVISION

Gaithers Property Ralph Green

NEW LOT 11

5/1/80

ROAD AND DESCRIPTION

Fifty ft. frontages from Route 108 between  
Clarksville and Highland

SIZE OF LOT

10.442 acres

TYPE BLDG.

4BR

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

Ralph & Virginia Greene

by J. Greene / Power of

APPROVED BY

C.B. & F.F.

FOR

Shallow  
system only

DATE

5/15/80

REJECTED BY \_\_\_\_\_

FOR \_\_\_\_\_

(KIND OF SYSTEM)

DATE \_\_\_\_\_

HOLD PENDING FURTHER TESTS \_\_\_\_\_

DATE \_\_\_\_\_

REASONS FOR REJECTION OR HOLDING

(1) REJECTED

(2) HOUSE WIFE

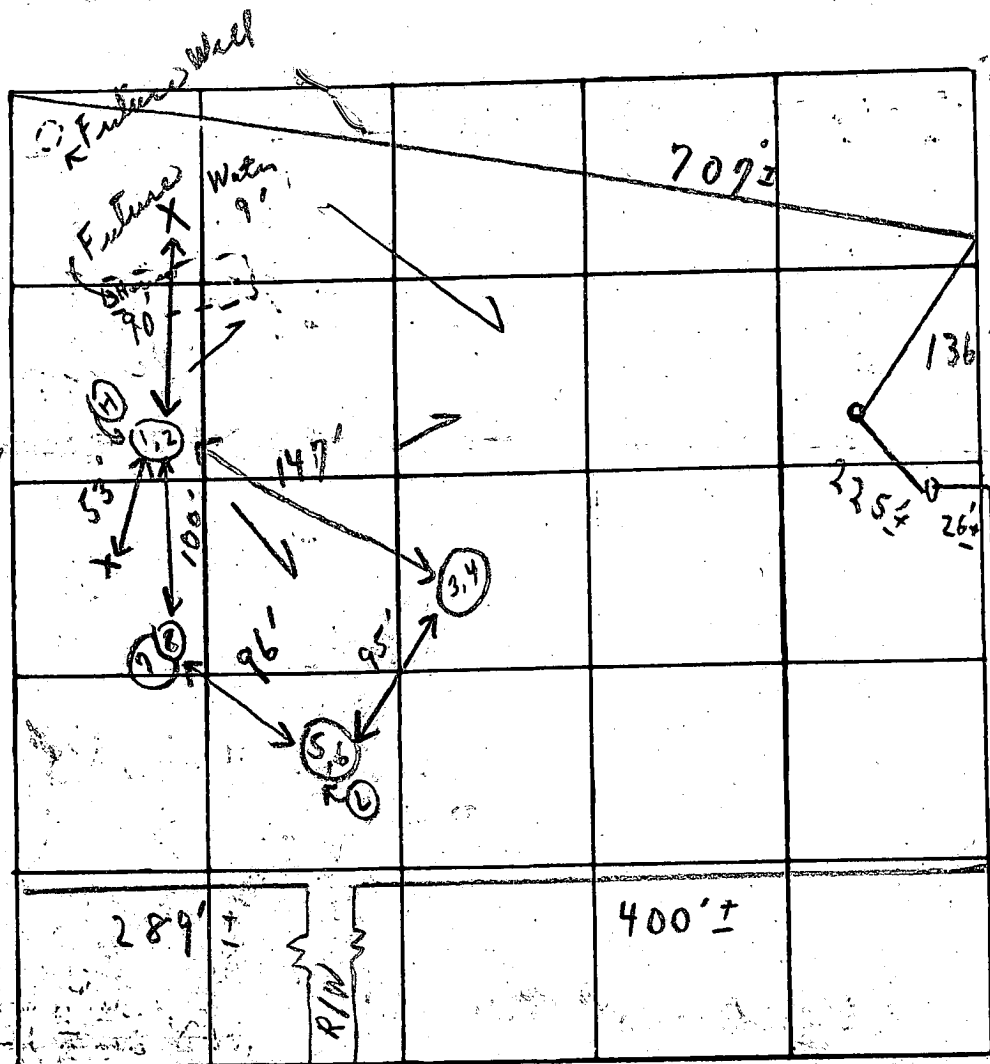
(3) SUBMITTAL

(4) Show contents of SYSTEMS

## THIS IS NOT A PERMIT

#3  
Final #2

620'±



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE

108

SOIL FILE	DATE	TEST NO.	DEPTH	PRE-WET		TEST - 1" DROP		TIME
				START	STOP	START	STOP	
1'-1 1/2' CLAY	2/1/80	1	1 1/2'	11:05	11:07	11:07	11:11	4m
1 1/2'-9 1/2' SANDY LOAM		2	9 1/2'	11:07	11:13	11:13	11:33	20m
1'-1 1/2' CLAY		3	2'	10:24	10:26	10:26	10:28	2m
1 1/2'-12 1/2' Sandy Loam		4	12 1/2'	10:24	11:10	11:10	11:14	X
1'-3' CLAY		5	3 1/2'	10:13	10:22	10:22	10:49	27m
3'-11 1/2' SANDY LOAM		6	7 1/2'	10:52	10:54	10:54	10:56	2m
1'-3'-CLAY		7	3'	11:03	11:09	11:09	11:25	16m
3'-12' SANDY LOAM		8	7 1/2'	10:57	10:59	10:59	11:02	3m
		9	12'-8"	11:04	11:24 1/2	11:24 1/2	11:25	
		10	7'	11:27	11:29	11:29	11:32	3m

12' wing

11 1/2' Water

10m

REMARKS

Copy given Mr. Green  
M. need to be sent. (HOLES IN CORN FIELD)

TYPE OF SOIL

(WATER HOLD FOR SUPERVISOR) MRS. LINTHICUM

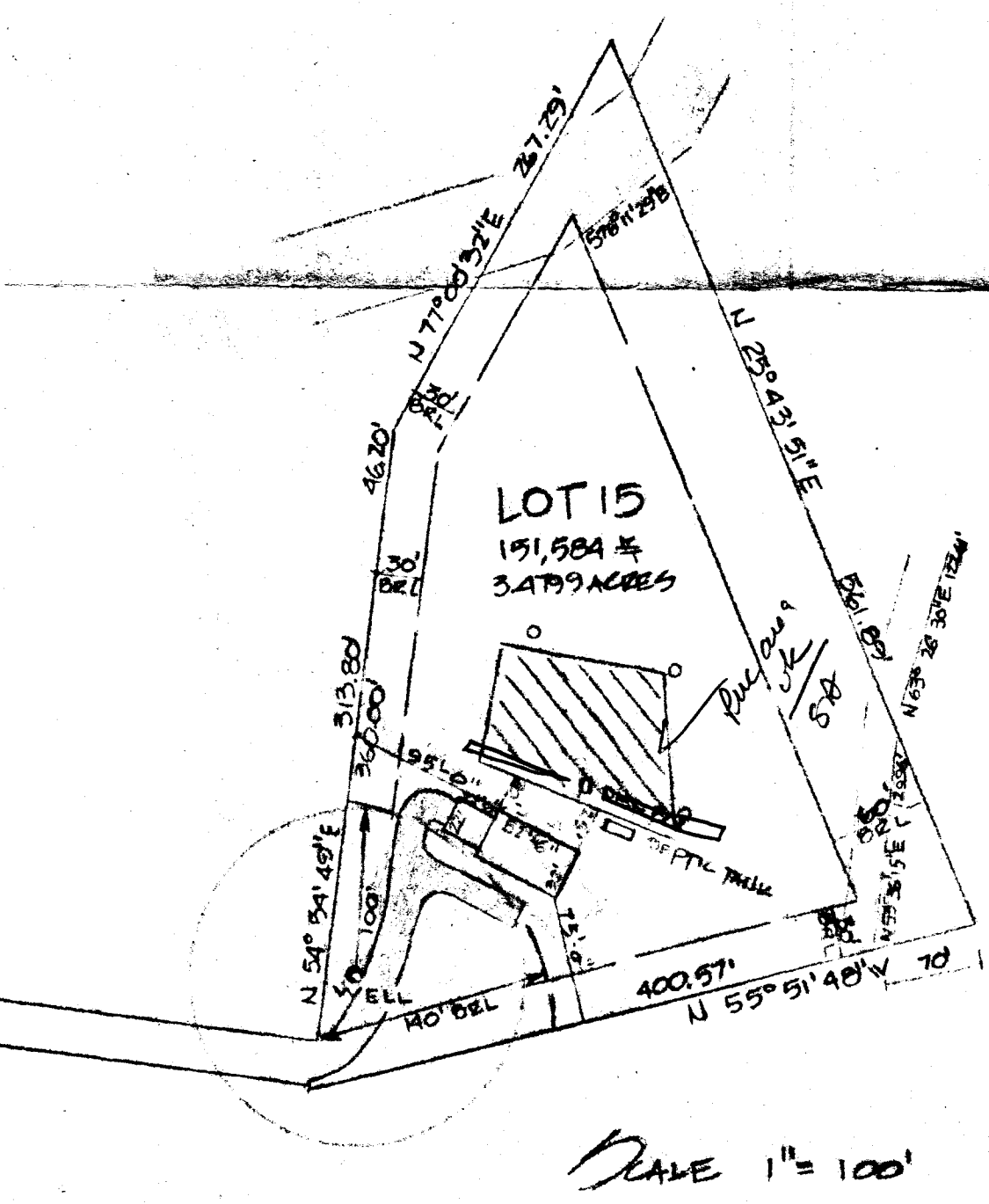
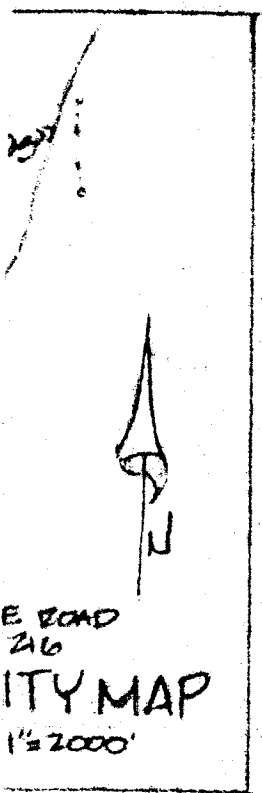
TESTED BY

C. B. S.

ALSO PRESENT:

M. JACK FLOCK JR.  
MR. ROBERT FLOCK  
MR. JOHN GREEN

NO alterations



OWNER - BUILDERS  
CARL W & SALLY LAYMAN  
4446 AHMEUDALE RD  
BETHSVILLE, MARYLAND 20805

"GREENE FIELDS"  
SUBDIVISION  
LOT 15  
SECTION #1  
PLAT # 6674  
PARCELS 15 AND 18  
AREA #1  
TAX MAP #3A

<div>SEQUENCE NO. (OEP USE ONLY)</div> <div>1087</div>		<div>STATE OF MARYLAND</div> <div>PERMIT TO DRILL WELL</div> <div>please print or type</div>		<div>OEP PERMIT NUMBER</div> <div>10-81-1508</div> <div>fill in this form completely</div>	
<div>Date Received</div> <div>05/13/86</div> <div>OWNER INFORMATION</div> <div>15 Last Name</div> <div>Owner</div> <div>First Name</div> <div>34</div> <div>36 Street or RFD</div> <div>55</div> <div>57 Town</div> <div>70 State</div> <div>72</div> <div>Zip</div> <div>76</div>		<div>LOCATION OF WELL</div> <div>1</div> <div>2</div> <div>8 COUNTY</div> <div>21</div> <div>23 SUBDIVISION</div> <div>42</div> <div>SECTION</div> <div>44</div> <div>46</div> <div>LOT</div> <div>48</div> <div>50</div> <div>52 NEAREST TOWN</div> <div>71</div> <div>MILES FROM TOWN (enter 0 if in town)</div> <div>73</div> <div>76</div> <div>77</div> <div>78</div>			
<div>DRILLER INFORMATION</div> <div>Driller's Name</div> <div>77 License No.</div> <div>80</div> <div>Firm Name</div> <div>Address</div> <div>Signature</div> <div>Date</div>		<div>DIRECTION OF WELL FROM TOWN (CIRCLE BOX)</div> <div>W</div> <div>8</div> <div>9</div> <div>N</div> <div>8</div> <div>9</div> <div>E</div> <div>8</div> <div>9</div> <div>TOWN</div> <div>8</div> <div>9</div> <div>S</div> <div>8</div> <div>9</div> <div>SW</div> <div>8</div> <div>9</div> <div>SE</div> <div>8</div> <div>9</div> <div>CN WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX)</div> <div>11</div> <div>NEAR WHAT ROAD</div> <div>30</div> <div>34</div> <div>37</div> <div>DISTANCE FROM ROAD</div> <div>ENTER FT or MI</div> <div>38</div> <div>39</div>			
<div>WELL INFORMATION</div> <div>APPROX. PUMPING RATE (GAL. PER MIN.)</div> <div>8</div> <div>12</div> <div>AVERAGE DAILY QUANTITY NEEDED (GAL. PER DAY)</div> <div>14</div> <div>20</div> <div>USE FOR WATER (CIRCLE APPROPRIATE BOX)</div> <div>HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ONLY)</div> <div>FARMING (LIVESTOCK WATERING &amp; AGRICULTURAL IRRIGATION)</div> <div>INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL GOV. OTHER (REQUIRES APPROPRIATION PERMIT)</div> <div>PUBLIC OR PRIVATE WATER COMPANY (REQUIRES APPROPRIATION PERMIT AND STATE HEALTH DEPARTMENT APPROVAL)</div> <div>TEST, OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)</div>		<div>NOT TO BE FILLED IN BY DRILLER</div> <div>HEALTH DEPARTMENT APPROVAL</div> <div>COUNTY NAME</div> <div>COUNTY NO.</div> <div>OEP SIGNATURE</div> <div>STATE HEALTH INSERT S</div> <div>DATE ISSUED</div> <div>CO SIGNATURE</div> <div>EXP. DATE</div> <div>NORTH GRID</div> <div>50</div> <div>55</div> <div>EAST GRID</div> <div>57</div> <div>63</div>			
<div>APPROXIMATE DEPTH OF WELL</div> <div>24</div> <div>28</div> <div>FEET</div> <div>APPROXIMATE DIAMETER OF WELL</div> <div>6</div> <div>NEAREST INCH</div> <div>METHOD OF DRILLING (circle one)</div> <div>BORED (or Augered)</div> <div>JETTED</div> <div>Jetted &amp; DRIVEN</div> <div>AIR-ROTARY</div> <div>AIR-PERCussion</div> <div>ROTARY (Hydraulic Rotary)</div> <div>CABLE</div> <div>REverse-ROTary</div> <div>DRive-POINT</div> <div>other</div>		<div>SHOW MAJOR FEATURES OF BOX &amp; LOCATE WELL WITH AN X</div> <div>SOURCES OF DRILLING WATER</div> <div>1.</div> <div>2.</div> <div>3.</div> <div>WRITE THE BOX NUMBER FROM THE MAP HERE</div> <div>E</div> <div>8</div> <div>9</div> <div>N</div> <div>8</div> <div>9</div> <div>000</div> <div>000</div> <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> <div>N</div> <div>29'- casing</div> <div>1'- above</div> <div>26'- open</div> <div>7'- pipe cement</div> <div>well</div> <div>6/16/86</div>			
<div>REPLACEMENT OR DEEPEINED WELLS (CIRCLE APPROPRIATE BOX)</div> <div>N</div> <div>THIS WELL WILL NOT REPLACE AN EXISTING WELL</div> <div>Y</div> <div>THIS WELL WILL REPLACE A WELL THAT WILL BE ABANDONED AND SEALED</div> <div>S</div> <div>THIS WELL WILL REPLACE A WELL THAT WILL BE USED AS A-STANDBY</div> <div>D</div> <div>THIS WELL WILL DEEPEIN AN EXISTING WELL</div> <div>PERMIT NUMBER OF WELL TO BE REPLACED OR DEEPEINED (IF AVAILABLE)</div> <div>41</div> <div>52</div>		<div>Not to be filled in by driller (OEP USE ONLY)</div> <div>APPROX. PERMIT NUMBER</div> <div>54</div> <div>63</div> <div>FORCE</div> <div>WRITE INITIALS IN BOX</div> <div>PERMIT NO.</div> <div>70</div> <div>71</div> <div>72</div> <div>73</div> <div>74</div> <div>75</div> <div>76</div> <div>77</div> <div>78</div> <div>79</div>			
<div>SPECIAL CONDITIONS</div>					



C100560

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-34898

DATE Received

DATE WELL COMPLETED

Depth of Well

PERMIT NO.

FROM "PERMIT TO DRILL WELL"

06/17/86

2218526

HQ-81-1505

(THIS NUMBER IS TO BE PUNCHED  
IN COLS. 3-6 ON ALL CARDS)

(TO NEAREST FOOT)

28 29 30 31 32 33 34 35 36 37

OWNER  
STREET OR RFD  
SUBDIVISION  
SECTION  
AREA  
LOT

LMYMAN  
HARTWICK DR  
GRISALE FIELD  
1  
AREA 1  
15

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

Brown Shale

0

22

Gray Mica Rock

22

185

✓

WELL HAS BEEN GROUTED

(Circle Appropriate Box)

yes

no

Y

N

TYPE OF GROUTING MATERIAL

CEMENT

BENTONITE CLAY

CM

BC

NO. OF BAGS

NO. OF POUNDS

7

658

GALLONS OF WATER

42

DEPTH OF GROUT SEAL (to nearest foot)

from

ft.

to

ft.

48

52

54

58

(enter 0 if from surface)

CASING RECORD

casing  
types  
insert  
appropriate  
code  
below

ST

CO

STEEL

CONCRETE

PL

OT

PLASTIC

OTHER

MAIN

Nominal diameter

Total depth

CASING top (main) casing of main casing

TYPE (nearest inch) (nearest foot)

ST

6

29

60

61

63

64

66

70

OTHER CASING (if used)

diameter

depth (feet)

inch

from

to

E

A

C

A

S

I

N

G

screen type  
or open hole

insert  
appropriate  
code  
below

ST

BR

HO

STEEL

BRASS

OPEN

BRONZE

HOLE

PL

OT

PLASTIC

OTHER

DEPTH (nearest ft.)

1

2

8

9

11

15

17

21

23

24

26

30

32

36

38

39

41

45

47

51

CIRCLE APPROPRIATE LETTER  
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. 238

DRILLERS SIGNATURE

(MUST MATCH SIGNATURE ON APPLICATION)

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

PUMPING TEST

HOURS PUMPED (nearest hour)

3

8

9

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

52

11

15

METHOD USED TO  
MEASURE PUMPING RATE

bucket

WATER LEVEL (distance from land surface)

BEFORE PUMPING

15

17

20

WHEN PUMPING

129

22

25

TYPE OF PUMP USED (for test)

A

P

T

air

piston

turbine

C

R

O

centrifugal

rotary

other (describe below)

J

S

jet

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

1

(nearest foot)

50

51

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)

36.00'

34.00'

400.57'

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

70

72

74

75

76

TELESCOPE

LOG

OTHER DATA

CASING

INDICATOR

HEALTH