PERMIT

8-1-84 oppreved 5. Alul

p 3742/

▲ 33321[™]

SEWAGE DISPOSAL SYSTEM

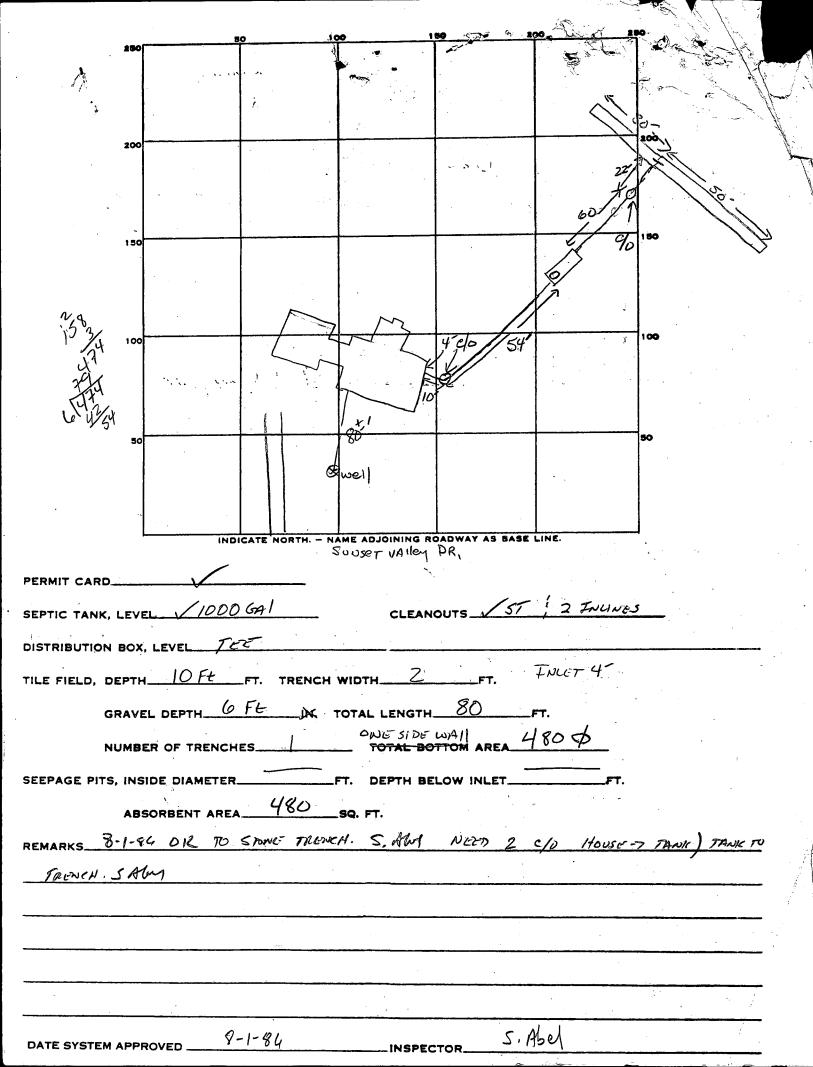
MARYLAND STATE DEPARTMENT OF HEALTH'

HOWARD COUNTY
BUREAU OF ENVIRONMENTAL HEALTH
\$932.2330

D3> 307883

DISTRICT 3rd 2/31/61

	Kenneth Hatfield IS PERMITTED TO INSTALL X ALTER
ADDRESS .	PHONE465-4244
SUBDIVISIO	ON Sunset Valley ROAD 935 Sunset Valley Dr. LOT 4, Section 1
PROPERTY	OWNER <u>Gary S. Schaefer</u> Clark Sperry. Jr
ADDRESS .	·
IF GARBAG	SE GRINDER IS USED INCREASE SEPTIC TANK CAPACITY BY 50% AND ABSORPTION AREA BY 22%.
GARBAGE	GRINDER? YES NOX
SEPTIC TAI	NK CAPACITY 1000 GALLONS NUMBER OF BEDROOMS3 OK to go in 4
RENCHES	- 153 sq. ft. per kedroom. Trench to be 2 feet wide. Inlet 1 feet below original grade. Botoom maximum depth 10 feet below original grade. Effective area begins at 5 feet below original grade. 68 feet of stone below distribution pipe.
CATION	- Start the first trench 115 feet from the front lot line that borders Lot 5, and 13, feet from the right lot line as seen when facing the property from Sunset Valley D.
)TE	Run trench(s) along level ground toward front right side of property. - No trench to exceed 100 feet in length. If more than one trench used, a distribut box is required. Call for inspection of trench(s) before and after gravel is installed. Provide 6% of the state of the stat
	installed. Provide 6" - 8" diameter cleanout and cap to grade or above on septic tank.
PLANS APPE	C. Williams DATE DATE
COVER NO	WORK UNTIL INSPECTED AND APPROVED.
NEITHER TH	E HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM.
NOTE: IF T	TRENCH IS USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH.
	DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER. NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH.
NOTE: AL	L PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.
PERMIT VOI	D AFTER THREE YEARS.
	STALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR
	C OR ABS ACCEPTED, IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.



MSUBDITISION: SUNSET VALLEY I

LOT NUMBER: 4

DRY WELL OR DRY WELL AND TRENCH

		sq. ft./betroom	
	Septic Tank	Minimum Total square Feet	
3 bedroom	1000 gallon		
4 bedroom	1250 gallon		
5 bedroom	1500 gallon		
Inletf	eet below original grad	le.	
Bottom maximum de	epth feet belo	ow original grade.	
Effective area be	egins at feet	below original grade.	
ground and No trench	l leave a 5 foot earth but is to exceed 100 feet i	orbent area, run the trench on level fer between dry well and trench. In length. Trench inlet to be same of stone below distribution pipe.	
4 GARCHOLE	TI	RENCHES 158	
		sq. ft./bedroom	
Trench to be	wide.	4 Pri	
Inlet 5 f	Geet below original grad	he.	
Bottom maximum de	epth 10 feet belo	ow original grade.	
Effective area be	gins atfeet	below original grade.	
feet of	stone below distributi	on pipe.	
(2) If mo (3) Trend (4) Call (5) Provi tank (6) If a	thes to be installed on for inspection of trend de 6"-8" diameter clear and drywell.	l, a distribution box is required. level ground. th before gravel is installed. nout and cap to grade or above on septic ed, increase septic tank capacity by 50%	
LOCATION: ST	ART THE FIRST	TRENCH 115 FT FROM THE	
FRONT LUT LI	NE THAT BONDERS	LOT 5 , AND 135 FT FROM	
THE RIGHT	LOT LINE AS SE	EN WHEN EXCING THE PROPER	7/
		UN TRENCH(S) ALONG LEUG & GROUN	
		e of property,	
		-83 CWilliam	

9/85 9/39 am

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

DISTRICT 3 DOTRICE

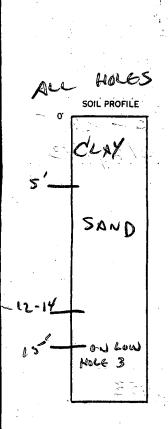
A <u>3332/</u>

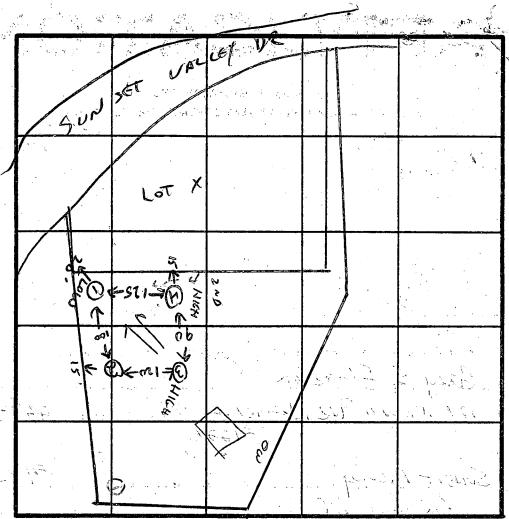
DATE NOV. 21, 16

HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043

TO: THE COUNTY HEALTH OFFICER		•
ELLICOTT CITY, MARYLAND		
	JCT (OR RECONSTRUCT) A SEWAGE DISPOSAL S	YSTEM.
PROPERTY OWNER GARY S. Schaefer		
ADDRESS 108 MELVIN ave, Cato	NSVILLE, Md, PHONE	144-0953
	21228	
PROPERTY LOCATION:	and the second of the second o	
SUBDIVISION - SUNSET Valley	LOT NO	#4-Section 1
SUBDIVISION - SUNSET Valley ROAD AND DESCRIPTION FORSYTHE Rd.		
SIZE OF LOT	TYPE BLOG	-house 4 BEDROOM
SIZE OF LOT	THE BLUG.	(NUMBER OF BEDROOMS)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE	E ONLY UNTIL PUBLIC FACILITIES BECOM	IE AVAILABLE. I FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICAT	ION & NON-REFUNDABLE HINDER ANY CIF	CUMSTANCES. I ALSO AGREE TO COMPLY
	William X Chan Oran	n
WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT.	July & South	c
	/(SIGNATURE OF	
APPROVED BY Cualla	FOR TRENEHES	DATE 11-29-83
REJECTED BY	FOR	DATE
HOLD PENDING FURTHER TESTS		DATE
REASONS FOR REJECTION OR HOLDING	<u></u>	

THIS IS NOT A PERMIT





INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

	TEGT NO		PRE-	WET	TEST -	1" DROP	. '
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
An 20 05		5	10:32	10:34	10:34	10:36	2 M/N
10-29-83	<u> </u>	10	. UISUAL	SAND			
- 1	×	1.5	DAY SA	٧D			
11-29-83	2	VISUAL	SAND SAL	LE AS	Nove 1		
						. 125	
		5	9144	9148	4:48	9:57	9MIN
11-29-63	3	10	9:43	9:45	9:45	9:47	2412
		12	SAND			Ì	
1. 20	A A	5	10:03	10:08	10:06	10:10	7 MIN
11-29-23	4	10	SAND	·			
		14	5000				
, .						3 1	1
			<u> </u>		 		
							1

REMARKS	WILL HAV	I GARBAGE	GRIND	ER	<u> </u>	
TYPE OF SOIL	REDAYE	icew SAND	B-Ecow	5 RED	CLAY L	MAG
'	Curaja				ADPLIC	*.

EH-12-1079

APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

DATE ____

DISTRICT

HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES

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

THE COUNTY HEALTH OFFICER TO: ELLICOTT CITY, MARYLAND I, HEREBY, APPLY FOR THE NECESSARY TEST IN ORDER TO CONSTRUCT (OR RECONSTRUCT) A SEWAGE DISPOSAL SYSTEM PROPERTY LOCATION: 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. REASONS FOR REJECTION OR HOLDING

THIS IS NOT A PERMIT

SOIL PROFILE
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INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

			PRE	WET	TEST -	1" DROP	
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
		, th _e i					
		u u di se					
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	*				:		
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							* * * . • * * * *

REMARKS		 		 			+
TYPE OF SOIL			4: 11 m			1 2	
TIPE OF, SOIL	, 	 •	•				
TESTED BY		 			_ ALSO PRESENT		

EH-12-1079

GUBDIVISION: SUNSET VALLEY

LOT NUMBER: If SECTION ONE

DRY WELL OR DRY WELL AND TRENCH

			•	•		<i>54</i> sq.	ft./bedr	oom	
. ,		4 · 2	Septic Tank	•	Minimum	Total squ	are Feet		•
3 bed	room		1000 gallon						
4 bed	room		1250 gallon						· · · · · · · · · · · · · · · · · · ·
5 bed	room		1500 gallon						
Inlet	4	feet	below origin	al grad	le.				
Botto	m maxi	mum depth	<u>// O</u> fe	et belo	w original g	grade.			•
ya LEffec	tive a	rea begins	at <u>4</u>	_ feet	below origin	nal grade.	•		
NOTE:	grou No 1	ind and lea rench is t	sed to make vea 5 foot ea o exceed 100 ith	rth buf feet i _ feet	fer between n length. T of stone bel	dry well Trench inl	and trenclet to be	h. same	
,				TR	ENCHES		*		
			•		- the sign of the	sq.	ft./bedr	oom	
Trencl	n to b	e	wide.			· · · · · · · · · · · · · · · · · · ·	0		
Inlet			— below origin	al grad	e.				
Botto	n maxi	mum depth	fe	et belo	w original g	grade.		30	
Effect	tive a	rea begins	at	feet	below origin	al grade.	y al) . SP	
	f	eet of sto	ne below dis	tributi	on pipe.			DC 3	,
NOTE:	• •		to exceed 1					b	
	(2) (3)		han one tren to be instal				is require	∌d.	
	(4)	Call for	inspection o	ftrenc	h before gra	vel is in			
	(5)	tank and	"-8" diamete: drywell.	r clean	out and cap	to grade	or above o	on septic	;
	(6 <u>)</u>	If a Garb	age disposal ase absorban				nk capaci	ty by 50%	
LOCAT	ION:	PLACE	THE DRY	WE	LL 160	FTF	ROM T	THE F	201N7
WHE	RE	THE 2	50 FT	LON	6 407	LINE	F 8 7	PHT S	553.76F
_		* .	TNTER						
55	3,70	6 FT L	ONG 60	TL	INE.	NOTE	B THE	§ 55	3.86F7
LONG	5 1	107 L	NG 15	014	THE W	VESTE	RN PO	ART O	_
		× .	0/83 RIE						
······	•	i:							

Pred

APPLICATION

1	2	91	15	7

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

P _____

HOWARD COUNTY HEALTH DEPARTMENT ENVIRONMENTAL HEALTH SERVICES

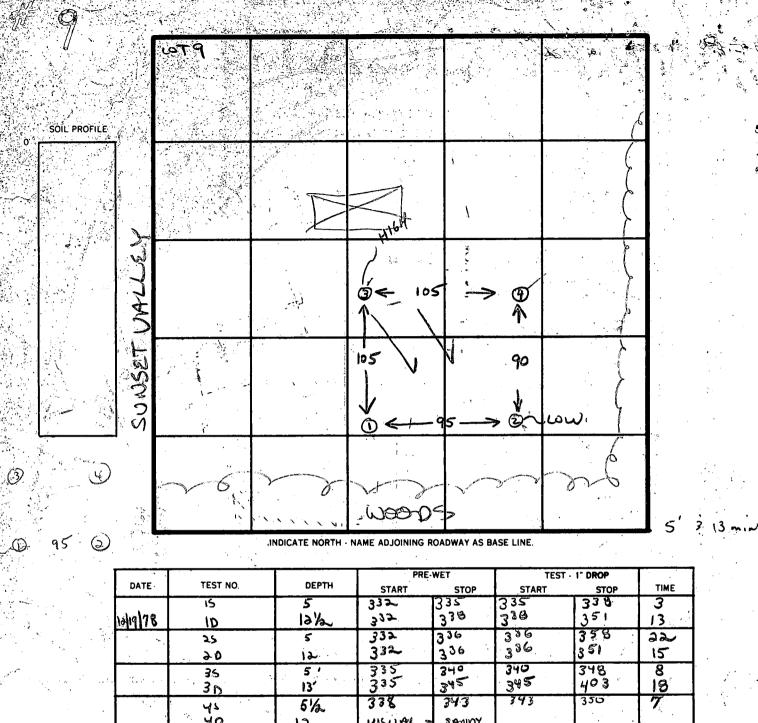
P.O. BOX 476 ELLICOTT, MARYLAND 21043

TELEPHONE: 992-2330

DATE 10/12/78

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	EM.		
PROP	ERTY OWNER VIRGINIA M. GARRATT			
	ADDRESS FORSYTHE ROAD SYKESVILLE, MD. PHONE 30	01-447	2-2262	
PROP	ERTY LOCATION:			
SUBD	VISION SUNSET VALLEY LOT NO.	& ne	2w 4	
	AND DESCRIPTION SUNSET VALLEY DRIVE	Se	<u> </u>	
SIZE	DF LOT TYPE BLDG SINGL	E FAM	ILY RESIDEN	vc E
	THE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEPTABLE ONLY UNTIL PUBLIC I	FACILITIES	BECOME AVAILA	BLE.
	I FULLY UNDERSTAND THE FEE CONNECTED WITH THE FILING OF THIS PERC TEST APPLICAT	TION IS NOT	I-REFUNDABLE UI	NDER
ANY	CIRCUMSTANCES. Bruse D. Brusto			
SIGN	ATURE OF APPLICANT MALE SWILL		-1/6	
APPR	OVED BY RAYMAN STORE FOR MANUELL	DATE	3/10/8	<u> </u>
REJE	CTED BY FOR	DATE		
HOLD	PENDING FURTHER TESTS	DATE		
REAS	ONS FOR REJECTION OR HOLDING 3/10/83 Specs Mulles	· Y		
			·	

THIS IS NOT A PERMIT



1			Luc.	WEI	1631.	I DROP	•
DATE	TEST NO.	DEPTH	START	STOP	START	STOP	TIME
	15	5	332~	332	332	33 8	3
13/19/78	ID	12/2	335	338	3,9	351	13
	2 5	5	332	336	336	358	22
_ : . :	~ 90	12	332	336		351	15
3.2.	35	<i>5 '</i>	335	340	340	348	8
	30	13′	335	345	345	403	18
*	45	51/2	338	343	343	350	7
	49	.12	UISUAL =	SAMOY			
4/5/79	2	IH' DR	Y 3 SAN	204 =	· VISUA	<u>i</u>	
-4~}		421	1 0 00111	, ,		ASSESSED NO.	-
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	er Na		1 / * *		1		,
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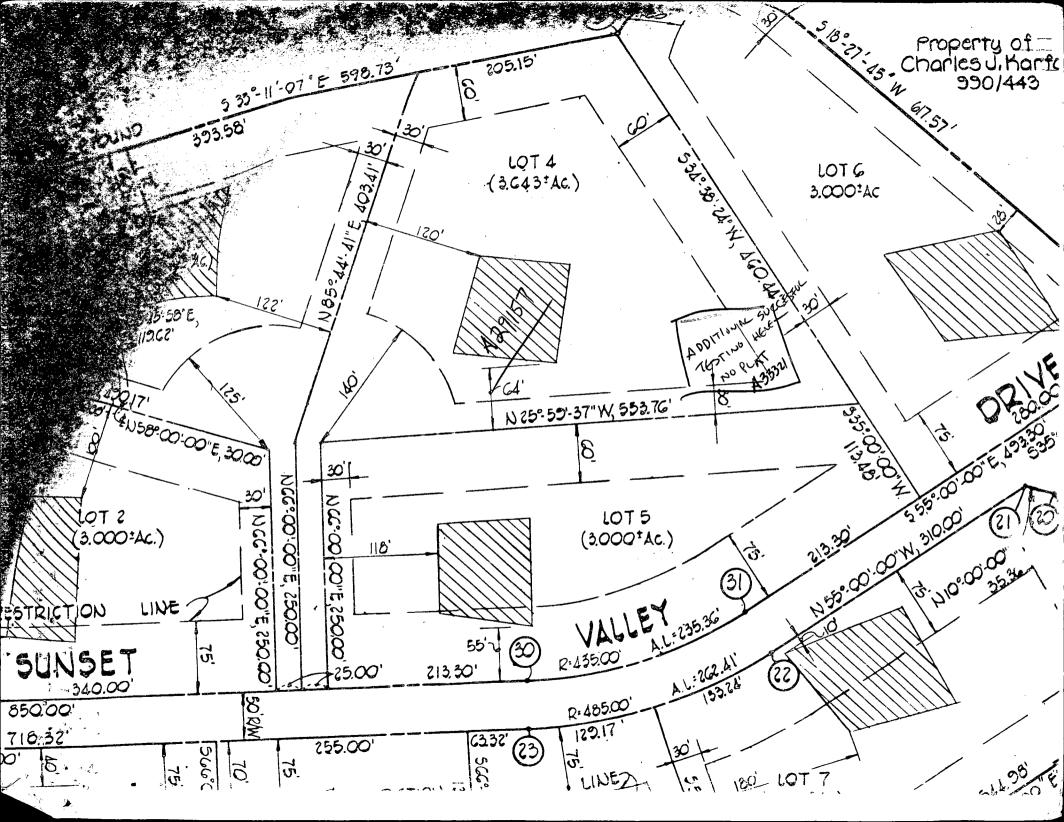
Charles Godlove 799-2962

REMARKS open field-hapmings-tests as stated

TYPE OF SOIL SANDY loan below class -

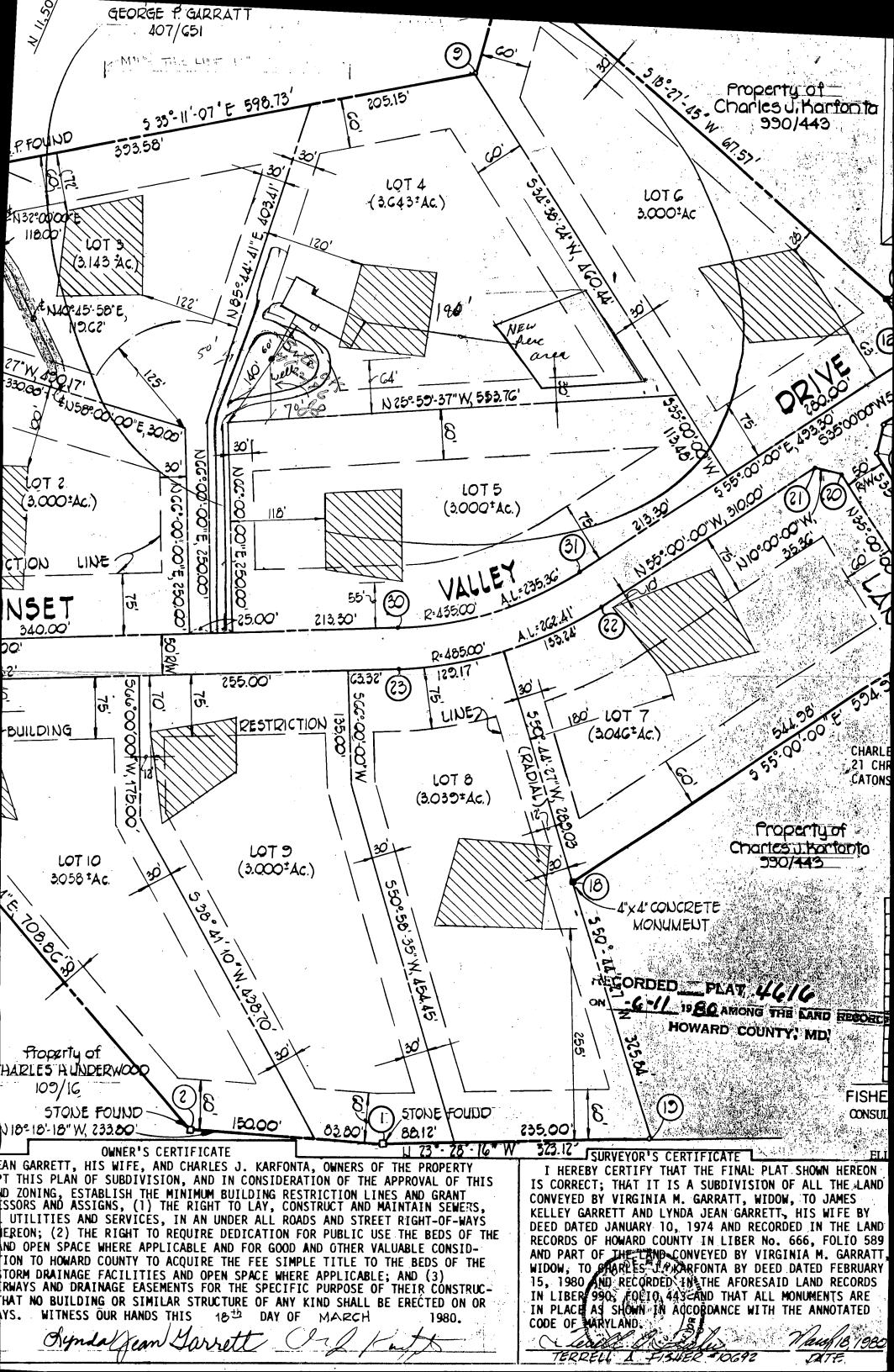
TESTED BY GLK ARA

_ ALSO PRESENT



4--2.

SPECIAL CONDITIONS



c1 00493		IENCE N	- 40	STATE OF MARYLAND	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.	
1 2 3 6 (THIS NUMBER IS TO BE FIN COLS. 3-6 ON ALL CAR	PUNCHE	T.	**************************************	WELL COMPLETION REPORT FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY A 33321	
DATE Received	DATE W		MPLETE		PERMIT NO. FROM "PERMIT TO DRILL WELL"	
8 13	15	302	20	22 7 21 C 26 (TO NEAREST FOOT)	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	
OWNER	LIPR last name	,	·	SPERRY first name		
Joine J	last name		SPERE	5 / LOWN _=	LOT_4	
SUBDIVISIONSMA	<u> </u>		7 17 000	GROUTING RECORD	<u> </u>	
Not required fo		wells		WELL HAS BEEN GROUTED	C 3	
STATE THE KIND OF PENETRATED, THEI				(Circle Appropriate Box) TYPE OF GROUTING MATERIAL	PUMPING TEST	
THICKNESS AND IF	WATER	BEARIN	NG	CEMENT CM BENTONITE CLAY BC HOURS PUMPED (nearest hour)		
DESCRIPTION (Use additional sheets if needed)	FEE		Check if water bearing	45 46	PUMPING RATE (gal. per min.	
additional succession needed,	FHOIN	10	Dearing	NO. OF BAGS 12 NO. OF POUNDS 1900 GALLONS OF WATER 202	to nearest gal.) METHOD USED TO	
				DEPTH OF GROUT SEAL (to nearest foot)	METHOD USED TO MEASURE PUMPING RATE BULL (See Long)	
Top Soil	~ O	2	, it	from	WATER LEVEL (distance from land surface)	
, ,		,		48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING	
Shully	2	50		casing CASING RECORD types	WHEN PUMPING 50	
	(in			/ insert \	22 25	
SAND STOWE	50	55		appropriate STEEL CONCRETE	TYPE OF PUMP USED (for test)	
Jan Jino	2	-		code below PLASTIC OTHER	A air P piston T turbine	
Micka		~~			other	
1	55	75		MAIN Nominal diameter Total depth CASING top (main) casing of main casing	C centrifugal R rotary (describe below)	
Savel Stowe	75	80	مسا	TYPE (nearest inch) (nearest foot)	J jet S submersible	
JANY Trons	ノン	0 =		1 19 4 6 69 1	27 Jet 27 27	
- 'A & & A				60 61 63 64 66 70		
Micka	80	140		E OTHER CASING (if used) A diameter depth (feet)	DIMO INSTALLED	
ľ				C inch from to	PUMP INSTALLED	
				CAS	DRILLER WILL INSTALL PUMP YES (NO) (CIRCLE) (YES or NO)	
				Į į į	IF DRILLER INSTALLS PUMP, THIS SECTION MUST BE COMPLETED FOR ALL WELLS	
				screen type SCREEN RECORD	EXCEPT HOME USE	
				or open hole	TYPE OF PUMP INSTALLED PLACE (A,C,J,P,R,S,T,O)	
				I INSERT STEEL BRASS OPEN	IN BOX-SEE ABOVE: 29	
				(appropriate code BRONZE HOLE	CAPACITY: GALLONS PER MINUTE	
				below PLASTIC OTHER	(to nearest gallon) 31 35	
				C 2	PUMP HORSE POWER 37 41	
	,			1 2	PUMP COLUMN LENGTH (nearest ft.)	
,		,	1	DEPTH (nearest ft.)	(nearest ft.) CASING HEIGHT (circle appropriate box	
				$\begin{bmatrix} E & 1 & 3 & 5 & 1 \\ C & \frac{8}{3} & 9 & 11 & 15 & 17 & 21 \\ \end{bmatrix}$	and enter casing height)	
				H ₂	LAND SURFACE	
				S 23 24 26 30 32 36	below (nearest foot)	
CIRCLE APPRO					49 50 51	
A WHEN THIS WELL W				E 38 39 41 45 47 51	LOCATION OF WELL ON LOT SHOW PERMANENT STRUCTURE SUCH AS	
E ELECTRIC LOG OBTAINED				SLOT SIZE 1 2 3	BUILDING, SEPTIC TANKS, AND/OR	
P TEST WELL CONVERTED TO PRODUCTION			CTION	DIAMETER (NEAREST INCH)	N LANDMARKS AND INDICATE NOT LESS THAN TWO DISTANCES	
WELL I HEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN				56 60 (NOT)	(MEASUREMENTS TO WELL)	
ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION" AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT, AND THAT THE INFORMATION			ED IN THE	GRAVEL PACK		
PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.				IF WELL DRILLED WAS FLOWING WELL INSERT	D	
223			· · · · · · · · · · · · · · · · · · ·	F IN BOX 68 68	· oad	
DRILLERS IDENT. NO.			. ,	OEP USE ONLY	1 100 well 19	
DRILLERS SIGNATURE			· · · · · · · · · · · · · · · · · · ·	(NOT TO BE FILLED IN BY DRILLER) T (E.R.O.S.) W.Q	100 JOC - 1	
(MUST MATCH SIGNATURE ON APPLICATION)			ION)	74 75 76	line 1 32° 1	
Match E. Mayer				70 72		
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)			eyman ermittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR		
			/******	•	i	

Page of Date MAY 2 1986

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

Well Permit	No. HO - 81-1435 property (road) Surget Surget Valley	Vallen I) ₂ .		
-abdivision	Surset Valley	Lot 4 Bloc	ck Plat	Sec.	
Well Drille	I Rolph Mound	Owner Spen	rn clas	k —	
Dist	h of well LOFT ance of measuring point (M.P.) a ic water level (S.W.L.) below M	above ground 2 *	8		
f. High r	ate pumping reservoir drawdow	wn			
	pump started 11,30 time 15 april to reach pumping		cate Q <i>L.O. p</i> o f ft. bel	ow M.P.	

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

TIME (in 15	WATER LEVEL	PUMPING RATE	FLOW METER READING	CALCULATED FLOW
minute in-	below M.P.	time to fill 🎉	(if used)	(gallons per
tervals		gallon bucket		minute)
12.43	50 fr	7 sec	<i>-</i>	9 G.P.M
12:00	50	7		9
12:13	50	7 .		9
12:30	50 17	7 Rec		9 6 80
12:45	50	7		7
1:00	50	2	· •	9
1,15	51 17	7 000		9 G.P.m
1:30	50	7		9
1:45	50	7		9
2,00	50 tt	7 eec		9 G.P.M
2:15	5 8	7		9
2:30	50 .	7		9
2:45	50 ft	n		i
		200	•	9 G.P.M
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69, 1+ soxopen 17 bags

HO 1435

7.30 Am - gesut

Page	c	of		
Date	au		191	U
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Review H 9 688

FIELD DATA SHEET HOWARD COUNTY WELL YIELD TEST

•		HOWARD COUNTY WELL	J TIEDD IESI		
Well Permit No. HO - f/- 1435 Will Permit No. HO - f/- 1435 Will Permit No. HO - f/- 1435					
abdivision	operty (road)	funcit Valle	ey Neuve		
Well Driller	agel val	Lot, Owner	er Clark Plat	Sec	
			= Laurengen	<u>'</u>	
Depth o					
Distance	e of measuring po	oint (M.P.) above gr	round 2		
Static :	water level (S.W.	.L.) below M.P.	50'		
: High rate	pumping reser			, a	
Time pumi	started // 2	£5	Pumping rate 9	-	
IOLAI CII	ne <u>G U</u> to	reach pumping water	r level 50 ft. l	pelow M.P.	
II. Recovery p	oump test data -	observations to be	recorded every 15 minut	+ec	
TIME (in 15	WATER LEVEL	PUMPING RATE		<u></u>	
minute in-	below M.P.	time to fill	FLOW METER READING (if used)	CALCULATED FLOW (gallons per	
tervals		gallon bucket	(11 useu)	minute)	
12:15	(5/2)			(11400)	
12.0		1 Dec		- 7	
]		
			2		
		1			

