123/89 1124/89 11am anytan

BUREAU OF ENVIRONMENTAL HEALTH

461-9933

PERMIT

SEWAGE DISPOSAL SYSTEM

P	42503

A 34984

DISTRICT 5th

DATE 8-30-88

DATE SYSTEM APPROVED / 27/6

MARYLAND STATE DEPARTMENT OF HEALTH'

JNTY

AL HEALTH

LNDEXED

DATE SYSTEM

					-
	Kerwin Homes		IS PERMITTED TO	INSTALL X	ALTER
ADDRESS 240)24 Frederick Road, (Clarksbury, Maryland		BO(353.	-0561
ADDITESS				2) <u> </u>
SUBDIVISION	Waterford	ROADROAD	exford Park		
PROPERTY OWNER	Dorace Mal	colm Kerwin Homes	· · · · · · · · · · · · · · · · · · ·		
ADDRESS				,	
IF GARBAGE GRINE	DER IS USED INCREASE SEPTIC	TANK CAPACITY BY 50% AND A	ABSORPTION AREA BY	22%. 5 11	20 Atrench
GARBAGE GRINDE	R? YES X NO			3 (1	20 Atrench
SEPTIC TANK CAPA	ACITY 2000 GALLONS	NUMBER OF BEDROOM	ns <u>5</u>	2.5	
TRENCHES -	220 sq. ft. per bed	room with garbage dis	sposal. Trench	to be 7	feet wide. Inle
	3 feet below origin	al grade. Bottom max	cimum depth 🚛	feet belo	ow original grad
	Effective area begin	ns at 3-0 feet below	original grade	7.5 10 fee	et of stone
	below distribution	pipe, Z/S		5	
TOCATION -	Place the distribut	ion box 65 feet off t	he front (465') lot line	and 125 feet
	off the right (250') lot line as seen wh	en facing the	lot from V	Waterford Park.
		tour toward the front			
NOTE -		100 feet in length.		8" diamete	er cleanout and
	cap to grade or abo	ve on septic tank. o	cleral	:	
1/19/89		NENCHES. CHANGES			
		Sid Abel		DATE	4/01/87
PLANS APPROVED BY			<u> </u>	- VA	
COVER NO WORK UNTI	IL 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(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES).

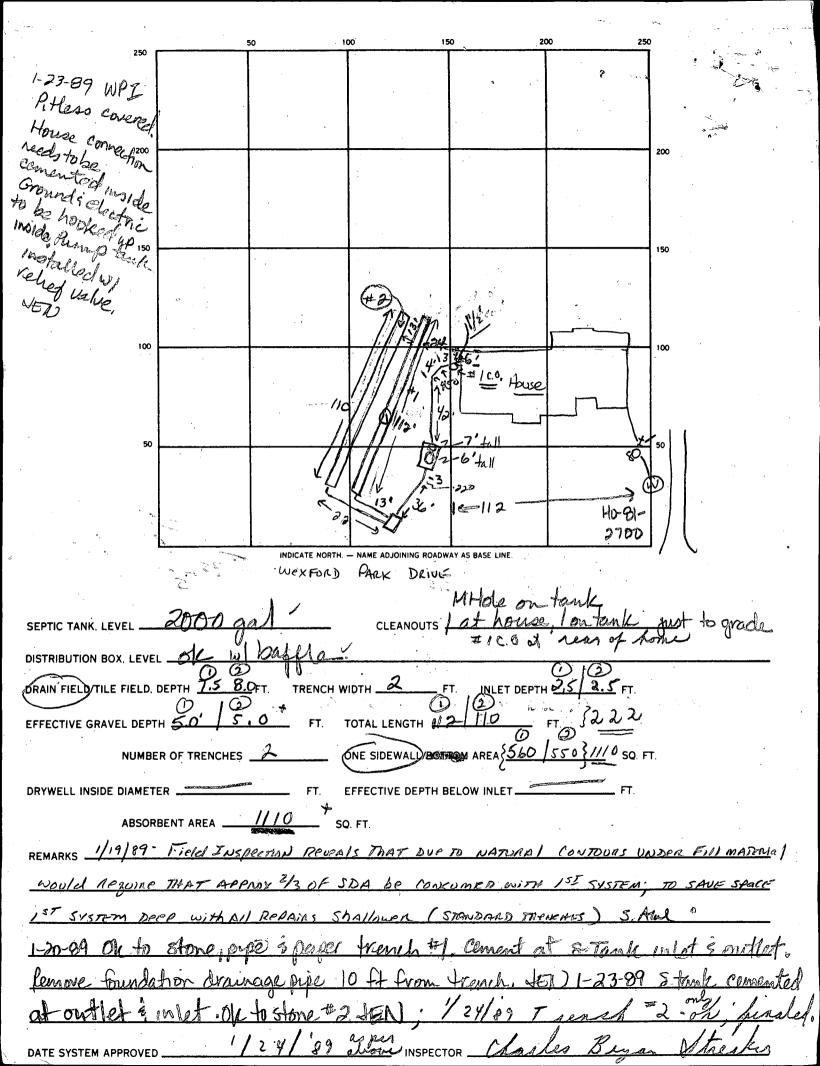
NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.

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.



APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P	· · · · · · · · · · · · · · · · · · ·	•

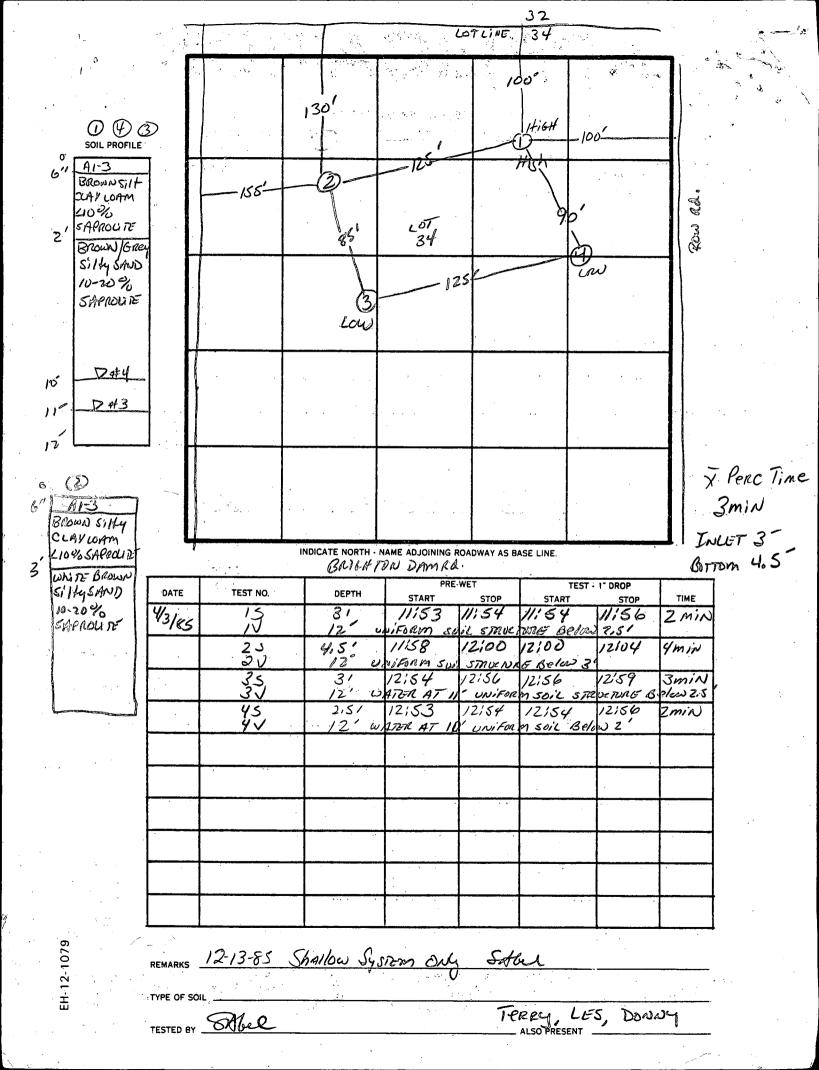
HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES

P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

DISTRICT 5th ELECTION

DATE 2:14.85

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 HUNTINGTON INTERNATIONAL CORPORATION
ADDRESS 4951 ROCKWOOD PARKWAY NW, WASH, D.C. 20016 PHONE (202) 659 - 2474
SUBDIVISION HUNTINGTON ESTATES SECTION Z LOT NO. BY FO LOT LOT DE ZA
ROAD AND DESCRIPTION ON BRIGHTON ROAD, 1800' WEST OF TEN OAKS ROAD
INTERSECTION 12901 WEXFORD PARK
SIZE OF LOT 3:34 ACT TYPE BLDG. SINGLE FAMILY DWELLING (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. (SIGNATURE OF APPLICANT)
APPROVED BY Sichuy ale 4-1-87
REJECTED BY DATE
HOLD PENDING FURTHER TESTSDATE
REASONS FOR REJECTION OR HOLDING 4-3-85 PERC. SATISFACTORY, ISLD FOR CENTIFIED HULE
LOCATION SUBdivision PLAT HOUSE AND WELL SITE SAUL
12/13/85 Shallow System only S. Alul AND RETURNED 7/20/86
(SFD BP 19723
THE IC NOT A DEDANT
THIS IS NOT A PERMIT



B 1 6 17 2 SEQUENCE NO.	STATE OF MARYLAND	STATE PERMIT NUMBER
DP USE ONLY)	STATE OF MARYLAND PERMIT TO DRILL WELL	W01-181/1-12/700
(THIS NUMBER IS TO BE PUNCHED IN COLS. 36 ON ALL CARDS)	please print or type	fill in this form completely 79
Date Received (APA)	B 3	LOCATION OF WELL R-4/537
OWNER INFORMATION		40-00
REDWIND HOMES ZNCL	8 COUNTY	21 400/8
15 Least Name Owner First Name	34 WATER-0	C
36 Street or RFD	55 SECTION Z	LOT 22
CLORKS RUKG PD20	77/	48 50
57 Town 70 State 72	Zip 76 52 NEAREST TOWN	71
	MILES FROM TOWN (ent	ter 0 if in town) $\frac{1}{73}$ $\frac{M}{76}$ $\frac{1}{77}$ $\frac{1}{78}$
	icense No. 80 B 4	
9265 Brown Church Rd., Mt.Airy, Md. 217	DIRECTION OF WELL FROM	11 NEAR WHAT ROAD 30
Address		NORTH
Signature 7 Section 4/5/8	W 1 E	ON WHICH SIDE OF ROAD (CIRCLE APPROPRIATE BOX) (W) 22 E
B 2 WELL INFORMATION		SOUTH
APPROX. PUMPING RATE (GAL. PER MIN.)	Town E	
AVERAGE DAILY QUANTITY NEEDED	S _W S _E	34 5 0 37 DISTANCE FROM ROAD
(GAL. PER DAY). 5 0 0	W S S 8-9	ENTER FT or MI
USE FOR WATER (CIRCLE APPROPRIATE BO)	() (8) (8) (8) (8) (8) (8) (8) (NOT TO BE FILLED IN BY DRILLER
D HOME (SINGLE OR DOUBLE HOUSEHOLD UNIT ON	the state of the s	HEALTH DEPARTMENT APPROVAL
FARMING (LIVESTOCK WATERING & AGRICULTUR)	AL HOURAD	A 37 78 7 COUNTY NO.
I INDUSTRIAL, COMMERCIAL, STATE AND FEDERAL	GOV	INSERTS
22 LJ OTHER (REQUIRES APPROPRIATION PERMIT) —— PUBLIC OR PRIVATE WATER COMPANY (REQUIRES	SIGNATURE	2 100 INSERTS
P APPROPRIATION PERMIT AND STATE HEALTH DEPA	RTMENT OSOP SOL	O SIGNATURE EXP. DATE
TEST OBSERVATION, MONITORING (MAY REQUIRE APPROPRIATION PERMIT)	NORTH 49900	GRID O 7 7 9 9
APPHOPRIATION PERMIT)	SHOW MAJOR FEATUR	55 57 63 RES OF \[\int \times \cdot \times
APPROXIMATE DEPTH OF WELL	BOX & LOCATE WELL _ WITH AN X	5/26/26
27 20	SOURCES OF DRILLING	G WATER LICETION PER STOKE
APPROXIMATE DIAMETER OF WELL.	NEAREST 1.WELL	50 Casha (False
METHOD OF DRILLING (circle one)	3.	45'onen tale
20	WRITE THE BOX NUMB	
AIR-PERcussion ROTARY (Hydrau REVerse-ROTary DF	ulic Rotary) FROM THE MAP HERE	Carrie Ord
	E 8100	The state of the s
other.	N 499	000
REPLACEMENT OR DEEPENED WELLS (CIRCLE APPROPRIATE BOX)	DRAW A SKETCH BELC	DW SHOWING LOCATION OF WELL INTER
N THIS WELL WILL NOT REPLACE AN EXISTING WEL	RELATION TO NEARBY	TOWNS AND ROADS AND GIVE TO NEAREST ROAD JUNCTION
THIS WELL WILL REPLACE A WELL THAT WILL BE		
39 S THIS WELL WILL REPLACE A WELL THAT WILL BE	USED	ICHT IN TO
D THIS WELL WILL DEEPEN AN EXISTING WELL		1614 No.
PERMIT NUMBER OF WELL TO BE REPLACED OR DEEP	'ENDED /	15
(IEAVAILABLE) 41	52 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	9 17 M X
Not to be filled in by driller (OEP USE ONLY)	15	CLARKSVILL
APPROP. PERMIT NUMBER GAP	TOWA HOWA	ller .
WAITE S4	63 AUNITY	
FORCE C INITIALS PERMIT NO. 4 0 - 8 1 - 2 67 68 IN BOX 70 71 72 73 74 75 76	7 0 0	2
SPECIAL CONDITIONS		3

COUNTY

		2:30 pm Ground		
Page of	<u> </u>	2:30 pm	Review _	
A ,	•	6		•
•	· · · · · · · · · · · · · · · · · · ·	FIELD DATA S HOWARD COUNTY WELL		
Well Permit No.	. HO - 81-27	700		
Location of pro	operty (road)	WEY FOLD CT		
	ATGNFOLD II		22 Block Plater KGrwn Hones	Sec
Depth or Distance Static	e of measuring p	200 point (M.P.) above gr (.L.) below M.P.	z_{ound} \mathcal{Z}'	
I. High rate	pumping rese	rvoir drawdown		
	p started	1115	Pumping rate 120	
Total ti	me 30MIN to	reach pumping water	level 75 ft.	elow M.P.
		· · · · · · · · · · · · · · · · · · ·	recorded every 15 minus	tes
TIME (in 15 minute in-	WATER LEVEL below M.P.	PUMPING RATE time to fill BA	FLOW METER READING	CALCULATED FLOW
tervals	Delow M.P.	gallon bucket	(if used)	(gallons per minute)
1215	76	6 see		1000
1230	77	5-6		1010
1245	77	5-6 see		201
				1030-
				`
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			Q.	1. on fine
				on to be lat
				Day to DE COLO
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				the so-ple

HD-224

7	C 1 7781 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
W. 4. 1/4.	1 2 3 (THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER A34984
ja L	DATE Received DATE WELL COMPLET		PERMIT NO. FROM "PERMIT TO DRILL WELL"
	[J.	22 26 (TO NEAREST FOOT)	HO-81-2700 28 29 30 31 32 33 34 35 36 37
Service Services	OWNER FRUN HOME	5 tuc first name	
	SUBDIVISION WE TEXT OF	SECTION TOWN:	LOT
	WELL COG Not required for driven wells	WELL HAS BEEN GROUTED (Circle Appropriate Box)	C 3
	STATE THE KIND OF FORMATIONS PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL	PUMPING TEST HOURS PUMPED (nearest hour)
	DESCRIPTION (Use FEET Check additional sheets if needed) FROM TO bearing	CEMENT (M) BENTONITE CLAY BC	PUMPING RATE (gal. per min. // /)
	additional sheets if fleeded) I How TO bearing	GALLONS OF WATER	to nearest gal.) METHOD USED TO
	Topsoil 0 2	from ft. to 4 2 (US)	MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
	Be Mice 2 35	(enter 0 if from surface) Casing CASING RECORD	BEFORE PUMPING
	De Tirk P 33	types insert ST CO	WHEN PUMPING 22 25
	lan Mica 35 SI	appropriate STEEL CONCRETE CONCRETE PL OT	TYPE OF PUMP USED (for test) A air P piston T turbine
		below PLASTIC OTHER	27 27 0 other
	Gray Min 51 5300	MAIN Nominal diameter Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary O (describe below)
		IST IN BOV	J jet Submersible
	Jan Mica 53 55 -	60 61 68 64 66 70 E OTHER CASING (if used)	
	Gray Mire SS 62	A djámeter depth.(feet) H inch difom to	PUMP INSTALLED
		A S	DRILLER: WILL INSTALL PUMP YES (CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
	lan Mca 62 70	screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
A Company	Da Mica 70 74	or open hole ST BR HO	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O) IN BOX-SEE ABOVE: 29
1	Ta- Ma 76 90 V	appropriate STEEL BRASS OPEN BRONZE HOLE PL OT	CAPACITY: GALLONS PER MINUTE
	C	PLASTIC OTHER	(to nearest gallon) PUMP HORSE POWER
	Gray Mira 10 120	DEPTH (nearest ft.)	PUMP COLUMN LENGTH (nearest ft.)
	Dint bo 40	E HOHA NA DA	CASING HEIGHT (circle appropriate box and enter casing height)
	Gray Min 140 200		LAND SURFACE (Degres)
t to	CIROLE APPROPRIATE LETTER	S 23 24 26 30 32 36 R 3 S S S S S S S S S S S S S S S S S S	below below foot)
	A WELL WAS ABANDONED AND SEALED WHEN THIS WELL WAS COMPLETED	N 38 39 41 45 47 51	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS
	E ELECTRIC LOG OBTAINED P TEST WELL CONVERTED TO PRODUCTION	SLOT SIZE 123(NEAREST	BUILDING, SEPTIC TANKS, AND/OR N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES
	HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"	OF SCREEN L INCH) from to	(MEASUREMENTS TO WELL)
	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	IF WELL DRILLED WAS	
	DRILLERS IDENT. NO.	FLOWING WELL INSERT FIN BOX 68 68	
題機	DRIEZERS SIGNATURE GALLLY	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER) T. (E.R.O.S.) W.Q.	8 ← 40 →
	(MUST MATCH SIGNATURE OF APPLICATION)	T. (E.R.O.S.) W Q	40
	SILE SUPERVISOR (sign. of driller of journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	1
١	(Caponalole for aftework it different from permittee)	HEALTH	law Ct

Review SE Corner lot

OKIN Pow, D Aprilay 5-27-88 FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST Well Permit No. 110 - 81- 2700 Location of property (road) WEXFOLD CT

Subdivision WATENFOLD II Lot 22 Block Plat

Well Driller GIEASTENDAY Owner KENWIN HOTES Depth of well 200 126 fm
Distance of measuring point (M.P.) above ground 2 H Static water level (S.W.L.) below M.P. 32 F+ I. High rate pumping -- reservoir drawdown Time pump started 11 15 Pumping rate 12 CPM

Total time 20 to reach pumping water level 75 F+ ft. below M.P. STATE PROGRAMME STATE OF THE ST III Recovery pump test data - observations to be recorded every 15 minutes TIME (in 15 WATER LEVEL PUMPING RATE FLOW METER READING CALCULATED FLOW minute inbelow M.P. time to fill 5 (if used) (qallons per tervals gallon bucket minute) 11:45 160' Pumpset 5 sec 12100 3 sec 12:15 6 sec 10 10 10 19 10 10 10 10 10 10

